

## Planned Workload Report Clinical Laboratory Improvement Amendments Program

According to Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0599. The time required to complete this information collection is estimated to average 8 to 20 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Baltimore, Maryland 21244-1850.

<b>Region/State Code:</b> 4 / Alabama	<b>FY Quarter: 2/2004</b> From: 1/1/2004 To: 3/31/2004
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**Agency Name:**  
Alabama Department of Public Health

Type of Laboratory	Number Of Sites	Initial Visits	Resurvey Visits	Follow-Up Visits	Compliant Visits	Total Visits
	(A)	(B)	(C)	(D)	(E)	(F)

1	Waived/PPMP	0	0	0	0	0	0
2	Accredited	0	0	0	0	0	0
3	Low Volume Schedule	0	0	0	0	0	0
4	Schedule A	0	0	0	0	0	0
5	Schedule B	0	0	0	0	0	0
6	Schedule C	0	0	0	0	0	0
7	Schedule D	0	0	0	0	0	0
8	Schedule E	0	0	0	0	0	0
9	Schedule F	0	0	0	0	0	0
10	Schedule G	0	0	0	0	0	0
11	Schedule H	0	0	0	0	0	0
12	Schedule I	0	0	0	0	0	0
13	Schedule J	0	0	0	0	0	0
14	Totals	0	0	0	0	0	0

Date:	Signature:	Title:
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