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:

NEOGENOMICS LABORATORIES, INC
ZACH LIU, M.D.
535 EAST CRESCENT AVENUE
RAMSEY, NJ 07446

Owner:

NEOGENOMICS LABORATORIES, INC

ISSUE DATE: August 15, 2026

DATE EXPIRES: August 15, 2027

AUTHORIZED CATEGORIES/TESTS:

EXFOLIATIVE CYTOLOGY
Non-Gynecological
TISSUE PATHOLOGY
Cytogenetics
General Histology
VIROLOGY

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.

NEOGENOMICS LABORATORIES, INC
ZACH LIU, M.D.
535 EAST CRESCENT AVENUE
RAMSEY, NJ 07446