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C43 SOLIDS IN SOIL

1.0 Sample Reception

- 1.1 All breakages and shortages must be reported within 24 hours of sample receipt.
- 1.2 Store samples as per laboratory protocol. Keep samples tightly sealed until analysis. Samples are stable for the duration of the study.
- 1.3 Check that all the parameters for which you are registered are correctly identified in the PTC portal. If not, report results for missing analyte in the comments field and provide information on method used.
- 1.4 Inquiries regarding samples and their shipment may be directed to:

PT Non-conformances Information and Quality Management Environment and Climate Change Canada

fax: 905-336-8914

email: ec.ptnc.ec@canada.ca

cc: PT Canada, Program Officer email: <u>programofficer@PTcanada.org</u> cc: Ken Middlebrook, PT Canada email: <u>kmiddlebrook@PTcanada.org</u>

Inquiries should be made by email if possible. Use the Nonconformance Form (see reverse) when sending a fax. When reporting damage upon receipt, please provide a picture of the damaged 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 clean and organic soils. Approximate sample concentrations are detailed in PAR-02 Catalogue.
- 2.2 Proceed with testing using the routine analytical method identified in your PT Canada application. Samples for Total Solids/Moisture are to be dried at 105°C. Samples for Fixed Solids/Volatile Solids are to be ignited at 550°C.

3.0 Reporting Results

- 3.1 Results are to be reported on percentage basis. Do not include the % sign.
- 3.2 Results must be reported by midnight of the study deadline in the PTC portal.

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:
<u>Laboratory Name</u>
<u>Laboratory Address</u>
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
3 - Description of Noncomormance
4 - Requested Action
T - Requested Action
5 - PT Provider Notes
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