

**Summary of the NELAP Accreditation Council Meeting
Monday, December 15, 2025 12:30 pm Eastern**

1. Welcome and Introductions

Kristin Brown, Chair, welcomed everyone to the meeting. Attendance is recorded in Attachment 1 – a quorum was met. The agenda is included in Attachment 2. The agenda was approved by unanimous consent.

Minutes from the 12/1/25 meeting will be distributed by email and approved electronically.

2. Chemistry – Module 4

Ilona set-up a folder in Dropbox to collect everyone's comments on the Standard and then compiled all the comments into a table for the Committee to review. The Committee reviewed each comment to determine whether it was a comment they wanted to forward to the Chemistry Expert Committee regarding Volume 1 Module 4.

The Committee was not able to review all comments so planned to finish the review by email. Ilona agreed to prepare a final table of comments after the review is complete and then prepare a DRAFT email to Michelle Wade and Bob Wyeth with the attached table for a final vote on the comments. The final response will be included in an attachment to these minutes (Attachment 3).

(Addition: Email comments were collected and tabulated (Attachment 3). An email vote was done:

A motion was made by Cathy by email on January 9, 2026, for the AC to proceed with submitting these comments, on behalf of the NELAP AC, to the Chemistry Expert Committee for consideration for the Draft Standard V1M4. The motion was seconded by email by Millie on January 9, 2026. The following votes were received by email on January 9, 2026: For: Cathy, Amy, Steve Jetter, Carissa, Jody, Brian Lamarsh, Millie, Annmarie, Windsor, and Taryn. Against: None Abstain: Carl Kircher. The vote passed and the comments were distributed to Michelle Wade and Bob Wyeth by email on January 10, 2026.)

3. Equivalency of TNI Assessments

Chris reported that Christine is still planning the meeting with EPA Region 9. California did get an extension on their audit response.

4. Roundtable Discussions

Will be discussed next month.

5. New Business

None.

6. Next Meeting

Kristin adjourned the meeting at 2PM Eastern.

The next NELAP AC meeting is scheduled for January 12, 2026, at 1 PM Eastern in Boston, MA. (*Addition: The next teleconference was scheduled for January 20, 2026, at 1:30pm Eastern.*)

Attachment 1 - Roster

STATE	REPRESENTATIVE	PRESENT
FL	Carl Kircher T: 904-791-1574 E: carl.kircher@flhealth.gov	No
	Alternate: Paul Legge (904)791-1582 E: Paul.Legge@flhealth.gov	No
IL	Millie Rose T: 217-557-0220 E: mildred.rose@illinois.gov	Yes
KS	Carissa Robertson Carissa.Robertson@ks.gov (785) 291-3162	Yes
	Alternate: Paul Harrison paul.harrison@ks.gov (785) 296-1656	No
	For information purposes: Amy Suggitt Amy.Suggitt@ks.gov	No
	For information purposes: Matthew Jones Matthew.jones@ks.gov Timothy Canfield. No	No
LA DEQ	Tramecha Rankins E: tramecha.rankins@la.gov 225-219-3247	Yes (First 15 minutes of call.)
	Paul Bergeron E: paul.bergeron@la.gov	No
MN	Windsor Molnar Windsor.Molnar@state.mn.us 651-201-3702	Yes
	Alternate: Lynn Boysen E: lynn.boysen@state.mn.us	No

