



## Commission on Forensic Science

**March 13, 2026**

**Division of Criminal Justice Services**  
80 South Swan Street, Crime Stat Room 118, Albany, NY 12210

**Empire State Development Corporation**  
655 Third Ave, New York, NY 10017

**Video Conference Locations:**  
445 Hamilton Avenue, Suite 1203, White Plains, NY 10601

***09:03 AM – 1:10 PM***

### **DRAFT MEETING MINUTES**

#### **Commission Members in Attendance:**

Col. Nicholas Banbury  
James Chithalen, Ph.D.  
Lydia de Castro  
Steven Epstein, Esq.  
Jessica Goldthwaite, Esq.  
Michael Marciano, Ph.D.  
Erin Murphy, Esq.  
Shelley Palmer  
Beverly Rauch  
Rossana Rosado  
Michelli Schmitz  
Rachel Singer, Esq. (non-voting proxy for William Fitzpatrick, Esq.)  
Ann Willey, Ph.D.

#### **DCJS Staff in Attendance:**

Taylor Aaron  
Dean DeFruscio  
Colleen Glavin, Esq.  
Katherine Mayberry  
Joseph Popcun  
Brianna Robinson

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<sup>1</sup> Representative of Commission Member James V. McDonald, M.D.

<sup>2</sup> In accordance with a resolution and related procedures regarding the use of videoconferencing under extraordinary circumstances, which were adopted by the Commission on Forensic Science on June 9, 2023, and added to its bylaws, Dr. Ann Willey participated by video conferencing from a private location due to extraordinary circumstances.

Lindsey Rockwell  
 Matthew Schrantz, Esq.  
 Kerry Shermer  
 Elizabeth Suparmanto

**Other Attendees:**

Jennifer Alois – NYS DCJS Latent Print Laboratory  
 Danny Burnside – Suffolk County Police Department Identification Section  
 Bryan De La Rosa – New York City Police Department, Latent Print Section  
 Jill Dooley – New York State Police Crime Laboratory  
 Dawn Gigante – Suffolk County Police Department Identification Section  
 Nichole Hurbanek – New York State Police Crime Laboratory  
 Jennifer Lady – New York City Police Department, Latent Print Section  
 Tom Leach – New York State Police Crime Laboratory  
 Andrea Lester – NYS DCJS Latent Print Laboratory  
 Kyra McKay – NYC OCME, Department of Forensic Biology  
 Craig O'Connor – NYC OCME, Department of Forensic Biology  
 Jennifer Odien – NYC OCME, Forensic Anthropology Unit  
 Keith Olsen – Suffolk County Police Department Identification Section  
 Karen Oswald – Suffolk County Police Department Identification Section  
 Glenn Perigaut – Suffolk County Police Department Identification Section  
 Julie Pizziketti – New York State Police Crime Laboratory  
 William Sullivan – Suffolk County Police Department Identification Section  
 Tiffany Vasquez – NYC OCME, Department of Forensic Biology  
 Christian Westring - Niagara County Sheriff's Office Forensic Laboratory  
 John Whidden – Suffolk County Police Department Identification Section

Chair Rosado opened the meeting and noted that Rachel Singer was joining the meeting as the designated participant on behalf of the Honorable William Fitzpatrick. Chair Rosado stated that she was attending virtually, and that Ms. Palmer would run the meeting.

*Approximate  
 video times*

00:01:03 –  
 00:01:40

Ms. Palmer proceeded to take a roll call as members were in attendance in Albany, New York City, and virtually. A quorum was established with 10 voting members (Banbury, de Castro, Epstein, Goldthwaite, Marciano, Murphy, Palmer, Rauch, Rosado, and Schmitz); one member participated and voted from a private location due to extraordinary circumstances (Willey<sup>3</sup>).

00:01:41 –  
 00:02:19

Ms. Palmer then requested a motion to approve the March 13, 2026, agenda. Ms. Rauch requested that a discussion related to recent policy developments for the Department of Health regarding private forensic laboratories be added to the New Business section of the agenda. Dr. Marciano requested to add the OSAC Registry to the Old Business section of the agenda. The motion to approve the agenda with the amendments was made by Ms. Schmitz, seconded by Ms. Rauch and approved unanimously (Banbury, de Castro, Epstein, Goldthwaite, Marciano, Murphy, Palmer, Rauch, Rosado, Schmitz, and Willey).

00:02:21 –  
 00:03:41

<sup>3</sup> See FN 2.

Then Ms. Palmer requested a motion to approve the minutes of the December 11, 2025, Informational Session and the December 12, 2025, Commission meeting. The motion to approve the minutes was made by Mr. Epstein, seconded by Ms. Schmitz, and approved unanimously.

*Approximate  
video times*  
00:03:44 –  
00:04:16

Ms. Palmer then requested a motion to enter Executive Session to discuss matters relating to a current investigation or matters that may lead to the appointment, promotion, demotion, discipline, or suspension of a particular person. The motion was made by Ms. de Castro, seconded by Dr. Marciano, and was approved with 10 votes (Banbury, de Castro, Epstein, Marciano, Murphy, Palmer, Rauch, Rosado, Schmitz, and Willey), and 1 opposed (Goldthwaite). The Commission adjourned into Executive Session at 9:08am. Chair Rosado left the meeting during Executive Session.

00:04:17 –  
00:05:04

Executive Session concluded at 10:37am and the Commission reconvened at 10:47am, after a brief break. Ms. Palmer requested a motion to amend the agenda to include the New York State Division of Criminal Justice Services Latent Print Laboratory as item 8k under Laboratory Disclosures. The motion was made by Mr. Epstein, seconded by Ms. de Castro, and approved unanimously. Ms. Palmer then requested a motion be made for the Commission to establish a working group to address an anonymous complaint received regarding the Onondaga County Center for Forensic Sciences Laboratory. The motion was made by Ms. Murphy, seconded by Ms. Schmitz, and approved unanimously. It was noted that the Commission took no formal action during Executive Session.

00:05:44 –  
00:06:42

The next agenda item to be reviewed was Accreditation/Laboratory Updates. Matters regarding the following laboratories were considered: New York City OCME Forensic Anthropology Unit, New York City OCME Department of Forensic Biology, New York State Police Crime Laboratory, Niagara County Sheriff's Office Forensic Laboratory, and Westchester County Department of Laboratories & Research Division of Forensic Toxicology. Representatives from the laboratories were available in person or via Zoom to respond to members' questions.

00:06:43 –  
00:16:15

The Commission reviewed the final documentation from the ANAB reaccreditation assessment activity of the Niagara County Sheriff's Office Forensic Laboratory. Ms. de Castro made a motion to issue a full renewal of the laboratory's New York State Accreditation for a period concurrent with their ANAB accreditation. Dr. Marciano seconded the motion. The motion was approved with 8 votes (Banbury, de Castro, Epstein, Marciano, Palmer, Rauch, Schmitz, and Willey), and 2 abstentions (Goldthwaite and Murphy).

00:13:22 –  
00:15:49

The next agenda item was Old Business. Ms. Palmer provided the Commission members with a verbal update on the Familial Search Program. Next a preliminary response was provided by the Biology Technical Working Group (BIOTWG) to the Commission regarding their request at the December meeting to consider and respond to the DNA Subcommittee's letters on the NIST Human Factors and DNA Mixture Interpretation reports. Then, Special Counsel to the Commission, Matt Schrantz, provided a response to the inquiry posed during the December 12, 2025, Commission meeting relating to the DNA Subcommittee's binding recommendation and the Commission's authority to approve the New York State Police Crime Laboratory's use of Next Generation Sequencing. Additional points were raised for consideration.

00:16:16 –  
01:07:38

Next in Old Business, per the agenda amendment, the OSAC Registry was discussed by Commission members. A motion was made by Dr. Marciano to write a letter to acknowledge the labs' commitment to quality and the substantial amount of work done to complete the gap analysis, and to recommend the labs continue to review and implement applicable SDO-published OSAC standards based on the value to their own individual quality systems. This is related to the Office of Forensic Services annual review of OSAC standards requested by the Commission at their December 12, 2025, meeting. The motion was seconded by Ms. Murphy and approved with 9 votes (Banbury, de Castro, Epstein, Goldthwaite, Marciano, Murphy, Palmer, Rauch, and Schmitz) and 1 opposed (Willey).

*Approximate  
video times*

01:03:19 –  
01:07:36

Ms. Palmer then went into New Business and provided information regarding the 2025 Annual Laboratory Summaries. Next, the application for New York State Forensic Laboratory Accreditation of the Suffolk County Police Department Identification Section was reviewed. After a brief discussion, Ms. Palmer requested a motion to grant accreditation to the Suffolk County Police Department Identification Section for a period concurrent with their ANAB accreditation. The motion was made by Ms. de Castro, seconded by Ms. Schmitz, and approved unanimously. Then, per the agenda amendment, Ms. Rauch gave an informational update related to a change in the authority of the Department of Health to oversee private forensic laboratories following a ruling from the Suffolk County Supreme Court.

