

**Microbiology Expert Committee (MEC)  
Meeting Summary**

**December 11, 2018**

1. Roll Call and Minutes:

Robin Cook, Chair, called the meeting to order at 1:30pm Eastern by teleconference on December 11, 2018. Attendance is recorded in Attachment A – there were 6 members present. Associate Members: Elisa Snyder, Carl Kircher and Mary Robinson.

The minutes from July were distributed by email. These minutes still need to be approved. A motion was made by Patsy to approve the 7-10-18 minutes as written. The motion was seconded by Kasey and unanimously approved.

A motion was made by Kasey to approve the 11-13-18 minutes as written. The motion was seconded by Mike and unanimously approved.

2. Technical Director/Manager

Ilona shared the status of the Quality Systems Expert Committee's work on this topic. They are now looking at leaving the educational requirement in place, but to work on exceptions.

Deb commented that the Drafts she is putting together for review would not currently be accepted by New Jersey. Should we stick with the College Credit hours? Make exceptions for the labs that only engage in limited "simpler" work? That might work. It could be flexible so that every state will accept it.

Mary was on the QS call yesterday and she noted that part of the comments yesterday included whether a lab could have a consultant/contract for at Technical Manager as needed. Her comment is that this is very difficult to document and she would not suggest this. Mary agrees that there should be some minimum decided on. Deb agreed that the consultant route would not be acceptable.

Carl was on the QS call too and provided input ranging from leaving it as the ISO/IEC language through sharing the EPA Region IV "requirements" (should vs must). Florida still needs to meet what Region IV wants to see even though the DW Manual says "should". He also reminded everyone that any new version of a standard needs to be an improvement over the previous version. Whatever the committees decide on this topic, they will need to support it is an improvement.

Robin thinks doing nothing is not an option at this time. There are problems. Under the current 2009 and the 2016 Standard, someone who is doing Fecal Coliform by Quanti-Tray cannot do Enterobacter by Quanti-Tray. It's the same technology.

Patsy asked about adding the technologies instead of methods to the language.

Robin pulled up the current language in the TNI 2016 Standard. The methods listed for someone with an associate's degree are Fecal Coliform, Total Coliform, E. Coli and standard plate count. Enterococci is not in this list. There is a lot more involved in doing Enterobacter by membrane filtration.

Is it a stretch to think the person doing confirmations in Fecal can do the confirmations in Enterobacter. The Technical Manager has to have some background and competency to understand why something didn't grow – incubator, salinity, temperature, bio-salts, etc ...

Robin thinks looking at technologies is the way to go. You should be able to stretch what you know within a technology for other organisms.

Maybe the answer is to rewrite the second paragraph. Municipality labs have people with an operator license and analysts. There are also captured labs.

Robin is also sensitive to the fact that whatever the Committee decides on, it must be auditable.

Deb is willing to work on another DRAFT and have this ready by the next meeting or by the Milwaukee meeting if 1/8/18 is too soon. She will send it out to the Committee when she finishes it.

### 3. Responses for Microbiology TNI Standards Class

Robin shared the questions that came up during the training she did in October and asked for the Committee to help with responses. The responses determined are in Attachment D.

### 4. Membership

The Committee concluded their meeting with a discussion on applications for committee membership. Robin asked all the associate members to step off the call (2:45pm Eastern).

The people rotating off include Robin, Patsy, Deb, Brad, and Dwayne.

Kasey would like to extend Robin's membership on the committee by one year and would like her to stay on as Chair. Kasey will be on maternity leave the start of 2019.

This also gives more time for Robin to work with Kasey to prepare for the next steps towards updating the Standard.

Kasey made a motion to extend Robin's membership on the committee. The motion was seconded by Patsy and it was unanimously agreed to by everyone on the call (Robin, Patsy, Deb, Mike, Kasey, Christabel). Ilona will finish up the vote by email.

*(Addition:*

*The following votes were received by email:*

*Gary - For (1/6/19)*

*Enoma - For (1/6/19)*

*Jessica - For (1/7/19)*

*The motion passed. The CSDP Executive Committee has also approved her continued membership.)*

There are ABs rotating off and Mary Robinson (former original member of the Committee) is applying.

There are a few outstanding issues that need to be dealt with, so the current Committee will be left in place through January 31<sup>st</sup>. Robin will pull all the applications together before the next meeting and email them to the group so new membership can be voted on.

## 5. Action Items

A summary of action items can be found in Attachment B. The action items were reviewed and updated in the table.

