

C45 ANIONS IN SOIL

1.0 Sample Reception

- 1.1 Provided as 4 x 40g ready-to-analyse soil samples.
- 1.2 All breakages and shortages must be reported within 24 hours of sample receipt.
- 1.3 Store samples at $4^{\circ}\text{C} \pm 2^{\circ}\text{C}$. Keep samples tightly sealed until analysis. Samples are stable for the duration of the study.
- 1.4 Check that all the analytes for which you are registered are correctly identified on the web data entry report page. If an analyte is missing, report the results for the missing analyte in the comments field. Be sure to include information about the method used.
- 1.5 Inquiries regarding samples and their shipment may be directed to:

PT Non-conformances

Phenova

Tel: (866) 942-2978

Fax: (866) 283-0269

Email: TyG@phenova.com

cc: PT Canada, Program Administrator

email: programadmin@PTcanada.org

cc: Ken Middlebrook, PT Canada

email: kmiddlebrook@PTcanada.org

Inquiries must be made by email only. Use the enclosed Nonconformance Form (see reverse) when notifying PT Canada of a problem with the samples. Please include your PT Canada laboratory number on all correspondence.

2.0 Sample Analysis

- 2.1 Sample concentrations are in the typical range for organic soils.
- 2.2 Proceed with testing using the routine analytical method identified in your PT Canada application.

3.0 Reporting Results

- 3.1 Results are to be reported in $\mu\text{g/g}$ (mg/kg).
- 3.2 Results are to be reported on a dry-weight basis.
- 3.3 Results must be reported by midnight of the study deadline (see the General Proficiency Testing Information sheet for details).

4.0 Safety

- 4.1 The PT samples are designed for use by laboratory professionals familiar with environmental samples and potentially hazardous materials.

PT SAMPLE NON-CONFORMANCE FORM

Attn: PT non-conformances

Study Number:

ENSURE THAT SAMPLES RECEIVED MATCH REPORT FORMS

1 - Laboratory Information

Contact Name:

Laboratory Name

Laboratory Address

Contact Telephone #

Contact Facsimile #

Contact e-mail:

2 - Sample Details

Date & Time of Arrival(YYYY,MM,DD,HH:MM):

Tracking Number:

Test Groups Received (e.g. C1, C2 etc.):

Number of Boxes:

3 - Description of Nonconformance

4 - Requested Action

5 - PT Provider Notes