# ISO/IEC 17025:2017 General Accreditation Requirements

Laboratory Information

| | |
|---|---|
| Company Name | Trident Systems & Engineering (TSE) |
| Laboratory Location(s) | 2646 Palma Dr. Ste 130 Ventura CA 93003 |
| Completed By/Date | Charles Sharp |

Assessor Information

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|---|---|
| Assessor Name(s) | Charles Sharp |
| Assessment Type | Annual |
| Date of Assessment | Dec. 11 – , 2020 |

- This checklist is to be used as part of the ANAB ISO/IEC 17025:2017 General Accreditation Requirements.
- This checklist includes the requirements of:
  - ISO/IEC 17025:2017, General Requirements for the Competence of Testing and Calibration Laboratories;
  - Accreditation Requirements (AR) for calibration, testing, and use of accredited symbol.
- The requirements identified within this checklist are summarized from the referenced standards.
- This checklist will be used for the following assessment activities:
  - Accreditation Assessment Document Review (AADR)
  - Accreditation Assessment (initial) (AA)
  - Transfer Reassessment (TRA)
  - Reassessment (RA)

**Until the end of 2019, this checklist will be used for all SA activities when related to a laboratory transitioning from ISO/IEC 17025:2005 to ISO/IEC 17025:2017.**

**In addition to SA1 or SA2 required items for review, the assessor must review all highlighted items. Record appropriate evidence based on observation or interview.**

| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| **4** | **General requirements** | | | |
| **4.1** | **Impartiality** | | | |
| 4.1.1 | Are laboratory activities undertaken impartially, structured and managed so as to safeguard impartiality? | QAM 1-5.6 sec 3.1.1.1 | C | Reviewed meets requirements |
| 4.1.2 | Is the laboratory management committed to impartiality? | QAM 1-5.6 appendix H AP 2 | C | Reviewed meets requirements |
| 4.1.3 | Is the laboratory responsible for the impartiality of its laboratory activities and not allow commercial, financial or other pressures to compromise impartiality? | QAM 1-5.6 appendix H AP 2 | C | Reviewed meets requirements |
| 4.1.4 | Does the laboratory identify risks to its impartiality on an on-going basis? | QAM 1-5.6 appendix H AP 2 | C | Reviewed meets requirements |
| 4.1.4 | Does this include those risks that arise from its activities, or from its relationships, or from the relationships of its personnel? | QAM 1-5.6 appendix H AP 2 | C | Reviewed meets requirements |
| 4.1.5 | If a risk to impartiality is identified, is the laboratory able to demonstrate how it eliminates or minimizes such risk? | QAM 1-5.6 appendix H AP 2 | C | Reviewed meets requirements |
| **4.2** | **Confidentiality** | | | |
| 4.2.1 | Is the laboratory responsible, through legally enforceable commitments, for the management of all information obtained or created during the performance of laboratory activities? | QAM 1-5.6 sec 5.5 | C | Reviewed meets requirements |

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|---|---|---|---|---|
| 4.2.1 | Does the laboratory inform the customer in advance of the information it intends to place in the public domain? | QAM 1-5.6 appendix H AP 1 | C | Reviewed meets requirements |
| 4.2.1 | Except for information that the customer makes publicly available, or when agreed between the laboratory and the customer (e.g., for the purpose of responding to complaints), is all other information considered proprietary information and regarded as confidential? | QAM 1-5.6 appendix H AP 1 | C | Reviewed meets requirements |
| 4.2.2 | When the laboratory is required by law or authorized by contractual arrangements to release confidential information, is the customer or individual concerned, unless prohibited by law, notified of the information provided? | QAM 1-5.6 appendix H AP 1 | C | Reviewed meets requirements |
| 4.2.3 | Is information about the customer obtained from sources other than the customer (e.g., complainant, regulators) confidential between the customer and the laboratory? | QAM 1-5.6 appendix H AP 1 | C | Reviewed meets requirements |
| 4.2.3 | Is the provider (source) of this information confidential to the laboratory and not be shared with the customer, unless agreed by the source? | QAM 1-5.6 appendix H AP 1 | C | Reviewed meets requirements |
| 4.2.4 | Do personnel, including any committee members, contractors, personnel of external bodies, or individuals acting on the laboratory's behalf, keep confidential all information obtained or created during the performance of laboratory activities, except as required by law? | QAM 1-5.6 appendix H AP 1 | C | Reviewed meets requirements |
| **5** | **Structural requirements** | | | |

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|---|---|---|---|---|
| 5.1 | Is the laboratory a legal entity, or a defined part of a legal entity, that is legally responsible for its laboratory activities? ***Objective evidence is required** | QAM 1-5.6 sec 5.1.1 | C | Reviewed meets requirements |
| 5.2 | Does the laboratory identify management that has overall responsibility for the laboratory? | QAM 1-5.6 sec 5.3 | C | Reviewed meets requirements |
| 5.3 | Does the laboratory define and document the range of laboratory activities for which it conforms with this document? ***Objective evidence is required** | QAM 1-5.6 sec 1.0 | C | Reviewed meets requirements |
| 5.3 | Does the laboratory only claim conformity with this document for this range of laboratory activities, which excludes externally provided laboratory activities on an ongoing basis? | QAM 1-5.6 sec 1.0 | C | Reviewed meets requirements |
| 5.4 | Are laboratory activities carried out in such a way as to meet the requirements of this document, the laboratory's customers, regulatory authorities and organizations providing recognition? | QAM 1-5.6 sec 1.0 | C | Reviewed meets requirements |
| 5.4 | Does this include laboratory activities performed in all its permanent facilities, at sites away from its permanent facilities, in associated temporary or mobile facilities or at a customer’s facility? | QAM 1-5.6 sec 1.0 | C | Reviewed meets requirements |
| 5.5 | Does the laboratory: | | C | |
| 5.5.a | define the organization and management structure of the laboratory, its place in any parent organization, and the relationships between management, technical operations and support services; | QAM 1-5.6 sec 5.0 Appendix B | C | Reviewed meets requirements |

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| 5.5.b | specify the responsibility, authority and interrelationship of all personnel who manage, perform or verify work affecting the results of laboratory activities; | QAM 1-5.6 sec 5.3 | C | Reviewed meets requirements |
| 5.5.c | document its **procedures** to the extent necessary to ensure the consistent application of its laboratory activities and the validity of the results? ***Objective evidence is required** | QAM 1-5.6 sec 3.0 / 6.0 | C | Reviewed meets requirements |
| 5.6 | Does the laboratory have personnel who, irrespective of other responsibilities, have the authority and resources needed to carry out their duties, including: | QAM 1-5.6 sec 5.3 | C | Reviewed meets requirements |
| 5.6.a | implementation, maintenance and improvement of the management system; | QAM 1-5.6 sec 3.0 | C | Reviewed meets requirements |
| 5.6.b | identification of deviations from the management system or from the **procedures** for performing laboratory activities; | QAM 1-5.6 sec 3.0 AP15 | C | Reviewed meets requirements |
| 5.6.c | initiation of actions to prevent or minimize such deviations; | QAM 1-5.6 sec 3.0 AP15 | C | Reviewed meets requirements |
| 5.6.d | reporting to laboratory management on the performance of the management system and any need for improvement; | QAM 1-5.6 sec 3.0 AP10 Company Review | C | Reviewed meets requirements |
| 5.6.e | ensuring the effectiveness of laboratory activities? | QAM 1-5.6 sec 6.0 AP7 Company Review | C | Reviewed meets requirements |
| 5.7 | Does the laboratory management ensure that: | | | |

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| 5.7.a | communication takes place regarding the effectiveness of the management system and the importance of meeting customers' and other requirements; | QAM 1-5.6 sec 5.0 | C | Reviewed meets requirements |
| 5.7.b | the integrity of the management system is maintained when changes to the management system are planned and implemented? | QAM 1-5.6 sec 3.1.1.2 | C | Reviewed meets requirements |
| **6** | **Resource requirements** | | | |
| **6.1** | **General** | | | |
| 6.1 | Does the laboratory have available the personnel, facilities, equipment, systems and support services necessary to manage and perform its laboratory activities? | QAM 1-5.6 sec 4.2 & sec 5.3 | C | Reviewed meets requirements |
| **6.2** | **Personnel** | | | |
| 6.2.1 | Do all personnel of the laboratory, either internal or external, that could influence the laboratory activities act impartially, are competent and work in accordance with the laboratory's management system? | QAM 1-5.6 sec 3.1.1, 5.2.4, 5.4, 7.0 & AP17 | C | Reviewed meets requirements |
| 6.2.2 | Does the laboratory document the competence requirements for each function influencing the results of laboratory activities, including requirements for education, qualification, training, technical knowledge, skills and experience? | QAM 1-5.6 sec 7.0 & AP17 | C | Reviewed meets requirements |

