



Commission on Forensic Science

March 14, 2025

Division of Criminal Justice Services

80 South Swan Street
Room 118
Albany, NY 12210

John Jay College of Criminal Justice

524 West 59th Street
Room L.61
New York, NY 10019

9:15 AM – 12:42 PM

DRAFT MEETING MINUTES

Commission Members in Attendance:

Lt. Col. Nicholas Banbury
Pasquale Buffolino, Ph.D.¹
James Chithalen, Ph.D.²
Lydia de Castro
Steven Epstein, Esq.
William Fitzpatrick, Esq.
Jessica Goldthwaite, Esq.
Michael Marciano, Ph.D.
Beverly Rauch
Rossana Rosado¹
Michelli Schmitz

DCJS Staff in Attendance:

Taylor Aaron
Dean DeFruscio
Janine Kava
Natasha Harvin-Locklear Esq.
Katherine Mayberry
Shelley Palmer
Joseph Popcun

¹ In accordance with a resolution and related procedures regarding the use of videoconferencing under extraordinary circumstances, which were adopted by the Commission on Forensic Science on June 9, 2023, and added to its bylaws, Pasquale Buffolino and Rossana Rosado participated by videoconferencing from private locations due to extraordinary circumstances.

² Representative of Commission Member James V. McDonald, M.D.

Brianna Robinson
 Lindsey Rockwell
 Matthew Schrantz, Esq.
 Elizabeth Suparmanto

Other Attendees:

Bradley Adams – NYC OCME, Forensic Anthropology Unit
 Julia Becker – New York State Police Crime Laboratory
 Jamie Belrose – New York State Police Crime Laboratory
 Jill Dooley – New York State Police Crime Laboratory
 Nichole Hurbanek – New York State Police Crime Laboratory
 Michael Jankowiak – New York State Police Crime Laboratory
 Jennifer Lady – NYPD Latent Print Section
 Thomas Leach – New York State Police Crime Laboratory
 Kyra McKay – NYC OCME, Department of Forensic Biology
 Craig O'Connor – NYC OCME, Department of Forensic Biology
 Jennifer Odien – NYC OCME, Forensic Anthropology Unit
 Julie Pizziketti – New York State Police Crime Laboratory
 Angela Soler- NYC OCME, Forensic Anthropology Unit
 Jeff Suckow- NYPD Police Laboratory
 Paul Stasaitis- Westchester County Department of Public Safety Crime Laboratory
 Tiffany Vasquez – NYC OCME, Department of Forensic Biology
 Christian Westring – Niagara County Sheriff's Office Forensic Laboratory

*Approximate
 video times*

Prior to the start of the meeting, Ms. Palmer notified members that Chair Rosado was able to listen in virtually, and that Ms. Palmer would run the meeting in her absence. Ms. Palmer proceeded to take a roll call as members were in attendance in Albany, New York City, and virtually. A quorum was established with 8 voting members (Banbury, de Castro, Epstein, Fitzpatrick, Goldthwaite, Marciano, Rauch, and Schmitz); one member participated and voted from a private location due to extraordinary circumstances (Buffolino³).

A request was made to discuss topics from the previous meeting regarding adherence to OSAC standards and the differences between the New York State Department of Health standards for clinical laboratories and standards utilized for publicly funded accredited DNA laboratories. It was determined that both items would be discussed during Old Business.

Ms. Palmer then requested a motion to approve the March 14, 2025, agenda. The motion to approve the agenda was made by Mr. Epstein, seconded by Ms. de Castro, and approved with 9 votes (Banbury, Buffolino, de Castro, Epstein, Fitzpatrick, Goldthwaite, Marciano, Rauch, and Schmitz).

00:00:05
 00:00:31

Ms. Palmer requested a motion to approve the minutes of the December 13, 2024, Commission meeting. The motion to approve the minutes was made by Mr. Epstein, seconded by Ms. de Castro. The motion was approved unanimously.

00:00:32
 00:01:05

³ See FN 1.

Ms. Palmer then requested a motion to enter into Executive Session to discuss matters relating to a current investigation or matters that may lead to the appointment, promotion, demotion, discipline, or suspension of a particular person. The motion was made by Ms. de Castro and seconded by Dr. Buffolino. The motion was approved unanimously. The Commission adjourned into Executive Session at 9:19 am.

0:01:07
0:02:03

The Commission reconvened the open meeting at 10:44 am. Due to technical difficulties the opening of the meeting was not recorded; as such Ms. Palmer confirmed attendance for the record and noted the March 14, 2025, meeting agenda and December 13, 2024, meeting minutes had been voted on and approved. It was then indicated that the Commission took no formal action during Executive Session. A motion was made by Ms. Goldthwaite to send a letter to the Office of Chief Medical Examiner requesting certain records and information pertaining to the investigation of a complaint by a Working Group of the Commission, which were previously requested by the Working Group but have not yet been supplied. The motion was seconded by Mr. Epstein. The motion was approved unanimously.

0:02:08
0:04:01

Next, the Commission reviewed the Accreditation/Laboratory Updates. Matters regarding the following laboratories were considered: Erie County Medical Examiner's Office Forensic Toxicology Laboratory, New York City OCME Department of Forensic Biology, New York City OCME Department of Forensic Toxicology, New York City OCME Forensic Anthropology Unit, New York City Police Department Police Laboratory, New York State Police Crime Laboratory, and Niagara County Sheriff's Office Forensic Laboratory. Representatives from the laboratories were available in person or via Zoom to respond to members' questions.

00:04:03
00:07:33

The next agenda item was Old Business. Ms. Palmer gave a verbal update on the Familial Search Policy.

00:07:35
00:08:25

Ms. Palmer stated that in response to the Commission's request, the DNA Subcommittee voted at their February 28th meeting to create a subgroup of three members to review and provide a written position statement on the NIST Human Factors report. The DNA Subcommittee also voted at their February 28th meeting, in response to a request from the Commission at their September 2021 meeting, to request updated probabilistic genotyping validation records and create a subgroup to review the documents and provide guidance to the New York State DNA Laboratories on the NIST report titled *DNA Mixture Interpretation: A NIST Scientific Foundation Review*.

00:08:27
00:14:43

Ms. Schmitz provided an update, in response to Dr. Marciano's request, on adherence to OSAC standards by New York State laboratories. Most laboratories in the State view the standards as guidance documents and have reviewed the documents and begun to or plan to implement appropriate and practicable recommendations outlined in the documents.

00:15:03
00:23:06

Ms. Palmer then discussed the differences between New York State Department of Health standards for their clinical laboratory program and standards utilized for publicly funded accredited forensic DNA laboratories. Ms. Rauch provided additional background information regarding the Department of Health's standards.

0:23:07
0:26:21

The next agenda item was New Business. Ms. Rockwell gave a verbal update on the 2024 Annual Laboratory Summaries provided to the members.

*Approximate
video times*

0:26:22

0:28:42

The Commission then reviewed laboratory disclosures from the Erie County Central Police Services Forensic Laboratory, Erie County Medical Examiner's Office Forensic Toxicology Laboratory, Monroe County Crime Laboratory, Monroe County Office of the Medical Examiner Forensic Toxicology Laboratory, Nassau County Office of the Medical Examiner Division of Forensic Toxicology, New York City OCME Department of Forensic Biology, New York City Police Department Latent Print Section, New York State Police Crime Laboratory, Suffolk County Crime Laboratory, Westchester County Department of Laboratories and Research Division of Forensic Toxicology, and Westchester County Department of Public Safety Crime Laboratory were reviewed. Representatives from the laboratories were available in person or via Zoom to respond to members' questions.

