

AIHA Proficiency Analytical Testing Programs

2026 Fee Schedule

Demonstrate Your Organization's Analytical Excellence

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General Guidelines

- Once enrolled in a PAT Program, a participant will begin to receive samples for the next available round (refer to [PAT Schedule](#)).
- PAT Programs are performance-based and do not specify a particular analytical method to be used, with the exception of NIOSH Method 7400 for asbestos and manmade fibers.
- Participants are required to store, handle, prepare, dispose, and analyze proficiency test items in the same manner as the majority of routinely tested samples.
- Retest PT rounds are available to all participants enrolled in the original round of testing, if available. Refer to PAT Schedule for ordering deadlines.
- Stock samples are available for purchase and are provided with a Certificate of Analysis.
- The PAT Enrollment Form(s) and Participation Agreement must be fully completed and legible in order for the application to be processed.
- All annual enrollment fees are non-refundable except for sample fees.
- After samples have been prepared and shipped participants may not return any unopened samples for a sample refund.
- There is a \$250 reinstatement fee for participants dropping from a PT program then re-enrolling later in the year.



A completed *Participant Agreement* must be submitted with Enrollment Form

Please check appropriate PAT Program(s)

- ☐ Industrial Hygiene Proficiency Analytical Testing (IHPAT) Program
- ☐ Environmental Lead Proficiency Analytical Testing (ELPAT) Program
- ☐ Bulk Asbestos Proficiency Analytical Testing (BAPAT) Program
- ☐ Environmental Microbiology Proficiency Analytical Testing (EMPAT) Program
- ☐ Beryllium Proficiency Analytical Testing (BePAT) Program

By submission of this signed document to AIHA PAT Programs, the participant acknowledges and agrees to the [AIHA PAT Programs Participation Policies](#) and the following:

- (1) Contact information will be posted in the publicly available PAT Participant Directory (results will not be included in this information); the summary results and overall proficiency shall be released to those entities requiring this information for accreditation or contract purposes.
- (2) Participant shall not submit, as their own, results for proficiency samples that were analyzed by another laboratory, discuss or share proficiency sample or test information with other participants prior to the close of the round, misrepresent material information on applications or any written correspondence with the AIHA Proficiency Analytical Testing Programs, knowingly report fraudulent or erroneous data, or misrepresent its participation in a PAT Program.
- (3) The participant shall not use participation in a proficiency testing program as representation of being an accredited laboratory. Any misrepresentation will result in the immediate removal from the PAT Program and forfeiture of fees paid.
- (4) Annual fees are non-refundable. A \$250 reinstatement fee will apply for participants voluntarily dropping participation from a PAT Program then re-enrolling later in the year.
- (5) Any participant that has been dropped for non-payment and chooses to re-enroll will pay a \$250 reinstatement fee as well as the outstanding balance.
- (6) Current participants are invoiced through an auto-renewal billing system and are billed prior to the beginning of the year for the upcoming year's annual fees. Notice must be sent in writing to drop participation in any PAT Program.
- (7) Participants shall submit contact information changes by the next round enrollment deadline to ensure that samples are sent to the correct contact and location. Failure to submit the change in a timely manner by the enrollment deadline may result in undeliverable samples, sample replacement and shipping charges, missed submission dates, and thus failure of a round.
- (8) After samples have been prepared and shipped participants may not return any unopened samples for a sample refund.
- (9) Proficiency testing samples are shipped via a trackable carrier.
- (10) Participants shall not send proficiency testing samples to another laboratory or individual for analysis. The proficiency belongs to the organization at physical location enrolled. Samples must be read by analysts employed at that physical location.

Participant Organization Name

Participant Number

Authorized Signature

Print Name / Date



2026 Credit Card Charge Authorization

Company Information

Company Name: _____

Participant ID Number: _____

Invoice Number: _____

Amount to be charged to Credit Card: _____

Credit Card Info

Type of Credit Card ☐ VISA ☐ Master Card ☐ American Express

Account Number: _____

Expiration Date: _____ Code # _____

Cardholder's Name: _____

Cardholder's Signature: _____

- ✓ This form may be **faxed to 703-207-8558 or mailed to the address at the bottom of the page.**
- ✓ **Do not email this form.** For your security, this form will not be processed if sent by email. This could cause delays in your participation. Emailed credit card information will be deleted immediately.
- ✓ Make sure to **reference your Participant ID Number** when submitting the credit card authorization form to ensure that payment is posted to the correct account.

