

Microbiology Expert Committee (MEC) Meeting Summary

April 20, 2026

I Welcome and Roll Call:

Cody Danielson called the meeting to order at 12:01pm Eastern on April 20, 2026, by teleconference. Attendance is recorded in Attachment A – there were 10 members present. Associates present: Lindsey Arnaud, Tiffany Carey, Kai Chung, Hannah Herrick, Rachel Hook, David Lo, Alma McCammond, Elisa Snyder, and Joshua Snyder. Paul Junio attended as Program Administrator.

II Approval of Agenda

Cody asked for any comments on the agenda. Following the addition of the approval of the April 14 minutes, the agenda was approved by consent.

III Approval of April 14 Meeting Minutes

Following a motion by Robin and a second by Liz, the meeting minutes from April 14 were approved by all in attendance.

IV Discussion on Section 8.2.5.2 (now 7.2.5.2) regarding types of laboratory equipment. Cody summarized the email traffic on this item and asked for input. Following discussion, the following decisions were made:

Line 107 – persuasive – add ‘of appropriate accuracy, range, graduation or resolution’ to aid in clarity

Line 108 – non-persuasive – the committee is choosing to be redundant by pointing to Module 2 here,

Line 109 – persuasive – document changed to demonstrate, but non-persuasive in that this Module deals with analysis and not sample disposal.

Line 110 – persuasive – the comment contained an embedded document that had its comments addressed due to other comments that were submitted. Changes were made in the draft Module, including splitting the 2nd point into 2 different items. Robin commented that the entire section ought to go away, but this doesn’t add any requirement, so let’s just keep it in. Also, regarding section 8.2.5.2 b) ii 1 – the section on ovens could be akin to a COA and we accept what the vendor says. If it matters what the oven does for us, we should be able to verify it in a different manner, such as whether or not the media performed as expected.

Line 111, 112 – persuasive – this was a global change already made

Line 113 – persuasive – other changes have been made to this section

Line 114 – persuasive – added in ‘such as temperature sensitive tape’

Changes to this section resulted in the following:

7.2.5.2 Laboratory Equipment

a) Temperature Measuring Devices - The laboratory must use temperature measuring devices such as liquid-in-glass thermometers, thermocouples, or platinum-resistance thermometers to verify equipment temperatures. The temperature measuring devices must be of appropriate accuracy, range, graduation and/or resolution to meet specification(s) in the method. Verification must be performed as per TNI Module 2, Section 6.4.6.1.

b) Sterilization Equipment

i. Autoclaves

1. The laboratory must evaluate the performance of each autoclave initially by establishing its functional properties and performance, for example, heat distribution characteristics with respect to typical uses. Autoclaves must meet specified temperature tolerances. Pressure cookers must not be used for sterilization of growth media.

2. The laboratory must demonstrate proper sterilization temperature by use of a continuous temperature recording device or by use of a maximum registering thermometer with every cycle.

3. Monthly, when the autoclave is in use, the laboratory must demonstrate effective sterilization with use of appropriate biological indicators. The incubation time and temperature of the biological indicators must follow the manufacturer instructions.

4. The laboratory must use an appropriate indicator, such as temperature-sensitive tape, with the contents of each autoclave run to indicate that the autoclave contents have been processed.

3. The laboratory must maintain records of autoclave operations for every cycle. Records must include: date, contents, maximum temperature reached, pressure, sterilization cycle time elapsed, total run time (may be recorded as time in and time out), and analyst's initials.

4. Autoclave maintenance, internally or by service contract, must be performed annually, and must include a pressure check and verification of temperature device. Records of the maintenance must be maintained. If the temperature is verified to be acceptable and it has been determined and recorded that the autoclave has no leaks, it is acceptable to state the pressure has been verified.

5. When used to sterilize media, the laboratory must verify the autoclave timing device quarterly and record the actual sterilization cycle time elapsed. When discrepancies are identified, the laboratory must implement and record appropriate corrective actions.

ii. Ovens

1. Monthly, when the oven is used to sterilize, the laboratory must demonstrate effective sterilization with use of appropriate biological indicators. The incubation time and temperature of the biological indicators must follow the manufacturer instructions.

2. The laboratory must use an appropriate indicator, such as temperature sensitive tape, with the contents of each oven run to indicate that the contents have been processed.

