

LOM03 – Procedures for Reviewing a Report of Examination

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1. Background

- 1.1. The review of all *Reports of Examination*, *Amended Reports of Examination*, Database Hit Notifications, and *Discontinuation of Analysis* must be conducted in a manner that ensures compliance with the requirements of the Department of Forensic Sciences (DFS) *Forensic Science Laboratory (FSL) Quality Assurance Manual (QAM)*, the accreditation standards under ISO/IEC 17025 (current revision), and the applicable supplemental standards set by the FSL's accrediting body.

2. Definitions

- 2.1. For the purposes of this document, the following terms shall have the designated meanings:

AFIS/IAFIS: Automated Fingerprint Identification System/ Integrated Automated Fingerprint System

CODIS: Combined DNA Index System

Critical Finding: An examination result requiring verification by another qualified analyst such as an identification, an association or the allele calls comprising a DNA profile

DFS: Department of Forensic Sciences

DOM: Departmental Operations Manual

DNA: Deoxyribonucleic acid

FSL: Forensic Science Laboratory

LOM: Laboratory Operations Manual

NIBIN: National Integrated Ballistic Information Network

QAM: Quality Assurance Manual

SOP: Standard Operating Procedure

3. Scope

- 3.1. These procedures apply to FSL employees who perform verifications of identifications, associations, and/or other critical findings, as well as technical reviews and/or administrative reviews.

4. Responsibilities

4.1. A **Verifier** will:

- 4.1.1. Be an employee or contract employee currently or previously qualified in the discipline being verified.
- 4.1.2. Conduct an independent examination/review to verify an identification, association or other critical finding.
- 4.1.3. Document the verification.

4.2. A Technical Reviewer will:

- 4.2.1. Be an employee or contract employee currently or previously qualified in the discipline being reviewed who has been deemed qualified to conduct FSL technical reviews.
- 4.2.2. Ensure appropriate examinations have been performed.
- 4.2.3. Confirm all identifications, associations, and/or other critical findings required by the Unit's SOPs have been verified and documented in the FSL case file.
- 4.2.4. Ensure all conclusions are supported by the generated data and/or examination documentation, uncertainty of measurement, when applicable, and are within the limitations of the discipline.
- 4.2.5. Complete the Unit-specific technical review form.
- 4.2.6. Document completion of the technical review once all edits/corrections, if any, have been appropriately addressed by the originator of the file.

4.3. An Administrative Reviewer will:

- 4.3.1. Be an employee or contract employee deemed qualified to conduct FSL administrative reviews.
- 4.3.2. Ensure the report is clear, concise, accurate, complete and written to allow a layperson to understand the contents.
- 4.3.3. Ensure the report does not contain spelling and/or grammatical errors.
- 4.3.4. Verify the technical review has been conducted and documented.

- 4.3.5. Complete the *FSL or Unit specific Administrative Review Form*.
- 4.3.6. Document the administrative review once all edits/corrections, if any, have been appropriately addressed by the originator of the file.

5. Procedures

5.1. General Requirements

- 5.1.1. Refer to Unit-specific SOPs for unit verification requirements.
- 5.1.2. After completion of a case, all case files and a draft of the *Report of Examination, NIBIN Database Hit Notification, AFIS/IAFIS Hit Notification, or Amended Report of Examination* are to be technically and administratively reviewed by appropriately qualified personnel. Reports and supporting documentation (notes, charts, etc.) will be examined to confirm the conclusions drawn are supported by the documentation and are scientifically appropriate.
- 5.1.3. A full technical review of the case file will be completed prior to the administrative review for all *Reports of Examination, NIBIN Database Hit Notifications, AFIS/IAFIS Hit Notifications* and *Amended Reports of Examination*.
- 5.1.4. *Note: Notifications generated by the laboratory that do not contain results/conclusions of a technical nature only require an administrative review. Such notifications include CODIS Hit Notifications and Discontinuation of Analysis.*
- 5.1.5. All *Reports of Examination, Amended Reports of Examination, Discontinuation of Analysis*, and Database Hit Notifications will be administratively reviewed. The documented administrative review indicates that the *Report of Examination, Amended Report of Examination, Discontinuation of Analysis*, or Database Hit Notification has been approved and is authorized for issuance.
- 5.1.6. FSL personnel cannot verify their own findings or technically review or administratively review their own cases and reports/notifications.
- 5.1.7. The verification and technical review must be conducted by individuals who are qualified or have previously been qualified in the specific discipline being reviewed and have been approved to perform the type of review being conducted. The verification and technical review may be performed by the same qualified individual.
- 5.1.8. The administrative review must be conducted by individuals who are

