STATE OF HAWAII
Department of Health
State Laboratories Division

APPLICATION FOR CYTOTECHNOLOGIST LICENSE

A license is required in Hawaii to practice as a clinical laboratory director, medical technologist, cytotechnologist, clinical laboratory specialist, and medical laboratory technician according to the Hawaii Administrative Rules Chapter 11-110 “Clinical Laboratories and Laboratory Personnel.” Licenses are effective for two years.

An application form to obtain a license along with the following documents must be submitted to the Department of Health State Laboratories Division, ATTN: Lab Personnel License, 2725 Waimano Home Rd., Pearl City, Hawaii 96782.

Documents to be submitted with the application include:

1. Official transcripts (sealed and displaying the registrar’s seal) from an accredited college or university attended by the applicant. The transcripts should be sent directly to the State Laboratories Division from the institution. For graduates of foreign colleges or universities, an evaluation of foreign credentials from an approved list of agencies (Attachment A) and a notarized copy of the official transcripts are required.

2. Documentation of an accredited training program or full-time experience in a clinical laboratory:
   a. A notarized copy of a certificate of training from an accredited cytology program; or
   b. Letter from an employer specifying the length of full-time experience under the direct supervision of a certified pathologist. The clinical laboratory must be certified in cytology by the US Dept. of Health and Human Services Centers for Medicare and Medicaid Services under the Clinical Laboratory Improvement Amendments of 1988 (CLIA’88).

3. Verification of passing a written national certification examination in cytology (Attachment B):
   a. Fill out the top portion of the Certification by Written Examination form (Attachment C). Send the form to the certification agency for them to complete and return to the State Laboratories Division.
   b. NOTE: For ASCP certification, please access the ASCP website, https://www.ascp.org/content/board-of-certification/verify-credentials in order to request verification be sent to the state of Hawaii. Do not use the Attachment C form.

4. Completed Department of Health Application for Licensure form.
5. **Money order** for non-refundable application fee of $25.00 and **separate payment** for the new license fee as indicated on the attached table (Attachment D). Checks should be made payable to “State of Hawaii Department of Health.”

Renewal notices
Licenses **must be renewed every odd-numbered year**, commencing in 2003. Renewal notices are sent to individuals holding active licenses three months before the expiration date. Notify the State Laboratories Division in writing if your address has changed.

For further questions, contact the State Laboratories Division at (808) 453-6652.