IHPAT	Enrollment deadline: 12/1/2025	Enrollment deadline: 03/1/2026	Enrollment deadline: 06/1/2026	Enrollment deadline: 09/1/2026
	4 sets, beginning with Round 244	3 sets, beginning with Round 245	2 sets, beginning with Round 246	1 set, beginning with Round 247
<input type="checkbox"/> Annual Fee	<input type="checkbox"/> \$ 1,760	<input type="checkbox"/> \$ 1,410	<input type="checkbox"/> \$ 1,130	<input type="checkbox"/> \$ 910
Analytes				
<input type="checkbox"/> Metals	<input type="checkbox"/> \$ 1,130	<input type="checkbox"/> \$ 910	<input type="checkbox"/> \$ 730	<input type="checkbox"/> \$ 590
<input type="checkbox"/> Silica	<input type="checkbox"/> \$ 2,775	<input type="checkbox"/> \$ 2,220	<input type="checkbox"/> \$ 1,780	<input type="checkbox"/> \$ 1,430
<input type="checkbox"/> Asbestos	<input type="checkbox"/> \$ 1,370	<input type="checkbox"/> \$ 1,100	<input type="checkbox"/> \$ 880	<input type="checkbox"/> \$ 710
<input type="checkbox"/> Organic solvents	<input type="checkbox"/> \$ 1,600	<input type="checkbox"/> \$ 1,280	<input type="checkbox"/> \$ 1,030	<input type="checkbox"/> \$ 830
<input type="checkbox"/> Airborne Particulates***		<input type="checkbox"/> \$ 1,225		<input type="checkbox"/> \$ 800
<input type="checkbox"/> Mercury	<input type="checkbox"/> \$ 1,575	<input type="checkbox"/> \$ 1,260	<input type="checkbox"/> \$ 1,010	<input type="checkbox"/> \$ 810
<input type="checkbox"/> Formaldehyde*	<input type="checkbox"/> \$ 2,200	<input type="checkbox"/> \$ 1,760	<input type="checkbox"/> \$ 1,410	<input type="checkbox"/> \$ 1,130
<input type="checkbox"/> Thermal desorption tubes*	<input type="checkbox"/> \$ 2,800	<input type="checkbox"/> \$ 2,240	<input type="checkbox"/> \$ 1,800	<input type="checkbox"/> \$ 1,440
<input type="checkbox"/> Diffusive samplers**	<input type="checkbox"/> \$ 1,220		<input type="checkbox"/> \$ 800	
Select badge type:	<input type="radio"/> Assay Technology (AT) <input type="radio"/> SKC			

TOTAL \$

* Provided by LCG AirPT (Formerly WASP Program).

** Sent out twice a year (even IHPAT rounds). Cost is per badge type. Select badge type: Assay Technology (AT) or SKC.

*** Sent out twice a year (odd IHPAT rounds).

Signed PARTICIPATION AGREEMENT must be submitted with ENROLLMENT FORM

Failure to do so will delay processing your enrollment and may result in your inability to participate in the next scheduled round.

Are you currently an AIHA PAT Program participant?

☐ No ☐ Yes IF YES, Participant ID: _____

Contact Name: _____

Organization: _____

Address: _____

City: _____

State/Province: _____

Zip/Postal Code: _____

Country: _____

Telephone: _____

Fax: _____

E-mail: _____

Payment Method

☐ Check: Enclose check for full amount due made payable to AIHA PAT Programs

☐ Purchase Order: PO# _____

☐ Credit Card: Submit credit card information using the separate Credit Card Charge Authorization Form

Email your completed form to info.PATLLC@aiha.org

Fax your completed form to +1 703.207.8558

Mail your completed form and payment to the address below.

