 <b>Quality Management System Procedure</b> <b>Pitt County Sheriff's Office Forensics Services Unit</b> <i>Issued by the Quality Manager</i>	Effective Date: <b>2018/04/01</b>	Ver: <b>2</b>
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## Purpose

To review requests

This procedure ensures that:

- the laboratory has the capability and resources to meet the requirements of the client
- the appropriate test method is selected and capable of meeting the Client's requirements

This procedure also describes the activities that take place should there be subsequent Client requests.

## Scope / Field of Application

This procedure is to be performed by all employees who are in a position to accept or deny Client request for testing.

## Definitions and Acronyms

**Request Review** – systematic activities carried out to ensure that requirements for quality are adequately defined, free of ambiguity, documented, and can be realized.

**Requirements for Quality** – expression of the needs or their translation into a set of quantitatively or qualitatively stated requirements for the characteristics of an entity to enable its realization and examination. This is documented through use of the Form# [4-4-1-F1, Client Satisfaction Survey](#).

## Responsibilities


All employees involved in request reviews are to follow this procedure.

## Materials Required

Client information

Client Satisfaction Survey


Form# [4-4-1-F2, Forensic Services Request\(FS1\)](#)

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## Procedure

### *Preparation and Review*

1. New Client initial request, (Doc# [4-4-1-D1, New Client Preparation and Request](#)) for services shall be directed to the Lab Director or Quality Manager. Contacted personnel shall obtain the following information.
  - A. Client
    - Contact person:
    - Tel: / Fax:
    - Address:
  - B. Objective / goals / required information
    - Requested analysis:
  - C. Costs
    - This laboratory is part of a governmental entity and therefore publicly funded. No charges other than Restitution through the North Carolina court system shall be handled through the Pitt County Sheriff's Office financial officer.
  - D. Description of Item(s)
    - Identification:
    - Approximate composition:
    - Main component: Minor constituent:
    - Intended use:
    - Packaging / stability:
    - Special care for storage / transport / stabilization:
    - Pretreatment / preconditioning:
    - Reference materials / reference samples:
2. This information is reviewed to determine the laboratory's ability to perform the work requested by the Client. If the laboratory has the technical capabilities and resources, continue this procedure or inform the Client that the laboratory is unable to fulfill their request.

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### ***Acceptance of Items for Testing***

1. The Client agrees to stipulations of acceptance.
2. A Client cannot submit items without authorization and the FS1 submission form.
3. The signatures of Pitt County Forensic Services Unit employees appearing below indicate that the material described above under TYPE CONTAINER / DESCRIPTION OF EVIDENCE was delivered to the person (approved carrier) indicated, on or about the date stated, and was delivered in essentially the same condition as received. By submitting this form, you acknowledge and approve laboratory personnel to use the most appropriate and up to date methods authorized by our laboratory and/or sample submission to another laboratory to best meet your needs.

### ***Requests for additional testing not otherwise stated in initial submission***

1. The additional request shall be reviewed in the same manner as previously outlined.

### **Documentation**

Copies of all submission requests are maintained in the Master case file.

### **References**

Euarchem– Quality Assurance for Research and Development and Non-Routine Analysis.



## ***Quality Management System Procedure***

**Pitt County Sheriff's Office Forensics Services Unit**

*Issued by the Quality Manager*

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### **REVISION HISTORY**

<b>CURRENT VERSION</b>	<b>EFFECTIVE DATE</b>	<b>SUMMARY OF CHANGES</b>
1	2016/04/01	Original Version
2	2018/04/01	Changed revision history table, issue date to effective date, rev# to ver#

***This document is not controlled if printed.***