

# Login Checklist

RQ- 2021-05-31-59

Login Station ID: #5

Shipping Method: FedEx | UPS | HD | Greyhound

Date/Time of Receipt: 6/ 29 /21 @ 8:15

| *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 |                    |
| 2.1                 |                 |                                        |          | 10                                    |               | ✓  |          |    | 7739 8574 3526     |
|                     |                 |                                        |          |                                       |               |    |          |    |                    |
|                     |                 |                                        |          |                                       |               |    |          |    |                    |
|                     |                 |                                        |          |                                       |               |    |          |    |                    |
|                     |                 |                                        |          |                                       |               |    |          |    |                    |
|                     |                 |                                        |          |                                       |               |    |          |    |                    |
|                     |                 |                                        |          |                                       |               |    |          |    |                    |

## COOLER CHECK

\*All samples received on ice unless otherwise noted. HNO3 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 ✓ No \_\_\_\_\_

Micro-Biology Overflow Chain of Custody/ Field Sheet(s) Included?

Yes \_\_\_\_\_ No ✓

## CONTAINER CHECK

Evidence Tape on Bottles?

Yes \_\_\_\_\_ No \_\_\_\_\_ NA ✓

Evidence Tape intact? Yes \_\_\_\_\_ No \_\_\_\_\_

If Criminal, photographs taken?

Yes \_\_\_\_\_ No \_\_\_\_\_

Containers intact? Yes ✓ No \_\_\_\_\_

Caps on tight?

Yes ✓ No \_\_\_\_\_

Sufficient Sample Volume:

Yes ✓ 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 ✓ Init: HK

Chlorine detected? (One container checked per Field ID)

Yes \_\_\_\_\_ No \_\_\_\_\_ Init: \_\_\_\_\_

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 \_\_\_\_\_ No \_\_\_\_\_ NA ✓ Init: HK

\*\*W-1-4-DIOX (Green dot on container) preserved to pH<4.0?

Yes \_\_\_\_\_ No \_\_\_\_\_ NA ✓ Init: HK

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

Coolers Unpacked/Checked by: HK

Date: 6/ 29 /21

Event contains NCRs (Y/N)? N

Event ID SFWM D Bloom Response--As Needed  
SFWM D-2021-06-29-05 (BLOOM-RESP)

Date Received: 29-JUN-2021 08:15

## Login Checklist

### Login Preservation Equipment

### Lot # & Exp: Date

### Additional Comments:

|                          |                             |
|--------------------------|-----------------------------|
| Infrared Thermometer ID: | IR TEMP GUN #5 EXP:10-28-21 |
| pH Test Strips 0 – 6     | Lot#210620 EXP:4-15-23      |
| pH Paper 0 – 3           |                             |
| pH Paper 0 – 13          | Lot#210620 EXP:4-15-23      |
| Chlorine Test Strips     | Lot#0261 EXP:5-23           |

### ENCORE SAMPLES

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

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

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: \_\_\_\_\_

Request Number: RQ- 2021-05-31-59

SFWMD Bloom Response (West Palm Beach)

## Florida Department of Environmental Protection

## Central Laboratory Submittal Form

Page 1 of 2

last revised Jan 25, 2018

Customer: SFWMD

Requester: Amelia G. Rankin

Field Report Prepared By:

Project ID: BLOOM-RESP

Collected By:

Sampling Agency:

RCVD 28 JUN 16:34 SFWMD  
Blayke Polsell,  
WOOD

|                                                                                              |  |                                                                                                |  |                                                              |  |                                                                            |                            |                                    |                                              |
|----------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------|--|----------------------------------------------------------------------------|----------------------------|------------------------------------|----------------------------------------------|
| Location<br>Lake Okeechobee/Pahokee Ramp                                                     |  | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab                      |  | Collection (comp begin or grab)<br>Date 06/28/2021 Time 0925 |  | Eastern<br>Central                                                         | Composite end<br>Date Time |                                    | Bottle<br>Group(s)<br>(See pg 2)<br><br>A, B |
| Field ID<br>* RAMP-1 **                                                                      |  | Matrix (type, e.g., Salt, Fresh, etc)<br>Fresh                                                 |  | Diss. Oxygen<br>6.04                                         |  | <input checked="" type="checkbox"/> mg/L<br><input type="checkbox"/> % sat |                            | Total Res. Chlorine<br>(mg/L)      |                                              |
| WIN/STORET #                                                                                 |  | Temp<br>(C) 28.01                                                                              |  | pH<br>7.49                                                   |  | Sample<br>Depth 0.3                                                        |                            | Sp. Conductance<br>(umho/cm) 395.4 |                                              |
| Latitude<br>26.825257 <input checked="" type="checkbox"/> dd<br><input type="checkbox"/> dms |  | Longitude<br>-80.667873 <input checked="" type="checkbox"/> dd<br><input type="checkbox"/> dms |  | Salinity<br>(ppt)                                            |  | Comments                                                                   |                            |                                    |                                              |
| Location                                                                                     |  | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab                                 |  | Collection (comp begin or grab)<br>Date Time                 |  | Eastern<br>Central                                                         | Composite end<br>Date Time |                                    | Bottle<br>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<br>(mg/L)      |                                              |
| WIN/STORET #                                                                                 |  | Temp<br>(C)                                                                                    |  | pH                                                           |  | Sample<br>Depth                                                            |                            | Sp. Conductance<br>(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<br>(ppt)                                            |  | Comments                                                                   |                            |                                    |                                              |
| Location                                                                                     |  | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab                                 |  | Collection (comp begin or grab)<br>Date Time                 |  | Eastern<br>Central                                                         | Composite end<br>Date Time |                                    | Bottle<br>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<br>(mg/L)      |                                              |
| WIN/STORET #                                                                                 |  | Temp<br>(C)                                                                                    |  | pH                                                           |  | Sample<br>Depth                                                            |                            | Sp. Conductance<br>(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<br>(ppt)                                            |  | Comments                                                                   |                            |                                    |                                              |
| Location                                                                                     |  | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab                                 |  | Collection (comp begin or grab)<br>Date Time                 |  | Eastern<br>Central                                                         | Composite end<br>Date Time |                                    | Bottle<br>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<br>(mg/L)      |                                              |
| WIN/STORET #                                                                                 |  | Temp<br>(C)                                                                                    |  | pH                                                           |  | Sample<br>Depth                                                            |                            | Sp. Conductance<br>(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<br>(ppt)                                            |  | Comments                                                                   |                            |                                    |                                              |

