

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: 32895

Name and Director of Laboratory:

**PATHLINE EMERGE
ZACH LIU, M.D.
535 EAST CRESCENT AVENUE
RAMSEY, NJ 07446**

AUTHORIZED CATEGORIES/TESTS:

EXFOLIATIVE CYTOLOGY

Non-Gynecological

TISSUE PATHOLOGY

Cytogenetics

General Histology

VIROLOGY

Owner:

NEOGENOMICS LABORATORIES, INC

ISSUE DATE: August 15, 2025

DATE EXPIRES: August 15, 2026

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.

**PATHLINE EMERGE
ZACH LIU, M.D.
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