

No later than 30 days prior to the start of your assessment, please provide this completed checklist and the required documents as identified below by uploading the information to your assigned share library (a separate email will provide a link to the library).

Failure to submit the required documentation 30 days prior to the start of your assessment may result in cancellation of your assessment.

Conformity Assessment Body (CAB) Name:	

Α.

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Requireda		d <sup>a</sup>	Documents to be Submitted	CAB Comments
⋖				Must be completed (e.g., document identifications, clarifications)
X X AC/RA	_			(6.9., 40046.1
¥	SA	SE		
X	Χ		1) Quality Manual.	
	Χ		2) Organization chart.	
Χ	Χ		Master Document Listing.	
Χ	Χ	Xp	4) Equipment List.	
X	Хр	Xp	5) All Non-Technical Operating Procedures (SOPs) supporting activities of the accredited quality management system.	
Х	Xp	Xp	All Technical SOPs supporting tests methods on the scope of accreditation or application.	
Х	Xp	Xp	Control Charts for each test method/matrix on the scope of accreditation or application.	
X	Хр	Xp	8) Verification/Evaluation of Limit of Detection (LOD) and Limit of Quantitation (LOQ) for each analyte/method/matrix/prep on the scope of accreditation or application.	
X	X	Хр	9) Proficiency Testing (PT) results* from the last three rounds for the entire scope of accreditation or application and any corrective actions generated from not acceptable results.  * For DoD/DOE, include CAB generated internal PT studies for analyte/matrix/method/technology combinations approved by PJLA for precision and bias when no PT from a PT Provider is available.	
X	Xp	Xb	a) Comprehensive* data packages from a project (e.g., DoD, DOE, TNI, as applicable) covering, at a minimum, every technology and special preparations (e.g., EPA 1311) on the scope of accreditation or application. b) One Comprehensive* data package generated from the most recent PT.  * Not limited to: Case narrative, summary of results, (e.g., samples, QC and internal standard/surrogate recoveries), Chain of Custody (CoC), sample receipt, data review/acceptance records, method/equipment performance (e.g., tunes, breakdown reports, mass calibrations), calibration results, supporting and raw data (e.g.,	

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			instrument logs, standards prep, data sheets,	
			chromatograms, spectra, extraction logs,	
			digestion logs, and instrument sequences/run	
			logs).	
			Note: If no DoD/DOE/TNI, as applicable, project	
			data packages are available, data packages as	
			listed in (b) above covering, at a minimum, every	
			technology and special preparations (e.g., EPA	
			1311) on the scope of accreditation or application	
			shall be submitted in compliance with the	
			accreditation requirements.	
X	Х		11) Internal Audit(s) completed within the last 12	
	, ,		months, including the report(s), checklist(s),	
			results and any corrective actions generated.	
X	Х		12) Management Review(s) completed within the	
	^		last 12 months, including the report(s), results	
			and any corrective actions generated.	
X	Χ		13) Complaints within the last 12 months and any	
^	^			
X	Χ		corrective actions generated.	
^	^		14) Corrective actions within the last 12 months.	
			Log, if applicable.  Figure 1 if from 1 i	
			Examples from different categories (e.g., not	
			acceptable PTs, Internal Audit findings, 3 <sup>rd</sup>	
			party assessment findings, customer	
			complaints)	
X			15) Assessment Checklists	
			<ul> <li>A completed applicable LF-56 Checklist</li> </ul>	
			Note: These checklists should include details	
			(e.g., procedure identifications, records, dates,	
			person names) and not just "Y/N". Checklists are	
			available at http://www.pjlabs.com/resources.	
RA	Χ	Χ	16) Please indicate any major changes that may	
only			have occurred from your last assessment	
			(e.g., CAB owner/name/address, changes in	
			staff impacting accreditation activities).	
			, - ,	
			Note: PJLA Procedure SOP-1 requires the CAB to	
			inform PJLA of all major changes. As a result,	
			major changes should have already been	
			communicated before or during the scheduling	
			process and is only intended to be informational	
			communicated to the assessor in this form.	
X	Х	Х	17) Please list any URLs where you use the PJLA	
``			logo, ILAC Mark and/or accreditation	
			language as implied per SOP-3	
Χ	Xc		18) <b>DOE labs only</b> please provide the following	
``			items:	
			Chemical Hygiene Plan with	
			procedures/plans related to health & safety,	
			emergency action, chemical handling and	
			sample receiving	
			Materials (Waste) management plan with	
			procedures related waste management and	
			waste disposal	

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<ul> <li>Procedure for verification of ventilation hood contamination control</li> <li>Department of Agriculture soil license</li> <li>Safety plan to include CAB's Contingency Plan/Emergency Procedures/Facility Safety</li> <li>Waste management or Rad worker* training plan</li> <li>*Radioactive Materials License</li> <li>*Radiation protection and/or management</li> </ul>	
plan with supporting SOPs  * Only applicable for CABs that accept potentially	
radioactive samples.	

- <sup>a</sup> AC: Accreditation (Initial) RA: Reaccreditation Assessment SA: Surveillance Assessment SE: Scope Expansion
- <sup>b</sup> Documentation may need to be for a limited scope
- <sup>c</sup> Only if changes since last RA assessment

#### Notes:

- 1. The required documentation above is not always all inclusive for assessment completion. Assessor(s) may request additional information (e.g., training/competency records, equipment records, purchasing records, other) based on their review of the documentation, interviews, observation of activities, and non-conformities from the previous assessment.
- 2. The CAB has the right to declare information gathered during an assessment as confidential business information according to procedures established by the accreditation body or to restrict access to information requested during an assessment when such information directly affects national security. Please submit this request directly to PJLA Headquarters.

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Please visit the PJLA website under the resource section to download forms/checklists mentioned above http://www.pjlabs.com/resources. All clients need to adhere to PJLA policies on proficiency testing (PL-1), traceability (PL-2), measurement uncertainty (PL-3), scope of accreditation for testing (WI-8) and PJLA Procedures for the usage of accreditation symbols and language (SOP-3) and applicable SOP-1 Accreditation procedures. Adherence to these policies and procedures will be assessed. Failure to adhere to these policies and procedures will result in a non-conformance.

Submitted By:		
	Name	Date

В.



*PJLA Internal Use Only-Required if Recommendation to Not Proceed with Assessment*
I reviewed the above documents and do not recommend that the client <b>proceed</b> with the assessment.
If you identified do not proceed, please provide your reasoning below:
Lead Assessor: Date:

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