



NR149 LOD/LOQ Clarifications Rev. 0 (3.9.15)

Required frequency

Annually an MDL study must be performed for each combination of the following:

- Matrix (*if the solid and aqueous matrix methods are identical, extrapolation from the water MDL is allowable*)
- Preparatory Method
- Analysis Method
- Analyte (where an MDL study is appropriate)

Matrix – Prep Method – Analysis Method – Analyte (or group)

MDL studies can be completed by preparing and analyzing at least two MDL study replicates each quarter. Annually, these quarterly replicate results could then be used for the LOD determination.

NR 149.48 (2) (d) includes a provision for verifying “*the continued applicability of a previously determined limit of detection by an established and defensible protocol*”. However, the program has reviewed a number of protocols and none of them has been deemed to be “defensible”. We continue to explore different protocols for verifying that an established LOD remains valid, but at this time the logical conclusion is that the only defensible approach is to simply repeat the determination.

The MDL study passes if both the low and high spike criteria are satisfied:

- LOD < spike concentration, **and**
- LOD is not less than 10% of spike concentration

If both MDL studies were conducted properly and the resultant MDL still does not pass or the lab feels the passing MDL is not realistic – protocol is provided on how to establish a realistic, determinative LOD (MDL).

Reporting

Many parameters used in covered programs under NR 149 require that sample results be reported to the LOD. When reporting results to the LOD, the LOQ must also be reported.

The LOD and LOQ should be below the regulatory limits established by covered programs and project plans, where it is achievable. In some cases a more sensitive method may be required in order to meet these limits.

Why does WI require LOD/LOQ reporting? This requirement comes from the covered programs. The covered programs use data to make environmental impact assessments. The determination of whether or not an action level has been exceeded or whether additional monitoring is required is based on the sample results relative to the LOD and LOQ.



MDL (LOD) determination

- Begin with establishing a valid calibration.
- Before you attempt the MDL study it is in your best interest to take the time to review the 40 CFR Appendix B MDL procedures for how to determine a good estimated LOD.
- Most MDL study failures can be attributed to spiking at the wrong concentration and analyzing the replicates back to back in a single analytical run.
- The better you do estimating the spike concentration the better your chances are that you pass the MDL study the first time.
- The MDL procedure requires that a spike concentration be used in the MDL study that will be close to the estimated MDL (the procedure refers to 1x – 5x your current LOD). For example, using 2 - 3 times your current MDL concentration would be a good idea.
- If there is not a current MDL, or you suspect your MDL is no longer valid, there are two approaches you can use to determine a good estimated LOD:
 - 40 CFR Appendix B MDL procedures provide instruction on how to estimate a MDL.
 - Use your knowledge on instrument limitations, or the knowledge provided by other sources, such as the instrument vendor or an authoritative reference method.
- Perform the minimum 7 (but we encourage 8) replicate MDL study in 40 CFR Part, Appendix B.
 - Replicates should be analyzed over multiple days (run ~2 MDL spike samples each time). This is critical to incorporate day-to-day variability into the determination. Running all replicates simultaneously will frequently result in a failed MDL determination. It advisable to analyze the replicates distributed among routine samples, not directly after a blank.
- As previously discussed, the MDL study passes if it meets both of the following criteria:
 - LOD < spike concentration, **and**
 - LOD is not less than 10% of spike concentration

40 CFR Part 136 Appendix B

7 or 8 replicate LCS spiked at 2-5x estimated LOD	Calculate the standard deviation (SD)of the replicates	Multiply the SD by the t-value for the # of replicates
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For 8 replicates: SD x 2.998 = MDL



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Example 1: MDL (LOD) determination meets criteria