Questions?

Call AIHA PAT Programs at
+1 703.846.0796

ELPAT	Enrollment deadline: 01/15/2026 4 sets, beginning with Round 134	Enrollment deadline: 04/15/2026 3 sets, beginning with Round 135	Enrollment deadline: 07/15/2026 2 sets, beginning with Round 136	Enrollment deadline: 10/15/2026 1 set, beginning with Round 137
<input type="checkbox"/> Annual Fee	<input type="checkbox"/> \$ 1,760	<input type="checkbox"/> \$ 1,410	<input type="checkbox"/> \$ 1,130	<input type="checkbox"/> \$ 910
Matrices				
<input type="checkbox"/> Paint chips	<input type="checkbox"/> \$ 1,130	<input type="checkbox"/> \$ 910	<input type="checkbox"/> \$ 730	<input type="checkbox"/> \$ 590
<input type="checkbox"/> Soil	<input type="checkbox"/> \$ 1,130	<input type="checkbox"/> \$ 910	<input type="checkbox"/> \$ 730	<input type="checkbox"/> \$ 590
<input type="checkbox"/> Dust Wipe	<input type="checkbox"/> \$ 1,130	<input type="checkbox"/> \$ 910	<input type="checkbox"/> \$ 730	<input type="checkbox"/> \$ 590

ELPAT SUBTOTAL \$

ELPAT-AIR	Enrollment deadline: 12/1/2025 4 sets, beginning with Round 134	Enrollment deadline: 03/1/2026 3 sets, beginning with Round 135	Enrollment deadline: 06/1/2026 2 sets, beginning with Round 136	Enrollment deadline: 09/1/2026 1 set, beginning with Round 137
<input type="checkbox"/> Annual Fee	<input type="checkbox"/> \$ 1,760	<input type="checkbox"/> \$ 1,410	<input type="checkbox"/> \$ 1,130	<input type="checkbox"/> \$ 910
<input type="checkbox"/> Air*	<input type="checkbox"/> \$ 1,130	<input type="checkbox"/> \$ 910	<input type="checkbox"/> \$ 730	<input type="checkbox"/> \$ 590

ELPAT-AIR SUBTOTAL \$

TOTAL \$

* ELPAT-Air samples are mailed at the same time as the IHPAT samples. Results for both programs are posted at the same time.

Signed PARTICIPATION AGREEMENT must be submitted with ENROLLMENT FORM

*Failure to do so will delay processing your enrollment
and may result in your inability to participate in the next scheduled round*

Are you currently an AIHA PAT Program participant?

☐ No ☐ Yes IF YES, Participant ID: _____

Contact Name: _____

Organization: _____

Address: _____

City: _____

State/Province: _____

Zip/Postal Code: _____

Country: _____

Telephone: _____

Fax: _____

E-mail: _____

Payment Method

- ☐ Check: Enclose check for full amount due made payable to AIHA PAT Programs
- ☐ Purchase Order: PO# _____
- ☐ Credit Card: Submit credit card information using the separate Credit Card Charge Authorization Form

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Environmental Microbiology PAT Program (EMPAT) 2026 ENROLLMENT

EMPAT Culture*	Enrollment deadline: 01/15/2026 3 sets, beginning with Round 89	Enrollment deadline: 05/15/2026 2 sets, beginning with Round 90	Enrollment deadline: 09/15/2026 1 set, beginning with Round 91
<input type="checkbox"/> Annual Fee	<input type="checkbox"/> \$ 1,760	<input type="checkbox"/> \$ 1,240	<input type="checkbox"/> \$ 870
Organisms			
<input type="checkbox"/> Bacteria only	<input type="checkbox"/> \$ 2,230	<input type="checkbox"/> \$ 1,650	<input type="checkbox"/> \$ 1,220
<input type="checkbox"/> Fungi only	<input type="checkbox"/> \$ 2,230	<input type="checkbox"/> \$ 1,650	<input type="checkbox"/> \$ 1,220
<input type="checkbox"/> Both/bacteria and fungi	<input type="checkbox"/> \$ 3,530	<input type="checkbox"/> \$ 2,610	<input type="checkbox"/> \$ 1,930

