

CLINICAL LABORATORY EVALUATION PROGRAM
BIGGS LAB – WADSWORTH CENTER
NYS DEPARTMENT OF HEALTH
EMPIRE STATE PLAZA
ALBANY, NEW YORK 12237

APPLICATION INSTRUCTIONS
FOR AMENDMENT OF
CERTIFICATE OF QUALIFICATION

E-Mail: CLEPCQ@health.ny.gov

Web: www.wadsworth.org/regulatory/clep

Please read and follow the instructions carefully. **Incomplete or incorrectly completed applications will delay processing.**

1. **PERSONAL INFORMATION** Provide your personal information as indicated. E-mail addresses will be used to send electronic correspondence concerning the status of your application or that of a laboratory at which you are employed and will not be used for any other purpose. **Attach a current curriculum vitae which includes a list of relevant publications.**

Be reminded, if you are intending to request a directorship or assistant directorship at a laboratory holding a NYS permit, please make the necessary additions using eCLEP at the Health Commerce System, <https://commerce.health.state.ny.us> after your Certificate of Qualification is successfully amended.

2. **CATEGORIES REQUESTED** Check each category you seek to add to your Certificate of Qualification. Refer to the “**Definition and Scope of CQ Categories**” and “**Crosswalk of CQ Categories and Permit Categories**” on our website (<https://www.wadsworth.org/regulatory/clep/certificate-requirements>) to obtain assistance in completing the application.

ABBREVIATIONS FOR ACCEPTED BOARD CERTIFICATIONS:

ABB(HLCD)	American Board of Bioanalysis as High Complexity Laboratory Director
ABCC(CC)	American Board of Clinical Chemistry in clinical chemistry
ABCC(TC)	American Board of Clinical Chemistry in toxicological chemistry
ABD	American Board of Dermatology
ABFT	American Board of Forensic Toxicology
ABIM(Hem)	American Board of Internal Medicine in hematology
ABIM(Onc)	American Board of Internal Medicine in medical oncology
ABMLI	American Board of Medical Laboratory Immunology
ABMM	American Board of Medical Microbiology
ABOMP	American Board of Oral and Maxillofacial Pathology
ABP(AP)	American Board of Pathology in anatomic pathology
ABP(BB/TM)	American Board of Pathology in blood banking and transfusion medicine
ABP(CP)	American Board of Pathology in clinical pathology
ABP(DP)	American Board of Pathology in dermatopathology
ABP(MGP)	American Board of Pathology in molecular genetic pathology
ABP(MMB)	American Board of Pathology in medical microbiology
AOBP(LM)	American Osteopathic Board of Pathology in laboratory medicine
AOBP(AP)	American Osteopathic Board of Pathology in anatomic pathology
AOBP(DP)	American Osteopathic Board of Pathology in dermatopathology
NRCC	National Registry for Certified Chemists

When applying for additional Certificate of Qualification categories, please note the following definitions:

Experience means at least four years of postdoctoral training and/or experience in an acceptable laboratory, including two years personally performing, supervising, and/or directing testing of human clinical specimens in each category sought and two years of general laboratory management, or an equivalent combination of training and/or experience. If you hold an accepted board certification, documentation of recent (see Recency below) experience is required. Training and/or experience must be documented in the form of letters from, or Questionnaires signed by, laboratory directors or supervisors under whom the training and/or experience was acquired.

Letters must provide specific details about the dates (month and year) and location of training and/or experience, including laboratory name, PFI/CLIA number, address, and facility type (hospital, medical research, etc.). Letters must also include the number of specific tests/analytes and procedures personally performed, supervised and/or directed, along with the specimen source(s), methodology, and equipment for each, and whether each is an FDA- Approved assay or laboratory-developed test (LDT). Letters from administrators or other responsible third parties are acceptable only if the applicant documents that primary supervisors are not available.

Recency means acceptable training and/or experience in a specific category of clinical laboratory testing within the six years prior to this application. If you are applying for a category that has a qualifying board listed above and your entire residency and fellowship occurred within the past six years, letters and/or Questionnaires documenting your training and/or experience within the previous six years are not required unless experience is indicated as a requirement for the category. (see Categories Requested table on the application). If your residency and/or fellowship, or portions thereof, was completed more than six years prior to this application, one or more letters and/or Questionnaires attesting to training and/or experience gained within the previous six years **are** required. For rotation subjects during a residency and/or fellowship that were completed more than six years prior to this application, letters and/or Questionnaires documenting additional experience are required.