

**From:** [Rankin, Amelia](#)  
**To:** [Reaves, Shawn D](#)  
**Cc:** [Watts, John](#); [Ayres, Joshua](#)  
**Subject:** Field ID & Location Correction  
**Date:** Friday, November 20, 2020 5:20:42 PM  
**Attachments:** [WOAP-2020-11-20-04.pdf](#)

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Hi Shawn,

The handwriting is terrible, but this is a site we receive often. Would you please correct b 308 to S308, in both the field ID and the location?  
RQ-2020-10-26-50, WQAP-2020-11-20-04

Thank you!

*Amelia Rankin*

*Taxonomy Manager  
FDEP Laboratory--Biology Program  
2600 Blair Stone Rd.  
MS 6515  
Tallahassee, FL 32399-2400  
Phone: (850) 245-8182*

# Login Checklist

RQ- **2020- 10 - 26 - 50**

Login Station ID: **# 3**

Shipping Method: **FedEx | UPS | HD | Greyhound**

Date/Time of Receipt: **11-20-2020 / 09:20**

| *Cooler Temperature | Samples Frozen? | * All Samples in Cooler Preserved with |          | Number of Sample Containers in Cooler | Evidence Tape |    |          |    | Waybill Tracking # |
|---------------------|-----------------|----------------------------------------|----------|---------------------------------------|---------------|----|----------|----|--------------------|
|                     |                 |                                        |          |                                       | Present?      |    | *Intact? |    |                    |
|                     | YES             | HNO <sub>3</sub>                       | Formalin |                                       | Yes           | No | Yes      | No |                    |
| 2.6c                |                 |                                        |          | 6                                     |               | x  |          |    | 9117 6382 2333     |
|                     |                 |                                        |          |                                       |               |    |          |    |                    |
|                     |                 |                                        |          |                                       |               |    |          |    |                    |
|                     |                 |                                        |          |                                       |               |    |          |    |                    |
|                     |                 |                                        |          |                                       |               |    |          |    |                    |
|                     |                 |                                        |          |                                       |               |    |          |    |                    |

## COOLER CHECK

**\*All samples received on ice unless otherwise noted. HNO<sub>3</sub> and Formalin preserved samples do NOT have a temperature requirement.**

- If the temperature of a cooler exceeds 6.0 oC (above 10.0 oC for W-1-4-DIOX and microbiology) or received without ice, identify affected samples in an NCR. **NCR#** \_\_\_\_\_
- DOH coolers can exceed 2.0 °C above the standard temperature (6.0 or 10.0 °C for W-1-4-DIOX) without login confirmation from customer for samples requiring ice preservation; identify affected samples in an NCR. **NCR#** \_\_\_\_\_
- If cooler or samples are received with a damaged Evidence Seal; identify the affected samples in an NCR. **NCR#** \_\_\_\_\_
- If coolers or samples are received late; identify the affected samples in an NCR. **NCR#** \_\_\_\_\_

Chain of Custody/ Field Sheet(s) Included? Yes **x** No \_\_\_\_\_

Micro-Biology Overflow Chain of Custody/ Field Sheet(s) Included? Yes \_\_\_\_\_ No **x**

## CONTAINER CHECK

Evidence Tape on Bottles? Yes \_\_\_\_\_ No \_\_\_\_\_ NA **x** Evidence Tape intact? Yes \_\_\_\_\_ No \_\_\_\_\_

If Criminal, photographs taken? Yes \_\_\_\_\_ No \_\_\_\_\_ Containers intact? Yes **x** No \_\_\_\_\_

Caps on tight? Yes **x** No \_\_\_\_\_

Sufficient Sample Volume: Yes **x** No \_\_\_\_\_

If **NO** is checked above, generate an NCR listing affected sample IDs in its appropriate category. **NCR#** \_\_\_\_\_

**CHLORINE CHECK REQUIRED?** (Blue dot on container) Yes \_\_\_\_\_ No **x** Init: **ABS**

Chlorine detected? (One container checked per Field ID) Yes \_\_\_\_\_ No \_\_\_\_\_ Init: **ABS**

If chlorine is detected, generate an NCR listing affected sample IDs . **NCR#** \_\_\_\_\_

## PRESERVATION CHECK (EXCLUDING SAMPLES SENT TO OVERFLOW LABS, "OV-")

**\*\*Acid Preserved Samples:** pH< 2.0? Yes **x** No \_\_\_\_\_ NA \_\_\_\_\_ Init: **ABS**

**\*\*W-1-4-DIOX** (Green dot on container) preserved to pH<4.0? Yes \_\_\_\_\_ No \_\_\_\_\_ NA **x** Init: **ABS**

If samples were not preserved correctly, generate an NCR listing affected sample IDs . **NCR#** \_\_\_\_\_

