

The New York State Department of Health (DOH) regulates many areas of public health. The DOH Division of Laboratory Quality Certification (DLQC) enforces New York State Public Health Laws that define certain regulatory requirements. These requirements are intended to provide New York State Residents with safe, high quality laboratory testing, blood banking, and tissue banking.

DLQC does not investigate all complaints in these areas and does not investigate complaints in other areas. DLQC investigates complaints related to regulatory requirements in the following areas:

- Clinical testing – Including routine blood work, genetic testing, and most workplace drug testing.
- Environmental testing – Including most tests for drinking water safety, beach and lake contamination testing, and asbestos testing.
- Blood banking – Including blood collection and transfusion.
- Tissue banking – Including tissue donation or transplantation; including tissue used for fertility procedures.
- Medical waste – Including waste generated by hospitals and nursing homes.
- Facilities that utilize living animals.

DLQC does not review or investigate complaints in the following areas:

- Problems outside the laboratory at a hospital, clinic, radiology or medical imaging centers, surgical center, or dialysis center. Please click the following link to report a complaint in these areas to the [Department of Health](#).
- Billing issues related to health care, including consumer health care rights, and fraud. Please click the following link to report a complaint in these areas to the [Attorney General's Office Health Care Bureau](#).
- Problems with insurance, including coverage, deductibles, and co-pays. Please click the following link to report a complaint in these areas to the [Department of Financial Services](#).
- HIPAA privacy violations. Please click the following link to report a complaint in this area to the U.S. Department of Health and Human Services (HHS) [Office for Civil Rights](#) (OCR).
- Misconduct by licensed physicians, related only to the care provided by a physician in private practice. Please click the following link to report a complaint in this area to the [Office of Professional Medical Conduct](#) or call 1-800-663-6114.
- Misconduct by other medical professionals: <https://www.op.nysed.gov/enforcement/discipline-complaint-form>.
- Gestational surrogacy: <https://health.ny.gov/community/pregnancy/surrogacy/contact.htm>.
- Customer service.

Anyone can file a complaint. All complaints are confidential and can be made anonymously. You can file a complaint in several ways:

1. The best way to file your complaint is to complete the form below and send it by email to LIU@health.ny.gov.
2. You may complete the form below and mail it to the following:

<u>US Postal Service:</u>	<u>UPS, FedEx, Courier:</u>
Laboratory Investigations Unit	Laboratory Investigations Unit
Biggs Laboratory	Biggs Laboratory
Wadsworth Center	Wadsworth Center
NYS Department of Health	NYS Department of Health
Empire State Plaza	Dock J - P1 Level
Albany, NY 12237	Empire State Plaza
	Albany, NY 12237
3. You may call toll-free 1-800-682-6056 and discuss your complaint with DLQC staff.
4. You may fax the complaint form: 518-485-2755.

Please provide your contact information on the complaint form so that we may contact you if necessary. We will keep your name confidential, but we may need to share details of your complaint with other parties as part of an investigation. For example, we may need to share details of your complaint with the facility that is the subject of the complaint. These details may make it easier to identify you.

1. Your Preferred Spoken Language: _____
2. Your First Name: _____
3. Your Last Name: _____
4. Your Address: _____
5. Your Phone Number: _____
6. Your Email Address: _____
7. How are you related to the patient? _____
8. Do you wish to remain anonymous? Yes No
9. When did the incident happen? Date of incident: _____ Time of incident: _____
10. Where did the incident happen?
Facility Name: _____
Facility Address: _____
11. Have you filed a complaint with the facility? Yes No
12. Are you filing this complaint on behalf of someone else? Yes No
13. Please provide a detailed description of the complaint below. Please limit your complaint to 1000 words. Please do not include specific health information.

DLQC staff will review your complaint and determine whether we have the authority to investigate it. If we do not have the necessary authority, we may refer you to the appropriate agency.

PLEASE DO NOT ATTACH ANY ADDITIONAL INFORMATION AT THIS TIME.