CHAPTER 301. STATE OF OKLAHOMA LABORATORY ACCREDITATION

SUBCHAPTER 1. GENERAL PROVISIONS

252:301-1-2. Accreditation exception

Operational testing analyses for municipal wastewater treatment systems and water supply systems may be submitted to ~~the~~ DEQ by an unaccredited laboratory if, at the time of the analyses, the laboratory was operated by an individual certified by ~~the~~ DEQ as a laboratory operator and the certified laboratory operator approves and signs the analyses report. For further explanation, refer to and comply with the following rules:

(1) Oklahoma Pollutant Discharge Elimination System Standards (OPDES), OAC 252:606-11-2;

(2) Public Water Supply Operations, OAC 252:631-3-2; and

(3) Waterworks and Wastewater Works Operator Certification OAC 252:710-5-53.

252:301-1-3. Definitions

In addition to the definitions contained in ~~the Environmental Quality Code (27A O.S. § 2-1-101 *et seq.*)~~Title 27A of the Oklahoma Statutes and OAC 252:4 (Department of Environmental Quality Rules of Practice and Procedure), the following words or terms, when used in this ~~Chapter~~chapter, shall have the following meaning, unless the context clearly indicates otherwise. Any technical term not defined shall be defined by its generally accepted scientific meaning or its standard dictionary meaning.

"Acceptable results", as defined in 27A O.S. § 2-4-101, means ~~*a result within limits determined on the basis of statistical procedures as prescribed by the Department*~~a result within limits determined on the basis of statistical procedures as prescribed by DEQ.

"Accreditation" or **"accredited"** means the process by which ~~the~~ DEQ ~~recognizes a laboratory as meeting certain predetermined qualifications or standards, thereby accrediting the laboratory~~evaluates an environmental laboratory's quality systems, staff, facilities, equipment, test methods, record, and reports against the requirements of this chapter. Laboratories determined to meet the qualifications and standards of this chapter are thereby accredited.

"Accreditation body" means a governmental agency that administers a laboratory accreditation program.

"Analyte" means the characteristics of a laboratory sample determined by an analytical laboratory testing procedure and is synonymous with "parameter." For purposes of this ~~Chapter~~chapter, "analyte" also means one (1) of a set of inorganic or organic chemical, physical, radiochemical or microbiological properties whose value determines the characteristics of a ~~water or wastewater~~given sample.

"Applicant" means the owner of a laboratory, or a representative authorized by the owner to act on the owner's behalf, seeking accreditation from ~~the~~ DEQ.

"Applicant laboratory" means the laboratory and its owner or authorized representative for which an application for accreditation has been filed with ~~the~~ DEQ.

"Approved method" means an analytical test method ~~which~~that has been required by law or is recognized by ~~the~~ DEQ as acceptable for a specific usage.

"Assessment" means the evaluation process used to measure or establish the performance, effectiveness, and conformance of a laboratory to the standards and requirements of this chapter. The term "evaluation" as used in 27A O.S. § 2-4-101, is synonymous with the term "assessment."

"Basic environmental laboratory" means a laboratory that is limited to the following analytes: alkalinity, ammonia nitrogen, carbonaceous biochemical oxygen demand, chemical oxygen demand, chloride, chromium, color, copper, cyanide, dissolved oxygen, Escherichia coli, fecal coliform, five-day biochemical oxygen demand, fluoride, free residual chlorine, hardness, hexavalent chromium, iron, nitrate-nitrite nitrogen, oil and grease (n-hexane extractable material), organic nitrogen, orthophosphate phosphorus (reactive phosphorus), pH, phenolics, specific conductance, sulfate, sulfide, temperature, total coliform, total dissolved solids (filterable residue), total Kjeldahl nitrogen, total organic carbon, total phosphorus, total residual chlorine, total suspended solids (non-filterable residue), turbidity, volatile residue, and zinc.

"Blind audit" means a process whereby ~~the~~ DEQ or any other designated agent submits proficiency testing samples to an accredited laboratory in a manner such that the laboratory is not aware of the process.

"Category" means a set of fields of accreditation subject to a single fee.

"Certificate" or **"certificate of accreditation"** ~~is~~means a document issued by DEQ acknowledging that an environmental laboratory has met standards of this Chapter for accreditation and identifying those fields of accreditation for which the laboratory is accredited. "Certificate" is synonymous with letters of accreditation as defined in 27A O.S. § 2-4-101 and means the same as laboratory accreditation and includes primary accreditation and ~~reciprocity~~reciprocal accreditation.

"Corrective action plan" or "(CAP)" ~~is~~means a written plan of action~~, including a schedule for implementation,~~ to correct deficiencies. ~~identified in the DEQ or DEQ approved agent's inspection report, including a timeline for implementation; or~~It includes a schedule for implementation and actions to eliminate or reduce the cause(s) of a~~an existing~~ nonconformity, defect, or other undesirable situation ~~in order~~ to prevent its recurrence. A CAP may be required in response to identified deficiencies in a DEQ or DEQ-approved agent's assessment report.

