



## MODULE 2D

### ENVIRONMENTAL MICROBIOLOGICAL LABORATORY ACCREDITATION PROGRAM (EMLAP) SPECIFIC ADDITIONAL REQUIREMENTS

#### 2D.1 SCOPE

AIHA Laboratory Accreditation Programs (AIHA-LAP), LLC's Environmental Microbiological Laboratory Accreditation Program (EMLAP) is intended for accreditation of microbiological laboratories specializing in the analysis of microorganisms commonly detected in air (e.g., spore trapping), surface (e.g., tape lifts, swabs, wipes), and bulk (e.g., dust, liquids, building materials) samples collected from schools, hospitals, offices, industrial, agricultural and other work environments. Laboratory accreditation in this program is based upon a review of the laboratory management systems as defined in Module 2A and this program specific module, and successful participation in AIHA PAT, LLC Programs EMPAT program ([www.aihapat.org](http://www.aihapat.org)) or an equivalent proficiency testing program approved by AIHA-LAP, LLC.

Available FoTs and corresponding PT for the EMLAP must meet the requirements detailed in the EMLAP section of the *Scope Table* maintained on the AIHA web site ([www.aihaaccreditedlabs.org](http://www.aihaaccreditedlabs.org)).

#### 2D.2 FACILITIES

**2D.2.1** The laboratory shall have adequate facilities for the scope of services to be accredited. The facility shall meet the requirements of the appropriate and most current biosafety level guidelines, as defined by CDC/NIH, WHO and AIHA. The laboratory shall have a documented routine monitoring program to verify adequate contamination control. The laboratory must have proper facilities for biological and chemical storage and disposal of waste.

**2D.2.2** Mobile and field operations laboratories shall maintain records of the locations where analyses are performed.

#### 2D.3 EQUIPMENT

##### 2D.3.1 General

**2D.3.1.1** The laboratory shall have adequate equipment for the FoT(s) to be accredited.

**2D.3.1.2** The laboratory shall utilize a microscope/magnification system suitable for performing the methods in use at the laboratory (e.g., capable of the magnifications required).

**2D.3.1.2.1** The microscope/magnification system for non-fluorescence microscopy shall consist of one of the following:

(a) A compound optical microscope having a high magnification (e.g., 100x) liquid immersion objective having a numerical aperture (n.a.) of at least 1.25; or,

(b) An optical microscope having a theoretical or calculated point to point resolution at 0.34  $\mu\text{m}$  or better.



The resolution is calculated as follows:  $1.22 \times 0.55 \mu\text{m} / [\text{condenser n.a.} + \text{objective n.a.}]$ ; or,

(c) A magnification system having a measured optical resolution of  $0.34 \mu\text{m}$  or better. For example, the optical resolution may be measured with resolution target testing slides.

**2D.3.1.2.2** Each non-fluorescence microscope shall have an ocular micrometer which is checked annually with a stage micrometer.

**2D.3.1.2.3** A microscope used for fluorescence microscopy shall have a non-immersion objective of at least 40X magnification, and shall be used in conjunction with oculars of at least 10X magnification.

**2D.3.1.2.4** The alignment of each microscope/magnification system shall be documented for each day of use.

**2D.3.1.3** The laboratory shall have a reference library appropriate to the FoT(s) to be accredited.

### **2D.3.2 Additional Requirements for All Culturable and Fungal Direct Examination Bulk/Surface FoTs**

**2D.3.2.1** The laboratory shall have a Class II biological safety cabinet (BSC) whose performance has been certified by a NSF accredited field certifier according to NSF Standard 49 field requirements (or national equivalent outside the U.S.) Annual certification is required.

**2D.3.2.2** The laboratory shall have a steam sterilizer (autoclave) with functioning temperature and pressure gauges or a contract with a biohazard waste disposal company for the disposal of potentially viable waste.

**2D.3.2.2.1** Laboratories with steam sterilizers shall use indicators to document successful sterilization with each use.

**2D.3.2.2.2** Laboratories with steam sterilizers shall use biological indicators (e.g. spore strips or ampoules) with each use or at least once a week, whichever is less to document the sterilization process.

**2D.3.2.3** The laboratory shall have incubators, refrigerators and freezers with temperature settings appropriate for the scope of work performed at the laboratory.

## **2D.4 PERSONNEL**

The laboratory shall conform to the personnel requirements as specified in Module 2A, Section 2A.5.2 (and all sub-sections), and to the requirements as detailed in the following sections. In all cases, training records for degreed laboratory staff shall include a copy of the transcript or diploma from an accredited college/university.

