Data Submission Guide for CMDP Disinfection By-Products (TTHM/HAA5)

(reported through EXCEL TEMPLATE)

Document Instructions

The Excel template used for reporting Disinfection By-Product samples has three sections: general ***Sample Information, Chem/Rad Results,*** and ***Field Results and Measurements*** (do not use this section for TTHM/HAA5 reporting). This guidance document describes how to submit information for **TTHM and HAA5 Disinfection By-Product** samples and includes a **Methods Chart** and **examples** of completed sample submissions.

This guidance document highlights the required fields:

- Header fields in **RED** and underlined text are **required** in order to meet federal and state reporting requirements.
- Header fields in **BLUE** and underlined text are *conditionally or situationally required*.
- Header fields in **BLACK text** are not required for a successful data submission.

Sample data will be rejected if the required fields are left blank.

Additionally keep in mind:

- Use drop-down icons (▾) to filter data.
- If you have questions, please contact our CMDP support staff at support@1gec.com.

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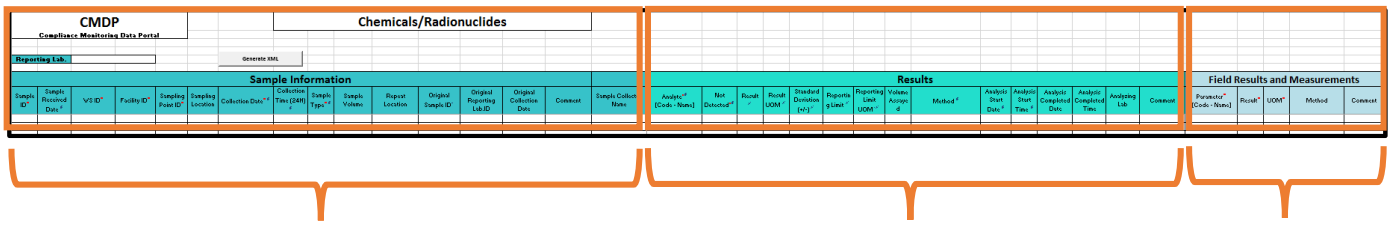


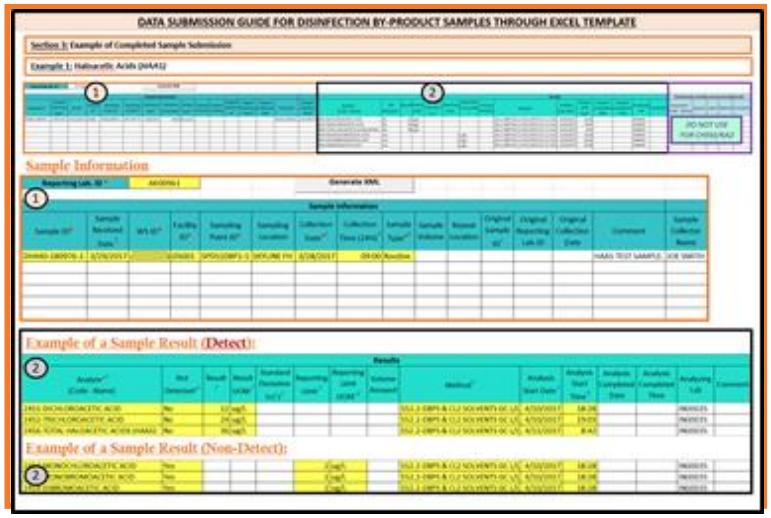
Section 1: Sample Information *(page 2)*

Section 2: Chem/Rad Results *(page 3)*

Section 3: Field Results and Measurements *DO NOT USE FOR TTHM/HAA5*

Methods Chart	
Analysis Method Used	Report this Method in CDMP
524.2	524.2-VOC, GC/MS, P&T, CAPCOLUMN
552.2	552.2-DBPS & CL2 SOLVENTS GC L/L ELECTRON CAPT
552.3	552.3-552.3

Methods Chart on page 3



Section 4: Examples of Completed Sample Submissions *(pages 4-5)*

DATA SUBMISSION GUIDE FOR DISINFECTION BY-PRODUCT SAMPLES THROUGH EXCEL TEMPLATE

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Section 1: Sample Information

CMDP
Compliance Monitoring Data Portal

Chemicals/Radionuclides

Reporting Lab. ID *

Generate XML

Sample Information															
Sample ID*	Sample Received Date f	WS ID*	Facility ID*	Sampling Point ID*	Sampling Location	Collection Date*f	Collection Time (24H) f	Sample Type*f	Sample Volume	Repeat Location	Original Sample ID+	Original Reporting Lab.ID	Original Collection Date	Comment	Sample Collector Name

Reporting Lab. ID: Lab identification number.

