

ASB Standard 056, First Edition
2024

**Standard for Evaluation of Measurement
Uncertainty in Forensic Toxicology**

DRAFT



ASB
ACADEMY
STANDARDS BOARD

Standard for Evaluation of Measurement Uncertainty in Forensic Toxicology

ASB Approved Xxxxx 2024

ANSI Approved Xxxxx 2024



ASB
ACADEMY
STANDARDS BOARD

410 North 21st Street
Colorado Springs, CO 80904

This document may be downloaded from: www.aafs.org/academy-standards-board

This document is provided by the AAFS Academy Standards Board. Users are permitted to print and download the document and extracts from the document for personal use, however the following actions are prohibited under copyright:

- *modifying this document or its related graphics in any way;*
- *using any illustrations or any graphics separately from any accompanying text; and,*
- *failing to include an acknowledgment alongside the copied material noting the AAFS Academy Standards Board as the copyright holder and publisher.*

Users may not reproduce, duplicate, copy, sell, resell, or exploit for any commercial purposes this document or any portion of it. Users may create a hyperlink to www.aafs.org/academy-standards-board to allow persons to download their individual free copy of this document. The hyperlink must not portray AAFS, the AAFS Standards Board, this document, our agents, associates and affiliates in an offensive manner, or be misleading or false. ASB trademarks may not be used as part of a link without written permission from ASB.

The AAFS Standards Board retains the sole right to submit this document to any other forum for any purpose.

Certain commercial entities, equipment or materials may be identified in this document to describe a procedure or concept adequately. Such identification is not intended to imply recommendations or endorsement by the AAFS or the AAFS Standards Board, nor is it intended to imply that the entities, materials, or equipment are necessarily the best available for the purpose.

Proper citation of ASB documents includes the designation, title, edition, and year of publication. (See Annex I, ASB Guide 001)

*This document is copyrighted © by the AAFS Standards Board, LLC. 2024 All rights are reserved.
410 North 21st Street, Colorado Springs, CO 80904, www.aafs.org/academy-standards-board.*

Foreword

This document was developed to provide the minimum requirements for evaluating measurement uncertainty for quantitative measurements in forensic toxicology testing laboratories and calibration of breath alcohol measuring instruments by breath alcohol programs. Measurement uncertainty is required to ensure confidence, reliability, and proper interpretation of test or calibration results. It is also one of the components used to establish metrological traceability.

The American Academy of Forensic Sciences established the Academy Standards Board (ASB) in 2015 with a vision of safeguarding Justice, Integrity and Fairness through Consensus Based American National Standards. To that end, the ASB develops consensus-based forensic standards within a framework accredited by the American National Standards Institute (ANSI) and provides training to support those standards. ASB values integrity, scientific rigor, openness, due process, collaboration, excellence, diversity, and inclusion. ASB is dedicated to developing and making freely accessible the highest quality documentary forensic science consensus Standards, Guidelines, Best Practices, and Technical Reports in a wide range of forensic science disciplines as a service to forensic practitioners and the legal system.

This document was revised, prepared, and finalized as a standard by the Toxicology Consensus Body of the AAFS Standards Board. The draft of this standard was developed by the Toxicology Subcommittee of the Organization of Scientific Area Committees (OSAC) for Forensic Science.

Questions, comments, and suggestions for the improvement of this document can be sent to AAFS-ASB Secretariat, asb@aafs.org or 401 N 21st Street, Colorado Springs, CO 80904.

All hyperlinks and web addresses shown in this document are current as of the publication date of this standard.

ASB procedures are publicly available, free of cost, at www.aafs.org/academy-standards-board.

Keywords: measurement uncertainty; forensic toxicology; breath alcohol instrument calibration

Table of Contents *(to be updated when the document is finalized)*

1	Scope	1
2	Normative References	1
3	Terms and Definitions	1
4	Background	3
5	Requirements for Measurement Uncertainty for Quantitative Determinations	5
6	Periodic Evaluation of Measurement Uncertainty	13
	Annex A (informative)	15
	Annex B (informative)	28
	Annex C (informative)	42
	Annex D (informative)	49
	Annex E (informative)	56

DRAFT

Standard for Evaluation of Measurement Uncertainty in Forensic Toxicology

1 Scope

This document provides minimum requirements for evaluating measurement uncertainty for quantitative forensic toxicology testing activities as well as calibration of breath alcohol measuring instruments. Specifically, it is intended for the subdisciplines of postmortem forensic toxicology, human performance toxicology (e.g., drug-facilitated crimes and driving-under-the-influence of alcohol or drugs), non-regulated employment drug testing, court-ordered toxicology (e.g., probation and parole, drug courts, child services), and general forensic toxicology (non-lethal poisonings or intoxications) as well as calibration of breath alcohol measuring instruments.

It does not address evaluating measurement uncertainty for breath alcohol subject testing. Nor does it address uncertainty or performance measures for qualitative forensic toxicology testing activities.

2 Normative References

The following references are documents that are indispensable for the application of the standard. The latest edition of the referenced document (including any amendments) applies.

ANSI/ASB Standard 017, *Standard for Metrological Traceability in Forensic Toxicology*^a

ANSI/ASB Standard 036, *Standard Practices for Method Validation in Forensic Toxicology*^a

ANSI/ASB Standard 053, *Standard for Reporting in Forensic Toxicology*^a

ANSI/ASB Standard 054, *Standard for a Quality Control Program in Forensic Toxicology Laboratories*^a

ANSI/ASB Standard 055, *Standard for Breath Alcohol Measuring Instrument Calibration*^a

3 Terms and Definitions

For purposes of this document, the following definitions and acronyms apply.

3.1

analytical run

“batch”

Set of standards, controls, and/or case samples that are contemporaneously prepared and/or analyzed in a particular sequence

3.2

bias, analytical

Estimate of systematic measurement error, calculated as the difference between the mean of several measurements under identical conditions to a known “true” value

^a Available from: <https://www.aafs.org/academy-standards-board>

32 **3.3**33 **calibration** ^{b(Mod)}

34 Operation that, under specified conditions, establishes a relationship between the quantity value and
35 corresponding indications

36 **3.4**37 **calibrator** ^b

38 Measurement standard used in calibration

39 **3.5**40 **certified reference material** ^c41 **CRM**

42 Reference material characterized by a metrologically valid procedure for one or more specified
43 properties, accompanied by a certificate that provides the value of the specified property, its
44 associated uncertainty, and a statement of metrological traceability

45 **3.6**46 **control**

47 Material of known composition that is analyzed along with unknown samples(s) in order to evaluate
48 the performance of an analytical procedure

49 **3.7**50 **limit of detection**51 **LOD**

52 Estimate of the lowest concentration of an analyte in a sample that can be reliably differentiated from
53 blank matrix and identified by the analytical method

54 **3.8**55 **lower limit of quantitation**56 **LLOQ**

57 Estimate of the lowest concentration of an analyte in a sample that can be reliably measured with
58 acceptable bias and precision

59 **3.9**60 **measurand** ^b

61 Quantity intended to be measured

62 **3.10**63 **measurement standard** ^{b(Mod)}

64 Reference, with a stated value and associated measurement uncertainty, used to calibrate or verify
65 measuring instruments or measuring systems

^b Joint Committee for Guides in Metrology (JCGM), International vocabulary of metrology – Basic and general concepts and associated terms (VIM), 3rd ed. (Sèvres, France)

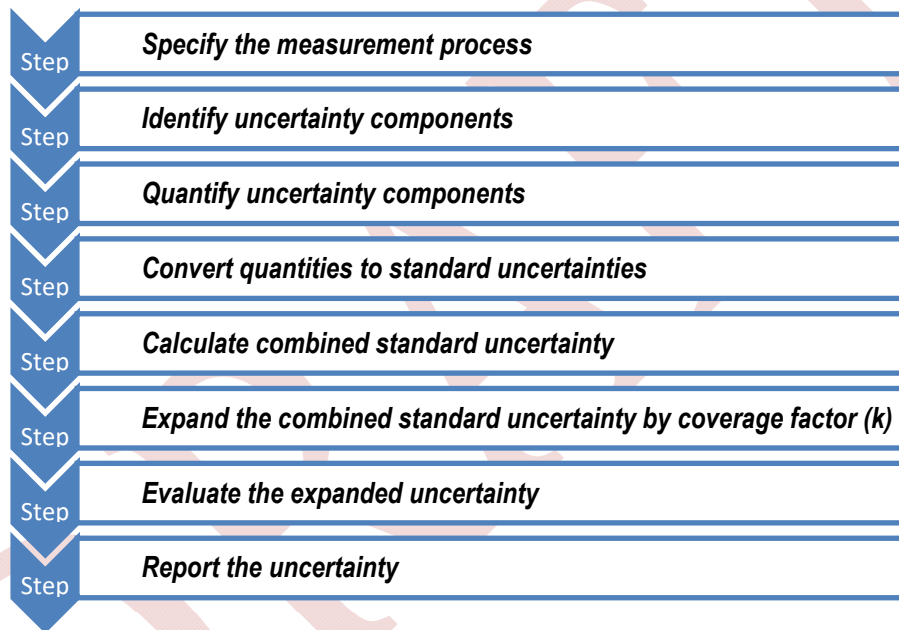
^c International Organization for Standardization (ISO), ISO Guide 30:2015 Reference Materials – Selected Terms and Definitions (Geneva, Switzerland)

66 **3.11**67 **metrological traceability^b**
68 **(measurement traceability)**69 Property of a measurement result whereby the result can be related to a reference through a
70 documented unbroken chain of calibrations, each contributing to the measurement uncertainty71 **3.12**72 **precision^{b(Mod)}**73 Measure of the closeness of agreement between a series of measurements obtained by replicate
74 measurements on the same or similar samples75 **3.13**76 **repeatability^{b(Mod)}**77 Measurement precision under a set of conditions that includes the same measurement procedure,
78 same operators, same measuring system, same operating conditions, same location, and replicate
79 measurements on the same or similar objects over a short period of time80 **3.14**81 **reproducibility^{b(Mod)}**82 Measurement precision under a set of conditions that includes different locations, operators,
83 measuring system, and replicate measurements on the same or similar objects84 **3.15**85 **type A evaluation (of uncertainty)**86 Method of evaluation of uncertainty by the statistical analysis of series of observations (e.g., relative
87 standard deviation of a historical data set of control results)88 **3.16**89 **type B evaluation (of uncertainty)**90 Method of evaluation of uncertainty by means other than the statistical analysis of series of
91 observations (e.g., obtaining the uncertainty associated with a CRM from its certificate of analysis)92 **4 Background**93 Quantitative values obtained from measurement processes have an expected variability. Repeated
94 measurements will result in different values each time a measurement is made, provided the
95 measuring system has sufficient resolution to allow those differences to be seen. Each time a
96 measurement is made, the measured value depends on numerous factors, including the setup and
97 capability of the measuring system, the exact measurement method (procedure), and the person
98 performing the measurement.99 Measurement Uncertainty (MU) is an estimate of the potential variability of a measurement based on
100 the information known about the measurand and the measurement method. The measurement may
101 be part of the test, a calibration method, or the final reported test or calibration result. "Measurement
102 uncertainty does not imply doubt about the validity of a measurement; on the contrary, knowledge of
103 the uncertainty implies increased confidence in the validity of the measurement result."^d

^d SLR Ellison and A Williams (Eds). Eurachem/CITAC Guide: Quantifying Uncertainty in Analytical Measurement, Third edition, (QUAM: 2012 P1) Available from:
<http://www.eurachem.org/index.php/publications/guides>

104 Stakeholders require tests and calibrations to be reliable, accurate, and comparable. MU is an
 105 important parameter describing the confidence and limitations of measurement results. Comparing
 106 quantitative test or calibration results between testing laboratories or evaluating quantitative results
 107 in relation to a legal specification or requirement necessitates knowledge of the MU.

108 The National Institute for Standards and Technology (NIST) has developed an 8-step process for
 109 evaluating and reporting MU (Figure 1).^e This framework established by NIST conforms to the
 110 principles set forth in the Joint Committee for Guides in Metrology (JCGM) Evaluation of
 111 Measurement Data-Guide to the Expression of Uncertainty in Measurement (GUM^f) and is a helpful
 112 reference.



113 **Figure 1—The NIST 8-Step Process for Evaluating and Reporting Measurement Uncertainty**

^e National Institute of Standards and Technology, SOP 29-Standard Operating Procedure for the Assignment of Uncertainty (April 2021). Available from: <https://www.nist.gov/system/files/documents/2019/05/13/sop-29-assignment-of-uncertainty-20190506.pdf>

^f Joint Committee for Guides in Metrology (JCGM) Evaluation of Measurement Data-Guide to the Expression of Uncertainty in Measurement (GUM) (GUM 1995 with minor corrections) (Sevres, France: International Bureau of Weights and Measures [BIPM]-JCGM 100), September 2008. Available from: <http://bipm.org/en/publications/guides/gum.html>

114 **5 Requirements for Measurement Uncertainty for Quantitative Determinations**

115 **5.1 General Requirements**

116 5.1.1 Testing laboratories and breath alcohol programs shall have and apply procedures for
 117 evaluating MU for test methods that produce a quantitative test result and for methods used to
 118 calibrate breath alcohol measuring instruments.

119 5.1.2 Records of MU evaluations shall be maintained.

120 5.1.3 MU shall be evaluated for each measurement process and is specific to the measurement
 121 process. This includes, but is not limited to:

122 5.1.3.1 Each calibration method shall be evaluated separately.

123 5.1.3.2 Each combination of analyte, extraction, and analytical technique shall be evaluated
 124 separately.

