



# **Asbestos Analysts Registry Policy Document**

**Revised: March 11, 2009**

**Effective: April 1, 2009**

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## **ARTICLE I AAR PROGRAM OVERVIEW**

### **1.1 PURPOSE**

The primary purpose of the AIHA Registry Programs, LLC's Asbestos Analysts Registry (AAR) is to establish and maintain the highest possible standards of performance for field analysts who perform fiber counting of air samples on the job site. The AAR program ensures continued high levels of professional performance by the organization and its affiliated analysts through the following:

- 1.1.1** Requiring the organization and its affiliated analysts to submit applications that demonstrate that the organization and its affiliated analyst(s) meet the requirements set forth in this policy document;
- 1.1.2** Conducting a registry program that will encourage fiber-counting analysts to perform procedures with adequate controls using acceptable equipment and methods;
- 1.1.3** Maintaining surveillance of analysts' performance in the Asbestos Analytical Testing (AAT) program; and
- 1.1.4** Auditing of the AAR organization and affiliated analysts on a triennial basis to ensure continued compliance with the standards of the AAR program.

### **1.2 MANNER OF ACTING**

The Registry Programs Board (RPB) shall conduct the technical business of the AIHA Registry Programs, LLC according to the following directives:

- 1.2.1** A two-thirds majority of the RPB members eligible to vote shall be required on a formal, written letter ballot vote, electronic vote, or meeting vote, at which a quorum is present or included, for matters regarding an organization and/or its affiliated analyst's approval, removal or denial.
- 1.2.2** A simple majority of the RPB members eligible to vote shall be required on a formal, written letter ballot vote, electronic vote, or meeting vote, at which a quorum is present or included, for matters other than those specified in Section 1.2.1.
- 1.2.3** An RPB member shall support any of his/her votes to deny approval or for the removal from the registry listing by citing the specific AAR policy that is the basis of the negative vote.
- 1.2.4** RPB members shall comply with the Registry Programs Board Conflict of Interest Policy.

### **1.3 AUTHORITY**

The RPB operates the AAR program under the authority granted by the RPB Executive Committee and the AIHA Affiliate Laboratory Programs management. The role and responsibilities of the RPB are set forth in Registry Programs Board Roles and Responsibilities document.

## **ARTICLE II QUALITY SYSTEM REQUIREMENTS**

### **2.1 Scope**

To achieve and maintain listing under the AAR program, the organization and its affiliated analyst(s) shall meet all quality system requirements as detailed in this Article. The organization's quality system shall reflect the actual operations and quality assurance/quality control (QA/QC) program in place for the organization. The organization shall meet the requirements of the OSHA 29 CFR 1910.1001 Appendix A, the current version of the NIOSH 7400 method and the other AIHA Registry Programs, LLC-specific requirements as detailed in this policy document.

### **2.2 Analyst Training and Organization Affiliation**

Analysts shall be trained in both the method of analysis and the quality control procedures of the organization. The training program shall be written and shall include demonstration of proficiency. The training program shall be ongoing to develop and maintain the analyst's abilities to carry out the methods and procedures used by the organization. Records shall be kept to document the qualifications and training of all personnel.

#### **2.2.1 Analyst / Organization Affiliation**

An analyst who is registered with an organization shall be affiliated with this organization as follows:

**2.2.1.1** The analyst shall perform analysis under the approved quality system of the organization. This includes all practices outlined in the organization's quality manual, in particular, but not limited to:

- a) assignment of unique sample identification
- b) Chain of Custody procedures
- c) sample handling
- d) equipment calibration and maintenance
- e) quality control procedures
- f) field preparation and analysis procedures
- f) internal record system
- g) reporting

**2.2.1.2** The analyst's QC data shall be reviewed to determine when corrective action is necessary.

#### **2.2.2 Technical Training (NIOSH 582 or equivalent)**

The analyst shall submit documentation as evidence that he/she has successfully completed a thirty (30) contact hour (minimum) course in the analysis of airborne fibers. The NIOSH 582 course is considered the basis by which any internal or external equivalent training course is judged. The analyst shall also document the dates of his/her probationary period (period between completion of the NIOSH 582, or equivalent course, and unsupervised analyses).

##### **2.2.2.1 AIHA Registry Programs, LLC Listed NIOSH 582 Equivalent Courses**

Certain courses have been reviewed by the AIHA Registry Programs, LLC as NIOSH 582 equivalent based upon course information and instructor qualifications submitted to the AIHA Registry Programs, LLC by the course provider. A certificate of completion from an AIHA Registry Programs, LLC listed course is acceptable to the AIHA Registry Programs, LLC as evidence of NIOSH 582 equivalent training.

##### **2.2.2.2 Non-AIHA Registry Programs, LLC Listed NIOSH 582 Equivalent Courses**

Applicants submitting a certificate of completion for a NIOSH 582 equivalent training course not on the AIHA Registry Programs, LLC listing of reviewed courses will be required to submit a description of the course as evidence of equivalent training. The description shall include dates of training, course outline, contact hours, and record of

final examination/test.

### **2.2.2.3 Maintenance of AIHA Registry Programs, LLC Listed NIOSH 582 Equivalent Course Listing**

Once every three years, providers of listed courses shall provide updated information, as requested by the AIHA Registry Programs, LLC, to demonstrate that the course is current and still meets the requirements for NIOSH 582 equivalency. Failure to respond to the request for update information will result in the removal of the course from the web listing of reviewed courses and placement of the course on an internal list of historical providers.

### **2.2.3 Quality System Training**

The organization shall document the analyst's training in the organization's QA/QC program. Analysts shall be trained in-house as outlined in the most current edition of the AIHA *Laboratory Quality Assurance Manual for Industrial Hygiene Chemistry*, Chapter 11.

### **2.2.4 Probationary Period**

All analysts affiliated with an organization that are to be registered shall have a probationary period defined. This is a time, determined by the organization, during which the analyst performs analysis under supervision, or where their results are checked by the QA manager for proficiency and accuracy and the analyst is trained in the organization's quality system. Typically, this time would include repeated analysis of reference slides and recounts of field samples previously analyzed by other analysts with review of this data for bias and accuracy. The AIHA Registry Programs, LLC recommends a probationary period be at least 2 weeks.

## **2.3 Quality Assurance/Quality Control (QA/QC) Program**

All organizations seeking approval and subsequent registration of its affiliated analysts shall have in place a thoroughly documented quality system. The organization's quality system shall reflect the actual Quality Assurance/Quality Control (QA/QC) program in place and be in accordance with the most current edition of the AIHA *Laboratory Quality Assurance Manual*. The QA/QC program shall address the requirements of the approved method used and the special requirements of analysis in the field. Program elements shall include the following:

### **2.3.1 Quality Manual**

The organization's quality system shall be documented in a quality manual (however named) or in the organization's Standard Operating Procedures (SOP) and shall be consistent with the QA/QC requirements of the approved method, the OSHA 29 CFR 1910.1001 Appendix A, and the AIHA Registry Programs, LLC specific requirements detailed in this policy document. A quality manual shall employ process controls to ensure adequate confidence that the end analysis performed will fulfill the requirements. Quality assurance programs shall have the operational techniques and activities used to fulfill requirements for quality analysis in the organization. The quality manual shall reflect the QA/QC requirements of the approved methods used. The quality manual shall be updated whenever necessary, and reviewed and approved at least annually. The quality manual shall be accessible to all analytical personnel. The quality manual or SOP shall minimally include or address the following.

- a) Table of Contents
- b) Quality Assurance Objectives
- c) Manual Acceptance, Maintenance and Revision
- d) Personnel Qualifications and Training
- e) Sample Receiving, Handling and Processing
- f) Equipment and Microscope Maintenance
- g) Internal Quality Control Procedures
- h) Round Robin Participation
- i) Corrective Action
- j) Record Keeping
- k) Sample Retention and Disposal

- l) Internal Systems Audit
- m) Analytical Methods and Field Analysis Considerations
- n) Final Reporting
- o) References to Other Quality System Documentation
- p) Header or Footer With Page Numbers and Effective Date

### **2.3.2 Quality Assurance Objectives**

Sufficient standards of practice shall be included in the QA program to prevent error, sample contamination and analysts' exposure to asbestos. The analysts shall adhere to all stated QA/QC requirements in the methods used. The analysts shall determine, where feasible, the precision and bias of all analyses performed.

#### **2.3.2.1 Accuracy and Bias**

Accuracy and bias studies are performed to determine how close a measurement comes to an actual or theoretical value by way of using statistical techniques as recommended by the most current NIOSH 7400 method.

#### **2.3.2.2 Precision**

Precision is evaluated by the reproducibility of analyses. Precision is commonly expressed as standard deviation or relative percent difference and can be evaluated through the analysis of replicate samples.

#### **2.3.2.3 Acceptance Limits**

Acceptance limits shall be established based on statistical evaluation of the data generated by the analysis of quality control check samples. Calculation procedures for statistically derived acceptance limits shall be documented.

#### **2.3.2.4 Control Charts**

Control charts or quality control databases shall be used to record quality control data and compare quality control data with acceptance limits.

### **2.3.3 Manual Acceptance, Maintenance and Revision**

**2.3.3.1** The policy and process for quality manual acceptance, maintenance and revision shall be included in the quality manual.

**2.3.3.2** The quality manual shall be reviewed annually at a minimum.

**2.3.3.3** The process for quality manual acceptance, maintenance and revision shall be documented.

### **2.3.4 Personnel Qualifications and Training**

See section 2.2 for more information.

**2.3.4.1** The analyst training program, including the probationary training and training in the quality system, will be included in the quality manual. The training shall be documented.

**2.3.4.2** Personnel qualifications, including the analysts' NIOSH 582 or equivalent course certificate, will be kept on record.

### **2.3.5 Sample Receiving, Handling and Processing**

**2.3.5.1** The organization shall have a written procedure for sample receiving, sample log-in, assignment of unique sample number, Chain of Custody or Internal Record System, and sample handling.

**2.3.5.2** Records shall be maintained that include the following information about sample receiving, sample log-in, assignment of unique sample number, Chain of Custody or Internal Record System and sample handling:

**2.3.5.2.1** A sample numbering and tracking system;

**2.3.5.2.2** An internal record system for each sample that includes sample receipt date, analysis performed, methods and results (*AIHA Laboratory Quality Assurance Manual*, Chapter 5); and

**2.3.5.2.3** A customer report to include organization and customer identification, report date, sample identification, analytical method reference and analytical results (*AIHA Laboratory Quality Assurance Manual*, Chapter 10).

### **2.3.6 Equipment and Microscope Maintenance**

Equipment shall be appropriate for the analysis being performed.

**2.3.6.1** The minimum equipment available to the analysts shall include:

- a) Positive phase contrast microscope
- b) Walton-Beckett graticule
- c) Phase shift test slide (HSE/NPL)
- d) Equipment for preparing slides
- e) Stage Micrometer with 0.01 mm divisions

#### **2.3.6.2 Microscope Maintenance Log**

An equipment log shall be maintained for each microscope and any other instrumentation, including records of in-house preventive maintenance service.

#### **2.3.6.3 Microscope Alignment and Calibration**

Microscope setup and calibration procedures for in-the-field analysis, including the determination of the graticule area, shall be included in the quality manual. Analysts shall document the use of these procedures.

#### **2.3.6.4 Microscope Image Quality Check**

Microscope setup and calibration procedures for in-the-field analysis shall be documented, including the use of the HSE/NPL phase shift test slide.