01:07:40 –  
01:37:50

01:09:27 –  
01:12:22

Next, the Commission reviewed disclosures from: Monroe County Crime Laboratory, New York City OCME Department of Forensic Biology, New York City Police Department Police Laboratory, New York City Police Department Latent Print Section, New York State Police Crime Laboratory, Niagara County Sheriff's Office Forensic Laboratory, Suffolk County Crime Laboratory, Westchester County Department of Laboratories & Research Division of Forensic Science, Westchester County Department of Laboratories & Research Division of Forensic Toxicology, Yonkers Police Department Forensic Science Laboratory, and New York State Division of Criminal Justice Services Latent Print Laboratory. Representatives from laboratories were available in person or via Zoom to respond to members' questions.

01:37:55 –  
02:28:20

Ms. Palmer then stated the next Commission meeting will take place on June 12, 2026, with the location to be determined. A motion to adjourn was made by Ms. Murphy, seconded by Ms. Goldthwaite, and approved unanimously.

02:28:22 –  
02:28:50

**Note: Video of the meeting is available at <https://www.youtube.com/user/nyspublicsafety>**



# DNA Subcommittee

**MICHAEL COBLE, PH.D.**  
CHAIR  
Center for Human Identification

May 12, 2026

**FREDERICK BIEBER, PH.D.**  
Harvard Medical School

**KATHLEEN CORRADO, PH.D.**  
Syracuse University

**KATHERINE GETTINGS, PH.D.**  
National Institute of Standards and Technology

**JENIFER SMITH, PH.D.**  
PRINCIPAL, BIOFORENSIC CONSULTING LLC

**AMANDA C. SOZER, PH.D.**  
SNA International

Rossana Rosado  
Chair, Commission on Forensic Science  
Division of Criminal Justice Services  
80 South Swan Street  
Albany, New York 12210

Dear Commissioner Rosado:

At the May 4, 2026, DNA Subcommittee (Subcommittee) meeting, members reviewed the final ANSI National Accreditation Board (ANAB) Assessment Report for the Erie County Central Police Services Forensic Laboratory.

The Subcommittee voted to issue a binding recommendation to the Commission on Forensic Science to renew the New York State Accreditation of the Erie County Central Police Services Forensic Laboratory in the discipline of Biology for the period concurrent with their ANAB accreditation. This accreditation is valid until July 31, 2030.

Very truly yours,



Michael Coble, Ph.D.  
Chair, DNA Subcommittee

cc. Members of the Commission on Forensic Science  
Shelley Palmer, Director OFS



April 13, 2026

Michelli Schmitz  
Erie County Central Police Services  
45 Elm Street  
Buffalo, New York 14203

Dear Director Schmitz,

Congratulations! On April 13, 2026, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

To retain accredited status until the expiry date on the Certificate of Accreditation, a conformity assessment body (CAB) is expected to continue to meet the Requirements under which it was accredited, as well as the responsibilities and obligations of ANAB's Terms and Conditions for Accreditation. The principal means by which ANAB monitors on-going conformance are Program dependent and may include surveillance activities, CAB and personnel performance in proficiency testing and other monitoring activities, complaints, and CAB self-disclosure of significant events and nonconformities.

The planned assessment schedule is listed below:

- March 2027 Surveillance Assessment without Witnessing
- March 2028 Surveillance Assessment with Witnessing
- March 2029 Surveillance Assessment without Witnessing
- March 2030 Reassessment

The provided ANAB accreditation symbols ([Forensic Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The report and an electronic version of accreditation documents are included with this letter.

On behalf of ANAB, I extend my sincere congratulations to you. If you have any questions or if ANAB might assist you in any way, please feel free to get in touch with us at [qualitymatters@anab.org](mailto:qualitymatters@anab.org).

Sincerely,



Robyn Ragsdale  
Senior Accreditation Manager Forensics  
ANSI National Accreditation Board

cc: Maria Orsino, Quality Assurance Coordinator  
[dcjsforensiclabs@dcjs.ny.gov](mailto:dcjsforensiclabs@dcjs.ny.gov)  
ANAB Office



# CERTIFICATE OF ACCREDITATION

**The ANSI National Accreditation Board**

Hereby attests that

**Erie County Central Police Services  
Forensic Laboratory  
45 Elm Street, Buffalo, New York 14203 USA**

Fulfills the requirements of

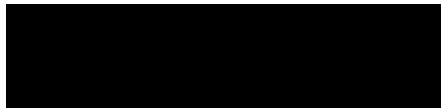
**ISO/IEC 17025:2017**

**Accreditation Requirements for Forensic Testing and Calibration (2023)  
FBI Quality Assurance Standards for Forensic DNA Testing Laboratories: 2025**

In the field of

**Forensic Testing**

This certificate is valid only when accompanied by a current scope of accreditation document.  
The current scope of accreditation can be verified at [www.anab.org](http://www.anab.org).



Pamela L. Sale, Vice President, Forensics

Expiry Date: 31 July 2030  
Certificate Number: FT-0037





**ANSI National Accreditation Board**

**SCOPE OF ACCREDITATION TO:  
ISO/IEC 17025:2017**

**Accreditation Requirements for Forensic Testing and Calibration (2023)  
FBI Quality Assurance Standards for Forensic DNA Testing Laboratories: 2025**

**Erie County Central Police Services  
Forensic Laboratory**

45 Elm Street  
Buffalo, New York 14203 USA

**FORENSIC TESTING**

ISO/IEC 17025 Accreditation Granted: 16 December 2013

Certificate Number: FT-0037

Certificate Expiry Date: 31 July 2030

<b>Discipline: Biology</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
DNA Profile Determination	Short Tandem Repeat (STR) Y-Short Tandem Repeat (Y-STR)	Capillary Electrophoresis
Individual Characteristic Database	DNA Profile	National DNA Index System (NDIS)
Physical Comparison	DNA Profile	Software Program
Qualitative Determination	Body Fluid	Chemical Fluorescence Spectroscopy General Microscopy Immunoassay

<b>Discipline: Fire Debris and Explosives</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Qualitative Determination	Fire Debris	Gas Chromatography Mass Spectrometry



<b>Discipline: Firearms and Toolmarks</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Function Evaluation	Firearm	Measuring Equipment Visual
Individual Characteristic Database	Ammunition	National Integrated Ballistic Information Network (NIBIN)
Physical Comparison	Ammunition	General Microscopy
Qualitative Determination	Ammunition Firearm	General Microscopy Measuring Equipment Reference Collection
Serial Number Restoration	Physical Item	Chemical General Microscopy Magnetic Visual

<b>Discipline: Friction Ridge</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Enhancement	Ridge Detail	Software Program
Individual Characteristic Database	Ridge Detail	Other Named Database
Physical Comparison	Ridge Detail	Software Program Visual

<b>Discipline: Impressions</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Enhancement	Footwear Physical Item Tire	Physical
Physical Comparison	Footwear Tire	Visual

<b>Discipline: Materials (Trace)</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Chemical/Physical Comparison	Coating Fractured Item General Unknown Polymer Tape	Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Visual

Qualitative Determination	Coating General Unknown Polymer Tape	Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Visual
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Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Mass Spectrometry Thin-Layer Chromatography
Quantitative Measurement	Solid	Gas Chromatography Mass Spectrometry
Weight Measurement	Botanical Liquid Solid	Balance

When published on a forensic service provider's Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale  
Vice President, Forensics





## **Erie County Central Police Services - Forensic Laboratory**

2026 - 17025 - Y4 - Reassessment

Prepared by Pamela Mikulcik

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Data collected on 2026-03-16

ANSI National Accreditation Board

United States

## Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

### REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the laboratory's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations, and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

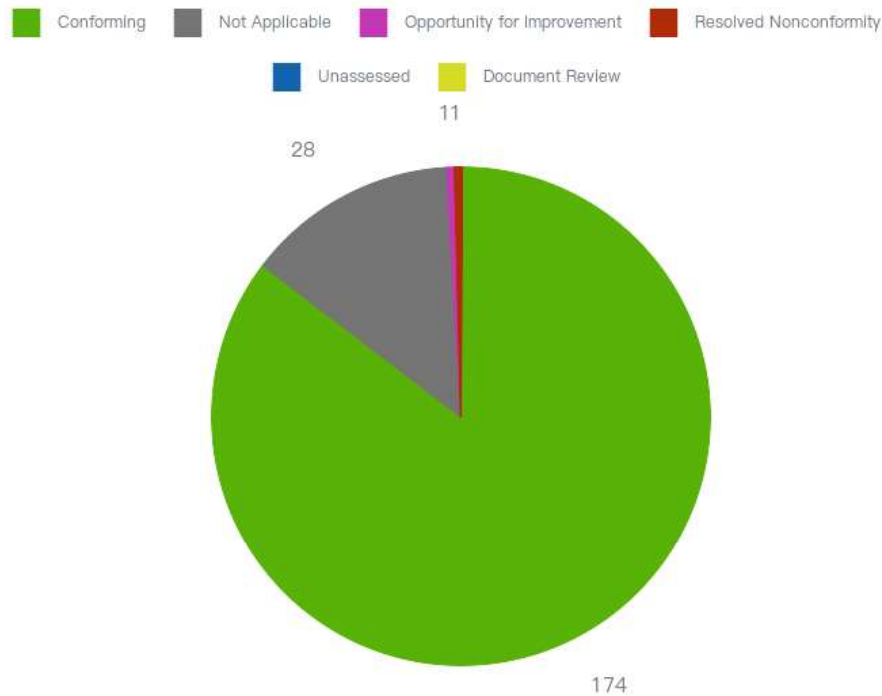
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

### ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

## Summary of Objective Evidence



## Audit Objective Evidence

### 7.8.1 General

7.8.1.2 ISO/IEC 17025:2017

Opportunity for Improvement : 0

#### Requirement

Are results provided accurately, clearly, unambiguously and objectively, usually in a report (e.g. a test report or a calibration certificate or report of sampling), and include all the information agreed with the customer and necessary for the interpretation of the results and all information required by the method used? Are all issued reports retained as technical records?