## 6. New Business

Need to work on summary for 2018 to present in the Monday morning meeting.

## 7. Next Meeting and Close

The next meeting will be held by teleconference on January 8, 2019 at 1:30pm Eastern.  
*(Addition: 1/8/19 meeting canceled. Next meeting 1/29/19 in Milwaukee.)*

A summary of action items and backburner/reminder items can be found in Attachment B and C.

Robin adjourned the meeting at 2:40 pm Eastern.

Attachment A

**Participants  
Microbiology Expert Committee (MEC)**

| <b>Members</b>  | <b>Affiliation</b>                       | <b>Balance</b> | <b>Contact Information</b>   |
|---|--|----------------|--|
| Robin Cook<br>(Chair) (2019)<br><b>Present</b>                  | City of Daytona Beach<br>EML             | Lab            | <a href="mailto:cookr@codb.us">cookr@codb.us</a>   |
| Patsy Root<br>(2019)<br><b>Present until 2:55pm<br/>Eastern</b> | IDEXX Laboratories,<br>Inc               | Other          | <a href="mailto:patsy-root@idexx.com">patsy-root@idexx.com</a>                             |
| Lew Denny<br>(2021*)<br><b>Absent</b>                           | Flowers Chemical<br>Laboratories – North | Lab            | <a href="mailto:lewdenny@comcast.net">lewdenny@comcast.net</a>                             |
| Jessica Hoch<br>(2019*)<br><b>Absent</b>                        | TCEQ                                     | Other          | <a href="mailto:Jessica.Hoch@Tceq.Texas.Gov">Jessica.Hoch@Tceq.Texas.Gov</a>               |
| Deb Waller<br>(2019)<br><b>Present</b>                          | NJ DEP                                   | AB             | <a href="mailto:debra.waller@dep.nj.gov">debra.waller@dep.nj.gov</a>                       |
| Dwayne Burkholder<br>(2019)<br><b>Absent</b>                    | Pennsylvania DEP                         | AB             | <a href="mailto:dburkholde@pa.gov">dburkholde@pa.gov</a>                                   |
| Michael Blades<br>(2021*)<br><b>Present</b>                     | ERA                                      | Other          | <a href="mailto:mblades@eraqc.com">mblades@eraqc.com</a>                                   |
| Brad Stawick<br>(2019*)<br><b>Absent</b>                        |  | Lab            | <a href="mailto:Brad.stawick@stawicklabbmgt.com">Brad.stawick@stawicklabbmgt.com</a>       |
| Kasey Raley<br>(Vice-chair) (2020*)<br><b>Present</b>           | Eurofins Eaton<br>Analytical, Inc.       | Lab            | <a href="mailto:KaseyRaley@eurofinsUS.com">KaseyRaley@eurofinsUS.com</a>                   |
| Vanessa Soto Contreras<br>(2020*)<br><b>Absent</b>              | Florida DOH                              | AB             | <a href="mailto:Vanessa.SotoContreras@flhealth.gov">Vanessa.SotoContreras@flhealth.gov</a> |
| Gary Yakub<br>(2020)<br><b>Absent</b>                           | Environmental<br>Standards, Inc.         | Other          | <a href="mailto:gyakub@envstd.com">gyakub@envstd.com</a>                                   |
| Enoma Omoregie<br>(2021*)<br><b>Absent</b>                      | NYCDEP                                   | Other          | <a href="mailto:eomoregie@health.nyc.gov">eomoregie@health.nyc.gov</a>                     |
| Christabel Monteiro<br>(2021*)<br><b>Present</b>                | ESC                                      | Lab            | <a href="mailto:cmonteiro@esclabsciences.com">cmonteiro@esclabsciences.com</a>             |
| Ilona Taunton<br>(Program Administrator)<br><b>Present</b>      | The NELAC Institute                      | n/a            | <a href="mailto:Ilona.taunton@nelac-institute.org">Ilona.taunton@nelac-institute.org</a>   |