### **2.3.7 Internal Quality Control**

Quality assurance for procedures for each field analyst, including daily reference slide count charts and ten percent (10%) blind recounts with statistical calculation and evaluation, shall be documented in the quality manual or SOP. Procedures shall follow the most current edition of the *AIHA Laboratory Quality Assurance Manual*, Chapter 11.

#### **2.3.7.1 Reference Slide Analysis**

A library of permanently mounted reference slides shall be maintained for use by each analyst. Prior to the analysis of samples each day, the analyst shall count a randomly selected reference slide from the reference slide library. The result shall fall within the documented control limits established for that slide before fiber count analysis may be conducted on field samples.

**2.3.7.1.1** The policy on reference slide selection and analysis and the procedure for the generation of upper control limits (UCL) and lower control limits (LCL) for each sample or Coefficient of Variation (CV) shall be included in the quality manual.

**2.3.7.1.2** The library of reference slides shall contain reference slides which are

loaded, minimally, to the three ranges outlined in the current version of the NIOSH 7400 method (5-20 fibers in 100 graticule fields, 20-50 fibers in 100 graticule fields, and >50 fibers in 100 graticule fields).

**2.3.7.1.3** Records shall be maintained that demonstrate the analysis of a randomly selected reference slide from the reference slide library every day that samples are analyzed by each registered analyst. The same reference slide shall not be analyzed on consecutive days. Reference slide records shall demonstrate that analysts have read from each of the fiber loading ranges over time.

**2.3.7.1.4** Control charts or other statistical evaluation shall be documented on the repeat analysis of the reference slides to determine the UCL and LCL or CV for the slide or fiber loading range. A minimum of twenty (20) data points shall be used to determine the UCL, LCL or CV.

### **2.3.7.2 Recount Analysis**

Same-counter recounts (blind, when possible) shall be performed on at least 10% of the samples analyzed. Statistical determination of the acceptability of the recount shall be performed in accordance with the current version of the NIOSH 7400 method and the *AIHA Laboratory Quality Assurance Manual*, Chapter 11.

**2.3.7.2.1** The policy on recount analysis and procedure for the statistical determination of the acceptability of the recount shall be included in the quality manual or SOP. The special considerations for “blind” analysis by a single analyst, in the field, shall be included.

**2.3.7.2.2** Records shall be maintained that document the recount analysis of 10% of all samples analyzed by each registered analyst

### **2.3.7.3 Blank Analysis**

Records demonstrating the routine introduction of control samples and blanks shall be maintained. Blank samples shall be analyzed by the same procedure as that used for field samples, in accordance with approved methodology. Blanks shall be supplied by the customer, as representative of the same lot or batch as the field samples.

**2.3.7.3.1** The policy on blank analysis shall be included in the quality manual or SOP.

**2.3.7.3.2** The analysis of blanks shall be documented by the analyst.

### **2.3.8 Round-Robin Participation**

Organizations shall participate, at least semiannually, in a round-robin airborne fiber counting program with at least two other separate organizations in accordance with the most current edition of the *AIHA Laboratory Quality Assurance Manual*, Chapter 11, and the OSHA 29 CFR 1910.1001 Appendix A.

Participation in the AIHA Proficiency Analytical Testing, LLC program for asbestos in air or Asbestos Analysts Testing (AAT) proficiency program does not count toward meeting this requirement.

**2.3.8.1** Procedures in the quality manual or SOP shall demonstrate how the field analysts participate in the round-robin program.

**2.3.8.2** The results of the round-robin shall be evaluated statistically. If there is a discrepancy concerning a sample or samples, a recount shall be conducted to rectify the problem. Corrective action shall be taken whenever round-robin results are outside

acceptance limits.

**2.3.8.3** Results from the two latest rounds of round-robin participation with evidence of statistical evaluation of the results shall be submitted with the organization application.

**2.3.8.4** Round-robin samples shall be analyzed by the same procedure as that used for field samples, in accordance with approved methodology.

### **2.3.9 Corrective Action**

Organizations or analysts shall take corrective action whenever quality control data, AAT performance results, or round robin results are outside acceptance limits. No data shall be reported until the cause of the problem is determined and corrected or until the organization demonstrates the cause was a random event and no longer affects data. Organizations shall document and keep records of all out-of-control events, the determined cause(s) and corrective actions taken. Organizations shall have a written procedure for handling each customer's quality-related complaints and maintaining records of corrective actions.

### **2.3.10 Record Keeping**

The document and record retention policies of the organization shall be stated.

**2.3.10.1** The policies shall include the manner and duration of record retention. All analysts' records shall be maintained for at least three (3) years after termination of employment.

**2.3.10.2** Computer records are satisfactory without hard copy files, provided copies can be produced as needed and data edits are documented within the computer files. Computer file backup procedures are required.

### **2.3.11 Sample Retention and Disposal**

The sample storage, retention and disposal policies of the organization shall be stated.

**2.3.11.1** The policies shall include the manner and duration of sample retention and disposal.

**2.3.11.2** Analysts are expected to follow all federal, state and local regulations regarding environmental contamination and waste disposal.

### **2.3.12 Internal Systems Audit**

Each organization shall conduct and document an annual systems audit. The purpose of the audit is to verify that all actions adhere to the approved quality system and its QA requirements. Deficiencies shall be addressed through corrective action.

### **2.3.13 Analytical Methods and Field Considerations**

Analysts shall follow the method detailed in OSHA 29 CFR 1910.1001 Appendix A and the most current revision of the NIOSH 7400 analytical method of fiber analysis.

**2.3.13.1** Name and issue date of the current analytical method used shall be documented or referenced in the quality manual or SOP.

#### **2.3.13.2 On-Site Housekeeping**

Housekeeping procedures in the field shall be adequate to prevent contamination of samples and to minimize fire safety hazards and shall be documented.

#### **2.3.13.3 On-Site Filter Mounting**

Procedures for mounting filters in the field shall be documented.

#### **2.3.13.4 On-Site Environmental Requirements**

Environmental requirements for onsite setup shall be documented.

#### **2.3.14 Final Reporting**

The final report shall convey all of the information needed to evaluate the analytical results.

**2.3.14.1** The customer report shall include organization and customer identification, report date, sample identification, analytical method reference and analytical results.

**2.3.14.2** Each report shall give the recipient some indication of data reliability, including a limit of detection (LOD).

#### **2.3.15 Safety and Health**

Analysts are expected to follow all applicable federal, state and local regulations regarding safety and health.

## **ARTICLE III REQUIREMENTS AND CONDITIONS FOR AAT PARTICIPATION**

The AAT program is the proficiency testing program for analysts in the AAR program. Performance limits for these test samples are determined by the AIHA Registry Programs, LLC. Analysts participating in the AAR are required to analyze AAT program samples on a quarterly basis. It is not possible for analysts to enroll in the AAT program unless they are first enrolled in the AAR program.

### **3.1 INITIAL ENROLLMENT AND FEES**

Analyst and organization (if not approved) applications, with required attachments, shall be completed and received by the AIHA Registry Programs, LLC prior to enrollment of an individual analyst in the AAT Program. In addition to the application(s), full payment of AAT Program fees, as specified on the most recent AIHA Registry Programs Fee Schedule, shall be received by the AIHA Registry Programs, LLC. The AAT Program schedule and the AIHA Registry Programs Fee Schedule are available on the AIHA Registry Programs, LLC website.

### **3.2 SAMPLE DISTRIBUTION**

Once an organization is enrolled in the AAR program, it shall receive the AAT samples for the next scheduled round. Samples are mailed four (4) times a year (the first of March, June, September, and December). The organization is responsible for notifying the AIHA Registry Programs, LLC of any changes in the organization status that may affect the receipt of AAT samples/information, such as a change of address or named recipient.

### **3.3 SAMPLE RECEIPT**

Upon receipt of the AAT samples, it is the responsibility of the organization to inspect the shipment for any damage and to ensure that the correct samples were received. If samples are damaged, then the organization shall notify the AIHA Registry Programs, LLC within **five (5) business days of receipt** to ensure timely replacement of samples. Organizations requesting special shipping for replacement samples shall assume the cost of express carrier handling.

If the AAT samples are not received by the organization in accordance with the predefined schedule, then it shall be the responsibility of the organization to contact the AIHA Registry Programs, LLC within **five (5) business days of the scheduled sample receipt date** to notify them of failure to receive the AAT samples (AAT samples are scheduled to arrive at the organization by March 10, June 10, September 10 and December 10 of each year unless stated otherwise on the *Deadline and Instructions for Asbestos Analysts Testing (AAT) Participants* document).

The AIHA Registry Programs, LLC is not responsible for replacing damaged samples or samples not received by the organization after five (5) business days past the expected receipt date, as posted on the *Deadline and Instructions for Asbestos Analysts Testing (AAT) Participants* document.

### **3.4 SAMPLE ANALYSIS**

Proficiency testing samples, such as the AAT samples, shall be analyzed using the same analytical procedures used to test customer samples. Results or analysis of AAT samples shall not be discussed with other organizations or laboratories until the results have been published by the AIHA Registry Programs, LLC.

### **3.5 SUBMISSION OF DATA**

The organization shall be responsible for the timely and proper submission of all AAT sample results to the AIHA Registry Programs, LLC. The organization shall submit data using the PAT Data Entry Portal on the website. The data shall be entered into the system by the specified deadline. The posted deadline is by 11:59:59 PM eastern time (ET) of the date stated. Data will not be accepted after the scheduled close of an AAT round. The organization shall contact the AIHA Registry Programs, LLC immediately if any issues arise while entering data.

### **3.6 OUTLIERS**

A result that is outside the statistical control limits determined for an AAT round is classified as an outlier. Any non-participation or non-reporting of AAT data shall be classified as an outlier unless non-participation (see Section 3.9) has been pre-approved by the AIHA Registry Programs, LLC. If an organization can document that the results were submitted on time, despite AIHA not having a record of their submittal in the system, then a copy of the AAT Submission Confirmation page or a written request shall be submitted for review. The AIHA Registry Programs, LLC shall review the request and decide whether or not to approve the late entry of the results for this reason.

Incorrect reporting of AAT results via the Internet will result in up to four (4) outliers as this is considered the same as reporting an inaccurate result. Incorrect reporting may include, but is not limited to: invalid sample ID number(s); invalid fiber counts; invalid or incorrect analyst ID number; invalid or incorrect organization number; or incorrect AAT sample round or batch number.

### **3.7 PROFICIENCY**

Analysts are rated for proficiency in the AAT program dependent on the number of outliers received. An analyst is rated acceptable (proficient) if there are not more than two (2) cumulative outliers reported in the two most current rounds in which the analyst was enrolled and not granted an excused absence (see section 3.9). An analyst shall maintain proficiency if there are not more than two (2) cumulative outliers reported in the two most current rounds. In all cases where proficiency criteria are not met, an analyst shall be rated unacceptable (non-proficient).

### **3.8 RETESTING**

Analysts who have more than two (2) outliers reported in two (2) consecutive rounds may request additional samples for retesting. A fee, determined by the AIHA Registry Programs, LLC, will be charged for this service. Analysts submitting retest results will be evaluated on the most recent sample set regardless of previous performance.

### **3.9 NON-PARTICIPATION**

#### **3.9.1 Analyst Non-Participation**

Non-participation in any AAT round, without prior written approval, will result in four (4) outliers. Enrolled analysts, who fail to participate in two (2) consecutive rounds, unless exempted, will be administratively removed from the AAR Program. Analysts who wish to be exempted from participation in an upcoming round shall do so by writing the AIHA Registry Programs, LLC prior to the close of the round. A letter of exemption confirmation will be sent to the analyst stating that the analyst's results will be recorded as an "E" for the round. However, the analyst will not lose board approval status (if approved) or the reported outliers will not hold him/her back from becoming board approved, provided the AIHA Registry Programs, LLC has reviewed and approved the organization's and the analyst's applications and proficiency has been established. The AIHA Registry Programs, LLC letter of exemption confirmation is to be kept with the analyst's records. Exemption is valid for only one AAT round and cannot be granted for two consecutive rounds. An analyst shall request a suspension of their listing if they will consecutively miss more than one AAT round.

