

Validity Testing Information Part I

Laboratory Name: Scientific Testing Laboratories
Address: 463 Southwick Blvd Richmond VA 23234
Responsible Person: Lisa Torga (Printed Name)

cc
scndix

I certify that the answers and information provided are true and correct as of this date. Any false, fictitious, or fraudulent answers or information provided may violate Federal Law and could subject me to prosecution, monetary penalties, or both (Sec 18 U.S.C. 1001; 31 U.S.C. 3801-812).

Lisa D. Tarnai
Signature, Responsible Person

October 4, 2000
Date

Lisa D. Tarnai
Printed Name, Responsible Person

STL

SCIENTIFIC
TESTING
LABORATORIES, INC.

PROFESSIONAL DRUG AND ALCOHOL ABUSE TESTING FACILITIES

HHS/SAMHSA CERTIFIED (Formerly NIDA)

463 SOUTHLAKE BOULEVARD • RICHMOND VA 23236 • 804.378.9130 • Facsimile: 804.379.5919

October 4, 2000

Validity Testing Information Part 1 Appendix

I certify that the information provided is true and correct as of this date. Any false, fictitious, or fraudulent answers or information provided may violate Federal Law and could subject me to prosecution, monetary penalties, or both (Sec 18 U.S.C.1001: 31 U.S.C. 3801-812)

Lise D. Tarnag
Signature, Responsible Person

October 4, 2000
Date

Lise D. Tarnag
Printed Name, Responsible Person

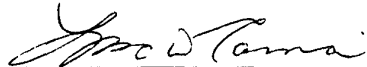
Validity Testing Information Part II

Conduct an audit of all DOT regulated specimens from the date your laboratory started validity testing. Summarize your findings in an Excel spread sheet in both hard copy and electronic format. Provide the following information in a separate column of the spreadsheet/audit for *each* DOT regulated specimen that was reported either adulterated or substituted:

- Specimen ID number
- Laboratory Accession Number
- Date of receipt
- Date reported
- Reported result (i.e., adulterated or substituted)
- Quantitative test result (e.g., actual creatinine concentration and specific gravity reading; actual pH reading; adulterant identity and its concentration if applicable)

Note: Retain a copy of this information to ensure that you would be able to retrieve additional data.

I certify that the answers and information provided are true and correct as of this date. Any false, fictitious, or fraudulent answers or information provided may violate Federal Law and could subject me to prosecution, monetary penalties, or both (Sec 18 U.S.C. 1001; 31 U.S.C. 3801-812).



Signature, Responsible Person

October 13, 2000

Date

Lisa D. Tarna

Printed Name, Responsible Person

STL

SCIENTIFIC
TESTING
LABORATORIES, INC.

PROFESSIONAL DRUG AND ALCOHOL ABUSE TESTING FACILITIES

HHS/SAMHSA CERTIFIED (Formerly NIDA)

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October 13, 2000

Mr. Kenneth H. Davis, Jr.
NLCP/RTI Program Director
3040 Cornwallis Road
Research Triangle Park NC 27709

Dear Mr. Davis,

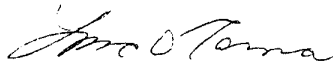
This table shows the results of the audit of the regulated specimens which were reported as substituted or adulterated by our laboratory since September 28, 1998.

REQ_NUM	REC	REP	CRT	SPG	PH	NIT	RESULT
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I certify that the answers and information provided are true and correct as of this date. Any false, fictitious, or fraudulent answers or information provided may violate Federal Law and could subject me to prosecution, monetary penalties, or both (Sec 18 U.S. C. 1001; 31 U.S.C. 3801-812).

Enclosed with this letter is a disc with both this letter and the excel spreadsheet by itself. Please do not hesitate to contact me if additional information is required.

