DEPARTMENT OF FORENSIC SCIENCE
TECHNICAL AND ADMINISTRATIVE REVIEW FORM

Month/Year ______________ FS Lab #: __________________ Examiner ________________________________

REPORT

Yes No N/A

1) Is the report’s format and wording in accordance with Department & Section guidelines?
2) Are the spelling and grammar correct?
3) Has information from the RFLE been correctly transcribed (e.g., names, agency case numbers)?
4) Is the significance of associations clearly communicated and properly qualified in the report?

ADMINISTRATIVE AND EXAMINATION DOCUMENTATION

5) Are packaging descriptions and conditions properly documented?
6) Are case items properly designated?
7) Is the evidence properly described?
8) Is the examination documentation neat and of sufficient detail?
9) Are all pages of documentation properly identified in accordance with Department policy?
10) Are the notes and any corrections recorded in accordance with Department policy?
11) Are Section-required interactions with others documented (e.g., verification, 2nd sizing)?
12) Are the applicable work sheets properly utilized in accordance with Section protocols?
13) Have appropriate photographs/negatives/digital images been prepared, labeled and included?
14) Are mathematical calculations and data transfers accurately recorded?
15) For Forensic Biology, has the chain of custody been reviewed per FBI Quality Assurance Standards?

FINDINGS & CONCLUSIONS

16) Have appropriate tests been performed?
17) Are the appropriate additional samples requested?
18) Have all of the examinations requested in the RFLE been addressed either on the report or on an MFR?
19) Are results/conclusions fully supported by the examination documentation?

REVIEWER’S COMMENTS (All questions above marked ‘No’ will be explained)

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RESOLUTION (Each Reviewer’s comment must be addressed by the Examiner)

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Reviewer Signature / Date

Examiner Signature / Date

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Revision 2
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