Operations Manual

Table of Contents

1 EVIDENCE HANDLING

A. When evidence items are under control of the FBI Laboratory, all evidence items are stored, handled, and prepared for testing to protect their integrity and prevent loss, contamination, and/or deleterious change. These measures for safeguarding the integrity of evidence items also protect the interests of FBI Laboratory customers and the FBI. [ISO 17025 7.4.1] [A2LA R318 7.2 FI1.1]

B. Known origin individual characteristic database (ICD) samples are not subject to the evidence handling requirements in this document. Level 2 procedures will define the requirements for known origin ICD samples. [ANAB AR 3125 7.4.1.1]

1.1 Evidence Receipt

A. Evidence is typically received in the FBI Laboratory via a commercial carrier (e.g., USPS, FedEx, UPS) or personal delivery. Request only submissions and evidence received electronically (e.g., Sentinel, email) will be directly forwarded to or received by the appropriate unit. [ISO 17025 7.4.1]

B. Any handling instructions received for evidence will be followed. [ISO 17025 7.4.1]

C. If additional precautions are necessary to ensure evidence is safe to handle, the appropriate personnel (see Personnel to Contact to Ensure Evidence is Safe to Handle (LAB-409)) will be notified, and the appropriate actions, as determined by the notified personnel, will be taken prior to any subsequent handling/processing. [ISO 17025 7.4.1]

D. Upon receipt of evidence by the FBI Laboratory, appropriately trained personnel will enter all the necessary information into the applicable laboratory information management system (LIMS). All evidence received will be entered in the applicable LIMS. A LIMS also accommodates the subdividing of evidence items when necessary. [ISO 17020 7.2.1] [A2LA R318 7.2 FI1.2] [ISO 17025 7.4.2] [ANAB AR 3125 7.4.2.1] [ANAB AR 3125 7.4.1.1.c] [ANAB AR 3125 7.4.1.1.d]
    1. An FBI Laboratory number will be assigned and a *Chain-of-Custody* (7-243, 7-243a, or equivalent in a LIMS) will be initiated. [A2LA R318 7.2 FI1.2]
    2. If it is a new submission for an existing Laboratory number, the new submission will be added, and a chain-of-custody will be initiated.

E. If a shipment is received that is not intended for the FBI Laboratory, it will not be entered in the applicable LIMS and appropriate disposition will be arranged. [ISO 17025 7.4.1]

F. If a damaged box/container (e.g., opened, crumbled) is observed when the evidence is received and may have impacted the evidence, personnel will photograph and record the condition. [ISO 17020 7.2.2] [ISO 17020 7.2.3] [ISO 17025 7.4.3]
    1. If it is possible the evidence may be unsuitable for examination, the appropriate discipline(s) or subdiscipline(s) will be contacted to discuss testing. This discussion will be recorded in the appropriate communication log (7-245 or equivalent in a LIMS). [ISO 17020 7.2.3] [ISO 17025 7.4.3]

2. Personnel will ensure evidence packaging/container is properly sealed. [ANAB AR 3125 7.4.1.1.a] [A2LA R318 7.2 FI1.1]

1.2 Evidence Storage

A. All evidence will be stored in a secured area with limited access. [ISO 17025 7.4.1] [ANAB AR 3125 6.3.4.1] [ANAB AR 3125 7.4.1.1a] [A2LA R318 7.2 FI1.3]
   1. A secured area includes ensuring the door is closed and locked, and the alarm, where applicable, is activated as described in section 1.2.2. Limited access includes limiting the distribution and control of all access keys, and the dissemination of all combinations and codes. [ISO 17025 7.4.1]
   2. Personnel with access to evidence storage areas will ensure any badges, keys, combinations, and/or codes are safeguarded and used as assigned.
   3. Unit Chiefs will ensure personnel have access to their unit's evidence storage areas. When an individual no longer requires access to an evidence storage area, the individual's Unit Chief will ensure their access is removed (e.g., badge access updated, safe combinations are changed, keys returned).

B. Unauthorized persons entering an evidence storage area must be escorted by authorized FBI Laboratory personnel and sign either the Visitor's Log (FD-426) or Access Log – Evidence Storage Facility (FD-455).

C. When evidence needs to be stored under specified environmental conditions; these conditions will be maintained, monitored, and recorded. [ISO 17020 7.2.4] [A2LA R318 7.2 FI1.3] [ISO 17025 7.4.4]

1.2.1 Sealing Evidence

A. Personnel will ensure evidence is secured in primary packaging and placed under proper seal as soon as practicable. [ISO 17025 7.4.1] [ANAB AR 3125 7.4.1.1.a] [A2LA R318 7.2 FI1.1]

B. When evidence will be unattended and will not be sealed or placed in a locker that is assigned to one person, an 'Evidence Do Not Disturb' (or similar) sign will be placed on/near evidence. [ANAB AR 3125 7.4.1.1.b] [A2LA R318 7.2 FI1.1]

C. Situations where a proper seal is required:
   1. Evidence being placed into shared storage.
   2. Evidence not actively being examined.
   3. Evidence being transferred out of an FBI Laboratory facility.

D. Situations where a proper seal is not required:
   1. Evidence being examined, if access to the location is secured and limited, and the evidence item(s) is distinguished from non-evidence items, training materials, and/or supplies. [ANAB AR 3125 7.4.1.1.b]
   2. Evidence stored in an evidence locker that is accessible by one person.
   3. Evidence that does not lend itself to sealing (e.g., bulky, voluminous/complex, requires spatial arrangement, fragility of evidence, in an instrument) and/or does not fit in a storage locker.

4. Person-to-person transfers between FBI Laboratory personnel. The evidence container will be closed when practicable to prevent loss, cross-transfer, or contamination. [A2LA R318 7.2 FI1.1]

1.2.2 Alarms

A. If an evidence storage area has an alarm, the first person to enter that area on a given day will be responsible for checking that the alarm was activated, and for deactivating the alarm. Personnel are responsible for ensuring evidence storage areas are secured, and at the end of each day activating the alarm. [ISO 17025 7.4.1] [A2LA R318 7.2 FI1.3]
B. If the alarm was not activated, the first person to enter on a given day will immediately notify the affected Unit Chief(s).

1.3 Evidence Transfer

A. All evidence transfers will be recorded on the applicable chain-of-custody including items that are collected and/or created and preserved for future testing (e.g., ESDA lifts, test-fired ammunition, latent print lifts, trace evidence, DNA extracts). [A2LA R318 7.2 FI1.2] [ANAB AR 3125 7.4.1.1.c, d]
B. Virtual transfers refer to transfers that are recorded on an electronic chain-of-custody without a corresponding physical change in custody (e.g., updating check-in notes, to immediately fix an incorrect record). When a virtual transfer is recorded, a reason will be provided on the chain-of-custody.
C. Chain-of-custody transfers will be recorded chronologically from the time a container is identified as housing evidence through evidence disposition. All transfers will be recorded at the time the transfer is made and recorded on the applicable chain-of-custody. [ANAB AR 3125 7.4.1.1.d] [A2LA R318 7.2 FI1.2]
    1. The chain-of-custody will record the item(s) being transferred, the person performing the transfer, the person receiving the evidence or the evidence storage location, and the date the transfer occurred. [ANAB AR 3125 7.4.1.1.d] [A2LA R318 7.2 FI1.2]
    2. Custody transfers will be recorded by container until evidence is inventoried, upon which transfers will be recorded by item identifier.
D. If a modification is needed to evidence transfers on the chain-of-custody in a LIMS, the person requesting the modification will contact the eLAB or appropriate Help Desk who will generate a ticket.
    1. The eLAB Help Desk will note the modification in the Override Comments field for the adjusted transfer. After the ticket has been resolved, the person requesting the modification will ensure the eLAB Help Desk provided ticket is added to the FBI Laboratory file for the affected Laboratory number.
    2. If the chain-of-custody cannot be modified in a LIMS, the person will note the modification in the evidence transfer comments during the next transfer of the evidence.

E. When a person who has custody of evidence is unavailable or no longer with the FBI Laboratory, the appropriate Unit Chief will ensure the evidence is reassigned. The reassignment of the evidence will be recorded on the appropriate Chain-of-Custody Log.
    1. The individual making the transfer must enter a comment to indicate why they are performing the override transfer.

1.4 Evidence Disposition

A. Evidence will be properly dispositioned. Appropriately trained personnel will ensure evidence is either returned, archived, or destroyed in accordance with FBI policies, procedures, and customer requests. [ISO 17025 7.4.1] [A2LA R318 7.2 FI1.1]
B. Appropriately trained personnel will prepare evidence shipments and will verify:
    1. Item(s) being shipped;
    2. Condition, seals, and labeling of the item(s);
    3. Recipient and recipient's address;
    4. Chosen carrier/shipment method is appropriate for the evidence type being shipped; and
    5. Shipping container is appropriately labeled (e.g., 'D' for drugs, 'V' for valuables, 'F' for firearms, 'DE' for digital, and 'G' for general for FBI field office or resident agency).
C. An *FBI Laboratory Shipping Invoice* (7-264 LIMS, 7-264) will be generated for each shipment. A copy of the invoice will be included with the shipment and a copy will be retained in the 1A.
    1. If secondary evidence will be shipped, a detailed description of the enclosed item(s) (e.g., Secondary Evidence Log) will also be included with the shipment.
D. Any submission containing hazardous materials (e.g., explosive, toxic, flammable, oxidizing, or corrosive) must be returned by personnel who have been trained to ship packages containing hazardous materials by a certified Department of Transportation or International Air Transport Association-approved school.
E. Evidence may be shipped to a person and/or facility other than the original customer upon request from the customer. This request will be recorded in the appropriate communication log.

1.5 Handling Drug and Valuable Evidence

A. Drug and valuable evidence have additional handling and storage requirements.
B. For drug and valuable evidence received from an FBI contributor, personnel will follow the categorization assigned in Sentinel.
    1. If an item's categorization is unclear, personnel will handle the item as drug or valuable evidence.
    2. If Laboratory personnel believe an evidence item was inappropriately categorized by the FBI contributor, the submission manager will contact the customer to discuss and record any change in categorization.

