COLORADO
Department of Public Health & Environment

HB-1283 Implementation

10/5/15 Working Group Meeting Summary

Participants

Lewis Koski (DOR)
Ron Kammerzall (DOR)
Karin McGowan (CDPHE)
Heather Krug (CDPHE)
Matthew Ward (CDPHE)
Luke Mason (Aurum Labs)
Seth Wong (TEQ Analytical)
Claire Ohman (THC Labs)
Joseph Evans (Nordic Analytical)
Peter Perrone (Gobi Analytical)
Heather Despres (CannLabs)
Jill Brzezicki (CMT)
Jessica Olson (GreenHill)
Mark Angerhofer (RM3 Labs)
Stephen Goldman (PhytaTech)
Noelle Mathis (Bona Fides)
Shawn Kassner (Neptune & Co.)
Ty Garber (Phenova)
Gina Clapper (AOCS)

Notes

- The group remains in agreement that utilizing an accredited third party proficiency testing (PT) provider is the best option for a establishing a long term PT program, but PT testing must occur in the interim. It was decided that utilization of a round-robin PT scheme is appropriate until an approved third party PT provider is identified.

- An initial beta PT event evaluating potency will be conducted utilizing marijuana flower only will take place with four individual PT events occurring over a 12 week period. Protocols developed and information learned during this process will be used to shape the round-robin PT program encompassing all matrices and testing categories.

- Volunteering RMTFs will work together to provide a proposed flower sample preparation/homogenization procedure to CDPHE by 10/12/15. This procedure will be shared with all RMTFs, CDPHE, and DOR for review and a final draft will be presented at the next working group meeting.

- CDPHE will develop a draft protocol for statistical analysis of PT results. This protocol will be presented at the next working group meeting.

- CDPHE will draft a proposed timeline for the potency beta PT event which will be presented at the next working group meeting.

- DOR will determine the options for obtaining appropriate marijuana from growers/retail for use in PT samples.

- DOR will work to determine the best mechanism for tracking PT samples and reporting PT results in METRC, including allowing CDPHE to access these results.