



GENERAL TEST ORDERING AND SPECIMEN COLLECTION INFORMATION – WATER AND ICE SAMPLES

WATER AND ICE SAMPLES:

A. Sample Rejection

Samples are rejected for the following reasons:

- Sample was not in an APL approved Environmental Microbiology water sample bottle (refer to section D.Ordering Supplies)
- No identification number on the bottle or ice jar
- Identification number on the requisition does not match the number on the bottle or ice jar
- Water sample was frozen
- Water/Ice sample was received more than **6 hours after collection without coolant**
- Water/Ice sample was received more than **24 hours after collection (see section F)**
- Date and/or time of collection was not indicated
- Date and time of collection is LATER than the date and time of receipt in the Laboratory
- Sample leaked in transit
- Test request is not related to water quality for human health
- Bacteriological testing of water related to sale of property is requested
- Insufficient amount of sample received
- Insufficient information provided to verify sample
- Sample does not meet acceptance criteria

B. Requisitions:

Ensure accurate completion of the following information to avoid rejection of the sample(s).

Please refer to the example on the page 2.

Additional notes when completing a requisition:

- Check the appropriate "Resample" box if a drinking water is being re-submitted because of a previous coliform contamination
- Non-Drinking Water samples will NOT be accepted from private submitters. This includes pools, hot tubs, sewage and raw water samples that are not being piped into a building.
- Add in additional detail as requires such as study number, Alberta Environment and Parks Reference Number, and other comments, as required.

Handling of requisition:

- Single fold the requisition from top to bottom and insert into the outer pocket of the specimen bag.



Microbiological Water Analysis Requisition																							
Peel and stick this ID label onto sample bottle Sample will be rejected if ID label is not affixed to sample bottle		<div style="border: 2px dashed black; padding: 5px; display: inline-block;">1234567</div>																					
NOTE: Sample will be rejected if date and time of collection are not filled in.		Sample Details																					
<table border="1"> <tr> <th colspan="3">Date of Collection</th> <th colspan="3">Time of Collection</th> </tr> <tr> <td>YY</td> <td>MM</td> <td>DD</td> <td>HR</td> <td>MIN</td> <td>AM/PM</td> </tr> </table>		Date of Collection			Time of Collection			YY	MM	DD	HR	MIN	AM/PM	Water Supply For (Name): ACCESS # (lab assigned) or Feature Code # (First Nations)									
Date of Collection			Time of Collection																				
YY	MM	DD	HR	MIN	AM/PM																		
Water Sample Type (Check ONE box only) Sample will be rejected if more than one box is marked		EAP Approval # (Alberta Environment)																					
Drinking Water <input type="checkbox"/> Treated Public/Communal <input type="checkbox"/> Untreated Public/Communal <input type="checkbox"/> Private Household Well <input type="checkbox"/> Private Household Other <input type="checkbox"/> Ice (unmelted)		Mailing Address City Province Postal Code Phone # (10 digits)																					
Resample Drinking Water (previous sample showed the presence of Coliforms) <input type="checkbox"/> Treated Public/Communal <input type="checkbox"/> Untreated Public/Communal <input type="checkbox"/> Private Household Well <input type="checkbox"/> Private Household Other <input type="checkbox"/> Ice (unmelted)		Collected By: (Print name clearly) Collector's Phone #: (10 digits)																					
Non-Drinking Water <input type="checkbox"/> Pool greater than 30°C (86°F) <input type="checkbox"/> Pool less than or equal to 30°C (86°F) <input type="checkbox"/> Clinical Distilled/Deionized <input type="checkbox"/> Clinical Laboratory Reagent Water <input type="checkbox"/> Post Reverse Osmosis <input type="checkbox"/> Beach		Collection Site (eg. kitchen tap or whirlpool#3) Legal Land Description: (private homeowners only) <table border="1"> <tr> <td>DTIR</td> <td>Section</td> <td>Twp</td> <td>Range</td> <td>Wof_M</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Lot</td> <td>Block</td> <td>Plan</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> </tr> </table>		DTIR	Section	Twp	Range	Wof_M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lot	Block	Plan		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
DTIR	Section	Twp	Range	Wof_M																			
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<input type="checkbox"/>	Lot	Block	Plan																				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																				
Non-Drinking Raw Water <input type="checkbox"/> Ground Water <input type="checkbox"/> Surface Water Lake <input type="checkbox"/> Surface Water River <input type="checkbox"/> Surface Water Other <input type="checkbox"/> Sewage		GPS coordinates: (Private homeowners only) (up to 6 decimal places, see reverse for example) Latitude Longitude																					
Remarks/Requests		Health Agency Name and Address																					

Mandatory: Record Date/Time of sample collection

Mandatory: Sample bottle is to be labeled with this sticker

Submitter information
Complete only the fields that pertain to you. The submitter is the person or organization for whom the water supply is for and who will receive and ultimately be responsible for the report which will be sent from the Health Authority. Examples include: *Jane Doe, Town of Olds, Calgary Grand Hotel – Pool, engineering company, etc.*