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| 6.2.3 | Does the laboratory ensure that the personnel have the competence to perform laboratory activities for which they are responsible and to evaluate the significance of deviations? | QAM 1-5.6 sec 5.3, 7.0 & AP17 | C | Reviewed meets requirements |
| 6.2.4 | Does the management of the laboratory communicate to personnel their duties, responsibilities and authorities? | QAM 1-5.6 sec 3.0, 4.0, 6.0 | C | Reviewed meets requirements |
| 6.2.5 | Does the laboratory have **procedure**(s) and retain **records** for: ***Objective evidence is required** | QAM 1-5.6 sec 3.0, 4.0, 6.0 | C | Reviewed meets requirements |
| 6.2.5.a | determining the competence requirements; | QAM 1-5.6 sec 7.0 & AP17 | C | Reviewed meets requirements |
| 6.2.5.b | selection of personnel; | QAM 1-5.6 sec 7.0 | C | Reviewed meets requirements |
| 6.2.5.c | training of personnel; | QAM 1-5.6 sec 7.0 & AP17 | C | Reviewed meets requirements |
| 6.2.5.d | supervision of personnel; | QAM 1-5.6 sec 5.3.2d, 7.0 | C | Reviewed meets requirements |
| 6.2.5.e | authorization of personnel; | QAM 1-5.6 sec 7.3.4 AP26 | C | Reviewed meets requirements |
| 6.2.5.f | monitoring competence of personnel? | QAM 1-5.6 sec 5.3.3.1g, 7.0 | C | Reviewed meets requirements |
| 6.2.6 | Does the laboratory authorize personnel to perform specific laboratory activities, including but not limited to, the following: | | | |

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|---|---|---|---|---|
| 6.2.6.a | development, modification, verification and validation of methods; | QAM 1-5.6 AP26 | C | Reviewed meets requirements |
| 6.2.6.b | analysis of results, including statements of conformity or opinions and interpretations; | QAM 1-5.6 AP26 | C | Reviewed meets requirements |
| 6.2.6.c | report, review and authorization of results? | QAM 1-5.6 AP26 | C | Reviewed meets requirements |
| **6.3** | **Facilities and environmental conditions** | | | |
| 6.3.1 | Are facilities and environmental conditions suitable for the laboratory activities and not adversely affect the validity of results? ***Objective evidence is required** | QAM 1-5.6 sec 8.0 | C | Reviewed meets requirements |
| 6.3.2 | Are the requirements for facilities and environmental conditions necessary for the performance of the laboratory activities documented? | QAM 1-5.6 Appendix E | C | Reviewed meets requirements |
| 6.3.3 | Does the laboratory monitor, control and record environmental conditions in accordance with relevant specifications, methods or **procedures** or where they influence the validity of the results? ***Objective evidence is required** | QAM 1-5.6 sec 8.2 Appendix E | C | Reviewed meets requirements |
| 6.3.4 | Are measures to control facilities implemented, monitored and periodically reviewed and include, but not be limited to: | | | Reviewed meets requirements |
| 6.3.4.a | access to and use of areas affecting laboratory activities; | QAM 1-5.6 sec 8.1.3.5 | C | Reviewed meets requirements |
| 6.3.4.b | prevention of contamination, interference or adverse influences on laboratory activities; | QAM 1-5.6 sec 8.1.2, 8.1.3 | C | Reviewed meets requirements |
| 6.3.4.c | effective separation between areas with incompatible laboratory activities? | QAM 1-5.6 sec 8.1.3.4 | C | Reviewed meets requirements |

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| 6.3.5 | When the laboratory performs laboratory activities at sites or facilities outside its permanent control, does it ensure that the requirements related to facilities and environmental conditions of this document are met? | QAM 1-5.6 sec 8.2.2 AP27 | C | Reviewed meets requirements |
| **6.4** | **Equipment** | | C | |
| 6.4.1 | Does the laboratory have access to equipment (including, but not limited to, measuring instruments, software, measurement standards, reference materials, reference data, reagents, consumables or auxiliary apparatus) that is required for the correct performance of laboratory activities and that can influence the results? ***Objective evidence is required** | QAM 1-5.6 Sec 9 AP13 | C | Reviewed meets requirements |
| 6.4.2 | When the laboratory uses equipment outside its permanent control, does it ensure that the requirements for equipment of this document are met? | QAM 1-5.6 Sec 9 AP14 | C | Reviewed meets requirements |
| 6.4.3 | Does the laboratory have a **procedure** for handling, transport, storage, use and planned maintenance of equipment in order to ensure proper functioning and to prevent contamination or deterioration? ***Objective evidence is required** | QAM 1-5.6 Sec 10.1 AP13, AP14 | C | Reviewed meets requirements |
| 6.4.4 | Does the laboratory verify that equipment conforms to specified requirements before being placed or returned into service? | QAM 1-5.6 Sec 9.3 | C | Reviewed meets requirements |

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| 6.4.5 | Is the equipment used for measurement capable of achieving the measurement accuracy and/or measurement uncertainty required to provide a valid result? | QAM 1-5.6 Sec 9.1 AP13 AP14 | C | Reviewed meets requirements |
| 6.4.6 | Is measuring equipment calibrated when:<br>- the measurement accuracy or measurement uncertainty affects the validity of the reported results, and/or<br>- calibration of the equipment is required to establish the metrological traceability of the reported results? | QAM 1-5.6 Sec 10.3 | C | Reviewed meets requirements |
| 6.4.7 | Does the laboratory establish a calibration program, which is reviewed and adjusted as necessary in order to maintain confidence in the status of calibration? ***Objective evidence is required** | QAM 1-5.6 Sec 10.1 | C | Reviewed meets requirements |
| 6.4.8 | Is all equipment requiring calibration or which has a defined period of validity labeled, coded or otherwise identified to allow the user of the equipment to readily identify the status of calibration or period of validity? | QAM 1-5.6 Sec 9.3.1.8 | C | Reviewed meets requirements |
| 6.4.9 | Is equipment that has been subjected to overloading or mishandling, gives questionable results, or has been shown to be defective or outside specified requirements, taken out of service? | QAM 1-5.6 Sec 9.3.1.2d AP13 pg 2 | C | Reviewed meets requirements |
| 6.4.9 | Is it isolated to prevent its use or clearly labeled or marked as being out of service until it has been verified to perform correctly? | QAM 1-5.6 Sec 9.3.1.2d AP13 pg 2 | C | Reviewed meets requirements |

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| 6.4.9 | Does the laboratory examine the effect of the defect or deviation from specified requirements and initiate the management of nonconforming work **procedure** (see 7.10)? ***Objective evidence is required** | QAM 1-5.6 Sec 9.3.1.2d AP13 pg 2 | C | Reviewed meets requirements |
| 6.4.10 | When intermediate checks are necessary to maintain confidence in the performance of the equipment, are these checks carried out according to a **procedure**? | QAM 1-5.6 Sec 9.3.1.9 AP14 pg 14 | C | Reviewed meets requirements |
| 6.4.11 | When calibration and reference material data include reference values or correction factors, does the laboratory ensure the reference values and correction factors are updated and implemented, as appropriate, to meet specified requirements? | QAM 1-5.6 Sec 9.3.1.10 AP14 pg 10 | C | Reviewed meets requirements |
| 6.4.12 | Does the laboratory take practicable measures to prevent unintended adjustments of equipment from invalidating results? | QAM 1-5.6 Sec 9.3.1.11, Sec 11.5.2 AP8 | C | Reviewed meets requirements |
| 6.4.13 | Are **records** retained for equipment which can influence laboratory activities? ***Objective evidence is required** | QAM 1-5.6 Sec 9.2 | C | Reviewed meets requirements |
| 6.4.13 | Do the **records** include the following, where applicable: ***Objective evidence is required** | | C | Reviewed meets requirements |
| 6.4.13.a | the identity of equipment, including software and firmware version; | QAM 1-5.6 Sec 9.2 | C | Reviewed meets requirements |
| 6.4.13.b | the manufacturer's name, type identification, and serial number or other unique identification; | QAM 1-5.6 Sec 9.2 | C | Reviewed meets requirements |
| 6.4.13.c | evidence of verification that equipment conforms with specified requirements; | QAM 1-5.6 Sec 9.2 | C | Reviewed meets requirements |
| 6.4.13.d | the current location; | AP14 pg 4 | | Reviewed meets requirements |

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| 6.4.13.e | calibration dates, results of calibrations, adjustments, acceptance criteria, and the due date of the next calibration or the calibration interval; | QAM 1-5.6 Sec 9.2 | C | Reviewed meets requirements |
| 6.4.13.f | documentation of reference materials, results, acceptance criteria, relevant dates and the period of validity; | QAM 1-5.6 Sec 9.2 | C | Reviewed meets requirements |
| 6.4.13.g | the maintenance plan and maintenance carried out to date, where relevant to the performance of the equipment; | QAM 1-5.6 Sec 9.2 | C | Reviewed meets requirements |
| 6.4.13.h | details of any damage, malfunction, modification to, or repair of, the equipment? | QAM 1-5.6 Sec 9.2 | C | Reviewed meets requirements |
| **6.5** | **Metrological traceability** | | | |
| 6.5.1 | Does the laboratory establish and maintain metrological traceability of its measurement results by means of a documented unbroken chain of calibrations, each contributing to the measurement uncertainty, linking them to an appropriate reference? ***Objective evidence is required** | QAM 1-5.6 Sec 10.2 appendix R | C | Reviewed meets requirements |
| 6.5.2 | Does the laboratory ensure that measurement results are traceable to the International System of Units (SI) through: ***Objective evidence is required** | | C | Reviewed meets requirements |
| 6.5.2.a | calibration provided by a competent laboratory; or | QAM 1-5.6 Sec 10.3.1.1 appendix R | C | Reviewed meets requirements |
| 6.5.2.b | certified values of certified reference materials provided by a competent producer with stated metrological traceability to the SI; or | QAM 1-5.6 Sec 10.3.2.2 AP13 pg 8 | NA | NA – no reference materials |

