

RQ-2021-10-11-66

Login Checklist

Login Station ID: #2

Shipping Method: FedEx | UPS | HD | Greyhound

Date/Time of Receipt: 10/14/2021 9:15

*Cooler Temperature	Samples Frozen? YES	* All Samples in Cooler Preserved with		Number of Sample Containers in Cooler	Evidence Tape				Waybill Tracking #
		HNO ₃	Formalin		Present?		*Intact?		
					Yes	No	Yes	No	
0.6				5		✓			5225 5540 2984

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: 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 < 2.0?

Yes ☒ No _____ NA _____ Init: IM

**W-1-4-DIOX (Green dot on container) preserved to pH < 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: 10/14/2021

Event contains NCRs (Y/N)? ☒

Event ID:

Algal Bloom Response - SE ROC
 WQAP-2021-10-14-01 (BLOOM-RESP)
 Date Received: 14-OCT-2021 09:15

Login Checklist

Login Preservation Equipment

Lot # & Exp: Date

Additional Comments:

Infrared Thermometer ID:	IR TEMP GUN #2 exp:10/28/21
pH Test Strips 0 – 6	
pH Paper 0 – 3	
pH Paper 0 – 13	219019 exp: 7/1/22
Chlorine Test Strips	0129 exp: 03/2023

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: _____

Request Number: ~~RQ-2021-09-27-18~~ ^{JS} RQ-2021-10-11-66

Florida Department of Environmental Protection
Central Laboratory Submittal Form

Page 1 of 2

last revised Jan 25, 2018

SMP - ~~Greenfield-LV~~ ^{SE} ROC HAB
WRAP as needed
Customer: ~~SE-DIST~~

Requester: Jordan Skaggs

Field Report Prepared By:

Jordan Skaggs

Collected By:

Jordan Skaggs, Drew Liddick

Sampling Agency:

21FLWPB

^{JS} Project ID: ~~SMP~~ HAB

Location <u>Lake Ida - Lakeview Park</u>		☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>10/13/2021</u> Time <u>15:00</u>		☒ Eastern ☐ Central	Composite end Date _____ Time _____		Bottle Group(s) (See pg 2) <u>A, B</u>
Field ID <u>SEHAB0069</u>		Matrix (type, e.g., Salt, Fresh, etc) <u>FRESH</u>		Diss. Oxygen <u>9.57</u>	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____		
WIN/STORET #		Temp (C) <u>30.1</u>	pH <u>8.34</u>	Sample Depth _____	☐ ft ☒ m	Sp. Conductance (umho/cm) <u>445.5</u>		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) <u>0.21</u>		Comments				
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____		☐ Eastern ☐ Central	Composite end Date _____ Time _____		Bottle Group(s)
Field ID		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____		
WIN/STORET #		Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm) _____		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)		Comments				
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____		☐ Eastern ☐ Central	Composite end Date _____ Time _____		Bottle Group(s)
Field ID		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____		
WIN/STORET #		Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm) _____		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)		Comments				
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____		☐ Eastern ☐ Central	Composite end Date _____ Time _____		Bottle Group(s)
Field ID		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____		
WIN/STORET #		Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm) _____		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)		Comments				
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____		☐ Eastern ☐ Central	Composite end Date _____ Time _____		Bottle Group(s)
Field ID		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____		
WIN/STORET #		Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm) _____		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)		Comments				

Relinquished By: <u>JS FDEP</u>	Date/Time <u>10/13/2021</u>	Shipping Method <u>Fedex</u>	Number of Coolers Shipped: <u>1</u>	Received By: <u>IM</u>	Date/Time <u>10/14/21 9:15</u>
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- Lab submittal form for other sample in cooler (RQ-2021-09-27-18) submitted electronically for SMP project

Group: A Bottle Type: P-1L # of Bottles: 1 Preservative: ICE Enter Number of Bottles Sent to Lab _____

~~ALKALINITY
 TURBIDITY
 W-CL-IC
 W-COLOR
 W-F
 W-SO4-IC
 W-TDS
 W-TSS~~

Group: ~~A~~ B Bottle Type: BP-1L # of Bottles: 1 Preservative: ICE Enter Number of Bottles Sent to Lab 1

CHLSUITE-W

Group: ~~A~~ B Bottle Type: P-500ML # of Bottles: 1 Preservative: ICE And H2SO4 Enter Number of Bottles Sent to Lab 1

W-NH3
 W-NO2NO3
 W-S-A-TP
 W-TKN
 W-TOC

Group: ~~A~~ B Bottle Type: P-125ML # of Bottles: 1 Preservative: FILTER-ICE Enter Number of Bottles Sent to Lab 1

W-PO4-F

Group B - W-MCYST-AA - 1

Group A - BLOOM-ID - 1

Date of Request: 11-OCT-2021
 Created By: SKAGGS_J On: 11-OCT-2021
 Modified By: AYRES_J On: 13-OCT-2021
 Customer: WQAP
 Project: BLOOM-RESP
 Division: Division of Environmental Assessment and Restoration
 District: SE ROC
 Event Description: Algal Bloom Response - SE ROC

Send Coolers To:

Phone: 772-448-5884
 2199 South Rock Road

 Fort Pierce, FL 34945
 Attn: Jordan Skaggs
 Cooler Ship EMail: jordan.skaggs@floridadep.gov

Priority: 3
 Event Status: R
 Criminal Investigation: NO
 Chemistry Request Reviewed By: AYRES_J On: 13-OCT-2021
 Biology Request Reviewed By: AYRES_J On: 13-OCT-2021
 Sampling Kit Required: NO Ship on:
 Sampling Kit Shipped:
 Sampling Kit Packed By:
 Preservatives Needed: NO
 Date to Receive Samples: 13-OCT-2021
 Logged In By: KLUG_K On: 13-OCT-2021

Send Final Report To:

2199 South Rock Road

 Fort Pierce, FL 34945
 Attn: Jordan Skaggs
 Report Notification EMail:
 jordan.skaggs@floridadep.gov;drew.liddick@floridadep.gov;andrew.luering@floridadep.gov

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.

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

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

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