

An Overview of the DOD/DOE/TNI/State Assessments- Accreditation Requirements and Common Findings

Presented by:
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Environmental Program Advisor, Lead Assessor

Tuesday, June 14, 2022
10:00 am-11:00 AM EDT



Presentation Overview



**Discuss Accreditation
Criteria and
Expectations**

**Overview of Field
Assessment Common
Findings**

Questions & Answers



PJLA

Webinar Housekeeping

- This webinar will be recorded
- All PJLA webinars are made available on our website & YouTube channel
 - ▶ <https://www.pjlab.com/training/pjla-webinars/past-webinars>
- All attendees are muted
- Please utilize the question tool bar to submit questions
 - ▶ To be answered at the end of presentation

PJLA Environmental Programs

- ▶ DOD ELAP and DOECAP
 - ▶ QSM Version 5.4
- ▶ TNI EL NGAB-Non governmental - TNI EL 2016 Standard
- ▶ TNI NEFAP -TNI FSMO Volume 1 - Field Sampling and Measurement
- ▶ FL DOH-TNI EL - TPA Assessor Only
- ▶ CA ELAP-TNI EL, TNI EL Minus 2 or CA Regs - TPA Assessor
- ▶ MNLEAP-TNI EL -TPA
- ▶ ISO/IEC 17025
- ▶ EPA NLLAP-Lead Program

Accreditation Criteria -Schedules

- ▶ All programs require slightly different criteria in regard to assessment schedules
- ▶ Note all program criteria must be met
- ▶ Lab may have to go earlier for certain programs to accommodate them all
- ▶ Most programs follow ISO/IEC 17011 requiring a full system assessment to be completed every 2 years
- ▶ Extensions of accreditation are not allowed for DOE or DOD programs unless extreme circumstances arise
 - ▶ Labs are encouraged to review due dates, coordinate with PJLA on a time period that will allow enough time to complete the assessment; Corrective action process and certificate issuance

Accreditation Criteria

-Pre-Documentation

- ▶ All labs are required to have a documentation review 30 days in advance of the on site assessment
- ▶ If you are accredited with a state program; PTs are important to be completed; fees; application criteria etc.
- ▶ Failure to provide PT prior to an assessment may cause tests to be eliminated from the assessments, NCRS or overall delay and issues with the state's decision
- ▶ DOD/DOE PTS are also required to be submitted to pt@pjlabs.com to ensure the frequency requirements are met; PT failures will cause tests or particular analytes to be removed off of the scope or an NCR to be written requiring passing results
- ▶ Provide LODs/LOQs, Data Package, PTs, Technical SOPs, Internal Audits, past assessments/CA Results etc. competed readiness checklist 30 days in advance to PJLA

Accreditation Criteria- Assessment Reporting

- ▶ Depending on the assessment i.e. single program or multiple standard, laboratories may receive multiple reports
- ▶ DOD/DOE/TNI EL NGAB - Combined report; may have specific NCRS to DOD or DOE only, TNI
- ▶ State programs - TNI EL, State Regulations, Separate Report based on state requirements
- ▶ PJLA has all reports reviewed by program management after the assessment
 - ▶ DOD/DOE TNI NGAB - Final report issued at the end of the assessment
 - ▶ CA ELAP or FL DOH - Final report reviewed by PJLA HQ and issued to the lab after noting that is the final report and corrective action timelines and submittal instructions are provided

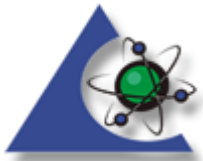
Accreditation Criteria-

Corrective Action Criteria

- ▶ PJLA accreditation program (PJLA issues the certificate)- requires corrective action to be provided within 60 days -includes cause and evidence of implementation on the lab's internal corrective action form
- ▶ FL DOH-PJLA utilizes FL's Corrective action form; Labs should provide a plan 30 days from the release of the final report. The report is usually released about 7 days after the assessment.
- ▶ Once corrective action is approved a recommendation letter is provided to the state which includes the date and type of assessment, when corrective action was provided by the lab, when PJLA approves it and our recommendation for renewal, initial accreditation, scope expansion, scope reduction etc.
- ▶ CA ELAP -PJLA has internal corrective action forms; labs should provide a corrective action plan 30 days from the release of the final report. The report is usually released about 7 days after the assessment.
- ▶ Once corrective action is approved a recommendation letter will be provided with a copy of the checklist utilized. The recommendation letter will include the date and type of assessment, when corrective action was provided by the lab, when PJLA approved it and our recommendation for renewal, initial accreditation, scope expansion, scope reduction, etc.

Common Findings (TNI and DoD/DOE QSM)

Findings Detected on Environmental Lab Assessments

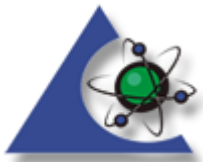


Common Findings (TNI and DoD/DOE QSM)

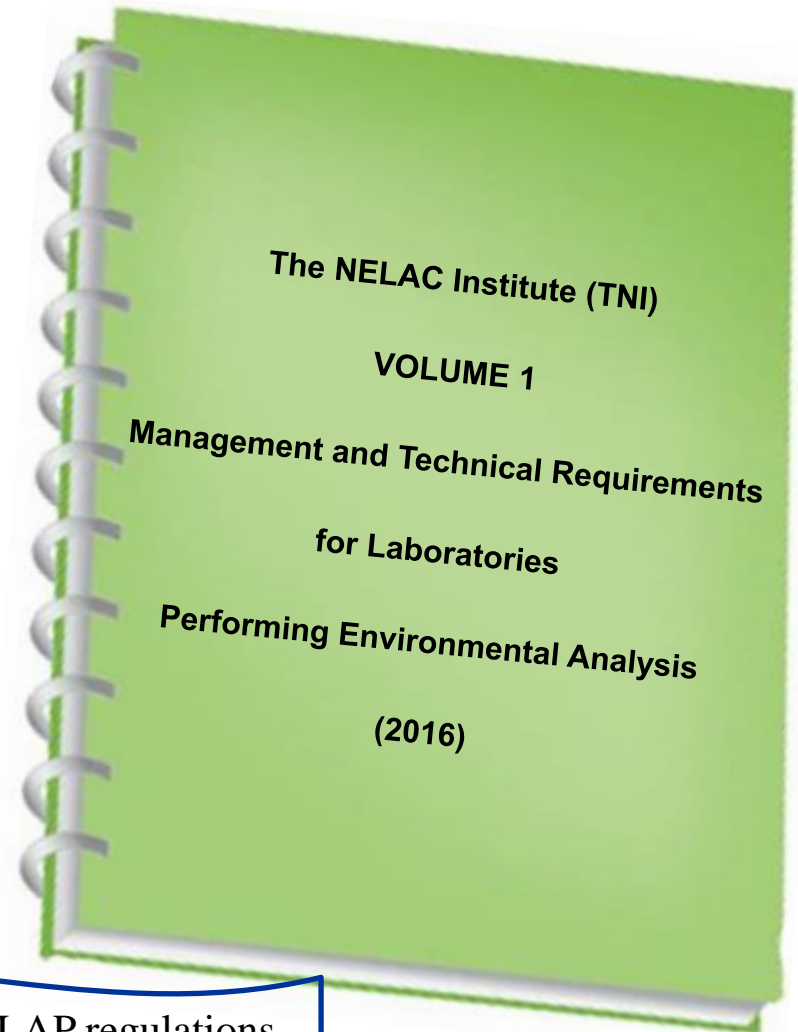
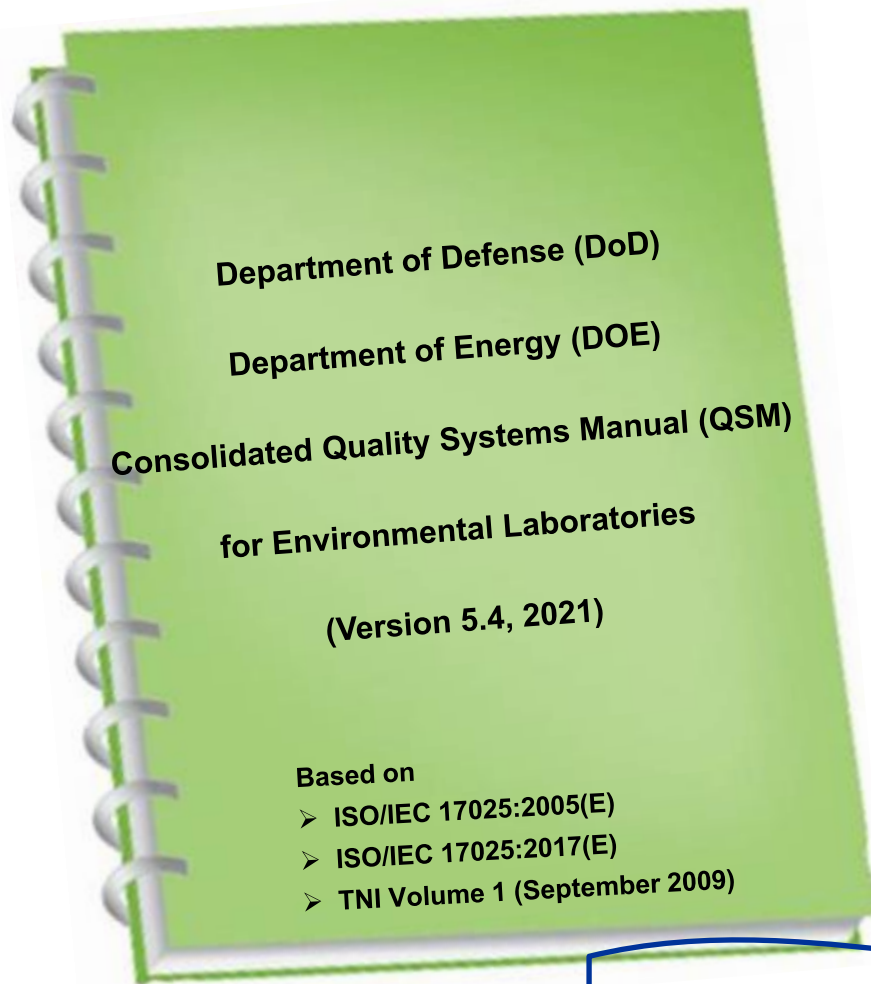
Findings Detected on Environmental Lab Assessments

