



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 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.