Data Submission Guide for CMDP PFAS Samples

(reported through EXCEL TEMPLATE)

Document Instructions

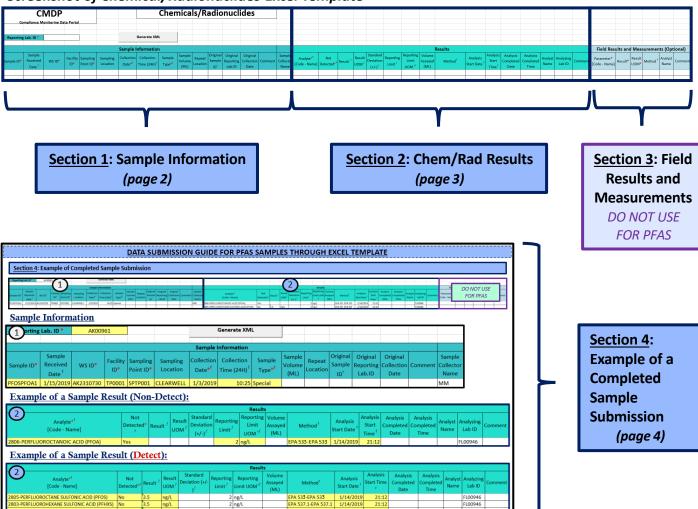
The Excel template used for reporting PFAS samples are separated into three sections including general **Sample Information** (see <u>page 2</u>), **Chem/Rad Results** (see <u>page 3</u>) and **Field Results and Measurements** (Do not use for PFAS reporting). Additionally, this document includes an **example** of a completed sample submission (<u>page 4</u>).

Submit the information as described on the following pages for **PFAS** samples. This guidance document will highlight the required fields within each section.

Header fields in <u>RED and underlined text</u> are **required** in order to meet federal and state reporting requirements.
Header fields in <u>BLUE and underlined text</u> are *conditionally or situationally required*.
Header fields in <u>BLACK text</u> are not required for a successful data submission.
Sample data will be rejected if the <u>required fields</u> are left blank.

Additionally keep in mind:

- Use drop down icons () to filter data.
- If you have questions, please contact our CMDP support staff at <u>dec.cmdpsupport@alaska.gov</u>.



Screenshot of Chemical/Radionuclides Excel Template

DATA SUBMISSION GUIDE FOR PFAS SAMPLES THROUGH EXCEL TEMPLATE

Header fields in <u>**RED** and underlined text</u> below are **required** in order to meet federal and state reporting requirements. Header fields in <u>**BLUE** and underlined text</u> are *conditionally or situationally required*. Header fields in **BLACK text** are not required for a successful data submission.

<u>Se</u>	Section 1: Sample Information														
	CMDP Chemicals/Radionuclides														
	Compliance	Monitori	ing Data Porta	al	ļ										
Reportir	ng Lab. ID *					Generate	XML								
							Sample I	nformation	1						
Sample ID*	Sample Received Date ^f	WS ID*	Facility ID*	Sampling Point ID*	Sampling Location	Collection Date ^{*^f}	Collection Time (24H) ^f	Sample Type ^{#f}	Sample Volume	Repeat Location	Original Sample ID $^+$	Original Reporting Lab.ID	Original Collection Date	Comment	Sample Collector Name

<u>Reporting Lab. ID</u>: Lab identification number.

Sample ID: Lab sample identification number, limit to 20 characters (numbers, letters, dash/underscore (-_) are allowed).

Sample Received Date: Date sample was received by lab (MM/DD/YY).

WS ID: Public Water System identification number (PWSID).

NOTE: Each water system name has a unique PWSID number. If the name and number on the work order does not match what is listed in CMDP, investigate to ensure accuracy and consistency.

Facility ID: Facility identification number where sample was collected (typically from a source facility or treatment plant).

<u>Sampling Point ID</u>: Sample Point identification number related to the facility where the sample was collected.

If you are unsure of the Facility ID and Sampling Point ID to enter, please contact the PWS directly or the DEC Drinking Water Program Regional Office (http://dec.alaska.gov/eh/dw/contact/).

<u>Sampling Location</u>: This field must describe the location where the sample was taken. Keep description succinct (*numbers, letters, dash/underscore* (-_) *only*).

Collection Date: Date sample collected (MM/DD/YY).

Collection Time (24H): Time sample collected (HH:MM).