Course Mechanics:

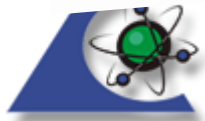
- (1) Phone lines and computers are muted. Use **Question** tab in Control Panel
 - identify slide # if applicable
- (2) This is being recorded (slides and webinar will be available on PJLA website)
- (3) Tracy Szerszen (PJLA President) is also joining the Webinar
 - will be monitoring questions in the **Question** tab



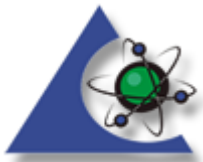
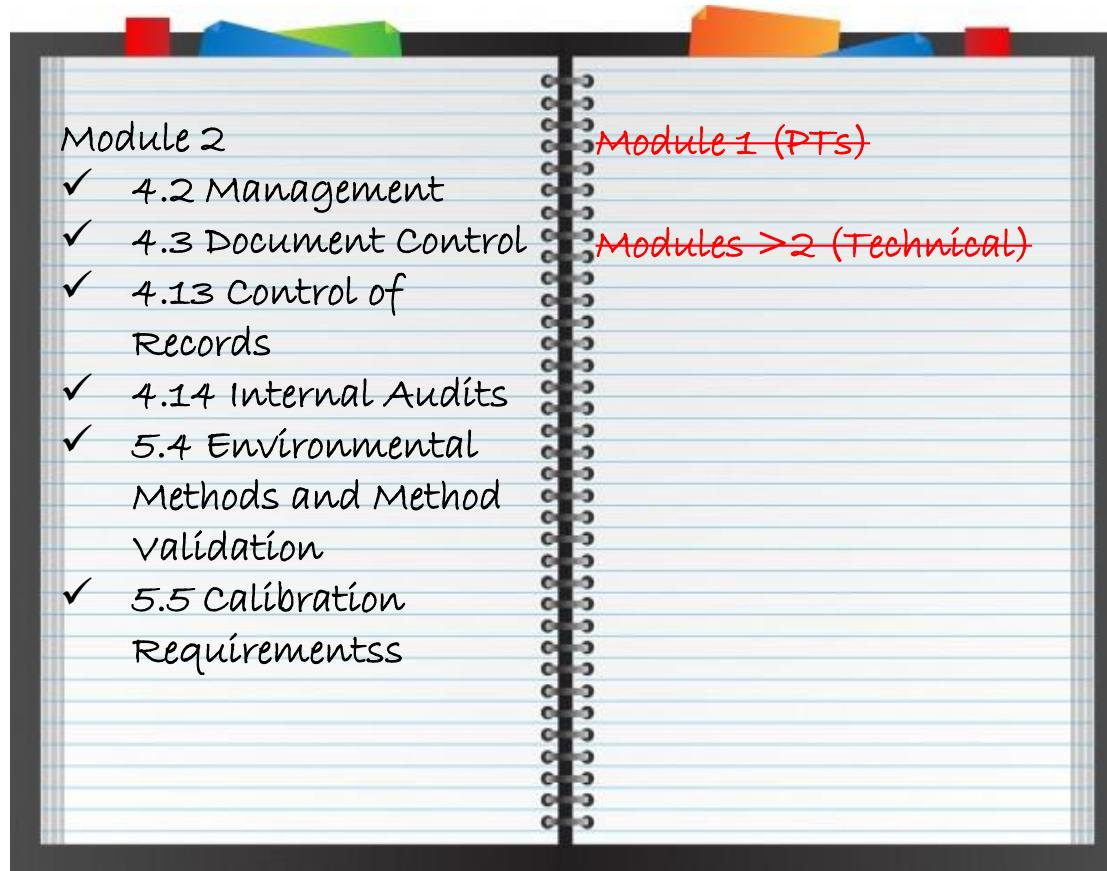
Common Findings (TNI and DoD/DOE QSM)



A sprinkle of CA-ELAP regulations



Common Findings (TNI and DoD/DOE QSM)



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

4.2 Management

4.2.8 Additional Management System Requirements

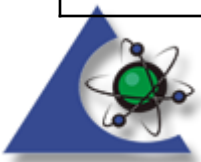
4.2.8.4 The quality manual shall contain or reference procedures for audits and data review;



DoD/DOE Requirement

Data reviews shall consist of a tiered or sequential system of verification, consisting of at least **three tiers**, 100% review by the analyst, 100% verification review by a technically qualified supervisor or data review specialist, and a final administrative review.

The **quality manager or designee shall review a minimum of 10%** of all data packages for technical completeness and accuracy on a quarterly basis.



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

4.2 Management

4.2.8 Additional Management System Requirements

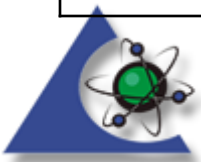
4.2.8.4 The quality manual shall contain or reference procedures for audits and data review;



DoD/DOE Requirement

If electronic audit trail functions are available, they must be in use at all times, and associated data must be accessible.

If the instrument does not have an audit trail, the laboratory must have procedures to record the integrity of the data.



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

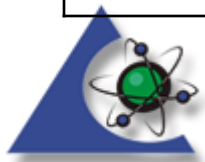
4.2 Management

4.2.8 Additional Management System Requirements

4.2.8.5 Laboratories shall maintain SOPs that accurately reflect all phases of current laboratory activities, such as assessing data integrity, corrective actions, handling customer complaints, and all methods.



Effective/Adequate
- SOP reviews?
- Internal audits?



