From:	Mark Breting
To:	Wren, Kira
Cc:	GUERRETTAZ, JOHN; Beard, Scott; Pilar Cuadra; Nicholas Williams; Braden Henson; Jeff Harter; mandy.snyder@aes.com; Vince Epps; Cory Richardson (cory.richardson@aes.com); Rob Duncan
Subject:	FP 63-02/Petersburg RWS Type III LF - Groundwater Nature and Extent Investigation Surface Water Sampling and Analysis Plan (Revised 6-27-2024)
Date:	Thursday, June 27, 2024 9:49:11 AM
Attachments:	image001.png image002.png AES PB Surface Water SAP 5-6-2024 (Revised 6-27-2024) Final.pdf

Good morning Kira:

On behalf of AES Indiana, Atlas is providing a revised Groundwater Nature and Extent Investigation Surface Water Sampling and Analysis Plan associated with the Petersburg RWS III Landfill. This document has been revised based on comments IDEM provided in their review letter dated June 13, 2024 for the original SAP submittal dated May 6, 2024.

Let us know if you have any questions.

Sincerely, Mark

Mark E. Breting, L.P.G.
Senior Project Geologist

ATLAS

7988 Centerpoint Drive, Suite 100
Indianapolis, IN 46256
O: 317.579.4082 | **C:** 317.313.8306
OneAtlas.com I LinkedIn I Facebook I Twitter

GROUNDWATER NATURE AND EXTENT INVESTIGATION SURFACE WATER SAMPLING AND ANALYSIS PLAN

RESTRICTED WASTE SITE (RWS) TYPE III LANDFILL

PETERSBURG GENERATING STATION

PREPARED FOR:
Mr. Jeff Harter
AES Indiana
Petersburg Generating Station
6925 North State Route 57
Petersburg, IN 47567

PREPARED BY:
Atlas Technical Consultants LLC
7988 Centerpoint Drive, Suite 100
Indianapolis, IN 46256

May 6, 2024
Revised on June 27, 2024

May 6, 2024
Revised on June 27, 2024 Atlas Project No. 170LF01503

Mr. Jeff Harter
Environmental Team Leader
AES Indiana
Petersburg Generating Station
6925 North State Route 57
Petersburg, Indiana 47567

Re: Groundwater Nature and Extent Investigation Surface Water Sampling and Analysis Plan
Indianapolis Power & Light Company d/b/a AES Indiana (AESI)
Petersburg Generating Station – RWS III Landfill
Petersburg, Indiana
FP: 63-02
Atlas Project No. 170LF01503

Dear Mr. Harter:

In accordance with the March 22, 2024 IDEM review letter of the *Statistical Analysis of November 2023 Groundwater Quality Data —Addendum No. 1* report dated February 27, 2024, included with this letter is a Groundwater Nature and Extent Investigation Surface Water Sampling and Analysis Plan for the Restricted Waste Site (RWS) Type III Landfill at the AESI Petersburg Generating Station located outside Petersburg, Pike County, Indiana. This site is currently conducting an assessment groundwater monitoring program in compliance with the current Indiana Solid Waste Regulations (329 IAC 10-21).

This document has been revised to address comments received from the Indiana Department of Environmental Management (IDEM) in their June 13, 2024 review letter of the original Sampling and Analysis Plan (VFC # 83636046), dated May 6, 2024.

Respectfully submitted,
Atlas Technical Consultants LLC

Mark E. Breting

Mark E. Breting, L.P.G.
Senior Project Geologist

Robert T. Duncan

Robert T. Duncan, L.P.G.
Principal Geologist

CONTENTS

FIGURES

APPENDICES

1. SURFACE WATER SAMPLING AND ANALYSIS PLAN

1.1 Introduction

This *Surface Water Sampling and Analysis Plan* (SAP) is designed to describe sampling and testing procedures for water quality testing to be performed as part of a groundwater nature and extent investigation. The SAP includes a description of the water sampling locations, sampling schedule, field sampling equipment and procedures, qualifications for sampling personnel, parameters for sampling and analysis, and sample preparation and shipment. This SAP was written to comply with requests from the IDEM review letter for the November 2023 Statistical Analysis of November 2023 Groundwater Quality Data – Addendum No. 1 for the conditionally converted RWS III Landfill (dated February 27, 2024 – VFC # 83603234),

1.2 Site Location

The Petersburg Generating Station is a four-unit (two of which are retired) coal fired generating facility is located at 6925 North State Road 57 in Pike County, Indiana. The facility, which began commercial operation in 1967, is located along the eastern bank of the White River, approximately four miles north of Petersburg, Indiana. The Petersburg Generating Station is owned and operated by AES Indiana (AESI).

1.3 Purpose

Groundwater flows from the RWS III Landfill and the Multi-Unit Ash Pond System toward the White River which lies adjacent to the Site. The purpose of this SAP is to provide a consistent sampling and analysis procedure for surface water sampling to support the investigation of nature and extent of any groundwater impacts at the site.

1.4 Water Quality Testing Program

Three surface water sampling locations along the east bank of the White River are proposed in this SAP. The sampling locations consist of samples from the riverbank (SB-1, SB-2, and SB-3) and river center line (SC-1, SC-2, and SC-3), which are grouped in pairs perpendicular to the river, at three locations. Approximate sampling locations are shown on **Figure 1** and summarized in **Inset Table 1**. East Fork White River surface water samples SB-1 and SC-1, and West Fork White River surface water samples SB-2 and SC-2 are proposed to represent “background” locations that are upgradient of any potential for groundwater influence from the management units included in this SAP, based on the groundwater flow maps generated during the semi-annual monitoring events. White River surface water sample location SB-3/SC-3 is proposed to observe potential impacts from groundwater to surface water due to surface water quality standard (327 IAC 2) exceedances from the nature & extent monitoring wells associated with the combined RWS III Landfill and Ash Pond System monitoring network. The sampling locations are along the channel centerline and along the bank of the White River. Sampling at these locations will be done from a boat on the river.

The sampling locations were selected because they are tangentially inline and downgradient from the aquifer groundwater that is observed in the monitoring wells as the groundwater flows westward, from the site towards the river and enters the river as baseflow, though the riverbed. A generalized

depiction of the relationship between the aquifer, screened monitoring well intervals and the river is shown in geologic cross section (**Figure 2).** The interpretation of the groundwater flow with levels for the river and monitoring well MW-42I is based on the groundwater flow map included in the Atlas *November 2023 Groundwater Data* report for the Ash Pond System dated February 27, 2024.

Inset Table 1: Sampling Location Details

Monitoring Point	Description	Latitude and Longitude Coordinates
SC-1	Surface water sampling point along the East Fork White River channel centerline and upstream of both the confluence with the White River and of the conveyance of groundwater potentially impacted by the Petersburg Station's ash ponds/landfills. Location is approximately 0.5 miles downstream of SR 57 bridge over East Fork White River.	38°32'34.11"N 87°13'53.77"W
SB-1	Surface water sampling point at the southern bank of the East Fork White River channel centerline, in line with SC-1, and upstream of both the confluence with the West Fork White River and of the conveyance of groundwater potentially impacted by the Petersburg Station's ash ponds/landfills. Location is approximately 0.5 miles downstream of SR 57 bridge over East Fork White River.	38°32'33.16"N 87°13'54.88"W
SC-2	Surface water sampling point along the West Fork White River channel centerline and upstream of both the confluence with the East Fork White River and of the conveyance of groundwater potentially impacted by the Petersburg Station's ash ponds/landfills.	38°32'44.34"N 87°14'37.19"W
SB-2	Surface water sampling point at the eastern bank of the West Fork White River, in line with SC-2, and upstream of both the confluence with the East Fork White River and of the conveyance of groundwater potentially impacted by the Petersburg Station's ash ponds/landfills.	38°32'44.54"N 87°14'36.39"W
SC-3	Surface water sampling point along the White River channel centerline, west and tangentially downgradient of the MW-42 nest, west of the Petersburg RWS III Landfill and Ash Pond System.	38°31'53.41"N 87°15'18.66"W
SB-3	Surface water sampling point at the eastern bank of the White River, in line with SC-3. West and downgradient of the MW-42 nest, and west of the Petersburg RWS III Landfill and Ash Pond System.	38°31'53.32"N 87°15'16.03"W

1.5 Sampling Schedule

A one-time sampling event will be completed as soon as practicable during those months that allow for the safe collection of sampling. The decision to conduct a surface water sampling event will be based on whether the concentrations observed in the most downgradient monitoring wells during the last semi-annual sampling event exceed surface water quality standards. Access to sampling locations along the White River depends on river stage. The USGS White River gage (USGS 03373980) is located on the river adjacent to the Petersburg Station plant approximately 2 miles downstream of the furthest upstream proposed sampling location - SC-1. The "Gage 0" datum is EL 400.7. The river low flow stage is approximately EL 401.6, action stage is EL 412.70, and flood stage is approximately EL 416.7. If the White River stage height is over flood stage, samples will not be collected. If samples cannot be collected in a specific time frame due to weather and/or river conditions, the IDEM will be notified within seven (7) days of the end of the planned sampling period. The river conditions will be evaluated, and the sampling event will be rescheduled, if possible.

Sampling will be conducted in accordance with standard water sampling practices. Water samples will be collected at the bottom of the water column. Sampling information and procedures such as: field observations, sample collection techniques, decontamination techniques, sample bottles and preservatives, laboratory analytical results, and quality assurance/quality control and chain-of-custody protocols will be documented during the event and will be submitted in a report to the IDEM.

1.6 Sampling and Analysis

This SAP provides for the collection and analysis of water samples for the parameters listed in **Inset Table 2**; only those parameters that showed exceedances over a surface water standard in the previous groundwater monitoring event from the intermediate aquifer zone (the portion of the aquifer anticipated to be recharging into the river surface water) will be analyzed in a subsequent surface water event. In addition, based on historic groundwater quality findings in the vicinity of the RWS III Landfill, molybdenum may need to be included in future sampling events. In addition to the parameters listed in **Inset Table 2**, field parameters such as temperature, pH, dissolved oxygen, specific conductance, and turbidity will be collected and recorded by the sampling personnel utilizing portable field water quality meters.

1.7 Sampling Personnel

The sampling crew will comply with requirements of AESI, State, and Federal agencies regarding worker safety. This includes, but will not be limited to, the Occupational Safety and Health Administration Standard 40-hour safety training course required by 29 CFR Part 1910.120. In addition, members of the sampling crew will be trained in the specifics of water sampling and will be familiar with this document and associated project specific Job Safety Analysis work plans prepared by Atlas and approved by AES safety management.

The crew will wear latex gloves, nitrile gloves, or alternative gloves approved by the Commissioner whenever the sampler's hands are in proximity of sample water, open sample containers, or sampling equipment. Sampling personnel will take appropriate precautions to prevent contamination of the water samples that compromise sample integrity.

Inset Table 2. Sampling and Analysis Parameter

Parameter	Method	Reporting Limit	Units
Boron, Total (B)	EPA 200.8	0.01	mg/L
Molybdenum, Total (Mo)	EPA 200.7	0.01	mg/L

The analytical method listed in the above table are currently used by the contract laboratory. Other promulgated/approved methods may be used if necessary.

1.8 Field Activities

Prior to sampling, a Field Data Sheet (see **Appendix A**) is to be completed to document the following for each sampling location:

- Date and time each sample is obtained.
- The location of each sampling point.
- The weather conditions during sample collection.
- The appearance of the water sample as to color, odor, turbidity, etc.
- The results of the field measurements that include temperature (in degrees centigrade), pH, dissolved oxygen, specific conductance, and turbidity.
- The type of equipment used to collect field parameters at each location.
- Any deviations from established sampling protocols.
- Any additional information the sampling crew feels may affect sample integrity.

1.9 Sampling Equipment, Reagents, and Materials

This section describes the major equipment, materials and methods used in seep, discharge, and surface water sampling. Listed below are the typical equipment and materials taken into the field and used during a sampling event:

- Personal Protective Equipment
- Multi-parameter field probe (YSI or equivalent);
- Sample Pole with bottle attachment and clean transfer bottles;
- Wildco, Van Dorn, or LaMotte horizontal water sampler;
- Sample containers with preservatives, labels;
- Coolers: with cooling pack(s) or ice;
- Copy of this Surface Water Sampling and Analysis Plan;
- Blank Field Data Sheets;
- Cooler seal tapes;
- Gloves: disposable nitrile, non-powdered;
- Clean plastic buckets for decontaminating equipment;
- Deionized or distilled water for rinsing equipment between sampling locations;
- Potable water for rinsing equipment between sampling locations;
- Cleaning Solution: potable water and non-phosphate detergent solution;
- Deionized or distilled water for developing field blank/equipment blank;

- Field Log Book; and
- Laboratory provided chain-of-custody forms.

The field multi-parameter probe sensor(s) are calibrated prior to the scheduled sampling event in accordance with manufacturer guidelines. Copies of the owner's manual for each type of probe sensor are maintained with the equipment and are provided in **Appendix B**. In the event that unusual test results are obtained on a water sample, the calibration of the probe will be checked immediately, and another sample tested if necessary.

1.10 Sample Collection

Surface water samples shall be collected using a clean transfer bottle which will be used to fill sample containers supplied by the contract laboratory. Care will be taken to avoid disturbing and entraining particulate soil and sediment. Sampling personnel will put on new gloves prior to sample collection or handling of sampling equipment. If gloves are contaminated during use they will be replaced with a new pair. New gloves will be used at each individual sampling location. To ensure that the preservative added to each sample container by the laboratory is not diluted, the sample bottle should be filled, but should not be allowed to overflow the container. Clean sampling pipette devices, stainless steel dippers, or transfer sample bottles will be used to avoid disturbing sediment.

During sample collection, field parameters (temperature, pH, dissolved oxygen, specific conductance, and turbidity) will be measured using calibrated handheld meters. Field observations, surface water sampling techniques, decontamination techniques, laboratory analytical results, and QA/QC and chain-of-custody protocols will be documented during the surface water sampling event. Any existing or potential problems or unusual conditions should be noted as well.

Surface water samples will be collected at a depth just above the contact with the bottom of the water column, the point closest to the groundwater- surface water interface. The water column height at the sampling location will be determined by lowering a water level indicator into the surface water body and the total depth will be recorded on the field sampling sheet. The base of the water column will represent the sampling depth for the sample.

Sample containers are provided by the contract laboratory that performs the analysis. Only new containers will be used during sample collection. Protocols related to proper sample integrity preservation include the following: pH control (acidification), using the proper sample bottle material composition, maintaining the correct sample volume in the sample bottle, refrigeration, and protection from light. The sizes and types of containers, and preservation procedures for each type of sample are listed in the laboratory *Quality Assurance Project Plan* (QAPP) in **Appendix C**.

Quality assurance procedures are an integral part of each segment of field sampling methodology. The quality assurance procedures associated with each step of the field sampling routine have been directly incorporated into each respective field sampling section of this SAP. The laboratory reports will include Full (Level IV) QA/QC documentation as described in the *Solid and Hazardous Waste Programs Analytical Data Deliverable Requirements: Supplemental Guidance.* The results will be reported in a Level II report with Level IV documentation provided as requested.

Trip blanks may be used for these sampling events. The trip blank, containing laboratory-grade distilled water, will remain unopened and will be packaged and sent from and to the laboratory in the same manner as the site environmental samples. The trip blank will be provided by the analytical laboratory. The results of these tests provide information on contamination resulting from:

1. Interaction between sample and container;
2. Contaminated deionized water or preservatives, and;
3. A handling procedure that alters the results of the analysis.

A field duplicate, defined as an additional sample collected from a water sampling location consecutively to the independent sample, will also be collected during the event. The field duplicate sample will be labeled and analyzed separately, and the location of the field duplicate will not be provided to the laboratory. This sample will provide a check on laboratory quality.

Site-specific matrix spike and matrix spike duplicate samples will be collected for sampling events that require full (Level IV) quality assurance/quality control reporting. Matrix spike (MS), and matrix spike duplicate (MSD) results are examined to evaluate the impact of matrix effects on overall analytical performance and the potential usability of the data. A matrix spike is a *representative* environmental sample that is spiked with target analytes of interest *prior* to being taken through the entire analytical process in order to evaluate analytical bias for an actual matrix. Matrix spike and matrix spike duplicate samples will be analyzed for all constituents required for the sampling event.

At some point during the sampling event, a field blank will be filled with deionized water. The field blank preparation will be conducted at a selected sample location and the location noted on the Field Data Sheet. The field blank will be collected by pouring deionized or distilled water directly into the sample collection containers for the full suite of parameters to be analyzed. The field blank will be analyzed for all constituents required for the sampling event to determine if the sampling process is satisfactory or if sampling may have introduced bias into the results.

If sampling equipment is reused, an equipment blank sample will be collected for analysis of the full suite of parameters at the end of each day of sampling.

Field quality control samples are summarized in the following table:

Inset Table 3. Field Quality Control Samples

Sample Type	Frequency	Parameters
Trip Blank	Optional	All parameters
Field Duplicate	1 per every 10 sampling locations	All parameters
Field Blank	Optional	All parameters
MS/MSD	1 per every 20 sampling locations	All parameters
Equipment Blank	1 per day of sampling	All parameters

1.11 Decontamination

Strict cleansing and rinsing methods shall be followed to prevent cross-contamination for non-dedicated equipment that are introduced into a sampling point or that contacts a water sample. The

following procedure will be used for decontamination of non-dedicated equipment when necessary (i.e. water level indicator):

- A mild non-phosphate detergent and potable water solution and appropriate brush(s) shall be used to wash the exterior and interior of any sampling equipment.
- The equipment will then be rinsed, initially with potable water, and then double rinsed with distilled or deionized water.
- All disposed wash and rinse water shall not be placed upgradient or within twenty feet downgradient of any sampling point.

1.12 Field Reporting

The field technicians will record data and information that ensures proper sample identification, field water quality testing for prescribed parameters, and description of general site conditions and anomalies. Field notes will be recorded in permanent ink in a field notebook and on the Field Data Sheets provided in **Appendix A**, which document:

- Date and time of sample collection;
- Sample location identification;
- Climatic conditions including air temperature;
- Condition of collected sample regarding odor and turbidity;
- Field analysis data and methods;
- Date and time of each measurement;

Comments Section will include:

- Source and type of field equipment calibration standards;
- Manufacturer and model number of meter;
- Calibrators name;
- Preservatives used and reaction, if any, of the sample water;
- Types and numbers of sample containers used;
- Parameters requested for analysis;
- Sample distribution and transporter;
- General observations on sampling event; and
- Name of sampler.

Sampling technicians shall exercise care to complete the field documentation in a timely and accurate manner. Also, care should be taken to preserve the field documentation for future reporting needs. Any changes in field data shall be initialed and dated in ink.

Clean sample bottles are shipped from the contract laboratory with labels affixed to each sample container in order to prevent misidentification of any samples. These labels will be durable enough to remain in place and legible when wet, and will contain the following information:

- Facility identification;
- Sampler’s initials;
- Sample location identification;

- Date container was filled;
- Analysis required; and
- Preservative (if any).

As an alternative to the use of labels, it is acceptable to use a permanent marker to place the required information directly on the sample container if made of plastic. Sample bottles are placed on ice in coolers immediately after they are filled. If it is necessary to ship the coolers by common carrier, an uniquely-numbered seal will be placed on the cooler to insure the samples have not been disturbed. If used, the seal numbers will be recorded on the chain-of-custody (COC) form.

1.13 Sample Handling and Equipment

Following collection and labeling, laboratory samples and quality assurance (QA) samples will be placed in insulated coolers and chilled using coolant packs or ice. The sample coolers will be sent to the laboratory either using overnight express or couriered directly by an Atlas technician. The samples must be received by the laboratory within 48 hours of shipping. The samples must be maintained at 4 degrees centigrade while in storage and during shipment. The coolers shall be accompanied by the required chain-of-custody documentation described below.

Proper COC procedures shall be followed. These include the completion of a COC document that is supplied by the laboratory. **Appendix D** shows a typical form. Original COC(s) shall accompany the samples as they are transported to and received by the laboratory. The purpose of this document is to identify each individual who handles the samples during the sampling, transportation, and laboratory receiving steps. Custodians of the samples must ensure that all sample containers are in their possession, or that the samples are stored in a secure location at all times. When transferring the possession of the samples, each party will sign and time-date the COC record at the time of transfer.

1.14 Laboratory Analyses and Report

The samples will be submitted to the designated laboratory for analysis as described above. They will be analyzed for the parameters, and by the methods shown in **Appendix C**. The laboratory will follow the applicable QAPjP. A copy of the laboratory QAPjP is in **Appendix C**.

The analytical reports with standard quality assurance/quality control (QA/QC) documentation shall be supplied by the laboratory to AESI. If requested, the laboratory will provide AESI an electronic version of laboratory analytical reports with full (Level IV) QA/QC documentation as described in the *Solid & Hazardous Waste Programs Analytical Data Deliverable Requirements: Supplemental Guidance (June 2014)*.

1.15 Reporting of Groundwater Quality Data

A surface water sampling report will be prepared and submitted to IDEM within 60-days of the sampling event. The surface water sampling report will include a site plan that depicts the sampling locations and a summary of analytical results.

The report will be submitted electronically, it will contain a copy of the field documentation, one copy of the laboratory reports with a standard QA/QC data package and COC records, and one electronic

data deliverable of the data with each report using a format described in IDEM's guidance available at the following website:

www.in.gov/idem/landquality/2369.html.

We look forward to the opportunity of continuing to work with you on this project. Please call one of the undersigned at 317.849.4990 if you have any questions regarding this report.

Respectfully submitted,
Atlas Technical Consultants LLC

Mark E. Breting, L.P.G.
Senior Project Geologist

Robert T. Duncan, L.P.G.
Principal Geologist

Copies: Ms. Pilar Cuadra, AES US Services, LLC
Mr. Nicholas Williams, AES US Services, LLC

Figures

LEGEND:

- SC-2 — SAMPLING LOCATION (Location Identification)
- AP-1 — CCR MONITORING WELL (Well Identification)
- MW-1 — EXISTING NATURE AND EXTENT MONITORING WELL (Well Identification)
- PZ-2A — EXISTING NATURE AND EXTENT PIEZOMETER (Well Identification)
- TMW-206 — WHITE RIVER TEMPORARY MONITORING WELLS (Well Identification)
- AES INDIANA PROPERTY BOUNDARY
- APPROXIMATE LIMITS OF CCR SURFACE IMPOUNDMENT

SC-2 SB-2 SC-1 SB-1 SB-3 SC-3

TMW-207 TMW-206 TMW-208 TMW-205 TMW-204 TMW-203R TMW-203 TMW-202 TMW-200

MW-47A MW-47I MW-47B
MW-46A MW-46I MW-46B
MW-45A MW-45I MW-45B
MW-25A MW-25I MW-25B
MW-36A MW-36I MW-36B
MW-37A MW-37I MW-37B
MW-38B MW-38I MW-38B
MW-39A MW-39I MW-39B
MW-29A MW-29I MW-29B
MW-40A MW-40I MW-40B
MW-41A MW-41I MW-41B
MW-20B MW-20I MW-20A
MW-19A MW-19I MW-19B
MW-26A MW-26I MW-26B
MW-28A MW-28I MW-28B
MW-42A MW-42I MW-42B
MW-43A MW-43I MW-43B
MW-44A MW-44I MW-44B
MW-27B
MW-21A MW-21I MW-21B
MW-4C
MW-3
MW-2R

AP-11A AP-11I AP-11B
AP-6A AP-6B
AP-5 AP-5A
AP-7
AP-8
AP-4A AP-4I AP-4B
AP-10A AP-10I AP-10B
AP-3 AP-3A
AP-2B0
AP-2A
AP-9A AP-9I AP-9B
AP-1R

PZ-2B PZ-2I PZ-2A
PZ-1B PZ-1I PZ-1A

ASH POND C
ASH POND B
ASH POND A'
ASH POND A
ASH POND D

N

0 500 1,000

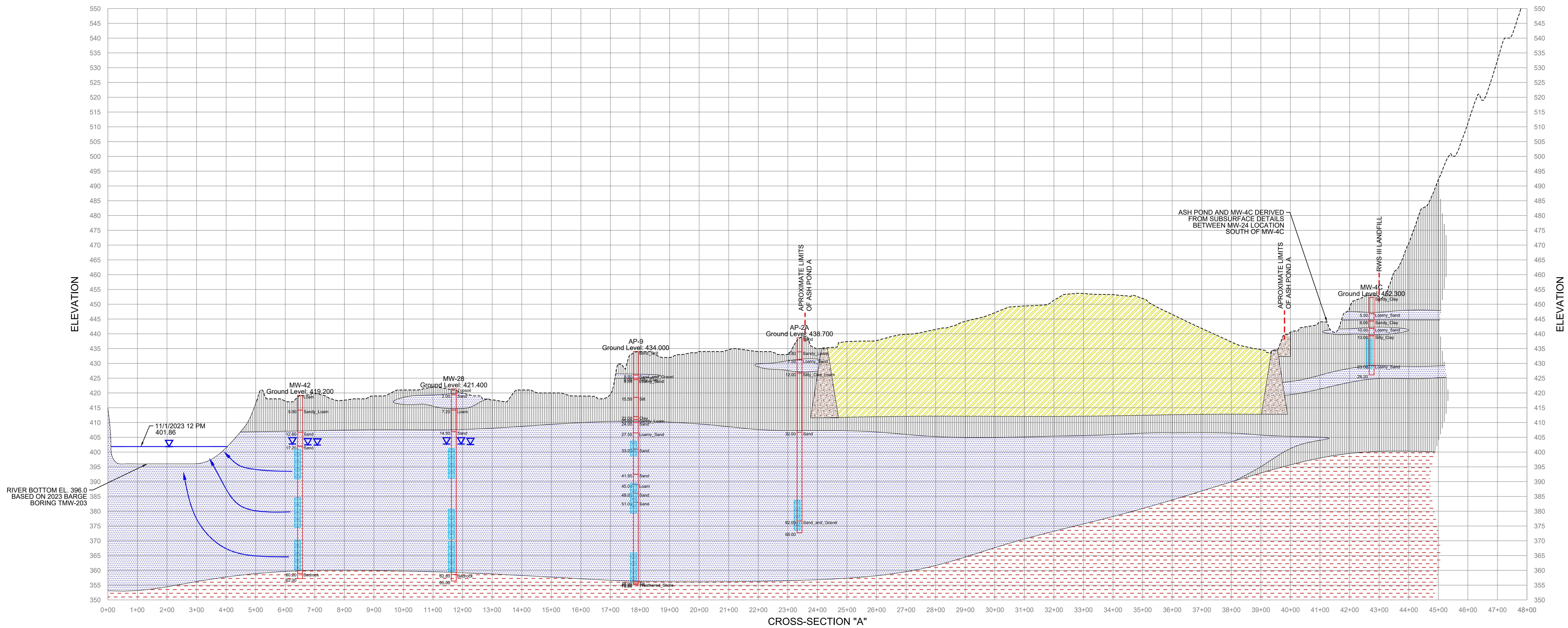
SCALE: 1" = 1,000'

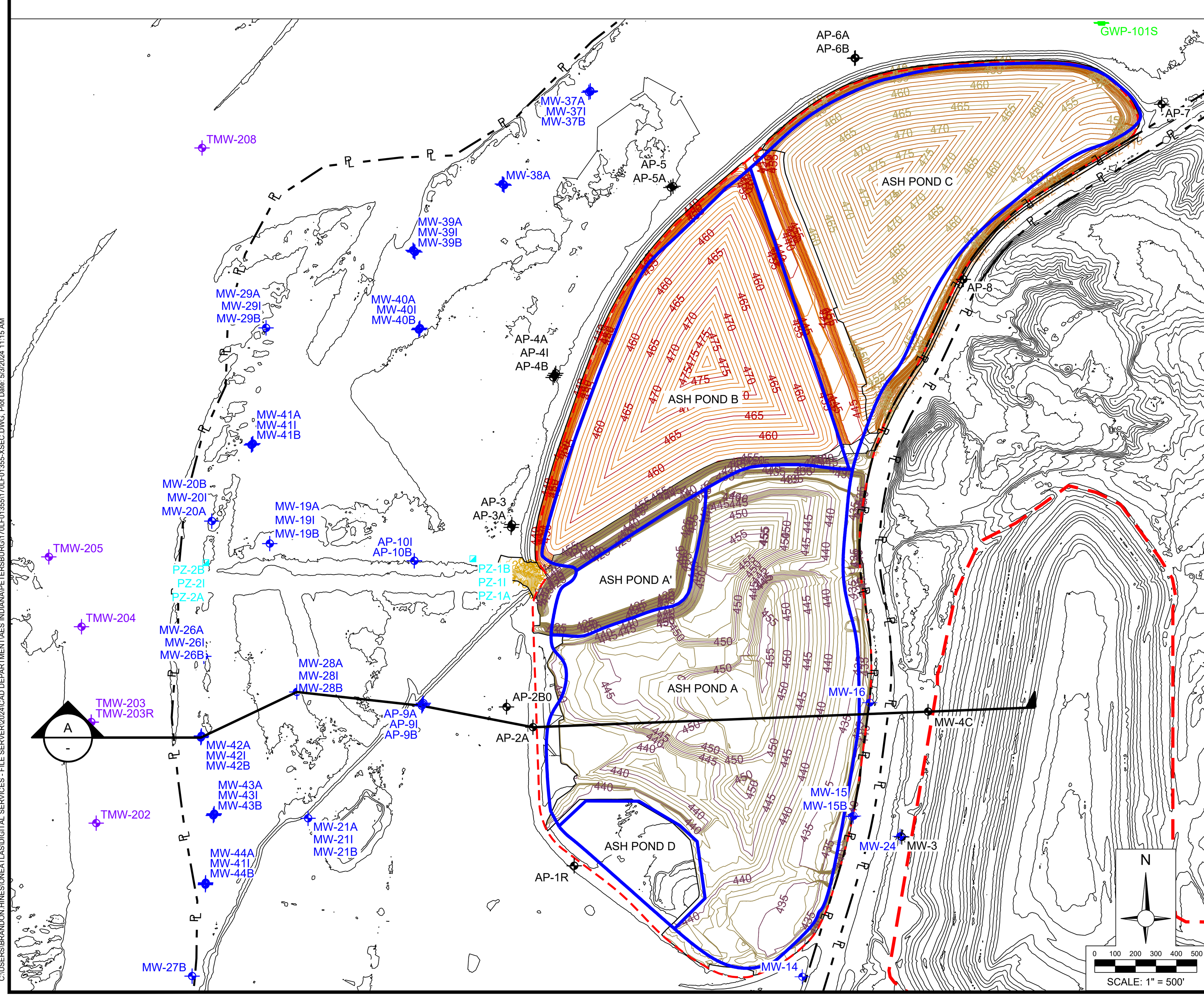
SURFACE WATER SAMPLING LOCATION MAP

AES INDIANA PETERSBURG GENERATING STATION
ASH POND SYSTEM
PETERSBURG, INDIANA

Project Number:	170LF01355
Date:	04/26/2024
Drn. By:	BH
Ckd. By:	MB
Scale:	AS SHOWN
Figure:	1

C:\USERS\BRANDON.HINES\ONEATLAS\DIGITAL SERVICES - FILE SERVER\2024\CAD DEPARTMENT\AES INDIANA\PETERSBURG\170LF01355\170LF01355-SURFACE WATER SAMPLES.DWG, FIG1





LEGEND:

- FINE GRAINED UNCONSOLIDATED DEPOSITS TYPICALLY DESCRIBED AS LOAM, SANDY LOAM, AND SANDY, SILTY CLAY
- GRANULAR UNCONSOLIDATED DEPOSITS DESCRIBED GENERALLY AS SAND OR SAND AND GRAVEL
- FILL MATERIAL
- COAL ASH
- BEDROCK (SHALE AND BURDEN GROUP: SHALE, SILTSTONE, AND CLAY STONE)
- LITHOLOGY CONTACT (DASHED WHERE INFERRED)
- EXISTING TOPOGRAPHY
- STATIC WATER LEVEL ELEVATION (MEASURED MARCH 4, 2024)

WELL/BORING NO.
Ground Level: 483.05

463.55 SILT LOAM
WATER ELEVATION NOVEMBER 8, 2021
460.00
SOIL OR BEDROCK DESCRIPTION
461.05 SANDY LOAM
429.45 SANDSTONE
ELEVATION OF THE LOWER CONTACT
428.35 SHALE

SCALE
HORIZONTAL SCALE 1"= 200'
VERTICAL SCALE 1"= 20'

Revision:
Project Number: 170LF01355
Date: 05/03/2024
Scale: AS SHOWN
Ckd. By: MB
Drn. By: BH

Company Name:

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Drawing Title:
GEOLOGIC CROSS SECTION AND STATIC WATER LEVELS
NOVEMBER 1, 2023
SURFACE WATER SAMPLING ANALYSIS PLAN
PETERSBURG GENERATING STATION

Sheet: 2

Appendix A: Field Data Sheets

Facility: Petersburg Generating Station	Location: Pike County, Indiana					
	Event (month/day/year):					
Sample and Field Analysis Information:	Sample Location ID:	SC-1	SB-1	SC-2	SB-2	SC-3
Date/Time of Sample Collection						
Sampling Device						
Flow Rate (gallons per minute or liters per minute)						
Filter Device (for dissolved metals, if applicable)						
pH, standard units						
Dissolved Oxygen, %						
Specific conductance, umhos/cm						
Temperature, degrees Celsius						
Sample Appearance (color / odor / turbidity)						
Weather Conditions During Sample Collection						

Sample and Field Analysis Information:	Sample Location ID:	SB-3				
Date/Time of Sample Collection						
Sampling Device						
Flow Rate (gallons per minute or liters per minute)						
Filter Device (for dissolved metals)						
pH, standard units						
Dissolved Oxygen, %						
Specific conductance, umhos/cm						
Temperature, degrees Celsius						
Sample Appearance (color / odor / turbidity)						
Weather Conditions During Sample Collection						

Comments:					

Facility: Petersburg Generating Station	**Location: Pike County, Indiana**	
	Event (month/day/year):	
Operator Names/Signatures:		
	Print	Signature
	Print	Signature
	Print	Signature
	Print	Signature
	Print	Signature
	Print	Signature
Comments:		

Quality Assurance Sample Summary:

Trip Blank Shipped?: Date, Time, and Location of Field Blank _____

Preparation: _____

Selected Well for Duplicate Sample: Selected Well used for MS/MSD bottles: _____

MS/MSD Note: Do not log MS/MSD as a separate sample on the COC. Rather, fill an extra bottle set with groundwater from the selected well, label all bottles with the selected well ID, and print "MS/MSD this sample" in the remarks column in the same row that documents the selected well. The "Number of Containers" noted for this selected well will be greater than other wells.

Appendix B: Equipment Manual

YSI Environmental

Pure Data for a Healthy Planet.™

YSI 556 MPS
Multi Probe System

Operations Manual

Contents

1. Safety

1.1 General Safety Information

Read all safety information in this manual carefully before using the YSI 556 Multi-Probe System (MPS). Reagents that are used to calibrate and check this instrument may be hazardous to your health. Take a moment to review *Appendix D Health and Safety*.

⚠ **WARNING**

Warnings are used in this manual when misuse of the instrument could result in death or serious injury to a person.

⚠ **CAUTION**

Cautions are used in this manual when misuse of the instrument could result in mild or serious injury to a person and/or damage to equipment.

⚠ **IMPORTANT SAFETY INSTRUCTIONS!**

⚠ **SAVE THESE INSTRUCTIONS!**

⚠ In essence, the most important safety rule for use of the YSI 556 MPS is to utilize the instrument ONLY for purposes documented in this manual. This is particularly true of the YSI 6117 rechargeable battery pack that contains nickel metal hydride (NiMH) batteries. The user should be certain to read all of the safety precautions outlined below before using the instrument.

⚠ YSI 6117 Rechargeable Battery Pack Safety Information

⚠ **Restrictions on Usage**

1. Never dispose of the battery pack in a fire.
2. Do not attempt to disassemble the YSI 6117 battery pack.
3. Do not tamper with any of the electronic components or the batteries within the battery pack. Tampering with either the electronic circuitry or the batteries will result in the voiding of the warranty and the compromising of the system performance, but, more importantly, can cause safety

hazards which result from overcharging such as overheating, venting of gas, and loss of corrosive electrolyte.

4. Do not charge the battery pack outside the 0–40°C temperature range.
5. Do not use or store the battery at high temperature, such as in strong direct sunlight, in cars during hot weather, or directly in front of heaters.
6. Do not expose the battery pack to water or allow the terminals to become damp.
7. Avoid striking or dropping the battery pack. If the pack appears to have sustained damage from these actions or malfunctions after an impact or drop, the user should not attempt to repair the unit. Instead, contact YSI Customer Service. Refer to *Appendix E Customer Service*.
8. If the battery pack is removed from the YSI 556 MPS, do not store it in pockets or packaging where metallic objects such as keys can short between the positive and negative terminals.

⚠ Precautions for Users with Small Children

Keep the battery pack out of reach of babies and small children.

⚠ Danger Notifications – Misuse creates a STRONG possibility of death or serious injury.

FAILURE TO CAREFULLY OBSERVE THE FOLLOWING PROCEDURES AND PRECAUTIONS CAN RESULT IN LEAKAGE OF BATTERY FLUID, HEAT GENERATION, BURSTING, AND SERIOUS PERSONAL INJURY.

1. Never dispose of the battery pack in a fire or heat it.
2. Never allow the positive and negative terminals of the battery pack to become shorted or connected with electrically conductive materials. When the battery pack has been removed from the YSI 556 MPS, store it in a heavy plastic bag to prevent accidental shorting of the terminals.

3. Never disassemble the battery pack and do not tamper with any of the electronic components or the batteries within the battery pack. The battery pack is equipped with a variety of safety features. Accidental deactivation of any of these safety features can cause a serious hazard to the user.
4. The NiMH batteries in the battery pack contain a strong alkaline solution (electrolyte). The alkaline solution is extremely corrosive and will cause damage to skin or other tissues. If any fluid from the battery pack comes in contact with a user's eyes, immediately flush with clean water and consult a physician immediately. The alkaline solution can damage eyes and lead to permanent loss of eyesight.

⚠ Warning Notifications – Misuse creates a possibility of death or serious injury

1. Do not allow the battery pack to contact freshwater, seawater, or other oxidizing reagents that might cause rust and result in heat generation. If a battery becomes rusted, the gas release vent may no longer operate and this failure can result in bursting.
2. If electrolyte from the battery pack contacts the skin or clothing, thoroughly wash the area immediately with clean water. The battery fluid can irritate the skin.

⚠ Caution Notifications – Misuse creates a possibility of mild or serious injury or damage to the equipment.

1. Do not strike or drop the battery pack. If any impact damage to the battery pack is suspected, contact YSI Customer Service. Refer to *Appendix E Customer Service*.
2. Store the battery pack out of reach of babies and small children.
3. Store the battery pack between the temperatures of -20 and 30°C.
4. Before using the battery pack, be sure to read the operation manual and all precautions carefully. Then store this information carefully to use as a reference when the need arises.

⚠ YSI 616 Cigarette Lighter Charger Safety Information

1. This section contains important safety and operating instructions for the YSI 556 MPS cigarette lighter battery charger (YSI 616; RadioShack Number 270-1533E). BE SURE TO SAVE THESE INSTRUCTIONS.
2. Before using the YSI 616 cigarette lighter charger, read all instructions and cautionary markings on battery charger, battery pack, and YSI 556 MPS.
3. Charge the YSI 6117 battery pack with the YSI 616 cigarette lighter charger ONLY when the YSI 6117 is installed in the YSI 556 MPS.
4. Do not expose charger to rain, moisture, or snow.
5. Use of an attachment not recommended or sold by the battery charger manufacturer may result in a risk of fire, electric shock, or injury to persons.
6. To reduce risk of damage to cigarette lighter and cord, pull by cigarette lighter rather than cord when disconnecting charger.
7. Make sure that the cord is located so that it will not be stepped on, tripped over, or otherwise subjected to damage or stress.
8. Do not operate charger with damaged cord or cigarette lighter connector – replace it immediately.
9. Do not operate charger if it has received a sharp blow, been dropped, or otherwise damaged in any way; contact YSI Customer Service. Refer to *Appendix E Customer Service*.
10. Do not disassemble charger other than to change the fuse as instructed. Replace the part or send it to YSI Product Service if repair is required (refer to *Appendix E Customer Service*). Incorrect reassembly may result in a risk of electric shock or fire.
11. To reduce risk of electric shock, unplug charger before attempting any maintenance or cleaning. Turning off controls will not reduce this risk.

⚠ YSI 556 MPS Water Leakage Safety Information

The YSI 556 MPS has been tested and shown to comply with IP67 criterion, i.e. submersion in 1 meter of water for 30 minutes with no leakage into either the battery compartment or the main case. However, if the instrument is submersed for periods of time in excess of 30 minutes, leakage may occur with subsequent damage to the batteries, the rechargeable battery pack circuitry, and/or the electronics in the main case.

If leakage into the battery compartment is observed when using alkaline C cells, remove batteries, dispose of batteries properly, and dry the battery compartment completely, ideally using compressed air. If corrosion is present on the battery terminals, contact YSI Customer Service for instructions. Refer to *Appendix E Customer Service*.

If leakage into the battery compartment is observed when using the YSI 6117 rechargeable battery pack, remove the battery assembly and set aside to dry. Return the battery pack to YSI Product Service for evaluation of possible damage. Finally dry the battery compartment completely, ideally using compressed air. If corrosion is present on the battery terminals, contact YSI Customer Service for instructions. Refer to *Appendix E Customer Service*.

⚠ **CAUTION:** If water has contacted the rechargeable battery pack, do not attempt to reuse it until it has been evaluated by YSI Product Service (refer to *Appendix E Customer Service*). Failure to follow this precaution can result in serious injury to the user.

If it is suspected that leakage into the main cavity of the case has occurred, remove the batteries immediately and return the instrument to YSI Product Service for damage assessment. Refer to *Appendix E Customer Service*.

⚠ **CAUTION:** Under no circumstances should the user attempt to open the main case.

2. General Information

2.1 Description

The rugged and reliable YSI 556 MPS (Multi-Probe System) combines the versatility of an easy-to-use, easy-to-read handheld unit with all the functionality of a multi-parameter system. Featuring a waterproof, impact-resistant case, the YSI 556 MPS simultaneously measures dissolved oxygen, conductivity, temperature, and optional pH and ORP. A simple cellular phone style keypad and large display make the instrument easy to use. The YSI 556 MPS is compatible with YSI EcoWatch™ for Windows™ software.

The YSI 556 MPS assists the user in conforming to Good Laboratory Practice (GLP) standards which help ensure that quality control/quality assurance methods are followed. Battery life is displayed with a fuel gauge, and the user can choose standard alkaline batteries or an optional rechargeable battery pack.

The 1.5 MB memory can store more than 49,000 data sets. Other options include a flow cell and barometer. The internal barometer can be user-calibrated and displayed along with other data, used in dissolved oxygen calibrations, and logged to memory for tracking changes in barometric pressure.

Features

- Waterproof - meets IP67 specifications
- Field-replaceable DO electrode module; pH and pH/ORP sensors
- Compatible with Ecowatch™ for Windows™ data analysis software
- Assists with Good Laboratory Practice Standards (GLP)
- Choice of DO membrane material for different applications
- Easy-to-use, screw-on cap DO membranes
- User-upgradable software from YSI website
- Three-year warranty on the instrument; one-year on the probe modules
- Available with 4,10, and 20 m cable lengths
- Stores over 49,000 data sets, time and date stamped

- Auto temperature compensating display contrast
- Optional barometer
- Optional rechargeable battery pack or standard alkaline batteries

2.2 Unpacking the Instrument

1. Remove the instrument from the shipping box. Note that the probe module and sensors are shipped in a separate box and will be unpacked later in Section *3.2 Unpacking the Probe Module*.

   NOTE: Do not discard any parts or supplies.

2. Use the packing list to ensure all items are present.

3. Visually inspect all components for damage.

   NOTE: If any parts are missing or damaged, contact your YSI Service Center immediately. Refer to *Appendix E Customer Service* or www.ysi.com.

2.3 Features of the YSI 556 Multi-Probe System

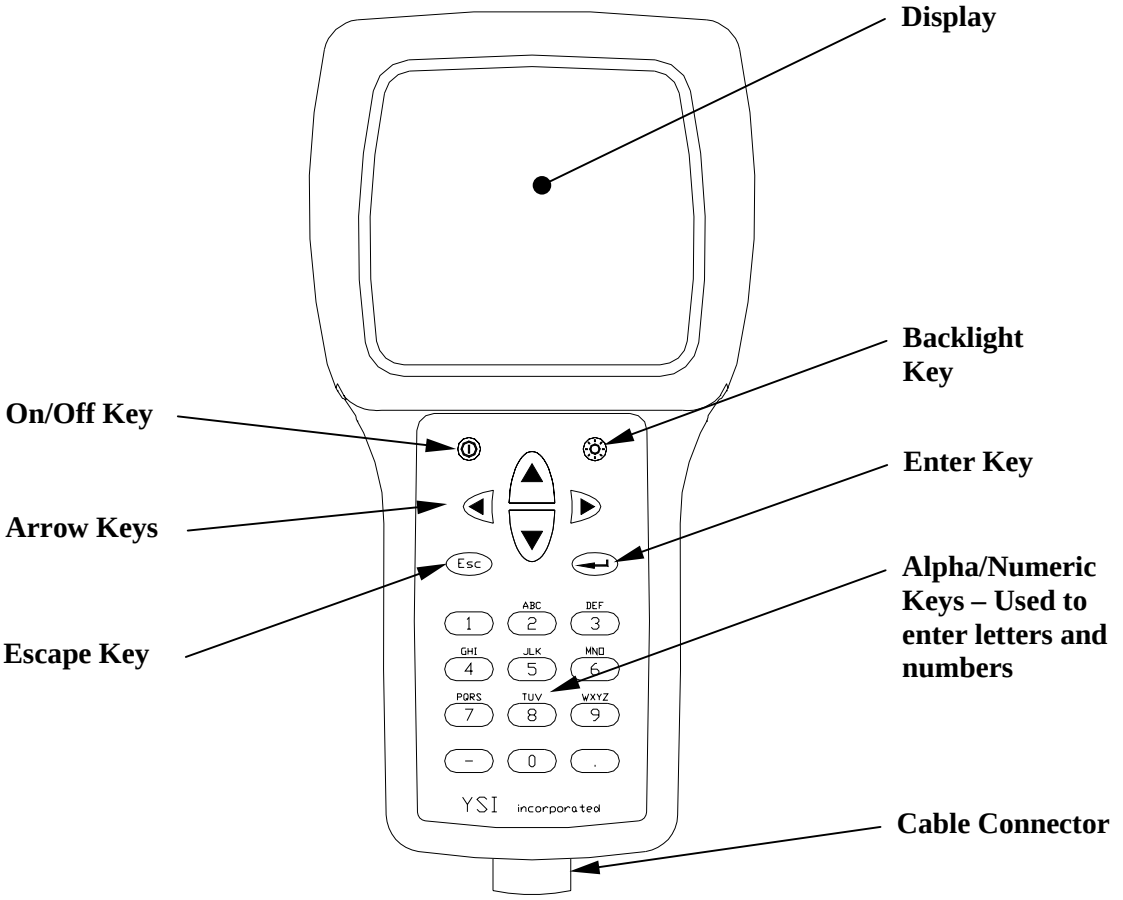


Figure 2.1 Front View of YSI 556 MPS

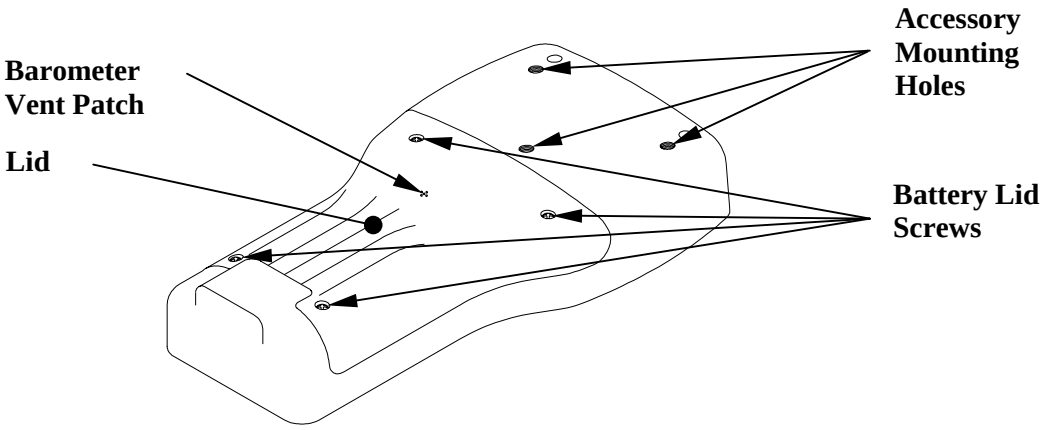


Figure 2.2 Back View of YSI 556 MPS

2.4 Batteries

2.4.1 Battery Life

Standard Alkaline Batteries

With the standard battery configuration of 4 alkaline C cells, the YSI 556 MPS will operate continuously for approximately 180 hours. Assuming a standard usage pattern when sampling of 3 hours of "on time" in a typical day, the alkaline cells will last approximately 60 days.

Optional Rechargeable Battery Pack

When fully charged, the optional rechargeable battery pack will provide approximately 50 hours of battery life.

2.4.2 Inserting 4 C Batteries

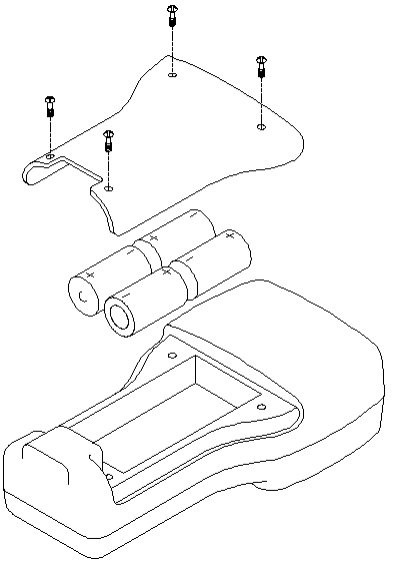


Figure 2.3 Inserting C Cells

⚠ **CAUTION: Install batteries properly to avoid damage to the instrument.**

1. Loosen the four screws in the battery lid on the back of the instrument using any screwdriver.
2. Remove the battery lid.
3. Insert four C batteries between the clips following the polarity (+ and -) labels on the bottom of the battery compartment.
4. Check gasket for proper placement on the battery lid.
5. Replace the battery lid and tighten the 4 screws securely and evenly.

   NOTE: Do not over-tighten the screws.

2.4.3 Inserting Optional Rechargeable Battery Pack

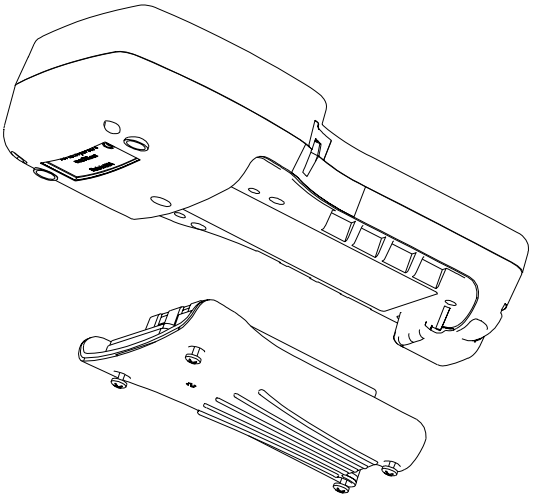


Figure 2.4 Inserting Battery Pack

⚠ **CAUTION: Read all cautions and warnings that come with the battery pack *before* using the battery pack.**

1. Loosen the four screws in the battery lid on the back of the instrument using any screwdriver.

2. Remove the C battery lid and store for future use. Remove C batteries, if installed.

3. Check for proper placement of gasket on the rechargeable battery pack and lid.

4. Install the rechargeable battery pack and lid and tighten the 4 screws securely and evenly.

   NOTE: Do not over tighten the screws.

2.4.4 Charging the Optional Rechargeable Battery Pack

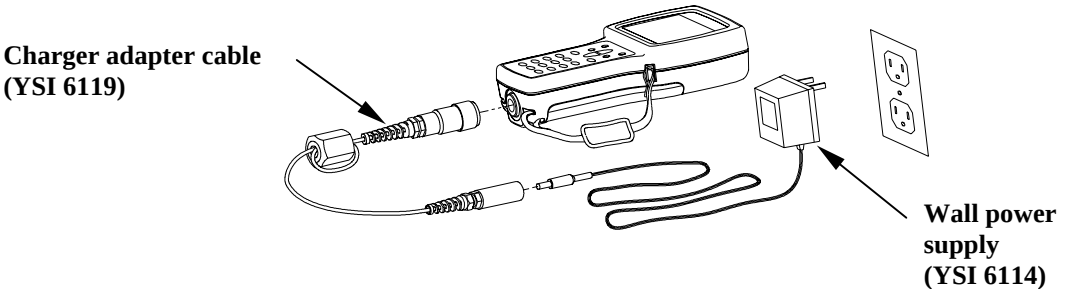


Figure 2.5 Charging the Battery Pack

⚠ **CAUTION: Do not use or store the battery pack at extreme temperatures such as in strong direct sunlight, in cars during hot weather or close to heaters.**

1. Install the rechargeable battery pack into the instrument as described in Section *2.4.3 Inserting Optional Rechargeable Battery Pack.*

2. Attach the charger adapter cable (YSI 6119) to the instrument.

   NOTE: Wall power supplies for use in countries outside the US and Canada can be found in *Appendix B Instrument Accessories*.

3. Insert the barrel connector of the wall power supply into the barrel of the adapter cable.

⚠ **CAUTION: Do not charge the battery pack continuously for more than 48 hours.**

⚠ **CAUTION: Do not drop or expose to water.**

⚠ **CAUTION: Do not charge the battery pack at temperatures below 0°C or above 40°C.**

4. Plug the wall power supply into an AC power outlet for approximately 2 hours to obtain an 80% to 90% charge and for 6 hours to get a full charge.

   NOTE: The battery pack can be recharged whether the instrument is on or off.

2.4.5 Storing the Battery Pack

Remove the battery pack from the instrument when the instrument will not be used for extended periods of time to prevent over discharge of the battery pack.

Store the battery pack in a heavy plastic bag to prevent accidental shorting of the terminals. Store between –20 and 30°C.

2.4.6 Optional Cigarette Lighter Charger

⚠ **CAUTION: Read all warnings and cautions that come with the charger before using the charger.**

⚠ **CAUTION: Only use cigarette lighter charger when *rechargeable* battery pack is inserted into instrument.**

⚠ **CAUTION: Do not mishandle cigarette lighter charger. Do not expose to moisture.**

1. Plug the barrel connector of the cigarette lighter charger into the mating end of the YSI 6119 Charger Adapter Cable.

2. Attach the MS-19 end of the YSI 6119 Charger Adapter Cable to the instrument.

3. Make one of the following modifications to the other end of the charger:

   Slide the adapter ring off the plug to use the device with an American or Japanese vehicle.

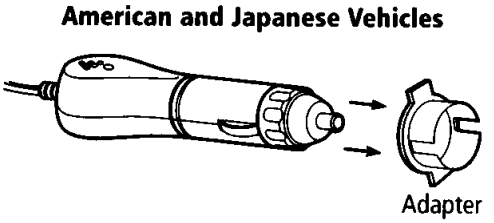


Figure 2.6 Charger Plug Adapter Use

Leave the adapter ring on the plug and position it so that the slots on the adapter ring line up with the plug's spring clips to use the device on a European vehicle.

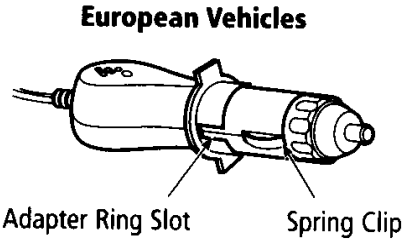


Figure 2.7 European Charger Plug Adapter Use

NOTE: If the charger stops working properly, refer to Section *13 Troubleshooting*.

2.5 Power On

Press and release the on/off button in the upper left corner of the instrument keypad to turn the instrument on or off. See Figure 2.1 Front View of YSI 556 MPS.

2.6 Setting Display Contrast

The display contrast automatically compensates for temperature changes. However, under extreme temperature conditions you may wish to optimize the display by manual adjustment as follows:

1. Press and *hold down* the backlight key in the upper right corner of the keypad and press the “up” arrow to increase (darken) the contrast.

2. Press and *hold down* the backlight key in the upper right corner of the keypad and press the “down” arrow to decrease (lighten) the contrast.

