INSTRUCTIONS FOR COMPLETING
LABORATORY PERSONNEL EVALUATION ROSTER

Per the Centers for Medicare and Medicaid Services (CMS) and College of American Pathologists (CAP), this form must be completed by all laboratories accredited (or applying for accreditation) by the College of American Pathologists.

- **ALL** laboratory employees, including MD, DO, PhD, etc., fulfilling one or more of the CLIA defined roles listed on the roster must be included on the form AND
- **ALL** testing personnel performing nonwaived testing, including POC, PPT, Respiratory, Radiology personnel must be listed.

Copy this form as many times as needed. Indicate the page number and total number of pages in the upper right corner regardless of the number of pages submitted.

1. **Total Personnel**: Count all staff including non laboratory, part time, full time and staff pathologists

2. Columns A through E must be completed for all personnel and the Laboratory Director. The laboratory director must sign the attestation in Section F at the bottom.

3. **Highest Academic Degree** (column A) – Qualification must be listed at the highest level of academic achievement (eg, MD, PhD, MS).

4. **Position(s) Held** (column B) – Position titles listed are CLIA terms. The job title within your institution may be different. Include all CLIA titles that an individual fulfills (a person may fulfill more than 1 CLIA title, e.g. Laboratory Director and Technical Supervisor, Technical or General Supervisor and Testing Personnel).

5. **Complexity of testing performed** (column C) – Indicate the highest level of testing performed by an individual. If an employee performs both moderate and high complexity testing, enter “H” for high-complexity testing.

6. **Document Verification** (column D) – The Laboratory Director is responsible for ensuring the following documents are current and present in the personnel file (electronic or hardcopy on site).

   - Proof of education must be in the form of a diploma of the highest level of education obtained or the course transcripts that document these degrees. CMS does not consider licenses and certifications (ie medical assistant, registered nurse, ASCP Certification) acceptable documentation of the highest level of education. The only EXCEPTION is for states that require licensing of LABORATORY personnel. A license alone is sufficient for these laboratory personnel only.

   - For laboratories subject to US regulations (domestic and international CLIA certified laboratories), training and qualifications of personnel educated outside the US must be evaluated by a foreign credentialing agency is required. Third-party education equivalency assessment from a NACES (National Association of Credential Evaluation Services - [http://www.naces.org](http://www.naces.org)) accredited organization or the AICE (Association of International Credential Evaluators - [http://www.aice-eval.org](http://www.aice-eval.org)) is acceptable.
Diploma – A copy of the diploma is used to document the highest degree obtained. If
the diploma is not in a science related field or does not specify the field, (such as
Nursing, Clinical lab science, Medical Technology, Chemistry, Biology, Physical
Science) then transcripts are required.

Transcript - Transcripts are used to document the degree obtained. Review to ensure
classes meet CLIA requirements by test complexity. See CAP Personnel Requirements
by Testing Complexity (included)

License – If the laboratory is located in a state that requires licensure for laboratory
personnel, a copy of the current license is adequate proof and must be maintained in the
personnel file or available electronically. Degree or transcript is not required.

Copies of licenses for non-laboratory personnel, including nurses, respiratory
therapists, medical assistants, etc. are not acceptable documentation alone per CMS,
but must still be in the personnel file or available electronically.

7. Date of Hire (column E)

8. Director Signature (section F): The laboratory director must sign and date the last
page, attesting that the individuals listed meet the personnel qualifications required for
the testing they perform. Unsigned forms will not be accepted.

If any required documents are missing from the files at the time of onsite inspection,
GEN.54400 and TLC.11300 will be cited.