Coolers Unpacked/Checked by: **ABS** Date: **11-20-2020** Event contains NCRs (Y/N)? **N**

Event ID: **WQAP - 2020 - 11 - 20 - 0 4**

## Login Checklist

Login Preservation Equipment

Lot # & Exp: Date

Additional Comments:

|                              |                         |
|------------------------------|-------------------------|
| Infrared Thermometer ID:     | IRTG # 3 EXP:10/28/2021 |
| pH Test Strips 0.0 – 6.0     | 213316 BV EXP:05/15/21  |
| pH Paper 0.0 – 3.0           | XX XX XX XX             |
| pH Paper 0.0 – 13.0          | 231019 EXP:11/01/2022   |
| Chlorine Test Strips 0.-10.0 | 0129 / 2023 / 03        |

### ENCORE SAMPLES

S-VOC-MS samples in Encores must be frozen within 48 hours of collection.

Were Encore samples received? Yes \_\_\_\_\_ Init: ABS

Date and time placed in freezer \_\_\_\_\_

Were all samples placed in freezer within 48 hours of collection? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, were samples shipped on dry ice? Yes \_\_\_\_\_ No \_\_\_\_\_

If S-VOC-MS samples were not preserved correctly, generate an NCR listing affected sample IDs . NCR# \_\_\_\_\_

**FOR CLEAN LAB USE ONLY** – Total Mercury Preservation Check (W-HG-AF;W-HG-AF-F):

Samples preserved within 48 hours? Yes \_\_\_\_\_ No \_\_\_\_\_

Date and time samples preserved: \_\_\_\_\_

# Florida Department of Environmental Protection

## Central Laboratory Submittal Form

Customer: WQAP

Project ID: SPPROJECTS

Requester: Amelia G. Rankin

Field Report Prepared By: Drew Liddick

Collected By: Drew Liddick Alexander Miranda

Sampling Agency: 21FLWSPB

|                                                                         |  |                                                                           |  |                                                              |  |                                                                                 |  |                                        |  |                               |  |
|-------------------------------------------------------------------------|--|---------------------------------------------------------------------------|--|--------------------------------------------------------------|--|---------------------------------------------------------------------------------|--|----------------------------------------|--|-------------------------------|--|
| Location<br>5308                                                        |  | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab |  | Collection (comp begin or grab)<br>Date 11/19/2020 Time 1030 |  | <input checked="" type="checkbox"/> Eastern<br><input type="checkbox"/> Central |  | Composite end<br>Date _____ Time _____ |  | Bottle Group(s)<br>(See pg 2) |  |
| Field ID<br>5308 Lakeside                                               |  | Matrix (type, e.g., Salt, Fresh, etc)<br>fresh                            |  | Diss. Oxygen<br>7.87                                         |  | <input type="checkbox"/> mg/L<br><input type="checkbox"/> % sat                 |  | Total Res. Chlorine<br>(mg/L) _____    |  | A, B, C                       |  |
| WIN/STORET #                                                            |  | Temp (C) 23.1                                                             |  | pH 8.13                                                      |  | Sample Depth 0.3                                                                |  | Sp. Conductance (umho/cm) 378.1        |  |                               |  |
| Latitude<br><input type="checkbox"/> dd<br><input type="checkbox"/> dms |  | Longitude<br><input type="checkbox"/> dd<br><input type="checkbox"/> dms  |  | Salinity (ppt) 0.18                                          |  | Comments                                                                        |  |                                        |  |                               |  |

|                                                                         |  |                                                                          |  |                                                          |  |                                                                      |  |                                        |  |                 |  |
|-------------------------------------------------------------------------|--|--------------------------------------------------------------------------|--|----------------------------------------------------------|--|----------------------------------------------------------------------|--|----------------------------------------|--|-----------------|--|
| Location                                                                |  | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab           |  | Collection (comp begin or grab)<br>Date _____ Time _____ |  | <input type="checkbox"/> Eastern<br><input type="checkbox"/> Central |  | Composite end<br>Date _____ Time _____ |  | Bottle Group(s) |  |
| Field ID                                                                |  | Matrix (type, e.g., Salt, Fresh, etc)                                    |  | Diss. Oxygen                                             |  | <input type="checkbox"/> mg/L<br><input type="checkbox"/> % sat      |  | Total Res. Chlorine (mg/L)             |  |                 |  |
| WIN/STORET #                                                            |  | Temp (C)                                                                 |  | pH                                                       |  | Sample Depth                                                         |  | Sp. Conductance (umho/cm)              |  |                 |  |
| Latitude<br><input type="checkbox"/> dd<br><input type="checkbox"/> dms |  | Longitude<br><input type="checkbox"/> dd<br><input type="checkbox"/> dms |  | Salinity (ppt)                                           |  | Comments                                                             |  |                                        |  |                 |  |