125 *NOTE 1: MU specific to each measurement process means not using the largest evaluated MU for more than one*
 126 *analyte within a method or one analyte across methods.*

127 *NOTE 2: Statistical data evaluation may indicate a need to evaluate different matrices separately.*

128 5.1.4 Test and calibration methods for which the MU is evaluated shall meet the minimum
 129 requirements set forth in:

130 a) ANSI/ASB Standard 017, *Standard for Metrological Traceability in Forensic Toxicology.*

131 b) ANSI/ASB Standard 036, *Standard Practices for Method Validation in Forensic Toxicology.*

132 c) ANSI/ASB Standard 054, *Standard for a Quality Control Program in Forensic Toxicology*
 133 *Laboratories.*

134 d) ANSI/ASB Standard 055, *Standard for Breath Alcohol Measuring Instrument Calibration.*

135 **5.2 Step 1—Specify the Measurement Process**

136 The measurand shall be defined.

137 *NOTE: This can be a written statement, a visual diagram, and/or a mathematical expression. Be specific when*
 138 *defining the measurand.*

139 *EXAMPLES:*

140 *Testing of biological samples*

141 Concentration of ethanol (g/100mL) in antemortem whole blood using GC-FID

142 Concentration of oxycodone (mg/kg) in a sample of liver homogenate using LC-MS/MS

143 *Calibration of breath alcohol measuring instruments*

144 Calibration of XYZ model breath alcohol measuring instrument using dry gas certified reference material

145 **5.3 Step 2—Identify Uncertainty Components**

146 Minimum method components that shall be considered, as applicable, in an evaluation of MU include:

- 147 a) certified reference material(s) and calibrations of equipment used to establish metrological
148 traceability;
- 149 b) data from the measurement process (i.e., repeatability, reproducibility or from intermediate
150 measurement conditions);
- 151 c) human factors (e.g., multiple personnel performing the same measurement method, experience,
152 training);
- 153 d) sampling conducted during the measurement method;
- 154 e) sample preparation; and
- 155 f) environmental conditions during the measurement process.

156 **5.4 Step 3—Quantify Uncertainty Components**

157 5.4.1 *General*

158 5.4.1.1 Uncertainty components shall be quantified.

159 5.4.1.2 No fewer than three significant figures shall be carried through all calculations to ensure
160 reporting requirements can be met.

161 5.4.1.3 The method of evaluation, Type A or Type B, shall be determined for each component.

162 *NOTE 1: It is most common to use a mixture of the two methods, where some uncertainty components are*
163 *quantified using a Type A method of evaluation and some uncertainty components are quantified using a Type B*
164 *method of evaluation.*

165 *NOTE 2: Double counting of a component will result in overestimating the measurement uncertainty.*

166 5.4.2 *Minimum Requirement(s) for Type A Evaluations*

167 5.4.2.1 *General*

168 Testing laboratories and breath alcohol programs shall specify in their procedure the source(s) of the
169 Type A data to be used.

170 5.4.2.2 *Testing Laboratories*

171 5.4.2.2.1 *Selection of Type A Data*

172 5.4.2.2.1.1 Validation data may initially be used to evaluate one or more specific Type A
173 uncertainty components.

174 5.4.2.2.1.2 Control data shall be used for the Type A uncertainty component after validation and
175 implementation.

176 5.4.2.2.1.3 Proficiency test data may also be used for a Type A uncertainty component; however, if
177 used, the test(s) shall have established metrological traceability.

178 *NOTE: A consensus result does not establish metrological traceability.*

179 5.4.2.2.1.4 Data used in Type A evaluations shall:

180 a) be representative of the measurand that will be tested;

181 b) be representative of the range (e.g., matrix, detector response over the expected concentration
182 range) of the measurements made;

183 c) be representative of the data generated during ongoing analysis by personnel who have
184 demonstrated competence; and

185 d) be evaluated according to the size and distribution of the statistical sample.

186 *NOTE: Approaches to selecting Type A Data include, but are not limited to:*

187 — *using control data generated since method implementation;*

188 — *using a laboratory-specified number of control data points from the most recent analyses; or*

189 — *using control data from only the current analytical batch in non-routine analyses with limited data points.*

190 5.4.2.2.2 Calculation of the Quantity Value for Type A Data

191 5.4.2.2.2.1 The standard deviation or relative standard deviation shall be calculated using data for
192 each Type A uncertainty component.

193 *NOTE 1: Method performance is typically represented by measurements of control samples taken over multiple
194 batches, each with different calibrations.*

195 *NOTE 2: If multiple replicates of a control level are available per batch, the data from all replicates may be
196 included when calculating the standard deviation or relative standard deviation. Including all data in the standard
197 deviation calculation will bias the standard uncertainty slightly if the data exhibits any batch-to-batch variation
198 but mitigates the need for more complex standard deviation calculations. This would provide an assessment of the
199 Type A uncertainty that is either on target or conservative (i.e., overestimated) for the reported specimen value.*

200 *NOTE 3: If needed, other statistical methods, such as the ANOVA method or random subsampling of the data to
201 select a single instance from each batch, can be used to correct this bias.*

202 5.4.2.2.2.1.1 When the result to be reported for a specimen is either an individual measured value
203 or the average of multiple measured values from a single instrumental batch, the standard deviation
204 or the relative standard deviation shall be used as the Type A standard uncertainty for the reported
205 specimen value.

206 5.4.2.2.2.1.2 When the result to be reported for a specimen is the average of measured values from
207 multiple instrumental batches, the standard deviation or the relative standard deviation divided by
208 the square root of the number of instrumental batches used when averaging the specimen data shall
209 be used (i.e., standard deviation of the mean of multiple batches) as the Type A standard uncertainty
210 for the reported specimen values.

211 5.4.2.2.2.2 Multiple Controls within the Same Method

212

213 Testing laboratories shall evaluate variance of control data (e.g., perform a statistical F-test).

214 5.4.2.2.2.2.1 If consistent variance is demonstrated, testing laboratories shall:

215 a) combine data from all controls analyzed; or

216 b) select data from one specified control (e.g., a control at or near a legal specification).

217 5.4.2.2.2.2.2 If consistent variance is not demonstrated, testing laboratories shall:

218 a) utilize the Type A data from the control producing the largest variance; or

219 b) perform an in-depth evaluation to determine where the variation change occurs and establish an
220 appropriate uncertainty to report for each range.

221 5.4.2.2.2.3 Multiple Instruments and/or Laboratories

222 To calculate a single MU by combining data from multiple instruments and/or in multiple
223 laboratories, control acceptance and reporting criteria shall be the same across all instruments and
224 laboratories.

225 5.4.2.3 Calibration of Breath Alcohol Measuring Instruments

226 5.4.2.3.1 Selection of Type A Data

227 5.4.2.3.1.1 Validation data may initially be used to evaluate one or more specific Type A
228 uncertainty components.

229 5.4.2.3.1.2 Reference material data generated during calibrations shall be used for the Type A
230 uncertainty component after validation and implementation. Reference material data generated
231 during control testing may be used in addition to that generated during calibrations.

232 5.4.2.3.1.3 Proficiency test data may also be used for a Type A uncertainty component; however,
233 the test shall have established metrological traceability if used.

234 *NOTE: A consensus result does not establish metrological traceability.*

235 5.4.2.3.1.4 Data used in Type A evaluations shall:

236 a) be representative of the measurand that will be calibrated;

237 b) be representative of the range of the measurements made;

238 c) be representative of the data generated during ongoing calibrations performed by personnel who
239 have demonstrated competence; and

240 d) be evaluated according to the size and distribution of the statistical sample.

241 *NOTE: Approaches to selecting Type A data include, but are not limited to:*

- 242 — *using reference material data generated since method implementation;*
- 243 — *using a breath alcohol program specified number of reference material data points from the most*
- 244 *recent calibrations; or*
- 245 — *using reference material data from only the current calibration.*

246 5.4.2.3.2 Calculation of the Quantity Value for Type A Data

247 5.4.2.3.2.1 The standard deviation or relative standard deviation shall be calculated using data for
248 each identified Type A uncertainty component.

249 5.4.2.3.2.2 Calibration Method (Multiple Measurement Standards)

250 Breath alcohol programs shall evaluate the variance between measurement standard data by
251 performing a statistical test (e.g., perform a statistical F-test).

252 5.4.2.3.2.2.1 If a consistent variance is demonstrated, breath alcohol programs shall:

- 253 a) combine data from all measurement standards analyzed to calculate a single MU;
- 254
- 255 b) select data from one specified measurement standard (e.g., a concentration at or near a legal
- 256 specification); or
- 257
- 258 c) calculate the quantity value for Type A data at each measurement standard concentration.
- 259

260 5.4.2.3.2.2.2 If a consistent variance is not demonstrated, breath alcohol programs shall:

- 261 a) utilize the Type A data from the measurement standard producing the largest variance;
- 262
- 263 b) perform an in-depth evaluation to determine where the variance changes occur across the
- 264 calibration range and establish an appropriate uncertainty to report based on where these
- 265 variance changes occur; or
- 266
- 267 c) calculate the MU at each measurement standard concentration.

268 5.4.2.3.2.3 Multiple Instruments

269 The calibration method and instrument make/model shall be the same to calculate MU by combining
270 data from multiple breath alcohol measuring instruments.

271 5.4.3 *Minimum Requirements for Type B Evaluations*

272 5.4.3.1 Components requiring a Type B evaluation may include uncertainty associated with a
273 certified reference material, uncertainty of a reference material, and/or uncertainty from equipment
274 calibration (e.g., balance, volumetric flask, pipette, barometer, or thermometer).

275 5.4.3.2 When considering which components to include in the Type B evaluations, testing
276 laboratories and breath alcohol programs shall:

- 277 a) consider all components that are not accounted for in a Type A evaluation;

278 b) ensure components are evaluated according to the assumed distribution of the quantity value;
279 and

280 c) account for all identified and significant systematic bias (see 5.6.2).

281 5.4.4 *Establishing a quantity value for Type B evaluations*

282 5.4.4.1 For component(s) used in the preparation of a calibrator or measurement standard, the
283 components shall be quantified individually or as a group.

284 5.4.4.1.1 If evaluating uncertainty over the full calibration range, testing laboratories and breath
285 alcohol programs shall use the largest standard deviation calculated.

286 5.4.4.1.2 If evaluating the uncertainty for multiple concentration ranges, testing laboratories and
287 breath alcohol programs shall use the largest standard deviation calculated for each concentration
288 range, respectively.

289 5.4.4.1.3 If evaluating the uncertainty at each calibrator or measurement standard concentration
290 separately, testing laboratories and breath alcohol programs shall use the value for the applicable
291 calibrator or measurement standard.

292 *NOTE 1: If the test or calibration method includes the preparation of multiple calibrators or measurement*
293 *standards, the individual components may be quantified individually across all calibrator concentrations (e.g., a*
294 *single component quantity value can be used for the pipette uncertainty that adequately covers the pipettes used to*
295 *prepare all calibrator concentrations) and then 5.4.4.1.1 or 5.4.4.1.2 above may be applied. Alternatively, the*
296 *components may be quantified as a group for each calibrator concentration and then 5.4.4.1.1 through 5.4.4.1.3*
297 *applied.*

298 *NOTE 2: Depending on the measurement process, these components related to calibrator preparation, typically*
299 *requiring a Type B evaluation, may be accounted for by ongoing control data (Type A).*

300 **5.5 Step 4—Convert Quantities to Standard Uncertainties**

301 5.5.1 *General*

302 The testing laboratory or breath alcohol program shall quantify all uncertainty components as a
303 standard uncertainty of the quantity values and in the same measurement unit or in a measurement
304 unit relative to the quantity values.

305 5.5.2 *Type A Evaluations*

306 5.5.2.1 If not already presented as a standard uncertainty, the quantity shall be divided by the
307 appropriate coverage factor (k) to convert to a standard uncertainty.

308 5.5.3 *Type B Evaluations*

309 5.5.3.1 If not reported by the manufacturer as a standard uncertainty, the testing laboratory or
310 breath alcohol program shall use the appropriate probability density function for the component to
311 compute one standard deviation or relative standard deviation associated with the specified
312 distribution.

313 5.5.3.2 If reported by the manufacturer as an expanded uncertainty, the testing laboratory or
 314 breath alcohol program shall divide by the appropriate coverage factor (k) to arrive at a standard
 315 uncertainty.

316 **5.6 Step 5—Calculate the Combined Standard Uncertainty**

317 5.6.1 *General*

318 The testing laboratory or breath alcohol program shall calculate the combined standard uncertainty
 319 using the uncertainty contributors' quantity values, utilizing the root sum of the squares formula or
 320 the Monte Carlo^g method.

321 5.6.1.1 A justification shall be documented if any uncertainty component is excluded from the
 322 combined standard uncertainty.

323 5.6.2 *Evaluation of Bias*^h

324 5.6.2.1 Measurement accuracy encompasses both precision and bias. A measurement is more
 325 accurate when it has less bias and greater precision. The GUM states, "It is assumed that the result of
 326 a measurement has been corrected for all recognized significant systematic effects and that every
 327 effort has been made to identify such effects." An evaluation of bias may not always be possible as one
 328 or more controls prepared with metrological traceability, having a known reference value and
 329 uncertainty, is required to evaluate bias.

330 5.6.2.2 Bias evaluation shall be performed whenever possible.

331 5.6.2.3 The general approach to bias evaluation shall:

332 a) Determine if bias is present by comparing measurement standard or control data to reference
 333 values with established metrological traceability;

334 b) Calculate the combined uncertainty without considering the relevant bias; and

335 c) Compare the bias with the combined standard uncertainty.

336 1) Where the bias is less than the combined standard uncertainty, $\text{bias} < u_c$, the bias is viewed as
 337 insignificant and may be neglected or included as a component in the uncertainty evaluation.