EXAMPLE 1: A valid MDL determination

LOD/LOQ Calculation and Validation Worksheet 6-24-09																																																			
Test:	Arsenic by 200.9		Date:																																																
Spike Level:	2.000	Analyst:																																																	
Units	ug/L	INSTRUCTIONS																																																	
<table border="1" style="width: 100%;"> <thead> <tr> <th>MDL Study Sample Number</th> <th>Result</th> <th>% Recovery</th> </tr> </thead> <tbody> <tr><td>Replicate 1</td><td>2.14</td><td>107%</td></tr> <tr><td>Replicate 2</td><td>2.11</td><td>106%</td></tr> <tr><td>Replicate 3</td><td>1.9</td><td>95%</td></tr> <tr><td>Replicate 4</td><td>1.7</td><td>85%</td></tr> <tr><td>Replicate 5</td><td>1.62</td><td>81%</td></tr> <tr><td>Replicate 6</td><td>2.07</td><td>104%</td></tr> <tr><td>Replicate 7</td><td>1.92</td><td>96%</td></tr> <tr><td>Replicate 8</td><td></td><td>0%</td></tr> <tr><td>Replicate 9</td><td></td><td>0%</td></tr> <tr><td>Replicate 10</td><td></td><td>0%</td></tr> <tr><td>Average:</td><td>1.923</td><td>96%</td></tr> <tr><td>Standard Deviation:</td><td>0.202</td><td></td></tr> <tr><td>Student's t-value to use:</td><td>3.143</td><td></td></tr> <tr><td>Calculated LOD:</td><td>0.6</td><td>ug/L</td></tr> <tr><td>Calculated LOQ (10/3LOD):</td><td>2.1</td><td></td></tr> </tbody> </table>				MDL Study Sample Number	Result	% Recovery	Replicate 1	2.14	107%	Replicate 2	2.11	106%	Replicate 3	1.9	95%	Replicate 4	1.7	85%	Replicate 5	1.62	81%	Replicate 6	2.07	104%	Replicate 7	1.92	96%	Replicate 8		0%	Replicate 9		0%	Replicate 10		0%	Average:	1.923	96%	Standard Deviation:	0.202		Student's t-value to use:	3.143		Calculated LOD:	0.6	ug/L	Calculated LOQ (10/3LOD):	2.1	
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In Example 1, a valid LOD is obtained. Unless you have documentation to substantiate otherwise, this would become your determinative LOD.

What do i do if the first mdl study attempt fails?

- If the initial MDL study does not pass then adjust the spike concentration based on the study results and re-perform the study one more time.
- Before you make your 2nd attempt at the MDL study it is in your best interest to take the time to review the MDL procedure for how to determine a good estimated LOD.
- It is a very good idea to determine at what concentration a standard can be seen that can be distinguished from a blank.
- This is done by analyzing lower and lower concentration standards (serial dilutions)
- Once you find the concentration where a result is detectable (3x – 5x greater than the signal/noise or 3x the standard deviation of a set of blanks) you have determined an estimated LOD.
- Then take this estimated LOD value and redo the MDL study using standards at 3x the LOD, or if the instrument is highly precise it may be preferable to lower the MDL



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study to standards that are at, or just above, this detected level. Again you will achieve the best chance of passing your MDL study by making sure variability is accounted for by running different study samples over a number of days.

EXAMPLE 2: Initial determination fails criteria; 2nd attempt passes

LOD/LOQ Calculation and Validation Worksheet				Rev 1, 3/2015	
Test:		Arsenic by 200.9		Date:	
				Analyst	
Spike Level:	5.000			2.000	
Units	ug/L			ug/L	
		Initial attempt		2nd attempt	
MDL Study Sample Number	Result	% Recovery	Result		
Replicate 1	5.110	102%	2.140		
Replicate 2	5.060	101%	2.110		
Replicate 3	4.900	98%	1.900		
Replicate 4	4.900	98%	1.700		
Replicate 5	5.180	104%	1.620		
Replicate 6	4.910	98%	2.070		
Replicate 7	4.780	96%	1.920		
Replicate 8	5.020	100%			
Replicate 9					
Replicate 10					
# replicates	8		7		
Average:	4.983 (99.65%)		1.923 (96.1429%)		
Standard Deviation:	0.132		0.202		
Student's t-value to use:	2.998		3.143		
Calculated LOD:	0.40		0.64		
Calculated LOQ (10/3LOD):	1.32		2.12		
		ok LOD < spike?	[0.4 < 5 ug/L]	ok LOD < spike?	[0.64 < 2 ug/L]
		X LOD >10% spike?	FAILS	ok LOD >10% spike?	[0.6 > 0.2 ug/L]

In Example 2, on the second attempt a valid LOD is obtained.