C. For non-FBI customers, personnel will refer to the Field Evidence Management Policy Guide (FEMPG) for guidance regarding the categorization of items.
    1. If an item's categorization is unclear, personnel will handle the item as drug or valuable evidence.
D. Drug and valuable evidence will be stored in a safe or secured area, restricted to storing only drug and valuable evidence. Drug and valuable evidence storage locations will be secured for dual-person entry.
E. When transferring drug and valuable evidence, it will be separated from other types of evidence, as practicable. When transferring to or from storage, a witness must be present, and their name recorded.
F. Drug or valuable evidence packaging should only be opened for purposes of examination and should not be opened for other purposes (e.g., ensuring the contents).
G. When it is determined that drug or valuable evidence packaging will be opened, the personnel opening the package will complete the *FBI Laboratory Drug Evidence* label (7-248) or *FBI Laboratory Valuable Evidence* label (7-287), as appropriate.
    1. For drug evidence (i.e., not considered trace amount of drug), prior to opening, personnel will weigh suspected drug evidence and applicable packaging, in grams, and this will be confirmed by a witness.
    2. Personnel will open the packaging, in the presence of a witness, in a manner that ensures the previous seal(s) and/or initials remain intact. Original packaging, including any pieces removed during the opening, will be retained.
    3. For valuable evidence, if countable (e.g., currency), personnel will count the evidence upon opening, and the contents will be confirmed by a witness.
H. Upon opening and confirmation of contents, Laboratory personnel may determine to handle the drug or valuable evidence as general evidence. If one of the below criteria is met and the decision is made to handle the drug and valuable evidence as general evidence, all general evidence handling procedures will be followed. Figure 1: Handling Drug/Valuable Evidence describes when evidence will be handled as drug/valuable or general evidence in the FBI Laboratory. [ISO 17025 7.4.1] [A2LA R318 7.2 FI1.1]
    1. Items categorized as drug items that are considered trace amount of drug or drug paraphernalia.
    2. Items (e.g., per item/heat sealed bag) categorized as valuable items that are currency less than $20.
    3. Items categorized as valuable items that do not appear to have gemstones or precious metals (e.g., plastic jewelry).

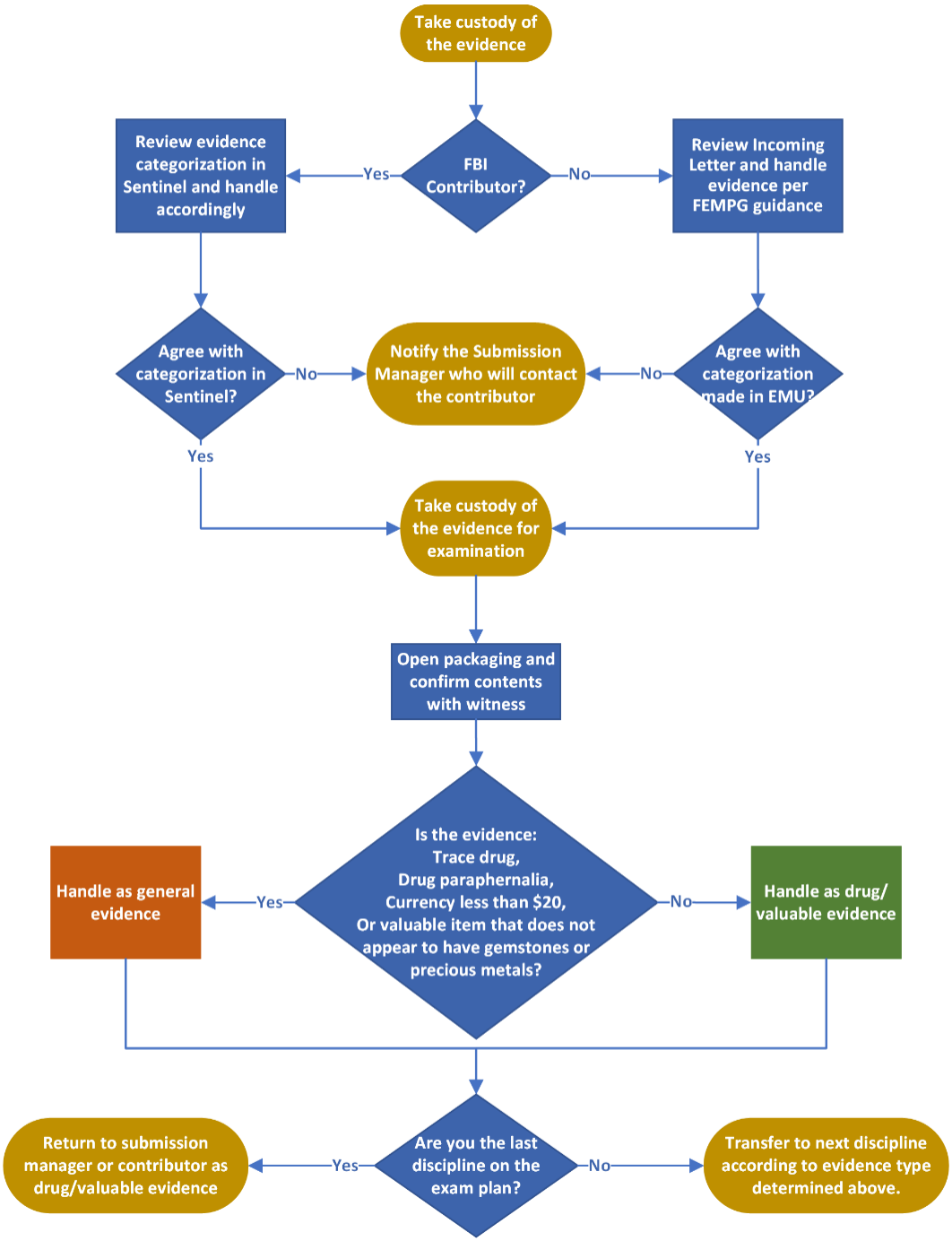

Figure 1: Handling Drug/Valuable Evidence

I. Upon completion of the examination process, and prior to returning to a customer or archive storage, if drug and valuable evidence items were handled as general evidence within the FBI Laboratory, personnel will package and seal the items as drug and/or valuable evidence. Drug and valuable evidence will be placed in the packaging and then heat-sealed over the label. If reinforced tape was used, the label will be placed over the tape where the tape ends meet/overlap. The packaging and

sealing of drug and/or valuable evidence items is the responsibility of the last discipline on the *Examination Plan*.

1. The personnel sealing the packaging will complete the *FBI Laboratory Drug Evidence* label or the *FBI Laboratory Valuable Evidence* label, as appropriate. If the items of evidence are too large for heat-sealable packaging, the items will be packaged in a box and secured with reinforced tape. The reinforced tape will encircle the packaging box, and the ends meet or overlap.
    i. After closing, drug evidence (i.e., not considered trace amount of drug) will be weighed, in grams, and confirmed by a witness. Valuable evidence that is countable (e.g., currency), will be counted and confirmed by a witness.

2 EXAMINATION PROCESS

2.1 Receipt/Review of Request/Creation of Submission

A. The Handbook of Forensic Services describes the contract that is entered when a customer submits evidence to the FBI Laboratory. The requirements below describe the review of requests. A request for examination is required for all examinations or other services deemed appropriate. [ISO 17020 5.1.5] [ISO 17020 7.1.5.b] [ISO 17025 7.1.1] [ISO 17025 7.1.1.a] [ISO 17025 7.1.4] [ISO 17025 7.1.7] [ISO 17025 7.1.8]

B. A request for examination may be a Laboratory Examination Request (LER) (FD-1121), Electronic Communication (EC) (FD-1057), Lead in Sentinel, *Terrorist Explosive Device Analytical Center (TEDAC) Item Submission* Form (7-275), *TEDAC Bulk Submission* Form (7-276), or a letter on agency letterhead.
    1. Requests for examination from external customers will be assigned a Case ID and serialized in Sentinel by appropriately trained personnel.
    2. Submissions will not routinely be initiated without a request; however, submissions may be initiated without a request for major cases, Chemical Biological Radiological Nuclear (CBRN) cases, disasters, or field examinations.
        i. If an examination request is not received for evidence, there will be three attempts within 30 days to contact the customer to obtain a request. If the customer fails to provide the request, the evidence will be returned to the customer unexamined.
        ii. If additional case and/or request information is received, the personnel receiving the information will record that information in the appropriate communication log. [ISO 17025 7.1.7] [ISO 17025 7.1.8]
        iii. Appropriately trained personnel will initiate a submission within the applicable LIMS for all examination requests and evidence received. Each submission will be associated with an FBI Laboratory number. [A2LA R318 7.3 FI1.1]
    3. Prior to the initiation of a submission, appropriately trained personnel will determine if the request is a new submission or is associated with a previous submission(s).

i. If the request is not associated with a previous submission(s) appropriately trained personnel will initiate a new submission.
ii. If the request is associated with a previous submission(s) appropriately trained personnel will determine if the request is part of the previous submission or is a new submission.
iii. If the request is part of a previous request, the evidence will be added to the previous submission if inventory has not been completed and 30 days have not passed from the receipt of the previous submission. Otherwise, the request will be treated as a new submission.

