| Section | Clause | Requirement | Result | Comments |
| --- | --- | --- | --- | --- |
| 4.1 Impartiality | 4.1.1 ISO/IEC 17025:2017 | Are laboratory activities undertaken impartially and structured and managed so as to safeguard impartiality? | Choose an item. |  |
| 4.1 Impartiality | 4.1.2 ISO/IEC 17025:2017 | Is the laboratory management committed to impartiality? | Choose an item. |  |
| 4.1 Impartiality | 4.1.3 ISO/IEC 17025:2017 | Is the laboratory responsible for the impartiality of its laboratory activities and does the Laboratory not allow commercial, financial or other pressures to compromise impartiality? | Choose an item. |  |
| 4.1 Impartiality | 4.1.3.1 ANAB Accreditation Requirement | Does the management system: a) have a code of ethics as part of the management’s commitment to good professional practice, b) ensure annual review of the document by all personnel and maintain a record of the review, and c) ensure appropriate actions are taken when necessary? | Choose an item. |  |
| 4.1 Impartiality | 4.1.4 ISO/IEC 17025:2017 | Does the laboratory identify risks to its impartiality on an on-going basis? Does this include those risks that arise from its activities, or from its relationships, or from the relationships of its personnel? However, such relationships do not necessarily present a laboratory with a risk to impartiality.  NOTE A relationship that threatens the impartiality of the laboratory can be based on ownership, governance, management, personnel, shared resources, finances, contracts, marketing (including branding), and payment of a sales commission or other inducement for the referral of new customers, etc. | Choose an item. |  |
| 4.1 Impartiality | 4.1.5 ISO/IEC 17025:2017 | If a risk to impartiality is identified, is the laboratory able to demonstrate how it eliminates or minimizes such risk? | Choose an item. |  |
| 4.2 Confidentiality | 4.2.1 ISO/IEC 17025:2017 | Is the laboratory responsible, through legally enforceable commitments, for the management of all information obtained or created during the performance of laboratory activities? Does the laboratory inform the customer in advance of the information it intends to place in the public domain? 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? | Choose an item. |  |
| 4.2 Confidentiality | 4.2.2 ISO/IEC 17025:2017 | 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? | Choose an item. |  |
| 4.2 Confidentiality | 4.2.3 ISO/IEC 17025:2017 | Is information about the customer obtained from sources other than the customer (e.g., complainant, regulators) confidential between the customer and the laboratory? Is the provider (source) of this information confidential to the laboratory and not shared with the customer, unless agreed by the source? | Choose an item. |  |
| 4.2 Confidentiality | 4.2.4 ISO/IEC 17025:2017 | 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? | Choose an item. |  |
| 5. Structural requirements | 5.1 ISO/IEC 17025:2017 | Is the laboratory a legal entity, or a defined part of a legal entity, that is legally responsible for its laboratory activities?  NOTE: For the purposes of this document, a governmental laboratory is deemed to be a legal entity on the basis of its governmental status. | Choose an item. |  |
| 5. Structural requirements | 5.2 ISO/IEC 17025:2017 | Does the laboratory identify management that has overall responsibility for the laboratory? | Choose an item. |  |
| 5. Structural requirements | 5.2.1 ANAB Accreditation Requirement | Is there a director, whose duties are defined? | Choose an item. |  |
| 5. Structural requirements | 5.3 ISO/IEC 17025:2017 | Does the laboratory define and document the range of laboratory activities for which it conforms with this document? 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? | Choose an item. |  |
| 5. Structural requirements | 5.4 ISO/IEC 17025:2017 | Are laboratory activities carried out in such a way as to meet the requirements ISO/IEC 17025:2017, the laboratory's customers, regulatory authorities, and organizations providing recognition? 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?  ANAB NOTE: An example of a regulatory authority is the Federal Bureau of Investigation for laboratories participating in the National DNA Index System (NDIS). | Choose an item. |  |
| 5. Structural requirements | 5.4.1 ANAB Accreditation Requirement | Does an accredited laboratory conform to requirements in PR 1018 ANAB Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status? | Choose an item. |  |
| 5. Structural requirements | 5.4.2 ANAB Accreditation Requirement | If a laboratory performs testing or calibration under the authority of a statute, regulation or other legal requirement, does the laboratory make this readily available?  NOTE A legal requirement is created, imposed, and enforced by a third-party external to the laboratory. | Choose an item. |  |
| 5. Structural requirements | 5.5 ISO/IEC 17025:2017 | a) Does the laboratory 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? b) Does the laboratory specify the responsibility, authority, and interrelationship of all personnel who manage, perform, or verify work affecting the results of laboratory activities? c) Does the laboratory document its procedures to the extent necessary to ensure the consistent application of its laboratory activities and the validity of the results?  ANAB NOTE: c) Documenting procedures to the extent necessary to ensure the consistent application of testing and calibration and the validity of the results includes analysis and data interpretation to arrive at a result, opinion or interpretation. | Choose an item. |  |
| 5. Structural requirements | 5.6 ISO/IEC 17025:2017 | Does the laboratory have personnel who, irrespective of other responsibilities, have the authority and resources needed to carry out their duties, including: a) implementation, maintenance, and improvement of the management system, b) identification of deviations from the management system or from the procedures for performing laboratory activities, c) initiation of actions to prevent or minimize such deviations, d) reporting to laboratory management on the performance of the management system and any need for improvement, and e) ensuring the effectiveness of laboratory activities? | Choose an item. |  |
| 5. Structural requirements | 5.7 ISO/IEC 17025:2017 | Does the laboratory management ensure that: a) communication takes place regarding the effectiveness of the management system and the importance of meeting customers' and other requirements and b) the integrity of the management system is maintained when changes to the management system are planned and implemented? | Choose an item. |  |
| 6.1 General | 6.1 ISO/IEC 17025:2017 | Does the laboratory have available the personnel, facilities, equipment, systems and support services necessary to manage and perform its laboratory activities? | Choose an item. |  |
| 6.2 Personnel | 6.2.1 ISO/IEC 17025:2017 | 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? | Choose an item. |  |
| 6.2 Personnel | 6.2.2 ISO/IEC 17025:2017 | 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?  ANAB NOTE: See GD 3152 for guidance on the phrase “influence the result of laboratory activities”. | Choose an item. |  |
| 6.2 Personnel | 6.2.2.1 ANAB Accreditation Requirement | Do personnel who authorize results, opinions and/or interpretations meet the minimum educational requirements established in the country in which the laboratory operates (see ANAB AR3125 Annex A)? | Choose an item. |  |
| 6.2 Personnel | 6.2.2.2 ANAB Accreditation Requirement | Does the training program, to the extent necessary based on job function, include: a) the knowledge, skills, and abilities needed to perform work, b) general knowledge of forensic science, c) the application of ethical practices in forensic science, d) criminal law, civil law, and testimony, e) provisions for retraining, f) provisions for maintenance of skills and expertise, and g) criteria for acceptable performance?  NOTE 1: Past work experience and training may be substituted for portions of the training program to the extent that it has been demonstrated to be relevant and sufficient.  NOTE 2: ISO/IEC 17025:2017, section 7.3 may be applicable to training programs | Choose an item. |  |
| 6.2 Personnel | 6.2.3 ISO/IEC 17025:2017 | 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? | Choose an item. |  |
| 6.2 Personnel | 6.2.3.1 ANAB Accreditation Requirement | Are all personnel who perform testing or calibration activities including the review and authorization of results and the expression of an opinion or interpretation competency tested? Does the competency test include practical examination(s) that cover the spectrum of anticipated tasks related to the test or calibration? Are the competency test’s intended results achieved prior to performing the tasks on a test or a calibration item?   NOTE: Competency testing can be conducted for an individual task or a group of tasks covered by a module of a training program. | Choose an item. |  |
| 6.2 Personnel | 6.2.3.2 ANAB Accreditation Requirement | Do personnel who perform technical review of results or testimony (7.7.1.l) meet the competency requirements as specified in 6.2.3.1? | Choose an item. |  |
| 6.2 Personnel | 6.2.4 ISO/IEC 17025:2017 | Does the management of the laboratory communicate to personnel their duties, responsibilities, and authorities? | Choose an item. |  |
| 6.2 Personnel | 6.2.5 ISO/IEC 17025:2017 | Does the laboratory have procedure(s) and retain records for: a) determining the competence requirements, b) selection of personnel, c) training of personnel, d) supervision of personnel, e) authorization of personnel, and f) monitoring competence of personnel? | Choose an item. |  |
| 6.2 Personnel | 6.2.6 ISO/IEC 17025:2017 | Does the laboratory authorize personnel to perform specific laboratory activities, including but not limited to, the following: a) development, modification, verification, and validation of methods, b) analysis of results, including statements of conformity or opinions and interpretations, and c) report, review, and authorization of results?  ANAB NOTE: Authorization of personnel includes all aspects of testing or calibration including, as applicable, the use of equipment. | Choose an item. |  |
| 6.3 Facilities and environmental conditions | 6.3.1 ISO/IEC 17025:2017 | Are facilities and environmental conditions suitable for the laboratory activities and maintained so they do not adversely affect the validity of results?  NOTE: Influences that can adversely affect the validity of results can include, but are not limited to, microbial contamination, dust, electromagnetic disturbances, radiation, humidity, electrical supply, temperature, sound, and vibration. | Choose an item. |  |
| 6.3 Facilities and environmental conditions | 6.3.2 ISO/IEC 17025:2017 | Are the requirements for facilities and environmental conditions necessary for the performance of the laboratory activities documented? | Choose an item. |  |
| 6.3 Facilities and environmental conditions | 6.3.3 ISO/IEC 17025:2017 | 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? | Choose an item. |  |