### **2D.4.1 Technical Manager**

Qualifications of the Technical Manager in addition to those in 2A are:



**2D.4.1.1** The Technical Manager shall possess a bachelor's degree in microbiology or life science (with eight (8) semester hours in microbiology), with three (3) years relevant non-academic work experience. A minimum of two (2) years experience must be in microbiological analyses within the scope of accreditation. The remaining one (1) year can be from other laboratory analytical procedures. All non-academic work experience and coursework must be documented in the employee's training and personnel files. See *Guidance on Acceptable Courses to Satisfy the Requirement for 8 Semester Hours of Microbiology (or related courses) to Serve as an EMLAP Technical Manager* maintained on the AIHA-LAP, LLC web site ([www.aihaaccreditedlabs.org](http://www.aihaaccreditedlabs.org)).

**2D.4.1.2** Experience must reflect the scope of work of the laboratory.

**2D.4.1.3** The Technical Manager shall be experienced in the selection and use of bioaerosol, surface, fluid and raw material sampling methods and in sample processing for the quantification and identification appropriate to the FoTs of mesophilic and thermophilic bacteria, and mesophilic, xerophilic, thermotolerant fungi (molds and yeasts), and fungi identified by spore trap collection methods.

**2D.4.1.4** Training records for the Technical Manager shall include documentation of ability to identify genus/group of fungi from spore trap analysis and genus/species of fungi that are reported. Bacterial identification training records shall document training of relevant diagnostic procedures (e.g., gram stain, oxidase, biochemical reactions) as appropriate to the FoT(s). Legionella training records must include documentation of relevant diagnostic procedure (ability to recognize presumptive colonies, confirmation using DFA, latex agglutination, or molecular methods).

#### **2D.4.2 Laboratory Analytical Staff**

The environmental microbiological program distinguishes two titles for those conducting analytical procedures within the laboratory.

##### **2D.4.2.1 Laboratory Technicians**

These staff members shall have a high school diploma or General Education Development (GED). During this required training period, the trainee shall perform work (and have work reviewed prior to release) under the direct supervision of a qualified technician, analyst and/or the Technical Manager.

Technicians may function in the same manner as analysts for Air – Direct Examination (spore trap) analysis after completion of six (6) months documented on the job training and demonstrated proficiency. For all other analyses, technicians may function in the same manner as analysts after one (1) year documented on the job training and demonstrated proficiency.

##### **2D.4.2.2 Laboratory Analysts**

These staff members shall have a bachelor's degree in a physical or biological science. Analysts shall have three (3) months of documented training for Air - Direct Examination (spore trap) and six (6) months of documented on-the-job training functioning for all other analyses as an analyst trainee. During the required analyst training period, the trainee shall be under the direct supervision of another qualified analyst and/or the Technical Manager. During this period, the trainee shall have all work reviewed prior to release by



another qualified analyst and/or the Technical Manager.

#### **2D.4.2.3 Training Records**

Training records for technicians and analysts shall include documentation of ability to identify genus/species of fungi and genus/group of fungi that are reported. Bacterial identification training records shall document training of relevant diagnostic procedures (e.g., gram stain, oxidase, biochemical reactions). Legionella training records must include documentation of relevant diagnostic procedure (ability to recognize presumptive colonies, confirmation using DFA, latex agglutination, or molecular methods). All analysts and technicians shall have demonstrated ability to produce reliable results through accurate analysis of certified reference materials (CRMs), proficiency testing samples or in-house quality control samples. This demonstration shall be performed and documented at a minimum of every six (6) months.

## **2D.5 ANALYTICAL METHODS**

### **2D.5.1 General**

The laboratory shall have written Standard Operating Procedures (SOPs), in accordance with the requirements of Module 2A, for the following: processing and analysis of samples; determining analytical sensitivities for each quantitative or semi-quantitative method; appropriate retention, waste treatment and disposal of environmental microbial samples; the identification of fungi and/or bacteria; identification of fungal spores and structures; and biosafety and decontamination for the applicable FoT(s).

### **2D.5.2 Additional Requirements for Air Fungal Direct Examination FoT**

Analytical methods shall include a description of sample trace analysis, scope magnification, counting rules, percentage of trace analyzed and calculations.

## **2D.6 QUALITY ASSURANCE/QUALITY CONTROL**

Routine QA/QC procedures shall be an integral part of laboratory procedures and functions. The laboratory Quality Assurance program shall address the elements in Module 2A, Section 2A.4.2.1 and shall also include the following additional elements.