Sincerely,



Lisa D. Tarnai, M.S.
Responsible Person
Laboratory 0760

SCIENTIFIC TESTING LABORATORIES
VALIDITY TEST AUDIT
October 13, 2000

REQ NUM	REC	REP	CRT	SPG	PH	NIT	RESULT
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RESEARCH TRIANGLE INSTITUTE

National Laboratory Certification Program

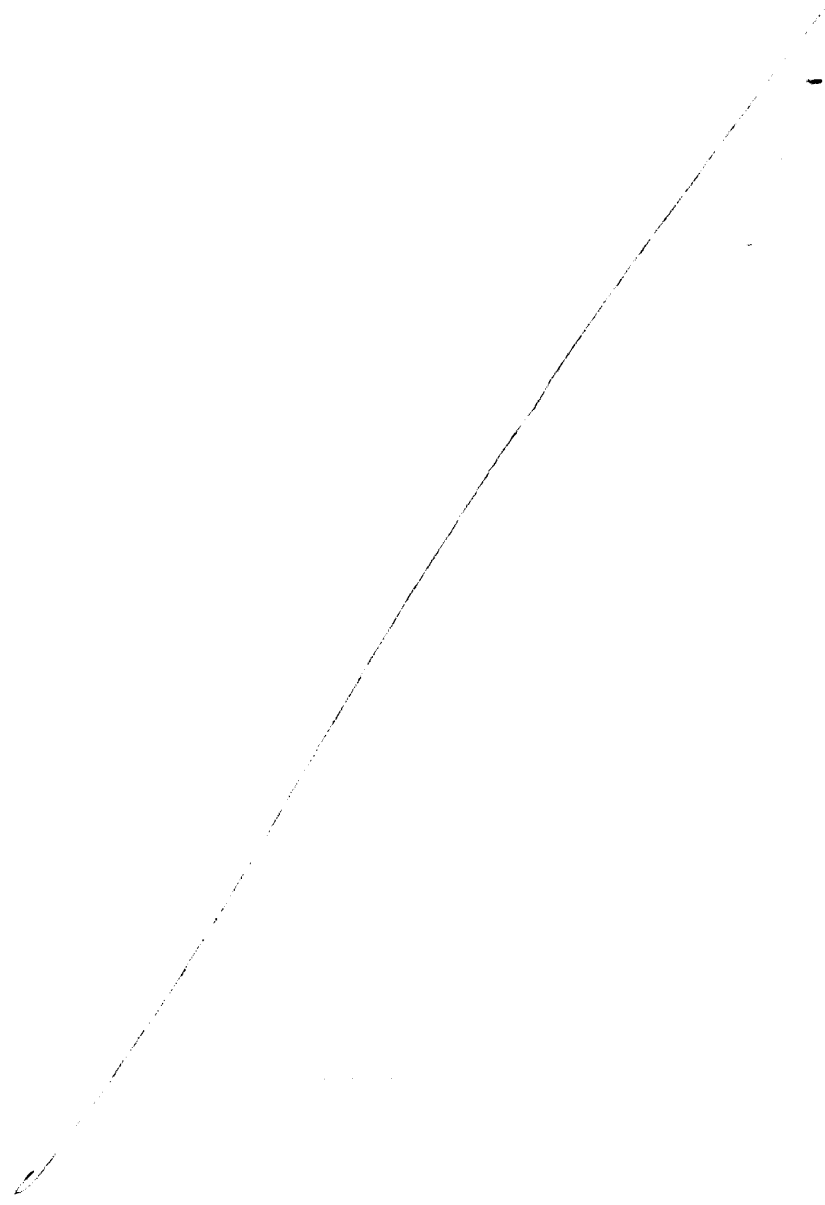
February 5, 2001

0760
Ms. Lisa Tarnai
Scientific Testing Laboratories, Inc.
463 Southlake Blvd.
Richmond, VA 23236

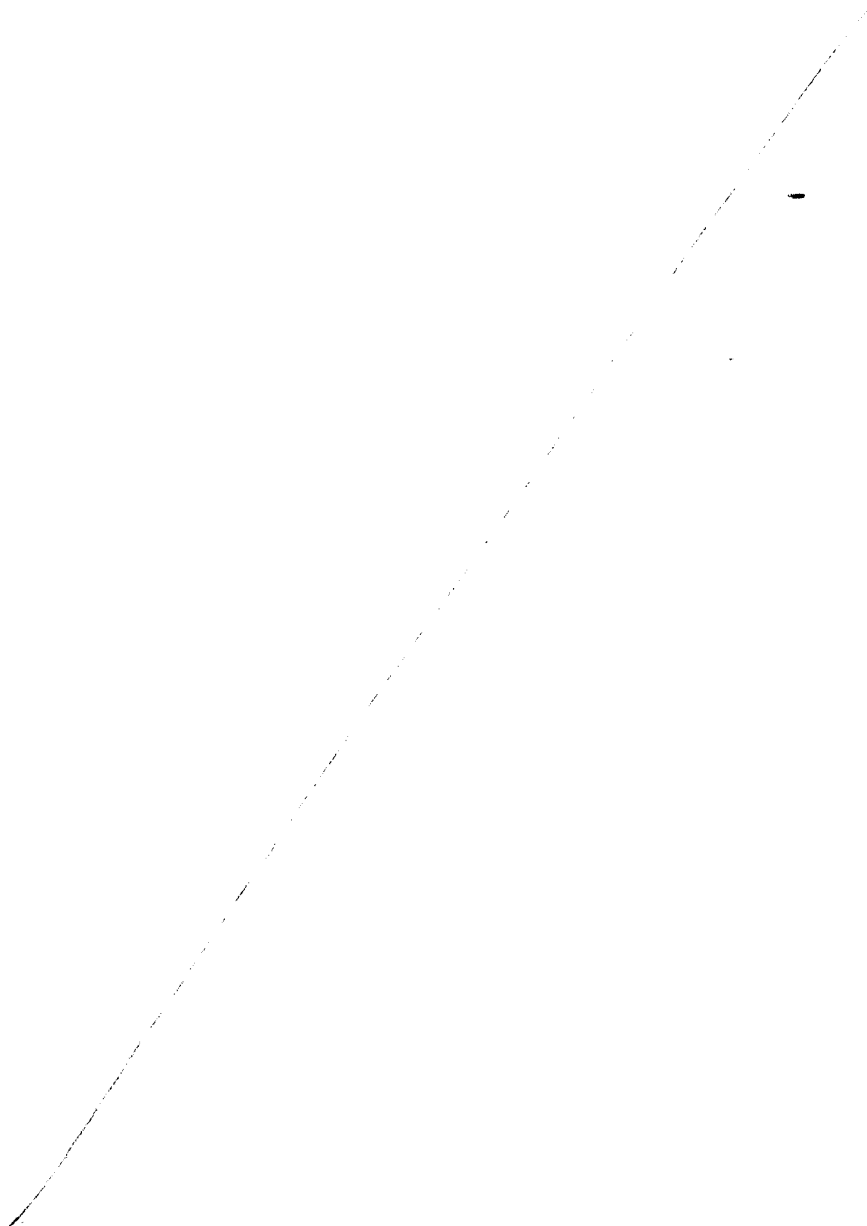
Dear Ms. Tarnai:

The enclosed critique was developed from the inspection reports of the inspectors who conducted the twelfth maintenance inspection of your laboratory under the National Laboratory Certification Program (NLCP). Based upon our review of these reports, the laboratory's performance in this inspection appeared to meet most of the minimum technical criteria. However, the laboratory must take steps to correct the following issues raised:





Ms. Tarnai
Page 3 of 5
02/05/01



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The laboratory must submit, within 30 calendar days of receipt of this letter, documentation to demonstrate that corrective actions have been implemented to address the issues raised. In responding to these issues, please organize the material in your document in accordance with the sections and item numbers as listed in this correspondence. Once these issues have been successfully addressed, RTI will recommend to the Department of Health and Human Services (HHS) that the laboratory's certification be continued. The laboratory must also review the enclosed critique and take all necessary corrective actions. All corrective actions must be implemented within 30 days receipt of this correspondence and will be reviewed at the next inspection. ***Failure to comply may result in the laboratory's suspension to perform specimen validity testing on federally regulated specimens or referral to the Department of Transportation for Public Interest Exclusion action.***

Ms. Tarnai
Page 5 of 5
02/05/01

If you have any questions or if we can be of further assistance, please call me at (919) 541-6176 or Dr. Michael Baylor at (919) 541-7043.