#### **3.9.2 Organization Non-Participation**

An organization that has no enrolled analysts shall be suspended from the AAR program and removed from the AIHA Registry Programs, LLC web list of approved organizations. Suspension shall commence immediately upon the drop of the last registered analyst. The organization will be contacted with the date that the suspension will expire and the organization will be administratively removed if an analyst is not enrolled. An active analyst shall be enrolled before the organization's status can be restored.

#### **3.9.3 Suspension of Analysts / Organizations**

If an organization or analyst will be unable to participate in two or more consecutive AAT rounds,

they shall request suspension to remain enrolled in the AAR program. Without prior written consent from the RPB Executive Committee, suspensions will be granted for no greater than 2 consecutive AAT rounds. If the organization or analyst is unable to participate by the end of the requested suspension, administrative removal will occur and reapplication will be required to enroll in the AAR again. Analysts, who miss two or more consecutive AAT rounds, will have to regain proficiency status in the AAT program before their board approval status is reinstated.

### **3.10 AAT PERFORMANCE RESULTS REPORT**

The AIHA Registry Programs, LLC shall post the AAT Performance Results reports to the PAT Data Portal for each participating organization within ten (10) business days after the close of the round. It is the responsibility of the organization to contact the AIHA Registry Programs, LLC if any errors are found on their report.

### **3.11 PRACTICE ROUNDS**

An organization may purchase AIHA Proficiency Analytical Testing Programs, LLC PT samples or AAT samples from previous rounds for practice, if available. These data shall not be used to document proficiency in any AIHA affiliate laboratory program. Practice rounds may also be used to document laboratory quality control, with respect to new analyst training and method validation procedures. Rounds are sold on a first-come first-served basis.

### **3.12 ADDITIONAL REQUIREMENTS AND CONDITIONS FOR AAT PARTICIPATION FOR AN EXPEDITED ANALYST APPLICATION**

Analysts seeking an expedited AAR application process and AAT proficiency demonstration are subject to all requirements outlined in this article regarding their AAT participation with the following exceptions for the first AAT round and retest round with their affiliated organization.

#### **3.12.1 Initial Enrollment and Fees**

The retest round will be automatically billed with the other applicable application fees. Additional fees will be charged for expedited analyst applications. Refunds will not be given for the additional fees associated with the expedited application, if the analyst does not gain proficiency in the expedited rounds.

#### **3.12.2 Proficiency**

Expedited analysts will participate in the regular round and the retest round of the first round/retest round of AAT participation with their affiliated organization. Their proficiency status will be determined by the results from these two rounds. If the analyst does not gain proficiency in the two expedited rounds (regular and retest), their expedited status will be revoked and they shall gain proficiency through the process outlined in section 3.7.

#### **3.12.3 Retesting**

The retest round will be shipped to the organization without the requirement of a retest order form. The retest round will be used as the second round to determine proficiency. The results from the retest round will not override the results of the original round, but count as the second round needed to gain proficiency. There will be no option to retest for the regular round or the retest round through the procedure outlined in section 3.8.

## **ARTICLE IV ASBESTOS ANALYSTS REGISTRY (AAR) LISTING**

### **4.1 INITIAL ORGANIZATION LISTING**

For an organization to qualify for initial listing on the AAR it shall successfully complete the listing process and requirements as summarized in the following steps. A flow chart outlining this process can be found in Appendix B.

**4.1.1** Full payment of AAR/AAT Program fees, as specified on the most recent AIHA Registry Programs fee schedule, shall be received by the AIHA Registry Programs, LLC.

**4.1.2** The organization application shall be completed and submitted to the AIHA Registry Programs, LLC. The AIHA Registry Programs, LLC staff reviewer shall review the application for completeness within ten (10) business days.

**4.1.3** The organization will be granted twenty (20) business days to respond to any deficiencies found during the completeness review.

**4.1.4** Steps 4.1.2 and 4.1.3 will be repeated a maximum of two iterations. If the application is not complete at this time, the application process will be halted and the organization will have to wait six (6) months before reapplying for listing.

**4.1.5** The complete organization application will be placed in queue for the next available member of the RPB to perform a technical review.

**4.1.6** The completed application shall undergo a technical review within twenty (20) business days of receipt by a qualified RPB member.

**4.1.7** The organization will be granted twenty (20) business days to respond to any deficiencies found during the technical review.

**4.1.8** Steps 4.1.6 and 4.1.7 will be repeated a maximum of two iterations. If the application is not complete at this time, the application process will be halted and the organization will have to wait six (6) months before reapplying for listing.

**4.1.9** Before any of the organization's analysts may qualify for listing on the AAR, the organization shall successfully complete the approval process.

**4.1.10** Ten (10) percent of applications will be subject to a quality audit by an RPB member before approval notification (this audit will be performed by a different RPB member than referenced in 4.1.5 and 4.1.6), as outlined in section 4.4. The RPB member shall complete its quality audit review within ten (10) business days.

**4.1.11** The approved organization will be added to the AIHA Registry Programs, LLC web list of AAR Approved Organizations within ten (10) business days of approval.

### **4.2 INITIAL ANALYST LISTING**

For an analyst to qualify for initial listing on the AAR he/she shall successfully complete the listing process and requirements as summarized in the following steps. A flow chart outlining this process can be found in Appendix C.

**4.2.1** Full payment of AAR/AAT Program fees, as specified on the most recent the AIHA Registry Programs fee schedule, shall be received by the AIHA Registry Programs, LLC before the analyst will be listed. Initial analyst applications are subject to an annual fee, an enrollment fee and

sample fees, if required.

**4.2.2** The analyst applying for initial listing shall be affiliated with an approved organization and shall comply with this organization's quality system as defined in Article II.

**4.2.3** The analyst shall complete Forms 8, 9, and 10 from the AAR application and submit them to the AIHA Registry Programs, LLC with the associated quality control documentation outlined on Form 9. The AIHA Registry Programs, LLC staff reviewer shall review the application for completeness within ten (10) business days.

**4.2.4** The analyst will be granted twenty (20) business days to respond to any deficiencies found during the completeness review.

**4.2.5** Steps 4.2.3 and 4.2.4 will be repeated a maximum of two iterations. If the application is not complete at this time, the application process will be halted and the organization will have to wait six (6) months before reapplying for listing.

**4.2.6** The complete analyst application will be placed in queue for the next available AIHA Registry Programs, LLC Staff Reviewer to perform a technical review.

**4.2.7** The completed application shall be reviewed by the AIHA Registry Programs, LLC Staff Reviewer within twenty (20) business days of receipt.

**4.2.8** The analyst will be granted twenty (20) business days to respond to any deficiencies found during the technical review.

**4.2.9** Steps 4.2.7 and 4.2.8 will be repeated a maximum of two iterations. If the application is not complete at this time, the application process will be halted and the organization will have to wait six (6) months before reapplying for listing.

**4.2.10** AIHA Registry Programs, LLC Staff Review must approve the application before the analyst can be placed on ballot for approval by the RPB.

**4.2.11** The analyst shall successfully participate in the AAT Program (see Article III) by participating in the two (2) most current and consecutive rounds with no more than two (2) outliers, thereby, meeting established proficiency standards for the AAT Program.

**4.2.12** Ten (10) percent of applications will be subject to a quality audit by a RPB member before approval notification, as outlined in section 4.4. The RPB member shall complete its quality audit review within ten (10) business days.

**4.2.13** After the analyst application has been approved and proficiency has been achieved, as defined in Article III, Section 3.7, the analyst's listing shall be approved by the RPB by ballot.

**4.2.14** An analyst approved by the RPB will be listed on the registry web list of board-approved analysts within ten (10) business days of the close of the ballot on which the analyst was approved.

### **4.3 ANALYST TRANSFER (OR REINSTATEMENT) LISTING**

An analyst who has previously been a participant in the AAR program is a transfer analyst. He/she shall successfully complete the listing process and requirements as summarized in the following steps to reinstate their listing. A flow chart outlining this process can be found in Appendix D.

**4.3.1** Full payment of AAR/AAT Program fees, as specified on the most recent AIHA Registry Programs fee schedule, shall be received by the AIHA Registry Programs, LLC before the analyst will be listed. Transfer analyst applications are subject to an annual fee, a transfer fee and

sample fees, if required.

**4.3.2** An analyst applying for a transfer or reinstatement of their listing shall be affiliated with an approved organization and shall comply with this organization's quality system as defined in Article II.

**4.3.3** The analyst shall complete Forms 8, 9, and 10 from the AAR application and submit them to the AIHA Registry Programs, LLC with the associated quality control documentation outlined on Form 9. The submission shall demonstrate their quality control work with the new organization. The AIHA Registry Programs, LLC staff reviewer shall review the application for completeness within ten (10) business days.

**4.3.4** The analyst will be granted twenty (20) business days to respond to any deficiencies found during the completeness review.

**4.3.5** Steps 4.3.3 and 4.3.4 will be repeated a maximum of two iterations. If the application is not complete at this time, the application process will be halted and the organization will have to wait six (6) months before reapplying for listing.

**4.3.6** The complete analyst application will be placed in queue for the next available AIHA Registry Programs, LLC Staff Reviewer to perform a technical review.

**4.3.7** The completed application shall be reviewed within twenty (20) business days of receipt.

**4.3.8** The analyst will be granted twenty (20) business days to respond to any deficiencies found during the technical review.

**4.3.9** Steps 4.3.7 and 4.3.8 will be repeated a maximum of two iterations. If the application is not complete at this time, the application process will be halted and the organization will have to wait six (6) months before reapplying for listing.

**4.3.10** AIHA Registry Programs, LLC Staff Reviewer must approve the application before the analyst can have his/her board approval status reinstated or before the analyst can be placed on ballot for approval by the RPB (if the analyst never gained board approval).

**4.3.11** Ten (10) percent of applications will be subject to a quality audit by a RPB member before approval notification, as outlined in section 4.4. The RPB member shall complete its quality audit review within ten (10) business days.

**4.3.12** If the analyst is transferring to an approved organization, without missing a round of AAT participation, and has maintained proficiency, then the analyst will be added to their new organization's listing on the AIHA Registry Programs, LLC web list of board-approved analysts at the next web list update and their board approval status will be unaffected. If the analyst is transferring to an organization applying for initial registration, they cannot be listed until the organization's application has been approved.

**4.3.13** If the analyst is transferring or seeking reinstatement in the AAR, but is not currently board-approved, then the analyst shall need to demonstrate proficiency in the AAT program. The analyst may have lost board approval by missing an AAT round or may have never acquired board approval status. Proficiency in the AAT program is gained through participation in the two (2) most current and consecutive rounds with no more than two (2) outliers, thereby, meeting established proficiency standards for the AAT program (Article III). After proficiency has been achieved, as defined in Article III, Section 3.7, the analyst will be listed as a board-approved analyst on the AIHA Registry Programs, LLC website. Listing will be delayed until after organization approval, if the analyst has transferred to an organization applying for initial registration that has yet to be approved.