"Critical nonconformity" or **"Critical finding"** means a conclusion of noncompliance that would require an immediate corrective action or an immediate stop to testing.

"DEQ" means the Oklahoma Department of Environmental Quality. For purposes of certifications issued and enforcement matters arising prior to July 1, 1993, "DEQ" also means predecessor agencies of ~~the~~ DEQ ~~which~~that had jurisdiction over environmental water quality laboratories on June 30, 1993.

"Evaluation", as defined in 27A O.S. § 2-4-101, *means a review of the quality control and quality assurance procedures, recordkeeping, reporting procedures, methodology, personal qualifications, equipment, facilities and analytical technique of a laboratory for measuring or establishing specific parameters.* "Evaluation" is synonymous with the term "assessment."

"Field of accreditation" or **"(FoA)"** means those category, matrix, method, and analyte combinations for which DEQ offers accreditation.

~~**"Finding"** means a conclusion of noncompliance of the evaluation process supported by objective evidence.~~

"Initial accreditation" means a first-time accreditation granted to a laboratory not ~~previously~~currently accredited by ~~the~~ DEQ.

"Interim accreditation" means an ~~out-of-time~~ accreditation issued to a DEQ-accredited laboratory outside of the renewal accreditation process ~~in analytes~~ for ~~which the laboratory is not currently accredited~~ a FoA or a category not currently accredited by ~~the~~ DEQ.

"Laboratory", as defined in 27A O.S. § 2-4-101, means *a facility that performs analyses to determine the chemical, physical or biological properties of air, water, solid waste, hazardous waste, wastewater or soil or subsoil materials or performs any other analyses related to environmental quality evaluations.* "Laboratory" includes mobile laboratories.

"Laboratory waste" means by-products of the analytical process, residues of samples analyzed, discarded reagents or standards and any materials contaminated by any of these.

"Matrix" means the substrate of a test sample, e.g., drinking water, wastewater, other aqueous, or solid.

"Mobile laboratory" means a mobile facility that performs analyses in a self-contained environment with professional analytical instrumentation, excluding field testing of those analytes that require immediate measurement on site (such as, conductivity, residual chlorine, pH, dissolved oxygen, temperature).

"Nonconformity" means a conclusion of noncompliance or nonconformity of the evaluation process supported by objective evidence. This term is synonymous with both "deficiency" and "finding."

"Owner" means the sole proprietor of an individually owned laboratory, the controlling or managing partner of a laboratory held by a partnership, the major stockholders of a corporate owned laboratory, or a municipality or other local government entity ~~which~~that owns or operates a laboratory.

"Parameter" is defined in 27A O.S. § 2-4-101 and is synonymous with "analyte."

"Proficiency testing (PT) sample" means a sample submitted to a laboratory by ~~the~~ DEQ or other designated agent for the purpose of assessing the ability of the laboratory to correctly analyze samples using an approved method.

"Program" means ~~the~~ DEQ laboratory accreditation program described in this chapter.

"QA Plan" or **"Quality Assurance Plan"** means a written description of quality assurance activities (quality control) that will ensure the generation of data that are scientifically valid, defensible, and of known and acceptable limits of precision and accuracy.

"SOP manual" or **"Standard Operating Procedure manual"** means a document approved by ~~a~~ laboratory ~~director~~management that includes approved methods, equipment, and instruments used by the laboratory for analyses.

252:301-1-4. Terms [REVOKED]

~~Terms used in this Chapter shall have the meanings given to them in OAC 252:301-1-2 or the Oklahoma Environmental Quality Code. Any technical term not defined thereby shall be defined by its generally accepted scientific meaning or its standard dictionary meaning.~~

252:301-1-5. Accreditation ~~matrices~~groups and types

(a) **~~Matrices~~Groups.** Laboratories may be accredited in ~~Drinking Water~~drinking water ~~, General Water Quality, and/or Petroleum Hydrocarbons~~or ~~General Environmental~~general environmental laboratory.

(b) **Types of accreditation.** An applicant laboratory may apply at any time for initial, interim, or renewal accreditation. A laboratory applying for interim accreditation shall meet the same requirements as a laboratory applying for initial accreditation.

252:301-1-7. General ~~water quality~~environmental laboratory

(a) **Category groups.** A general ~~water quality~~environmental laboratory may be accredited in the following category groups: metals, nutrients, demands, extractable organics, general chemistry I and/or II, microbiology, pesticides - herbicides - PCBs, purgeable organics, radiological, bioassay, hazardous waste characterization, petroleum hydrocarbons, perchlorate, and/or basic environmental laboratory.