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

4.2 Management

4.2.8 Additional Management System Requirements



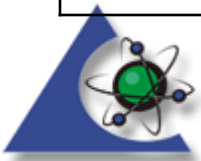
CA ELAP Regulations

(64812.00)

Quality Manager Requirements (TNI 2016 V1M2 4.1.5(i), 4.1.7.1, 4.2.6, 4.2.8.2 and 4.14.1)

(64812.05, 64812.15 & 64814.00)

Various Quality Manual requirements



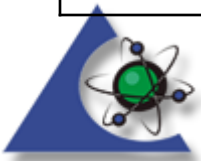
Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

4.3 Document Control

4.3.1 The laboratory shall establish and maintain procedures to control all documents that form part of its management system (internally generated or from **external sources**), such as regulations, standards, other normative documents, test and/or calibration methods, as well as drawings, software, specifications, instructions and **manuals**.

Standards (TNI, DoD/DOE QSM, ISO/IEC 17025)
PJLA Policies/Procedures
Test Methods
Equipment manuals



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

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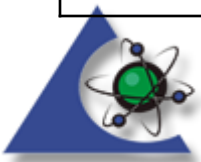
4.3.2.1 All documents issued to personnel in the laboratory as part of the management system shall be reviewed and **approved** for use by authorized personnel prior to issue. A **master list** or an equivalent document control procedure identifying the **current revision status** and distribution of documents in the management system shall be established and shall be readily available to preclude the use of invalid and/or obsolete documents.



Example Finding:

The document control program was not current or accurate.

- SOP LAB-567 referenced the ICP/MS instrument manual; however, that manual was not included in the controlled document program or master list.
- PJLA policies and the TNI standard were not identified on the master list of documents.
- Documents in use (e.g., SOP AB-77 Rev. 7) did not have evidence of approval for use.
- The master list of documents was missing procedures.
- The master list of documents identified obsolete procedure revisions.



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

4.3 Document Control

4.3.2.2 The procedure(s) adopted shall ensure that:

- a) **authorized editions** of appropriate documents are available at all locations where operations essential to the effective functioning of the laboratory are performed.

DoD/DOE Requirements

4.3.2.2

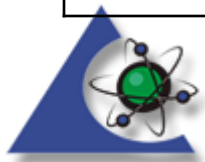
- g) **any documents providing instructions** to laboratory personnel (e.g., **operator aids**) are considered part of the management system and are subject to document control procedures.



Example Findings:

SOP LAB-567 referenced the ICP/MS instrument manual; however, that manual was not included in the controlled document program or master list.

Operator aids observed in the laboratory were not controlled (e.g., not identified in document control program, not authorized for use, no revision information, no ID)




Common Findings (TNI and DoD/DOE QSM)

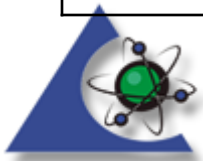
Module 2: Quality Systems General Requirements 4.0 Management Requirements

4.3 Document Control

4.3.2.2 The procedure(s) adopted shall ensure that:

- a) authorized editions of appropriate documents are available at all locations where operations essential to the effective functioning of the laboratory are performed;
- b) documents are **periodically reviewed** and, where necessary, revised to ensure continuing suitability and compliance with applicable requirements.

TNI 2016	DoD/DOE QSM 5.4
4.3.2.2 Periodically reviewed 	4.2.8.5 g) All technical SOPs (e.g., sample preparation, analytical procedures, sample storage, or sample receipt) shall be reviewed for accuracy and adequacy at least annually and updated if necessary.



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

4.3 Document Control

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DoD/DOE Requirement

4.3.2.2 f) **reviews (internal or external)** of management system documentation shall be maintained



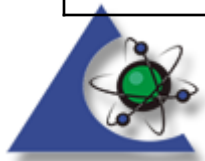
External documents require periodic review
(at a minimum to verify the revision has not changed).



Example Findings:

Not all procedures had evidence of biannual reviews in accordance with procedure ADM-009 Rev. 2.

There was no evidence of periodic review of external management system documentation.



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

4.3 Document Control

4.3.2.2 The procedure(s) adopted shall ensure that:

- a) authorized editions of appropriate documents are available
- b) documents are periodically reviewed for compliance with applicable

DoD/DOE
4.3.2.2

Comments/Notes

Recommended Action

Acceptable As Is ☐

Revision Required* ☐

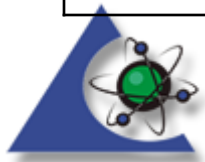
Cancel/Retire Procedure ☐

Review Upon Use ☐

essential to
ility and



There was no evidence of biannual reviews in accordance with procedure ADM-
There was no evidence of periodic review of external management system documentation.



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

4.3 Document Control

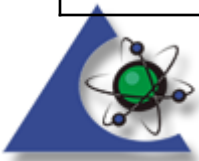
4.3.2.2 The procedure(s) adopted shall ensure that:

- a) authorized editions of appropriate documents are available at all locations where operations essential to the effective functioning of the laboratory are performed;
- b) documents are periodically reviewed and, where necessary, revised to ensure continuing suitability and compliance with applicable requirements;
- c) **invalid or obsolete documents are promptly removed** from all points of issue or use, or otherwise assured against unintended use;
- d) obsolete documents retained for either legal or knowledge preservation purposes are suitably marked.



Example Finding:

Obsolete versions of procedures were observed in laboratory areas.



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

4.3 Document Control

4.3.2.2 The procedure(s) adopted shall ensure that:

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- c) invalid or obsolete documents are promptly removed from all points of issue or use, or otherwise assured against unintended use;
- d) obsolete documents retained for either legal or knowledge preservation purposes are suitably marked.

5.8.6 Additional Requirements – Sample Acceptance Policy

The laboratory shall have a written sample acceptance policy that includes the following (a-g)

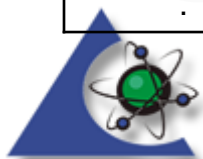
5.8.8 Additional Requirements – Legal Chain of Custody Protocols

Legal chain of custody procedures are used for evidentiary or legal purposes. If a client specifies that a sample is to be used for evidentiary purposes, then a laboratory shall have a written SOP for how that laboratory will carry out legal chain of custody.

DoD/DOQ QSM 5.4 4.2.8.1 c) The laboratory shall have a documented program to detect and deter improper or unethical actions.

Various requirements for documented information

Important



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

4.3 Document Control

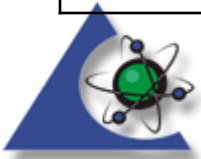
4.3.2.3 Management system documents generated by the laboratory shall be **uniquely identified**. Such identification shall include the **date of issue and/or revision** identification, **page numbering**, and the **total number of pages or a mark to signify the end of the document**, and the **issuing authority(ies)**.

4.3.3.2 Where practicable, the altered or new text shall be identified in the document or the appropriate attachments.



Example Finding:

Not all procedures included page numbering or issuing authorities.

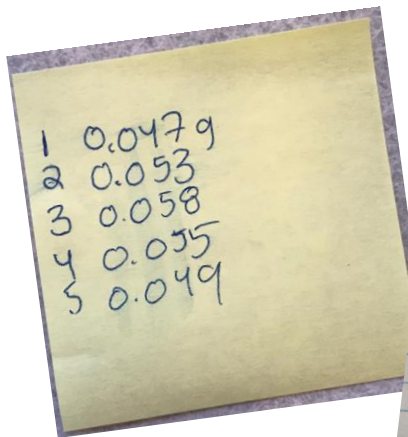


Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

4.13 Control of Records

4.13.2.1 The laboratory shall retain records of **original observations**, derived data and sufficient information to establish an audit trail.

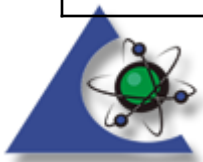


Original observations

Sample	Time	Result
1	0830	17.8
2	0900	23.6
3	0930	25.4
4	1000	25.8



Observed Temp. and
Corrected Temp.



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

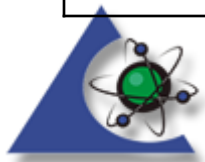
4.13 Control of Records

4.13.2.1 The laboratory shall retain records of original observations, derived data and sufficient information to establish an **audit trail**..... The records for each test or calibration shall contain sufficient information to facilitate, if possible, **identification of factors affecting the uncertainty** and to enable the test or calibration to be **repeated** under conditions as close as possible to the original. The records shall include the identity of personnel responsible for the sampling, performance of each test and/or calibration and checking of results.