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| 6.5.2.c | direct realization of the SI units ensured by comparison, directly or indirectly, with national or international standards? | QAM 1-5.6 Sec 10.2 appendix R | C | Reviewed meets requirements |
| 6.5.3 | When metrological traceability to the SI units is not technically possible, does the laboratory demonstrate metrological traceability to an appropriate reference, e.g. ***Objective evidence is required** | QAM 1-5.6 Sec 10.3.1.4 AP4 | C | Reviewed meets requirements |
| 6.5.3.a | certified values of certified reference materials provided by a competent producer; | QAM 1-5.6 Sec 10.3.1.4 AP4 | NA | NA – no reference materials |
| 6.5.3.b | results of reference measurement **procedures**, specified methods or consensus standards that are clearly described and accepted as providing measurement results fit for their intended use and ensured by suitable comparison? | QAM 1-5.6 Sec 10.3.1.4 AP4 | C | Reviewed meets requirements |
| **6.6** | **Externally provided products and services** | | | |
| 6.6.1 | Does the laboratory ensure that only suitable externally provided products and services that affect laboratory activities are used, when such products and services: ***Objective evidence is required** | QAM 1-5.6 Sec 15 AP9 | C | Reviewed meets requirements |
| 6.6.1.a | are intended for incorporation into the laboratory's own activities; | QAM 1-5.6 Sec 15 AP9 | C | Reviewed meets requirements |
| 6.6.1.b | are provided, in part or in full, directly to the customer by the laboratory, as received from the external provider; | QAM 1-5.6 Sec 15.3 AP9 | C | Reviewed meets requirements |
| 6.6.1.c | are used to support the operation of the laboratory? | QAM 1-5.6 Sec 16 AP9 | C | Reviewed meets requirements |

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| 6.6.2 | Does the laboratory have a **procedure** and retain **records** for: ***Objective evidence is required** | | | Reviewed meets requirements |
| 6.6.2.a | defining, reviewing and approving the laboratory's requirements for externally provided products and services; | SOI ACC 1002 | C | Reviewed meets requirements |
| 6.6.2.b | defining the criteria for evaluation, selection, monitoring of performance and re-evaluation of the external providers; | SOI ACC 1002 | C | Reviewed meets requirements |
| 6.6.2.c | ensuring that externally provided products and services conform to the laboratory's established requirements, or when applicable, to the relevant requirements of this document, before they are used or directly provided to the customer; | SOI ACC 1002 | C | Reviewed meets requirements |
| 6.6.2.d | taking any actions arising from evaluations, monitoring of performance and re-evaluations of the external providers? | SOI ACC 1002 | C | Reviewed meets requirements |
| 6.6.3 | Does the laboratory communicate its requirements to external providers for: | AP9 | C | Reviewed meets requirements |
| 6.6.3.a | the products and services to be provided; | AP9 | C | Reviewed meets requirements |
| 6.6.3.b | the acceptance criteria; | AP9 | C | Reviewed meets requirements |
| 6.6.3.c | competence, including any required qualification of personnel; | AP9 | C | Reviewed meets requirements |
| 6.6.3.d | activities that the laboratory, or its customer, intends to perform at the external provider's premises? | AP9 | C | Reviewed meets requirements |
| **7** | **Process requirements** | | | |

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| **7.1** | **Review of requests, tenders and contracts** | | | |
| 7.1.1 | Does the laboratory have a **procedure** for the review of requests, tenders and contracts? ***Objective evidence is required** | QAM 1-5.6 Sec 4 | C | Reviewed meets requirements |
| 7.1.1 | Does the **procedure** ensure that: ***Objective evidence is required** | QAM 1-5.6 Sec 4 | C | Reviewed meets requirements |
| 7.1.1.a | the requirements are adequately defined, documented and understood; | QAM 1-5.6 Sec 4.2.1.1 | C | Reviewed meets requirements |
| 7.1.1.b | the laboratory has the capability and resources to meet the requirements; | QAM 1-5.6 Sec 4.2.1.2 | C | Reviewed meets requirements |
| 7.1.1.c | where external providers are used, the requirements of 6,6 are applied and the laboratory advises the customer of the specific laboratory activities to be performed by the external provider and gains the customer's approval; | QAM 1-5.6 Sec 4.2.1.4 | C | Reviewed meets requirements |
| 7.1.1.d | the appropriate methods or **procedures** are selected and are capable of meeting the customers' requirements? | QAM 1-5.6 Sec 4.2.1.5 | C | Reviewed meets requirements |
| 7.1.2 | Does the laboratory inform the customer when the method requested by the customer is considered to be inappropriate or out of date? | QAM 1-5.6 Sec 4.2.1.5 | C | Reviewed meets requirements |
| 7.1.3 | Unless inherent in the requested specification or standard, is the decision rule selected communicated to, and agreed with, the customer? | QAM 1-5.6 Sec 4.2.1.5 | C | Reviewed meets requirements |
| 7.1.4 | Are any differences between the request or tender and the contract resolved before laboratory activities commence? | QAM 1-5.6 Sec 4.2 | C | Reviewed meets requirements |