0:29:13

1:59:35

Commission member Dr. Buffolino left the meeting at 11:56 am.

Ms. Palmer stated that the next meeting of the Commission will take place on June 13, 2025. Mr. Fitzpatrick made a motion to adjourn the meeting, seconded by Ms. de Castro and approved unanimously.

01:59:39

02:00:06

Note:

Videos of the open meeting are available on YouTube.



April 11, 2025



Michelli Schmitz
Erie County Central Police Services
Forensic Laboratory
45 Elm Street
Buffalo, New York 14203

Dear Director Schmitz,

Congratulations! On April 10, 2025, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

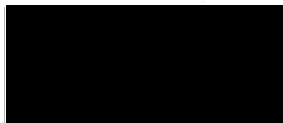
The report was provided to you during the assessment activity.

The provided ANAB accreditation symbol ([Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is a Reassessment scheduled for March 2026.

Thank you for your ongoing commitment to quality and the accreditation process.

Sincerely,



Janet M. Girten
Senior Manager of Accreditation
ANSI National Accreditation Board

cc: New York DCJS
ANAB Office



ANSI National Accreditation Board

**SCOPE OF ACCREDITATION TO:
ISO/IEC 17025:2017**

**Accreditation Requirements for Forensic Testing and Calibration (2023)
FBI Quality Assurance Standards for Forensic DNA Testing Laboratories: 2020**

**Erie County Central Police Services
Forensic Laboratory**

45 Elm Street
Buffalo, New York 14203 USA

FORENSIC TESTING

ISO/IEC 17025 Accreditation Granted: 16 December 2013

Certificate Number: FT-0037 Certificate Expiry Date: 31 August 2026

Discipline: Biology		
Component/Parameter	Item	Key Equipment/Technology
DNA Profile Determination	Short Tandem Repeat (STR) Y-Short Tandem Repeat (Y-STR)	Capillary Electrophoresis
Individual Characteristic Database	DNA Profile	National DNA Index System (NDIS)
Physical Comparison	DNA Profile	Software Program
Qualitative Determination	Body Fluid Feces	Chemical Fluorescence Spectroscopy General Microscopy Immunoassay

Discipline: Fire Debris and Explosives		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Fire Debris	Gas Chromatography Mass Spectrometry

Discipline: Firearms and Toolmarks		
Component/Parameter	Item	Key Equipment/Technology
Function Evaluation	Firearm	Measuring Equipment Visual
Individual Characteristic Database	Ammunition	National Integrated Ballistic Information Network (NIBIN)
Physical Comparison	Ammunition	General Microscopy
Qualitative Determination	Ammunition Firearm	General Microscopy Measuring Equipment Reference Collection
Serial Number Restoration	Physical Item	Chemical General Microscopy Magnetic Visual

Discipline: Impressions		
Component/Parameter	Item	Key Equipment/Technology
Enhancement	Footwear Physical Item Tire	Physical
Physical Comparison	Footwear Tire	Visual

Discipline: Materials (Trace)		
Component/Parameter	Item	Key Equipment/Technology
Chemical/Physical Comparison	Coating Fractured Item General Unknown Ink Polymer Tape	Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Microspectrophotometry Thin Layer Chromatography Visual
Qualitative Determination	Coating General Unknown Polymer Tape	Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Microspectrophotometry Visual

Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Thin-Layer Chromatography
Quantitative Measurement	Solid	Gas Chromatography Mass Spectrometry
Weight Measurement	Botanical Liquid Solid	Balance

When published on a forensic service provider's Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale
Vice President, Forensics



Erie County Central Police Services - Forensic Laboratory

2025 - 17025T - Surveillance Document Review

Prepared by Kim Gin

Data collected on 2025-04-01

ANSI National Accreditation Board

United States

Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the laboratory's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations, and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

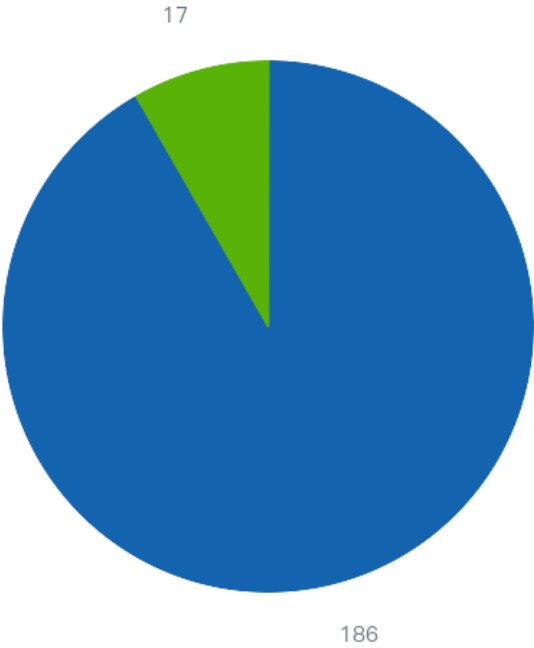
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

Summary of Comments



Audit Comments



May 23, 2025

Melissa Boler
Erie County Medical Examiner's Office
Forensic Toxicology Laboratory
501 Kensington Avenue
Buffalo, NY 14214

Dear Director Boler,

Congratulations! On May 22, 2025, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

The report was provided to you during the assessment activity.

The provided ANAB accreditation symbol ([Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is a Surveillance Assessment without Witnessing scheduled for April 2026.

Thank you for your ongoing commitment to quality and the accreditation process.

Sincerely,

A black rectangular box redacting the signature of Jami St. Clair.

Jami St.Clair
Senior Manager of Accreditation
ANSI National Accreditation Board

cc: Colleen Corcoran, Quality Assurance Specialist
Caitlin Johnson, Toxicologist
New York DCJS
ANAB Office



SCOPE OF ACCREDITATION TO:
ISO/IEC 17025:2017
Accreditation Requirements for Forensic Testing and Calibration (2023)

Erie County Medical Examiner's Office Forensic Toxicology Laboratory

501 Kensington Avenue
Buffalo, New York 14214 USA

FORENSIC TESTING

ISO/IEC 17025 Accreditation Granted: 15 May 2023

Certificate Number: FT-0386

Certificate Expiry Date: 31 August 2027

Discipline: Toxicology		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Immunoassay Liquid Chromatography Mass Spectrometry Microdiffusion Visible Spectroscopy
Qualitative Determination (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography
Quantitative Measurement	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Liquid Chromatography Mass Spectrometry Visible Spectroscopy
Quantitative Measurement (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography

When published on a forensic service provider's Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale
Vice President, Forensics



**Erie County Medical Examiner's Office Forensic Toxicology
Laboratory**

2025 - 17025 - Surveillance Assessment with Witnessing
Prepared by Alexandria Bradley

Data collected on 2025-04-07

ANSI National Accreditation Board

United States

Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the laboratory's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations, and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

