

# Complaint Intake Form

## CLIA State Agency – Oregon

Oregon Health Authority  
Laboratory Compliance Section  
7202 NE Evergreen Parkway  
Suite 100  
Hillsboro, OR 97124

Ph 503-693-4125  
Fax: 503-693-5602  
Email: [lc.info@odhsoha.oregon.gov](mailto:lc.info@odhsoha.oregon.gov)  
Web: [www.healthoregon.org/ll](http://www.healthoregon.org/ll)

This fillable form is for use by the public to report concerns with CLIA certified clinical laboratories located within the State of Oregon or for testing by CLIA laboratories originating in the State of Oregon.

Please provide information about the laboratory

Name	
Address Line 1	
Address Line 2	
City, State	
ZIP Code	

Please provide the names of anyone involved or affected

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Please provide a description of your concern. Include dates and times if you can.

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Please provide any details that may verify the concern.

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Would you like to remain anonymous?  Yes  No

Please attach the completed form and email to [lc.info@odhsoha.oregon.gov](mailto:lc.info@odhsoha.oregon.gov). If you have supporting documentation you may also send that, as well. Alternatively you may print and mail the form to the address listed at the top.