| 6.3 Facilities and environmental conditions | 6.3.4 ISO/IEC 17025:2017 | Are measures to control facilities implemented, monitored, and periodically reviewed, and do the measures include, but not be limited to: a) access to and use of areas affecting laboratory activities, b) prevention of contamination, interference or adverse influences on laboratory activities, and c) effective separation between areas with incompatible laboratory activities? | Choose an item. |  |
| 6.3 Facilities and environmental conditions | 6.3.4.1 ANAB Accreditation Requirement | Is there a procedure that addresses security and access to areas where testing and calibration occur?  NOTE Topics to consider may include, but are not limited to: access to building, access by personnel, access by visitors, security during operational hours and non-operational hours, and devices that grant access. | Choose an item. |  |
| 6.3 Facilities and environmental conditions | 6.3.5 ISO/IEC 17025:2017 | 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? | Choose an item. |  |
| 6.4 Equipment | 6.4.1 ISO/IEC 17025:2017 | 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?  NOTE 1 A multitude of names exist for reference materials and certified reference materials, including reference standards, calibration standards, standard reference materials and quality control materials. ISO 17034 contains additional information on reference material producers (RMPs). RMPs that meet the requirements of ISO 17034 are considered to be competent. Reference materials from RMPs meeting the requirements of ISO 17034 are provided with a product information sheet/certificate that specifies, amongst other characteristics, homogeneity and stability for specified properties and, for certified reference materials, specified properties with certified values, their associated measurement uncertainty and metrological traceability.  NOTE 2 ISO Guide 33 provides guidance on the selection and use of reference materials. ISO Guide 80 provides guidance to produce in-house quality control materials. | Choose an item. |  |
| 6.4 Equipment | 6.4.2 ISO/IEC 17025:2017 | When the laboratory uses equipment outside its permanent control, does it ensure that the requirements for equipment of this document are met? | Choose an item. |  |
| 6.4 Equipment | 6.4.3 ISO/IEC 17025:2017 | 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? | Choose an item. |  |
| 6.4 Equipment | 6.4.3.1 ANAB Accreditation Requirement | In addition to the procedural requirements in ISO/IEC 17025:2017 clause 6.4.3, are prepared reagents labeled with, at a minimum, the identity of the reagent and the date of preparation or lot number? Are records maintained identifying who made the reagent and the components used in preparation? | Choose an item. |  |
| 6.4 Equipment | 6.4.3.2 ANAB Accreditation Requirement | Do reference collections have each entry in the collection documented, uniquely identified, and handled properly to protect the characteristic(s) of interest? | Choose an item. |  |
| 6.4 Equipment | 6.4.4 ISO/IEC 17025:2017 | Does the laboratory verify that equipment conforms to specified requirements before being placed or returned into service? | Choose an item. |  |
| 6.4 Equipment | 6.4.5 ISO/IEC 17025:2017 | Is the equipment used for measurement capable of achieving the measurement accuracy and/or measurement uncertainty required to provide a valid result? | Choose an item. |  |
| 6.4 Equipment | 6.4.6 ISO/IEC 17025:2017 | Is measuring equipment calibrated when:  - the measurement accuracy or measurement uncertainty affects the validity of the reported results, and/or  - calibration of the equipment is required to establish the metrological traceability of the reported results?  NOTE Types of equipment having an effect on the validity of the reported results can include: - those used for the direct measurement of the measurand (e.g., use of a balance to perform a mass measurement), - those used to make corrections to the measured value (e.g., temperature measurements), and - those used to obtain a measurement result calculated from multiple quantities. | Choose an item. |  |
| 6.4 Equipment | 6.4.7 ISO/IEC 17025:2017 | Does the laboratory establish a calibration program, which is reviewed and adjusted as necessary in order to maintain confidence in the status of calibration? | Choose an item. |  |
| 6.4 Equipment | 6.4.7.1 ANAB Accreditation Requirement | Does the program for the calibration of equipment include: a) a list of the equipment requiring calibration, b) specifications for the calibration laboratory, c) specified requirements for the calibration, and d) the interval of calibration? | Choose an item. |  |
| 6.4 Equipment | 6.4.8 ISO/IEC 17025:2017 | Is all equipment requiring calibration or which has a defined period of validity labelled, coded, or otherwise identified to allow the user of the equipment to readily identify the status of calibration or period of validity? | Choose an item. |  |
| 6.4 Equipment | 6.4.9 ISO/IEC 17025:2017 | 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? Is it isolated to prevent its use or clearly labelled or marked as being out of service until it has been verified to perform correctly? 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)? | Choose an item. |  |
| 6.4 Equipment | 6.4.10 ISO/IEC 17025:2017 | When intermediate checks are necessary to maintain confidence in the performance of the equipment, are these checks carried out according to a procedure?  ANAB NOTE: When evaluating the need for intermediate checks, topics to consider include, but are not limited to: the calibration interval, the use of the equipment, the stability of the equipment, the method specifications, and risk associated with a failed check. | Choose an item. |  |
| 6.4 Equipment | 6.4.11 ISO/IEC 17025:2017 | 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? | Choose an item. |  |
| 6.4 Equipment | 6.4.12 ISO/IEC 17025:2017 | Does the laboratory take practicable measures to prevent unintended adjustments of equipment from invalidating results? | Choose an item. |  |
| 6.4 Equipment | 6.4.13 ISO/IEC 17025:2017 | Are records retained for equipment which can influence laboratory activities?  Do the records include the following, where applicable: a) the identity of equipment, including software and firmware version, b) the manufacturer's name, type identification, and serial number or other unique identification, c) evidence of verification that equipment conforms with specified requirements, d) the current location, e) calibration dates, results of calibrations, adjustments, acceptance criteria, and the due date of the next calibration or the calibration interval, f) documentation of reference materials, results, acceptance criteria, relevant dates and the period of validity, g) the maintenance plan and maintenance carried out to date, where relevant to the performance of the equipment, and h) details of any damage, malfunction, modification to, or repair of, the equipment? | Choose an item. |  |
| 6.5 Metrological traceability | 6.5.1 ISO/IEC 17025:2017 | 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?  NOTE 1 In ISO/IEC Guide 99, metrological traceability is defined as the “property of a measurement result whereby the result can be related to a reference through a documented unbroken chain of calibrations, each contributing to the measurement uncertainty”. NOTE 2 See Annex A for additional information on metrological traceability. | Choose an item. |  |
| 6.5 Metrological traceability | 6.5.1.1 ANAB Accreditation Requirement | If available, are the suppliers of external calibration services for measuring equipment and/or reference standards and certified reference materials used to establish or maintain metrological traceability either: a) a National Metrology Institute that is a signatory to the BIPM - CIPM Mutual Recognition Arrangement with the calibration of measuring equipment and/or reference standard to be performed or the certified reference material listed to be purchased in Appendix C of the BIPM key comparison database (KCDB),  b) a service supplier accredited to ISO/IEC 17025 by an accrediting body that is a signatory to the ILAC Mutual Recognition Arrangement, with the calibration of measuring equipment and/or reference standard to be performed listed in a scope of accreditation, or c) an accredited reference material producer that is accredited to ISO 17034, by an accrediting body that is a signatory to a mutual or multilateral recognition arrangement in an ILAC recognized regional accreditation cooperation or the ILAC Mutual Recognition Arrangement, with a scope of accreditation covering the certified reference material? | Choose an item. |  |
| 6.5 Metrological traceability | 6.5.1.2 ANAB Accreditation Requirement | In situations where a supplier that meets 6.5.1.1 is not available, were the competence, capability, and metrological traceability for the supplier and the external product or service being purchased confirmed? Was objective evidence of the confirmation available for review? | Choose an item. |  |
| 6.5 Metrological traceability | 6.5.1.3 ANAB Accreditation Requirement | For the purpose of establishing traceability of a measurement, did an accredited laboratory that calibrated its own equipment that supports an accredited parameter on the scope meet the related requirements in ISO/IEC 17025:2017 and: a) was the calibration and any check of the calibration status carried out by appropriately trained, competency tested, and authorized personnel, b) was the calibration method validated or verified prior to use, c) were certified reference materials or measuring instruments used in the calibration method traceable with appropriate measurement uncertainties, d) was the calibration carried out in an appropriate environment, e) were technical records of the calibration established and maintained, f) did the laboratory have and apply a procedure for calculating the measurement uncertainty for each equipment calibration it conducts, and g) was a technical review of the technical records including any data transfers and calculations completed by an individual other than the person(s) who performed the work? | Choose an item. |  |
| 6.5 Metrological traceability | 6.5.1.4 ANAB Accreditation Requirement | If a certified reference material is changed in a way that alters the traceable measurement value, then is the equipment used to alter the certified reference material evaluated for applicability of measurement traceability accreditation requirements? | Choose an item. |  |
| 6.5 Metrological traceability | 6.5.2 ISO/IEC 17025:2017 | Does the laboratory ensure that measurement results are traceable to the International System of Units (SI) through: a) calibration provided by a competent laboratory, b) certified values of certified reference materials provided by a competent producer with stated metrological traceability to the SI, or c) direct realization of the SI units ensured by comparison, directly or indirectly, with national or international standards?  NOTE 1 a) Laboratories fulfilling the requirements of this document are considered to be competent. NOTE 2 b) Reference material producers fulfilling the requirements of ISO 17034 are considered to be competent. NOTE 3 c) Details of practical realization of the definitions of some important units are given in the SI brochure. | Choose an item. |  |