338 2) Where the bias is greater than or equal to the combined standard uncertainty, $\text{bias} \geq u_c$, it is
 339 considered significant and additional action shall be taken; see 5.6.2.4 and 5.6.2.5.

340 5.6.2.4 Testing laboratories shall address significant bias in one of the following ways:

^g Joint Committee for Guides in Metrology (JCGM) Evaluation of Measurement Data-Guide to the Expression of Uncertainty in Measurement (GUM)-Supplement 1-Propagation of distributions using a Monte Carlo Method (Sevres, France: International Bureau of Weights and Measures [BIPM]-JCGM 101:2008], September 2008. Available from: https://www.bipm.org/utis/common/documents/jcgm/JCGM_101_2008_E.pdf

^h Section 3.2.5 of NIST SOP 29 (2019)

- 341 a) modify the method to reduce the bias until it is no longer significant and the expanded
342 uncertainty of the method remains fit for purpose;
- 343 b) correct the measurement result for the bias, including the uncertainty of the correction in the
344 evaluation of uncertainty. Both the observed measurement result and the corrected measurement
345 result with the MU shall be reported;
- 346 c) report the measurement result and the expanded MU with bias included; or
- 347 d) report the observed measurement result, the MU, and the bias.

348 5.6.2.5 Breath alcohol programs shall address significant bias in one of the following ways:

- 349 a) modify the method to reduce the bias until it is no longer significant and the expanded
350 uncertainty of the method remains fit for purpose;
- 351 b) report the measurement result and the expanded MU with bias included; or
- 352 c) report the observed measurement result, the MU, and the bias.

353 5.7 Step 6—Calculate the Expanded Uncertainty

354 5.7.1 A coverage factor (k) shall be determined using a Student's t -distribution based on the
355 degrees of freedom ($n-1$) to provide the desired confidence level.

356 5.7.2 The minimum coverage probability for all quantitative test results and calibration results
357 shall be 95.45 %.

358 5.8 Step 7—Evaluate the Expanded Uncertainty

359 5.8.1 A determination of whether the calculated measurement uncertainty is acceptable shall be
360 made by the testing laboratory or breath alcohol program.

361 5.8.2 The evaluation of acceptance, as applicable,
362 shall consider:

- 363 a) stakeholder interests;
- 364 b) legal requirements;
- 365 c) the relationship between the reported test or calibration quantitative value and the expanded
366 MU; particular consideration shall be taken around the LLOQ/LOD; and

367 *EXAMPLE: An expanded MU of 0.01 ng/mL for a method with an LLOQ of 0.01 ng/mL would prompt the*
368 *testing laboratory or breath alcohol program to reevaluate the LLOQ.*

- 369 d) the relationship between the control limits for the method and the expanded measurement
370 uncertainty.

371 *EXAMPLE: Control limits of ± 20 % for a method with expanded MU of 10 % (95.45 % coverage probability).*
372 *For any single analytical batch, this control limit would allow a variation of up to 20 % which exceeds the*

373 *stated expanded MU for the method and would prompt the testing laboratory or breath alcohol program to*
374 *reevaluate the control limits.*

375 **5.9 Step 8—Report the Expanded Uncertainty**

376 5.9.1 For testing laboratories, MU reporting shall be in accordance with ANSI/ASB Standard 053,
377 *Standard for Reporting in Forensic Toxicology.*

378 5.9.2 For breath alcohol programs, the MU shall be reported as part of the calibration result.

379 5.9.3 When the MU is reported:

380 5.9.3.1 For testing laboratories, the MU shall be reported as an expanded uncertainty and include
381 the coverage probability.

382 5.9.3.2 For breath alcohol programs, the MU shall be reported as an expanded uncertainty and
383 include the coverage factor, *k*, and the coverage probability.

384 5.9.3.3 The measurement result shall include the measured quantity value, *y*, along with the
385 associated expanded uncertainty, *U*. It should be reported as $y \pm U$, where *U* is consistent with the
386 units of *y*. Specific applications may warrant using a different format than $y \pm U$.

387 5.9.3.4 The expanded uncertainty should be reported to at most 2 significant figures unless the
388 testing laboratory or breath alcohol program has a documented rationale to report beyond 2
389 significant figures.

390 5.9.3.5 Rules for rounding the expanded uncertainty shall be defined by the testing laboratory or
391 breath alcohol program.

392 5.9.3.6 The rounded expanded uncertainty shall be reported using the same number of decimal
393 places as the measurement result unless a legal specification specifies how the result will be reported.
394 Rules for rounding or truncating the measurement result shall be defined by the testing laboratory or
395 breath alcohol program.

396 5.9.3.7 Testing laboratories shall report the respective measurement uncertainty for each analyte
397 within a method.

398 *NOTE: Combining the MU across multiple analytes or methods would lead to an overestimation of the MU, which*
399 *does not meet the intent of a measurement uncertainty evaluation.*

400 5.9.3.8 For testing laboratories, if a significant bias is identified and the action taken is as described
401 in 5.6.2.3 b) or c), this shall be clearly communicated.

402 **6 Periodic Evaluation of Measurement Uncertainty**

403 **6.1** The testing laboratory or breath alcohol program shall set the interval for reviewing and
404 recalculating a method's MU and shall retain records supporting the decision.

405 **6.2** For both Type A and Type B uncertainty components included in the MU calculation, the
406 decision shall consider:

- 407 a) the frequency with which one of the components changes;
- 408 b) the frequency with which the testing or calibration method is performed;
- 409 c) the magnitude of a change in a component in relationship to the calculated MU;
- 410 d) subsequent sources of Type A data (e.g., changes to personnel, additional instrumentation);
- 411 e) a change in the measurement process; and
- 412 f) any testing laboratory or breath alcohol program administrative decision such as a set time
413 interval.

414 **6.3** Any recalculation of the measurement uncertainty shall meet all requirements of this standard.

415

416

DRAFT

417
418

Annex A (informative)

419

Concentration of Ethanol in an Ante-mortem Blood Specimenⁱ

420 Test Method Information

421 Multiple personnel were trained and qualified to use the laboratory's method to determine ethanol
422 concentration in ante-mortem blood specimens. All personnel use the same equipment for this test
423 method. This includes a pipette diluter that delivers the specified sample volume together with a
424 specified volume of aqueous internal standard.

425 The test method relies on dual-column gas chromatography with two flame ionization detectors. The
426 quantitative measurement is determined from one of the two columns. Samples are introduced to the
427 gas chromatograph via a headspace autosampler.

428 Calibrators are used to generate a calibration curve with each analytical batch. They are certified
429 reference materials (CRMs) and span the reportable concentration range (e.g., 0.020 g/dL to 0.400
430 g/dL). The CRMs are not altered before use (i.e., not diluted). Method validation indicated that the
431 proper calibration model was an unweighted linear regression.

432 Measurement assurance is achieved through the use of control (QC) samples. These include a
433 quantitative blood matrix control prepared by the laboratory at approximately 0.080 g/dL and CRMs
434 at low, medium, and high concentrations (obtained from a different supplier than the CRMs used as
435 calibrators). As with the CRMs used as calibrators, those used as QC samples are not altered before
436 use. Consistent variance (homoscedasticity) was observed between all controls.

437 Test specimens are analyzed in two separate batches. The average of the two measurement results is
438 reported; however, the procedure requires that the individual measurements be no more than 5%
439 from the average or the analyses are repeated.

440 Calibrators, QC samples, and test samples are aliquoted in one instance using the same equipment.

441 Metrological Traceability

442 The traceability of this measurement process is established through the calibrators used to generate
443 the calibration curve on the measuring system and through the calibration of other equipment used
444 in the measurement process.

445 All CRMs have been purchased from a Reference Material Producer that meets the ANSI/ASB
446 Standard 017, *Standard for Metrological Traceability in Forensic Toxicology*.

447 The external calibration of the pipette diluter is performed by calibration laboratories that meet the
448 ANSI/ASB Standard 017, *Standard for Metrological Traceability in Forensic Toxicology*.

ⁱ An evaluation of measurement uncertainty is specific to the metrological traceability established for the measurement, the measurement assurance processes in place, the laboratory test method, the laboratory facility, etc. Therefore, the following is only an example for evaluation and revision by a laboratory after considering the elements specific to that laboratory.

449 **Measurement Assurance**

450 The laboratory prepared the quantitative blood matrix control to a concentration of approximately
 451 0.080 g/dL. It is made in a large batch, packaged, and stored in a manner that provides a long shelf-
 452 life for the control. The expected concentration is determined in-house through repeat
 453 measurements.

454 The CRMs used for QC samples at low, medium, and high concentrations were purchased from a
 455 supplier different from the CRMs used as calibrators.

456 The QC samples are used to ensure the validity of the test method across the concentration range. The
 457 CRM QC samples are also used to verify the calibration curve and to evaluate the method's bias on an
 458 ongoing basis.

459 **Step 1—Specify the measurement process**

460 As a written statement:

461 *“The Concentration of Ethanol in Ante-Mortem Blood using [the validated laboratory procedure]”*

462 **Step 2—Identify uncertainty components**

463 The following list of possible contributors to the uncertainty in this method was identified by the
 464 laboratory:

465 Personnel

466 — Inter-personnel variation in sample preparation and measurements

467 — Training

468 — Experience

469 Calibrators

470 — CRM -uncertainty in the stated reference value

471 — Matrices of calibrators and test specimens

472 Control Samples

473 — CRM - second source; uncertainty in the stated reference value

474 — Matrix control - stability

475 Internal Standard Preparation

476 — Components:

477 — NaCl - reagent grade

- 478 — n-propanol – reagent grade
- 479 — Concentration – equipment used to prepare (balance, volumetric flask)
- 480 Preparation of Aliquots of Calibrators, Control Samples and Measurand
- 481 — Homogenization
- 482 — Test Specimens – mixing
- 483 — Matrix control – mixing
- 484 — Temperature
- 485 — All calibrators, control samples, and the test specimens are brought to room temperature
- 486 — Variation in the time allowed to reach room temperature
- 487 — Variation in room temperature at different times of year
- 488 — Pipette diluter
- 489 — Volume of sample and volume of internal standard
- 490 — Calibration uncertainty or laboratory specification to verify calibration status
- 491 — Headspace vials
- 492 — Crimping action
- 493 — Material of vial and stopper
- 494 — Time between replicate sampling of test specimens
- 495 Analysis
- 496 — Instrument parameter settings (e.g., oven temperature(s), gas flow, split ratio, aging of the
- 497 chromatographic column, autosampler syringe, autosampler precision, headspace equilibration
- 498 time, headspace equilibration temperature)
- 499 — Interference from the matrix
- 500 — Interference from reagents
- 501 — Interference from other compounds
- 502 — Stability of sample(s) from preparation through analysis
- 503 — Instrument precision

504 — Systematic instrumental variation within an analytical batch

505 Data Processing

506 — Calibration model

507 — Integration parameters

508 — Processing algorithms

509 *NOTE: This list of uncertainty components to be considered could also be compiled into a fishbone diagram or any*
510 *other format of the laboratory's choosing.*

511 *NOTE: A laboratory may identify different uncertainty components when evaluating their specific measurement*
512 *process.*

513 **Step 3—Quantify uncertainty components**

514 The laboratory has existing data from the measurement process.

515 — The calibration model was determined during method validation and was shown using a
516 statistical test to have consistent variance across the linear range. Therefore, the laboratory will
517 evaluate a single measurement uncertainty to represent the entire reportable concentration
518 range.

519 — Each analytical batch includes one or more independently prepared samples of the blood matrix
520 control. This blood matrix QC sample is prepared to have an ethanol concentration of
521 approximately 0.080 g/dL. All personnel have made measurements using this blood matrix QC
522 sample (across multiple lots). Pre-defined criteria for acceptable performance are based on
523 historical data across multiple lots from the last 2 years. To date, the laboratory has had more
524 than 100 measurements of the blood matrix QC sample since validation.

525 — The laboratory also has data from three certified reference materials that were used as control
526 samples. The ethanol concentration of the CRM QC samples spans the reportable concentration
527 range. The primary use of the CRM QC samples is to evaluate bias in the measurement method,
528 but these samples also provide additional evaluation of several uncertainty components.

529 Table A.1 shows the individual uncertainty components and how they will be evaluated.

530

531

Table A.1—Method of Evaluation of Uncertainty Components

Uncertainty Component	Method of Evaluation
Personnel	
Inter-personnel variation	Adequately represented by the Type A Evaluation of process reproducibility data (Blood Matrix QC Sample).
Training	Adequately represented by the Type A Evaluation of process reproducibility data (Blood Matrix QC Sample).
Experience	Adequately represented by the Type A Evaluation of process reproducibility data (Blood Matrix QC Sample).
Calibrators	
CRM – uncertainty in the stated reference value	Type B Evaluation
Matrices of calibrators and test specimens	Initially evaluated during method validation, it was determined to be insignificant and, therefore, not included in the uncertainty evaluation.
Control Samples	
CRM – second source; uncertainty in the stated reference value	The primary use is to evaluate bias. The bias evaluation will be done after the calculation of combined standard uncertainty.
Matrix control - stability	Adequately represented by the Type A Evaluation of process reproducibility data (Blood Matrix QC Sample).
Internal Standard Preparation	
Components: NaCl – reagent grade n-propanol – reagent grade	The measurement result will only be impacted by the volume of the internal standard added to each sample (i.e., variation due to pipette diluter).
Concentration- equipment used to prepare (balance, volumetric flask)	Procedural requirement to use the same lot of Internal Standard for all samples in an analytical batch. The measurement result will only be impacted by variation in the volume of the internal standard added to each sample (i.e., variation due to pipette diluter).
Preparation of aliquots of Calibrators, Control Samples, and Test Specimens	
Homogenization – mixing	Initially evaluated during method validation, it was determined to be significant; therefore, it was controlled through the procedure administrative requirement for agreement of replicates (Type B Evaluation).
Temperature – all calibrators, control samples, and the measurand are brought to room temperature Variation in the time allowed to reach room temperature Variation in room temperature at different times of the year	Partially quantified in Type A Evaluation of process reproducibility data - blood matrix QC sample and partially through the procedure administrative requirement for agreement of replicates (Type B Evaluation).