2.7 Backlight

Press and *release* the backlight key in the upper right corner of the keypad to turn the backlight on or off. See Figure 2.1 Front View of YSI 556 MPS.

NOTE: The backlight turns off automatically after two minutes of non-use.

2.8 General Screen Features

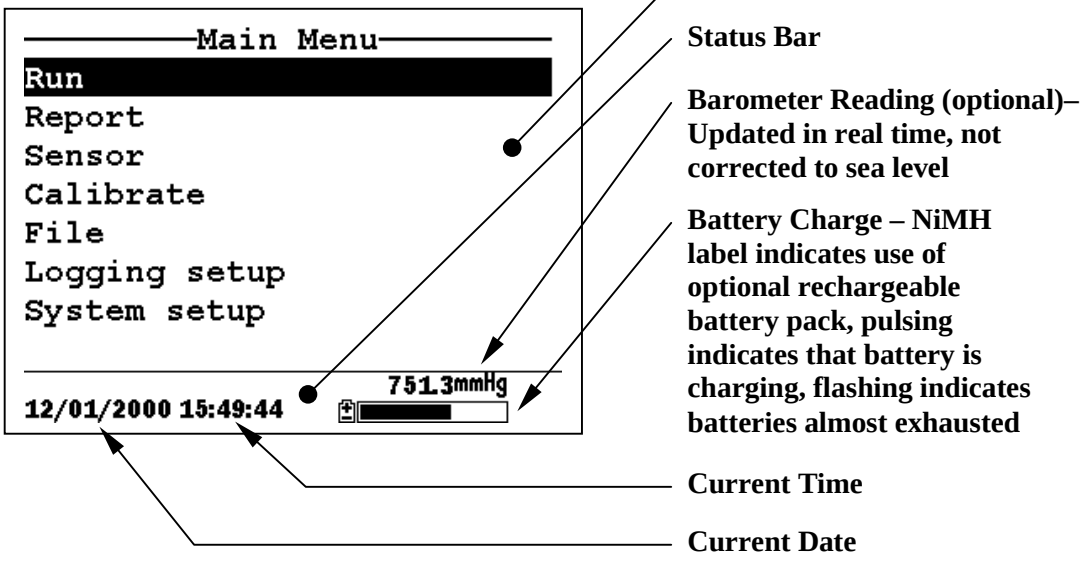


Figure 2.8 Main Menu Screen

2.9 Keypad Use

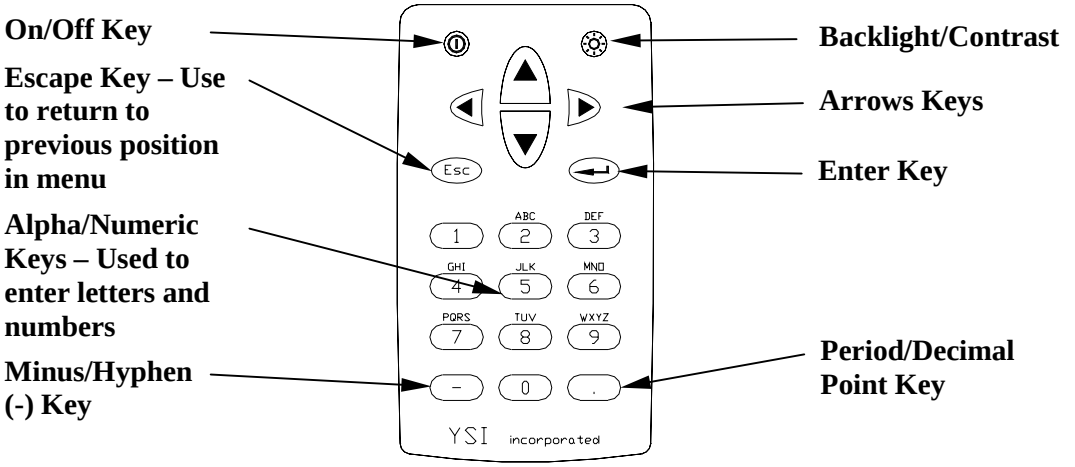


Figure 2.9 Keypad Features

KEY	LETTER/ NUMBER
1	1
2	ABC2abc3
3	DEF3def3
4	GHI4ghi4
5	JKL5jkl5
6	MNO6mno6
7	PQRS7pqrs7
8	TUV8tuv8
9	WXYZ9wxyz9
0	0

Figure 2.10 Keypad Letters & Numbers

1. See Figure 2.10 Keypad Letters & Numbers and press the appropriate key repeatedly until letter or number desired appears in display.

NOTE: Press the key repeatedly in rapid succession to get to the desired letter or number. If you pause for more than a

second, the cursor automatically scrolls to the right to prepare for the next input.

EXAMPLE 1: Press the **6** key *once* and *release* to display an uppercase “M.”

EXAMPLE 2: Press the **6** key *four times* and *release* to display the number “6.”

EXAMPLE 3: Press the **6** key *five times* and *stop* to display a lowercase “m.”

2. Press the left arrow key to go back and reenter a number or letter that needs to be changed.

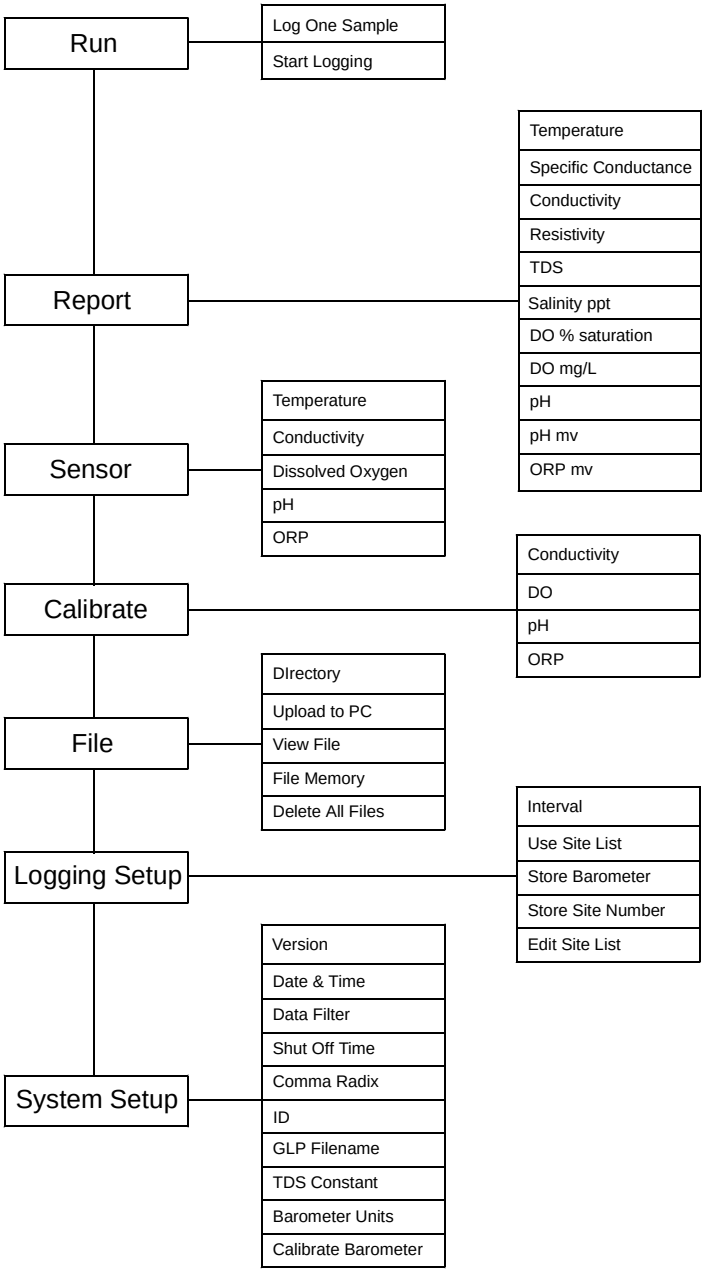
3. Press the **Enter** key when your entry is complete.

NOTE: The instrument software permits only numeric entries in many instances, such as when setting the clock or entering calibration parameters.

2.10 Instrument Reset

The YSI 556 MPS is characterized by sophisticated software that should provided trouble-free operation. However as with all high-capability software packages, it is always possible that the user will encounter circumstances in which the instrument does not respond to keypad entry. If this occurs, the instrument function can easily be restored by removing and then reapplying battery power. Simply remove either your C-cells or rechargeable battery pack from the battery compartment, wait 30 seconds and then replace the batteries. See Section *2.4 Batteries* for battery removal/reinstallation instructions.

2.11 Menu Flowchart



3. Probe Module

3.1 Introduction

The YSI 5563 Probe module is used for measuring dissolved oxygen, temperature, conductivity, and optional pH and ORP. The probe module is rugged, with the sensors enclosed in a heavy duty probe sensor guard with attached sinking weight. A 4, 10 or 20 meter cable is directly connected to the probe module body making it waterproof. An MS-19 connector at the end of the cable makes the YSI 5563 fully compatible with the YSI 556 Multi-Probe System.

3.2 Unpacking the Probe Module

1. Remove the YSI 5563 Probe module from the shipping boxes.

   NOTE: Do not discard any parts or supplies.

2. Use the packing list to ensure all items are present.

3. Visually inspect all components for damage.

   NOTE: If any parts are missing or damaged, contact your YSI Service Center immediately. Refer to *Appendix E Customer Service* or www.ysi.com.

3.3 Features of the YSI 5563 Probe Module

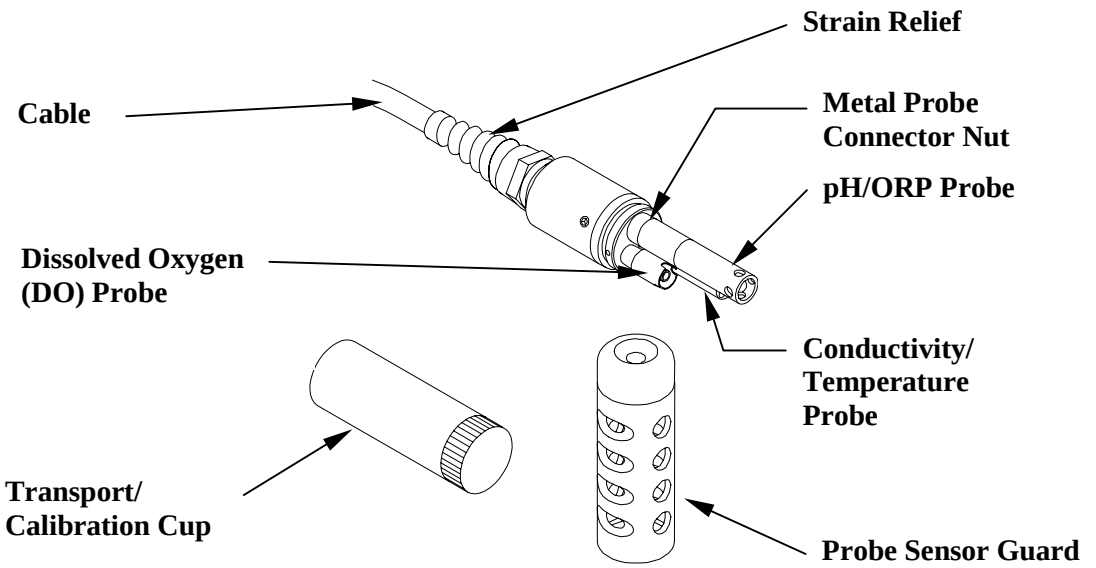


Figure 3.1 Probe Module

3.4 Preparing the Probe Module

To prepare the probe module for calibration and operation, you need to install the sensors into the connectors on the probe module bulkhead. In addition to sensor installation, you need to install a new DO membrane cap.

3.4.1 Sensor Installation

Whenever you install, remove or replace a sensor, it is extremely important that the entire probe module and all sensors be thoroughly dried prior to the removal of a sensor or a sensor port plug. This will prevent water from entering the port. Once you remove a sensor or plug, examine the connector inside the probe module sensor port. If any moisture is present, use compressed air to completely dry the connector. If the connector is corroded, return the probe module to your dealer or directly to YSI Customer Service. Refer to *Appendix E Customer Service*.

Conductivity/Temperature and pH, pH/ORP Sensor Installation

1. Unscrew and remove the probe sensor guard.

2. Using the sensor installation tool supplied in the YSI 5511 maintenance kit, unscrew and remove the sensor port plugs.

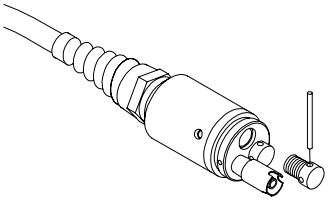


Figure 3.2 Port Plug Removal

3. Locate the port with the connector that corresponds to the sensor that is to be installed.

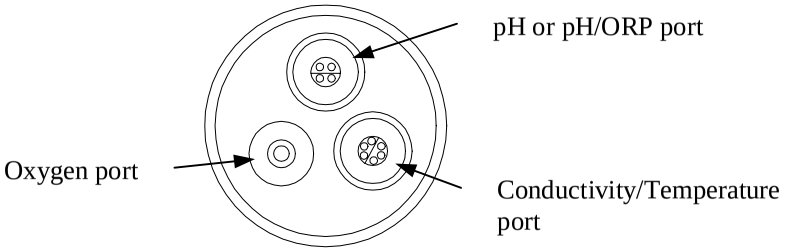


Figure 3.3 Sensor Port Identification

4. Apply a thin coat of o-ring lubricant (supplied in the YSI 5511 maintenance kit) to the o-rings on the connector side of the sensor (see Figure 3.4 O-Ring Lubrication).

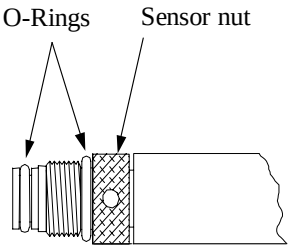


Figure 3.4 O-Ring Lubrication

⚠ **CAUTION:** Make sure that there are NO contaminants between the O-ring and the sensor. Contaminants that are present under the O-ring may cause the O-ring to leak.

5. Be sure the probe module sensor port is free of moisture and then insert the sensor into the correct port. Gently rotate the sensor until the two connectors align.

6. With connectors aligned, screw down the sensor nut using the sensor installation tool.

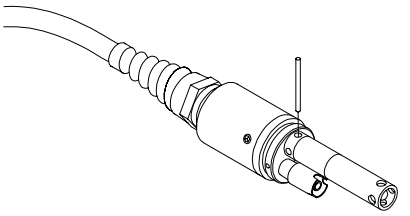


Figure 3.5 Sensor Installation

⚠ **CAUTION:** Do not cross thread the sensor nut. Tighten the nut until it is flush with the face of the probe module bulkhead. Do not over tighten.

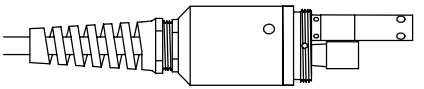


Figure 3.6 Bulkhead Seating

7. Repeat steps 3-6 for any other sensors.

8. Replace the probe sensor guard.

Dissolved Oxygen Sensor Installation

The YSI 5563 comes with the DO sensor already installed. Refer to Section *11.1.2 DO Sensor Replacement* for instructions on installing the YSI 558 Replaceable DO Module Kit.

3.4.2 Membrane Cap Selection

The YSI 5563 is shipped with a YSI 5909 kit that contains membrane caps made with 2 mil polyethylene (PE), a material which should be ideal for most field applications of the 556. However, YSI also offers membrane caps made with two other materials (1 mil polyethylene and 1 mil Teflon) which some users may also prefer. All membranes available for the 556/5563 system provide comparable accuracy if used properly. The difference between the two thicknesses of PE is found in the trade-off of flow dependence and response time as described below. Teflon is offered because some users may prefer to continue using the traditional membrane material used by YSI. To avoid confusion, the membrane caps are color coded as described below and can be ordered in kits as noted:

1 mil Teflon – Black Caps (Kit = YSI 5906)
1 mil Polyethylene (PE) – Yellow Caps (Kit = YSI 5908)
2 mil Polyethylene (PE) – Blue Caps (Kit = YSI 5909)

The 1 mil Teflon caps will offer traditional, reliable performance for most dissolved oxygen applications. The 1 mil PE caps will provide a significantly faster dissolved oxygen response (as long as your 556 Data Filter is set correctly as described below in Sections 10.2 and 10.3.1)) while also giving readings which are significantly less flow dependent than the 1 mil Teflon caps. Finally, 2 mil PE caps will show a large reduction in flow dependence over 1 mil Teflon while not significantly increasing the response time. Generally, one of the PE caps is likely to provide better performance for your application.

IMPORTANT: No matter which type of membrane cap you select, you will also have to confirm your selection in the 556

software from the Sensor menu as described in Section *4 Sensors*.

3.4.3 Membrane Cap Installation

NOTE: The YSI 5563 DO sensor (already installed in the probe module) was shipped dry. A shipping membrane was installed to protect the electrode. **A new membrane cap must be installed before the first use**.

1. Unscrew and remove the probe sensor guard.
2. Unscrew, remove, and discard the old membrane cap.
3. Thoroughly rinse the sensor tip with distilled water.
4. Prepare the electrolyte according to the directions on the electrolyte solution bottle.
5. Hold the new membrane cap and fill it at least 1/2 full with the electrolyte solution.
6. Screw the membrane cap onto the sensor moderately tight. A small amount of electrolyte should overflow.

⚠ **CAUTION:** Do not touch the membrane surface.

7. Screw the probe sensor guard on moderately tight.

3.5 Transport/Calibration Cup

The YSI 5563 Probe module has been supplied with a convenient transport/calibration cup. This cup is an ideal container for calibration of the different sensors, minimizing the amount of solution needed. Refer to Section *6 Calibrate*.

3.5.1 Transport/Calibration Cup Installation

1. Remove probe sensor guard, if already installed.

2. Ensure that an o-ring is installed in the o-ring groove on the threaded end of the probe module body.

3. Screw the transport/calibration cup on the threaded end of the probe module and securely tighten.

   NOTE: Do not overtighten as this could cause damage to the threaded portions.

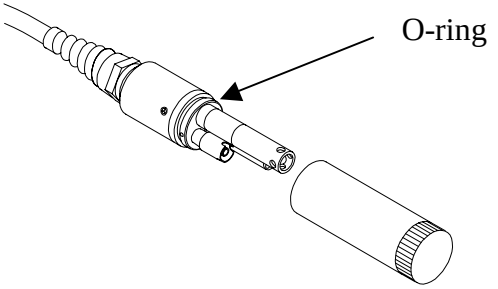


Figure 3.7 Transport/Calibration Cup Installation

3.6 Instrument/Cable Connection

Attach the cable to the instrument as follows:

1. Line up the pins and guides on the cable with the holes and indentations on the cable connector at the bottom of the YSI 556 instrument. See Figure 2.1 Front View of YSI 556 MPS.

2. Holding the cable firmly against the cable connector, turn the locking mechanism clockwise until it snaps into place.

Remove the cable from the instrument by turning the cable connector counterclockwise until the cable disengages from the instrument.

The Sensors Enabled screen allows the user to enable or disable each of the sensors and select which membrane material will be used for the dissolved oxygen sensor. Disabled sensors will not be displayed on the screen in real time or logged to files.

1. Press the **On/off** key to display the run screen.

2. Press the **Escape** key to display the main menu screen.

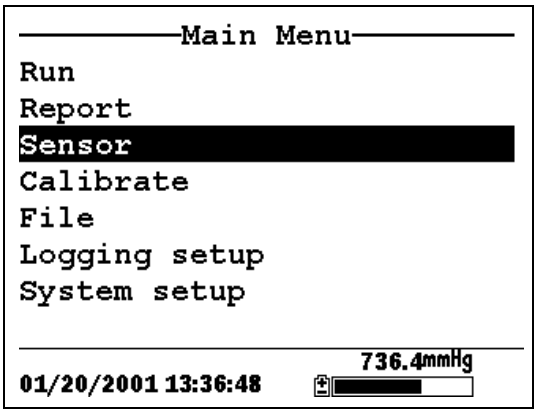


Figure 4.1 Main Menu Screen

3. Use the arrow keys to highlight the **Sensor** selection.

4. Press the **Enter** key to display the sensors enabled screen.

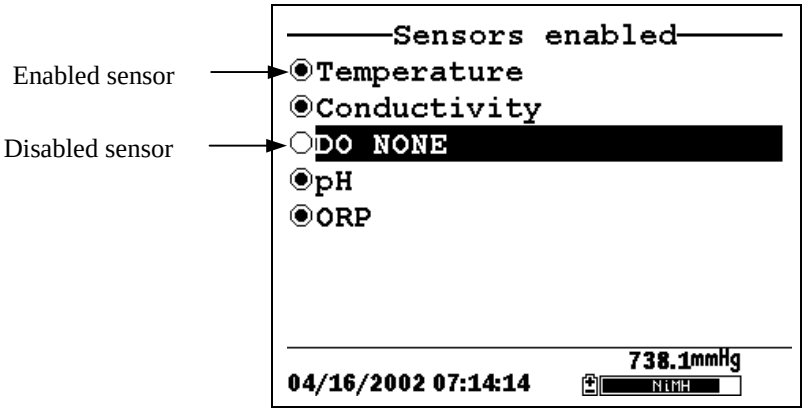


Figure 4.2 Sensors Enabled Screen Before DO Membrane Selection

A black dot to the left of a sensor indicates that sensor is enabled. Sensors with an empty circle are disabled.

Highlight the “DO None” entry as shown above and press **Enter** to display the membrane choice screen. Consult Section *3.4.2 Membrane Cap Selection* for information on the advantages of each type of membrane material. Blue membrane caps using 2 mil polyethylene (PE) were shipped with your YSI 5563 and are likely to be the best choice for most 556 field applications.

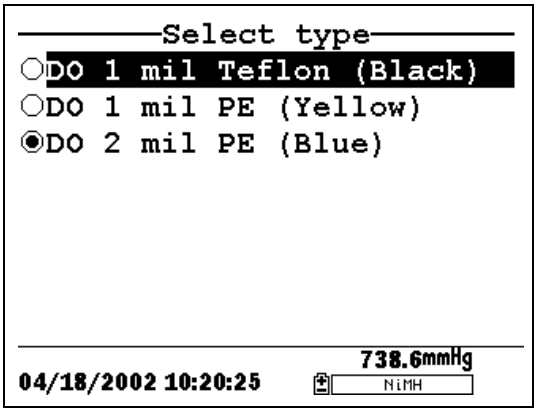


Figure 4.3 Membrane Selection Screen

Highlight the desired membrane choice – in this case, 2 mil PE -- and press Enter to activate your selection with a dot to the left of the screen. Then press **Escape** to return to the Sensor menu that now shows your DO membrane selection.

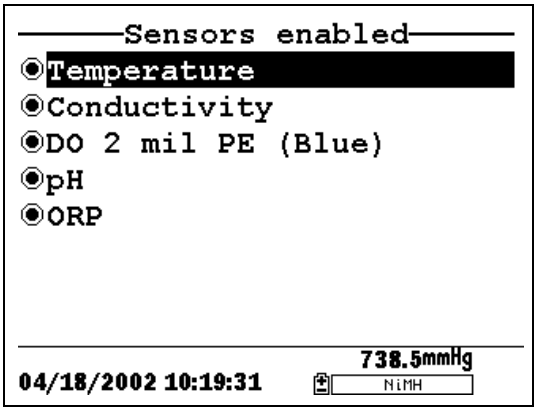


Figure 4.4 Sensors Enabled Screen After DO Membrane Selection

NOTE: The Temperature sensor cannot be disabled. Most other sensors require temperature compensation for accurate readings. In addition, the conductivity sensor must be activated in order to obtain accurate dissolved oxygen mg/L readings.

5. Use the arrow keys to highlight the sensor you want to change, then press the **Enter** key to enable or disable it.

6. Repeat step 5 for each sensor you want to change.

7. Press the **Escape** key to return to the main menu screen.

5. Report

The Report Setup screen allows the user to select which sample parameters and units the YSI 556 MPS will display on the screen. It does NOT determine which parameters are logged to memory. Refer to Section *4 Sensors*.

1. Press the **On/off** key to display the run screen.

2. Press the **Escape** key to display the main menu screen.

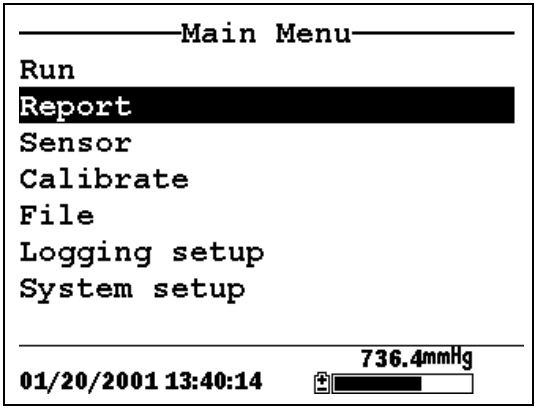


Figure 5.1 Main Menu

3. Use the arrow keys to highlight the **Report** selection.

4. Press the **Enter** key to display the report setup screen.

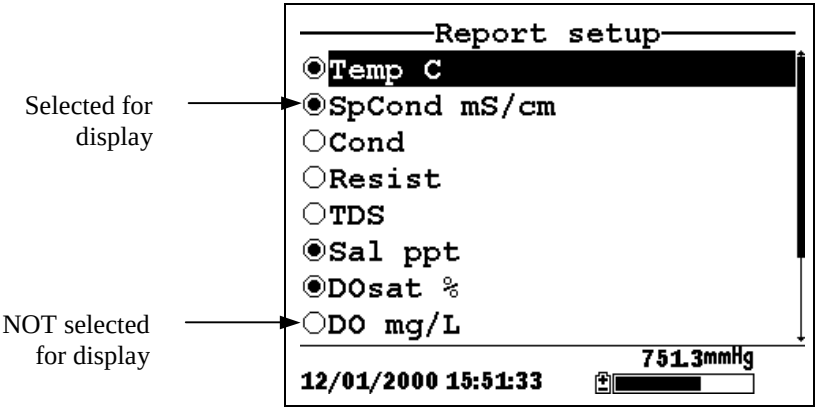


Figure 5.2 Report Setup Screen

NOTE: A black dot to the left of a parameter indicates that parameter is selected for display. Parameters with an empty circle will not be displayed.

NOTE: You may have to scroll down past the bottom of the screen to see all the parameters.

5. Use the arrow keys to highlight the parameter you want to change, then press the **Enter** key. If you can't find the parameter you want, even after scrolling down past the bottom of the screen, the sensor used for that parameter is disabled. Refer to Section *4 Sensors*.

6. If you selected Temperature, Specific Conductivity, Conductivity, Resistance or Total Dissolved Solids, the Units screen will appear.

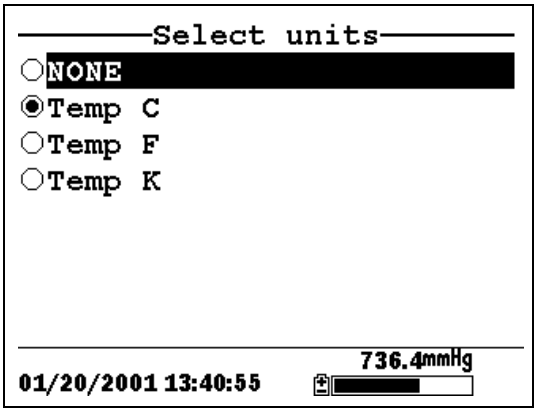


Figure 5.3 Units Screen

7. Use the arrow keys to select the units desired, then press the **Enter** key to return to the report setup screen.

If you selected Salinity, Dissolved Oxygen %, Dissolved Oxygen mg/L, pH, pH mv or ORP mv, the selection dot will simply toggle on or off.

8. Repeat steps 5 and 6 for each parameter you want to change.

NOTE: All parameters may be enabled at the same time.

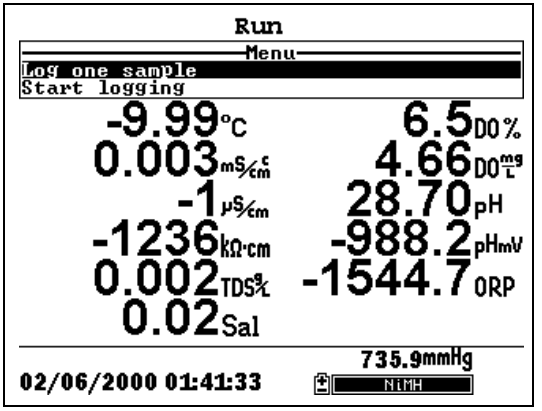


Figure 5.4 All Parameters Displayed

9. Press the **Escape** key to return to the Main menu screen.

6. Calibrate

All of the sensors, except temperature, require periodic calibration to assure high performance. You will find specific calibration procedures for all sensors that require calibration in the following sections. If a sensor listed is not installed in your probe module, skip that section and proceed to the next sensor until the calibration is complete.

⚠ **CAUTION:** Reagents that are used to calibrate and check this instrument may be hazardous to your health. Take a moment to review *Appendix D Health and Safety*. Some calibration standard solutions may require special handling.

6.1 Getting Ready to Calibrate

6.1.1 Containers Needed to Calibrate the Probe Module

The transport/calibration cup that comes with your probe module serves as a calibration chamber for all calibrations and minimizes the volume of calibration reagents required.

Instead of the transport/calibration cup, you may use laboratory glassware to perform calibrations. If you do not use the transport/calibration cup that is designed for the probe module, you are cautioned to do the following:

- ✓ Perform all calibrations with the Probe Sensor Guard installed. This protects the sensors from possible physical damage.
- ✓ Use a ring stand and clamp to secure the probe module body to prevent the module from falling over. Most laboratory glassware has convex bottoms.
- ✓ Ensure that all sensors are immersed in calibration solutions. Many of the calibrations factor in readings from other sensors (e.g., temperature sensor). The top vent hole of the conductivity sensor must also be immersed during some calibrations.

6.1.2 Calibration Tips

1. If you use the Transport/Calibration Cup for dissolved oxygen (DO) calibration, make certain to loosen the seal to allow pressure equilibration before calibration. The DO calibration is a water-saturated air calibration.
2. The key to successful calibration is to ensure that the sensors are completely submersed when calibration values are entered. Use recommended volumes when performing calibrations.
3. For maximum accuracy, use a small amount of previously used calibration solution to pre-rinse the probe module. You may wish to save old calibration standards for this purpose.
4. Fill a bucket with ambient temperature water to rinse the probe module between calibration solutions.
5. Have several clean, absorbent paper towels or cotton cloths available to dry the probe module between rinses and calibration solutions. Shake the excess rinse water off of the probe module, especially when the probe sensor guard is installed. Dry off the outside of the probe module and probe sensor guard. Making sure that the probe module is dry reduces carry-over contamination of calibrator solutions and increases the accuracy of the calibration.
6. If you are using laboratory glassware for calibration, you do not need to remove the probe sensor guard to rinse and dry the sensors between calibration solutions. The inaccuracy resulting from simply rinsing the sensor compartment and drying the outside of the guard is minimal.
7. If you are using laboratory glassware, remove the stainless steel weight from the bottom of the probe sensor guard by turning the weight counterclockwise. When the weight is removed, the calibration solutions have access to the sensors without displacing a lot of fluid. This also reduces the amount of liquid that is carried between calibrations.
8. Make certain that port plugs are installed in all ports where sensors are not installed. It is extremely important to keep these electrical connectors dry.

6.1.3 Recommended Volumes

Follow these instructions to use the transport/calibration cup for calibration procedures.

- ✓ Ensure that an o-ring is installed in the o-ring groove of the transport/calibration cup bottom cap, and that the bottom cap is securely tightened.

  NOTE: Do not over-tighten as this could cause damage to the threaded portions.

- ✓ Remove the probe sensor guard, if it is installed.
- ✓ Remove the o-ring, if installed, from the probe module and inspect the installed o-ring on the probe module for obvious defects and, if necessary, replace it with the extra o-ring supplied.
- ✓ Some calibrations can be accomplished with the probe module upright or upside down. A separate clamp and stand, such as a ring stand, is required to support the probe module in the inverted position.
- ✓ To calibrate, follow the procedures in the next section, Calibration Procedures. The approximate volumes of the reagents are specified below for both the upright and upside down orientations.
- ✓ When using the Transport/Calibration Cup for dissolved oxygen % saturation calibration, make certain that the vessel is vented to the atmosphere by loosening the bottom cap or cup assembly and that approximately 1/8” of water is present in the cup.

Sensor to Calibrate	Upright	Upside Down
Conductivity	55ml	55ml
pH/ORP	30ml	60ml

Table 6.1 Calibration Volumes

6.2 Calibration Procedures

6.2.1 Accessing the Calibrate Screen

1. Press the **On/off** key to display the run screen.
2. Press the **Escape** key to display the main menu screen.
3. Use the arrow keys to highlight the **Calibrate** selection.

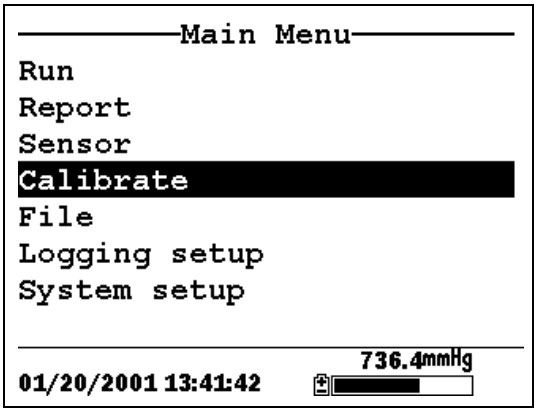


Figure 6.1 Main Menu

4. Press the **Enter** key. The Calibrate screen is displayed.

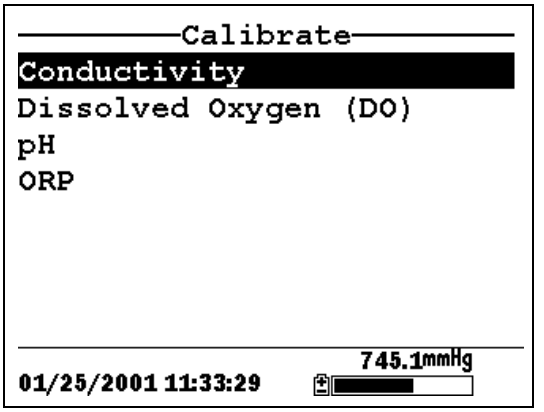


Figure 6.2 Calibrate Screen

6.2.2 Conductivity Calibration

This procedure calibrates specific conductance (recommended), conductivity and salinity. Calibrating any one option automatically calibrates the other two.

1. Go to the calibrate screen as described in Section 6.2.1 Accessing the Calibrate Screen.

2. Use the arrow keys to highlight the **Conductivity** selection. See Figure 6.2 Calibrate Screen.

3. Press **Enter.** The Conductivity Calibration Selection Screen is displayed.

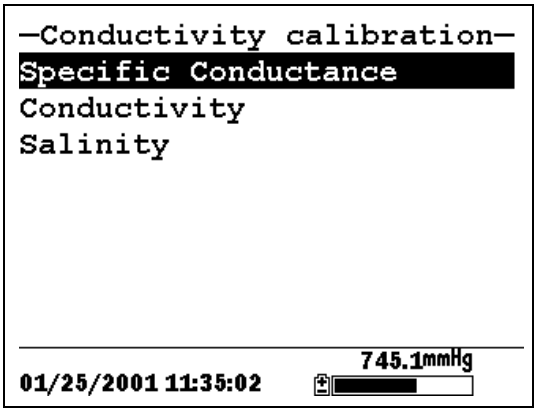


Figure 6.3 Conductivity Calibration Selection Screen

4. Use the arrow keys to highlight the Specific Conductance selection.

5. Press **Enter.** The Conductivity Calibration Entry Screen is displayed.

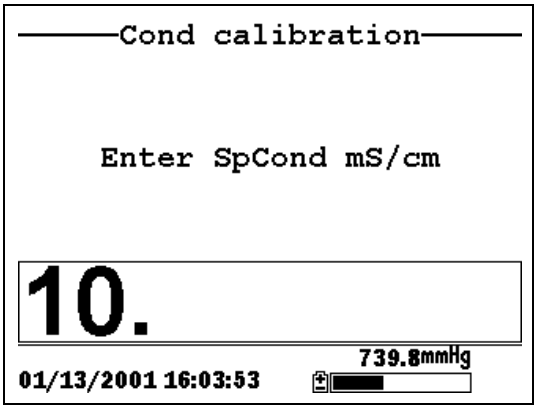


Figure 6.4 Conductivity Calibration Entry Screen

6. Place the correct amount of conductivity standard (see Table 6.1 Calibration Volumes) into a clean, dry or pre-rinsed transport/calibration cup.

⚠ **WARNING**: Calibration reagents may be hazardous to your health. See *Appendix D Health and Safety* for more information.

NOTE: For maximum accuracy, the conductivity standard you choose should be within the same conductivity range as the samples you are preparing to measure. However, we do not recommend using standards less than 1 mS/cm. For example:

- ✓ For fresh water use a 1 mS/cm conductivity standard.
- ✓ For brackish water use a 10 mS/cm conductivity standard.
- ✓ For seawater use a 50 mS/cm conductivity standard.

NOTE: Before proceeding, ensure that the sensor is as dry as possible. Ideally, rinse the conductivity sensor with a small amount of standard that can be discarded. Be certain that you avoid cross-contamination of solutions. Make certain that there are no salt deposits around the oxygen and pH/ORP sensors, particularly if you are employing standards of low conductivity.

7. Carefully immerse the sensor end of the probe module into the solution.

8. Gently rotate and/or move the probe module up and down to remove any bubbles from the conductivity cell.

   NOTE: The sensor must be completely immersed past its vent hole. Using the recommended volumes from Table 6.1 Calibration Volumes, should ensure that the vent hole is covered.

9. Screw the transport/calibration cup on the threaded end of the probe module and securely tighten.

   NOTE: Do not overtighten as this could cause damage to the threaded portions.

10. Use the keypad to enter the calibration value of the standard you are using.

    NOTE: Be sure to enter the value in **mS/cm at 25°C**.

11. Press **Enter**. The Conductivity Calibration Screen is displayed.

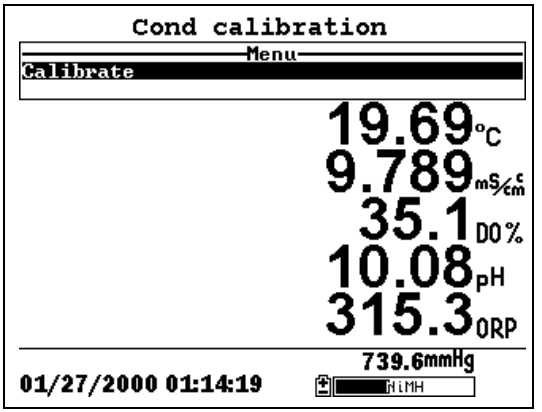


Figure 6.5 Conductivity Calibration Screen

12. Allow at least one minute for temperature equilibration before proceeding. The current values of all enabled sensors

will appear on the screen and will change with time as they stabilize.

13. Observe the reading under Specific Conductance. When the reading shows no significant change for approximately 30 seconds, press **Enter**. The screen will indicate that the calibration has been accepted and prompt you to press **Enter** again to Continue.

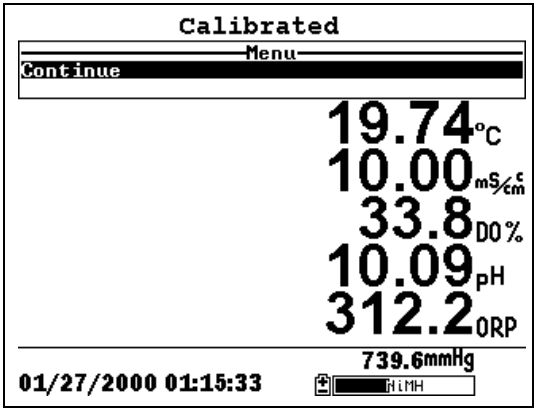


Figure 6.6 Calibrated

14. Press **Enter**. This returns you to the Conductivity Calibrate Selection Screen, See Figure 6.3 Conductivity Calibration Selection Screen.

15. Press **Escape** to return to the calibrate menu. See Figure 6.2 Calibrate Screen.

16. Rinse the probe module and sensors in tap or purified water and dry.

6.2.3 Dissolved Oxygen Calibration

This procedure calibrates dissolved oxygen. Calibrating any one option (% or mg/L) automatically calibrates the other.

1. Go to the calibrate screen as described in Section *6.2.1 Accessing the Calibrate Screen.*

NOTE: The instrument must be on for at least 20 minutes to polarize the DO sensor before calibrating.

2. Use the arrow keys to highlight the **Dissolved Oxygen** selection. See Figure 6.2 Calibrate Screen.
3. Press **Enter**. The dissolved oxygen calibration screen is displayed.

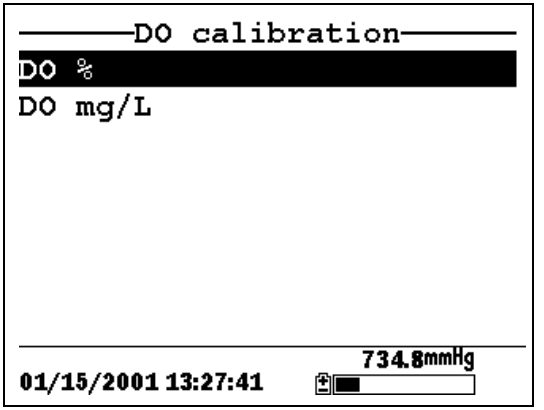


Figure 6.7 DO Calibration Screen

DO Calibration in % Saturation

1. Use the arrow keys to highlight the DO% selection.
2. Press **Enter**. The DO Barometric Pressure Entry Screen is displayed.

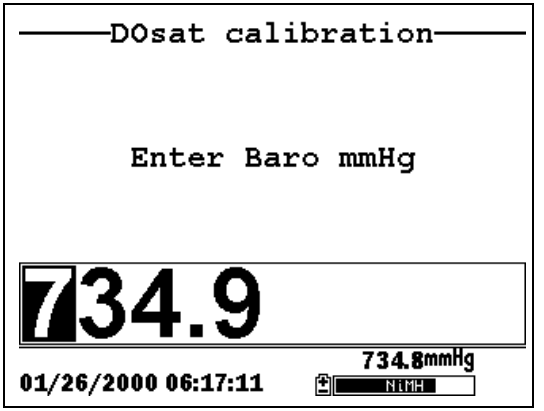


Figure 6.8 DO Barometric Pressure Entry Screen

3. Place approximately 3 mm (1/8 inch) of water in the bottom of the transport/calibration cup.

4. Place the probe module into the transport/calibration cup.

   NOTE: Make sure that the DO and temperature sensors are **not** immersed in the water.

5. Engage only 1 or 2 threads of the transport/calibration cup to ensure the DO sensor is vented to the atmosphere.

6. Use the keypad to enter the current local barometric pressure.

   NOTE: If the unit has the optional barometer, no entry is required.

   NOTE: Barometer readings that appear in meteorological reports are generally corrected to sea level and must be uncorrected before use (refer to Section *10.10 Calibrate Barometer, Step 2*).

7. Press **Enter**. The DO% saturation calibration screen is displayed.

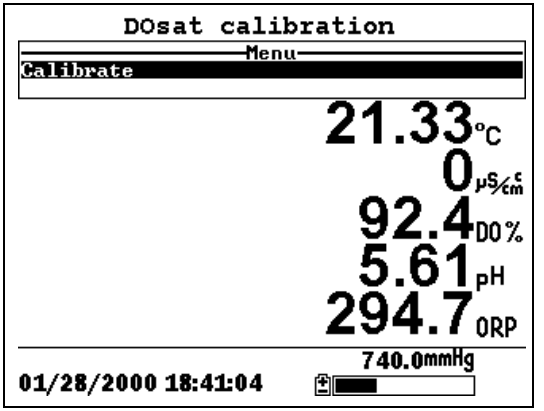


Figure 6.9 DO Sat Calibration Screen

8. Allow approximately ten minutes for the air in the transport/calibration cup to become water saturated and for

the temperature to equilibrate before proceeding. The current values of all enabled sensors will appear on the screen and will change with time as they stabilize.

9. Observe the reading under DO %. When the reading shows no significant change for approximately 30 seconds, press **Enter**. The screen will indicate that the calibration has been accepted and prompt you to press **Enter** again to Continue. See Figure 6.6 Calibrated.

10. Press **Enter**. This returns you to the DO calibration screen, See Figure 6.7 DO Calibration Screen.

11. Press **Escape** to return to the calibrate menu. See Figure 6.2 Calibrate Screen.

12. Rinse the probe module and sensors in tap or purified water and dry.

DO Calibration in mg/L

DO calibration in mg/L is carried out in a water sample which has a known concentration of dissolved oxygen (usually determined by a Winkler titration).

1. Go to the DO calibrate screen as described in Section *6.2.3 Dissolved Oxygen Calibration*, steps 1 through 3.

2. Use the arrow keys to highlight the **DO mg/L** selection.

3. Press **Enter**. The DO mg/L Entry Screen is displayed.

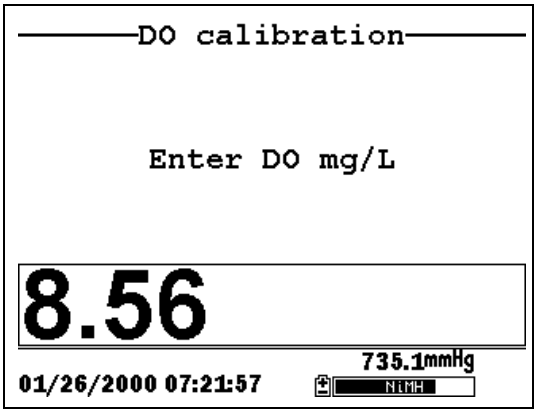


Figure 6.10 DO mg/L Entry Screen

4. Place the probe module in water with a known DO concentration.

NOTE: Be sure to completely immerse all the sensors.

5. Use the keypad to enter the known DO concentration of the water.

6. Press **Enter**. The Dissolved Oxygen mg/L Calibration Screen is displayed.

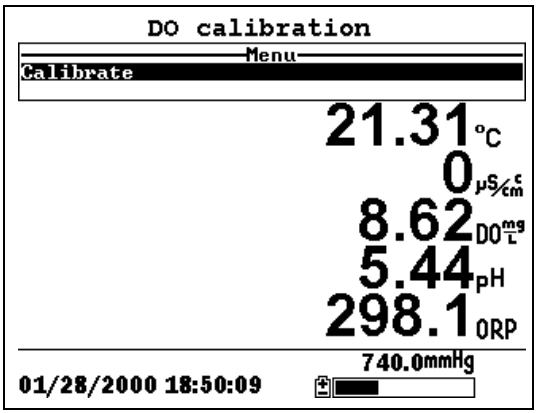


Figure 6.11 DO mg/L Calibration Screen

7. Stir the water with a stir bar, or by rapidly moving the probe module, to provide fresh sample to the DO sensor.

8. Allow at least one minute for temperature equilibration before proceeding. The current values of all enabled sensors will appear on the screen and will change with time as they stabilize.

9. Observe the DO mg/L reading, when the reading is stable (shows no significant change for approximately 30 seconds), press **Enter**. The screen will indicate that the calibration has been accepted and prompt you to press **Enter** again to Continue.

10. Press **Enter**. This returns you to the DO calibration screen. See Figure 6.7 DO Calibration Screen.

11. Press **Escape** to return to the calibrate menu. See Figure 6.2 Calibrate Screen.

12. Rinse the probe module and sensors in tap or purified water and dry.

6.2.4 pH Calibration

1. Go to the calibrate screen as described in *Section 6.2.1 Accessing the Calibrate Screen.*

2. Use the arrow keys to highlight the **pH** selection. See Figure 6.2 Calibrate Screen.

3. Press **Enter**. The pH calibration screen is displayed.

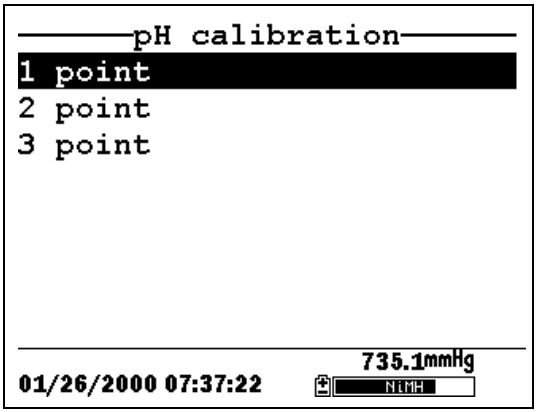


Figure 6.12 pH Calibration Screen

- Select the **1-point** option only if you are adjusting a previous calibration. If a 2-point or 3-point calibration has been performed previously, you can adjust the calibration by carrying out a one point calibration. The procedure for this calibration is the same as for a 2-point calibration, but the software will prompt you to select only one pH buffer.
- Select the **2-point** option to calibrate the pH sensor using only two calibration standards. Use this option if the media being monitored is known to be either basic or acidic. For example, if the pH of a pond is known to vary between 5.5 and 7, a two-point calibration with pH 7 and pH 4 buffers is sufficient. A three point calibration with an additional pH 10 buffer will not increase the accuracy of this measurement since the pH is not within this higher range.
- Select the **3-point** option to calibrate the pH sensor using three calibration solutions. In this procedure, the pH sensor is calibrated with a pH 7 buffer and two additional buffers. The 3-point calibration method assures maximum accuracy when the pH of the media to be monitored cannot be anticipated. The procedure for this calibration is the same as for a 2-point calibration, but the software will prompt you to select a third pH buffer.

4. Use the arrow keys to highlight the **2-point** selection.

5. Press **Enter**. The pH Entry Screen is displayed.

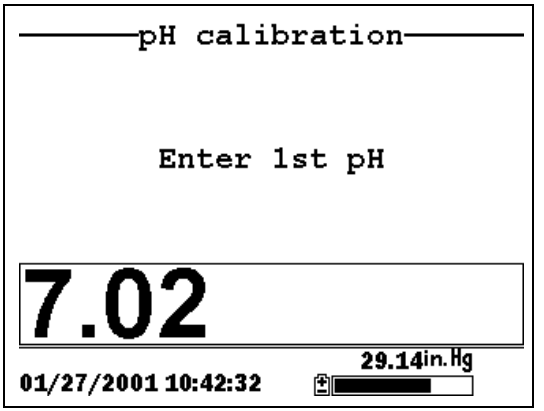


Figure 6.13 pH Entry Screen

6. Place the correct amount (see Table 6.1 Calibration Volumes) of pH buffer into a clean, dry or pre-rinsed transport/calibration cup.

⚠ **WARNING**: Calibration reagents may be hazardous to your health. See *Appendix D Health and Safety* for more information.

NOTE: For maximum accuracy, the pH buffers you choose should be within the same pH range as the water you are preparing to sample.

NOTE: Before proceeding, ensure that the sensor is as dry as possible. Ideally, rinse the pH sensor with a small amount of buffer that can be discarded. Be certain that you avoid cross-contamination of buffers with other solutions.

7. Carefully immerse the sensor end of the probe module into the solution.

8. Gently rotate and/or move the probe module up and down to remove any bubbles from the pH sensor.

NOTE: The sensor must be completely immersed. Using the recommended volumes from Table 6.1 Calibration Volumes, should ensure that the sensor is covered.

9. Screw the transport/calibration cup on the threaded end of the probe module and securely tighten.

NOTE: Do not overtighten as this could cause damage to the threaded portions.

10. Use the keypad to enter the calibration value of the buffer you are using **at the current temperature**.

NOTE: pH vs. temperature values are printed on the labels of all YSI pH buffers.

11. Press **Enter**. The pH calibration screen is displayed.

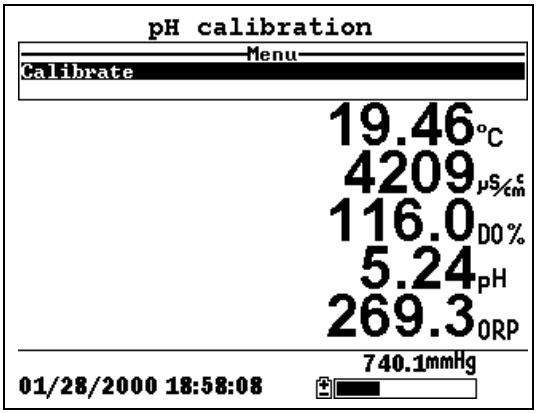


Figure 6.14 pH Calibration Screen

12. Allow at least one minute for temperature equilibration before proceeding. The current values of all enabled sensors will appear on the screen and will change with time as they stabilize.

13. Observe the reading under pH, when the reading shows no significant change for approximately 30 seconds, press **Enter**. The screen will indicate that the calibration has been accepted and prompt you to press **Enter** again to Continue.

14. Press **Enter**. This returns you to the Specified pH Calibration Screen, See Figure 6.13 pH Entry Screen.

15. Rinse the probe module, transport/calibration cup and sensors in tap or purified water and dry.

16. Repeat steps 6 through 13 above using a second pH buffer.

17. Press **Enter**. This returns you to the pH Calibration Screen, See Figure 6.12 pH Calibration Screen.

18. Press **Escape** to return to the calibrate menu. See Figure 6.2 Calibrate Screen.

19. Rinse the probe module and sensors in tap or purified water and dry.

6.2.5 ORP Calibration

1. Go to the calibrate screen as described in Section *6.2.1 Accessing the Calibrate Screen.*

2. Use the arrow keys to highlight the **ORP** selection. See Figure 6.2 Calibrate Screen.

3. Press **Enter**. The ORP calibration screen is displayed.

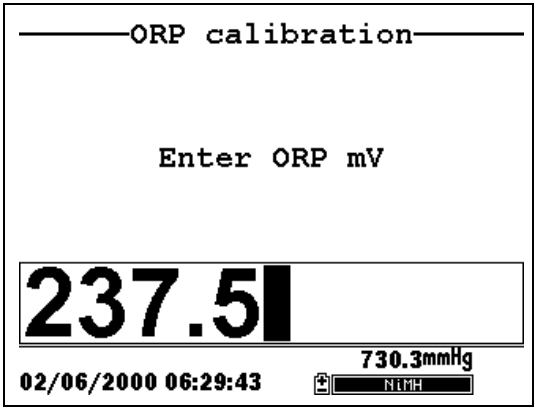


Figure 6.15 Specified ORP Calibration Screen

4. Place the correct amount (see Table 6.1 Calibration Volumes) of a known ORP solution (we recommend Zobell solution) into a clean, dry or pre-rinsed transport/calibration cup.

⚠ **WARNING**: Calibration reagents may be hazardous to your health. See *Appendix D Health and Safety* for more information.

NOTE: Before proceeding, ensure that the sensor is as dry as possible. Ideally, rinse the ORP sensor with a small amount of solution that can be discarded. Be certain that you avoid cross-contamination with other solutions.

5. Carefully immerse the sensor end of the probe module into the solution.

6. Gently rotate and/or move the probe module up and down to remove any bubbles from the ORP sensor.

NOTE: The sensor must be completely immersed. Using the recommended volumes from Table 6.1 Calibration Volumes should ensure that the sensor is covered.

7. Screw the transport/calibration cup on the threaded end of the probe module and securely tighten.

NOTE: Do not overtighten as this could cause damage to the threaded portions.

8. Use the keypad to enter the correct value of the calibration solution you are using at the current temperature. Refer to Table 6.2 Zobel Solution Values.

Temperature °C	Zobell Solution Value, mV
-5	270.0
0	263.5
5	257.0
10	250.5
15	244.0
20	237.5
25	231.0
30	224.5
35	218.0
40	211.5
45	205.0
50	198.5

Table 6.2 Zobel Solution Values

9. Press **Enter**. The ORP calibration screen is displayed.

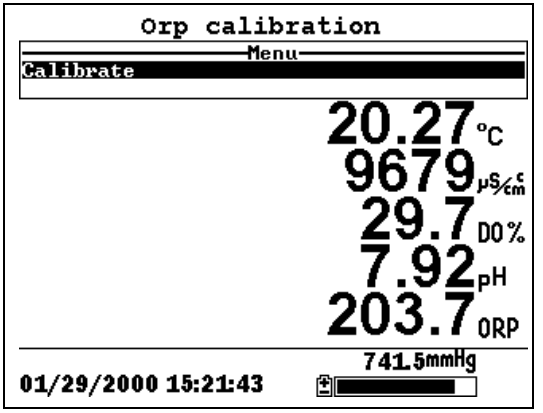


Figure 6.16 ORP Calibration Screen

10. Allow at least one minute for temperature equilibration before proceeding. The current values of all enabled sensors will appear on the screen and will change with time as they stabilize.