Example Finding:

Laboratory records did not always provide sufficient evidence to establish an audit trail or to facilitate identification of factors affecting the uncertainty. For example,

- *Weight set IDs not on balance verification records*
- *Thermometer IDs not on temperature monitoring records*
- *Lot #s not on test records*
- *Identification of person performing the activity not identified on test records*

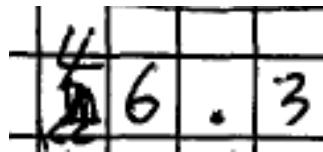


Common Findings (TNI and DoD/DOE QSM)

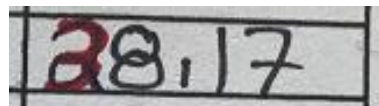
Module 2: Quality Systems General Requirements 4.0 Management Requirements

4.13 Control of Records

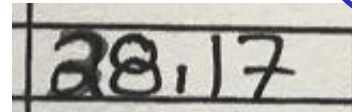
4.13.2.3 When mistakes occur in records, each mistake shall be crossed out, **not erased, made illegible or deleted**, and the correct value entered alongside. All such alterations to records shall be **signed or initialed** by the person making the correction.



Lost **original observation**

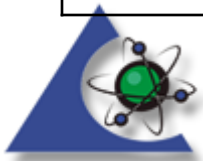


Original



Duplication

Also needs to be
reproducible
(scans/copies)



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

4.13 Control of Records

4.13.3 Additional Requirements

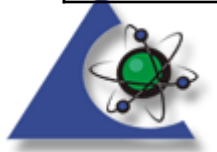
- b) The laboratory shall retain all records for a minimum of **five (5) years** from generation of the last entry in the records.
- e) Access to archived information shall be **documented with an access log**.
- f) All information necessary for the historical reconstruction of data shall be maintained by the laboratory.....**i-xix**
 - xix. a **record of names, initials, and signatures** for all individuals who are responsible for signing or initialing any laboratory record.

Name	Initial	Signature
Tom Hanks	TH	<i>Tom Hanks</i>



Example Finding:

Initials on records were not always traceable on the signature/initial log to identify personnel performing activities.



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

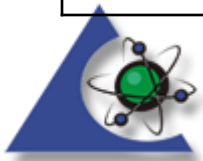
4.13 Control of Records

4.13.3 Additional Requirements

h) The laboratory shall have a plan to ensure that the records are maintained or transferred according to the clients' instructions in the event that a laboratory transfers ownership or goes out of business.



Policies/Procedures



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

4.13 Control of Records

DoD/DOE Requirements

4.13.4 Permanent, **bound laboratory notebook**s (logbooks) or notebooks with measures in place to prevent the removal or addition of pages are required if utilized. Electronic logbooks are acceptable. For permanent, bound logbooks the following applies:

- a) laboratory notebook pages shall be **pre-numbered**, all entries shall be signed or initialed and dated by the person responsible for performing the activity at the time the activity is performed, and all entries shall be recorded in chronological order;
- b) all notebook pages must be closed when the activities recorded are completed or carried over to another page. The person responsible for performing the closure shall be the one who performed the last activity recorded. **Closure shall occur at the end of the last activity** recorded on a page, as soon as practicable, thereafter. Satisfactory records of closure include analyst initials and date; and
- c) each laboratory notebook shall have a **unique serial number** clearly displayed.

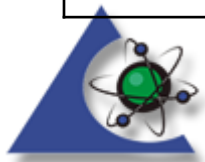


Example Findings:

Not all logbooks prevented removal or addition of pages (3-ring binder).

Logbooks were not paginated or identified the total number of pages (or mark to signify the end of the document).

Not all logbooks had a unique ID



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 4.0 Management Requirements

4.14 Internal Audits

4.14.1 The laboratory shall periodically, and in accordance with a predetermined schedule and procedure, conduct internal audits of its activities to verify that its operations continue to comply with the requirements of the management system and this International Standard. The internal audit programme shall address all elements of the management system, including the testing and/or calibration activities.

DoD/DOE Requirements

4.14.6 The audit schedule shall ensure that all areas of the laboratory are reviewed over the course of one year. The review shall include both technical and quality systems areas. The review shall also include raw electronic data files derived from test reports.

4.15.1 Management reviews and internal audits are separate activities.

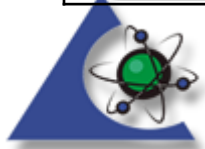
5.4.7.1 f) periodic inspections (at least annually) of the LIMS shall be performed...

Various requirements
applicable to audits



Example Finding:

The laboratory's internal audit plan and audit program/records did not address or include all testing activities.



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

5.4 Environmental Methods and Method Validation

5.4.5.2 The laboratory shall validate non-standard methods, laboratory-designed/developed methods, standard methods used outside their intended scope, and amplifications and **modifications** of standard methods to confirm that the methods are fit for the intended use.



4.2.8.5 f) ..In cases where modifications to the published method have been made by the laboratory or where the referenced method is ambiguous or provides insufficient detail, these changes or clarifications shall be clearly described.

DoD/DOE Requirements

- Various Modules section 1.5 Method Validation
- 5.4 Grey box 24 (ISO/IEC 17025:2017 7.2.2.2 and 7.2.2.4)



Example Finding:

Method modifications were not validated or documented in the SOP.



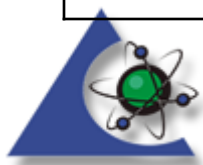
Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

Acting Attorney General Hoffman Announces \$2 Million Settlement of False Claims Act Litigation with Environmental Testing Firm

According to the Settlement Agreement with the DOJ, the United States alleged that [REDACTED] violated the False Claims Act by submitting, under contract with various federal agencies, results of analytical testing which were not performed in accordance with U.S. EPA guidelines. The allegations were disputed by [REDACTED], and it has not admitted any wrongdoing. More specifically, the allegations involved analyses performed during 2011 through 2013 involving semi-volatile organic compounds. The DOJ alleged that, in some cases, the lab did not strictly follow the applicable method by:

1. “not performing the required number of ‘shakes’ and/or not waiting the required period of time between ‘shakes’ of waste water samples, potentially resulting in the inability to fully extract all of the SVOA compounds in the samples;”
2. not ‘spiking’ a soil or waste water sample with a known compound in the correct sequence or manner, potentially affecting the quality control process that ensured all SVOA compounds in a sample were likely to be fully extracted;” and
3. “altering the settings on GC/MS instruments or disregarding calibration protocols.”



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

5.4 Environmental Methods and Method Validation

DoD/DOE Requirements

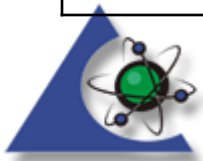
5.4.7.2 h) spreadsheets used for calculations shall be **verified before initial use and after any changes** to equations or formulas, including software revision upgrades, and records shall be available for review. **Formula cells must be write-protected to minimize inadvertent changes to the formulas**. Printouts from any spreadsheets shall include all information used to calculate the data;



Example Findings:

Verification records were not available for spreadsheets used for calculations.

Formula cells were not write-protected in spreadsheet used for calculations.



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

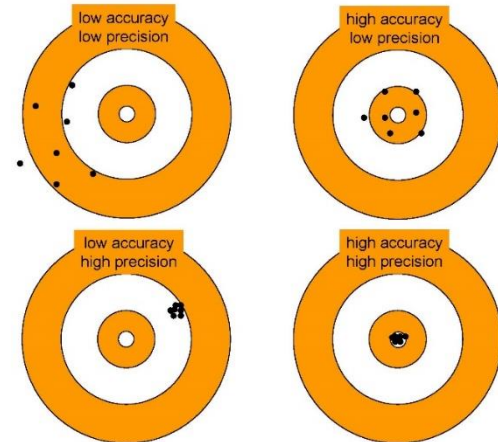
5.5 Calibration Requirements

5.5.2 Equipment and its software used for testing, calibration and sampling shall be **capable of achieving the accuracy** required and shall comply with specifications relevant to the tests and/or calibrations concerned.