NOTE 1 For the purposes of this document, test reports and calibration certificates are sometimes referred to as test certificates and calibration reports, respectively.

NOTE 2 Reports can be issued as hard copies or by electronic means, provided that the requirements of this document are met.

#### Objective Evidence

It would be beneficial for the laboratory to review their approach to technically reviewing Fire Debris data to ensure accuracy.

### 7.8.2 Common requirements for reports (test, calibration or sampling)

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**Requirement**

Does each report include at least the following information, unless the laboratory has valid reasons for not doing so, thereby minimizing any possibility of misunderstanding or misuse:

- a) a title (e.g. "Test Report", "Calibration Certificate" or "Report of Sampling")?
- b) the name and address of the laboratory?
- c) the location of performance of the laboratory activities, including when performed at a customer facility or at sites away from the laboratory's permanent facilities, or in associated temporary or mobile facilities?
- d) unique identification that all its components are recognized as a portion of a complete report and a clear identification of the end?
- e) the name and contact information of the customer?
- f) identification of the method used?
- g) a description, unambiguous identification, and, when necessary, the condition of the item?
- h) the date of receipt of the test or calibration item(s), and the date of sampling, where this is critical to the validity and application of the results?
- i) the date(s) of performance of the laboratory activity?
- j) the date of issue of the report?
- k) reference to the sampling plan and sampling method used by the laboratory or other bodies where these are relevant to the validity or application of the results?
- l) a statement to the effect that the results relate only to the items tested, calibrated or sampled?
- m) the results with, where appropriate, the units of measurement?
- n) additions to, deviations, or exclusions from the method?
- o) identification of the person(s) authorizing the report?
- p) clear identification when results are from external providers?

NOTE Including a statement specifying that the report shall not be reproduced except in full without approval of the laboratory can provide assurance that parts of a report are not taken out of context.

ANAB NOTE 2 A legal requirement that dictates the information to be included in a report is a valid reason to not include one or more listed report elements.

ANAB NOTE 3 i) Date(s) may be reflected as a range of dates or the date of each test or calibration.

ANAB NOTE 4 o) Authorization of the report does not have to be performed by the same person(s) who authorized the results. (see ISO/IEC 17025:2017 7.8.1.1).

**Nonconformity Resolution**

The date that is listed on the report is not always reflective of the actual issue date required by letter j of this standard.

**Corrective Action Closure Note:** The laboratory initiated corrective action and performed cause analysis. The laboratory determined that the LIMS was populating the Draft date instead of the Issue date when reports were re-printed after technical review. The LIMS was adjusted to pull in the correct date, reports were reviewed to ensure that the Issue date was populated, and customers were notified. This nonconformity is resolved.



**Erie County Medical Examiner's Office Forensic Toxicology  
Laboratory**

2026 - 17025 - Y3 - Surveillance Assessment without Witnessing

Prepared by Carl Sobieralski

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Data collected on 2026-04-01

ANSI National Accreditation Board

United States

## Description

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### REQUIREMENTS:

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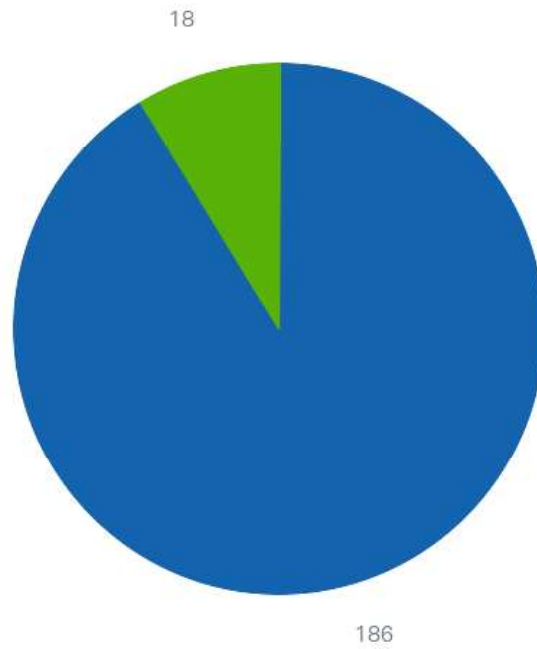
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

### ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

## Summary of Objective Evidence



## Audit Objective Evidence

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**Monroe County Crime Laboratory**

2026 - 17025 - Y4 - Reassessment

Prepared by Mike Healy

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Data collected on 2026-04-13

ANSI National Accreditation Board

United States

## Description

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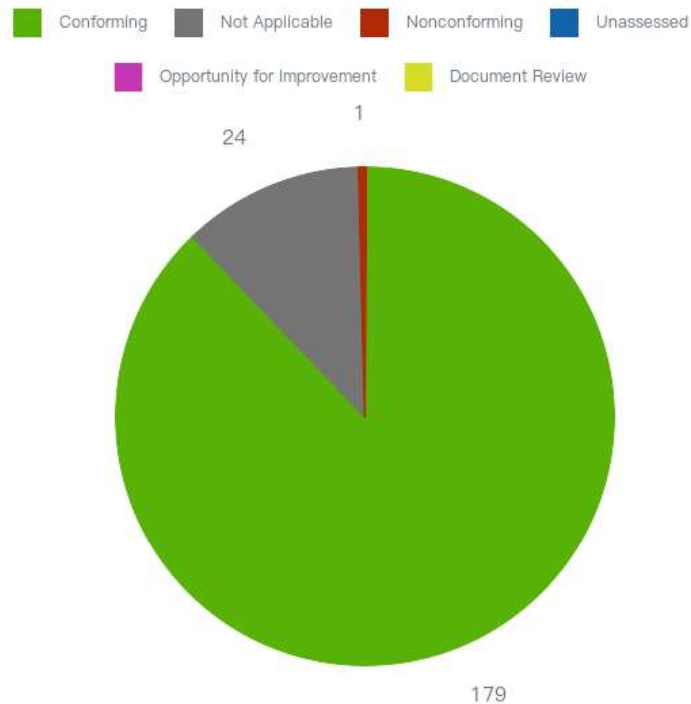
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## Summary of Objective Evidence



## Audit Objective Evidence

### 5. Structural requirements

5.4 ISO/IEC 17025:2017

Nonconforming

#### Requirement

Are laboratory activities carried out in such a way as to meet the requirements of this document, the laboratory's customers, regulatory authorities and organizations providing recognition? Does this include laboratory activities performed in all its permanent facilities, at sites away from its permanent facilities, in associated temporary or mobile facilities or at a customer's facility?

ANAB NOTE: Example of regulatory authorities are the Federal Bureau of Investigation for laboratories participating in the National DNA Index System (NDIS) and state forensic science commissions providing accreditation.

#### Nonconformity Resolution

2024 External QAS Audit was not reported to the FBI within the required timeframe.

Due Date & Responsible Party : Mike Healy until 2026-06-15 (Nonconformity Resolution not completed)



# Department of Public Safety

*Monroe County, New York*

**Adam J. Bello**  
*County Executive*

**Richard V. Tantalo**  
*Director of Public Safety*



May 13, 2026

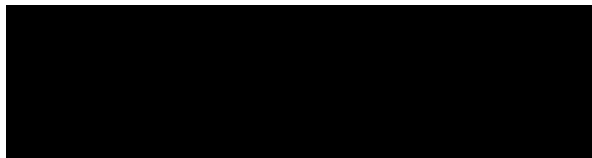
Director Shelley Palmer  
Office of Forensic Services  
New York State Division of Criminal Justice Services  
80 South Swan Street  
Albany, NY 12210

Director Palmer,

I'm writing to inform your office of my pending retirement from the Monroe County Crime Laboratory. My last day as laboratory administrator will be June 29, 2026. In the next few weeks the laboratory will contact your office to let you know who will be the interim laboratory administrator.

If you have any questions regarding this matter, please contact me at (585) 753-3523. Thank you.

Sincerely,



John R. Clark  
Laboratory Administrator

Cc: ANAB





June 10, 2026

Rebecca Hartman  
Monroe County Office of the Medical Examiner  
740 E. Henrietta Road  
Rochester, New York 14623

Dear Director Hartman,

Congratulations! On June 4, 2026, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

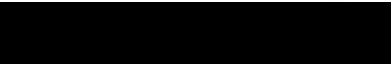
The resolved nonconformity report is available within the Audee subproject, Activities tab.