C. Evidence packaging/containers will be labeled with the associated FBI Laboratory number. [ISO 17020 7.2.1] [ANAB AR 3125 7.4.1.1.a]

2.2 Internal Review/Assignment

A. All requests will be reviewed for the following, as applicable, by appropriately trained personnel.
B. For submissions containing dissemination controls, classified, and/or Foreign Intelligence Surveillance Act (FISA) information, they will be entered in the applicable LIMS; however, classified and/or FISA information will be omitted. A notation of where the information is recorded will be maintained within the appropriate communication log.
    1. A *Classification Control Worksheet* (7-285) will be utilized, as appropriate, in TEDAC cases.
C. For Office of Professional Responsibility (OPR) and prohibited cases, they will be entered in the applicable LIMS; however, the sensitive information will be omitted. Additional measures of restricting access to the case in the applicable LIMS will be taken.
    1. A *Laboratory Work Sheet* (7-2) will be generated to record case-related administrative information, and the items received for OPR, and prohibited cases. If evidence from multiple cases will be examined, a *Laboratory Work Sheet* will be prepared for each Case ID.
D. For submissions involving evidence indicating a CBRN threat, the Scientific Response and Analysis Unit (SRAU) will review the case information and provide clearance information about screened hazards. Guidance from SRAU will be recorded in the appropriate communication log and retained in the FBI Laboratory file. (See Figure 2: Suspected Hazardous Evidence Flow Chart)
    1. An operational scientist from SRAU will review Laboratory Response Network (LRN) report(s) and provide clearance information for evidence submitted with LRN reports.
    2. A forensic examiner from SRAU will provide a clearance memo for items prior to transfer of evidence from a Partner Laboratory, if applicable. The clearance memo will be retained in the 1A.

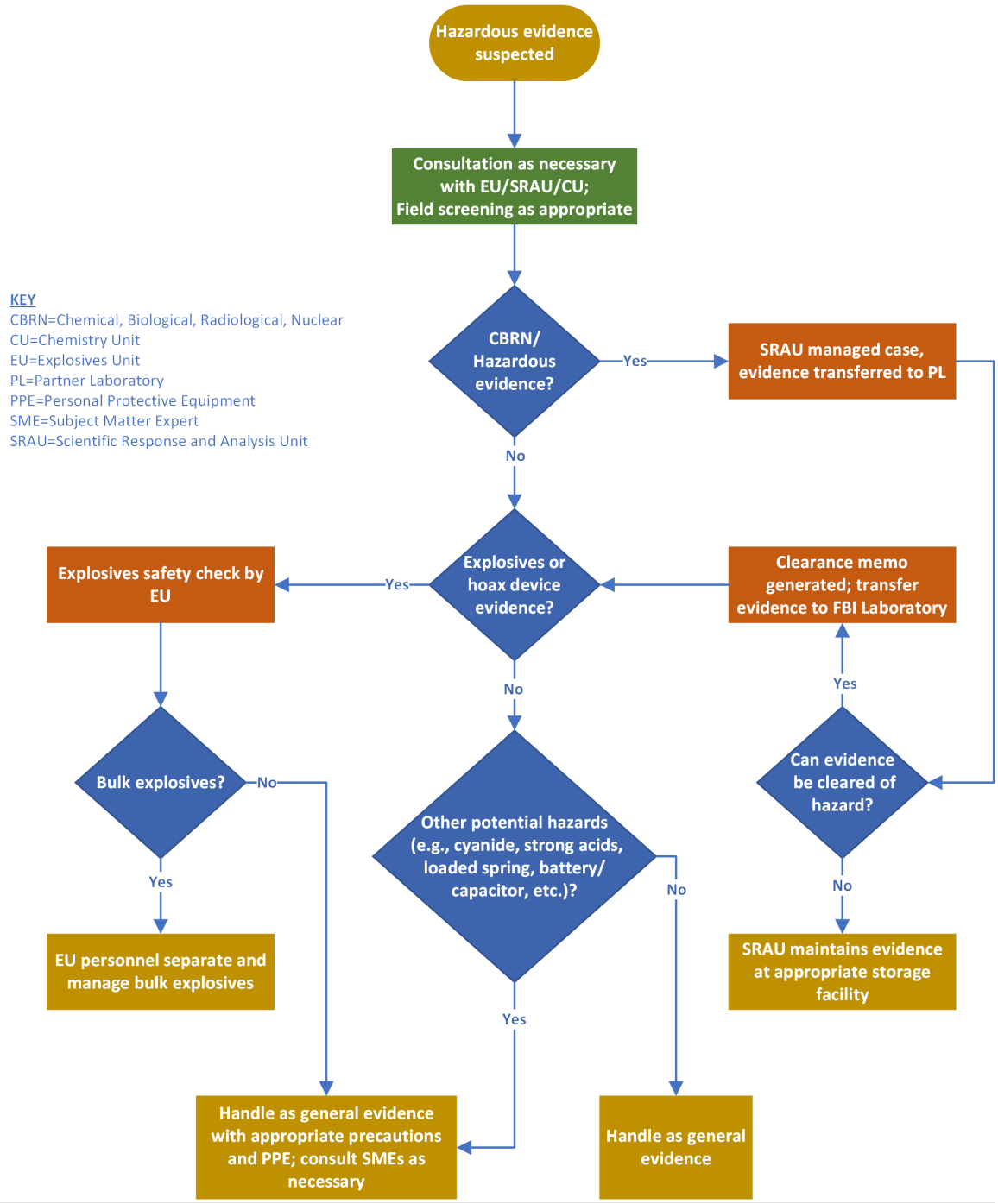

Figure 2: Suspected Hazardous Evidence Flow Chart

E. Requests will be reviewed by Evidence Management Unit (EMU) personnel to determine if the evidence examinations will be managed by a single unit, EMU personnel, SRAU, or the Explosives Unit (EU).
    1. A single unit submission (SUS) will be designated based on the type of evidence submitted and/or that it will be examined by a single unit.
    2. EMU personnel may assign a SUS outside of those established in the SUS

Table 1 based on the criteria that only one unit will examine the evidence (e.g., customer requests only one examination type). The communication with the customer and the acceptance from the unit will be recorded in the appropriate communication log. [ISO 17025 7.1.1.a]

3. EMU may manage cases designated as SUS at the request of the examining unit and with agreement by the EMU Chief. This communication will be recorded in the appropriate communication log.
4. An *Examination Plan* (7-262) is not required for a SUS. [ISO 17020 7.1.5.c] [ISO 17025 7.1.1] [ISO 17025 7.1.2] [ISO 17025 7.2.1.4]
5. In addition to the below items, compact discs, DVDs, non-original evidence, evidence received electronically and request only submissions will be assigned to the appropriate unit as a SUS.

Table 1: Single Unit Submissions

Unit/Discipline	Evidence Items
Chemistry	Drugs General Unknowns Fire debris/ignitable liquid items Paint Toxicological samples (for outsourcing) Metallurgical materials
DNA	Swabs Known and alternate known samples
Explosives	Soil samples Explosive swabs and samples
Firearms/Toolmarks	Expended bullets and cartridge cases Casts
Friction Ridge	Drug packaging Known fingerprints records Lifts
Operational Projects	Film Disposable cameras Photographs Slides Negatives
Questioned Documents	Known question document samples Shredded documents
Trace Evidence	Geological samples Known hair samples Known fiber samples
SRAU	CBRN evidence

2.3 Acknowledgement/Management

A. The submission manager will ensure the customer is contacted to acknowledge receipt of the request and/or item(s) at or near the time of receipt within a unit (see section 2.7.B), to include requests for storage only. [ISO 17025 7.4.1]
    1. The acknowledgement will contain:
        i. FBI Laboratory number
        ii. Customer case/agency number
        iii. Contact information
        iv. Acknowledgement of receipt
            - If the request and/or item(s) has not been inventoried at time of communication, the acknowledgement will indicate that the receipt does not imply that the FBI Laboratory has verified the item(s) submitted and that any discrepancies will be resolved later.
            - Information on the work agreement and the agreement for simplified reporting of results (e.g., *Laboratory Report*, i3 product), (see section 3 and Acknowledgement Email Guide (LAB-413)). [ISO 17025 7.8.1.3]
    2. The acknowledgement will be recorded in the appropriate communication log. [ISO 17025 7.4.1]
    3. Acknowledgement is not required for an i3 service or product if the submission is associated with a single partner and requirements of section 3.C are met.
    4. The submission manager will ensure all relevant information is accurately entered into the applicable LIMS.
    5. Submission managers will review requests for examinations and ensure:
        i. The FBI Laboratory has the capability and resources to meet the request. [ISO 17020 7.1.5.a] [ISO 17025 7.1.1.b]
        ii. If the FBI Laboratory does not have the capability of meeting any portion of the request, the submission manager will notify the customer.
            - The communication will be recorded in the appropriate communication log.
        iii. If an external provider will be used to fulfill a customer's request, they will meet the requirements in the Quality Assurance Manual (LAB-100) section 1.9. Additionally, the submission manager will advise the customer of the specific laboratory activities to be performed by the external provider and obtain the customer's approval. [ISO 17025 7.1.1.c]
            - The communication and approval will be recorded in the appropriate communication log.

iv. If personnel identify additional testing that may be appropriate when acknowledging or initiating the management of the submission, the submission manager will contact the customer. [ISO 17025 7.1.7]
    - Examinations generally expected by a customer (i.e., TEDAC evidence; CBRN items; Cryptanalysis and Racketeering Records Unit evidence) are not communicated to the customer.
    - The communication will be recorded in the appropriate communication log. [ISO 17025 7.1.5] [ISO 17025 7.1.8]

B. The submission manager will ensure the customer is contacted to reconcile any discrepancies or unanswered issues with a request. [ISO 17025 7.1.4]
    1. The communication will be recorded in the appropriate communication log.

2.4 No Examinations Will Be Conducted

2.4.1 Evidence

A. If no examinations will be conducted on evidence, the submission manager will send a written communication (e.g., email) to the customer stating that no examinations will be conducted and provide the reason and/or explanation as to why no examinations will be conducted. This written communication will be retained. [ISO 17025 7.1.5]
    1. Reasons may include:
        i. Examinations requested are not offered by the FBI Laboratory;
        ii. Evidence is not conducive to the examinations requested;
        iii. Evidence was submitted in a manner that is not conducive to the examinations requested;
        iv. Examinations are canceled prior to any examinations; or
        v. Prior processing performed on the evidence precludes FBI Laboratory examinations.

B. If the customer requests specific examinations, and those examinations will not be conducted based on discipline and/or subdiscipline specific reasons, the examiner or the submission manager who makes the determination will notify the customer in writing as to why those examinations were not conducted on the item(s).