5.5.13.1 f) ...shall be calibrated or verified...bracketing the range of use.

DoD/DOE Requirements

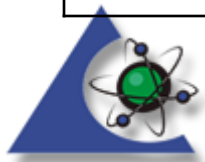
5.5.13.1 d) These checks must be performed in the expected use range



Example Finding:

No all equipment had evidence of capability to achieve accuracy

- Thermometer accuracy ($\pm 1^{\circ}\text{C}$) was not sufficient for test specifications (e.g., incubator = $35 \pm 0.5^{\circ}\text{C}$, water bath = $44.5 \pm 0.2^{\circ}\text{C}$).
- Thermometers were not calibrated covering the range of use.



Common Findings



Fisherbrand™ Traceable™ Sentry™ Thermometer

Shows current, high and low temperatures simultaneously.
Fisherbrand™ Traceable™ Sentry™ Thermometer instantly shows if water bath, freezer or incubator is within temperature specifications and monitors temperature of any experiment, even when you are not there.

Catalog No. S541112

\$54.00 / Each

Qty

Description

- Sensor and 10 ft. (3m) cable may be placed under water, in a refrigerator or in a freezer
- Small cable diameter (1.5mm) allows refrigerator doors to close on it
- Simple one-button operation resets high/low memories
- A probe wire mounting bracket permits easy sensor placement
- Unit's high-impact ABS plastic case has a flip-open stand, plastic hanging hook, magnet and Velcro™ mounting tape

Specifications

- Range: -50° to +70°C (-58° to +158°F)
- Resolution: 1°
- Accuracy: ±1°C
- Dimensions: 2.68 x 2.68 x 0.76 in. (67 x 67 x 19mm)
- Weight: 0.1 oz. (4g)

Specifications

Temperature Range (Metric) -50° to 70°C

Min. Temperature (Metric) -50°C

Max. Temperature (Metric) 70°C

Certifications/Compliance ISO 17025, A2LA, NIST

Dimensions (L x W x H) 2.5 x 2.6 in. (6.3 x 6.6cm)

D
Re

Calibration complies with ISO/IEC 17025, ANSI/NCSL Z540-1, and 9001

Cert. No.: 4121-6923164

Traceable® Certificate of Calibration for Sentry Thermometer °C

Manufactured for and distributed by: Fisher Scientific, P.O. Box 1768, Pittsburgh, PA 15230

Instrument Identification: [Redacted]

Model: S54111-2 S/N: 150547310 ✓ Manufacturer: Control Company

Standards/Equipment:

Description	Serial Number	Due Date	NIST Traceable Reference
Temperature Calibration Bath TC-256	B01375		
Temperature Probe	128	4/02/16	15-A0P2S-40-1
Thermistor Module	A17118	3/03/16	1000371058
Temperature Calibration Bath TC-179	A45240		
Thermistor Module	A17118	3/03/16	1000371058
Temperature Probe	3039	4/02/16	15-A0P2S-20-1

Certificate Information:

Technician: BB Procedure: CAL-03 Cal Date: 7/21/15 ✓ Due Date: 7/21/17 ✓

Test Conditions: 23.0°C 48.0 %RH 1014 mBar

Calibration Data: (New Instrument)

Unit(s)	Nominal	As Found	In Tol	Nominal	As Left	In Tol	Min	Max	sU	TUR
°C		N.A.		0.000	-1	Y	-1	1	0.60	1.7:1
°C		N.A.		50.000	50	Y	49	51	0.60	1.7:1

This Instrument was calibrated using Instruments Traceable to National Institute of Standards and Technology.

A Test Uncertainty Ratio of at least 4:1 is maintained unless otherwise stated and is calculated using the expanded measurement uncertainty. Uncertainty evaluation includes the instrument under test and is calculated in accordance with the ISO "Guide to the Expression of Uncertainty in Measurement" (GUM). The uncertainty represents an expanded uncertainty using a coverage factor k=2 to approximate a 95% confidence interval. In tolerance conditions are based on test results falling within specified limits with no reduction by the uncertainty of the measurement. The results contained herein relate only to the instrument calibrated. This certificate shall not be reproduced except in full, without NIST or Control Company approval.

Nominal-Standard Reading: As Left-Instrument's Reading: In Tolerance: Min/Max-Acceptance Range: sU-Expanded Measurement Uncertainty: TUR-Test Uncertainty Ratio: Accuracy=(sU+Min)/C, Min=As Left Nominal(Rounded)+Tolerance, Max=As Left Nominal(Rounded)+Tolerance, DateMM/DD/YYYY

Rod Rodriguez
NIST Rodriguez, Quality Manager

Aaron Johnson
Aaron Johnson, Technical Manager

Maintaining Accuracy:

In our opinion while calibrated your Sentry Thermometer °C should maintain its accuracy. There is no exact way to determine how long calibration will be maintained. Sentry Thermometer °C change site, if any at all, but can be affected by aging, temperature, shock, and contamination.

Recalibration:

For factory calibration and re-certification traceable to National Institute of Standards and Technology contact Control Company.

CONTROL COMPANY 4455 Rex Road Friendswood, TX 77646 USA
Phone 281 482-1714 Fax 281 482-9448 service@control3.com www.control3.com

Control Company is an ISO 17025:2005 Calibration Laboratory Accredited by (A2LA) American Association for Laboratory Accreditation, Certificate No. 1750-01.
Control Company is ISO 9001:2009 Quality Certified by (DNV) Det Norske Veritas, Certificate No. CERT-01805-2009-AQ-HOU-RNA.
International Laboratory Accreditation Cooperation (ILAC) Multilateral Recognition Arrangement (MRA).

Page 1 of 1 Traceable® is a registered trademark of Control Company © 2008 Control Company



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

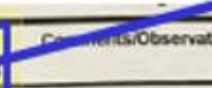
5.5 Calibration Requirements

5.5.2 Equipment and its software used for testing, calibration and sampling shall be capable of achieving the accuracy required and shall comply with specifications relevant to the tests and/or calibrations concerned.

5.5.13.1 Support Equipment

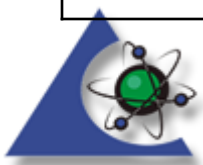
a) The results of any calibration or verification shall be within the specifications required of the application for which this equipment is used.

Acceptance Range 0-6°C



DATE	#4 (0°C to 6°C)	Comments/Observations	DATE	#4 (0°C to 6°C)	Comments/Ob
9/1/2018			9/25/2018	9.0°C	KBC
9/2/2018			9/26/2018	9.0°C	KBC
9/3/2018			9/27/2018	8.0°C	KBC
9/4/2018	10.0°C	KBC	9/28/2018	9.0°C	KBC
9/5/2018	8.0°C	KBC	9/29/2018		
9/6/2018	8.0°C	KBC	9/30/2018		
9/7/2018	8.0°C	KBC			
9/8/2018					

Notes:



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

5.5 Calibration Requirements

5.5.7 Equipment that has been subjected to overloading or mishandling, gives suspect results, or has been shown to be defective or outside specified limits, shall be taken out of service.

It shall be isolated to prevent its use or clearly labelled or marked as being out of service until it has been repaired and shown by calibration or test to perform correctly.

The laboratory shall examine the effect of the defect or departure from specified limits on previous tests and/or calibrations and shall institute the "Control of nonconforming work" procedure

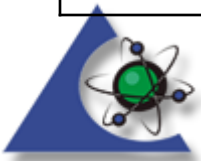
4.9.1 The laboratory shall have a policy and procedures that shall be implemented when any aspect of its testing and/or calibration work, or the results of this work, do not conform to its own procedures or the agreed requirements of the customer. The policy and procedures shall ensure that

b) an evaluation of the significance of the nonconforming work is made

ISO/IEC 17025:2017

7.10.1 The laboratory shall have a procedure that shall be implemented when any aspect of its laboratory activities or results of this work do not conform to its own procedures. The procedure shall ensure that:

d) a decision is taken on the acceptability of the nonconforming work.



