



**Quality Division Use Only**

Quality Tracking #:	<input type="text" value="2020-040"/>	Classification:	<input type="text" value="Incident"/>
Non-Conformance Level:	<input type="text" value="N/A"/>	Section:	<input type="text" value="Biology/DNA"/>
Date of Discovery:	<input type="text" value="04/17/20"/>	Date of Incident:	<input type="text" value="04/17/20"/>

Forensic Case Number(s), if applicable:	Agency Case Number(s), if applicable:
2019-18785	151737219
2019-19470	157999419
2019-20568	168220019
2019-06525	037709019
2020-00275	001583420
2019-08681	LAB_MOVE_SWIPE_TEST
2018-07438	061443718

**Description of Non-conformance:**

A forensic biology analyst selected the incorrect script on a liquid handling instrument that is used to add samples to a capillary electrophoresis plate. Because the instrument script dictates which samples are added to specific wells on a plate, the samples were plated in the incorrect order. In addition, the analyst failed to conduct the post-denature flash freeze (snap cool) step prior to beginning the capillary electrophoresis run. For both of these reasons the resulting data could not be used.

**Additional Information/Follow-Up:**

The analyst immediately realized that she accidentally omitted the post-denature flash freeze step, manually set up a new plate (without the aid of the liquid handling instrument) and re-ran the samples as described in the SOP. However, the analyst hadn't realized that she had selected the incorrect script. It was only upon review of the data from the first run was it discovered that allelic ladders that were loaded onto uncommon areas of a plate and that they were not labeled as allelic ladders, but rather were labeled as a reagent blank and a sample. The Operations Coordinator indicated that the location of the allelic ladders of this specific run matched the locations used in the outdated script. The Operations Coordinator reviewed the log files and confirmed the wrong script was used.



**Actions Taken:**

There is no technical impact to the involved cases as the analyst immediately realized the lack of post-denature flash freeze and set-up a new plate in accordance with the SOP. A note was added to the Amplification & Load Checklist to indicate the first run could not be used for interpretation purposes. The Operations Coordinator removed the outdated script from the prompts to prevent the use of a script that is not currently approved for use.

**Summary of Root Cause Analysis:**

Note: Incidents are documented for tracking purposes and trend analysis. Root Cause Analysis is not required for incidents.

N/A

Section Manager: Courtney Head

Date: 12/08/20

Division Director: Amy Castillo

Date: 12/09/20

Incidents or Corrective Actions that involve the Biology/DNA section are reviewed by the Technical Leader and CODIS Administrator.

Technical Leader: Cheron Maxwell

Date: 10/28/2020

CODIS Administrator: Jennifer Clay

Date: 11/29/2020

Quality Director: Erika Ziemak

Date Closed: 12/29/20