Check ONE box ONLY

Collector

Sample information

Private Homeowners only

Name and address of Health Agency, that is nearest to the collection site

C. How to Collect a Water Sample for Bacteriological Analysis

- Refer to the following website for information on how to "Sample Your Water":
- <https://www.albertahealthservices.ca/eph/Page15233.aspx>
- Contact your local Alberta Health Services (AHS) Environmental Health Zone/Agency.
- For Zone/Agency locations and phone numbers, links can be found here: <https://www.albertahealthservices.ca/findhealth/service.aspx?id=1052212>

D. Ordering Supplies

- Use only sample bottles / ice jars and requisition forms available from your local Alberta Health Services (AHS) Environmental Health Zone / Agency.
- Find the closest Zone/Agency location (with phone numbers), to **pick up and drop off bottles**: <https://www.albertahealthservices.ca/findhealth/Service.aspx?id=1083627#contentStart>
- These supplies may also be ordered through the appropriate ProvLab site servicing the area: Edmonton Distribution Centre - Phone 780 407 8971
Calgary Packing room - Phone (403) 944-2583



E. Water and Ice Sample Labeling:

Detach the identification number label from the requisition form and affix to the corresponding sample bottle /ice jar. **Note: Unlabeled** bottles and ice jars **will be rejected**

F. Water and Ice Sample Delivery:

- Routine samples to be delivered to the laboratory between Monday and Friday. Sample(s) sent to the laboratory during the weekends and Statutory Holidays should be for urgent processing only. Please contact the laboratory when shipment of urgency samples are sent.
- Samples received after 16:00 on Fridays will be regarded as "received on the weekend".
- NOTE: Urgent sample(s) that must be submitted after regular hours must be approved by Environmental Public Health and the Environmental Microbiology Program Leader (or Microbiologist on call): Please call the toll free number **1-833-476-4743** to make arrangements. This primarily pertains to samples connected to an event or incident whereby the PHI on call can coordinate with the appropriate Provincial Lab site for the incoming samples.

Drop off samples at or arrange to have samples delivered to your local AHS Environmental Public Health Zone / Agency or to the nearest **ProvLab** site (address locations listed below):

North APL - Provincial Health Lab (ProvLab) - 8440-112 Street EDMONTON AB T6G 2J2 Phone: (780) 407-8925 Fax: (780) 407-8984

Water Sample Inquiries: E-mail pri.waters-edmonton@ahs.ca

- Monday to Sunday - 24 hour/day drop off available
- Enter the University of Alberta Hospital using one of the public access entrances. Security or other facility personnel will be located here. Inform them that you are here to drop off specimen(s) to Microbiology (room 2B4.04) and ask for directions, if needed. Proceed to the Microbiology and drop off sample(s) into the coolers sitting on the marked cart located in the hallway outside the Microbiology specimen receiving window.

South APL - Provincial Health Lab (ProvLab) - 3030 Hospital Drive NW CALGARY AB T2N 4W4
Phone: (403) 944-1215 (x5) Fax: (403) 270-2216

Water Sample Inquiries: E-mail pri.waters-calgarytech@ahs.ca

- Monday to Friday: 0700-2300
- Saturday: 0700-1800
- Sunday/Stat Holidays: 0700-1700
- Specimen(s) drop-offs after 1900 (Monday to Friday ONLY): Use the phone outside the front doors to the laboratory as soon as possible (west entrance) to contact staff.

Ensure delivery to the laboratory as soon as possible. If there is a delay of **more than six hours**, samples **must be** refrigerated (not frozen).

Note: the samples received greater than 24 hours from time of collection will be rejected.

Exception: Recreational beach samples- search for: Water: Natural Recreation (Beach) from the menu in the Guide to Services for more information.

Transport of sample(s) should be in a hard/rigid plastic surface cooler (Styrofoam coolers are NOT acceptable). Frozen cold packs MUST be added to maintain a temperature of 2°C to 8°C until they reach the laboratory. Ensure that return address information is readily available on the cooler so that they can be returned by writing location identifier onto cooler as well as having a reversible address card sleeve securely affixed to a flat surface of the cooler (lid or side). Samples should not be placed in direct contact with frozen cold packs.

Proper Labelling & Packaging of Specimens Submitted by the Public



G. Requests for Examination of Specific Pathogens in water samples (ie. *Salmonella*, *E.coli* O157-H7, *Legionella*, *Giardia*, or *Cryptosporidium*):

Prior to collection and submission of any sample(s) please contact:

Contact the University of Alberta Hospital switchboard at (780) 407-8822 and ask for the Environmental Microbiology Program Lead. If unavailable, please contact the ProvLab Microbiologist/Virologist On Call at your closest ProvLab site in Calgary or Edmonton.

H. Submission of Ice Samples for Analysis:

- Bacteriological analysis of packaged ice will be performed only when authorized by Environmental Public Health personnel. Samples should be submitted in sterile ice collection jars (see section d).