#### **4.4 LISTING PROCESS**

Flow charts outlining the approval and listing processes for an organization and its affiliated analysts are included as Appendix B, C, D, and E. Specific requirements to supplement these flow charts are listed below:

**4.4.1** The listing process shall be completed within twelve (12) months from the date of receipt by the AIHA Registry Programs, LLC of any AAR application. An organization or analyst that fails to complete all of these requirements for listing or maintenance of listing within this specified time period of application approval will have its application administratively removed from consideration by the AIHA Registry Programs, LLC. The organization and/or its analysts will also be administratively removed from the AAR program. Once notified of the removal of its application, the organization or analyst shall wait six (6) months before reapplying for listing. If the initial application is removed from consideration by the AIHA Registry Programs, LLC, then the organization and affiliated analyst(s) shall have a right to appeal this decision to deny listing (refer to Articles V and VI).

**4.4.2** An organization or analyst may request, in writing, an extension of time to complete all listing requirements from the AIHA Registry Programs, LLC. Extensions are granted in twenty (20) business day increments up to forty (40) business days. The application process will be halted and the organization or its analysts will be administratively removed from the AAR program, if the application is not completed by the end of the extension period.

**4.4.3** Organization and analyst applications (with required number of copies) shall be submitted separately to the AIHA Registry Programs, LLC. Applications may be obtained from the AIHA Registry Programs, LLC website or by contacting the AIHA Registry Programs, LLC staff. For initial organizations, the AIHA Registry Programs, LLC will process the organization application before the analyst application can be reviewed (see Appendix B). If the organization application has been approved, the affiliated analyst application(s) shall be processed (see Appendix C or D).

**4.4.4** Any return of materials to the submitting organization and/or analyst shall be documented and copies of the returned materials maintained in the AIHA Registry Programs, LLC records.

**4.4.5** If the process is halted for reasons identified in this Article, then the organization and/or analyst will be required to submit another application and pay application fees again. There shall be no refund of application fees. The organization and/or analyst will forfeit all application fees if the process is halted. The organization and/or analysts will have to wait six (6) months to reapply.

**4.4.6** For an organization and/or analyst application (initial organization, triennial organization, initial analyst, or transfer analyst), the AIHA Registry Programs, LLC shall have ten (10) business days to complete the initial review of the application. The scope of this review shall minimally include an application completeness check.

**4.4.7** For an organization application technical review, a qualified member of the RPB shall have twenty (20) business days, from the time of receipt of application from the AIHA Registry Programs, LLC, to complete their review of the organization application and provide a formal request for additional information (if necessary) to the AIHA Registry Programs, LLC for further action.

**4.4.8** For an analyst application technical review, the AIHA Registry Programs Staff Reviewer shall have twenty (20) business days, from the time of receipt of application from the AIHA Registry Programs, LLC, to complete their review of the analyst application and provide a formal request for additional information (if necessary) to the organization and/or analyst for further action.

**4.4.9** A qualified member of the RPB shall approve or disapprove an organization application. The AIHA Registry Programs, LLC Staff Reviewer shall approve or disapprove an analyst application.

**4.4.10** Selection of an AAR application for a quality audit review by a RPB member shall be determined at the beginning of the process and shall be based upon pre-defined selection criteria. RPB quality audit reviews shall be performed on a 10% frequency for all AAR application reviews unless otherwise directed by the RPB pursuant to written policy. For organization applications, the quality audit will be performed by a different TAP member than the one who performed the technical review.

**4.4.11** The scope of the RPB quality audit review shall cover the review process from receipt of the application to the final recommendation by RPB or the AIHA Registry Programs, LLC Staff Reviewer and shall include a determination of conformance to policy, timelines and technical requirements.

**4.4.12** The RPB member shall complete the quality audit review within ten (10) business days.

**4.4.13** The RPB ballot for board approval, to list analysts who have met the necessary AAR program requirements on the AAR, shall include analyst name and AAR identification number; affiliated approved organization name and AAR identification number; the total number of outliers for the two consecutive AAT rounds which established proficiency; and the approval status of the analyst's application .

**4.4.14** The RPB ballot for the board approval of analysts will open within five (5) business days of the distribution of the AAT Performance Results Report for a round, so long as there are analysts who meet the necessary AAR program requirements.

**4.4.15** The RPB vote shall be in accordance with the provisions of Article I, Section 1.2.1.

**4.4.16** The RPB ballot for the board approval of analysts will close within five (5) business days.

**4.4.17** The RPB decision may be appealed to the RPB Executive Committee (see Article VI).

**4.4.18** The AIHA Registry Programs, LLC web list of AAR Approved Organizations and Board-Approved Analysts will be updated within ten (10) business days of the close of the RPB ballot.

#### **4.5 LISTING PROCESS: ADDITIONAL CONSIDERATIONS FOR AN EXPEDITED ANALYST APPLICATION**

An initial or a transfer analyst seeking registration with an approved organization can request an expedited listing to the registry. This expedited listing is subject to all requirements outlined in this article regarding the application approval process with the following exceptions.

**4.5.1** Analysts registering with an initial organization or an organization that has not yet been approved cannot seek expedited listing.

**4.5.2** The analyst application shall be submitted by the enrollment date of their expected first round of AAT participation.

**4.5.3** The expedited application process will only give **ten (10) business days** to respond to any deficiencies found in the completeness review or the technical review.

**4.5.4** Extensions granted for any request for additional information from the completeness review or the technical review will be granted only once and will only give ten (10) additional business days.

**4.5.5** The analyst application approval process shall be completed by the close of the retest round of the analyst's first round of AAT participation.

**4.5.6** The analyst will go on RPB ballot at the close of the retest round of the first round of AAT participation, so long as the analyst's application has been approved and the analyst has gained proficiency as outlined in Article III.

**4.5.7** The analyst shall lose their expedited status and shall complete the listing process as any analyst would, if any of the following occur. The fees associated with the expedited listing process will not be refunded.

**4.5.7.1** The analyst application is not complete by the close of the retest round of the first round of AAT participation by the analyst.

**4.5.7.2** The analyst application is not approved by the close of the retest round of the first round of AAT participation by the analyst.

**4.5.7.3** The analyst has not gained proficiency in the AAT program during their first AAT round and retest round with their affiliated organization.

#### **4.6 MAINTENANCE OF LISTING**

Failure to comply with these requirements will result in suspension and possible removal from the program. Suspension will result in the temporary removal of the organization and/or its affiliated analysts' names, as appropriate, from the board-approved listing. Analysts who have been temporarily removed from the AIHA Registry Programs, LLC web list of board-approved analysts due to AAT non-proficiency, may regain listing by completing the two (2) most current, consecutive rounds with no more than two (2) outliers.

##### **4.6.1 Analysts**

An analyst's listing shall be maintained by continued compliance with AAR requirements, proficiency in the AAT program, and payment of appropriate AAR fees. Current quality control documentation for each registered analyst will be included in the organization's triennial application. To transfer to another organization, an analyst shall submit an analyst application that provides updated information for their new affiliation as required by the AIHA Registry Programs, LLC. To maintain their board approval status, an analyst shall transfer to another approved organization, without missing an AAT round or otherwise losing their proficiency status..

##### **4.6.2 Reporting of Significant Changes Within an Organization**

The organization shall notify the AIHA Registry Programs, LLC in writing of changes in ownership, personnel, quality system, or other matters directly impacting the organization's quality and ability to meet the policy requirements within twenty (20) business days of the change.

##### **4.6.3 Triennial Renewal**

Once every three (3) years, the organization will receive a request from the AIHA Registry Programs, LLC to submit an application that provides updated and current organization and analyst information. This application shall be completed and returned to the AIHA Registry Programs, LLC within forty (40) business days. The updated application shall be reviewed following the applicable steps of the organization listing process (section 4.4), as shown in Appendix B, to ensure that training, quality control, record keeping, methods, and equipment are current. An organization's failure to provide a completed application to the AIHA Registry Programs, LLC within the required time frame shall result in suspension and possible removal of the organization and/or its affiliated analysts' names, as appropriate, from the AIHA Registry Programs, LLC web list of AAR Approved Organizations or Board-Approved Analysts.

#### **4.7 MAINTENANCE OF ASSOCIATED FEES**

If the organization fails to pay the AIHA Registry Programs, LLC -associated fees assessed by the AIHA Registry Programs, LLC that are specified in the most recent AIHA Registry Programs Fee Schedule, the AIHA Registry Programs, LLC will temporarily remove (suspend) the organization and/or its affiliated analyst names from the AIHA Registry Programs, LLC web list of approved organizations or board-approved analysts and hold all AAT samples and reports until required fees are paid in full. The AIHA Registry Programs, LLC will notify the organization of this action in writing, specifying a payment deadline. If payment is not received by the AIHA Registry Programs, LLC within the specified time frame and a written request from the organization to extend the payment deadline has not been received and approved by the AIHA Registry Programs, LLC t, then AIHA Registry Programs, LLC shall administratively remove the organization and analysts from the program. This action does not require a vote of the RPB and may not be appealed].

## **ARTICLE V**

### **SUSPENSION, REMOVAL AND DENIAL OF AAR LISTING**

#### **5.1 GROUNDS**

The AIHA Registry Programs, LLC may suspend, remove, or deny an organization or analyst listing on the AAR if any of the following circumstances apply:

- 5.1.1** The organization and/or analyst fail to comply with any of the requirements of the AAR Program.
- 5.1.2** The organization is no longer in the business of conducting fiber-counting analysis.
- 5.1.3** The organization fails to file an annual update or does not submit updated applications as part of the triennial renewal process within the required time frame.
- 5.1.4** The organization and/or analyst fail to respond to a written request for information within the required time frame.
- 5.1.5** The organization fails to notify the AIHA Registry Programs, LLC of changes in ownership, personnel, quality system, or other matters directly impacting quality within the required time frame.
- 5.1.6** The analyst fails to maintain AAT proficiency as defined in Article III.
- 5.1.7** The organization or analyst does not participate in two (2) consecutive AAT rounds without prior exemption as defined in Article III.
- 5.1.8** The analyst submits, as his/her own, results for AAT proficiency samples that were analyzed by another analyst.
- 5.1.9** The analyst misrepresents his/her affiliation with an organization to the AIHA Registry Programs, LLC or uses their AAR status in a misleading manner.
- 5.1.10** The organization and/or analyst misrepresent material information in an initial or triennial application, or in any written correspondence with the AIHA Registry Programs, LLC.
- 5.1.11** The organization (or its owner(s)) or any of its affiliated analysts have been convicted of a violation of federal/state statutes related to the work performed under the Asbestos Analysts Registry Program.
- 5.1.12** The organization and/or its affiliated analysts knowingly report fraudulent or erroneous data.
- 5.1.13** The organization and/or its affiliated analysts misrepresent its analysts' board-approved status (or listing) and/or their participation in the AAT Program through false or misleading advertising or communication (written or verbal) or in any other form.
- 5.1.14** The analyst uses his/her AAR listing in any manner that brings disrepute to the organization.

#### **5.2 SUSPENSION**

Suspension is a temporary removal of the organization's or analyst's AAR listing when the organization or analyst is determined to be out of compliance with specific program requirements. Suspension may occur at any time for cause. Reasons for suspension include, but are not limited to, those outlined in

Section 5.1. Conditions for suspension include:

**5.2.1** Suspension may be initiated upon the recommendation of the RPB chairperson or the AIHA Registry Programs, LLC Manager. A finite period of time for the suspension shall be clearly defined.

**5.2.2** A two-thirds majority vote of the RPB to suspend shall be obtained for those suspension actions that are not automatic (administrative and proficiency).

**5.2.3** An analyst's AAR listing shall be immediately suspended upon notification of the initiation of the removal process.

**5.2.4** An organization may submit a request to the AIHA Registry Programs, LLC to voluntarily suspend the listing(s) of the organization and/or its affiliated analyst(s) with the agreement of the RPB chairperson for just cause and for a predetermined period of time.