| 6.5 Metrological traceability | 6.5.3 ISO/IEC 17025:2017 | When metrological traceability to the SI units is not technically possible, does the laboratory demonstrate metrological traceability to an appropriate reference, e.g.,: a) certified values of certified reference materials provided by a competent producer or 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? | Choose an item. |  |
| 6.6 Externally provided products and services | 6.6.1 ISO/IEC 17025:2017 | Does the laboratory ensure that only suitable externally provided products and services that affect laboratory activities are used, when such products and services: a) are intended for incorporation into the laboratory's own activities, b) are provided, in part or in full, directly to the customer by the laboratory, as received from the external provider, or c) are used to support the operation of the laboratory?  NOTE Products can include, for example, measurement standards and equipment, auxiliary equipment, consumable materials and reference materials. Services can include, for example, calibration services, sampling services, testing services, facility and equipment maintenance services, proficiency testing services and assessment and auditing services. | Choose an item. |  |
| 6.6 Externally provided products and services | 6.6.2 ISO/IEC 17025:2017 | Does the laboratory have a procedure and retain records for: a) defining, reviewing and approving the laboratory's requirements for externally provided products and services, b) defining the criteria for evaluation, selection, monitoring of performance, and re-evaluation of the external providers, 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, and d) taking any actions arising from evaluations, monitoring of performance and re-evaluations of the external providers? | Choose an item. |  |
| 6.6 Externally provided products and services | 6.6.3 ISO/IEC 17025:2017 | Does the laboratory communicate its requirements to external providers for: a) the products and services to be provided, b) the acceptance criteria, c) competence, including any required qualification of personnel, and d) activities that the laboratory, or its customer, intends to perform at the external provider's premises? | Choose an item. |  |
| 7.1 Review of requests, tenders and contracts | 7.1.1 ISO/IEC 17025:2017 | Does the laboratory have a procedure for the review of requests, tenders, and contracts? Does the procedure ensure that: a) the requirements are adequately defined, documented and understood, b) the laboratory has the capability and resources to meet the requirements, 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, and d) the appropriate methods or procedures are selected and are capable of meeting the customers' requirements?  NOTE 1 c) It is recognized that externally provided laboratory activities can occur when: - the laboratory has the resources and competence to perform the activities, however, for unforeseen reasons is unable to undertake these in part or full; - the laboratory does not have the resources or competence to perform the activities. NOTE 2 d) For internal or routine customers, reviews of requests, tenders and contracts can be performed in a simplified way. | Choose an item. |  |
| 7.1 Review of requests, tenders and contracts | 7.1.2 ISO/IEC 17025:2017 | Does the laboratory inform the customer when the method requested by the customer is considered to be inappropriate or out of date? | Choose an item. |  |
| 7.1 Review of requests, tenders and contracts | 7.1.3 ISO/IEC 17025:2017 | When the customer requests a statement of conformity to a specification or standard for the test or calibration (e.g., pass/fail, in-tolerance/out-of-tolerance), was the specification or standard and the decision rule clearly defined? Unless inherent in the requested specification or standard, was the decision rule selected communicated to, and agreed with, the customer?  NOTE For further guidance on statements of conformity, see ISO/IEC Guide 98-4. | Choose an item. |  |
| 7.1 Review of requests, tenders and contracts | 7.1.4 ISO/IEC 17025:2017 | Are any differences between the request or tender and the contract resolved before laboratory activities commence? Is each contract acceptable both to the laboratory and the customer? Does the Laboratory ensure that deviations requested by the customer do not impact the integrity of the laboratory nor the validity of the results? | Choose an item. |  |
| 7.1 Review of requests, tenders and contracts | 7.1.5 ISO/IEC 17025:2017 | Is the customer informed of any deviation from the contract? | Choose an item. |  |
| 7.1 Review of requests, tenders and contracts | 7.1.6 ISO/IEC 17025:2017 | If a contract is amended after work has commenced, is the contract review repeated and are any amendments communicated to all affected personnel? | Choose an item. |  |
| 7.1 Review of requests, tenders and contracts | 7.1.7 ISO/IEC 17025:2017 | 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?  NOTE Such cooperation can include: a) providing reasonable access to relevant areas of the laboratory to witness customer-specific laboratory activities; b) preparation, packaging, and dispatch of items needed by the customer for verification purposes. | Choose an item. |  |
| 7.1 Review of requests, tenders and contracts | 7.1.8 ISO/IEC 17025:2017 | Are records of reviews, including any significant changes retained? Are records retained of pertinent discussions with a customer relating to the customer's requirements or the results of the laboratory activities? | Choose an item. |  |
| 7.1 Review of requests, tenders and contracts | 7.1.9 ANAB Accreditation Requirement | Is the extent of database (e.g., DNA profiles, friction ridge, ballistics, biometrics) searches communicated to customers and updated as needed?  NOTE This may be communicated on a case-by-case basis, in the report, or in a general customer communication. | Choose an item. |  |
| 7.2.1 Selection and verification of methods | 7.2.1.1 ISO/IEC 17025:2017 | 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 analysis of data?  NOTE “Method” as used in this document can be considered synonymous with the term “measurement procedure” as defined in ISO/IEC Guide 99. | Choose an item. |  |
| 7.2.1 Selection and verification of methods | 7.2.1.1.1 ANAB Accreditation Requirement | Does the laboratory use appropriate methods and procedures for all associated data analysis and interpretation? | Choose an item. |  |
| 7.2.1 Selection and verification of methods | 7.2.1.1.2 ANAB Accreditation Requirement | Do all test methods that involve the comparison of an unknown to a known require the evaluation of the unknown item(s) to identify characteristics suitable for comparison and, if applicable, characteristics suitable for statistical rarity calculations, prior to comparison to one or more known item(s)?   NOTE 1 Characteristics include, but are not limited to, alleles in a DNA profile, friction ridge detail in a latent print, striation detail on a bullet, features of handwriting, or criteria for evaluation of mass spectrometry fragments and ratios in a seized drug sample or a toxicology sample extract. NOTE 2 This requirement is not focused on the process of assessing an unknown in order to identify evidence that will be the subject of further comparison. In these circumstances, it may be appropriate to perform a preliminary characterization of the known sample prior to the assessment of the unknown. | Choose an item. |  |
| 7.2.1 Selection and verification of methods | 7.2.1.1.3 ANAB Accreditation Requirement | For laboratories whose scope of accreditation includes calibration:  a) Do calibration methods for measuring instruments assess accuracy (bias and precision) of the instrument across a range of values that meets the needs of the customer, and  b) Was the source of material(s) used to calibrate a measuring instrument different from that used to adjust a measuring instrument and that used to verify calibration status?   NOTE Preference should be given to material(s) from different manufacturers, followed by different lot numbers of material from the same manufacturer. | Unassessed | No calibrations performed. |
| 7.2.1 Selection and verification of methods | 7.2.1.2 ISO/IEC 17025:2017 | 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)? | Choose an item. |  |
| 7.2.1 Selection and verification of methods | 7.2.1.3 ISO/IEC 17025:2017 | Does the laboratory ensure that it uses the latest valid version of a method unless it is not appropriate or possible to do so? When necessary, is the application of the method supplemented with additional details to ensure consistent application?  NOTE International, regional or national standards or other recognized specifications that contain sufficient and concise information on how to perform laboratory activities do not need to be supplemented or rewritten as internal procedures if these standards are written in a way that they can be used by the operating personnel in a laboratory. It can be necessary to provide additional documentation for optional steps in the method or additional details. | Choose an item. |  |
| 7.2.1 Selection and verification of methods | 7.2.1.4 ISO/IEC 17025:2017 | 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? 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, are recommended. Laboratory-developed or modified methods can also be used. | Choose an item. |  |
| 7.2.1 Selection and verification of methods | 7.2.1.5 ISO/IEC 17025:2017 | Does the laboratory verify that it can properly perform methods before introducing them by ensuring that it can achieve the required performance? Are records of the verification retained? If the method is revised by the issuing body, is the verification repeated to the extent necessary? | Choose an item. |  |
| 7.2.1 Selection and verification of methods | 7.2.1.6 ISO/IEC 17025:2017 | When method development is required, is this a planned activity and assigned to competent personnel equipped with adequate resources? As method development proceeds, is periodic review carried out to confirm that the needs of the customer are still being fulfilled? Are any modifications to the development plan approved and authorized? | Choose an item. |  |
| 7.2.1 Selection and verification of methods | 7.2.1.7 ISO/IEC 17025:2017 | Do deviations from methods for all laboratory activities occur only if the deviation has been documented, technically justified, authorized, and accepted by the customer?  NOTE Customer acceptance of deviations can be agreed in advance in the contract. | Choose an item. |  |
| 7.2.2 Validation of methods | 7.2.2.1 ISO/IEC 17025:2017 | Does the laboratory validate non-standard methods, laboratory-developed methods, and standard methods used outside their intended scope or otherwise modified? Is the validation as extensive as is necessary to meet the needs of the given application or field of application?  NOTE 1 Validation can include procedures for sampling, handling and transportation of test or calibration items.  NOTE 2 The techniques used for method validation can be one of, or a combination of, the following: a) calibration or evaluation of bias and precision using reference standards or reference materials, b) systematic assessment of the factors influencing the result, c) testing method robustness through variation of controlled parameters, such as incubator temperature, volume dispensed, d) comparison of results achieved with other validated methods, e) interlaboratory comparisons, or f) evaluation of measurement uncertainty of the results based on an understanding of the theoretical principles of the method and practical experience of the performance of the sampling or test method. | Choose an item. |  |