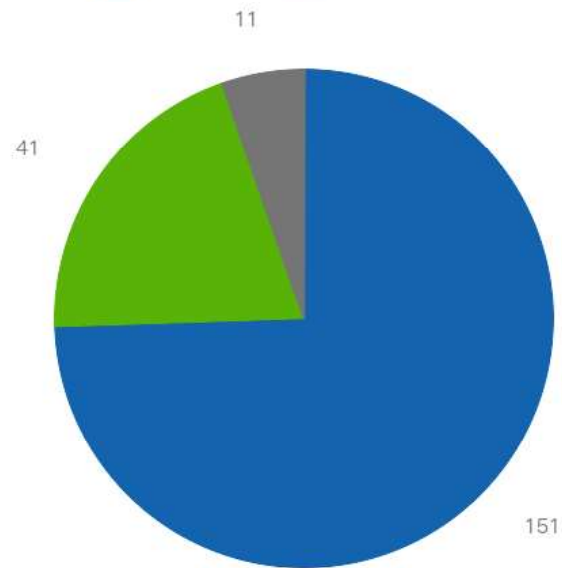
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

Summary of Comments



Audit Comments



Monroe County Crime Laboratory

2025 - 17025 Y3 - Surveillance Assessment without Witnessing

Prepared by Lori Nix

Data collected on 2025-04-01

ANSI National Accreditation Board

United States

Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the laboratory's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations, and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

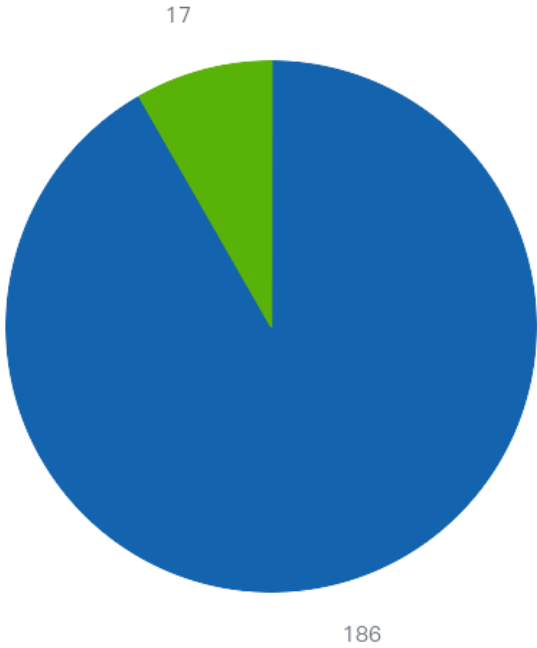
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

Summary of Comments



Audit Comments



April 30, 2025

Rebecca Hartman
Monroe County Office of the Medical Examiner
Forensic Toxicology Laboratory
740 E. Henrietta Road
Rochester, NY 14623

Dear Director Hartman,

Congratulations! On April 28, 2025, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

The report was provided to you during the assessment activity.

The provided ANAB accreditation symbol ([Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is a Surveillance Assessment with Witnessing scheduled for March 2026.

Thank you for your ongoing commitment to quality and the accreditation process.

Sincerely,



Jami St.Clair
Senior Manager of Accreditation
ANSI National Accreditation Board

cc: Ana Ovalle, Assistant Chief Toxicologist
New York DCJS
ANAB Office



ANSI National Accreditation Board

**SCOPE OF ACCREDITATION TO:
ISO/IEC 17025:2017
Accreditation Requirements for Forensic Testing and Calibration (2023)**

**Monroe County Office of the Medical Examiner
Forensic Toxicology Laboratory**
740 E. Henrietta Road
Rochester, New York 14623 USA

FORENSIC TESTING

ISO/IEC 17025 Accreditation Granted: 20 May 2024

Certificate Number: FT-0408

Certificate Expiry Date: 31 July 2028

Discipline: Toxicology – General Testing		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Ante-Mortem Biological Item Post-Mortem Biological Item	Diode Array Ultraviolet Spectrophotometry Gas Chromatography Immunoassay Liquid Chromatography Mass Spectrometry Ultraviolet Spectroscopy Visible Spectroscopy
Qualitative Determination (Volatiles)	Ante-Mortem Biological Item Liquid Post-Mortem Biological Item	Gas Chromatography Mass Spectrometry
Quantitative Measurement	Ante-Mortem Biological Item Post-Mortem Biological Item	Diode-Array Ultraviolet Spectrophotometry Gas Chromatography Liquid Chromatography Mass Spectrometry Ultraviolet Spectroscopy Visible Spectroscopy
Quantitative Measurement (Volatiles)	Ante-Mortem Biological Item Liquid Post-Mortem Biological Item	Gas Chromatography Mass Spectrometry

When published on a forensic service provider’s Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.

This Scope of Accreditation, version 002, was last updated on: 28 April 2025 and is valid only when accompanied by the Certificate.

Page 1 of 2



Pamela L. Sale
Vice President, Forensics



**Monroe County Office of the Medical Examiner - Forensic
Toxicology Laboratory**

2025 - 17025T - Surveillance Document Review

Prepared by Lori Nix

Data collected on 2025-03-01

ANSI National Accreditation Board

United States

Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the laboratory's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations, and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

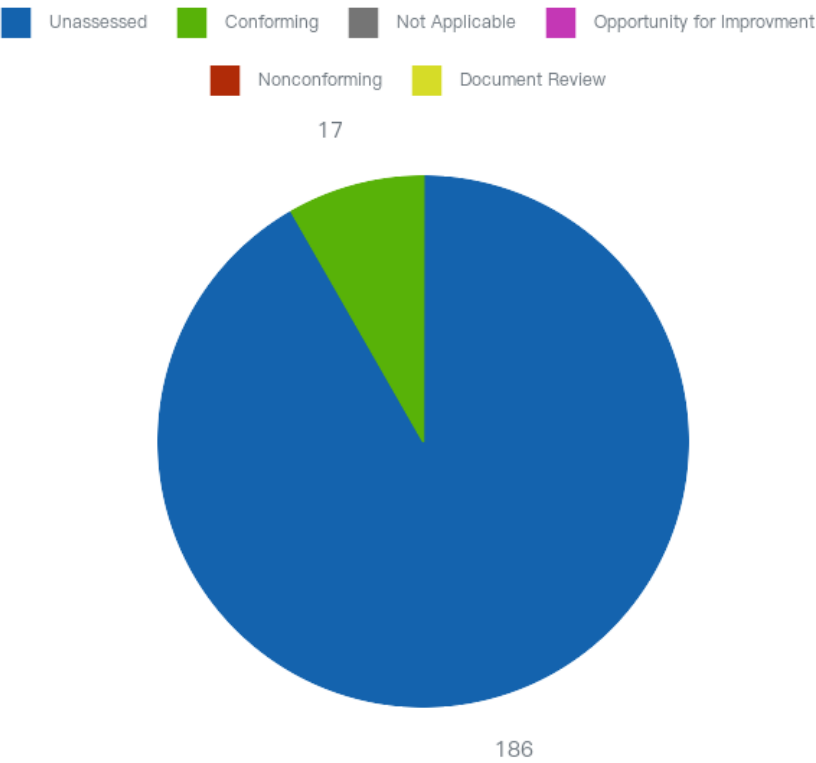
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

Summary of Comments



Audit Comments



April 28, 2025

Timothy Hahn
Nassau County Office of the Medical Examiner
Division of Forensic Toxicology
2251 Hempstead Tpk., Bldg. R
East Meadow, NY 11554

Dear Director Hahn,

Congratulations! On April 28, 2025, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

The report was provided to you during the assessment activity.