ACCEPTABLE examples of personnel documentation include:
1. Laboratory personnel
   • License alone (if required by state), e.g. Laboratory staff, MD, DO
2. Non-laboratory personnel and non-licensed laboratory personnel
   • Diploma, indicating degree in Medical Technology, Clinical Laboratory
     Science, Nursing, Radiology, Respiratory Therapy or a chemical, biologic or
     physical science OR
   • Transcript, with documented evaluation of education meeting CLIA
     requirements by complexity
3. Non-US trained personnel (laboratories subject to US regulations)
   • Diploma or transcript with documented evaluation of education meeting CLIA
     requirements by complexity AND evaluation of education equivalency by a
     foreign credentialing agency

INSUFFICIENT examples of personnel documentation include:
1. Copy of license for non-laboratory personnel (e.g. nursing, radiology, respiratory
   therapy)
2. Copy of certification for personnel (e.g. ASCP, CLS, RRT, CRT)
3. Primary source verification of education (except VA and DOD labs)
4. Diploma/transcript for non-US trained personnel without evaluation of education
   equivalency by a foreign credentialing agency (laboratories subject to US
   regulations)
5. 3rd party verification of education
6. Diploma stating Bachelor of Arts or Bachelor of Science, without field of study
Columns for Florida (U.S.A) Laboratories ONLY

1. **Shift (column G)** – indicate the shift the employee regularly works.
   - 1 = day shift
   - 2 = evening shift
   - 3 = night shift

2. **Hours per Week (column H)** - Indicate the number of hours each employee works per week.

3. **License # (column I)** - Enter the individual’s license number and indicate the level of the license (technologist, technician, etc).

4. **Expiration Date (column J)** - Indicate the expiration date of the employee’s license.

5. **Licensed Specialty (column K)** - Licensed Specialties – Indicate all the specialties for which the employee is licensed using the following key:
   - 1 = Microbiology
   - 2 = Serology
   - 3 = Chemistry
   - 4 = Hematology
   - 5 = Immunohematology
   - 6 = Histology
   - 7 = Cytology
   - 8 = Radiobioassay
   - 9 = Blood Gas

Refer to cap.org for FAQ’s related to personnel requirements
# LABORATORY PERSONNEL EVALUATION ROSTER

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>A) Highest Academic Degree</th>
<th>B) Position(s) Held</th>
<th>C) Complexity</th>
<th>D) Document Verification</th>
<th>E) Date of Hire Month/Year</th>
<th>G) H) Shift</th>
<th>I) License # &amp; Level (technologist, technician, etc)</th>
<th>J) Exp Date</th>
<th>K) Licensed Specialties</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Laboratory Director</td>
<td>Medical Director</td>
<td>Moderate</td>
<td>Diploma</td>
<td>01/01/2014</td>
<td>2</td>
<td>Technician</td>
<td>06/01/2015</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Consulting</td>
<td>Consulting</td>
<td></td>
<td>Transcript</td>
<td></td>
<td>2</td>
<td>Professional Specialist</td>
<td>09/01/2015</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Consulting</td>
<td>Supervising</td>
<td></td>
<td>Diploma</td>
<td>01/01/2014</td>
<td>2</td>
<td>Medical Coordinator</td>
<td>12/01/2015</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Consulting</td>
<td>Supervising</td>
<td></td>
<td>Transcript</td>
<td></td>
<td>2</td>
<td>Pharmacy Specialist</td>
<td>03/01/2015</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Consulting</td>
<td>Consulting</td>
<td></td>
<td>Diploma</td>
<td>01/01/2014</td>
<td>2</td>
<td>Medical Coordinator</td>
<td>03/01/2016</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Consulting</td>
<td>Consulting</td>
<td></td>
<td>Transcript</td>
<td></td>
<td>2</td>
<td>Pharmacy Specialist</td>
<td>03/01/2016</td>
<td></td>
</tr>
</tbody>
</table>

I certify that all the individuals listed above qualify to function in the position indicated, according to the personnel requirements set forth by the College of American Pathologists. I also certify that educational records (electronic or hard-copy) for all individuals listed will be physically available for review by the CAP inspection team.