approved to perform administrative reviews. These individuals do not have to be qualified examiners in the specific discipline being reviewed (i.e., Firearms personnel can administratively review Forensic Biology cases, and vice versa). The administrative review should be performed by a different individual than the person who conducted the verification and/or technical review.

5.2. Verification of Identification, Association and/or Other Critical Finding

5.2.1. Confirmation of an identification, association or other critical finding will be conducted by a verifier as an examination, partial examination, comprehensive review or, in some instances, as a limited technical review. Such verifications are typically conducted while the casework analyst's examination is still in progress.

5.2.2. A verifier will perform a verification when an analyst has reached a conclusion based on their examinations or a point in their testing protocol that necessitates verification of the finding as set forth in the Unit-specific SOPs. Alternatively, the verifier will perform a verification/second read of electronic data as set forth in the Unit-specific SOPs. This verification will be performed on the following case evidence and/or information as it applies to the particular examination:

5.2.2.1. Best relevant evidence.

5.2.2.2. Derivative information or evidence.

5.2.2.3. Data.

5.2.2.4. Charts.

5.2.2.5. Images.

5.2.2.6. Analogous information from which the first examiner based the conclusion.

5.2.3. Each unit has a discipline-specific definition of an identification, association and/or other critical finding and the procedures used to perform the verification(s).

5.2.4. Upon completion of the verification, the verifier will document their agreement with the analyst's results in the FSL case file. Documentation includes either the name and initials or the signature of the verifier and the date of the verification.

5.2.4.1. When the analyst and the verifier do not agree with respect to the identification, association or other critical finding, the casework analyst will refer to Section 5.5 of *LOM03 – Procedures for Reviewing a Report*

of Examination. In addition, when applicable, the casework analyst will follow the process for conflict resolution set forth in their Unit QAM.

5.3. Full Technical Case File Review

- 5.3.1. Full technical case file reviews will be conducted by a peer or supervisor currently or previously technically qualified in the discipline and approved to perform technical reviews.
- 5.3.2. The full technical review will be performed on all *Reports of Examination*, *NIBIN Hit Notifications*, *AFIS/IAFIS Hit Notifications* and *Amended Reports of Examination* and the supporting case documentation. The reviewer will use the Unit-specific technical review form when conducting the review and the review will include:
 - 5.3.2.1. Confirmation that the report/notification is on the correct letterhead template.
 - 5.3.2.1.1. Refer to *LOM02 – Procedures for Case Documentation and Report Writing* (current revision) for letterhead requirements.
 - 5.3.2.2. Confirmation that the appropriate examinations have been performed.
 - 5.3.2.3. Determination that the examiner's conclusions are consistent with the documented data, uncertainty of measurement has been addressed, when applicable, and the conclusions are within the limitations of the discipline.
 - 5.3.2.4. Confirmation that there is sufficient supporting documentation.
 - 5.3.2.5. Determination that all identifications, associations and/or other critical findings have been verified and documented in accordance with Unit-specific procedures.
- 5.3.3. Each unit utilizes a Unit-specific technical review form to complete their full technical case file reviews.
- 5.3.4. Upon completion of the full technical review, when all technical issues have been addressed, the reviewer will ensure all applicable fields on the Unit-specific technical review form have been marked 'yes' and will date and sign the form.
- 5.3.5. The technical reviewer will also document their technical review by marking the report in LIMS as "technical reviewed."
- 5.3.6. Either the originator of the file or the technical reviewer (with the approval of the originator of the file) will forward the file for administrative review.