The provided ANAB accreditation symbol ([Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is a Surveillance Assessment without Witnessing scheduled for March 2026.

Thank you for your ongoing commitment to quality and the accreditation process.

Sincerely,



Jami St.Clair
Senior Manager of Accreditation
ANSI National Accreditation Board

cc: Joseph Avella, Chief Toxicologist
Nicole DeSantis, FS-IV Lab Supervisor
New York DCJS
ANAB Office



ANSI National Accreditation Board

**SCOPE OF ACCREDITATION TO:
ISO/IEC 17025:2017**

Accreditation Requirements for Forensic Testing and Calibration (2023)

**Nassau County Medical Examiner
Division of Forensic Toxicology**

2251 Hempstead Tpk., Bldg. R
East Meadow, New York 11554 USA

FORENSIC TESTING

ISO/IEC 17025 Accreditation Granted: 16 March 2023

Certificate Number: FT-0380

Certificate Expiry Date: 31 July 2027

Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Gas Chromatography Mass Spectrometry Visual

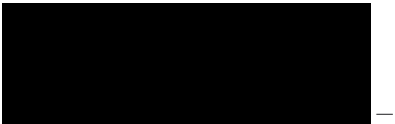
Discipline: Toxicology		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Ante-Mortem Biological Item Post-Mortem Biological Item	Colorimetry Gas Chromatography Immunoassay Liquid Chromatography Mass Spectrometry Ultraviolet Spectroscopy Visible Spectroscopy
Qualitative Determination (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography
Quantitative Measurement	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Immunoassay Liquid Chromatography Mass Spectrometry Visible Spectroscopy

This Scope of Accreditation, version 002, was last updated on: 28 April 2025 and is valid only when accompanied by the Certificate.

Page 1 of 2

Quantitative Measurement (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography
---	--	--------------------

When published on a forensic service provider’s Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale
Vice President, Forensics



**Nassau County Office of the Medical Examiner Division of
Forensic Toxicology**

2025 - 17025T - Surveillance Assessment

Prepared by Pamela Mikulcik

Data collected on 2025-03-20

ANSI National Accreditation Board

United States

Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the laboratory's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations, and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

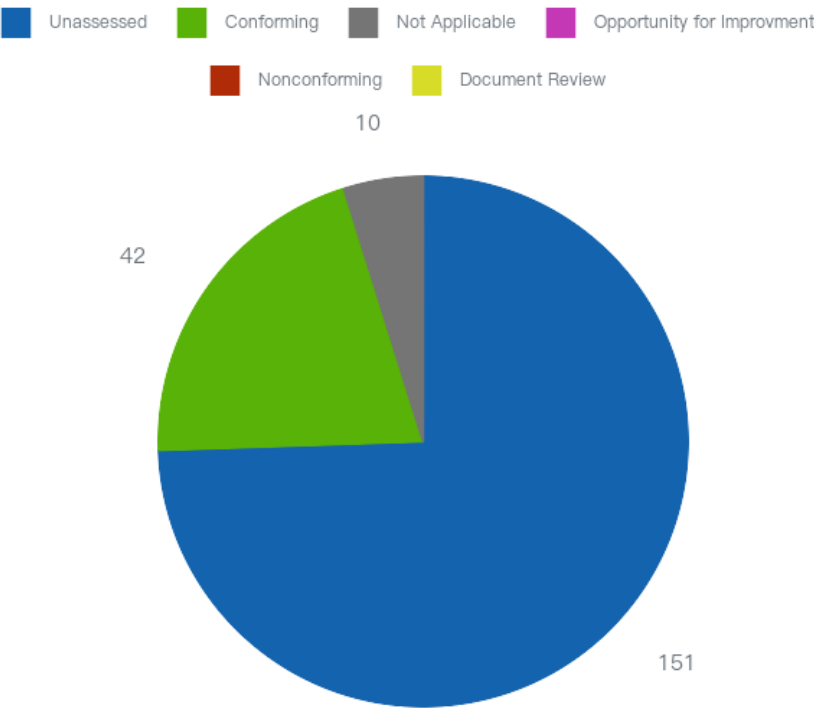
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

Summary of Comments



Audit Comments



NYC
**Office of Chief
Medical Examiner**

Nicholas W. Schultz
First Deputy Commissioner

421 East 26th Street, New York, NY 10016
Telephone: (212) 323-1893
Email: nschultz@ocme.nyc.gov
Official Website: www.nyc.gov/ocme

May 16, 2025

Rossana Rosado, Commissioner
Division of Criminal Justice Services
Alfred E. Smith Office Building
80 South Swan Street
Albany, NY 12210
Via Rossana.Rosado@dcjs.ny.gov

Dear Commissioner Rosado:

I am writing to inform the New York State Commission on Forensic Science that Dr. Craig O'Connor has been appointed as the Forensic Biology Director Designate to replace interim Director First Deputy Chief Medical Examiner Dr. Michele Slone.

Dr. O'Connor will be the permanent replacement for former Director Timothy Kupferschmid.

Thank you very much.

Sincerely,

A black rectangular redaction box covering the signature of Nicholas W. Schultz.

Nicholas W. Schultz
First Deputy Commissioner

cc. Shelley Palmer, Director, DCJS Office of Forensic Services
forensiclabs@dcjs.ny.gov
Jill Spriggs, ANAB Senior Accreditation Manager
jspriggs@anab.org
[anab@anab.org](http://anab.org), ANSI National Accreditation Board (ANAB)



May 8, 2025

Dr. Gail Cooper
New York City Office of Chief Medical Examiner
Department of Forensic Toxicology
520 First Avenue
New York, NY 10016

Dear Director Cooper,

Congratulations! On May 6, 2025, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

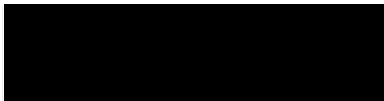
The report was provided to you during the assessment activity.

The provided ANAB accreditation symbol ([Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is a Surveillance Assessment without Witnessing scheduled for April 2026.

Thank you for your ongoing commitment to quality and the accreditation process.

Sincerely,



Jami St.Clair
Senior Manager of Accreditation
ANSI National Accreditation Board

cc: Elba Arango, Assistant Director of Forensic Toxicology
Reinaldo Fonseca, Assistant Director / Assistant Quality Manager
New York DCJS
ANAB Office



CERTIFICATE OF ACCREDITATION

The ANSI National Accreditation Board

Hereby attests that

**New York City Office of Chief Medical Examiner
Department of Forensic Toxicology
520 First Avenue, New York, New York 10016 USA**

Fulfills the requirements of

ISO/IEC 17025:2017

Accreditation Requirements for Forensic Testing and Calibration (2023)

In the field of

Forensic Testing

This certificate is valid only when accompanied by a current scope of accreditation document.
The current scope of accreditation can be verified at www.anab.org.