|                                                                         |  |                                                                          |  |                                                          |  |                                                                      |  |                                        |  |                 |  |
|-------------------------------------------------------------------------|--|--------------------------------------------------------------------------|--|----------------------------------------------------------|--|----------------------------------------------------------------------|--|----------------------------------------|--|-----------------|--|
| Location                                                                |  | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab           |  | Collection (comp begin or grab)<br>Date _____ Time _____ |  | <input type="checkbox"/> Eastern<br><input type="checkbox"/> Central |  | Composite end<br>Date _____ Time _____ |  | Bottle Group(s) |  |
| Field ID                                                                |  | Matrix (type, e.g., Salt, Fresh, etc)                                    |  | Diss. Oxygen                                             |  | <input type="checkbox"/> mg/L<br><input type="checkbox"/> % sat      |  | Total Res. Chlorine (mg/L)             |  |                 |  |
| WIN/STORET #                                                            |  | Temp (C)                                                                 |  | pH                                                       |  | Sample Depth                                                         |  | Sp. Conductance (umho/cm)              |  |                 |  |
| Latitude<br><input type="checkbox"/> dd<br><input type="checkbox"/> dms |  | Longitude<br><input type="checkbox"/> dd<br><input type="checkbox"/> dms |  | Salinity (ppt)                                           |  | Comments                                                             |  |                                        |  |                 |  |

|                                                                         |  |                                                                          |  |                                                          |  |                                                                      |  |                                        |  |                 |  |
|-------------------------------------------------------------------------|--|--------------------------------------------------------------------------|--|----------------------------------------------------------|--|----------------------------------------------------------------------|--|----------------------------------------|--|-----------------|--|
| Location                                                                |  | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab           |  | Collection (comp begin or grab)<br>Date _____ Time _____ |  | <input type="checkbox"/> Eastern<br><input type="checkbox"/> Central |  | Composite end<br>Date _____ Time _____ |  | Bottle Group(s) |  |
| Field ID                                                                |  | Matrix (type, e.g., Salt, Fresh, etc)                                    |  | Diss. Oxygen                                             |  | <input type="checkbox"/> mg/L<br><input type="checkbox"/> % sat      |  | Total Res. Chlorine (mg/L)             |  |                 |  |
| WIN/STORET #                                                            |  | Temp (C)                                                                 |  | pH                                                       |  | Sample Depth                                                         |  | Sp. Conductance (umho/cm)              |  |                 |  |
| Latitude<br><input type="checkbox"/> dd<br><input type="checkbox"/> dms |  | Longitude<br><input type="checkbox"/> dd<br><input type="checkbox"/> dms |  | Salinity (ppt)                                           |  | Comments                                                             |  |                                        |  |                 |  |

|                          |                              |                          |                                 |                             |                         |
|--------------------------|------------------------------|--------------------------|---------------------------------|-----------------------------|-------------------------|
| Relinquished By:<br>FDEP | Date/Time<br>11/19/2020 1600 | Shipping Method<br>FEDEX | Number of Coolers Shipped:<br>1 | Received By:<br>[Signature] | Date/Time<br>11-20-2019 |
|--------------------------|------------------------------|--------------------------|---------------------------------|-----------------------------|-------------------------|

IL 1 sample

Gido

|            |              |                    |                  |               |               |                                     |   |
|------------|--------------|--------------------|------------------|---------------|---------------|-------------------------------------|---|
| Group: A   | Bottle Type: | PT-50ML            | # of Bottles: 4  | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 1 |
| ALGAL_ID   |              |                    |                  |               |               |                                     |   |
| Group: B   | Bottle Type: | BP-1L              | # of Bottles: 4  | Preservative: | Lugols        | Enter Number of Bottles Sent to Lab | 1 |
| DTY-QN-C   |              |                    |                  |               |               |                                     |   |
| PKD-QN-C   |              |                    |                  |               |               |                                     |   |
| Group: B   | Bottle Type: | BG-250ML-WDMT<br>H | # of Bottles: 4  | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 1 |
| W-MCYST-AA |              |                    |                  |               |               |                                     |   |
| Group: B   | Bottle Type: | P-500ML            | # of Bottles: 4  | Preservative: | ICE And H2SO4 | Enter Number of Bottles Sent to Lab | 1 |
| W-NH3      |              |                    |                  |               |               |                                     |   |
| W-NO2NO3   |              |                    |                  |               |               |                                     |   |
| W-S-A-TP   |              |                    |                  |               |               |                                     |   |
| W-TKN      |              |                    |                  |               |               |                                     |   |
| Group: B   | Bottle Type: | P-125ML            | # of Bottles: 4  | Preservative: | FILTER-ICE    | Enter Number of Bottles Sent to Lab | 1 |
| W-PO4-F    |              |                    |                  |               |               |                                     |   |
| Group: C   | Bottle Type: | BP-1L              | # of Bottles: 12 | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 1 |
| CHLSUITE-W |              |                    |                  |               |               |                                     |   |