The provided ANAB accreditation symbols ([Forensic Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is a Surveillance Assessment without Witnessing scheduled for March 2027.

Thank you for your ongoing commitment to quality and the accreditation process. On behalf of ANAB, I extend my sincere congratulations to you. If you have any questions or if ANAB might assist you in any way, please feel free to get in touch with us at [qualitymatters@anab.org](mailto:qualitymatters@anab.org).

Sincerely,

  
Robyn Ragsdale  
Senior Manager of Accreditation  
ANSI National Accreditation Board

cc: Ana Ovalle, Assistant Chief Toxicologist  
New York DCJS



**Monroe County Office of the Medical Examiner - Forensic  
Toxicology Laboratory**

2026 - 17025 - Y2 - Surveillance Assessment with Witnessing

Prepared by Guillermo Ortiz

Data collected on 2026-03-23

ANSI National Accreditation Board

United States

## Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (e.g., reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

### REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the laboratory's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations, and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

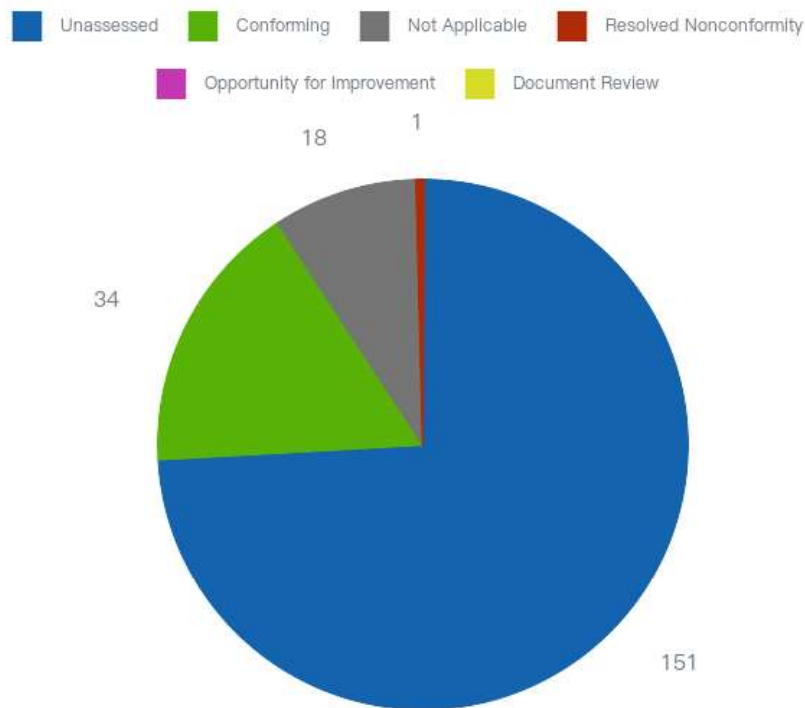
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

### ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

## Summary of Objective Evidence



## Audit Objective Evidence

### 7.5 Technical records

7.5.2 ISO/IEC 17025:2017

Resolved Nonconformity

#### Requirement

Does the laboratory ensure that amendments to technical records can be tracked to previous versions or to original observations? Are both the original and amended data and files retained, including the date of alteration, an indication of the altered aspects and the personnel responsible for the alterations?

ANAB NOTE Contemporaneous revisions are not considered amendments.

#### Nonconformity Resolution

Corrections and changes to case notes were identified in technical records that did not meet the required documentation for contemporaneous changes per laboratory policy.

**Corrective Action Closure Note:** The laboratory evaluated the cause and extent of the nonconformity. Based on this, the laboratory implemented stickers to complement amended records. The laboratory updated its Testimony and Technical Review procedure and communicated the updates to the experts.

The updated procedure, communication records, stickers and examples of its implementation were reviewed.

The nonconformity was resolved.



May 4, 2026

Timothy Hahn  
Nassau County Office of the Medical Examiner - Division of Forensic Toxicology  
Toxicology Laboratory  
2251 Hempstead Tpk., Bldg R  
East Meadow, New York 11554

Dear Assistant Director Hahn,

Congratulations! On April 24, 2026, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

The report was provided to you during the assessment activity.

The provided ANAB accreditation symbols ([Forensic Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is a Reassessment scheduled to occur in March 2027.

Thank you for your ongoing commitment to quality and the accreditation process. On behalf of ANAB, I extend my sincere congratulations to you. If you have any questions or if ANAB might assist you in any way, please feel free to get in touch with us at [qualitymatters@anab.org](mailto:qualitymatters@anab.org).

Sincerely,



Jami St.Clair  
Senior Manager of Accreditation  
ANSI National Accreditation Board

cc: Joseph Avella, Ph.D., Chief Toxicologist  
David Cook, Lab Supervisor  
New York DCJS



# CERTIFICATE OF ACCREDITATION

## The ANSI National Accreditation Board

Hereby attests that

**Nassau County Medical Examiner**  
**Division of Forensic Toxicology**  
2251 Hempstead Tpk., Bldg. R, East Meadow, New York 11554 USA

Fulfills the requirements of

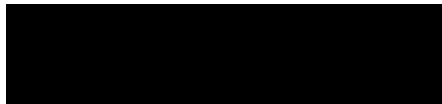
**ISO/IEC 17025:2017**

**Accreditation Requirements for Forensic Testing and Calibration (2023)**

In the field of

**Forensic Testing**

This certificate is valid only when accompanied by a current scope of accreditation document.  
The current scope of accreditation can be verified at [www.anab.org](http://www.anab.org).



Pamela L. Sale, Vice President, Forensics

Expiry Date: 31 July 2027  
Certificate Number: FT-0380





**ANSI National Accreditation Board**

**SCOPE OF ACCREDITATION TO:  
ISO/IEC 17025:2017**

**Accreditation Requirements for Forensic Testing and Calibration (2023)**

**Nassau County Medical Examiner  
Division of Forensic Toxicology**

2251 Hempstead Tpk., Bldg. R  
East Meadow, New York 11554 USA

**FORENSIC TESTING**

ISO/IEC 17025 Accreditation Granted: 16 March 2023

Certificate Number: FT-0380

Certificate Expiry Date: 31 July 2027

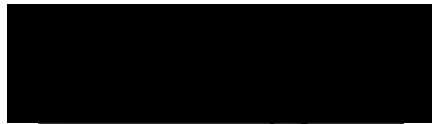
<b>Discipline: Seized Drugs</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Qualitative Determination	Botanical Liquid Solid	Gas Chromatography Mass Spectrometry Visual

<b>Discipline: Toxicology</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Qualitative Determination	Ante-Mortem Biological Item Post-Mortem Biological Item	Colorimetry Gas Chromatography Immunoassay Ion Specific Electrode Liquid Chromatography Mass Spectrometry Ultraviolet Spectroscopy Visible Spectroscopy
Qualitative Determination (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography



Quantitative Measurement	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Immunoassay Ion Specific Electrode Liquid Chromatography Mass Spectrometry Visible Spectroscopy
Quantitative Measurement (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography

When published on a forensic service provider’s Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale  
Vice President, Forensics



**Nassau County Office of the Medical Examiner Division of  
Forensic Toxicology**

2026 - 17025 - Y3 - Surveillance Assessment without Witnessing

Prepared by Albert Elian

---

Data collected on 2026-03-01

ANSI National Accreditation Board

United States

## Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

### REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

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Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

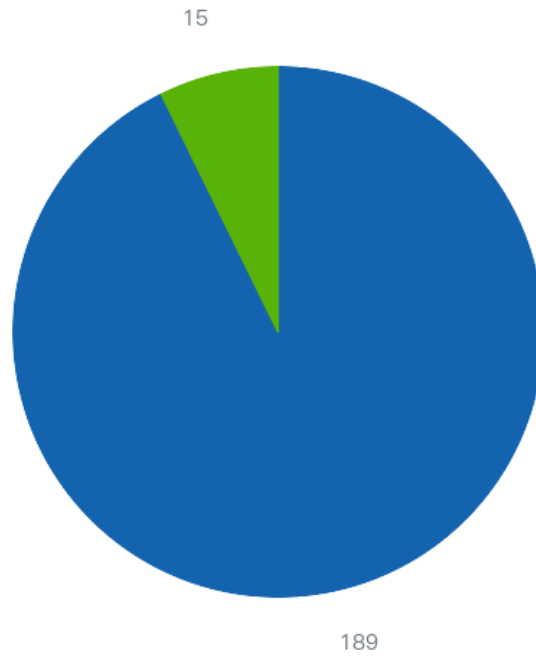
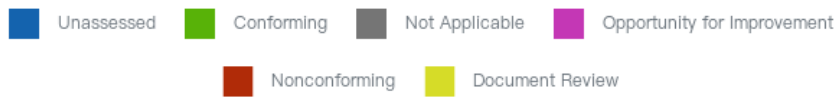
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

### ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

## Summary of Objective Evidence



## Audit Objective Evidence

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May 26, 2026



Gail Cooper  
New York City Office of Chief Medical Examiner  
Department of Forensic Toxicology  
520 First Avenue  
New York, New York 10016

Dear Director Cooper,

Congratulations! On May 25, 2026, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

The report was provided to you during the assessment activity.