NOTE: Verify that the temperature reading matches the value you used in Table 6.2 Zobel Solution Values.

11. Observe the reading under ORP, when the reading shows no significant change for approximately 30 seconds, press **Enter**. The screen will indicate that the calibration has been accepted and prompt you to press **Enter** again to Continue.

12. Press **Enter**. This returns you to the Calibrate Screen. See Figure 6.2 Calibrate Screen.

13. Rinse the probe module and sensors in tap or purified water and dry.

6.3 Return to Factory Settings

1. Go to the calibrate screen as described in Section *6.2.1 Accessing the Calibrate Screen*.

2. Use the arrow keys to highlight the **Conductivity** selection. See Figure 6.2 Calibrate Screen.

   NOTE: We will use the Conductivity sensor as an example; however, this process will work for any sensor.

3. Press **Enter.** The Conductivity Calibration Selection Screen is displayed. See Figure 6.3 Conductivity Calibration Selection Screen.

4. Use the arrow keys to highlight the **Specific Conductance** selection.

5. Press **Enter.** The Conductivity Calibration Entry Screen is displayed. See Figure 6.4 Conductivity Calibration Entry Screen.

6. Press and hold the **Enter** key down and press the **Escape** key.

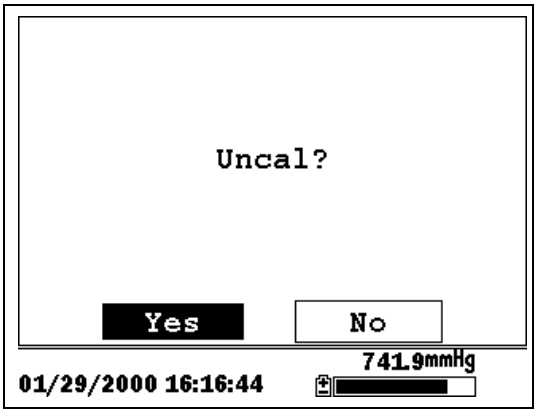


Figure 6.17 ORP Calibration Screen

7. Use the arrow keys to highlight the **YES** selection.

CAUTION: This returns a sensor to the factory settings. For example, in selecting to return specific conductance to the factory setting, salinity and conductivity will automatically return to their factory settings.

8. Press **Enter**. This returns you to the Conductivity Calibrate Selection Screen, See Figure 6.3 Conductivity Calibration Selection Screen.

9. Press **Escape** to return to the calibrate menu. See Figure 6.2 Calibrate Screen.

7. Run

The Run screen displays data from the sensors in real-time and allows the user to log sample data to memory for later analysis. Refer to Section *9 Logging* for details on logging sample data.

7.1 Real-Time Data

NOTE: Before measuring samples you must prepare the probe module (refer to Section *3.4 Preparing the Probe Module*), attach the probe module to the instrument (refer to Section *3.6 Instrument/Cable Connection*) and calibrate the sensors (refer to Section *6 Calibrate*).

1. Press the **On/off** key.

OR select Run from the main menu to display the run screen.

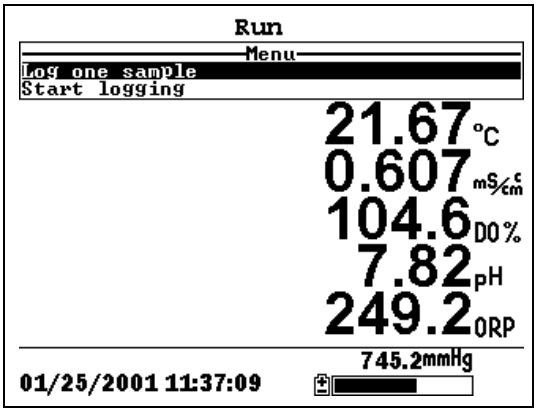


Figure 7.1 Run Screen

2. Make sure the probe sensor guard is installed.

3. Place the probe module in the sample. Be sure to completely immerse all the sensors.

4. Rapidly move the probe module through the sample to provide fresh sample to the DO sensor.

5. Watch the readings on the display until they are stable.

6. Refer to Section *9 Logging* for instructions on logging sample data.

8. File

The File menu allows the user to view, upload or delete sample data and calibration record files stored in the YSI 556 MPS.

8.1 Accessing the File Screen

1. Press the **On/off** key to display the run screen.

2. Press the **Escape** key to display the main menu screen.

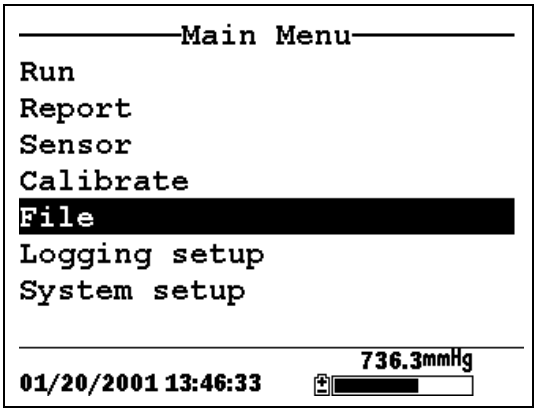


Figure 8.1 Main Menu Screen

3. Use the arrow keys to highlight the **File** selection.

4. Press the **Enter** key. The file screen is displayed.

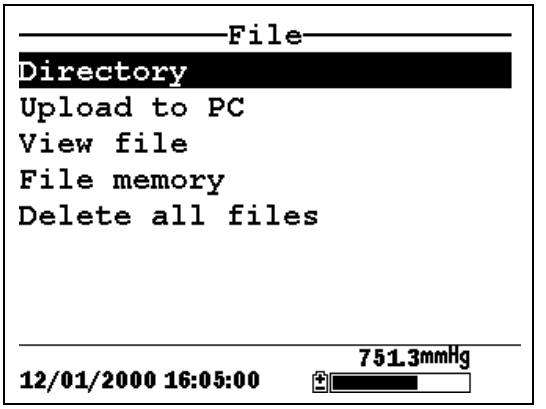


Figure 8.2 File Screen

8.2 Directory

1. Go to the file screen as described in Section *8.1 Accessing the File Screen*.

2. Use the arrow keys to highlight the **Directory** selection. See Figure 8.2 File Screen.

3. Press the **Enter** key. The file list screen is displayed.

   NOTE: Files are listed in the order in which they are logged to memory. Sample Data files have the file extension **.dat**, while Calibration Record files have the file extension **.glp**.

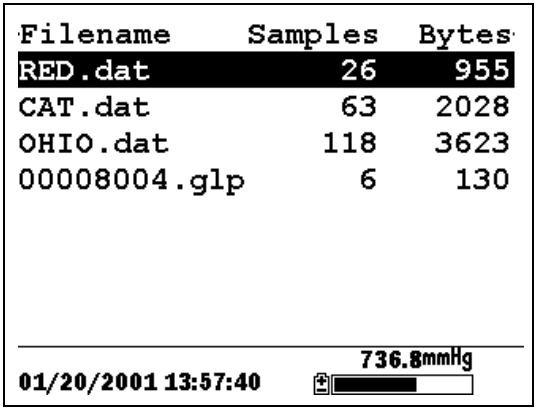


Figure 8.3 File List Screen

4. Use the arrow keys to highlight a file.

5. Press the **Enter** key. The file details screen is displayed.

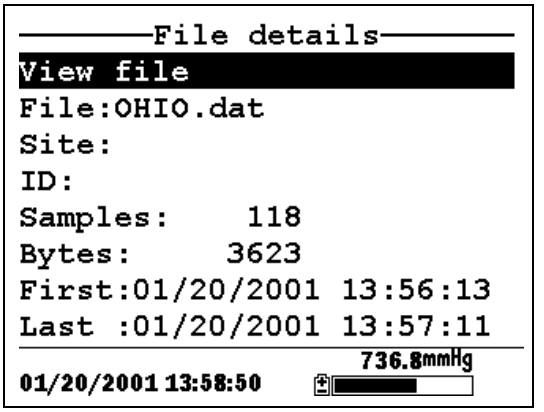


Figure 8.4 File Details Screen

6. Press the **Enter** key to view the file data. Refer to Section *8.3 View File* for details.

7. Press the **Escape** key repeatedly to return to the main menu screen.

8.3 View File

1. Go to the file screen as described in Section *8.1 Accessing the File Screen*. See Figure 8.2 File Screen.

2. Use the arrow keys to highlight the **View file** selection.

3. Press the **Enter** key. A list of files is displayed. See Figure 8.3 File List Screen.

4. Use the arrow keys to highlight an individual file.

   NOTE: You may have to scroll down to see all the files.

5. Press the **Enter** key. The file data is displayed with the file name at the top of the display.

   NOTE: If no file name was specified, the data is stored under the default name NONAME1.dat.

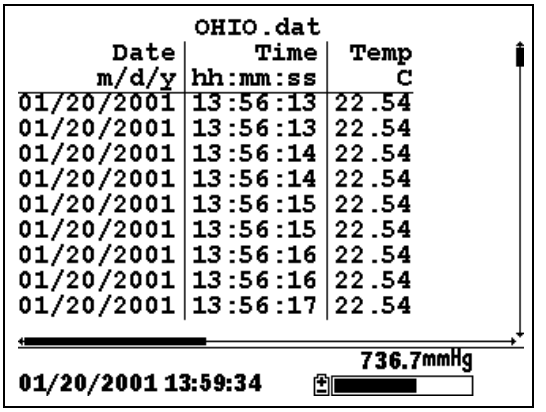


Figure 8.5 File Data Screen

6. Use the arrow keys to scroll horizontally and/or vertically to view all the data.

7. Press the **Escape** key repeatedly to return to the main menu screen.

8.4 Upload to PC

EcoWatch™ for Windows™ must be used as the PC software interface to the YSI 556 MPS. Refer to *Appendix G EcoWatch* for more information. EcoWatch for Windows is available at no cost via a download from the YSI Web Site (www.ysi.com) or by contacting YSI Customer Support. Refer to *Appendix E Customer Service.*

8.4.1 Upload Setup

1. Disconnect the YSI 5563 Probe Module from the YSI 556 MPS instrument.

2. Connect the YSI 556 MPS to a serial (Comm) port of your computer via the 655173 PC Interface cable as shown in the following diagram:

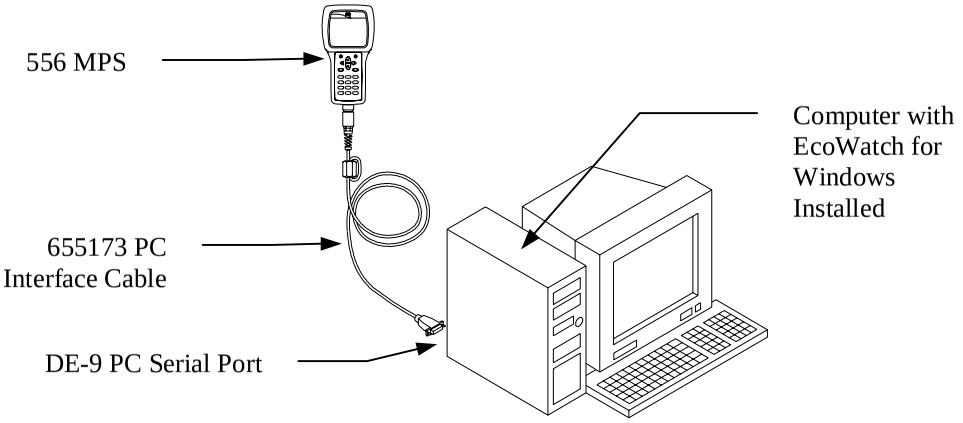


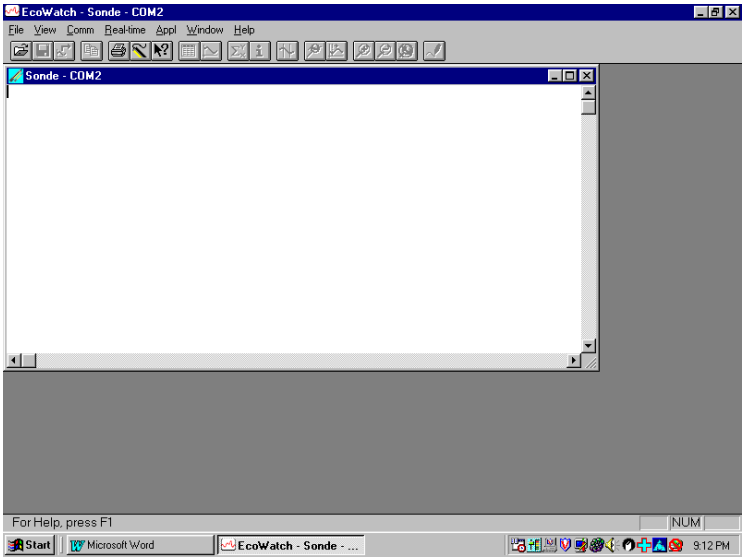
Figure 8.6 Computer/Instrument Interface

3. Open EcoWatch for Windows on your computer.

NOTE: See *Appendix G EcoWatch* for installation instructions.

4. Click on the sonde/probe icon  in the upper toolbar.

5. Set the Comm port number to match the port the YSI 556 MPS is connected to. After this setup procedure, the following screen will be present on your PC monitor:



8.4.2 Uploading a .DAT File

1. Setup the instrument as described in Section *8.4.1 Upload Setup*.

2. Go to the YSI 556 MPS file screen as described in Section *8.1 Accessing the File Screen.*

3. Use the arrow keys to highlight the **Upload to PC** selection. See Figure 8.2 File Screen.

4. Press the **Enter** key. The file list screen is displayed. See Figure 8.3 File List Screen.

5. Use the arrow keys to highlight the DAT file that you wish to transfer and press **Enter**, both the YSI 556 MPS and PC displays show the progress of the file transfer.

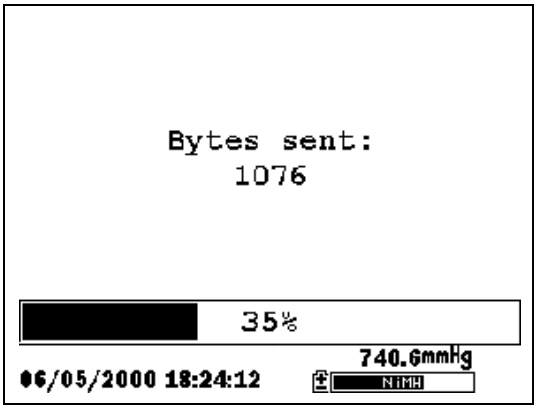
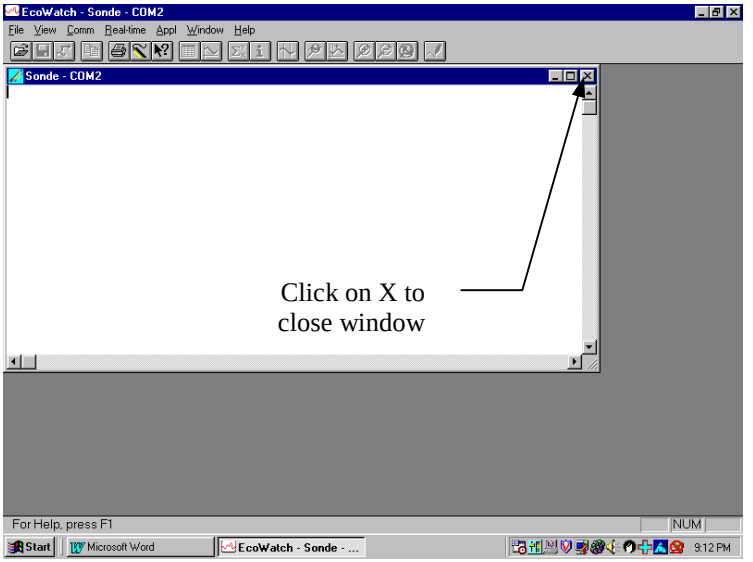


Figure 8.7 File Transfer Progress Screen

NOTE: After transfer, the file will be located in the C:\ECOWWIN\DATA folder of your PC, designated with a .DAT extension.

6. After the file transfer is complete, close the terminal window (small window on the PC) by clicking on the "X" at its upper right corner.



7. Press the **Escape** key on the YSI 556 MPS repeatedly to return to the main menu screen.

8.4.3 Uploading a Calibration Record (.glp) File

For more information on the calibration record, Refer to *Appendix H Calibration Record Information*.

1. Setup up the instrument as described in Section *8.4.1 Upload Setup*.

2. Go to the YSI 556 MPS file screen as described in Section *8.1 Accessing the File Screen.*

3. Use the arrow keys to highlight the **Upload to PC** selection. See Figure 8.2 File Screen.

4. Press the **Enter** key. The file list screen is displayed. See Figure 8.3 File List Screen.

5. Use the arrow keys to highlight the calibration record file that you wish to transfer and press **Enter.**

6. You will then be given a choice of uploading the file in three formats; **Binary, Comma & "" Delimited, and ASCII Text**.

   NOTE: The binary format is reserved for future YSI software packages.

7. Choose an option and press **Enter,** both the YSI 556 and PC displays show the progress of the file transfer.

   NOTE: After transfer, the file will be located in the C:\ECOWWIN\DATA folder of your PC, designated with the appropriate file extension.

   NOTE: To view the Calibration Record data after upload, simply open the .txt file in a general text editor such as Wordpad or Notepad.

8. After the file transfer is complete, close the terminal window (small window on the PC) by clicking on the "X" at its upper right corner.

9. Press the **Escape** key repeatedly to return to the main menu screen.

8.5 File Memory

1. Go to the file screen as described in Section *8.1 Accessing the File Screen*.

2. Use the arrow keys to highlight the **File memory** selection. See Figure 8.2 File Screen.

3. Press the **Enter** key. The file bytes used screen is displayed.

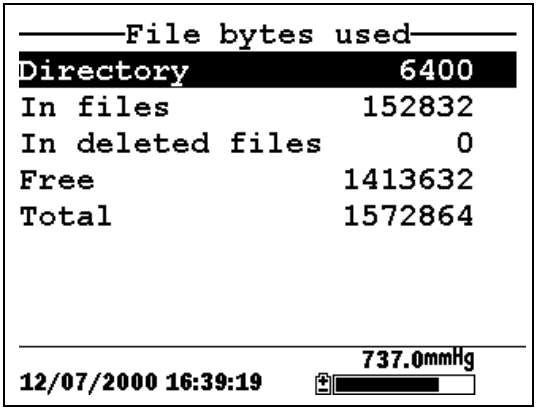


Figure 8.8 File Bytes Used Screen

4. The amount of free memory is listed in line 4 of the file bytes used screen.

   NOTE: If the amount of free memory is low, it may be time to delete all files (after first uploading all data to a PC). Refer to Section *8.6 Delete All Files*.

5. Press the **Escape** key repeatedly to return to the main menu screen.

8.6 Delete All Files

NOTE: It is not possible to delete individual files in order to free up memory. The only way to free up memory is to delete ALL files present. Take care to transfer all files to your computer (refer to Section *8.4 Upload to PC*) *before* deleting them.

1. Go to the file screen as described in Section *8.1 Accessing the File Screen*.

2. Use the arrow keys to highlight the **Delete all files** selection. See Figure 8.2 File Screen.

3. Press the **Enter** key. The Delete all Files screen is displayed.

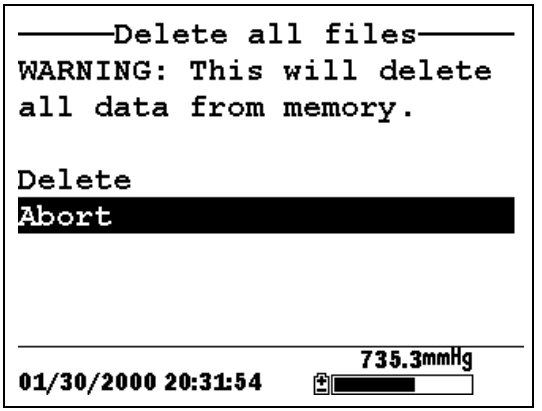


Figure 8.9 Delete All Files Screen

4. Use the arrow keys to highlight the **Delete** selection.

5. Press the **Enter** key.

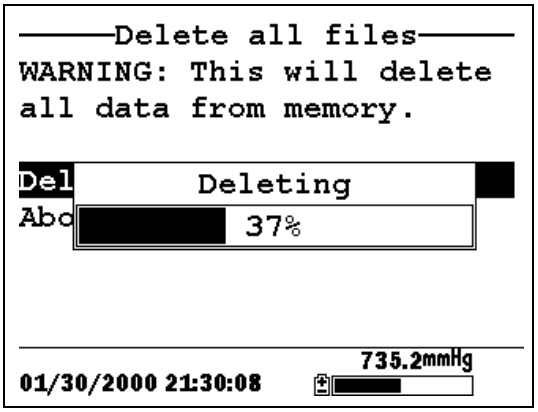


Figure 8.10 Deleting

The progress of file deletion is displayed in bar graph format.

NOTE: Deleting all files in the directory will not change any information in the site list.

6. Press the **Escape** key repeatedly to return to the main menu screen.

9. Logging

9.1 Accessing the Logging Setup Screen

1. Press the **On/off** key to display the run screen.

2. Press the **Escape** key to display the main menu screen.

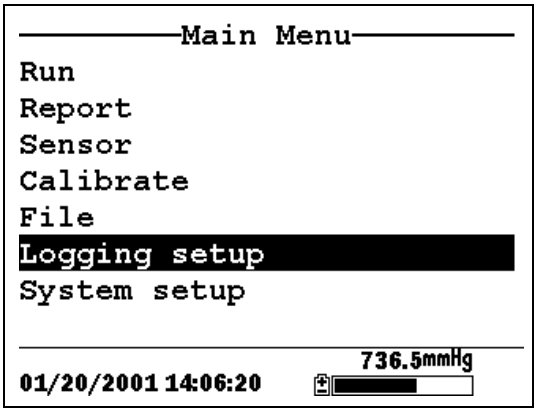


Figure 9.1 Main Menu

3. Use the arrow keys to highlight the **Logging setup** selection.

4. Press the **Enter** key. The logging setup screen is displayed.

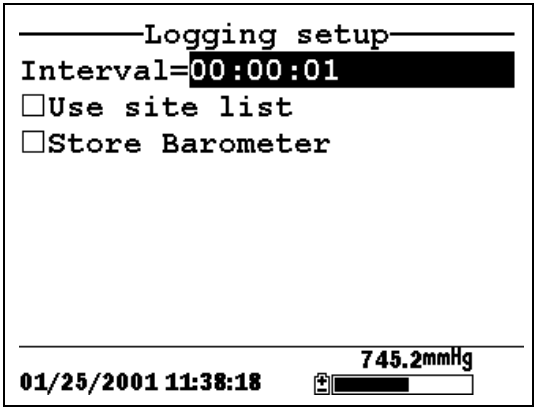


Figure 9.2 Logging Setup Screen

9.2 Setting Logging Interval

Follow steps below to set the interval for logging a data stream.

NOTE: If you do not specify an interval, the instrument will use a default interval setting of 1 second.

NOTE: It is not necessary to set a logging interval when logging a single sample.

1. Go to the logging setup screen as described in Section *9.1 Accessing the Logging Setup Screen*.

2. Use the keypad to enter an interval between 1 second and 15 minutes. Refer to Section *2.9 Keypad Use*.

   NOTE: The interval field has hour, minute and second entry fields. Any entry over 15 minutes will change automatically to a 15-minute setting.

3. Press the **Enter** key. The data stream interval is set.

4. Press the **Escape** key repeatedly to return to the main menu screen.

9.3 Storing Barometer Readings

NOTE: The **Store barometer** option is only available on instruments that are equipped with the optional barometer.

1. Go to the logging setup screen as described in Section *9.1 Accessing the Logging Setup Screen*.

2. Use the arrow keys to highlight the **Store barometer** selection. See Figure 9.2 Logging Setup Screen.

3. Press the **Enter** key until a check mark is entered in the box next to the store barometer selection if you want to log barometric readings.

   OR press the **Enter** key until the box next to the barometer selection is empty if you do not want to log barometric readings.

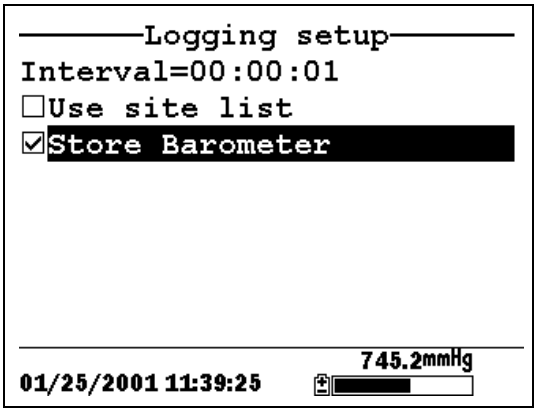


Figure 9.3 Store Barometer

4. Press the **Escape** key repeatedly to return to the main menu screen.

9.4 Creating a Site List

The site list option allows you to define file and site descriptions in the office or laboratory before moving to field logging studies. This is usually more convenient than entering the information at the site and is particularly valuable if you are visiting certain sites on a regular basis. The following section describes how to set up site lists which contain entries designated "Site Descriptions" that will be instantly available to the user in the field to facilitate the logging of data with pre-established naming of files and sites. There are two kinds of **Site Descriptions** available for use in Site lists:

- **Site Descriptions** associated with applications where data from a single site is always logged to a single file. This type is referred to as a "Single-Site Description" and is characterized by two parameters – a file name and a site name. Files logged to YSI 556 MPS memory under a **Single-Site Description** will be characterized primarily by the file name, but will also have the Site name attached, so that it is viewable in either the YSI 556 MPS **File directory** or in EcoWatch for Windows after upload to a PC

- **Site Descriptions** associated with applications where data from multiple sites are logged to a single file. This type is referred to as a "Multi-site Description" and is characterized by three parameters – a file name, a site name, and a site number. Files logged to YSI 556 MPS memory under a **Multi-site Description** are characterized by a file name, but not a site name, since multiple sites are involved. However, each data point has a Site Number attached to it so that the user can easily determine the sampling site when viewing the data from the YSI 556 MPS **File** menu or processing the data in EcoWatch for Windows after upload to a PC.

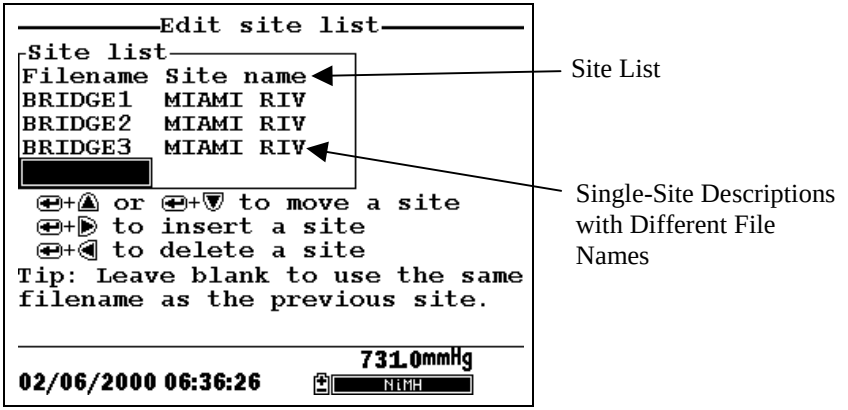


Figure 9.4 Single-Site Descriptions

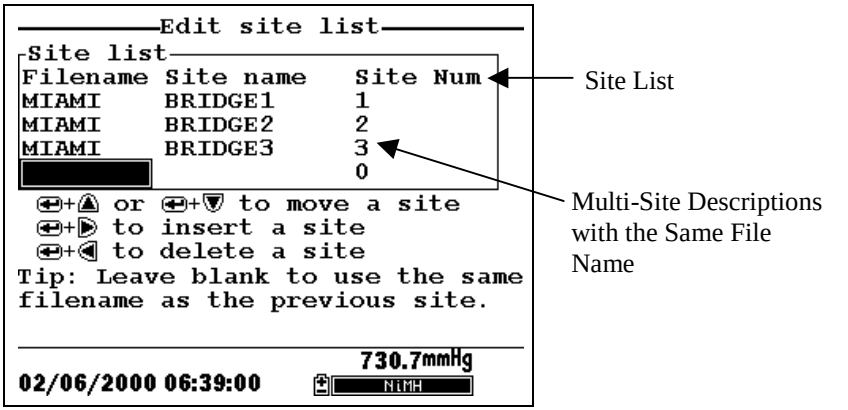


Figure 9.5 Multiple-Site Descriptions

NOTE: Site lists containing Single Site Descriptions are usually input with the designation **Store Site Number** INACTIVE in the YSI 556 MPS **Logging setup** menu. Thus, no site numbers appear in the first **Site list** example. Conversely, **Site lists** containing **Multi-Site Descriptions** MUST be input with the **Store Site Number** selection ACTIVE as shown in the second example.

To create a site list:

1. Go to the logging setup screen as described in Section *9.1 Accessing the Logging Setup Screen*.

2. Use the arrow keys to highlight the **Use site list** selection.

3. Press the **Enter** key. A check mark is entered in the box next to the use site list selection *and* two new entries appear on the logging setup screen. See Figure 9.6 Logging Setup Screen.

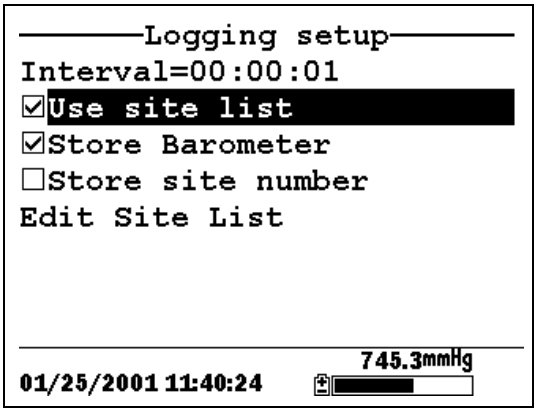


Figure 9.6 Logging Setup Screen

4. Use the arrow keys to highlight the **Store site number** selection.

5. If you are creating Multi-Site Descriptions (which require that the site **number** be stored in your data files), press the **Enter** key until a check mark appears in the box next to the store site number selection.

OR Press the **Enter** key until the box next to the store site number selection is empty, to create Single-Site Descriptions. The site **name** will be stored in the header of your data files.

6. Use the arrow keys to highlight the **Edit site list** selection.

7. Press the **Enter** key. The edit site list screen is displayed. See Figure 9.7 Edit Site List Screen. The **Filename** field is ready for input.

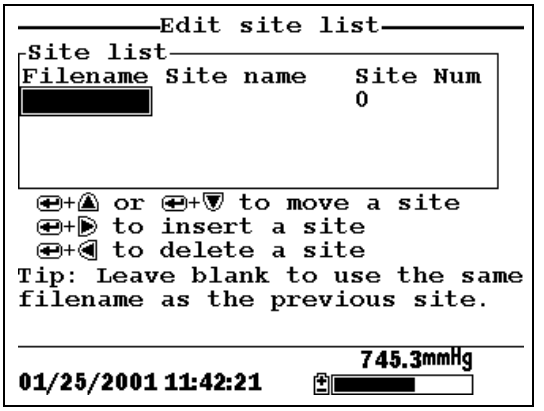


Figure 9.7 Edit Site List Screen

8. Use the keypad to enter a filename up to 8 characters in length. Refer to Section *2.9 Keypad Use*.

9. Press the **Enter** key. The cursor moves to the right for the entry of a **Site name**.

10. Use the keypad to enter a site name up to 11 characters in length. Refer to Section *2.9 Keypad Use*.

NOTE: If the store site number selection is *not* checked, skip to Step 13.

11. Press the **Enter** key. The cursor moves to the site number entry position.

12. Use the keypad to enter a site number up to 7 characters in length. Refer to Section *2.9 Keypad Use*.

13. Press **Enter**. The cursor moves to the next filename entry position.

14. Repeat Steps 8 to 13 until all filenames and sites have been entered.

15. Press **Escape** repeatedly to return to the main menu screen.

9.5 Editing a Site List

1. Go to the logging setup screen as described in Section *9.1 Accessing the Logging Setup Screen*.

2. Use the arrow keys to highlight the **Edit Site List** selection. See Figure 9.6 Logging Setup Screen.

3. Press the **Enter** key. The edit site list screen is displayed.

4. Edit the site list using the keystrokes described below.

   NOTE: Editing the site list will not have any effect on files stored in the instrument memory.

<u>To MOVE a site:</u>
Use the arrow keys to highlight a site. Press the Up or Down arrow key while holding down the Enter key.

<u>To INSERT a site above another site:</u>
Use the arrow keys to highlight the site. Press the Right **arrow key while holding down the** Enter **key. Use keypad to input letters. Refer to Section *2.9 Keypad Use*.**

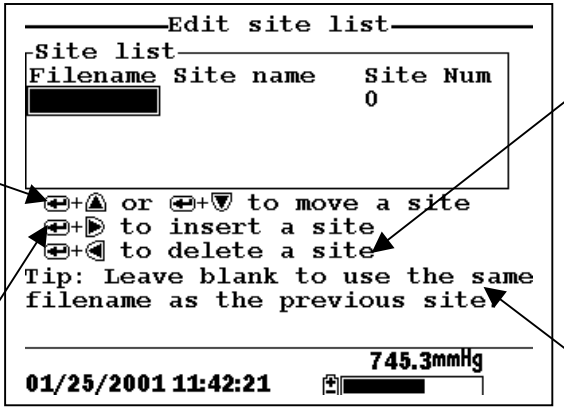


Figure 9.8 Keystrokes for Editing Site List

<u>To DELETE a site:</u>
Use the arrow keys to highlight a site. Press the Left arrow key while holding down the Enter key.

<u>To use the same file name as the previous site:</u> Leave the filename blank.

9.6 Logging Data Without a Site List

1. Follow Steps 1 through 5 in Section 7.1 Real-Time Data.

2. Use the arrow keys to highlight the **Log one sample** selection on the run screen if only a single sample is being logged.

   OR Use the arrow keys to highlight the **Start logging** selection on the run screen if a data stream is being logged.

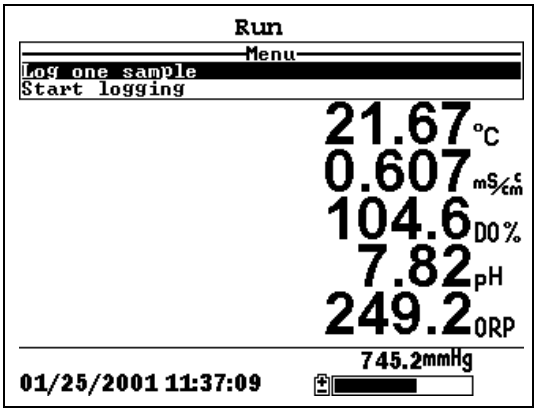


Figure 9.9 Run Screen

3. Press the **Enter** key. The Enter information screen is displayed.

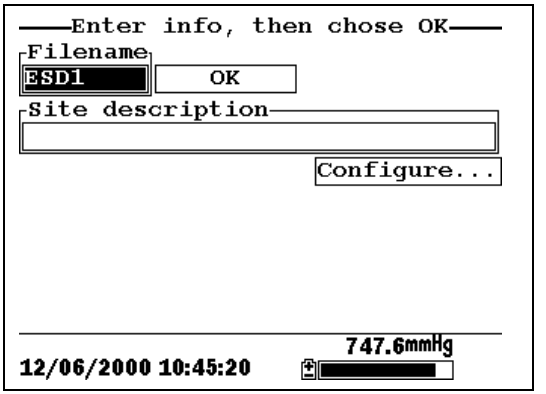


Figure 9.10 Enter Information Screen

NOTE: The last filename used will be displayed.

4. Use the keypad to enter a file name. Refer to Section *2.9 Keypad Use*.

NOTE: The instrument will assign a default file name of NONAME if no file name is specified.

5. Press the **Enter** key to input the file name.

6. Use the arrow keys to highlight the **Site description** field in the enter information screen.

NOTE: Entering a Site Description is optional. You may leave the Site Description blank and skip to Step 9.

7. Use the keypad to enter a site description name. Refer to Section *2.9 Keypad Use*.

8. Press the **Enter** key to input the site description.

NOTE: If you want to change the logging setup, such as sampling interval or storing the barometer reading, use the arrow keys to highlight the **Configure** field, press the **Enter** key, then refer to Section *9.2 Setting Logging Interval* or *9.3 Storing Barometer Readings* for details.

9. Use the arrow keys to highlight the **OK** field in the center of the information screen.

10. Press the **Enter** key to start logging.

NOTE: If the parameter mismatch screen is displayed, refer to Section *9.8 Adding Data to Existing Files*.

11. If a single point is being logged, the header on the run screen changes momentarily from **Menu** to **Sample logged** to confirm that the point was successfully logged. Skip to Step 13.

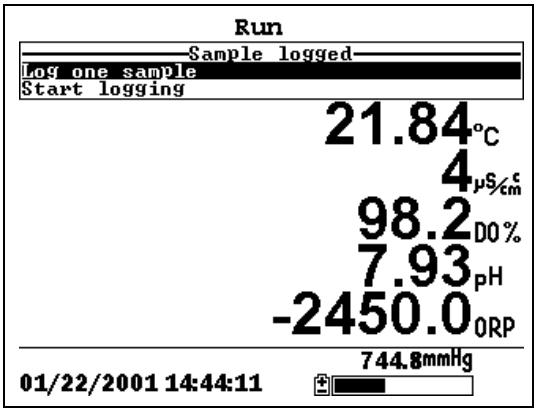


Figure 9.11 Sample Logged Screen

If a continuous stream of points is being logged, the start logging entry in the run screen changes from **Start logging** to **Stop logging**.

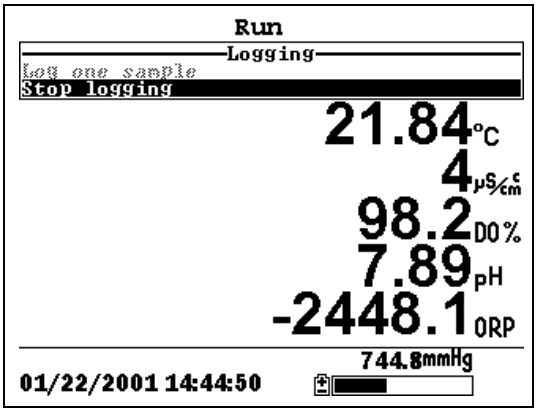


Figure 9.12 Logging Screen

12. At the end of the logging interval, press **Enter** to stop logging.

13. Refer to Section *8.3 View File* to view the data on the instrument display.

9.7 Logging Data With a Site List

1. If you have not already created a site list, refer to Section *9.4 Creating a Site List*.

2. Follow Steps 1 through 5 in Section 7.1 Real-Time Data.

3. Use the arrow keys to highlight the **Log one sample** selection on the run screen if only a single sample is being logged.

   OR Use the arrow keys to highlight the **Start logging** selection on the run screen if a data stream is being logged. See Figure 9.9 Run Screen.

4. Press the **Enter** key. The Pick a site screen is displayed.

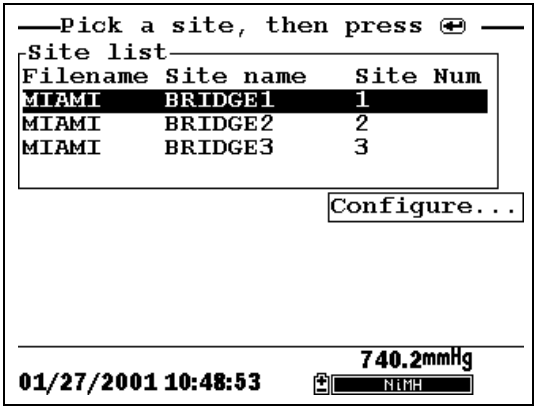


Figure 9.13 Pick a Site Screen

5. Use the arrow keys to highlight the **site** of your choice.

   NOTE: If the site of your choice is grayed out in the site list, refer to Section *9.8 Adding Data to Existing Files*.

   NOTE: Refer to Section *9.5 Editing a Site List* if you want to edit the site list.

6. Press the **Enter** key to start logging.

NOTE: If the parameter mismatch screen is displayed, refer to Section *9.8 Adding Data to Existing Files*.

7. If a single point is being logged, the header on the run screen changes momentarily from **Menu** to **Sample logged** to confirm that the point was successfully logged. See Figure 9.11 Sample Logged Screen. Skip to Step 9.

   If a continuous stream of points is being logged, the start logging entry in the run screen changes from **Start logging** to **Stop logging**. See Figure 9.12 Logging Screen.

8. At the end of the logging interval, press **Enter** to stop logging.

9. Refer to Section *8.3 View File* to view the data on the instrument display.

9.8 Adding Data to Existing Files

In order to add new data to an existing file, the current logging and sensor setup must be *exactly* the same as when the file was created. The following settings must be the same:

- **Sensors enabled** (refer to Section *4 Sensors*)
- **Store Barometer** (refer to Section *9.3 Storing Barometer Readings*)
- **Store Site Number** (refer to Section *9.4 Creating a Site List*)

If the current logging setup is not exactly the same as when the file was created, a parameter mismatch screen is displayed.

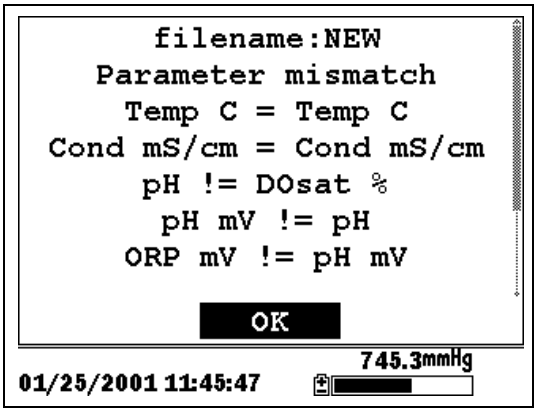


Figure 9.14 Parameter Mismatch Screen

NOTE: The right column shows parameters used when the file was created. The left column shows current parameters.

1. Press the **Down Arrow** key to scroll down and find the mismatch(es).

2. Use the following chart to resolve the mismatch(es).

Mismatch	Action	Reference
Sensor(s) missing from left column	Enable the missing sensor(s)	Section *4 Sensors*
Extra sensor(s) listed in left column	Disable the extra sensor(s)	Section *4 Sensors*
Barometer missing from left column, but present in right column	Enable the Store Barometer setting	Section *9.3 Storing Barometer Readings*
Barometer present in left column, but missing from right column	Disable the Store Barometer setting	Section *9.3 Storing Barometer Readings*
Store Site Number missing from left column, but present in right column	Enable the Store Site Number setting	Section *9.4 Creating a Site List*
Store Site Number present in left column, but missing from right column	Disable the Store Site Number setting	Section *9.4 Creating a Site List*

3. Return to Section *9.6 Logging Data Without a Site List* or *9.7 Logging Data With a Site List*.

10. System Setup

The YSI 556 MPS has a number of features that are user-selectable or can be configured to meet the user's preferences. Most of these choices are found in the **System setup** menu.

10.1 Accessing the System Setup Screen

1. Press the **On/off** key to display the run screen. See Figure 2.1 Front View of YSI 556 MPS.

2. Press the **Escape** key to display the main menu screen.

3. Use the arrow keys to highlight the **System setup** selection.

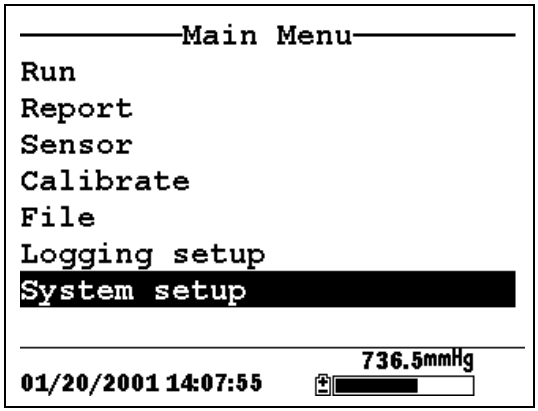


Figure 10.1 Main Menu

4. Press the **Enter** key. The system setup screen is displayed.

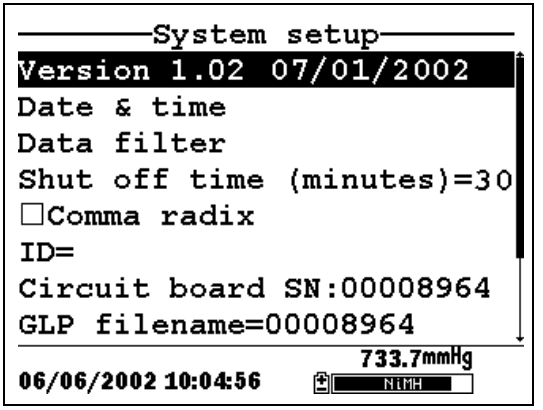


Figure 10.2 System Setup Screen

NOTE: The first line of the **System setup** menu shows the current software version of your YSI 556 MPS. As software enhancements are introduced, you will be able to upgrade your YSI 556 MPS from the YSI Web site. Refer to Section *11.2 Upgrading YSI 556 MPS* Software for details.

10.2 Date and Time Setup

1. Go to the system setup screen as described in Section *10.1 Accessing the System Setup Screen*.

2. Use the arrow keys to highlight the **Date & time** selection on the system setup screen. See Figure 10.2 System Setup Screen.

3. Press **Enter**. The date and time setup screen is displayed.

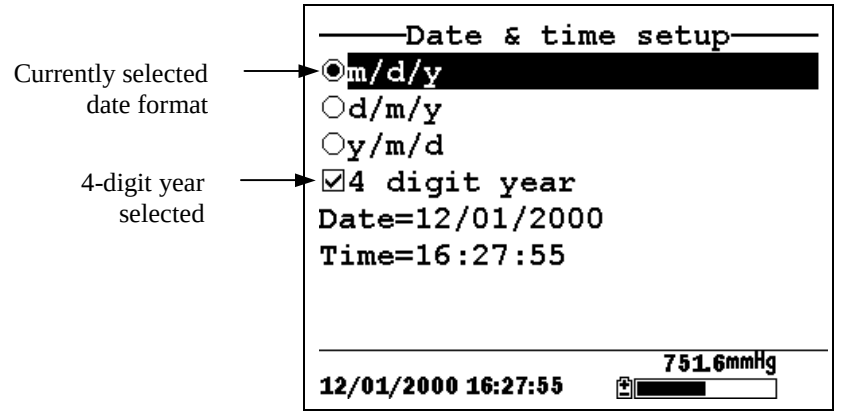


Figure 10.3 Date Setup Screen

NOTE: A black dot to the left of a date format indicates that format is selected.

4. Use the arrow keys to highlight your desired date format.

5. Press **Enter**.

6. Use the arrow keys to highlight the 4-digit year selection.

7. Press **Enter**. A check mark appears in the check box next to the 4-digit year selection.

NOTE: If unchecked, a 2-digit year is used.

8. Use the arrow keys to highlight the **Date** selection.

9. Press **Enter**. A cursor appears over the first number in the date.

10. Enter the proper number from the keypad for the highlighted date digit. The cursor moves automatically to the next date digit. Refer to Section *2.9 Keypad Use* for more keypad information.

11. Repeat Step 10 until all date digits are correct.

12. Press **Enter** to input the specified date.

13. Use the arrow keys to highlight the **Time** selection.

14. Press **Enter**. A cursor appears over the first number in the time selection.

15. Enter the proper number from the keypad for the highlighted time digit. The cursor moves automatically to the next time digit.

NOTE: Use military format when entering time. For example, 2:00 PM is entered as 14:00.

16. Repeat Step 15 until all time digits are correct.

17. Press **Enter** to input the correct time.

18. Press the **Escape** key repeatedly to return to the Main menu screen.

10.3 Data Filter

The Data Filter is a software filter that eliminates sensor noise and provides more stable readings.

NOTE: YSI recommends using the default values for the data filter for most field applications.

However, users who are primarily interested in a fast response from their dissolved oxygen sensor should consider a change of the default time constant setting of 8 seconds to one of 2 seconds. This change can be made according to the instructions in Section *10.3.1 Changing the Data Filter Settings* below. The disadvantage of lowering the time constant is that field pH readings may appear somewhat noisy if the cable is in motion.

10.3.1 Changing the Data Filter Settings

1. Go to the system setup screen as described in Section *10.1 Accessing the System Setup Screen*.

2. Use the arrow keys to highlight the **Data filter** selection. See Figure 10.1 Main Menu.

3. Press the **Enter** key. The Data filter setup screen is displayed.

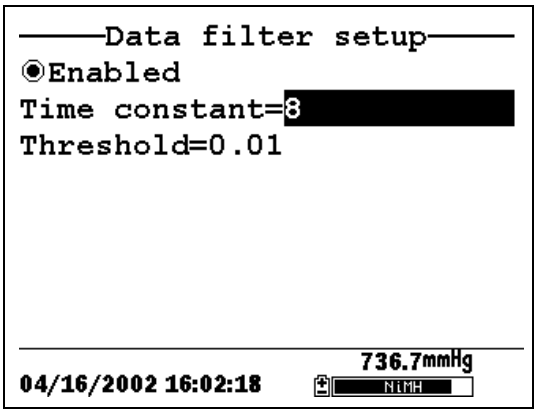


Figure 10.4 Data Filter Screen

4. With Enabled highlighted, press the **Enter** key to Enable or Disable the data filter. A black dot to the left of the selection indicates the data filter is enabled.

5. Use the arrow keys to highlight the **Time constant** field.

   NOTE: This value is the time constant in seconds for the software data filter. Increasing the time constant will result in greater filtering of the data, but will also slow down the apparent response of the sensors.

6. Use the keypad to enter a value. The default value is 8 and this value is ideal for most 556 field applications. As described in Section *10.3 Data Filter* above, users who wish to decrease the response time of the DO readings at the expense of some noise for the pH readings determined concurrently, should change the Time Constant to a value of 2.

7. Press the **Enter** key to enter the time constant.

8. Use the arrow keys to highlight the **Threshold** field.

   NOTE: This value determines when the software data filter will engage/disengage, speeding the response to large changes in a reading. When the difference between two consecutive readings is larger than the threshold, then the reading is displayed unfiltered. When the difference between two consecutive readings drops below the threshold, readings will be filtered again.

9. Use the keypad to enter a value. The default value is 0.01.

10. Press the **Enter** key to enter the threshold.

11. Press the **Escape** key repeatedly to return to the Main menu screen.

10.4 Shutoff Time

The YSI 556 MPS shuts off automatically after 30 minutes of inactivity. The shut off time may be changed as described below.

1. Go to the system setup screen as described in Section *10.1 Accessing the System Setup Screen*.

2. Use the arrow keys to highlight the **Shutoff time** selection on the system setup screen. See Figure 10.2 System Setup Screen.

3. Use the keypad to enter a value from 0 to 60 minutes. The default value is 30.

   NOTE: To disable the automatic shutoff feature, enter a zero (0).

4. Press the **Enter** key to enter the correct shutoff time.

5. Press the **Escape** key repeatedly to return to the main menu screen.

10.5 Comma Radix

The user can toggle between a period (default) and comma for the radix mark by selecting this item and pressing the **Enter** key as follows:

1. Go to the system setup screen as described in Section *10.1 Accessing the System Setup Screen*.

2. Use the arrow keys to highlight the **Comma radix** selection on the system setup screen. See Figure 10.2 System Setup Screen.

3. Press the **Enter** key. A check mark appears in the check box next to the comma radix selection indicating that the radix mark is a comma.

10.6 ID

This selection allows you to enter an identification name/number for your YSI 556 MPS. This ID name/number is logged in the header of each file.

1. Go to the system setup screen as described in Section *10.1 Accessing the System Setup Screen*.

2. Use the arrow keys to highlight the **ID** selection. See Figure 10.1 Main Menu.

3. Use the keypad to enter an alphanumeric ID up to 15 characters in length. Refer to Section *2.9 Keypad Use*.

4. Press the **Enter** key to enter the ID.

5. Press the **Escape** key repeatedly to return to the main menu screen.

10.7 GLP Filename

This selection allows you to enter a different filename for the YSI 556 MPS Calibration Record file.

NOTE: The default filename is the "556 PC board Serial Number.glp."

6. Go to the system setup screen as described in Section *10.1 Accessing the System Setup Screen*.

7. Use the arrow keys to highlight the **GLP Filename** selection. See Figure 10.1 Main Menu.

8. Use the keypad to enter a filename up to 8 characters in length. Refer to Section *2.9 Keypad Use*.

9. Press the **Enter** key to enter the new filename.

Press the **Escape** key repeatedly to return to the main menu screen.

10.8 TDS Constant

This selection allows you to set the constant used to calculate Total Dissolved Solids (TDS). TDS in g/L is calculated by multiplying this constant times the specific conductance in mS/cm.

10.8.1 Changing the TDS Constant

1. Go to the system setup screen as described in Section *10.1 Accessing the System Setup Screen*.

2. Use the arrow keys to highlight the **TDS Constant** selection. See Figure 10.1 Main Menu.

3. Use the keypad to enter a value. Refer to Section *2.9 Keypad Use*. The default value is 0.65.

4. Press the **Enter** key to enter the correct TDS constant.

5. Press the **Escape** key repeatedly to return to the main menu screen.

10.9 Barometer Units

The following information is only for instruments with the barometer option.

1. Go to the system setup screen as described in Section *10.1 Accessing the System Setup Screen.*

2. Use the arrow keys to highlight the **Barometer units** selection on the system setup screen. See Figure 10.2 System Setup Screen.

3. Press the **Enter** key. The Barometer units screen will appear.

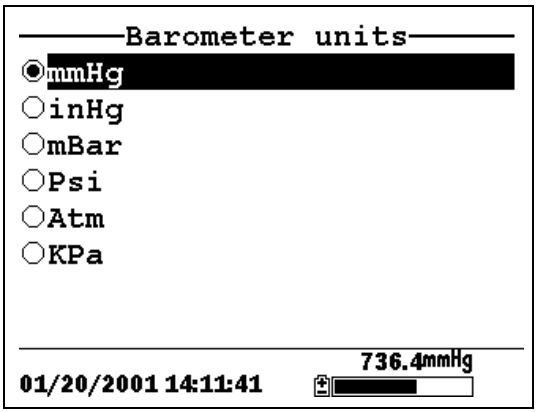


Figure 10.5 Barometer Units Screen

A black dot indicates the currently selected units.

4. Use the arrow keys to highlight your desired barometric unit.

5. Press the **Enter** key to select your choice. A black dot will appear in the circle next to your selected units.

6. Press the **Escape** key repeatedly to return to the main menu screen.

10.10 Calibrate Barometer

The optional barometer has been factory calibrated to provide accurate readings. However, some sensor drift may occur over time, requiring occasional calibration by the user, as follows:

1. Determine your local barometric pressure from an independent laboratory barometer or from your local weather service.

2. If the barometric pressure (BP) reading is from your local weather station, reverse the equation that corrects it to sea level.

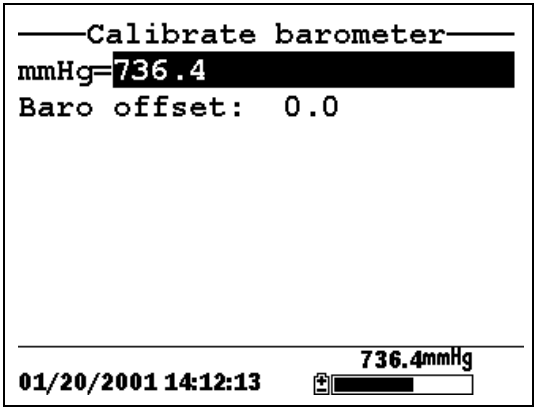
   NOTE: For this equation to be accurate, the barometric pressure units must be in mm Hg.

   True BP = (Corrected BP) – [2.5 * (Local Altitude/100)]

3. Go to the system setup screen as described in Section *10.1 Accessing the System Setup Screen*.

4. Use the arrow keys to highlight the **Calibrate barometer** selection on the system setup screen. See Figure 10.2 System Setup Screen.

5. Press the **Enter** key. The Calibrate Barometer screen is displayed.



6. Use the keypad to input the known barometric pressure value as determined in Step 2.

7. Press the **Enter** key. The new barometer reading is displayed as well as the approximate offset from the factory reading.

   NOTE: To return the sensor to the factory setting, subtract the offset amount from the current setting and repeat Steps 5 to 7.

8. Press the **Escape** key repeatedly to return to the main menu screen.

11. Maintenance

11.1 Sensor Care and Maintenance

Once the sensors have been properly installed, remember that periodic cleaning and DO membrane changes are required.