Sincerely,

A handwritten signature in cursive script, appearing to read "Susan Crumpton", followed by a horizontal line extending to the right.

Susan Crumpton
NLCP Technical Analyst

Enclosure

cc: Project Files/M12

INQUIRY TO MRO

Lab Number _____

Name of person contacted at MRO office: _____

Phone Number: (____) _____

Specimen ID Number: _____

MRO Disposition:

- Substituted, **substitution admitted by donor during interview**
- Substituted, **substitution denied by donor during interview**
- Substituted, **substitution not admitted or denied during interview**
- Substituted, **donor not contacted**
- Substituted, **no comments regarding donor contact**
- Refusal to test**
- Interpreted as negative by MRO**
- Records not available from MRO**
- Cancelled, **medical explanation**
- Cancelled, **other (briefly explain)** _____
- Other (briefly explain)** _____

NATIONAL LABORATORY CERTIFICATION PROGRAM

Document Review and Critique

Laboratory I.D. Number: 0760
Document No. Final

Laboratory: Scientific Testing Laboratories, Inc.

Location: Richmond, VA

Document Reviewed: Application Form
 Inspection Report #M12 Date: 14 December 2000
 Other _____

Status: Appeared to meet most of the minimum technical criteria
 Appeared to meet a number of the minimum technical criteria
 Failed to meet a number of the minimum technical criteria
 Failed to meet a significant number of the minimum technical criteria

A review of the National Laboratory Certification Program (NLCP) inspection reports has been completed. The laboratory has appeared to meet most of the minimum technical criteria required for the inspection phase of the Program.

Deficiencies identified as a result of the inspection are detailed on the following pages. The laboratory is required to correct the deficiencies before its next inspection.

The following deficiencies were identified, and appear in the same order as the corresponding questions in the Laboratory Inspection Report:

Section E. Standard Operating Procedures - Procedures Manual

Section F. Chain-of-Custody, Accessioning, and Security

Section G. Quality Control and Quality Assurance

Section H. Initial Tests

Section I. Specimen Validity Tests

Section J. Confirmatory Tests

Section K. Records Audit

Section L. Certification and Reporting

Section M. Laboratory Information Management System (LIMS)

Section N. Personnel

STL

SCIENTIFIC
TESTING
LABORATORIES, INC.

received
SDC 2/8/01

PROFESSIONAL DRUG AND ALCOHOL ABUSE TESTING FACILITIES

HHS/SAMHSA CERTIFIED (Formerly NIDA)

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February 7, 2001

Dr. Michael Baylor
RTI/NLCP
3040 Cornwallis Road
P.O. Box 12194
Research Triangle Park, NC 27709

Dear Dr. Baylor,

Enclosed, please find the following documents:

If you have any questions or require any additional information, please do not hesitate to contact me.

Sincerely,



Lisa D. Tarnai, M.S.
Responsible Person
Laboratory 0760

RESEARCH TRIANGLE INSTITUTE



National Laboratory Certification Program

February 9, 2001

0760
Ms. Lisa Tarnai
Scientific Testing Laboratories, Inc.
463 Southlake Blvd.
Richmond, VA 23236

Dear Ms. Tarnai:

We have reviewed the material provided in your correspondence of February 7, 2001, documenting the laboratory's remedial actions in response to an issue raised during its twelfth maintenance inspection of December 14-15, 2000.



Ms. Ternai
Page 2 of 2
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If you have any questions or if we can be of further assistance, please call me at (919) 541-6176 or Dr. Michael R. Baylor at (919) 541-7043.

Sincerely,



Susan Crumpton
NLCP Technical Analyst

cc: Project Files/m12