

# 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: 31578**

**Name and Director of Laboratory:**

**HELOMICS CORPORATION  
ARLETTE H UIHLEIN, M.D.  
LAWRENCEVILLE TECHNOLOGY CTR  
91 43RD STREET  
PITTSBURGH, PA 15201**

**Owner:**

**PREDICTIVE ONCOLOGY, INC.**

**ISSUE DATE: August 15, 2025**

**DATE EXPIRES: August 15, 2026**

**AUTHORIZED CATEGORIES/TESTS:**

**CLINICAL CHEMISTRY  
NON-SYPHILIS SEROLOGY  
TISSUE PATHOLOGY**  
Cytogenetics  
General Histology

*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.**

**HELOMICS CORPORATION  
ARLETTE H UIHLEIN, M.D.  
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