

Data Entry Instructions

In the instructions below, fields and their required formats and descriptions are detailed in tables. Use these tables to guide data entry as necessary.

Fields in **red** are **required** to meet federal and state reporting requirements.

Fields in **blue** are *conditionally or situationally* required.

Fields in **black** are optional.

Samples will be rejected if required fields are blank.

Fields often require exact matches with information in SDWIS. If a required field does not exactly match that of SDWIS, the sample will be rejected. For example, a sample with a water system ID that begins with “md” will be rejected because all water system IDs in Maryland begin with a *capitalized* “MD”.

Use caution when selecting analysis methods. The Excel template includes all method codes used across the country. Some methods are very similar and may only differ by a letter or even a space, but they are not interchangeable. Maryland’s SDWIS will only accept method codes defined in its database. Check the Valid Methods List section for a list of accepted method codes. Note that this list may not be complete and is subject to change. Contact the appropriate SDWA rule manager at MDE if assistance is required.

Refer to the exemplar template to see examples of acceptable data entry. Examples include different scenarios such as repeat microbial samples, chemical samples with field results, and replacement chemical samples.

Disinfection Byproducts

The Excel template used for reporting Disinfection Byproducts (DBPs) is separated into three sections. These sections include **Sample Information** and **Results**. The Field Results and Measurements section of the template does not require any information. If field results were collected with the sample(s), refer to the TC/EC Field Results and Measurements section.

Only *Total* trihalomethanes (2950, TTHM) and *Total* haloacetic acids (2456, HAA5) need to be reported. Do not report the individual TTHM or HAA5 constituents.

For samples with results of more than one analyte, enter sample information *once* for the entire sample. After the sample information with multiple analytes is entered first and only once, then enter the analyte result and each subsequent analyte result on following rows in the Results section of the template. Refer to the included exemplar template in the Other Instructions section to see examples of a sample with multiple analyte results.

Submit data as described on the following pages for DBP samples.

Sample Information

Field	Format	Description
Reporting Lab ID	MD-### or MD-	Lab creating and sending the report to the State.

Field	Format	Description
	####	
Sample ID	Free format (numbers, characters, spaces, _, and - are allowed)	Unique lab sample identification number. 20-character limit.
Sample Received Date	MM/DD/YYYY	Optional. Date sample was received by lab.
WS ID	MD#####	Public Water System identification (PWSID).
Facility ID	DS##	Water system facility from where the sample was collected. If not provided by sampler, refer to DWW. E.g., DS01.
Sampling Point ID	DBP###	DBP sampling location ID. E.g., DBP101 or DBP102. If not provided by sampler, refer to DWW.
Sampling Location	Free format	Optional. A physical address or describe the location where the sample was taken. I.e., 123 Main street - 2nd floor kitchen sink.
Collection Date	MM/DD/YYYY	Date sample was collected.
Collection Time	HH:MM (24H)	Time sample was collected in 24-hour format.
Sample Type	Routine	Type of sample will typically be Routine, Repeat, or Triggered. For DBPs, this will always be "Routine".
Sample Volume	###	Not required for DBPs. Volume of sample analyzed in milliliters.
Repeat Location		Not required for DBPs.
Original Sample ID	Free format (numbers, characters, spaces, _, and - are allowed)	If reporting a replacement sample (e.g., original sample exceeded hold time). Must match the sample ID of the original DBP sample.
Original Reporting Lab ID	MD-### or MD-####	If reporting a replacement sample. Must match the lab ID that reported the original DBP sample.
Original Collection Date	MM/DD/YYYY	If reporting a replacement sample. Must match the sample collection date of the original DBP sample.
Comment	Free format (numbers, characters, spaces, _, and - are allowed)	Optional. Add details regarding information of the sample.

Field	Format	Description
Sample Collector Name	FIRST LAST #1234FL (free format)	Name of sample collector and ID number. Both name and ID are preferred, but name only is sufficient when ID was not provided.

Results

Field	Format	Description
Analyte [Code-Name]	2456-TOTAL HALOACETIC ACIDS (HAA5) 2950-TTHM	Analyte code and name. Selected from drop down menu.
Not Detected?	No Yes	If "No", then a result is detected. If "Yes", then a result is not detected. I.e., No = result, and Yes = no result.
Result	Number	If "Not Detected?" is "No". Result of analysis.
Result UOM	ug/L	If "Not Detected?" is "No". Unit of measure. Selected from drop down menu. Must be micrograms per liter (e.g., parts per billion).
Standard Deviation	Number	Not required.
Reporting Limit	Number	If "Not Detected?" is "Yes". This is the limit of detection. This will be the smallest detection limit within the group of TTHMs or HAA5s. Typically 1 ug/L for both.
Reporting Limit UOM	ug/L	If "Not Detected?" is "Yes". This is the limit of detection unit of measure. Selected from drop down menu. Must be micrograms per liter (e.g., parts per billion).
Volume Assayed	Number	Not required.
Method	Select applicable method from drop down menu	Method of analysis. Includes methods for all chemical analyses and is not filtered by analytes your lab is certified for. Be sure to select the appropriate method. See section 7, Valid Methods List, to identify methods that are accepted by CMDP and SDWIS.
Analysis Start Date	MM/DD/YYYY	Date analysis began on sample.
Analysis Start Time	HH:MM (24H)	Optional. Time analysis began on sample.
Analysis Completed Date	MM/DD/YYYY	Optional. Date analysis was completed on sample.
Analysis Completed Time	HH:MM (24H)	Optional. Time analysis was completed on sample.

Field	Format	Description
Analyst Name	Free format (numbers, characters, spaces, _, and - are allowed)	Optional. Name of analyst.
Analyzing Lab ID	MD-### or MD- ####	Unique ID of the lab conducting and completing analysis.
Comment	Free format (numbers, characters, spaces, _, and - are allowed)	Optional. Add details regarding information of the analysis and/or results.