(b) **Basic environmental laboratory analytes.** Basic environmental laboratory analytes include: ~~temperature, five day biochemical oxygen demand, carbonaceous biochemical oxygen demand, chemical oxygen demand, total organic carbon (TOC), total Kjeldahl nitrogen (TKN) , nitrate-nitrite nitrogen, organic nitrogen, ammonia nitrogen, total dissolved solids (filterable residue), total suspended solids (non-filterable residue), volatile residue, total phosphorous, orthophosphate phosphorus (reactive phosphorus), chloride, fluoride, oil and grease, sulfate, pH, specific conductance, dissolved oxygen, turbidity, total residual chlorine, hardness, alkalinity, color, fecal coliform, Escherichia coli, total coliform, cyanide, phenolics, copper, zinc, iron, sulfide, chromium, and hexavalent chromium~~alkalinity,

ammonia nitrogen, carbonaceous biochemical oxygen demand, chemical oxygen demand, chloride, chromium, color, copper, cyanide, dissolved oxygen, Escherichia coli, fecal coliform, five-day biochemical oxygen demand, fluoride, free residual chlorine, hardness, hexavalent chromium, iron, nitrate-nitrite nitrogen, oil and grease (n-hexane extractable material), organic nitrogen, orthophosphate phosphorus (reactive phosphorus), pH, phenolics, specific conductance, sulfate, sulfide, temperature, total coliform, total dissolved solids (filterable residue), total Kjeldahl nitrogen, total organic carbon, total phosphorus, total residual chlorine, total suspended solids (non-filterable residue), turbidity, volatile residue, and zinc.

252:301-1-8. Petroleum hydrocarbon laboratory [REVOKED]

~~A petroleum hydrocarbon laboratory may be accredited in the following category groups: Total Petroleum Hydrocarbons (TPH), Benzene, Toluene, Ethylbenzene, and Xylene (BTEX), Flash Point, and MTBE~~

252:301-1-9. Fees

(a) **Applicable fees.** The following fees apply:

(1) Initial accreditation - $1,140.00

(2) Interim accreditation - $671.00

(3) Renewal fee - $34.00

~~(4) Renewal late fee 335.00~~

~~(5)~~(4) Accreditation amendment - $67.00

~~(6)~~(5) ~~Fee for 1 category 470.00~~Fee per category - $470.00 (5 category fees maximum)

~~(7)~~(6) ~~Fee for 2 categories 940.00~~An on-site evaluation is a reimbursable expense.

~~(8) Fee for 3 categories 1,410.00~~

~~(9) Fee for 4 categories 1,880.00~~

~~(10) Fee for 5 or more categories 2,350.00~~

~~(11) On-site evaluation Reimbursable Expense~~

(b) ~~**Renewal.** Fees to renew accreditation consist of the renewal application fee and the applicable category fee.~~**Calculation of fees.** In addition to the application fee required for initial, renewal, and interim accreditation, a laboratory must submit the applicable category fee(s) to a maximum of five (5) category fees even if a laboratory requests more than five (5) categories. Fees for accreditation amendment, as described in OAC 252:301-3-32, consist of the accreditation amendment fee. The fees associated with a laboratory assessment shall be calculated at actual cost, not to exceed $10,000 per individual laboratory, and includes, but is not limited to, the following where applicable:

(1) An assessor(s) time, labor, transportation, and per diem as described in OAC 252:301-5-4; and

(2) The onsite assessment will be invoiced at the closing of the assessment.

(c) **Public water supply system fee exemption.** There is no laboratory accreditation fee for public water supply systems that pay the minimum annual public water supply regulatory service rate fee in accordance with 27A O.S. § 2-6-306.

(d) **Annual fee adjustment.** To assist in meeting rising costs to ~~the~~ DEQ of the environmental services and regulatory programs associated with the laboratory accreditation program, the fees set out in this ~~Section~~section shall be automatically adjusted on July 1st every year to correspond to the percentage, if any, by which the Consumer Price Index (CPI) for the most recent calendar year exceeds the CPI for the previous calendar year. ~~The~~ DEQ may round the adjusted fees up to the nearest dollar. ~~The~~ DEQ may waive collection of an automatic increase in a given year if it determines other revenues, including appropriated state general revenue funds, have increased sufficiently to make the funds generated by the automatic adjustment unnecessary in that year. A waiver does not affect future automatic adjustments.

(1) Any automatic fee adjustment under this subsection may be averted or eliminated, or the adjustment percentage may be modified, by rule promulgated pursuant to the Oklahoma Administrative Procedures Act. The rulemaking process may be initiated in any manner provided by law, including a petition for rulemaking pursuant to 75 O.S. § 305 and OAC 252:4-5-3 by any person affected by the automatic fee adjustment.
(2) If the United States Department of Labor ceases to publish the CPI or revises the methodology or base years, no further automatic fee adjustments shall occur until a new automatic fee adjustment rule is promulgated pursuant to the Oklahoma Administrative Procedures Act.
(3) For purposes of this subsection, ~~"Consumer Price Index" or~~ "CPI" means the Consumer Price Index - All Urban Consumers (U.S. All Items, Current Series, 1982-1984=100, CUUR0000SA0) published by the United States Department of Labor. The CPI for a calendar year is the figure denoted by the Department of Labor as the "Annual" index figure for that calendar year.

