

RQ-2022-03-28-20

## Login Checklist

Login Station ID: #2

Shipping Method: FedEx | UPS | HD | Greyhound

Date/Time of Receipt: 3/23/2022 9:30

| *Cooler Temperature | Samples Frozen?<br>YES | * All Samples in Cooler Preserved with |          | Number of Sample Containers in Cooler | Evidence Tape |    |          |    | Waybill Tracking # |
|---------------------|------------------------|----------------------------------------|----------|---------------------------------------|---------------|----|----------|----|--------------------|
|                     |                        | HNO <sub>3</sub>                       | Formalin |                                       | Present?      |    | *Intact? |    |                    |
|                     |                        |                                        |          |                                       | Yes           | No | Yes      | No |                    |
| 1.4                 |                        |                                        |          | 5                                     |               | ✓  |          |    | 5225 5545 0703     |
|                     |                        |                                        |          |                                       |               |    |          |    |                    |
|                     |                        |                                        |          |                                       |               |    |          |    |                    |
|                     |                        |                                        |          |                                       |               |    |          |    |                    |
|                     |                        |                                        |          |                                       |               |    |          |    |                    |
|                     |                        |                                        |          |                                       |               |    |          |    |                    |

## 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 ✓ 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: IM

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&lt; 2.0?

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

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

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

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

Coolers Unpacked/Checked by: IM

Date: 3/23/2022

Event contains NCRs (Y/N)? ✓

Event ID:

Algal Bloom Response- Alachua Co. for  
 WQAP-2022-03-23-01 (BLOOM-RESP)  
 Date Received: 23-MAR-2022 09:30

## Login Checklist

### Login Preservation Equipment

### Lot # & Exp: Date

### Additional Comments:

|                          |                             |
|--------------------------|-----------------------------|
| Infrared Thermometer ID: | IR TEMP GUN #2 exp:10/19/22 |
| pH Test Strips 0 – 6     |                             |
| pH Paper 0 – 3           |                             |
| pH Paper 0 – 13          | 207621 exp: 3/15/24         |
| Chlorine Test Strips     | 0070 exp: 02/2023           |

### 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: \_\_\_\_\_

## Central Laboratory Submittal Form

Customer: WQAP

Requester: Jeremy M. Parrish

Field Report Prepared By: Efraim Tovar

Project ID: BLOOM-RESP

Collected By: Efraim Tovar

Sampling Agency: ACEPD

|                                     |                                                             |                                                                           |                                                             |                           |                                                                                       |                                   |      |                                  |
|-------------------------------------|-------------------------------------------------------------|---------------------------------------------------------------------------|-------------------------------------------------------------|---------------------------|---------------------------------------------------------------------------------------|-----------------------------------|------|----------------------------------|
| Location                            |                                                             | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date 3/22/2022 Time 1030 |                           | Eastern<br>Central                                                                    | Composite end<br>Date             | Time | Bottle<br>Group(s)<br>(See pg 2) |
| Field ID<br>Lake Orange Lake -ACEPD |                                                             | Matrix (type, e.g., Salt, Fresh, etc)<br>Fresh water                      |                                                             | Diss. Oxygen<br>9.78 mg/L | <input checked="" type="checkbox"/> mg/L<br><input checked="" type="checkbox"/> % sat | Total Res. Chlorine<br>(mg/L)     |      | A<br>B                           |
| WIN/STORET #<br>NEHAB0070           |                                                             | Temp<br>(C) 20.5                                                          | pH<br>9.66                                                  | Sample<br>Depth 1.0       | <input checked="" type="checkbox"/> ft<br><input type="checkbox"/> m                  | Sp. Conductance<br>(umho/cm) 77.4 |      |                                  |
| Latitude<br>29.43127                | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Longitude<br>-82.1912                                                     | <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                     |                   | 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   | <input type="checkbox"/> ft<br><input type="checkbox"/> m       | Sp. Conductance<br>(umho/cm)  |      |                    |
| Latitude     | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Longitude                                                      | <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                     |                   | 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   | <input type="checkbox"/> ft<br><input type="checkbox"/> m       | Sp. Conductance<br>(umho/cm)  |      |                    |
| Latitude     | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Longitude                                                      | <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                     |                   | 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   | <input type="checkbox"/> ft<br><input type="checkbox"/> m       | Sp. Conductance<br>(umho/cm)  |      |                    |
| Latitude     | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Longitude                                                      | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Salinity<br>(ppt) | Comments                                                        |                               |      |                    |

|                              |                               |                           |                                 |                 |                           |
|------------------------------|-------------------------------|---------------------------|---------------------------------|-----------------|---------------------------|
| Relinquished By: [Signature] | Date/Time<br>2/22/2022 @ 1400 | Shipping Method<br>Fed Ex | Number of Coolers Shipped:<br>1 | Received By: IM | Date/Time<br>3/23/22 9:30 |
|------------------------------|-------------------------------|---------------------------|---------------------------------|-----------------|---------------------------|