11.1.1 DO Sensor

For best results, we recommend that the KCl solution and the membrane cap be changed at least once every 30 days.

1. It is important to recognize that oxygen dissolved in the sample is consumed during sensor operation. It is therefore essential that the sample be continuously stirred at the sensor tip. If stagnation occurs, your readings will be artificially low. Stirring may be accomplished by mechanically moving the sample around the sensor tip, or by rapidly moving the sensor through the sample. The rate of stirring should be at least 1 foot per second.

2. Membrane life depends on usage. Membranes will last a long time if installed properly and treated with care. Erratic readings are a result of loose, wrinkled, damaged, or fouled membranes, or from large (more than 1/8" diameter) bubbles in the electrolyte reservoir. If erratic readings or evidence of membrane damage occurs, you should replace the membrane and the electrolyte solution. The average replacement interval is two to four weeks.

3. If the membrane is coated with oxygen consuming (e.g. bacteria) or oxygen producing organisms (e.g. algae), erroneous readings may occur.

4. Chlorine, sulfur dioxide, nitric oxide, and nitrous oxide can affect readings by behaving like oxygen at the sensor. If you suspect erroneous readings, it may be necessary to determine if these gases are the cause.

5. Avoid any environment that contains substances that may attack the probe module and sensor materials. Some of these substances are concentrated acids, caustics, and strong

solvents. The sensor materials that come in contact with the sample include FEP Teflon, acrylic plastic, EPR rubber, stainless steel, epoxy, polyetherimide and the PVC cable covering.

6. It is possible for the silver anode, which is the entire silver body of the sensor, to become contaminated. This will prevent successful calibration. To restore the anode, refer to Section *11.1.1 DO Sensor, Silver Anode Cleaning.*

7. For correct sensor operation, the gold cathode must always be bright. If it is tarnished (which can result from contact with certain gases), or plated with silver (which can result from extended use with a loose or wrinkled membrane), the gold surface must be restored. To restore the cathode, refer to Section *11.1.1 DO Sensor, Gold Cathode Cleaning.*

8. To keep the electrolyte from drying out, store the sensor in the transport/calibration cup with at least 1/8″ of water.

Silver Anode Cleaning

After extended use, a thick layer of AgCl builds up on the silver anode reducing the sensitivity of the sensor. The anode must be cleaned to remove this layer and restore proper performance. The cleaning can be chemical or mechanical:

Chemical Cleaning: Remove the membrane cap and soak the entire anode section in a 14% ammonium hydroxide solution for 2 to 3 minutes, followed by a thorough rinsing with distilled or deionized water. The anode should then be thoroughly wiped with a wet paper towel to remove the residual layer from the anode.

Mechanical Cleaning: Sand off the dark layer from the silver anode with 400 grit wet/dry sandpaper. Wrap the sandpaper around the anode and twist the sensor. Rinse the anode with clean water after sanding, followed by wiping thoroughly with a wet paper towel.

NOTE: After cleaning, a new membrane cap must be installed. Refer to Section *3.4.3 Membrane Cap Installation***.**

Turn the instrument on and allow the system to stabilize for at least 30 minutes. If, after several hours, you are still unable to calibrate, contact your dealer or YSI Customer Service. Refer to *Appendix E Customer Service*.

Gold Cathode Cleaning

For correct sensor operation, the gold cathode must be textured properly. It can become tarnished or plated with silver after extended use. The gold cathode can be cleaned by using the adhesive backed sanding disc and tool provided in the YSI 5238 Probe Reconditioning Kit.

Using the sanding paper provided in the YSI 5238 Probe Reconditioning Kit, wet sand the gold with a twisting motion about 3 times or until all silver deposits are removed and the gold appears to have a matte finish. Rinse the cathode with clean water after sanding, followed by wiping thoroughly with a wet paper towel. If the cathode remains tarnished, contact your dealer or YSI Customer Service. Refer to *Appendix E Customer Service*.

NOTE: After cleaning, a new membrane cap must be installed. Refer to Section *3.4.3 Membrane Cap Installation***.**

11.1.2 DO Sensor Replacement

1. Remove the probe sensor guard.

⚠ **CAUTION:** Thoroughly dry the sensor so that no water enters the probe module sensor port when the sensor is removed.

2. Insert the long end of the hex key wrench into the small hole in the side of the probe module bulkhead. Turn the wrench counterclockwise and remove the screw. (You do not have to remove the screw all the way to release the sensor.)

3. Pull the old DO sensor module straight out of the probe module body.

   NOTE: The DO sensor is not threaded, it is keyed, so it cannot be removed by twisting.

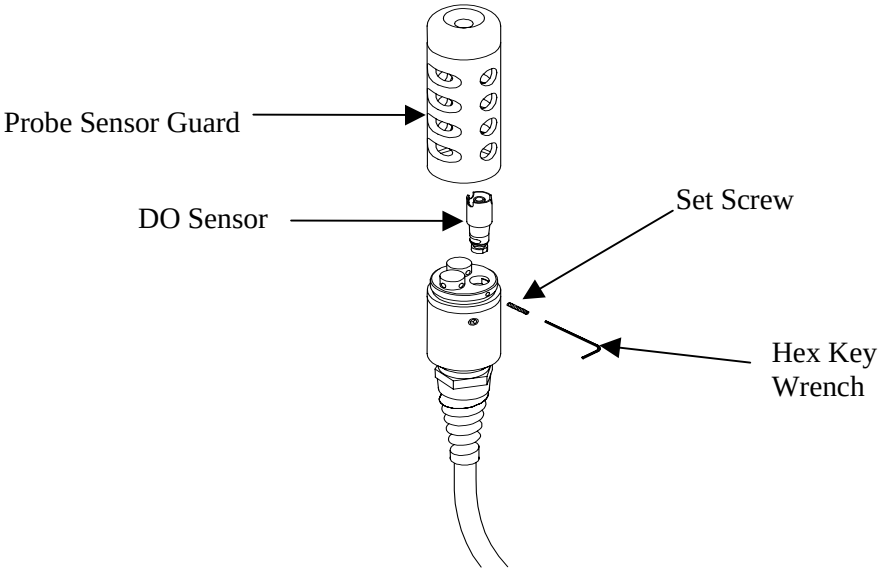


Figure 11.1 DO Sensor Replacement

4. Insert the new DO sensor module. Make sure that the inside of the probe module sensor port and the o-ring on the sensor are clean, with no contaminants, such as grease, dirt, or hair. The DO sensor is keyed, or has a flat side, so that it cannot be aligned improperly.

NOTE: Make sure the DO sensor bottoms out before the set screw is inserted.

5. Insert the set screw into the small hole in the side of the probe module bulkhead, and turn clockwise to rethread.

⚠ **CAUTION:** Make sure that you do not cross-thread the set screw. Use the hex key wrench to tighten the screw in properly, making sure that the screw does not stick out of the side of the probe module bulkhead. The probe sensor guard will not thread

on properly and damage may result if the screw is allowed to stick out.

NOTE: The YSI 5563 DO sensor is shipped dry. A shipping membrane was installed to protect the electrode. A new membrane cap must be installed before the first use. Refer to Section *3.4.1 Sensor Installation.*

11.1.3 YSI 5564 pH and 5565 Combination pH/ORP Sensor Cleaning

Cleaning is required whenever deposits or contaminants appear on the glass and/or platinum surfaces of these sensors or when the response of the sensor becomes slow.

1. Remove the sensor from the probe module.

2. Initially, simply use clean water and a soft clean cloth, lens cleaning tissue, or cotton swab to remove all foreign material from the glass bulb (YSI 5564 and YSI 5565) and platinum button (YSI 5565). Then use a moistened cotton swab to carefully remove any material that may be blocking the reference electrode junction of the sensor.

⚠ **CAUTION:** When using a cotton swab with the YSI 5564 or YSI 5565, be careful NOT to wedge the swab tip between the guard and the glass sensor. If necessary, remove cotton from the swab tip, so that the cotton can reach all parts of the sensor tip without stress.

NOTE: If good pH and/or ORP response is not restored by the above procedure, perform the following additional procedure:

1. Soak the sensor for 10-15 minutes in clean water containing a few drops of commercial dishwashing liquid.

2. GENTLY clean the glass bulb and platinum button by rubbing with a cotton swab soaked in the cleaning solution.

3. Rinse the sensor in clean water, wipe with a cotton swab saturated with clean water, and then re-rinse with clean water.

NOTE: If good pH and/or ORP response is still not restored by the above procedure, perform the following additional procedure:

1. Soak the sensor for 30-60 minutes in one molar (1 M) hydrochloric acid (HCl). This reagent can be purchased from most distributors. Be sure to follow the safety instructions included with the acid.

2. GENTLY clean the glass bulb and platinum button by rubbing with a cotton swab soaked in the acid.

3. Rinse the sensor in clean water, wipe with a cotton swab saturated with clean water, and then re-rinse with clean water. To be certain that all traces of the acid are removed from the sensor crevices, soak the sensor in clean water for about an hour with occasional stirring.

NOTE: If biological contamination of the reference junction is suspected or if good response is not restored by the above procedures, perform the following additional cleaning step:

1. Soak the sensor for approximately 1 hour in a 1 to 1 dilution of commercially available chlorine bleach.

2. Rinse the sensor with clean water and then soak for at least 1 hour in clean water with occasional stirring to remove residual bleach from the junction. (If possible, soak the sensor for period of time longer than 1 hour in order to be certain that all traces of chlorine bleach are removed.) Then re-rinse the sensor with clean water and retest.`

11.1.4 Temperature/Conductivity Sensor Cleaning

The single most important requirement for accurate and reproducible results in conductivity measurement is a clean cell. A dirty cell will change the conductivity of a solution by contaminating it. The small cleaning brush included in the YSI 5511 Maintenance Kit is ideal for this purpose.

To clean the conductivity cell:

1. Dip the brush in clean water and insert it into each hole 15-20 times.

2. Rinse the cell thoroughly in deionized or clean tap water.

NOTE: In the event that deposits have formed on the electrodes, perform the following additional procedure:

1. Use a mild detergent solution in combination with the brush. Dip the brush in the solution and insert it into each hole 15-20 times.

2. Rinse the cell thoroughly in deionized or clean tap water.

   NOTE: After cleaning, check the response and accuracy of the conductivity cell with a calibration standard.

   NOTE: If this procedure is unsuccessful, or if sensor performance is impaired, it may be necessary to return the sensor to a YSI authorized service center for service, Refer to *Appendix E Customer Service*.

   The temperature portion of the sensor requires no maintenance.

11.2 Upgrading YSI 556 MPS Software

1. Access the YSI Environmental Software Downloads page as described in *Appendix G EcoWatch* Step 1 through 3.

2. Click on the **YSI Instruments Software Updates** link (or scroll down until you see YSI 556 MPS).

3. Click on the file icon to the right of the **YSI 556 MPS** listing and save the file to a temporary directory on your computer.

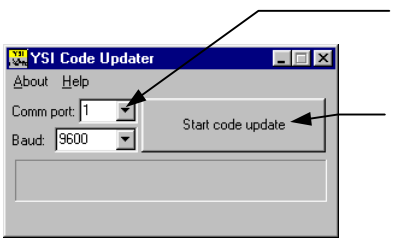
4. After the download is complete, run the file (that you just downloaded) and follow the on screen instructions to install the YSI Code Updater on your computer. If you encounter difficulties, contact YSI customer service for advice. Refer to *Appendix E Customer Service*.

5. If necessary, disconnect the YSI 5563 Probe Module from the YSI 556 MPS instrument.

6. Connect the YSI 556 MPS to a serial port of your computer via the 655173 PC interface cable. See Figure 8.6 Computer/Instrument Interface.

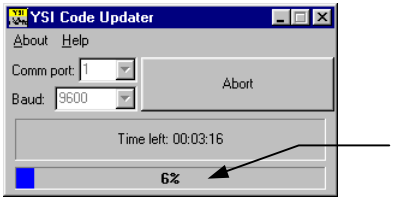
7. Press the **On/off** key on the YSI 556 MPS to display the run screen.

8. Run the YSI Code Updater software that you just installed on your computer. The following window will be displayed:

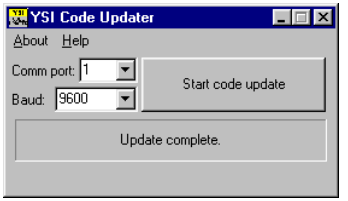


9. Set the Comm port number to match the port that you connected the 655173 PC Interface Cable to, then click on the **Start Code Update button**.

The YSI 556 MPS screen will blank out and a progress indicator will be displayed on the PC.



When the update is finished (indicated on the PC screen), the YSI 556 MPS will return to the Run screen. See Figure 7.1 Run Screen.



10. Close the YSI Code Updater window (on the PC) by clicking on the "X" in the upper right corner of the window.

11. Disconnect the YSI 556 MPS from the 655173 PC interface cable and reconnect it to the YSI 5563 Probe Module. Refer to Section *3.6 Instrument/Cable Connection*.

12. Storage

Proper storage between periods of usage will not only extend the life of the sensors, but will also ensure that the unit will be ready to use as quickly as possible in your next application.

12.1 General Recommendations for Short Term Storage

No matter what sensors are installed in the instrument, it is important to keep them moist without actually immersing them in liquid. Immersing them could cause some of them to drift or result in a shorter lifetime.

YSI recommends that short term storage of all multi-parameter instruments be done by placing approximately 1/2 inch of tap water in the transport/calibration cup that was supplied with the instrument, and by placing the probe module with all of the sensors installed into the cup. The use of a moist sponge instead of a 1/2 inch of tap water is also acceptable, as long as its presence does not compromise the attachment of the cup to the probe module. The transport/calibration cup should be sealed to prevent evaporation.

NOTE: Ensure that an o-ring is installed in the o-ring groove on the threaded end of the probe module body. See Figure 3.7 Transport/Calibration Cup Installation.

⚠ **CAUTION:** The water level has to be low enough so that none of the sensors are actually under water. Check the transport/calibration cup periodically to make certain that the water is still present or the sponge is still moist.

NOTE: If the storage water (tap water) is accidentally lost during field use, environmental water can be used.

12.2 General Recommendations for Long Term Storage

12.2.1 Probe Module Storage

1. Remove the pH or pH/ORP sensor from the probe module and store according to the individual sensor storage instructions found in Section *12.2.2 Sensor Storage*.

2. Seal the empty port with the provided port plug.

NOTE: Leave the conductivity/temperature sensor and dissolved oxygen sensor, with membrane cap still on, in the probe module.

3. Place 1/2″ of water, deionized, distilled or tap, in the transport/calibration cup.

⚠ **CAUTION:** The water level has to be low enough so that none of the sensors are actually under water. Check the transport/calibration cup periodically to make certain that the water is still present or the sponge is still moist.

4. Insert the probe module into the cup.

NOTE: Ensure that an o-ring is installed in the o-ring groove on the threaded end of the probe module body. See Figure 3.7 Transport/Calibration Cup Installation.

12.2.2 Sensor Storage

Temperature/Conductivity Sensor

No special precautions are required. Sensor can be stored dry or wet, as long as solutions in contact with the thermistor and conductivity electrodes are not corrosive (for example, chlorine bleach). However, it is recommended that the sensor be cleaned with the provided brush prior to long term storage. Refer to Section *11.1.4 Temperature/Conductivity Sensor Cleaning.*

pH and Combination pH/ORP Sensor

The key to sensor storage is to make certain that the reference electrode junction does not dry out. Junctions which have been allowed to dry out due to improper storage procedures can usually be rehydrated by soaking the sensor for several hours (overnight is recommended) in a solution which is 2 molar in potassium chloride. If potassium chloride solution is not available, soaking the sensor in tap water or commercial pH buffers may restore sensor function. However in some cases the sensor may have been irreparably damaged by the dehydration and will require replacement.

⚠ **CAUTION:** Do not store the sensor in distilled or deionized water as the glass sensor may be damaged by exposure to this medium.

1. Remove the pH or pH/ORP sensor from the probe module.

2. Seal the empty port with the provided port plug.

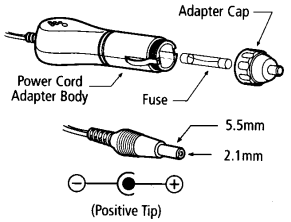
3. Place the sensor in the storage vessel (plastic boot or bottle) which was on the sensor at delivery. The vessel should contain a solution which is 2 molar in potassium chloride.

   NOTE: Make certain that the vessel is sealed to prevent evaporation of the storage solution.

13. Troubleshooting

The following sections describe problems you may encounter when using the YSI 556 MPS and provides suggestions to overcome the symptom.

PROBLEM	POSSIBLE SOLUTION
Display Problems	
No display is visible after pressing the on/off key.	If C cells are used, make certain that they are installed properly with regard to polarity and that good batteries are used. If a rechargeable battery pack is used, place the pack in the instrument and charge for 30 minutes.
Instrument software appears to be locked up as evidenced by no response to keypad entries or display not changing.	First, attempt to reset the instrument by simply turning off and then on again. If this fails, remove battery power from the instrument for 30 seconds and then reapply power. When using C cells, remove the battery lid and one of the batteries; when using the rechargeable battery pack, remove the pack completely from the instrument. After 30 seconds replace the battery or battery pack and check for instrument function.
The 556 display flashes and the instrument speaker makes a continuous clicking sound.	The battery voltage is low. Change to new C cells or recharge the 6117 battery pack.
Water Damage to Instrument	
Leakage detected in battery compartment when using C cells	Dispose of batteries properly. Dry the battery compartment using compressed air if possible. If corrosion is present on battery terminals, contact YSI Customer Service.
Water has contacted rechargeable battery pack	Remove battery pack immediately. Send battery pack to YSI Product Service for evaluation. **CAUTION**: DO NOT REUSE BATTERY PACK UNTIL YSI PRODUCT SERVICE HAS EVALUATED IT.
Leakage suspected into the main cavity of the instrument case	Remove the batteries immediately. Return the instrument to YSI Product Service.

PROBLEM	POSSIBLE SOLUTION
Optional Cigarette Lighter Charger	
Power cord fuse blown 	1. Unscrew adapter's cap, remove tip and pull out fuse. 2. Replace fuse with a new 2-amp fast-blow fuse from an electronics store such as Radio Shack. 3. Reassemble the adapter and securely screw the cap back onto the adapter body.
File Problems	
Upload of files from YSI 556 MPS to PC fails	1. Make sure that cable is connected properly to both 556 and PC. 2. Make certain that the proper Comm port is selected in EcoWatch for Windows.
Barometer data is not stored with sensor data file.	Make sure **Store barometer** is active in the 556 **Logging setup** menu.
Site Descriptions in the **Site List** are "grayed-out" and not available for appending files with additional data.	There is a parameter mismatch between the current 556 setup and that initially used. Change the current logging and sensor setup to match the setup that was initially used to create the file.
Sensor Problems	
Dissolved Oxygen reading unstable or inaccurate. Out of Range message appears during calibration.	Sensor not properly calibrated. Follow DO cal procedures.
	Membrane not properly installed or may be punctured. Replace membrane cap.
	DO sensor electrodes require cleaning. Follow DO cleaning procedure. Use 5511 Maintenance kit.
	Water in sensor connector. Dry connector; reinstall sensor.
	Algae or other contaminant clinging to DO sensor. Rinse DO sensor with clean water.
	Barometric pressure entry is incorrect. Repeat DO cal procedure.
	Calibrated at extreme temperature. Recalibrate at (or near) sample temperature.
	DO sensor has been damaged. Replace sensor.
	Internal failure. Return probe module for service.

PROBLEM	POSSIBLE SOLUTION
Sensor Problems	
pH or ORP readings are unstable or inaccurate. Out of Range message appears during calibration.	Sensor requires cleaning. Follow sensor cleaning procedure.
	Sensor requires calibration. Follow cal procedures.
	pH sensor reference junction has dried out from improper storage. Soak sensor in tap water or buffer until readings become stable.
	Water in sensor connector. Dry connector; reinstall sensor.
	Sensor has been damaged. Replace sensor.
	Calibration solutions out of spec or contaminated with other solution. Use new calibration solutions.
	ORP fails Zobell check. Take into account temperature dependence of Zobell solution readings.
	Internal failure. Return probe module for service.
Conductivity unstable or inaccurate. Out of Range message appears during calibration.	Conductivity improperly calibrated. Follow calibration procedure.
	Conductivity sensor requires cleaning. Follow cleaning procedure.
	Conductivity sensor damaged. Replace sensor.
	Calibration solution out of spec or contaminated. Use new calibration solution.
	Internal failure. Return probe module for service.
	Calibration solution or sample does not cover entire sensor. Immerse sensor fully.
Temperature, unstable or inaccurate	Water in connector. Dry connector; reinstall sensor.
	Sensor has been damaged. Replace the 5560 sensor.
Installed sensor has no reading	The sensor has been disabled. Enable sensor.
	Water in sensor connector. Dry connector; reinstall sensor.
	Sensor has been damaged. Replace the sensor.
	Report output improperly set up. Set up report output.
	Internal failure. Return probe module for service.

If these guidelines and tips fail to correct your problem or if any other symptoms occur, contact YSI Customer Service for Advice. Refer to *Appendix E Customer Service*.

14. Appendix A YSI 556 MPS Specifications

14.1 Sensor Specifications

Dissolved Oxygen		
Sensor Type		Steady state polarographic
Range:	*% air sat'n*	▪ 0 to 500% air saturation
	mg/L	▪ 0 to 50 mg/L
Accuracy:	*% air sat'n*	▪ 0 to 200% air saturation: ±2% of the reading or 2% air saturation; whichever is greater ▪ 200 to 500% air saturation: ±6% of the reading
	mg/L	▪ 0 to 20 mg/L: ±2% of the reading or 0.2 mg/L; whichever is greater ▪ 20 to 50 mg/L: ±6% of the reading
Resolution:	*% air sat'n*	▪ 0.1% air saturation
	mg/L	▪ 0.01 mg/L
Temperature		
Sensor Type:		YSI Precision™ thermistor
Range:		-5 to 45°C
Accuracy:		±0.15°C
Resolution:		0.01°C
Conductivity		
Sensor Type:		4-electrode cell with auto-ranging
Range:		0 to 200 mS/cm
Accuracy:		±0.5% of reading or ±0.001 mS/cm; whichever is greater–4 meter cable ±1.0% of reading or ±0.001 mS/cm; whichever is greater–20 meter cable
Resolution:		0.001 mS/cm to 0.1 mS/cm (range-dependent)
Salinity		
Sensor Type:		Calculated from conductivity and temperature
Range:		0 to 70 ppt
Accuracy:		±1.0% of reading or 0.1 ppt; whichever is greater
Resolution:		0.01 ppt

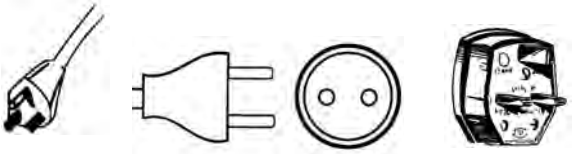
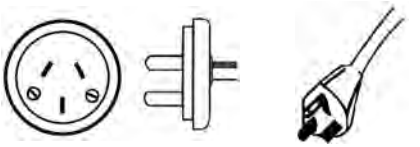
pH (optional)	
Sensor Type:	Glass combination electrode
Range:	0 to 14 units
Accuracy:	±0.2 units
Resolution:	0.01 units
ORP (optional)	
ORP Sensor Type:	Platinum button
Range:	-999 to +999 mV
Accuracy:	±20 mV
Resolution:	0.1 mV

Barometer (optional)	
Range:	500 to 800 mm Hg
Accuracy:	±3 mm Hg within ±15°C temperature range from calibration point
Resolution:	0.1 mm Hg

14.2 Instrument Specifications

Memory Size:	1.5 MB Flash Memory 49,000 data sets (@ 6 parameters per set plus time stamp) 100 Sites
Size:	11.9 cm width x 22.9 cm length (4.7 in. x 9 in.)
Weight with batteries:	0.92 kg (2.1 lbs)
Power:	4 alkaline C-cells; optional rechargeable pack
Cables:	4, 10, and 20 m (13.1, 32.8, 65.6 ft.) lengths
Warranty:	3-Years for the instrument; 1-Year for the probe modules and cable

15. Appendix B Instrument Accessories

ITEM #	ACCESSORY
5563-4	4m Cable with DO/temp/conductivity
5563-10	10m Cable with DO/temp/conductivity
5563-20	20m Cable with DO/temp/conductivity
5564	pH Kit
5565	pH/ORP Kit
6118	Rechargeable Battery Pack Kit for use in US
5094	Rechargeable Battery Pack Kit with universal charger and three adapter cables for use in international applications 
5095	Rechargeable Battery Pack Kit with universal charger and two adapter cables for use in international applications 
5083	Flow Cell – probe module is secured in the flow cell and groundwater is pumped through it
616	Charger, Cigarette Lighter – used to power up the instrument from a car's cigarette lighter
4654	Tripod
614	Ultra Clamp, C Clamp –used to clamp the instrument to a table top or car dashboard
6081	Large Carrying Case, Hard-sided
5085	Hands-free Harness
5065	Carrying Case, Form-fitted, for use in the field – has a clear vinyl window, shoulder strap, belt loop strap and hand strap

16. Appendix C Required Federal Communications Notice

The Federal Communications Commission defines this product as a computing device and requires the following notice.

This equipment generates and uses radio frequency energy and if not installed and used properly, may cause interference to radio and television reception. It has been type tested and found to comply with the limits for a Class A or Class B computing device in accordance with the specification in Subpart J of Part 15 of FCC Rules, which are designed to provide reasonable protection against such interference in a residential installation. However, there is no guarantee that interference will not occur in a particular installation. If this equipment does cause interference to radio or television reception, which can be determined by turning the equipment off and on, the user is encouraged to try to correct the interference by one or more of the following measures:

- Reorient the receiving antenna
- Relocate the computer with respect to the receiver
- Move the computer away from the receiver
- Plug the computer into a different outlet so that the computer and receiver are on different branch circuits.

If necessary, the user should consult the dealer or an experienced radio/television technician for additional suggestions. The user may find the following booklet, prepared by the Federal Communications Commission, helpful: "How to Identify and Resolve Radio-TV Interference Problems". This booklet is available from the U.S. Government Printing Office, Washington, D.C. 20402, Stock No.0004-000-00345-4.

17. Appendix D Health and Safety

YSI Conductivity solutions: 3161, 3163, 3165, 3167, 3168, 3169

INGREDIENTS:

- ❑ Iodine
- ❑ Potassium Chloride
- ❑ Water

WARNING: INHALATION MAY BE FATAL.

⚠ ***CAUTION*: AVOID INHALATION, SKIN CONTACT, EYE CONTACT OR INGESTION. MAY EVOLVE TOXIC FUMES IN FIRE.**

Harmful if ingested or inhaled. Skin or eye contact may cause irritation. Has a corrosive effect on the gastro-intestinal tract, causing abdominal pain, vomiting, and diarrhea. Hyper-sensitivity may cause conjunctivitis, bronchitis, skin rashes etc. Evidence of reproductive effects.

FIRST AID:
INHALATION: Remove victim from exposure area. Keep victim warm and at rest. In severe cases seek medical attention.
SKIN CONTACT: Remove contaminated clothing immediately. Wash affected area thoroughly with large amounts of water. In severe cases seek medical attention.
EYE CONTACT: Wash eyes immediately with large amounts of water, (approx. 10 minutes). Seek medical attention immediately.
INGESTION: Wash out mouth thoroughly with large amounts of water and give plenty of water to drink. Seek medical attention immediately.

YSI pH 4.00, 7.00, and 10.00 Buffer Solutions: 3821, 3822, 3823

pH 4 INGREDIENTS:

- ❑ Potassium Hydrogen Phthalate
- ❑ Formaldehyde
- ❑ Water

pH 7 INGREDIENTS:

- ❑ Sodium Phosphate, Dibasic
- ❑ Potassium Phosphate, Monobasic
- ❑ Water

pH 10 INGREDIENTS:

- ❑ Potassium Borate, Tetra
- ❑ Potassium Carbonate
- ❑ Potassium Hydroxide
- ❑ Sodium (di) Ethylenediamine Tetraacetate
- ❑ Water

⚠ ***CAUTION*** **- AVOID INHALATION, SKIN CONTACT, EYE CONTACT OR INGESTION. MAY AFFECT MUCOUS MEMBRANES.**

Inhalation may cause severe irritation and be harmful. Skin contact may cause irritation; prolonged or repeated exposure may cause Dermatitis. Eye contact may cause irritation or conjunctivitis. Ingestion may cause nausea, vomiting and diarrhea.

FIRST AID:

INHALATION - Remove victim from exposure area to fresh air immediately. If breathing has stopped, give artificial respiration. Keep victim warm and at rest. Seek medical attention immediately.

SKIN CONTACT - Remove contaminated clothing immediately. Wash affected area with soap or mild detergent and large amounts of water (approx. 15-20 minutes). Seek medical attention immediately.

EYE CONTACT - Wash eyes immediately with large amounts of water (approx. 15-20 minutes), occasionally lifting upper and lower lids. Seek medical attention immediately.

INGESTION - If victim is conscious, immediately give 2 to 4 glasses of water and induce vomiting by touching finger to back of throat. Seek medical attention immediately.

YSI Zobell Solution: 3682

INGREDIENTS:

- ❑ Potassium Chloride
- ❑ Potassium Ferrocyanide Trihydrate
- ❑ Potassium Ferricyanide

⚠ ***CAUTION*** **- AVOID INHALATION, SKIN CONTACT, EYE CONTACT OR INGESTION. MAY AFFECT MUCOUS MEMBRANES.**

May be harmful by inhalation, ingestion, or skin absorption. Causes eye and skin irritation. Material is irritating to mucous membranes and upper respiratory tract. The chemical, physical, and toxicological properties have not been thoroughly investigated.

Ingestion of large quantities can cause weakness, gastrointestinal irritation and circulatory disturbances.

FIRST AID:

INHALATION - Remove victim from exposure area to fresh air immediately. If breathing has stopped, give artificial respiration. Keep victim warm and at rest. Seek medical attention immediately.

SKIN CONTACT - Remove contaminated clothing immediately. Wash affected area with soap or mild detergent and large amounts of water (approx. 15-20 minutes). Seek medical attention immediately.

EYE CONTACT - Wash eyes immediately with large amounts of water (approx. 15-20 minutes), occasionally lifting upper and lower lids. Seek medical attention immediately.

INGESTION - If victim is conscious, immediately give 2 to 4 glasses of water and induce vomiting by touching finger to back of throat. Seek medical attention immediately.

18. Appendix E Customer Service

For information on Customer Service Centers, refer to *Authorized Service Centers* in this appendix.

Equipment exposed to biological, radioactive, or toxic materials must be cleaned and disinfected before being returned or presented for service. A cleaning certificate must accompany the equipment. Refer to *18.2 Cleaning Instructions* in this appendix.

18.1 YSI Environmental Authorized Service Centers

International Service Centers

YSI Incorporated • Repair Center • 1725 Brannum Lane
Yellow Springs, Ohio • 45387 • Phone: (937) 767-7241
E-Mail: support@ysi.com

Hydrodata Services (UK) Ltd. • Unit 8 • Business Centre West
Avenue One • Letchworth • Herts • SG6 2HB
Phone: (44-1462) 673581 • Fax: (44-1462) 673582
Email: hydrodatauk@cs.com

YSI Nanotech • Kaizuka 1-15-4, Kawasaki-Ku • Kawaskaki
City • Japan • 210-0014 • Phone: 011-814-4222-0009
Fax: 011-81-44-221102 • E-mail: Nanotech@ysi.com

Nortech GSI • 1131 Derry Road East • Mississauga, ONT
L5T 1P3 • Canada • Phone: 800-263-3427 • Fax: 905-564-4700

US Service Centers for Water Quality and 6-Series Instruments

Ohio
YSI Incorporated • Repair Center • 1725 Brannum Lane
Yellow Springs, Ohio • 45387 • Phone: (800) 765-4974
(937) 767-7241• E-Mail: info@ysi.com

California
EQUIPCO Sales and Service • 1110 Burnett Avenue, Suite D
Concord, CA • 94520 • Phone: (800)550-5875
Fax: (510)674-8655

Colorado
Ted D. Miller Associates, Inc. • 2525 S. Wadsworth Blvd., Suite 300 • Lakewood, CO • 80227 • Phone: (303) 989-7737 Fax: (303) 989-8875 • E:mail: tdma@earthlink.net

Mississippi
C.C. Lynch & Associates, Inc. • P.O. Box 456 • 300 Davis Street • Pass Christian, MS • 39571 Phone: (800) 333-2252 (228) 452-4612 • Fax (228) 452-2563

US Service Centers for Water Quality Instruments Only

Florida
Aquatic Eco Systems, Inc. • 1767 Benbow Court • Apopka, Florida • Phone: (407) 886-3939 • Fax: (407) 886-6787

Maine
Q.C. Services • P.O. Box 68 • Harrison, Maine • 04040 Phone: (207) 583-2980

Mississippi
Aquacenter • 166 Seven Oaks Road • Leland, Mississippi 38756 • Phone: (601) 378-2861 • Fax: (601) 378-2862

Oregon
Q.C. Services • P.O. Box 14831 • Portland, Oregon • 97293 Phone: (503) 236-2712

Wisconsin
North Central Labs • 400 Lyons Road • Birnamwood, Wisconsin • Phone: (800) 648-7836 • Fax: (715) 449-2454

18.2 Cleaning Instructions

Equipment exposed to biological, radioactive, or toxic materials must be cleaned and disinfected before being serviced. Biological contamination is presumed for any instrument, probe, or other device that has been used with body fluids or tissues, or with wastewater. Radioactive contamination is presumed for any instrument, probe or other device that has been used near any radioactive source.

If an instrument, probe, or other part is returned or presented for service without a Cleaning Certificate, and if in our opinion it represents a potential biological or radioactive hazard, our service personnel reserve the right to withhold service until appropriate cleaning, decontamination, and certification has been completed. We will contact the sender for instructions as to the disposition of the equipment. Disposition costs will be the responsibility of the sender.

When service is required, either at the user's facility or at a YSI Service Center, the following steps must be taken to ensure the safety of service personnel.

- In a manner appropriate to each device, decontaminate all exposed surfaces, including any containers. 70% isopropyl alcohol or a solution of 1/4-cup bleach to 1-gallon tap water is suitable for most disinfecting. Instruments used with wastewater may be disinfected with .5% Lysol if this is more convenient to the user.
- The user shall take normal precautions to prevent radioactive contamination and must use appropriate decontamination procedures should exposure occur.
- If exposure has occurred, the customer must certify that decontamination has been accomplished and that no radioactivity is detectable by survey equipment.
- Any product being returned to the YSI Repair Center should be packed securely to prevent damage.
- Cleaning must be completed and certified on any product before returning it to YSI.

18.3 Packing Procedure

- Clean and decontaminate items to ensure the safety of the handler.
- Complete and include the Cleaning Certificate.
- Place the product in a plastic bag to keep out dirt and packing material.
- Use a large carton, preferably the original, and surround the product completely with packing material.
- Insure for the replacement value of the product.

18.4 Cleaning Certificate

Organization _____

Department _____

Address _____

City _____ State __ Zip _____

Country _____ Phone _____

Model No. of Device __ Lot Number _____

Contaminant (if known) _____

Cleaning Agent(s) used _____

Radioactive Decontamination Certified?

(Answer only if there has been radioactive exposure)

_____ Yes _____ No

Cleaning Certified By _____

Name Date

18.5 Warranty

The instrument is warranted for three years against defects in workmanship and materials when used for its intended purposes and maintained according to instructions. The probe module and cables are warranted for one year. The dissolved oxygen, temperature/conductivity, pH, and pH/ORP combination sensors are warranted for one year. Damage due to accidents, misuse, tampering, or failure to perform prescribed maintenance is not covered. The warranty period for chemicals and reagents is determined by the expiration date printed on their labels. Within the warranty period, YSI will repair or replace, at its sole discretion, free of charge, any product that YSI determines to be covered by this warranty.

To exercise this warranty, write or call your local YSI representative, or contact YSI Customer Service in Yellow Springs, Ohio. Send the product and proof of purchase, transportation prepaid, to the Authorized Service Center selected by YSI. Repair or replacement will be made and the product returned transportation prepaid. Repaired or replaced products are warranted for the balance of the original warranty period, or at least 90 days from date of repair or replacement.

Limitation of Warranty

This Warranty does not apply to any YSI product damage or failure caused by (i) failure to install, operate or use the product in accordance with YSI's written instructions, (ii) abuse or misuse of the product, (iii) failure to maintain the product in accordance with YSI's written instructions or standard industry procedure, (iv) any improper repairs to the product, (v) use by you of defective or improper components or parts in servicing or repairing the product, or (vi) modification of the product in any way not expressly authorized by YSI.

THIS WARRANTY IS IN LIEU OF ALL OTHER WARRANTIES, EXPRESSED OR IMPLIED, INCLUDING ANY WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE. YSI'S LIABILITY UNDER THIS WARRANTY IS LIMITED TO REPAIR OR REPLACEMENT OF THE PRODUCT, AND THIS SHALL BE YOUR SOLE AND EXCLUSIVE REMEDY FOR ANY DEFECTIVE PRODUCT COVERED BY THIS WARRANTY. IN NO EVENT SHALL YSI BE LIABLE FOR ANY SPECIAL, INDIRECT, INCIDENTAL OR CONSEQUENTIAL DAMAGES RESULTING FROM ANY DEFECTIVE PRODUCT COVERED BY THIS WARRANTY.

19. Appendix F Ferrite Bead Installation

⚠ **WARNING:** If you are using your YSI 556 in a European Community (CE) country or in Australia or New Zealand, you must attach a ferrite bead to the 655173 PC Interface Cable and the YSI 6117 Charger Adapter Cable in order to comply with the Residential, Commercial and Light Industrial Class B Limits for radio-frequency emissions specified in EN55011 (CISPR11) for Industrial, Scientific and Medical laboratory equipment. These ferrite assemblies are supplied as part of cable kits.

1. Make a small loop (approximately 5 cm in diameter) in the cable near the YSI 556 MS-19 connector.

2. Lay the open ferrite bead assembly under the loop with the cable cross-over position within the cylinder of the ferrite bead.

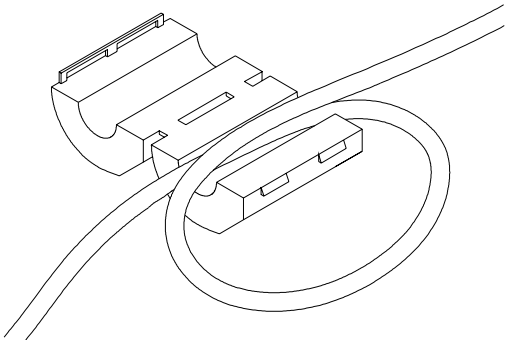


Figure 19.1 Ferrite Bead Installation

3. Snap the two pieces of the bead together making certain that the tabs lock securely.

4. When the installation is complete, the 655173 and YSI 6117 cables should resemble the following drawings.

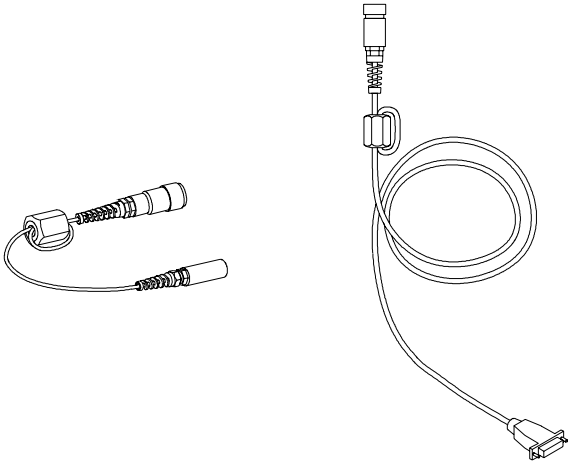


Figure 19.2 Cables with Ferrite Beads

20. Appendix G EcoWatch

EcoWatch™ for Windows™ must be used as the PC software interface to the YSI 556 MPS. EcoWatch is a powerful tool that can also be used with YSI 6-series sondes. Many features of the software will only be utilized by advanced users or are not relevant to the 556 MPS at all. This section is designed in tutorial format to familiarize you with the commonly used features of EcoWatch so that it will be possible to:

- Upload data from a 556 MPS to a PC
- Assemble plots and reports of your data
- Zoom in on certain segments of the plots of your data to facilitate analysis
- Show statistical data for your studies
- Export data in spreadsheet-compatible formats
- Print plots and reports

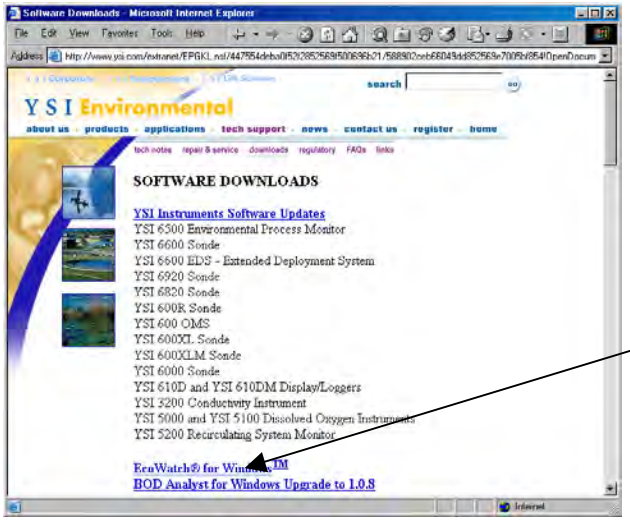
The advanced features of EcoWatch can be explored by downloading a 6-series manual from the YSI Web Site (www.ysi.com), purchasing a hard copy of the manual through YSI Customer Service (Item # 069300), or utilizing the on-line help feature of the software.

20.1 Installing EcoWatch for Windows

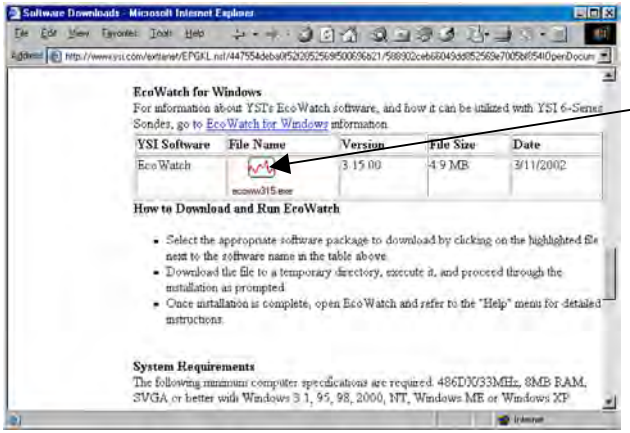
EcoWatch for Windows is available at no cost via a download from the YSI Web Site.

1. Access the YSI Environmental Web Site at www.ysi.com/edownloads.

2. Click on the **EcoWatch for Windows** link (or scroll down until you see the EcoWatch for Windows icon).



3. Click on the EcoWatch for Windows icon and save the file to a temporary directory on your computer.



4. After the download is complete, run the EcoWatch file (that you just downloaded) and follow the on screen instructions to install the software on your computer.

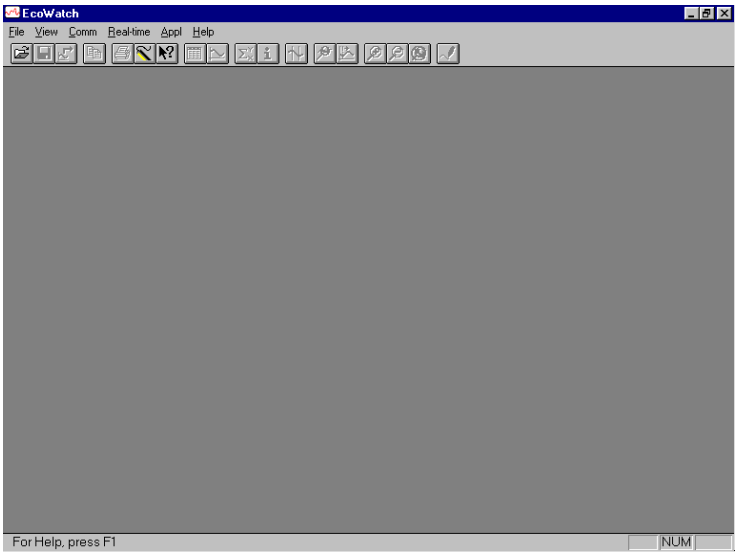
If you encounter difficulties in the download procedure, contact YSI Customer Service. Refer to ***Appendix E Customer Service***. Alternatively, you may purchase the software on CD ROM (Item #006075) by contacting YSI Customer Service.

20.2 EcoWatch Tutorial

This EcoWatch tutorial is designed to teach you the commonly used operations associated with the software when used with your 556 MPS.

After you have uploaded a file, Refer to Section 8.4 Upload to PC, you will see two files in the C:\ECOWWIN\DATA directory; the file you transferred and a file supplied by YSI designated SAMPLE.DAT. This SAMPLE.DAT file is referred to in the remainder of this tutorial section. After following the instructions below for the analysis of SAMPLE.DAT, you apply the same analysis to the data file which was uploaded from your 556 MPS to assure that you are familiar with the basic features and capabilities of EcoWatch for Windows.

To start the analysis of the SAMPLE.DAT file, note that a shortened menu bar is visible and many of the tools in the toolbar appear dimmed or “grayed out” before any file is opened (see below).



Full activation of EcoWatch features will be realized after a file is opened.

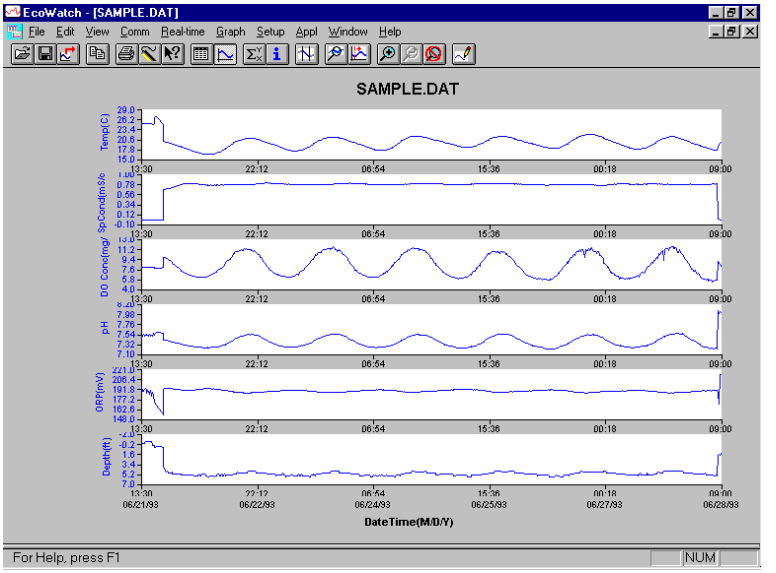
To open the sample data file:

5. 1. Click the **File** menu  button in the toolbar.

6. 2. Select the **SAMPLE.DAT** file.

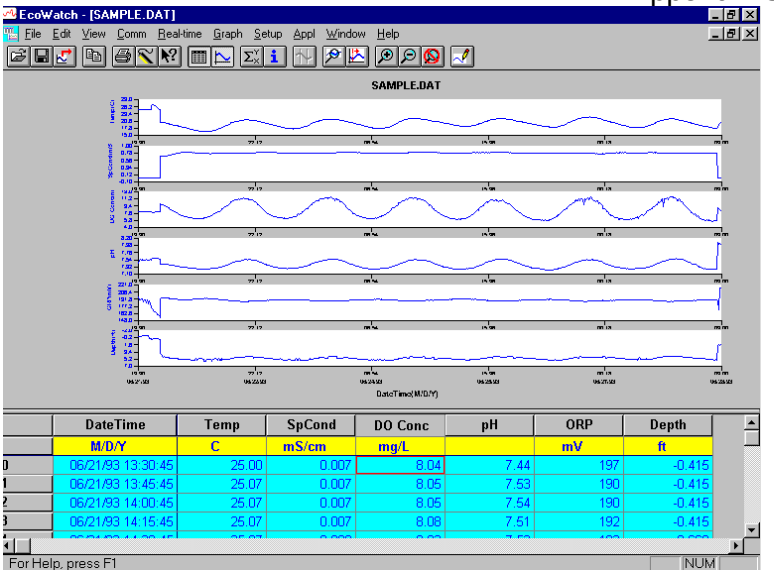
7. 3. Click **OK** to open the file.

The following display will appear:



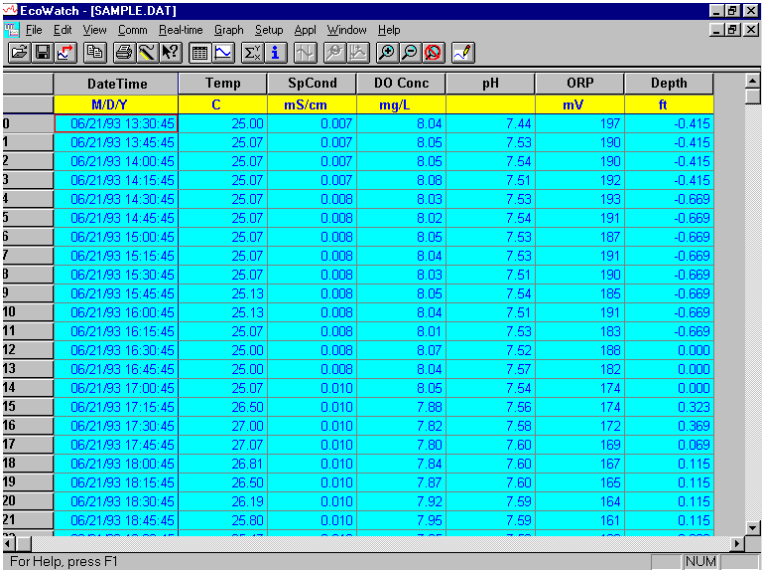
Note that the data in this file appears as a graph of temperature, specific conductance, dissolved oxygen, pH, ORP, and depth, all versus time. The graphs are scaled automatically so that all data fits comfortably on the computer screen. Note also that this data file was obtained with a 6-series sonde for which a depth sensor is available. Depth is NOT a current parameter for the 556 MPS.

The **Table**  and **Graph**  buttons on the toolbar are on/off switches that are used to display or hide the graph and table pages respectively. When displaying a graph and a table at the same time, you can control the relative size of the two pages by placing the cursor over the small bar that separates them and then dragging it to the desired location. Click the **Table**  button to generate the following dual display of data.



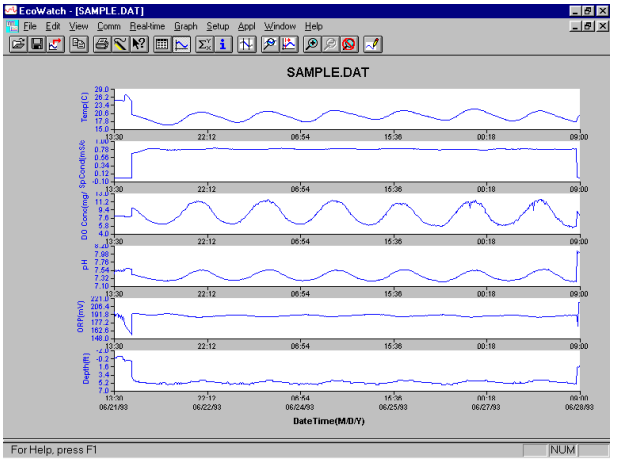
	DateTime	Temp	SpCond	DO Conc	pH	ORP	Depth
	M/D/Y	C	mS/cm	mg/L		mV	ft
0	06/21/93 13:30:45	25.00	0.007	8.04	7.44	197	-0.415
1	06/21/93 13:45:45	25.07	0.007	8.05	7.53	190	-0.415
2	06/21/93 14:00:45	25.07	0.007	8.05	7.54	190	-0.415
3	06/21/93 14:15:45	25.07	0.007	8.08	7.51	192	-0.415

Now click the **Graph** button (turn it off) to display only a report of your data as shown below. Note that the size of the report can be varied by clicking on the and buttons in the Toolbar.

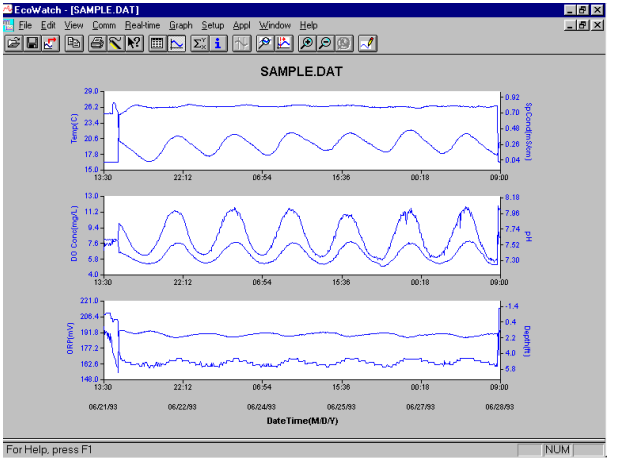


	DateTime	Temp	SpCond	DO Conc	pH	ORP	Depth
	M/D/Y	C	mS/cm	mg/L		mV	ft
0	06/21/93 13:30:45	25.00	0.007	8.04	7.44	197	-0.415
1	06/21/93 13:45:45	25.07	0.007	8.05	7.53	190	-0.415
2	06/21/93 14:00:45	25.07	0.007	8.05	7.54	190	-0.415
3	06/21/93 14:15:45	25.07	0.007	8.08	7.51	192	-0.415
4	06/21/93 14:30:45	25.07	0.008	8.03	7.53	193	-0.669
5	06/21/93 14:45:45	25.07	0.008	8.02	7.54	191	-0.669
6	06/21/93 15:00:45	25.07	0.008	8.05	7.53	187	-0.669
7	06/21/93 15:15:45	25.07	0.008	8.04	7.53	191	-0.669
8	06/21/93 15:30:45	25.07	0.008	8.03	7.51	190	-0.669
9	06/21/93 15:45:45	25.13	0.008	8.05	7.54	185	-0.669
10	06/21/93 16:00:45	25.13	0.008	8.04	7.51	191	-0.669
11	06/21/93 16:15:45	25.07	0.008	8.01	7.53	183	-0.669
12	06/21/93 16:30:45	25.00	0.008	8.07	7.52	188	0.000
13	06/21/93 16:45:45	25.00	0.008	8.04	7.57	182	0.000
14	06/21/93 17:00:45	25.07	0.010	8.05	7.54	174	0.000
15	06/21/93 17:15:45	26.50	0.010	7.88	7.56	174	0.323
16	06/21/93 17:30:45	27.00	0.010	7.82	7.58	172	0.369
17	06/21/93 17:45:45	27.07	0.010	7.80	7.60	169	0.069
18	06/21/93 18:00:45	26.81	0.010	7.84	7.60	167	0.115
19	06/21/93 18:15:45	26.50	0.010	7.87	7.60	165	0.115
20	06/21/93 18:30:45	26.19	0.010	7.92	7.59	164	0.115
21	06/21/93 18:45:45	25.80	0.010	7.95	7.59	161	0.115

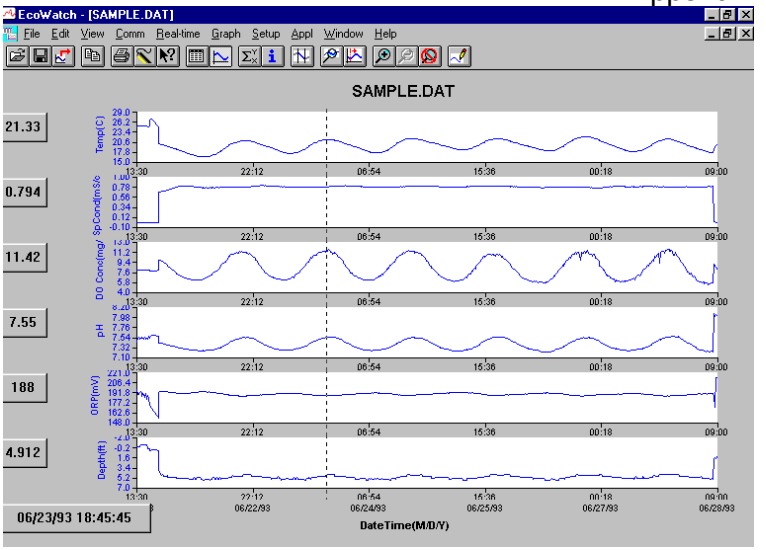
Now return to the original graphic display by toggling the **Table** button "off" and **Graph** button "on".



From the **Setup** menu, click **Graph**. Click **2 Traces per Graph** and notice that the parameters are now graphed in pairs for easy comparison of parameters.

