Y = Yes, N = No, NA = Not a If needed notes can be add

Case File Review - FB/DNA

Case File Reviewer:

DNA

| Case Number | |
|---|--|
| Analyst | |
| Batch Analyst (if applicable) | |
| TR | |
| FB Analyst | |
| Hit Report (if applicable) | |
| Case File Review does the report contain: | |
| Title (are Supplemental or Amended Reports Identified) | |
| Date of Report | |
| Dute of Report | |
| Date Evidence Received/date of request | |
| | |
| ID of Methods | |
| Description of evidence/items tested | |
| Description of evidence/items tested | |
| Is it clear that the results apply only to the items tested? | |
| | |
| conclusions/opinions statement on reports | |
| eliminations reported (where applicable) | |
| | |
| is report understandable | |
| | |
| Are conclusions supported by data? (Presence/Absence of data) | |
| Associations clearly identified | |
| · | |
| if conclusions cant be reached is the reason clearly communicated | |
| (Inconclusive results) and documented | |
| Disposition of evidence on report | |
| · | |
| 5 100 | |
| For Hit report Cases | |
| | |
| Date of hit report | |
| Report Clear | |
| | |
| Search report present | |
| | |
| Case File Documentation | |

| initials as appropriate (all forms were required, additions and | |
|---|--|
| cross outs) | |
| | |
| | |
| Admin review and Tech review documented (or review for Hit | |
| notifications) | |
| | |
| Date tested/sampled in documentation (or date of match for hit | |
| notifications) | |
| | |
| | |
| Diagrams of sampling present where applicable | |
| | |
| | |
| Is chain of custody complete? (reviewed by TR or AR) | |
| Is Draft report in case file? | |
| Was the correct version of worksheets used? (verify sampling per | |
| unit - note which reviewed) | |
| contain identity of staff performing work | |
| observations documented at time made | |
| legible, permanent in nature and complete so a second could | |
| evaluate or repeat under same conditions | |
| Instrumental parameters included (if applicable) | |
| If someone else prepares part of case - is analyst initialing all | |
| pages | |
| result of +/- controls documented (if appropriate) | |
| For BODE /Outsource cases | |
| DSS Notification letter states Name and Address where testing | |
| performed? | |
| Documentation for Outsource lab present and initialed by DSS | |
| analyst | |
| Admin review and Tech review documented for DSS notification | |
| memo | |
| Date Reviewed | |
| D. C Notes | |
| Reviewers Notes: | |
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applicable ded at the bottom of this form under reviewers notes.

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