



**PRISM**  
LABORATORIES, INC.

Full Service Analytical & Environmental Solutions

**TTHM/HAA5 - IDSE**  
**Disinfection Byproducts Analysis**

Note: All information must be supplied for compliance credit.

Main Office:  
449 Springbrook Road  
P.O. Box 240543  
Charlotte, NC 28224-0543  
Phone: 704/529-6364  
1/800/529-6364  
Fax: 704/525-0409

WATER SYSTEM ID #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ County: \_\_\_\_\_

Name of Water System: \_\_\_\_\_

Location Where Collected: \_\_\_\_\_

IDSE Sample Type:  Near Entry Point  Average Residence Time  High TTHM  High HAA5

Facility ID No. IDSE Sample Point: IDSE

Location Code: \_\_\_\_\_

Collected By: \_\_\_\_\_  
(Please Print)

Mail Results to (water system representative):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>Collection Date</b>	<b>Collection Time</b>
____/____/____ (MM/DD/YY)	____:____, ____ M (Specify AM or PM)

Phone #: (\_\_\_\_) \_\_\_\_\_

Fax #: (\_\_\_\_) \_\_\_\_\_

Responsible Person's email: \_\_\_\_\_

LABORATORY ID #: \_\_\_\_\_

SAMPLE UNSATISFACTORY  RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT (R.R.L.)	NOT DETECTED (i.e. < R.R.L.) (X)	QUANTIFIED RESULTS*	ALLOWABLE LIMIT
2950	Total Trihalomethanes		0.0010 mg/L	<input type="checkbox"/>	____.____ mg/L	<b>0.080 mg/L</b>
2456	Total Haloacetic Acids		0.0020 mg/L	<input type="checkbox"/>	____.____ mg/L	<b>0.060 mg/L</b>

\*Note: If result exceeds allowable limit, the laboratory must fax analytical results to the State within 48 hours.

	<b>DATE:</b>	<b>TIME:</b>
<b>ANALYSES BEGUN:</b>	____/____/____ (MM/DD/YY)	____:____, ____ M (Specify AM or PM)
<b>ANALYSES COMPLETED:</b>	____/____/____ (MM/DD/YY)	____:____, ____ M (Specify AM or PM)

Laboratory Log #: \_\_\_\_\_

Certified By: \_\_\_\_\_  
(Print and sign name)

COMMENT: \_\_\_\_\_

## Instructions

### TTHM/HAA5 - IDSE

1. THE CLIENT IS RESPONSIBLE FOR COMPLETING ALL INFORMATION ABOVE THE DOUBLE LINE. Failure to complete all the information may result in rejection of the samples. Please print all information and make sure the information is legible.
2. The samples must be collected in the glass bottles supplied by this laboratory. Use the clear bottles for the TTHM samples and the amber for the HAA5s. There is a preservative in the bottles so do not rinse the bottles. Samples must be immediately packed with ice upon collection and be kept at 4.0° C. Samples being shipped must also be on ice. **SAMPLES NOT ADEQUATELY CHILLED UPON DELIVERY TO THE LAB WILL BE REJECTED AND WILL NOT BE TESTED.**
3. Let the water run from the tap at almost full flow for at least five (5) minutes. Reduce the flow, then fill each glass sample bottle slowly (in order to prevent air bubbles from passing through the sample) to just overflowing taking care not to flush out the sample preservative that is already in the bottle. After collecting the sample in the bottle containing the preservative, seal the bottle with the screw cap. There should be no air bubbles present. If air bubbles exist, open the bottle, add a few drops of water and seal again. Shake or agitate by hand for 1 minute.
4. Collect both TTHM and HAA5 samples from an established sampling location within the distribution system at the same location and time. (This established sampling location must be designated as the "Location Code" on the lab form.) Systems must collect the appropriate number and type of samples as outlined in the Stage 2 Disinfectants and Disinfection Byproducts Rule. All distribution samples collected for TTHM/HAA5-IDSE compliance purposes must have the "IDSE Sample Type" marked as either "Near Entry Point," "Average Residence Time," "High TTHM," or "High HAA5."
5. Place the samples and completed sample collection form in the shipping container. Forward all samples to the laboratory immediately after collection to avoid exceeding the allowable holding time to begin the analysis.
6. After the samples are analyzed, regulations require that the laboratory mail the original results of all compliance samples to the Public Water Supply Section (Attention: Data Entry), 1634 Mail Service Center, Raleigh, NC 27699-1634. A copy will be sent to the client, and the client shall retain the copy for at least twelve (12) years.
7. If the form should be returned to the client marked "**Sample Unsatisfactory**," this means another sample must be collected. The COMMENTS section on front of the form will give the reason.
8. Calculation of the Total Trihalomethanes or Total Haloacetic Acids is determined by adding the quantified results of the individual contaminants within each group. A contaminant having a "Not Detected" value is calculated as a "zero." If all the contaminants for either the TTHM or HAA5 are "Not Detected," then the Total will also be marked as "Not Detected."

### IDSE SAMPLE TYPE

<b>Near Entry Point:</b>	A sample collected from a point in the distribution system that represents the water entering the distribution system for compliance monitoring.
<b>Average Residence Time:</b>	A sample collected from a point in the distribution system that represents the water's average residence time for compliance monitoring.
<b>High TTHM:</b>	A sample collected from a point in the distribution system that represents the water's highest expected TTHM levels throughout the year for compliance monitoring.
<b>High HAA5:</b>	A sample collected from a point in the distribution system that represents the water's highest expected HAA5 levels throughout the year for compliance monitoring.