

**NYS Department of Agriculture and Markets
Division of Food Safety and Inspection
Field Operations Manual**

**SAMPLING
REPORT OF SAMPLING AND ANALYSIS (FL-1)
SUB-SECTION 3085**

OVERVIEW

A separate Report of Sampling and Analysis (FL-1) must be completed for each commodity sampled and for each type of examination requested (Bacteria or Chemistry); e.g., sampling of ground beef and ground chuck to be examined for fat content and bacteria.

This would require four FL reports as follows: FL-1- ground beef examined for fat content; FL-2- ground beef examined for bacteria; FL-3- ground chuck examined for fat content; FL-4- ground chuck examined for bacteria. This is necessary because different types of analysis; e.g., chemical, bacteria and standards are done in different sections of the laboratory. (See Sub-Section 4010, Laboratory Testing Area Assignments, for additional information on completing the FL Report of Sampling and Analysis).

The sample report is used for all types of samples obtained by an inspector-surveillance, scheduled, suspect, complaint, seizure, requested, or reinspection. The sample report is to be completed up to the center solid black line. The completed FL report is placed in a plastic bag and put between the Styrofoam insulation and the top cardboard cover of the sample case.

Write the FL number (which appears in red at the top of the form) using a heavy-duty permanent marker (broad tip) on the plastic bag in which the individual sample is placed and sealed. This is of utmost importance so that the laboratory can match the sample with the report.

Except for scheduled samples, the original copy of a Report of Investigation is to accompany the FL report and sample, with the copy of the investigation report going to the Supervising Inspector for his retention. On all food samples taken in conjunction with an FDA Contract Inspection the FL report must be marked on the top of the statement "FDA Contract".

REPORT COMPLETION

Use the following as a guide in completing the Report of Sampling and Analysis form. The numbers correspond to the numbered spaces on Page 7 of this section.

1. Check the appropriate box. For initial samples mark the "Inspection" box. When a repeat sample of a previously sampled commodity is requested, the reinspection box is marked and the previous FL number placed in the space after the reinspection line. Also, on reinspections the previous lab number (Item 33) must be placed in the space provided.
2. Enter your inspector's number.
3. Check the FSI box for all samples collected. This is a combined form and other boxes are used by other Divisions.

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4. Print the section pertaining to Owner, Street, City, County, ZIP code, County Code, and Establishment Number from which the sample was obtained. This information should properly reflect the business entity responsible for operation of the regulated establishment. This would be an individual, a partnership (which may be composed of two or more persons), or a corporation.
5. List establishment type by code letter (A-Store, B-Bakery, etc.). Do not use the letter-prefix "J" (multiple operations). Indicate the separate operations; e.g., D, C, or A, B, C, etc.
6. Enter the region and zone in which the sample was taken.
7. Product: Identify the sample by common name and whether it was obtained from bulk or is an individual package.
8. Where Stored: Note the storage location using descriptions such as refrigerated display case, basement, warehouse, sales area.
9. Temperature: For frozen or refrigerated sample use your thermometer and check the temperature of the product. Do not contaminate the sample in doing so. The thermometer may be used between layers of containers to obtain the temperature.
10. Commodity Code: Refer to commodity code listings and enter the correct code for the commodity sampled. Use the first two boxes for the code, leaving the third box blank.
11. Stock on Hand: Take a physical count or obtain the exact weights, whichever is appropriate. Estimate count or weight only when exact figures cannot be obtained. Indicate on the form if count or weight are estimates.
12. Time of Sampling: Insert hour you started taking the sample and circle A.M. or P.M. This entry is used by laboratory to establish hours between sampling and receipt at laboratory.
13. Month, Day, Year: Fill all boxes; e.g., (10-01-95).
14. Description of container: Simply describe the container sampled, including Container Code, Type, and Size.
15. Circle Manufacturing Process.
16. Original container sealed or transferred and sealed: When an original container is sampled and placed in a plastic bag and sealed, so indicate. When the product is removed from its original container, as in the case of bulk salads, and transferred and sealed, so state; e.g., "Removed product from bulk tray, packed in whirl pack with sterile spoon, placed in a plastic bag and sealed".

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17. Self-Service or Served: Indicate which.
18. Full name and title of responsible person before whom these two functions were conducted. (Repeat title in last two boxes.)
19. Product Sampled: Check appropriate box.
20. When not produced by the establishment where sampled, copy name of manufacturer or packer as shown on label and enter this information in the "Manufacturer or Packer" box.

