

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: 28519A

AUTHORIZED CATEGORIES/TESTS:

NON-SYPHILIS SEROLOGY

Name and Director of Laboratory:

**K STATE RABIES LABORATORY
BRETT M SRAMEK, M.D.
MANHATTAN/K STATE INNOVATIONS CENTER
2005 RESEARCH PARK CIRCLE
MANHATTAN, KS 66502**

Owner:

STATE OF KANSAS BOARD OF REGENTS

ISSUE DATE: August 15, 2025

DATE EXPIRES: August 15, 2026

Debra L. Bogen MD

**Debra L. Bogen, MD, FAAP
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.

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