NH	Brian Lamarsh (603) 271-2998 F: (603) 271-5171 Brian.M.Lamarsh@des.nh.gov	Yes
NJ	Michele Potter T: (609) 984-3870 F: (609) 777-1774 E: michele.potter@dep.nj.gov	No
	Alternate : Rachel Ellis E: rachel.ellis@dep.nj.gov	No
NY	Amy Steuerwald 518-473-0748 E: amy.steuerwald@health.ny.gov	Yes
	Alternate: Gretchen Welfinger Gretchen.Welfinger@health.ny.gov	Yes
	For Information only: Derek Symula derek.symula@health.ny.gov	No
OK	Taryn Hurley Taryn.hurley@deq.ok.gov (405) 702-1006	Yes
	Alternate: Ryan Lerch Ryan.Lerch@deq.ok.gov (405) 702-1020	No
OR	Steve Jetter T: 503-505-2672 E: steven.jetter@oha.oregon.gov	Yes
	Alternate: Lizbeth Garcia 971 865 0443 E: Lizbeth.garcia@dhsoha.state.or.us	No
	Included for information purposes: Ryan Pangelinan E: Ryan.pangelinan@dhsoha.state.or.us	No
PA	Annmarie Beach E: anbeach@pa.gov T: 717-346-8212	Yes
TX	Jody Koehler (512) 239-1990 Jody.Koehler@tceq.texas.gov	Yes
	Steve Gibson (512) 239-1316 Steve.Gibson@tceq.texas.gov	No
UT	Kristin Brown T: (801) 965-2540 F: (801) 965-2544 E: kristinbrown@utah.gov	Yes

VA	Cathy Westerman T: 804-648-4480 ext.391 E: cathy.westerman@dgs.virginia.gov	Yes
	Alternate: Shane Wyatt shane.wyatt@dgs.virginia.gov	No
NELAP AC PA and EC	Ilona Taunton Ilona.taunton@nelac-institute.org	Yes
EPA Liaison	Michella Karapondo Karapondo.michella@epa.gov	Yes
CA	Christine Sotelo Christine.Sotelo@waterboards.ca.gov	No
CA	Christopher Hand Christopher.Hand@Waterboards.ca.gov	Yes
AR	Brie Lusk brie.lusk@arkansas.gov	No
NV	Jasmine Curiel jcuriel@ndep.nv.gov	No
WV	Justin Carpenter justin.d.carpenter@wv.gov	No

Attachment 2 – Agenda for Meeting

NELAP AC MEETING – December 15, 2025

12:30PM Eastern

See Link Below

1. Roll Call
2. Review and Approval of the Agenda
3. Approval of minutes from 12/1/25 Meeting will be by email.
4. Comments on posted Module 4 – Chemistry – Due December 11, 2025
 - Review table of comments compiled from reviews in Dropbox (attached)
 - Additional comments?
 - Finalize
5. Equivalency of TNI Assessments
 - Update?
6. Roundtable Discussions
7. New Business
8. Adjourn

Attachment 3 – Summary of Comments on Volume 1 Module 4

To:
Michelle Wade (Chair)
Robert Wyeth (Program Administrator)

Please accept the comments attached that were prepared and voted on by the NELAP AC. Please let me know if you need any additional information.

I am still waiting for a few more votes before I can send the NELAP EC (LASEC) comments. I believe that they will be approved, but it may not happen until Monday.

Thanks,
Ilona

NELAP AC Comments on DRAFT Standard Volume 1 Module 4 (12-15-25)
Approved 1-9-26

Comment Number	Section/Clause	Comment
1	1.0	Final sentence ["Adherence to ..."] is not an accurate statement and should be omitted.
2	1.0, pg. 1	The introduction states that this is applicable exclusively to chemical measurements. Suggested amendment: "This document contains essential quality control (QC) requirements for environmental testing activities involving chemical and physical measurements. ..."
3	3.1	Definitions for LOQ and LOD should be 'parallel', ie, both start with the same wording (i.e., either "the minimum levels, concentrations ..." OR "the minimum result") and then end with the phrase that distinguishes one term from the other
4	3.1	LOD is defined but not used in the standard --- DL is used. Correct the definition or the standard.
5	3.1	Matrix Spike's definition's middle sentence is a requirement of a matrix spike that needs to be in the body of the standard itself and not within the definition.
6	3.1	Matrix Spike's final sentence has an extra word; remove "has" or otherwise revise.
7	3.1	Measurement System's definition would be better, grammatically, if "and which" is replaced with "that". (When a phrase, e.g., "as implemented at a particular laboratory", is set apart by commas, the phrase should be able to removed from the sentence and the sentence stand alone without it.)
8	3.1, pg. 1	The Matrix Spike definition seems to have a typo: "...as the original sample <i>though</i> all analytical..." Should this be "through"?
9	3.1, pg. 1	The last sentence of the Matrix Spike definition should have the word "has" removed, i.e., "The matrix spike is used to assess the effect of the sample's matrix on a method's recovery efficiency."
10	3.1, pg. 1	It seems useful for the LOD definition to include specification that it is synonymous with "Detection Limit" due to the fact that section 6.0 (pg. 3) uses this term.
11	3.1, pg. 1-2	The definitions should be in alphabetical order for easier reference use.

