

LABORATORY PERSONNEL REPORT Out-of-State Laboratory

Laboratory name		CLIA number	
Laboratory address (number, street)	City	State	ZIP code
Contact person		Telephone number ()	

INSTRUCTIONS: List laboratory director(s), all personnel performing tests, and all personnel responsible for test performance. Mark "M" for moderate complexity tests and "H" for high complexity tests.

PERSONNEL NAMES			LICENSE OR CERTIFICATE		DIRECTOR AND/OR PERSONNEL TESTING IN THE FOLLOWING																		
					DIRECTOR	IMMUNOCHEMISTRY	IMMUNOHEMATOLOGY	CHEMISTRY	HEMATOLOGY	IMMUNOHISTOCHEMISTRY	IMMUNOPATHOLOGY	CYTOTOXICITY	CYTODIFFERENTIAL	CYTOSPINOLOGY	CYTODIFFERENTIAL	HISTOCHEMISTRY	IMMUNOPATHOLOGY	CYTODIFFERENTIAL	CYTODIFFERENTIAL	CYTODIFFERENTIAL	CYTODIFFERENTIAL		
Last Name	First Name	M.I.	Type*	Number	R	M	H	M	H	M	H	M	H	M	H	M	H	M	H	M	H	M	H

*Include copy of license or certificate for each person.

THIS FORM MAY BE PHOTOCOPIED