| 7.2.2 Validation of methods | 7.2.2.1.1 ANAB Accreditation Requirement | Does the laboratory have a procedure for method validation that: a) includes the associated data interpretation, b) establishes the data required to report a result, opinion, or interpretation, and c) identifies limitations of the method, reported results, opinions, and interpretations? | Choose an item. |  |
| 7.2.2 Validation of methods | 7.2.2.2 ISO/IEC 17025:2017 | When changes are made to a validated method, is the influence of such changes determined and where they are found to affect the original validation, is a new method validation performed?  ANAB Note: Changes to associated data analysis and interpretation are considered changes to a validated method. | Choose an item. |  |
| 7.2.2 Validation of methods | 7.2.2.2.1 ANAB Accreditation Requirement | The associated data interpretation is considered part of a validated method. When changes are made, was ISO/IEC 17025:2017, 7.2.2.2 applied? | Choose an item. |  |
| 7.2.2 Validation of methods | 7.2.2.3 ISO/IEC 17025:2017 | Are the performance characteristics of validated methods, as assessed for the intended use, relevant to the customers' needs and consistent with specified requirements?  NOTE Performance characteristics can include, but are not limited to, measurement range, accuracy, measurement uncertainty of the results, limit of detection, limit of quantification, selectivity of the method, linearity, repeatability or reproducibility, robustness against external influences or cross-sensitivity against interference from the matrix of the sample or test object, and bias. | Choose an item. |  |
| 7.2.2 Validation of methods | 7.2.2.4 ISO/IEC 17025:2017 | Does the laboratory retain the following records of validation: a) the validation procedure used, b) specification of the requirements, c) determination of the performance characteristics of the method, d) results obtained, and e) a statement on the validity of the method, detailing its fitness for the intended use? | Choose an item. |  |
| 7.3 Sampling | 7.3.1 ISO/IEC 17025:2017 | Does the laboratory have a sampling plan and method when it carries out sampling of substances, materials, or products for subsequent testing or calibration? Does the sampling method address the factors to be controlled to ensure the validity of subsequent testing or calibration results? Is the sampling plan and method available at the site where sampling is undertaken? Are sampling plans, whenever reasonable, based on appropriate statistical methods? | Choose an item. |  |
| 7.3 Sampling | 7.3.2 ISO/IEC 17025:2017 | Does the sampling method describe: a) the selection of samples or sites, b) the sampling plan, and c) the preparation and treatment of sample(s) from a substance, material or product to yield the required item for subsequent testing or calibration?  NOTE When received into the laboratory, further handling can be required as specified in 7.4.  ANAB Note: The intent of ISO/IEC 17025:2017 is that the activity of sampling occurs prior to the item being submitted to the laboratory. A laboratory can choose to perform further sampling after receipt of the item, in which case the requirements for sampling are applicable. | Choose an item. |  |
| 7.3 Sampling | 7.3.2.b.1) ANAB Accreditation Requirement | If an inference will be made to report on the whole population, was statistical sampling at a stated level of confidence used? | Choose an item. |  |
| 7.3 Sampling | 7.3.3 ISO/IEC 17025:2017 | Does the laboratory retain records of sampling data that forms part of the testing or calibration that is undertaken? Did the records include, where relevant: a) reference to the sampling method used, b) date and time of sampling, c) data to identify and describe the sample (e.g., number, amount, name), d) identification of the personnel performing sampling, e) identification of the equipment used, f) environmental or transport conditions, g) diagrams or other equivalent means to identify the sampling location, when appropriate, and h) deviations, additions to, or exclusions from the sampling method and sampling plan? | Choose an item. |  |
| 7.4 Handling of test or calibration items | 7.4.1 ISO/IEC 17025:2017 | 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? Are precautions taken to avoid deterioration, contamination, loss, or damage to the item during handling, transporting, storing/waiting, and preparation for testing or calibration? Are handling instructions provided with the item followed? | Choose an item. |  |
| 7.4 Handling of test or calibration items | 7.4.1.1 ANAB Accreditation Requirement | For all test items except known origin individual characteristic database samples, does the procedure: a) address requirements for storage, packaging, and sealing of items to:  1) protect the integrity of all items and  2) require items to be re-sealed as soon as practicable; b) address measures to be taken to secure unattended items; c) require chain-of-custody for:  1) all items received and  2) items that are collected or created and preserved for  future testing (e.g., ESDA lifts, test-fired ammunition,  latent print lifts, photos, trace evidence, DNA extracts); d) require chain-of-custody to securely and accurately identify:  1) the individual(s) or location(s) receiving or transferring  the item(s),  2) the item(s) being transferred, and  3) the chronological order of all transfers, minimally  including the date; e) require communication to the customer regarding the disposition of all items received; and f) address communication to the customer regarding items collected or created and preserved for future testing?  NOTE 1 c) An item being tracked could contain multiple components and be tracked as one item. NOTE 2 d).1) Documentation of internal transfers does not need to include use of personal storage locations. | Choose an item. |  |
| 7.4 Handling of test and calibration items | 7.4.2 ISO/IEC 17025:2017 | Does the laboratory have a system for the unambiguous identification of test or calibration items? Is the identification retained while the item is under the responsibility of the laboratory? Does the system ensure that items will not be confused physically or when referred to in records or other documents? Does the system, if appropriate, accommodate a sub-division of an item or groups of items and the transfer of items? | Choose an item. |  |
| 7.4 Handling of test or calibration items | 7.4.2.1 ANAB Accreditation Requirement | Did the system used to identify items cover all items received? | Choose an item. |  |
| 7.4 Handling of test or calibration items | 7.4.3 ISO/IEC 17025:2017 | Upon receipt of the test or calibration item, are deviations from specified conditions recorded? 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? 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? | Choose an item. |  |
| 7.4 Handling of test or calibration items | 7.4.4 ISO/IEC 17025:2017 | When items need to be stored or conditioned under specified environmental conditions, are these conditions maintained, monitored, and recorded? | Choose an item. |  |
| 7.5 Technical records | 7.5.1 ISO/IEC 17025:2017 | 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? Do the technical records include the date and the identity of personnel responsible for each laboratory activity and for checking data and results? Are original observations, data, and calculations recorded at the time they are made and identifiable with the specific task?  ANAB NOTE: Options for recording observations include, but are not limited to: written notes, photography, drawing, photocopying, or scanning. | Choose an item. |  |
| 7.5 Technical records | 7.5.1.1 ANAB Accreditation Requirement | Does the laboratory define the technical record(s) to be retained if all related technical records are not maintained? | Choose an item. |  |
| 7.5 Technical records | 7.5.1.2 ANAB Accreditation Requirement | Where abbreviations or symbols specific to the forensic service provider are used, is the meaning of the abbreviations or symbols defined? | Choose an item. |  |
| 7.5 Technical records | 7.5.1.3 ANAB Accreditation Requirement | Are technical records to support a report (including results, opinions, and interpretations) such that, another reviewer possessing the relevant knowledge, skills, and abilities could evaluate what was done and interpret the data? | Choose an item. |  |
| 7.5 Technical records | 7.5.1.4 ANAB Accreditation Requirement | Are records created or maintained in a permanent manner?  ANAB NOTE For example, technical records originally captured in pencil (e.g., a rough sketch) can be maintained in a permanent manner by photocopying, scanning, or taking a photo. | Choose an item. |  |
| 7.5 Technical records | 7.5.1.5 ANAB Accreditation Requirement | If an observation, data, or a calculation is rejected, is the reason, the identity of the individual(s) taking the action, and the date recorded in the technical record? | Choose an item. |  |
| 7.5 Technical records | 7.5.1.6 ANAB Accreditation Requirement | If an adjustment or repair is performed due to a calibration that does not meet specifications, are pre and post adjustment/repair data retained?  NOTE See related clause ISO/IEC 17025:2017, 7.8.4.1.d) | Choose an item. |  |
| 7.5 Technical records | 7.5.2 ISO/IEC 17025:2017 | Does the laboratory ensure that amendments to technical records are tracked to previous versions or to original observations? 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?  ANAB NOTE: Contemporaneous revisions are not considered amendments. | Choose an item. |  |
| 7.6 Evaluation of measurement uncertainty | 7.6.1 ISO/IEC 17025:2017 | Does the laboratory identify the contributions to measurement uncertainty? When evaluating measurement uncertainty, are all contributions that are of significance, including those arising from sampling, taken into account using appropriate methods of analysis? | Choose an item. |  |
| 7.6 Evaluation of measurement uncertainty | 7.6.1.1 ANAB Accreditation Requirement | Does the method of analysis for evaluation of measurement uncertainty: a) require the specific measuring device or instrument used for a reported result to have been included in or evaluated against the estimation of measurement uncertainty for that method, b) include the process of rounding the expanded uncertainty, c) require the coverage probability of the expanded uncertainty to be a minimum of 95.45% (often referred to as approximately 95%), and d) specify the schedule to review and/or recalculate the measurement uncertainty? | Choose an item. |  |