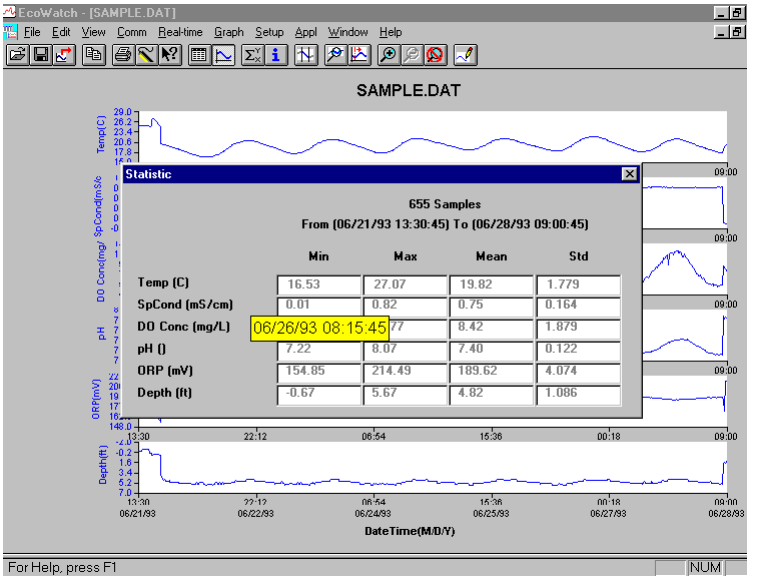


Click **1 Trace per Graph** to return the display to the original setting. Move the cursor to any position in the graph, then click and hold the right mouse button.



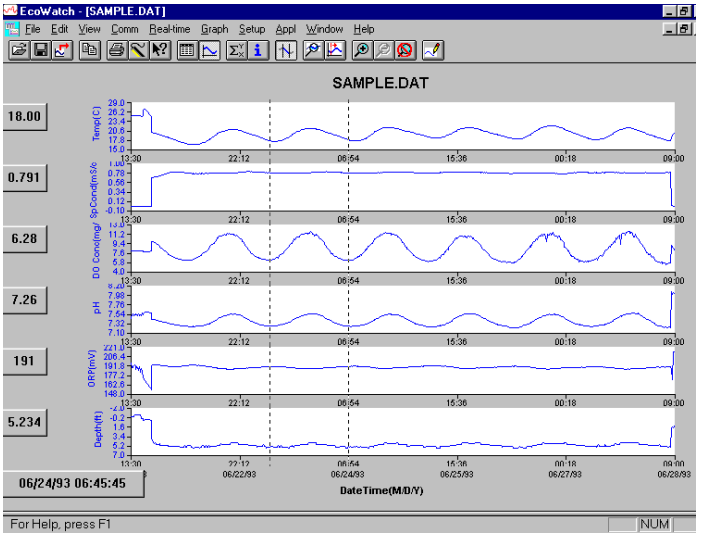
Note that the exact measurements for this point in time are displayed to the left of the graph. While holding down the right mouse button, move to another area on the graph. Notice how the measurements change as you move. When you release the mouse button, the display returns to normal.

To view statistical information for the study, click the **Statistics** button on the toolbar. On the statistics window, click on any min or max value to display the time when it occurred.

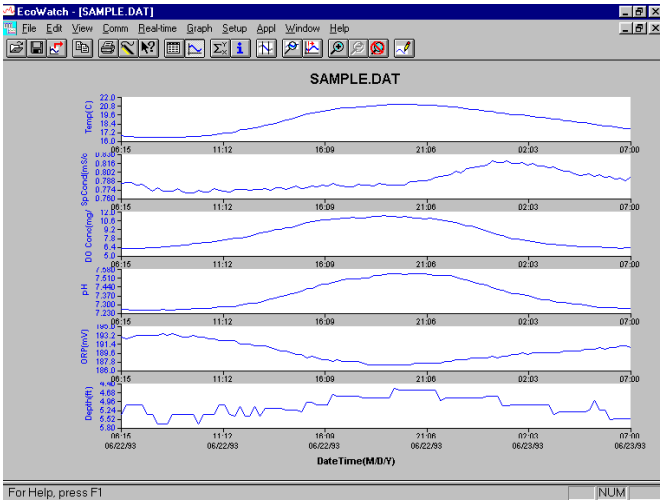


After viewing statistics, click the “x” at the upper right to close the window and return to the normal display.

Now click on the delimiter  icon in the toolbar and then move the displayed icon to the graph. Click at the two points shown by dotted lines in the display below, being sure that the first click is to the left of the second.

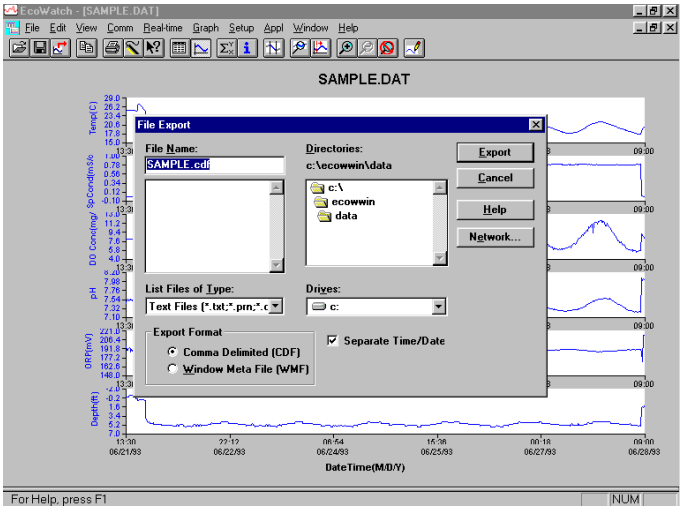


The data between the two selected points will then be graphed in higher resolution as shown below.

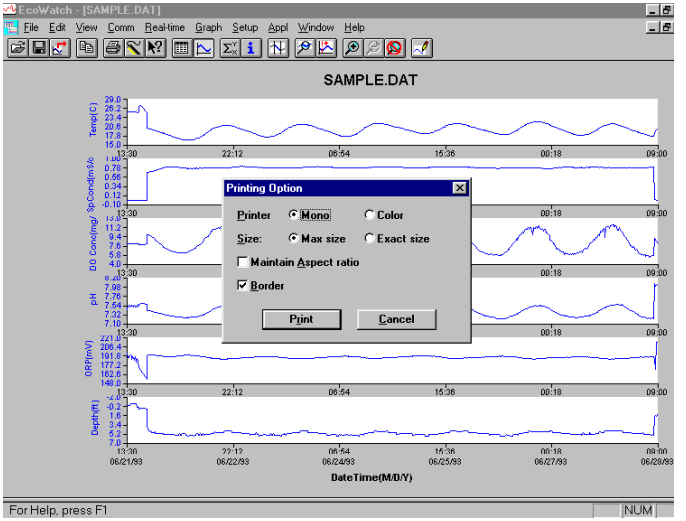


To return to the complete data set, select **Graph** from the toolbar and then click **Cancel Limits**.

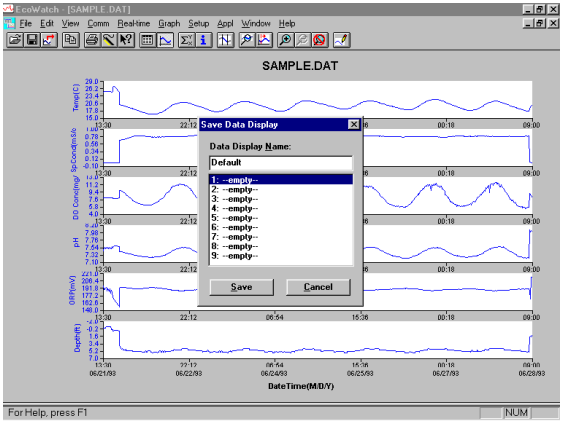
Now select the  icon from the Toolbar to create a new data file which will allow your data to be imported into spreadsheets. Select the default export settings for a Comma Delimited File (.CDF) and click OK. A new spreadsheet-importable file (SAMPLE.CDF) is now present in the same folder as the SAMPLE.DAT file.



Now select the  icon from the toolbar to print the plot. Accept the default settings and click OK to complete the printing operation.



Finally, end the tutorial by saving the **Data Display** in the format shown. From the **File** menu, click **Save Data Display**.



Then type “Default” for the file name and click **Save**. The parameters, colors, format, and x-axis time interval associated with the current display are now saved and can be accessed any time in the future. Nine different data displays may be saved for any data file. You can easily switch between various displays of the data. The data files can be accessed by clicking **Load Data Display** from the file menu and then selecting the desired presentation.

20.2.1 Summary of Toolbar Capability

The EcoWatch toolbar includes buttons for some of the most common commands in EcoWatch, such as **File Open**. To display or hide the toolbar, open the **View** menu and click on the **Toolbar** command. A check mark appears next to the menu item when the toolbar is displayed.

The toolbar is displayed across the top of the application window, below the menu bar.

Click To:

Open an existing data file (.DAT). EcoWatch displays the **Open** dialog box, in which you can locate and open the desired file.

 Save the working Data Display of the active data file. EcoWatch displays the **Save Data Display** dialog box in which you can overwrite existing Data Display or save to a new one.

 Export data as a graph in Window Meta File (.WMF) format or as data in Comma Delimited (.CDF) format.

 Copy the whole graph page or data from the selection on the table to the clipboard.

 Print the active graph page or table page depending on which one is currently active.

 Open a new terminal window to communicate with the sonde.

 Access context sensitive help (Shift+F1).

 Toggle table window during file processing.

 Toggle graph window during file processing.

 Display study statistics.

 Display study info.

 Limit the data to be processed in a study.

 Enlarge a selective portion of graph.

 Center the graph under the cursor.

 Enlarge graph or table 20%.

 Reduce graph or table 20%.

 Return graph or table to its normal state (unzoom)

 Redraw the graph.

20.2.2 Other Capabilities

The above tutorial and function list for the toolbar provide basic information to allow you to view and analyze the field data which was stored in your 556 MPS. Some of the other commonly used capabilities of EcoWatch which the user may want to explore are listed below:

- Customize the units for each parameter, e.g., report uS/cm instead of mS/cm for conductivity.
- Customize the order of parameters in each plot or report.
- Customize the colors and fonts of each data display.
- Manually scale the y-axis sensitivity for each parameter.
- Merging of two or more data files with compatible parameter formats
- View information about the study such as number of points, instrument serial number, etc. which was stored in the 556 with the data.
- Print data reports in different statistical formats.
- Create plots of parameter vs. parameter rather than parameter vs. time.

These additional features of EcoWatch for Windows are explained in detail in the YSI 6-series manual (which can be downloaded at no cost from the YSI Web Site as described above) and the Help selection in the EcoWatch menubar. To purchase a hard copy of the 6-series manual, contact YSI Customer Service using the contact information in *Appendix E Customer Service*.

21. Appendix H Calibration Record Information

When your YSI 556 MPS sensors are initially calibrated, relevant information about the sensors will be stored in a separate file in the YSI 556 MPS memory.

NOTE: This file, by default, will have the name "556 Circuit Board Serial Number.glp." The circuit board serial number is assigned at the factory and has a hexadecimal format such as 000080A4. Thus the default calibration record file would be designated 00080A4.glp. Refer to Section *10.7 GLP Filename* to change the filename.

The information in the calibration record will track the sensor performance of your instrument and should be particularly useful for programs operating under Good Laboratory Practices (GLP) protocols.

21.1 Viewing the Calibration Record (.glp) File

NOTE: Make certain that you have performed a calibration on at least one of the sensors associated with your YSI 556 MPS.

1. Follow the procedures outlined in Section *8.3 View File*.

21.2 Uploading the Calibration Record (.glp) File

NOTE: Make certain that you have performed a calibration on at least one of the sensors associated with your YSI 556 MPS.

1. Follow the procedures outlined in Section *8.4 Upload to PC*.

21.3 Understanding the Calibration Record (.glp) File

1. Open a calibration record file. Refer to Section *8.3 View File*.

2. Use the arrow keys to scroll horizontally and/or vertically to view all the data.

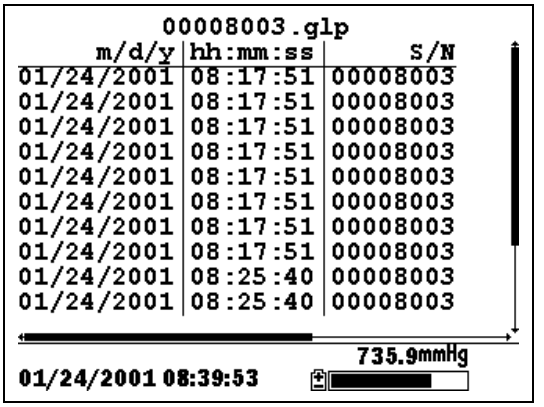


Figure 21.1 Calibration Record Screen 1

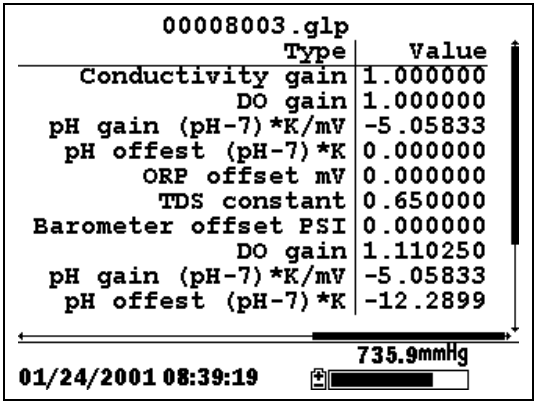


Figure 21.2 Calibration Record Screen 2

NOTE: Each sensor (not parameter) is characterized by either 1 line (Conductivity, Dissolved Oxygen, ORP, TDS, or Barometer (Optional)) or 2 lines (pH) of calibration documentation.

The left hand portion of each calibration entry shows the date and time that a calibration of a particular sensor was performed. In addition, each calibration entry is characterized by the instrument serial number, as defined by YSI. See Figure 21.1 Calibration Record Screen 1. The right hand portion shows the YSI designation of the calibration constants and their values after their calibration has been performed. A more detailed description of the calibration constants is provided below:

- **Conductivity Gain** – A relative number which describes the sensitivity of the sensor. Basically, the value represents the calculated cell constant divided by the typical value of the cell constant (5 cm^{-1}).

- **DO Gain** – A relative number which describes the sensitivity of the sensor. Basically, the value represents the sensor current at the time of calibration divided by the typical value of the sensor current (15 uA).

- **pH Gain** – A number which basically represents the sensitivity of the pH sensor. To remove the effect of temperature on the slope of the relationship of probe output in mv versus pH, the value of pH/mv is multiplied by the temperature in degrees Kelvin (K).

- **pH Offset** – A number which basically represents the offset (or intercept) of the relationship of probe output in mv versus pH, the value of pH is multiplied by the temperature in degrees Kelvin (K).

Anytime you perform a calibration, information concerning the calibration constants will be logged to the Calibration Record file (.glp file). However, if the **Delete All Files** command is used, Refer to Section *8.6 Delete All Files*, the Calibration Record file will also be lost. It is critical that this file should be uploaded to your PC prior to issuing a **Delete All Files** command. Refer to Section *8.4 Upload to PC*.

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Appendix C: QAPjP

Document Information

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Department(s): Quality

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Document Notes:

All Dates and Times are listed in: Central Time Zone

Signature Manifest

Document Number: ENV-MAN-IND1-0001 **Revision:** 03

Title: Quality Manual

All dates and times are in Central Time Zone.

ENV-MAN-IND1-0001 Quality Manual

QM Approval

Name/Signature	Title	Date	Meaning/Reason
Elizabeth Schrage (008534)	Manager - Quality	05 Mar 2021, 12:28:50 PM	Approved

Management Approval

Name/Signature	Title	Date	Meaning/Reason
Steven Sayer (004775)	General Manager 2	05 Mar 2021, 12:34:43 PM	Approved
Jennifer Rice (005579)	Supervisor	05 Mar 2021, 12:59:05 PM	Approved
Jonathan Waldorf (990934)	Manager - Quality Program	05 Mar 2021, 01:50:38 PM	Approved
Felicia Walker (005354)	Manager	05 Mar 2021, 02:39:42 PM	Approved
Timothy Pinckert (003677)	Manager	08 Mar 2021, 08:27:13 AM	Approved
Melanie Booms (005590)	Project Manager 1	08 Mar 2021, 10:12:22 AM	Approved
Richard Bowman (009334)	Systems Administrator	08 Mar 2021, 10:47:13 AM	Approved
Anne Troyer (008754)	Quality Analyst 3	08 Mar 2021, 11:55:08 AM	Approved
Karl Anderson (004767)	Regional Vice President - Oper	09 Mar 2021, 06:55:36 AM	Approved
Scott Bryan (003661)	Quality Analyst 3	09 Mar 2021, 07:07:27 AM	Approved
Kelly Jones (005070)	Manager	11 Mar 2021, 01:44:44 PM	Approved
Jeffrey Worm (005618)	Scientist Team Lead	12 Mar 2021, 08:43:57 AM	Approved
Rachel Wrede (008235)	Manager	15 Mar 2021, 02:14:32 PM	Approved
Sarah Potts (007977)	Manager	16 Mar 2021, 06:49:31 AM	Approved

TITLE PAGE

LABORATORY QUALITY MANUAL

Prepared for:

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Indianapolis, IN 46268
Phone: 317-228-3100

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Quality Manual Approval Signatories

Approval of this quality manual by managerial personnel is recorded on the Signature Manifest located before the Title Page of this manual.

The individuals listed below represent the management team that was in place on the effective date of this version of the manual for the following location:

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Phone: 317-228-3100

Each of the following individuals is a signatory for the quality manual for the location listed above. The application of their signature to the manual signifies their commitment to communicate, implement, and uphold the requirements, policies and procedures specified in this manual and their commitment to continuously improve the effectiveness of the quality management system based on customer feedback and internal assessment.

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Beth Schrage	Quality Manager		
Kelly Jones	Manager – Client Services		
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Tim Pinckert	Manager – Semivolatiles Department		
Rachel Wrede[3]	Manager – Volatiles Department		
Sarah Potts	Manager – Wet Chemistry Department		
Anne Troyer[3]	Quality Assurance Analyst		
Rick Bowman	Systems Administrator		
Scott Bryan	Quality Assurance Analyst/Safety Officer		

[1] Members of the local management team are subject to change during the lifecycle of this document version.
[2] Include if different from the physical address and phone number of the facility.
[3] This individual serves as an Acting Technical Manager for TNI for one or more fields of accreditation.

Manual Approval Signatories

Approval of this manual by managerial personnel is recorded on the Signature Manifest located before the Title Page of this manual.

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Jeff Worm[3]	Scientist – Team Lead		
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[2] Include if different from the physical address and phone number of the facility.
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TABLE OF CONTENTS

1.0 PURPOSE AND SCOPE

1.1 Purpose

This quality manual (manual) outlines the quality management system (QMS) and management structure of the laboratories and service centers affiliated with the environmental sciences (ENV) division of Pace Analytical Services, LLC (PAS). A laboratory is defined by ENV as any facility, however named, that provides testing, sampling, or field measurement services. When the term 'laboratory" is used in this manual, the term refers to all locations listed on the Title Page of this manual and in Section 4.1.3 unless otherwise specified.

The ENV quality management system is also referred to as the quality program throughout this document. In this context, the phrase "quality management system" and "quality program" are synonymous and may be referred to by the acronym QMS.

The quality management system is the collection of policies and processes established by ENV management to consistently meet customer requirements and expectations, and to achieve the goals of providing PAS customers with high quality, cost-effective, analytical measurements and services.

The quality management system is also intended to establish conformance[1] and compliance with the current versions of the following international and national quality system standards:

- ISO/IEC 17025: *General requirements for the competence of testing and calibration laboratories*
- NELAC/TNI Standard Volume 1: *Management and Technical Requirements for Laboratories Performing Environmental Analysis*

[1]The statement of conformity to these Standards pertains only to testing and sampling activities carried out by the laboratory at its physical address, in temporary or mobile facilities, in-network, or by laboratory personnel at a customer's facility.

In addition to the international and national standards, the quality management system is designed to achieve regulatory compliance with the various federal and state programs for which the laboratory provides compliance testing and/or holds certification or accreditation. When federal or state requirements do not apply to all ENV locations, the requirements for compliance to those specifications are provided in addendum to this manual or in other documents that supplement the manual. Customer-specific project and program requirements are not included in the manual in order to maintain client confidentiality.

- A list of accreditation and certifications held by each laboratory associated with this manual is provided in Appendix A.
- A list of analytical testing capabilities offered by each laboratory associated with this manual is provided in Appendix B.

1.2 Scope and Application

This manual applies to each of the PAS locations listed on the Title Page.

The manual was prepared from the quality manual template (template) created by ENV corporate quality personnel. The template outlines the minimum requirements ENV management considers necessary for every ENV location, regardless of scope of services or number of personnel, to establish in order to maintain a quality management system that achieves the objectives of the Quality Policy

(See 4.2.2). In this regard, the template is the mechanism used by the corporate officers (a.k.a. 'top management') to communicate their expectations and commitment for the quality program to ENV personnel.

Each location also has the responsibility to comply with federal and state regulatory and program requirements for which it provides analytical services and holds certification or accreditation. When those requirements are more stringent than the template, the requirements for compliance are provided in addendum to this manual or in other documents that supplement the manual. This document structure maintains consistency in the presentation of the quality management system across the network while providing the location a mechanism to describe and achieve compliance requirements on a program basis.

1.2.1 Quality Manual Template

The quality manual template is developed by the Corporate Quality Director with contribution and input from corporate quality personnel and the corporate officers. Approval of the template by the corporate officers (aka "top management") confirms their commitment to develop and maintain a quality management system appropriate for the analytical services offered by the organization and to communicate their expectations of the quality program to all personnel.

The template and instructions for use of the template are released by corporate quality personnel to the quality assurance manager responsible for each location (Local QM). The local QM uses the template to prepare the laboratory's manual by following the instructions provided. Since the template provides the minimum requirements by which ENV locations must abide, the laboratory may not alter the font, structure or content of the template except where specified by instruction to do so. As previously stated, program specific requirements are provided in addendum or in documents that supplement this manual.

The template is reviewed by corporate quality personnel annually and updated if needed. More frequent review and revision may be necessary to manage change, to maintain conformance and compliance to relevant standards, or to meet customer expectations.

See standard operating procedure (SOP) ENV-SOP-CORQ-00015 *Document Management and Control* for more information.

1.2.2 Laboratory Quality Manual

The manual is approved and released to personnel under the authority of local management whose signatures are identified on the Manual Signatory Page of this manual. The manual is reviewed annually, and location specific information is updated, if needed. More frequent review and revision may be necessary when there are significant changes to the organizational structure, capabilities, and resources of the laboratory. Review and revision of the manual is managed by the local QM. If review indicates changes to the main body of the manual are necessary to maintain conformance and compliance to relevant standards, or to meet customer expectations, the local QM will notify corporate quality personnel to initiate review and/or revision of the template.

See SOP ENV-SOP-CORQ-00015 *Document Management and Control* for more information.

1.2.3 References to Supporting Documents

The template and the manual include references to other laboratory documents that support the quality management system such as policies and standard operating procedures (SOPs). These references include the document's document control number and may include the document title.

This information is subject to change. For example, an SOP may be converted to a policy or the document's title may change. For these types of administrative changes, the manual and template are updated to reflect the editorial change during the manual's next scheduled review/revision cycle or the next time a new version of the manual is released, whichever is sooner.

The local QM maintains a current list of controlled documents used at each location that support the quality management system. This list, known as the "Master List", lists each document used by document control number, title, version, effective date, and reference to any document(s) that the current version supersedes. When there is a difference between the manual and the Master List, the document information in the Master List takes precedence. The current Master List is readily available to personnel for their use and cross-reference. Parties external to the laboratory should contact the laboratory for the most current version.

2.0 REFERENCES

References used to prepare this manual include:

- "Guidelines Establishing Test Procedures for the Analysis of Pollutants Under the Clean Water Act." Federal Register, 40 CFR Part 136, most current version.
- "Test Methods for Evaluating Solid Wastes: Physical/Chemical Methods." SW-846.
- "Methods for Chemical Analysis of Water and Wastes", EPA 600-4-79-020, 1979 Revised 1983, U.S. EPA.
- U.S. EPA Contract Laboratory Program Statement of Work for Organic Analysis, current version.
- U.S. EPA Contract Laboratory Program Statement of Work for Inorganic Analysis, current version.
- "Standard Methods for the Examination of Water and Wastewater." Current Edition APHA-AWWA-WPCF.
- "Annual Book of ASTM Standards", Section 4: Construction, Volume 04.04: Soil and Rock; Building Stones, American Society of Testing and Materials.
- "Annual Book of ASTM Standards", Section 11: Water and Environmental Technology, American Society of Testing and Materials.
- "NIOSH Manual of Analytical Methods", U.S. Department of Health and Human Services, National Institute for Occupational Safety and Health, most current version.
- "Methods for the Determination of Organic Compounds in Finished Drinking Water and Raw Source Water", U.S. EPA, Environmental Monitoring and Support Laboratory – Cincinnati (Sep 1986).
- Quality Assurance of Chemical Measurements, Taylor, John K.; Lewis Publishers, Inc. 1987.

- Methods for Non-conventional Pesticides Chemicals Analysis of Industrial and Municipal Wastewater, Test Methods, EPA-440/1-83/079C.
- Environmental Measurements Laboratory (EML) Procedures Manual, HASL-300, US DOE, February 1992.
- Requirements for Quality Control of Analytical Data, HAZWRAP, DOE/HWP-65/R1, July 1990.
- Quality Assurance Manual for Industrial Hygiene Chemistry, AIHA, most current version.
- National Environmental Laboratory Accreditation Conference (NELAC) Standard- most current version.
- ISO/IEC 17025, General requirements for the competence of testing and calibration laboratories, 2nd Edition 2005-05-15; 3rd Edition 2017-11

  The following are implemented by normative reference to ISO/IEC 17025:

  - ISO/IEC Guide 99, *International vocabulary of metrology –Basic and general concepts and associated terms*
  - ISO/IEC 17000, *Conformity assessment – Vocabulary and general principles*
- Department of Defense Quality Systems Manual (QSM), most current version.
- TNI (The NELAC Institute) Standard, 2009 and 2016 versions.
- UCMR Laboratory Approval Requirements and Information Document, most current version.
- US EPA Drinking Water Manual, most current version.

3.0 TERMS AND DEFINITIONS

Refer to Appendix C for terms, acronyms, and definitions used in this manual and in other documents used by the laboratory to support the quality management system.

4.0 MANAGEMENT REQUIREMENTS

4.1 Organization

4.1.1 Legal Identity

Pace Analytical Services, LLC is authorized under the State of Minnesota to do business as a limited liability company.

4.1.1.1 Change of Ownership

If there is a change of ownership, if a location goes out of business, or if the entire organization ceases to exist, Pace Analytical Services, LLC ensures that regulatory authorities are notified of the change within the time-frame required by each state agency for which the location is certified or accredited.

Requirements for records and other business information are addressed in the ownership transfer agreement or in accordance with appropriate regulatory requirements, whichever takes precedence.

4.1.2 Compliance Responsibility

Laboratory management has the responsibility and authority to establish and implement procedures and to maintain sufficient resources necessary to assure its activities are carried out in such a way to meet the compliance requirements of the quality management system.

4.1.3 Scope of the Quality Management System

The quality management system applies to work carried out at each location covered by this manual including permanent facilities, at sites away from its permanent facilities, or in associated temporary or mobile facilities.

The permanent and mobile facilities to which this manual applies are listed on the Title Page of this manual.

4.1.4 Organization History and Information

Founded in 1978, Pace Analytical Services, LLC (PAS) is a privately held scientific services firm operating one of the largest full-service contract laboratory and service center networks in the United States. The company's network offers inorganic, organic and radiochemistry testing capabilities; specializing in the analysis of trace level contamination in air, drinking water, groundwater, wastewater, soil, biota, and waste.

With over 90 laboratories and services centers in the contiguous US and in Puerto Rico, the network provides project support for thousands of industry, consulting, engineering and government professionals.

PAS delivers the highest standard of testing and scientific services in the market. We offer the most advanced solutions in the industry, backed by truly transparent data, a highly trained team, and the service and support that comes from four decades of experience.

4.1.4.1 Organization Structure

Each location maintains a local management structure under the oversight and guidance of corporate personnel. Local management is responsible for making day-to-day decisions regarding the operations of the facility, implementing the quality management system, upholding the requirements of the quality program, and for supervision of personnel.

Local management is provided by the Regional Vice-President - Operations (RVPO), Corporate Quality Program Manager (QPM), General Manager (GM), Quality Manager (QM), and department specific management and supervisory personnel.

The GM reports to a Vice-President of Operations (RVPO), who is responsible for the management of multiple laboratories and service centers across the division. The RVPO reports directly to the Chief Operating Officer (COO).

The QM reports to a Quality Program Manager (QPM), who is responsible for managing quality personnel for multiple locations across the division. The QPM reports directly to the Corporate Quality Director (CQD). The QM also maintains an indirect reporting relationship to the GM of each location that the QM manages.

Technical oversight for each location is provided by corporate personnel, RVPO, QPM, GM, QM, and department-specific management.

Refer to the organization charts provided in Appendix D to view the management structure, reporting relationships, and the interrelationships between positions.

4.1.5 Management Requirements

4.1.5.1 Personnel

The laboratory is staffed with administrative and technical personnel who perform and verify work under the supervision of managerial personnel.

- Technical personnel include analysts and technicians that generate or contribute to the generation of analytical data and managerial personnel that oversee day to day supervision of laboratory operations. Including the reporting of analytical data and results, monitoring QA/QC performance, and monitoring the validity of analysis to maintain data integrity and reliability.
- Administrative personnel support the day-to-day activities of the laboratory.
- IT personnel maintain the information technology systems and software used at the laboratory.
- Client services personnel include project managers and support staff that manage projects.
- Managerial personnel make day-to-day and long-term decisions regarding the operations of the facility, supervise personnel, implement the quality management system and uphold the requirements of the quality program.

All personnel regardless of responsibilities are expected to carry out their duties in accordance with the policies and processes outlined in this manual and in accordance with standard operating procedures (SOPs) and other quality system documents. The laboratory's policies and procedures are designed for impartiality and integrity. When these procedures are fully implemented, personnel remain free from undue pressure and other influences that adversely impact the quality of their work or data.

4.1.5.1.1 Key Personnel

Key personnel include the management positions that have the authority and responsibility to plan, direct, and control, activities of the division (corporate) or the laboratory.

The following tables list key personnel positions by PAS job title and the position's primary deputy:

Key Personnel: Corporate

Key Personnel	Primary Deputy
Chief Executive Officer	Chief Operating Officer
Chief Operating Officer	Chief Executive Officer
Chief Compliance Officer	Quality Director
Corporate Quality Director	Chief Compliance Officer
Health and Safety Director	Chief Compliance Officer
IT Director	LIMS Administrator, however named.

Key Personnel: Laboratory

Key Personnel	Primary Deputy
Regional Vice President - Operations	Chief Operating Officer or as designated.
Quality Program Manager	A different QPM or Corporate Quality Director
General Manager	Regional Vice President of Operations
Quality Manager	Quality Program Manager
Manager – Client Services	General Manager or as designated.
Local IT	Corporate IT Director or as designated.
Department Manager	General Manager
Technical Director[1]/Manager[1] Acting Technical Manager TNI	Another qualified employee
Operations Manager[1]	General Manager

[1] *Position may not be staffed at each location.*

Some state certification programs require the agency to be notified when there has been a change in key personnel. Program-specific requirements and timeframes for notification by agency, are tracked and upheld by the local QM, when these requirements apply.

4.1.5.2 Roles and Responsibilities

The qualifications, duties, and responsibilities for each position are detailed in job descriptions maintained by PAS's corporate Human Resource's Department (HR).

The following summaries briefly identify the responsibility of key personnel positions in relation to the ENV quality management system.

Chief Executive Officer (CEO): The CEO has overall responsibility for performance of the organization and endorses the quality program. Working with corporate and laboratory management, the CEO provides the leadership and resources necessary for ENV locations to achieve the goals and objectives of the quality management system and quality policy statement.

Chief Operating Officer (COO): The COO oversees all aspects of operations management including, strategic planning, budget, capital expenditure, and management of senior management personnel for ENV In this capacity, the COO provides leadership and resources necessary to help top management at each ENV location achieve the goals and objectives of the quality management system and quality policy statement.

Chief Compliance Officer (CCO): The CCO oversees the quality assurance and environmental health and safety programs (EHS) for each business unit. The CCO is responsible for planning and policy development for these groups to ensure regulatory compliance and to manage risk. The position provides leadership and guidance necessary for all PAS locations to achieve the goals and objectives of the quality and EHS programs.

The CCO also serves as the Ethics Officer (ECO). The ECO develops the Ethics and Data Integrity Policy and Training Program and provides oversight for reporting and investigation of ethical misconduct to maintain employee confidentiality during the process. The ECO provides guidance and instruction for follow-up actions necessary to remedy the situation and deter future recurrence.

Corporate Director of Quality (CQD): The Corporate Director of Quality is responsible for developing and maintaining the ENV quality program under guidance and assistance from the CEO, COO, and CCO. This position develops corporate quality policy and procedure and analyzes metric data and other performance indicators to assess and communicate the effectiveness of the quality program to top management. The position provides leadership and guidance for implementation of the quality program across all ENV locations.

Corporate Quality Program Manager (QPM): The Quality Program Manager is responsible for managing the implementation of the ENV quality program for one or more locations in the network. Working with the CQD and local laboratory management to which they are assigned, the QPM provides leadership, guidance and resources, including allocation of personnel, necessary to achieve the goals of ENV quality program.

Corporate Director of Information Technology: The Corporate Director of IT oversees the systems and processes of information technology used to support the quality program. These systems include Laboratory Information Management Systems (LIMS); data acquisition, reduction, and reporting software; virus-protection, communication tools, and ensuring the integrity and security of electronic data.

Regional Vice-President of Operations): The RVPO has full responsibility for administrative and operations management and performance of a group of ENV laboratories and service centers. Working with the COO and local laboratory management, the RVPO provides leadership, guidance and resources, including allocation of personnel, necessary to achieve the goals of ENV quality program.

General Manager (GM): The GM is responsible for the overall performance and administrative and operations management of an ENV location and associated service center(s). This position is responsible to provide leadership and resources, including allocation and supervision of personnel, necessary for the location to implement and achieve the goals of the PAS quality program. In this capacity, the position assures laboratory personnel are trained on and understand the structure and components of the quality program defined in this manual as well as the policies and procedures in place to implement the quality management system.

The GM of NELAC/TNI Accredited laboratories is also responsible for the designation of technical personnel to serve as acting technical managers for TNI for the fields of accreditation held by the laboratory (See Section 4.1.5.2.1) and for notifying the accreditation body (AB) of any extended absence or reassignment of these designations.

Quality Manager (QM): The QM oversees and monitors implementation of the quality management system for each ENV location assigned and communicates

deviations to laboratory management. The QM is independent of the operation activities for which they provide oversight and has the authority to carry out the roles and responsibilities of their position without outside influence.

Additionally, in accordance with the TNI Standard, the QM:

- serves as the focal point for QA/QC and oversees review of QC data for trend analysis;
- evaluates data objectively and perform assessments without outside influence;
- has documented training and experience in QA/QC procedures and the laboratory's quality system;
- has a general knowledge of the analytical methods offered by the laboratory;
- coordinates and conducts internal systems and technical audits;
- notifies laboratory management of deficiencies in the quality system;
- monitors corrective actions;
- provides support to technical personnel and may serve as the primary deputy for the acting TNI Technical Manager(s).

Manager-Client Services (CSM): This position is responsible for training and management of client facing staff that serve as the liaison between PAS and the customer to ensure that projects are successfully managed to meet the expectations and needs of PAS customers. This position is also responsible for sharing positive and negative customer feedback with laboratory management so that this information may be used to improve the quality program.

Local IT Manager, however named: Local IT managers are responsible for maintaining the IT systems used to support the quality program. These systems include Laboratory Information Management Systems (LIMS); data acquisition, reduction, and reporting software; virus-protection, communication tools, and ensuring the integrity and security of electronic data.

Department Manager (DM): The DM is responsible for administrative and operations management and implementation of the quality management system in the work area he/she oversees. These responsibilities include but are not limited to: training and supervision of personnel, monitoring work activity to maintain compliance with this manual, SOPs, policies and other instructional documents that support the quality management system; method development, validation and the establishment and implementation of SOPs to assure regulatory compliance and suitability for intended purpose; monitoring QA/QC performance, proper handling and reporting of nonconforming work, purchasing of supplies and equipment adequate for use, maintaining instrumentation and equipment in proper working order and calibration, and general maintenance of administrative and technical processes and procedures established by the laboratory.

Operations Manager (OM): The OM is responsible for management of production and/or other duties assigned by the GM.

4.1.5.2.1 Acting Technical Manager (TNI Accreditation):

For ENV locations that are NELAC/TNI accredited:

The TNI Standard specifies requirements for the qualification and duties of technical personnel with managerial responsibility. These requirements are associated in the Standard to the designation 'technical manager(s), however named'. These responsibilities may be assigned to multiple individuals and are not associated with any specific job title.

The TNI requirements for personnel that provide technical oversight correlate with ENV job descriptions for Department Manager or Supervisor. However, the duties may be assigned to any PAS employee that meets the TNI specified qualifications.

Personnel assigned this designation retain their assigned job title. The job title may be appended with *"acting as technical manager for TNI"* and the technology or field of accreditation for which the employee is approved, if necessary.

When TNI Accreditation Bodies (AB) refer to these employees as 'technical manager' or 'technical director' on the official certificate or the scope of accreditation, this reference is referring to their approval to carry out duties of the 'technical manager, however named' as specified in the TNI Standard.

In accordance with the TNI Standard, the acting Technical Manager(s) for TNI are responsible for monitoring the performance of QC/QA in the work areas they oversee.

If the absence of any employee that is approved as acting technical manager for TNI exceeds 15 calendar days, the duties and responsibilities specified in the TNI Standard are temporarily reassigned to another employee that meets the qualifications for the technology or field of accreditation. If the employee's absence exceeds 35 calendar days, the QM will formally notify the TNI primary AB of the absence and the details of reassignment of duties in writing.

Refer to the applicable TNI Standard for requirements for technical oversight and required qualifications of the acting Technical Manager(s) for each discipline (chemical, limited inorganic chemistry, and microbiology).

4.1.5.3 Conflict of Interest

A conflict of interest is a situation where a person has competing interests. Laboratory management looks for potential conflict of interest and undue pressures

that might arise in work activities and then includes countermeasures in policies and procedures to mitigate or eliminate the conflict.

See policy COR-POL-0004 *Ethics Policy* for more information.

4.1.5.4 Confidentiality

Laboratory management is committed to preserving the confidentiality of PAS customers and confidentiality of business information.

Procedures used by the laboratory to maintain confidentiality include:

- A Confidentiality Agreement which all employees are required to sign at the time of employment and abide by the conditions of throughout employment;
- Record retention and disposal procedures that assure confidentiality is maintained;
- Physical access controls and encryption of electronic data; and
- Protocol for handling Confidential Business Information (CBI).

Client information obtained or created during work activities is considered confidential and is protected from intentional release to any person or entity other than the client or the client's authorized representative, except when the laboratory is required by law to release confidential information to another party, such as a regulatory agency or for litigation purposes. In which case, the laboratory will notify the client of the release of information and the information provided.

The terms of client confidentiality are included in ENV Standard Terms and Conditions (T&C). With the acceptance of ENV Terms and Conditions and/or the implicit contract for analytical services that occurs when the client sends samples to the laboratory for testing, the client authorizes PAS to release confidential information when required.

See policy COR-POL-0004 *Ethics Policy* for more information.

4.1.5.5 Communication

Communication is defined as the imparting or exchanging of news and information. Effective (good) communication occurs when the person(s) you are exchanging information with actively gets the point and understands it.

4.1.5.5.1 Workplace Communication

Good communication in the workplace is necessary to assure work is done correctly, efficiently, and in accordance with client expectations.

Instructions for how to carry out work activities are communicated to personnel via written policy, standard operating procedures, and standard work instructions.

Information about laboratory performance (positive and negative) and ideas for improvement are communicated using various communication channels such as face to face meetings, video conferencing, conference calls, email, memoranda, written reports, and posters.

4.1.5.5.2 External Communication

Communication with external parties such as customers, vendors, business partners, and regulatory agencies takes place every day.

Laboratory management ensure personnel learn to communicate in professional and respectful ways in order to build strong relationships and learn to communicate effectively to avoid misunderstanding.

4.2 Quality Management System

4.2.1 Quality Management System Objectives

The objectives of the laboratory's quality management system are to provide clients with consistent, exemplary professional service, and objective work product that is of known and documented quality that meets their requirements for data usability and regulatory compliance.

Objective work product is analytical services, data, test results, and information that is not influenced by personal feeling or opinions. The quality of being objective is also known as 'impartiality'.

4.2.1.1 Impartiality

The laboratory achieves and maintains impartiality by implementing and adhering to the policies and processes of the quality management system, which are based on industry accepted standards and methodologies.

The laboratory's procedures for handling nonconforming work (See 4.9), corrective and preventive actions (See 4.11, 4.12) and management review (See 4.15) are the primary mechanisms used to identify risk to impartiality and to prompt actions necessary to eliminate or reduce the threat when risk to impartiality is suspected or confirmed.

4.2.1.2 Risk and Opportunity Assessment

Risks are variables that make achieving the goals and objectives of the quality management system uncertain. An opportunity is something that has potential positive consequences for the laboratory.

Laboratory personnel manage risks and opportunities on a daily basis by carrying out the processes that make up the quality management system. Some of the ways in which the quality management system is designed to identify, minimize, or eliminate risk on a daily basis include but are not limited to:

- Capability and capacity reviews of each analytical service request to assure the laboratory can meet the customer's requirements;

- Maintenance of accreditation and certification for test methods in multiple states and programs to cover a broad range of jurisdiction for regulatory compliance;
- SOPs and other controlled instructional documents are provided to personnel to eliminate variability in process. These documents include actions to counter risk factors inherent in the process and are reviewed on a regular basis for on-going suitability and relevancy;
- Participation in proficiency testing programs and auditing activities to verify on-going competency and comparability in performance;
- Provision of on-the-job training and established protocol for quality control (QC) corrective action for nonconforming events;
- An established program for ethics, and data integrity;
- Tiered data review process;
- Culture of continuous improvement;
- Monitoring activities to assess daily and long-term performance; and
- Annual critical review of the effectiveness of the quality management system.

ENV also promotes a continuous improvement culture based on the principles of lean manufacturing. These principles include 3P (Process, Productivity, Performance) and Kaizen. 3P is a platform used by Pace to share best practices and standardization across the network to achieve operational excellence. Kaizen is a team-based process used to implement tools and philosophies of lean to reduce waste and achieve flow with the purpose of improving both external and internal customer satisfaction. ENV's lean programs and activities help to mitigate risk because they generate a collective understanding of vulnerabilities and utilize group-effort to develop and implement solutions at all levels.

Risk and opportunities may also be formally identified using specific risk and opportunity assessment methods such as SWOT Analysis (Strength, Weakness, Opportunity, Threats) and 3-Stage Impact/Probability Grids.

4.2.1.3 Communication of the Quality Management System

This manual is the primary mechanism used by laboratory management to communicate the quality management system to laboratory personnel.

To assure personnel understand and implement the quality program outlined in the manual:

- All laboratory personnel are required to sign a Read and Acknowledgement Statement to confirm the employee has: 1) been informed of the manual by laboratory management, 2) has access to the manual, 3) has read the manual 4) understands the content of the manual, and 5) agrees to abide by the requirements, policies and procedures therein.

- Personnel are informed that the manual provides the "what" of the quality management system. The "how to" implementation of the quality management system is provided in policy, SOPs, standard work instructions, and other controlled instructional documents.

4.2.2 Quality Policy Statement

The quality policy of the laboratory is to provide customers with data of known and documented quality fit for their intended purpose. The laboratory achieves this policy by implementing the quality management system defined in this manual, by following industry accepted protocol for analytical testing and quality assurance and quality control (QA/QC) activities, by conformance with published and industry accepted testing methodologies, and by compliance with international and national standards for the competency and/or accreditation of testing laboratories.

Intrinsic to this policy statement is each of the following principles:

- The laboratory will provide customers with reliable, consistent, and professional service. This is accomplished by making sure the laboratory has the resources necessary to maintain capability and capacity; that staff are trained and competent to perform the tasks they are assigned; that client-facing staff are trained and prepared to find solutions to problems and to assist customers with their needs for analytical services. Customer feedback, both positive and negative, is shared with personnel and used to identify opportunities for improvement.
- The laboratory maintains a quality program that complies with applicable state, federal, and industry standards for analytical testing and competency.

  ISO/IEC 17025 and the TNI (The NELAC Institute) Standard is used by ENV to establish the minimum requirements of the ENV quality program.

  ISO/IEC 17025 is a competency standard that outlines the general requirements for the management system for calibration and testing laboratories. It is the primary quality system standard from which other quality system standards, such as the TNI Standard, are based. The TNI Standards are consensus standards that provides management and technical requirements for laboratories performing environmental analysis.
- Laboratory management provides training to personnel so that all personnel are familiar with the quality management system outlined in this manual and that they understand that implementation of the quality management system is achieved by adherence to the organization's policies and procedures.
- Laboratory management continuously evaluates and improves the effectiveness of the quality management system by responding to customer feedback, and other measures of performance, such as but not limited to: the results of internal/external audits, proficiency testing, metrics, trend reports, and annual and periodic management reviews.

4.2.2.1 Ethics Policy / Data Integrity Program

PAS has established a comprehensive ethics and data integrity program that is communicated to all PAS employees in order that they understand what is expected

of them. The program is designed to promote a mindset of ethical behavior and professional conduct that is applied to all work activities.

The key elements of the PAS Ethics / Data Integrity Program include:

- Ethics Policy (COR-POL-0004);
- Ethics Officer;
- Standardized data integrity training course taken by all new employees on hire and a yearly refresher data integrity training course for all existing employees;
- Policy Acknowledgement Statements that all PAS personnel, including contract and temporary, are required to sign at the time of employment and again during annual refresher training to document the employee's commitment and obligation to abide by the company's standards for ethics, data integrity and confidentiality;
- SOPs that provide instructions for how to carry out a test method or process to assure tasks are done correctly and consistently by each employee;
- On the Job Training;
- Data integrity monitoring activities which include, but are not limited to, primary, secondary and completeness data reviews, internal technical and system audits, data audits, data surveillance, and proficiency testing; and
- Confidential reporting process for alleged ethics and data integrity issues.

All laboratory managers are expected to provide a work environment where personnel feel safe and can report unethical or improper behavior in complete confidence without fear of retaliation. Retaliation against any employee that reports a concern is not tolerated.

PAS has engaged Lighthouse Services, Inc. to provide personnel with an anonymous reporting process available to them 24 hours a day/7 days per week. The alert line may be used by any employee to report possible violations of the company's ethics and data integrity program. When using the reporting process, the employee does need to specify the location of concern and when reporting by email, also include the company name. Messages are collected, documented, reviewed, and will be followed up on by the Ethics Compliance Officer to resolve the matter. Investigations concerning data integrity are kept confidential.

Lighthouse Compliance Alert Lines:

English Speaking US & Canada	(844) 940-0003
Spanish Speaking North America	(800) 216-1288
Internet	www/lighthouse-services.com/pacelabs
Email	reports@lighthouse-services.com

4.2.3 Management Commitment: Quality Management System

Evidence of management's commitment for the development, maintenance, and on-going improvement of the quality management system is provided by the application of their signature of approval to this manual. Their signature confirms they understand their responsibility to implement the quality management system outlined in this manual, to communicate the quality program to personnel, and to uphold requirements of the program during work activities.

4.2.4 Management Commitment: Customer Service

Management communicates the importance of meeting customer and regulatory requirements to personnel by training personnel on the quality management system outlined in this manual, implementing the quality management system outlined in this manual, and upholding these requirements for all work activities.

4.2.5 Supporting Procedures

Documents that support this manual and quality management system are referenced throughout this manual. The structure of the document management system is outlined in SOP ENV-SOP-CORQ-0015 *Document Management and Control* and summarized in the following subsections.

4.2.5.1 Quality Management System Document Structure

Documents associated with the quality management system are classified into document types that identify the purpose of the document and establish how the document is managed and /or controlled.

Document types are ranked to establish which documents takes precedence when there is an actual or perceived conflict between documents and to establish the hierarchal relationships between documents. The ranking system also provides information to document writers and reviewers to assure downline documents are in agreement with documents of higher rank. Project specific documents are not ranked because client specific requirements are not incorporated into general use documents in order to maintain client confidentiality.

Examples: ENV QMS Documents: Internal

Document Type	Purpose
Quality Manual	Outlines the laboratory's quality management system and structure and how it works for a system including policy, goals, objectives and detailed explanation of the system and the requirements for implementation of system. Includes roles and responsibilities, relationships, procedures, systems and other information necessary to meet the objectives of the system described.
Policy	Provide requirements and rules for a PAS process and is used to set course of actions and to guide and influence decisions. Policy describes the "what", not the "how".
Standard Operating Procedure	Provide written and consistent set of instructions or steps for execution of a routine process, method, or set of tasks performed by PAS. Includes both fundamental and operational elements for implementation of the systems described in PAS manual(s). Assures that activities are performed properly in accordance with applicable requirements. Designed to ensure consistency, protect EHS of employees and environment, prevent failure in

	the process and ensure compliance with company and regulatory requirements. SOPs describes the "how" based on policy.
Standard Work Instruction	Provide step by step visual and/or written instruction to carry out a specific task to improve competency, minimize variability, reduce work injury and strain, or to boost efficiency and quality of work (performance). SWI are associated with an SOP unless the task described is unrelated to generation of or contribution to environmental data or analytical results.
Template	Pre-formatted document that serves as a starting point for a new document.
Document Type	**Purpose**
Guide	Provide assistance to carry out a task.
Form	Used for a variety of purposes such as to provide a standardized format to record observations, to provide information to supplement an SOP.
Guidance	Non-binding advice used to explain internal policies, procedures, or practices.

Example: ENV QMS Documents: External

Certificate	Lists parameters, methods, and matrices for which the laboratory is certified/accredited to perform within the jurisdiction of the issuing regulatory agency or accreditation body.
Reference Document	Provide information, protocol, instructions, and/or requirements. Issued by the specifier. Examples include quality system standards such as ISO/IEC, TNI, DoD and published referenced methods such as Standard Methods, ASTM, SW846, EPA, and federal and state regulatory bodies.
Project Document	Provides requirements necessary to meet individual client expectations for intended use of data. Examples include project quality assurance plans (QAPP), client-program technical specifications, contracts, and other agreements.

Document Hierarchy

Rank	Document
1	Reference Documents
2	Corporate Manual
3	Corporate Policy
4	Corporate SOP
5	Corporate SWI, Templates, Guides, Forms, Guidance
6	Laboratory Manual
7	Laboratory SOP
8	Laboratory SWI, Templates, Guide, Forms, Guidance
NA	Project Documents

4.2.6 Roles and Responsibilities

The roles and responsibilities for technical management and the quality manager is provided in section 4.1.5.2.

4.2.7 Change Management

When significant changes to the ENV quality management system are planned, these changes are managed by corporate quality personnel to assure that the integrity of the quality management system is maintained.

4.3 Document Control

4.3.1 General

The laboratory's procedures for document control are provided in SOP ENV-SOP-CORQ-0015 *Document Management and Control.*

The laboratory uses electronic document management software (eDMS) to carry out the document control procedures of the SOP. eDMS automates the process for unique document identification, version control, approval, access, and archival. The eDMS software used by ENV restricts access to archived documents except to authorized users to prevent the use of obsolete documents.

The local QM maintains a master list of controlled documents used at the laboratory. The master list includes the document control number, document title, and current revision status and is made available to personnel for their reference.

See SOP ENV-SOP-CORQ-0015 *Document Management and Control* for more information.

4.3.2 Document Approval and Issue

Documents that support the quality management system are reviewed by qualified personnel and approved by laboratory management prior to release for general use.

Only the approved versions of documents are available to personnel for use unless use of a draft document is authorized by management.

See SOP ENV-SOP-CORQ-0015 *Document Management and Control* for more information.

4.3.3 Document Review and Change

Unless a more frequent review is required by regulatory, certification or accreditation program the laboratory formally reviews documents at least every two years to ensure the document remains current, appropriate, and relevant.

Documents are also informally reviewed every time the document is used. Personnel are expected to refer to and follow instructions in controlled documents when they carry out their work activities. Consequently, any concerns or problems with the document should be caught and brought to the attention of laboratory management on an on-going basis.

Documents are revised whenever necessary to ensure the document remains usable and correct. Older document versions and documents no longer needed are made obsolete and archived for historical purposes.

ENV does not allow hand-edits to documents. If an interim change is needed pending re-issue of the document, the interim change is communicated to those that use the document using a formal communication channel, such as SOP Change in Progress form, email, or memorandum.

The document review, revision, and archival process is managed by quality personnel at the location from which the document was released using the procedures established in SOP ENV-SOP-CORQ-0015 *Document Management and Control.*

4.4 Analytical Service Request, Tender, and Contract Review

The laboratory's management and/or client service personnel perform thorough reviews of requests and contracts for analytical services to verify the laboratory has the capability, capacity, and resources necessary to successfully meet the customer's needs. These review procedures are described in laboratory SOP ENV-SOP-IND1-0011 *Review of Analytical Requests.*

The procedures in this SOP(s) are established to ensure that:

- The laboratory understands the purpose of data collection in order to ensure the test methods requested are appropriate for the intended use of the data and capable of meeting the client's data quality objectives;
- The laboratory and any subcontractor has the capability, capacity, and resources to meet the project requirements and expectations within the requested time frame for delivery of work product;
- Any concerns that arise from review are discussed and resolved with the client; and
- The results of review and any correspondence with the client related to this process and/or any changes made to the contract are recorded and retained for historical purposes.

Capability review confirms that the in-network laboratories and any potential subcontractors hold required certification/accreditation for the test method, matrix, and analyte and verifies the laboratory can achieve the client's target compound list and data quality objectives (DQOs) for analytical sensitivity and reporting limits, QA/QC protocol, and hardcopy test report and electronic data deliverable (EDD) formats.

Capacity review verifies that the in-network laboratories and any potential subcontractors are able to handle the sample load and deliver work production within the delivery timeframe requested.

Resource review verifies that the laboratory and any potential subcontractors have adequate qualified personnel with the skills and competency to perform the test methods and services requested and sufficient and proper equipment and instrumentation needed to perform the services requested.

4.5 Subcontracting and In-Network Work Transfer

The terms 'subcontract' and "subcontracting" refers to work sent to a business external to Pace Analytical Services, LLC (PAS) and the term 'subcontractor' refers to these external businesses, which are also called vendors.

Work transferred within the ENV network is referred to as interregional work orders (IRWO) and network laboratories are referred to as IRWO, IR, or a network laboratory.

The network of ENV laboratories offers comprehensive analytical capability and capacity to ensure PAS can meet a diverse range of client needs for any type of project. If the laboratory receives a request for analytical services and it cannot fulfill the project specifications, the laboratory's client services team will work with the client to place the work within the ENV network. When it is not possible to place the work within network, the laboratory will, with documented client approval, subcontract the work to a subcontractor that has the capabilities to meet the project specifications and can meet the same commitment agreed on between the laboratory and the client. Some client programs require client consent even for in-network work transfer, and when this applies, the client services team obtains consent as required. The laboratory retains the record of client notification and their consent in the project record for historical purposes.

Whenever work is transferred to a subcontractor or an in-network laboratory, the laboratory responsible for management of the project verifies each of these qualifications:

- The subcontractor or in network laboratory has the proper accreditation/certifications required for the project and these are current; and

- The use of the subcontractor or in network laboratory is approved by the client and/or regulatory agency, when approval is required. Record of approval is retained in the project record.

All subcontractor laboratories must maintain a quality management system like ENV and that complies with ISO/IEC 17025 and the TNI Standard(s).

ENV also evaluates and pre-qualifies subcontractors as part of the company's vendor qualification program. The complete list of approved vendors is maintained by the corporate procurement department and is made available to all ENV locations. Pre-qualification of a subcontractor does not negate the requirement for the placing laboratory to verify the capability, capacity, and resources of any selected subcontractor on a project-specific basis to confirm the subcontractor can meet the client's needs.

For both subcontracting and in-network work transfer, the project specifications are always communicated to the subcontractor or the in-network laboratory by the project manager so that the laboratory performing the work is aware of and understands these requirements.

