

Filter Holder Log

Site Name _____

Filter Installation

ASAP PSU DFU DSU

Date _____ Time _____ Collector # _____ Field Operator (print) _____	
Filter Holder ID _____ Elapsed Time Meter at Start _____ Filter Installation Check <input type="checkbox"/> Turn on Pump <input type="checkbox"/> Flow Rate at Start _____ lpm	On Arrival: Filter Holder Bag Intact <input type="checkbox"/> On Leaving Site: Holder Compartment Locked <input type="checkbox"/> Fan on <input type="checkbox"/> Pump Compartment Locked <input type="checkbox"/> Signature: _____
Comments/Field Flags: _____ _____	

Filter Removal

Date _____ Time _____ Collector # _____ Field Operator (print) _____	
Flow Rate at Stop _____ lpm Turn off Pump <input type="checkbox"/> Elapsed Time Meter at Stop _____ Clear Meter <input type="checkbox"/> Exposed Filter Holder ID _____ Exposed Filter Holder Double Bagged <input type="checkbox"/>	Physical Security Check On Arrival: Holder Compartment Locked <input type="checkbox"/> Fan on <input type="checkbox"/> Pump Compartment Locked <input type="checkbox"/> On Leaving Site: Sample Bag Sealed <input type="checkbox"/> Holder Compartment Locked <input type="checkbox"/> Fan on <input type="checkbox"/> Pump Compartment Locked <input type="checkbox"/> Signature: _____
Comments/Field Flags: _____ _____	

Instructions For Completing Filter Holder Log

PRINCIPAL PURPOSE: The purpose of this log is to support daily operations of the Department of Homeland Security's (DHS) BioWatch Program. The log is required to create a unique written chain-of-custody record tied to each collected filter sample to support law enforcement activities, including criminal prosecution in the case of a deliberate release of a biological warfare agent.

Blocks:

Complete the requested information for each block by filling in all entry blanks. In the Comments/Field flags block, the field operator is able to write any additional comments or observations made during the filter removal/installation process. Be as specific as possible when completing this log. Please write legibly.

Boxes:

Place a check mark in the appropriate box to identify the type of collector being serviced. All other boxes require a check mark when the corresponding action is completed or as a requested observation is validated.

Paperwork Reduction Act Statement: The public reporting burden to complete this information collection is estimated at 1 minute per respondent, including the time for reviewing instructions, gathering and maintaining the data needed, and completing and reviewing the collected information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number and expiration date. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to DHS, Office of Health Affairs, Chem/Bio Early Detection Division, Washington, D.C. 20528: ATTN: PRA (1601-NEW).