Comment Number	Section/Clause	Comment
12	5.0	The paragraph under Section 5.0 may be intended to communicate that a laboratory applying for a particular accreditation need not repeat studies or data collected to verify/validate a method that is more than 1 year old. This reader "assumes" this is the intent. However, it can also be read to mean that other approaches used by the laboratory in its own validation/verification, if more than 1 year ago, may be used to satisfy 5.1 and 5.2. This is not acceptable since any laboratory applying for TNI accreditation needs to have MDLs, DOCs, and PTs as specified in 5.1. Since the MDL, DOC, and PT sections all address the processes that happen initially and processes that happen after the initial period along with associated timelines, those requirements would be confused by the statement under 5.0. Suggest removing the statement under 5.0 completely and letting those requirements stand as written in other places in the standard. Review individual sections, e.g., DOCs, to determine if a specific note about having done the method for >1year before applying for accreditation needs to be included within the specific section.
13	5.1 a), pg. 2	This section appears to require LOD determinations across the board as a minimum requirement. Suggested amendment: "... must include an initial determination of the LOD unless not applicable to methodology (Section 6.1.1),..."
14	5.2 a), pg. 2	This section refers to Section 5.1.1, but there is not a section labeled as 5.1.1. Either the sentence under section 5.1 should be numbered as 5.1.1, or section 5.2 a) should be corrected.
15	5.2, pg. 2	The circumstance of modifications and enhancements to reference methods does not appear to be addressed in the new language. Initial validation should also apply to modified methods. We suggest including "or otherwise modified." as similarly found in ISO language from V1M2.
16	5.2.b pg. 2	Language should be updated to include identifying such modifications when reference methods are modified or enhanced – not just for being used outside of the intended scope. Suggested amendment: "...such as the addition of a new target analyte or a new quality system matrix, or is otherwise modified, the scope change(s) and/or modification(s) must be clearly identified."
17	5.3.a	It appears but is not sufficiently clear that Section 5.3 applies only under the condition of 5.3.a. If this is the case, suggest putting the text of 5.3.a under 5.3 then follow with three requirements, a, b, and c.
18	5.3.b	Low, middle, and high segments of the calibration are not defined which could make this open to broad interpretation. Suggestion: "Precision and bias must be evaluated at the LOQ, 1/2 the highest concentration level, and at the highest concentration level."
19	5.3.b, pg. 3	Unless the TNI Style Guide says differently, there should be an additional comma in the list in the last sentence, i.e., "... the low, middle, and upper segments..."
20	5.3.d	Add "established by applicable regulation" to list. There may be cases where non-reference methods are being used for state or local regulations. Suggestion: "with criteria established by the client or applicable regulation, criteria given in the reference method..."
21	5.3.d, pg. 3	Specification should be made that, if multiple of these options are available, the most stringent is to be used. It is phrased in a manner that a laboratory could pick its own criterion even if it exceeds a maximum limit of a reference method. Suggestion: "The laboratory must compare the results of the precision and bias measurements with the most stringent criteria established by the client..."