The procedures for subcontracting are outlined in laboratory SOP ENV-SOP-IND1-0005 *Subcontracting Samples.*

4.6 Purchasing Services and Supplies

Vendors that provide services and supplies to the laboratory are prequalified to verify the vendor's capability to meet the needs of PAS. These needs include but are not limited to competitive pricing, capacity to fill purchase orders, quality of product, customer service, and business reputation and stability. The records of vendor evaluation and the list of approved vendors is maintained by the corporate procurement department.

The procedures for vendor qualification are specified in the corporate process for vendor qualification, however named.

The laboratory may purchase goods and services from any supplier on the approved vendor list.

The specifications (type, class, grade, tolerance, purity, etc.) of supplies, equipment, reagents, standard reference materials and other consumables used in the testing process are specified in SOPs. The SOP specifications are based on the governing requirements of the approved reference methods and any additional program driven regulatory specification, such as drinking water compliance. All requisitions for materials and consumables are approved by the department supervisor to confirm the purchase conforms with specified requirements. After approval the requisition is handled by the laboratory's designated purchasing agent. On receipt, the product is inspected and verified before use, when applicable.

The laboratory's procedure for the purchase of services and supplies is specified in laboratory SOP ENV-SOP-IND1-0084 *Purchasing, Receipt, and Storage of Laboratory Supplies.*

4.7 Customer Service

Project details and management is handled by the laboratory's customer service team. Each customer is assigned a Project Manager (PM) that is responsible for review of contract requirements and handling laboratory to customer communication about the project status.

4.7.1 Commitment to Meet Customer Expectations

The laboratory cooperates and works closely with our customers to ensure their needs are met and to establish their confidence in the laboratory's capability to meet their needs for analytical services and expectations for service.

The PM is the customer's primary point of contact for each analytical service request. The PM gathers information from the customer to ensure the details of their request are understood. After samples are received, the PM monitors the progress of the project and alerts the customer of any delays or excursions that may adversely impact data usability. Laboratory supervisors are expected to keep the PM informed of project status and any delays or major issues, so that the PM can keep the client informed.

The laboratory encourages customers to visit the laboratory to learn more about the laboratory's capabilities, observe performance and to meet laboratory personnel.

ENV customers expect confidentiality. Laboratory personnel will not divulge or release information to a third party without proper authorization unless the information is required for litigation purposes. See Section 4.1.5.4 of this manual and policy COR-POL-0004 *Ethics Policy* for more information on the laboratory's policy for client confidentiality.

4.7.2 Customer Feedback

The laboratory actively seeks positive and negative feedback from customers through surveys and direct communication. Information from the client about their experience working with the laboratory and their satisfaction with work product is used to enhance processes and practices and to improve decision making. Customer feedback is communicated to laboratory management and corporate personnel in management reports and analyzed yearly during management review (See 4.15) to identify risk and opportunity. Corrective, preventive, or continuous improvement actions are taken based on nature of and/or feedback trends.

Also see sections 4.9, 4.10, 4.11, 4.12, 4.14, and 4.15 for more information about how customer feedback is managed by the laboratory and used to enhance the quality management system.

4.8 Complaints

Complaints provide opportunities to improve processes and build stronger working relationships with our clients.

The laboratory's complaint resolution process includes three steps. First, handle and resolve the complaint to mutual satisfaction. Second, perform corrective action to prevent recurrence (See 4.11). Third, record and track the complaint and use these records for risk and opportunity assessment and preventive action (See 4.12).

4.9 Nonconforming Work

4.9.1 Definition of Nonconforming Work

Nonconforming work is work that does not conform to customer requirements, standard specifications, laboratory policies and procedures, or that does not meet acceptance criteria.

The discovery of non-conforming work comes from various sources which include, but are not limited to:

- results of quality control samples and instrument calibrations;

- quality checks on consumables and materials;
- general observations of laboratory personnel;
- data review;
- proficiency testing;
- internal and external audits;
- complaints and feedback;
- management review and reports; and
- regulatory and certification and accreditation actions.

The way in which the laboratory handles nonconforming work depends on the significance and impact (risk) of the issue. Some issues may simply require correction, others may require investigation, corrective action (See 4.11) and/or data recall (See 4.16). When the laboratory releases data and test results associated with nonconforming QC and acceptance criteria, test results are qualified, or non-conformances are noted in the final analytical report to apprise the data user of the situation. (See 5.10)

Nonconforming work also includes unauthorized departure from laboratory policies, procedures and test methods. Authorized departures are explained in the following subsections. Situations that do not conform to these conditions are considered unauthorized departure(s).

4.9.1.1 Authorized Departure from SOP

An authorized departure from a test method SOP is one that has been reviewed and approved by the Department Manager, designated Acting Technical Manager for TNI for the discipline the SOP pertains to (Chemistry, Inorganic Chemistry, Microbiology), Quality Manager, or the General Manager. Management review is conducted to confirm the departure does not conflict with regulatory compliance requirements for which the data will be used or does not adversely affect data integrity. The departure may originate from client request or may be necessary to overcome a problem.

An authorized departure from administrative or process-oriented SOP is typically necessary to correct an error in the SOP. These departure requests are reviewed and pre-approved by the QA Manager.

Documentation of SOP departures and approval decisions are retained by the laboratory as evidence that the departure was authorized. When necessary, approved departures from test method SOPs are noted in the final test report to advise the data user of any ramification to data quality.

4.9.1.2 Authorized Departure from Test Methods (Method Modifications)

When test results are associated to a published reference test method, the laboratory's test method SOP must be consistent with the test method. If the test method is mandated for use by a specific regulatory program such as drinking water or wastewater or a certification or accreditation program, such as TNI/NELAC, the SOP must also comply with or include these requirements. If the procedures in the

SOP are modified from the test method, these modifications must be clearly identified in the SOP. The conditions under which the laboratory may establish an SOP that is modified from these reference documents, and what is considered a modification are specified in ENV-SOP-CORQ-0011 *Method Validation and Instrument Verification*.

Modifications that do not meet the requirements of this SOP (ENV-SOP-CORQ-0011) are unauthorized. Client requests to deviate from the test method are handled as client requests to depart from the test method SOP since it is the SOP that the laboratory follows when performing work.

4.9.1.3 Stop Work Authority

Stop Work Authority provides laboratory personnel with the responsibility and obligation to stop work when there is a perceived unsafe condition or behavior that may result in an unwanted event.

All laboratory and corporate personnel have the authority to stop work when needed to preserve data integrity or safety of workers.

Once a stop work order has been initiated and the reason for doing so is confirmed valid; laboratory management is responsible for immediate correction and corrective action (see section 4.11) before resumption of work.

4.10 Continuous Improvement

The laboratory's quality management system is designed to achieve continuous improvement through the implementation of the quality policy and objectives outlined in this manual. Information about the laboratory's activities and performance is gained from many sources such as customer feedback, audits, QC, trend analysis, business analytics, management reports, proficiency testing, and management systems review. This information is subsequently used during the laboratory's corrective action (see section 4.11) and preventive action (see section 4.12) processes and during annual review of the management system (see section 4.15) to establish goals and objectives for improvement.

ENV also promotes a continuous improvement culture based on the principles of lean manufacturing. These principles include 3P (Process, Productivity, Performance) and Kaizen. 3P is a platform used by Pace to share best practices and standardization across the network to achieve operational excellence. Kaizen is a team-based process used to implement tools and philosophies of lean to reduce waste and achieve flow with the purpose of improving both external and internal customer satisfaction.

4.11 Corrective Action

Corrective action is a process used to eliminate the cause of a detected nonconformity. It is not the same as a correction. A correction is an action taken to fix an immediate problem. The goal of the corrective action process is to find the underlying cause(s) of the problem and to put in place fixes to prevent the problem from happening again. The corrective action process, referred to as CAPA by ENV, is one of the most effective tools used by the laboratory to prevent nonconforming work, identify risk and opportunity, and improve service to our customers.

The laboratory has two general processes for corrective action:

The process used for actions taken in response to day to day quality control (QC) and acceptance criteria exceptions (nonconformance) that occur during the day to day testing process are called

corrections. These events do not usually include formal methods for cause analysis; instead the reason for the failure is investigated through troubleshooting or other measures. Required actions for correction of routine nonconformance is specified in laboratory SOPs. When corrective action is not taken, cannot be taken, or is not successful, test results associated with the nonconforming work are qualified in the final test report. Documentation of the nonconformance and corrective action taken is documented in the analytical record.

A 7 stage corrective action process is used when there is a problem or departure from the quality management system, technical activities, or when the extent of a single problem has significant impact on data, regulatory compliance or customer needs. These problems are identified through various activities such as but not limited to: quality control trends, internal and external audits, management review, customer feedback, and general observation.

The laboratory's 7 Stage CAPA Process includes:

1) Identification and Containment
2) Evaluation
3) Investigation
4) Cause Analysis
5) Action Plan
6) Implementation
7) Follow Up and Effectiveness Review

The 7 stage CAPA process may be initiated by any employee. Once the process is initiated it is overseen and coordinated by laboratory management. The CAPA process is documented using a software-based workflow process called Qualtrax. The Qualtrax CAPA record includes tracking information, dates, individuals involved, those responsible for action plan implementation and follow-up, and timelines and due dates.

ENV's procedures for corrective action, are specified in corporate SOP ENV-SOP-CORQ-0018, *Procedure for Corrective and Preventive Action.* Additional explanation about certain aspects of the laboratory's corrective action process are outlined in the next three subsections.

4.11.1 Cause Analysis

Cause analysis is the process of investigation used by the laboratory to identify the underlying cause(s) of the problem. Once causal factors are identified, ways to mitigate the causal factors are reviewed and corrective action(s) most likely to eliminate the problem are selected.

The laboratory uses different methods to conduct this analysis. The most common approach is 5-Why, but fishbone diagrams, or even brainstorming may be appropriate depending on the situation. The method used is documented in the CAPA record.

4.11.2 Effectiveness Review

Monitoring corrective actions for effectiveness is an activity shared by laboratory supervisors and quality assurance personnel. Effectiveness means the actions taken were sustainable and appropriate. Sustainable means the change is still in place. Appropriate means the action(s) taken prevented recurrence of the problem since the time corrective action was taken.

The timeframe in which effectiveness review takes place depends on the event and is recorded in the CAPA record with any addition actions that need to be taken.

Corrective action trends are also monitored by laboratory management and used to identify opportunities for preventive action or to gain lessons learned when actions taken were not adequate to solve the problem. See Section 4.12 (Preventive Action) and 4.15 (Management Review) for more information.

4.11.3 Additional Audits

When non-conformities or other problems cast doubt on compliance with the laboratory's policies, procedures, or compliance to regulatory requirements; the quality manager schedules a special audit of the area of activity in accordance with Section 4.14.1 as soon as possible. These special audits are used to determine the scope of the problem and to provide information for the CAPA process. Additional full-scale audits are done when a serious issue or risk to the laboratory's business is identified.

4.12 Preventive Action

Preventive action is an action taken to eliminate the cause of a potential nonconformity and to achieve improvement. Preventive action is a forward-thinking process designed to prevent problems opposed to reacting to them (corrective action).

Some examples of preventative action include, but are not limited to:

- Scheduled instrument maintenance (Preventative maintenance)
- Addition of Staff and Equipment
- Professional Development Activities
- Implementation of New Technology

The laboratory looks for opportunities for preventive action from a variety of sources including but not limited to: employee idea's, customer feedback, business partners input, trend analysis, business analytics, management reviews, proficiency testing results, lean management events, and risk-benefit analysis.

Laboratory management evaluates the success of preventive actions taken in any given year during annual management review. See Section 4.15 for more information.

4.12.1 Change Management

Preventive actions may sometimes result in significant changes to processes and procedures used by the laboratory. Laboratory management evaluates the risks and benefits of change and includes in its implementation of change process, actions to minimize or eliminate any risk. The types of changes for which risk are considered and managed include: infrastructure change, change in analytical service offerings, certification or accreditation status, instrumentation, LIMS changes, and changes in key personnel.

4.13 Control of Records

A record is a piece of evidence about the past, especially an account of an act or occurrence kept in writing or some other permanent form. Laboratory records document laboratory activities and provide evidence of conformity to the requirements established in the quality management system. These records may be hardcopy or electronic on any form of media.

4.13.1 General Requirements

4.13.1.1 Procedure

The requirements for control of records is specified in corporate policy ENV-POL-CORQ-0013 *Record Management*. The procedure used to implement the policy is described in laboratory SOP ENV-SOP-IND1-0047 *Data Backup and Records Archival.*

The policy is established to assure quality and technical records are identified, retained, indexed, and filed to allow for retrieval during the entire retention time frame. During storage, records are kept secure and protected from deterioration. At the end of the retention time, the records are disposed of properly in order to maintain client confidentiality and to protect the interests of the company.

In general, laboratory records fall into three categories: quality, technical, and administrative.

Examples of each are provided in the following table:

Record Type	Includes Records of:
Quality	Document Types listed in SOP ENV-SOP-CORQ-0015 Audits: Internal and External Certificates and Scopes of Accreditation Corrective & Preventive Action Management Review Data Investigations Method Validation Instrument Verification Training Records
Technical	Raw Data Logbooks Certificates of Traceability Analytical Record Test Reports & Project Information Technical Training Records & Demonstration of Capability
Administrative	Personnel Records Finance/Business

4.13.1.2 Record Legibility and Storage

Records are designed to be legible and to clearly identify the information recorded. Manual entries are made in indelible ink; automated entries are in a typeface and of sufficient resolution to be read. The records identify laboratory personnel that performed the activity or entered the information. Records are archived and stored in a way that they are retrievable. Access to archived records is controlled and managed.

For records stored electronically, the capability to restore or retrieve the electronic record is maintained for the entire retention period. Hardcopy records are filed and stored in a suitable environment to protect from damage, deterioration, or loss. Hardcopy records may be scanned to PDF for retention. Scanned records must be checked against the hardcopy to verify the scan is complete and legible.

Administrative records are kept for a minimum of 5 years and technical and quality records are kept for 10 years unless otherwise specified by the client or regulatory program.

The date from which retention time is calculated depends on the record. In general, the retention time of technical records of original observation and measurement is calculated from the date the record is created. If the technical record is kept in a chronological logbook, the date of retention may be calculated from the date the logbook is archived. The retention time of test reports and project records, which are considered technical records, is calculated from the date the test report was issued. The retention time of quality records is usually calculated from the date the record is archived.

Refer to the record management policy and the laboratory SOP for more information.

4.13.1.3 Security

The laboratory is a secure facility and access to records is restricted to laboratory personnel.

4.13.1.4 Electronic Records

The data systems used to store electronic records is backed up in accordance with laboratory SOP ENV-SOP-IND1-0047 *Data Backup and Records Archival*. Access to archived records stored electronically is maintained by personnel responsible for management of the electronic system.

4.13.1.5 Electronic Signature Policy

Work done by ENV locations include activities that require the application of a signature. Some of this work product is in electronic format and signatures are applied electronically.

The Electronic Signatures in Global and National Commerce Act (E-Sign Act) clarifies that electronic signatures are legally valid and enforceable under United States law.

ENV's policy for use and application of electronic signatures is specified in corporate policy ENV-POL-CORQ-0014 *Electronic Signature Policy*.

All employees of ENV, including temporary and contract personnel, must sign an Electronic Signature Agreement to acknowledge that they understand and accept that work activities performed by them may be authenticated with application of an electronic signature and that electronic signature has the same validity as a handwritten signature. Their signed agreement also confirms the individual has read and understands the policy and agrees to abide by the requirements for use of electronic signature stated in the policy.

4.13.2 Technical Records

In addition to the requirements specified in subsections 4.13.1.1 through 4.13.1.5, the requirements in the following subsections also apply to technical records.

4.13.2.1 Description

Technical records are the accumulation of data and information generated from the analytical process. These records may include forms, worksheets, workbooks, checklists, notes, raw data, calibration records, final test reports, and project record. The accumulated record essentially needs to provide adequate detail to historically reconstruct the process and identify the personnel that performed the tasks associated with a test result.

4.13.2.2 Real Time Recordkeeping

Personnel are instructed and expected to always record observations, data, and calculations at the time they are made. Laboratory managers are responsible to assure that data entries, whether made electronically or on hardcopy, are identifiable to the task.

4.13.2.3 Error Correction

Errors in records must never be erased, deleted or made illegible. Use of correction fluid, such as white-out is prohibited. In hardcopy records, the error is corrected by a single strike through the original entry and the new entry recorded alongside or footnoted to allow for readability. Corrections are initialed and dated by the person making the correction. If the correction is not self-explanatory, a reason for the correction is recorded.

For electronic records, equivalent measures of error correction or traceability of changes made is kept. For example, audit trails provide records of change.

Maintenance of proper practices for error correction is monitored through the tiered data review process described in Section 5.9.3. Laboratory records are reviewed throughout the data review process. Individuals performing these reviews flag errors that are not properly corrected and bring these to the attention of the department manager or supervisor of the work area in which the record was generated so that the problem may be addressed and corrected with the individual(s) that did not make the correction properly.

4.14 Audits

The laboratory performs internal systems and technical audits to assess implementation of the QMS and compliance to this manual and to procedures, such as policy, SOP and SWI. Since the processes in this manual are based on the relevant quality system standards and regulatory and accreditation/certification program requirements the laboratory provides services for, the internal audits also assess on-going compliance to these programs.

The laboratory is also audited by external parties such as regulatory agencies, customers, consultants and non-government assessment bodies (NGAB).

Information from internal and external audits is used by laboratory management to address compliance concerns and opportunities where improvement will increase the reliability of data.

Deficiencies, observations and recommendations from audits are managed by the local QM using the laboratory's formal CAPA process. See Section 4.11 for more information.

4.14.1 Internal Audit

The laboratory's internal audit program is managed by the local QM in accordance with an audit plan established at the beginning of each calendar year. The schedule is prepared to assure that all areas of the laboratory are reviewed over the course of the year. Conformance to the schedule is reported to both laboratory management and corporate quality personnel in a monthly QA report prepared by the quality manager.

Although the local QM creates the audit schedule, it is the shared responsibility of local management to assure the schedule is maintained. Laboratory supervisors cooperate with the quality personnel to provide the auditors with complete access to the work area, personnel, and records needed.

Internal audits are performed by personnel approved by the quality manager. In general, personnel may not audit their own activities unless it can be demonstrated that an effective and objective audit will be carried out. The auditor must be trained, qualified, and familiar enough with the objectives, principles, and procedures of laboratory operations to be able to perform a thorough and effective evaluation.

The laboratory's internal audit program ensures daily practice is consistent with laboratory's SOPs and to verify SOPs are compliant with policy and procedures. Test reports are audited to verify the final product is consistent with customer/project requirements, the work was carried out in accordance with policy and SOPs, the SOP complies with the cited reference method, test results are accurate, and of known and documented quality and properly qualified, when necessary.

Special audits are performed ad hoc to follow up on a specific issue such as a client complaint, negative feedback, concerns of data integrity or ethics, or a problem identified through other audits. Special audits may be scheduled or unscheduled. Unscheduled internal audits are conducted whenever doubts are cast on the laboratory's compliance with regulatory requirements or its own policies and procedures. These unscheduled internal audits may be conducted at any time and may be performed without an announcement to laboratory personnel.

When observations and findings from any audit (internal or external) cast doubt on the validity of the laboratory's testing results, the laboratory takes immediate action to initiate investigate the problem and take corrective action. (Also see 4.11 and 4.16)

The laboratory's internal audit program and auditing procedures are further described in laboratory SOP ENV-SOP-IND1-0018 *Internal and External Audits*.

Corporate Compliance Audit

ENV locations are also periodically audited by corporate quality personnel to assess the location's compliance to ENV's quality management program and to evaluate the effectiveness of implementation of the policies and procedures that make up the quality management system. The purpose of the compliance audit is to identify risks and opportunities and to assist laboratory management achieve the goals and objectives of the company's quality program.

4.15 Management Review

The management team formally reviews the management system of each location under their purview on an annual basis to assess for on-going suitability and effectiveness and to establish goals, objectives, and action plans for the upcoming year.

The process and procedures used to conduct this review are outlined in corporate SOP ENV-SOP-CORQ-0005 *Management Review*.

At a minimum, the following topics are reviewed and discussed:

- The on-going suitability of policies and procedures including EHS and waste management;
- Reports from managerial and supervisory personnel including topics discussed at regular management meetings held throughout the year;
- The outcome of recent internal audits;
- Corrective and preventive actions;
- Assessments by external bodies;
- The results of interlaboratory comparisons or proficiency tests;
- Changes in the volume and type of the work;
- Customer and personnel feedback, including complaints;
- Effectiveness of improvements / preventive actions made since last review;
- Internal and external issues of relevance and risk identification;
- A review of the status of actions from prior management reviews; and
- Other relevant factors, such as quality control activities, resources, and staff training.

The discussion and results of this review are documented in a formal report prepared by laboratory management. This report includes a determination of the effectiveness of the management system and its processes; goals and objectives for improvements in the coming year with timelines and responsibilities, and any other need for change.

Goals and action items from annual management systems review are shared with local employees and with corporate management to highlight focus areas for improvement in addition to areas in which the laboratory has excelled.

4.16 Data Integrity

ENV's procedures for the investigation and response to events that may affect data integrity are described in the corporate SOPs for data inquiries and data recall and corrective and preventive action, however named.

Customers whose data are affected by these events are notified in a timely manner, usually within 30 days after the impact of the problem is understood. Some accreditation programs also require notification to the accreditation body (AB) within a certain timeframe from date of discovery when

the underlying cause of the issue impacts accreditation. The laboratory follows any program or project specific client notification requirements for notification, when applicable.

5.0 TECHNICAL REQUIREMENTS

5.1 General

Many factors contribute to the correctness and reliability of the technical work performed by the laboratory. These factors fall under these general categories:

- Human Performance
- Facility and Environmental Conditions
- Test Method Performance and Validation
- Measurement Traceability
- Handling of Samples

The impact of each of these factors varies based on the type of work performed. To minimize negative effects from each of these factors, the laboratory accounts for the contribution from each of these categories when developing test method and process (administrative) SOPs, evaluating personnel qualifications and competence, and in the selection of equipment and supplies used.

5.2 Personnel

5.2.1 Personnel Qualifications

The laboratory's program for personnel management is structured to ensure personnel are selected, qualified, and competent to perform the roles and responsibilities of their position based on education, experience, and training.

Qualifications, duties, responsibilities, and authorities of each position are specified in job descriptions maintained by corporate HR (See Section 5.2.4). These job descriptions provide the general basis for the selection of personnel for hire and are used by the laboratory to communicate to personnel the duties, responsibilities, and authorities of their position.

The term "personnel" refers to individuals employed by the laboratory directly as full-time, part-time, or temporary, and individuals employed by the laboratory by contract, such as through an employment agency. The term "personnel" is used interchangeably with the term "employee" throughout this manual. For purposes of this manual, these terms are equivalent.

The personnel management program is structured to establish and maintain records for each of the following:

- Selection of personnel;
- Training of personnel;
- Supervision of personnel;
- Authorization of personnel; and
- Monitoring Competence of personnel.

5.2.1.1 Competence

Competence is the ability to apply a skill or series of skills to complete a task or series of tasks correctly within defined expectations.

Competence for technical personnel authorized by ENV to provide opinion and interpretation of data to customers also includes the demonstrated ability to:

- Apply knowledge, experience, and skills needed to safely and properly use equipment, instrumentation, and materials required to carry out testing and other work activities in accordance with manufacturer specifications and laboratory SOPs;
- Understand and apply knowledge of general regulatory requirements necessary to achieve regulatory compliance in work product; and
- Understand the significance of departures and deviations from procedure that may occur during the analytical testing process and the capability and initiative to troubleshoot and correct the problem, document the situation and decision-making process, and to properly qualify the data and analytical results.

The laboratory's requirements for the competence of personnel (education, qualification, work experience, technical skills, and responsibilities) are specified in job descriptions created by management and kept by human resources (HR). The job description provides the basis for the selection of personnel for each position.

An employee is considered competent when he/she has completed required training.

The policies and standard operating procedures (SOPs) for the following topics are established by management as minimum required training for all personnel:

- Ethics and Data Integrity
- Quality Manual
- Safety Manual
- Quality Management System
- Technical Process and Procedure relevant to their job tasks
- Successful Demonstration of Capability (DOC) – Analytical Personnel Only

Personnel are initially authorized competent to independently carry out their assigned duties when required training is complete and documented.

Records of required training and qualification provide the record of competence for the individual. Qualification records may include but are not limited to diploma, transcripts, and curriculum vitae (CV).

The on-going competence of each employee is monitored by laboratory management through on-the-job performance. Analytical employees are also required to successfully complete another demonstration of capability for each test method performed on an annual basis.

5.2.2 Training (Required)

ENV's training requirements are outlined in policies COR-POL-0023 *Mandatory Training Policy,* COR-POL-0004 *Ethics Policy*, and laboratory SOP ENV-SOP-IND1-0027 *Employee Orientation and Training.*

5.2.2.1 Required Training

The laboratory's training program includes these elements:

- Scheduling of Required Training
- Execution of Required Training
- Documentation and Tracking of Required Training
- Evaluation of Training Effectiveness

Required training is delivered using various methods that incorporate techniques that appeal to the main learning styles: visual, aural, linguistic, and kinesthetic. Techniques include, on-the-job, instructor-led, self-study, eLearning, and blended.

The employee's direct supervisor is responsible for oversight of completion of the employee's required training and for providing adequate time to the employee to complete training assignments. Both the supervisor and employee are responsible to make sure the employee's training status and training records for required training are current and complete.

The status of completion of required training is monitored by the local QM, who provides the status to the GM at least monthly or more frequently, if necessary, to ensure required training for personnel is complete and up to date.

The following subsections describe the elements of ENV's required training program.

5.2.2.1.1 New Hire Training

New hire training requirements apply to new personnel and to existing employees starting in a new position or different work area.

Required new hire training includes each of the following:

- Ethics and Data Integrity (See 5.2.2.1.3)
- Quality Manual / Quality Management System (See 5.2.2.1.4)
- Safety Manual and any training requirements specified in the manual.
- Policies & SOPs relevant to their job tasks
- Technical personnel that test samples must also successfully complete an initial demonstration of capability (IDOC) for the test methods performed before independently testing customer samples. (See 5.2.2.1.5). Independent testing means handling of client samples without direct supervision of the work activity by the supervisor or a qualified trainer.

All required training must be current and complete before the employee is authorized to work independently. Until then, the employee's direct supervisor is responsible for review and acceptance of the employee's work product.

5.2.2.1.2 On-Going Training

Personnel receive on-going training in each of the following topics:

- Ethics and Data Integrity (See 5.2.2.1.3)
- Quality Manual / Quality Management System (See 5.2.2.1.4)
- Safety Training
- Changes to Policies & SOPs
- Technical employees that carry out testing must also successfully complete on-going demonstration of capability (CDOC) for all test methods performed on an annual basis. (See 5.2.2.1.5)

Personnel are expected to maintain their DOCs current and complete and to complete training assignments in a timely manner.

5.2.2.1.3 Ethics and Data Integrity Training

Data integrity training is provided to all new personnel and refresher data integrity training is provided to all employees on an annual basis. Personnel are required to acknowledge they understand that any infractions of the laboratory data integrity procedures will result in a detailed investigation that could lead to very serious consequences including immediate termination, debarment, or civil/criminal prosecution.

Completion of data integrity training is documented by employee signature to provide evidence that the employee has participated in training on this topic and understand their obligations related to data integrity.

The following topics and activities are covered:

- Policy for honesty and full disclosure in all analytical reporting;
- Prohibited Practices;
- How and when to report data integrity issues;
- Record keeping. The training emphasizes the importance of proper written documentation on the part of the analyst with respect to those cases where analytical data may be useful, but are in one sense or another partially nonconforming;
- Training Program, including discussion regarding all data integrity procedures;
- Data integrity training documentation;

- In-depth procedures for data monitoring; and
- Specific examples of breaches of ethical behavior such as improper data manipulations, adjustments of instrument time clocks, and inappropriate changes in concentrations of standards.

All PAS personnel, including contract and temporary, are required to sign an "Attestation of Ethics and Confidentiality" at the time of employment and during annual refresher training. This document clearly identifies inappropriate and questionable behavior. Violations of this document result in serious consequences, including prosecution and termination, if necessary.

Also see SOP-ENV-COR-POL-0004 *Ethics Policy* for more information.

5.2.2.1.4 Management System Document Training

The Quality Manual and ENV manuals, policies, and SOPs are the documents used by regulatory bodies and PAS customers to verify the laboratory's capability, competency, and compliance with their requirements and expectations.

In addition to on-the-job training, employees must have a signed Read and Acknowledgement Statement (R&A) on record for the laboratory quality manual, and the policies and SOPs relating to his/her job responsibilities. This statement, whether signed by the employee electronically or by wet signature, confirms that the employee has received, read, and understands the content of the document, that the employee agrees to follow the document when carrying out their work tasks; and the employee understands that unauthorized change to procedures in an SOP is not allowed except in accordance with the SOP departure policy (See 4. 9.1).

See SOP ENV-CORQ-0016 *Standard Operating Procedures and Standard Work Instructions* for more information.

5.2.2.1.5 Demonstration of Capability (DOC)

Demonstration of capability is based on the employee's capability to achieve acceptable precision and accuracy for each analyte reported by the laboratory for the test method using the laboratory's test method SOP.

Technical employees must complete an initial demonstration of capability (IDOC) prior to independent work on client samples analyzed by the test methods they perform. After successful IDOC, the employee must demonstrate continued proficiency (CDOC) for the test method on an annual basis. If more than a year has passed since the employee last performed the method; then capability must be re-established with an IDOC.

Records of IDOC and CDOC are kept in the employee's training file.

5.2.2.2 Effectiveness of Training

The results of the performance measures used to identify training needs are the same measures used by the laboratory to measure effectiveness of the training program. Improvement in key performance measures suggest the training program is successful (See 5.2.2.1).

Effectiveness of individual employee training is measured by their demonstrated ability to comprehend the training material and apply knowledge and skills gained to their job task. Measurements include but are not limited to:

- Testing of the employee's knowledge of the quality management system, policies, and technical and administrative procedures through various mechanisms, such as quizzes, observation, and interviews.
- Demonstrated ability to convey information correctly and factually in written and verbal communication to internal and external parties.
- Demonstrated ability to carry out tasks in accordance with SOPs and other work instructions.
- Demonstrated ability to make sound decisions based on guidance and information available.
- Demonstrated initiative to seek help or guidance when the employee is unsure of how to proceed.

5.2.2.3 Supplemental Learning

Supplemental learning objectives are established for newly hired personnel to aid in their development of administrative and technical skills. These learning objectives and materials, referred to as Learning Plans (LP), are created and maintained by ENV's 3P program and managed by the employee's direct supervisor.

In addition to LPs, PAS maintains a wide variety of supplemental learning courses that are made available to all PAS employees for professional development. These learning materials, maintained by PAS's corporate training personnel, are accessed via the company's employee portal, PaceConnect. The learning may be self-initiated based on an employee's interest or may be assigned to the employee at the discretion of management as professional development as part of an employee's annual goals. Supplemental learning courses and learning plan activities are not prerequisites for competency (Section 5.2.1.1) and are not part of the required QMS training specified in Section 5.2.2.1.

5.2.3 Personnel Supervision

Every employee is assigned a direct supervisor, however named, who is responsible for their supervision. Supervision is the set of activities carried out by the supervisor to oversee the progress and productivity of the employees that report to them.

General supervisory responsibilities may include but are not limited to:

- Hiring Employees
- Training Employees
- Performance Management
- Development, oversight, and execution of personnel training plans
- Monitoring personnel work product to assure the work is carried out in accordance with this quality manual, policies, SOPs, and other documents that support the quality management system.

5.2.4 Job Descriptions

Job Descriptions that define the required education, qualifications, experience, skills, roles and responsibilities, and reporting relationships for each PAS position are established by top management and kept by corporate HR. PAS laboratories use these job descriptions as the source of positions and job titles for the laboratory. The job descriptions apply to employees who are directly employed by PAS, part-time, temporary, technical and administrative and by those that are under contract with PAS through other means.

The job descriptions include the education, expertise, and experience required for the position and the responsibilities and duties, including any supervisory or managerial duties assigned to the position.

5.2.5 Authorization of Technical Personnel

Laboratory management authorizes technical personnel to perform the technical aspects of their position after it has been verified that the employee meets the qualifications for the position, has successfully completed required training (Section 5.2.2.1), and the employee has completed initial demonstrated capability (Section 5.2.2.1.5). After initial authorization, technical personnel are expected to maintain a current and complete training record, demonstrate on-going capability at least annually for each test method performed, and produce reliable results through accurate analysis of certified reference materials, proficiency testing samples, and/or routine quality control samples in order to remain authorized to continue to perform their duties.

Records to support authorization including, education, experience, training, and other evaluations are kept by the laboratory.

5.3 Accommodations and Facilities

5.3.1 Facilities

The laboratory is designed to support the correct performance of procedures and to not adversely affect measurement integrity or safety. Access to the laboratory is controlled by various measures, such as card access, locked doors, main entry. Visitors to the laboratory are required to sign-in and to be escorted by laboratory personnel during their visit. A visitor is any person that is not an employee of the laboratory.

5.3.2 Environmental Conditions

The laboratory is equipped with energy sources, lighting, heating, and ventilation necessary to facilitate proper performance of calibrations and tests. The laboratory ensures that

housekeeping, electromagnetic interference, humidity, line voltage, temperature, sound and vibration levels are appropriately controlled to ensure the integrity of specific measurement results and to prevent adverse effects on accuracy or increases in the uncertainty of each measurement.

Environmental conditions are monitored, controlled, and recorded as required by the relevant specifications, methods, and procedures. Laboratory operations are stopped if it is discovered that the laboratory's environmental conditions jeopardize the analytical results.

5.3.3 Separation of Incompatible Activities

The layout and infrastructure of each work area including air handling systems, power supplies, and gas supplies of each laboratory work area is specifically designed for the type of analytical activity performed. Effective separation between incompatible work activities is maintained. For example, sample storage, preparation, and chemical handling for volatile organic analysis (VOA) is kept separate from semi-volatile organic (SVOA).

The laboratory separates samples known or suspected to contain high concentration of analytes from other samples to avoid the possibility for cross-contamination. If contamination is found, the source of contamination is investigated and resolved in accordance with laboratory SOPs.

5.3.4 Laboratory Security

Security is maintained by controlled access to the building and by surveillance of work areas by authorized personnel. Access is controlled to each area depending on the required personnel, the sensitivity of the operations performed, and possible safety concerns. The main entrance is kept unlocked during normal business hours for visitors and is continuously monitored by laboratory staff. All visitors must sign a visitor's log, and a staff member must accompany them during the duration of their stay.

5.3.5 Good Housekeeping

The laboratory ensures good housekeeping practices in work areas to maintain a standard of cleanliness necessary for analytical integrity and personnel health and safety. Minimally, these measures include regular cleaning of the work area. Where necessary, areas are periodically monitored to detect and resolve specific contamination and/or possible safety issues.

5.4 Test Methods

5.4.1 General Requirements

The laboratory uses test methods and procedures that are appropriate for the scope of analytical services the laboratory offers.

Instructions on the use and operation of equipment and sample handling, preparation, and analysis of samples are provided in SOPs. The instructions in SOPs may be supplemented with other documents including but not limited to, standard work instructions (SWI), manuals, guides, project documents and reference documents.

These documents are managed using the procedures described in SOP ENV-SOP-CORQ-0015 *Document Management and Control* and SOP ENV-SOP-CORQ-0016 *Standard Operating Procedures and Standard Work Instructions.*

5.4.2 Method Selection

The test methods and protocols used by the laboratory are selected to meet the needs of the customer, are appropriate for the item tested and intended use of the data, and to conform with regulatory requirements when regulatory requirements apply.

In general, the test methods offered are industry accepted methods published by international, regional, or national standards. The laboratory bases its procedure on the latest approved edition of a method unless it is not appropriate or possible to do so, or unless regulatory requirements allow otherwise.

The laboratory confirms that it can perform the test method and achieve desired outcome before analyzing samples (see section 5.4.5). If there is a change in the published analytical method, then the confirmation is repeated.

When a customer does not specify the test method(s) to be used, the laboratory may suggest test methods that are appropriate for the intended use of the data and the type of samples to be tested. The laboratory will also inform customers when test methods requested are considered inappropriate for their purpose and/or out of date. This discourse takes place during review of analytical service requests (See Section 4.4).

5.4.3 Laboratory Developed Methods

A laboratory developed method is a method developed from scratch (no published source method), a procedure that modifies the chemistry from the source method, or a procedure that exceeds the scope and application of the source method.

Laboratory developed methods must be validated prior to use (see section 5.4.5) and the procedure documented in a test method SOP.

The requirements for non-standard methods (Section 5.4.4) also apply to laboratory developed methods.

5.4.4 Non-standard Methods

A non-standard method is a method that is not published or approved for use by conventional industry standards for the intended purpose of the data. Non-standard methods must be validated prior to use (see section 5.4.5) and the procedure developed and documented in a test method SOP.

At a minimum, the following information must be included in the procedure:

- Title / Identification of Method;
- Scope and Application;
- Description of the type of item to be analyzed;
- Parameters or quantities and ranges to be determined;
- Apparatus and equipment, including technical performance requirements;
- Reference standards and reference materials required;
- Environmental conditions required and any stabilization period needed; and
- Description of the procedure, including:

- Affixing identification marks, handling, transporting, storing and preparing of items;
- Checks to be made before the work is started;
- Verifying equipment function and, where required, calibrating and/or adjusting the equipment before each use;
- Method of recording the observations and results;
- Any safety measures to be observed;
- Criteria and/or requirements for approval/rejection;
- Data to be recorded and method of analysis and presentation; and
- Uncertainty or procedure for estimating uncertainty.

Use of a non-standard method for testing must be agreed upon with the customer. The agreement, which is retained by the laboratory in the project record, must include the specifications of the client's requirements, the purpose of testing, and their authorization for use of the non-standard method.

5.4.5 Method Validation

5.4.5.1 Validation Description

Validation is the process of conformation and the provision of objective evidence that the stated requirements for a specific method/procedure are fulfilled.

The laboratory's requirements and procedures for method validation are outlined in SOP ENV-SOP-CORQ-0011 *Method Validation and Instrument Verification.*

5.4.5.2 Validation Summary

All test methods offered by the laboratory are validated before use to confirm the procedure works and the data and results achieved meet the goals for the method and repeated when there are major changes to the laboratory procedure.

Results of validation are retained are kept in accordance with method validation SOP and the corporate policy ENV-CORQ-POL-0013 *Record Management*.

5.4.5.3 Validation of Customer Need

The validation process includes review of accuracy, precision, sensitivity, selectivity, linearity, repeatability, reproducibility, robustness, and cross-sensitivity of the procedure against general customer needs to ensure the laboratory's procedure will meet those needs.

The following subsections highlight some of these concepts:

5.4.5.3.1 Accuracy

Accuracy is the degree to which the result of a measurement, calculation, or specification conforms to the correct value or a standard. When the result recovers within a range from the known

value (control limit); the result generated using the laboratory's test method SOP is considered accurate.

5.4.5.3.2 Precision

Precision refers to the closeness of two or more measurements to each other. It is generally measured by calculating the relative percent difference (RPD) or relative standard deviation (RSD) from results of separate analysis of the same sample. Precision provides information about repeatability, reproducibility, and robustness of the laboratory's procedure.

5.4.5.3.3 Limits of Detection (LOD) (Chemistry)

The LOD is the minimum result which can be reliably discriminated from a blank with a predetermined confidence level. The LOD establishes the limit of method sensitivity and is also known as the detection limit (DL) or the method detection limit (MDL).

Values below the LOD cannot be reliably measured and are not reported by the laboratory unless otherwise specified by regulatory program or test method.

The LOD is established during method validation and after major changes to the analytical system or procedure that affect sensitivity are made.

5.4.5.3.4 Limits of Quantitation (LOQ) and Reporting Limit (RL)

The LOQ is the minimum level, concentration, or quantity of a target analyte that can be reported with a specified degree of confidence. The LOQ is established at the same time as the LOD.

The LLOQ is the value of the lowest calibration standard included in the calibration curve. The LLOQ establishes the lower limit of quantitation.

The LOQ and LLOQ represent quantitative sensitivity of the test method.

- The LOQ must always be equal to or greater than the LLOQ and the LLOQ must always be greater than the LOD.
- Any reported value (detect or non-detect) less than the LLOQ is a qualitative value.

The RL is the value to which the presence of a target analyte is reported as detected or not detected. The RL is project-defined based on project data quality objectives (DQO). In the absence of project specific requirements, the RL is usually set to the LOQ or the LLOQ.

The laboratory's procedures for LOD/LOQ determination is detailed in laboratory SOP ENV-SOP-IND1-0009 *Determination of Detection and Quantitation Limits*.

The local SOP is based on guidance provided by corporate quality and must comply with 40CFR 136 Appendix B and the TNI Standard.

5.4.5.3.5 Linearity

Linearity is a mathematical concept applied to calibration models that employ multiple points to establish a calibration range used for quantitative analysis. Linearity is measured differently based on the calibration model. In general, if linearity is demonstrated then the slope of the response of standards are sufficiently close to one another. The accuracy of the linear regression and non-linear curves is verified by checking percent error or relative standard error (RSE), which is the process of refitting calibration data back to the model to determine if the results are accurate. For linear curves that use average calibration or response factor, error is measured by relative standard difference (RSD).

Linearity also establishes the range of quantitation for the test method used which directly impacts the sensitivity of the test method and uncertainty in measurement results. As previously noted, the LLOQ establishes the lower limit of quantitation. Similarly, the upper range of linearity establishes the upper limit of quantitation. In general, results outside of this range are considered qualitative values. However, some inorganic methods allow for extension of the linear range above the upper limit of quantitation when accuracy at this value is verified.

Linearity can also be used to establish repeatability, reproducibility, and robustness of the laboratory's test method. When linearity is demonstrated using a specific calibration model during method validation, then use of this same calibration model to achieve linearity on a day to day basis confirms the laboratory's method is repeatable, reproducible, and robust.

5.4.5.3.6 Demonstration of Capability (DOC)

The DOC performed during method validation confirms that the procedure demonstrated acceptable precision and accuracy. The procedure used for DOC for method validation is the same as described in section 5.2.2.1.5 for demonstration of analyst capability.

5.4.6 Measurement Uncertainty

The laboratory provides an estimate of uncertainty in testing measurements when required or on client request. In general, the uncertainty of the test method is reflected in the control limits used to evaluate QC performance. (See 5.9.1.1.9). ISO/IEC supports this concept with language that reads when a well-recognized test method specifies limits to the values of the

major source of uncertainty of measurement and specifies the form of presentation of calculated results, the laboratory has satisfied the requirements on analytical uncertainty by following the test method and reporting instructions.

When measurement uncertainty cannot be satisfied through control limits, the laboratory will provide a reasonable estimation of uncertainty. A reasonable estimation is based on knowledge of method performance and previous experience. When estimating the analytical uncertainty, all uncertainty components which are of importance in the given situation are taken into account.

5.4.7 Control of Data

The laboratory has policies and processes in place to assure that reported data is free from calculation and transcription errors, that quality control is reviewed and evaluated before data is reported, and to address manual calculation and integration.

5.4.7.1 Calculations, Data Transfer, Reduction and Review

Whenever possible, calculations, transfer of data, and data reduction are performed using validated software programs (See 5.4.7.2).

If manual calculations are performed, the results of these calculations are verified during the data review process outlined in section 5.9.3.

5.4.7.1.1 Manual Integration

The laboratory's policy and procedures for manual integration are provided in corporate SOP ENV-SOP-CORQ-0006 *Manual Integration*.

This SOP includes the conditions under which manual integration is allowed and the requirements for documentation.

Required documentation of manual integration includes:

- complete audit trail to permit reconstruction of before and after results;
- identification of the analyst that performed the integration and the reason the integration was performed; and
- identification of the individual(s) that reviewed the integration and verified the integration was done and documented in compliance with the SOP.

5.4.7.2 Use of Computers and Automated Acquisition

Whenever possible the laboratory uses software and automation for the acquisition, processing, recording, reporting, storage, and/or retrieval of data.

Software applications developed by PAS are validated by corporate IT for adequacy before release for general use. Commercial off the shelf software is considered sufficiently validated when the laboratory follows the manufacturer or vendor's manual for set-up and use. Records of validation are kept by the corporate

information technology (IT) group or by the local laboratory, whichever group performed the validation.

The laboratory's process for the protection of data stored in electronic systems include:

- Individual user names and passwords for Laboratory Information Management Systems (LIMS) and auxiliary systems used to store or process data.
- Employee Training in Computer Security Awareness
- Validation of spreadsheets used for calculations to verify formulas and logic yield correct results and protection of these cells to prevent unauthorized change.
- Operating system and file access safeguards
- Protection from Computer Viruses
- Regular system backup; and testing of retrieved data

The laboratory's process for software development and testing process includes:

- Verification the software application works as expected and is adequate for use and fulfills compliance requirements, such as the need to record date/time of data generation.
- Change control to assure requests for changes are reviewed and approved by management before the change is made.
- Communication channels to assure all staff are aware of changes made.
- Version Control and maintenance of historical records.

These procedures are detailed in laboratory SOP ENV-SOP-IND1-0144 *Spreadsheet Validation*.

5.5 Equipment

5.5.1 Availability of Equipment

The laboratory is furnished with all equipment and instrumentation necessary to correctly perform the tests offered in compliance with the specifications of the test method and to achieve the accuracy and sensitivity required.

5.5.2 Calibration

Equipment and instrumentation are checked prior to use to verify it performs within tolerance for its intended application.

Laboratory management is made aware of the status of equipment and instrumentation and any needs for either on a daily basis. This information is obtained during laboratory walkthroughs (LDM) that are conducted as part of the laboratory's lean program.

5.5.2.1 Support Equipment

The laboratory confirms support equipment is in proper working order and meets the specifications for general laboratory use prior to placement in service with intermediate checks thereafter. Equipment that does not meet specifications is removed from service until repaired or replaced. Records of repair and maintenance activities are maintained.

Procedures used to carry out and record these checks are outlined laboratory in SOP ENV-SOP-IND1-0086 *Support Equipment*.

Analytical Instruments

Analytical instruments are checked prior to placement in service in accordance with SOP ENV-SOP-CORQ-0011 *Method Validation and Instrument Verification.* After the initial service date, the calibration of instruments and verification calibration is performed in accordance with local test method SOPs.

The calibration procedures in the test method SOPs comply with the requirements for acceptable calibration practices outlined in corporate policy ENV-POL-CORQ-0005 *Acceptable Calibration Practices*, the reference methods, and any applicable regulatory or program requirements.

5.5.3 Equipment Use and Operation

Equipment is operated and maintained by laboratory personnel that are trained on the test method SOP. Up-to-date instructions and procedures for the use and maintenance of analytical equipment are included in SOPs and/or supplemental documents such as standard work instructions (SWI) or instrument manuals which are made readily accessible in the work area to all laboratory personnel.

5.5.4 Equipment Identification

The laboratory uniquely identifies equipment by serial number or any other unique ID system, when practical. The identifier is included in the equipment list maintained by the quality department.

5.5.5 Equipment Lists and Records

5.5.5.1 Equipment List

The laboratory maintains a master list of equipment that includes information about the equipment including a description, manufacturer, serial number, date placed in service, condition when received, identity, and the current location in the laboratory. The date of purchase is tracked by the procurement record. The equipment list(s) for each location covered by this manual is provided in Appendix E.

5.5.5.2 Equipment Records

In addition to the equipment list, the laboratory maintains records of equipment that include:

- Verification that equipment conforms with specifications.

- Calibration records including dates, results, acceptance criteria, and next calibration dates.
- Maintenance plan and records
- Records of damage, malfunction, or repair

The laboratory follows an equipment maintenance program designed to optimize performance and to prevent instrument failure which is described in individual test method SOPs and in maintenance logbooks.

The maintenance program includes routine maintenance activities which are performed as recommended by the manufacturer at the frequency recommended and non-routine maintenance, which is performed to resolve a specific problem such as degradation of peak resolution, shift in calibration relationship, loss of sensitivity, or repeat failure of instrument performance checks and quality control samples.

Maintenance is performed by laboratory personnel or by outside service providers.

All maintenance activities performed by laboratory personnel are recorded by the individual(s) that performed the activity at the time the maintenance was performed in an instrument maintenance log.

The maintenance record minimally includes the date of maintenance, the initials of the person(s) performing maintenance, a description of the activity performed, why (when the maintenance is non-routine), and the return to analytical control. When maintenance is performed by an external vendor, the laboratory staples the service record into hardcopy maintenance logs or scans the record for easy retrieval. The laboratory provides unrestricted access to instrument maintenance logs in order to promote good instrument maintenance and recordkeeping practices.

If an instrument must be moved, the laboratory will use safe practices for handling and transport to minimize damage and contamination.

5.5.6 Out of Service Protocol

Equipment that has been subjected to overloading, mishandling, gives suspect results, has been shown to be defective, or is performing outside of specified limits is taken out of service and either removed from the work area or labeled to prevent accidental use until it has been repaired and verified to perform correctly.

When analytical equipment is taken out of service, the laboratory examines the potential effect it may have had on previous analytical results to identify any non-conforming work. (See section 4.9).

5.5.7 Calibration Status

The laboratory labels support equipment to indicate calibration status, whenever practicable or otherwise maintains the calibration status in a visible location in the work area. These procedures are described in laboratory SOP ENV-SOP-IND1-0086 *Support Equipment*.

The calibration status of analytical instruments is documented in the analytical record. Analysts verify on-going acceptability of calibration status prior to use and with instrument performance check standards. These procedures are described in test method SOPs.

5.5.8 Returned Equipment Checks

When equipment or an instrument is sent out of the laboratory for service, the laboratory ensures that the function and calibration status of the equipment is checked and shown to be satisfactory before the equipment is returned to service. These procedures are outlined in SOP ENV-SOP-CORQ-0011 *Method Validation and Instrument Verification.*

5.5.9 Intermediate Equipment Checks

The laboratory performs intermediate checks on equipment to verify the on-going calibration status. For example, most test methods require some form of continuing calibration verification check and these procedures are included in the test method SOP. Periodic checks of support equipment are also performed; see laboratory SOP ENV-SOP-IND1-0086 *Support Equipment* for more information.

5.5.10 Safeguarding Equipment Integrity

The laboratory safeguards equipment integrity using a variety of mechanisms that include but are not limited to:

- Adherence to manufacturer's specification for instrument use so that settings do not exceed manufacturer's recommendation or stress the performance of the equipment.
- Established maintenance programs.
- Transparent maintenance records and unrestricted access to maintenance logs.
- Validation and approval of software before use.
- Audits to confirm instrument settings are consistent with SOPs.
- On-the-job training for safe and proper use of laboratory equipment.

5.6 Measurement Traceability

5.6.1 General

Measurement traceability refers to a property of a measurement result whereby the result can be related to a reference through an unbroken chain of calibration, each contributing to the measurement uncertainty. Traceability requires an established calibration hierarchy of equipment (instruments) used during testing including equipment used for subsidiary measurements. The laboratory assures this equipment is calibrated prior to being put into service and that the reference standard and materials used for calibration are traceable to the international standard of units (SI) or national measurement standard.

When strict traceability to SI units cannot be made, the laboratory establishes traceability with the use of reference standards and equipment obtained from competent suppliers that provide calibration certificates and/or certificates of analysis (COA).

5.6.2 Equipment Correction Factors

When correction factors are used to adjust results the laboratory will assure that results in computer software are also updated. For example, if the direct instrument or reading output must be corrected based on preparation factor or concentration factors, laboratory management will assure the corrected result is also updated in the software.

5.6.3 Specific Requirements

5.6.3.1 Requirements for Calibration Laboratories

The laboratory does not offer calibration services to customers.

5.6.3.2 Requirements for Testing Laboratories

The laboratory has procedures in place to verify equipment is calibrated prior to being put into service (See 5.5.2) and ensures the reference standard and materials used for calibration are traceable to the international standard of units (SI) or national measurement standard. When strict traceability to SI units cannot be made, the laboratory establishes traceability with the use of reference standards and equipment obtained from competent suppliers that provide calibration certificates and/or certificates of analysis (COA).

5.6.4 Reference Standards and Reference Materials

5.6.4.1 Reference Standards

The laboratory uses reference standards of measurement to verify adequacy of working weights and thermometers. The working weight is the weight(s) used for daily balance calibration checks and the working thermometers are used for temperature measurements on a daily basis.

Intermediate checks of the working reference measurement standards are performed to verify adequacy between calibration from an external calibration laboratory. The measurements from working weights and thermometers are compared to measurements taken by the reference standard which is traceable to SI or a national standard. The reference weights and thermometers are used solely for verification purposes unless the laboratory can prove that daily use does not adversely affect performance of the reference standard.

The laboratory performs intermediate checks of the working weights at least annually.

Working thermometers (glass and digital) are checked against the reference thermometer prior to placement in service to establish a correction factor and then rechecked annually (glass) or quarterly (digital) thereafter.

The calibration of liquid in glass reference thermometers is verified every 5 years and the calibration of digital reference thermometers is verified annually by an ISO/IEC 17025 accredited calibration laboratory or service provider that provides traceability to a national standard.

The calibration of the reference weight(s) is verified every 5 years by an ISO/IEC 17025 accredited calibration laboratory.

If criteria for the intermediate checks or recertification is not acceptable, the impact on previously reported results is evaluated using the process for evaluation of nonconforming work (See 4.9).

See laboratory SOP ENV-SOP-IND1-0086 *Support Equipment* for more information about this process.

5.6.4.2 Reference Materials

The laboratory purchases chemical reference materials (also known as stock standards) from vendors that are accredited to ISO 17034 or Guide 34. Purchased reference materials must be received with a Certificate of Analysis (COA) where available. If a reference material cannot be purchased with a COA, it must be verified by analysis and comparison to a certified reference material and/or there must be a demonstration of capability for characterization. COA are reviewed for adequacy and retained by the laboratory for future reference.

All prepared standards, reference materials, and reagents are verified to meet the requirements of the test method through routine analyses of quality control samples.

The laboratory procedure for traceability and use of these materials is provided in laboratory SOP ENV-SOP-IND1-0031 *Standard and Reagent Management and Traceability*.

This SOP includes each of the following requirements:

- Procedures for documentation of receipt and tracking. The record of entry includes name of the material, the lot number, receipt date, and expiration date.
- Storage conditions and requirements. Reference materials must be stored separately from samples, extracts, and digestates.
- Requirements to assure that preparations of intermediate or working solutions are recorded and assigned a unique identification number for tracking. Records of preparation include the lot number of the stock standard(s) used, the type and lot number of the solvent, the formulation, date, expiration date, and the preparer's initials. The lot number of the working standards is recorded in the analytical record to provide traceability to the standard preparation record. The preparation record provides traceability to the COA, which is traceable to SI or the national measurement standard.
- A requirement that the expiration dates of prepared standards may not exceed the expiration date of the parent standard. Standards, reference materials, and reagents are not used after their expiration dates unless it is not possible to procure a new standard and the reliability of the expired material is verified and documented by the laboratory using a procedure approved by corporate quality personnel. Otherwise, the expired material is promptly removed from the work area or clearly labeled as acceptable for qualitative/troubleshooting purposes only.

- The second source materials used for verification of instrument calibration are obtained from a different manufacturer or may be a different lot from the same manufacturer.
- Procedures to check reference materials for degradation and replacement of material if degradation or evaporation is suspected.
- Procedures for labeling. At a minimum the container must identify the material, the ID of the material and the expiration date. Original containers should also be labeled with date opened.

5.6.4.3 Intermediate Checks

Checks to confirm the calibration status of standards and materials are described in laboratory SOPs. These checks include use of second source standards and reference materials reserved only for the purpose of calibration checks.

5.6.4.4 Transport and Storage

The laboratory handles and transports reference standards and materials in a manner that protects the integrity of the materials. Reference standard and material integrity is protected by separation from incompatible materials and/or minimizing exposure to degrading environments or materials. Standards and reference materials are stored separately from samples, extracts, and digestates. All standards are stored according to the manufacturer's recommended conditions. Temperatures colder than the manufacturer's recommendation are acceptable if it does not compromise the integrity of the material (e.g. remains in liquid state and does not freeze solid). In the event a standard is made from more than a single source with different storage conditions, the standard will be stored according to the conditions specified in the analytical method.

See the applicable analytical SOPs for specific reference material storage and transport protocols.

5.7 Sampling

Sampling refers to the field collection of samples and to subsamples taken by the laboratory for analysis from the field collected sample.

Subsampling procedures are included in each test method SOP or a stand-alone SOP to assure the aliquot used for testing is representative of the field collected sample.

The requirements in the following subsections apply when field sampling is performed by the laboratory.