**Attachment B**

**Action Items – MEC**

|    | <b>Action Item</b>  | <b>Who</b>   | <b>Expected Completion</b>      | <b>Actual Completion</b> |
|----|---|--------------|---------------------------------|--------------------------|
| 1  | Review Method codes and send comments to Robin for Dan Hickman.   | Deb          | TBD                             |                          |
| 19 | Provide EPA interpretation on temperature readings to Ilona. She will have it posted on the website.          | Robin        | 1/31/14                         |                          |
| 74 | Send questions for ABs regarding method codes to Robin.   | ALL          | 3/15/18                         |                          |
| 76 | Provide an update on what has been done with the databases after Jennifer's review and internal EPA meetings. | Jennifer     | 4/10/18                         |                          |
| 78 | Forward link to PDFs on DW website with rule, method and analyte information.                                 | Jennifer     | 3/31/18                         |                          |
| 81 | <i>Addition: Forward response to SIR 331 to Lynn Bradley.</i>   | <i>Robin</i> | <i>11/13/18</i>                 |                          |
| 83 | Send out resumes for all applicants to the committee.   | Robin        | 12/10/18                        | Send before 1/8/19.      |
| 84 | Send out copy of Charter.   | Robin/Ilona  | 12/10/18                        |                          |
| 85 | Send out updated Technical Director Language  | Deb          | 1/8/19 or week before Milwaukee |                          |
|    |   |              |                                 |                          |
|    |   |              |                                 |                          |



## Attachment D: **Questions from Microbiology Webinar – 10/11/18**

Q: Supervisory personnel in microbiology department needs to have a degree in Microbiology or any Bachelor or Arts is acceptable?

A: QS is working on the language.

Q: but DW does not allow modification of SWDA or am i mistaken?

A: Answered during presentation.

Q: When she says internal, that means the lab is designing their own samples for use of DOC?

A: Yes, provided that there are at least a minimum of a blank, a negative, and a positive as part of the make-up for qualitative tests. For quantitative test, there must be at least 4 aliquots of the positive with the results tabulated and compared to one another and within the acceptable limits as determined by the lab. The lab may develop and document another acceptable approach.

Q: Is media expiration based on manufacturer date or preparation date?

A: Answered during presentation.

Q: Can method blanks and p/n controls be substituted for sterility and performance checks at the time of first use or does it have to be done prior to first use?

A: Answered during presentation.

Q: Section 1.7.3.3 This would also require dup counts for SimPlate and multiple tube tests for MPN?

A: Yes, that is correct. Any test where a number is reported will require a duplicate analyst count.

Q: Does the in use also extend to media or standards stored in refrigerator or freezer?

A: Answered during presentation.

Q: For the temperature readings while samples are in the incubator will readings need to be taken overnight?

A: No.

Q: Inhibitory Residue Test - Our lab was told by our state regulatory body that maintaining the soap's CofA, containing inhibitory residue results, is acceptable in lieu of performing the test onsite. Does TNI accept this interpretation?

A: Answered during presentation.

Q: For checking thermal preservation of micro samples, is it acceptable to use a cooler blank (placed on ice before any samples collected) and use that single temperature point for indication of all micro samples in the cooler

A: Answered during presentation.

Q: Remind me what SIR stands for, please?

A: Answered during presentation.

Q: what constitutes a modified method?

A: Any method that is modified beyond the specs of the published method, or that is used to find a different end results, or that is used for a different purpose than in the published method. Micro is a bit trickier to answer. You cannot change media or incubation temp or anything that would modify the response of the target organism is not allowed.

Q: What is the allowable tolerance in terms of sample volume when the sample received appears to be little above or below the mark?

A: Answered during presentation.

Q: 5.2.6 - Jerry said 16 hours of biology and microbiology. Is that 16 hours each, or a combined 16 hours?

A: Combined

Q: speaking of dehydrated media, SM indicates that dehydrated media expires 6 months after first opening the bottle, or manufacturer's expire, whichever is first... is that the general rule for all micro or only if running standard methods?

A: This is a requirement of SM. Typically, those requirements for SM only apply to SM and not any other published methods. If that other method specifically references SM then it would apply.

Q: Can a PT test from a company be used as the DOC for the analyst?

A: Yes, except for the Initial.

Q: Can we do the autoclave timer check with an empty chamber or should it be filled?

A: For the standard, the timer can be done however you like. It is a check of a timing device not an equipment performance. However, if your state or program requires checks under load this will need to be done. The rationale for verifying time is for media prep so you don't ruin it.

Q: How would you do volume checks on re-usable funnels for MF? How often is the volume check required?

A: In my lab I use a volumetric pipet and mark the funnel. The std does not specify but if the mark fades or can't be seen it would need to be redone.



Q: If a laboratory only performs presence/absence and uses colilert 24 hour check is it still ok for a associates degree or two years of successful college and the four hours of microbiology

A: Yes

Q: Why is the requirement of a negative, positive, and blank there for a DOC, but not for the regular analysis? I'm thinking in terms of SM 9222D.