The provided ANAB accreditation symbols ([Forensic Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is a Reassessment scheduled for April 2027.

Thank you for your ongoing commitment to quality and the accreditation process. On behalf of ANAB, I extend my sincere congratulations to you. If you have any questions or if ANAB might assist you in any way, please feel free to get in touch with us at [qualitymatters@anab.org](mailto:qualitymatters@anab.org).

[REDACTED]  
Sara Walker  
Senior Manager of Accreditation  
ANSI National Accreditation Board

cc: Elba Arango, Assistant Director of Forensic Toxicology  
Damon Borg, Assistant Director and Deputy Quality Manager  
New York DCJS



**New York City Office of Chief Medical Examiner - Department of  
Forensic Toxicology**

2026 - 17025 - Y3 - Surveillance Assessment without Witnessing  
Prepared by Lynn Langford

---

Data collected on 2026-04-01

ANSI National Accreditation Board

United States

## Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

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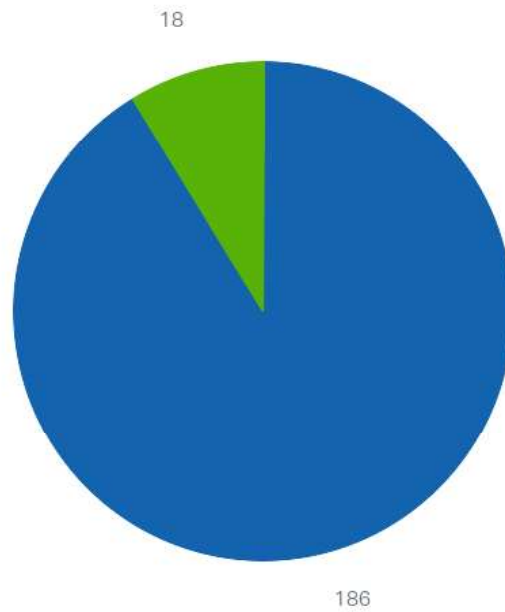
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

### ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

## Summary of Objective Evidence



## Audit Objective Evidence

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**NYC**  
**Office of Chief  
Medical Examiner**

**Dr Gail Cooper, Director of Forensic Toxicology**

Department of Forensic Toxicology  
520 First Avenue, New York NY 10016

**Telephone:** 212-447-2642 **Fax:** 212-447-6062

Email: [gcooper@ocme.nyc.gov](mailto:gcooper@ocme.nyc.gov)

Official Website: [www.nyc.gov/ocme](http://www.nyc.gov/ocme)

Rossana Rosado  
Chair, New York State Commission on Forensic Science  
Executive Deputy Commissioner, New York State Division of Criminal Justice Services  
Alfred E. Smith Building  
80 South Swan St.  
Albany, New York 12210

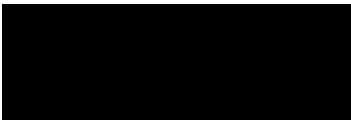
May 2<sup>nd</sup>, 2026

Dear Ms. Rosado,

I am writing to inform the New York State Commission on Forensic Science that on May 1<sup>st</sup> 2026, Assistant Director and Deputy Quality Manager, Reinaldo Fonseca retired following 31 years of dedicated service to the NYC Office of Chief Medical Examiner, Department of Forensic Toxicology.

We will be advertising for a replacement Assistant Director. In the meantime, Assistant Director Dr. Damon Borg will assume the role of Acting Deputy Quality Manager.

Yours Sincerely,



**Dr Gail Cooper BSc MSc PhD CChem FRSC FHEA**

Director of Forensic Toxicology

**From:** [QualityMatters](#)  
**To:** [OSHEA, STEPHANIE](#); [dcjs.sm.forensiclabs](#)  
**Cc:** [ONEILL, SCOTT](#); [SUCKOW, JEFFREY](#); [Bolz, Nita](#)  
**Subject:** RE: NYPD Police Laboratory- Notification of Change in Personnel  
**Date:** Thursday, April 2, 2026 6:31:12 PM  
**Attachments:** [image001.png](#)  
[image002.png](#)  
[image003.png](#)  
[image004.png](#)  
[image005.png](#)

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**ATTENTION:** This email came from an external source. Do not open attachments or click on links from unknown senders or unexpected emails.

Good afternoon.

Thank you for the notification. Matthew didn't have access to the ANAB applications (Sharefile, Nimonik, Audeee). If additional information is needed, you will be contacted.

Respectfully,

*Caprice*

Caprice Fowler | ANAB  
Manager, Operations  
ANSI National Accreditation Board  
D.C. | Fort Wayne, IN  
414-501-5375 (direct, NC) | [cfowler@anab.org](mailto:cfowler@anab.org)  
414-501-5494 (main)  
[www.anab.org](http://www.anab.org)  
[qualitymatters@anab.org](mailto:qualitymatters@anab.org)  
ANAB Training - [www.anab.org/training](http://www.anab.org/training)



***ANSI National Accreditation Board***



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---

**From:** OSHEA, STEPHANIE <STEPHANIE.OSHEA@nypd.org>  
**Sent:** Thursday, April 2, 2026 11:21 AM  
**To:** QualityMatters <qualitymatters@anab.org>; dcjs.sm.forensiclabs  
<dcjsforensiclabs@dcjs.ny.gov>  
**Cc:** ONEILL, SCOTT <SCOTT.ONEILL@nypd.org>; SUCKOW, JEFFREY <JEFFREY.SUCKOW@nypd.org>  
**Subject:** [EXTERNAL] NYPD Police Laboratory- Notification of Change in Personnel

Good morning,

This email is to notify you in regards to a change in personnel with overall management. Matthew Johnson, an Assistant Director in the Controlled Substances Analysis Section, has retired and his last day was 4/1/26.

**Stephanie O'Shea**  
**Quality Assurance Manager**  
**NYPD Police Laboratory**  
**Office Phone: (718) 558-8729**  
**Department Cell: (929) 920-4186**  
**Fax: (718) 558-8734**

*This e-mail is for informational purposes only and does not constitute an official report. Any specific questions should be directed to the examiner who conducted the analysis.*

*CONFIDENTIALITY NOTICE: This email and any attachments may contain confidential and privileged information for the use of the designated recipient(s) named above. If you are not the intended recipient, you are hereby notified that you have received this communication in error and that any review, use or disclosure of it or its contents is prohibited and may violate laws including the Electronic Communications Privacy Act. If you are not the intended recipient, please contact the sender and destroy all copies of this communication. Please treat this and all other communications from the New York City Police Department as law enforcement sensitive/for official use only.*



**Division of State Police  
Crime Laboratory System**

**KATHY HOCHUL**  
Governor

**STEVEN G. JAMES**  
Superintendent

April 29, 2026

Pamela Sale  
Vice President, Forensics  
ANSI National Accreditation Board  
2000 Regency Parkway, Suite 430  
Cary, North Carolina 27518

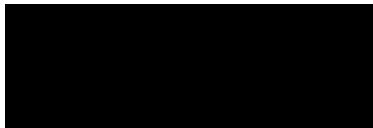


**RE: Change in Management: Director / NYSP Crime Laboratory System**

Ms. Sale:

Please be advised that on April 24, 2026, Dr. Jill Dooley resigned from her position as Laboratory Director. Julie Pizziketti, Director of Biological Sciences, will serve as the Acting Laboratory Director until a permanent appointment has been made.

Sincerely,



Julia Becker



# DNA Subcommittee

MICHAEL COBLE, PH.D.  
CHAIR  
Center for Human Identification

FREDERICK BIEBER, PH.D.  
Harvard Medical School

KATHLEEN CORRADO, PH.D.  
Syracuse University

KATHERINE GETTINGS, PH.D.  
National Institute of Standards and Technology

JENIFER SMITH, PH.D.  
PRINCIPAL, BIOFORENSIC CONSULTING LLC

AMANDA C. SOZER, PH.D.  
SNA International

May 12, 2026

Rossana Rosado  
Chair, Commission on Forensic Science  
Division of Criminal Justice Services  
80 South Swan Street  
Albany, New York 12210

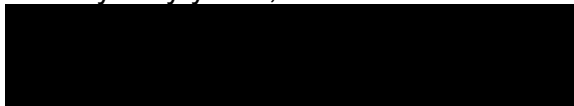
Dear Commissioner Rosado:

Pursuant to Executive Law Section 995-b(13)(b) the DNA Subcommittee (Subcommittee) assesses and evaluates all DNA methodologies proposed to be used for forensic analysis and makes recommendations to the Commission on Forensic Science (Commission).

At the February 6, 2026, Subcommittee meeting, the New York State Police Crime Laboratory presented their Rapid DNA validation using the ANDE Rapid DNA Identification System. Following this presentation, the Subcommittee requested additional information be provided.