Pamela L. Sale, Vice President, Forensics

Expiry Date: 31 August 2027
Certificate Number: FT-0387





SCOPE OF ACCREDITATION TO:
ISO/IEC 17025:2017
Accreditation Requirements for Forensic Testing and Calibration (2023)

New York City Office of Chief Medical Examiner
Department of Forensic Toxicology
 520 First Avenue
 New York, New York 10016 USA

FORENSIC TESTING

ISO/IEC 17025 Accreditation Granted: 25 May 2023

Certificate Number: FT-0387

Certificate Expiry Date: 31 August 2027

Discipline: Toxicology – General Testing		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Liquid Chromatography Mass Spectrometry Microdiffusion Visible Spectroscopy
Qualitative Determination (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography
Quantitative Measurement	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Liquid Chromatography Mass Spectrometry Visible Spectroscopy
Quantitative Measurement (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography

When published on a forensic service provider's Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale
 Vice President, Forensics



**New York City Office of Chief Medical Examiner - Department of
Forensic Toxicology**

2025 - 17025 - Y2 - Surveillance Assessment with Witnessing

Prepared by Albert Elian

Data collected on 2025-04-01

ANSI National Accreditation Board

United States

Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the laboratory's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations, and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

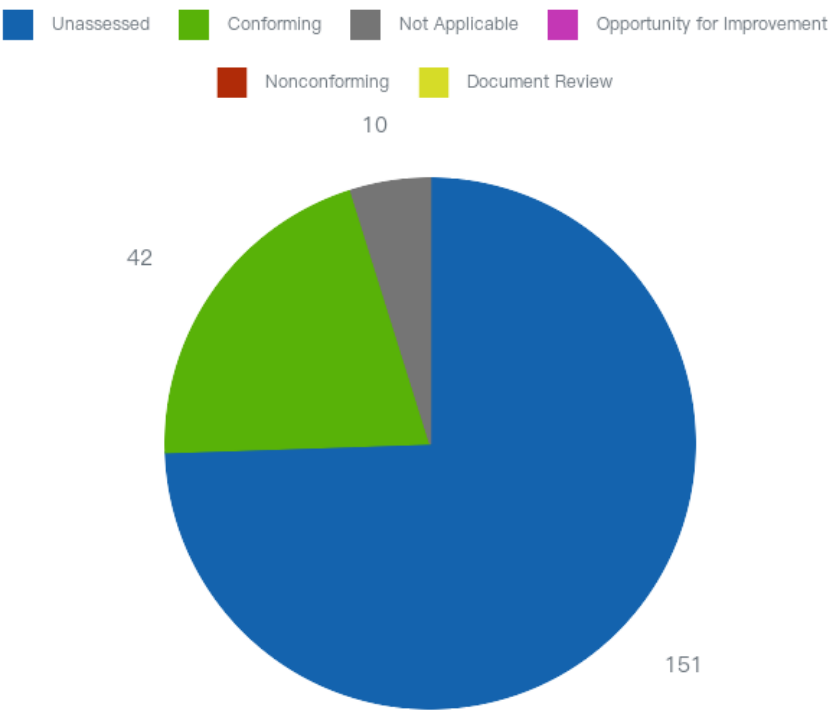
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

Summary of Comments



Audit Comments



ANSI National Accreditation Board

**SCOPE OF ACCREDITATION TO:
ISO/IEC 17020:2012**

Accreditation Requirements for Forensic Inspection (2023)

**New York City Office of Chief Medical Examiner
Forensic Anthropology Unit**

520 1st Avenue, New York, New York 10016 USA

FORENSIC INSPECTION

Type C Inspection Body

ISO/IEC 17020 Accreditation Granted: 21 November 2018

Certificate Number: FI-0014

Certificate Expiry Date: 30 April 2027

Discipline: Anthropology		
Component/Parameter	Item	Key Equipment/Technology
Field Sampling	Human Remains Physical Item	Not Applicable
Biological Profile	Human Remains	Software Program Visual
Commingled Remains	Human Remains	Visual
Identification of Person	Human Remains Medical Record Physical Item	Imaging Radiology
Medicolegal Significance	Human Remains	Not Applicable
Minimum Number of Individuals (MNI)	Human Remains	Not Applicable
Pathology/Trauma Analysis	Human Remains	General Microscopy Radiology Visual
Physical Comparison	Fractured Item	Visual
Postmortem Interval/Taphonomy	Human Remains	Visual
Qualitative Determination	Human Remains	Visual

When published on a forensic service provider's Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale
Vice President, Forensics

From: [Odien, Jennifer \(OCME\)](#)
To: [Hamburg, Chris](#)
Cc: [Adams, Bradley \(OCME\)](#); [Soler, Angela \(OCME\)](#); [dcjs.sm.forensiclabs](#)
Subject: Notice of management change for the NYC OCME FAU
Date: Tuesday, May 20, 2025 1:45:03 PM

ATTENTION: This email came from an external source. Do not open attachments or click on links from unknown senders or unexpected emails.

Good afternoon Chris,

I hope you are doing well. I'm writing to inform you of an upcoming leadership change within the Forensic Anthropology Unit. Dr. Adams will be retiring, with his last day scheduled for May 30th. We are pleased to announce that Dr. Angela Soler will assume the role of Director of the Forensic Anthropology Unit following his departure. Please be sure to include Dr. Soler (ASoler@ocme.nyc.gov) on emails going forward.

If you have any questions about this transition, please let me know.

Thanks!

Jen

Jennifer K. Odien, PhD, D-ABFA

Forensic Anthropologist / WTC Anthropologist

Office of Chief Medical Examiner

520 First Avenue

New York, New York, 10016

WTC Hotline: 212-447-7884

Tel: 212-447-2767

Cell: 347-386-3290

Email: JOdien@ocme.nyc.gov

Web: <http://www.nyc.gov/ocme>



Click [HERE](#) to provide feedback for the Forensic Anthropology Unit

CONFIDENTIALITY NOTICE THIS E-MAIL TRANSMISSION MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL, PROPRIETARY, SUBJECT TO COPYRIGHT, AND/OR EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAW. IT IS FOR THE USE OF INTENDED RECIPIENTS ONLY. If you are not an intended recipient of this message, please notify the original sender immediately by forwarding what you received and then delete all copies of the correspondence and attachments from your computer system. Any use, distribution, or disclosure of this message by unintended recipients is not authorized and may be unlawful.

From: Odien, Jennifer (OCME) <JOdien@ocme.nyc.gov>
Sent: Monday, June 2, 2025 10:41 AM
To: QualityMatters
Cc: dcjs.sm.forensiclabs; Hamburg, Chris; Soler, Angela (OCME)
Subject: Update for Forensic Anthropology Director Position

ATTENTION: This email came from an external source. Do not open attachments or click on links from unknown senders or unexpected emails.

Good morning,

I am writing to provide an update regarding the Director of Forensic Anthropology position.

Dr. Adams' last day was Friday, May 30th. In the interim, Dr. Angela Soler has been selected as the Forensic Anthropology Director Designate. We are currently awaiting for HR and city officials to formally update her job title to Director of Forensic Anthropology.

Once the title change is official, I will send out a follow-up announcement.

Best,
Jennifer

Jennifer K. Odien, PhD, D-ABFA
Forensic Anthropologist / WTC Anthropologist
Office of Chief Medical Examiner
520 First Avenue
New York, New York, 10016
WTC Hotline: 212-447-7884
Tel: 212-447-2767
Cell: 347-386-3290
Email: JOdien@ocme.nyc.gov
Web: <http://www.nyc.gov/ocme>



OCME *cares*
commitment • accountability
resilience • excellence • service

Click [HERE](#) to provide feedback for the Forensic Anthropology Unit

CONFIDENTIALITY NOTICE THIS E-MAIL TRANSMISSION MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL, PROPRIETARY, SUBJECT TO COPYRIGHT, AND/OR EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAW. IT IS FOR THE USE OF INTENDED RECIPIENTS ONLY. If you are not an intended recipient of this message, please notify the original sender immediately by forwarding what you received and then delete all copies of the correspondence and attachments from your computer system. Any use, distribution, or disclosure of this message by unintended recipients is not authorized and may be unlawful.