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| 7.1.4 | Is each contract acceptable both to the laboratory and the customer? | QAM 1-5.6 Sec 4.2 | C | Reviewed meets requirements |
| 7.1.4 | Do deviations requested by the customer not impact the integrity of the laboratory or the validity of the results? | QAM 1-5.6 Sec 4.2.1.5 | C | Reviewed meets requirements |
| 7.1.5 | Is the customer informed of any deviation from the contract? | QAM 1-5.6 Sec 4.1 | C | Reviewed meets requirements |
| 7.1.6 | If a contract is amended after work has commenced, is the contract review repeated and any amendments communicated to all affected personnel? | QAM 1-5.6 Sec 4.2 | C | Reviewed meets requirements |
| 7.1.7 | Does the laboratory cooperate with customers or their representatives in clarifying the customer's request and in monitoring the laboratory's performance in relation to the work performed? | QAM 1-5.6 Sec 4.1 | C | Reviewed meets requirements |
| 7.1.8 | Are **records** of reviews, including any significant changes retained? ***Objective evidence is required** | AP22 | C | Reviewed meets requirements |
| 7.1.8 | Are **records** retained of pertinent discussions with a customer relating to the customer's requirements or the results of the laboratory activities? ***Objective evidence is required** | AP22 | C | Reviewed meets requirements |
| **7.2** | **Selection, verification and validation of methods** | | | |
| **7.2.1** | **Selection and verification of methods** | | | |
| 7.2.1.1 | Does the laboratory use appropriate methods and **procedures** for all laboratory activities and, where appropriate, for evaluation of the measurement uncertainty as well as statistical techniques for | QAM 1-5.6 Sec 11 AP14 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| | analysis of data? ***Objective evidence is required** | | | |
| 7.2.1.2 | Are all methods, **procedures** and supporting documentation, such as instructions, standards, manuals and reference data relevant to the laboratory activities, kept up to date and made readily available to personnel (see 8.3)? ***Objective evidence is required** | QAM 1-5.6 Sec 11 AP14 | C | Reviewed meets requirements |
| 7.2.1.3 | Does the laboratory ensure that it uses the latest valid version of a method unless it is not appropriate or possible to do so? | QAM 1-5.6 Sec 11 AP14 | C | Reviewed meets requirements |
| 7.2.1.3 | When necessary, is the application of the method supplemented with additional details to ensure consistent application? | QAM 1-5.6 Sec 11 AP14 | C | Reviewed meets requirements |
| 7.2.1.4 | When the customer does not specify the method to be used, does the laboratory select an appropriate method and inform the customer of the method chosen? | QAM 1-5.6 Sec 11 AP14 | C | Reviewed meets requirements |
| 7.2.1.4 | Are methods published either in international, regional or national standards, or by reputable technical organizations, or in relevant scientific texts or journals, or as specified by the manufacturer of the equipment, recommended? (Laboratory-developed or modified methods can also be used.) | QAM 1-5.6 Sec 11 AP14 | C | Reviewed meets requirements |
| 7.2.1.5 | Does the laboratory verify that it can properly perform methods before introducing them by ensuring that it can achieve the required performance? | QAM 1-5.6 Sec 11 AP14 | C | Reviewed meets requirements |
| 7.2.1.5 | Are **records** of the verification retained? ***Objective evidence is required** | QAM 1-5.6 Sec 11 AP14 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 7.2.1.5 | If the issuing body revises the method, is the verification repeated to the extent necessary? | QAM 1-5.6 Sec 11 AP14 | C | Reviewed meets requirements |
| 7.2.1.6 | When method development is required, is this a planned activity and assigned to competent personnel equipped with adequate resources? | QAM 1-5.6 Sec 11 AP14 AP15 | C | Reviewed meets requirements |
| 7.2.1.6 | As method development proceeds, is periodic review carried out to confirm that the needs of the customer are still being fulfilled? | QAM 1-5.6 Sec 11 AP14 AP15 | C | Reviewed meets requirements |
| 7.2.1.6 | Are any modifications to the development plan approved and authorized? | QAM 1-5.6 Sec 11 AP14 | C | Reviewed meets requirements |
| 7.2.1.7 | Do deviations from methods for all laboratory activities occur only if the deviation has been documented, technically justified, authorized, and accepted by the customer? | QAM 1-5.6 Sec 11 AP14 | C | Reviewed meets requirements |
| **7.2.2** | **Validation of methods** | | | |
| 7.2.2.1 | Does the laboratory validate non-standard methods, laboratory-developed methods and standard methods used outside their intended scope or otherwise modified? | QAM 1-5.6 Sec 11 AP14 AP19 | C | Reviewed meets requirements |
| 7.2.2.1 | Is the validation as extensive as is necessary to meet the needs of the given application or field of application? | QAM 1-5.6 Sec 11 AP14 AP19 | C | Reviewed meets requirements |
| 7.2.2.2 | When changes are made to a validated method, are the influence of such changes determined and where they are found to affect the original validation, a new method validation performed? | QAM 1-5.6 Sec 11.2 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 7.2.2.3 | Are the performance characteristics of validated methods, as assessed for the intended use, relevant to the customers' needs and consistent with specified requirements? | QAM 1-5.6 Sec 11.2 | C | Reviewed meets requirements |
| 7.2.2.4 | Does the laboratory retain the following **records** of validation: ***Objective evidence is required** | | | |
| 7.2.2.4.a | the validation **procedure** used; | QAM 1-5.6 Sec 11.2 | C | Reviewed meets requirements |
| 7.2.2.4.b | specification of the requirements; | QAM 1-5.6 Sec 11.2 | C | Reviewed meets requirements |
| 7.2.2.4.c | determination of the performance characteristics of the method; | QAM 1-5.6 Sec 11.2 | C | Reviewed meets requirements |
| 7.2.2.4.d | results obtained; | QAM 1-5.6 Sec 11.2 | C | Reviewed meets requirements |
| 7.2.2.4.e | a statement on the validity of the method, detailing its fitness for the intended use? | QAM 1-5.6 Sec 11.2 | C | Reviewed meets requirements |
| **7.3** | **Sampling** | | | |
| 7.3.1 | Does the laboratory have a sampling plan and method when it carries out sampling of substances, materials or products for subsequent testing or calibration? ***Objective evidence is required** | | NA | No Sampling |
| 7.3.1 | Does the sampling method address the factors to be controlled to ensure the validity of subsequent testing or calibration results? | | NA | No Sampling |
| 7.3.1 | Is the sampling plan and method available at the site where sampling is undertaken? | | NA | No Sampling |
| 7.3.1 | Are sampling plans, whenever reasonable, based on appropriate statistical methods? | | NA | No Sampling |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 7.3.2 | Does the sampling method describe: | | NA | No Sampling |
| 7.3.2.a | the selection of samples or sites; | | NA | No Sampling |
| 7.3.2.b | the sampling plan; | | NA | No Sampling |
| 7.3.2.c | the preparation and treatment of sample(s) from a substance, material or product to yield the required item for subsequent testing or calibration? | | NA | No Sampling |
| 7.3.3 | Does the laboratory retain **records** of sampling data that forms part of the testing or calibration that is undertaken? ***Objective evidence is required** | | NA | No Sampling |
| 7.3.3 | Do these **records** include, where relevant: ***Objective evidence is required** | | NA | No Sampling |
| 7.3.3.a | reference to the sampling method used; | | NA | No Sampling |
| 7.3.3.b | date and time of sampling; | | NA | No Sampling |
| 7.3.3.c | data to identify and describe the sample (e.g., number, amount, name); | | NA | No Sampling |
| 7.3.3.d | identification of the personnel performing sampling; | | NA | No Sampling |
| 7.3.3.e | identification of the equipment used; | | NA | No Sampling |
| 7.3.3.f | environmental or transport conditions; | | NA | No Sampling |
| 7.3.3.g | diagrams or other equivalent means to identify the sampling location, when appropriate; | | NA | No Sampling |
| 7.3.3.h | deviations, additions to or exclusions from the sampling method and sampling plan? | | NA | No Sampling |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| **7.4** | **Handling of test and calibration items** | | | |
| 7.4.1 | Does the laboratory have a **procedure** for the transportation, receipt, handling, protection, storage, retention, and disposal or return of test or calibration items, including all provisions necessary to protect the integrity of the test or calibration item, and to protect the interests of the laboratory and the customer? ***Objective evidence is required** | QAM 1-5.6 Sec 12 AP5 | C | Reviewed meets requirements |
| 7.4.1 | Are precautions taken to avoid deterioration, contamination, loss or damage to the item during handling, transporting, storing/waiting, and preparation for testing or calibration? | QAM 1-5.6 Sec 12 AP5 | C | Reviewed meets requirements |
| 7.4.1 | Are handling instructions provided with the item followed? | QAM 1-5.6 Sec 12 AP5 | C | Reviewed meets requirements |
| 7.4.2 | Does the laboratory have a system for the unambiguous identification of test or calibration items? | QAM 1-5.6 Sec 12 AP5 | C | Reviewed meets requirements |
| 7.4.2 | Is the identification retained while the item is under the responsibility of the laboratory? | QAM 1-5.6 Sec 12 AP5 | C | Reviewed meets requirements |
| 7.4.2 | Does the system ensure that items will not be confused physically or when referred to in **records** or other documents? | QAM 1-5.6 Sec 12 AP5 | C | Reviewed meets requirements |
| 7.4.2 | Does the system, if appropriate, accommodate a sub-division of an item or groups of items and the transfer of items? | QAM 1-5.6 Sec 12 AP5 | C | Reviewed meets requirements |
| 7.4.3 | Upon receipt of the test or calibration item, are deviations from specified conditions recorded? | QAM 1-5.6 Sec 12.3 AP5 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 7.4.3 | When there is doubt about the suitability of an item for test or calibration, or when an item does not conform to the description provided, does the laboratory consult the customer for further instructions before proceeding and record the results of this consultation? | QAM 1-5.6 Sec 12.3.2 AP5 | C | Reviewed meets requirements |
| 7.4.3 | When the customer requires the item to be tested or calibrated acknowledging a deviation from specified conditions, does the laboratory include a disclaimer in the report indicating which results may be affected by the deviation? | QAM 1-5.6 Sec 12.3.3 AP5 | C | Reviewed meets requirements |
| 7.4.4 | When items need to be stored or conditioned under specified environmental conditions, are these conditions maintained, monitored and recorded? | QAM 1-5.6 Sec 12 AP5 | C | Reviewed meets requirements |
| **7.5** | **Technical records** | | | |
| 7.5.1 | Does the laboratory ensure that technical **records** for each laboratory activity contain the results, report and sufficient information to facilitate, if possible, identification of factors affecting the measurement result and its associated measurement uncertainty and enable the repetition of the laboratory activity under conditions as close as possible to the original? ***Objective evidence is required** | QAM 1-5.6 Sec 13 & 14 AP22 | C | Reviewed meets requirements |
| 7.5.1 | Do the technical **records** include the date and the identity of personnel responsible for each laboratory activity and for checking data and results? ***Objective evidence is required** | QAM 1-5.6 Sec 13.2.12 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 7.5.1 | Are original observations, data and calculations recorded at the time they are made and identifiable with the specific task? | QAM 1-5.6 Sec 13.2 | C | Reviewed meets requirements |
| 7.5.2 | Does the laboratory ensure that amendments to technical **records** can be tracked to previous versions or to original observations? ***Objective evidence is required** | QAM 1-5.6 Sec 13.2 | C | Reviewed meets requirements |
| 7.5.2 | Are both the original and amended data and files retained, including the date of alteration, an indication of the altered aspects and the personnel responsible for the alterations? | QAM 1-5.6 Sec 13.2 | C | Reviewed meets requirements |
| **7.6** | **Evaluation of measurement uncertainty** | | | |
| 7.6.1 | Does laboratories identify the contributions to measurement uncertainty? ***Objective evidence is required** | QAM 1-5.6 Sec 11.3.2 | C | Reviewed meets requirements |
| 7.6.1 | When evaluating measurement uncertainty, are all contributions that are of significance, including those arising from sampling, taken into account using appropriate methods of analysis? | QAM 1-5.6 Sec 11.3.2 | NA | No Sampling |
| 7.6.2 | Does a laboratory performing calibrations, including of its own equipment, evaluate the measurement uncertainty for all calibrations? | QAM 1-5.6 Sec 11.3.2 | C | Reviewed meets requirements |
| 7.6.3 | Does a laboratory performing testing evaluate measurement uncertainty? ***Objective evidence is required** | QAM 1-5.6 Sec 11.3.2 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 7.6.3 | Where the test method precludes rigorous evaluation of measurement uncertainty, is an estimation made based on an understanding of the theoretical principles or practical experience of the performance of the method? | QAM 1-5.6 Sec 11.3.2 | C | Reviewed meets requirements |
| **7.7** | **Ensuring the validity of results** | | | |
| 7.7.1 | Does the laboratory have a **procedure** for monitoring the validity of results? ***Objective evidence is required** | QAM 1-5.6 AP20 | C | Reviewed meets requirements |
| 7.7.1 | Is the resulting data recorded in such a way that trends are detectable and, where practicable, statistical techniques applied to review the results? | QAM 1-5.6 Sec 11 AP20 | C | Reviewed meets requirements |
| 7.7.1 | Is this monitoring planned and reviewed and include, where appropriate, but not be limited to: | | | |
| 7.7.1.a | use of reference materials or quality control materials; | QAM 1-5.6 Sec 11 AP20 | NA | No Reference Material in use |
| 7.7.1.b | use of alternative instrumentation that has been calibrated to provide traceable results; | QAM 1-5.6 Sec 11 AP20 | C | Reviewed meets requirements |