2.4.2 TEDAC Evidence

A. TEDAC evidence examination requests that are deemed to be unsuitable for examination due to the nature of the evidence and/or prior processing performed may have the evidence sent directly to the TEDAC Repository or bunker for storage after receipt is completed. [ISO 17025 7.1.5] [ISO 17025 7.4.1]

B. The customer will be notified in writing that the TEDAC evidence examination request has been deemed unsuitable for examination.
    1. The communication will contain:
        i. The referenced evidence will not be examined at this time.

ii. The reason the evidence will not be examined.
iii. The disposition of the evidence.
iv. This communication serves as the acknowledgement of receipt.

2. The communication will be retained in the appropriate communication log.

2.5 Evidence Inventory

A. Evidence will be inventoried and itemized with guidance from the General Description of Evidence (LAB-400)and recorded in Check-In Notes. Check-In Notes are not required for evidence received electronically (e.g., Sentinel, email). [ISO 17020 7.2.2] [A2LA R318 7.3 FI1.2] [ISO 17025 7.4.2]
B. A record of any damage discovered during inventory will be recorded and retained in the 1A. [ISO 17020 7.2.3] [ISO 17025 7.4.1]
C. If necessary, the customer will be contacted to discuss any discrepancies with the evidence received. [ISO 17020 7.2.3] [ISO 17025 7.4.3]
D. Each proximal container will be labeled with a unique identifier, when practicable. This label will include the item identifier(s) (e.g., Item 1) and the FBI Laboratory number or a derivative thereof. [ISO 17020 7.2.1] [ISO 17025 7.4.2]
E. If a derivative of the Laboratory Number is used, the proximal container/packaging will bear the full FBI Laboratory number.
F. When possible, the evidence container(s)/package(s) will be preserved when case-related information such as a 1B number, customer barcode, or a customer case number are on the container(s)/package(s). If not possible, the appropriate labels or barcodes will be removed and maintained with the new package.

2.6 Examination Plan

A. A submission manager will review or create and manage an *Examination Plan* for applicable submissions (see section 2.2.E). FBI Laboratory personnel will determine what is appropriate to address the customer's request considering the nature of the evidence, the request for examination, and any pertinent case information received. [ISO 17025 7.1.1] [ISO 17025 7.1.2] [ISO 17025 7.2.1.4]
B. A submission manager will ensure the applicable LIMS captures the examinations outlined in the *Examination Plan*.
    1. If a submission manager updates an *Examination Plan* after an examining unit has received the evidence, they will communicate the information to the affected personnel. [ISO 17025 7.1.6]

2.7 Assigning, Communication, and Testing

A. A Unit Chief will ensure submissions are assigned to appropriate personnel in their unit.
B. If examinations do not begin within 60 calendar days of receipt of evidence in the unit and the assignment of the submission, a person from the unit, such as the assigned examiner or an analyst, will contact the customer prior to beginning any examinations.

1. This communication will be recorded on the appropriate communication log. This communication is not required for submissions of TEDAC evidence.

C. If an additional examination(s) is identified that may be appropriate, the examiner will ensure the affected unit(s) is contacted to discuss the potential examination(s). This will be recorded on the appropriate communication log. [ISO 17020 7.1.6] [ISO 17025 7.1.6] [ISO 17025 7.1.8]
    1. If it is appropriate to conduct the additional examination(s), the examiner or the person managing the case will contact the customer to determine if they want the examination(s) conducted. This will be recorded on the appropriate communication log. [ISO 17025 7.1.6] [ISO 17025 7.1.8]
    2. If the customer agrees to the additional examination(s), EMU, SRAU, or EU will be notified, as appropriate, to update the *Examination Plan*. This will be recorded on the appropriate communication log. [ISO 17025 7.17] [ISO 17025 7.1.8]
    3. For examinations generally expected by a customer (i.e., TEDAC evidence; CBRN items; Cryptanalysis & Racketeering Records Unit evidence), the customer will not be contacted, but the *Examination Plan* will be updated.
D. The examiner will ensure the appropriate examination(s) is conducted.
E. Personnel directly examining and/or processing an item(s) of evidence will label the evidence and place their initials directly on the evidence, where practicable, or its proximal container/packaging. The label will include the Item identifier (e.g., Item 1) and the FBI Laboratory number or a derivative thereof. Smaller items should be protected from loss which may include packaging separately to ensure they are distinguishable from larger items. Subdivide items as needed (see section 2.8).
    1. When initialing or labeling, care should be taken not to mark the item of evidence in such a manner as to affect another examination.
    2. If an item does not lend itself to marking, the proximal evidence container/packaging or identifying tag will be initialed.
    3. Personnel who perform non-examination processes on evidence (e.g., photography or photocopying) do not need to initial the item(s) of evidence or its proximal container.
F. Personnel whose role is limited to drawing conclusions based on data derived from examination procedures do not need to initial the item(s) of evidence from which the data was derived.
G. For canceled requests, a record of the cancellation instructions and the name of the person who canceled the request will be retained in the appropriate communication log.
    1. If examinations are in progress, the affected examiner will determine the appropriate stopping point in the examination process. All results will be furnished to the customer as described in section 3. Additionally, a statement will be added indicating that the examinations were canceled, by whom, and when. [ISO 17025 7.1.5] [ISO 17025 7.1.6]
    2. If no examinations have been initiated, the person managing the case will send a written communication (e.g., email) to the customer stating that no

examinations will be conducted and include a statement indicating that the examinations were canceled, by whom, and when. This email will be retained. [ISO 17025 7.1.5] [ISO 17025 7.1.8]

H. The FBI Laboratory will not retroactively review TEDAC cases submitted prior to the TEDAC being merged into the FBI Laboratory quality system in October 2017, to meet current quality system or accreditation requirements. All work (e.g., documentation, evidence handling) conducted for a new request, pending and/or missed examination that is identified in such a case will conform to the current quality system. The initial TEDAC casework and evidence will not be updated to conform to current quality system requirements unless not doing so will significantly impact the new requested examinations. This does not cover any technical issues that are identified with previous examinations/conclusions.

2.8 Subdividing and Secondary Evidence

2.8.1 Subdividing Evidence

There may be times during the examination process that an item of evidence needs to be subdivided. Subdividing an item occurs when an item not initially designated during the inventory needs to be uniquely identified. Personnel may subdivide an item as necessary.

2.8.2 Secondary Evidence

A. Secondary evidence is a material derived from an examination process on an item of evidence. It is not an individual item submitted by a customer and could not have been assigned an item identifier during inventory.

B. If secondary evidence will be created, Level 2 documents will contain defined means of identifying secondary evidence and generating a secondary evidence log. Any secondary evidence log generated will be retained in the FBI Laboratory file.

2.9 Sampling

A. Units, disciplines, and/or subdisciplines will have a sampling plan and method when they carry out sampling of substances, materials, or products for subsequent testing. [ISO 17020 7.1.2] [A2LA R318 7.1 FI1.2] [ISO 17025 7.3.1]

B. The sampling method will describe: [ISO 17025 7.3.2]
    1. The selection of samples or sites; [ISO 17025 7.3.2.a]
    2. The sampling plan; [ISO 17025 7.3.2.b]
        i. Non-statistical; or
        ii. Statistical
            - Will be based on statistical methods when appropriate and will address the factors to be controlled to ensure the validity of the examination results. [ISO 17025 7.3.1]
            - Statistical sampling at a stated level of confidence will be used if an inference will be made to report on the whole population. [ANAB AR 3125 7.3.2.b.1]

3. The preparation and treatment of a sample(s) from a substance, material, or product to conduct the appropriate examinations. [ISO 17025 7.3.2.c]

C. Units, disciplines, and/or subdisciplines will record appropriate sampling data and activities relating to the examination. Records will be maintained in the FBI Laboratory file and include, where relevant:
   1. Sampling method(s) used; [ISO 17025 7.3.3.a]
   2. Date and time of sampling; [ISO 17025 7.3.3.b]
   3. Data to identify and describe the sample; [ISO 17025 7.3.3.c]
   4. Identification of the personnel performing the sampling; [ISO 17025 7.3.3.d]
   5. Identification of the equipment used; [ISO 17025 7.3.3.e]
   6. Environmental or transport conditions; [ISO 17025 7.3.3.f]
   7. Diagrams or other equivalent means to identify the sampling location, when appropriate; [ISO 17025 7.3.3.g]
   8. Deviations from the sampling plan and method. [ISO 17025 7.3.3.h]

2.10 Technical Records

A. The FBI Laboratory retains all technical records. Some records (e.g., reagent preparation, equipment records, validation records) may be retained independent of the FBI Laboratory file. All *Laboratory Reports* containing results will be retained as technical records. [ISO 17025 7.8.1.2] [ANAB AR 3125 7.5.1.1]

B. FBI Laboratory file/1A records (see section 7):
   1. Will be created and/or retained in a permanent nature (e.g., ink, both original observations created in pencil and scanning of observation originally created in pencil) and contain sufficient detail to enable the repetition of the laboratory activity under conditions as close as possible to the original activity. [ISO 17025 7.5.1] [ANAB AR 3125 7.5.1.4] [A2LA R318 7.3 FI1.2] [A2LA R318 7.3 FI1.3]
   2. Will include the unique identifier (e.g., lot number, batch number) of the equipment used, when equipment (as defined in ISO 17025 6.4.1) that utilizes a unique identifier is specified in a procedure.
   3. Will include original observations, data, and calculations that are recorded at the time they are made and that are identifiable to the specific laboratory activity performed. [ISO 17020 7.1.7] [ISO 17025 7.5.1]
      i. If an observation, data, or calculation is rejected, the reason, the identity of the person taking the action, and the date will be recorded in the technical record. [ANAB AR 3125 7.5.1.5]
   4. Will be understandable to a reviewer possessing the relevant knowledge, skills, and abilities and contain sufficient detail to evaluate what was done and interpret the data. [ANAB AR 3125 7.5.1.3] [A2LA R318 7.3 FI1.3]
   5. Will, when possible, contain sufficient information to identify factors affecting the measurement result and its associated measurement uncertainty. [ISO 17025 7.5.1] [A2LA R318 7.3 FI1.3]
   6. Will include the starting and ending date(s) of the testing, and the identity of the person responsible for the laboratory activity and the associated

technical records. [ISO 17025 7.5.1] [ANAB AR3125 7.8.1.1.1] [A2LA R318 7.3 FI1.5]

i. If the preparer of a technical record is not the issuing examiner, the issuing examiner is responsible for checking data and results for each laboratory activity and will record a review of the technical records prior to issuing the report. [ISO 17025 7.5.1] [ANAB AR 3125 7.8.1.1.1]