532

Pipette diluter: Volume of sample, volume of internal standard, and dilution Calibration uncertainty or laboratory specification to verify calibration status	Type B Evaluation
Pipette diluter: Variation in use by multiple personnel	Adequately represented by the Type A Evaluation of process reproducibility data (Blood Matrix QC Sample).
Headspace vials: Crimping Material of stopper	Adequately represented by the Type A Evaluation of process reproducibility data (Blood Matrix QC Sample).
Time between replicate sampling of test item	Controlled through the procedure administrative requirement for agreement of replicates (Type B Evaluation).
Analysis	
Instrument parameter settings (e.g., oven temperature(s), gas flow, split ratios, aging of chromatographic column, autosampler syringe, autosampler precision, headspace equilibration time, headspace equilibration temperature, etc.)	Adequately represented by the Type A Evaluation of process reproducibility data (Blood Matrix QC Sample).
Interference from the matrix	Duplicate listing of component – see Calibrators section above.
Interference from reagents	This component is not an uncertainty component but is a quality control concern. The laboratory analyzes a matrix blank that contains no analyte but does evaluate all reagents used in the analytical method. The laboratory procedure specifies acceptable criteria for this control sample.
Interference from other compounds	Initially evaluated during method validation and determined to be insignificant, therefore not included in the uncertainty evaluation.
Stability of sample(s) from preparation through analysis	Adequately represented by the Type A Evaluation of process reproducibility data (Blood Matrix QC Sample) and through the procedure administrative requirement for agreement of replicates (Type B Evaluation).
Instrument precision	Adequately represented by the Type A Evaluation of process reproducibility data (Blood Matrix QC Sample).
Systematic instrumental variation within an analytical batch	Adequately represented by the Type A Evaluation of process reproducibility data (Blood Matrix QC Sample) and partially through the procedure administrative requirement for agreement of replicates (Type B Evaluation).
Data Processing	
Calibration model	Adequately represented by the Type A Evaluation of process reproducibility data (Blood Matrix QC Sample and CRMs used as QC).
Integration parameters	Adequately represented by the Type A Evaluation of process reproducibility data (Blood Matrix QC Sample).
Processing algorithms	Adequately represented by the Type A Evaluation of process reproducibility data (Blood Matrix QC Sample).

533

534

535 **Type A Evaluation of uncertainty components**536 **Measurement Process Reproducibility—Blood Matrix control sample**

537 The number of observations of the blood matrix QC sample in this example exceeds 100. The statistic
538 that will be calculated is the percent relative standard deviation.

539 To begin, the mean (average) and standard deviation of the blood matrix QC sample values will be
540 calculated.^j

541 The mean is calculated as:

$$542 \quad \bar{x} = \frac{1}{n} \sum_{i=1}^n x_i = \frac{(x_1 + x_2 + x_3 + \dots + x_n)}{n}$$

543 The mean of the reproducibility data in this example is 0.0798 g/dL.

544 The standard deviation is calculated as:

$$545 \quad s = \sqrt{\frac{\sum_{i=1}^n (x_i - \bar{x})^2}{n - 1}}$$

546 The standard deviation of the reproducibility data in this example is 0.0027 g/dL

547 Relative Standard Deviation (RSD) is calculated as:

$$548 \quad \text{RSD} = \frac{s}{\bar{x}}$$

$$549 \quad \% \text{ RSD} = \text{RSD} \times 100 \%$$

550 The %RSD of the reproducibility data in this example is:

$$551 \quad \text{RSD} = \frac{0.0027 \text{ g/dL}}{0.0798 \text{ g/dL}} = 0.0338$$

$$552 \quad \% \text{ RSD} = 0.0338 \times 100 = 3.38 \%$$

553 **Type B Evaluation of uncertainty components**554 **Interference from the matrix**

555 The laboratory evaluated matrix effects during method validation, which resulted in the test method
556 incorporating a dilution factor using the pipette diluter. Dilution of the sample, in combination with

^j For the readability of the example, the display of digits used in all calculations was abbreviated. Best practice is to include and carry all digits through all calculations and only round the reported value and its uncertainty to the proper number of significant figures.

557 the procedural requirements to mix the test item, minimizes matrix effects. The laboratory
 558 acknowledges that it is impossible to evaluate all variations in the test item matrix during method
 559 validation; therefore, the test method does include a blood matrix QC sample and a requirement for
 560 agreement between replicate samples to quantify the impact of the matrix on the measurement.

561 *NOTE: The laboratory procedural requirement for replicate agreement is an example of an administrative control*
 562 *that restricts variation in the measurement method. It is up to a laboratory to determine if such an administrative*
 563 *control will be used. The decision may be based on, but not limited to, knowledge of the measurement process, the*
 564 *impact of repeat analysis on cost and process efficiency, and the required expanded uncertainty. Measurement*
 565 *data may sometimes exceed the administrative limit but may not be considered a statistical outlier, depending on*
 566 *its magnitude.*

567 The laboratory procedure requires that two aliquots be taken from the homogenized test item. The
 568 measured ethanol concentrations of the two aliquots must be within $\pm 5\%$ of the average, or the
 569 analysis is repeated.

570 The two uncertainty components – process reproducibility and interference from the matrix –
 571 quantify several of the same uncertainty components. The matrix control, over a longer period of
 572 time, holds the impact from the matrix constant while the effects from equipment, calibration,
 573 operators, and laboratory environmental conditions vary. The replicate samples of the test item
 574 provide information on the test item matrix and a short-term evaluation of the effect from
 575 equipment, calibration, operators, and the laboratory environment.

576 **Calibrators: Uncertainty in the reference value**

577 The laboratory reviewed the calibration certificates from all CRMs used for the calibration curve. The
 578 greatest uncertainty is 0.000233 g/dL for the 0.010 g/dL CRM.

579
$$\text{Relative uncertainty} = \left(\frac{0.000233 \text{ g/dL}}{0.010 \text{ g/dL}} \right) * 100 = 2.33\%$$

580 **Pipette Diluter**

581 The laboratory has set internal criteria for combined aliquots from both syringes: $\pm 3\%$ for the
 582 internal standard syringe and $\pm 3\%$ for the sample syringe. This helps ensure the proper functioning
 583 of the pipette diluter. It is noted that $\pm 3\%$ is greater than the specifications for calibration used by
 584 the external calibration laboratory. Additionally, the procedure to ensure proper functioning is
 585 performed quarterly compared to the external calibration, which is performed annually. Therefore,
 586 the laboratory criteria of $\pm 3\%$ for each syringe will be used to quantify variability for this uncertainty
 587 component.

588 **Step 4—Convert quantities to standard uncertainties**

589 **The measurement unit**

590 In this example, the relative uncertainty is expressed as a percentage.

591

592 **Type A Evaluation of uncertainty components**

593 **Measurement Process Reproducibility Data**

594 Test specimens are sampled in duplicate, analyzed in two separate batches and the laboratory
 595 procedure for the reported ethanol concentration is to average the two results. Therefore, the %RSD
 596 of the mean is calculated by taking the %RSD of the measurement process and dividing by the square
 597 root of the number of measurements averaged to generate the reported ethanol concentration.

598 The %RSD of the reproducibility data in this example is 3.38 %

599 The mathematical expression for %RSD of the mean:

600
$$\%RSD_{\text{mean}} = \frac{\%RSD}{\sqrt{n}}$$

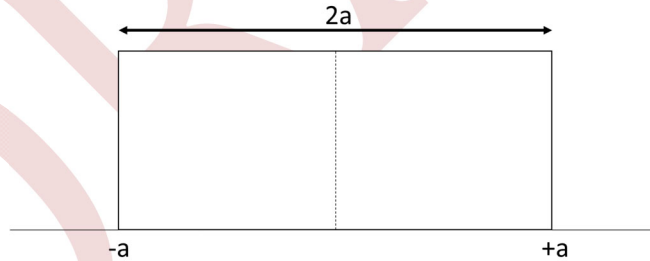
601 The %RSD of the mean of the reproducibility data in this example is:

602
$$\%RSD_{\text{mean}} = \frac{3.38 \%}{\sqrt{2}} = 2.3900 \%$$

603 **Type B Evaluation of uncertainty components**

604 **Homogenization**

605 The laboratory procedure requires two samples to be taken from the homogenized test specimens
 606 and the ethanol concentration of the two aliquots to be within $\pm 5 \%$ of the average, or the analysis is
 607 repeated. This component is evaluated as a rectangular distribution:



608

609 *Upper limit = +a*

610 *Lower limit = -a*

611 *Possible range of values = (+a) - (-a) = 2a*

612 For a rectangular distribution, the standard uncertainty is calculated by:

613
$$\text{Standard uncertainty} = \frac{a}{\sqrt{3}}$$

614 The standard uncertainty for the interference from the matrix in this example is based on an outside
 615 limit of 5 %:

616
$$\text{Standard uncertainty} = \frac{5\%}{\sqrt{3}} = 2.8868\%$$

617 **Calibrators: Uncertainty in the reference value**

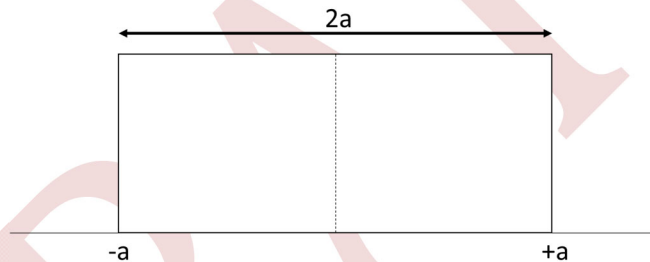
618 Based on the certificates from the CRMs used for calibrators in this method, the laboratory
619 determined in Step 3 that the greatest relative uncertainty for the CRMs is 2.33 %.

620 The certificate indicates that this expanded uncertainty assumes a normal distribution, a coverage
621 factor of $k = 2$, and a coverage probability of approximately 95 %. The uncertainty on the calibration
622 certificate will be divided by the coverage factor to arrive at a relative standard uncertainty.

623
$$\text{Relative standard uncertainty} = \left(\frac{2.33\%}{2} \right) = 1.1650\%$$

624 **Pipette Diluter**

625 In Step 3, the laboratory determined that its in-house criteria of $\pm 3\%$ will be used to quantify
626 variability for this uncertainty component for both the sample and internal standard syringes. This
627 component is evaluated as a rectangular distribution:



628

629 *Upper limit = +a*

630 *Lower limit = -a*

631 *Possible range of values = (+a) - (-a) = 2a*

632 As explained above, for a rectangular distribution, the standard uncertainty is calculated by:

633
$$\text{Standard uncertainty} = \frac{a}{\sqrt{3}}$$

634 The standard uncertainty for the pipette diluter sample ($u_{\text{sample syringe}}$) and internal standard syringes
635 ($u_{\text{IS syringe}}$) in this example is based on the outside limit of 3 %:

636
$$u_{\text{sample syringe}} = \frac{3\%}{\sqrt{3}} = 1.7321\%$$

637

638
$$u_{\text{IS syringe}} = \frac{3\%}{\sqrt{3}} = 1.7321\%$$

639

640 **Step 5—Calculate the combined standard uncertainty**

641 The evaluation will assume that the uncertainty components are independent or uncorrelated and
 642 that the measurement result is the sum of a series of components.

643 Care shall be taken if the measurement results lie over a range of values. In this scenario, the
 644 calibration model was determined during method validation and shown through residual plots to
 645 have constant variance across the linear range, so a single measurement uncertainty can be
 646 calculated for the entire concentration range.

647

$$648 \quad u_c(y) = \sqrt{s_{\text{reproducibility}}^2 + u_{\text{homogenization}}^2 + u_{\text{CRMunc}}^2 + u_{\text{sample syringe}}^2 + u_{\text{IS syringe}}^2}$$

$$649 \quad u_c(y) = \sqrt{2.3900^2_{\text{reproducibility}} + 2.8868^2_{\text{homogenization}} + 1.1650^2_{\text{CRMunc}} + 1.7321^2_{\text{sample syringe}} + 1.7321^2_{\text{IS syringe}}}$$

$$650 \quad u_c(y) = \sqrt{21.4033}$$

$$651 \quad u_c(y) = 4.6264\%$$

652 **Evaluation of bias**

653 The laboratory views bias monitoring as a component of ensuring the validity of the test method. It
 654 has incorporated three CRMs at low, medium, and high concentrations as QC samples to monitor bias
 655 from unidentified sources on an ongoing basis.

656 The laboratory procedure requires each measured value for a CRM to be within 5 % of the reference
 657 value. The largest bias for any of the control levels (low, medium, and high) is less than the combined
 658 standard uncertainty. Although the bias is viewed as insignificant, the laboratory is choosing to
 659 include an additional component in the uncertainty evaluation that will address the uncertainty in the
 660 reference value of the CRM used to evaluate bias. Steps 3, 4, and 5 must be addressed for this
 661 additional uncertainty component.