| 7.7.1.c | functional check(s) of measuring and testing equipment; | QAM 1-5.6 Sec 11 AP20 | C | Reviewed meets requirements |
| 7.7.1.d | use of check or working standards with control charts, where applicable; | QAM 1-5.6 Sec 11 AP20 | C | Reviewed meets requirements |
| 7.7.1.e | intermediate checks on measuring equipment; | QAM 1-5.6 Sec 11 AP20 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 7.7.1.f | replicate tests or calibrations using the same or different methods; | QAM 1-5.6 Sec 11 AP20 | C | Reviewed meets requirements |
| 7.7.1.g | retesting or recalibration of retained items; | QAM 1-5.6 Sec 11 AP20 | C | Reviewed meets requirements |
| 7.7.1.h | correlation of results for different characteristics of an item; | QAM 1-5.6 Sec 11 AP20 | C | Reviewed meets requirements |
| 7.7.1.i | review of reported results; | QAM 1-5.6 Sec 11 AP20 | C | Reviewed meets requirements |
| 7.7.1.j | Intra-laboratory comparisons; | QAM 1-5.6 Sec 11 AP20 | C | Reviewed meets requirements |
| 7.7.1.k | testing of blind sample(s)? | QAM 1-5.6 Sec 11 AP20 | C | Reviewed meets requirements |
| 7.7.2 | Does the laboratory monitor its performance by comparison with results of other laboratories, where available and appropriate? | QAM 1-5.6 Sec 11 AP20 | C | Reviewed meets requirements |
| 7.7.2 | Is this monitoring planned and reviewed and include, but not be limited to, either or both of the following: | | | |
| 7.7.2.a | participation in proficiency testing; | QAM 1-5.6 AP20 | C | Reviewed meets requirements |
| 7.7.2.b | participation in inter-laboratory comparisons other than proficiency testing? | Use NAPT | NA | Only performs PTs |
| 7.7.3 | Is data from monitoring activities analyzed, used to control and, if applicable, improve the laboratory's activities? | QAM 1-5.6 Sec 11 AP20 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 7.7.3 | When the results of the analysis of data from monitoring activities are found to be outside pre-defined criteria, is appropriate action taken to prevent incorrect results from being reported? | QAM 1-5.6 Sec 11 AP20 | C | Reviewed meets requirements |
| **7.8** | **Reporting of Results** | | | |
| **7.8.1** | **General** | | | |
| 7.8.1.1 | Are results reviewed and authorized prior to release? | QAM 1-5.6 Sec 14.5.11 AP26 | C | Reviewed meets requirements |
| 7.8.1.2 | Are results provided accurately, clearly, unambiguously and objectively, usually in a report (e.g., a test report or a calibration certificate or report of sampling), and include all the information agreed with the customer and necessary for the interpretation of the results and all information required by the method used? | QAM 1-5.6 Sec 14.3 | C | Reviewed meets requirements |
| 7.8.1.2 | Are all issued reports retained as technical **records**? ***Objective evidence is required** | QAM 1-5.6 Sec 13 & 14 AP22 | C | Reviewed meets requirements |
| 7.8.1.3 | When agreed with the customer, the results may be reported in a simplified way. Is any information listed in 7.8.2 to 7.8.7 that is not reported to the customer readily available? ***Objective evidence is required** | QAM 1-5.6 Sec 14.3 | C | Reviewed meets requirements |
| **7.8.2** | **Common requirements for reports (test, calibration or sampling)** | | | |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 7.8.2.1 | Does each report include at least the following information, unless the laboratory has valid reasons for not doing so, thereby minimizing any possibility of misunderstanding or misuse: ***Objective evidence is required** | | C | Reviewed meets requirements |
| 7.8.2.1.a | a title (e.g., "Test Report", "Calibration Certificate" or "Report of Sampling"); | QAM 1-5.6 Sec 14.5.1 | C | Reviewed meets requirements |
| 7.8.2.1.b | the name and address of the laboratory; | QAM 1-5.6 Sec 14.5.2 | C | Reviewed meets requirements |
| 7.8.2.1.c | the location of performance of the laboratory activities, including when performed at a customer facility or at sites away from the laboratory's permanent facilities, or in associated temporary or mobile facilities; | QAM 1-5.6 Sec 14.5.2 | C | Reviewed meets requirements |
| 7.8.2.1.d | unique identification that all its components are recognized as a portion of a complete report and a clear identification of the end; | QAM 1-5.6 Sec 14.5.2 | C | Reviewed meets requirements |
| 7.8.2.1.e | the name and contact information of the customer; | QAM 1-5.6 Sec 14.5.3 | C | Reviewed meets requirements |
| 7.8.2.1.f | identification of the method used; | QAM 1-5.6 Sec 14.5.7 | C | Reviewed meets requirements |
| 7.8.2.1.g | a description, unambiguous identification, and, when necessary, the condition of the item; | QAM 1-5.6 Sec 14.5.4 & 14.5.6 | C | Reviewed meets requirements |
| 7.8.2.1.h | the date of receipt of the test or calibration item(s), and the date of sampling, where this is critical to the validity and application of the results; | QAM 1-5.6 Sec 14.5.19 | C | Reviewed meets requirements |
| 7.8.2.1.i | the date(s) of performance of the laboratory activity; | QAM 1-5.6 Sec 14.5.5 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 7.8.2.1.j | the date of issue of the report; | QAM 1-5.6 Sec 14.5.5 | C | Reviewed meets requirements |
| 7.8.2.1.k | reference to the sampling plan and sampling method used by the laboratory or other bodies where these are relevant to the validity or application of the results; | QAM 1-5.6 Sec 14.5.14 | NA | NA |
| 7.8.2.1.l | a statement to the effect that the results relate only to the items tested, calibrated or sampled; | QAM 1-5.6 Sec 14.5.12 | C | Reviewed meets requirements |
| 7.8.2.1.m | the results with, where appropriate, the units of measurement; | QAM 1-5.6 Sec 14.5.10 | C | Reviewed meets requirements |
| 7.8.2.1.n | additions to, deviations, or exclusions from the method; | QAM 1-5.6 Sec 14.5.8 | C | Reviewed meets requirements |
| 7.8.2.1.o | identification of the person(s) authorizing the report; | QAM 1-5.6 Sec 14.5.11 | C | Reviewed meets requirements |
| 7.8.2.1.p | clear identification when results are from external providers? | QAM 1-5.6 Sec 14.5.14 | C | Reviewed meets requirements |
| 7.8.2.2 | Is the laboratory responsible for all the information provided in the report, except when information is provided by the customer? | QAM 1-5.6 Sec 14.5.13 | C | Reviewed meets requirements |
| 7.8.2.2 | Is data provided by a customer clearly identified? | QAM 1-5.6 Sec 14.5.12 | C | Reviewed meets requirements |
| 7.8.2.2 | In addition, is a disclaimer put on the report when the information is supplied by the customer and can affect the validity of results? | QAM 1-5.6 Sec 14.5.13 | C | Reviewed meets requirements |
| 7.8.2.2 | Where the laboratory has not been responsible for the sampling stage (e.g., the sample has been provided by the customer), is it stated in the report that the results apply to the sample as received? | | NA | No sampling |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| **7.8.3** | **Specific requirements for test reports** | | | |
| 7.8.3.1 | In addition to the requirements listed in 7.8.2, do test reports, where necessary for the interpretation of the test results, include the following: ***Objective evidence is required** | | NA | Not a test Lab |
| 7.8.3.1.a | information on specific test conditions, such as environmental conditions; | | NA | Not a test Lab |
| 7.8.3.1.b | where relevant, a statement of conformity with requirements or specifications (see 7.8.6); | | NA | Not a test Lab |
| 7.8.3.1.c | where applicable, the measurement uncertainty presented in the same unit as that of the measurand or in a term relative to the measurand (e.g., percent) when:<br>- it is relevant to the validity or application of the test results;<br>- a customer's instruction so requires, or<br>- the measurement uncertainty affects conformity to a specification limit; | | NA | Not a test Lab |
| 7.8.3.1.d | where appropriate, opinions and interpretations (see 7.8.7): | | NA | Not a test Lab |
| 7.8.3.1.e | additional information that may be required by specific methods, authorities, customers or groups of customers? | | NA | Not a test Lab |
| 7.8.3.2 | Where the laboratory is responsible for the sampling activity, do test reports meet the requirements listed in 7.8.5 where necessary for the interpretation of test results? | | NA | Not a test Lab |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| **7.8.4** | **Specific requirements for calibration certificates** | | | |
| 7.8.4.1 | In addition to the requirements listed in 7.8.2, do calibration certificates include the following: ***Objective evidence is required** | | | |
| 7.8.4.1.a | the measurement uncertainty of the measurement result presented in the same unit as that of the measurand or in a term relative to the measurand (e.g., percent); | QAM 1-5.6 Sec 14.5.13 | C | Reviewed meets requirements |
| 7.8.4.1.b | the conditions (e.g., environmental) under which the calibrations were made that have an influence on the measurement results; | QAM 1-5.6 Sec 14.5.8 | C | Reviewed meets requirements |
| 7.8.4.1.c | a statement identifying how the measurements are metrologically traceable (see Annex A): | QAM 1-5.6 Sec 14.5.18 | C | Reviewed meets requirements |
| 7.8.4.1.d | the results before and after any adjustment or repair, if available; | QAM 1-5.6 Sec 14.5.10 AP14 | C | Reviewed meets requirements |
| 7.8.4.1.e | where relevant, a statement of conformity with requirements or specifications (see 7.8.6); | QAM 1-5.6 Sec 14.5.21 | C | Reviewed meets requirements |
| 7.8.4.1.f | where appropriate, opinions and interpretations (see 7.8.7)? | QAM 1-5.6 Sec 14.5.20 | C | Reviewed meets requirements |
| 7.8.4.2 | Where the laboratory is responsible for the sampling activity, do calibration certificates meet the requirements listed in 7.8.5 where necessary for the interpretation of calibration results? | | NA | No Sampling |
| 7.8.4.3 | Do calibration certificates or calibration labels not contain any recommendation on the calibration interval, except where this has been agreed with the customer? | QAM 1-5.6 AP 14 pg 5 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| **7.8.5** | **Reporting sampling - specific requirements** | | | |
| 7.8.5 | Where the laboratory is responsible for the sampling activity, in addition to the requirements listed in 7.8.2 do the reports include the following, where necessary for the interpretation of results: ***Objective evidence is required** | | NA | No Sampling |
| 7.8.5.a | the date of sampling; | | NA | No Sampling |
| 7.8.5.b | unique identification of the item or material sampled (including the name of the manufacturer, the model or type of designation and serial numbers, as appropriate); | | NA | No Sampling |
| 7.8.5.c | the location of sampling, including any diagrams, sketches or photographs; | | NA | No Sampling |
| 7.8.5.d | a reference to the sampling plan and sampling method; | | NA | No Sampling |
| 7.8.5.e | details of any environmental conditions during sampling that affect the interpretation of the results; | | NA | No Sampling |
| 7.8.5.f | information required to evaluate measurement uncertainty for subsequent testing or calibration? | | NA | No Sampling |
| **7.8.6** | **Reporting statements of conformity** | | | |
| 7.8.6.1 | When a statement of conformity to a specification or standard is provided, does the laboratory document the decision rule employed, taking into account the level of risk (such as false accept and false reject and statistical assumptions) associated with the decision rule employed, and apply the decision rule? | QAM 1-5.6<br>AP 28 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 7.8.6.2 | Does the laboratory report on the statement of conformity, such that the statement clearly identifies: ***Objective evidence is required** | | C | Reviewed meets requirements |
| 7.8.6.2.a | to which results the statement of conformity applies; | QAM 1-5.6 AP 28 & AP 14 pg 5 | C | Reviewed meets requirements |
| 7.8.6.2.b | which specifications, standards or parts thereof are met or not met; | QAM 1-5.6 AP 28 & AP 14 pg 5 | C | Reviewed meets requirements |
| 7.8.6.2.c | the decision rule applied (unless it is inherent in the requested specification or standard)? | QAM 1-5.6 AP 28 & AP 14 pg 5 | C | Reviewed meets requirements |
| **7.8.7** | **Reporting opinions and interpretations** | | | |
| 7.8.7.1 | When opinions and interpretations are expressed, does the laboratory ensure that only personnel authorized for the expression of opinions and interpretations release the respective statement? | QAM 1-5.6 sec 14.4 AP17 | C | Reviewed meets requirements |
| 7.8.7.1 | Does the laboratory document the basis upon which the opinions and interpretations have been made? | QAM 1-5.6 sec 14.4 | C | Reviewed meets requirements |
| 7.8.7.2 | Are the opinions and interpretations expressed in reports based on the results obtained from the tested or calibrated item and clearly identified as such? | QAM 1-5.6 sec 14.4 | C | Reviewed meets requirements |
| 7.8.7.3 | When opinions and interpretations are directly communicated by dialogue with the customer, is a record of the dialogue retained? | QAM 1-5.6 sec 14.4 | C | Reviewed meets requirements |
| **7.8.8** | **Amendments to reports** | | | |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 7.8.8.1 | When an issued report needs to be changed, amended or re-issued, is any change of information clearly identified and, where appropriate, the reason for the change included in the report? ***Objective evidence is required** | QAM 1-5.6 sec 14.8 | C | Reviewed meets requirements |
| 7.8.8.2 | Are amendments to a report after issue made only in the form of a further document, or data transfer, which includes the statement "Amendment to Report, serial number... [or as otherwise identified)", or an equivalent form of wording? ***Objective evidence is required** | QAM 1-5.6 sec 14.8 | C | Reviewed meets requirements |
| 7.8.8.2 | Do such amendments meet all the requirements of this document? | QAM 1-5.6 sec 14.8 | C | Reviewed meets requirements |
| 7.8.8.3 | When it is necessary to issue a complete new report, is this uniquely identified and contain a reference to the original that it replaces? | QAM 1-5.6 sec 14.8 | C | Reviewed meets requirements |
| **7.9** | **Complaints** | | | |
| 7.9.1 | Does the laboratory have a **documented process** to receive, evaluate and make decisions on complaints? ***Objective evidence is required** | QAM 1-5.6 AP10 | C | Reviewed meets requirements |