Laboratory Director Name (print or type): ____________________  Signature: ____________________  Date: ____________  
(Director name on CLIA certificate)

* License is acceptable for Laboratory Personnel ONLY – based on state requirements  
April 2014
<table>
<thead>
<tr>
<th>Waived Testing</th>
<th>Moderate Complexity Testing</th>
<th>High Complexity Testing</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Qualified as a director for moderate or high complexity testing; OR 2. MD, DO, or DPM with a current medical license¹</td>
<td>1. Qualified as a Director for high complexity testing; OR 2. MD, DO or DPM with a current medical license¹ and laboratory training/experience consisting of: a. 1 year experience supervising non-waived testing; OR b. 20 CME credit hours in laboratory practice commensurate with director responsibilities; OR c. Equivalent laboratory training (20 CME's) obtained during medical residency; OR 3. Doctoral degree in chemical, physical, biological or clinical laboratory science with: a. Certification by a board approved by HHS; OR b. 1 year experience supervising non-waived testing</td>
<td>1. MD or DO with a current medical license¹ and board-certification in Anatomic and/or Clinical Pathology or possess equivalent qualifications as those required for certification; OR 2. MD, DO or DPM with a current medical license¹ and laboratory training/experience consisting of the following: a. 1 year laboratory training during medical residency; OR b. 2 years experience supervising high-complexity testing; OR 3. Doctoral degree in chemical, physical, biological or clinical laboratory sciences with certification by a board approved by HHS</td>
</tr>
</tbody>
</table>

**Exception** - If annual test volume exceeds 500,000, the CAP requires the laboratory director to meet the qualifications of Director for high complexity testing.

<table>
<thead>
<tr>
<th>Clinical Consultant</th>
<th>Technical Consultant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not Applicable</td>
<td>A Clinical Consultant is only required if the director is not a physician or a board certified doctoral scientist. 1. MD, DO, or DPM with a current medical license¹; OR 2. Doctoral degree in chemical, physical, biological or clinical laboratory sciences with certification by a board approved by HHS.</td>
</tr>
<tr>
<td>A Technical Consultant is only required if the director is not qualified as a high complexity director. 1. MD, DO, or DPM with a current medical license¹ with at least 1 year of training and/or experience in nonwaived testing in the designated specialty/subspecialty area; OR 2. Doctoral or Masters degree in a chemical, physical, biological or clinical laboratory science with at least 1 year of training and/or experience in nonwaived testing in the designated specialty/subspecialty area; OR 3. Bachelor's degree in a chemical, physical, biological or clinical laboratory science or medical technology with at least 2 years of experience in nonwaived testing in the designated specialty/subspecialty area</td>
<td>Not Applicable</td>
</tr>
</tbody>
</table>

*The Director may fulfill multiple roles. While CLIA may allow for non-physician or non-doctoral degreeed individuals to direct Waived and Moderate Complexity laboratories, CAP does not.

¹ The license to practice medicine must be in the jurisdiction where the laboratory is located (if required). Military and VA personnel may be licensed in any US State.
**CAP Personnel Requirements by Testing Complexity**

**Technical Supervisor**

<table>
<thead>
<tr>
<th>Not Applicable</th>
<th>Not Applicable</th>
</tr>
</thead>
</table>

1. MD or DO with a current medical license¹ and board-certification in Anatomic and Clinical Pathology or possess qualifications equivalent to those required for certification; OR
2. MD or DO with a current medical license¹ and board-certification in Anatomic or Clinical Pathology or possess qualifications equivalent to those required for certification.
   - Technical supervisors overseeing anatomic pathology services must have board-certification in anatomic pathology or equivalent qualifications.
   - Technical supervisors overseeing a clinical pathology specialty must have board-certification in clinical pathology or equivalent qualifications; OR
3. MD or DO with a current medical license¹ and 1 year training and experience in high-complexity testing in the respective specialty; OR
4. Doctoral degree in clinical laboratory science, chemical, physical or biological science with 1 year training and experience in the respective specialty; OR
5. Master's degree in medical technology, clinical laboratory science, or chemical, physical or biological science and 2 years training and experience in high-complexity testing in the respective specialty; OR
6. Bachelor's degree in medical technology, clinical laboratory science, or chemical, physical or biological science and 4 years training and experience in high-complexity testing in the respective specialty

