

# 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:** 27174A

**Name and Director of Laboratory:**

**BAYLOR MIRACA GENETICS LAB, LLC  
CHRISTINE M. ENG  
2450 HOLCOMBE BLVD  
HOUSTON, TX 77021**

**AUTHORIZED CATEGORIES/TESTS:**

**CLINICAL CHEMISTRY  
HEMATOLOGY  
TISSUE PATHOLOGY**  
Cytogenetics

**Owner:**

**BAYLOR MIRACA GENETICS LAB, 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.**

**BAYLOR MIRACA GENETICS LAB, LLC**  
**CHRISTINE M. ENG**  
**2450 HOLCOMBE BLVD, STE 2210**  
**HOUSTON, TX 77021**