Comment Number	Section/Clause	Comment
22	5.4, pg. 3	This section does not account for the circumstance of modified reference methods. Suggestion: add "or otherwise modified" after "intended scope".
23	5.5	This complete section can be omitted as it re-states information otherwise stated and otherwise required in the standard. Adds no value or additional requirements and adds unnecessary complexity.
24	5.5 a) i., pg. 3	This needs a closing parenthetical.
25	5.5 a), pg. 3	The list in the first sentence should have an additional comma, i.e., "...reference, non-reference, and laboratory developed methods."
26	6.0	Either define Detection Limit in section 3.1 or re-name DL to LOD in this section.
27	6.0	References in final phrase refer to sections that do not exist.
28	6.0, pg. 4	The last sentence references requirements in sections 6.4.1 and 6.4.2. This appears to need correction to sections 6.1 and 6.2, respectively.
29	6.1.1	Initial determination of DL: Ref to 40 CFR 136 App B by publication date is too specific. Another process may be required by another program or customer need or may not be effective for the matrix, which is true for some air methods [because of spiking capacity]. Also, the next revision of 40 CFR 136 App B [if/when that comes] almost certainly won't align with the adoption of the next TNI standard, so a newer 40 CFR 136 method might be required of laboratories in advance of a TNI update. This section needs some language to accommodate these things, such as 'unless otherwise specified by regulation or data user' as wiggle room around this specific citation. Phrasing from 6.2 may also be needed in this section: "... except for any component or property for which spiking solutions are not available" which is also similar language to phrasing within the EPA method
30	6.1.1	This language from 6.1.2 should be also considered for 6.1.1: "...except for any component or property for which spiking solutions are not available..." --- and/or may also need to direct the lab to do an MDL based only on MDLb in such instances.
31	6.1.1	Ongoing verification of DL: This paragraph needs phrasing at the end of the first sentence "... or if required by regulation or the data user." CWA testing DOES require ongoing verification of the DL/MDL.
32	6.1.2, pg. 4	40 CFR 136 Appendix B does not give the allowance described here of not performing ongoing verification. For enhanced clarity, we suggest editing the first sentence to, "Ongoing verification of the DL is only required when specified by test method, applicable regulation, or when the laboratory reports results below their limit of quantitation (LOQ)."
33	6.1.2.c , pg. 4	In the last sentence, there is a typo of "LOQe".
34	6.2.1, pg 4	This section appears exclusively applicable in the case of establishing a new LOQ lower than an existing LOQ. This should be applicable to initial establishment as well. Recommended update: "When establishing an initial LOQ or a new LOQ that is below..."
35	6.2.1.a	Suggested addition in red Page 5, Section 6.2.1 a) A minimum of seven (7) initial verification samples at or below the LOQ concentration must be processed through all steps of the method and laboratory Standard Operating Procedure (SOP). The initial verification samples must be prepared in at least three batches on three separate calendar dates and analyzed on three separate calendar dates. (could not see red)
36	6.2.1.d	Section d has a colon indicating a list follows. The list needs to fall under 'd', not start in 'e'