**5.2.5** The AIHA Registry Programs, LLC shall notify the analyst and his/her organization by certified mail, return receipt requested, of the reasons for and conditions of the analyst suspension, the action required for reinstatement, and the deadline for satisfactorily completing the action.

**5.2.6** During the suspension period, the organization and/or analyst may not advertise the organization or analyst AAR listing.

**5.2.7** Suspension shall be terminated by the RPB chairperson upon resolution of the initial cause.

**5.2.8** Suspension shall proceed to removal if the actions required for reinstatement are not met by the deadline. This action shall be authorized and initiated by the RPB chairperson for those suspension actions that are not automatic (administrative or proficiency).

**5.2.9** The AIHA Registry Programs, LLC shall notify the organization and the analyst, in writing, of any action (reinstatement or removal) at the conclusion of the suspension period.

### **5.3 REMOVAL PROCESS**

The AIHA Registry Programs, LLC staff shall continuously monitor the application process, performance in the AAT Program, annual updates and information from organization customers, to identify situations of nonconformance. If AIHA Registry Programs, LLC staff determines that grounds for removal (see Section 5.1) are observed, then the AIHA Registry Programs, LLC staff shall provide the RPB chairperson with written notification of the nonconformance for those suspension actions that are not automatic (administrative or proficiency). This notification shall, minimally, include the organization and affiliated analysts, an explanation of the grounds for removal (by specific policy document citation), and all pertinent supporting documentation. A flow chart outlining the removal process is included as in Appendix F. Specific requirements to supplement this flow chart are listed below.

**5.3.1** All communication to the organization regarding removal actions shall be in writing and be sent to the organization by an appropriate documented delivery process. The letter shall clearly state the issues under review and the required date of response.

**5.3.2** Within five (5) business days of the AIHA Registry Programs, LLC removal notification, the RPB chairperson shall be notified of such action and shall be responsible for appointing two (2) TAP members to serve as a procedural review subcommittee. It shall be the responsibility of the 2-member TAP subcommittee to review the actions taken thus far by the AIHA Registry Programs, LLC staff and to determine conformance with procedural requirements, as specified in this policy document. It shall not be the responsibility of the 2-person TAP subcommittee to review the technical merits of the removal action. Within ten (10) business days of appointment, the 2-person TAP subcommittee shall submit a written determination of procedural compliance. If

the findings of the TAP subcommittee indicate that procedural requirements were not followed, then this written determination shall be forwarded to the RPB chairperson for reconsideration. If the findings of the 2-member TAP subcommittee indicate that procedural requirements were followed, then a full vote of the RPB is required for final removal. If the subcommittee cannot reach a consensus opinion, then the difference of opinion shall be summarized in a written statement and submitted to the RPB for a policy interpretation.

**5.3.3** A letter ballot on the removal action shall be submitted to the RPB within ten (10) business days from the date of the TAP subcommittee's written determination.

**5.3.4** The RPB shall vote in accordance with Article I, Section 1.2.1, to remove the organization and affiliated analysts from the AAR listing or terminate the removal process and reinstate the organization and affiliated analysts to full listed status. The vote shall be completed in five (5) business days.

**5.3.5** Within ten (10) business days from completion of the RPB vote, the AIHA Registry Programs, LLC staff shall send a letter using a documented delivery process to the organization and analyst informing those parties of the RPB decision to either: a) terminate the removal process, remove the suspension and reinstate the listed status of the organization and/or analyst; or b) terminate the organization and/or analyst listing and offer the organization and analyst the right to appeal the decision to the RPB Executive Committee. The organization will have ten (10) business days to provide AIHA with a written request to appeal. The organization shall also be informed of its monetary responsibilities shall it choose to appeal.

**5.3.6** The RPB shall notify the AIHA Board Coordinator for the AIHA Registry Programs, LLC of the removal decision within ten (10) business days from completion of the RPB vote.

**5.3.7** Absent an appeals request, the removal decision of the RPB is final. The AIHA Registry Programs, LLC shall take the necessary steps, consistent with the RPB removal decision, to remove the organization and/or analyst from the AAR listing or to reinstate the approval status of the organization or board approved status of the analyst and to provide official notification to the organization and analyst of such actions.

#### **5.4 PROCESS FOR DENIAL OF LISTING**

If an organization or analyst fails to meet the requirements of the AAR Program, fails to complete the application and review process, or meets any of the grounds for denial of listing, the RPB may deny listing to the analyst. The process for denial of listing is identical to the process for removal as detailed in Section 5.3.

## **ARTICLE VI APPEALS PROCESS**

### **6.1 RIGHT TO APPEAL**

An organization has the right to appeal the decision of the RPB to deny or remove the organization's or their affiliated analyst's listing in the AAR Program to the RPB Executive Committee. If the organization chooses to appeal, it shall be responsible for some costs of the process. If the denial or removal of the organization's or their affiliated analyst's listing is overturned, all costs for the appeal are split equally with AIHA Registry Programs, LLC. If the denial or removal of the organization's or their affiliated analyst's listing is upheld, the AIHA Registry Programs, LLC shall pay fifty (50) percent of the transcription costs and the organization shall pay all remaining costs incurred. Organizations seeking initial listing of the organization's or their affiliated analyst(s) shall bear the total cost of the transcription record. The expenses of any witnesses for either party shall be paid by the party producing such witnesses. All other expenses shall be borne by the party incurring those expenses. A flow chart outlining the appeals process is included as Appendix F. Specific requirements to supplement this flow chart are listed below.

### **6.2 NOTICE OF APPEAL**

If the organization wishes to appeal the RPB decision, it shall notify the AIHA Registry Programs, LLC in writing within ten (10) business days of the date of receipt of the letter from the RPB outlining its decision to remove or deny an analyst's listing in the AAR Program. The response shall include the reason for the appeal and a statement accepting responsibility for monetary expenses as described above. Failure to respond will result in termination of the approval status of the organization or the board-approved status of the analyst and the listing of either on the AAR.

**6.2.1** If the organization notifies the AIHA within ten (10) business days of its desire to appeal the RPB decision, the AIHA Registry Programs, LLC Manager shall contact the chairperson of the RPB within five (5) business days. The chairperson of the RPB will then contact the Director, AIHA Affiliate Laboratory Programs, within ten (10) business days of notification, with recommendations of individuals to serve on the appeals committee.

### **6.3 APPEALS COMMITTEE**

Within twenty (20) business days of notification, the Director, AIHA Affiliate Laboratory Programs shall have the responsibility to formally appoint an appeals committee and designate a chairperson to hear the appeal. The committee shall consist of at least three (3) uninvolved persons (persons not directly involved with the removal/denial decision or a direct competitor of the organization), two (2) of whom shall have experience in the registry program.

### **6.4 APPEALS HEARING**

**6.4.1 Site of Hearing.** The chairperson of the appeals committee shall designate a time and place for the hearing that does not represent an undue burden for the organization or required participants. The time shall be no later than forty (40) business days after the formation of the appeals committee. The hearing shall commence at that time unless the chairperson grants a continuance for good cause shown by the party requesting the continuance. The AIHA Registry Programs, LLC shall provide at least twenty (20) business days written notice to the organization and its affiliated analyst(s) of the reasons for the denial or removal action, the time and place of the hearing, an opportunity to examine evidence submitted in this adverse action and to present evidence on behalf of the organization and/or its affiliated analyst(s). In addition, notice shall be provided to the chairperson of the RPB.

**6.4.2 Representation by Counsel.** Counsel at the hearing may represent each party, at its own cost.

**6.4.3 Stenographic Record.** A stenographic record shall be made of the hearing.

**6.4.4 Attendance at Hearing.** In the event the organization fails to attend the hearing without good cause, the organization and its affiliated analyst(s) shall be deemed to have waived its rights of appeal and the appeals committee shall recommend to the RPB Executive Committee that the adverse action be affirmed.

**6.4.5 Parties.** The parties of the hearing shall be the organization and the RPB. The RPB may be assisted in the presentation of its case by a staff representative of the AIHA Registry Programs, LLC. Either party may choose to have witnesses; however, the chairperson may require the exclusion of witnesses during presentation of evidence.

**6.4.6 Order of Proceedings.** The appeals hearing shall proceed as follows:

**6.4.6.1** The hearing shall be opened by the chairperson of the appeals committee, who shall note the time, place and date, the presence and identity of the members of the appeals committee, the organization, RPB representative, and witnesses to the hearing.

**6.4.6.2** At the commencement of the hearing, the chairperson shall offer each party an opportunity to make an opening statement to clarify the issues involved.

**6.4.6.3** The appellant organization and the appeals committee shall each present its case. Any documentation or presentations by witnesses may be subject to review and questions by the other parties to the appeal.

**6.4.6.4** The chairperson shall have the discretion to vary this procedure but shall provide full and equal opportunity to each party for the presentation of all materials or relevant facts.

**6.4.6.5** Information offered by any party may be received as evidence by the chairperson.

**6.4.6.6** The names and addresses of all witnesses and the identification of each exhibit in the order received shall be made a part of the record, which shall be maintained by the chairperson.

**6.4.6.7** On conclusion of the presentation of evidence, the chairperson shall permit each party an opportunity to make a brief closing statement.

**6.4.7 Evidence.** The parties to the hearing may offer any evidence that is material, relevant and bears on the issues before the appeals committee. The chairperson and the appeals committee will give weight to the evidence presented as they see appropriate. In addition to the evidence taken in the presence of the hearing tribunal, a party may, subject to the approval of the chairperson, submit evidence of witnesses by affidavit. The appeals committee shall give such weight to affidavits, as it deems appropriate, after considering any objections made to the admission of such affidavits. The proponent of an issue or proposition has the burden of proof on the matter.

**6.4.8 Adjournment.** The chairperson, for good cause, may adjourn the hearing upon request or upon his/her own initiative, subject to reconvening at a specified future date.

**6.4.9 Closing the Appeals Hearing.** The chairperson shall declare the hearing closed at the conclusion of closing statements or at a later date if he/she decides to permit the parties to file briefs or other documents subsequent to the hearing.

**6.4.10 Reopening the Appeals Hearing.** The chairperson may reopen the hearing, for good cause, upon application by any party thereto or upon his/her own initiative.

**6.4.11 Report of the Appeals Committee.** The appeals committee shall render a final written report, approved by a majority of the members of the appeals committee, no later than twenty (20) business days after the close of the hearing. The chairperson shall submit a copy of the report to the Director, AIHA Affiliate Laboratory Programs, the chairperson of the RPB, the AIHA Registry Programs, LLC Manager, and to all participants of the appeals hearing. Such report shall include the appeals committee findings, conclusions and recommendation concerning the

action that had been the subject of the appeal. The appeals committee shall recommend that the adverse action be affirmed unless it determines such adverse action was arbitrary, capricious, an abuse of discretion, not in accordance with the required procedures, or not based upon substantial evidence.

## **6.5 FINAL DECISION**

The RPB Executive Committee shall possess exclusive authority to render a final decision in any matter appealed in accordance with this appeal procedure. Within forty (40) business days of issuance of the report of the appeals committee, the board shall give written notice of its final decision to all parties to the appeal hearing.

**If the RPB Executive Committee renders a decision to uphold the removal or denial of AAR listing, the AIHA Registry Programs, LLC staff shall:**

**6.5.1** Inform the RPB of the board's decision.

**6.5.2** Inform the organization and its affiliated analyst(s) of the board's decision.

**6.5.3** Delete the organization and/or its analyst(s)' name from all official AIHA Registry Programs, LLC listings within five (5) business days of the board's decision.