5.4. Administrative Review

- 5.4.1. Administrative reviews are to be conducted only by FSL personnel approved to conduct administrative reviews.
- 5.4.2. An administrative review will be performed on all reports and notifications generated by the FSL personnel, including but not limited to, *Reports of Examination*, Database Hit Notifications, *Discontinuation of Analysis*, and *Amended Reports of Examination*. This review will determine if:
 - 5.4.2.1. The report/notification is clear, concise, accurate, complete and written to allow a layperson to understand the contents.
 - 5.4.2.2. The report/notification is free of any spelling and/or grammatical errors.
 - 5.4.2.3. The case file documentation, including the administrative paperwork, is free of conflicting information/errors, to the extent possible and/or all noted issues have been addressed.
 - 5.4.2.4. The administrative and examination documentation conform to the *DOM10 – Procedures for Handling Evidence and Clinical Specimens*.
 - 5.4.2.5. The case file notes conform to the *LOM01 – Procedures for the Examination of Evidence*, as well as any Unit-specific SOP requirements.
 - 5.4.2.6. The report conforms to the *LOM02 – Procedures for Case Documentation and Report Writing*, as well as any Unit-specific SOP requirements.
 - 5.4.2.7. The technical review has been completed, when appropriate, and properly documented.
- 5.4.3. Upon completion of an administrative review, when all administrative issues have been addressed, the reviewer will ensure all applicable fields on the *FSL or Unit specific Administrative Review Form* have been marked 'yes' and will date and sign the form.
- 5.4.4. The administrative reviewer will also document their administrative review by marking the report in LIMS as "administratively reviewed."
- 5.4.5. Completion of both the administrative and technical reviews signifies approval for the issuance of the *Report of Examination*, *NIBIN Database Hit Notification*, *AFIS/IAFIS Database Hit Notification*, or *Amended Report of Examination* by, or at the direction of, the originator of the report.
 - 5.4.5.1. Completion of the administrative review signifies approval for the issuance of the *CODIS Hit Notification* or *Discontinuation of Analysis*.

- 5.4.6. Release of the report or notification signals the casework analyst to check to ensure all contents of the case file have been captured electronically, as applicable. Either before or after completing this task, it is the casework analyst's responsibility to properly route the case file to ensure the report release date is captured.

5.5. Conflict Resolution

- 5.5.1. Discrepancies identified during the review process shall be discussed between the reporting analyst and reviewer.
- 5.5.2. There may be instances where the analyst and reviewer cannot resolve discrepancies in results obtained or conclusions drawn prior to issuing a final report. If, after discussion and review, the disagreement still remains, the problem will be forwarded to the appropriate Technical Leader/Unit Manager or FSL Director. The Technical Leader/Unit Manager or FSL Director will review the case and proceed as required.
 - 5.5.2.1. This discrepancy and resolution will be documented in the case file or in the LIMS Case Activities.
- 5.5.3. The final decision of the Technical Leader/Unit Manager or FSL Director will stand as the final conclusion for the case, and the final report. The analyst issuing the final report will be responsible for adhering to such decisions when reporting/testifying in accordance with said decisions.

6. Documentation

- 6.1. When generated as a result of these practices, the following will be retained in the FSL case file:
 - 6.1.1. Documentation of verification of all case identifications, associations and/or other critical findings.
 - 6.1.2. Unit-specific Technical Review form.
 - 6.1.3. FSL or Unit specific Administrative Review Form.
 - 6.1.4. Finalized Report of Examination / Amended Report of Examination / Discontinuation of Analysis / Database Hit Notification.

7. References

- 7.1. ISO/IEC 17025 – General Requirements for the Competence of Testing and Calibration Laboratories, International Organization for Standardization, Geneva, Switzerland, (current revisions).
- 7.2. ANAB Supplemental Requirements for Forensic Testing, ANSI-ASQ National

Accreditation Board, Milwaukee, WI, (current revision).

- 7.3. Quality Assurance Standards for Forensic DNA Testing Laboratories, Federal Bureau of Investigation, (current revision).
- 7.4. Forensic Science Laboratory Quality Assurance Manual, (current revision).
- 7.5. Unit-specific SOPs, (current revisions).
- 7.6. DOM10 - Procedures for Handling Evidence and Clinical Specimens, (current revision).
- 7.7. LOM01 – Procedures for the Examination of Evidence, (current revision).
- 7.8. LOM02 – Procedures for Case Documentation and Report Writing, (current revision).