Comment Number	Section/Clause	Comment
37	6.2.1.e, pg 5	This should be item i. under d) to be applicable as a criterion for LOQ verification, and the current i. listing contingencies for if this is not met should all be the same line item.
38	6.2.1.f, pg. 5	References section 6.5, which does not appear to exist. This likely needs to be corrected to section 6.3.
39	6.2.2.a	Refers to 6.5.d, which does not exist in the document.
40	6.2.2.a	In second paragraph, fix grammar in first sentence.
41	6.2.2.a	Suggested addition in red: Page 6, Section 6.2.2 a) If a continuing LOQ verification test does not meet this requirement, an action must be taken and a record of a technically valid reason for the action documented..... (could not see red)
42	6.2.2.a, pg. 6	The last sentence references section 6.5 d). This appears to need correction to section 6.2 d).
43	6.2.2.a, pg. 6	In the first sentence of the second paragraph, we suggest a rephrasing for clarity: "If a continuing LOQ verification test does not meet this requirement, an action must be taken to address the issue, and a technically valid reason for the action must be recorded."
44	6.2.2.b, pg. 6	Recommend rephrasing to, "Action for failing LOQ verification must include at least one of the following." Additionally, it could enhance clarity if this section were put under section 6.2.2 a) because this section is directly providing requirements based on the outcome of section 6.2.2 a).
45	6.2.a	Is 6.2.a meant to introduce 6.2.1 a through f? If so, it should refer to that section to indicate that all of those requirements apply to 6.2.a. It's very confusing to have a list of requirements under "LOD" then more requirements under "initial LOD" and more requirements under "ongoing LOD"; even more confusing when some of the requirements under the 'main' section only apply to one of the other sections. Suggest reorganizing for clarity.
46	6.2.f	Refers to 6.5, which does not exist in the document.
47	6.3 p. 6	This (in general) is already required by 40 CFR 136 Appendix B and verbiage for 6.1.2 for DL. Requiring this for LOQ when a DL is not required seems reasonable; however, it seems excessive to require this tabulation of 2 years of results for both DL and LOQ when both are established. Recommended update: have this section specify that this is only required for the LOQ when a DL is not required.
48	6.3, pg. 6	"All data representative of current operations must be used," may cause some confusion across laboratories and between ABs and labs. We suggest adjusting verbiage to, "All data representative of the current analytical operations must be used," and adding a note below to clarify what representative means, i.e., "NOTE: Representative data includes data that was collected under the same general operational and analytical conditions that are present during routine analysis."
49	6.3, pg. 6	The heading suggests this is only applicable to LOQ, but a) mentions DL. This should be clarified. Recommendation: "Documentation for ongoing verification of the DL and LOQ"
50	7.1 c), pg. 7	The word "initial" seems to have been mistakenly capitalized.
51	7.2	"Instrument Type" The word "type" is vague and should be defined. What does "Instument type" mean?

Comment Number	Section/Clause	Comment
52	7.2.1.c, pg. 7	The term "class of analyte" is unclear and needs further definition or clarification.
53	7.2.2	7.2.2 seems to be contradictory: A says to spike 1-4 times the LOQ and b says to run 4 LCSs. What if the LCS isn't at a concentration of 1-4 times the LOQ?
54	7.2.2, pg. 7	The second sentence should have a comma after, "If this is not applicable" and after "accuracy."
55	7.2.2.a and b	Clarify whether the LCS must be at concentration of 1-4x LOQ. It says to spike at 1-4x LOQ in section a, but then says to use LCS in section B with LCS acceptance criteria, which could be interpreted as using LCS concentrations. Or consider removing the 1-4 x LOQ requirement and using LCS concentrations Suggestion: 7.2.2.b - At least four (4) independently prepared LCS with concentrations one (1) to four (4) times the LOQ must be analyzed....
56	7.2.2.d	Update reference from (b) to (c)
57	7.2.2.d, pg. 8	This references b), but it seems this should reference c) instead for the results being compared to acceptance criteria.
58	7.2.2.e i., pg. 8	This should have a comma after "above" and a period at the end of the sentence.
59	7.2.2.e, pg 8	For brevity, this could be rewritten as, "When one or more of the tested analytes fail at least one (1) of the acceptance criteria, locate and correct the source of the problem and, beginning with a) above, repeat the test for at least the analytes of interest that failed to meet criteria."
60	7.2.2.f, pg. 8	This could be interpreted to require the laboratory to establish IDOC after accreditation is granted to add an analyte to an accredited method. This should be done when they are seeking accreditation and should be in place prior to PT performance. Suggested update: "When a laboratory seeks to add an analyte not currently found on their list of accredited analytes for an existing accredited method, ..."
61	7.3.1	Sentence starting with "The analyst(s)" needs a period at the end.
62	7.3.1	An analyst must continue to demonstrate ongoing competence through completion of an ongoing DOC to continue to generate reportable data for said method. Does not require each analyst performing the method, only "an analyst", to continue to generate reportable data for said method. Lab could have 10 analysts and only 1 needs to have a CDOC if they interpret the sentence that way. Also, does not require each analyte in the method. To report for the method, you could just do one analyte, such as the easiest one to quantitate in organics or metals, and call it good. The laboratory must have a documented procedure describing ongoing DOC that includes procedures for how the laboratory will identify data associated with ongoing DOCs. The analyst(s) must demonstrate on-going capability by routinely This is open ended and will likely result in disagreement between ABs and laboratories because the frequency is not defined meeting the QC requirements of the method, laboratory SOP if the lab's SOP does not include all QC, they could argue the analyst does not need to meet the requirements for CDOC, client specifications, and/or this Standard if lab's SOP is more stringent that the method, can the lab say the analyst just has to meet the least stringent requirement(s) If an ongoing DOC has not been completed by the analyst annually, an initial DOC (Section 7.2) must be performed. It is the responsibility of the laboratory to document their approaches to ongoing DOCs