7. Will have the laboratory number on each page. Electronic records may have the laboratory number applied by the applicable LIMS or other electronic method upon compilation of the final electronic packet for upload and serialization in Sentinel. When a record contains unrelated laboratory numbers (e.g., batch work), the applicable laboratory number(s) will be identified. [A2LA R318 7.3 FI1.5]

C. Where abbreviations and symbols are specific to the FBI Laboratory, their meaning will be defined. Abbreviations and/or symbols will be defined in Level 2 documents and/or case notes. [ANAB AR 3125 7.5.1.2]

D. Amendments to technical records will be tracked to the previous version or original observations. [ISO 17025 7.5.2]

1. Contemporaneous changes (i.e., those made before a person reaches a decision point for the technical records they generate) are not considered amendments.
2. For physical technical records, amendments will be made with an initialed single strike-out, date of the change, and the change entered alongside. Nothing will be erased or otherwise made illegible.
3. For electronic technical records, sufficient information to determine what was amended, the date of the amendment, and who made the amendment is maintained (e.g., track changes, maintaining both the original and amended data and files). Measures will be taken to avoid loss or change of original data. [ISO 17025 7.5.2]

3 REPORTING OF RESULTS

A. Results will be reviewed and approved prior to release. [ISO 17025 7.8.1.1]

B. All results will be provided to a customer accurately, clearly, unambiguously, and objectively including any information necessary for the interpretation of the results. Level 2 documents may have additional requirements when reporting results. [ISO 17020 7.4.4] [ISO 17025 7.8.1.2]

1. A *Laboratory Report* (7-1 LIMS, 7-1) will be issued to report results in all cases unless a Level 2 document defines the criteria and/or when a submission will be reported as an i3 product. [ISO 17020 7.4.1]
2. If opinions and interpretations are verbally communicated to a customer, that communication will be recorded in the appropriate communication log. [ISO 17025 7.8.7.3]

C. The FBI Laboratory issues simplified *Laboratory Reports* and i3 products (see section 4) to improve the customer's ability to understand the report. Agreement with the customer for simplified reporting is communicated in the acknowledgement and/or

for a single partner (e.g., Intelligence Unit, Other Government Agency) agreement via a one-time record. The information listed below will be retained in the FBI Laboratory file or i3 record: [ISO 17025 7.8.1.3] [ISO 17025 7.8.2.1] [ANAB AR 3125 7.8.1.3.1]

1. Contact information for the customer. [ISO 17025 7.8.2.1.e]
2. Date of receipt of the evidence item. [ISO 17025 7.8.2.1.h]
3. Information demonstrating that the results apply to the sample as received, when the FBI Laboratory does not perform the sampling (e.g., the sample is provided by the customer). [ISO 17025 7.8.2.2]
4. Sampling information including the date of sampling, the sampling plan and method, and environmental conditions during the sampling where critical to the validity and application of the results, and information to evaluate measurement uncertainty for subsequent examination. [ISO 17025 7.8.2.1.h] [ISO 17025 7.8.2.1.k] [ISO 17025 7.8.2.2]
5. Date examinations were conducted. [ISO 17020 7.4.2.c] [ISO 17025 7.8.2.1.i]
6. Additions to, deviations or exclusions from examination methods. [ISO 17025 7.8.2.1.n]
7. Identification of data provided by the customer. [ISO 17025 7.8.2.2]
8. Disclaimer when the information is supplied by the customer and can affect the validity of results. [ISO 17025 7.8.2.2]
9. Enhancement (processing methods) used, when applicable.

D. The first page of a *Laboratory Report* or i3 product must contain a Personally Identifiable Information (PII) warning statement.
    1. The PII warning statement is, 'This document may contain privileged and/or personally identifiable information, including information related to juveniles and other protected individuals. This document must be afforded the protection required by applicable law, regulation, and policy. If you are not the intended recipient of this document, please destroy it promptly without further retention or dissemination, unless otherwise required by law.'
    2. The warning statement will be distinguishable from the rest of the report. [FBI Laboratory Executive Management (EM) Directive HQ-A1487699-LAB, Serial 104]
E. The FBI Laboratory does not accept customer requests to include a statement of conformity to a specification or standard for the tests conducted. [ISO 17020 7.4.2.f] [ISO 17025 7.1.3] [ISO 17025 7.8.3.1.b] [ISO 17025 7.8.6.1] [ISO 17025 7.8.6.2.a] [ISO 17025 7.8.6.2.b] [ISO 17025 7.8.6.2.c]
F. The results for an initial database entry (e.g., DNA profiles, friction ridge, ballistics, biometrics) will be reported in writing through a letter of notification or *Laboratory Report*. [ANAB AR 3125 7.8.1.2.2.d]
    1. Any time a positive association is made, written notification (e.g., letter of notification, *Laboratory Report*), must be generated. A record of the notification will be retained. [ANAB AR 3125 7.1.9]

NOTE: The reporting of results does not include testing of known origin samples for the purpose of constructing an ICD or maintaining the quality and/or effectiveness of information in such a database. [ANAB AR 3125 7.8.1.2.1 Note]

3.1 Laboratory Reports

A. Text entered for each *Laboratory Report* will be Times New Roman font.
B. Typically, the font size used in the body of the *Laboratory Report* will be 12-point; however, different font sizes may be used in charts. The bold, italic, or underline functions may be used, and charts and/or images, may be included as necessary.
C. A *Laboratory Report* may contain the results of examination for multiple submissions within the same Case ID.
D. Laboratory Reports will include: [ISO 17020 7.4.2.d] [ISO 17020 7.4.2.e] [ISO 17020 7.4.2.g] [ISO 17025 7.8.2.1.g] [ISO 17025 7.8.2.1.l] [ISO 17025 7.8.2.1.m] [ISO 17025 7.8.2.1.o]
    1. Administrative information about the request for examination,
    2. Listing and description of evidence,
    3. Results of Examinations section when examinations have been conducted,
    4. Remarks section, and
    5. Name block.

3.1.1 Administrative Information

A. A Laboratory Report must contain: [ISO 17020 7.4.2.a] [ISO 17020 7.4.2.b] [A2LA R318 7.4 FI1.1.a] [ISO 17025 7.8.2.1.b] [ISO 17025 7.8.2.1.e] [ISO 17025 7.8.2.1.j]
    1. Name and addresses of the FBI Laboratory facilities,
    2. FBI Laboratory number,
    3. Case ID number,
    4. Customer information,
    5. Date of the request,
    6. Report date, and
    7. Proper marking for classification and dissemination.
B. Other administrative information is optional and may be included if provided.
C. When a customer's agency/case number is provided, it will be entered in the 'Agency Reference' field.
D. The 'To:' field will be addressed either to the FBI field office, division, or Legal Attaché office for internal customers and according to the information provided for external customers.
E. The 'FBI Laboratory Evidence Designators' field will contain a listing and description of item(s) that were submitted to, or examined in, a particular unit, discipline, and/or subdiscipline. [ISO 17020 7.4.2.d] [ANAB AR 3125 7.8.1.2.2.a]
F. A statement identifying the discipline and/or subdiscipline being reported will follow the listing and description of evidence or be contained in the Results of Examination section.

NOTE: If the 'Discipline' field is inclusive to all testing being reported, this additional statement is not necessary.

3.1.2 Results of Examinations Section

A. The Results of Examinations section will contain methods used, results, limitations, opinions, interpretations, and/or conclusions of forensic examinations. [ISO 17025 7.8.1.2] [ISO 17025, 7.2.1.4] [ISO 17025 7.8.7.1]
    1. The information listed above may be recorded under a separate heading(s) if described in Level 2 documents.
B. *Laboratory Reports* will meet the requirements of the applicable FBI Approved Standards for Scientific Testimony and Report Language (ASSTR), the applicable Department of Justice (DOJ) Uniform Language for Testimony and Reports (ULTR), and any applicable Level 2 documents regarding reporting.
    1. The significance of an association will be included in the *Laboratory Report* in a statistic or qualitative statement. [ANAB AR 3125 7.8.1.2.2.b]
    2. When comparative examinations result in the elimination of a person or object, the *Laboratory Report* will clearly communicate the elimination.
    3. When an inconclusive result is reported, the reason(s) will be clearly stated in the *Laboratory Report.* [ANAB AR 3125 7.8.1.2.2.c]
C. A *Laboratory Report* will include additional information when it is necessary for the interpretation of results, such as:
    1. Information regarding specific examination conditions; [ISO 17025 7.8.3.1.a]
    2. Additional information that may be required by specific methods, authorities, or customers. [ISO 17025 7.8.3.1.e]

3.1.3 Measurement Uncertainty

A. Measurement uncertainty and confidence level will be included in a *Laboratory Report*, or as an enclosure, when it is relevant to the validity or application of the examination results or a customer's instructions require it. [ISO 17025 7.8.3.1.c] [ANAB AR 3125 7.8.3.1.c.1.a] [A2LA R318 7.4 FI1.2]
B. The measurement uncertainty will:
    1. Include the measured quantity value, y, along with the associated expanded uncertainty, U, and the coverage of probability or confidence level; [ANAB AR 3125 7.8.3.1.c.1.b]
    2. Be in the format of $y \pm U$; [ANAB AR 3125 7.8.3.1.c.1.c]
    3. Be limited to at most two significant digits, unless there is a recorded rationale for reporting additional significant digits; [ANAB AR 3125 7.8.3.1.c.1.d]
    4. Be reported to the same number of decimal places or digits as the measurement result; [ANAB AR 3125 7.8.3.1.c.1.e]
    5. Where applicable, be presented in the same unit of measurement as that of the measurand or in a term relative to the measurand (e.g., percent). [ISO 17025 7.8.3.1.c]

