

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: 33861

Name and Director of Laboratory:

NY BLOOD CENTER, INC. BRUCE S. SACHAIS, M.D. D/B/A BLOOD BANK OF DELMARVA 161 WILMINGTON-WEST CHESTER PIKE, SUITE 2300 CHADDSFORD, PA 19317

Owner:

NEW YORK BLOOD CENTER, INC.

ISSUE DATE: August 15, 2021

DATE EXPIRES: August 15, 2022

Alusin V. Beam

Allison V. Beam 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.

AUTHORIZED CATEGORIES/TESTS: HEMATOLOGY Hemoglobin [CLIA Waived] NY BLOOD CENTER, INC. BRUCE S. SACHAIS, M.D. 100 HYGEIA DRIVE NEWARK, DE 19713