5.7.1 Sampling Plans and SOPs

When the laboratory performs field collection of samples, sampling is carried out in accordance with a written sample plan prepared by the customer or by the laboratory and by relevant sampling SOPs. These documents are made readily accessible at the sampling location. Sampling plans and SOPs are, whenever reasonable, based on appropriate governing methods and address the factors to be controlled to ensure the validity of the analytical results.

5.7.2 Customer Requested Deviations

When the customer requires deviations, additions, or exclusions from the documented laboratory sampling plan and/or procedure, the laboratory records the client's change request in detail with the sampling record, communicates the change to sampling personnel, and includes this information in the final test report.

5.7.3 Recordkeeping

The laboratory assures the sampling record includes the sampling procedure used, any deviations from the procedure, the date and time of sampling, the identification of the sampler, environmental conditions (if relevant), and the sampling location.

5.8 Sample Management & Handling

5.8.1 Procedures

The laboratory's procedures for sample management and handling are outlined in laboratory SOP ENV-SOP-IND1-0001 *Sample Management*.

The procedures in these SOPs are established to maintain the safe handling and integrity of samples from transport, storage, to disposal and during all processing steps to maintain client confidentiality, and to protect the interests of PAS and its customers.

5.8.1.1 Chain of Custody

All samples received by the laboratory must be accompanied with a Chain of Custody (COC) record. The COC provides information about the samples collected and submitted for testing and documents the possession of samples from time of collection to receipt by the laboratory.

The COC record must minimally include the following information:

- Client name, address, phone number;
- Project Reference;
- Client Sample Identification (Client ID);
- Date, Time, and Location of Sampling;
- Sampler's Name or Initials;
- Matrix;
- Type of container, and total number collected for each sample;
- Preservatives;
- Analyses Requested;
- Mode of collection;
- Any special instructions; and
- The date and time and signature of each sample transfer from time of collection to receipt in the laboratory. When the COC is transported inside the cooler, independent couriers do not sign the COC, the shipping manifests and/or air

bills are the records of possession during transport. The shipping manifest must be retained as part of the COC record and included in the test report when required (See Section 5.10.3).

A complete and legible COC is required. If the laboratory observes that the COC is incomplete or illegible, the client is contacted for resolution. The COC must be filled out in indelible ink. Personnel correct errors by drawing a single line through the initial entry so the entry is not obscured, entering the correct information, and initialing, and dating the change.

5.8.1.2 Legal Chain of Custody

Legal chain of custody is a chain of custody protocol used for evidentiary or legal purposes. The protocol is followed by the laboratory when requested by customer or where mandated by a regulatory program.

Legal chain of custody (COC) protocol establishes an intact, continuous record of the physical possession*, storage, and disposal of "samples" which includes sample aliquots, and sample extracts/digestates/distillates.

Legal COC records account for all time periods associated with the samples and identifies all individuals who physically handled individual samples. Legal COC begins at the point established by legal authority, which is usually at the time the sample containers are provided by the laboratory for sample collect or when sample collection begins.

*A sample is in someone's custody if:

- It is in one's physical possession;
- It is in one's view after being in one's physical possession;
- It has been in one's physical possession and then locked or sealed so that no one can tamper with it; and/or
- It is kept in a secure area, restricted to authorized personnel only.

Refer to laboratory SOP ENV-SOP-IND1-0051 *Internal Chain-of-Custody* for more information.

5.8.2 Unique Identification

Each sample is assigned a unique identification number by the laboratory (Lab ID) after the sample has been checked and accepted by the laboratory in accordance with the laboratory's sample acceptance policy (See 5.8.3). The Lab ID is affixed to the sample container using a durable label.

The unique identification of samples also applies to subsamples, and prepared samples, such as extracts, digestates, etc.

The lab ID is linked to the field ID (client ID) in the laboratory's record. Both IDs are linked to the testing activities performed on the sample and the documentation records of the test.

Also see 5.8.4.

5.8.3 Sample Receipt Checks and Sample Acceptance Policy

The laboratory checks the condition and integrity of samples on receipt and compares the labels on the sample containers to the COC record. Any problem or discrepancy is recorded. If the problem impacts the suitability of the sample for analysis or if the documentation is incomplete, the client is notified for resolution. Decisions and instructions from the client are maintained in the project record.

5.8.3.1 Sample Receipt Checks

The following checks are performed:

- Verification that the COC is complete and legible.
- Verification that each sample's container label includes the client sample ID, the date and time of collection and the preservative in indelible ink.
- The container type and preservative are appropriate for each test requested.
- Adequate volume is received for each test requested.
- Visual inspection for damage or evidence of tampering.
- Visual inspection for presence of headspace in VOA vials. (VOA = volatile organic analysis).
- Thermal Preservation: Generally, for chemical testing methods for which thermal preservation is required, temperature on receipt is acceptable if the measurement is above freezing but <6°C. The requirements for thermal preservation vary based on test method or by regulatory program. For example, for microbiology, temperature on receipt is acceptable if the measurement is <10°C. Refer to the laboratory's SOP for sample receipt for specific requirements. For samples that are hand-delivered to the laboratory immediately after sample collection, there must be evidence that the chilling process began immediately after sample collection and prior to delivery of the samples to the laboratory or service center, such as arrival of the samples on ice.
- Chemical Preservation
- Holding Time: Sample receiving personnel are trained to recognize tests where the holding time is 48 hours or less and to expedite the log-in of these samples. Except for tests with immediate holding times (15 minutes from time of collection or less), when samples are received out of hold, the laboratory will notify the client and request instruction. If the decision is made to proceed with analysis, the final test report will include notation of this instruction.

5.8.3.2 Sample Acceptance Policy

The laboratory maintains a sample acceptance policy in accordance with regulatory guidelines to clearly establish the circumstances in which sample receipt is accepted or rejected.

When receipt does not meet criteria for any one of these conditions, the laboratory must document the noncompliance, contact the customer, and either reject the

samples or fully document any decisions to proceed with testing. In accordance with regulatory specifications, test results associated with receipt conditions that do not meet criteria are qualified in the final test report.

All samples received must meet each of the following criteria:

- Be listed on a complete and legible COC;
- Be received in properly labeled sample containers;
- Be received in appropriate containers that identify preservative;
- The COC must include the date and time of collection for each sample;
- The COC must include the test method requested for each sample;
- Be in appropriate sample containers with clear documentation of the preservatives used;
- Be received within holding time. Any samples received beyond the holding time will not be processed without prior customer approval;
- Have sufficient sample volume to proceed with the analytical testing. If insufficient sample volume is received, analysis will not proceed without customer approval; and
- Be received within appropriate temperature ranges unless program requirements or customer contractual obligations mandate otherwise. The cooler temperature is recorded directly on the COC.

  Samples that are delivered to the laboratory immediately after collection are considered acceptable if there is evidence that the chilling process has been started. For example, by the arrival of the samples on ice. If samples arrive that are not compliant with these temperature requirements, the customer will be notified. The analysis will NOT proceed unless otherwise directed by the customer. If less than 72 hours remain in the hold time for the analysis, the analysis may be started while the customer is contacted to avoid missing the hold time. Data associated with any deviations from the above sample acceptance policy requirements will be appropriately qualified.

5.8.4 Sample Control and Tracking

The samples are controlled and tracked using the Laboratory Information Management System (LIMS). The LIMS stores information about the samples and project. The process of entering information into the LIMS is called log-in and these procedures are described in laboratory SOP ENV-SOP-IND1-0001 *Sample Management*. After log-in, a label is generated and affixed to each sample container. Information on this label, such as the lab ID, links the sample container to the information in LIMS.

At a minimum, the following information is entered during log-in:

- Client Name and Contact Information;
- The laboratory ID linked to the client ID;

- Date and time of sample collection;
- Date and time of sample receipt;
- Matrix; and
- Tests Requested.

5.8.5 Sample Storage, Handling, and Disposal

The laboratory procedures for sample storage, handling and disposal are detailed in laboratory SOPs ENV-SOP-IND1-0001 *Sample Management* and ENV-SOP-IND1-0004 *Waste Handling and Management.*

Sample Storage

The samples are stored according to method and regulatory requirements as per test method SOPs. Samples are stored away from all standards, reagents, or other potential sources of contamination and stored in a manner that prevents cross contamination. Volatile samples are stored separately from other samples. All sample fractions, extracts, leachates, and other sample preparation products are stored in the same manner as actual samples or as specified by the analytical method.

Refrigerated storage areas are maintained at ≤6°C (but not frozen) and freezer storage areas are maintained at <-10°C, unless otherwise required per method or program. The temperature of each storage area is checked and documented at least once for each day of use. If the temperature falls outside the acceptable limits, then corrective actions are taken and appropriately documented.

The laboratory is operated under controlled access protocols to ensure sample and data integrity. Visitors must register at the front desk and be properly escorted while on-site. Samples are taken to the appropriate storage location immediately after sample receipt and log-in procedures are completed. All sample storage areas have limited access. Samples are removed from storage areas by designated personnel and returned to the storage areas as soon as possible after the required sample quantity has been taken.

5.8.5.1 Sample Retention and Disposal

The procedures used by the laboratory for sample retention and disposal are detailed in laboratory SOP ENV-SOP-IND1-0004 *Waste Handling and Management*.

In general, unused sample volume and prepared samples such as extracts, digestates, distillates and leachates (samples) are retained by the laboratory for the timeframe necessary to protect the interests of the laboratory and the customer.

Samples may be stored at ambient temperature when all analyses are complete, the hold time is expired, the report has been delivered, and/or when allowed by the customer or program. Samples requiring storage beyond the minimum sample retention time due to special requests or contractual obligations may be stored at ambient temperature unless the laboratory has a capacity and their presence does not compromise the integrity of other samples.

After this period expires, non-hazardous samples are properly disposed of as non-hazardous waste. The preferred method for disposition of hazardous samples is to return the excess sample to the customer.

5.9 Assuring the Quality of Test Results

5.9.1 Quality Control (QC) Procedures

The laboratory monitors the validity and reliability of test results using quality control (QC) samples that are prepared and analyzed concurrently with field samples in the same manner as field samples. QC results are always associated to and reported with the field samples they were prepared and analyzed with from the same preparation or analytical batch. See the glossary for definition of preparation and analytical batch.

The results of QC performed during the testing process are used by the laboratory to assure the results of analysis are consistent, comparable, accurate, and/or precise within a specified limit. When the results are not within acceptance criteria or expectations for method performance, correction and corrective action(s) are taken. These actions may include retesting or reporting of data with qualification to alert the end user of the situation.

Other QC measures performed include the use of certified reference materials (see 5.6.4), participation in interlaboratory proficiency testing (see 5.9.1.2), verification that formulae used for reduction of data and calculation of results is accurate (see 5.9.3), on-going monitoring of environmental conditions that could impact test results (see 5.3.2), and evaluation and verification of method selectivity and sensitivity (see 5.4.5).

QC results are also used by the laboratory to monitor performance statistical trends over time and to establish acceptance criteria when no method or regulatory criteria exist. (See 5.9.1.1.9)).

5.9.1.1 Essential QC

Although the general principles of QC for the testing process apply to all testing, the QC protocol used for each test depends on the type of test performed.

QC protocol used by the laboratory to monitor the validity of the test are specified in test method SOPs. The SOP includes QC type, frequency, acceptance criteria, corrective actions, and procedures for reporting of nonconforming work.

These requirements in the SOP conform to the reference method and any applicable regulations or certification and accreditation program requirement for which results of the test are used. When a project requires more stringent QC protocol than specified in the SOP, project specification is followed. When the project requires less stringent QC protocol, the project specification may be followed as an authorized departure from the SOP when the project specifications meet the requirements in the mandated method and any regulatory compliance requirements for which the data will be used.

The following are examples of essential QC for Chemistry:

5.9.1.1.1 Second Source Standard (ICV/QCS)

The second source standard is a standard obtained from a different vendor than the vendor of the standards used for calibration or it may be from a different lot from the same vendor when there are

limited vendors that offer the material. It is a positive control used to verify the accuracy of a new calibration relative to the purity of the standards used for calibration. This check is referred to in test method and quality system standards as the initial calibration verification (ICV) or quality control sample (QCS). The second source standard is analyzed immediately after the calibration and before analysis of any samples. When the ICV is not within acceptance criteria, a problem with the purity or preparation of the standards may be indicated.

5.9.1.1.2 Continuing Calibration Verification (CCV)

CCV results are used to determine if the analytical response has significantly changed since initial calibration. If the response of the CCV is within criteria, the calibration is considered valid. If not, there is a problem that requires further investigation. Actions taken are technology and method specific.

5.9.1.1.3 Method Blank (MB) / Other Blanks

A method blank is a negative control used to assess for contamination during the prep/analysis process. The MB consists of a clean matrix, similar to the associated samples that is known to be free of analytes of interest. The MB, unless otherwise specified by the test method, is processed with and carried through all preparation and analytical steps as the associated samples.

In general, contamination is suspected when the target analyte is detected in the MB above the reporting limit. Some programs may require evaluation of the MB to ½ the reporting limit or the detection limit. When contamination is evident, the source is investigated, and corrections are taken to reduce or eliminate it. Analytical results associated with MB that does not meet criteria are qualified in the final test report.

Other types of blanks that serve as negative controls in the process may include:

- Trip Blanks (VOA)
- Storage Blanks
- Equipment Blanks
- Field Blanks
- Calibration Blanks
- Cleanup Blanks
- Instrument Blanks

5.9.1.1.4 Laboratory Control Sample (LCS)

The LCS is positive control used to measure the accuracy of process in a blank matrix. The LCS is spiked by the laboratory with a known amount of analyte. The spike is a standard solution that is pre-made

or prepared from a certified reference standard. Like the MB, unless otherwise specified in the test method, the LCS is processed with and carried through all preparation and analytical steps as the associated samples.

When the percent recovery (%R) of the LCS is within the established control limit, sufficient accuracy has been achieved. If not, the source of the problem is investigated and corrected, and the procedure may be repeated. Analytical results associated with LCS that does not meet criteria are qualified in the final test report.

5.9.1.1.5 Matrix Spike (MS) and Matrix Spike Duplicate (MSD)

Matrix spikes measure the effect the sample matrix has on precision and accuracy of the determinative test method. The MS and MSD are replicates of a client sample that is spiked with known amount of target analyte.

Due to the heterogeneity of matrices even of the same general matrix type, matrix spike results mostly provide information on the effect of the matrix to the client whose sample was used and on samples of the same matrix from the same sampling site. Therefore, MS should be client-specific when the impact of matrix on accuracy and precision is a project data quality objective. When there is not a client-specified MS for any sample in the batch, the laboratory randomly selects a sample from the batch; the sample selected at random is called a "batch" matrix spike.

The MS/MSD results for percent recovery and relative percent difference are checked against control limits. Because the performance of matrix spikes is matrix-dependent, the result of matrix spikes is not used to determine the acceptability of the test.

5.9.1.1.6 Sample Duplicate (SD)

A sample duplicate is a second replicate of sample that is prepared and analyzed in the laboratory along another replicate. The SD is used to measure precision.

The relative percent difference between replicates are evaluated against the method or laboratory derived criteria for relative percent difference (RPD), when this criterion is applicable. If RPD is not met, associated test results are reported with qualification.

5.9.1.1.7 Surrogates

Surrogates are compounds that mimic the chemistry of target analytes but are not expected to occur naturally in real world samples. Surrogates are added to each sample and matrix QC samples (MS, MSD, SD) at known concentration to measure the impact of the matrix on the accuracy of method performance. Surrogates are also added to the positive and negative control

samples (MB, LCS) to evaluate performance in a clean matrix, and included in the calibration standards and calibration check standards.

The percent recovery of surrogates is evaluated against method-specified limits or statistically derived in-house limits. Project-specific limits and/or program-specific limits are used when required. Results with surrogate recovery out of limits in samples are reported with qualification. Samples with surrogate failures can also be re-extracted and/or re-analyzed to confirm that the out-of-control value was caused by the matrix of the sample and not by some other systematic error.

5.9.1.1.8 Internal Standards

Internal Standards are compounds not expected to occur naturally in field samples. They are added to every standard and sample at a known concentration prior to analysis for the purpose of adjusting the response factor used in quantifying target analytes. The laboratory follows specific guidelines for the treatment of internal standard recoveries and further information can be found in the applicable laboratory SOP.

5.9.1.1.9 QC Acceptance Criteria and Control Limits

The QC acceptance criteria are specified in test method SOPs. The criteria in the SOP are based on the requirements in the published test method or regulatory program. When there are no established acceptance criteria, the laboratory develops acceptance criteria in accordance with recognized industry standards.

Some methods and programs require the laboratory to establish control limits for LCS, MS/MSD, and surrogate evaluation using historical data. Laboratory developed limits are referred to as "in-house" control limits. In-house control limits represent ± 3 Standard Deviations (99% confidence level) from the average recovery of at least 20 data points generated using the same preparation and analytical procedure in a similar matrix.

See laboratory SOP ENV-SOP-IND1-0039 *Control Chart Generation* for more information about the procedures used to establish in-house control limits.

5.9.1.2 Proficiency Testing (PT)

The laboratory participates in interlaboratory proficiency testing (PT) studies to measure performance of the test method and to identify or solve analytical problems. PT samples measure laboratory performance through the analysis of unknown samples provided by an external source.

The PT samples are obtained from accredited proficiency testing providers (PTP) and handled as field samples which means they are included in the laboratory's normal analytical processes and do not receive extraordinary attention due to their nature.

The laboratory does not share PT samples with other laboratories, does not communicate with other laboratories regarding current PT sample results during the duration of the study, and does not attempt to obtain the assigned value of any PT sample from the PT provider.

The laboratory investigates and implements corrective action whenever PT results are scored unacceptable by the PT provider.

The frequency of PT participation is based on the certification and accreditation requirements held by the laboratory.

5.9.2 QC Corrective Action

When the results of QC are not within acceptance criteria or expectations for method performance, correction and corrective action(s) are taken per the specifications in the test method SOP. These actions may include retesting or reporting of data with qualification to alert the end user of the situation.

5.9.3 Data Review

The laboratory uses a tiered system for data review. The tiered process provides sequential checks to verify data transfer is complete; manual calculations, if performed, are correct, manual integrations are appropriate and documented, calibration and QC requirements are met, appropriate corrective action was taken when required, test results are properly qualified, process and test method SOPs were followed, project specific requirements were met, when applicable, and the test report is complete.

The sequential process includes three tiers referred to as primary review, secondary review, and administrative/completeness review.

Detailed procedures for the data review process are described in laboratory SOP ENV-SOP-IND1-0023 *Data Review Process*. The general expectations for the tiered review process are described in the following sections:

5.9.3.1 Primary Review

Primary review is performed by the individual that performed the task. All laboratory personnel are responsible for review of their work product to assure it is complete, accurate, documented, and consistent with policy and SOPs.

Checks performed during primary review include but are not limited to:

- Verification that data transfer and acquisition is complete
- Manual calculations, if performed, are documented and accurate
- Manual integrations, if performed, are documented and comply with SOP ENV-SOP-CORQ-006 *Manual Integration*
- Calibration and QC criteria were met, and/or proper correction and corrective actions were taken, and data and test results associated with QC and criteria exceptions are properly qualified

- Work is consistent with SOPs and any other relevant instructional document such as SWI, program requirements, or project QAPP

5.9.3.2 Secondary Review

Secondary review is performed by a qualified peer or supervisor. Secondary review is essentially a repeat of the checks performed during primary review by another person. In addition to the checks of primary review, secondary review includes chromatography review to check the accuracy of quantitative analyte identification.

5.9.3.3 Completeness Review

Completeness review is an administrative review performed prior to release of the test report to the customer. Completeness review verifies that the final test report is complete and meets project specification. This review also assures that information necessary for the client's interpretation of results are explained in the case narrative or footnoted in the test report.

5.9.3.4 Data Audits

In addition to the 3-tier data review process, test reports may be audited by local quality personnel to verify compliance with SOPs and to check for data integrity, technical accuracy, and regulatory compliance. These audits are not usually done prior to issuance of the test report to the customer. The reports chosen for the data audits are selected at random.

If any problems with the data or test results are found during the data audit, the impact of the nonconforming work is evaluated using the process described in Section 4.9.

Also see Section 4.14 for internal audits.

5.9.4 Calibration Certificates

The laboratory does not perform calibration activities for its customers and calibration certificates are not offered or issued.

5.9.5 Opinions and Interpretations

The laboratory provides objective data and information to its customers of sufficient detail for their interpretation and decision making. Objective data and information are based solely on fact and does not attempt to explain the meaning (interpret) or offer a view or judgement (opinion). Sometimes the customer may request the laboratory provide opinion or interpretation to assist them with their decisions about the data.

When opinions and interpretations are included in the test report, the laboratory will document the basis upon which the opinions and interpretations have been made and clearly identify this content as opinion or interpretation in the test report.

Examples of opinion and interpretation include but are not limited to:

- The laboratory's viewpoint on how a nonconformance impacts the quality of the data or usability of results.
- The laboratory's judgment of fulfillment of contractual requirements.
- Recommendations for how the customer should use the test results and information.

- Suggestions or guidance to the customer for improvement.

When opinions or interpretations are verbally discussed with the customer, the content of these conversations is summarized by the laboratory and kept in the project record.

5.9.6 Subcontractor Reports

When analytical work has been subcontracted to an organization external to PAS, the test report from the subcontractor is included in its entirety as an amendment to the final test report.

Test results performed by multiple locations within the PAS network may be merged into a single test report. The test report issued clearly identifies the location and address of each network location that performed testing, and which tests they performed. (See 5.10.2)

5.9.7 Electronic Transmission of Results

When test results and/or reports are submitted to the customer through electronic transmission, the procedures established in this manual for confidentiality and protection of data apply.

5.9.8 Format of Test Reports

The test formats offered by the laboratory are designed to accommodate each type of analytical test method carried out by the laboratory and to minimize the possibility of misunderstanding or misuse of analytical results. The format of electronic data deliverables (EDD) follow the specifications for the EDD.

5.9.9 Amendments to Test Reports

Test reports that are revised or amended by the laboratory after date of release of the original final test report to the customer are issued as a new test report that is clearly identified as an amendment or revision and that includes a reference to the originally issued final test report.

The customer is the organization doing business with PAS external to PAS.

Changes made to test results and data before the final test report is issued to the customer are not amendments or revisions, these are corrections to errors found during the laboratory's data verification and review process.

The laboratory's procedure for report amendments and revision are outlined in laboratory SOP ENV-SOP-IND1-0048 *Final Report and Data Deliverable Content*.

5.10 Reporting

5.10.1 General Requirements

The laboratory reports results of testing in a way that assures the results are clear, and unambiguous. All data and results are reviewed prior to reporting to assure the results reported are accurate and complete.

Test results are summarized in test reports that include all information necessary for the customer's interpretation of the test results. Additional information necessary to clarify the data or disclose nonconformance, exceptions, or deviations that occurred during the analytical process are also reported to the customer in the test report.

The specifications for test reports and EDD are established between the laboratory and the customer at the time the request for analytical services is initiated. The report specifications include the test report format, protocol for the reporting limit (RL), conventions for the reporting of results less than the limit of quantitation (LOQ), and specification for the use of project or program specific data qualifiers. Information about review of analytical service requests is provided in Section 4.4.

5.10.2 Test Reports: Required Items

Test Reports are prepared by the laboratory at the end of the testing process. The format of the report depends on the level of reporting requested by the customer. The laboratory offers a variety of standardized test report formats and can provide custom test report formats, when necessary.

The level of detail required in the test report depends on the customer's needs for data verification, validation, and usability assessments that occur after the laboratory releases the test report to the customer. The test report formats offered by the laboratory provide gradient levels of detail to meet the unique needs of each customer. The laboratory project manager helps the customer select the test report format that best meets their needs. When a specific report format or protocol is required for a regulatory or program compliance, the laboratory project manager must ensure the test report selected meets those requirements.

Every test report issued by the laboratory includes each of the following items:

a) Title

b) Name and phone number of a point of contact from the laboratory issuing the report.

c) Name and address of the laboratory where testing was performed. When testing is done at multiple locations within network (IRWO), the report must clearly identify which network laboratory performed each test and must include the physical address of each laboratory.

d) Unique identification of the test report and an identifier on each page of the report to link each page to the test report and clear identification of the end of the report.

e) The name and address of the customer

f) Identification of test methods used

g) Cross reference between client sample identification number (Sample ID) and the laboratory's identification number for the sample (Lab ID) to provide unambiguous identification of samples.

h) The date of receipt of samples, condition of samples on receipt, and identification of any instance where receipt of the samples did not meet sample acceptance criteria.

i) Date and times of sample collection, receipt, preparation, and analysis.

j) Test results and units of measurement, and qualification of results associated with QC criteria exceptions, and identification of reported results outside of the calibration range.

k) All chains of custody (COC) including records of internal transfer between locations within the PAS network.

l) Name, title, signature of the person(s) authorizing release of the test report and date of release.

m) A statement that the results in the test report relate only to the items tested.

n) Statement that the test report may not be reproduced except in full without written approval from the laboratory.

5.10.3 Test Reports: Supplemental Items

5.10.3.1 Supplemental Requirements

The following items are included in the test report when required or relevant:

a) Shipping manifests / bill of ladings as applicable when common couriers are utilized for shipment of samples,

b) Explanation of departure from test method SOPs including, what the departure was and why it was necessary.

c) Statistical methods used. (Required for Whole Effluent Toxicity)

d) For solid samples, specification that results are reported on a dry weight or wet weight basis.

e) Signed Affidavit, when required by client or regulatory agency.

f) A statement of compliance / non-compliance with requirements or specifications (client, program, or standard) that includes identification of test results that did not meet acceptance criteria.

g) When requested by the client, statement of estimated measurement uncertainty. In general, for environmental testing, estimated uncertainty of measurement is extrapolated from LCS control limits. Control limits incorporate the expected variation of the data derived from the laboratory's procedure. When the control limits are specified by the test method or regulatory program, the control limits represent the expected variation of the test method and/or matrices for which the test method was designed.

h) Opinions and Interpretations

i) If a claim of accreditation/certification is included in the test report, identification of any test methods or analytes for which accreditation/certification is not held by the laboratory if the accrediting body offers accreditation/certification for the test method/analyte. The fields of accreditation/certification vary between agencies and it cannot be presumed that because accreditation/certification is not held that it is offered or required.

j) Certification Information, including certificate number and issuing body.

5.10.3.2 Test Reports: Sampling Information

The following items are included in the test report when samples are collected by the laboratory or when this information is necessary for the interpretation of test results:

a) Date of Sampling.

b) Unambiguous identification of material samples.

c) Location of sampling including diagrams, sketches, or photographs.

d) Reference to the sampling plan and procedures used.

e) Details of environmental conditions at time of sample that may impact test results.

f) Any standard or other specification for the sampling method or procedure, and deviations, additions to or exclusions from the specification concerned.

6.0 REVISION HISTORY

This Version:

Section	Description of Change
Manual Approval Signatory Page	Added "Quality" before Manual. Updated the list of required signatories and changed job titles to match current job descriptions.
All	Replaced "PAS" with "ENV" to denote that ENV is division of PAS. References to PAS were left in some sections when the policy or procedure applies to all business units in addition to environmental sciences.
All	Corrected spelling, typographical, and format errors.
All	Changed "laboratory" to "location" when requirement applies to non-testing locations, such as service centers.
All	References to "Local QA" was replaced with "Local QM"
1.2.1	Changed frequency of review from every 2 years to annually.
1.2.2	Clarified local management refers to the signatories of the manual.
2.0	Replaced reference "current version" for ISO Standard with 2nd and 3rd Editions and publication dates.
4.1.3	Removed table and inserted reference to Title Page, where locations covered by the manual are listed.
4.1.4.1	Updated content to match current organization structure and job titles maintained by corporate HR.
4.5.1.1	Updated content to match current organization structure and job titles maintained by corporate HR.
4.5.1.2	Added new positions, updated job titles to current HR job titles, removed obsolete job titles.
4.5.2.1	Added timeframe for AB notification for absence of acting TNI Technical Manager.
4.2.2.1	Replaced term "tertiary" with completeness and replaced reference to MintMiner with data surveillance.
4.2.5.1	Updated definition of Guide; Added Guidance
4.5	Changed reference to procurement program to vendor qualification program.
4.6	Added reference to corporate SOP for vendor qualification.
4.7.1	Removed reference to SME, the SME program was not formalized as planned.
4.7.2	Removed reference to monthly; the frequency of management reports is established by the executive leadership team based on need.
4.11	Replaced reference to local SOP with corporate SOP. The corporate SOP replaced all local SOPs for the process. Updated 7 Stage process to match SOP.

4.11.1	Changed reference to root cause analysis to cause analysis.
Section	**Description of Change**
4.12	Removed 7 step process for preventive action. PA is rolled into the 7 stage process for CAPA.
4.12.1	Removed reference to preventive action SOP – this was a typo for this section.
4.13.1	Added reference to the corporate policy for records.
4.13.1.2	Updated record retention time frame to match policy.
4.13.1.5	Added this section to incorporate electronic signature policy.
4.14.1	Rewrote paragraph that describes audit program.
4.15	Replaced reference to local SOP with corporate SOP. The corporate SOP replaced all local SOPs for the process.
4.16	Rewrote paragraph for clarity and updated SOP references.
5.2.2	Updated section to match current requirements.
5.2.2.1	Changed "monitor" to "tracks" to clarify expectation.
5.2.2.3	Added this section.
5.2.2.1.3	Changed "attendance sheet" to signature record.
5.4.5.2	Replaced local SOP reference with referral to corporate policy.
5.4.5.3.4	Fixed typographical error related to RL as qualitative/quantitative value. Moved SOP reference from section 5.4.5.3.3 to this section.
5.5.2.2	Updated policy reference.
5.5.9	Replaced typographical error reference to Appendix E with reference to local SOP.
5.6.4.2	Clarified requirements for expired reference materials.
5.8.1.1	Added requirement for locations to retain shipping manifest as COC record.
5.8.3.1	Updated requirements for thermal preservation.
5.9.1.1.1	Updated section to specify the second source standard may also be a different lot from the same manufacturer.
5.9.1.1.3	Added unless otherwise specified by test method exception.
5.9.1.1.4	Added unless otherwise specified by test method exception.
5.9.1.1.9	Clarified that in-house limits are calculated using historical data.
5.10.2	Added requirement that all test reports must include copies of the COCs, including COC for in-network transfer. (CAR to State Audit Deficiency)
Glossary	Added Definition of MRL (CAR to State Audit Deficiency)
Glossary	Changed definition of MintMiner
Appendix 8.1	Added DoD/DOE requirements for LOD/LOQ
Appendix B	Added footnote specification for test methods that are not TNI accredited; applies to TNI accredited labs only.

This document supersedes the following documents:

Document Number	Title	Version
ENV-MAN-CORQ-0001	Quality Manual	00

7.0 APPENDICES

7.1 Appendix A: Certification / Accreditation Listing

The certifications / accreditation lists provided in this manual represent those that were held by the named location on the effective date of this manual. This information is subject to change without notice and must not be considered valid proof of certification or accreditation status. Current certificates are maintained by the local QM and a copy of the certificate is posted to ENV eDMS Portal for access by all ENV employees. External parties should contact the laboratory for the most current information.

7.1.1 PAS-Indianapolis and PAS-Grand Rapids

Indianapolis Laboratory Certifications			
Accrediting Authority	**Program Category**	**Accrediting Agency**	**Accreditation #**
Illinois (Secondary TNI)	Hazardous Waste	IL-EPA	200074
Illinois (Secondary TNI)	Non-Potable Water	IL-EPA	200074
Indiana	Drinking Water	IN-SDH	C-49-06
Kansas (Primary TNI)	Hazardous Waste	KS-DHE	E-10177
Kansas (Primary TNI)	Non-Potable Water	KS-DHE	E-10177
Kentucky	UST	KY-DEP	80226
Kentucky	Wastewater	KY-DEP	KY98019
Michigan	Drinking Water	MI-DEQ/EGLE	9050
Ohio	VAP-Hazardous Waste	OH-EPA	CL0065
Ohio	VAP-Non-Potable Water	OH-EPA	CL0065
Oklahoma (Secondary TNI)	Non-Potable Water	OK-DEQ	9204
Texas (Secondary TNI)	Non-Potable Water	TX-CEQ	T104704355
Texas (Secondary TNI)	Solid & Chemical Materials	TX-CEQ	T104704355
USDA	Foreign Soil Permit	USDA	P330-19-00257
Wisconsin	Non-Potable Water	WI-DNR	999788130
Wisconsin	Potable Water	WI-DNR	999788130
Grand Rapids Laboratory Certifications			
Accrediting Authority	**Program Category**	**Accrediting Agency**	**Accreditation #**
Minnesota (Primary TNI)	Non-Potable Water	MDH	026-999-161
Michigan	Drinking Water	MI-EGLE	0034

7.2 Appendix B: Capability Listing

The capabilities listed in this Appendix were held by the location referenced on the effective date of this manual. This information is subject to change without notice. External parties should contact the laboratory for the most current information.

Table Legend:

- Air = Air
- DW = Drinking Water
- NPW = Non-Potable Water
- SCM = Solid and Chemical Materials
- Waste = Non-Aqueous Phase Liquid (NAPL), Oil
- Tissue = Biota and Tissue

7.2.1 PAS-Indianapolis

Parameter	Method	Matrices			
		DW	NPW	SCM	Waste
Specific Conductance	EPA 120.1		X		
Specific Conductance	SM 2510B-2011		X		
Mercury, Low-Level	EPA 1631E		X		
Oil and Grease, HEM/SGT-HEM	EPA 1664A		X		
Turbidity	EPA 180.1		X		
ICP Metals	EPA 200.7	X[1]	X		
ICP Metals	SW 6010B		X	X	X
ICP-MS Metals	EPA 200.8	X[1]	X		
ICP-MS Metals	SW 6020		X	X	X
Apparent Color	SM 2120B-2011		X[1]		
Acidity	SM 2310B-2011		X		
Alkalinity	SM 2320B-2011		X		
Hardness	SM 2340B-2011		X		
Mercury	EPA 245.1	X[1]	X		
Mercury	SW 7470A		X	X	X
Mercury	SW 7471A		X	X	X
Total Solids	SM 2540B-2011		X	X	X[1]
Total Dissolved Solids	SM 2540C-2011		X		
Total Suspended Solids	SM 2540D-2011		X		
Total Volatile Solids	SM 2540E-2011		X		

Parameter	Method	Matrices			
		DW	NPW	SCM	Waste
Settleable Solids	SM 2540F-2011		X		
Percent Moisture/Percent Solids/Total Volatile Solids	SM 2540G-2011			X[1]	X[1]
Anions	EPA 300.0	X[1]	X	X[1]	
Anions	SW 9056A		X	X[1]	
Cyanide	EPA 335.4	X[1]	X		
Cyanide	SM 4500CN-E-2011		X	X[1]	X[1]
Cyanide	SW 9012A		X	X	X
Cyanide, Amenable	EPA 335.4		X		
Cyanide, Amenable	SM 4500CN-G-2011		X	X[1]	X[1]
Cyanide, Amenable	SW 9012A		X	X	X
Cyanide, Free	SW 9014		X[1]	X[1]	
Cyanide, Free	OIA 1677-09		X		
Cyanide, Available	OIA 1677-09		X	X[1]	
Hexavalent Chromium	SM 3500Cr-B-2011		X		
Hexavalent Chromium	SW 7196A		X	X	X
Ferrous Iron	Hach 8146		X[1]		
Ammonia	EPA 350.1		X	X[1]	
Ammonia	SM 4500NH3-G-2011		X	X[1]	
Total Kjeldahl Nitrogen	EPA 351.2		X	X[1]	
Nitrogen, Nitrate/Nitrite	EPA 353.2	X[1]	X	X[1]	
Total Phosphorus	EPA 365.1		X	X[1]	
Chemical Oxygen Demand (COD)	EPA 410.4		X		
Total Recoverable Phenolics	EPA 420.4		X	X[1]	
Total Recoverable Phenolics	SW 9066		X	X	
Chloride	SM 4500Cl-E-2011		X	X[1]	
Residual Chlorine	SM 4500Cl-G-2011		X		
Fluoride	SM 4500F-C		X	X[1]	
pH	SM 4500H+-B-2011		X		
pH	SW 9045C			X	X
Orthophosphate as P	SM 4500P-E-2011		X		
Sulfide	SM 4500S2- D-2011		X		
Sulfate	SW 9038		X		

Parameter	Method	Matrices			
		DW	NPW	SCM	Waste
Sulfate	ASTM D516-11		X		
Biochemical Oxygen Demand (BOD and CBOD)	SM 5210B-2011		X		
Total Organic Carbon (TOC)	SM 5310C-2011		X		
Anionic Surfactants (MBAS)	SM 5540C-2011		X		
Volatile Organic Compounds (VOCs)	EPA 524.2	X[1]			
Volatile Organic Compounds (VOCs)	EPA 624.1		X		
Volatile Organic Compounds (VOCs)	SW 8260C		X	X	X
Polynuclear Aromatic Hydrocarbons (PAHs)	SW 8270C SIM		X	X	
Semivolatile Organic Compounds (SVOCs)	EPA 625.1		X		
Semivolatile Organic Compounds (SVOCs)	SW 8270C		X	X	X
Organochlorine Pesticides	EPA 608.3		X		
Organochlorine Pesticides	SW 8081B		X	X	X
Polychlorinated Biphenyls (PCBs)	EPA 608.3		X		
Polychlorinated Biphenyls (PCBs)	SW 8082A		X	X	X
EDB and DBCP	SW 8011		X		
Diesel Range Organics (DRO/ERO)	SW 8015D		X	X	
Gasoline Range Organics (GRO)	SW 8015D		X	X	
Alcohols and Glycols	SW 8015D		X	X	
Organophosphorus Pesticides	SW 8141B		X	X	
Chlorinated Herbicides	SW 8151A		X	X	
Flash Point	EPA 1010A		X	X	X
Toxicity Characteristic Leaching Procedure (TCLP)	SW 1311		X	X	X
Synthetic Precipitation Leaching Procedure (SPLP)	SW 1312		X	X	X
Free Liquids (Paint Filter Test)	SW 9095B		X	X	X
Dissolved Gases (Ethane, Ethene, Methane)	RSK 175		X		

X[1] = Laboratory does not hold TNI Accreditation for this test method.

7.2.1 PAS-Grand Rapids

Parameter	Method	Matrices			
		DW	NPW	SCM	Waste
Apparent Color	SM 2120B-2011		X		
Turbidity	SM 2130B-2011		X		
Hexavalent Chromium	SM 3500Cr-B-2011		X		
Hexavalent Chromium	SW 7196A		X		
Nitrogen, Nitrate/Nitrite	SM 4500NO3-F-2011	X[1]	X		
Orthophosphate as P	SM 4500P-E-2011		X		
Biochemical Oxygen Demand (BOD and CBOD)	SM 5210B-2011		X		
Carbon Dioxide	SM 4500CO2-C		X[1]		
Fecal Coliform	SM 9222D	X[1]	X[1]		
Total Coliform	SM 9223B	X[1]	X[1]		
True Color	NCASI 71.01		X[1]		

X[1] = Laboratory does not hold TNI Accreditation for this test method.

7.3 Appendix C: Glossary

This glossary provides common terms and definitions used in the laboratory. **It is not intended to be a complete list of all terms and definitions used.** The definitions have been compiled mostly from the TNI Standard and DoD QSM. Although this information has been reproduced with care, errors cannot be entirely excluded. Definitions for the same term also vary between sources. When the meaning of a term used in a laboratory document is different from this glossary or when the glossary does not include the term, the term and definition is included or defined in context in the laboratory document.

Term	Definition
3P Program	PAS-The continuous improvement program used by PAS that focuses on Process, Productivity, and Performance.
Acceptance Criteria	TNI- Specified limits placed on characteristics of an item, process, or service defined in requirement documents.
Accreditation	TNI- The process by which an agency or organization evaluates and recognizes a laboratory as meeting certain predetermined qualifications or standards, thereby accrediting the laboratory. DoD- Refers to accreditation in accordance with the DoD ELAP.
Accreditation Body (AB)	TNI- The organization having responsibility and accountability for environmental laboratory accreditation and which grants accreditation under this program. DoD- Entities recognized in accordance with the DoD-ELAP that are required to operate in accordance with ISO/IEC 17011, *Conformity assessment: General requirements for accreditation bodies accrediting conformity assessment bodies.* The AB must be a signatory, in good standing, to the International Laboratory Accreditation Cooperation (ILAC) mutual recognition arrangement (MRA) that verifies, by evaluation and peer assessment, that its signatory members are in full compliance with ISO/IEC 17011 and that its accredited laboratories comply with ISO/IEC 17025.
Accuracy	TNI- The degree of agreement between an observed value and an accepted reference value. Accuracy includes a combination of random error (precision) and systematic error (bias) components that are due to sampling and analytical operations; a data quality indicator.
Activity, Absolute	TNI- Rate of nuclear decay occurring in a body of material, equal to the number of nuclear disintegrations per unit time. NOTE: Activity (absolute) may be expressed in becquerels (Bq), curies (Ci), or disintegrations per minute (dpm), and multiples or submultiples of these units.
Activity, Areic	TNI- Quotient of the activity of a body of material and its associated area.
Activity, Massic	TNI- Quotient of the activity of a body of material and its mass; also called specific activity.
Activity, Volumic	TNI- Quotient of the activity of a body of material and its volume; also called activity concentration. NOTE: In this module [TNI Volume 1, Module 6], unless otherwise stated, references to activity shall include absolute activity, areic activity, massic activity, and volumic activity.
Activity Reference Date	TNI- The date (and time, as appropriate to the half-life of the radionuclide) to which a reported activity result is calculated. NOTE: The sample collection date is most frequently used as the Activity Reference Date for environmental measurements, but different programs may specify other points in time for correction of results for decay and ingrowth.
Aliquot	DoD- A discrete, measured, representative portion of a sample taken for analysis.
American Society for Testing and Materials (ASTM)	An international standards organization that develops and publishes voluntary consensus standards for a wide range of materials, products, systems and services.
Analysis	DoD- A combination of sample preparation and instrument determination.
Analysis Code (Acode)	All the set parameters of a test, such as Analytes, Method, Detection Limits and Price.
Analysis Sequence	A compilation of all samples, standards and quality control samples run during a specific amount of time on a particular instrument in the order they are analyzed.
Analyst	TNI- The designated individual who performs the "hands-on" analytical methods and associated techniques and who is the one responsible for applying required laboratory practices and other pertinent quality controls to meet the required level of quality.

Analyte	TNI- A substance, organism, physical parameter, property, or chemical constituent(s) for which an environmental sample is being analyzed. DoD- The specific chemicals or components for which a sample is analyzed; it may be a group of chemicals that belong to the same chemical family and are analyzed together.
Analytical Method	DoD- A formal process that identifies and quantifies the chemical components of interest (target analytes) in a sample.
Analytical Uncertainty	TNI- A subset of Measurement Uncertainty that includes all laboratory activities performed as part of the analysis.
Aliquot	DoD- A discrete, measured, representative portion of a sample taken for analysis.
Annual (or Annually)	Defined by PAS as every 12 months ± 30 days.
Assessment	TNI - The evaluation process used to measure or establish the performance, effectiveness, and conformance of an organization and/or its system to defined criteria (to the standards and requirements of laboratory accreditation). DoD- An all-inclusive term used to denote any of the following: audit, performance evaluation, peer review, inspection, or surveillance conducted on-site.
Atomic Absorption Spectrometer	Instrument used to measure concentration in metals samples.
Atomization	A process in which a sample is converted to free atoms.
Audit	TNI- A systematic and independent examination of facilities, equipment, personnel, training, procedures, record-keeping, data validation, data management, and reporting aspects of a system to determine whether QA/QC and technical activities are being conducted as planned and whether these activities will effectively achieve quality objectives.
Batch	TNI- Environmental samples that are prepared and/or analyzed together with the same process and personnel, using the same lot(s) of reagents. A **preparation batch** is composed of one to 20 environmental samples of the same quality systems matrix, meeting the above-mentioned criteria and with a maximum time between the start of processing of the first and last sample in the batch to be 24 hours or the time-frame specified by the regulatory program. An **analytical batch** is composed of prepared environmental samples (extracts, digestates or concentrates) which are analyzed together as a group. An analytical batch can include prepared samples originating from various quality system matrices and can exceed 20 samples.
Batch, Radiation Measurements (RMB)	TNI- An RMB is composed of 1 to 20 environmental samples that are counted directly without preliminary physical or chemical processing that affects the outcome of the test (e.g., non-destructive gamma spectrometry, alpha/beta counting of air filters, or swipes on gas proportional detectors). The samples in an RMB share similar physical and chemical parameter, and analytical configurations (e.g., analytes, geometry, calibration, and background corrections). The maximum time between the start of processing of the first and last in an RMB is 14 calendar days.
Bias	TNI- The systematic or persistent distortion of a measurement process, which causes errors in one direction (i.e., the expected sample measurement is different from the sample's true value).
Blank	TNI and DoD- A sample that has not been exposed to the analyzed sample stream in order to monitor contamination during sampling, transport, storage or analysis. The blank is subjected to the usual analytical and measurement process to establish a zero baseline or background value and is sometimes used to adjust or correct routine analytical results (See Method Blank). DoD- Blank samples are negative control samples, which typically include field blank samples (e.g., trip blank, equipment (rinsate) blank, and temperature blank) and laboratory blank samples (e.g., method blank, reagent blank, instrument blank, calibration blank, and storage blank).
Blind Sample	A sub-sample for analysis with a composition known to the submitter. The analyst/laboratory may know the identity of the sample but not its composition. It is used to test the analyst's or laboratory's proficiency in the execution of the measurement process.
BNA (Base Neutral Acid compounds)	A list of semi-volatile compounds typically analyzed by mass spectrometry methods. Named for the way they can be extracted out of environmental samples in an acidic, basic or neutral environment.
BOD (Biochemical Oxygen Demand)	Chemical procedure for determining how fast biological organisms use up oxygen in a body of water.

Calibration	TNI- A set of operations that establish, under specified conditions, the relationship between values of quantities indicated by a measuring instrument or measuring system, or values represented by a material measure or a reference material, and the corresponding values realized by standards. 1) In calibration of support equipment, the values realized by standards are established through the use of reference standards that are traceable to the International System of Units (SI); 2) In calibration according to test methods, the values realized by standards are typically established through the use of Reference Materials that are either purchased by the laboratory with a certificate of analysis or purity, or prepared by the laboratory using support equipment that has been calibrated or verified to meet specifications.
Calibration Curve	TNI- The mathematical relationship between the known values, such as concentrations, of a series of calibration standards and their instrument response.
Calibration Method	A defined technical procedure for performing a calibration.
Calibration Range	DoD- The range of values (concentrations) between the lowest and highest calibration standards of a multi-level calibration curve. For metals analysis with a single-point calibration, the low-level calibration check standard and the high standard establish the linear calibration range, which lies within the linear dynamic range.
Calibration Standard	TNI- A substance or reference material used for calibration.
Certified Reference Material (CRM)	TNI- Reference material accompanied by a certificate, having a value, measurement uncertainty, and stated metrological traceability chain to a national metrology institute.
Chain of Custody	An unbroken trail of accountability that verifies the physical security of samples, data, and records.
Chain of Custody Form (COC)	TNI- Record that documents the possession of the samples from the time of collection to receipt in the laboratory. This record generally includes: the number and type of containers; the mode of collection, the collector, time of collection; preservation; and requested analyses.
Chemical Oxygen Demand (COD)	A test commonly used to indirectly measure the amount of organic compounds in water.
Client (referred to by ISO as Customer)	Any individual or organization for whom items or services are furnished or work performed in response to defined requirements and expectations.
Code of Federal Regulations (CFR)	A codification of the general and permanent rules published in the Federal Register by agencies of the federal government.
Comparability	An assessment of the confidence with which one data set can be compared to another. Comparable data are produced through the use of standardized procedures and techniques.
Completeness	The percent of valid data obtained from a measurement system compared to the amount of valid data expected under normal conditions. The equation for completeness is: % Completeness = (Valid Data Points/Expected Data Points)*100
Confirmation	TNI- Verification of the identity of a component through the use of an approach with a different scientific principle from the original method. These may include, but are not limited to: second-column confirmation; alternate wavelength; derivatization; mass spectral interpretation; alternative detectors; or additional cleanup procedures. DoD- Includes verification of the identity and quantity of the analyte being measured by another means (e.g., by another determinative method, technology, or column). Additional cleanup procedures alone are not considered confirmation techniques.
Conformance	An affirmative indication or judgment that a product or service has met the requirements of the relevant specifications, contract, or regulation; also the state of meeting the requirements.
Congener	A member of a class of related chemical compounds (e.g., PCBs, PCDDs).
Consensus Standard	DoD- A standard established by a group representing a cross-section of a particular industry or trade, or a part thereof.
Continuing Calibration Blank (CCB)	A blank sample used to monitor the cleanliness of an analytical system at a frequency determined by the analytical method.
Continuing Calibration Check Compounds (CCC)	Compounds listed in mass spectrometry methods that are used to evaluate an instrument calibration from the standpoint of the integrity of the system. High variability would suggest leaks or active sites on the instrument column.
Continuing Calibration Verification	DoD- The verification of the initial calibration. Required prior to sample analysis and at periodic intervals. Continuing calibration verification applies to both external and internal standard calibration techniques, as well as to linear and non-linear calibration models.
Continuing Calibration Verification (CCV) Standard	Also referred to as a Calibration Verification Standard (CVS) in some methods, it is a standard used to verify the initial calibration of compounds in an analytical method. CCVs are analyzed at a frequency determined by the analytical method.

Continuous Emission Monitor (CEM)	A flue gas analyzer designed for fixed use in checking for environmental pollutants.
Continuous Improvement Plan (CIP)	The delineation of tasks for a given laboratory department or committee to achieve the goals of that department.
Contract Laboratory Program (CLP)	A national network of EPA personnel, commercial labs, and support contractors whose fundamental mission is to provide data of known and documented quality.
Contract Required Detection Limit (CRDL)	Detection limit that is required for EPA Contract Laboratory Program (CLP) contracts.
Contract Required Quantitation Limit (CRQL)	Quantitation limit (reporting limit) that is required for EPA Contract Laboratory Program (CLP) contracts.
Control Chart	A graphic representation of a series of test results, together with limits within which results are expected when the system is in a state of statistical control (see definition for Control Limit)
Control Limit	A range within which specified measurement results must fall to verify that the analytical system is in control. Control limit exceedances may require corrective action or require investigation and flagging of non-conforming data.
Correction	DoD- Action taken to eliminate a detected non-conformity.
Corrective Action	DoD- The action taken to eliminate the causes of an existing non-conformity, defect, or other undesirable situation in order to prevent recurrence. A root cause analysis may not be necessary in all cases.
Corrective and Preventative Action (CAPA)	The primary management tools for bringing improvements to the quality system, to the management of the quality system's collective processes, and to the products or services delivered which are an output of established systems and processes.
Critical Value	TNI- Value to which a measurement result is compared to make a detection decision (also known as critical level or decision level). NOTE: The Critical Value is designed to give a specified low probability α of false detection in an analyte-free sample, which implies that a result that exceeds the Critical Value, gives high confidence $(1 - \alpha)$ that the radionuclide is actually present in the material analyzed. For radiometric methods, α is often set at 0.05.
Customer	DoD- Any individual or organization for which products or services are furnished or work performed in response to defined requirements and expectations.
Data Integrity	TNI- The condition that exists when data are sound, correct, and complete, and accurately reflect activities and requirements.
Data Quality Objective (DQO)	Systematic strategic planning tool based on the scientific method that identifies and defines the type, quality, and quantity of data needed to satisfy a specified use or end user.
Data Reduction	TNI- The process of transforming the number of data items by arithmetic or statistical calculation, standard curves, and concentration factors, and collating them into a more usable form.
Definitive Data	DoD- Analytical data of known quantity and quality. The levels of data quality on precision and bias meet the requirements for the decision to be made. Data that is suitable for final decision-making.
Demonstration of Capability (DOC)	TNI- A procedure to establish the ability of the analyst to generate analytical results of acceptable accuracy and precision. DoD- A procedure to establish the ability of the analyst to generate analytical results by a specific method that meet measurement quality objectives (e.g., for precision and bias).
Department of Defense (DoD)	An executive branch department of the federal government of the United States charged with coordinating and supervising all agencies and functions of the government concerned directly with national security.
Detection Limit (DL)	DoD- The smallest analyte concentration that can be demonstrated to be different than zero or a blank concentration with 99% confidence. At the DL, the false positive rate (Type 1 error) is 1%. A DL may be used as the lowest concentration for reliably reporting a detection of a specific analyte in a specific matrix with a specific method with 99% confidence.
Detection Limit (DL) for Safe Drinking Water Act (SDWA) Compliance	TNI- Laboratories that analyze drinking-water samples for SDWA compliance monitoring must use methods that provide sufficient detection capability to meet the detection limit requirements established in 40 CFR 141. The SDWA DL for radioactivity is defined in 40 CFR Part 141.25.c as the radionuclide concentration, which can be counted with a precision of plus or minus 100% at the 95% confidence level (1.96σ where σ is the standard deviation of the net counting rate of the sample).
Deuterated Monitoring Compounds (DMCs)	DoD- SIM specific surrogates as specified for GC/MS SIM analysis.
Diesel Range Organics (DRO)	A range of compounds that denote all the characteristic compounds that make up diesel fuel (range can be state or program specific).

Digestion	DoD- A process in which a sample is treated (usually in conjunction with heat and acid) to convert the target analytes in the sample to a more easily measured form.
Document Control	The act of ensuring that documents (and revisions thereto) are proposed, reviewed for accuracy, approved for release by authorized personnel, distributed properly and controlled to ensure use of the correct version at the location where the prescribed activity is performed.
Documents	DoD- Written components of the laboratory management system (e.g., policies, procedures, and instructions).
Dry Weight	The weight after drying in an oven at a specified temperature.
Duplicate (also known as Replicate or Laboratory Duplicate)	The analyses or measurements of the variable of interest performed identically on two subsamples of the same sample. The results of duplicate analyses are used to evaluate analytical or measurement precision but not the precision of sampling, preservation or storage internal to the laboratory.
Electron Capture Detector (ECD)	Device used in GC methods to detect compounds that absorb electrons (e.g., PCB compounds).
Electronic Data Deliverable (EDD)	A summary of environmental data (usually in spreadsheet form) which clients request for ease of data review and comparison to historical results.
Eluent	A solvent used to carry the components of a mixture through a stationary phase.
Elute	To extract, specifically, to remove (absorbed material) from an absorbent by means of a solvent.
Elution	A process in which solutes are washed through a stationary phase by movement of a mobile phase.
Environmental Data	DoD- Any measurements or information that describe environmental processes, locations, or conditions; ecological or health effects and consequences; or the performance of environmental technology.
Environmental Monitoring	The process of measuring or collecting environmental data.
Environmental Protection Agency (EPA)	An agency of the federal government of the United States which was created for the purpose of protecting human health and the environment by writing and enforcing regulations based on laws passed by Congress.
Environmental Sample	A representative sample of any material (aqueous, non-aqueous, or multimedia) collected from any source for which determination of composition or contamination is requested or required. Environmental samples can generally be classified as follows: • Non Potable Water (Includes surface water, ground water, effluents, water treatment chemicals, and TCLP leachates or other extracts) • Drinking Water - Delivered (treated or untreated) water designated as potable water • Water/Wastewater - Raw source waters for public drinking water supplies, ground waters, municipal influents/effluents, and industrial influents/effluents • Sludge - Municipal sludges and industrial sludges. • Soil - Predominately inorganic matter ranging in classification from sands to clays. • Waste - Aqueous and non-aqueous liquid wastes, chemical solids, and industrial liquid and solid wastes
Equipment Blank	A sample of analyte-free media used to rinse common sampling equipment to check effectiveness of decontamination procedures.
Extracted Internal Standard Analyte	Isotopically labeled analogs of analytes of interest added to all standards, blanks and samples analyzed. Added to samples and batch QC samples prior to the first step of sample extraction and to standards and instrument blanks prior to analysis. Used for isotope dilution methods.
Facility	A distinct location within the company that has unique certifications, personnel and waste disposal identifications.
False Negative	DoD- A result that fails to identify (detect) an analyte or reporting an analyte to be present at or below a level of interest when the analyte is actually above the level of interest.
False Positive	DoD- A result that erroneously identifies (detects) an analyte or reporting an analyte to be present above a level of interest when the analyte is actually present at or below the level of interest.
Field Blank	A blank sample prepared in the field by filling a clean container with reagent water and appropriate preservative, if any, for the specific sampling activity being undertaken.
Field Measurement	Determination of physical, biological, or radiological properties, or chemical constituents that are measured on-site, close in time and sPAS to the matrices being sampled/measured, following accepted test methods. This testing is performed in the field outside of a fixed-laboratory or outside of an enclosed structure that meets the requirements of a mobile laboratory.
Field of Accreditation	TNI- Those matrix, technology/method, and analyte combinations for which the accreditation body offers accreditation.