This is often the case when the initial spiking concentration was just too high. Remember that our target is to spike closer to the LOD, where quantitation is less accurate, and the standard deviation of replicates increases.

Unless you have documentation to substantiate otherwise, this would become your determinative LOD.

But what if, after two attempts at performing the LOD determination, you still don't meet criteria or the nominal LOD is unrealistically low?



An alternate approach to determining a realistic, determinative LOD

If the lab has addressed the issues in the first MDL study...

- by re-determining a good estimate of the LOD and
- by spreading out replicate analyses to account for additional variability and
- the 2nd MDL study still fails criteria or results in an unrealistically low LOD

...then it is time to use an alternate approach to establish a realistic, determined LOD.

This is usually only applicable for high precision instruments (*and typically for those in which there are no sample preparation steps*), such as for ion chromatography and flow injection analysis.

Step 1: Demonstrate that the nominal LOD is unrealistic

The first step in using a value other than that obtained using the approved EPA protocol, as your determinative LOD, is to demonstrate that the nominal LOD determined is not realistic.

One way to do this is to analyze a processed LCS prepared at a concentration equal to the nominal LOD and demonstrate that either there is no signal or the quantitative result is below the nominal LOD.

Another way to do this is to demonstrate that the nominal LOD response is not significantly greater (three times or higher) than the response found in routine method blanks.

Step 2: Rule out blank contamination or poor low end characterization of the calibration

Answer the questions,

- How do you know that you do not have low level contamination?
- Are your blanks “negative”?
- How do you know the calibration levels and algorithm are not contributing to blank concerns?

Step 3: Analyze several LCS samples spiked at levels above the nominal LOD

Once certain that blank levels are not adversely affected by contamination or calibration issues, one can analyze several LCS samples at increasing concentrations, starting at the LOD concentration. Each LCS is evaluated for the instrument’s ability to detect it at its concentration based on instrument response. Be certain that the result LCS response can be distinguished from blank responses (i.e. not a false positive).

Remember that quantitative recovery is difficult to reliably achieve between the LOD and the LOQ. Your “determinative LOD” is the lowest concentration at which you can reliably detect a signal that is not a false positive. If you get good recovery, that’s even better.

Make sure that the LCS concentrations used are not significantly higher than the nominal LOD concentration.

Be sure that you can answer the question, “How are you certain that the determinative LOD is not lower?”

Step 4: Establish the LOQ

The LOQ can be calculated as 10/3 x the LOD.



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Example 3: A valid alternative LOD determination

LOD/LOQ Calculation and Validation Worksheet 6-24-09

Test:	Mercury by 245.1		Date:	
			Analyst:	
Spike Level:	0.500		0.100	
Units	ug/L		ug/L	
Blank result	0.022		0.027	

Initial attempt			2nd attempt		
MDL Study Sample Number	Result	% Recovery	Result		
Replicate 1	0.488	98%	0.110		
Replicate 2	0.503	101%	0.108		
Replicate 3	0.492	98%	0.098		
Replicate 4	0.476	95%	0.112		
Replicate 5	0.514	103%	0.115		
Replicate 6	0.509	102%	0.100		
Replicate 7	0.491	98%	0.112		
Replicate 8	0.487	97%	0.105		
Replicate 9		0%			
Replicate 10		0%			

# replicates	8		8	
Average:	0.495	99%	0.108	108%
Standard Deviation:	0.013		0.006	

Student's t-value to use:	2.998		2.998	
Calculated LOD:	0.04	ug/L	0.02	
Calculated LOQ (10/3LOD):	0.13		0.06	

ok LOD < spike	[0 < 0.5 ug/L]	ok LOD < spike	[0 < 0.1 ug/L]
X LOD > 10% spike	FAILS	ok LOD > 10% spike	[0 > 0 ug/L]

Alternative approach	
Analyzed LCS	0.02
Obtained Recovery	0.009 ND 45.0%
Analyzed LCS	0.035
Obtained Recovery	0.029 82.9%
Analyzed LCS	0.05
Obtained Recovery	0.051 102.0%
Typical blank response concentration	0.0012 0.025