(e) ~~An On-site evaluation fee shall be calculated at actual cost, not to exceed $10,000 per individual laboratory, and includes but is not limited to the following: assessor(s) time and labor (preliminary document review, total travel, time-on-site, report preparation, and corrective action review), transportation, per diem (if required), as described in 252:301-5-4. The on-site evaluation will be invoiced at the closing of the evaluation~~**Onsite assessment fee.** All laboratories must pay an onsite assessment fee, not to exceed $10,000.00 per individual laboratory, for each assessment to continue accreditation or as a result of just cause according to this chapter.

252:301-1-10. Accreditation period

The period of accreditation is annual, running from January 1 to December 31. Notwithstanding, an applicant laboratory may apply at any time for initial or interim accreditation. A laboratory applying for interim accreditation shall meet the same requirements as a laboratory applying for initial accreditation. Regardless of when a certificate goes into effect, it shall expire on December 31 of the same year, unless provided specific written exception by DEQ.

SUBCHAPTER 3. LABORATORY ACCREDITATION PROCESS

PART 1. APPLICATION

252:301-3-1. Application required

(a) **General.** A laboratory shall submit one (1) copy of an application for accreditation to ~~the~~ DEQ ~~along with relevant fees. The application shall be typed on forms provided by the DEQ and shall follow the general format designated by the DEQ.~~ Application forms are available on DEQ's website. Applications shall be accurately completed, signed, and submitted to DEQ electronically or by mail, with all required attachments. Application requirements are applicable to initial, interim, and renewal applications unless specifically stated otherwise.

(b) **Signature and verification.** An application shall be signed by the sole proprietor of an individually owned laboratory, the controlling or managing partner or partners of a laboratory held by a partnership, the authorized agent of a corporate owned laboratory, or the principal executive officer or ranking elected official of a municipality or other local government entity ~~which~~that owns or operates the applicant laboratory. The signer shall verify in the application that it was prepared under his direction or supervision and that the information it contains is, to the best of his knowledge, true, accurate and complete.

(c) **Application fees.** Following application processing and approval, DEQ will invoice the laboratory. Accreditation certificates will not be issued until fees are paid in full.

252:301-3-2. Contact information

In addition to other information required by this ~~Chapter~~chapter, an application shall contain the following information:

(1) The name, mailing address, street address, telephone number, e-mail address and telefax number (if any) of the applicant.

(2) The signature, typewritten name, address, telephone number and telefax number (if any) of the authorized representative of the owner.

(3) The name, mailing address, street address, telephone and telefax number (if any) of the applicant laboratory's authorized technical representative.

(4) The location(s) (address or legal description) of the laboratory, including county and driving directions and latitude/longitude.

(5) Identification of the accreditation type and categories, analytes, and/or methods sought.

(6) The name and address of any owner, stockholder, or officer of the applicant laboratory or any person who receives compensation from the applicant laboratory, who has been or currently is an owner, stockholder, or officer of, or who has received compensation from, any laboratory whose accreditation application has been previously denied or whose accreditation has been previously suspended or revoked in part or in whole by ~~the~~ DEQ.

252:301-3-3. Operational information

The application shall address the following operational issues:

(1) A listing of equipment to be used for sample analysis, storage, and reporting.

(2) A description of the methods, equipment, and instruments used by the applicant laboratory for specific analytes ~~which~~that may be in the form of an SOP manual when required.

(3) A written laboratory QA plan ~~which~~that includes but is not limited to:

(A) A listing of laboratory personnel, including the laboratory director, which gives the academic training, experience, and analytical and supervisory responsibilities of each; and

(B) A narrative description of the methods used for sample receipt, storage, and disposal.

(4) Results of laboratory's two (2) most recent ~~proficiency testing~~PT rounds, at least 15 calendar days apart.

(5) A report of a laboratory evaluation conducted by DEQ or a DEQ-approved assessor within the ~~twelve (12)~~12 months prior to the date of filing or, for in-state laboratories only, a letter requesting ~~the~~ DEQ to conduct an on-site evaluation. The evaluation report shall verify data submitted in an application, list any deficiencies and be signed by ~~the~~ DEQ or DEQ approved agent.

(A) DEQ-approved assessors for out-of-state laboratories are those that perform the assessment as an accreditation to The NELAC Institute standard through a recognized governmental accreditation body.

(B) The report must cover all requested parameters for accreditation. Parameters not covered by the assessment and report will not be considered for accreditation.

(6) If deficiencies are listed in an evaluation report, the applicant shall submit a ~~corrective action plan~~CAP ~~which~~that specifies deadlines for implementation and completion of the plan. ~~The~~ DEQ may establish conditions, including compliance schedules, for the applicant's corrective action plan.

(7) Hours of operation.

252:301-3-4. Renewals and expiration

(a) **Annual renewal required.** A laboratory that decides to remain accredited must apply to renew its accreditation annually. Application forms are available on DEQ's website. Applications shall be accurate and complete, signed, and submitted to DEQ electronically or by regular mail with all required attachments.