662 **Step 3—Quantify uncertainty components – bias component**

663 The laboratory reviewed all of the certificates of analysis from all CRMs used for the evaluation of
 664 bias. The greatest uncertainty is 0.0014 g/dL for the 0.3 g/dL CRM.

$$665 \quad \text{Relative uncertainty} = \left(\frac{0.0014 \text{ g/dL}}{0.3 \text{ g/dL}} \right) * 100 = 0.4667 \%$$

666

667 **Step 4—Convert quantities to standard uncertainties - bias component**

668 The certificate indicates this expanded uncertainty assumes a normal distribution, a coverage factor
 669 of $k = 2$, and a coverage probability of approximately 95 %. The uncertainty on the calibration
 670 certificate will be divided by the coverage factor, 2, to arrive at a standard uncertainty.

671
$$\text{Relative standard uncertainty} = \left(\frac{0.4667 \%}{2} \right) = 0.2334 \%$$

672 **Step 5—Calculate combined standard uncertainty - including bias component**

673 The revised RSS calculation:

674
$$u_c(y) = \sqrt{S_{\text{reproducibility}}^2 + u_{\text{homogenization}}^2 + u_{\text{CRMunc}}^2 + u_{\text{sample syringe}}^2 + u_{\text{IS syringe}}^2 + u_{\text{CRMbias}}^2}$$

675
$$u_c(y) = \sqrt{2.3900^2_{\text{reproducibility}} + 2.8868^2_{\text{homogenization}} + 1.1650^2_{\text{CRMunc}} + 1.7321^2_{\text{sample syringe}} + 1.7321^2_{\text{IS syringe}} + 0.2334^2_{\text{CRMbias}}}$$

676
$$u_c(y) = \sqrt{21.4578}$$

677
$$u_c(y) = 4.6323 \%$$

678 **Step 6—Expand the combined standard uncertainty by coverage factor (k)**

679 The data from the measurement process has demonstrated that the measurement results follow a
 680 normal distribution. The laboratory has 101 measurements of the blood matrix control sample.
 681 Therefore, the laboratory assumes a lower bound on the effective degrees of freedom ($n-1$) for the
 682 combined standard uncertainty of 100.

683 To expand the uncertainty to a 95.45 % coverage probability for this example, the coverage factor $k =$
 684 2.025 from the Student's t -distribution table for 100 degrees of freedom will be used.

685
$$U = 2.025 \times 4.6323 = 9.3804 \%$$

686 NOTE: A laboratory can choose to increase the coverage probability.

687 **Step 7—Evaluate the expanded uncertainty**

688 The laboratory determined that the evaluation of uncertainty is fit for purpose based on the following
 689 considerations:

690 — Stakeholder interests

691 Expanded uncertainty (9.3804 %) was below a stakeholder specification of 10 %.

692 — Legal requirements

693 There were none.

- 694 — The relationship between the reported test value and the expanded MU
 695 Expanded uncertainty as a percentage across the analytical range ensures a consistent
 696 relationship.
 697 — Established criteria, including control limits for the method
 698 The laboratory's control acceptance limits for the method are 10 %. Considering the expanded
 699 uncertainty, the allowable control limits were determined to be acceptable.

700 Step 8—Report the uncertainty

701 The laboratory has established a procedure for rounding the expanded uncertainty. Following that
 702 procedure, the expanded uncertainty was rounded to two significant figures:

703
$$U=9.4 \%$$

704 For reporting measurement results with the rounded expanded uncertainty to the same number of
 705 decimal places:

706 *"The concentration of ethanol in Item 1 was found to be 0.090 g/dL ± 0.008 g/dL at a coverage
 707 probability of 95.45 %."*

708

Uncertainty Budget Form					
Method:	The Concentration of Ethanol in Ante-Mortem Blood Using SOP #200				
Prepared By:	J. Smith		Date:	25-May-2023	
Sources of Uncertainty	Type A or B?	Std Dev or Outside Limits	Distribution Model	Divisor	Std Uncertainty (1σ)
Measurement Process Reproducibility ($s_{reproducibility}$)	A	3.38 %	Normal	$\sqrt{2}$	2.3900 %
Homogenization / Matrix Interference (u_{matrix})	B	5.00 %	Rectangular	$\sqrt{3}$	2.8868 %
Calibrators: Uncertainty in Ref Value (u_{CRMunc})	B	2.33 %	Normal	2	1.1650 %
Pipette Diluter - Sample Syringe ($u_{sample\ syringe}$)	B	3.00 %	Rectangular	$\sqrt{3}$	1.7321 %
Pipette Diluter - Internal Standard Syringe ($u_{IS\ syringe}$)	B	3.00 %	Rectangular	$\sqrt{3}$	1.7321 %
Bias Component ($u_{CRMbias}$)	B	0.4667 %	Normal	2	0.2334 %
Combined Uncertainty ($u_c(y)$):	4.6323 %				
Confidence Level (k):	95.45 % ($k = 2.025$)				
Expanded Uncertainty (U):	9.3804 % (9.4 %)				

709 **Figure A.1: Uncertainty Budget Form-Ethanol in Antemortem Blood Using SOP #200**

710
711

Annex B (informative)

712 **Concentration of Amphetamine and Methamphetamine in a Whole Blood** 713 **Specimen^k**

714 **Test Method Information**

715 The laboratory developed and validated a test method for quantitating amphetamine and
716 methamphetamine in whole blood using liquid chromatography-tandem mass spectrometry (LC-
717 MSMS). Multiple personnel were trained and qualified to use the laboratory's procedure. All
718 personnel use the same equipment for this test method. Analytical results are normalized to internal
719 standards added during the sample preparation process.

720 The method is calibrated using single replicates of whole blood fortified calibrators at 6
721 concentrations from 10 to 1000 ng/mL. The calibrators are prepared from a working stock solution
722 made by diluting certified reference materials (CRMs). The working stock solution is fortified into
723 whole blood with each batch. Method validation determined that the proper calibration model was a
724 quadratic regression model. A lack of consistent variance across the concentration range
725 (heteroscedasticity) was observed.

726 The measurement results from single aliquots of a test specimen are reported.

727 Calibrators, QC samples, and test specimens are aliquoted at the same time using the same
728 equipment.

729 **Metrological Traceability**

730 The traceability of this measurement process is established through the calibrators used to generate
731 the calibration curve on the measuring system and through the calibration of other equipment used
732 in the measurement process.

733 All CRMs have been purchased from a Reference Material Producer that meets the ANSI/ASB
734 Standard 017, *Standard for Metrological Traceability in Forensic Toxicology*.

735 All external calibrations of measuring equipment (e.g., volumetric flasks and pipettes) are performed
736 by calibration laboratories that meet the ANSI/ASB Standard 017, *Standard for Metrological*
737 *Traceability in Forensic Toxicology*.

738 **Measurement Assurance**

739 The QC samples at low (30 ng/mL), medium (400 ng/mL), and high (800 ng/mL) concentrations are
740 fortified into whole blood from a working stock solution by the laboratory with each batch. The
741 working stock solution for the controls is prepared from CRMs purchased from a different supplier

^k An evaluation of measurement uncertainty is specific to the metrological traceability established for the measurement, the measurement assurance processes in place, the laboratory test method, the laboratory facility, etc. Therefore, the following is only an example for evaluation and revision by a laboratory after considering the elements specific to that laboratory.

742 than the CRMs used as calibrators. The QC samples are used to ensure the validity of the test method
743 across the concentration range and to evaluate the method's bias on an ongoing basis.

744 The laboratory has 15 measurements made of the QC samples during validation for each
745 concentration.

746 Two separate uncertainty evaluations will be needed since two analytes are involved in this
747 measurement procedure.

748 **Step 1—Specify the measurement process**

749 The measurement processes can be described in a written statement:

750 *“The Concentration of Amphetamine in Whole Blood using [the validated laboratory procedure]”*

751 *“The Concentration of Methamphetamine in Whole Blood using [the validated laboratory
752 procedure]”*

753 **Step 2—Identify uncertainty components**

754 The following list of possible contributors to uncertainty in this method was identified by the
755 laboratory:

756 Personnel

757 — Inter-personnel variation in sample preparation and measurements

758 — Training

759 — Experience

760 Calibrators Preparation

761 — Components:

762 — Methanol – reagent grade

763 — Concentration – equipment used to prepare (pipettes, volumetric flask)

764 — CRMs – uncertainty in the stated reference value

765 Control Preparation

766 — Components:

767 — Methanol – reagent grade

768 — Concentration – equipment used to prepare (pipettes, volumetric flask)

769 — CRMs – uncertainty in the stated reference value

770 Internal Standard Preparation

771 — Components:

772 — Methanol – reagent grade

773 — Stable isotope labeled amphetamine and methamphetamine

774 — Impurities in the internal standard (unlabeled drug)

775 — Concentration – equipment used to prepare (pipettes, volumetric flask)

776 Preparation of aliquots of Calibrators, Control Samples, and Measurand

777 — Homogenization

778 — Test Specimens – mixing

779 — Temperature

780 — All calibrators, control samples, and test specimens are brought to room temperature

781 — Variation in the time allowed to reach room temperature

782 — Variation in room temperature at different times of year

783 — Pipettes

784 — Volume of sample, calibrators, controls, and internal standard

785 — Calibration uncertainty or laboratory specification to verify calibration status

786 Analysis787 — Instrument parameter settings (e.g., gradient, flow rate, aging of the chromatographic column,
788 autosampler syringe, autosampler precision)

789 — Interference from the matrix

790 — Interference from reagents

791 — Interference from other compounds

792 — Stability of sample(s) from preparation through analysis

793 — Instrument precision

794 — Systematic instrumental variation within an analytical batch

795 — Matrix effect (ionization suppression/enhancement)

796 Data Processing

797 — Calibration model

798 — Integration parameters

799 — Processing algorithms

800 *NOTE 1: This list of uncertainty components could also be compiled into a fishbone diagram or any other format of*
801 *the laboratory's choosing.*

802 *NOTE 2: A laboratory may identify different uncertainty components when evaluating its specific measurement*
803 *process.*

804 **Step 3—Quantify uncertainty components**

805 The laboratory has validation data from the measurement process:

806 — The calibration model was determined during method validation and was shown using a
807 statistical test to have some heteroscedasticity (the variance was not constant across the linear
808 range). Therefore, the laboratory will evaluate the measurement uncertainty using data from the
809 control with the largest variance and apply it to the entire reportable concentration range.

810 — The QC samples at low (30 ng/mL), medium (400 ng/mL), and high (800 ng/mL) concentrations
811 are fortified into whole blood from a working stock solution by the laboratory with each batch. All
812 personnel have contributed to the 15 replicate measurements of the control samples at each
813 concentration.

814 Table B.1 shows the individual uncertainty components and how they will be evaluated.

815

816

Table B.1—Method of Evaluation of Uncertainty Components

Uncertainty Component	Method of Evaluation
Personnel	
Inter-personnel variation	Adequately represented by the Type A Evaluation of process reproducibility data
Training	Adequately represented by the Type A Evaluation of process reproducibility data
Experience	Adequately represented by the Type A Evaluation of process reproducibility data
Calibrators Preparation	
Components: Methanol – reagent grade	Adequately represented by the Type A Evaluation of process reproducibility data
Concentration CRM – uncertainty in the stated reference value Equipment used to prepare (pipettes, volumetric flask)	Type B Evaluation
Control Samples Preparation	
Components: Methanol – reagent grade	Adequately represented by the Type A Evaluation of process reproducibility data
Concentration CRM – uncertainty in the stated reference value Equipment used to prepare (pipettes, volumetric flask)	Type B Evaluation (<i>if necessary for bias</i>)
Internal Standard Preparation	
Components: Methanol – reagent grade	Adequately represented by the Type A Evaluation of process reproducibility data
Stable isotope labeled amphetamine and methamphetamine Impurities in the internal standard (unlabeled drug)	No influence A certificate of analysis from the reference material provider indicates no impurity The measurement result will only be impacted by the volume of the internal standard added to each sample
Concentration- equipment used to prepare (pipettes, volumetric flask)	No influence Procedural requirement to use the same lot of Internal Standard for all samples in an analytical batch

817

Preparation of aliquots of Calibrators, Control Samples, and Test Specimens	
Homogenization – mixing	Demonstrated during method validation to be insignificant.
Temperature – all calibrators, controls, and the measurand are brought to room temperature Variation in the time allowed to reach room temperature Variation in room temperature at different times of year	Adequately represented by the Type A Evaluation of process reproducibility data
Pipettes: Volume of sample, calibrators, controls, and internal standard Calibration uncertainty or laboratory specification to verify calibration status	Volume of internal standard adequately represented by the Type A Evaluation of process reproducibility data Type B Evaluation for volume of sample and calibrators (for controls only if necessary for bias)
Analysis	
Instrument parameter settings (e.g., gradient, flow rate, aging of chromatographic column, autosampler syringe, autosampler precision, etc.)	Adequately represented by the Type A Evaluation of process reproducibility data
Interference from the matrix	Matrix interference was evaluated during method validation and found insignificant for the matrix type allowed in this method.
Interference from reagents	This component is not an uncertainty component but a quality control concern. The laboratory analyzes a matrix blank that contains no analyte and evaluates all reagents used in the analytical method. The laboratory procedure specifies acceptable criteria for this control sample.
Interference from other compounds	Demonstrated lack of interference from other compounds during method validation. This component is not considered an uncertainty component.
Stability of sample(s) from preparation through analysis	Adequately represented by the Type A Evaluation of process reproducibility data
Instrument precision	Adequately represented by the Type A Evaluation of process reproducibility data
Systematic instrumental variation within an analytical batch	The positive controls are reinjected at the end of the batch and must meet predefined criteria
Data Processing	
Calibration model	Adequately represented by the Type A Evaluation of process reproducibility data
Integration parameters	Adequately represented by the Type A Evaluation of process reproducibility data
Processing algorithms	Adequately represented by the Type A Evaluation of process reproducibility data

818

819 **Type A Evaluation of uncertainty components**

820 **Measurement Process Reproducibility**

821 Each QC sample has 15 observations. The statistic that will be calculated is the percent relative
822 standard deviation.