At the May 4, 2026, Subcommittee meeting, members reviewed the additional information and voted to issue a binding recommendation to approve the use of the ANDE Rapid DNA Identification System for Rapid DNA analysis on single source reference samples at the New York State Police Crime Laboratory.

Very truly yours,



Michael Coble, Ph.D.  
Chair, DNA Subcommittee

cc. Members of the Commission on Forensic Science  
Shelley Palmer, Director, OFS



# DNA Subcommittee

MICHAEL COBLE, PH.D.  
CHAIR  
Center for Human Identification

May 12, 2026

FREDERICK BIEBER, PH.D.  
Harvard Medical School

KATHLEEN CORRADO, PH.D.  
Syracuse University

KATHERINE GETTINGS, PH.D.  
National Institute of Standards and Technology

JENIFER SMITH, PH.D.  
PRINCIPAL, BIOFORENSIC CONSULTING LLC

AMANDA C. SOZER, PH.D.  
SNA International

Rossana Rosado  
Chair, Commission on Forensic Science  
Division of Criminal Justice Services  
80 South Swan Street  
Albany, New York 12210

Dear Commissioner Rosado:

At the May 4, 2026, DNA Subcommittee (Subcommittee) meeting, members reviewed the final ANSI National Accreditation Board (ANAB) Assessment Report for the New York State Police Crime Laboratory.

The Subcommittee voted to issue a binding recommendation to the Commission on Forensic Science to renew the New York State Accreditation of the New York State Police Crime Laboratory in the discipline of Biology and Rapid DNA for the period concurrent with their ANAB accreditation. This accreditation is valid until May 31, 2030.

Very truly yours,

A large black rectangular redaction box covering the signature of Michael Coble.

Michael Coble, Ph.D.  
Chair, DNA Subcommittee

cc. Members of the Commission on Forensic Science  
Shelley Palmer, Director, OFS



April 30, 2026

Acting Director Julie Pizziketti  
New York State Police Division of State Police  
Crime Laboratory System  
1220 Washington Avenue  
Albany, New York 12226

Dear Acting Director Pizziketti,

Congratulations! On April 29, 2026, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

To retain accredited status until the expiry date on the Certificate of Accreditation, a conformity assessment body (CAB) is expected to continue to meet the Requirements under which it was accredited, as well as the responsibilities and obligations of ANAB's Terms and Conditions for Accreditation. The principal means by which ANAB monitors on-going conformance are Program dependent and may include surveillance activities, CAB and personnel performance in proficiency testing and other monitoring activities, complaints, and CAB self-disclosure of significant events and nonconformities.

The planned assessment schedule is listed below:

- January 2027 Surveillance Assessment without Witnessing
- January 2028 Surveillance Assessment with Witnessing
- January 2029 Surveillance Assessment without Witnessing
- January 2030 Reassessment

The provided ANAB accreditation symbols ([Forensic Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The report was provided to you during the assessment activity, and an electronic version of accreditation documents is included with this letter.

Achieving accreditation is the result of an extensive commitment of resources and much preparation by the management and personnel of the entire organization. I commend the efforts of all who were involved in this achievement. On behalf of ANAB, I extend my sincere congratulations to you. If you have any questions or if ANAB might assist you in any way, please feel free to get in touch with us at [qualitymatters@anab.org](mailto:qualitymatters@anab.org).

Sincerely,



Janet M. Girten  
Senior Accreditation Manager  
ANSI National Accreditation Board

cc: Staff Inspector Mary Barrette  
Quality Manager Julie Becker  
NY DCJS



**ANSI National Accreditation Board**

**SCOPE OF ACCREDITATION TO:  
ISO/IEC 17025:2017  
Accreditation Requirements for Forensic Testing and Calibration:2023  
FBI Quality Assurance Standards for Forensic DNA Testing Laboratories:2025  
FBI Quality Assurance Standards for DNA Databasing Laboratories:2025**

**New York State Police Crime Laboratory**  
(see locations listed below)

**FORENSIC TESTING**

ISO/IEC 17025 Accreditation Granted: 21 June 2008

Certificate Number: FT-0025      Certificate Expiry Date: 31 May 2030

**Forensic Investigation Center**  
1220 Washington Avenue  
Albany, New York 12226 USA

<b>Discipline: Biology</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
DNA Profile Determination	Short Tandem Repeat (STR) Y-Short Tandem Repeat (Y-STR) Single-Nucleotide Polymorphism (SNP)	Capillary Electrophoresis Massively Parallel Sequencing
DNA Profile Determination (Database Samples)	Short Tandem Repeat (STR) Y-Short Tandem Repeat (Y-STR)	Capillary Electrophoresis
Individual Characteristic Database	DNA Profile	National DNA Index System (NDIS)
Physical Comparison	DNA Profile	Software Program
Qualitative Determination	Body Fluid Feces	Chemical Fluorescence Spectroscopy General Microscopy Immunoassay

<b>Discipline: Rapid DNA</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
DNA Profile Development	Short Tandem Repeat (STR)	Capillary Electrophoresis

<b>Discipline: Fire Debris and Explosives</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Qualitative Determination	Fire Debris	Gas Chromatography Mass Spectrometry

<b>Discipline: Firearms and Toolmarks</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Function Evaluation	Firearm	Measuring Equipment
Individual Characteristic Database	Ammunition	National Integrated Ballistic Information Network (NIBIN)
Physical Comparison	Ammunition	General Microscopy Measuring Equipment Software Program Visual
Qualitative Determination	Ammunition Firearm Metal	Chemical General Microscopy Measuring Equipment Reference Collection
Serial Number Restoration	Physical Item	Chemical General Microscopy Magnetic Visual

<b>Discipline: Friction Ridge</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Enhancement	Ridge Detail	Chemical Physical Software Program
Individual Characteristic Database	Ridge Detail	Next Generation Identification System (NGI)
Physical Comparison	Ridge Detail	Software Program Visual

<b>Discipline: Materials (Trace)</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Qualitative Determination	Hair	General Microscopy

<b>Discipline: Seized Drugs</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Liquid Chromatography Mass Spectrometry Thin-Layer Chromatography Ultraviolet Spectroscopy Visual
Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography Liquid Chromatography Ultraviolet Spectroscopy
Weight Measurement	Botanical Liquid Solid	Balance

<b>Discipline: Toxicology – General Testing</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Qualitative Determination	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Immunoassay Liquid Chromatography Mass Spectrometry
Qualitative Determination (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Mass Spectrometry
Quantitative Measurement	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Liquid Chromatography Mass Spectrometry
Quantitative Measurement (Volatiles)	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography

**Mid-Hudson Satellite Crime Laboratory**  
224 Breunig Road  
New Windsor, New York 12553 USA

<b>Discipline: Seized Drugs</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Liquid Chromatography Mass Spectrometry Thin-Layer Chromatography Ultraviolet Spectroscopy Visual
Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography Liquid Chromatography Ultraviolet Spectroscopy
Weight Measurement	Botanical Liquid Solid	Balance

**Southern Tier Satellite Crime Laboratory**  
44 Park Street  
Port Crane, New York 13833 USA

<b>Discipline: Seized Drugs</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Liquid Chromatography Mass Spectrometry Thin-Layer Chromatography Ultraviolet Spectroscopy Visual
Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography Liquid Chromatography Ultraviolet Spectroscopy
Weight Measurement	Botanical Liquid Solid	Balance

Western Satellite Crime Laboratory  
 722 Homer Street  
 Olean, New York 14760 USA

Discipline: Seized Drugs		
Component/Parameter	Item	Key Equipment/Technology
Qualitative Determination	Botanical Liquid Solid	Chemical Gas Chromatography General Microscopy Infrared Spectroscopy Liquid Chromatography Mass Spectrometry Thin-Layer Chromatography Ultraviolet Spectroscopy Visual
Quantitative Measurement	Botanical Liquid Solid	Gas Chromatography Liquid Chromatography Ultraviolet Spectroscopy
Weight Measurement	Botanical Liquid Solid	Balance

When published on a forensic service provider’s Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale  
 Vice President, Forensics



## **New York State Police - Crime Laboratory**

2026 - 17025 - Y4 - Reassessment

Prepared by Lisa Brewer

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Data collected on 2026-03-23

ANSI National Accreditation Board

United States

## Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

### REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the laboratory's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations, and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

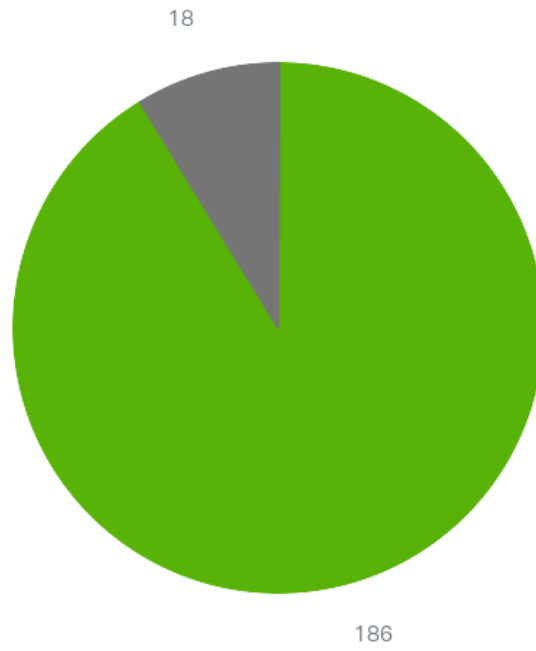
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

### ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

## Summary of Objective Evidence



## Audit Objective Evidence

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May 19, 2026

Director Kristie Barba  
Onondaga County Medical Examiner's Office  
100 Elizabeth Blackwell Street  
Syracuse, New York 13210

Dear Director Barba:

Congratulations! On May 12, 2026, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

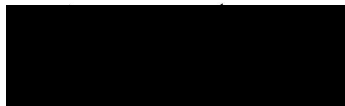
The report was provided to you during the assessment activity.