(b) **Laboratory responsibility.** Each laboratory is responsible for ~~renewing~~submitting its ~~accreditation~~renewal application materials by the annual renewal ~~date~~deadline. Failure to receive a renewal ~~form and invoice~~notice does not exempt laboratories from meeting the renewal deadline.

(c) ~~**DEQ invoice date.** By April 15 of each year, the DEQ shall mail the renewal forms and invoices to each accredited laboratory.~~**Renewal deadline.** The renewal application shall be accurately completed, signed, and received by DEQ with all applicable materials on or before 4:30 p.m. CST September 15.

(d) ~~**Renewal deadline.** The renewal application shall be accurately completed, signed and submitted to the DEQ with the renewal invoice and all applicable fees by 4:30 p.m. or postmarked on or before June 15. Any renewal application which is not accurately completed and is returned to the applicant or which is postmarked after June 15 but received on or before July 15 shall be considered only if accompanied by the renewal fee and a late fee. Any renewal application and fees received or postmarked after July 15 will be returned and accreditation shall not be renewed.~~**Payment deadline.** DEQ will invoice the accredited laboratory following application processing. Full payment of fees must be received on or before December 15.

(e) ~~**Specified dates.** If any date specified in this section falls on a weekend or holiday, the date of the following working day shall be the effective date.~~**PT data deadline.** Laboratories shall ensure that the PT provider has submitted all pertinent PT reports to DEQ electronically as specified in OAC 252:301-7-12 on or before September 15 of each year. PTs received later than September 15 may not be considered for accreditation renewal.

(f) ~~**Failure to renew.** To become accredited again, a laboratory that failed to renew its accreditation in a timely manner must apply for initial accreditation as a new laboratory.~~**Specified dates.** If any date specified in this section falls on a weekend or holiday, the date of the following working day shall be the effective date.

(g) **Failure to renew.** A laboratory that fails to submit renewal application materials or payment by the specified deadlines will not be eligible for renewal of their accreditation. They may reapply through the initial application process.

PART 3. CONDITIONS OF ACCREDITATION

252:301-3-31. Conditions applicable to all accreditations

The following conditions shall apply to all existing accreditations and shall be incorporated expressly or by reference into all accreditations issued or renewed after the effective date of this ~~Chapter~~chapter.

(1) **Proper operation and maintenance.** The ~~Laboratory~~laboratory shall at all times properly operate and maintain all facilities and equipment installed or used by the ~~Laboratory~~laboratory to achieve compliance with the laboratory accreditation requirements of the ~~Code~~OAC, rules of the Board as they relate to laboratory accreditation, and the provisions and conditions of this ~~Accreditation~~accreditation. Proper operation and maintenance includes effective performance of operations and adequate funding, operator staffing and training, and the provision of appropriate sample-handling equipment. All operational practices and procedures used at this site shall conform to the best possible public health and safety practices.

(2) **Duty to mitigate.** The ~~Laboratory~~laboratory shall take all reasonable steps to minimize or correct any adverse impact on the environment and the public health resulting from noncompliance with this ~~Accreditation~~accreditation and to minimize or correct any adverse impact on the environment arising from its analytical activities.
(3) **Duty to provide information.** The ~~Laboratory~~laboratory shall furnish to ~~the~~ DEQ, within a time specified, any information ~~which~~that ~~the~~ DEQ may request to determine:
(A) whether cause exists for amending, suspending, or revoking this ~~Accreditation~~accreditation;
(B) compliance with this ~~Accreditation~~accreditation; or
(C) whether an accreditation should be issued or renewed.
(4) **Records.** The ~~Laboratory~~laboratory shall keep its ~~Accreditation~~accreditation, the application on which it is based, copies of all records required to be kept by OAC 252:320 and the provisions of its ~~Accreditation~~accreditation on file at the accredited facility.
(5) **Reporting requirements.** The ~~Laboratory~~laboratory shall give advance notice to ~~the~~ DEQ as soon as possible of any planned physical alterations, additions to the accredited facility or planned changes in the accredited facility ~~which~~that may result in noncompliance with accreditation requirements.
(6) **Signatory requirement.** All applications, reports, or information submitted to ~~the~~ DEQ shall be signed by the applicant.
(7) **Consent to conditions.** Commencing analytical activities as an accredited laboratory under DEQ ~~Accreditation~~accreditation shall constitute consent to all conditions of ~~Accreditation~~accreditation.
(8) **Transfer of accreditation.** Accreditation is not transferable. An accredited laboratory may apply to amend ownership or change names, provided that facilities, equipment, personnel and all other conditions of accreditation remain unchanged.
(9) **Duty to apply.** To maintain its accredited status, the ~~Laboratory~~laboratory shall make timely application for annual renewal of ~~Accreditation~~accreditation.
(10) **Severability.** The provisions of Accreditation are severable, and if any of its provisions or the application of its provisions are held invalid, the application of such provisions to other circumstances and the remaining provisions of the ~~Accreditation~~accreditation shall not be affected thereby.