The Inspector should ask the establishment operator for the name and address of the firm which actually supplied his company with the product being sampled and enter this information in the "Distributor" box. On occasion, this may be the same firm listed on the product label, however, in many instances, it will not. This information is, of course, critical in product recall situations.

In those situations where the actual distributor is different from the distributor listed on the product label, the information on the product label will still appear on the report in the "Copy of Statement Upon Container Purchased by Inspector" area.

21. Check source of product.
22. Address: Copy address from label, giving manufacturer's or packer's and/or distributor's address. Specify which it is.
23. If known, enter establishment number of manufacturer, packer or distributor. If you do not know the number, leave the space blank.
24. Check which laboratory the sample is sent to. Include name of private lab, if known.
25. Enter method by which sample was sent to the lab (UPS, US Mail, inspector). Enter date and time of day shipped (AM or PM).
26. Copy of statement upon container purchased by inspector. All pertinent information which appears on the label is to be copied and inserted here or, the entire label from another, like container may be attached.
27. Circle type of sample: F - if seizure is made, enter seizure number so the reports can be matched; H - Consumer Complaint; I - Scheduled Sample; J - Compliance or Resampling.
28. If the sample was requested by an individual from the Central Office in Albany or your Supervising Inspector, enter that person's name in this space.

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Enter K - Inspection, when part of a Sanitary Inspection, not a Scheduled sample or a Consumer Complaint.

29. Sub-units: When sub samples are taken, show the number of individual units taken (4 cans of one brand and code of product to be analyzed for the same thing would be 4 sub-units).
30. Examine For: Name of test requested.
31. Full signature of Specialist/Inspector.
32. The lab number will be entered in this space and if a reinspection is requested, this number must be recorded in space 1-b of the reinspection sample report.

Note: When the analysis is complete, the laboratory prints out a computer-generated copy with the results. The action codes at the bottom of the page reflect the following:

- A. Satisfactory in all areas
- B. Violation
- C. Non-actionable (or action to be taken at the discretion of the Division)
- D. Unable to analyze

The original copy and the computer generated copy are keypunched as statistical information and then returned for filing in the establishment folder. The second copy will be returned to the field. It is suggested that each inspector keep a small notebook or ledger of personal choice to record the FL-number, date, place where sample was taken, and what the sample was, and analysis requested. This will point out reports that are not returned or when to expect the returns of the report.

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The following charts (1 - Commodity Codes for Sampling Reports, 2 - Establishment Codes and Establishment Types and, 3 - Test Codes), represent the Food Laboratory Microbiological Guidelines used in arriving at the A, B, C, D action codes.

1 - COMMODITY CODES FOR SAMPLING REPORTS	
01 - Soft Drinks and Waters	31 - Jams, Jellies, Preserves, Butters
02 - Beverage Bases	32 - Fruit Products
03 - Coffee, Tea	33 - Animal Feeds
04 - Alcoholic Beverages	34 - By-products for Animal Feeds
05 - Bread, Rolls, Buns, Sweet Goods	35 - Meat, Meat Products
06 - Custard, Cream-filled Sweet Goods	36 - Nuts, Nut Products
07 - Macaroni, Noodle Products	37 - Vegetable Oil Seed, Oil Stock, Crude Oil
08 - Breakfast Cereals Ready-to-Eat	38 - Refined Vegetable Oil, Shortening, Oleomargarine
09 - Whole Grains, Beans - Bulk	39 - Fresh Vegetables
10 - Pretzels, Chips, Specialty Items	40 - Frozen Vegetables, Vegetable Juices
11 - Processed Grain, Starch Products-Human	41 - Canned Vegetables, Vegetable Juices
12 - Prepared Mixes, Dry-Flour/M Meal Base	42 - Dried, Dehydrated Vegetables
13 - Candy, Gum, Chocolate, Cocoa Products	43 - Cured, Processed Vegetable Products
14 - Syrup, Sugar, Maple Syrup, Honey	44 - Dry Dessert, Pudding Mixes
15 - Butter, Butter Products	45 - Prepared Multiple Foods
16 - Cheese, Cheese Products	46 - Misc. Food Use Items
17 - Milk, Milk Products	47 - Food Storage
18 - Dried Milk, Dried Milk Products	48 - Food Chemicals
19 - Ice Cream, Related Products	49 - Infant, Jr., Geriatric Foods
20 - Eggs, Egg Products	50 - Dietary Specialties, Artificial Sweeteners
21 - Fish, Fish Products (not smoked)	51 - Other
22 - Shellfish, Crustaceans, Etc.	52 - Tofu, Soy-Based Products
23 - Smoked Fish	54 - Honey
24 - Spices, Salt	91 - Medicated Feed
25 - Extracts, Flavors	
26 - Dressings, Condiments	
27 - Fresh Fruits, Juices, Apple Cider	
28 - Frozen Fruits, Juices	
29 - Canned Fruits, Concentrates, Nectars	
30 - Dried Fruits	