The provided ANAB accreditation symbols ([Forensic Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The planned assessment schedule is listed below:

- March 2027 Reassessment
- March 2028 Surveillance Assessment without Witnessing
- March 2029 Surveillance Assessment with Witnessing
- March 2030 Surveillance Assessment without Witnessing

Thank you for your ongoing commitment to quality and the accreditation process. On behalf of ANAB, I extend my sincere congratulations to you. If you have any questions or if ANAB might assist you in any way, please feel free to get in touch with us at [qualitymatters@anab.org](mailto:qualitymatters@anab.org).



Jill L. Spriggs  
Senior Accreditation Manager

cc: Quality Assurance Officer Erin Vandee  
NY DCJS



**Division of Criminal  
Justice Services**

RECEIVED 3/31/2026 Office of Forensic Services



*ANSI National Accreditation Board*

**Onondaga County Medical Examiner's Office Forensic Toxicology  
Laboratory**

2026 - 17025 - Y3 - Surveillance Assessment without Witnessing

Prepared by Lori Nix

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Data collected on 2026-03-01

ANSI National Accreditation Board

United States

## Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

### REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the laboratory's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations, and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

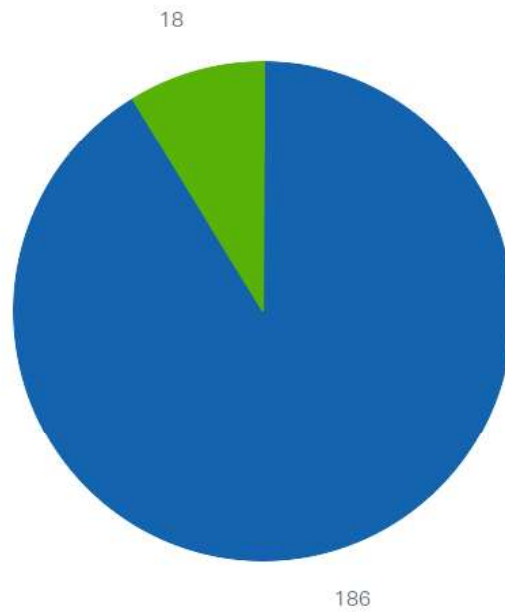
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

### ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

## Summary of Objective Evidence



## Audit Objective Evidence

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May 19, 2026

Michael Lehrer  
725 Veterans Memorial Highway  
Bldg 487, William J Lindsay Complex  
Hauppauge, New York 11788

Dear Director Lehrer,

Congratulations! On May 4, 2026, ANAB made the decision maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.

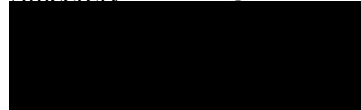
The report was provided to you during the assessment activity.

The provided ANAB accreditation symbols ([Forensic Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is a Surveillance Assessment without Witnessing scheduled for March 2027.

Thank you for your ongoing commitment to quality and the accreditation process. On behalf of ANAB, I extend my sincere congratulations to you. If you have any questions or if ANAB might assist you in any way, please feel free to get in touch with us at [qualitymatters@anab.org](mailto:qualitymatters@anab.org).

Sincerely,



Nita Bolz  
Senior Manager of Accreditation  
ANSI National Accreditation Board

cc: Edward Minden, Quality Manager  
Michael Katz  
New York DCJS



# CERTIFICATE OF ACCREDITATION

**The ANSI National Accreditation Board**

Hereby attests that

**Suffolk County Medical Examiner  
Toxicology Laboratory  
725 Veterans Memorial Highway, Building 487  
William J Lindsay Complex, Hauppauge, New York 11788 USA**

Fulfills the requirements of

**ISO/IEC 17025:2017**

**Accreditation Requirements for Forensic Testing and Calibration (2023)**

In the field of

**Forensic Testing**

This certificate is valid only when accompanied by a current scope of accreditation document.  
The current scope of accreditation can be verified at [www.anab.org](http://www.anab.org).



Pamela L. Sale, Vice President, Forensics

Expiry Date: 31 July 2028  
Certificate Number: FT-0407





**ANSI National Accreditation Board**

**SCOPE OF ACCREDITATION TO:  
ISO/IEC 17025:2017**

**Accreditation Requirements for Forensic Testing and Calibration (2023)**

**Suffolk County Medical Examiner - Toxicology Laboratory**

725 Veterans Memorial Highway, Building 487, William J Lindsay Complex  
Hauppauge, New York 11788 USA

**FORENSIC TESTING**

ISO/IEC 17025 Accreditation Granted: 26 April 2024

Certificate Number: FT-0407

Certificate Expiry Date: 31 July 2028

<b>Discipline: Toxicology - General Testing</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Qualitative Determination	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Immunoassay Liquid Chromatography Mass Spectrometry Visible Spectroscopy
Qualitative Determination (Volatiles)	Ante-Mortem Biological Item Liquid Post-Mortem Biological Item	Gas Chromatography
Quantitative Measurement	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Liquid Chromatography Mass Spectrometry Visible Spectroscopy
Quantitative Measurement (Volatiles)	Ante-Mortem Biological Item Liquid Post-Mortem Biological Item	Gas Chromatography

When published on a forensic service provider's Scope of Accreditation, ANAB has confirmed the competence required to develop and validate methods and perform on-going quality assurance for accredited activities. For a listed component/parameter, the forensic service provider may add or modify methods for activities without formal notice to ANAB for items and key equipment/technology listed. Contact the forensic service provider for information on the method utilized for accredited work.



Pamela L. Sale  
Vice President, Forensics





**Suffolk County Medical Examiner - Toxicology Laboratory**  
2026 - 17025 - Y2 - Surveillance Assessment with Witnessing  
Prepared by Albert Elian

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Data collected on 2026-03-24

ANSI National Accreditation Board

United States

## Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (*e.g.*, reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

### REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

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Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

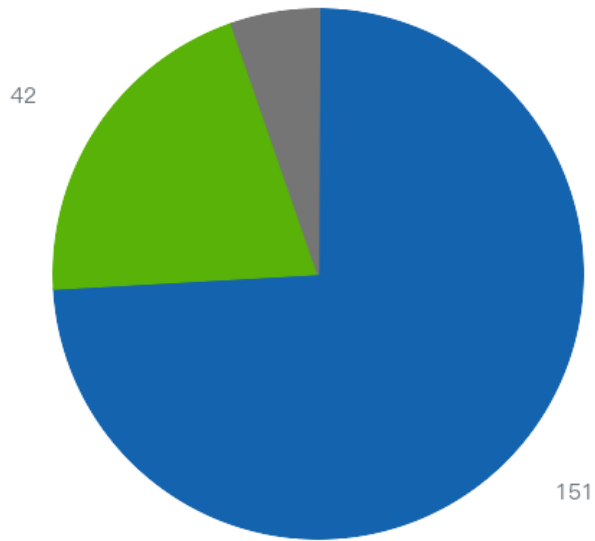
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

### ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

## Summary of Objective Evidence



## Audit Objective Evidence

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**dcjs.sm.forensiclabs**

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**From:** Minden, Edward <Edward.Minden@suffolkcountyny.gov>  
**Sent:** Tuesday, May 26, 2026 10:24 AM  
**To:** dcjs.sm.forensiclabs  
**Cc:** Katz, Michael; Clarino, Kristin  
**Subject:** Suffolk Toxicology - Management changes

*ATTENTION: This email came from an external source. Do not open attachments or click on links from unknown senders or unexpected emails.*

Good morning,

This email is to notify DCJS and the FSC that Dr. Michael Lehrer will be retiring as of today, 5/26/26, as the Chief Toxicologist with the Suffolk County Medical Examiner's Office.

Michael Katz will be moving into the Chief Toxicologist position as of 5/27/26, Edward Minden will be moving into the Asst. Toxicologist position as of 5/27/26 and Kristin Clarino will be assuming the QA Manager position following training of her replacement as DWI section supervisor.

If you require any documentation from the laboratory, please feel free to reach out.

