



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

**FOOD SAFETY LABORATORY SERVICE
OFFICIAL ANALYSIS REQUEST FORM**

Lab Sample Ref No:
(Place Label here if applicable)

Officer Sample Ref. No. _____ **MICRO** **CHEMICAL**

SAMPLING INFORMATION (To be completed by sampling officer for all samples)

Sampling Officer (Print): _____
Signature: _____ Contact number: _____
Report to Name and address: _____
Report to e-mail: _____ Sampling Officer Area: _____
Survey/ Programme reference: _____
Sampling Batch Number: _____
Sampling date (dd/mm/yy): ____/____/____ Time _____
Estab. Name: _____
Estab. Address: _____
Estab. Eircode: _____
Estab.Code: _____ EU Estab. Approval No (if approved): _____
Business Type: _____

Sampling Reason:

Routine
Repeat/Follow up
Survey
Complaint
Import
Import on hold
Export
Control
Food Alert (RASFF)
 Incident code _____
Food poisoning/outbreak/enhanced surveillance
 Incident code _____

Food Chain Stage:

Primary Producer Wholesale & Distributor 3rd Country Importer/Exporter
Manufacturer Retailer Administrative Food Business
Packer Transporter Service Sector

Sampling Strategy:

Convenient Suspect Selective
Census Objective

Additional Sample Information

Second Expert Opinion sample submitted to the laboratory
Enforcement, trade (defence) and referee sample taken*
**For contaminants, the sample will be divided into Enforcement, trade (defence) and referee by the laboratory*

SAMPLE DETAILS (To be completed by sampling officer for all samples)

Sample Description: _____

Brand Name: _____
Manufacturer: _____

Ready to Eat Status: Ready to Eat
Not Ready to Eat

EU Category Code (1 to 21): _____
Best Before ____/____/____ OR Use by Date ____/____/____
Date of Manufacture ____/____/____

Production Batch/Lot No: _____
Country of Origin: _____
Pack Weight/Volume: _____
Details of Significant Labelling Information:

Test(s) Required:

Chemical Microbiological
Specify parameter(s) _____

SAMPLING DETAILS
(To be completed by sampling officer for all samples)

MICROBIOLOGY ONLY
(To be completed by sampling officer for microbiology samples)

<p>Packaging (at Sample Site):</p> <p>Loose <input type="checkbox"/></p> <p>Vac-packed <input type="checkbox"/></p> <p>MAP <input type="checkbox"/></p> <p>Canned <input type="checkbox"/></p> <p>Bottled <input type="checkbox"/></p> <p>Packed <input type="checkbox"/></p>	<p>Processing:</p> <p>Smoked <input type="checkbox"/></p> <p>Salted <input type="checkbox"/></p> <p>Fermented <input type="checkbox"/></p> <p>Preserved <input type="checkbox"/></p> <p>Minced <input type="checkbox"/></p> <p>Cut <input type="checkbox"/></p> <p>Peeling <input type="checkbox"/></p> <p>Dehydration <input type="checkbox"/></p> <p>Unprocessed <input type="checkbox"/></p> <p>Pasteurised <input type="checkbox"/></p>	<p>Cooked Status:</p> <p>Cooked <input type="checkbox"/></p> <p>Raw <input type="checkbox"/></p> <p>Mixed cooked & raw <input type="checkbox"/></p> <p>Sterilised <input type="checkbox"/></p> <p>Reheated <input type="checkbox"/></p> <p>Cook-Chill system(GN 15) <input type="checkbox"/></p> <p>Partially Cooked <input type="checkbox"/></p> <p>Pasteurised <input type="checkbox"/></p> <p>Not Applicable <input type="checkbox"/> (environmental and water only)</p>	<p>Storage Condition (at Sample Site):</p> <p>Frozen <input type="checkbox"/></p> <p>Ambient <input type="checkbox"/></p> <p>Chilled <input type="checkbox"/></p> <p>Hot <input type="checkbox"/></p> <p>Cooling <input type="checkbox"/></p> <p>Thawing <input type="checkbox"/></p> <p>Not Applicable <input type="checkbox"/> (environmental only)</p> <p>Sample Site Temperature (°C): _____ (as recorded by sampling officer)</p>
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NITRATES AND NITRITES IN CURED MEATS

<p>Nature of Sample Submitted:</p> <p>(a) Brine <input type="checkbox"/> OR</p> <p><u>Sample Category:</u></p> <p>8.2 Meat preparations as defined by Regulation (EC) No 853/2004 <input type="checkbox"/></p> <p>8.3.1 Non derogated - Non-heat treated Meat Products <input type="checkbox"/></p> <p>*8.3.2 Non derogated - Heat treated Meat Products – Unsterilised <input type="checkbox"/></p> <p>*8.3.2 Non derogated - Heat treated Meat Products – Sterilised <input type="checkbox"/></p> <p>*Nitrates are not permitted to be added to heat treated meat products but may be present in some heat treated meat products resulting from the natural conversion of nitrites to nitrates in a low acid environment</p> <p>When a <u>Brine sample</u> is submitted, please supply the following: Weights of meat before injection as outlined in the guidance document: 1. _____ kg 2. _____ kg 3. _____ kg Weights of meat after injection ditto: 1. _____ kg 2. _____ kg 3. _____ kg <u>*For more information please see FSAI Guidance Document for Nitrate/Nitrite Sampling of Meat Products</u></p>	<p>(b) Derogated Meat Product <input type="checkbox"/></p> <p><u>Sample Category:</u></p> <p>8.3.4.1 Traditional Immersion Cured Product e.g Wiltshire Bacon <input type="checkbox"/></p> <p>8.3.4.1 Traditional Immersion Cured Product e.g Wiltshire Ham <input type="checkbox"/></p> <p>8.3.4.2 Traditional Dry Cured Products e.g Bacon <input type="checkbox"/></p> <p>8.3.4.2 Traditional Dry Cured Products e.g Ham <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p> <p>For other Specify the product details and footnotes associated with the product from food category 8.3.4 of Annex II(EC) Reg 1333/2008: _____</p>
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SAMPLE RECEIPT IN LABORATORY (To be completed in Lab for all samples)

<p>Transported by: Courier/Taxi <input type="checkbox"/> Hand <input type="checkbox"/></p> <p>Post <input type="checkbox"/> Staff agency <input type="checkbox"/></p> <p>Person who delivered the sample: _____ (If different from Sampling Officer)</p> <p>Official agency name (if applicable) _____</p> <p>Condition of sample on receipt:</p> <p>Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/></p> <p>Comment: _____</p> <p>Temp. of Delivery Unit (if applicable) (°C): _____</p> <p>Seal No. on tamper evident label/bag/tag _____</p> <p>Received in Lab by: _____</p> <p>Date (dd/mm/yy): ____/____/____ Time _____</p> <p>Submission Details Correct: Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If 'No' please give details _____</p>	<p>Notes (PAL use only)</p>
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