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

5.5 Calibration Requirements

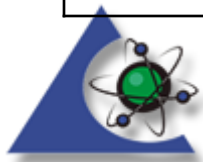
Conventional Mass Value - Mass in Atmosphere

Nominal Value	As Found Value (g)	As Found Correction* (mg)	As Left Value (g)	As Left Correction* (mg)	Uncertainty (mg)	Tolerance (mg)
100 g	100.000097	0.097	100.000097	0.097	0.029	0.25
50 g	50.000314	0.314	50.000030	0.030	0.016	0.12
20 g 1-dot	20.000058	0.058	20.000058	0.058	0.012	0.074
20 g 2-dot	20.000025	0.025	20.000025	0.025	0.012	0.074
10 g	9.999997	-0.003	9.999997	-0.003	0.011	0.074
5 g	5.0000587	0.0587	5.0000312	0.0312	0.0048	0.054
2 g	1.9999984	-0.0016	1.9999984	-0.0016	0.0021	0.054
2 g 1-dot	2.0000096	0.0096	2.0000096	0.0096	0.0021	0.054
1 g	1.0000166	0.0166	1.0000166	0.0166	0.0024	0.054

*Correction is the difference between the conventional mass value of a weight and its nominal value.

Comments:

The 50 g & 5 g weights were out of tolerance plus As Found. They were cleaned and were within NBS Class S tolerances As Left. All other weights listed above were received in good condition and were within NBS Class S tolerances As Found.



Common Findings (TNI and DoD/DOE QSM)

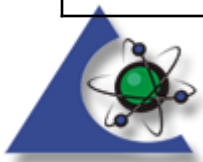
Module 2: Quality Systems General Requirements 5.0 Technical Requirements

5.5 Calibration Requirements

Conventional Mass Value				
Nominal Value	As Found Value (g)	As Found Correction* (mg)	As Left Value (g)	As Left Correction* (mg)
100 g. 1000072730, SLK-004	100.000365	0.365	100.000365	0.365
10 mg. 1000072727, SLK-005	0.01004787	0.04787	0.01001376	0.01376

*Correction is the difference between the conventional mass value of a weight and its nominal value.

Comments: The 100 g weight was received in good condition and was within ASTM Class E1. The 10 mg was out of tolerance plus As Found. It was cleaned and was within ASTM Class E1.



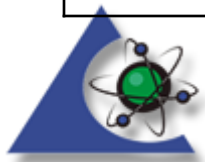
Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

5.5 Calibration Requirements

Item	Make	Model	Serial Number
Autoclave	Market Forge	Sterilmatic	12282020
Units	Readability	SOP	Cal Date
°C	2°C	QC023	12/3/21

FUNCTIONAL CHECKS					
Check Point	Standard As-Found	Temperature		Instrument As-Left	Probe
		Instrument As-Found	Standard As-Left		
121	121.5	10	121.5	10	Center



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

5.5 Calibration Requirements

5.5.7 Equipment that has been subjected to overloading or mishandling, gives suspect results, or has been shown to be defective or outside specified limits, shall be taken out of service.

It shall be isolated to prevent its use or clearly labelled or marked as being out of service until it has been repaired and shown by calibration or test to perform correctly.

The laboratory shall examine the effect of the defect or departure from specified limits on previous tests and/or calibrations and shall institute the "Control of nonconforming work"

4.9.1 The laboratory shall have a policy and procedures that shall ensure that the results of its tests, inspections and/or calibration work, or the results of this work, do not conform to its own procedures or the agreed procedures of the customer. The policy and procedures shall ensure that

b) an evaluation of the significance of the nonconforming work is made

ISO/IEC 17025:2017

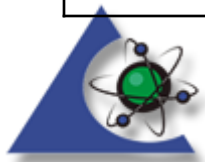
7.10.1 The laboratory shall have a procedure that shall be implemented when any aspect of its laboratory activities or results of this work do not conform to its own procedures. The procedure shall ensure that:

d) a decision is taken on the acceptability of the nonconforming work.

Met lab tolerance?

Not used at that range?

Equipment = indication only?



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

5.5 Calibration Requirements

5.5.5 Records shall be maintained of each item of equipment and its software significant to the tests and/or calibrations performed. The records shall include at least the following:

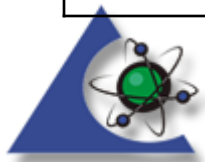
- a) the identity of the item of equipment and its software;
- b) the manufacturer's name, type identification, and serial number or other unique identification;
- f) dates, results and copies of reports and certificates of all calibrations, adjustments, acceptance criteria, and the due date of next calibration;
- g) the maintenance plan, where appropriate, and maintenance carried out to date;
- h) any damage, malfunction, modification or repair to the equipment.



Example Finding:

The equipment inventory list was not current or accurate

- SW versions identified were not current
- Missing balance B06 and Thermometers T12 & T13
- Model numbers used instead of a unique ID (e.g., serial number, asset ID)



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

5.5 Calibration Requirements

5.5.6 The laboratory shall have procedures for **safe handling, transport, storage, use and planned maintenance** of measuring equipment to ensure proper functioning and in order to prevent contamination or deterioration.

5.6.3.4 The laboratory shall have **procedures for safe handling**, transport, storage and use of reference standards and reference materials in order to prevent contamination or deterioration and in order to protect their integrity.

ISO/IEC 17025:2017

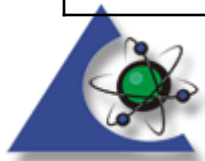
6.4.7 The laboratory shall establish a calibration program, which **shall be reviewed and adjusted as necessary** in order to maintain confidence in the status of calibration.



Example Finding:

Calibration reports identified various weights were out of tolerance and/or dirty. As a result of the unfavorable trend, there were no records for evaluation of suitability of the **five-year calibration interval** and/or **adequacy of the handling**, transport, storage and use of the weights.

The 07/2021, 07/2017 and 08/2013 Calibration reports for flow unit (SN 114036) identified flow rate out of tolerance conditions. As a result of the unfavorable trend, there were no records for evaluation of suitability of the **four-year calibration interval** and/or **adequacy of the handling**, transport, storage and use of the flow unit.



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

5.5 Calibration Requirements

5.5.8 Whenever practicable, all equipment under the control of the laboratory and requiring calibration shall be **labelled, coded or otherwise identified** to indicate the status of calibration, including the date when last calibrated and the date or expiration criteria when recalibration is due.

Indication Only

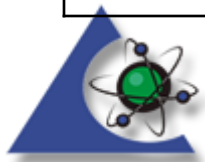
Not for quality purposes

Limited Cal
(approved range = 35-85°C)



Example Finding:

A thermometer was observed without a label identifying its calibration status. Although interview with the quality manager indicated it was not used for quality purposes, it was not labeled to prevent inadvertent use.



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

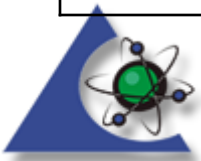
5.5 Calibration Requirements

5.6.4.2 Documentation and Labeling of Standards, Reagents, and Reference Materials a-f

- a) The laboratory shall retain records for all standards, reagents, reference materials, and media, including the manufacturer/vendor, the manufacturer's Certificate of Analysis or purity (if available), the date of receipt, and recommended storage conditions.



Supplier's website does not = record retention



Common Findings (TNI and DoD/DOE QSM)

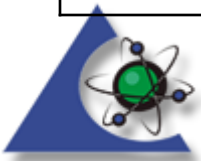
Module 2: Quality Systems General Requirements 5.0 Technical Requirements

5.5 Calibration Requirements

5.6.4.2 Documentation and Labeling of Standards, Reagents, and Reference Materials a-f

a) The laboratory shall retain records for all standards, reagents, reference materials, and media, including the manufacturer/vendor, the manufacturer's Certificate of Analysis or purity (if available), the date of receipt, and recommended storage conditions.

4.6.2 The laboratory shall ensure that purchased supplies and reagents and consumable materials that affect the quality of tests and/or calibrations are not used until they have been inspected or otherwise verified as complying with standard specifications or requirements defined in the methods for the tests and/or calibrations concerned. These services and supplies used shall comply with specified requirements. Records of actions taken to check compliance shall be maintained.