<u>Sample Type</u>: Type of sample to be submitted. From the drop-down menu (pictured below), select the either **Routine** or **Special** sample type.

Routine	
Repeat	
Triggered	E
Confirmation	1
Special	
Batch Blanks	
Field Blanks	
Performance Evaluation	-

Sample Volume: Not required (numerical value only).

Repeat Location: Do NOT report data in this field.

Original Sample ID: Do NOT report data in this field.

Original Reporting Lab. ID: Not required but report if information is available.

Original Collection Date: Not required but report if information is available (MM/DD/YY).

Comment: Not required, however if comments are provided, please limit characters to numbers, letters, dash or underscore (- _). In particular, do NOT include quotation marks.

Sample Collector Name: Name of sample collector, report if information is provided.

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Header fields in **RED** and underlined text below are **required** in order to meet federal and state reporting requirements. Header fields in **BLUE** and underlined text are conditionally or situationally required. Header fields in **BLACK text** are not required for a successful data submission.

Section 2: Chem/Rad Results

	<u> </u>	,,												
							Results							
Analyte ^{*f} [Code - Name]	Not Detected* ^f	Result ^f	Result UOM ^f	Standard Deviation (+/-) ^f	Reporting	Reporting Limit UOM +f	Method ^f	Analysis Start Date ^f	Analysis Start Time ^f	Analysis Completed Date	Analysis Completed Time	Analyst Name	Analyzing Lab ID	Comment

Analyte [Code-Name]: From the drop-down menu, select the individual sample analytes for the results you are submitting. For a successful PFAS sample submittal, use the list below for the analyte codes of the individual contaminants.

NOTE: This list will NOT filter by the analytes your lab (or lab that you have subcontracted with) is certified for. Be sure to verify the certification information (outside of CMDP) prior to data submission.

Not Detected: From the drop-down menu (pictured below), select whether the contaminant was Not Detected (select Yes) or Detected (select No) in the analyzed sample.

	PFAS ANALYTES
Analysis Code	Analyte Name
2816	HEXAFLUOROPROPYLENE OXIDE DIMER ACID
2010	(HFPO-DA)
2805	PERFLUOROCTANE SULFONIC ACID (PFOS)
2806	PERFLUOROCTANOIC ACID (PFOA)
2802	PERFLUOROHEPTANOIC ACID (PFHpA)
2803	PERFLUOROHEXANE SULFONIC ACID (PFHxS)
2804	PERFLUORONONANOIC ACID (PFNA)
2801	PERFLUOROBUTANESULFONIC ACID (PFBS)

Yes No

<u>Result</u>: Enter the appropriate reported result of the sample *only if* reporting a <u>detect</u>.

Result UOM: From the drop-down menu (pictured below), select the unit of measure for the sample result as appropriate.

MFL	>
pCi/L	
ng/L	
ug/L	
mg/L	
CU	
TON	
umho/cm	$\mathbf{\vee}$

Standard Deviation (+/-): Not required but report if applicable.

<u>Reporting Limit</u>: Enter the appropriate reporting limit of the analytes.

Reporting Limit UOM: From the drop-down menu, select the unit of measure for the reporting limit as appropriate.

Volume Assayed: Not required but report if applicable (numerical value only).

Method: This drop-down list includes methods for ALL chemical analyses and is not filtered by the analytes your lab (or subcontracting lab) is certified for. Be sure to verify certification status in Alaska and select the appropriate method listed in the Methods Chart (shown to the right). Notice that each Analysis Method Used by labs is assigned to a specific reporting

for the **Report this Method in CMDP** column. Samples will be rejected if users report a code that is not listed on the methods chart.

rejected if users report a code that is not listed on the methods chart.	Analysis Method Used	Report this Method in CDMP
Analysis Start Date: Date when lab began analysis (MM/DD/YY).	533	EPA 533 – EPA 533
	537.1	EPA 537.1 – EPA 537.1
Analysis Start Time: Time when lab began analysis (HH:MM).	-	

Analysis Completed Date: Not required but report if information is available (MM/DD/YY).

Analysis Completed Time: Not required but report if information is available (HH:MM).

Analyst Name: Not required.

Analyzing Lab ID: If the sample was subcontracted to a different lab for analysis, the analyzing lab identification number is required to be reported here.

Comment: Not required, however if comments are provided, please limit characters to numbers, letters, dash or underscore (- _). In particular, do NOT include quotation marks.