Sample ID: Lab sample identification number, limit to 20 characters (numbers, letters, dash/underscore (-_) are allowed).

Sample Received Date: Date sample was received by lab (MM/DD/YY).

WS ID: Public Water System identification number (PWSID).
NOTE: *Each water system name has a unique PWSID number. If the name and number on the work order does not match what is listed in CMDP, investigate to ensure accuracy and consistency.*

Facility ID: Facility identification number where sample was collected.

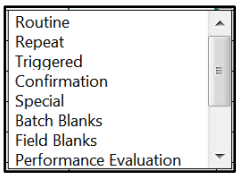
Sampling Point ID: Sample Point identification number related to the facility where the sample was collected.
NOTE: *A PWS can potentially have more than one Sampling Point for TTHMs & HAA5s; selecting the appropriate sampling point is very important for this rule. If the PWS did not provide sufficient information to select the appropriate Sampling Point feel free to contact the DW Program.*

Sampling Location: This field must describe the location where the sample was taken from in the distribution system (i.e., 123 Main Street, Health Clinic, etc.). Keep description succinct (numbers, letters, dash/underscore (-_) only).

Collection Date: Date sample collected (MM/DD/YY).

Collection Time (24H): Time sample collected (HH:MM).

Sample Type: Type of sample to be submitted. From the drop-down menu (pictured below), select the appropriate sample type (i.e., routine, special, etc.).



Sample Volume: Not required (numerical value only).

Repeat Location: Not required.

Original Sample ID: Not required.

Original Reporting Lab. ID: Not required.

Original Collection Date: Not required (MM/DD/YY).

Comment: Optional.

Sample Collector Name: Name of sample collector, report if information is provided.

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Header fields in **BLUE** and underlined text are *conditionally or situationally required*.
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Section 2: Chem/Rad Results

Results														
Analyte*f [Code - Name]	Not Detected*f	Result f	Result UOM f	Standard Deviation (+/-) f	Reporting Limit f	Reporting Limit UOM *f	Volume Assayed	Method f	Analysis Start Date f	Analysis Start Time f	Analysis Completed Date	Analysis Completed Time	Analyzing Lab	Comment

Analyte [Code-Name]: From the drop-down menu, select the individual sample analytes for the results you are submitting. For a successful TTHM/HAA5 sample submittal, use the lists below for the analyte codes of the individual contaminants and the totals (TTHM=2950 and HAA5=2456).

TTHM ANALYTES	
Analysis Code	Analyte Name
2941	CHLOROFORM
2942	BROMOFORM
2943	BROMODICHLORO METHANE
2944	DIBROMOCHLORO METHANE
2950	TTHM

HAA5 ANALYTES	
Analysis Code	Analyte Name
2450	MONOCHLOROACETIC ACID
2451	DICHLOROACETIC ACID
2452	TRICHLORACETIC ACID
2453	MONOBROMOACETIC ACID
2454	DIBROMOACETIC ACID
2456	HAA5

Not Detected: From the drop-down menu, select the appropriate value listed below:
- Contaminant was **Detected** in the analyzed sample = select **No**.
- Contaminant was **Not Detected** in the analyzed sample = select **Yes**.

Result: Enter the appropriate reported result of the sample only if reporting a detect.

Result UOM: From the drop-down menu, select the unit of measure for the sample result as appropriate.

Standard Deviation (+/-): Not required but report if applicable.

Reporting Limit: Enter the appropriate reporting limit of the analyte.

Reporting Limit UOM: From the drop-down menu, select the unit of measure for the reporting limit as appropriate.

Volume Assayed: Not required but report if applicable (numerical value only).

Method: This drop-down list includes methods for ALL chemical/radionuclide analyses and is not filtered by the methods your lab (or subcontracting lab) is certified for. Be sure to verify certification status and select the appropriate method listed in the Methods Chart (shown to the right). Notice that each **Analysis Method Used** by labs is assigned to a specific *reporting code* indicated in the **Report this Method in CMDP** column. Samples will be rejected if users report a code that is not listed on the methods chart.

