

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: 31170

AUTHORIZED CATEGORIES/TESTS:

Name and Director of Laboratory:

CLINICAL CHEMISTRY
VIROLOGY

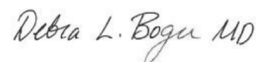
BIODESIX INC., LABORATORY
DONALD J. CHAFFIN, M.D.
919 W DILLON ROAD
LOUISVILLE, CO 80027

Owner:

BIODESIX INC

ISSUE DATE: August 15, 2026

DATE EXPIRES: August 15, 2027



Debra L. Bogen, MD, FAAP
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.

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