* Genus and optional species identification

EMPAT Culturable SUBTOTAL \$

EMPAT Direct Exam**	Enrollment deadline: 12/15/2025 4 sets, beginning with Round 81	Enrollment deadline: 3/15/2026 3 sets, beginning with Round 82	Enrollment deadline: 6/15/2026 2 sets, beginning with Round 83	Enrollment deadline: 9/15/2026 1 set, beginning with Round 84
<input type="checkbox"/> Annual Fee	<input type="checkbox"/> \$ 1,760	<input type="checkbox"/> \$ 1,410	<input type="checkbox"/> \$ 1,130	<input type="checkbox"/> \$ 910
<input type="checkbox"/> Fungi only	<input type="checkbox"/> \$ 2,230	<input type="checkbox"/> \$ 1,790	<input type="checkbox"/> \$ 1,440	<input type="checkbox"/> \$ 1,160

** Spore identification using digital images

EMPAT Direct Exam SUBTOTAL \$

TOTAL \$

Signed PARTICIPATION AGREEMENT must be submitted with ENROLLMENT FORM

*Failure to do so will delay processing your enrollment
and may result in your inability to participate in the next scheduled round*

Are you currently an AIHA PAT Program participant?

☐ No ☐ Yes **IF YES, Participant ID:** _____

Contact Name: _____

Organization: _____

Address: _____

City: _____

State/Province: _____

Zip/Postal Code: _____

Country: _____

Telephone: _____

Fax: _____

E-mail: _____

Payment Method

- ☐ Check: Enclose check for full amount due made payable to AIHA PAT Programs
- ☐ Purchase Order: PO# _____
- ☐ Credit Card: Submit credit card information using the separate Credit Card Charge Authorization Form

Email your completed form to info.PATLLC@aiha.org

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BAPAT	Enrollment deadline: 01/15/2026	Enrollment deadline: 04/15/2026	Enrollment deadline: 07/15/2026	Enrollment deadline: 10/15/2026
	4 sets, beginning with Round 146	3 sets, beginning with Round 147	2 sets, beginning with Round 148	1 set, beginning with Round 149
<input type="checkbox"/> Bulk Asbestos	<input type="checkbox"/> \$ 3,360	<input type="checkbox"/> \$ 2,690	<input type="checkbox"/> \$ 2,160	<input type="checkbox"/> \$ 1,730

TOTAL \$

Signed PARTICIPATION AGREEMENT must be submitted with ENROLLMENT FORM

*Failure to do so will delay processing your enrollment
and may result in your inability to participate in the next scheduled round*

Are you currently an AIHA PAT Program participant?

☐ No ☐ Yes **IF YES, Participant ID:** _____

Contact Name: _____

Organization: _____

Address: _____

City: _____

State/Province: _____

Zip/Postal Code: _____

Country: _____

Telephone: _____

Fax: _____

E-mail: _____

Payment Method

- ☐ Check: Enclose check for full amount due made payable to AIHA PAT Programs
- ☐ Purchase Order: PO# _____
- ☐ Credit Card: Submit credit card information using the separate Credit Card Charge Authorization Form

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BePAT	Enrollment deadline: 02/1/2026 3 sets, beginning with Round 70	Enrollment deadline: 06/1/2026 2 sets, beginning with Round 71	Enrollment deadline: 10/1/2026 1 set, beginning with Round 72
<input type="checkbox"/> Beryllium	<input type="checkbox"/> \$ 6,125	<input type="checkbox"/> \$ 4,900	<input type="checkbox"/> \$ 3,430

TOTAL	\$
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Signed PARTICIPATION AGREEMENT must be submitted with ENROLLMENT FORM

*Failure to do so will delay processing your enrollment
and may result in your inability to participate in the next scheduled round*

Are you currently an AIHA PAT Program participant?