**If the RPB Executive Committee renders a decision to deny removal or grant listing, the AIHA Registry Programs LLC staff shall:**

**6.5.4** Inform the RPB of the board's decision.

**6.5.5** Inform the organization and its affiliated analyst(s) of the board's decision and issue written confirmation of listing in the AAR Program, if applicable.

**6.5.6** Reinstate approval or board approval status and add the organization and or its analyst(s)' name to the AAR listing.

## **ARTICLE VII ADVERTISING**

### **7.1 ADVERTISING POLICY**

All approved AAR organizations and analysts are encouraged to advertise their listing on the AAR by using the prescribed language defined in this article. Failure to conform to these advertising policies shall result in suspension or revocation of approval status and possible legal actions.

#### **7.1.1 Advertising Wording**

##### **7.1.1.1 Organizations**

An organization that is listed in the Asbestos Analysts Registry Program may use the following terms in advertising:

"ABC Organization is a listed Asbestos Analysts Registry organization."

"ABC Organization is listed by the AIHA Registry Programs, LLC in the Asbestos Analysts Registry Program."

##### **7.1.1.2 Organization With Multiple Locations**

Organizations with multiple locations shall clearly identify the location of the AAR listed organization(s):

"ABC Organization (specific location) is a listed Asbestos Analysts Registry organization."

"ABC Organization (all locations) is listed by the AIHA Registry Programs, LLC in the Asbestos Analysts Registry Program."

##### **7.1.1.3 Board-Approved Analysts**

An analyst that is board-approved and listed on the Asbestos Analysts Registry Board-Approved Analyst listing may use the following terms in advertising on his/her data reports:

"Analyst Name is a board-approved analyst listed on the Asbestos Analysts Registry with ABC organization."

"Analyst Name is listed as a board-approved analyst by the AIHA Registry Programs, LLC in the Asbestos Analysts Registry program with ABC organization."

**7.1.2** An organization may not advertise that it is AAR listed until it has actually received official notification that it is approved.

#### **7.1.3 Suspended Organizations or Analysts**

Organizations or analysts registered by AIHA Registry Programs, LLC, but under suspension, may not advertise that they are listed in the Asbestos Analysts Registry Program. Any analyst that loses board approval shall remove any advertising from their data sheets.

### **7.2 Variation in Advertising**

Any other use of these terms or any variation in terminology requires prior AIHA Registry Programs, LLC approval. The AAR is not an accreditation program or a certification program. When advertising, the words 'accreditation' or 'certification', or variations thereof, shall not be used.

## **ARTICLE VIII MISCELLANEOUS**

### **8.1 INDEMNITY**

The AIHA Registry Programs, LLC shall indemnify and hold harmless its directors, officers, employees, agents and volunteers, members of the Registry Programs Board, assessors, and all other representatives of the AIHA Affiliate Laboratory Programs, their heirs and legal representatives from any and all claims for loss, liability or damage, including costs, fees and expenses that arise out of or in connection with the acts or omissions of such person committed in the performance of the accreditation program activities provided that such person acted in good faith and in a manner he or she reasonably believed to be in or not opposed to the best interests of AIHA Registry Programs, LLC.

### **8.2 REPRESENTATION OF LISTING**

See Article VII-Advertising

### **8.3 LIST OF AIHA REGISTRY PROGRAMS, LLC APPROVED ORGANIZATIONS AND BOARD-APPROVED ANALYSTS**

The AIHA Registry Programs, LLC maintains a list of approved organizations and board-approved analysts on the AIHA Registry Programs, LLC website. If an organization is suspended or revoked, the organization and its analysts will be removed from the web list. An analyst who is suspended, dropped, or loses proficiency, will be removed from the web list.

### **8.4 CONFIDENTIALITY OF RECORDS**

Files and records of the AAR shall be confidential and their use restricted to personnel engaged in administration of the AIHA Registry Programs, LLC.

### **8.5 CONFLICTS OF INTEREST**

The AIHA Registry Programs, LLC requires that all members of the RPB, Technical Advisory Panel (TAP), Contract Reviewers or other agents of the AIHA Registry Programs, LLC involved in the AIHA Registry Programs, LLC sign a Conflict of Interest statement that prohibits these individuals from participating in any activities and/or proceedings to approve, deny or revoke the registry listing of any organization and its affiliated analysts where such person has a vested interest in the approval or denial of registry listing.

### **8.6 FEES**

The fees associated with the AAR program shall be determined by the AIHA Registry Programs, LLC. The Registry Programs Fee Schedule shall include all appropriate fees for the AAR program. The current Registry Programs Fee Schedule shall be maintained on the AIHA Registry Programs, LLC web site.

### **8.7 FEEDBACK FROM PARTICIPATING ORGANIZATIONS/ANALYSTS**

Participating organizations desiring changes in the AIHA Registry Programs, LLC policies or programs shall detail their suggestion(s) in writing to the AIHA Registry Programs, LLC. The AIHA Registry Programs, LLC Manager shall inform the RPB Chairperson and the AIHA Affiliate Laboratory Programs Board Coordinator of the suggestion(s). The AIHA Registry Programs, LLC shall consider and respond to the organization suggestion(s), as appropriate.

### **8.8 COMPLAINTS**

Organization users and others desiring to file a complaint against an organization and its affiliated analysts as a result of performance or misrepresentation, or a complaint concerning other AIHA Registry Programs, LLC issues, may do so in writing to the AIHA Registry Programs, LLC. The AIHA Registry Programs, LLC Manager shall inform the RPB Chairperson and the AIHA Affiliate Laboratory Programs Board Coordinator of the complaint. The AIHA Registry Programs, LLC shall take corrective actions, as appropriate, and respond to the complainant in a reasonable amount of time.

## ARTICLE IX APPENDICIES

### APPENDIX A: ABBREVIATIONS AND TERMS

The following abbreviations and terms will be helpful in interpreting this policy document and the AAR Application.

#### Abbreviations

Abbreviation	Definition
<b>AAR</b>	Asbestos Analysts Registry
<b>AAT</b>	Asbestos Analysts Testing
<b>AIHA</b>	American Industrial Hygiene Association
<b>COC</b>	Chain of Custody
<b>CV</b>	Coefficient of Variation (synonymous with Relative Standard Deviation)
<b>ET</b>	Eastern Time zone
<b>IHPAT</b>	Industrial Hygiene Proficiency Analytical Testing
<b>LCL</b>	Lower Control Limit
<b>LOD</b>	Limit of Detection
<b>NIOSH</b>	National Institute for Occupational Safety and Health
<b>OSHA</b>	Occupational Safety and Health Administration
<b>RPB</b>	Registry Programs Board
<b>PAT</b>	Proficiency Analytical Testing
<b>PT</b>	Proficiency Testing
<b>QA</b>	Quality Assurance
<b>QC</b>	Quality Control
<b>QM</b>	Quality Manual
<b>S</b>	Standard deviation
<b>SOP</b>	Standard Operating Procedure
<b>S<sub>r</sub></b>	Relative Standard Deviation (synonymous with Coefficient of Variation)
<b>TAP</b>	Technical Advisory Panel
<b>UCL</b>	Upper Control Limit

#### TERMS

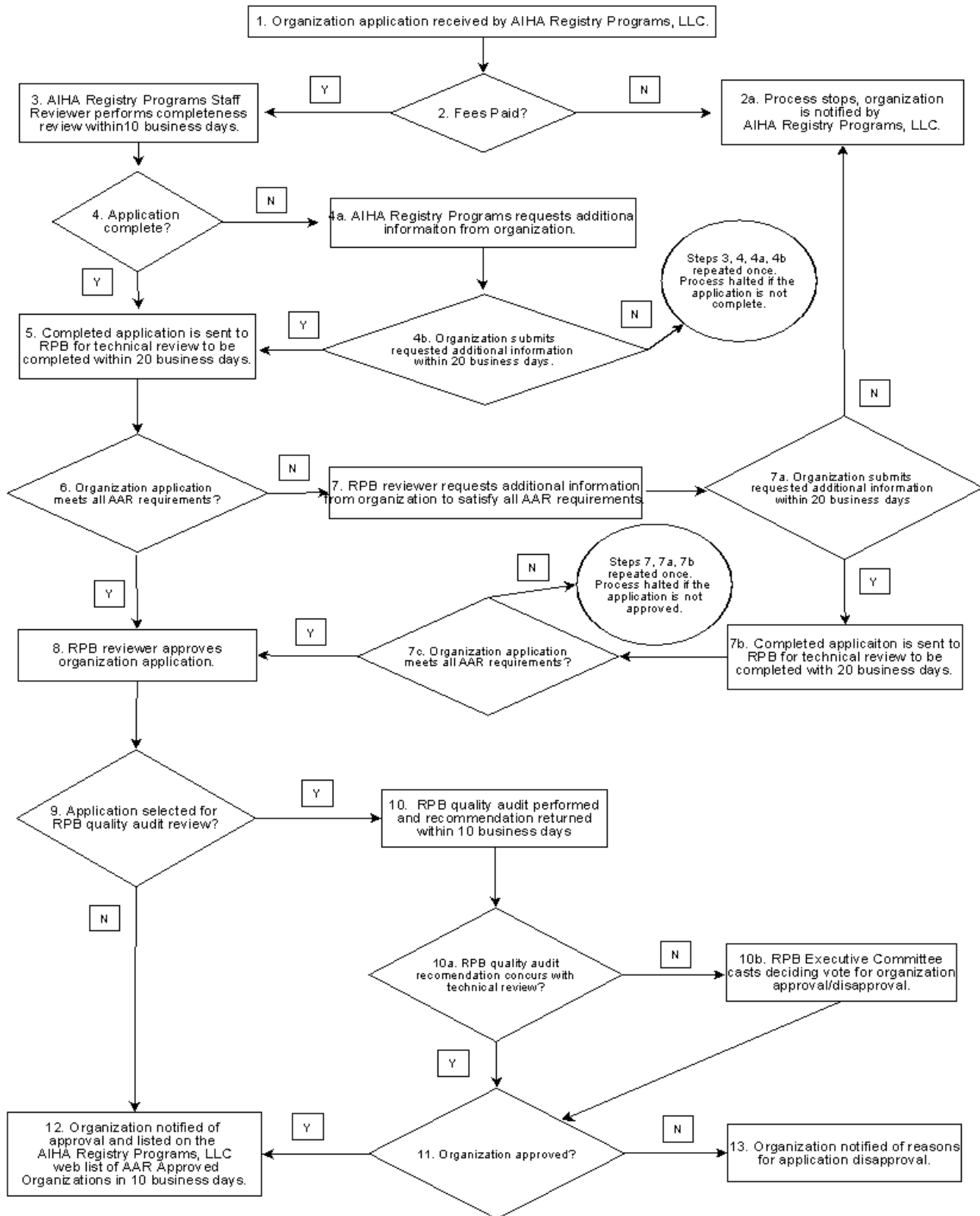
Term	Definition
<b>AIHA Affiliate Laboratory Programs</b>	General term referring to any program within the AIHA Registry Programs, LLC, AIHA Proficiency Analytical Testing Programs, LLC or AIHA Laboratory Accreditation Program, LLC established to maintain the highest possible standards of performance for analysts and/or laboratories analyzing samples and evaluating exposures to hazardous agents.
<b>AAT Submission Confirmation</b>	A page that displays upon submission of AAT results on the PAT Data Portal. Shall be printed and kept as a record of results submission.
<b>Acceptance Limits</b>	Established mathematical data quality limits for analytical method performance.
<b>Accuracy</b>	The degree of agreement between an observed value and an accepted reference value. Accuracy includes a combination of precision and bias. See <u>Precision and Bias</u> .
<b>Affiliated Analyst</b>	An analyst that is to be registered with an organization who follows that organization's quality system.
<b>Analysis</b>	The qualitative or quantitative determination of a property or analyte in a substance or material.