823 During validation, control data demonstrated a lack of consistent variance across the calibration
824 range. Therefore, the reproducibility data from the multiple QC sample levels for either target
825 compound may not be combined. The 400 ng/mL QC sample had the greatest variance and will be
826 used for this evaluation.

827 To begin, the control data's mean (average) and standard deviation will be calculated.

828 — The mean of the reproducibility data in this example is 404 ng/mL for amphetamine and 416
829 ng/mL for methamphetamine.

830 — The standard deviation of the reproducibility data in this example is 15.90 ng/mL for
831 amphetamine and 12.01 ng/mL for methamphetamine.

832 The %RSD of the reproducibility data in this example is 3.9356 % for amphetamine and 2.8870 % for
833 methamphetamine.

834 **Type B Evaluation of uncertainty components**

835 **Calibrators Preparation**

836 *Uncertainty in the reference value*

837 The laboratory reviewed the calibration certificates from all CRMs used for the preparation of the
838 calibration working stock solutions. The largest uncertainty was 0.005 mg/mL for the 1.000 mg/mL
839 amphetamine CRM and 0.006 mg/mL for the 1.000 mg/mL methamphetamine CRM.

$$840 \quad \text{Relative uncertainty of Amphetamine CRM} = \left(\frac{0.005 \text{ mg/mL}}{1.000 \text{ mg/mL}} \right) * 100 = 0.5 \%$$

$$841 \quad \text{Relative uncertainty of Methamphetamine CRM} = \left(\frac{0.006 \text{ mg/mL}}{1.000 \text{ mg/mL}} \right) * 100 = 0.6 \%$$

842 *Uncertainty in pipettes*

843 The laboratory reviewed the calibration certificates of all pipettes that may be used for preparation of
844 the calibration working stock solution. The largest uncertainty was 0.74 μL for a 100 μL pipette.

$$845 \quad \text{Relative uncertainty of Pipettes to Prep Cal Working Stock} = \left(\frac{0.74 \mu\text{L}}{100 \mu\text{L}} \right) * 100 = 0.74 \%$$

846

847 ***Uncertainty in volumetric flasks***

848 The laboratory reviewed the calibration certificates of all volumetric flasks that may be used for
 849 preparation of the calibration working stock solution. The largest uncertainty was 0.0086 mL for a
 850 25mL volumetric flask.

$$851 \quad \text{Relative uncertainty of Vol Flask to Prep Cal Working Stock} = \left(\frac{0.0086 \text{ mL}}{25 \text{ mL}} \right) * 100 = 0.0344 \%$$

852 **Preparation of aliquots of Calibrators and Test Specimens**853 ***Uncertainty in pipettes***

854 The laboratory reviewed the calibration certificates of all pipettes that may be used to fortify the
 855 calibrators from the working stock solution into whole blood. The method requires the same pipette
 856 to be used to add the internal standard to calibrators, controls, and test specimens. The largest
 857 uncertainty was 0.74 μL for a 100- μL pipette.

$$858 \quad \text{Relative uncertainty of Pipettes to Fortify Calibrator Samples} = \left(\frac{0.74 \mu\text{L}}{100 \mu\text{L}} \right) * 100 = 0.74 \%$$

$$859 \quad \text{Relative uncertainty of Pipettes to Delivery Internal Standard} = \left(\frac{0.74 \mu\text{L}}{100 \mu\text{L}} \right) * 100 = 0.74 \%$$

860 The laboratory reviewed the calibration certificates of all pipettes that may be used to aliquot the test
 861 item. The largest uncertainty was 6.9 μL for a 1000- μL pipette.

$$862 \quad \text{Relative uncertainty of Pipettes to Aliquot Test Samples} = \left(\frac{6.9 \mu\text{L}}{1000 \mu\text{L}} \right) * 100 = 0.69 \%$$

863 **Step 4—Convert quantities to standard uncertainties**864 **The measurement unit**

865 In this example, the relative uncertainty is expressed as a percentage.

866 **Type A Evaluation of uncertainty components**867 **Measurement Process Reproducibility Data**

868 The % RSD (s_r) of the reproducibility data in this example is 3.9356 % for amphetamine and 2.8870
 869 % for methamphetamine.

870

871 **Type B Evaluation of uncertainty components**872 **Calibrators Preparation**873 ***Uncertainty in the reference value***

874 Based on the certificates from the CRMs used to prepare the calibrator working stock solutions in this
 875 method, the laboratory determined in Step 3 that the relative uncertainty is 0.5 % and 0.6 % for
 876 amphetamine and methamphetamine, respectively.

877 The certificates indicate that the expanded uncertainties assume a normal distribution, a coverage
 878 factor of $k = 2$, and a coverage probability of approximately 95 %. The relative uncertainties will be
 879 divided by the coverage factor to arrive at relative standard uncertainties.

880 Relative standard uncertainty of Amphetamine CRM = $\left(\frac{0.5\%}{2}\right) = 0.2500\% = u_{\text{CRM}}$

881 Relative standard uncertainty of Methamphetamine CRM = $\left(\frac{0.6\%}{2}\right) = 0.300\% = u_{\text{CRM}}$

882 ***Uncertainty in pipettes***

883 In Step 3, the laboratory determined that among the pipettes used to prepare the working stock
 884 solutions, the largest relative uncertainty was 0.74 % for a 100- μL pipette.

885 The pipette's calibration certificate indicates that this expanded uncertainty assumes a normal
 886 distribution, a coverage factor of $k = 2.87$, and a coverage probability of approximately 95 %. The
 887 relative uncertainty derived from the calibration certificate will be divided by the coverage factor,
 888 2.87, to arrive at a relative standard uncertainty.

889 Relative standard uncertainty of Pipettes to Prep Calib Working Stock = $\left(\frac{0.74\%}{2.87}\right) = 0.2578\% = u_{\text{CRMp}}$

890 ***Uncertainty in volumetric flasks***

891 In Step 3, the laboratory determined that among the volumetric flasks used to prepare the working
 892 stock solutions, the largest relative uncertainty was 0.0344 % for a 25-mL flask.

893 The volumetric flask's calibration certificate indicates that this expanded uncertainty assumes a
 894 normal distribution, a coverage factor of $k = 2$, and a coverage probability of approximately 95 %. The
 895 relative uncertainty derived from the calibration certificate will be divided by the coverage factor, 2,
 896 to arrive at a relative standard uncertainty.

897 Relative standard uncertainty of Vol Flasks to Prep Calib Working Stock = $\left(\frac{0.0344\%}{2}\right) = 0.0172\% = u_{\text{CRMv}}$

898

899 **Preparation of aliquots of Calibrators and Test Specimens**

900 ***Uncertainty in pipettes***

901 In Step 3, the laboratory determined that among the pipettes used to fortify the calibrators from the
 902 working stock solution into whole blood, the largest relative uncertainty was 0.74 % for a 100 μ L
 903 pipette. The same pipette is used to fortify all samples with the internal standards.

904 The pipette's calibration certificate indicates this expanded uncertainty assumes a normal
 905 distribution, a coverage factor of $k = 2.87$, and a coverage probability of approximately 95 %. The
 906 uncertainty derived from the calibration certificate will be divided by the coverage factor to arrive at
 907 a relative standard uncertainty.

908 Relative standard uncertainty of Pipettes to Fortify Calibrator Samples = $\left(\frac{0.74\%}{2.87}\right) = 0.2578\% = u_{\text{CALp}}$

909 Relative standard uncertainty of Pipette to Deliver Internal Standard = $\left(\frac{0.74\%}{2.87}\right) = 0.2578\% = u_{\text{ISp}}$

910 In Step 3, the laboratory also determined that among the pipettes used to aliquot test specimens, the
 911 largest relative uncertainty was 0.69 % for a 1000- μ L pipette.

912 The pipette's calibration certificate indicates that this expanded uncertainty assumes a normal
 913 distribution, a coverage factor of $k = 2.87$, and a coverage probability of approximately 95 %. The
 914 uncertainty on the calibration certificate will be divided by the coverage factor, 2.87, to arrive at a
 915 relative standard uncertainty.

916 Relative standard uncertainty of Pipettes to Aliquot Test Samples = $\left(\frac{0.69\%}{2.87}\right) = 0.2404\% = u_{\text{ITEMp}}$

917 **Step 5—Calculate the combined standard uncertainty**

918 The evaluation will assume that the uncertainty components are independent or uncorrelated and
 919 that the measurement result is the sum of a series of components.

920 For Amphetamine:

921
$$u_c(y) = \sqrt{3.9356^2_{\text{F}} + 0.2500^2_{\text{CRM}} + 0.2578^2_{\text{CRMp}} + 0.0172^2_{\text{CRMv}} + 0.2578^2_{\text{CALp}} + 0.2578^2_{\text{ISp}} + 0.2404^2_{\text{ITEMp}}}$$

922
$$u_c(y) = \sqrt{15.8089}$$

923
$$u_c(y) = 3.9760\%$$

924 For Methamphetamine:

925
$$u_c(y) = \sqrt{2.8870^2_{\text{F}} + 0.3000^2_{\text{CRM}} + 0.2578^2_{\text{CRMp}} + 0.0172^2_{\text{CRMv}} + 0.2578^2_{\text{CALp}} + 0.2578^2_{\text{ISp}} + 0.2404^2_{\text{ITEMp}}}$$

926
$$u_c(y) = \sqrt{8.6822}$$

927 $u_c(y)=2.9466 \%$

928 **Evaluation of bias**

929 In this example, the laboratory views bias monitoring as a component of ensuring the validity of the
 930 test method and has incorporated three controls prepared from CRMs at low, medium, and high
 931 concentrations as QC samples to monitor bias from unidentified sources on an ongoing basis.

932 The largest average bias for any of the control levels (low, medium, and high) during validation was –
 933 2.4 % for amphetamine and 4.0 % for methamphetamine.

934 The bias for amphetamine is less than the combined standard uncertainty (3.9765 %) and is,
 935 therefore, insignificant. No additional component for bias will be added.

936 The bias for methamphetamine is greater than the combined standard uncertainty (2.9476 %) and is,
 937 therefore, significant. For the methamphetamine bias component, Steps 3, 4, and 5 must be
 938 addressed.

939 **Step 3—Quantify uncertainty components – bias component**

940 During validation, the largest bias for methamphetamine was quantified to be 4.0 %.

941 **Step 4—Convert quantities to standard uncertainties – bias component**

942 The laboratory has chosen the option explained in Section 5.6.2.4 c) to address the bias for
 943 methamphetamine that was determined to be significant. Following the guidance in Section 3.2.5.5 of
 944 NIST SOP 29, the bias is treated as an uncorrected systematic error, and the following equation
 945 applying a rectangular distribution is used to address the uncertainty of the difference component
 946 (u_d) in the MU evaluation:

947
$$u_d = \frac{\text{bias}}{\sqrt{3}} = \frac{4.0}{\sqrt{3}} = 2.3094$$

948 **Step 5—Calculate combined standard uncertainty – including bias component**

949 For Methamphetamine, the updated root sum of the squares:

950
$$u_c(y) = \sqrt{2.8870_f^2 + 0.3000_{CRM}^2 + 0.2578_{CRMp}^2 + 0.0172_{CRMv}^2 + 0.2578_{CALp}^2 + 0.2578_{ISp}^2 + 0.2404_{ITEMp}^2 + 2.3094_d^2}$$

951
$$u_c(y) = \sqrt{14.0156}$$

952
$$u_c(y) = 3.7437 \%$$

953

954 **Step 6—Expand the combined standard uncertainty by coverage factor (*k*)**

955 The data from the measurement process is assumed to follow a normal distribution. The laboratory
 956 has 15 measurements of the 400 ng/mL QC control. Therefore, the laboratory assumes that the
 957 effective degrees of freedom (*n*-1) for the combined standard uncertainty cannot be lower than 14.

958 Refer to the Student's *t*-distribution table to determine the *k* factor for 14 degrees of freedom.

959 For this example, the coverage factor *k* = 2.20 will expand the uncertainty to a 95.45 % coverage
 960 probability.

961 For Amphetamine:

962
$$U = 2.20 \times 3.9760 = 8.7472 \%$$

963 For Methamphetamine:

964
$$U = 2.20 \times 3.7437 = 8.2362 \%$$

965 **Step 7—Evaluate the expanded uncertainty**

966 The laboratory determined that the evaluation of uncertainty is fit-for-purpose based on the
 967 following considerations:

968 — Stakeholder interests

969 There were none.

970 — Legal requirements

971 There were none.

972 — The relationship between the reported test value and the expanded MU

973 Expanded uncertainty as a percentage across the analytical range ensures a consistent
 974 relationship.

975 — Established criteria including control limits for method

976 The laboratory's control limits for the method are 20 %. The control limits were not revised as
 977 the MU was based only on validation data. The decision was made to review quality control data
 978 on a quarterly basis to evaluate whether control limits should be revised.