Methods Chart	
Analysis Method Used	Report this Method in CDMP
524.2	524.2-VOC, GC/MS, P&T, CAPCOLUMN
552.2	552.2-DBPS & CL2 SOLVENTS GC L/L ELECTRON CAPT
552.3	552.3-552.3

Analysis Start Date: Date when lab began analysis (MM/DD/YY).

Analysis Start Time: Time when lab began analysis (HH:MM).

Analysis Completed Date: Not required but report if information is available (MM/DD/YY).

Analysis Completed Time: Not required but report if information is available (HH:MM).

Analyzing Lab ID: If the sample was subcontracted to a different lab for analysis, the analyzing lab identification number is required to be reported here.

Comment: Optional.

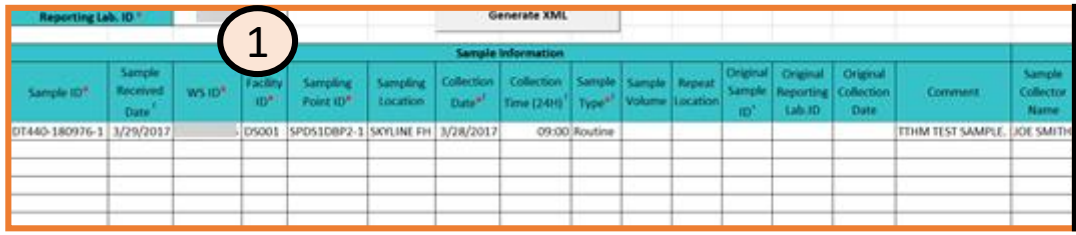
Section 3: Field Results and Measurements

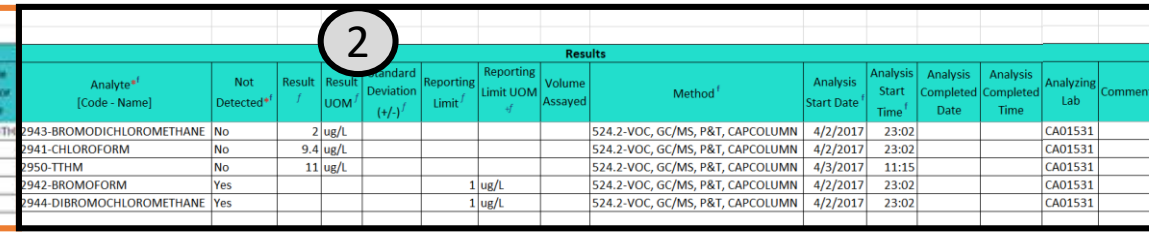
REMINDER! This section (pictured to right) should **NOT** be used for Disinfection By-Product sample submittals. Please leave fields blank.

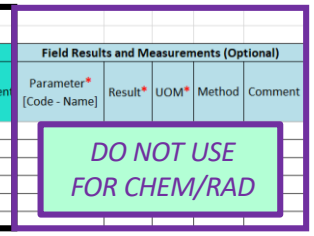
Field Results and Measurements (Optional) (* - Field required for record to exist)				
Parameter* [Code - Name]	Result*	UOM*	Method	Comment

Section 4: Example of Completed Sample Submission

Example 1: Trihalomethanes (TTHM)







Sample Information

Reporting Lab. ID *

Generate XML

Sample Information

Sample ID*	Sample Received Date f	WS ID*	Facility ID*	Sampling Point ID*	Sampling Location	Collection Date*f	Collection Time (24H) f	Sample Type*f	Sample Volume	Repeat Location	Original Sample ID+	Original Reporting Lab.ID	Original Collection Date	Comment	Sample Collector Name
DT440-180976-1	3/29/2017		DS001	SPDS1DBP2-1	SKYLINE FH	3/28/2017	09:00	Routine						TTHM TEST SAMPLE.	JOE SMITH

