



October 06, 2017

**TO: KEITH HYLAND, Ph.D.
5424 GLENRIDGE DRIVE
ATLANTA, GA 30342**

**FROM: CHRISTEL BENN GRIFFITH, PROGRAM DIRECTOR
DIAGNOSTIC SERVICES UNIT**

RE: LABORATORY DIRECTOR LICENSE

Enclosed is your director's license for the years 2018 - 2019. Please display it in a conspicuous place as evidence of your current status.

We take this opportunity to note a few points in the Rules and Regulations:

- The director's license shall be maintained current and changes shall be reported to the Department when they occur.
- The director is responsible for the operation of the laboratory at all times, the proper performance and reporting of laboratory findings, and for adequate staffing by qualified laboratory personnel, their in-service training and work assignment. There are specific requirements in the regulations for Restricted, Specialty, and Plasmapheresis directors.
- When a director will be continuously absent for more than four weeks, arrangements must be made for a qualified substitute licensed director
- A laboratory director must serve a laboratory on a full-time or regular part-time basis and shall be permitted to direct no more than three clinical laboratories at a given time. However, no restricted director shall be permitted to direct more than one clinical laboratory at a given time.

Your interest in laboratory improvement and quality patient care for the citizens of Georgia is appreciated. If you have questions regarding any aspect of the Rules and Regulations for Licensure of Clinical Laboratories, do not hesitate to contact the Department.

Enclosure



GEORGIA DEPARTMENT OF
COMMUNITY HEALTH

STATE OF GEORGIA

CERTIFIES THAT

KEITH HYLAND, Ph.D.

Under provisions of Rule No. 290 - 5 - 29 - .06, Georgia Department of Community Health, has met the requirements to be licensed in the State of Georgia as a

CLINICAL LABORATORY DIRECTOR extension 112

This license is to be displayed at all times in a prominent place where it can be viewed by the public, and is to be renewed biennially, subject to conformance with all applicable rules and regulations.

License No. 08003

Year of Issue: 2018 - 2019

Expiration Date: 12/31/2019

GEORGIA DEPARTMENT OF COMMUNITY HEALTH

HEALTHCARE FACILITY REGULATION DIVISION

A handwritten signature in black ink that reads "Melanie Simon".

Melanie Simon, Division Chief