Field of Proficiency Testing (FoPT)	TNI- Matrix, technology/method, analyte combinations for which the composition, spike concentration ranges and acceptance criteria have been established by the PTPEC.
Finding	TNI- An assessment conclusion referenced to a laboratory accreditation standard and supported by objective evidence that identifies a deviation from a laboratory accreditation standard requirement. DoD- An assessment conclusion that identifies a condition having a significant effect on an item or activity. An assessment finding may be positive, negative, or neutral and is normally accompanied by specific examples of the observed condition. The finding must be linked to a specific requirement (e.g., this standard, ISO requirements, analytical methods, contract specifications, or laboratory management systems requirements).
Flame Atomic Absorption Spectrometer (FAA)	Instrumentation used to measure the concentration of metals in an environmental sample based on the fact that ground state metals absorb light at different wavelengths. Metals in a solution are converted to the atomic state by use of a flame.
Flame Ionization Detector (FID)	A type of gas detector used in GC analysis where samples are passed through a flame which ionizes the sample so that various ions can be measured.
Gas Chromatography (GC)	Instrumentation which utilizes a mobile carrier gas to deliver an environmental sample across a stationary phase with the intent to separate compounds out and measure their retention times.
Gas Chromatograph/ Mass Spectrometry (GC/MS)	In conjunction with a GC, this instrumentation utilizes a mass spectrometer which measures fragments of compounds and determines their identity by their fragmentation patterns (mass spectra).
Gasoline Range Organics (GRO)	A range of compounds that denote all the characteristic compounds that make up gasoline (range can be state or program specific).
Graphite Furnace Atomic Absorption Spectrometry (GFAA)	Instrumentation used to measure the concentration of metals in an environmental sample based on the absorption of light at different wavelengths that are characteristic of different analytes.
High Pressure Liquid Chromatography (HPLC)	Instrumentation used to separate, identify and quantitate compounds based on retention times which are dependent on interactions between a mobile phase and a stationary phase.
Holding Time	TNI- The maximum time that can elapse between two specified activities. 40 CFR Part 136- The maximum time that samples may be held prior to preparation and/or analysis as defined by the method and still be considered valid or not compromised. For sample prep purposes, hold times are calculated using the time of the start of the preparation procedure. DoD- The maximum time that may elapse from the time of sampling to the time of preparation or analysis, or from preparation to analysis, as appropriate.
Homogeneity	The degree to which a property or substance is uniformly distributed throughout a sample.
Homologue	One in a series of organic compounds in which each successive member has one more chemical group in its molecule than the next preceding member. For instance, methanol, ethanol, propanol, butanol, etc., form a homologous series.
Improper Actions	DoD- Intentional or unintentional deviations from contract-specified or method-specified analytical practices that have not been authorized by the customer (e.g., DoD or DOE).
Incremental Sampling Method (ISM)	Soil preparation for large volume (1 kg or greater) samples.
In-Depth Data Monitoring	TNI- When used in the context of data integrity activities, a review and evaluation of documentation related to all aspects of the data generation process that includes items such as preparation, equipment, software, calculations, and quality controls. Such monitoring shall determine if the laboratory uses appropriate data handling, data use and data reduction activities to support the laboratory's data integrity policies and procedures.
Inductively Coupled Plasma Atomic Emission Spectrometry (ICP-AES)	Analytical technique used for the detection of trace metals which uses plasma to produce excited atoms that emit radiation of characteristic wavelengths.
Inductively Coupled Plasma- Mass Spectrometry (ICP/MS)	An ICP that is used in conjunction with a mass spectrometer so that the instrument is not only capable of detecting trace amounts of metals and non-metals but is also capable of monitoring isotopic speciation for the ions of choice.
Infrared Spectrometer (IR)	An instrument that uses infrared light to identify compounds of interest.

Initial Calibration (ICAL)	The process of analyzing standards, prepared at specified concentrations, to define the quantitative response relationship of the instrument to the analytes of interest. Initial calibration is performed whenever the results of a calibration verification standard do not conform to the requirements of the method in use or at a frequency specified in the method.
Initial Calibration Blank (ICB)	A blank sample used to monitor the cleanliness of an analytical system at a frequency determined by the analytical method. This blank is specifically run in conjunction with the Initial Calibration Verification (ICV) where applicable.
Initial Calibration Verification (ICV)	DoD- Verifies the initial calibration with a standard obtained or prepared from a source independent of the source of the initial calibration standards to avoid potential bias of the initial calibration.
Injection Internal Standard Analyte	Isotopically labeled analogs of analytes of interest (or similar in physiochemical properties to the target analytes but with a distinct response) to be quantitated. Added to all blanks, standards, samples and batch QC after extraction and prior to analysis.
Instrument Blank	A clean sample (e.g., distilled water) processed through the instrumental steps of the measurement process; used to determine instrument contamination.
Instrument Detection Limits (IDLs)	Limits determined by analyzing a series of reagent blank analyses to obtain a calculated concentration. IDLs are determined by calculating the average of the standard deviations of three runs on three non-consecutive days from the analysis of a reagent blank solution with seven consecutive measurements per day.
Interference, spectral	Occurs when particulate matter from the atomization scatters incident radiation from the source or when the absorption or emission from an interfering species either overlaps or is so close to the analyte wavelength that resolution becomes impossible.
Interference, chemical	Results from the various chemical processes that occur during atomization and later the absorption characteristics of the analyte.
Internal Standard	TNI and DoD- A known amount of standard added to a test portion of a sample as a reference for evaluating and controlling the precision and bias of the applied analytical method.
International Organization for Standardization (ISO)	An international standard-setting body composed of representatives from various national standards organizations.
Intermediate Standard Solution	Reference solutions prepared by dilution of the stock solutions with an appropriate solvent.
International System of Units (SI)	The coherent system of units adopted and recommended by the General Conference on Weights and Measures.
Ion Chromatography (IC)	Instrumentation or process that allows the separation of ions and molecules based on the charge properties of the molecules.
Isomer	One of two or more compounds, radicals, or ions that contain the same number of atoms of the same element but differ in structural arrangement and properties. For example, hexane (C6H14) could be n-hexane, 2-methylpentane, 3-methylpentane, 2,3-dimethylbutane, 2,2-dimethylbutane.
Laboratory	A body that calibrates and/or performs testing..
Laboratory Control Sample (LCS)	TNI- (also known as laboratory fortified blank (LFB), spiked blank, or QC check sample): A sample matrix, free from the analytes of interest, spiked with verified known amounts of analytes or a material containing known and verified amounts of analytes and taken through all sample preparation and analytical steps of the procedure unless otherwise noted in a reference method. It is generally used to establish intra-laboratory or analyst-specific precision and bias or to evaluate the performance of all or a portion of the measurement system.
Laboratory Duplicate	Aliquots of a sample taken from the same container under laboratory conditions and processed and analyzed independently.
Laboratory Information Management System (LIMS)	DoD- The entirety of an electronic data system (including hardware and software) that collects, analyzes, stores, and archives electronic records and documents.
Learning Management System (LMS)	A web-based database used by the laboratories to track and document training activities. The system is administered by the corporate training department and each laboratory's learn centers are maintained by a local administrator.
Legal Chain-of-Custody Protocols	TNI- Procedures employed to record the possession of samples from the time of sampling through the retention time specified by the client or program. These procedures are performed at the special request of the client and include the use of a Chain-of-Custody (COC) Form that documents the collection, transport, and receipt of compliance samples by the laboratory. In addition, these protocols document all handling of the samples within the laboratory.

Limit(s) of Detection (LOD)	TNI- The minimum result, which can be reliably discriminated from a blank with predetermined confidence level. DoD- The smallest concentration of a substance that must be present in a sample in order to be detected at the DL with 99% confidence. At the LOD, the false negative rate (Type II error) is 1%. A LOD may be used as the lowest concentration for reliably reporting a non-detect of a specific analyte in a specific matrix with a specific method at 99% confidence.
Limit(s) of Quantitation (LOQ)	TNI- The minimum levels, concentrations, or quantities of a target variable (e.g., target analyte) that can be reported with a specified degree of confidence. DoD- The smallest concentration that produces a quantitative result with known and recorded precision and bias. For DoD/DOE projects, the LOQ shall be set at or above the concentration of the lowest initial calibration standard and within the calibration range.
Linear Dynamic Range	DoD- Concentration range where the instrument provides a linear response.
Liquid chromatography/ tandem mass spectrometry (LC/MS/MS)	Instrumentation that combines the physical separation techniques of liquid chromatography with the mass analysis capabilities of mass spectrometry.
Lot	TNI- A definite amount of material produced during a single manufacturing cycle, and intended to have uniform character and quality.
Management	Those individuals directly responsible and accountable for planning, implementing, and assessing work.
Management System	System to establish policy and objectives and to achieve those objectives.
Manager (however named)	The individual designated as being responsible for the overall operation, all personnel, and the physical plant of the environmental laboratory. A supervisor may report to the manager. In some cases, the supervisor and the manager may be the same individual.
Matrix	TNI- The substrate of a test sample.
Matrix Duplicate	TNI- A replicate matrix prepared in the laboratory and analyzed to obtain a measure of precision.
Matrix Spike (MS) (spiked sample or fortified sample)	TNI- A sample prepared, taken through all sample preparation and analytical steps of the procedure unless otherwise noted in a referenced method, by adding a known amount of target analyte to a specified amount of sample for which an independent test result of target analyte concentration is available. Matrix spikes are used, for example, to determine the effect of the matrix on a method's recovery efficiency.
Matrix Spike Duplicate (MSD) (spiked sample or fortified sample duplicate)	TNI- A replicate matrix spike prepared in the laboratory and analyzed to obtain a measure of the precision of the recovery for each analyte.
Measurement Performance Criteria (MPC)	DoD- Criteria that may be general (such as completion of all tests) or specific (such as QC method acceptance limits) that are used by a project to judge whether a laboratory can perform a specified activity to the defined criteria.
Measurement Quality Objective (MQO)	TNI- The analytical data requirements of the data quality objectives are project- or program-specific and can be quantitative or qualitative. MQOs are measurement performance criteria or objectives of the analytical process. Examples of quantitative MQOs include statements of required analyte detectability and the uncertainty of the analytical protocol at a specified radionuclide activity, such as the action level. Examples of qualitative MQOs include statements of the required specificity of the analytical protocol, e.g., the ability to analyze for the radionuclide of interest given the presence of interferences.
Measurement System	TNI- A method, as implemented at a particular laboratory, and which includes the equipment used to perform the test and the operator(s). DoD- A test method, as implemented at a particular laboratory, and which includes the equipment used to perform the sample preparation and test and the operator(s).
Measurement Uncertainty	DoD- An estimate of the error in a measurement often stated as a range of values that contain the true value within a certain confidence level. The uncertainty generally includes many components which may be evaluated from experimental standard deviations based on repeated observations or by standard deviations evaluated from assumed probability distributions based on experience or other information. For DoD/DOE, a laboratory's Analytical Uncertainty (such as use of LCS control limits) can be reported as the minimum uncertainty.
Method	TNI- A body of procedures and techniques for performing an activity (e.g., sampling, chemical analysis, quantification), systematically presented in the order in which they are to be executed.
Method Blank	TNI- A sample of a matrix similar to the batch of associated samples (when available) that is free from the analytes of interest and is processed simultaneously with and under the same conditions as samples through all steps of the analytical procedures, and in which no target analytes or interferences are present at concentrations that impact the analytical results for sample analyses.

Method Detection Limit (MDL)	TNI- One way to establish a Detection Limit; defined as the minimum concentration of a substance that can be measured and reported with 99% confidence that the analyte concentration is greater than zero and is determined from analysis of a sample in a given matrix containing the analyte.
Method of Standard Additions	A set of procedures adding one or more increments of a standard solution to sample aliquots of the same size in order to overcome inherent matrix effects. The procedures encompass the extrapolation back to obtain the sample concentration.
Minimum Detectable Activity (MDA)	TNI- Estimate of the smallest true activity that ensures a specified high confidence, 1 – β, of detection above the Critical Value, and a low probability β of false negatives below the Critical Value. For radiometric methods, β is often set at 0.05. NOTE 1: The MDS is a measure of the detection capability of a measurement process and as such, it is an a priori concept. It may be used in the selection of methods to meet specified MQOs. Laboratories may also calculate a "sample specific" MDA, which indicates how well the measurement process is performing under varying real-world measurement conditions, when sample-specific characteristics (e.g., interferences) may affect the detection capability. However, the MDA must never be used instead of the Critical Value as a detection threshold. NOTE 2: For the purpose of this Standard, the terms MDA and minimum detectable concentration (MDC) are equivalent.
Minimum Reporting Limit (MRL)	the lowest concentration of standard used for calibration – Drinking Water Manual
MintMiner	Commercial software program used to scan large amounts of chromatographic data to monitor for errors or data integrity issues.
Mobile Laboratory	TNI- A portable enclosed structure with necessary and appropriate accommodation and environmental conditions for a laboratory, within which testing is performed by analysts. Examples include but are not limited to trailers, vans, and skid-mounted structures configured to house testing equipment and personnel.
National Environmental Laboratory Accreditation Conference (NELAC)	See definition of The NELAC Institute (TNI).
National Institute of Occupational Safety and Health (NIOSH)	National institute charged with the provision of training, consultation and information in the area of occupational safety and health.
National Institute of Standards and Technology (NIST)	TNI- A federal agency of the US Department of Commerce's Technology Administration that is designed as the United States national metrology institute (or NMI).
National Pollutant Discharge Elimination System (NPDES)	A permit program that controls water pollution by regulating point sources that discharge pollutants into U.S. waters.
Negative Control	Measures taken to ensure that a test, its components, or the environment do not cause undesired effects, or produce incorrect test results.
Nitrogen Phosphorus Detector (NPD)	A detector used in GC analyses that utilizes thermal energy to ionize an analyte. With this detector, nitrogen and phosphorus can be selectively detected with a higher sensitivity than carbon.
Nonconformance	An indication or judgment that a product or service has not met the requirement of the relevant specifications, contract, or regulation; also the state of failing to meet the requirements.
Not Detected (ND)	The result reported for a compound when the detected amount of that compound is less than the method reporting limit.
Operator Aid	DoD- A technical posting (such as poster, operating manual, or notepad) that assists workers in performing routine tasks. All operator aids must be controlled documents (i.e., a part of the laboratory management system).
Performance Based Measurement System (PBMS)	An analytical system wherein the data quality needs, mandates or limitations of a program or project are specified and serve as criteria for selecting appropriate test methods to meet those needs in a cost-effective manner.
Physical Parameter	TNI- A measurement of a physical characteristic or property of a sample as distinguished from the concentrations of chemical and biological components.
Photo-ionization Detector (PID)	An ion detector which uses high-energy photons, typically in the ultraviolet range, to break molecules into positively charged ions.
Polychlorinated Biphenyls (PCB)	A class of organic compounds that were used as coolants and insulating fluids for transformers and capacitors. The production of these compounds was banned in the 1970's due to their high toxicity.
Positive Control	Measures taken to ensure that a test and/or its components are working properly and producing correct or expected results from positive test subjects.

Post-Digestion Spike	A sample prepared for metals analyses that has analytes spike added to determine if matrix effects may be a factor in the results.
Power of Hydrogen (pH)	The measure of acidity or alkalinity of a solution.
Practical Quantitation Limit (PQL)	Another term for a method reporting limit. The lowest reportable concentration of a compound based on parameters set up in an analytical method and the laboratory's ability to reproduce those conditions.
Precision	TNI- The degree to which a set of observations or measurements of the same property, obtained under similar conditions, conform to themselves; a data quality indicator. Precision is usually expressed as standard deviation, variance or range, in either absolute or relative terms.
Preservation	TNI and DoD- Any conditions under which a sample must be kept in order to maintain chemical, physical, and/or biological integrity prior to analysis.
Primary Accreditation Body (Primary AB)	TNI- The accreditation body responsible for assessing a laboratory's total quality system, on-site assessment, and PT performance tracking for fields of accreditation.
Procedure	TNI- A specified way to carry out an activity or process. Procedures can be documented or not.
Proficiency Testing (PT)	TNI- A means to evaluate a laboratory's performance under controlled conditions relative to a given set of criteria, through analysis of unknown samples provided by an external source.
Proficiency Testing Program (PT Program)	TNI- The aggregate of providing rigorously controlled and standardized environmental samples to a laboratory for analysis, reporting of results, statistical evaluation of the results and the collective demographics and results summary of all participating laboratories.
Proficiency Testing Provider (PT Provider)	TNI- A person or organization accredited by a TNI-approved Proficiency Testing Provider Accreditor to operate a TNI-compliant PT Program.
Proficiency Testing Provider Accreditor (PTPA)	TNI- An organization that is approved by TNI to accredit and monitor the performance of proficiency testing providers.
Proficiency Testing Reporting Limit (PTRL)	TNI- A statistically derived value that represents the lowest acceptable concentration for an analyte in a PT sample, if the analyte is spiked into the PT sample. The PTRLs are specified in the TNI FoPT tables.
Proficiency Testing Sample (PT)	TNI- A sample, the composition of which is unknown to the laboratory, and is provided to test whether the laboratory can produce analytical results within the specified acceptance criteria.
Proficiency Testing (PT) Study	TNI- a) Scheduled PT Study: A single complete sequence of circulation and scoring of PT samples to all participants in a PT program. The study must have the same pre-defined opening and closing dates for all participants; b) Supplemental PT Study: A PT sample that may be from a lot previously released by a PT Provider that meets the requirements for supplemental PT samples given in Volume 3 of this Standard [TNI] but that does not have a pre-determined opening date and closing date.
Proficiency Testing Study Closing Date	TNI- a) Scheduled PT Study: The calendar date by which all participating laboratories must submit analytical results for a PT sample to a PT Provider; b) Supplemental PT Study: The calendar date a laboratory submits the results for a PT sample to the PT Provider.
Proficiency Testing Study Opening Date	TNI- a) Scheduled PT Study: The calendar date that a PT sample is first made available to all participants of the study by a PT Provider; b) Supplemental PT Study: The calendar date the PT Provider ships the sample to a laboratory.
Protocol	TNI- A detailed written procedure for field and/or laboratory operation (e.g., sampling, analysis) that must be strictly followed.
Qualitative Analysis	DoD- Analysis designed to identify the components of a substance or mixture.
Quality Assurance (QA)	TNI- An integrated system of management activities involving planning, implementation, assessment, reporting and quality improvement to ensure that a process, item, or service is of the type and quality needed and expected by the client.
Quality Assurance Manual (QAM)	A document stating the management policies, objectives, principles, organizational structure and authority, responsibilities, accountability, and implementation of an agency, organization, or laboratory, to ensure the quality of its product and the utility of its product to its users.
Quality Assurance Project Plan (QAPP)	A formal document describing the detailed quality control procedures by which the quality requirements defined for the data and decisions pertaining to a specific project are to be achieved.
Quality Control (QC)	TNI- The overall system of technical activities that measures the attributes and performance of a process, item, or service against defined standards to verify that they meet the stated requirements established by the customer; operational techniques and activities that are used to fulfill requirements for quality; also the system of activities and checks used to ensure that measurement systems are maintained within prescribed limits, providing protection against "out of control" conditions and ensuring that the results are of acceptable quality.

Quality Control Sample (QCS)	TNI- A sample used to assess the performance of all or a portion of the measurement system. One of any number of samples, such as Certified Reference Materials, a quality system matrix fortified by spiking, or actual samples fortified by spiking, intended to demonstrate that a measurement system or activity is in control.
Quality Manual	TNI- A document stating the management policies, objectives, principles, organizational structure and authority, responsibilities, accountability, and implementation of an agency, organization, or laboratory, to ensure the quality of its product and the utility of its product to its users.
Quality System	TNI and DoD- A structured and documented management system describing the policies, objectives, principles, organizational authority, responsibilities, accountability, and implementation plan of an organization for ensuring quality in its work processes, products (items), and services. The quality system provides the framework for planning, implementing, and assessing work performed by the organization and for carrying out required quality assurance and quality control activities.
Quality System Matrix	TNI and DoD- These matrix definitions shall be used for purposes of batch and quality control requirements and may be different from a field of accreditation matrix: • **Air and Emissions**: Whole gas or vapor samples including those contained in flexible or rigid wall containers and the extracted concentrated analytes of interest from a gas or vapor that are collected with a sorbant tube, impinger solution, filter, or other device • **Aqueous**: Any aqueous sample excluded from the definition of Drinking Water or Saline/Estuarine. Includes surface water, groundwater effluents, and TCLP or other extracts. • **Biological Tissue**: Any sample of a biological origin such as fish tissue, shellfish or plant material. Such samples shall be grouped according to origin. • **Chemical Waste**: A product or by-product of an industrial process that results in a matrix not previously defined. • **Drinking Water**: Any aqueous sample that has been designated a potable or potentially potable water source. • **Non-aqueous liquid**: Any organic liquid with <15% settleable solids • **Saline/Estuarine**: Any aqueous sample from an ocean or estuary, or other salt water source such as the Great Salt Lake. • **Solids**: Includes soils, sediments, sludges, and other matrices with >15% settleable solids.
Quantitation Range	DoD- The range of values (concentrations) in a calibration curve between the LOQ and the highest successively analyzed initial calibration standard used to relate instrument response to analyte concentration. The quantitation range (adjusted for initial sample volume/weight, concentration/dilution and final volume) lies within the calibration range.
Quantitative Analysis	DoD- Analysis designed to determine the amounts or proportions of the components of a substance.
Random Error	The EPA has established that there is a 5% probability that the results obtained for any one analyte will exceed the control limits established for the test due to random error. As the number of compounds measured increases in a given sample, the probability for statistical error also increases.
Raw Data	TNI- The documentation generated during sampling and analysis. This documentation includes, but is not limited to, field notes, electronic data, magnetic tapes, untabulated sample results, QC sample results, print outs of chromatograms, instrument outputs, and handwritten records.
Reagent Blank (method reagent blank)	A sample consisting of reagent(s), without the target analyte or sample matrix, introduced into the analytical procedure at the appropriate point and carried through all subsequent steps to determine the contribution of the reagents and of the involved analytical steps.
Reagent Grade	Analytical reagent (AR) grade, ACS reagent grade, and reagent grade are synonymous terms for reagents that conform to the current specifications of the Committee on Analytical Reagents of the American Chemical Society.
Records	DoD- The output of implementing and following management system documents (e.g., test data in electronic or hand-written forms, files, and logbooks).
Reference Material	TNI- Material or substance one or more of whose property values are sufficiently homogenized and well established to be used for the calibration of an apparatus, the assessment of a measurement method, or for assigning values to materials.

Reference Method	TNI- A published method issued by an organization generally recognized as competent to do so. (When the ISO language refers to a "standard method", that term is equivalent to "reference method"). When a laboratory is required to analyze by a specified method due to a regulatory requirement, the analyte/method combination is recognized as a reference method. If there is no regulatory requirement for the analyte/method combination, the analyte/method combination is recognized as a reference method if it can be analyzed by another reference method of the same matrix and technology.
Reference Standard	TNI- Standard used for the calibration of working measurement standards in a given organization or at a given location.
Relative Percent Difference (RPD)	A measure of precision defined as the difference between two measurements divided by the average concentration of the two measurements.
Reporting Limit (RL)	The level at which method, permit, regulatory and customer-specific objectives are met. The reporting limit may never be lower than the Limit of Detection (i.e., statistically determined MDL). Reporting limits are corrected for sample amounts, including the dry weight of solids, unless otherwise specified. There must be a sufficient buffer between the Reporting Limit and the MDL. DoD- A customer-specified lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.
Reporting Limit Verification Standard (RLVS)	A standard analyzed at the reporting limit for an analysis to verify the laboratory's ability to report to that level.
Representativeness	A quality element related to the ability to collect a sample reflecting the characteristics of the part of the environment to be assessed. Sample representativeness is dependent on the sampling techniques specified in the project work plan.
Requirement	Denotes a mandatory specification; often designated by the term "shall".
Retention Time	The time between sample injection and the appearance of a solute peak at the detector.
Revocation	TNI- The total or partial withdrawal of a laboratory's accreditation by an accreditation body.
Sample	Portion of material collected for analysis, identified by a single, unique alphanumeric code. A sample may consist of portions in multiple containers, if a single sample is submitted for multiple or repetitive analysis.
Sample Condition Upon Receipt Form (SCURF)	Form used by sample receiving personnel to document the condition of sample containers upon receipt to the laboratory (used in conjunction with a COC).
Sample Delivery Group (SDG)	A unit within a single project that is used to identify a group of samples for delivery. An SDG is a group of 20 or fewer field samples within a project, received over a period of up to 14 calendar days. Data from all samples in an SDG are reported concurrently.
Sample Receipt Form (SRF)	Letter sent to the client upon login to show the tests requested and pricing.
Sample Tracking	Procedures employed to record the possession of the samples from the time of sampling until analysis, reporting and archiving. These procedures include the use of a chain-of-custody form that documents the collection, transport, and receipt of compliance samples to the laboratory. In addition, access to the laboratory is limited and controlled to protect the integrity of the samples.
Sampling	TNI- Activity related to obtaining a representative sample of the object of conformity assessment, according to a procedure.
Selected Ion Monitoring (SIM)	A mode of analysis in mass spectrometry where the detector is set to scan over a very small mass range, typically one mass unit. The narrower the range, the more sensitive the detector. DoD- Using GC/MS, characteristic ions specific to target compounds are detected and used to quantify in applications where the normal full scan mass spectrometry results in excessive noise.
Selectivity	TNI- The ability to analyze, distinguish, and determine a specific analyte or parameter from another component that may be a potential interferent or that may behave similarly to the target analyte or parameter within the measurement system.
Sensitivity	TNI- The capability of a method or instrument to discriminate between measurement responses representing different levels (e.g., concentrations) of a variable of interest.
Serial Dilution	The stepwise dilution of a substance in a solution.
Shall	Denotes a requirement that is mandatory whenever the criterion for conformance with the specification requires that there be no deviation. This does not prohibit the use of alternative approaches or methods for implementing the specification as long as the requirement is fulfilled.
Should	Denotes a guideline or recommendation whenever noncompliance with the specification is permissible.

Signal-to-Noise Ratio (S/N)	DoD- A measure of signal strength relative to background noise. The average strength of the noise of most measurements is constant and independent of the magnitude of the signal. Thus, as the quantity being measured (producing the signal) decreases in magnitude, S/N decreases and the effect of the noise on the relative error of a measurement increases.
Source Water	TNI- When sampled for drinking water compliance, untreated water from streams, rivers, lakes, or underground aquifers, which is used to supply private and public drinking water supplies.
Spike	A known mass of target analyte added to a blank sample or sub-sample; used to determine recovery efficiency or for other quality control purposes.
Standard (Document)	TNI- The document describing the elements of a laboratory accreditation that has been developed and established within the consensus principles of standard setting and meets the approval requirements of standard adoption organizations procedures and policies.
Standard (Chemical)	Standard samples are comprised of a known amount of standard reference material in the matrix undergoing analysis. A standard reference material is a certified reference material produced by US NIST and characterized for absolute content, independent of analytical test method.
Standard Blank (or Reagent Blank)	A calibration standard consisting of the same solvent/reagent matrix used to prepare the calibration standards without the analytes. It is used to construct the calibration curve by establishing instrument background.
Standard Method	A test method issued by an organization generally recognized as competent to do so.
Standard Operating Procedure (SOP)	TNI- A written document that details the method for an operation, analysis, or action with thoroughly prescribed techniques and steps. SOPs are officially approved as the methods for performing certain routine or repetitive tasks.
Standard Reference Material (SRM)	A certified reference material produced by the US NIST or other equivalent organization and characterized for absolute content, independent of analytical method.
Statement of Qualifications (SOQ)	A document that lists information about a company, typically the qualifications of that company to compete on a bid for services.
Stock Standard	A concentrated reference solution containing one or more analytes prepared in the laboratory using an assayed reference compound or purchased from a reputable commercial source.
Storage Blank	DoD- A sample of analyte-free media prepared by the laboratory and retained in the sample storage area of the laboratory. A storage blank is used to record contamination attributable to sample storage at the laboratory.
Supervisor	The individual(s) designated as being responsible for a particular area or category of scientific analysis. This responsibility includes direct day-to-day supervision of technical employees, supply and instrument adequacy and upkeep, quality assurance/quality control duties and ascertaining that technical employees have the required balance of education, training and experience to perform the required analyses.
Surrogate	DoD- A substance with properties that mimic the analyte of interest. It is unlikely to be found in environmental samples and is added to them for quality control purposes.
Suspension	TNI- The temporary removal of a laboratory's accreditation for a defined period of time, which shall not exceed 6 months or the period of accreditation, whichever is longer, in order to allow the laboratory time to correct deficiencies or area of non-conformance with the Standard.
Systems Audit	An on-site inspection or assessment of a laboratory's quality system.
Target Analytes	DoD- Analytes or chemicals of primary concern identified by the customer on a project-specific basis.
Technical Director	Individual(s) who has overall responsibility for the technical operation of the environmental testing laboratory.
Technology	TNI- A specific arrangement of analytical instruments, detection systems, and/or preparation techniques.
Test	A technical operation that consists of the determination of one or more characteristics or performance of a given product, material, equipment, organism, physical phenomenon, process or service according to a specified procedure. The result of a test is normally recorded in a document sometimes called a test report or a test certificate.
Test Method	DoD- A definitive procedure that determines one or more characteristics of a given substance or product.
Test Methods for Evaluating Solid Waste, Physical/ Chemical (SW-846)	EPA Waste's official compendium of analytical and sampling methods that have been evaluated and approved for use in complying with RCRA regulations.
Test Source	TNI- A radioactive source that is tested, such as a sample, calibration standard, or performance check source. A Test Source may also be free of radioactivity, such as a Test Source counted to determine the subtraction background, or a short-term background check.

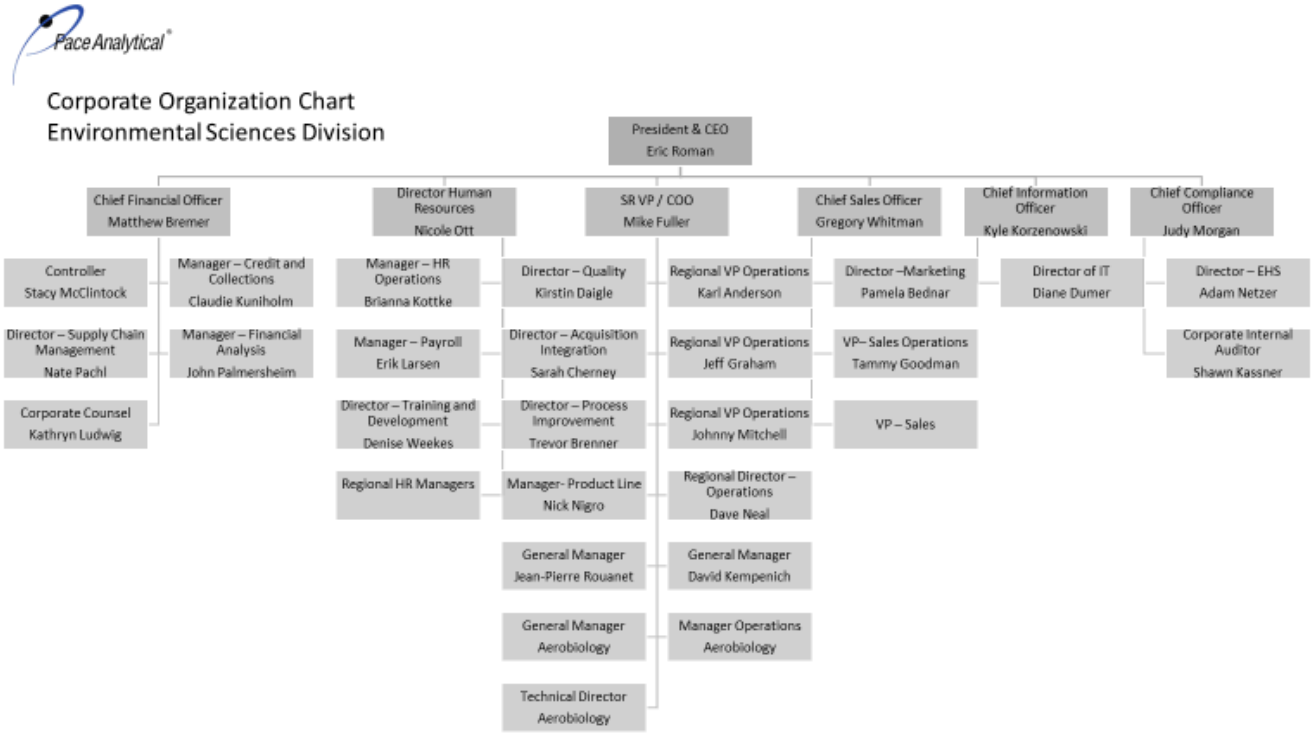
The NELAC Institute (TNI)	A non-profit organization whose mission is to foster the generation of environmental data of known and documented quality through an open, inclusive, and transparent process that is responsive to the needs of the community. Previously known as NELAC (National Environmental Laboratory Accreditation Conference).
Total Petroleum Hydrocarbons (TPH)	A term used to denote a large family of several hundred chemical compounds that originate from crude oil. Compounds may include gasoline components, jet fuel, volatile organics, etc.
Toxicity Characteristic Leaching Procedure (TCLP)	A solid sample extraction method for chemical analysis employed as an analytical method to simulate leaching of compounds through a landfill.
Traceability	TNI- The ability to trace the history, application, or location of an entity by means of recorded identifications. In a calibration sense, traceability relates measuring equipment to national or international standards, primary standards, basic physical conditions or properties, or reference materials. In a data collection sense, it relates calculations and data generated throughout the project back to the requirements for the quality of the project.
Training Document	A training resource that provides detailed instructions to execute a specific method or job function.
Trip Blank	This blank sample is used to detect sample contamination from the container and preservative during transport and storage of the sample. A cleaned sample container is filled with laboratory reagent water and the blank is stored, shipped, and analyzed with its associated samples.
Tuning	A check and/or adjustment of instrument performance for mass spectrometry as required by the method.
Ultraviolet Spectrophotometer (UV)	Instrument routinely used in quantitative determination of solutions of transition metal ions and highly conjugated organic compounds.
Uncertainty, Counting	TNI- The component of Measurement Uncertainty attributable to the random nature of radioactive decay and radiation counting (often estimated as the square root of observed counts (MARLAP). Older references sometimes refer to this parameter as Error, Counting Error or Count Error (c.f., Total Uncertainty).
Uncertainty, Expanded	TNI- The product of the Standard Uncertainty and a coverage factor, k, which is chosen to produce an interval about the result that has a high probability of containing the value of the measurand (c.f., Standard Uncertainty). NOTE: Radiochemical results are generally reported in association with the Total Uncertainty. Either if these estimates of uncertainty can be reported as the Standard Uncertainty (one-sigma) or as an Expanded Uncertainty (k-sigma, where $k > 1$).
Uncertainty, Measurement	TNI- Parameter associated with the result of a measurement that characterizes the dispersion of the values that could reasonably be attributed to the measurand.
Uncertainty, Standard	TNI- An estimate of the Measurement Uncertainty expressed as a standard deviation (c.f., Expanded Uncertainty).
Uncertainty, Total	TNI- An estimate of the Measurement Uncertainty that accounts for contributions from all significant sources of uncertainty associated with the analytical preparation and measurement of a sample. Such estimates are also commonly referred to as Combined Standard Uncertainty or Total Propagated Uncertainty, and in some older references as the Total Propagated Error, among other similar items (c.f., Counting Uncertainty).
Unethical actions	DoD- Deliberate falsification of analytical or quality control results where failed method or contractual requirements are made to appear acceptable.
United States Department of Agriculture (USDA)	A department of the federal government that provides leadership on food, agriculture, natural resources, rural development, nutrition and related issues based on public policy, the best available science, and effective management.
United States Geological Survey (USGS)	Program of the federal government that develops new methods and tools to supply timely, relevant, and useful information about the Earth and its processes.
Unregulated Contaminant Monitoring Rule (UCMR)	EPA program to monitor unregulated contaminants in drinking water.
Validation	DoD- The confirmation by examination and provision of objective evidence that the particular requirements for a specific intended use are fulfilled.
Verification	TNI- Confirmation by examination and objective evidence that specified requirements have been met. In connection with the management of measuring equipment, verification provides a means for checking that the deviations between values indicated by a measuring instrument and corresponding known values of a measured quantity are consistently smaller than the maximum allowable error defined in a standard, regulation or specification peculiar to the management of the measuring equipment.

Voluntary Action Program (VAP)	A program of the Ohio EPA that gives individuals a way to investigate possible environmental contamination, clean it up if necessary and receive a promise from the State of Ohio that no more cleanup is needed.
Whole Effluent Toxicity (WET)	The aggregate toxic effect to aquatic organisms from all pollutants contained in a facility's wastewater (effluent).

7.4 Appendix D: Organization Chart(s)

7.4.1 Corporate Organization Chart

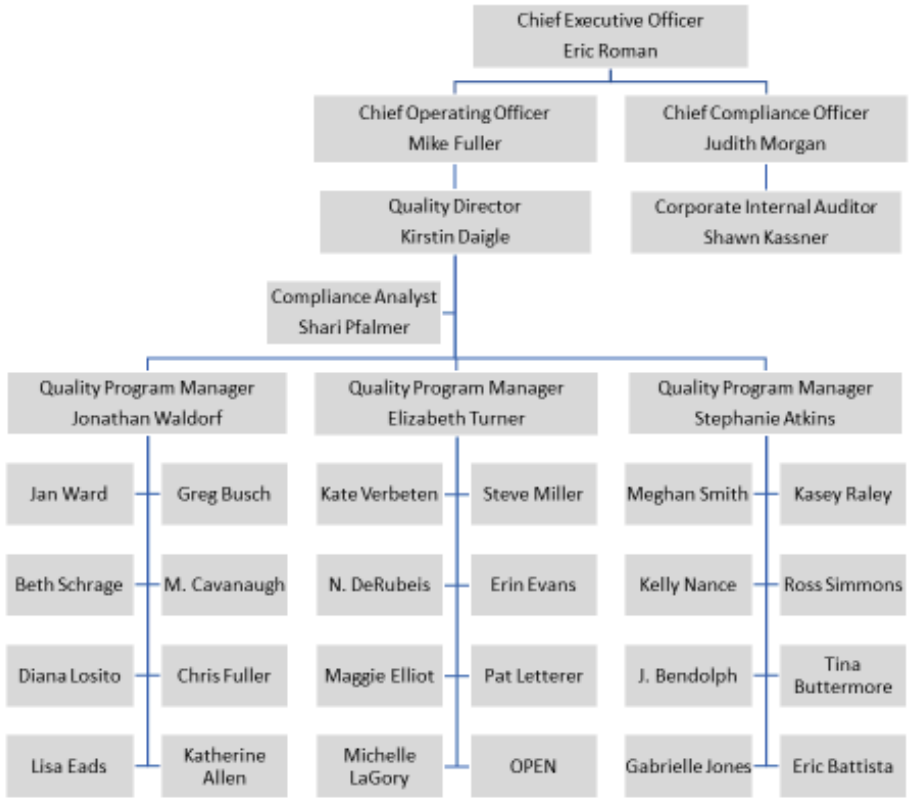
Disclaimer: The following organization chart shows the structure of the and the relationships and relative ranks of its parts and positions/jobs in place on the date this version of this manual was published. This information is subject to change; contact the Quality Manager for the most current version.



7.4.2 Quality Systems Management

Disclaimer: The following organization chart shows the structure of the and the relationships and relative ranks of its parts and positions/jobs in place on the date this version of this manual was published. This information is subject to change; contact the Quality Manager for the most current version.

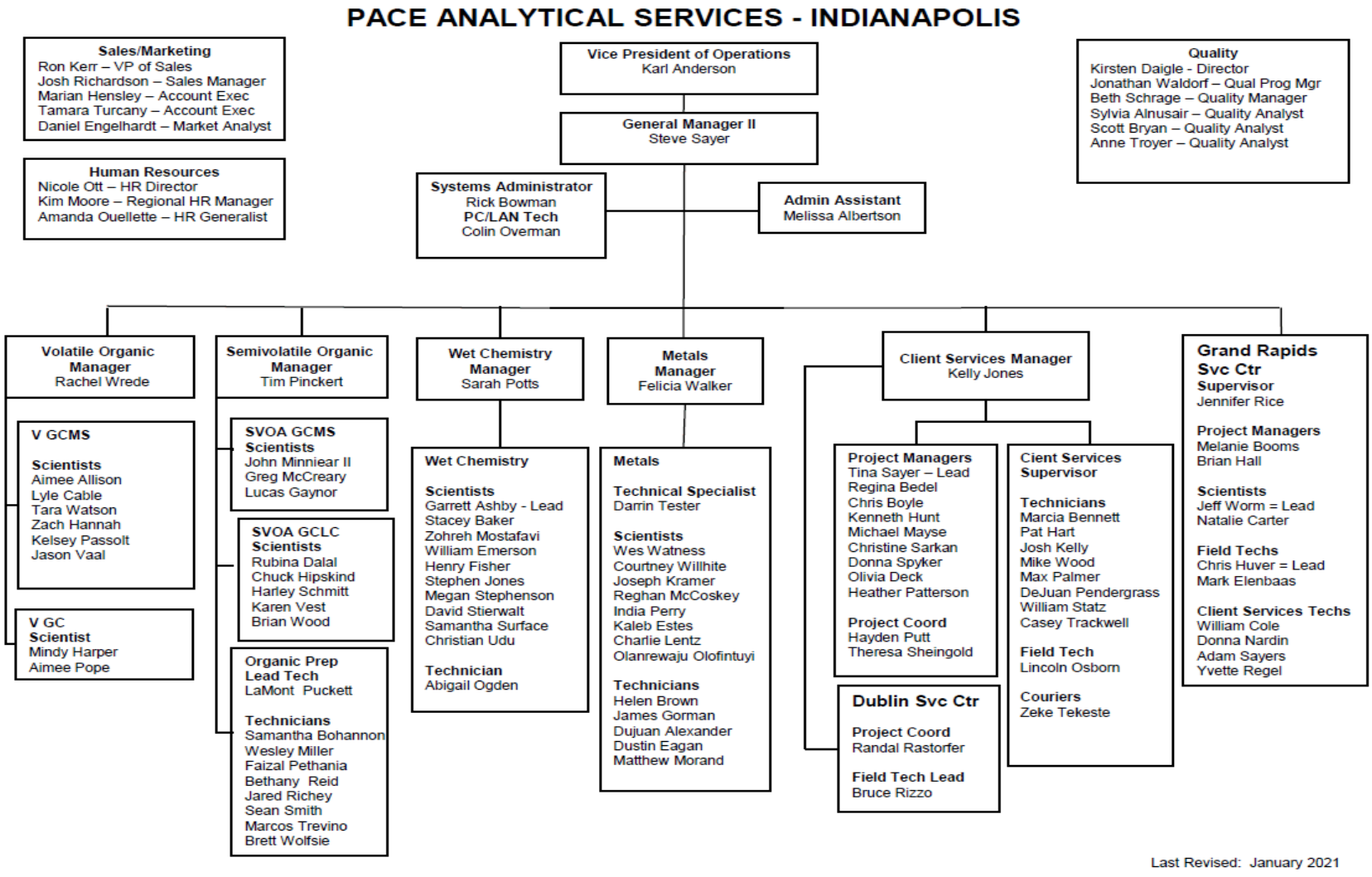
Quality Systems Management
Environmental Sciences Division



Local Quality Managers

Each QM has a direct reporting relationship to a Quality Program Manager and an indirect reporting relationship to the General Manager of each location for which the QM is assigned.

7.4.3 PAS-Indianapolis/Grand Rapids/Dublin – Organization Chart



7.5 Appendix E: Equipment Listing

The equipment listed represents equipment were held by each location on the effective date of this manual. This information is subject to change without notice. External parties should contact the location for the most current information.

7.5.1 PAS-Indianapolis and PAS-Grand Rapids

Pace Analytical - Indianapolis Equipment/Instrumentation List

DESCRIPTION	MANUFACTURER	MODEL NUMBER	SERIAL NUMBER	SERVICE DATE	DEPT.	INTERNAL ID	LOCATION OF MANUAL	CONDITION
GC/MS	Hewlett-Packard	6890/5973	DE00020244/US72010695	2003	Volatiles	50MV1A/1B	online	unknown
GC/MS	Agilent	6890/5973N	US00033565/US94260048	2007	Volatiles	50MV2A/2B	online	unknown
GC/MS	Hewlett-Packard	6890/5973	US00003821/US80221315	2003	Volatiles	50MV3A/3B	online	unknown
GC/MS	Hewlett-Packard	6850/5975	CN10651001/US65115015	2007	Volatiles	50MV4A/4B	online	unknown
GC/MS	Hewlett-Packard	6890/5973	US00034173/US94240025	2004	Volatiles	50MV5A/5B	online	unknown
GC/MS	Hewlett-Packard	6850/5975C	CN11004001/US10030002	2010	Volatiles	50MV6A/6B	online	new
GC/MS	Hewlett-Packard	6890/5973	US00001660/US94230695	2010	Volatiles	50MV8	online	used
GC/MS	Agilent	6890N/5975	CN10539014/US53931152	2010	Volatiles	50MVCA/CB	online	new
GC/MS	Agilent	7890/5975C	CN10932081/US92033575	2019	Volatiles	50MVDA/DB	online	used
GC/MS	Agilent	8890/5977	US1947A061/US1947R006	2020	Volatiles	50MVEA/EB	online	new
GC/MS	Agilent	8890/5977B	US2002A014/US2003R011	2020	Volatiles	50MVFA/FB	online	new
GC	Hewlett-Packard	5890/FID	2750A17190	2006	Volatiles	50GCV3	online	new
GC	Agilent	6890N/FID	CN10808003	2008	Volatiles	50GCV7	online	used
GC/MS	Agilent	6890/5973	US00023621/US82311331	2000	Semivolatiles	50MSS1	online	used
GC/MS	Agilent	7890A/5975C	CN10801009/US80118174	2008	Semivolatiles	50MSS2	online	used
GC/MS	Agilent	7890A/5975	CN10849069/US539931357	2008	Semivolatiles	50MSS3	online	used
GC/MS	Agilent	6890A/5973	US00033810/US94260036	2008	Semivolatiles	50MSS5	online	used
GC/MS	Agilent	7890A/5975C	CN12291041/US12293A15	2009	Semivolatiles	50MSS6	online	used
GC/MS	Agilent	6890+/5973N	US00041868/US10450450	2014	Semivolatiles	50MSS8	online	used
GC/MS	Agilent	6890N/5973N	US10235038/US30985131	2014	Semivolatiles	50MSS9	online	used
GC/MS	Hewlett-Packard	5890II/5971	3203A42102/3188A03665	2014	Semivolatiles	50MSSA	online	used
GC/MS	Agilent	7890B/5977B	CN11763064/US1720R001	2017	Semivolatiles	50MSSC	online	new
GC/MS	Agilent	7890B/5977B	CN11863111/US1814R038	2018	Semivolatiles	50MSSD	online	new
GC/MS	Agilent	6890N/5975B	CN10703067/US65125179	2020	Semivolatiles	50MSSE	online	used
GC/MS	Agilent	6890N/5975C	CN10705038/US10443605	2020	Semivolatiles	50MSSF	online	used
GC	Agilent	7890A/FID	CN10910087	2009	Semivolatiles	50GCS7	online	new
GC	Agilent	7890A/Dual ECD	CN10910086	2009	Semivolatiles	50GCS8	online	new
GC	Agilent	7890B/Dual ECD	CN13153029	2010	Semivolatiles	50GCSB	online	new
GC	Agilent	6890/Dual ECD	US00027541	2008	Semivolatiles	50GCSC	online	used
GC	Agilent	6890/Dual NPD	US00026618	2008	Semivolatiles	50GCSD	online	used
GC	Agilent	7890A/Dual ECD	CN10361135	2018	Semivolatiles	50GCSE	online	used
GC	Agilent	6890/FID	US00032363	2018	Semivolatiles	50GCSF	online	used
GC	Agilent	6890/Dual ECD	US00030639	2008	Semivolatiles	50GCSH	online	used
GC	Agilent	6890A/FID	US00041754	2015	Semivolatiles	50GCSK	online	used
GC	Hewlett-Packard	5890II/FID	2643A10312	2015	Semivolatiles	50GCSL	online	used
GC	Agilent	7890A/Dual ECD	CN12021120	2018	Semivolatiles	50GCSM	online	used
GC	Agilent	7890B/Dual ECD	CN18153134	2018	Semivolatiles	50GCSN	online	used
GC	Agilent	7890B/Dual ECD	CN14273129	2021	Semivolatiles	50GCSO	online	used
IC	Dionex	ICS-2100	12060379/15111281	2015	Semivolatiles	50IC03/04	online	used
IC	Dionex	AQUION	190240026/190240014	2019	Semivolatiles	50IC05/06	online	new
IC	Dionex	AQUION	190240032	2019	Semivolatiles	50IC07	online	new
Microwave	CEM	907501	MD 8633	2008	Extractions	OMW1	shared drive	new
Microwave	CEM	907501	MD 4506	2011	Extractions	OMW2	shared drive	new
SPE	Horizon Spe Dex	3100	15-0131/15-0134	2008	Extractions	50GCS9	online	new
ICP	Thermo Scientific	ICAP 6500 Duo	ICP20072111	2008	Metals	50ICP2	Metals Dept.	new
ICP	Thermo Scientific	ICAP 6500 Duo	ICP20104902	2011	Metals	50ICP3	Metals Dept.	new
ICP	Thermo Scientific	ICAP 6500 Duo	ICP20104903	2011	Metals	50ICP4	Metals Dept.	used
ICP/MS	Agilent	7700x	JP10420651	2012	Metals	50ICM2	Metals Dept.	used
ICP/MS	Agilent	7800x	SG18123088	2018	Metals	50ICM3	Metals Dept.	new
ICP/MS	Agilent	7900	JP17151821	2020	Metals	50ICM4	Metals Dept.	used
CVAA	CETAC	M-6100	101001QT6	2010	Metals	50HG03	Metals Dept.	used
CVAA	Teledyne Leeman	M-7600	US16270008	2016	Metals	50HG04	Metals Dept.	new
CVAFS	CETAC	M-8000	91101	2015	Metals	50LHG1	Metals Dept.	new
CVAFS	CETAC	M-8000	US17244023	2018	Metals	50LHG2	Metals Dept.	new
Flow Analyzer	Lachat	Quick Chem 8500S2	120900001467	2015	Wet Chem	50WTA6	Wet Chem Dept.	used
Flow Analyzer	Lachat	Quick Chem 8500S2	101000001269	2015	Wet Chem	50WTA8	Wet Chem Dept.	used
Flow Analyzer	OIA	FS3100	A507831948	2018	Wet Chem	50WA01	unknown	used

Pace Analytical - Indianapolis Equipment/Instrumentation List

DESCRIPTION	MANUFACTURER	MODEL NUMBER	SERIAL NUMBER	SERVICE DATE	DEPT.	INTERNAL ID	LOCATION OF MANUAL	CONDITION
Auto Analyzer	Westco	SmartChem Discrete	W0609093	2015	Wet Chem	50WTA9	shared drive	used
Autotitrator	Metrohm	855	1855001004265	2014	Wet Chem	50WETJ	Wet Chem Dept.	new
Autotitrator	Metrohm	855	1855001004952	2020	Wet Chem	50WETX	Wet Chem Dept.	used
Automated Flash Point	Tanaka	APM-8	33329	2010	Wet Chem	50WETK	shared drive	new
Rapid Flash Tester	Koehler	K16500	B112017002	2018	Wet Chem	50WT01	shared drive	new
Spectrophotometer	Thermo	AquaMatePlus	HEDP109002	2015	Wet Chem	50WTAI	Wet Chem Dept.	used
Spectrophotometer	Hach	DR 3900	1887101	2019	Wet Chem	50WT12	unknown	new
Turbidimeter	Hach	2100P	920500001152	2006	Wet Chem	50WET9	unknown	new
pH/ISE Meter	Fisher Accumet	AB15	610062	2015	Wet Chem	50WETV	unknown	new
pH/ISE Meter	Thermo Orion Star	A214	X13986	2013	Wet Chem	50WETL	shared drive	new
pH/ISE Meter	Fisher Accumet	XL250	XL94106882	2019	Wet Chem	50WET4	unknown	new
Conductivity Meter	Oakton	CON 700	2406973	2016	Wet Chem	50WETW	shared drive	new
DO/pH Meter	Hach	HQ440d	140400102935	2014	Wet Chem	50WETM	unknown	new
BOD Analyzer	Thermo	AutoEz	A0122	2015	Wet Chem	50WETP	Wet Chem Dept.	used
TOC Analyzer	Shimadzu	TOC-Vwp	H51704300025	2008	Wet Chem	50WTAB	Wet Chem Dept.	used
TOC Analyzer	Shimadzu	TOC-Vwp	H5172500443NK	2020	Wet Chem	50WTAK	Wet Chem Dept.	new
Datalogger	T&D	TR-71wf	various	2019	Laboratory	N/A	shared drive	new

Pace Analytical - Grand Rapids Equipment/Instrumentation List

DESCRIPTION	MANUFACTURER	MODEL NUMBER	SERIAL NUMBER	SERVICE DATE	DEPT.	INTERNAL ID	LOCATION OF MANUAL	CONDITION
pH/ISE Meter	Accumet	AB150	AB92342016	2017	Wet Chem	GRWT02	online	used
pH/ISE Meter	Accumet	AB150	AB92347798	2017	Wet Chem	GRWT03	online	used
DO/pH Meter	Hach	HQ40d	171200005154	2017	Wet Chem	GRWT06	online	used
FIA Analyzer	OIA	FS-3100	821831887/826833549	2017	Wet Chem	GRWA01	online	used
Spectrophotometer	Shimadzu	UV-1800	A11454630182	2017	Wet Chem	GRWA02	online	used
Turbidimeter	Hach	2100N	07060C022389	2017	Wet Chem	GRWT01	online	used

Appendix D: Chain of Custody

CHAIN-OF-CUSTODY / Analytical Request Document

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.

Pace Analytical™ www.pacelabs.com

Page: **of**

Section A **Required** Client Information:	**Section B** **Required** Project Information:	**Section C** Invoice Information:
Company:	Report To:	Attention:
Address:	Copy To:	Company Name:
		Address:
Email To:	Purchase Order No.:	Pace Quote Reference:
Phone: Fax:	Project Name:	Pace Project Manager:
Requested Due Date/TAT:	Project Number:	Pace Profile #:

REGULATORY AGENCY

☐ NPDES ☐ GROUND WATER ☐ DRINKING WATER

☐ UST ☐ RCRA ☐ OTHER _____

Site Location

STATE: _____

Requested Analysis Filtered (Y/N)

Section D **Required** Client Information

SAMPLE ID
(A-Z, 0-9 / ,-)
Sample IDs MUST BE UNIQUE

Valid Matrix Codes

MATRIX	CODE
DRINKING WATER	DW
WATER	WT
WASTE WATER	WW
PRODUCT	P
SOIL/SOLID	SL
OIL	OL
WIPE	WP
AIR	AR
OTHER	OT
TISSUE	TS

ITEM #	Section D Required Client Information	MATRIX CODE (see valid codes to left)	SAMPLE TYPE (G=GRAB C=COMP)	COLLECTED: COMPOSITE START DATE	COLLECTED: COMPOSITE START TIME	COLLECTED: COMPOSITE END/GRAB DATE	COLLECTED: COMPOSITE END/GRAB TIME	SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives: Unpreserved	Preservatives: H_2SO_4	Preservatives: HNO_3	Preservatives: HCl	Preservatives: NaOH	Preservatives: $Na_2S_2O_3$	Preservatives: Methanol	Preservatives: Other	Analysis Test Y/N	Residual Chlorine (Y/N)	Pace Project No./ Lab I.D.
1																				
2																				
3																				
4																				
5																				
6																				
7																				
8																				
9																				
10																				
11																				
12																				

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS

SAMPLER NAME AND SIGNATURE

PRINT Name of SAMPLER:

SIGNATURE of SAMPLER: **DATE Signed (MM/DD/YY):**

Temp in °C	Received on Ice (Y/N)	Custody Sealed Cooler (Y/N)	Samples Intact (Y/N)

*Important Note: By signing this form you are accepting Pace's NET 30 day payment terms and agreeing to late charges of 1.5% per month for any invoices not paid within 30 days.