

Data Validation

Project Name: _____

Project Number: _____

Date of Validation: _____

Validated by: _____

Sample Events Included: _____

Laboratory Groups Included: _____

Were all samples listed on the COC received by laboratory? _____

Were all custody seals intact when received by laboratory? _____

Were samples properly preserved according to the COC/field notes and the laboratory narratives? _____

If no, explain here:

Number of (non QC) samples included in validation: _____

Number of field QC samples included in validation: _____

List samples to be tracked for validation (10 % of total, unless problems occur then say “all samples tracked”).

Sample	Date of Collection
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Were there any sample ID discrepancies or transcription errors found for samples tracked on the COC's, field notes, or lab data sheets?

Was it necessary to track all samples? _____

Field QC

Number of Field Duplicates collected: _____
Number of Field Duplicates required: _____

List any of the constituents for the Sample/Sample Duplicate RPD's that were above specified limits:

Sample	Lab ID	Constituent	RPD	Comment

Number of Field Replicates (splits) collected: _____
Number of Field Replicates (splits) required: _____

List any of the constituents for the Sample/Sample Replicate RPD's that were above specified limits.

Sample	Lab ID	Constituent	RPD	Comment

Number of Field Blanks collected: _____
Number of Field Blanks required: _____
Were there any contaminants in the field blanks: _____
List Associated Samples: _____

Number of Trip Blanks collected: _____
Number of Trip Blanks required: _____
Were there any contaminants in the field blanks: _____
List Associated Samples: _____

Laboratory QC

(Separate sheet needed for each lab group)

Laboratory ID Group: _____

Were holding times met? _____

Were there any contaminants found in the Method Blank? If yes, list (include associated samples):

Were Laboratory Control Samples within laboratory control range?

Were Laboratory Control Sample RPD's within range?

Were Matrix Spike Samples within laboratory control range?

Were there any problems found in the lab documentation with instrument calibration or tuning?

Discuss any other problems with analyses of samples.

Project Manager Review

(To be filled out by project manager)

Project Manager Name: _____

Were any results in this validation packet inconsistent with historical or expected results?
If yes, discuss:

Do any of the problems found during validation require corrective action? If yes, discuss
problem:

Corrective action to be taken:

Date corrective action implemented: _____

Project Manager's signature: _____

(Attach Project Sampling and Method Specification Sheet)