

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: 26629A

Name and Director of Laboratory:

**ASCEND CLINICAL, LLC
RUSSELL L KERSCHMANN, M.D.
1400 INDUSTRIAL WAY
REDWOOD CITY, CA 94063**

AUTHORIZED CATEGORIES/TESTS:

**BACTERIOLOGY
CLINICAL CHEMISTRY
HEMATOLOGY
NON-SYPHILIS SEROLOGY**

Owner:

SATELLITE DIALYSIS CENTERS INC

ISSUE DATE: August 15, 2020

DATE EXPIRES: August 15, 2021

**Rachel L. Levine, MD
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.