|                                        |              |                    |                 |               |               |                                     |                                            |
|----------------------------------------|--------------|--------------------|-----------------|---------------|---------------|-------------------------------------|--------------------------------------------|
| Group: A                               | Bottle Type: | PT-50ML            | # of Bottles: 3 | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 1                                          |
| BLOOM-ID                               |              |                    |                 |               |               |                                     |                                            |
| Group: B                               | Bottle Type: | BP-1L              | # of Bottles: 3 | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 1                                          |
| CHLSUITE-W                             |              |                    |                 |               |               |                                     |                                            |
| Group: B                               | Bottle Type: | BG-250ML-WDMT<br>H | # of Bottles: 3 | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 1                                          |
| W-MCYST-AA                             |              |                    |                 |               |               |                                     |                                            |
| Group: B                               | Bottle Type: | P-500ML            | # of Bottles: 3 | Preservative: | ICE And H2SO4 | Enter Number of Bottles Sent to Lab | 1                                          |
|                                        |              |                    |                 |               |               |                                     | H2SO4<br>LOT# SA1308030<br>EXP: 12/01/2022 |
| W-NH3<br>W-NO2NO3<br>W-S-A-TP<br>W-TKN |              |                    |                 |               |               |                                     |                                            |
| Group: B                               | Bottle Type: | P-125ML            | # of Bottles: 3 | Preservative: | FILTER-ICE    | Enter Number of Bottles Sent to Lab | 1                                          |
| W-PO4-F                                |              |                    |                 |               |               |                                     |                                            |

Date of Request: 04-MAR-2022  
 Created By: PARRISH\_J On: 04-MAR-2022  
 Modified By: JASROTIA\_P On: 09-MAR-2022  
 Customer: WQAP  
 Project: BLOOM-RESP  
 Division: Division of Environmental Assessment and Restoration  
 District:  
 Event Description: Algal Bloom Response- Alachua Co. for NERO

**Send Coolers To:**

Phone: 352-264-6833  
 408 W.University Ave. suite 106  
  
 Gainesville, FL 32601  
 Attn: Greg Owen  
 Cooler Ship EMail: gowen@alachuacounty.us

Priority: 1  
 Event Status: S  
 Criminal Investigation: NO  
 Chemistry Request Reviewed By: AYRES\_J On: 09-MAR-2022  
 Biology Request Reviewed By: JASROTIA\_P On: 09-MAR-2022  
 Sampling Kit Required: YES Ship on: 18-MAR-2022  
 Sampling Kit Shipped: YES On: 14-MAR-2022  
 Sampling Kit Packed By: SHAIK\_A  
 Preservatives Needed: YES  
 Date to Receive Samples: 28-MAR-2022  
 Logged In By:

**Send Final Report To:**

8800 Baymeadows Way West  
  
 Jacksonville, FL 32256  
 Attn: Jeremy Parrish  
 Report Notification EMail:  
 Jeremy.M.Parrish@dep.state.fl.us;gowen@alachuacounty.us;Amelia.Rankin@dep.state.fl.us

Comments: Unless peak algal bloom season, may analyze toxin after consultation with Biology's Taxonomy Manager.

Bottle Group A - Priority 1  
 For algal dominant taxon.

Bottle Group B - Priority 1  
 For toxin testing, nutrients, and chlorophyll, algal full ID

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.

\*Add Sulfuric acid vials for preservative 1 per kit\*

**Bottle Group A (Biological) With 3 Samples:**

|                      |                      |                                                                     |
|----------------------|----------------------|---------------------------------------------------------------------|
| Bottle Type: PT-50ML | Number of Bottles: 3 | Preserved With: ICE                                                 |
| BLOOM-ID             | Template: DEFAULT    | (SOP-AB05) Assessment of dominant algal taxa in bloom or mat sample |

**Bottle Group B (Water) With 3 Samples:**

|                             |                      |                                                                                                              |
|-----------------------------|----------------------|--------------------------------------------------------------------------------------------------------------|
| Bottle Type: BP-1L          | Number of Bottles: 3 | Preserved With: ICE                                                                                          |
| CHLSUITE-W                  | Template: DEFAULT    | (SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, and phaeophytin by spectrophotometry |
| Bottle Type: BG-250ML-WDMTH | Number of Bottles: 3 | Preserved With: ICE                                                                                          |
| W-MCYST-AA                  | Template:            | (EPA 8321B) Microcystins in water matrices by HPLC/MS/MS                                                     |
| Bottle Type: P-500ML        | Number of Bottles: 3 | 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                                             |

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**Bottle Group B (Water) With 3 Samples:**

Bottle Type: P-125ML      Number of Bottles: 3      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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\* - The laboratory is not NELAP certified for this analyte/method, or certification is not applicable.