979 **Step 8—Report the uncertainty**

980 The laboratory has established a procedure for rounding the expanded uncertainty. Following that
 981 procedure, the expanded uncertainty rounded to two significant figures:

982 For Amphetamine:

983
$$U = 8.7 \%$$

984 For Methamphetamine:

985 $U = 8.2 \%$

986 For reporting measurement results with the rounded expanded uncertainties to the same number of
987 decimal places:

988 *“The concentration of amphetamine in Item 1 was found to be 90 ± 8 ng/mL at a coverage*
989 *probability of 95.45 %. The concentration of methamphetamine in Item 1 was found to be 143 ± 12*
990 *ng/mL at a coverage probability of 95.45 %.”*

Uncertainty Budget Form					
Method:	The Concentration of Amphetamine in Whole Blood Using SOP AMPH-536				
Prepared By:	J. Smith		Date:	15-Jun-2023	
Sources of Uncertainty	Type A or B?	Std Dev or Outside Limits	Distribution Model	Divisor	Std Uncertainty (1σ)
Measurement Process Reproducibility (s_r)	A	3.9356 %	Normal	1	3.9356 %
Calibrators: Uncertainty in Reference Value (u_{CRM})	B	0.5 %	Normal	2	0.2500 %
Pipette – Prep Calibrator Working Stock (u_{CRMp})	B	0.74 %	Normal	2.87	0.2578 %
Vol Flask – Prep Calibrator Working Stock (u_{CRMv})	B	0.0344 %	Normal	2	0.0172 %
Pipette – Fortify Calibrator Samples (u_{CALp})	B	0.74 %	Normal	2.87	0.2578 %
Pipette – Deliver Internal Standard (u_{ISP})	B	0.74 %	Normal	2.87	0.2578 %
Pipette – Aliquot Test Samples (u_{ITEMp})	B	0.69 %	Normal	2.87	0.2404 %
Combined Uncertainty ($u_c(y)$):	3.9760 %				
Confidence Level (k):	95.45 % ($k = 2.20$)				
Expanded Uncertainty (U):	8.7472 % (8.7 %)				

991 **Figure B.1: Uncertainty Budget Form-Amphetamine in Whole Blood Using SOP AMPH-536 i**

992

993

Uncertainty Budget Form					
Method:	The Concentration of Methamphetamine in Whole Blood Using SOP AMPH-536				
Prepared By:	J. Smith	Date:	15-Jun-2023		
Sources of Uncertainty	Type A or B?	Std Dev or Outside Limits	Distribution Model	Divisor	Std Uncertainty (1σ)
Measurement Process Reproducibility (s_r)	A	2.8870 %	Normal	1	2.8870 %
Calibrators: Uncertainty in Reference Value (u_{CRM})	B	0.6 %	Normal	2	0.3000 %
Pipette – Prep Calibrator Working Stock (u_{CRMP})	B	0.74 %	Normal	2.87	0.2578 %
Vol Flask – Prep Calibrator Working Stock (u_{CRMV})	B	0.0344 %	Normal	2	0.0172 %
Pipette – Fortify Calibrator Samples (u_{CALP})	B	0.74 %	Normal	2.87	0.2578 %
Pipette – Deliver Internal Standard (u_{ISP})	B	0.74 %	Normal	2.87	0.2578 %
Pipette – Aliquot Test Samples (u_{TEMP})	B	0.69 %	Normal	2.87	0.2404 %
Bias Component (u_d)	B	4.0 %	Rectangular	$\sqrt{3}$	2.3094 %
Combined Uncertainty ($u_c(y)$):	3.7437 %				
Confidence Level (k):	95.45 % ($k = 2.20$)				
Expanded Uncertainty (U):	8.2362 % (8.2 %)				

994 **Figure B.2: Uncertainty Budget Form-Methamphetamine in Whole Blood Using SOP AMPH-536**

995

996
997

Annex C (informative)

998 **Calibration of Breath Alcohol Measuring Instrumentation Using Long-** 999 **Term Calibration Data from a Single Instrument¹**

1000 **Calibration Method Information**

1001 The calibration of an individual breath alcohol instrument uses dry gas measurement standard data
1002 from the current calibration as well as historical calibration data for this single instrument over time.
1003 The calibration method uses measurement standards at multiple concentrations ranging from 0.040
1004 g/210 L to 0.300 g/210 L.

1005 The calibration method does require each concentration of the dry gas measurement standards to be
1006 evaluated in triplicate. The method requires each triplicate measurement to be within 3 % or 0.003 g
1007 of ethanol/210 L of breath (g/210 L), whichever is greater, of the certified reference value of the
1008 measurement standard. Furthermore, the method requires that there shall be no greater than 0.003
1009 g/210 L difference in all three measurements at each concentration.

1010 **Step 1—Specify the measurement process**

1011 Calibration of breath alcohol measuring instrumentation using long-term calibration data from a
1012 single instrument

1013 **Step 2—Identify uncertainty components**

1014 The following list of possible contributors to uncertainty in the calibration method were identified:

1015 Personnel

1016 — Inter-personnel variation in performing calibration

1017 — Training

1018 — Experience

1019 Breath Alcohol Measuring Instrument Being Calibrated

1020 — Variability of instrument over time

1021 Measurement Standards

1022 — Dry Gas Certified Reference Materials - uncertainty in the stated reference value

¹ An evaluation of measurement uncertainty is specific to the metrological traceability established for the measurement, the measurement assurance processes in place, the breath alcohol program calibration method, the laboratory facility, etc. Therefore, the following is only an example for evaluation and revision by a breath alcohol program after considering the elements specific to that program.

1023 Environmental Conditions

1024 — Barometric pressure

1025 — Humidity

1026 — Temperature

1027 Varying Facilities/Location Change

1028 — Instrument transport

1029 — Power fluctuation

1030 Data Processing

1031 — Processing algorithms

1032 **Step 3—Quantify uncertainty components**

1033 Measurement standard data has been collected from use of this calibration method over time. All
1034 personnel have participated in acquiring the measurement standard data for this single breath
1035 alcohol measuring instrument. The laboratory has 51 measurements made using each measurement
1036 standard. The instrument has not demonstrated consistent variance across the concentration range
1037 of the measurement standards used in the calibration method. Because the 0.100 g/210 L
1038 measurement standard has the greatest observed variance of the measurement standards, it will be
1039 used to represent the process reproducibility data.

1040 Table C.1 shows the individual uncertainty components and how they will be evaluated.

1041

1042

Table C.1—Method of Evaluation of Uncertainty Components

Uncertainty Component	Method of Evaluation
Personnel	
Inter-personnel variation	Adequately represented by Type A Evaluation of process reproducibility data – measurement standard
Training	Adequately represented by Type A Evaluation of process reproducibility data – measurement standard
Experience	Adequately represented by Type A Evaluation of process reproducibility data – measurement standard
Breath Alcohol Measuring Instrument Being Calibrated	
Variability of the instrument over time	Adequately represented by Type A Evaluation of process reproducibility data – measurement standard
Measurement Standards	
CRM –uncertainty in the stated reference value	Type B Evaluation
Environmental Conditions	
Barometric pressure	Adequately represented by Type A Evaluation of process reproducibility data – measurement standard
Humidity	Adequately represented by Type A Evaluation of process reproducibility data – measurement standard
Temperature	Adequately represented by Type A Evaluation of process reproducibility data – measurement standard
Varying Facilities/Locations	
Instrument transport	Not Applicable
Power fluctuations	Adequately represented by Type A Evaluation of process reproducibility data – measurement standard.
Data Processing	
Processing algorithms	Adequately represented by Type A Evaluation of process reproducibility data – measurement standard

1043

1044 **Type A Evaluation of uncertainty components**1045 **Measurement Standard Reproducibility – 0.100 g/210 L Measurement Standard**

1046 The number of observations in this example is 51. The statistic that will be calculated is the standard
 1047 deviation.

1048 To begin, the measurement data's mean (average) and standard deviation will be calculated.^m

^m For the readability of the example, the display of digits used in all calculations was abbreviated. Best practice is to include and carry all digits through all calculations and only round the reported value and its uncertainty to the proper number of significant figures.

1049 The mean is calculated as:

1050

1051

$$\bar{x} = \frac{1}{n} \sum_{i=1}^n x_i$$

1052

1053

$$\bar{x} = \frac{(x_1 + x_2 + x_3 + \dots + x_n)}{n}$$

1054

1055 The mean of the reproducibility data in this example = 0.0994 g/210 L

1056 The standard deviation is calculated as:

1057

$$s = \sqrt{\frac{\sum_{i=1}^n (x_i - \bar{x})^2}{n - 1}}$$

1058 The standard deviation of the reproducibility data in this example = 0.0012 g/210 L

1059 **Type B Evaluation of uncertainty components**

1060 **Certified Reference Materials**

1061 Based on the certificates from the CRMs, the laboratory determined in Step 3 that the greatest relative
1062 uncertainty for the CRM was 0.0018 g/210 L for the 0.100 g/210 L CRM.

1063 The certificate indicates this expanded uncertainty assumes a normal distribution, a coverage factor
1064 of $k = 2$, and a coverage probability of approximately 95 %. The uncertainty on the calibration
1065 certificate will be divided by the coverage factor to arrive at a relative standard uncertainty.

1066 Relative standard uncertainty = $\left(\frac{0.0018 \text{ g /210L}}{2}\right) = 0.0009 \frac{\text{g}}{210} \text{ L}$

1067 **Step 4—Convert quantities to standard uncertainties**

1068 **The measurement unit:** g of ethanol/210 L of breath (g/210 L)

1069 **Type A Evaluation of uncertainty components**

1070 **Measurement Standard Reproducibility – 0.100 g/210 L Measurement Standard**

1071 The standard deviation of the reproducibility data in this example is 0.0012 g/210 L.

1072 — No additional conversion is necessary to reach a standard uncertainty.

1073

1074 **Type B Evaluation of uncertainty components:**

1075 **Certified Reference Materials**

1076 The CRM certificate indicates that the stated expanded uncertainty assumes a normal distribution, a
1077 coverage factor of $k = 2$, and a coverage probability of approximately 95 %.

1078 — The uncertainty is stated to be 0.0018 g/210 L for the 0.100 g/210 L CRM.

1079 — The uncertainty on the calibration certificate will be divided by the coverage factor, 2, to arrive at
1080 a standard uncertainty.

1081 — $0.0018 \text{ g/210 L} / 2 = 0.0009 \text{ g/210 L}$ for the standard uncertainty

1082 **Step 5—Calculate combined standard uncertainty**

1083 The evaluation will assume that the uncertainty components are independent or uncorrelated and
1084 that the measurement result is the sum of a series of components. The combined standard
1085 uncertainty was calculated.

1086
$$u_c(y) = \sqrt{s_{\text{reproducibility}}^2 + u_{\text{CRMunc}}^2}$$

1087
$$u_c(y) = \sqrt{0.0012_{\text{reproducibility}}^2 + 0.0009_{\text{CRMunc}}^2}$$

1088
$$u_c(y) = \sqrt{0.0012_{\text{reproducibility}}^2 + 0.0009_{\text{CRMunc}}^2}$$

1089
$$u_c(y) = \sqrt{2.25 \times 10^{-6}}$$

1090
$$u_c(y) = 0.0015 \text{ g/210L}$$

1091 **Evaluation of Bias**

1092 In this example, bias is evaluated as part of instrument calibration.

1093 The data for the 0.100 g/210 L measurement standard show a difference of the average to the
1094 reference value of 0.001 g/210 L. This value is less than the combined standard uncertainty and,
1095 therefore, insignificant. No additional component will be added to the measurement uncertainty
1096 evaluation.

1097 **Step 6—Expand the combined standard uncertainty by coverage factor (k)**

1098 The breath alcohol program has 51 measurements of the measurement standard and assumes a
1099 lower bound on the effective degrees of freedom ($n-1$) for the combined standard uncertainty of 50.

1100 The data from the measurement process is assumed to follow a normal distribution; therefore, refer
1101 to the Student's t -distribution table to determine the k factor.

1102 For this example, the coverage factor $k = 2.05$ ($n=50$) will be used to expand the uncertainty to a
 1103 95.45% coverage probability.

1104 $k=2.05$

1105 $U=2.05 \times 0.0015 = 0.00308 \text{ g/210L}$

1106 **Step 7—Evaluate the expanded uncertainty**

1107 The breath alcohol program determined that the evaluation of uncertainty is fit for purpose.

1108 The breath alcohol program identified that the current method allows for a variance of 0.005 g/ 210L
 1109 or 5 %, whichever is greater, from a measurement standard known reference value. However, this is
 1110 greater than the expanded uncertainty at 95.45 %. Left unchanged, a calibration with a significant
 1111 bias could be reported. Therefore, the breath alcohol program revised the method so that the
 1112 variability allowed in any calibration must be equal to or less than 0.003 g/ 210L or 3 %, whichever is
 1113 greater.

1114 **Step 8—Report the uncertainty**

1115 The breath alcohol program has established a procedure for rounding the expanded uncertainty.
 1116 Following that procedure, the expanded uncertainty is rounded to the third decimal place to equal the
 1117 number of decimal places reported in the breath alcohol instrument display. The expanded
 1118 uncertainty will be 0.003 g/210 L.

1119 The certificate of calibration will contain the following:

1120 — 0.003 g/210 L, the combined expanded uncertainty, rounded to the third decimal place.

1121 — $k = 2.05$, the coverage factor based on the Student's t -distribution.