| 7.6 Evaluation of measurement uncertainty | 7.6.2 ISO/IEC 17025:2017 | Does a laboratory performing calibrations, including of its own equipment, evaluate the measurement uncertainty for all calibrations? | Unassessed | No internal calibrations performed. |
| 7.6 Evaluation of measurement uncertainty | 7.6.3 ISO/IEC 17025:2017 | Does a laboratory performing testing evaluate measurement uncertainty? 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?  NOTE 1 In those cases where a well-recognized test method specifies limits to the values of the major sources of measurement uncertainty and specifies the form of presentation of the calculated results, the laboratory is considered to have satisfied 7.6.3 by following the test method and reporting instructions. NOTE 2 For a particular method where the measurement uncertainty of the results has been established and verified, there is no need to evaluate measurement uncertainty for each result if the laboratory can demonstrate that the identified critical influencing factors are under control. NOTE 3 For further information, see ISO/IEC Guide 98-3, ISO 21748 and the ISO 5725 series. | Choose an item. |  |
| 7.6 Evaluation of measurement uncertainty | 7.6.3.1 ANAB Accreditation Requirement | Was the measurement uncertainty evaluated, or estimated when applicable, for all reported quantitative results?   NOTE: An item descriptor that includes a number is not considered a result. This difference should be clear to the reader of the report. | Choose an item. |  |
| 7.6 Evaluation of measurement uncertainty | 7.6.4 ANAB Accreditation Requirement | Were the following records maintained for each evaluation and estimation of measurement uncertainty: a) statement defining the measurand, b) statement of how traceability is established for the measurement, c) the equipment (e.g., measuring device[s] or instrument[s]) used, d) all uncertainty components considered, e) all uncertainty components of significance and how they were evaluated,  f) data used to estimate repeatability, intermediate precision, and/or reproducibility, g) all calculations performed, and h) the combined standard uncertainty, the coverage factor, the coverage probability, and the resulting expanded uncertainty? | Choose an item. |  |
| 7.7 Ensuring the validity of results | 7.7.1 ISO/IEC 17025:2017 | Does the laboratory have a procedure for monitoring the validity of results? Is the resulting data recorded in such a way that trends are detectable and, where practicable, statistical techniques are applied to review the results? Is the monitoring planned and reviewed, and does it include, where appropriate, but not be limited to: a) use of reference materials or quality control materials, b) use of alternative instrumentation that has been calibrated to provide traceable results, c) functional check(s) of measuring and testing equipment, d) use of check or working standards with control charts, where applicable, e) intermediate checks on measuring equipment, f) replicate tests or calibrations using the same or different methods, g) retesting or recalibration of retained items, h) correlation of results for different characteristics of an item, i) review of reported results, j) intralaboratory comparisons, and/or k) testing of blind sample(s)? | Choose an item. |  |
| 7.7 Ensuring the validity of results | 7.7.1 ANAB Accreditation Requirement | g).1 When a verification of a result is carried out:  a) was it conducted by an individual who is currently  authorized to perform the testing,  b) was a record of the verification made and did the  record identify who performed the verification, when  it was performed, and the result of the verification,  and  c) was the resolution of any discrepancy recorded?  ANAB NOTE 1 a) See requirements of 6.2.6 in ISO/IEC 17025:2017.  ANAB NOTE 2 b) Verification may be recorded for each result verified or as a summary for all results verified. | Choose an item. |  |
| 7.7 Ensuring the validity of results | 7.7.1 ANAB Accreditation Requirement | l) Is there a procedure for the technical review of technical records, including reports and testimony? Does the procedure:  1. require that a technical review be performed by an  individual that has been competency tested in the  testing or calibration work that is being reviewed,  2. preclude an individual from technically reviewing their  own work,  3. define the method to be used to ensure a  representative sample of technical records and reports  in each discipline are subjected to technical review,  4. define the method to be used to ensure testimony in  each discipline is reviewed,  5. define the method to be used to conduct and record  the review,  6. ensure that the results, opinions and interpretations  are accurate, properly qualified and supported by the  technical record,  7. ensure conformance with methods and applicable  management system documents, and  8. describe a course of action to be taken if a discrepancy  is found?  ANAB NOTE 1: An individual conducting the technical review need not be an employee of the forensic service provider, currently proficiency tested or currently performing the work. ANAB NOTE 2: An individual who performs a verification can also perform a technical review. ANAB NOTE 3: The frequency may vary for different disciplines. | Choose an item. |  |
| 7.7 Ensuring the validity of results | 7.7.2 ISO/IEC 17025:2017 | Does the laboratory monitor its performance by comparison with results of other laboratories, where available and appropriate? Is the monitoring planned and reviewed and include, but not be limited to, either or both of the following:  a) participation in proficiency testing or  NOTE ISO/IEC 17043 contains additional information on proficiency tests and proficiency testing providers. Proficiency testing providers that meet the requirements of ISO/IEC 17043 are considered to be competent.  b) participation in interlaboratory comparisons other than proficiency testing? | Choose an item. |  |
| 7.7 Ensuring the validity of results | 7.7.2.1 ANAB Accreditation Requirement | Does the process for monitoring performance by comparison with results of other forensic service providers at a minimum: a) ensure successful completion of at least one proficiency test for each discipline prior to accreditation being granted in that discipline and b) ensure each location on the scope of accreditation successfully completes, per calendar year, at least one proficiency test for each discipline in which accredited services are provided, with authorized release of the test results to ANAB from the test provider?  NOTE 1 Accreditation occurs in the discipline of Toxicology in both Calibration and Testing. The above requirements apply to the Testing scope of accreditation and Calibration scope of accreditation separately.  NOTE 2 For proficiency tests taken at the end of one calendar year, evaluation of successful completion can occur in the subsequent calendar year. | Choose an item. |  |
| 7.7 Ensuring the validity of results | 7.7.3 ISO/IEC 17025:2017 | Is data from monitoring activities analyzed, used to control, and, if applicable, improve the laboratory's activities? If 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? | Choose an item. |  |
| 7.7 Ensuring the validity of results | 7.7.4 ANAB Accreditation Requirement | Is the performance of personnel monitored? Does monitoring ensure that all personnel who perform testing or calibration successfully complete at least one intralaboratory comparison, interlaboratory comparison, or proficiency test per calendar year in each discipline on the scope of accreditation in which the individual conducts work? In the event that the preceding options are not available or appropriate, is observation-based performance monitoring performed?  NOTE 1 The monitoring should be varied over time to cover all aspects of assigned job functions but does not have to include all aspects of the work performed each time. NOTE 2 Solely performing verifications (7.7.1.f).1) or solely reviewing and authorizing results (7.8.1.1) are considered to be testing or calibration and are subject to these requirements. NOTE 3 Accreditation occurs in the discipline of Toxicology in both Calibration and Testing. The above requirements apply to the Testing scope of accreditation and Calibration scope of accreditation separately.  NOTE 4 For performance monitoring conducted at the end of one calendar year, evaluation of successful completion can occur in the subsequent calendar year. | Choose an item. |  |
| 7.7 Ensuring the validity of results | 7.7.5 ANAB Accreditation Requirement | Does the process for monitoring of performance by intralaboratory comparison, interlaboratory comparison, proficiency testing, or observation-based testing at a minimum: a) ensure that results are not known or readily available to the participant being monitored, b) ensure use of approved methods, c) establish criteria for determining successful completion prior to the monitoring activity, d) require a mechanism to ensure the quality of intralaboratory comparisons, interlaboratory comparisons and observation-based monitoring prior to the monitoring activity, and e) for calibration laboratories, require intralaboratory comparisons, interlaboratory comparisons and proficiency tests to be performed using an item that was calibrated by the person performing the comparison or test? | Choose an item. |  |
| 7.7 Ensuring the validity of results | 7.7.6 ANAB Accreditation Requirement | Is there a plan that will: a) demonstrate conformance with the requirements stated in clause 7.7.2.1.b) and 7.7.4 and b) ensure inclusion of a representative sample of the components/parameters, methods, and key equipment/technologies within each discipline listed on the scope of accreditation? | Choose an item. |  |
| 7.7 Ensuring the validity of results | 7.7.7 ANAB Accreditation Requirement | To satisfy the proficiency test requirements in clauses 7.7.2.1.a) and b), did the forensic service provider: a) where available and appropriate for the work conducted, use a proficiency test provider that is accredited to ISO/IEC 17043 by an accreditation body that is a signatory to the APLAC MRA or IAAC MLA and has the applicable proficiency test(s) on its scope of accreditation or  b) where not available or not appropriate for the work conducted, gain approval from ANAB for alternative means by which the laboratory’s performance can be assessed?  c) submit results to the proficiency test provider, if applicable, on or before the agreed upon due date? | Choose an item. |  |
| 7.7 Ensuring the validity of results | 7.7.8 ANAB Accreditation Requirement | Were the following records maintained for all intralaboratory comparisons, interlaboratory comparisons, proficiency tests and observation-based monitoring:  a) discipline(s) monitored, b) design of the monitoring activity, c) expected results, d) location, when more than one location is associated with a single accreditation certificate, e) records submitted to a proficiency test provider, when applicable,  f) appropriate technical records, g) evaluation of results and action taken for unexpected results, and h) feedback on individual performance provided to the participant?  Note f) See requirements of 7.5 in ISO/IEC 17025:2017 and ANAB AR 3125. | Choose an item. |  |