2 Example of a Sample Result (Detect):

Results

Analyte*f [Code - Name]	Not Detected*f	Result f	Result UOM f	Standard Deviation (+/-)f	Reporting Limit f	Reporting Limit UOM +f	Volume Assayed	Method f	Analysis Start Date f	Analysis Start Time f	Analysis Completed Date	Analysis Completed Time	Analyzing Lab	Comment
2943-BROMODICHLOROMETHANE	No	2	ug/L		1	ug/L		524.2-VOC, GC/MS, P&T, CAPCOLUMN	4/2/2017	23:02			CA01531	
2941-CHLOROFORM	No	9.4	ug/L		1	ug/L		524.2-VOC, GC/MS, P&T, CAPCOLUMN	4/2/2017	23:02			CA01531	
2950-TTHM	No	11	ug/L		1	ug/L		524.2-VOC, GC/MS, P&T, CAPCOLUMN	4/3/2017	11:15			CA01531	

2 Example of a Sample Result (Non-Detect):

2942-BROMOFORM	Yes				1	ug/L		524.2-VOC, GC/MS, P&T, CAPCOLUMN	4/2/2017	23:02			CA01531	
2944-DIBROMOCHLOROMETHANE	Yes				1	ug/L		524.2-VOC, GC/MS, P&T, CAPCOLUMN	4/2/2017	23:02			CA01531	

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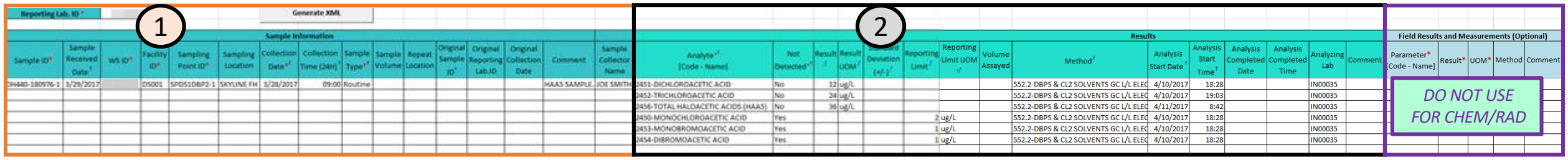
Section 4: Example of Completed Sample Submission

Example 2: Haloacetic Acids (HAA5)



Sample Information

Reporting Lab. ID *		Generate XML														
1	Sample Information															
Sample ID*	Sample Received Date f	WS ID*	Facility ID*	Sampling Point ID*	Sampling Location	Collection Date*f	Collection Time (24H) f	Sample Type*f	Sample Volume	Repeat Location	Original Sample ID+	Original Reporting Lab.ID	Original Collection Date	Comment	Sample Collector Name
DH440-180976-1	3/29/2017		DS001	SPDS1DBP2-1	SKYLINE FH	3/28/2017	09:00	Routine						HAA5 TEST SAMPLE.	JOE SMITH

2 Example of a Sample Result (Detect):

Results													
Analyte*f [Code - Name]	Not Detected*f	Result f	Result UOM f	Standard Deviation (+/-)f	Reporting Limit f	Reporting Limit UOM +f	Volume Assayed	Method f	Analysis Start Date f	Analysis Start Time f	Analysis Completed Date	Analysis Completed Time	Analyzing Lab	Comment
2451-DICHLOROACETIC ACID	No	12	ug/L		1	ug/L		552.2-DBPS & CL2 SOLVENTS GC L/L ELE	4/10/2017	18:28			IN00035	
2452-TRICHLOROACETIC ACID	No	24	ug/L		1	ug/L		552.2-DBPS & CL2 SOLVENTS GC L/L ELE	4/10/2017	19:03			IN00035	
2456-TOTAL HALOACETIC ACIDS (HAA5)	No	36	ug/L		1	ug/L		552.2-DBPS & CL2 SOLVENTS GC L/L ELE	4/11/2017	19:03			IN00035	

2 Example of a Sample Result (Non-Detect):

2450-MONOCHLOROACETIC ACID	Yes				2	ug/L		552.2-DBPS & CL2 SOLVENTS GC L/L ELE	4/10/2017	18:28			IN00035	
2453-MONOBROMOACETIC ACID	Yes				1	ug/L		552.2-DBPS & CL2 SOLVENTS GC L/L ELE	4/10/2017	18:28			IN00035	
2454-DIBROMOACETIC ACID	Yes				1	ug/L		552.2-DBPS & CL2 SOLVENTS GC L/L ELE	4/10/2017	18:28			IN00035	