3.1.3.1 Regulatory Body, Statute, Case Law or Other Legal 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, FBI Laboratory personnel will have objective evidence of the regulation, statute, case law or other legal requirement; and if prohibited from reporting measurement uncertainty, have a process for applying the measurement uncertainty at the established level of confidence prior to reporting the result. [ANAB AR 3125 7.8.3.1.1.a, b]

3.1.4 Sampling

When items have been statistically sampled in the FBI Laboratory, the *Laboratory Report* will include where necessary for interpretation of results: [ISO 17025 7.8.3.2] [ISO 17025 7.8.5.a] [ISO 17025 7.8.5.b] [ISO 17025 7.8.5.c] [ISO 17025 7.8.5.d] [ISO 17025 7.8.5.e] [ISO 17025 7.8.5.f]

A. The date of sampling,
B. A unique identification for the sampled item or material (including manufacturer information, model or type, and serial number, as appropriate),
C. Location of sampling,
D. A reference to the sampling plan and method used,
E. The confidence level, corresponding inference regarding the population, [ANAB AR 3125 7.8.5.d.1]
F. Environmental conditions that affect the interpretation of the results,
G. And information to evaluate measurement uncertainty for subsequent testing or calibration.

3.1.5 Remarks

A. The Remarks section of a *Laboratory Report* will contain, at a minimum, evidence disposition information (including secondary evidence as necessary), contact information, a facility statement, and a statement regarding the location of the records for that submission. [ANAB AR 3125 7.4.1.1.e]
B. If there is additional information pertinent to the request, it will be included in this section. This includes evidence not inventoried, examination cancellations or not conducted, special evidence handling, and storage instructions.
C. Any items collected or created and preserved for future testing (e.g., secondary evidence) will be addressed. [ANAB AR 3125 7.4.1.1.f]
D. Additional information required in this section may be described in a Level 2 document.
E. *Laboratory Reports* will also contain language advising customers of the time required for discovery requests to be processed.

3.1.5.1 Contact Information

A. Each *Laboratory Report* will contain the contact information of the issuing examiner.
B. Each MUS *Laboratory Report* will contain the contact information of the person and/or unit regarding the status of the reported submission.

3.1.5.2 Facility Statement

Each *Laboratory Report* will contain a statement which identifies the facility(ies) and/or site(s) where any work was performed. [ISO 17025 7.8.2.1.c] [A2LA R318 7.4 FI1.1.b]

3.1.5.3 Opinions/Interpretations, ULTRs, and ASSTRs Statements

A. When a *Laboratory Report* contains opinions and interpretations, there will be a statement indicating as such and they will be based on the results obtained from the tested item(s). [ISO 17025 7.8.3.1.d] [ISO 17025 7.8.7.2] [ANAB AR 3125 7.7.1.l.6]
B. A *Laboratory Report* that contains opinions and interpretations will reference any applicable ULTR document and/or ASSTR document.

3.1.6 Name Block

The name and unit of the issuing examiner(s) responsible for content in a *Laboratory Report* will immediately follow the Remarks section. [ISO 17020 7.3.2] [ISO 17025 7.8.2.1.o]

3.1.7 Enclosures

A. Enclosures may be attached to the *Laboratory Report.*
B. All enclosures will be accounted for on the first page of the *Laboratory Report*.

3.1.8 Laboratory Reports for Specific Circumstances

3.1.8.1 Multiple Case IDs

Typically, results of examination from different Case IDs will not be included in the same *Laboratory Report*. A *Laboratory Report* may combine information from different Case IDs when there are intercomparison(s) among multiple case IDs, or when the results of examination obtained in a Case ID link to results of examination previously reported in another Case ID. If either scenario applies then:

A. All Case IDs being addressed in a *Laboratory Report* will be referenced.
B. A *Laboratory Report* will clearly identify which request date(s), Case ID(s) and Laboratory number(s) are associated with the items addressed.
C. *Laboratory Reports* will be serialized to all applicable Case ID(s) in Sentinel.

3.1.8.2 Multiple Examiner Reports

A. A *Laboratory Report* can contain the work of multiple examiners as deemed appropriate by technical management.
B. The report will clearly indicate each examiner's results (e.g., each examiner's initials or name in parentheses at the end of each section, or where appropriate in tables and charts). This indication does not need to be electronically secure on the *Laboratory Report.*
C. Each examiner whose work is referenced in a *Laboratory Report* will serve as co-author or approver in Sentinel.

3.1.8.3 Addressing Legacy Requests

A. Legacy Customer Requests
    1. *Laboratory Reports* for legacy customer requests (initiated prior to the implementation of a LIMS) can be prepared outside of the system using the FBI Laboratory number generated prior to the implementation of a LIMS.
    2. These reports will meet all requirements for *Laboratory Reports* as described in this document.
B. Customer Requests Received Under Legacy and LIMS
    1. A *Laboratory Report* can be prepared in the applicable LIMS for reporting results for a case where legacy evidence is already in the FBI Laboratory or has been examined by a unit and new evidence is received and examined in the applicable LIMS.
    2. The examiner preparing the *Laboratory Report* will ensure that each listing of items received is preceded by an administrative sentence that identifies the appropriate FBI Laboratory number and the date of the request.

3.1.8.4 Results Obtained from External Providers

A. When a *Laboratory Report* contains results obtained from external providers, those results will be clearly identified. [ISO 17025 7.8.2.1.p]
B. A disclaimer will be added to the report when an outside expert's information can affect the validity of the results.
C. If the external results are not included in the *Laboratory Report*, the examiner will ensure that the customer receives a copy of the external report.

3.1.8.5 Follow Up Information/Reports

A. Follow up *Laboratory Reports* will be prepared if an amendment (i.e., change) or addition must be made to the content of a previously issued *Laboratory Report* or to provide additional information pertaining to a completed request for examination. Alternatively, this information may be provided in a *Laboratory Report* for an open case within the discipline and/or subdiscipline. [ISO 17020 7.4.5] [ISO 17025 7.8.8.1]
B. A follow up Laboratory Report will be uniquely identified and will reference the previous Laboratory Report(s) in an introductory sentence preceding the Results of Examinations section.
    1. A follow up Laboratory Report will indicate if it is amending a prior report or replacing the original report in its entirety. The report will include the reason for the change, and/or what additional information is being provided. The follow up report will include a listing and description of items in the previous report(s) that are affected by the follow up information [ISO 17020 7.4.5] [ISO 17025 7.8.8.1] [ISO 17025 7.8.8.2] [ISO 17025 7.8.8.3]
C. Follow up *Laboratory Reports* are subject to the same reporting requirements and applicable administrative and technical reviews as other *Laboratory Reports*. [ISO 17025 7.8.8.2]

3.2 Reviewing A Laboratory Report

A. FBI Laboratory personnel cannot perform a verification, blind verification, or technical or administrative review of their own work. [ANAB AR 3125 7.7.1.l.2] [A2LA R318 7.3 FI1.6.a]
B. Verification, technical and administrative reviews may be conducted by the same person and may occur concurrently.
C. Verification, blind verification, technical and administrative reviews will be recorded and maintained in the FBI Laboratory file.
D. To resolve any disagreement resulting from verification, blind verification, technical review and/or administrative review, refer to section 6. [ANAB AR 3125 7.7.1.g.1.c] [A2LA R318 7.3 FI1.6.a] [A2LA R318 7.3 FI1.6.d]

3.2.1 Verifications

A. Verifications will:
    1. Be performed on each identification or association comparison result.
    2. Be performed by a competency tested person who is authorized to conduct verifications, or an external service provider qualified to perform testing. [ANAB AR 3125 7.7.1.g.1.a]
    3. Occur prior to or concurrent with the technical review.
B. A Level 2 document will contain a definition of an identification or association and the procedures used to perform a verification.
C. Upon completion of a verification, the verifier will record the result of the verification in the FBI Laboratory file. Records will include the date of the verification and the verifier's signature or name and initials. [ANAB AR 3125 7.7.1.g.1.b]

3.2.2 Blind Verifications (BV)

A. Blind Verifications will:
    1. Be performed by an examiner who is qualified and authorized in the same discipline and/or subdiscipline.
    2. Be performed by an examiner who does not know the conclusion of the original examiner.
    3. Be performed by an examiner who was not consulted by the original examiner during the examination process.
B. The following disciplines/subdisciplines will have procedures for BVs in a Level 2 document:
    1. Hair
    2. Firearms
    3. Toolmarks
    4. Document Examination
    5. Friction Ridge
C. Level 2 documents will contain procedures for:
    1. Defining what examination types are subject to BV.
    2. Recording the BV and any resulting consultations.

3. Ensuring a range of conclusions are blind verified annually.

D. A Unit Chief will ensure a record of the BVs performed is maintained and will evaluate and record the number of BVs on an annual basis to ensure that a range of conclusions are conducted in the applicable examination types.

3.2.3 Technical and Administrative Reviews

A. *Laboratory Reports* will be administratively reviewed. When a *Laboratory Report* contains examination results; it will be technically reviewed prior to or concurrently with the administrative review. [ANAB AR 3125 7.7.1.l.3] [A2LA R318 7.3 FI1.6.a] [A2LA R318 7.3 FI1.6.b]
   1. A unit, discipline, and/or subdiscipline may perform and record an appropriate risk assessment to determine the frequency of technical and administrative reviews. Level 2 documents will describe the frequency (if other than 100%) as determined by the risk assessment. [ANAB AR 3125 7.7.1.l.3] [A2LA R318 7.3 FI1.6.b]

B. Additional requirements for conducting technical and administrative reviews may be included in Level 2 documents.

C. Technical and administrative reviews will be recorded in the applicable LIMS. [ANAB AR 3125 7.7.1.l.5] [A2LA R318 7.3 FI1.6.a] [A2LA R318 7.3 FI1.6.c]
   1. Records of technical and administrative reviews will include the date of the review and either the reviewer's signature or name and initials. [A2LA R318 7.3 FI1.6.c]

D. Classified *Laboratory Reports* must be approved in a system of record (e.g., Sentinel) by the technical and administrative reviewers.