| 7.8.1 General | 7.8.1.1 ISO/IEC 17025:2017 | Are results reviewed and authorized prior to release? | Choose an item. |  |
| 7.8.1 General | 7.8.1.1.1 ANAB Accreditation Requirement | Did the authorizer of results review the technical record and document the review? | Choose an item. |  |
| 7.8.1 General | 7.8.1.2 ISO/IEC 17025:2017 | 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? Are all issued reports retained as technical records?  NOTE 1 For the purposes of this document, test reports and calibration certificates are sometimes referred to as test certificates and calibration reports, respectively. NOTE 2 Reports can be issued as hard copies or by electronic means, provided that the requirements of this document are met. | Choose an item. |  |
| 7.8.1 General | 7.8.1.2.1 ANAB Accreditation Requirement | Are the results provided in a written report or through electronic access?  ANAB Note: The reporting of results does not include testing of known origin samples for the purpose of constructing an individual characteristic database or maintaining the quality and/or effectiveness of information in such a database. | Choose an item. |  |
| 7.8.1 General | 7.8.1.2.2 ANAB Accreditation Requirement | Is there a procedure for reporting of results that: a) identifies what will be reported for all items received, including items on which no work was performed, items collected or created and preserved for future testing, and for partial work performed; b) requires qualifying the significance of associations in the report whether by a statistic or a qualitative statement; c) requires communicating the reason(s) in the report when the reported results are inconclusive; and d) requires reporting of the initial database entry (e.g., DNA profiles, friction ridge, ballistics, biometrics)?  ANAB NOTE b) Associations for multiple results may be qualified by a single statistic or qualitative statement if the statistics are identical or, where applicable, meet or exceed a defined minimum threshold. | Choose an item. |  |
| 7.8.1 General | 7.8.1.2.3 ANAB Accreditation Requirement | Does the documented process for reporting of results of calibration: a) identify what information will be reported in the calibration certificate and b) require the issuance of an endorsed calibration certificate if requested by the customer? | Unassessed | No calibrations performed. |
| 7.8.1 General | 7.8.1.3 ISO/IEC 17025:2017 | 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? | Choose an item. |  |
| 7.8.1 General | 7.8.1.3.1 ANAB Accreditation Requirement | When results are reported in a simplified way, does the agreement specify which information in 7.8.2 to 7.8.7 will not be included in a written report or through electronic access?  The requirements of 7.8.2 through 7.8.7 are still applicable even if the forensic service provider reports results in a simplified way. | Choose an item. |  |
| 7.8.2 Common requirements for reports (test, calibration or sampling) | 7.8.2.1 ISO/IEC 17025:2017 | 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: a) a title (e.g. “Test Report”, “Calibration Certificate” or “Report of Sampling”), b) the name and address of the laboratory, 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, d) unique identification that all its components are recognized as a portion of a complete report and a clear identification of the end, e) the name and contact information of the customer, f) identification of the method used, g) a description, unambiguous identification, and, when necessary, the condition of the item, 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, i) the date(s) of performance of the laboratory activity, j) the date of issue of the report, 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, l) a statement to the effect that the results relate only to the items tested, calibrated or sampled m) the results with, where appropriate, the units of measurement, n) additions to, deviations, or exclusions from the method, o) identification of the person(s) authorizing the report, and p) clear identification when results are from external providers? | Choose an item. |  |
| 7.8.2 Common requirements for reports (test, calibration or sampling) | 7.8.2.1 ISO/IEC 17025:2017 | NOTE: Including a statement specifying that the report shall not be reproduced except in full without approval of the laboratory can provide assurance that parts of a report are not taken out of context. ANAB NOTE 2: A legal requirement that dictates the information to be included in a report is a valid reason to not include one or more listed report elements. ANAB NOTE 3: i) Date(s) may be reflected as a range of dates or the date of each test or calibration. ANAB NOTE 4: o) Authorization of the report does not have to be performed by the same person(s) who authorized the results. (see ISO/IEC 17025:2017 7.8.1.1). |  |  |
| 7.8.2 Common requirements for reports (test, calibration or sampling) | 7.8.2.2 ISO/IEC 17025:2017 | Is the laboratory responsible for all the information provided in the report, except when information is provided by the customer? Is data provided by a customer clearly identified? In addition, is a disclaimer put on the report when the information is supplied by the customer and can affect the validity of results? 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? | Choose an item. |  |
| 7.8.3 Specific requirements for test reports | 7.8.3.1 ISO/IEC 17025:2017 | In addition to the requirements listed in 7.8.2, do the test reports, where necessary for the interpretation of the test results, include the following: a) information on specific test conditions, such as environmental conditions; b) where relevant, a statement of conformity with requirements or specifications (see 7.8.6); 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: - it is relevant to the validity or application of the test results, - a customer's instruction so requires, or - the measurement uncertainty affects conformity to a specification limit; d) where appropriate, opinions and interpretations (see 7.8.7); and e) additional information that may be required by specific methods, authorities, customers or groups of customers? | Choose an item. |  |
| 7.8.3 Specific requirements for test reports | 7.8.3.1.c).1 ANAB Accreditation Requirement | For measurement uncertainty: a) was it included in the report or an annex to the report when it impacts the evaluation of a specification limit stated by a regulatory body, a statute, case law, or other legal requirement; b) did it include the measured quantity value, y, along with the associated expanded uncertainty, U, and the coverage probability; c) was it in the format of y ± U; d) was it limited to at most two significant digits, unless there is a documented rationale for reporting additional significant digits; and e) was it reported to the same level of significance as the measurement result?  ANAB NOTE 1 a) A legal requirement is created, imposed, and enforced by a third-party external to the laboratory agency. ANAB NOTE 2 c) For asymmetrical uncertainties, it may be inappropriate to quote a single result for the uncertainty and presentations other than y ± U may be needed. ANAB NOTE 3 e) Reducing or simplifying a fraction is not a change in level of significance. | Choose an item. |  |
| 7.8.3 Specific requirements for test reports | 7.8.3.1.1 ANAB Accreditation Requirement | If a regulatory body, statute, case law or other legal requirement specifies the format for the reporting of a result or prohibits including measurement uncertainty in the report, did the forensic service provider: a) have objective evidence of the regulation, statute, case law or other legal requirement and b) have a process for applying the measurement uncertainty at the established level of confidence prior to reporting the result? | Choose an item. |  |
| 7.8.3 Specific requirements for test reports | 7.8.3.2 ISO/IEC 17025:2017 | 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? | Choose an item. |  |
| 7.8.4 Specific requirements for calibration certificates | 7.8.4.1 ISO/IEC 17025:2017 | In addition to the requirements listed in 7.8.2, do calibration certificates shall include the following:  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);   NOTE According to ISO/IEC Guide 99, a measurement result is generally expressed as a single measured quantity value including unit of measurement and a measurement uncertainty.  b) the conditions (e.g. environmental) under which the calibrations were made that have an influence on the measurement results; c) a statement identifying how the measurements are metrologically traceable (see Annex A); d) the results before and after any adjustment or repair, if available; e) where relevant, a statement of conformity with requirements or specifications (see 7.8.6); and f) where appropriate, opinions and interpretations (see 7.8.7)? | Choose an item. |  |
| 7.8.4 Specific requirements for calibration certificates | 7.8.4.1.a).1 ANAB Accreditation Requirement | For measurement uncertainty: a) did it include the measured quantity value, y, along with the associated expanded uncertainty, U, the coverage factor, and the coverage probability; b) was it in the format of y ± U; c) was it limited to at most two significant digits, unless there is a documented rationale for reporting additional significant digits; and d) was it reported to the same level of significance as the measurement result?  ANAB NOTE c) For asymmetrical uncertainties, it may be inappropriate to quote a single result for the uncertainty and presentations other than y ± U may be needed. | Unassessed | No calibrations performed. |
| 7.8.4 Specific requirements for calibration certificates | 7.8.4.1.1 ANAB Accreditation Requirement | If a regulatory body, statute, case law or other legal requirement specifies the format for the reporting of a calibration result or prohibits including measurement uncertainty in the calibration certificate, did the forensic service provider: a) have objective evidence of the regulation, statute, case law or other legal requirement and b) have a process for applying the measurement uncertainty at the established level of confidence prior to reporting the calibration result? | Unassessed | No calibrations performed. |
| 7.8.4 Specific requirements for calibration certificates | 7.8.4.2 ISO/IEC 17025:2017 | 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? | Unassessed | No calibrations performed. |
| 7.8.4 Specific requirements for calibration certificates | 7.8.4.3 ISO/IEC 17025:2017 | Does a calibration certificate or calibration label not contain any recommendation on the calibration interval, except where this has been agreed with the customer? | Unassessed | No calibrations performed. |
| 7.8.4 Specific requirements for calibration certificates | 7.8.4.4 ANAB Accreditation Requirement | If applicable, does a label (in addition to the calibration certificate) attached to a calibrated item not give the impression that the item itself is approved and include: a) the name of the accredited calibration laboratory or its accreditation certificate number, b) the unambiguous identification of the item calibrated, c) the date of the current calibration, and d) cross reference to the calibration certificate issued in respect to the calibration? | Unassessed | No calibrations performed. |