From: QualityMatters <qualitymatters@anab.org>
Sent: Monday, May 5, 2025 5:42 PM
To: BECKER, JULIA (TROOPERS)
Cc: dcjs.sm.forensiclabs; troopers.sm.q.assure; DOOLEY, JILL M (TROOPERS); Janet Girten
Subject: RE: Change in Personnel - NYSP Crime Lab (FT-0025)

ATTENTION: This email came from an external source. Do not open attachments or click on links from unknown senders or unexpected emails.

Hi Julia!

Thank you for the notification! Jan will contact you if additional information is needed.

Have a great day/week!

Caprice

Caprice Fowler | ANAB
Manager, Operations
ANSI National Accreditation Board
D.C. | Fort Wayne, IN
414-501-5375 (direct, NC) | cfowler@anab.org
414-501-5494 (main)
www.anab.org
qualitymatters@anab.org
ANAB Training - www.anab.org/training



The World Accreditation Day 2025 video is available from the [IAF/ILAC YouTube channel](https://www.youtube.com/channel/UCVZHDfhDhFo) or using the direct link: <https://youtu.be/VSZHDfhDhFo>



This e-mail is intended exclusively for the individual or entity to which it is addressed or otherwise directed. This e-mail (and its attachments) may contain confidential, proprietary or privileged information, and unauthorized disclosure or use of such information is prohibited absent express authorization of the sender. If you receive this e-mail in error, please notify the sender and delete this e-mail from your system.

From: BECKER, JULIA (TROOPERS) <JULIA.BECKER@troopers.ny.gov>
Sent: Monday, May 5, 2025 9:11 AM
To: QualityMatters <qualitymatters@anab.org>
Cc: dcjs.sm.forensiclabs <dcjsforensiclabs@dcjs.ny.gov>; troopers.sm.q.assure <qa@troopers.ny.gov>; DOOLEY, JILL M (TROOPERS) <Jill.M.Dooley@troopers.ny.gov>
Subject: [EXTERNAL] Change in Personnel - NYSP Crime Lab (FT-0025)

Good morning,

Please note that effective 4/23/2025, Brad Brown retired as the Associate Director of the Physical Comparison Unit where he had overall responsibility for the Fire Debris and Firearms disciplines.

Thank you,

JULIA BECKER

Director of Quality Assurance

New York State Police

Forensic Investigation Center

1220 Washington Ave, Bldg 30, Albany, NY 12226

(518) 457-6406 | julia.becker@troopers.ny.gov

www.troopers.ny.gov

CONFIDENTIALITY NOTICE: This e-mail, including any attachments, may contain highly sensitive and confidential information. It is intended only for the individual(s) named. If you received this e-mail in error or from someone who was not authorized to send it to you, do not disseminate, copy or otherwise use this e-mail or its attachments. Please notify the sender immediately by reply e-mail and delete the e-mail from your system.



March 27, 2025

Christian Westring
Niagara County Sheriff's Office
Forensic Laboratory
5526 Niagara Street, Ext.
Lockport, New York 14094

Dear Director Westring,

Congratulations! On March 14, 2025, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

The report was provided to you during the assessment activity.

The provided ANAB accreditation symbol ([Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is a Reassessment scheduled for February 2026.

Thank you for your ongoing commitment to quality and the accreditation process.

Sincerely,



Chris Hamburg
Associate Director of Accreditation
ANSI National Accreditation Board

cc: Kevin Condel, Quality Assurance Manager
NY DCJS
ANAB Office



ANSI National Accreditation Board

**SCOPE OF ACCREDITATION TO:
ISO/IEC 17025:2017**

Accreditation Requirements for Forensic Testing and Calibration (2023)

Niagara County Sheriff's Office Forensic Laboratory

5526 Niagara Street, Ext.
Lockport, New York 14094 USA

FORENSIC TESTING

ISO/IEC 17025 Accreditation Granted: 11 June 2013

Certificate Number: FT-0311

Certificate Expiry Date: 30 June 2026

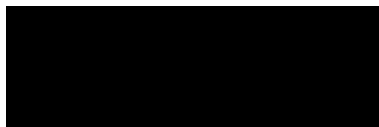
Discipline: Biology		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Body Fluid	Chemical General Microscopy Immunoassay

Discipline: Firearms and Toolmarks		
Component/Parameter	Item	Key Equipment/Technology
Function Evaluation	Firearm	Measuring Equipment Visual
Physical Comparison	Ammunition	General Microscopy Software Program Visual
Qualitative Determination	Ammunition Firearm	Chemical General Microscopy Measuring Equipment Reference Collection
Serial Number Restoration	Physical Item	Chemical Visual

Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry
Quantitative Measurement	Solid	Gas Chromatography Mass Spectrometry
Weight Measurement	Botanical Liquid Solid	Balance

Discipline: Toxicology - General Testing		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Immunoassay Liquid Chromatography Mass Spectrometry
Qualitative Determination (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography
Quantitative Measurement	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Liquid Chromatography Mass Spectrometry
Quantitative Measurement (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography

When published on a forensic service provider's Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale
Vice President, Forensics



June 2, 2025

Kristie Barba
Onondaga County Medical Examiner's Office
Forensic Toxicology Laboratory
100 Elizabeth Blackwell Street
Syracuse, NY 13210

Dear Director Barba,

Congratulations! On June 1, 2025, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

The report was provided to you during the assessment activity.

The provided ANAB accreditation symbol ([Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is a Surveillance Assessment without Witnessing scheduled for March 2026.

Thank you for your ongoing commitment to quality and the accreditation process.

Sincerely,



Jill Spriggs
Senior Manager of Accreditation
ANSI National Accreditation Board

cc: Erin Vandee, Quality Assurance Officer
New York DCJS
ANAB Office



SCOPE OF ACCREDITATION TO:
ISO/IEC 17025:2017
Accreditation Requirements for Forensic Testing and Calibration (2023)

Onondaga County Medical Examiner's Office
Forensic Toxicology Laboratory
 100 Elizabeth Blackwell Street
 Syracuse, New York 13210 USA

FORENSIC TESTING

ISO/IEC 17025 Accreditation Granted: 14 April 2023

Certificate Number: FT-0381

Certificate Expiry Date: 31 July 2027

Discipline: Toxicology – General Testing		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Ante-Mortem Biological Item Post-Mortem Biological Item	Colorimetry Gas Chromatography Immunoassay Infrared Spectroscopy Liquid Chromatography Mass Spectrometry Microdiffusion Ultraviolet Spectroscopy Visible Spectroscopy
Qualitative Determination (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography
Quantitative Measurement	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Liquid Chromatography Mass Spectrometry Ultraviolet Spectroscopy Visible Spectroscopy
Quantitative Measurement (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography

When published on a forensic service provider's Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale
Vice President, Forensics



**Onondaga County Medical Examiner's Office Forensic Toxicology
Laboratory**

2025 - 17025T - Surveillance Assessment

Prepared by Lynn Langford

Data collected on 2025-04-01

ANSI National Accreditation Board

United States

Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the laboratory's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations, and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

