CLINICAL LABORATORY PERMIT

pennsylvania
DEPARTMENT OF HEALTH

Pursuant to the act of September 26, 1951, P.L. 1539 as amended, a Permit to operate a Clinical Laboratory is hereby granted to:

Laboratory Identification Number: 00168A

Name and Director of Laboratory:

UPMC PRESBYTERIAN ANATOMIC PATH
RAJIV DHIR, M.D.
200 LOTHROP ST
ROOM A608 ANATOMIC PATH
PITTSBURGH, PA 15213

Owner:

UPMC PRESBYTERIAN SHADYSIDE

ISSUE DATE: August 15, 2026

DATE EXPIRES: August 15, 2027

AUTHORIZED CATEGORIES/TESTS:
EXFOLIATIVE CYTOLOGY
TISSUE PATHOLOGY

Debra L. Bogen MD

Debra L. Bogen, MD, FAAP
Secretary of Health

DISPLAY THIS CERTIFICATE PROMINENTLY
This permit is subject to revocation, suspension, or limitation for violation of the Act or the Regulations promulgated thereunder.

UPMC PRESBYTERIAN ANATOMIC PATH
RAJIV DHIR, M.D.
UPMC CLINICAL LABORATORY BLDG
3477 EULER WAY, ATTN: QA, RM 2044
PITTSBURGH, PA 15213