1122 — 95.45 %, the coverage probability

1123 *For reporting calibration results, use the rounded expanded uncertainty at the same significance level.*

1124 *(0.040 g/210 L to 0.300 g/210 L) \pm 0.003 g/210 L at a coverage probability of 95.45 % ($k=2.05$)."*

1125

1126

Uncertainty Budget Form					
Method:	Calibration of breath alcohol measuring instrumentation using long-term calibration data from a single instrument				
Prepared By:	J. Smith	Date:	15-Jun-2023		
Sources of Uncertainty	Type A or B?	Std Dev or Outside Limits	Distribution Model	Divisor	Std Uncertainty (1σ)
Measurement Process Reproducibility (s_r)	A	0.0012	Normal	1	0.0012
Measurement Standards: Uncertainty in Reference Value (u_{CRM})	B	0.0018	Normal	2	0.0009
Combined Uncertainty ($u_c(y)$):	0.0015				
Confidence Level (k):	95.45 % ($k = 2.05$)				
Expanded Uncertainty (U):	0.00308 (0.003)				

1127 **Figure C.1: Uncertainty Budget Form-Calibration of breath alcohol measuring instrumentation**
 1128 **using long-term calibration data from a single instrument**

1129

1130 **Annex D**
1131 (informative)

1132 **Calibration of Breath Alcohol Measuring Instruments Using Control Data**
1133 **from the Calibration Methodⁿ**

1134 **Calibration Method Information**

1135 A population of breath alcohol measuring instruments is calibrated using the same calibration
1136 method with a concentration range of 0.040 g/210 L to 0.300 g/210 L. The calibration method
1137 includes multiple measurement standards of varying concentrations and a control. The calibration
1138 data obtained is from a population of 100 breath alcohol measuring instruments that have all
1139 demonstrated consistent variance across the measurement standard concentration levels. Three
1140 measurements of the 0.100 g of ethanol/210 L of breath (g/210 L) control are made during each
1141 instrument calibration. Current and historical control data for the population of instruments over
1142 time was used in the calculation.

1143 **Step 1—Specify the measurement process**

1144 Calibration of breath alcohol measuring instruments using control data from the calibration method

1145 **Step 2—Identify uncertainty components**

1146 The following list of possible contributors to uncertainty in the calibration method was identified:

1147 Personnel

1148 — Inter-personnel variation in performing calibration

1149 — Training

1150 — Experience

1151 Breath Alcohol Measuring Instrument Being Calibrated

1152 — Population of 100 breath alcohol measuring instruments

1153 — Variability of instrument over time

1154 Measurement Standards

1155 — Dry Gas Certified Reference Materials - uncertainty in the stated reference value

ⁿ An evaluation of measurement uncertainty is specific to the metrological traceability established for the measurement, the measurement assurance processes in place, the breath alcohol program calibration method, the laboratory facility, etc. Therefore, the following is only an example for evaluation and revision by a breath alcohol program after considering the elements specific to that program.

1156 Calibration Method Control

- 1157 — Dry Gas Certified Reference Material from a different manufacturer than that of the Measurement
 1158 Standards - uncertainty in the stated reference value

1159 Environmental Conditions

- 1160 — Barometric pressure
 1161 — Humidity
 1162 — Temperature

1163 Varying Facilities/Location Change

- 1164 — Instrument transport
 1165 — Power fluctuations

1166 Data Processing

- 1167 — Processing algorithms

1168 **Step 3—Quantify uncertainty components**

1169 The breath alcohol program has existing data from the calibration method. Each instrument is
 1170 evaluated in triplicate using a 0.100 g/210 L dry gas cylinder with metrological traceability as a
 1171 calibration control. The calibration method requires the control to be within 3 % or 0.003 g/210 L
 1172 (whichever is greater) of the certified reference value. Furthermore, there shall be no greater than
 1173 0.003 g/210 L difference in all three calibration control values.

1174 Control data is collected on an on-going basis with all personnel contributing to the control data for
 1175 the population of instruments.

1176 Table D.1 shows the individual uncertainty components and how they will be evaluated.

1177

1178

Table D.1—Method of Evaluation of Uncertainty Components

Uncertainty Component	Method of Evaluation
Personnel	
Inter-personnel variation	Adequately represented by Type A Evaluation of process reproducibility data – control
Training	Adequately represented by Type A Evaluation of process reproducibility data – control
Experience	Adequately represented by Type A Evaluation of process reproducibility data – control
Breath Alcohol Measuring Instrument Being Calibrated	
Population of 100 breath alcohol measuring instruments	Adequately represented by Type A Evaluation of process reproducibility data – control
Variability of instrument over time	Adequately represented by Type A Evaluation of process reproducibility data – control
Measurement Standards	
CRM –uncertainty in the stated reference value	Type B Evaluation
Calibration Method Control	
CRM –uncertainty in the stated reference value	Type B Evaluation
Environmental Conditions	
Barometric pressure	Adequately represented by Type A Evaluation of process reproducibility data – control
Humidity	Adequately represented by Type A Evaluation of process reproducibility data – control
Temperature	Adequately represented by Type A Evaluation of process reproducibility data – control
Varying Facilities/Locations	
Instrument transport	Not Applicable
Power fluctuations	Adequately represented by Type A Evaluation of process reproducibility data – control.
Data Processing	
Processing algorithms	Adequately represented by Type A Evaluation of process reproducibility data – control

1179

1180 **Type A Evaluation of uncertainty components**1181 **Calibration Control Reproducibility – 0.100 g/210 L Calibration Control**

1182 The number of measurements of the control in this example is greater than 300.

1183 The statistic that will be calculated is the standard deviation.

1184 To begin, the measurement data's mean (average) and standard deviation will be calculated.^o

1185 Mean

$$\bar{x} = \frac{1}{n} \sum_{i=1}^n x_i$$

1186

1187

1188

$$\bar{x} = \frac{(x_1 + x_2 + x_3 + \dots x_n)}{n}$$

1189

1190 The mean of the reproducibility data in this example = 0.0996 g/210 L

1191 Standard Deviation

$$s = \sqrt{\frac{\sum_{i=1}^n (x_i - \bar{x})^2}{n - 1}}$$

1192

1193 The standard deviation of the reproducibility data in this example = 0.0012 g/210 L

1194 **Type B Evaluation of uncertainty components**

1195 **Certified Reference Materials**

1196 The certificates of analysis from all dry gas cylinders were reviewed. The greatest uncertainty is
1197 0.0018 g/210 L for the 0.100 g/210 L CRM.

1198 **Step 4—Convert quantities to standard uncertainties**

1199 **The measurement unit:** g of ethanol/210 L of breath (g/210 L)

1200 **Type A Evaluation of uncertainty components**

1201 **Calibration Control Reproducibility – 0.100 g/210 L Calibration Control**

1202 The standard deviation of the reproducibility data in this example is 0.0012 g/210 L.

1203 — No additional conversion is necessary to reach a standard uncertainty.

1204

^o For the readability of the example, the display of digits used in all calculations was abbreviated. The best practice is to include and carry all digits through all calculations and only round the reported value and its uncertainty to the proper number of significant figures.

1205 Type B Evaluation of uncertainty components

1206 Certified Reference Materials

1207 The certificates of analysis state that the expanded uncertainty assumes a normal distribution, a
1208 coverage factor of $k = 2$, and a coverage probability of approximately 95 %.

1209 — The greatest uncertainty is 0.0018 g/210 L.

1210 — The uncertainty on the calibration certificate will be divided by the coverage factor, 2, to arrive at
1211 a standard uncertainty.

1212 — $0.0018 \text{ g/210 L} / 2 = 0.0009 \text{ g/210 L}$ for the standard uncertainty.

1213 Step 5—Calculate combined standard uncertainty

1214 The evaluation will assume that the uncertainty components are independent or uncorrelated and
1215 that the measurement result is the sum of a series of components. The combined standard
1216 uncertainty was calculated.

$$1217 \quad u_c(y) = \sqrt{s_{\text{reproducibility}}^2 + u_{\text{CRMunc}}^2}$$

$$1218 \quad u_c(y) = \sqrt{0.0012_{\text{reproducibility}}^2 + 0.0009_{\text{CRMunc}}^2}$$

$$1219 \quad u_c(y) = \sqrt{0.0012_{\text{reproducibility}}^2 + 0.0009_{\text{CRMunc}}^2}$$

$$1220 \quad u_c(y) = \sqrt{2.25 \times 10^{-6}}$$

$$1221 \quad u_c(y) = 0.0015 \text{ g/210L}$$

1222 Evaluation of Bias

1223 In this example, bias is evaluated as part of the instrument calibration. The calibration method
1224 requires the control to be within 3 % or 0.003 g/210 L (whichever is greater) of the certified
1225 reference value. Furthermore, there shall be no greater than 0.003 g/210 L difference in all three
1226 calibration control values.

1227 The 0.100 g/210 L calibration control data shows a difference between the average and the reference
1228 value of 0.001 g/210 L. This value is less than the combined standard uncertainty and, therefore, is
1229 insignificant. Although the bias is insignificant, the breath alcohol program chooses to include an
1230 additional component in the uncertainty evaluation. An uncertainty contributor equal to the
1231 uncertainty of the reference value of the calibration control used for the bias evaluation was added to
1232 the evaluation of measurement uncertainty.

1233

1234 **Step 3—Quantify uncertainty components - bias component**

1235 The breath alcohol program noted that the difference in the average data for the 0.100 g/210 L
1236 calibration was 0.001 g/210 L.

1237 **Step 4—Convert quantities to standard uncertainties - bias component**

1238 The standard uncertainty for the bias was 0.001 g/210 L.

1239 **Step 5—Calculate combined standard uncertainty - including bias component**

1240 The updated RSS calculation:

$$1241 \quad u_c(y) = \sqrt{s_{\text{reproducibility}}^2 + u_{\text{CRMunc}}^2 + u_{\text{bias}}^2}$$

$$1242 \quad u_c(y) = \sqrt{0.0012^2_{\text{reproducibility}} + 0.0009^2_{\text{CRMunc}} + 0.001^2_{\text{bias}}}$$

$$1243 \quad u_c(y) = \sqrt{0.0012^2_{\text{reproducibility}} + 0.0009^2_{\text{CRMunc}} + 0.001^2_{\text{bias}}}$$

$$1244 \quad u_c(y) = 0.0018 \text{ g/210L}$$

1245 **Step 6—Expand the combined standard uncertainty by coverage factor (k)**

1246 The data from the measurement process is assumed to follow a normal distribution.

1247 The breath alcohol program has 300 calibration control measurements. To determine the k factor,
1248 refer to the student's t-distribution table.

1249 For this example, the coverage factor $k = 2.0$ will expand the uncertainty to a 95.45 % coverage
1250 probability.

$$1251 \quad k = 2.0$$

$$1252 \quad U = 2.0 \times 0.0018 = 0.0036 \text{ g/210L}$$

1253 **Step 7—Evaluate the expanded uncertainty**

1254 The breath alcohol program determined that the evaluation of uncertainty is fit for purpose.

1255 **Step 8—Report the uncertainty**

1256 The breath alcohol program has established a procedure for rounding the expanded uncertainty.
1257 Following that procedure, the expanded uncertainty is rounded to the third decimal place, which will
1258 be 0.004 g/210 L.

1259 The certificate of calibration will contain the following:

1260 — 0.004 g/210L, the combined expanded uncertainty, rounded to the third decimal place.

1261 — $k = 2.0$, the coverage factor based on the Student's t -distribution.

1262 — 95.45 %, the coverage probability

1263 *For reporting calibration results, use the rounded expanded uncertainty to the same level of significance*

1264 *“(0.040 g/210 L to 0.300 g/210 L) \pm 0.004 g/210 L at a coverage probability of 95.45 % ($k=2.0$).”*

1265

Uncertainty Budget Form					
Method:	Calibration of breath alcohol measuring instruments using control data from the calibration method				
Prepared By:	J. Smith		Date:	15-Jun-2023	
Sources of Uncertainty	Type A or B?	Std Dev or Outside Limits	Distribution Model	Divisor	Std Uncertainty (1σ)
Measurement Process Reproducibility (s_r)	A	0.0012	Normal	1	0.0012
Measurement Standards: Uncertainty in Reference Value (u_{CRM})	B	0.0018	Normal	2	0.0009
Bias Component (u_d)	B	0.001	Normal	1	0.001
Combined Uncertainty ($u_c(y)$):	0.0018				
Confidence Level (k):	95.45 % ($k = 2.0$)				
Expanded Uncertainty (U):	0.0036 (0.004)				

1266 **Figure D.1: Uncertainty Budget Form-Calibration of breath alcohol measuring instruments**
 1267 **using control data from the calibration method ^j**

1268

1269

1270 **Annex E**
1271 (informative)

1272 **Bibliography**

1273 The following bibliography is not intended to be an all-inclusive list, review, or endorsement of
1274 literature on this topic.

- 1275 1] National Institute of Standards and Technology (NIST). "SOP 29 Standard Operating Procedure
1276 for the Assignment of Uncertainty." 2019, <https://doi.org/10.6028/NIST.IR.6969-2019>.
- 1277 2] Joint Committee for Guides in Metrology (JCGM). "Evaluation of Measurement Data-Guide to the
1278 Expression of Uncertainty in Measurement (GUM) (JCGM 100:2008 GUM 1995 with minor
1279 corrections)". International Bureau of Weights and Measures (BIPM), 2010.
- 1280 3] S L R Ellison and A Williams (Eds). Eurachem/CITAC guide: Quantifying Uncertainty in Analytical
1281 Measurement, Third edition, (2012) ISBN 978-0-948926-30-3. Available from
1282 www.eurachem.org.
- 1283 4] Joint Committee for Guides in Metrology (JCGM). "International vocabulary of metrology – Basic
1284 and general concepts and associated terms (VIM) (JCGM 200:2012) (2008 with minor
1285 corrections)." Ed. 3, International Bureau of Weights and Measures (BIPM), 2012.
- 1286 5] International Organization for Standardization (ISO). "General requirements for the competence
1287 of testing and calibration laboratories (ISO/IEC 17025:2017)." ISO, 2017. Available from:
1288 <https://webstore.ansi.org/>.
- 1289 6] International Organization for Standardization (ISO). "Reference Materials – Selected Terms and
1290 Definitions (ISO Guide 30:2015)." ISO, 2015.

1291

DRAFT



ASB
ACADEMY
STANDARDS BOARD

Academy Standards Board
410 North 21st Street
Colorado Springs, CO 80904

www.aafs.org/academy-standards-board