

## 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																			
			D I R E C T O R	M I C R O	I M M U N O				C H E M I S T R Y				P A T H O L O G Y				O R A L P A T H O L O G Y	H I S T O R Y	C Y T O G E N E T I C			
					M		H		M		H		M		H							
					R	M	H	M	H	M	H	M	H	M	H	M				H		
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	

\*Include copy of license or certificate for each person.

THIS FORM MAY BE PHOTOCOPIED