3.2.3.1 Technical Review [ANAB AR 3125 7.7.1.l]

A. The technical review will be conducted by a person who is authorized to conduct technical reviews and has been competency tested to perform the testing work that is being reviewed (see Quality Assurance Manual (LAB-100) section 6.3.4). [ISO 17025 6.2.6] [ANAB AR 3125 6.2.3.2] [A2LA R318 7.3 FI1.6.b] [ANAB AR 3125 6.2.3.2] [ANAB AR 3125 7.7.1.l.1] [A2LA R318 7.3 FI1.6.b]
   NOTE: An individual conducting a technical review need not be an employee, currently proficiency tested, or currently performing the work.

B. A technical reviewer will have knowledge of the technical procedures used in that discipline and/or subdiscipline.

C. A technical review will be performed on *Laboratory Reports* and the technical records that contain examination results. This review will determine if: [ANAB AR 3125 7.7.1.l.5] [A2LA R318 7.3 FI1.6.b]
   1. The examinations and technical records conform with the appropriate technical procedures and applicable QA requirements. [ANAB AR 3125 7.7.1.l.6] [ANAB AR 3125 7.7.1.l.7]
   2. The appropriate examinations have been performed.

3. The examiner's conclusions are consistent with the supporting data, are within the limits of the discipline and/or subdiscipline and are supported by any applicable ULTR and/or ASSTR.
4. The *Laboratory Report* is accurate and there are sufficient technical records supporting the results and/or conclusions.
5. Verification(s) of identification(s) or association(s) has been completed and properly recorded.
6. The *Laboratory Report* contains all the required technical information.

3.2.3.2 Administrative Review

A. Unit Chiefs and Technical Leaders can conduct administrative reviews. A Level 2 document may define additional administrative reviewers and/or the requirements for an administrative reviewer.
B. An administrative review will include at a minimum: [A2LA R318 7.3 FI1.6.a]
    1. Spelling and grammatical accuracy of the *Laboratory Report.*
    2. Key information is present in the *Laboratory Report.*
    3. Proper PII, classification and dissemination controls have been applied.
    4. The *Laboratory Report* and FBI Laboratory file records conform to applicable QA requirements.
    5. A technical review has been completed, when applicable, and properly recorded.

3.3 Issuing A Laboratory Report

A. *Laboratory Reports* that contain results will be issued by examiners.
B. The person(s) issuing a *Laboratory Report* must either be the author(s) or approver in Sentinel.
C. *Laboratory Reports* will be serialized in Sentinel. [ISO 17025 7.8.1.2]
D. A *Laboratory Report* can be issued as a hard copy or through electronic means (e.g., Sentinel, LabApps (formerly EXPeRT), email). [ANAB AR 3125 7.8.1.2.1]

4 INTELLIGENCE, INFORMATION, AND/OR INVESTIGATIVE LEADS (I3) SERVICES AND PRODUCTS

4.1 i3 Services

A. i3 services provide a customer with investigative lead, intelligence, and/or other information in response to a request. Personnel will follow these requirements and the applicable Level 2 requirements when providing i3 services and/or issuing i3 products. i3 services may include the issuance of an i3 product.
B. Units, disciplines, and/or subdisciplines providing i3 services will have a Level 2 document(s) that will address the following:
    1. Description of criteria for when a submission may be handled as an i3 service and/or an i3 product will be issued.
    2. Description of mechanism(s)/process(es) for tracking i3 requests, items, services, and products.

3. When verification, blind verification, technical, and/or administrative reviews will be conducted for i3 services and/or issuance of an i3 product.
4. Any additional discipline/subdiscipline training for performing i3 services beyond training already received in the discipline and/or subdiscipline/.
5. Any additional discipline/subdiscipline competency determination including competency testing for performing i3 services beyond competency determination already conducted in the discipline and/or subdiscipline.
6. Any additional discipline/subdiscipline performance monitoring for performing i3 services beyond performance monitoring already conducted in the discipline and/or subdiscipline.
7. Description of option(s) for format and/or type of i3 products and criteria for each option.

C. If a submission is a multi-unit submission, the same item identifiers will be used throughout the i3 service.
D. When practicable, validated procedures will be used to conduct i3 services.
E. Technical records to support an i3 service including i3 products will be such so that another reviewer possessing the relevant knowledge, skills, and abilities could evaluate what was done and interpret the data.
F. If an outside expert is needed for an i3 service, refer to the Quality Assurance Manual (LAB-100)section 1.9
G. Technical records and other associated records for i3 services including i3 products will be serialized in Sentinel unless classification or other conditions prohibit retention in Sentinel (see section 7.5). If relevant records are not serialized in Sentinel, the applicable Unit Chief will prescribe retention of the records in accordance with FBI policy.
H. For canceled i3 requests, a record of the cancellation instructions and the name of the person who canceled the request will be retained.

4.2 i3 Products

A. An i3 product can be issued as a hard copy or electronically (e.g., email, Sentinel, LabApps formerly EXPeRT). Each i3 product will include:
    1. A statement conveying that the intent is for investigative lead, intelligence, and/or informational purposes only.
    2. Unique identifier (i.e., laboratory number or similar).
    3. Issuance date.
    4. Title or subject line.
    5. Laboratory name.
    6. Basic contact information (i.e., minimum contact information is a unit telephone number and/or unit email address).
    7. PII statement from section 3.D.
    8. i3 information being disseminated.
B. If an outside expert provides results, section 3.1.8.4 will be followed.
C. Generation of an i3 product does not preclude the generation of a *Laboratory Report*.

D. A follow-up i3 product will reference the original i3 product or *Laboratory Report*.
E. For expedited results on i3 services and/or products, section 5 will be followed.
F. Unit Chiefs will determine if and/or how customer satisfaction needs to be assessed for i3 services and/or i3 products and the appropriate frequency. This determination will be recorded. Records of feedback will be maintained by the unit if the Customer Satisfaction Assessment is not used.

4.2.1 Elements Not Required for an i3 Product

In addition to the elements listed in section 3, the following elements are not required in an i3 product but will be retained with i3 records:

A. Location of testing, unless impactful to the performance of the test.
B. Name/contact information of the customer.
C. Methods used and additions to or exclusions from methods.
D. Statement that results relate to items examined.
E. Identity of person authorizing i3 product.
F. Identification of external providers.

5 EXPEDITED RESULTS

A. Prior to a *Laboratory Report* or i3 product being issued to a customer, an examiner may disseminate expedited results or partial results of an examination(s). [ISO 17025 7.8.1.3] [ANAB AR 3125 7.8.1.3.1]
B. Verifications and/or blind verifications will occur prior to providing the expedited results and will be recorded.
C. Expedited results may be provided prior to technical and administrative review of a *Laboratory Report* or i3 product.
D. Expedited results will be followed by a *Laboratory Report* or i3 product.
E. The customer will be made aware what pertinent items were examined and that results are still subject to review and change prior to issuance of a *Laboratory Report* or i3 product.
    1. This communication will be recorded in the appropriate communication log.
    2. Expedited results may be verbal or written and may not contain all information required in a *Laboratory Report*.
F. Technical records will support any expedited results provided.

6 DISAGREEMENT

A. This process applies to disagreements involving casework and/or DNA databasing results.
B. A disagreement occurs when personnel come to competing or mutually exclusive results/opinions (or as defined in Level 2 documents for a given discipline and/or subdiscipline).
C. Disagreements may occur within a unit, between units, or with an external organization.

6.1 Disagreements Within the FBI Laboratory

A. Disagreements involving reportable results/opinions may occur as a result of examination, DNA databasing, verification, blind verification, administrative or technical review.
B. The personnel involved in the disagreement will discuss the matter, refer to any applicable references, and attempt to resolve the matter. If all parties reach agreement on an outcome, it will be recorded in the FBI Laboratory file. The FBI Laboratory file will include the original results/opinions, amended result(s)/opinion(s), the date of amendment, and the identity of the personnel responsible for the amendment. [ISO 17025 7.5.1, 7.5.2] [A2LA R318 7.3 FI1.6d]
C. If the affected personnel cannot reach a resolution, a Scientific Review Board will be formed.
D. The Technical Leader will serve as the chair of the Scientific Review Board (unless involved in the disagreement).
    1. If the Technical Leader is a party in the disagreement, the Chief of the affected Unit will serve as chair of the Scientific Review Board.
    2. If both the Unit Chief and Technical Leader are parties in the disagreement, the Chief of the affected Section will serve as chair of the Scientific Review Board.
E. The affected parties will not discuss the matter with anyone other than the personnel described in this document.

6.1.1 Scientific Review Board

A. The Chair will select a minimum of three discipline and/or subdiscipline subject matter experts to serve on the Scientific Review Board.
    1. The subject matter experts will not have previous knowledge of the relevant case, examination, or DNA databasing details involved in the disagreement.
    2. Subject matter experts from external organizations may be used on the Scientific Review Board.
B. The Scientific Review Board members will:
    1. Independently review the information that is the cause of the disagreement;
    2. Record their examination as required by Level 2 documents;
    3. Meet to discuss their examinations and develop a recommendation(s); and
    4. Present their recommendation(s), or those factors impacting why the board did not reach a consensus recommendation(s), to the Chair.
C. The Chair will use the recommendation(s) from the Scientific Review Board to determine the outcome of the disagreement.
D. The Chair's decision will be recorded in the FBI Laboratory file and clearly communicated to all personnel involved.
E. The record will include the nature of the disagreement, the date, and the identity of personnel responsible for each laboratory activity, information and/or resources used to resolve the disagreement, the documentation generated by the Scientific

Review Board, the outcome, and if applicable, the reason the disagreement remains unresolved. [ISO 17025 7.5.1] [AR 3125 7.7.1.g.1.c] [AR 3125 7.7.1.l.8]

F. The *Laboratory Report* or i3 product will reference the use of a Scientific Review Board.
    1. If the final result/opinion is supported by the primary examiner, the primary examiner will issue the reported result.
    2. If the final result/opinion is not supported by the primary examiner but is supported by the secondary examiner, the secondary examiner will issue the reported result.
    3. If the final result/opinion is not supported by either the primary or secondary examiners, then the Technical Leader will issue the reported result.