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2 - ESTABLISHMENT CODES & ESTABLISHMENT TYPES

A - Store	J - Multiple Operations	Q - Feed Mill - Medicated
B - Bakery	K - Vehicle	R - Pet Food Manufacturer
C - Food Manufacturer	L - Produce Refrigerated Warehouse	S - Feed Warehouse and/or Distributor
D - Food Warehouse	M - Salvage Dealer	T - Disposal Plant
E - Beverage Plant	N - Wholesale Produce Packer	U - Disposal Plant Transportation Service
F - Feed Mill/Non-Medicated	O - Produce Grower/Packer/Broker, Storage	V - Slaughterhouse - Art. 5-A
G - Processing Plant	P - C.A. Room	W - Farm Winery
H - Home Processor		Z - Farm Product Est. with #
I - Refrigerated Warehouse		

3 - TEST CODES

01 - Added Color	11 - Rodent Contamination
02 - Added Preservatives	12 - Bacteriological - Standard of Quality
03 - Excessive Fat	13 - Bacteriological - Other
04 - Excessive Moisture or Added Water	14 - Dietary Claim
05 - Added Extenders	15 - Misleading Statements
06 - Undeclared Tenderizer	16 - Free Liquor
07 - Standard of Identity-enrichment, fill, drained weight, etc.	17 - Filth/foreign objects
08 - Heavy Metals	18 - Artificial Sweeteners
09 - Pesticide Residue	19 - Misbranding/product identity
10 - Insect Contamination	20 - Spoilage
	21 - Undeclared Ingredients

FL-1 (Rev. 8-05)		1		STATE OF NEW YORK DEPARTMENT OF AGRICULTURE AND MARKETS REPORT OF SAMPLING			2		Specialist / Inspector No. 	
() Inspection () Reinspection Prev. FL No. _____ () Investigation Report attached _____ of _____ samples				FL-306400		3 () FSI () MC/DS () OTHER				
Owner (dealer) 4				Type Est. 5		County Code 4		Establishment No. 4		
Street		City		County		Zip Code		Zone/Area 6		
Brand Name 7				() Orig. Pkg. () Bulk		Where Stored 8		Temp. 9		Com. Code 10
Product				Stock on Hand 11		Time of Sampling 12		AM PM	Month	Day Year 13
Description of Original container 14						Manufacturing process; Raw Canned Aseptic Pasteurized Dried Cultured Cured Irradiated 15 Not commercially sterile				
Container Code		Container Type		Size Code		Size Description		() Self Service () Served 17		
Original () Sealed Container () Transferred and sealed				Describe 16						
Sealed & labeled In the presence of 18				Title		Inspector's Identity Revealed To				Title
19 PRODUCT SAMPLED: () Own Production () Purchased by Dealer (if purchased fill in below)										
Manufacturer or Packer 20						Establishment Number 23				
Distributor						Address 22				
Source: Domestic () Imported () Unknown ()										
Country: 21										
SAMPLE DESTINED FOR: () State Food Laboratory () Private Laboratory 24						Via 25		Date		Time
F Seizure No.		Copy of statement on container (attach label if possible)								
H Type of Sample		Label Attached () 26								
I Consumer Complaint										
J Scheduled										
K Compliance										
L Inspection										
M Quality Assurance										
N Import Food Initiative										
O Milk Import										
Sample requested by: 28										
Units 29		Examine for 30				Specialist / Inspector 31				

Rec By: _____ Sealed and Trans. To: _____ State Sealed: Y___ N___ Temp: _____
Orig. Container _____ Mfg. Process: _____ Source: Dom___ Imp___ Unk___ Country: _____
Notes: _____