3. Ovens must be preheated to temperature of use prior to loading. The laboratory must maintain records for each cycle that include date, sterilization cycle time elapsed, temperature, contents, and analyst's initials.

c) Volumetric Equipment - The laboratory must verify equipment used for measuring volume. Class A glassware are exempt from any verification requirements. Verification must be either volumetric, as compared to Class A, or gravimetric. When neither of these methods are appropriate, it is the responsibility of the laboratory to demonstrate that other approaches to verification are at least equivalent. In addition to the requirements in Module 2, the below requirements must be met:

- i. Reusable volumetric equipment, such as filter funnels, bottles, and non-Class A glassware must be verified prior to first use.
- ii. Disposable volumetric equipment, such as filter funnels, sample bottles, sample analysis vessels, and disposable pipettes must be checked once per lot prior to first use.
- iii. Verification of volume must be considered acceptable if the accuracy is within 2.5% of expected volume.

d) UV Instruments - The laboratory must evaluate UV instruments used for sanitization quarterly for effectiveness with an appropriate UV light meter, by plate count, agar spread plates, or other methods providing equivalent results, such as UV-cide strips. Replace bulbs if output is less than 70% of original for light tests or if count reduction is less than 99% for a plate containing 200 to 300 organisms.

e) Incubators, Water Baths

- i. The laboratory must establish the uniformity of temperature distribution conditions in incubators and water baths prior to first use after installation or service to check for areas of temperature nonconformance. When such areas are identified, the laboratory must implement and record appropriate corrective actions.
- ii. During periods when samples are under test, the laboratory must have a system in place to monitor and record the temperature of incubators and water baths twice daily, at least four hours apart. "Under test" is defined as the time period that the sample is in the incubation phase of the method. Data loggers, continuous temperature monitoring devices, or other temperature monitoring equipment can be used as long as they can be calibrated in accordance with TNI Module 2, Section 6.4.6.1.

NOTE: There is no intent to take the temperature of incubation units during periods when there are no samples under test.

f) Labware (Glassware and Plasticware)

- i. The laboratory shall have a demonstrated procedure for washing labware, if applicable. Detergents designed for laboratory use shall be used. .
- ii. Glassware must be made of borosilicate or other non-corrosive material, free of chips and cracks, and must have readable measurement marks.
- iii. Labware that is washed and reused must be tested for possible presence of residues that may inhibit or promote growth of microorganisms by performing the Inhibitory Residue Test initially and

each time the laboratory changes the detergent formulation or washing procedures.

iv. Washed labware must be tested each day of washing, for possible acid or alkaline residue by testing a piece of labware with a suitable pH indicator such as bromothymol blue.

Having reached the end of the available time, Cody will send out a poll looking for a possible additional meeting time. *[EDITOR'S NOTE: the added meeting was scheduled for Monday, May 4 at 12PM Eastern.]* Cody will send today's work products out and will summarize the Response to Comment document. The meeting adjourned at 1:22 PM Eastern.

NOTE: Katie Strothman's organization has changed from Sanders Lab to Eurofins due to a purchase. This change results in no issues for committee makeup.

Attachment A - Participants**Microbiology Expert Committee (MEC)**

Name	Organization	Stakeholder	Email	Term Expires	Present
Nigel Allison (Vice Chair)	Los Angeles County Sanitation Districts	Lab	nallison@lacsds.org	2028*	Yes
Robin Cook	City of Daytona Beach	Lab	cookr@codb.us	2027	Yes
Cody Danielson (Chair)		Other	cody.danielson129@gmail.com	2028	Yes
Maria Fayard	ORELAP	AB	maria.j.fayard@oha.oregon.gov	2029	Yes
Maria Friedman	California ELAP	AB	qamfriedman@gmail.com	2028	No
Matt Graves	ERA	Other	matt_graves@waters.com	2028	Yes
Silky Labie	ELCAT	Other	elcatllc@centurylink.net	2029	Yes
Liz Lesold	NYSDOH ELAP	AB	elizabeth.lesold@health.ny.gov	2027*	Yes
Brian Mercer	Brian Mercer	Lab	bmercer@plantation.org	2027*	No
Patsy Root	IDEXX Water	Other	patsy-root@idexx.com	2027*	No
Robert Royce	New Jersey DEP	AB	Robert.Royce@dep.nj.gov	2028	Yes
Tina Shidel	Pace Analytical Services - Ormond Beach	Lab	tina.buttermore@pacelabs.com	2027*	Yes
Katie Strothman	Eurofins	Lab	katie.strothman@et.eurofinsus.com	2029*	Yes
Elizabeth Turner	Eurofins	Lab	elizabeth.turner@et.eurofinsus.com	2029*	No
Paul Junio	The NELAC Institute	NA	paul.junio@nelac-institute.org		Yes

* - eligible to serve another term