

# 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: 32240**

**Name and Director of Laboratory:**

**DOMINION DIAGNOSTICS, LLC  
CHARLENE JOHNSON-TUFTS  
211 CIRCUIT DRIVE  
NORTH KINGSTOWN, RI 02852**

**AUTHORIZED CATEGORIES/TESTS:**

**BACTERIOLOGY  
CLINICAL CHEMISTRY  
TOXICOLOGY - DRUGS URINE CONFIRMATORY  
TOXICOLOGY - DRUGS URINE SCREENING**

**Owner:**

**DD HEALTHCARE SERVICES HOLDINGS, LLC**

**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.**

**DOMINION DIAGNOSTICS, LLC  
CHARLENE JOHNSON-TUFTS  
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NORTH KINGSTOWN, RI 02852**