252:301-3-32. Amendments to accreditations

(a) **Changes to be reported.** Changes in laboratory name, ownership, form of ownership, location, and other changes, including personnel and/or equipment, which may significantly affect the performance of analyses for which the laboratory was originally accredited shall be reported in writing to ~~the~~ DEQ within 30 days of occurrence. If requested by owner, ~~the~~ DEQ may amend the accreditation to reflect reported changes.
(b) **Amendment fee.** An amendment fee shall be assessed in accordance with OAC 252:301-1-9.
(c) **Cause.** ~~The~~ DEQ may amend an accreditation for cause, with notice to the affected accredited laboratory and opportunity for hearing.

252:301-3-33. Self-reporting

(a) An accredited laboratory shall promptly submit correct facts or information to ~~the~~ DEQ and/or to the client when:
(1) it becomes aware that it failed to submit a material fact or submitted incorrect information in an application or a report to ~~the~~ DEQ or to a client for submission to ~~the~~ DEQ; or
(2) ~~the~~ DEQ becomes aware of same and notifies the laboratory.

(b) Failure to make a prompt submission may result in an enforcement action.

PART 5. GROUNDS TO REVOKE

252:301-3-51. Grounds to take enforcement action

In addition to the grounds listed in 27A O.S. § 2-3-501 *et seq*., § 2-4-305(A) and OAC 252:4-7-15, ~~the~~ DEQ may suspend, revoke or refuse to renew in part or in whole the accreditation of any laboratory for the following grounds:

(1) consistent and significant errors in analyses, erroneous reporting or evidence of professional or technical incompetence;

(2) misrepresentation to others regarding the type and conditions of DEQ accreditation and the reliance of others on such misrepresentation;

(3) failure to perform any of the following:

(A) to correct deficiencies, comply with a ~~corrective action plan~~CAP, or take other action required by ~~the~~ DEQ pursuant to these rules;

(B) to participate or produce acceptable results in required ~~proficiency testing~~PT;

(C) to cooperate with or allow on-site laboratory evaluations, inspections, or access to records; or

(D) failure to notify or submit reports to ~~the~~ DEQ as required by this Chapter

(4) submission of a ~~proficiency testing~~PT sample to another laboratory for analysis, and reporting data received as its own;

(5) collaboration with other laboratories on results before ~~proficiency testing~~PT sample results are submitted to the required agency;

(6) allowing persons other than qualified laboratory employees to perform and report results of accredited analytes;

(7) any other violation, action or inaction presenting good cause for such action, or

(8) failure to make payment when due.

252:301-3-52. Notice

~~The~~ DEQ may require an accredited laboratory to give written notice to its clients of the suspension or revocation of any part of its accreditation.

SUBCHAPTER 5. GENERAL OPERATIONS

252:301-5-3. Facilities, equipment and supplies

(a) **All accredited laboratories.** All equipment, reagents, glassware and supplies necessary for the proper performance of laboratory analyses shall be on hand or readily available on the premises for analytes certified or analytes listed in an application for accreditation. Equipment shall be in good working order and properly maintained and shall consist of, at a minimum, the apparatus and supplies for which the laboratory is accredited. Facilities shall have a sink with hot and cold running water, electricity, a source of distilled and/or deionized water, proper laboratory waste disposal procedures, and other features/equipment necessary to properly perform approved EPA analytical methodologies. Facilities may be physically located apart in separate buildings if the sites are within one (1) mile of each other and under the same direct management.

(b) **Drinking water accredited laboratories.** In addition to the general facilities, equipment and supply requirements, equipment required of a drinking water accredited laboratory shall include the

apparatus and supplies listed by EPA or ~~the~~ DEQ or identified by the EPA for laboratories ~~which~~that analyze drinking water.

252:301-5-4. On-site ~~evaluation~~assessment

(a) On-site ~~evaluations~~assessments may be unannounced.

(b) During an on-site ~~evaluation~~assessment, ~~the~~ DEQ may require on-site analyses of ~~proficiency test~~PT samples by laboratory personnel.

(c) Following the on-site ~~evaluation~~assessment ~~the~~ DEQ will provide the laboratory with a copy of the ~~evaluation~~assessment report. The laboratory will be afforded a designated time period in which to correct any listed deficiencies. ~~The~~ DEQ will require a laboratory to develop and implement a ~~Corrective Action Plan (CAP)~~CAP.

(d) Out-of-state laboratories already in the program may be required to have an on-site ~~evaluation~~assessment performed by a DEQ-approved assessor. The laboratory shall be solely responsible for costs associated with the on-site ~~evaluation~~assessment, if any. The ~~evaluation~~assessment report shall be submitted to ~~the~~ DEQ along with any CAP if needed.

(1) DEQ-approved assessors for out-of-state laboratories are those that perform the assessment to The NELAC Institute standard through a recognized governmental accreditation body.

(2) The assessment must cover all requested parameters for accreditation. Parameters not covered by the assessment and report will not be offered for accreditation.

(e) The laboratory shall have an on-site ~~evaluation~~assessment prior to granting an initial accreditation.