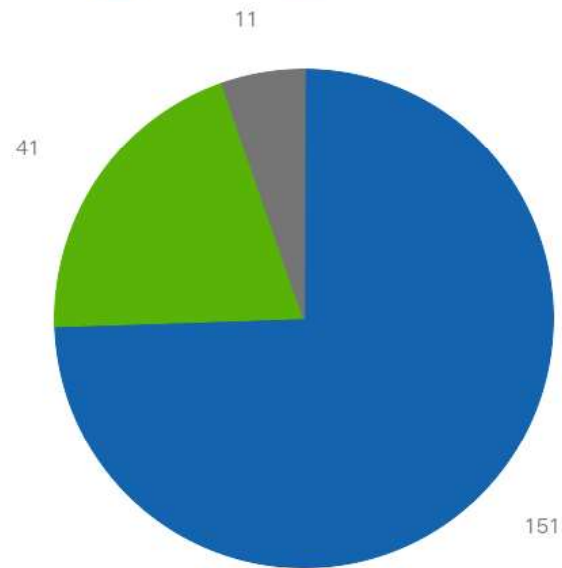
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

Summary of Comments



Audit Comments



May 12, 2025

Michael Lehrer
Suffolk County Medical Examiner
Toxicology Laboratory
725 Veterans Memorial Highway, Bldg 487
William J Lindsay Complex
Hauppauge NY 11788

Dear Director Lehrer,

Congratulations! On May 8, 2025, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

The report was provided to you during the assessment activity.

The provided ANAB accreditation symbol ([Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is a Surveillance Assessment with Witnessing scheduled for March 2026.

Thank you for your ongoing commitment to quality and the accreditation process.

Sincerely,



Nita Bolz
Senior Manager of Accreditation
ANSI National Accreditation Board

cc: Edward Minden, Quality Assurance Manager
Michael Katz, Assist Chief Toxicologist
New York DCJS
ANAB Office



ANSI National Accreditation Board



**SCOPE OF ACCREDITATION TO:
ISO/IEC 17025:2017
Accreditation Requirements for Forensic Testing and Calibration (2023)**

Suffolk County Medical Examiner - Toxicology Laboratory

725 Veterans Memorial Highway, Building 487, William J Lindsay Complex
Hauppauge, New York 11788 USA

FORENSIC TESTING

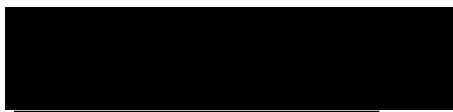
ISO/IEC 17025 Accreditation Granted: 26 April 2024

Certificate Number: FT-0407

Certificate Expiry Date: 31 July 2028

Discipline: Toxicology - General Testing		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Immunoassay Liquid Chromatography Mass Spectrometry Ultraviolet Spectroscopy Visible Spectroscopy
Qualitative Determination (Volatiles)	Ante-Mortem Biological Item Liquid Post-Mortem Biological Item	Gas Chromatography
Quantitative Measurement	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Liquid Chromatography Mass Spectrometry Visible Spectroscopy
Quantitative Measurement (Volatiles)	Ante-Mortem Biological Item Liquid Post-Mortem Biological Item	Gas Chromatography

When published on a forensic service provider's Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale
Vice President, Forensics

This Scope of Accreditation, version 002, was last updated on: 08 May 2025 and is valid only when accompanied by the Certificate.

Page 1 of 1



Suffolk County Medical Examiner - Toxicology Laboratory

2025 - 17025T - Surveillance Document Review

Prepared by Alexandria Bradley

Data collected on 2025-03-01

ANSI National Accreditation Board

United States

Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the laboratory's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations, and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

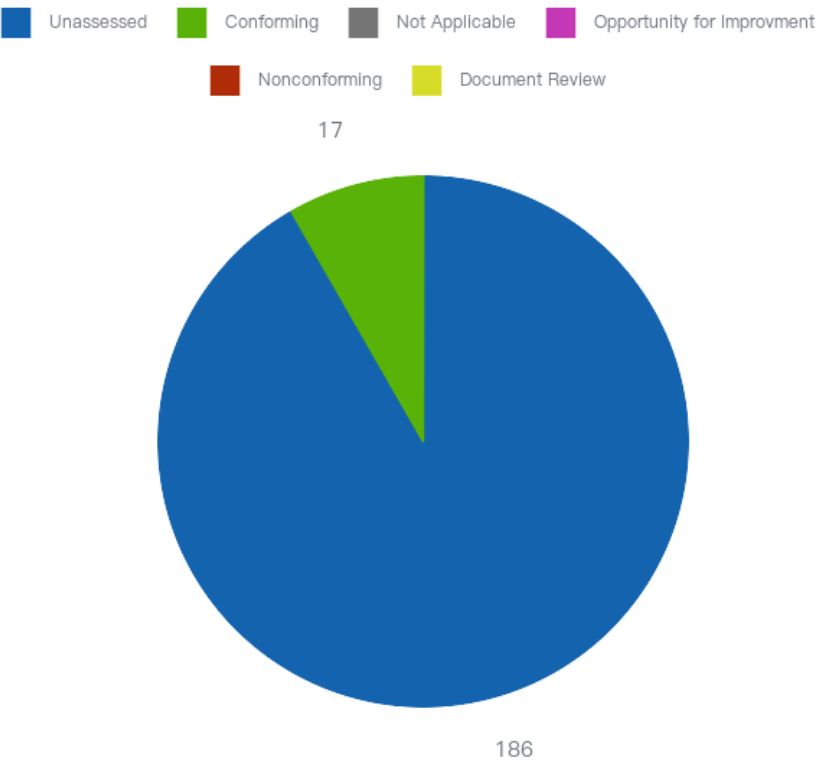
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

Summary of Comments



Audit Comments



April 1, 2025

Christopher Cording
Westchester County Department of Laboratories & Research
Division of Forensic Toxicology
10 Dana Road
Valhalla, New York 10595

Dear Director Cording,

Congratulations! On March 31, 2025, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

The report was provided to you during the assessment activity.

The provided ANAB accreditation symbol ([Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is a Surveillance Assessment without Witnessing scheduled for March 2026.

Thank you for your ongoing commitment to quality and the accreditation process.

Sincerely,



Jami St.Clair
Senior Manager of Accreditation
ANSI National Accreditation Board

cc: Mary Jane Masih, Quality Manager
New York DCJS
ANAB Office



ANSI National Accreditation Board

SCOPE OF ACCREDITATION TO:
ISO/IEC 17025:2017
Accreditation Requirements for Forensic Testing and Calibration (2023)

Westchester County Department of Laboratories & Research:
Division of Forensic Toxicology
10 Dana Road
Valhalla, New York, 10595 USA

FORENSIC TESTING

ISO/IEC 17025 Accreditation Granted: 08 May 2023

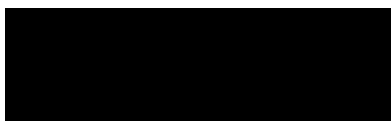
Certificate Number: FT-0385 Certificate Expiry Date: 31 July 2027