**Exception:** CLIA requires special qualifications for Technical Supervisor for the specialties of Transfusion Medicine, Cytopathology, Cytogenetics, Histopathology, Oral pathology, Histocompatibility. For these specialties, the Technical Supervisor must be a physician and/or doctoral scientist, and have specific training/experience. Refer to the CLIA regulation (42CFR493.1449) or inspection checklist for further details. For these specialties, the Technical Supervisor may be referred to as the section director.

---

*The Director may fulfill multiple roles. While CLIA may allow for non-physician or nondoctoral degreed individuals to direct Waived and Moderate Complexity laboratories, CAP does not.

¹ The license to practice medicine must be in the jurisdiction where the laboratory is located (if required). Military and VA personnel may be licensed in any US State.

April 2014
### CAP Personnel Requirements by Testing Complexity

#### General Supervisor

<table>
<thead>
<tr>
<th>Not Applicable</th>
<th>Not Applicable</th>
</tr>
</thead>
</table>

1. Qualified as a Director for high-complexity testing; OR
2. Qualified as a Technical Supervisor for high-complexity testing; OR
3. Doctoral degree in clinical laboratory science or chemical, physical or biological science with 1 year training and experience in high-complexity testing; OR
4. Master's degree in clinical laboratory science, medical technology or chemical, physical or biological science and 1 year training and experience in high-complexity testing; OR
5. Bachelor's degree in clinical laboratory science, medical technology or chemical, physical or biological science and 1 year training and experience in high-complexity testing; OR
6. Associate degree in medical laboratory technology (or pulmonary function) and 2 years laboratory (or blood gas analysis) training or experience, or both, in high-complexity testing

Refer to the CLIA regulation 42CFR493.1461 for additional qualifications

#### Testing Personnel

| No specific requirements outlined in the CAP or CLIA regulations, however each laboratory must ensure waivers testing personnel meet facility-defined minimum requirements and have records of training and competency assessment | 1. MD or DO with a current medical license¹; OR 2. Doctoral degree in clinical laboratory science, chemical, physical or biological science; OR 3. Master's degree in medical technology, clinical laboratory, chemical, physical, or biological science; OR 4. Bachelor's degree in medical technology, clinical laboratory, chemical, physical or biological science; OR 5. Associate degree in chemical, physical or biological science or medical laboratory technology; OR 6. High school graduate or equivalent and laboratory training/experience consisting of the following: a. Successfully completed military training of 50 or more weeks and served as a medical laboratory specialist; OR b. Appropriate training/experience as specified in 42CFR493.1423 | 1. MD or DO with a current medical license¹; OR 2. Doctoral degree in clinical laboratory science, chemical, physical or biological science; OR 3. Master's degree in medical technology, clinical laboratory, chemical, physical, or biological science; OR 4. Bachelor's degree in medical technology, clinical laboratory, chemical, physical or biological; OR 5. Associate degree in chemical, physical or biological science or medical laboratory or equivalent education and training (refer to 42CFR493.1489(b) for details on required courses and training); OR 6. Individuals performing high complexity testing on or before April 24, 1995 with a high school diploma or equivalent with documented training may continue to perform testing only on those tests for which training was documented prior to September 1, 1997 (refer to CLIA regulation 42CFR493.1489(b) for details on required training) |

*The Director may fulfill multiple roles. While CLIA may allow for non-physician or nondoctoral degreeed individuals to direct Waived and Moderate Complexity laboratories, CAP does not.

¹ The license to practice medicine must be in the jurisdiction where the laboratory is located (if required). Military and VA personnel may be licensed in any US State.

April 2014