Term	Definition
<b>Asbestos Analyst Registry</b>	A registry program offered by AIHA Registry Programs, LLC to recognize asbestos analysts who perform fiber counting outside of established laboratory locations.
<b>Asbestos Analysts Testing</b>	A performance testing program for asbestos analysts who desire to be listed in the AAR.
<b>Batch</b>	A group of samples that are processed in one operation: considered to be a uniform, discrete unit.
<b>Bias</b>	A systematic error manifested as a consistent positive or negative deviation from the known true value.
<b>Calibration</b>	A set of operations which establish, under specified conditions, the relationship between values indicated by a measuring instrument or system, or values represented by a material measure, and the corresponding known values of a standard
<b>Chain of Custody</b>	Definitive evidence (a record) of the persons who had possession or custody of the sample(s) for all periods of time, as it moved from the point of collection to the final analytical result.
<b>Customer</b>	Any person or organization that engages the services of a laboratory.
<b>Control Chart</b>	A means to identify the degree to which a measured value disagrees with an accepted reference value.
<b>Corrective Action</b>	All activities taken, whether unsuccessful or not, to eliminate the cause(s) of an existing nonconformity or deficiency in order to prevent recurrence. See <u>Deficiency</u> .
<b>Current Analyst Status</b>	Current status of an analyst in your organization. Provides information that would clarify this analyst's position and work load. For example, full time board-approved, probationary analyst in application process, or back up PCM analyst.
<b>Deficiency</b>	A failure to comply with a requirement of the AIHA Registry Programs, LLC AAR Program or an organization's own stated quality system requirements.
<b>Deviation</b>	A departure from written procedures, test methods, contracts or any other standard operating procedure that is part of the laboratory's Quality Assurance System.
<b>Duplicate Samples</b>	Two samples taken from and representative of the same population and carried through all steps of the sampling and analytical procedures in an identical manner. Duplicate samples are used to assess variance of the total method including sampling and analysis.
<b>Enrollment date</b>	The date by which an analyst or organization application shall be received to be included in that AAT round. Dates are listed in the AIHA Registry Programs Fee Schedule.
<b>Equipment</b>	All physical items (including software and instruments) in the facility used in the performance of analytical testing.
<b>Equipment Log</b>	A chronological record of preventive and emergency maintenance performed on any equipment. The logs include a record of calls, service technician summaries, records of calibration by the manufacturer, routine user maintenance, and other information as required by these policies.
<b>Expedited Analyst</b>	An initial or transfer analyst seeking an accelerated proficiency determination in the AAT program and listing process on the AAR.
<b>Field Blank</b>	An analyte-free matrix carried to the sampling site, exposed to the sampling conditions (e.g., bottle caps removed), returned to the laboratory, treated as a sample, and carried through all steps of the analysis. For example, a clean culture media plate, sorbent tube, or a clean filter could be used as a field blank. The field blank, which shall be treated just like the sample, evaluates possible effects attributable to shipping and field handling procedures.
<b>Initial Analyst</b>	An analyst who is applying to the AAR for the first time.
<b>Initial Organization</b>	An organization who is applying to the AAR for the first time. May also be an organization that previously dropped or was dropped from the AAR program and is reapplying after the appropriate waiting period.

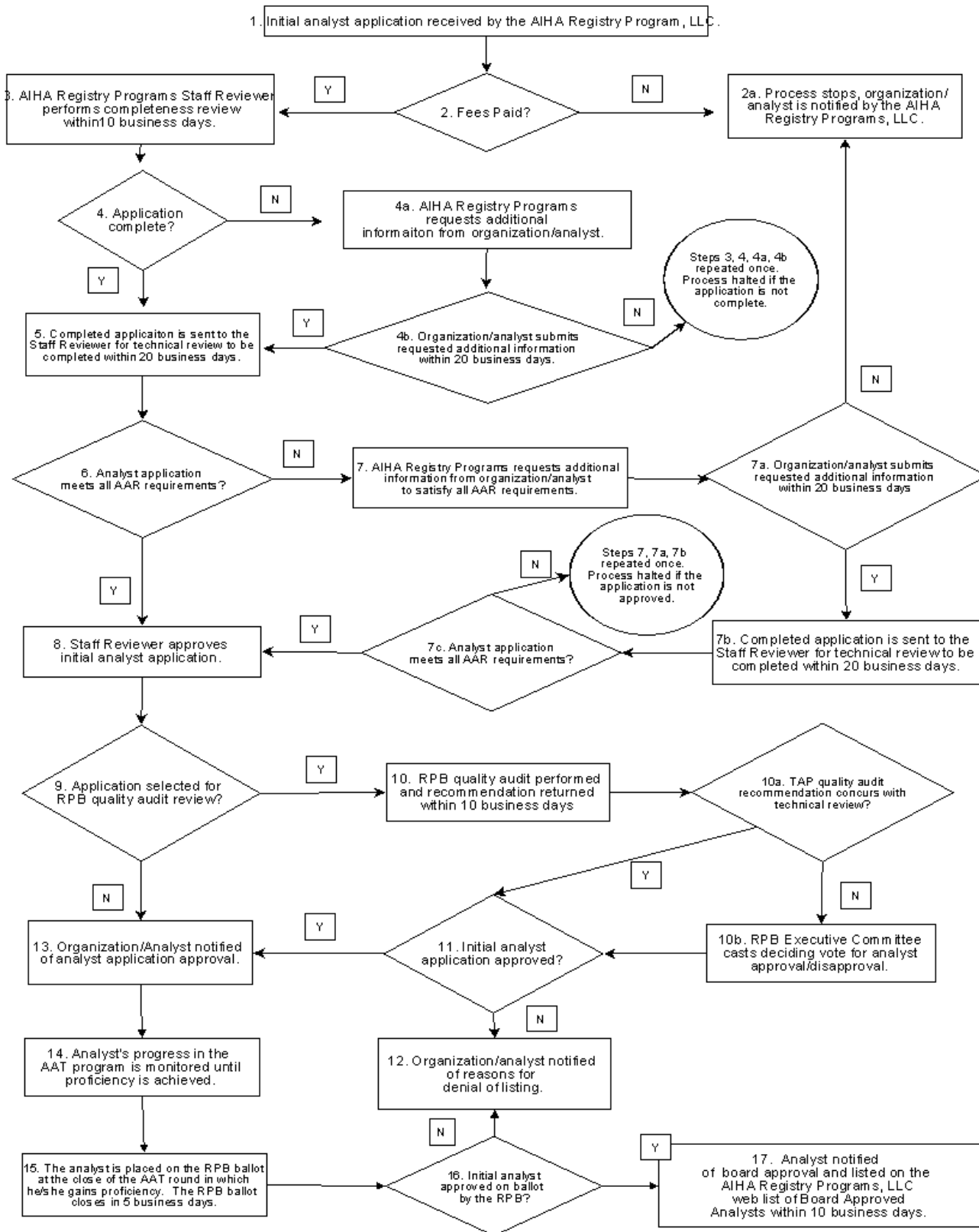
Term	Definition
<b>Industrial Hygiene Proficiency Analytical Testing</b>	A proficiency testing program involving industrial hygiene samples of various analytes and matrices analyzed by all participating laboratories. Results are evaluated by the AIHA Proficiency Analytical Testing Programs, LLC and are used to determine laboratory proficiency.
<b>Interlaboratory Comparisons</b>	Evaluation of tests on the same or similar items by two or more laboratories.
<b>Internal Quality Control</b>	Routine activities and checks, such as periodic calibrations, duplicate analyses and matrix spikes that are included in routine internal procedures to control the accuracy and precision of measurements.
<b>Limit of Detection</b>	The lowest concentration of a substance that can be measured by an instrument.
<b>AIHA Registry Programs Fee Schedule</b>	A document that lists all current fees for all AIHA Registry Programs, LLC's registry program and associated proficiency programs. This document includes enrollment forms, a stock sample order form, a retest order form, and the enrollment dates for these programs.
<b>Method</b>	An orderly arrangement of steps to accomplish sample analysis.
<b>Outlier</b>	A result that is outside the statistical control limits determined for a sample
<b>Policy</b>	An organization's written statement of commitment to implement a management program element.
<b>Precision</b>	The degree to which a set of observations or measurements of the same property, usually obtained under similar conditions, conform to them. Precision is often expressed as standard deviation, variance or range, in either absolute or relative terms.
<b>Preventive Action</b>	A planned activity to identify, recognize and control potential sources of nonconformance and to introduce needed improvements.
<b>Probationary Period</b>	A time period during which the analyst performs analysis under supervision, or where their results are checked by the QA manager for proficiency and accuracy. A typical probationary period involves training in the organization's quality system, repeated analysis of reference slides and recounts of samples previously analyzed by other analysts.
<b>Procedure</b>	A written set of instructions that describe how to implement a policy requirement, or how to carry out a specific task.
<b>Proficiency Analytical Testing</b>	Refers to any proficiency analytical testing program(s), such as the programs established under the Analytical Quality Programs. See <u>Interlaboratory Comparisons</u> .
<b>Quality</b>	The suitability of a product or service for use, as perceived by the user.
<b>Quality Assurance</b>	An integrated system of activities involving planning, quality control, quality assessment, reporting and quality improvement to ensure a product or service meets defined standards of quality within a stated level of confidence.
<b>Quality Assurance Program</b>	See <u>Quality Assurance</u> .
<b>Quality Control</b>	The operation procedures used to ensure that the analytical data are of known and acceptable precision and accuracy.
<b>Quality Manual</b>	A document stating the quality policy, quality system and internal quality control procedures of the laboratory.
<b>Quality System</b>	See <u>Quality Assurance</u> .
<b>Registry Program Board</b>	An elected group volunteer technical representatives from Industrial Hygiene, Environmental Lead, Environmental Microbiology, and Food that provide technical guidance to the AIHA Registry Programs, LLC.
<b>Requirement</b>	An essential criterion necessary for approval.
<b>Round Robin</b>	Interlaboratory quality control wherein three separate organizations exchange samples. Each organization analyzes the samples and statistical comparison is performed on the results to assess the variability of fiber counting measurements between organizations. To meet AAR program and OSHA requirements, each organization shall participate in at least two round robins annually
<b>Sample Log</b>	A document where sample identification, date received, customer, etc., are noted when samples arrive at the laboratory. The log is part of the sample tracking system. See <u>Sample Tracking</u> .

<b>Term</b>	<b>Definition</b>
<b>Sample Tracking</b>	A document system of following a sample from receipt at the laboratory, through sample processing and analysis, to final reporting. The system includes unique numbering, or bar coding labels, and the use of a Sample Log.
<b>Standard Operating Procedure</b>	A written document that details the procedures of an operation; an analysis or action whose techniques and procedures are thoroughly prescribed, and which are accepted as the procedure for performing certain routine or repetitive tasks.
<b>Suspension</b>	A temporary removal of the approval status of an organization or its analysts when it is found to be out of compliance with specific program requirements.
<b>Transfer Analyst</b>	An analyst who has previously been enrolled in the AAR program and is seeking reinstatement of their AAR listing.
<b>Triennial Application</b>	A renewal application that shall be submitted every three years by any approved AAR organization.