| 7.9.2 | Is a description of the handling process for complaints available to any interested party on request? | QAM 1-5.6 AP10 | C | Reviewed meets requirements |
| 7.9.2 | Upon receipt of a complaint, does the laboratory confirm whether the complaint relates to laboratory activities that it is responsible for and, if so, deal with it? | QAM 1-5.6 AP10 | C | Reviewed meets requirements |
| 7.9.2 | Is the laboratory responsible for all decisions at all levels of the handling process for complaints? | QAM 1-5.6 AP10 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 7.9.3 | Does the process for handling complaints include at least the following elements and methods: | | C | Reviewed meets requirements |
| 7.9.3.a | description of the process for receiving, validating, investigating the complaint, and deciding what actions are to be taken in response to it? | QAM 1-5.6 AP10 | C | Reviewed meets requirements |
| 7.9.3.b | tracking and recording complaints, including actions undertaken to resolve them? | QAM 1-5.6 AP10 | C | Reviewed meets requirements |
| 7.9.3.c | ensuring that any appropriate action is taken? | QAM 1-5.6 AP10 | C | Reviewed meets requirements |
| 7.9.4 | Is the laboratory receiving the complaint responsible for gathering and verifying all necessary information to validate the complaint? | QAM 1-5.6 AP10 | C | Reviewed meets requirements |
| 7.9.5 | Whenever possible, does the laboratory acknowledge receipt of the complaint, and provide the complainant with progress reports and the outcome? | QAM 1-5.6 AP10 | C | Reviewed meets requirements |
| 7.9.6 | Are the outcomes communicated to the complainant made by, or reviewed and approved by, individuals not involved in the original laboratory activities in question? | QAM 1-5.6 AP10 | C | Reviewed meets requirements |
| 7.9.7 | Whenever possible, does the laboratory give formal notice of the end of the complaint handling to the complainant? | QAM 1-5.6 AP10 | C | Reviewed meets requirements |
| **7.10** | **Nonconforming work** | | | |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 7.10.1 | Does the laboratory have a **procedure** that is implemented when any aspect of its laboratory activities or results of this work do not conform to its own **procedures** or the agreed requirements of the customer (e.g. equipment or environmental conditions are out of specified limits, results of monitoring fail to meet specified criteria)? ***Objective evidence is required** | QAM 1-5.6 sec. 9 / 14 / 16 AP18 & AP14 | C | Reviewed meets requirements |
| 7.10.1 | Does the **procedure** ensure that: ***Objective evidence is required** | | | |
| 7.10.1.a | the responsibilities and authorities for the management of nonconforming work are defined? | QAM 1-5.6 AP18 AP14 | C | Reviewed meets requirements |
| 7.10.1.b | actions (including halting or repeating of work and withholding of reports, as necessary) are based upon the risk levels established by the laboratory? | QAM 1-5.6 AP18 AP14 | C | Reviewed meets requirements |
| 7.10.1.c | an evaluation is made of the significance of the nonconforming work, including an impact analysis on previous results? | QAM 1-5.6 AP18 AP14 | C | Reviewed meets requirements |
| 7.10.1.d | a decision is taken on the acceptability of the nonconforming work? | QAM 1-5.6 AP18 AP14 | C | Reviewed meets requirements |
| 7.10.1.e | where necessary, the customer is notified and work is recalled? | QAM 1-5.6 AP18 AP14 | C | Reviewed meets requirements |
| 7.10.1.f | the responsibility for authorizing the resumption of work is defined? | QAM 1-5.6 AP18 AP14 | C | Reviewed meets requirements |
| 7.10.2 | Does the laboratory retain **records** of nonconforming work and actions as specified in 7.10.1, bullets b) to f)? ***Objective evidence is required** | QAM 1-5.6 AP18 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 7.10.3 | Where the evaluation indicates that the nonconforming work could recur, or that there is doubt about the conformity of the laboratory's operations with its own management system, does the laboratory implement corrective action? | QAM 1-5.6 AP6 AP18 | C | Reviewed meets requirements |
| **7.11** | **Control of data and information management** | | | |
| 7.11.1 | Does the laboratory have access to the data and information needed to perform laboratory activities? | QAM 1-5.6 sec 13 | C | Reviewed meets requirements |
| 7.11.2 | Is the laboratory information management system(s) used for the collection, processing, recording, reporting, storage or retrieval of data validated for functionality, including the proper functioning of interfaces within the laboratory information management system(s) by the laboratory before introduction? | QAM 1-5.6 sec 13.1 | C | Reviewed meets requirements |
| 7.11.2 | Whenever there are any changes, including laboratory software configuration or modifications to commercial off-the-shelf software, are they authorized, documented and validated before implementation? | QAM 1-5.6 sec 11.5.1 | C | Reviewed meets requirements |
| 7.11.3 | Are the laboratory information management system(s): | | | Reviewed meets requirements |
| 7.11.3.a | protected from unauthorized access; | QAM 1-5.6 AP22 | C | Reviewed meets requirements |
| 7.11.3.b | safeguarded against tampering and loss; | QAM 1-5.6 AP22 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 7.11.3.c | operated in an environment that complies with provider or laboratory specifications or, in the case of non-computerized systems, provides conditions which safeguard the accuracy of manual recording and transcription; | QAM 1-5.6 AP22 | C | Reviewed meets requirements |
| 7.11.3.d | maintained in a manner that ensures the integrity of the data and information; | QAM 1-5.6 AP22 | C | Reviewed meets requirements |
| 7.11.3.e | include recording system failures and the appropriate immediate and corrective actions? | QAM 1-5.6 AP22 AP6 | C | Reviewed meets requirements |
| 7.11.4 | When a laboratory information management system is managed and maintained off-site or through an external provider, does the laboratory ensure that the provider or operator of the system complies with all applicable requirements of this document? | QAM 1-5.6 AP22 | C | Reviewed meets requirements |
| 7.11.5 | Does the laboratory ensure that instructions, manuals and reference data relevant to the laboratory information management system(s) are made readily available to personnel? | QAM 1-5.6 sec 13.1 | C | Reviewed meets requirements |
| 7.11.6 | Are calculations and data transfers checked in an appropriate and systematic manner? | QAM 1-5.6 sec 11.5.1 | C | Reviewed meets requirements |
| **8.1** | **Options** | | | |
| **8.1.1** | **General** | | | |
| 8.1.1 | Does the laboratory establish, document, implement and maintain a management system that is capable of supporting and demonstrating the consistent achievement of the requirements of this document and assuring the quality of the laboratory results? | QAM 1-5.6 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 8.1.1 | In addition to meeting the requirements of Clauses 4 to 7, does the laboratory implement a management system in accordance with Option A or Option B? | | | Lab is Option A |
| **8.1.2** | **Option A** | | | |
| 8.1.2 | As a minimum, does the management system of the laboratory address the following:<br>- management system documentation (see 8.2):<br>- control of management system documents (see 8.3);<br>- control of **records** (see 8.4);<br>- actions to address risks and opportunities (see 8.5);<br>- improvement (see 8.6):<br>- corrective actions (see 8.7):<br>- internal audits (see 8.8);<br>- management reviews (see 8.9)?<br>***Objective evidence is required** | QAM 1-5.6 | C | Reference is the entire Quality Manual, which addresses the requirements of ISO/IEC 17025:2017. |
| **8.1.3** | **Option B** | | | |
| 8.1.3 | Has the laboratory established and does it maintain a management system, in accordance with the requirements of ISO 9001, and that is capable of supporting and demonstrating the consistent fulfillment of the requirements of Clauses 4 to 7 of this International Standard (ISO/IEC 17025), and also fulfills the management system clause requirements in 8.2 to 8.9? | | NA | Option A |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| ANAB Policy | If a laboratory claims compliance with Option B, it shall demonstrate that it has established a management system that complies with ISO 9001 and that the management system is capable of supporting the consistent fulfillment of the requirements of ISO/IEC 17025. ***Objective evidence is required**<br><br>ANAB shall verify the claims made by sampling the ISO 9001 management system relevant to reference material production and certification activities. ***Objective evidence is required**<br><br>ANAB shall verify compliance with 8.1.3, through representative sampling and review of objective evidence against clauses 8.2 to 8.9 of the standard, as relevant to the testing or calibration activities. If the verification results in the identification of nonconformities, these will be cited against clause 8.1.3 and the appropriate cross-reference to the clause of 8.2-8.9. | | NA | Option A |
| **8.2** | **Management system documentation (Option A)** | | | |
| 8.2.1 | Does the laboratory management establish, document, and maintain **policies** and objectives for the fulfillment of the purposes of this document and shall ensure that the **policies** and objectives are acknowledged and implemented at all levels of the laboratory organization? ***Objective evidence is required** | QAM 1-5.6 sec 3.0 5.3 and 6.0 | C | Reviewed meets requirements |
| 8.2.2 | Do the **policies** and objectives address the competence, impartiality and consistent operation of | QAM 1-5.6 sec 3.1.1 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| | the laboratory? | | | |
| 8.2.3 | Does laboratory management provide evidence of commitment to the development and implementation of the management system and to continually improving its effectiveness? | QAM 1-5.6 sec 3.1.2 | C | Reviewed meets requirements |
| 8.2.4 | Do all documentation, processes, systems, **records**, related to the fulfillment of the requirements of this document included in, referenced from, or linked to the management system? | QAM 1-5.6 sec 3.1.5 | C | Reviewed meets requirements |
| 8.2.5 | Do all personnel involved in laboratory activities have access to the parts of the management system documentation and related information that are applicable to their responsibilities? | QAM 1-5.6 sec 3.0 6.0 and 13.1 | C | Reviewed meets requirements |
| **8.3** | **Control of management system documents (Option A)** | | | |
| 8.3.1 | Does the laboratory control the documents (internal and external) that relate to the fulfillment of this document? ***Objective evidence is required** | QAM 1-5.6 sec 6.0 | C | Reviewed meets requirements |
| 8.3.2 | Does the laboratory ensure that: | | C | |
| 8.3.2.a | documents are approved for adequacy prior to issue by authorized personnel; | QAM 1-5.6 sec 6.1 & 6.3.2.1.2 | C | Reviewed meets requirements |
| 8.3.2.b | documents are periodically reviewed, and updated as necessary; | QAM 1-5.6 sec 6.3.2.1.1c | C | Reviewed meets requirements |
| 8.3.2.c | changes and the current revision status of documents are identified; | QAM 1-5.6 sec | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| | | 6.3.2.1.1c | | |
| 8.3.2.d | relevant versions of applicable documents are available at points of use and, where necessary, their distribution is controlled; | QAM 1-5.6 sec 6.3.2.1.1 AP 3 Appendix N | C | Reviewed meets requirements |
| 8.3.2.e | documents are uniquely identified; | QAM 1-5.6 sec 6.3.2.1.1a | C | Reviewed meets requirements |
| 8.3.2.f | the unintended use of obsolete documents is prevented, and suitable identification is applied to them if they are retained for any purpose? | QAM 1-5.6 sec 6.3.2.1.1e | C | Reviewed meets requirements |
| **8.4** | **Control of records (Option A)** | | | |
| 8.4.1 | Does the laboratory establish and retain legible **records** to demonstrate fulfillment of the requirements in this document? ***Objective evidence is required** | QAM 1-5.6 sec 13 AP22 | C | Reviewed meets requirements |
| 8.4.2 | Does the laboratory implement the controls needed for the identification, storage, protection, back-up, archive, retrieval, retention time, and disposal of its **records**? ***Objective evidence is required** | QAM 1-5.6 sec 13 AP22 | C | Reviewed meets requirements |
| 8.4.2 | Does the laboratory retain **records** for a period consistent with its contractual obligations? | AP 22 | C | Reviewed meets requirements |
| 8.4.2 | Is access to these **records** consistent with the confidentiality commitments, and are **records** readily available? | AP 22 | C | Reviewed meets requirements |
| **8.5** | **Actions to address risks and opportunities (Option A)** | | | |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 8.5.1 | Does the laboratory consider the risks and opportunities associated with the laboratory activities in order to: ***Objective evidence is required** | | | |
| 8.5.1.a | give assurance that the management system achieves its intended results; | AP 29 | C | Reviewed meets requirements |
| 8.5.1.b | enhance opportunities to achieve the purpose and objectives of the laboratory; | AP 29 | C | Reviewed meets requirements |
| 8.5.1.c | prevent, or reduce, undesired impacts and potential failures in the laboratory activities; | AP 29 | C | Reviewed meets requirements |
| 8.5.1.d | achieve improvement? | AP 29 | C | Reviewed meets requirements |
| 8.5.2 | Does the laboratory plan: | | | |
| 8.5.2.a | actions to address these risks and opportunities; | AP 29 | C | Reviewed meets requirements |
| 8.5.2.b | how to:<br>- integrate and implement these actions into its management system;<br>- evaluate the effectiveness of these actions? | AP 29 | C | Reviewed meets requirements |
| 8.5.3 | Are actions taken to address risks and opportunities proportional to the potential impact on the validity of laboratory results? | AP 29 | C | Reviewed meets requirements |
| **8.6** | **Improvement (Option A)** | | | |
| 8.6.1 | Does the laboratory identify and select opportunities for improvement and implement any necessary actions? | QAM 1-5.6 sec 3.4 & 17.1 | C | Reviewed meets requirements |
| 8.6.2 | Does the laboratory seek feedback, both positive and negative, from its customers? | QAM 1-5.6 sec 17.2 | C | Reviewed meets requirements |

