Illinois Department of Public Health
Division of Laboratories

Service Improvement Form

Please help improve our service to you. If you have an unresolved issue that you need to bring to the Illinois Department of Public Health's attention, please complete of this form and either attach it to an e-mail (Robert.F.Cox@illinois.gov) or fax it to 217-524-7924.

To be completed by a local health department or Illinois Department of Public Health program.

**Laboratory:**
- [ ] Chicago
- [ ] Carbondale
- [ ] Springfield

**Date of Complaint** ________________

**Contact Person** ________________________________

**Organization** ________________________________

**Address** ________________________________

**City** ________________________________ **State** **ZIP Code** ________________

**Phone Number** ________________ **Fax Number** ________________

**Nature and Scope of Complaint**

If the problem concerns specimens/samples, include patient/source name, date collected and other information if available.

If you have a concern that requires an immediate response, call 618-457-5131 in Carbondale, 312-793-4760 in Chicago or 217-782-6562 in Springfield.