

# 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: 33848

AUTHORIZED CATEGORIES/TESTS:

BACTERIOLOGY

Name and Director of Laboratory:

MYCOBACTERIA/NOCARDIA LAB, UTHSCT  
RICHARD J. WALLACE JR.  
11937 U.S. HWY. 271  
TYLER, TX 75708

Owner:

STATE OF TEXAS

ISSUE DATE: August 15, 2023

DATE EXPIRES: August 15, 2024

*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.

**MYCOBACTERIA/NOCARDIA LAB, UTHSCT**  
**RICHARD J. WALLACE JR.**  
**11937 U.S. HWY. 271**  
**TYLER, TX 75708**