Date of Request: 20-OCT-2020  
 Created By: RANKIN\_A On: 20-OCT-2020  
 Modified By: RANKIN\_A On: 04-NOV-2020  
 Customer: WQAP  
 Project: LKORELEASE  
 Division:  
 District:  
 Event Description: Lake O Release

**Send Coolers To:**

Phone: 7724485884  
 8400 Picos Rd  
  
 Ft. Pierce, FL 34945  
 Attn: Jordan Skaggs  
 Cooler Ship EMail: Jordan.Skaggs@FloridaDEP.gov

Priority: 1  
 Event Status: R  
 Criminal Investigation: NO  
 Chemistry Request Reviewed By: WATTS\_J On: 20-OCT-2020  
 Biology Request Reviewed By: JASROTIA\_P On: 20-OCT-2020  
 Sampling Kit Required: YES Ship on: 22-OCT-2020  
 Sampling Kit Shipped: YES On: 20-OCT-2020  
 Sampling Kit Packed By: AYRES\_J  
 Preservatives Needed: NO  
 Date to Receive Samples: 26-OCT-2020  
 Logged In By: SHAIK\_A On: 20-NOV-2020

**Send Final Report To:**

2600 Blair Stone Rd  
  
 Tallahassee, FL 32399-2400  
 Attn: Dave Whiting  
 Report Notification EMail: David.D.Whiting@FloridaDEP.gov

Comments: Please ship ASAP.

4 locations, 1 bottle each: ALGAL-ID, toxins, nutrients, and full ID; 3 bottles each chlorophyll

All Bottle Groups - one event

Bottle Group A  
 For algal dominant taxon

Bottle Group B  
 For toxin testing, nutrients, full ID

Bottle Group C  
 For chlorophyll

Please print two copies of algal job labels at login.

**Bottle Group A (Biological) With 4 Samples:**

|                      |                      |                                                                        |
|----------------------|----------------------|------------------------------------------------------------------------|
| Bottle Type: PT-50ML | Number of Bottles: 4 | Preserved With: ICE                                                    |
| ALGAL_ID             | Template: DEFAULT    | (SOP-AB05) Qualitative assessment of algal taxa present without counts |

**Bottle Group B (Water) With 4 Samples:**

|                             |                      |                                                                                          |
|-----------------------------|----------------------|------------------------------------------------------------------------------------------|
| Bottle Type: BP-1L          | Number of Bottles: 4 | Preserved With: Lugols                                                                   |
| DTY-QN-C                    | Template: DEFAULT    | (SOP-AB05_1) No. of diatom taxa of quantitative phytoplankton sample.                    |
| PKD-QN-C                    | Template: DEFAULT    | (SOP-AB05) No. of wet taxa of quantitative phytoplankton sample.                         |
| Bottle Type: BG-250ML-WDMTH | Number of Bottles: 4 | Preserved With: ICE                                                                      |
| W-MCYST-AA                  | Template: DEFAULT    | (EPA 8321B) Microcystins in water matrices by HPLC/MS/MS                                 |
| Bottle Type: P-500ML        | Number of Bottles: 4 | Preserved With: ICE And H2SO4                                                            |
| W-NH3                       | Template: DEFAULT    | (EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L                               |
| W-NO2NO3                    | Template: DEFAULT    | (EPA 353.2 Rev. 2.0) Nitrite/Nitrate in aqueous matrices as mg N/L                       |
| W-S-A-TP                    | Template: DEFAULT    | (EPA 365.1 Rev. 2.0) Total Phosphorus in aqueous matrices as mg P/L                      |
| W-TKN                       | Template: DEFAULT    | (EPA 351.2 Rev. 2.0) Total Kjeldahl Nitrogen in aqueous matrices                         |
| Bottle Type: P-125ML        | Number of Bottles: 4 | Preserved With: FILTER-ICE                                                               |
| W-PO4-F                     | Template: DEFAULT    | (EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L |

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**Bottle Group C (Water) With 12 Samples:**

Bottle Type: BP-1L

Number of Bottles: 12

Preserved With: ICE

CHLSUITE-W

Template: DEFAULT

(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, and phaeophytin by spectrophotometry

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\* - The laboratory is not NELAP certified for this analyte/method, or certification is not applicable.