| 7.8.5 Reporting sampling - specific requirements | 7.8.5 ISO/IEC 17025:2017 | Where the laboratory is responsible for the sampling activity, in addition to the requirements listed in 7.8.2, do reports include the following, where necessary for the interpretation of results: a) the date of sampling, 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), c) the location of sampling, including any diagrams, sketches or photographs, d) a reference to the sampling plan and sampling method, e) details of any environmental conditions during sampling that affect the interpretation of the results, and f) information required to evaluate measurement uncertainty for subsequent testing or calibration? | Choose an item. |  |
| 7.8.5 Reporting sampling - specific requirements | 7.8.5.d).1 ANAB Accreditation Requirement | d).1 If a statistical sampling plan is used, does the report contain the confidence level and corresponding inference regarding the population? | Choose an item. |  |
| 7.8.6 Reporting statements of conformity | 7.8.6.1 ISO/IEC 17025:2017 | When a statement of conformity to a specification or standard is provided, does the laboratory document the decision rule employed while 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?  NOTE Where the decision rule is prescribed by the customer, regulations or normative documents, a further consideration of the level of risk is not necessary. | Choose an item. |  |
| 7.8.6 Reporting statements of conformity | 7.8.6.2 ISO/IEC 17025:2017 | Does the laboratory report on the statement of conformity, such that the statement clearly identifies: a) to which results the statement of conformity applies, b) which specifications, standards or parts thereof are met or not met, and c) the decision rule applied (unless it is inherent in the requested specification or standard)?  NOTE For further information, see ISO/IEC Guide 98-4. | Choose an item. |  |
| 7.8.7 Reporting opinions and interpretations | 7.8.7.1 ISO/IEC 17025:2017 | 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? Does the laboratory document the basis upon which the opinions and interpretations have been made?  NOTE It is important to distinguish opinions and interpretations from statements of inspections and product certifications as intended in ISO/IEC 17020 and ISO/IEC 17065, and from statements of conformity as referred to in 7.8.6. | Choose an item. |  |
| 7.8.7 Reporting opinions and interpretations | 7.8.7.2 ISO/IEC 17025:2017 | Are the opinions and interpretations expressed in reports based on the results obtained from the tested or calibrated item and clearly identified as such? | Choose an item. |  |
| 7.8.7 Reporting opinions and interpretations | 7.8.7.3 ISO/IEC 17025:2017 | When opinions and interpretations are directly communicated by dialogue with the customer, is a record of the dialogue retained? | Choose an item. |  |
| 7.8.8 Amendments to reports | 7.8.8.1 ISO/IEC 17025:2017 | When an issued report needs to be changed, amended or re-issued, is any change of information clearly identified and, where appropriate, is the reason for the change included in the report? | Choose an item. |  |
| 7.8.8 Amendments to reports | 7.8.8.2 ISO/IEC 17025:2017 | 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?   Do such amendments meet all the requirements of this document? | Choose an item. |  |
| 7.8.8 Amendments to reports | 7.8.8.3 ISO/IEC 17025:2017 | When it is necessary to issue a complete new report, is this uniquely identified and contain a reference to the original that it replaces? | Choose an item. |  |
| 7.9 Complaints | 7.9.1 ISO/IEC 17025:2017 | Does the laboratory have a documented process to receive, evaluate, and make decisions on complaints? | Choose an item. |  |
| 7.9 Complaints | 7.9.2 ISO/IEC 17025:2017 | Is a description of the handling process for complaints available to any interested party on request? 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? Is the laboratory responsible for all decisions at all levels of the handling process for complaints? | Choose an item. |  |
| 7.9 Complaints | 7.9.3 ISO/IEC 17025:2017 | Does the process for handling complaints include at least the following elements and methods: a) a description of the process for receiving, validating, investigating the complaint, and deciding what actions are to be taken in response to it; b) tracking and recording complaints, including actions undertaken to resolve them; and c) ensuring that any appropriate action is taken? | Choose an item. |  |
| 7.9 Complaints | 7.9.4 ISO/IEC 17025:2017 | Is the laboratory receiving the complaint responsible for gathering and verifying all necessary information to validate the complaint? | Choose an item. |  |
| 7.9 Complaints | 7.9.5 ISO/IEC 17025:2017 | Whenever possible, does the laboratory acknowledge receipt of the complaint and provide the complainant with progress reports and the outcome? | Choose an item. |  |
| 7.9 Complaints | 7.9.6 ISO/IEC 17025:2017 | Are the outcomes communicated to the complainant made by, or reviewed and approved by, individuals not involved in the original laboratory activities in question?  NOTE: This can be performed by external personnel. | Choose an item. |  |
| 7.9 Complaints | 7.9.7 ISO/IEC 17025:2017 | Whenever possible, does the laboratory give formal notice of the end of the complaint handling to the complainant? | Choose an item. |  |
| 7.10 Nonconforming work | 7.10.1 ISO/IEC 17025:2017 | 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)? Does the procedure ensure that: a) the responsibilities and authorities for the management of nonconforming work are defined; b) actions (including halting or repeating of work and withholding of reports, as necessary) are based upon the risk levels established by the laboratory; c) an evaluation is made of the significance of the nonconforming work, including an impact analysis on previous results; d) a decision is taken on the acceptability of the nonconforming work; e) where necessary, the customer is notified and work is recalled; and f) the responsibility for authorizing the resumption of work is defined? | Choose an item. |  |
| 7.10 Nonconforming work | 7.10.2 ISO/IEC 17025:2017 | Does the laboratory retain records of nonconforming work and actions as specified in 7.10.1, bullets b) to f)? | Choose an item. |  |
| 7.10 Nonconforming work | 7.10.3 ISO/IEC 17025:2017 | 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? | Choose an item. |  |
| 7.11 Control of data and information management | 7.11.1 ISO/IEC 17025:2017 | Does the laboratory have access to the data and information needed to perform laboratory activities? | Choose an item. |  |
| 7.11 Control of data and information management | 7.11.2 ISO/IEC 17025:2017 | In regards to the laboratory information management system(s) used for the collection, processing, recording, reporting, storage or retrieval of data; is it validated for functionality, including the proper functioning of interfaces within the laboratory information management system(s) by the laboratory before introduction? 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?  NOTE 1 In this document “laboratory information management system(s)” includes the management of data and information contained in both computerized and non-computerized systems. Some of the requirements can be more applicable to computerized systems than to non-computerized systems. NOTE 2 Commercial off-the-shelf software in general use within its designed application range can be considered to be sufficiently validated. | Choose an item. |  |
| 7.11 Control of data and information management | 7.11.2.1 ANAB Accreditation Requirement | Was there a plan for validation of computer software developed by the user and were records of the validation maintained? | Choose an item. |  |
| 7.11 Control of data and information management | 7.11.3 ISO/IEC 17025:2017 | Is the laboratory information management system(s): a) protected from unauthorized access; b) safeguarded against tampering and loss; 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; and d) maintained in a manner that ensures the integrity of the data and information?  e) Are system failures recorded as well as the appropriate immediate and corrective actions? | Choose an item. |  |
| 7.11 Control of data and information management | 7.11.4 ISO/IEC 17025:2017 | 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? | Choose an item. |  |
| 7.11 Control of data and information management | 7.11.5 ISO/IEC 17025:2017 | Does the laboratory ensure that instructions, manuals, and reference data relevant to the laboratory information management system(s) are made readily available to personnel? | Choose an item. |  |
| 7.11 Control of data and information management | 7.11.6 ISO/IEC 17025:2017 | Are calculations and data transfers checked in an appropriate and systematic manner?  ANAB NOTE This requirement does not apply if the calculation or data transfer is secure and not subject to human error. | Choose an item. |  |
| 7.11 Control of data and information management | 7.11.6.1 ANAB Accreditation Requirement | Does the technical record indicate the check was performed and who performed the check? When possible, is this check not conducted by the person who performed the calculation(s) or the data transfers?   NOTE This check may be part of a technical review. | Choose an item. |  |
| 8.1.1 General | 8.1.1 ISO/IEC 17025:2017 | 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 ISO/IEC 17025:2017 and assuring the quality of the laboratory results? 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?  NOTE See Annex B for more information. | Choose an item. |  |
| 8.1.1 General | 8.1.2 ISO/IEC 17025:2017 | Option A  As a minimum, does the management system of the laboratory address the following:  - management system documentation (see 8.2);  - control of management system documents (see 8.3); - control of records (see 8.4); - actions to address risks and opportunities (see 8.5);  - improvement (see 8.6  - corrective actions (see 8.7);  - internal audits (see 8.8); and  - management reviews (see 8.9)? | Choose an item. |  |
| 8.1.1 General | 8.1.3 ISO/IEC 17025:2017 | Option B  Does a laboratory that has established and maintains a management system, in accordance with the requirements of ISO 9001, and that is capable of supporting and demonstrating the consistent fulfilment of the requirements of Clauses 4 to 7, also fulfil at least the intent of the requirements in 8.2 to 8.9? | Unassessed | Option A is used. |
| 8.1.1 General | 8.1.3.1 ANAB Accreditation Requirement | In order for Option B to be available to a forensic service provider, the provider must maintain an accredited ISO 9001 certification. Was the certification body, which certified the provider to ISO 9001, accredited for ISO 9001 by an IAF MLA signatory accreditation body for management systems? Did any forensic service provider that does not meet this criteria choose Option A? | Unassessed | Option A is used. |
| 8.1.1 General | 8.1.3.2 ANAB Accreditation Requirement | Have the Option A requirements under 8.2 through 8.9 in this document also been applied to forensic service providers who choose Option B? | Unassessed | Option A is used. |