Comment Number	Section/Clause	Comment
		which comply with their procedures for monitoring the competence of personnel (see V1M2 6.2.5.f).
63	8.1.1.a, pg. 9	The first sentence is confusing. Suggested update: "An analytical batch must be quantified using the most recent initial calibration performed prior to analysis of the batch on the same instrument."
64	8.1.1.c, pg. 9	The second sentence should have a comma after, "factory provided calibration."
65	8.1.1.d vi, pg. 10	Recommended that this language be added to d) ii after the specification of what acceptable reasons for removal on to clear up potential misunderstanding of what is "technically valid".
66	8.1.1.d.v.a	Does not read well/hard to understand: "by the end of the next working day of the original...". Revise for clarity. Perhaps change to "...working day following the original..." if this is the intended meaning.
67	8.1.1.e through o	Be consistent in formatting with 8.1.1.a through d: start the sentences with a capital letter and end them with a period. (They are/should be complete sentences and formatted as such.)
68	8.1.1.e, footnote b, pg. 10	This sets up an exclusive exception that is then contradicted by footnote c. Suggested addition to the end of sentence 1: "... or if footnote c applies."
69	8.1.1.e, footnote c, pg. 10	ISE acronym needs to be defined.
70	8.1.1.e, footnote c, pg. 10	This implies that manufacturers are driving regulation. Suggested rewording, "Fewer calibration standards for ion-selective electrode technologies are allowed based on method specification."
71	8.1.1.j	Fix formatting where the equation appears in the wrong place.
72	8.1.1.j ii.a, pg. 11	The equation for %RE is mistakenly before the statement, "Relative error is calculated using the following equation:"
73	8.1.2.f ii, pg. 13	2 nd sentence: " Prior to analyzing samples, the laboratory must demonstrate acceptable performance after action..." is confusing. Suggest updating to "After taking action to address the issue and prior to analyzing samples, ..."