|                        |                       |                          |                                 |                     |                           |
|------------------------|-----------------------|--------------------------|---------------------------------|---------------------|---------------------------|
| Relinquished By:<br>BP | Date/Time<br>06/21/21 | Shipping Method<br>FEDEX | Number of Coolers Shipped:<br>1 | Received By:<br>KHK | Date/Time<br>6-29-21/0815 |
|------------------------|-----------------------|--------------------------|---------------------------------|---------------------|---------------------------|

\* Field ID taken from bottle

|            |                                 |                 |                   |                                     |   |
|------------|---------------------------------|-----------------|-------------------|-------------------------------------|---|
| Group: A   | Bottle Type: PT-50ML            | # of Bottles: 4 | Preservative: ICE | Enter Number of Bottles Sent to Lab | 1 |
| BLOOM-ID   |                                 |                 |                   |                                     |   |
| 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 |                                 |                 |                   |                                     |   |

77-02-31-26

Date of Request: 21-MAY-2021  
Created By: SWANSON\_C On: 21-MAY-2021  
Modified By: WATTS\_J On: 21-MAY-2021  
Customer: SFWMD  
Project: BLOOM-RESP  
Division:  
District: Not Applicable  
Event Description: SFWMD Bloom Response--As Needed

**Send Coolers To:**

Phone: 561-753-2400 ext. 4762  
SFWMD  
8894 Belvedere Rd. B374  
West Palm Beach, FL 33411  
Attn: Mike Tompkins  
Cooler Ship EMail: mtompkin@sfwmd.gov

Priority: 1  
Event Status: R  
Criminal Investigation: NO  
Chemistry Request Reviewed By: WATTS\_J On: 21-MAY-2021  
Biology Request Reviewed By: SWANSON\_C On: 21-MAY-2021  
Sampling Kit Required: YES Ship on: 28-MAY-2021  
Sampling Kit Shipped: YES On: 25-MAY-2021  
Sampling Kit Packed By: REYNOLDS\_T  
Preservatives Needed: NO  
Date to Receive Samples: 07-JUN-2021  
Logged In By: MCCOY\_I On: 25-JUN-2021

**Send Final Report To:**

SFWMD  
8894 Belvedere Rd. B374  
West Palm Beach, FL 33411  
Attn: Michael Tompkins  
Report Notification EMail:  
mtompkin@sfwmd.gov;evan.a.martin@floridadep.gov

Comments: ATTN Packing Staff:

Please pack in 2 coolers.

Bottle Groups A/B: same event - Priority 1

Bottle Group A - Priority 1  
For algal dominant taxon.

Bottle Group B - Priority 1  
For toxin testing.

There are multiple bottles per Group in case multiple sample targets or sample locations are needed. Samplers use best professional judgement to decide which samples are appropriate to collect for a particular response. All sets of bottles do not have to be filled at one time.

Please print two copies of algal job labels at login.

**Bottle Group A (Biological) With 10 Samples:**

Bottle Type: PT-50ML      Number of Bottles: 10      Preserved With: ICE  
BLOOM-ID      Template: DEFAULT      (SOP-AB05) Assessment of dominant algal taxa in bloom or mat sample

**Bottle Group B (Water) With 10 Samples:**

Bottle Type: BG-250ML-WDMTH      Number of Bottles: 10      Preserved With: ICE  
W-MCYST-AA      Template: DEFAULT      (EPA 8321B) Microcystins in water matrices by HPLC/MS/MS

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