| 8.2 Management system documentation (Option A) | 8.2.1 ISO/IEC 17025:2017 | Does the laboratory management 1) establish, document, and maintain policies and objectives for the fulfilment of the purposes of this document and 2) ensure that the policies and objectives are acknowledged and implemented at all levels of the laboratory organization? | Choose an item. |  |
| 8.2 Management system documentation (Option A) | 8.2.1.1 ANAB Accreditation Requirement | Has the laboratory required the following words (to include forms of the same word) used in ISO/IEC 17025:2017 or in this document to be addressed in writing?   agreed, appoint, authorize, define, instructions, method, plan, procedure, program, record, schedule, specify | Choose an item. |  |
| 8.2 Management system documentation (Option A) | 8.2.2 ISO/IEC 17025:2017 | Do the policies and objectives address the competence, impartiality, and consistent operation of the laboratory? | Choose an item. |  |
| 8.2 Management system documentation (Option A) | 8.2.3 ISO/IEC 17025:2017 | Does laboratory management provide evidence of commitment to the development and implementation of the management system and to continually improving its effectiveness? | Choose an item. |  |
| 8.2 Management system documentation (Option A) | 8.2.4 ISO/IEC 17025:2017 | Are all documents, processes, systems, and records related to the fulfilment of the requirements of ISO/IEC 17025:2017 included in, referenced from, or linked to the management system? | Choose an item. |  |
| 8.2 Management system documentation (Option A) | 8.2.5 ISO/IEC 17025:2017 | 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? | Choose an item. |  |
| 8.3 Control of management system documents (Option A) | 8.3.1 ISO/IEC 17025:2017 | Does the laboratory control the documents (internal and external) that relate to the fulfilment of ISO/IEC 17025:2017?  NOTE In this context, “documents” can be policy statements, procedures, specifications, manufacturer’s instructions, calibration tables, charts, text books, posters, notices, memoranda, drawings, plans, etc. These can be on various media, such as hard copy or digital. | Choose an item. |  |
| 8.3 Control of management system documents (Option A) | 8.3.2 ISO/IEC 17025:2017 | Does the laboratory ensure that: a) documents are approved for adequacy prior to issue by authorized personnel; b) documents are periodically reviewed, and updated as necessary; c) changes and the current revision status of documents are identified; d) relevant versions of applicable documents are available at points of use and, where necessary, their distribution is controlled; e) documents are uniquely identified; and f) the unintended use of obsolete documents is prevented, and suitable identification is applied to them if they are retained for any purpose? | Choose an item. |  |
| 8.4 Control of records (Option A) | 8.4.1 ISO/IEC 17025:2017 | Does the laboratory establish and retain legible records to demonstrate fulfilment of the requirements in ISO/IEC 17025:2017? | Choose an item. |  |
| 8.4 Control of records (Option A) | 8.4.2 ISO/IEC 17025:2017 | Does the laboratory implement the controls needed for the identification, storage, protection, back-up, archive, retrieval, retention time, and disposal of its records? Does the laboratory retain records for a period consistent with its contractual obligations? Is access to these records consistent with the confidentiality commitments, and records readily available?  NOTE Additional requirements regarding technical records are given in 7.5. ANAB NOTE 2 Contractual obligations for records retention include legal requirements and customer expectations. | Choose an item. |  |
| 8.5 Actions to address risks and opportunities (Option A) | 8.5.1 ISO/IEC 17025:2017 | Does the laboratory consider the risks and opportunities associated with the laboratory activities in order to: a) give assurance that the management system achieves its intended results, b) enhance opportunities to achieve the purpose and objectives of the laboratory, c) prevent, or reduce, undesired impacts and potential failures in the laboratory activities, and d) achieve improvement? | Choose an item. |  |
| 8.5 Actions to address risks and opportunities (Option A) | 8.5.1.1 ANAB Accreditation Requirement | Have risks and opportunities related to health and safety been considered? | Choose an item. |  |
| 8.5 Actions to address risks and opportunities (Option A) | 8.5.2 ISO/IEC 17025:2017 | Does the laboratory plan: a) actions to address these risks and opportunities and b) how to: - integrate and implement these actions into its management system and - evaluate the effectiveness of these actions?  NOTE Although this document specifies that the laboratory plans actions to address risks, there is no requirement for formal methods for risk management or a documented risk management process. Laboratories can decide whether or not to develop a more extensive risk management methodology than is required by this document, e.g. through the application of other guidance or standards. | Choose an item. |  |
| 8.5 Actions to address risks and opportunities (Option A) | 8.5.3 ISO/IEC 17025:2017 | Are actions taken to address risks and opportunities proportional to the potential impact on the validity of laboratory results?  NOTE 1 Options to address risks can include identifying and avoiding threats, taking risk in order to pursue an opportunity, eliminating the risk source, changing the likelihood or consequences, sharing the risk, or retaining risk by informed decision. NOTE 2 Opportunities can lead to expanding the scope of the laboratory activities, addressing new customers, using new technology and other possibilities to address customer needs. | Choose an item. |  |
| 8.6 Improvement (Option A) | 8.6.1 ISO/IEC 17025:2017 | Does the laboratory identify and select opportunities for improvement and implement any necessary actions?  NOTE Opportunities for improvement can be identified through the review of the operational procedures, the use of the policies, overall objectives, audit results, corrective actions, management review, suggestions from personnel, risk assessment, analysis of data, and proficiency testing results. | Choose an item. |  |
| 8.6 Improvement (Option A) | 8.6.2 ISO/IEC 17025:2017 | Does the laboratory seek feedback, both positive and negative, from its customers? Is the feedback analyzed and used to improve the management system, laboratory activities and customer service?  NOTE Examples of the types of feedback include customer satisfaction surveys, communication records and review of reports with customers. | Choose an item. |  |
| 8.7 Corrective actions (Option A) | 8.7.1 ISO/IEC 17025:2017 | When a nonconformity occurs, does the laboratory:  a) react to the nonconformity and, as applicable:  - take action to control and correct it and  - address the consequences; 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:  - reviewing and analyzing the nonconformity,  - determining the causes of the nonconformity, and  - determining if similar nonconformities exist, or could  potentially occur; c) implement any action needed; d) review the effectiveness of any corrective action taken; e) update risks and opportunities determined during planning, if necessary; and f) make changes to the management system, if necessary? | Choose an item. |  |
| 8.7 Corrective actions (Option A) | 8.7.1.g) ANAB Accreditation Requirement | g) Does the process for corrective action establish a reasonable timeframe for completion for each corrective action? | Choose an item. |  |
| 8.7 Corrective actions (Option A) | 8.7.2 ISO/IEC 17025:2017 | Are corrective actions appropriate to the effects of the nonconformities encountered? | Choose an item. |  |
| 8.7 Corrective actions (Option A) | 8.7.3 ISO/IEC 17025:2017 | Does the laboratory retain records as evidence of: a) the nature of the nonconformities, cause(s) and any subsequent actions taken and b) the results of any corrective action? | Choose an item. |  |
| 8.8 Internal audits (Option A) | 8.8.1 ISO/IEC 17025:2017 | Does the laboratory conduct internal audits at planned intervals to provide information on whether the management system: a) conforms to:  - the laboratory’s own requirements for its management  system, including the laboratory activities, and  - the requirements of this document and b) is effectively implemented and maintained? | Choose an item. |  |
| 8.8 Internal audits (Option A) | 8.8.1.a).1 ANAB Accreditation Requirement | a).1 Do internal audits provide information on whether the management system conforms to the requirements of ISO/IEC 17025:2017? | Choose an item. |  |
| 8.8 Internal audits (Option A) | 8.8.1.1 ANAB Accreditation Requirement | Are internal audits conducted at least annually, as well as prior to the initial accreditation assessment? | Choose an item. |  |
| 8.8 Internal audits (Option A) | 8.8.2 ISO/IEC 17025:2017 | Does the laboratory: 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; b) define the audit criteria and scope for each audit; c) ensure that the results of the audits are reported to relevant management; d) implement appropriate correction and corrective actions without undue delay; and e) retain records as evidence of the implementation of the audit program and the audit results?  NOTE ISO 19011 provides guidance for internal audits. | Choose an item. |  |
| 8.8 Internal audits (Option A) | 8.8.2.b).1 ANAB Accreditation Requirement | b).1 Do internal audits include direct observation of a sample of accredited services within each discipline? | Choose an item. |  |
| 8.9 Management reviews (Option A) | 8.9.1 ISO/IEC 17025:2017 | 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 fulfilment of ISO/IEC 17025:2017? | Choose an item. |  |
| 8.9 Management reviews (Option A) | 8.9.1.1.ANAB Accreditation Requirement | Are management reviews conducted at least annually, as well as prior to the initial accreditation assessment? | Choose an item. |  |
| 8.9 Management reviews (Option A) | 8.9.2 ISO/IEC 17025:2017 | Are the inputs to management review recorded and include information related to the following: a) changes in internal and external issues that are relevant to the laboratory; b) fulfilment of objectives; c) suitability of policies and procedures; d) status of actions from previous management reviews; e) outcome of recent internal audits; f) corrective actions; g) assessments by external bodies; h) changes in the volume and type of the work or in the range of laboratory activities; i) customer and personnel feedback; j) complaints; k) effectiveness of any implemented improvements; l) adequacy of resources; m) results of risk identification n) outcomes of the assurance of the validity of results; and  o) other relevant factors, such as monitoring activities and training? | Choose an item. |  |
| 8.9 Management reviews (Option A) | 8.9.3 ISO/IEC 17025:2017 | Do the outputs from the management review record all decisions and actions related to at least: a) the effectiveness of the management system and its processes; b) improvement of the laboratory activities related to the fulfilment of the requirements of this document; c) provision of required resources; and d) any need for change? | Choose an item. |  |