### **2D.6.1 General**

**2D.6.1.1** Compliance with acceptable quality assurance and quality control guidelines for microbiology laboratories, such as APHA-AWWA-WPCF guidelines in *Standard Methods for the Examination of Water and Wastewater*, *The Manual of Environmental Microbiology*, or equivalent national guidelines for foreign laboratories.

**2D.6.1.2** To assess precision, intra-analyst analyses shall be completed at a minimum of five (5) percent, or at least one (1) each month samples are received, whichever is greater.

**2D.6.1.3** To assess accuracy, inter-analyst analyses shall be completed at a minimum frequency of five (5) percent or at least one (1) each month samples are received, whichever is greater.



**2D.6.1.4** The laboratory shall use control charts or quality control databases to compare intra- and inter-analyst analysis performance to established control limits.

**2D.6.1.5** The laboratory shall ensure quality control of culture media and analytical reagents per lot number for appropriate sterility, microbial growth and/or analytical reactions. Records shall be maintained. Acceptance criteria shall be documented.

**2D.6.1.6** Acceptance criteria on 5% replicate and duplicate analysis, daily reference slide analysis (spore traps) and monthly reference culture analysis (all culturable FoTs) shall be documented. Acceptance criteria shall include:

- (a) Taxon identification acceptability
- (b) Taxon abundance ranking acceptability
- (c) Count or concentration acceptability determined statistically (quantitative QC analysis only)

#### **2D.6.2 Additional Laboratory Requirements for All Culturable and Fungal Direct Examination Bulk/Surface FoTs**

**2D.6.2.1** The laboratory shall keep routine temperature documentation of refrigerators, freezers and incubators. Acceptance criteria shall be documented.

**2D.6.2.2** The laboratory shall maintain a microbial culture collection of common organisms relevant to the applicable FoT(s). Cultures shall be from recognized sources when possible. Source and date of acquisition for each culture shall be documented. Procedures for maintaining the cultures and using them for training and QC purposes shall be available.

**2D.6.2.3** The culture collection shall be used at least monthly to prepare blind cultures to be used as part of the routine QC program to monitor accuracy in culture identification.

#### **2D.6.3 Additional Requirements for Fungal Direct Examination Air FoTs**

**2D.6.3.1** A slide collection shall consist of field samples with various count levels and genera/groups of spores shall be maintained and used as part of total spore analysis quality control. Each day of analysis, at least one slide from this collection shall be reviewed by each analyst. Analysis shall be consistent with the method for field samples. Slides shall be reviewed on a rotational schedule such that a different slide is reviewed each day until the entire slide collection has been examined. The analysis of these slides shall be incorporated into the daily QC plan. Acceptance criteria for spore concentration(s) for each reference slide shall be stated. The upper and lower control limits shall be statistically calculated based on three (3) standard deviations from the reference slide means.

**2D.6.3.2** For the Fungal Direct Examination Air FoT, the laboratory shall participate in and have documentation of a round robin slide exchange of real samples consistent with the requirements of AIHA-LAP, LLC Policy Module 6. The following are additional requirements:



**2D.6.3.2.1** Analytical data shall include raw counts and final concentrations for each fungal structure observed.

**2D.6.3.2.2** Acceptance criteria shall be determined and take into account organism identification, ranking and quantification.

**2D.6.3.3** The traverse width or field of view to be used in calculations for each microscope shall be documented at least annually, if applicable.

## **2D.7 REPORTING THE RESULTS**

The laboratory's results shall address the elements in Module 2A, Section 2A.5.10 and shall also include the following additional elements:

**2D.7.1** Reports shall include raw counts. See definition of "Raw Count" in Module 9 – Terms and Acronyms.

**2D.7.2** For quantitative results, the analytical sensitivity shall be stated in the final reporting units. See definition of "Analytical Sensitivity" in Module 9 – Terms and Acronyms.

**2D.7.2.1** For analyses utilizing multiple dilutions and/or varying percentages of sample and/or trace analyzed, the applicable analytical sensitivities shall be reported.

## **2D.8 SAFETY, HEALTH, ENVIRONMENTAL AND TRANSPORTATION REGULATIONS**

Laboratories accredited under EMLAP are expected to follow all applicable federal, state, and local regulations regarding safety, health, environment or transportation. Potentially viable microbial waste shall be collected in properly designated biohazard containers and disposed of properly, either by autoclaving, sterilizing, or incinerating, or by contracting with a biohazard waste disposal company. Failure to comply with applicable federal, state and/or local regulations regarding safety, health, environment or transportation may result in suspension or revocation of EMLAP accreditation.