Comment Number	Section/Clause	Comment
74	8.1.2.g and h	These two paragraphs should be 'under' f.iii, as they are the two special conditions referenced by f.iii and follow a colon under that paragraph. They should still begin with capital letters and read as sentences. The first paragraph does not need to end in an "or" since the initial phrases of both paragraphs are clear as to the situation when they are relevant.
75	8.1.2.g-h), pg. 13	These two sections should be contained under 9.1.2 f) iii, instead of standalone statements under Continuing Calibration Verification.
76	8.1.2.h, pg. 13	"those samples" should be clarified. Recommended update: "... and sample results exceed a maximum regulatory limit/decision level, the samples above the maximum may be reported."
77	8.2.1.a	The final sentence (starts with "Or...") is a sentence fragment.
78	8.2.1.a, pg. 13	The last sentence is incomplete and seems duplicative with the last sentence of section 8.2.
79	8.2.1.d pg. 14	This appears to be a duplicate requirement that could be removed. 8.3 and 8.3.1 already require documentation of this procedure.
80	8.2.2.e	Fix run-on sentence. Start a new sentence with "For those components...."
81	8.2.2.f	Add colon, "... rules: "
82	8.2.2.f	V1M4 8.2.2.f, references to "target", "targets", "target analytes", and "analytes" should be made uniform. Suggested language: i. for methods that include one (1) to ten (10) target analytes, spike all analytes ii. for those methods that have more than 10 target analytes, a representative ... iii. for methods that include eleven (11) to twenty (20) target analytes, spike ... iv. for methods with more than twenty (20) target analytes, spike ...
83	8.2.2.f i through iv	Use terms consistently in the 4 sections, choose from "targets", "analytes", "target" and "target analytes": recommended choice: "target analytes".
84	8.2.2.f iii-iv	These should be subitems below ii rather than stand-alone items.
85	8.2.4 c), pg. 16	This should specify that a lab does not need to verify the titrant concentration according to the method's process if it comes with a NIST-traceable CoA.
86	8.3.1 as well as b) and c), pg. 16-17	"contamination" should be changed to "interference" to agree with other mentions in this paragraph and only trigger action if the contamination interferes. "contaminated method blank" could similarly be updated to "unacceptable method blank" or "failing method blank".
87	8.3.1.a-c	Under this section, a and b are two "either/or" issues that must be qualified, and c is a requirement for both a and b. The content of c should be in the 8.3.1 main paragraph [perhaps with the simple edit of "... shall be investigated and documented"], which should end in "if" or "when", followed by a and b.
88	8.3.2.a	Sentence starting with "If results are found ..." needs a period at the end.
89	8.3.2.a i), pg. 17	Move the comma from after "DL" to before "associated".
90	8.3.2.a.i	Comma belongs after "high bias)," and not after "the DL".

Comment Number	Section/Clause	Comment
91	8.3.2.b	<p>Consider making the first sentence in the last paragraph its own bullet point separate from marginal exceedances. Because labs may still report results associated with low or high biased LCS without using marginal exceedances, its important to emphasize that anytime the same analyte is repeatedly out, the lab must take action</p> <p>Suggestion: c) If the same analyte exceeds the LCS control limit in consecutive batches. The source of the issue must be located and action taken by the laboratory.</p>
92	8.3.2.b	Correct the paragraph under the chart of MEs so it does not start with a sentence fragment.
93	8.3.2.b, pg. 17	<p>The 5th sentence is confusing: “ME defined as slightly exceeds the established control limits ± 3 standard deviations but within the ME limits which are between 3 and 4 standard deviations.”</p> <p>Suggested update: “An ME is defined as exceeding ± 3 standard deviations of the mean but being within ± 4 standard deviations of the mean.”</p>
94	8.3.3.a	Remove 's' from techniquet or otherwise address the subject/verb agreement in first sentence.
95	8.3.3.c	typo - "action toto address"
96	8.3.3.c, pg. 18	This sentence is confusing. Suggested update: “Surrogates outside the acceptance criteria must be evaluated for the effect indicated for the individual sample results. Action to address the issue must be recorded or the data reported with appropriate data qualifiers.”
97	8.4.a	Comma after "project" appears unnecessary, may need a hyphen (project-specified) if that is the intended meaning
98	8.4.a, pg. 18	The end of the first sentence has misplaced comma. It should read, “within the regulation, method, or project specified range.”
99	General	<p>Anywhere that “annually” or “a year” is stated, I would like to see something to the effect of “every 12 months but not to exceed 13 months” stated where applicable. If TNI isn’t concerned if a lab does an annual/yearly requirement in December of one year and again a month later in January, then fine. I think this could also be stated in a general statement in the definition section, which would be much more simple.</p> <p>An example of where not defining a year could be an issue is page 6, section 6.3 “At least once per year, the laboratory must tabulate all results of the ongoing verification sample testing. All data representative of the current operations must be used, if generated within the last two (2) years. A minimum of seven (7) samples is required.”</p>
100	Page 4	<p>LOQe? (page 4) I think they mean just “LOQ”</p> <p>The laboratory must raise the LOQe</p>