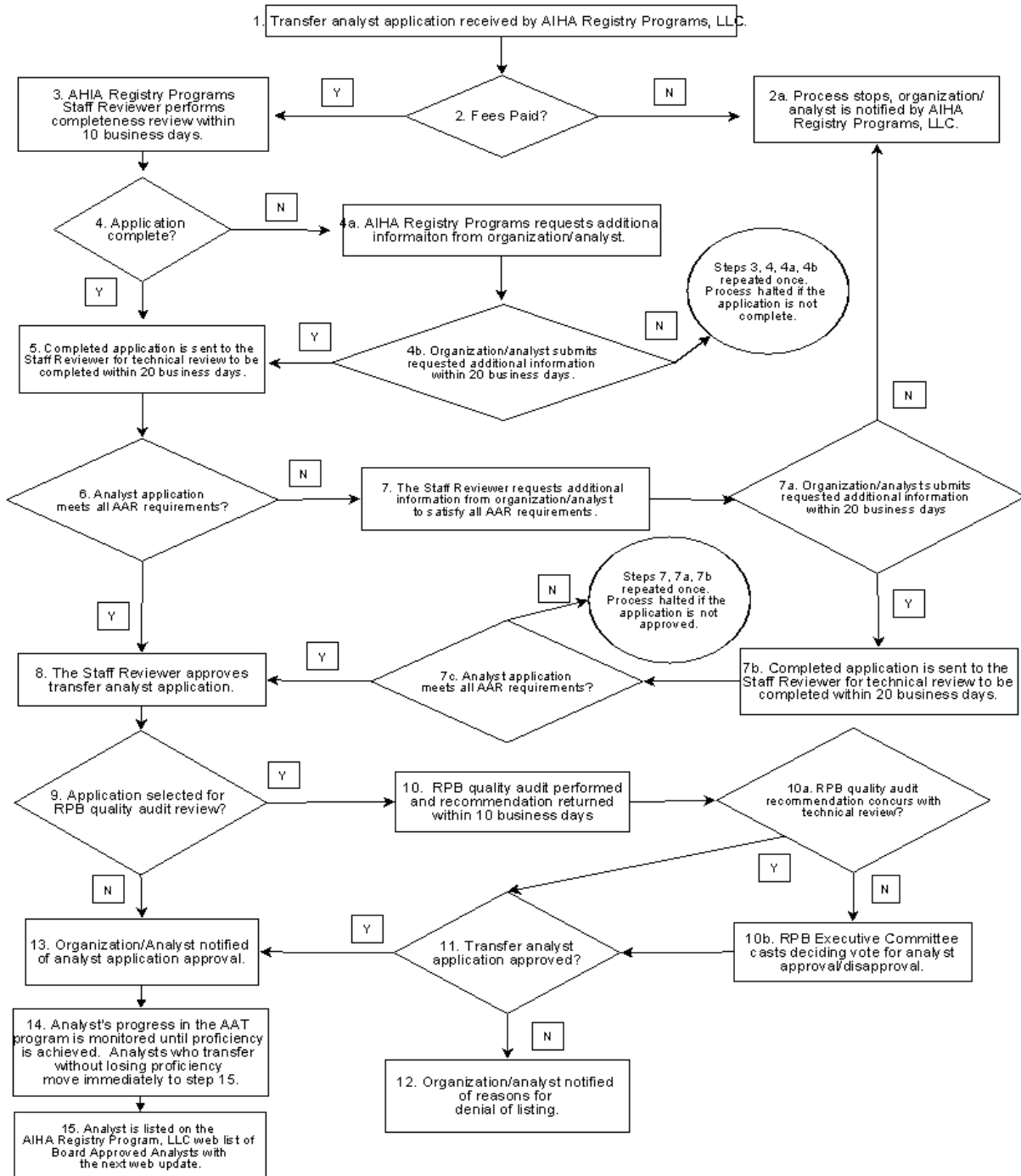
**APPENDIX B: INITIAL ORGANIZATION LISTING PROCESS**



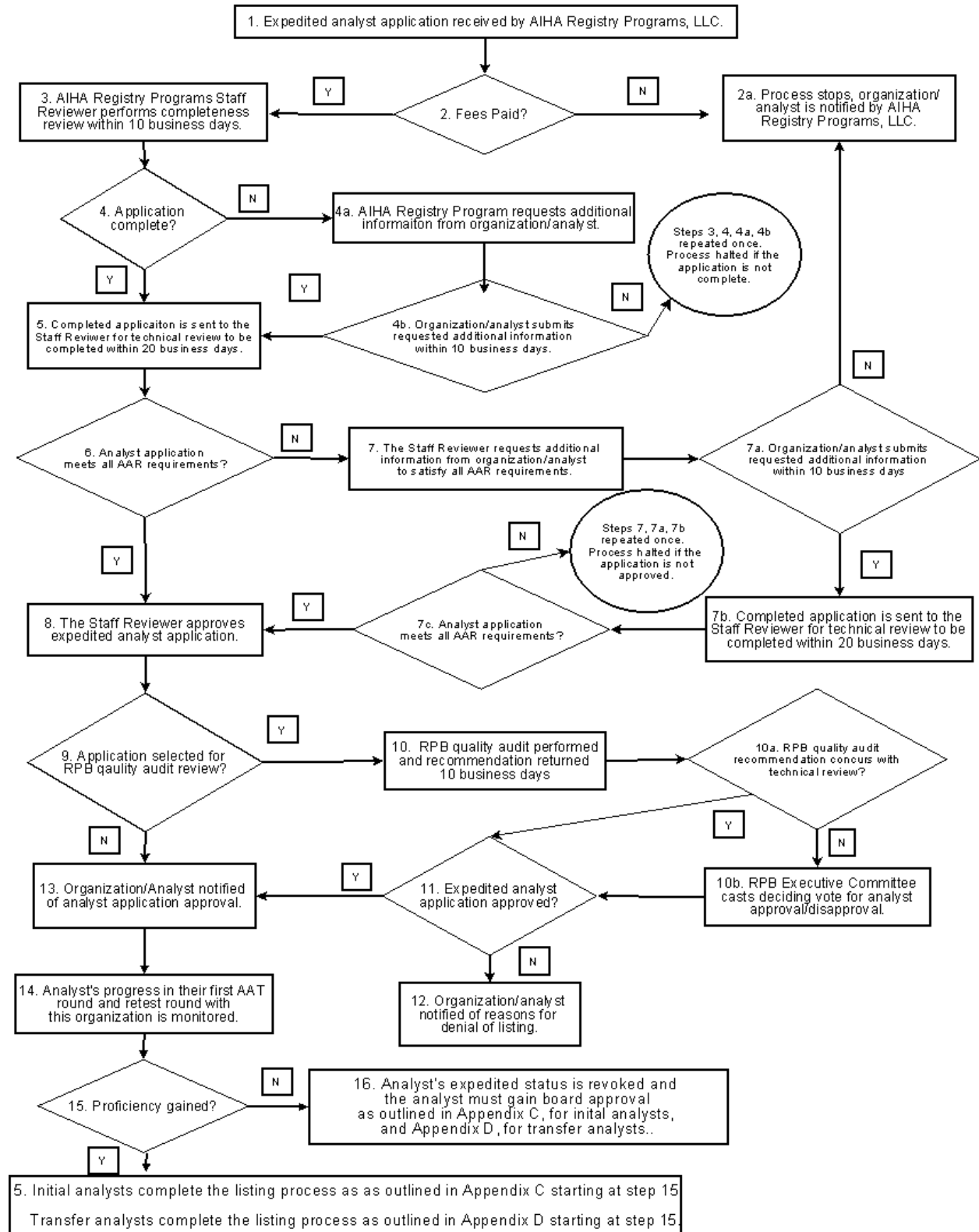
**APPENDIX C: INITIAL ANALYST LISTING PROCESS**



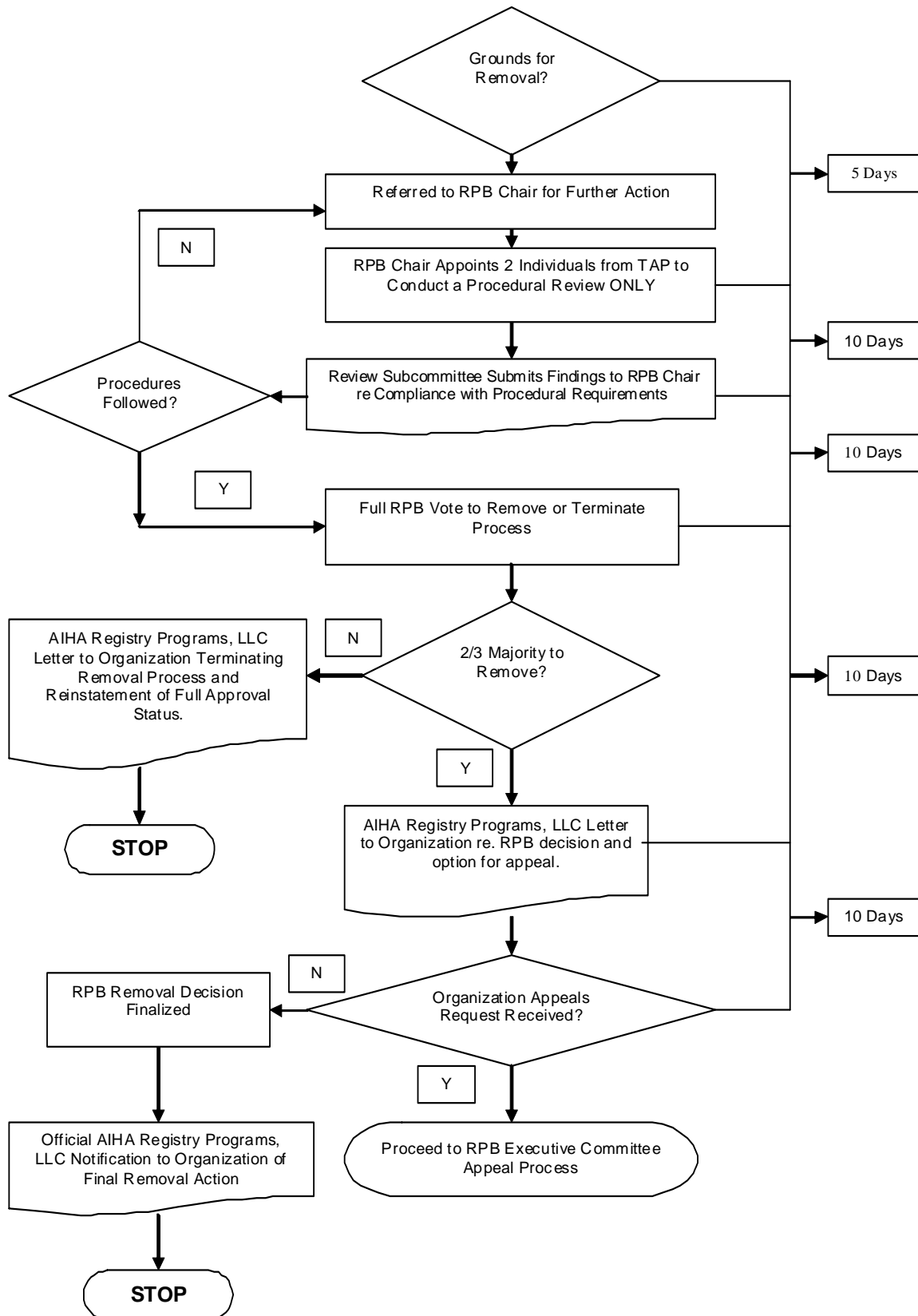
**APPENDIX D: TRANSFER ANALYST LISTING PROCESS**



**APPENDIX E: EXPEDITED ANALYST LISTING PROCESS**



**APPENDIX F: AAR REMOVAL PROCESS**



**APPENDIX F: APPEALS PROCESS**

