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U.S. DEPARTMENT OF AGRICULTURE  
 FOOD SAFETY AND INSPECTION SERVICE  
 ACCREDITED LABORATORY PROGRAM

**RESIDUE CHECK SAMPLE RESULTS**

**INSTRUCTIONS:**

FSIS or Contract Laboratory:  
 Complete Items 1, 2, 3 and 4. Check box in 5 for general area of analysis.

Accredited Laboratory:  
 Report analytical findings under Item 5. See reverse side for additional instructions.

1. LABORATORY NUMBER	2. SAMPLE NUMBER
3. DATE SENT	4. DATE RESULTS MUST BE RECEIVED

LABEL

FAX RESULTS BY DUE DATE TO (202) 690-6632

**5. Amounts for CHC, PCB, and AS must be corrected for recovery. All results are to be rounded to two decimals.**

<input type="checkbox"/> <b>NITROSAMINES</b>	PPB	% Recovery	<input type="checkbox"/> <b>CHLORINATED HYDROCARBONS</b>	PPM	% Recovery
051 N-Nitrosodimethylamine			102 Alpha-BHC		
052 N-Nitrosodiethylamine			104 Dieldrin		
053 N-Nitrosodipropylamine			106 Endrin		
054 N-Nitrosodibutylamine			108 Lindane		
055 N-Nitrosopiperidine			109 Methoxychlor		
056 N-Nitrosopyrrolidine			112 HCB		
057 N-Nitrosomorpholine			113 Mirex		
<input type="checkbox"/> <b>SULFONAMIDES</b>	PPM	% Recovery	<input type="checkbox"/> <b>ARSENIC (As)</b>	PPM	% Recovery
803 Sulfadimethoxine			124 p,p'-DDT		
805 Sulfamethazine			126 p,p'-DDE		
809 Sulfathiazole			128 p,p'-TDE		
Other:			164 Heptachlor Epoxide		
			Other:		
<input type="checkbox"/> <b>POLYCHLORINATED BIPHENYLS</b>	PPM	% Recovery	401		
111 All PCBs					

NAME AND SIGNATURE OF ANALYST

DATE

REVIEWED AND VERIFIED BY (Name, Title, and Signature)

DATE

FSIS or Contract Laboratory. Check box in 5 for...  
2 3 and 4. Check box in 5 for...

## INSTRUCTIONS FOR REPORTING RESIDUE CHECK SAMPLE RESULTS

**The following reporting requirements must be followed:**

- \* Laboratories may not subcontract out any check samples. If a laboratory is unable to analyze samples, ALP personnel should be notified.
- \* No comments should be made on the Check Sample Results Form.
- \* If check samples are received in poor condition, the Accredited Laboratory Program (ALP) should be notified immediately, by telephone at (202-690-6582) and **in writing**. The ALP may replace samples or an excuse from reporting results may be authorized.
- \* All entries on forms and reports should be clearly **typed** on the original and sent by mail.
- \* Name and title of authorized person signing form should be typed below signature on all forms and reports provided by the ALP.
- \* Check sample results must be received **on or before the due date** indicated on the report form. Late results are subject to a CUSUM penalty. Failure to report check sample results could result in revocation of accreditation.
- \* ALP will consider claims regarding check sample results lost in the mail only with acceptable proof of mailing. Acceptable proof of mailing includes receipts from the U.S. Post Office or overnight/express delivery carriers.
- \* Requests for "Excused Absences" for check sample results must be **in writing**, explain the reason for the request, and be received by ALP at the address below **before the due date**.
- \* Laboratories may not be excused more than twice per accreditation period. Any further requests to be excused will be reviewed on a case by case basis by ALP staff.
- \* If a laboratory believes that there was a data processing error on updating CUSUM reports **at FSIS**, the laboratory may request a review. The request must be **in writing** and received by ALP at the address below **within 30 days** of the data of the report in question.
- \* Retain a copy of your Check Sample Results for your records.
- \* All correspondence should be addressed to:

**Accredited Laboratory Program  
USDA, FSIS, OPHS  
Room 377 Aerospace Center, Box 17  
901 D Street, S.W.  
Washington, D.C. 20024**

**(202) 690-6582**