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|---|---|---|---|---|
| 8.6.3 | Is the feedback analyzed and used to improve the management system, laboratory activities and customer service? | QAM 1-5.6 sec17.2.2 | C | Reviewed meets requirements |
| **8.7** | **Corrective actions (Option A)** | | | |
| 8.7.1 | When a nonconformity occurs, does the laboratory: | | | |
| 8.7.1.a | react to the nonconformity and, as applicable:<br>- take action to control and correct it;<br>- address the consequences; | QAM 1-5.6 AP6 | C | Reviewed meets requirements |
| 8.7.1.b | evaluate the need for action to eliminate the cause (s) of the nonconformity, in order that it does not recur or occur elsewhere, by:<br>- reviewing and analyzing the nonconformity;<br>- determining the causes of the nonconformity;<br>- determining if similar nonconformities exist, or could potentially occur; | QAM 1-5.6 AP6 | C | Reviewed meets requirements |
| 8.7.1.c | implement any action needed; | QAM 1-5.6 AP6 | C | Reviewed meets requirements |
| 8.7.1.d | review the effectiveness of any corrective action taken; | QAM 1-5.6 AP6 | C | Reviewed meets requirements |
| 8.7.1.e | update risks and opportunities determined during planning, if necessary; | QAM 1-5.6 AP6 | C | Reviewed meets requirements |
| 8.7.1.f | make changes to the management system, if necessary? | QAM 1-5.6 AP6 | C | Reviewed meets requirements |
| 8.7.2 | Are corrective actions appropriate to the effects of the nonconformities encountered? | QAM 1-5.6 AP6 | C | Reviewed meets requirements |
| 8.7.3 | Does the laboratory retain **records** as evidence of:<br>***Objective evidence is required** | QAM 1-5.6 AP6 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 8.7.3.a | the nature of the nonconformities, cause(s) and any subsequent actions taken; | QAM 1-5.6 AP6 | C | Reviewed meets requirements |
| 8.7.3.b | the results of any corrective action? | QAM 1-5.6 AP6 | C | Reviewed meets requirements |
| **8.8** | **Internal audits (Option A)** | | | |
| 8.8.1 | Does the laboratory conduct internal audits at planned intervals to provide information on whether the management system: | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.8.1.a | conforms to:<br>- the laboratory's own requirements for its management system, including the laboratory activities;<br>- the requirements of this document; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.8.1.b | is effectively implemented and maintained? | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.8.2 | Does the laboratory: | | | |
| 8.8.2.a | plan, establish, implement and maintain an audit program including the frequency, methods, responsibilities, planning requirements and reporting, which shall take into consideration the importance of the laboratory activities concerned, changes affecting the laboratory, and the results of previous audits; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.8.2.b | define the audit criteria and scope for each audit; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.8.2.c | ensure that the results of the audits are reported to relevant management; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.8.2.d | implement appropriate correction and corrective actions without undue delay; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |

