

# State of Tennessee



License No. 000002285

## DEPARTMENT OF HEALTH

*This Is To Certify, that a license is hereby granted by the Tennessee Department of Health to:*

TENNESSEE DEPARTMENT OF HEALTH, LABORATORY SERVICES

*Medical Laboratory Director* KARA J. LEVINSON, PHD

*Ownership Type* STATE

*To conduct and maintain a Medical Laboratory in the Specialty (ies) of:*

SYPHILIS SEROLOGY  
ROUTINE CHEMISTRY  
TOXICOLOGY  
MYCOBACTERIOLOGY  
GENERAL IMMUNOLOGY

ENDOCRINOLOGY  
MOLECULAR DIAGNOSTICS  
DIAGNOSTIC IMMUNOLOGY  
BACTERIOLOGY  
MYCOLOGY

PARASITOLOGY  
VIROLOGY  
CLINICAL CHEMISTRY  
MICROBIOLOGY

*On the premises located at* 630 HART LANE, NASHVILLE, TN 37243-1404

*County of* DAVIDSON

*This license shall expire* MARCH 31 2025

*This license shall be displayed in a conspicuous place where it may be viewed by the public. The holder of this license is subject to the provisions of T.C.A. Section 68-29-111 and regulations thereto. This license shall not be assignable or transferable and shall be subject to revocation at any time by the State Department of Health for failure to comply with the laws of the State of Tennessee or the rules and regulations of the State Department of Health issued thereunder.*

*In Witness Whereof, we have hereunto set our hand and seal of the State*

*this* 11TH *day of* APRIL 2024

*By* Jennifer L. Putnam, Esq  
ASSISTANT COMMISSIONER, HEALTH LICENSURE & REGULATION

*By* Jennifer Dilscomb MT (ASCP)  
CHAIRMAN, MEDICAL LABORATORY BOARD

*By* [Signature]  
COMMISSIONER, DEPARTMENT OF HEALTH

