Toxics Data Acquisition Specifications

General Information

- Contact information including a name, address, phone number and email
- Full bibliographic citation of the data set
- A copy of any supporting documentation that describes the sampling efforts, analytical methodologies, purpose of the study, training and experience of staff involved in managing the project, and quality assurance procedures

Location/Sampling Information

- Sample Identifier (e.g., station name)
- Latitude and longitude with units of measurement (decimal degrees versus degrees, minutes, seconds) clearly identified (see Attachment 5 for additional guidance)
- Geographic datum (NAD27 or NAD83) (see Attachment 5 for additional guidance)
- Total depth of sampling station
- Depth of sample (if applicable)
- Time of sampling
- Date of sampling If a range of dates is provided, please indicate a default date that should be used
- Sample type (e.g., composite, discrete, etc.)
- Sample replicate information (e.g., if sample is a replicate, duplicate, etc.)
- Sample source (e.g., sample was taken from an MS4 or NPDES outfall, water column, etc.)

Chemical Concentration Data

- Parameter analyzed including the Chemical Abstract Number if known
- Detection Limits. The CBPO records the upper and lower limits of detection. If only one limit is provided, please confirm that it is the lower detection limit
- Units of measurement (e.g., mg/kg, ug/kg, etc.) <u>Clearly identify if the units for sediments</u> and fish tissue are in wet weight or dry weight
- Medium sampled (e.g., sediment, water, tissue)
- If tissue data, specify sample type (e.g., filet, filet skin off, whole tissue etc.) Please be as specific as possible. If the sample is a filet, indicate whether it is skin on or off. If it is a bivalve and you qualify it as a "whole" sample, please indicate if it was shucked before analysis
- If tissue data, provide taxonomic name
- Detailed description of any qualifiers
- Analytical methodologies (include EPA methodology number if applicable)
- Chemical species (e.g., filtered, dissolved, bulk, total recoverable)

Toxicity Data

- Test location (e.g., lab, field)
- Test media (e.g., freshwater, saltwater)
- Toxicity effect (e.g., EC50, LC50)
- Type of chemical exposure to test organism
- Species
- Organism life stage information (e.g., age, weight, length)

- Parameter (i.e., chemical name)
- Exposure duration
- Water temperature
- Water hardness
- Water alkalinity
- Water dissolved oxygen content
- Water pH
- Effect concentration
- Units
- Effect concentration type (e.g., total recoverable, dissolved)
- Bioconcentration factor
- If field test, sample date and time

Quality Assurance Information

The CBPO needs to have a good assessment of the quality of the data that are being made available. Please send a copy of your Quality Assurance/Quality Control Plan. Questions that are of specific interest include:

- Were the field data sheets reviewed for correctness and completeness?
- Have the data been quality checked?
- Were any irregularities identified in the data?
- Have any irregularities in the data been flagged in the dataset submitted? How?
- Were the data validated? If so, what level of data validation was used?

Data Format and File Structure

The CBPO can accommodate the following data types: Microsoft Access, dBase, Excel, Lotus or ASCII text files. However, Microsoft Access and dBase are preferred. If submitting an ASCII text file, please specify format and character delimiter if applicable. If you would like to submit the file in a different format, please contact the CBPO to discuss.

It is important that the following information is submitted with the data to ensure that the data are handled correctly when loaded into the Chesapeake Bay Toxics Data Base:

- Documentation of the data files, including field names, definition of the field, field types (i.e., character or numeric), the width and format of each field, and the delimiter used
- A printout of the first 10-50 lines of each table or data file

Data Transfer

Electronic files can be transferred to the Chesapeake Bay Program in two ways:

- Through an FTP transport (contact Greg Allen, Toxics Coordinator at 1-800 YOUR BAY for further details)
- Through email or other media as coordinated at the time of submittal

<u>NOTE</u>: A questionnaire has been included **below** to facilitate the transfer of the requested information. Feel free to include any additional information that you feel relevant. Please be sure to include the name and phone number of a person who can be contacted should any questions arise.

Data Submission Questionnaire

Data submitter/Contact Information				
Name:				
Organization				
Address				
Phone Number				
Quality Assurance Information				
Has the data been quality checked? (Y/N)				
Were irregularities identified in the data? If yes, please explain.				
Have irregularities in the data been flagged? If yes, how?				
Has a copy of the QA Plan been submitted? (Y/N)				
Data Documentation				
Has data documentation been submitted? (Y/N)				
Report Title				
Report Author				
Data Format and File Structure				
Format Type (dBase, Microsoft Access, Flat ASCII-fixed format, Flat ASCII-character delimited)				
Please document each field included in the dataset. If additional space is needed, please attach a separate piece of paper. Fwd. B the number of digits for the total filed, including the number of decimal points (e.g., 42.432 would be formatted as F6.3)	Field Name	Field Type (Character or Numeric)	Field Width (For fixed format files)	Field Format (Fwd)* (For numeric fields)
Delimiter Used (if applicable)			<u> </u>	I
Printout of first 10-50 lines included? (Y/N)				
Data Transfer				
Transfer Method (FTP, other)				
File Name(s)				
Date of Transfer				
File Size				