Section 3: Field Results and Measurements

REMINDER! This section should **NOT** be used for PFAS sample submittals. Please leave fields blank.

*Only report analytes/methods you are approved for in the State of Alaska

Methods Chart

DATA SUBMISSION GUIDE FOR PFAS SAMPLES THROUGH EXCEL TEMPLATE

Section 4: Example of Completed Sample Submission

Repo	ting Lab. II	D *	AK009		1)			Generate XML Information	_								2 Results									Fi	DO NOT USE							
Sample	Sam D [*] Rece Dat	nple eived ite ^f	WS ID*	Facility ID*	Sampling Point ID	Sampling Location	Collection Date ^{#f}	Collection Samp Time (24H) ^f Type	ef Sampl Volum (ML)	e Repea Locatio	Origina Sample ID [*]	Il Original P Reporting Lab.ID	Original Collectio Date	n Commen	Sample Collector Name	Analyte ^{s/} [Code - Name]	Not Detected	¥ Result	f Resul	t f Deviation (+/-) ^f	Reporting Limit ^f	Reporting Limit UOM +/	Volume Assayed (ML)	Method ^f	Analysis Start Date ¹	Analysis An Start Com Time ^f D	alysis Ai pleted Cor ate	nalysis npleted Time	halyst Ana Iame Li	alyzing ab ID	nent [Ci	Paramete ode - Nai	FOR PFAS	ment
PFOSPFC	A1 1/15	5/2019 AK	K2310730	TP0001	SPTP001	CLEARWELL	1/3/2019	10:25 Specia							MM	2806-PERFLUOROCTANOIC ACID (PFOA)	Yes				2	ng/L		EPA 533-EPA 533	1/14/2019				FLO	0946				
																2805-PERFLUOROCTANE SULFONIC ACID (PFOS)	No	3.5	ng/L		2	ng/L		EPA 533-EPA 533	1/14/2019	21:12			FL0	0946				

Sample Information

1 prting	Lab. ID *	AK009	61				Generate XM	L							
						Sample I	nformation								
Sample ID*	Sample Received Date ^f	WS ID*	Facility ID*	Sampling Point ID*	Sampling Location	Collection Date ^{#f}	Collection Time (24H) ^f	Sample Type ^{*f}	Sample Volume (ML)	Repeat	Original Sample ID ⁺	Original Reporting Lab.ID	Original Collection Date	Comment	Sample Collector Name
PFOSPFOA1	1/15/2019	AK2310730	TP0001	SPTP001	CLEARWELL	1/3/2019	10:25	Special							MM

Example of a Sample Result (Non-Detect):

							Results	3								
	Analyte ^{*f} [Code - Name]	Not Detected* f	Result ^f	Result UOM ^f	Standard Deviation (+/-) ^f	Reporting Limit ^f	Reporting Limit UOM ^{+f}	Volume Assayed (ML)	Method ^f	Analysis Start Date ^f	Analysis Start Time ^f	Analysis Completed Date	Analysis Completed Time	Analyst Name	Analyzing Lab ID	Comment
2806-P	PERFLUOROCTANOIC ACID (PFOA)	Yes				2	ng/L		EPA 537.1-EPA 537.1	1/14/2019	21:12				FL00946	

Example of a Sample Result (Detect):

							Result	ts								
	Analyte ^{*f} [Code - Name]	Not Detected* ^f	Result ^f	Result UOM ^f	Standard Deviation (+/-) ^f	Reporting Limit ^f	Reporting Limit UOM ^{+f}	Volume Assayed (ML)	Method ^f	Analysis Start Date ^f	Analysis Start Time f	Analysis Completed Date	Analysis Completed Time	Analyst Name	Analyzing Lab ID	Comment
2805-PE	RFLUOROCTANE SULFONIC ACID (PFOS)	No	3.5	ng/L		2	ng/L		EPA 537.1-EPA 537.1	1/14/2019	21:12				FL00946	
2803-PE	RFLUOROHEXANE SULFONIC ACID (PFHXS)	No	3.5	ng/L		2	ng/L		EPA 537.1-EPA 537.1	1/14/2019	21:12				FL00946	
2801-PE	RFLUOROBUTANESULFONIC ACID (PFBS)	No	3.5	ng/L		2	ng/L		EPA 537.1-EPA 537.1	1/14/2019	21:12				FL00946	