SDWA MCL	2
SDWA LOD	0.2
NR 140 PAL	0.2
NR 140 ES	2

- In Example, 3, the lab performed an LOD that failed criteria.
- The study was repeated at a lower level, which met criteria.
- Unfortunately, the resultant LOD falls below typical levels observed in blanks.
- An LCS prepared at the nominal LOD was undetectable demonstrating that the nominal LOD was unrealistic.
- A second LCS, at 0.035 ppb, was within the normal variance for blanks. Therefore 0.035 ppb would not meet the definition of an LOD which is designed to avoid false positives. Finally, an LCS at 0.05 ppb was associated with a response well above that observed in blanks.
- In addition, 0.05 ppb is still well below relevant regulatory limits.
- Therefore, this protocol established a valid determinative LOD at 0.05 ppb.



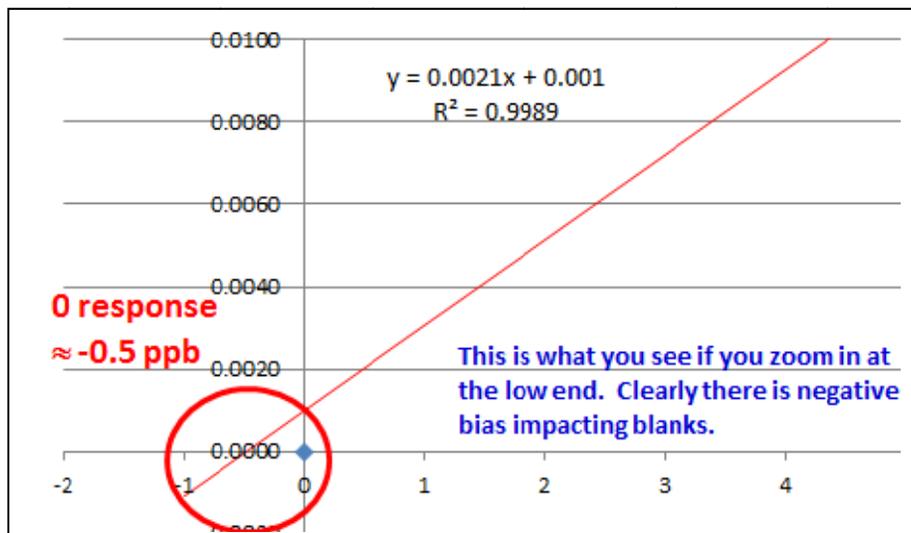
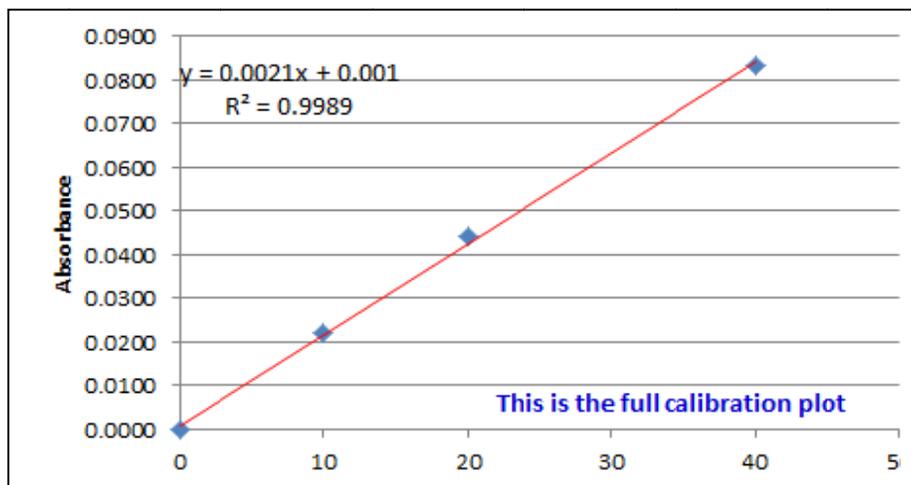
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The question unanswered is: How do we know that the determinative LOD doesn't fall between 0.5 and 1.0? No analysis was performed in this region.

