

# 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: 34304**

**Name and Director of Laboratory:**

**AVERO DIAGNOSTICS  
DAVID J HULL, M.D.  
6221 RIVERSIDE DRIVE SUITE 119  
IRVING, TX 75039**

**AUTHORIZED CATEGORIES/TESTS:**

**BACTERIOLOGY  
CLINICAL CHEMISTRY  
NON-SYPHILIS SEROLOGY  
TISSUE PATHOLOGY  
VIROLOGY**

**Owner:**

**MATTISON PATHOLOGY LLP**

**ISSUE DATE: August 15, 2022**

**DATE EXPIRES: August 15, 2023**

**Denise Johnson MD, FACOG, FACHE  
Acting 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.**

**AVERO DIAGNOSTICS  
DAVID J HULL, M.D.  
6221 RIVERSIDE DRIVE SUITE 119  
IRVING, TX 75039**