6.2 Disagreements Between the FBI Laboratory and an External Organization

A. FBI Laboratory personnel will notify their immediate supervisor, the Technical Leader, and their Unit Chief when they are aware of a disagreement of a scientific or technical nature between the FBI Laboratory and an external organization.
B. The individual involved in the disagreement will provide the applicable records and an explanation of the nature and extent of the disagreement to their immediate supervisor, the Technical Leader, and their Unit Chief.
C. The Unit Chief will notify their Section Chief and the Quality Manager of the disagreement in writing.
D. The Technical Leader and Unit Chief will review the records regarding the disagreement and attempt to resolve the disagreement with the external organization. The individuals (internal and external) involved in the disagreement may assist with the resolution process.
    1. If a resolution is reached to the agreement of all individuals (internal and external), it will be recorded in an EC. The Unit Chief will ensure the EC is serialized in Sentinel recording the resolution with approval by the Technical Leader, Unit Chief, and Section Chief.
    2. If a resolution cannot be achieved (e.g., disagreement with external organization remains, external organization will not engage in resolving the disagreement, and/or the Technical Leader recommends no further action be taken), the Unit Chief will notify their Section Chief, and the Quality Manager in writing. The notification will include the reason(s) a resolution has not been achieved along with any recommendations for moving forward.
        i. The Section Chief will inform the Laboratory Director. The Laboratory Director will determine the FBI Laboratory's stance on the unresolved external disagreement and communicate it to the Section Chief and Unit Chief.
        ii. The Unit Chief will ensure all aspects of the external disagreement are recorded in an EC to include 1) reasons the disagreement remains unresolved, 2) any recommendations for further action, and 3) the Laboratory Director's decision regarding the unresolved external disagreement (i.e., FBI Laboratory's stance). The Unit Chief will ensure

the EC is serialized in Sentinel with approval by Technical Leader, Unit Chief, Quality Manager, Section Chief, and Laboratory Director. [AR 3125 7.7.1.g.1.c] [AR 3125 7.7.1.l.8]

E. The Laboratory Director will communicate, in writing, to the external organization their decision regarding an unresolved external disagreement.
F. If the disagreement involved a reportable result/opinion: [AR 3125 7.7.1.g.1.c] [AR 3125 7.7.1.l.8]
    1. The applicable FBI Laboratory file will include the EC generated by the disagreement resolution process.
    2. The FBI Laboratory file will include the original results/opinions, amended result(s)/opinion(s), the date of amendment, and the identity of the personnel responsible for the amendment. [ISO 17025 7.5.1] [ISO 17025 7.5.2]
    3. The report will reference that a disagreement occurred, and a process was used to reach a resolution.

7 FBI LABORATORY FILE

7.1 FBI Laboratory File Records

The records listed in Table 2 will be retained physically in the appropriate file room and/or electronically in a system of record (e.g., Sentinel) when generated. Level 2 documents may identify additional records that will be retained. [ISO 17020 7.3.1] [A2LA R318 7.3 FI1.1]

Table 2: FBI Laboratory File Records

Record	Submission Manager	Casework Personnel	Examples*
Record of Technical Review (if needed)		X	Forensic Advantage (FA) Case Record Report
Record of Administrative Review		X	FA Case Record Report
Record of Items Received	X	X	FA Case Report
Request for Examination	X		FD 1121, External Request, ECs
Evidence Receipt Acknowledgement	X		Acknowledgement email
Examination Plan	X		
Records of Verification (if needed)		X	See Level 2 documents
Record of Condition of Evidence Received	X		Check-in Notes (See Level 2 documents)
Results		X	*Laboratory Report*
Communications	X	X	Communication Log, Emails
Chain-of-Custody	X	X	
Technical Deviation	X	X	Major/Minor Deviation

Record	Submission Manager	Casework Personnel	Examples*
Technical Nonconformity Records	X	X	Correction/acknowledgement description, CAP form
Database Records (if needed)		X	See Level 2 documents
Case Notes		X	Case specific technical records, See Level 2 documents
Equipment Records		X	See Level 2 documents
Additional Requests Records (as needed)	X	X	Follow-up emails with additional requests, crime scene photo logs, external agency reports
Secondary Evidence Log		X	See Level 2 documents
Shipping Invoice	X		
Laboratory Worksheet	X	X	OPR and prohibited cases only

* Examples are listed for clarity.

7.2 Physical Records

Physical records for a submission will be placed in a *Supporting Documentation Envelope(s)* (7-251) (1A) or 1C(s) as needed. A summary of the enclosures will be noted. All *Supporting Documentation Envelope(s)* will be delivered to the appropriate file room. [ISO 17020 8.4.1]

7.3 Electronic Records

A. Electronic records for a submission will be retained in a system of record (e.g., 1A in Sentinel), or if the file size is too large, retained on electronic media that is placed in the physical 1A. All file names should begin with the laboratory number. [ISO 17020 8.4.1]
B. Digital 1As will include a protected identities and juveniles warning statement.

7.4 Sentinel

A. Digital and physical 1As will be serialized in Sentinel separately, or as separate 1A(s)/ 1C(s) unless the records contained within are identical. If the contents of the physical and digital 1As are the same, they can be serialized in Sentinel under a single 1A/1C using the 'both' option. See Sentinel Guide (LAB-408) for more information.
B. A person(s) from the appropriate unit will cover any leads in Sentinel.

7.4.1 Follow Up Reports

When serializing a follow up report, a new 1A/1C will be generated for the follow up records and/or the serial number from the original report will be referenced.

7.5 Classification and Dissemination Controls

A. When a *Classification Control Worksheet* (CCW) is utilized, it will be available to all laboratory personnel associated with the case and will be retained in the 1A.
B. Personnel will ensure that all records are properly marked and retained in an appropriate system of record. Classified communications will be recorded or referenced in the appropriate communication log and retained in a system of record. See Sentinel Guide (LAB-408) for more information. [ISO 17020 8.4.1]
C. Top Secret and Sensitive Compartmentalized Information (SCI) will be filed in the Information Management Division, Secret File Room, or Sensitive Compartmentalized Information Facility (SCIF) as appropriate. For specific questions concerning classification of records, contact the FBI Laboratory Chief Security Officer.

7.6 OPRs/Prohibited Cases

Records supporting an OPR related matter, or a prohibited case will be placed in a *Supporting Documentation Envelope(s)* and handled as requested by the customer.

8 Discovery and Testimony Related Activity

Discovery and testimony related activity details are found in the LAB-100.

9 Revision History

Revision	Issued	Changes
03	05/28/2024	Replaced EXPeRT with LabApps throughout. 2.3 Added information on new acknowledgement process related to simplified reporting agreement and new LAB-413. 2.10 Changed to Technical Records from FBI Laboratory/1A Records and added that non-case specific records may be retained independent of FBI Laboratory file. Updated requirements for what must be recorded related to testing and identity of person responsible for the laboratory activity and if the preparer of the technical record is not the issuing examiner. 3.C Added information on agreement with the customer for simplified reporting including single partner. Table 2 Updated for clarity.
04	05/05/2025	1.A. Clarified evidence integrity measures. 1.2.1.A Added 'secured in primary packaging' 1.3.D.1 Provided option for person requesting modification to ensure eLAB help desk ticket added (requester may not be the one to add it). 1.5.E. Clarified that a witness must be present, and name recorded when transferring to or from storage for drug and valuable.

		1.5.G.1. and 1.5.I.1.i. Removed ‘non-trace’ and added ‘i.e., not considered trace amount of drug’. 1.5.H.1. Clarified ‘trace amount of drug’ can be handled as general evidence. Table 1 Removed footwear and tires from SUS table. 2.3.A.1.iv Added work agreement work agreement and the agreement for simplified reporting. 2.4.1.B Updated for consistency with current FBI Laboratory case acceptance policy. 2.7.E. Added guidance to protect from loss, smaller items may be packaged separately to ensure they are distinguishable from larger items and to subdivide as needed. 2.7.H. Clarified about not proactively reviewing TEDAC cases submitted prior to their merger into quality system in 2017 and removed reference to TEDAC ‘Legacy’. 2.10.A. Clarified all Laboratory Reports containing results will be retained as technical records. 3.1.5.E. Moved (from 3.1.5.3.B) and clarified that Laboratory Reports will contain language about time required for discovery requests to be processed. 3.1.5.3.A Changed ‘if’ to ‘when’ for reports that contain opinions/interpretations. 3.1.5.3.B. Added applicable ASSTR document needing to be referenced when a report contains opinions/interpretations. 3.1.8.1 Reformatted for clarity. 3.1.8.5.B.1. Clarified wording for amending prior report or replacing original report. 3.2.1.C. Clarified verifier will record the result of the verification. 3.2.2.B. Removed Impression (Footwear/Tires) from BV list. 3.2.3.1.A. Clarified technical reviewer competency tested in testing work being reviewed. 4.1.A. Clarified that i3 services may include issuance of an i3 product. 4.1.B. Clarified requirements of what must be covered in level 2 procedures for i3. 4.1.E. and G. Clarified technical records for i3 services including i3 products will be such that another reviewer can evaluate what was done/interpret data. 4.2.A. Edited section for clarity. 6.2 Updated disagreement process to provide clarity when the disagreement is with an external organization including Laboratory Director will communicate with the external organization in writing when it remains unresolved.