Discipline: Toxicology		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Ante-Mortem Biological Item Post-Mortem Biological Item	Colorimetry Gas Chromatography Immunoassay Ion Specific Electrode Liquid Chromatography Mass Spectrometry Ultraviolet Spectroscopy Visible Spectroscopy
Qualitative Determination (Volatiles)	Ante-Mortem Biological Item Liquid Post-Mortem Biological Item	Gas Chromatography
Quantitative Measurement	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Ion Specific Electrode Liquid Chromatography Mass Spectrometry Ultraviolet Spectroscopy Visible Spectroscopy
Quantitative Measurement (Volatiles)	Ante-Mortem Biological Item Liquid Post-Mortem Biological Item	Gas Chromatography

**Westchester County Department of
Laboratories & Research:
Division of Forensic Toxicology**

FT-0385

When published on a forensic service provider's Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale
Vice President, Forensics



**Westchester County Department of Laboratories & Research -
Division of Forensic Toxicology**

2025 - 17025T - Surveillance Assessment

Prepared by Kim Gin

Data collected on 2025-03-25

ANSI National Accreditation Board

United States

Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the laboratory's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations, and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

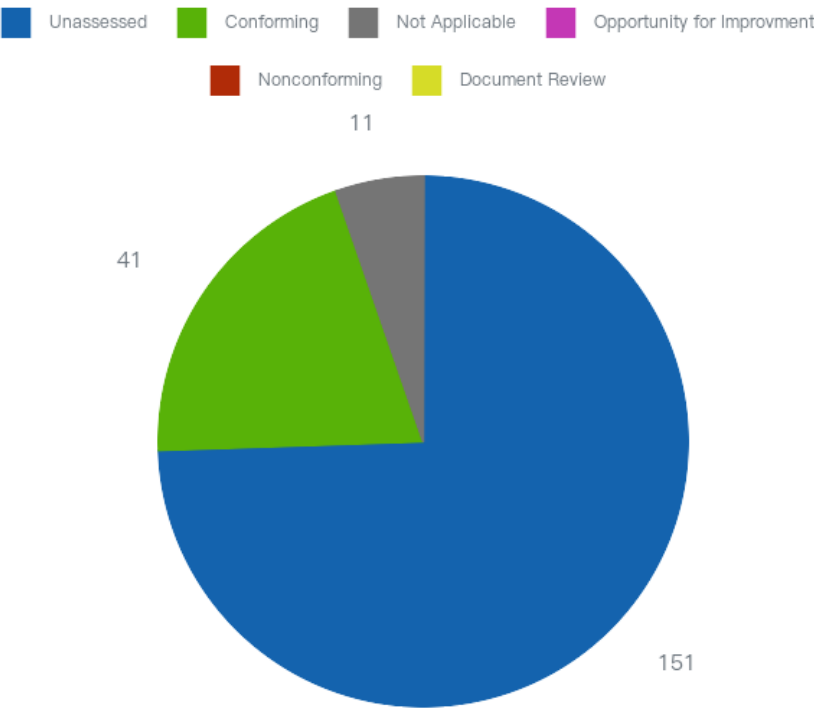
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

Summary of Comments



Audit Comments



June 9, 2025

Cristina Pires
Yonkers Police Department
Forensic Science Laboratory
104 South Broadway
Yonkers, New York 10701

Dear Director Pires,

Congratulations! On June 9, 2025, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

To retain accredited status until the expiry date on the Certificate of Accreditation, a conformity assessment body (CAB) is expected to continue to meet the Requirements under which it was accredited, as well as the responsibilities and obligations of ANAB's Terms and Conditions for Accreditation. The principal means by which ANAB monitors on-going conformance are Program dependent and may include surveillance activities, CAB and personnel performance in proficiency testing and other monitoring activities, complaints, and CAB self-disclosure of significant events and nonconformities.

The planned surveillance activity and reassessment schedule is listed below:

- | | |
|------------|--|
| • May 2026 | Surveillance Assessment without Witnessing |
| • May 2027 | Surveillance Assessment with Witnessing |
| • May 2028 | Surveillance Assessment without Witnessing |
| • May 2029 | Reassessment |

The provided ANAB accreditation symbol ([Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The report was provided to you during the assessment activity and an electronic version of accreditation documents is included with this letter.

Achieving accreditation is the result of an extensive commitment of resources and much preparation by the management and personnel of the entire organization. I commend the efforts of all who were involved in this achievement. On behalf of ANAB, I extend my sincere congratulations to you. If you have any questions or if ANAB might assist you in any way, please feel free to get in touch with us at qualitymatters@anab.org.

Sincerely,



Nita Bolz
Senior Manager of Accreditation
ANSI National Accreditation Board

cc: Crystal Washington, Scientist IV
NY DCJS
ANAB Office



CERTIFICATE OF ACCREDITATION

The ANSI National Accreditation Board

Hereby attests that

**Yonkers Police Department
Forensic Science Laboratory
104 South Broadway, Yonkers, New York 10701 USA**

Fulfills the requirements of

ISO/IEC 17025:2017

Accreditation Requirements for Forensic Testing and Calibration (2023)

In the field of

Forensic Testing

This certificate is valid only when accompanied by a current scope of accreditation document.
The current scope of accreditation can be verified at www.anab.org.



Pamela L. Sale, Vice President, Forensics

Expiry Date: 30 September 2029
Certificate Number: FT-0208





**SCOPE OF ACCREDITATION TO:
ISO/IEC 17025:2017
Accreditation Requirements for Forensic Testing and Calibration (2023)**

Yonkers Police Department Forensic Science Laboratory

104 South Broadway
Yonkers, New York 10701 USA

FORENSIC TESTING

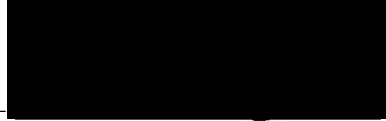
ISO/IEC 17025 Accreditation Granted: 18 December 2012

Certificate Number: FT-0208 Certificate Expiry Date: 30 September 2029

Discipline: Friction Ridge		
Component/Parameter	Item	Key Equipment/Technology
Enhancement	Ridge Detail	Chemical Physical Software Program

Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Liquid Chromatography Mass Spectrometry Microcrystalline Raman Spectroscopy Visual
Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography Liquid Chromatography Mass Spectrometry
Weight Measurement	Botanical Liquid Solid	Balance

When published on a forensic service provider's Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale
Vice President, Forensics



Yonkers Police Department Forensic Science Laboratory

2025 - 17025T - Reassessment

Prepared by Lynn Langford

Data collected on 2025-05-20

ANSI National Accreditation Board

United States

Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the laboratory's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations, and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

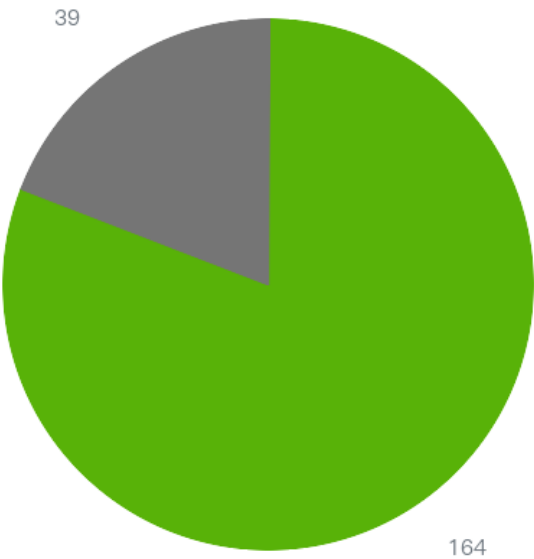
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

Summary of Comments



Audit Comments