Common Findings (TNI and DoD/DOE QSM)

40 NTU Turbidity Standard		Lot:	N09A
		Exp	9.30.2015
PRODUCT NUMBER:		R-4094/966-51	
QUANTITY:		30ml	
APPLICATION:		Used for calibration to turbidity meter 966	
SPECIFICATIONS:		VALUES:	
Concentration	40 NTU ± 0.4	Conforms	
Quality Control Notes			
Test	Pass/Fail	Tolerance Range	Results
40	Pass	± 0.4	40 NTU
Abs 455 (50 mm pathlength)	Pass		0.2332
Lot Base line Material	Pass		C467460
QUALITY CONTROL:			
<p>This document is issued without signature. Warranty: The details given here are merely intended for information purposes and are in no way legally binding. Consequently, we do not accept responsibility in the broadest sense of the word for damage that may result from application based upon this information.</p>			

This document is issued without signature. Warranty: The details given here are merely intended for information purposes and are in no way legally binding. Consequently, we do not accept responsibility in the broadest sense of the word for damage that may result from application based upon this information.

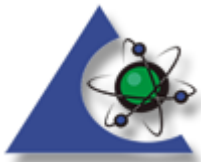
Common Findings (TNI and DoD/DOE QSM)



STATEMENT OF ACCURACY

~~This statement guarantees that the product has been manufactured to meet the tolerance specifications for its class.~~

Note: The Statement of Accuracy Does Not Provide Traceability and is Not Suitable for Quality or Regulatory Requirements.



Common Findings (TNI and DoD/DOE QSM)

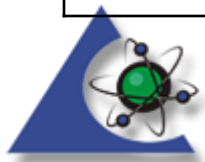
Module 2: Quality Systems General Requirements 5.0 Technical Requirements

5.5 Calibration Requirements

5.5.13.1 Support Equipment

TNI 2016	DoD/DOE QSM 5.4
Temperature measuring devices	
Temperature measuring devices shall be calibrated or verified at least annually	<ul style="list-style-type: none">• Liquid in glass: Before first use and annually• Electronic: Before first use and quarterly

- PJLA PL-2 Policy On Measurement Traceability*
Measuring equipment shall be calibrated by:
- NMI
 - ISO/IEC 17025 accredited provider
 - Approval LF-123



Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

5.5 Calibration Requirements

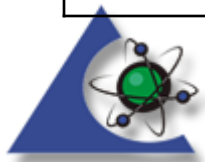
5.5.13.1 Support Equipment

TNI 2016	DoD/DOE QSM 5.4
Temperature measuring devices	
Temperature measuring devices shall be calibrated or verified at least annually	<ul style="list-style-type: none">• Liquid in glass: Before first use and annually• Electronic: Before first use and quarterly

Correction
Factor (CF)
Tolerance?



Observed Temp. and
Corrected Temp.



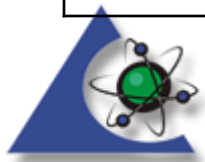
Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

5.5 Calibration Requirements

5.5.13.1 Support Equipment

TNI 2016	DoD/DOE QSM 5.4
Mechanical volumetric pipette	
Prior to first use and on a quarterly basis. Variable pipettes: <ul style="list-style-type: none">• Bracket range of use• Mid-point	Daily before use <ul style="list-style-type: none">• Bias: Mean within $\pm 2\%$ of nominal volume• Precision: $RSD \leq 1\%$ of nominal volume (based on minimum of 3 replicate measurements) Variable pipettes: <ul style="list-style-type: none">• Bracket range of use



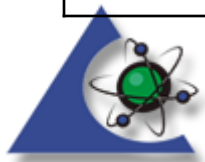
Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

5.5 Calibration Requirements

5.5.13.1 Support Equipment

TNI 2016	DoD/DOE QSM 5.4
glass microliter syringes and Class A glassware are exempt from any verification requirements beyond what is stated in Section 4.6.2	
Exempt from any verification requirements beyond what is stated in Section 4.6.2. 4.6.2 ... Not used until they have been inspected or otherwise verified as complying with standard specifications or requirements defined in the methods for the tests and/or calibrations concerned. These services and supplies used shall comply with specified requirements. Records of actions taken to check compliance shall be maintained.	Upon receipt General Certificate of Bias & Precision upon receipt



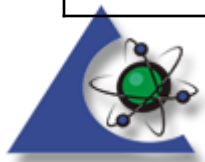
Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements 5.0 Technical Requirements

5.5 Calibration Requirements

5.5.13.1 Support Equipment

TNI 2016	DoD/DOE QSM 5.4
Balance Calibration	
On each day the equipment is used.	Annual
The acceptability for shall be according application for used.	balance: $\pm 2\%$ or $\pm 0.02\text{g}$, greater nce: $\pm 0.1\%$ or $\pm 0.5\text{ mg}$, reater
<p>PJLA PL-2 Policy On Measurement Traceability Measuring equipment shall be calibrated by:</p> <ul style="list-style-type: none"> • NMI • ISO/IEC 17025 accredited provider • Approval LF-123 	
All other support equipment shall be calibrated or verified at least annually, using a recognized National Metrology Institute, such as NIST, traceable reference when available, bracketing the range of use.	Every 5 years Certificate of Calibration from ISO/IEC 17025 accredited calibration laboratory



Common Findings (TNI and DoD/DOE QSM)

Company maintains a quality management system compliant to ISO/IEC 17025.



Company maintains a quality management system accredited to ISO/IEC 17025.



Company is an AB Name ISO 17025 accredited company.



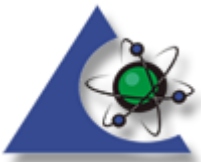
PJLA SOP-3 *Use of Accreditation Claims and Symbols*

[The calibration supplier] shall ensure that all customers requesting services are not misled when non-accredited or non-endorsed reports are provided.

[If the accreditation symbol is not used, the calibration supplier] shall ensure the following information is included:

- 1) The Standard Accredited to (e.g., ISO/IEC 17025:2017Accredited)
- 2) PJLA
- 3) Accreditation #XXXXXX
- 4) Accreditation field (e.g., Calibration)

Requirements for claims
of accreditation



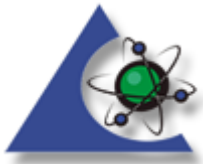
Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements

Available certificates include:

- Certificate of Weight Calibration (Accredited)
- Certificate of Weight Calibration (Non-accredited)
- Statement of Accuracy (Not a Legal for Trade or traceable document)

- ☐ Accredited calibration report
- ☐ Report with data
- ☐ NIST traceable calibration report



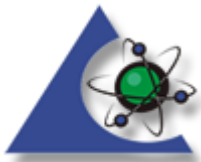
Common Findings (TNI and DoD/DOE QSM)

Module 2: Quality Systems General Requirements

Calibrations by [REDACTED] are performed in accordance with the principles of ISO 9001:2008. [REDACTED] maintains a Quality Management System accredited to ISO/IEC 17025:2005. The use of the Accrediting Body's logo is exclusive to calibrations where the contractual obligations meet the minimum requirements as specified by ISO/IEC 17025:2005 and the Accrediting Body. For additional information regarding [REDACTED]'s accredited status visit the A2LA website and view scope [REDACTED].

The Measurement Standards used during this calibration are traceable to the International System of Units through NIST, other Nationally and/or Internationally recognized standards.

Although [REDACTED] is an accredited laboratory, the results of this calibration and customer requested reporting is NOT considered an accredited calibration and therefore does not meet the requirements of ISO-17025:2005. With a Level 1 Calibration, the actual calibration data points are verified, however, these values are not recorded at the customer's request. A Level 1 calibration cannot be converted to any other level (2 through 4) without performing a re-calibration and recording the data. Additional fees may apply.



Common Findings (TNI and DoD/DOE QSM)

Company maintains a quality management system compliant to ISO/IEC 17025.



Company maintains a quality management system accredited to ISO/IEC 17025.



Company is an AB Name ISO 17025 accredited company.