Sincerely,  
Ed Minden  
QA manager  
Suffolk Toxicology



May 4, 2026

Christopher Cording  
Westchester County Department of Laboratories & Research  
Division of Forensic Toxicology  
10 Dana Road  
Valhalla, New York 10595

Dear Director Cording,

Congratulations! On April 23, 2026, ANAB made the decision to maintain your organization's accreditation in the Field of Forensic Testing. ANAB is satisfied that your organization meets or exceeds accreditation requirements, including the requirements of your own documented management system.


The report was provided to you during the assessment activity.

The provided ANAB accreditation symbols ([Forensic Testing](#)) may be used to convey your accredited status. An accreditation symbol must not be used in any way which implies accreditation in any area outside of the scope of accreditation. If appropriate, the accreditation symbol may be used on your organization's website, reports, letterhead, business cards, and other official documents. Please refer to [PR 1018 Policy on Use of ANAB Accreditation Symbols and Claims of Accreditation Status](#) for all required information. This policy also provides information on your ability to use a combined mark that contains the ANAB accreditation symbol and the International Laboratory Accreditation Cooperation (ILAC) mark.

The next assessment activity is a Reassessment scheduled to occur in March 2027.

Thank you for your ongoing commitment to quality and the accreditation process. On behalf of ANAB, I extend my sincere congratulations to you. If you have any questions or if ANAB might assist you in any way, please feel free to get in touch with us at [qualitymatters@anab.org](mailto:qualitymatters@anab.org).

Si

  
Jami St.Clair  
Senior Manager of Accreditation  
ANSI National Accreditation Board

cc: Eliza Scuderi, Quality Manager  
Brian Scharf, Senior Toxicologist  
New York DCJS



# CERTIFICATE OF ACCREDITATION

**The ANSI National Accreditation Board**

Hereby attests that

**Westchester County Department of Laboratories &  
Research: Division of Forensic Toxicology**  
10 Dana Road, Valhalla, New York 10595 USA

Fulfills the requirements of

**ISO/IEC 17025:2017**

**Accreditation Requirements for Forensic Testing and Calibration (2023)**

In the field of

**Forensic Testing**

This certificate is valid only when accompanied by a current scope of accreditation document.  
The current scope of accreditation can be verified at [www.anab.org](http://www.anab.org).



Pamela L. Sale, Vice President, Forensics

Expiry Date: 31 July 2027  
Certificate Number: FT-0385





**ANSI National Accreditation Board**

**SCOPE OF ACCREDITATION TO:  
ISO/IEC 17025:2017**

**Accreditation Requirements for Forensic Testing and Calibration (2023)**

**Westchester County Department of Laboratories & Research:  
Division of Forensic Toxicology**

10 Dana Road  
Valhalla, New York, 10595 USA

**FORENSIC TESTING**

ISO/IEC 17025 Accreditation Granted: 08 May 2023

Certificate Number: FT-0385

Certificate Expiry Date: 31 July 2027

<b>Discipline: Toxicology</b>		
<b>Component/Parameter</b>	<b>Item</b>	<b>Key Equipment/Technology</b>
Qualitative Determination	Ante-Mortem Biological Item Post-Mortem Biological Item	Colorimetry Gas Chromatography Immunoassay Ion Specific Electrode Liquid Chromatography Mass Spectrometry Ultraviolet Spectroscopy Visible Spectroscopy
Qualitative Determination (Volatiles)	Ante-Mortem Biological Item Liquid Post-Mortem Biological Item	Gas Chromatography
Quantitative Measurement	Ante-Mortem Biological Item Post-Mortem Biological Item	Gas Chromatography Ion Specific Electrode Liquid Chromatography Mass Spectrometry Ultraviolet Spectroscopy Visible Spectroscopy
Quantitative Measurement (Volatiles)	Ante-Mortem Biological Item Liquid Post-Mortem Biological Item	Gas Chromatography

**Westchester County Department of  
Laboratories & Research:  
Division of Forensic Toxicology**

**FT-0385**

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Pamela L. Sale  
Vice President, Forensics



**Yonkers Police Department Forensic Science Laboratory**

2026 - 17025 - Y1 - Surveillance Assessment Without Witnessing

Prepared by Brooke Arnone

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Data collected on 2026-05-01

ANSI National Accreditation Board

United States

## Description

This assessment report summarizes the outcome of the recent accreditation activity. A separate document, the assessment plan, provides information on the type of activity (e.g., reassessment, surveillance activity, scope extension), the date(s) of the activity, the assessment team members, the requirement documents and refers to the scope of the discipline(s) assessed for each location. The assessment plan, together with this report, provide a complete picture of the accreditation activity.

The ANSI National Accreditation Board (ANAB) evaluated the competence of the laboratory and conformance with all applicable accreditation requirements for the scope of accreditation referenced in the assessment plan. Objective evidence of implementation was assessed. The results of an assessment activity are based on a sample of records, locations, and personnel that were available at the time of the activity. Witnessing is an additional technique used in most activities.

### REQUIREMENTS:

ISO/IEC 17025:2017 General requirements for the competence of testing and calibration laboratories & ANAB Accreditation Requirements for Forensic Testing and Calibration (AR 3125) evaluated over the accreditation cycle are summarized in the following broad categories:

General requirements related to the laboratory's commitment to impartiality and confidentiality in its activities.

Structural requirements related to the range of activities, management structure, the authority, roles and responsibilities of personnel. Documented procedures which ensure a consistent application of activities and the validity of results.

Resource requirements related to the impartiality of personnel. Requirements for a training program, competency testing, authorizations, and ongoing monitoring to ensure the competence of personnel. Facility and security suitability for activities. Records and procedures for equipment to ensure proper functioning and where applicable, establishment of metrological traceability. Requirements for externally provided products and services.

Process requirements related to the handling of test and calibration items in a manner to maintain the integrity of the item. Requirements for chain-of-custody of items to be tested and appropriate methods and procedures. Ensuring the required performance of the methods along with monitoring the validity of the results. Requirements to ensure results are supported by sufficient technical records and are reported accurately, clearly, unambiguously, and objectively. Procedures for nonconforming work and a documented process for handling complaints. Requirements related to the laboratory information management system protection and integrity of data and information.

Management system requirements related to policies and objectives appropriate for the scope of activities. Requirements to control internal and external documents and records. Requirements to address risks and opportunities and timely, well-documented corrective actions. Requirements for an internal audit program and management reviews.

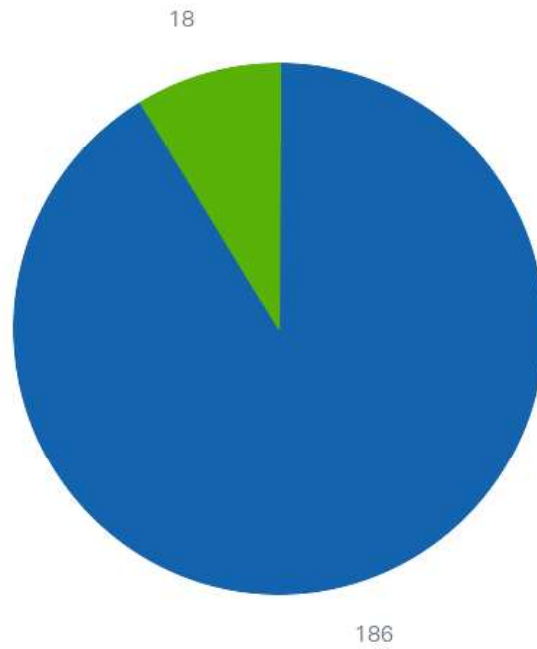
The accreditation activity also evaluates the laboratory's conformance with their own management system requirements.

### ASSESSMENT RESULT:

Based on the assessment techniques and a sample of the objective evidence reviewed during the assessment activity, the assessment team found that the laboratory demonstrated competence to operate a management system that fulfills all applicable accreditation requirements, including those specified within their management system.

Any opportunities for improvement or nonconformities identified during this assessment activity are noted below. All nonconformities will be resolved prior to an accreditation decision by ANAB and a summary provided in a subsequent assessment activity report.

## Summary of Objective Evidence

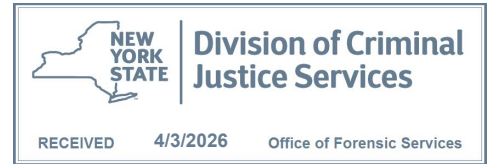


## Audit Objective Evidence

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# Commission on Forensic Science



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April 2, 2026

Dear Laboratory Directors:

The Commission on Forensic Science (Commission) would like to thank the New York State accredited forensic laboratories for their commitment to continuous improvement. A substantial amount of work was required to complete a review and assessment of each laboratory's quality system against the documents on the Organization of Scientific Area Committees for Forensic Science (OSAC) Registry. The continued effort to enhance forensic science in New York State is commendable.

The Commission has recommended that the New York State accredited forensic laboratories continue to review and implement the standards as they are published by a standards developing organization (SDO) and added to the OSAC Registry, to determine the applicability to each individual quality system. As determined at the December 12, 2025, meeting of the Commission, the Office of Forensic Services will conduct an annual survey of the laboratories' implementation status for review by the Commission.

Again, thank you for your dedication and commitment to enhancing the forensic science services provided to the citizens of New York State.

Sincerely,



Rossana Rosado  
Chair