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, 2026

DATE EXPIRES: August 15, 2027

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.

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