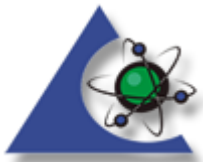
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Requirements for claims
of accreditation



Common Findings (TNI and DoD/DOE QSM)

4.6.4 The laboratory shall **evaluate suppliers** of critical consumables, supplies and services which affect the quality of testing and calibration, and shall **maintain records of these evaluations and list those approved**.

4.6.3 **Purchasing documents** for items affecting the quality of laboratory output **shall contain data describing the services** and supplies ordered. These purchasing documents shall be reviewed and approved for technical content prior to release

4.6.2 The laboratory shall ensure that **purchased supplies** and reagents and consumable materials that affect the quality of tests and/or calibrations are not used until they **have been inspected or otherwise verified as complying with standard specifications or requirements** defined in the methods for the tests and/or calibrations concerned. These services and supplies used shall comply with specified requirements. Records of actions taken to check compliance shall be maintained.

ISO/IEC 17025 accredited
supplier

ISO/IEC 17025 accredited
calibration report

ISO/IEC 17025 accredited
calibration report

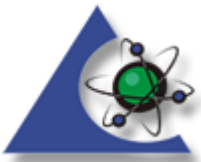
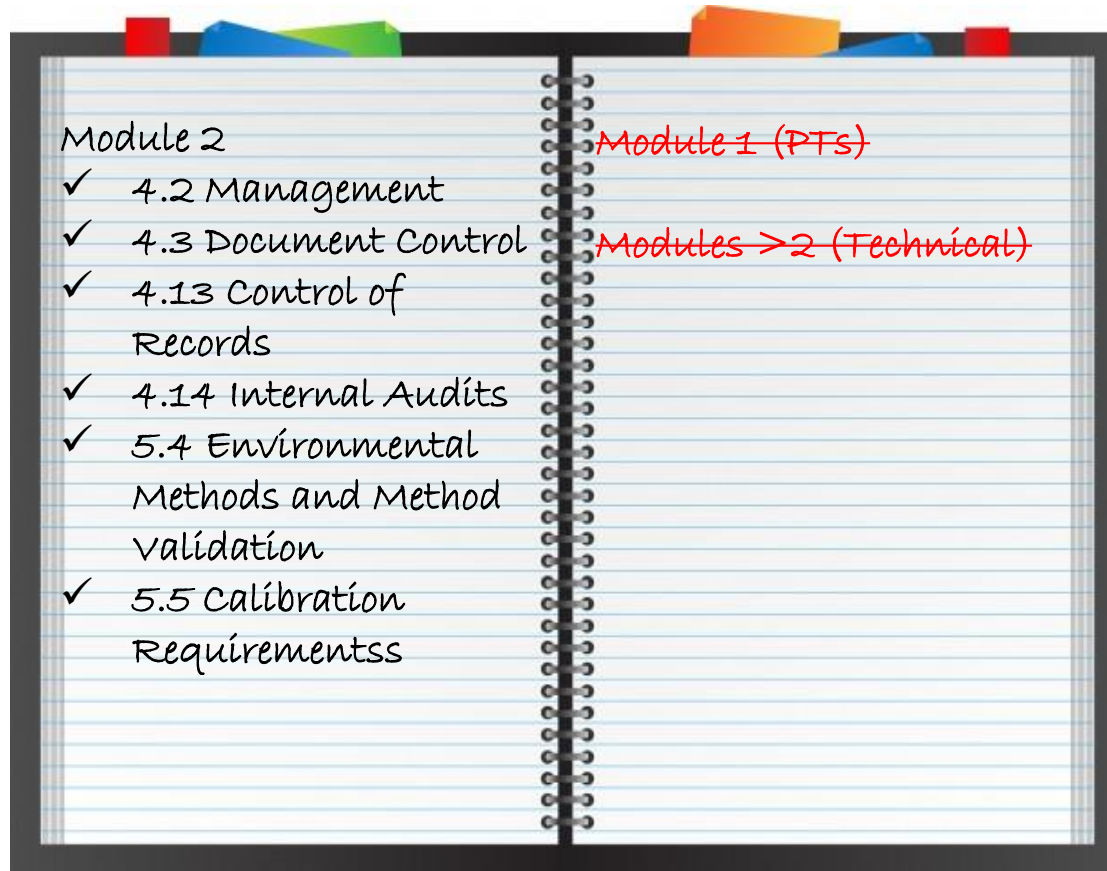


Example Finding:

Not all calibration reports were accredited calibration reports to provide traceability that the calibration service was performed under the calibration supplier's accredited program. In addition, although the supplier was approved based on their ISO/IEC 17025 accreditation, the procurement document did not request an ISO/IEC 17025 accredited calibration.



Common Findings (TNI and DoD/DOE QSM)

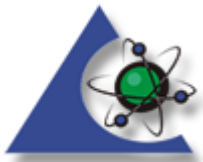


Resources

(TNI and DoD/DOE QSM)


- **TNI** (<http://nelac-institute.org>)
 - Guidance Documents
 - TNI Standard Interpretation Requests (SIRs)
 - Training

- **DoD EDQW** (<https://denix.osd.mil/edqw/home>)



Resources (PJLA)

www.PJLA.com



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ACCREDITATION

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Forms

- PJLA Proficiency Testing Plan [LF-81](#)
- Traceability Acceptance Criteria Form [LF-123](#)

Policies

- Proficiency Testing Requirements for Applicant and Accredited Laboratories [PL-1](#)
- Policy On Measurement Traceability [PL-2](#)
- Policy on Measurement Uncertainty for Calibration and Testing Laboratories [PL-3](#)
- Policy on Calibration Scopes of Accreditation [PL-4](#)




Procedures

- Accreditation Procedure – General – [SOP-1 General](#)
- Accreditation Procedure – DoD ELAP – [SOP-1 DoD ELAP](#)
- Accreditation Procedure – EPA NLLAP – [SOP-1 EPA NLLAP](#)
- Accreditation Procedure – FCC – [SOP-1 FCC](#)
- Accreditation Procedure – Inspection Bodies – [SOP-1 Inspection Bodies](#)
- Accreditation Procedure – Medical – [SOP-1 Medical](#)
- Accreditation Procedure – MP – [SOP-1 MP](#)
- Accreditation Procedure – TNI EL – [SOP-1 TNI EL](#)
- Accreditation Procedure – TNI NEFAP – [SOP-1 TNI NEFAP](#)
- The FDA Accreditation Scheme for Conformity Assessment Program (ASCA) – [SOP-1 FDA](#)
- Proficiency Test Provider (PTP) Accreditation Procedure – [SOP-1-PTP](#)
- Appeal Procedure [SOP-10](#)
- Complaint Procedure [SOP-9](#)
- Use of Accreditation Claims and Symbols [SOP-3](#)
- Suspension, Withdrawal or Reduction of Accreditation [SOP-11](#)
- ILAC International Cooperation (ILAC)
- International Standards and Technology (NIST)

RESOURCES

- PJLA DOCUMENTS
- PJLA UPDATES
- TECHNICAL RESOURCES
- PROFICIENCY TESTING
- CALCULATORS

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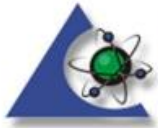
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Free PJLA Webinars

PJLA is now offering free webinars on various topics in relation to ISO/IEC 17025:2017 for both testing and calibration laboratories.

These are for all interested parties including: laboratories seeking accreditation, accredited laboratories, assessors and consultants.

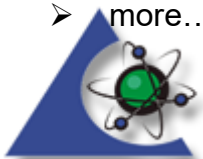


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- A Look at ISO/IEC 17025:2017 Requirements Concerning Impartiality and Confidentiality
- ISO/IEC 17025:2017 and Section 8.8 on Internal Audits
- Common Findings in Assessments to the ISO/IEC 17025:2017 Standard
- more....



Perry Johnson Laboratory Accreditation, Inc.



Time for Questions and Answers





Join us for our Next Webinar

Thursday, June 30, 2022 - 1:00pm EST

A Look at ISO/IEC 17025:2017 - Section
6.5 Evaluation of Measurement
Uncertainty “Requirements and
Fundamentals”



PJLA

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Thank You!