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| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 8.8.2.e | retain **records** as evidence of the implementation of the audit program and the audit results? ***Objective evidence is required** | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| **8.9** | **Management reviews (Option A)** | | | |
| 8.9.1 | Does the laboratory management review its management system at planned intervals, in order to ensure its continuing suitability, adequacy and effectiveness, including the stated **policies** and objectives related to the fulfillment of this document? ***Objective evidence is required** | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.2 | Are the inputs to management review recorded and include information related to the following: | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.2.a | changes in internal and external issues that are relevant to the laboratory; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.2.b | fulfillment of objectives; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.2.c | suitability of **policies** and **procedures**; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.2.d | status of actions from previous management reviews; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.2.e | outcome of recent internal audits; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.2.f | corrective actions; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.2.g | assessments by external bodies; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.2.h | changes in the volume and type of the work or in the range of laboratory activities; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.2.i | customer and personnel feedback; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |

Legend: *Lab Document Reference* = Laboratory document to demonstrate compliance. Include: Document Name(s), Paragraph Number(s) or Equivalent. *C* = Compliant, *NC* = Non-Compliant, *NA* = Not Applicable

*These requirements at a minimum will be covered during an AADR activity.

| ISO/IEC 17025 Element | Requirement | Customer Document Reference | Conformance C \| NC \| NA | Comments on Conformance |
|---|---|---|---|---|
| 8.9.2.j | complaints; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.2.k | effectiveness of any implemented improvements; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.2.l | adequacy of resources; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.2.m | results of risk identification; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.2.n | outcomes of the assurance of the validity of results; and | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.2.o | other relevant factors, such as monitoring activities and training? | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.3 | Do the outputs from the management review record all decisions and actions related to at least: | | | |
| 8.9.3.a | the effectiveness of the management system and its processes; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.3.b | improvement of the laboratory activities related to the fulfillment of the requirements of this document; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.3.c | provision of required resources; | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |
| 8.9.3.d | any need for change? | QAM 1-5.6 sec 6.4 AP7 | C | Reviewed meets requirements |

## ANAB Accreditation Requirements

| Document Number | Document Name | Customer Document Reference | Conformance C \| NC \| NA | Comments on Compliance |
|---|---|---|---|---|
| ***Accreditation Requirements for Calibration Laboratories**<br>• Proficiency testing | | | C | Reviewed meets requirements |

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*These requirements at a minimum will be covered during an AADR activity.

| Document Number | Document Name | Customer Document Reference | Conformance C \| NC \| NA | Comments on Compliance |
|---|---|---|---|---|
| • Traceability<br>• Traceability using RMs<br>• Uncertainty of measurement<br>• In-house calibrations | | | | |
| ***Accreditation Requirements for Testing Laboratories**<br>• Proficiency testing<br>• Traceability<br>• Traceability using RMs<br>• Uncertainty of measurement<br>• In-house calibrations | | | NA | Not a Testing Lab |
| ***Use of ANAB Accreditation Symbols and Claims of Accreditation Status**<br>• Verify appropriate use on reports and certificates.<br>• Verify appropriate use on marketing materials.<br>• Verify appropriate use on website.<br>• Verify appropriate use of combined symbol with ILAC mark, if applicable.<br>• Verify appropriate use on calibration stickers, if applicable. | | AP 25 | C | Reviewed meets requirements |
| **Scope of Accreditation and Associated Uncertainty Budgets**<br>Assure appropriate uncertainties are complete and note if changed. | | | C | Reviewed meets requirements |
| **Areas of Concern** | None | | | |

Legend: *Lab Document Reference* = Laboratory document to demonstrate compliance. Include: Document Name(s), Paragraph Number(s) or Equivalent. *C* = Compliant, *NC* = Non-Compliant, *NA* = Not Applicable

*These requirements at a minimum will be covered during an AADR activity.