(f) Prior to granting accreditation for an additional field of accreditation to a laboratory, DEQ may perform an on-site ~~evaluation~~assessment of the laboratory. All laboratories must pay an appropriate on-site ~~evaluation~~assessment fee for each evaluation requested by the laboratory for the additional fields of accreditation.

(g) DEQ or DEQ-approved assessor may conduct on-site ~~evaluation~~assessment of a laboratory to ensure compliance with this ~~Chapter~~chapter approximately ~~biennially~~triennially, or upon receipt of complaint.

252:301-5-5. Recordkeeping and reporting

(a) The laboratory shall keep the following records on file in its accredited facility:

(1) ~~Accreditation~~accreditation and the application on which it is based;

(2) copies of all records and documentation required to be kept by this ~~Chapter~~chapter;

(3) repair and maintenance records;

(4) reports filed with ~~the~~ DEQ or submitted to clients for filing with ~~the~~ DEQ;

(5) equipment changes, additions or malfunctions; and

(6) QA/QC plans and reports.

(b) Any data report given to a customer by an accredited laboratory shall identify:

(1) the parameters for which the laboratory is DEQ-accredited;

(2) the class of DEQ-issued accreditation of each analyte; and

(3) which analytes were subcontracted out for analysis and the subcontracting laboratory's DEQ-issued accreditation number for each of the subcontracted analytes.

SUBCHAPTER 7. PROFICIENCY TESTING

252:301-7-2. Participation required

A laboratory must participate in two (2) single-blind, single-concentration, regularly scheduled ~~Proficiency Testing (PT)~~PT studies per calendar year for each analyte and matrix in each class of accreditation for which it seeks accreditation or renewal of accreditation. PT samples must be provided

by a National Environmental Laboratory Accreditation Program (NELAP) ~~Approved~~approved PT ~~Provider~~provider.

252:301-7-3. PT sample treatment

(a) Samples shall be analyzed and the results shall be returned to the PT study provider ~~no later than 45 calendar days from the scheduled study shipment date.~~before the closing date set by the PT provider. ~~The laboratory shall ensure that all PT samples are handled, i.e., managed, analyzed and reported, in the same manner as actual environmental samples utilizing the same staff, methods as used for routine analysis of that analyte, procedures, equipment, facilities, and frequency of analysis.~~

(b) The laboratory shall ensure that all PT samples are handled and treated in the same manner as environmental samples. This includes utilizing the same staff, methods, procedures, equipment, facilities, and frequency of analysis as is used for routine analysis of that analyte and matrix.

252:301-7-4. Initial accreditation

To gain initial or interim accreditation, a laboratory shall successfully analyze two (2) consecutive ~~proficiency testing (PT)~~PT rounds. ~~Proficiency testing (PT)~~PT rounds must have been performed within the last ~~twelve (12)~~12 months and at least seven (7) calendar days apart from the closing date of one (1) study to the opening date of another study for the same analyte and matrix.

252:301-7-5. General requirements

(a) Laboratories seeking to renew accreditation must successfully analyze vendor supplied, regularly scheduled ~~proficiency testing~~PT samples approximately six (6) months apart in each calendar year. Failure to meet the semiannual schedule shall be regarded as a failed study on the last day of the seventh (7th) month.

(b) Laboratories shall successfully analyze at least two (2) PT studies within the most recent three (3) rounds attempted (2 of 3) prior to renewal. Laboratories may analyze additional or supplemental studies; however, such studies must be reported to ~~the~~ DEQ.

(c) ~~General water quality proficiency testing~~PT samples must be ~~Water Pollution (WP) type testing samples~~of appropriate matrices for the accredited parameters.

(d) Drinking water ~~proficiency testing~~PT samples must be ~~Water Supply (WS) type testing samples~~of drinking water matrix.

~~(e) Petroleum hydrocarbon proficiency testing samples must include benzene, toluene, methylbenzene and xylene (BTEX) and Total Petroleum Hydrocarbons (TPH). Both soil and water matrices must be analyzed if both soil and water samples are to be accepted by the laboratory.~~

252:301-7-6. Cost responsibility

Laboratories shall bear the cost of any subscription to a ~~proficiency testing~~PT program required by ~~the~~ DEQ. ~~The~~ DEQ shall not be charged a fee for the analysis of any ~~proficiency testing~~PT samples.

252:301-7-7. Alternate program

~~The~~ DEQ may designate an alternate ~~proficiency testing~~PT program if it determines such designation is appropriate.

252:301-7-8. DEQ PT samples

As part of a laboratory's ~~proficiency testing~~PT, ~~the~~ DEQ may also submit blind audit samples to an accredited laboratory.

252:301-7-12. PT report

The PT study provider shall provide the participant laboratories and ~~the~~ DEQ a report showing the laboratory's DEQ identification number and EPA identification number, prepared value, the acceptance range, and the acceptable/not acceptable status for each analyte reported by the laboratory and any other information ~~the~~ DEQ deems necessary for accreditation purposes. The report and all associated data shall also be made available in electronic format as specified by ~~the~~ DEQ. The report shall be submitted electronically or mailed no later than twenty-one (21) calendar days from the study closing date.