And why are blanks routinely negative with significant variance? What's wrong with this picture?

Subsequently, the source of the negative blank bias was investigated. On closer examination, the lab was calibrating with standard levels of 0, 10, 20, and 40 ppb. Clearly, this is an inappropriate calibration, even for an LOD of 1.0. Remember, the first calibration standard needs to be near the LOQ. Furthermore, how often would one expect to find arsenic in drinking water above even 10 ppb? Sure, it happens in some areas, but calibrations must be designed to cover the normal range of anticipated sample concentrations and must include adequate definition of the range near the LOQ.

With an LOD of 0.5 ppb, a more appropriate calibration would be 0, 2, 5, 10, and 20 ppb.





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LOQ determination

The LOQ must be mathematically related to the LOD (just indicating that the LOQ is greater than the LOD is not a mathematical relationship).

The traditionally accepted statistical definition of the LOQ is 10/3 the LOD.

The lowest calibration standard

NR 149.44(6)(e) requires that, "*Laboratories reporting results at levels at or near the limit of detection of an analysis shall include in initial calibrations a standard at a concentration near the limit of quantitation of the analysis.*"

Most analyses performed for "covered programs" of the agency will require results to be reported down to the LOD. Therefore, calibrations need to include a standard "near" the LOQ. The further the standard concentration is from the actual LOD, the more significant the potential impact on achieving a realistic, determinative LOD.

Additional information and examples for MDL studies are included in a document called Analytical Detection Limit Guidance on our website:

<http://dnr.wi.gov/regulations/labcert/documents/guidance/-LODguide.pdf>



Definitions

Method blank = reagent water that is processed simultaneously with and under the same conditions as the associated samples – including all preparatory, cleanup, and analysis steps.

LOD (Limit of detection) = the lowest concentration or amount of analyte that can be identified, measured, and reported with confidence that the concentration is not a false positive value. For department purposes, the LOD approximates the EPA's MDL (method detection limit) and is determined according to the protocol established in 40 CFR Part 136, Appendix B. A quantitative recovery is not expected at the LOD. The study must be well done because the LOD is used to set the LOQ and for some parameters determining a true LOD is very important to the programs using that data.

Nominal LOD = the LOD calculated following the accepted EPA protocol (statistically derived). It remains the Nominal LOD until it has been properly vetted or replaced with either a vetted 2nd determination, or one determined through some alternative protocol, acceptable to the Department.

Determinative LOD = the adopted LOD used for reporting. The adopted LOD may be the LOD obtained from the initial MDL study, the 2nd determination, or the one determined from an approved alternate protocol.

Method Detection Limit (MDL) = the minimum concentration of an analyte that can be measured and reported with 99% confidence that the stated concentration is greater than zero as determined from analyses of a set of samples containing the analyte in reagent water. The method detection limit is generated according to the protocol specified in 40 CFR 136, Appendix B. It is listed here because most EPA methods refer to the MDL.

LOQ (Limit of quantitation) = the lowest concentration or amount of an analyte for which quantitative results can be obtained. A quantitative recovery is expected at the LOQ. NR 149 requires that there be a mathematical relationship between the LOD and the LOQ. Traditional statistics define the LOQ as 10/3 the LOD.

Lowest concentration standard in the calibration curve = NR 149 requires that the lowest standard in the initial calibration be near the LOQ. "Near" could be defined as 2-5 times the LOQ for multi-analyte methods. Note however that the combination of 5 times the LOQ and the LOQ being 10/3 of the LOD means that the low calibration standard could be as much as 17 times the LOD. This situation should be avoided as much as possible as it could lead to bias at the low end of the calibration curve (see Example 4).

NOTE: *Calibration is arguably the most critical part of determining an LOD. The calibration must be properly established without over-extending the upper limit of the calibration, while also properly characterizing the low end of the calibration. The predominance of "negative" blanks is a primary indicator of a poor calibration.*

Reminder: the calibration levels and calibration algorithm selected for the LOD determination MUST be the same as that used for analysis of samples and QC.