A: A DOC verifies that you can see the correct results so that you distinguish between a positive and a negative. However, for SM 9222 D a blank it required. There are other things happening in the regular analysis that do this but that comes over time.

Q: Does dehydrated media expire 6 months after opening, or on manufacturer's expiration date?

A: Depends on the method. For use in SM tests, it is 6 months after opening. The std does not specify.

Q: Supervisory personnel in microbiology department needs to have a degree in Microbiology or any Bachelor or Arts is acceptable?

A: QS is working on the language.

Q: but DW does not allow modification of SWDA or am i mistaken?

A: Answered during presentation.

Q: When she says internal, that means the lab is designing their own samples for use of DOC?

A: Yes, provided that there are at least a minimum of a blank, a negative, and a positive as part of the make-up for qualitative tests. For quantitative test, there must be at least 4 aliquots of the positive with the results tabulated and compared to one another and within the acceptable limits as determined by the lab. The lab may develop and document another acceptable approach.

Q: Is media expiration based on manufacturer date or preparation date?

A: Answered during presentation.

Q: Can method blanks and p/n controls we substituted for sterility and performance checks at the time of first use or does it have to be done prior to first use?

A: Answered during presentation.

Q: Section 1.7.3.3 This would also require dup counts for SimPlate and multiple tube tests for MPN?

A: Yes, that is correct. Any test where a number is reported will require a duplicate analyst count.

Q: Does the in use also extend to media or standards stored n refrigerator or freezer?

A: Answered during presentation.

Q: For the temperature readings while samples are in the incubator will readings need to be taken overnight?

A: No.

Q: Inhibitory Residue Test - Our lab was told by our state regulatory body that maintaining the soap's CofA, containing inhibitory residue results, is acceptable in lieu of performing the test onsite. Does TNI accept this interpretation?

A: Answered during presentation.

Q: For checking thermal preservation of micro samples, is it acceptable to use a cooler blank (placed on ice before any samples collected) and use that single temperature point for indication of all micro samples in the cooler

A: Answered during presentation.

Q: Remind me what SIR stands for, please?

A: Answered during presentation.

Q: what constitutes a modified method?

A: Any method that is modified beyond the specs of the published method, or that is used to find a different end result, or that is used for a different purpose than in the published method. Micro is a bit trickier to answer. You cannot change media or incubation temp or anything that would modify the response of the target organism.

Q: What is the allowable tolerance in terms of sample volume when the sample received appears to be little above or below the mark?

A: Answered during presentation.

Q: 5.2.6 - Jerry said 16 hours of biology and microbiology. Is that 16 hours each, or a combined 16 hours?

A: Combined

Q: speaking of dehydrated media, SM indicates that dehydrated media expires 6 months after first opening the bottle, or manufacturer's expire, whichever is first... is that the general rule for all micro or only if running standard methods?

A: This is a requirement of SM. Typically, those requirements for SM only apply to SM and not any other published methods. If that other method specifically references SM then it would apply.

Q: Can a PT test from a company be used as the DOC for the analyst?

A: Yes, except for the Initial.

Q: Can we do the autoclave timer check with an empty chamber or should it be filled?

A: For the standard, the timer can be done however you like. It is a check of a timing device not an equipment performance. However, if your state or program requires checks under load this will need to be done. The rationale for verifying time is for media prep so you don't ruin the media by over-cooking it and rendering it useless.

Q: How would you do volume checks on re-usable funnels for MF? How often is the volume check required?

A: In my lab I use a volumetric pipet and mark the funnel. The std does not specify frequency only an initial check, but if the mark fades or can't be seen it would need to be redone.

Q: If a laboratory only performs presence/absence and uses colilert 24 hour check is it still ok for a associates degree or two years of successful college and the four hours of microbiology

A: Yes

Q: Why is the requirement of a negative, positive, and blank there for a DOC, but not for the regular analysis? I'm thinking in terms of SM 9222D.

A: A DOC verifies that you can see the correct results so that you distinguish between a positive and a negative. However, for SM 9222 D a blank is required. There are other things happening in the regular analysis that verify being able to distinguish the difference between a positive and negative reaction but that compilation of data and experience comes over time as the confirmations are done and recorded.

Q: Does dehydrated media expire 6 months after opening, or on manufacturer's expiration date?

A: Depends on the method. For use in SM tests, it is 6 months after opening. The std does not specify.