252:301-7-13. PT report deadline [REVOKED]

~~Laboratories shall ensure that the PT provider has submitted all pertinent PT reports to the DEQ by 4:30 p.m. on or before July 15 of each year. Laboratories whose reports are postmarked or received after July 15 will not be considered for accreditation renewal on September 1.~~

252:301-7-14. PT criteria for laboratory accreditation

The following criteria apply individually to each analyte in each class of accreditation as defined by the laboratory seeking accreditation in its application:

(1) Results of the PT study shall be considered successfully analyzed when the results are "acceptable" and are within the acceptable limits established and published by the PT Provider.

(2) Successfully analyzed shall also mean an aggregate passing score of ninety percent (90%) for microbiological PT testing studies. No partial credit will be given;

(3) ~~The~~ DEQ shall consider PT results along with the other elements of these rules when determining a laboratory's accreditation status;

(4) For initial accreditation or supplemental testing, the studies must be at least seven (7) calendar days apart.

252:301-7-15. Failure to perform

~~The~~ DEQ shall not renew accreditation for a failed or omitted analyte or category of analytes for a laboratory ~~which~~that does not meet the requirements of this subchapter. Once accreditation for an analyte or a category of analytes has been lost, the procedures for initial or interim accreditation shall apply.

252:301-7-16. Analyte absence

(a) **Generally.** ~~If a PT sample is not given for a particular analyte for which a laboratory is requesting accreditation, accreditation for the analyte may be obtained by qualifying for accreditation for the entire category in which the analyte is found. To be eligible for accreditation in the entire category, the laboratory shall pass seventy-five percent (75%) of all PT available analytes within the category. If a laboratory completely fails an individual analyte and still receives a 75% passing rate, the laboratory will not be granted accreditation for that particular analyte but will be accredited for the rest of the category.~~If a laboratory is requesting accreditation for an analyte and matrix combination that does not have a PT available through an NELAP-approved or DEQ-approved PT provider, the laboratory may qualify for accreditation through acceptable PT performance of similar parameters. This is specifically achieved through successful analysis in two (2) out of three (3) PTs for at least seventy-five percent (75%) of all analytes that the laboratory is seeking accreditation for that are of the same matrix and in the same accreditation category. This process does not affect the accreditation status of the parameters that do have PTs available. Those parameters are evaluated in accordance with the other sections of this subchapter.

(b) **Exception.** Laboratories ~~which~~that have or are pursuing accreditation for ~~the~~a ~~Basic Environmental Category~~basic environmental laboratory are not subject to subsection (a) of this section.

252:301-7-17. Supplemental studies

A laboratory may elect to participate in PT studies more frequently than required by the semiannual schedule. Additional studies are not distinguished from the routinely scheduled studies. They are counted and scored the same way and must be at least seven (7) calendar days apart from the closing date of one (1) study to the opening date of another study for the same analyte and matrix.

252:301-7-18. Corrective action

When a laboratory fails a study, in part or in whole, it shall determine the cause for the failure and take any necessary corrective action. The laboratory shall then document both the investigation and the action(s) in a ~~corrective action report (CAP)~~CAP. The CAP shall be submitted to ~~the~~ DEQ within ~~forty-five (45)~~45 days of PT study report issuance.

SUBCHAPTER 9. QUALITY ASSURANCE/QUALITY CONTROL

PART 3. STANDARD OPERATING PROCEDURES AND METHODS MANUAL

252:301-9-37. Methodology incorporated by reference

The following EPA-approved methods are hereby incorporated by reference:

(1) "National Primary Drinking Water Regulations,"~~,~~ 40 ~~CFR~~C.F.R. Part 141, published July 1, 2021.

(2) "Test Methods for Evaluating Solid Waste, Laboratory Manual Physical/Chemical Methods," SW-846 Manual, Third Edition as amended by Final Update I, II, IIA, IIB, III, IIIA, IIIB, ~~IV~~IVA, IVB, V, VI, and VII. ~~See further SW-846-ON-LINE.; and~~

(3) "Guidelines Establishing Test Procedures for the Analysis of Pollutants," 40 ~~CFR~~C.F.R. Part 136, effective July 19, 2021.

(4) "Manual for the Certification of Laboratories Analyzing Drinking Water," Fifth Edition and Supplement 1 (EPA 815-5-05-004, January 2005 and EPA 815-F-08-006, June 2008).

(5) Any other approved method incorporated by DEQ's laboratory accreditation program in writing.

252:301-9-38. DEQ approved methodologies

The following methods are specifically approved by ~~the~~ DEQ:

(1) TNRCC Method 1005 Total Petroleum Hydrocarbons (>nC6 to nC35);

(2) Oklahoma GRO 8020/8015(Modified);

(3) Oklahoma DRO 8000/8100(Modified);

(4) ASTM mussels; and

(5) On a case~~-~~by~~-~~case basis as approved by DEQ.