☐ No ☐ Yes **IF YES, Participant ID:** _____

Contact Name: _____

Organization: _____

Address: _____

City: _____

State/Province: _____

Zip/Postal Code: _____

Country: _____

Telephone: _____

Fax: _____

E-mail: _____

Payment Method

☐ Check: Enclose check for full amount due made payable to AIHA PAT Programs

☐ Purchase Order: PO# _____

☐ Credit Card: Submit credit card information using the separate Credit Card Charge Authorization Form

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Questions?

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+1 703.846.0796

*Samples from previous rounds are available for purchase.
A Certificate of Analysis is provided with each stock sample order.*

Program	Round Number	Analyte/Matrix	Quantity	Price (each)	Subtotal
IHPAT		Metals		\$ 590	\$
IHPAT		Silica		\$ 1430	\$
IHPAT		Asbestos		\$ 710	\$
IHPAT		Organic Solvents		\$ 830	\$
IHPAT		Airborne Particulates		\$ 800	\$
IHPAT		Mercury		\$ 810	\$
IHPAT		Diffusive sampler (select badge type) <input type="checkbox"/> Assay Technology (AT) <input type="checkbox"/> SKC		\$ 800	\$
BAPAT		Bulk Asbestos		\$ 1730	\$
BePAT		Beryllium		\$ 3430	\$
ELPAT		Paint		\$ 590	\$
ELPAT		Soil		\$ 590	\$
ELPAT		Dust		\$ 590	\$
ELPAT		Air		\$ 590	\$
N/A	N/A	International Shipping (1x fee for EACH kit) (will not apply if FedEx or UPS account number provided)		\$ 125	\$
N/A	N/A	VA residents please add 6% sales tax			\$
				TOTAL	\$

FedEx or UPS Account Number: _____

Are you currently an AIHA PAT Program participant?

☐ No ☐ Yes IF YES, Participant ID: _____

Contact Name: _____

Organization: _____

Address: _____

City: _____

State/Province: _____

Zip/Postal Code: _____

Country: _____

Telephone: _____

Fax: _____

E-mail: _____

Payment Method

- ☐ Check: Enclose check for full amount due made payable to AIHA PAT Programs
- ☐ Purchase Order: PO# _____
- ☐ Credit Card: Submit credit card information using the separate Credit Card Charge Authorization Form

Email your completed form to info.PATLLC@aiha.org

Fax your completed form to +1 703.207.8558

Mail your completed form and payment to:
AIHA Proficiency Analytical Testing Programs
3120 Fairview Park Drive, Suite 360
Falls Church, VA 22042 USA

Questions? Call AIHA PAT Programs at:
+1 703.846.0796

A participant or any interested party wishing to develop new analytical capabilities may purchase stock samples (samples from previous rounds) for practice, if available. The data from analysis of these samples cannot be used to document proficiency. Practice rounds may also be used to evaluate laboratory quality control with respect to new analyst training and method validation procedures.

Stock samples **may not be used** to produce derivative products for commercial use or in a proficiency testing scheme. Contact us for a quote for partnership opportunities.



AIHA
Proficiency Analytical
Testing Programs®

RETEST SAMPLE 2026 ORDER FORM

*To order retest samples,
submit completed form and payment by retest order date
noted on the current AIHA PAT Programs schedule [www.aihapat.org].*

Program	Round Number	Analyte/Matrix	Quantity	Price (each)	Subtotal
IHPAT		Metals		\$ 590	\$
IHPAT		Silica		\$ 1430	\$
IHPAT		Asbestos		\$ 710	\$
IHPAT		Organic Solvents		\$ 830	\$
IHPAT		Airborne Particulates		\$ 800	\$
IHPAT		Mercury		\$ 810	\$
IHPAT		Diffusive sampler (select badge type) <input type="checkbox"/> Assay Technology (AT) <input type="checkbox"/> SKC		\$ 800	\$
BAPAT		Bulk Asbestos		\$ 1730	\$
BePAT		Beryllium		\$ 3430	\$
ELPAT		Paint		\$ 590	\$
ELPAT		Soil		\$ 590	\$
ELPAT		Dust		\$ 590	\$
ELPAT		Air		\$ 590	\$
EMPAT		Bacteria Culture		\$ 1220	\$
EMPAT		Fungi Culture		\$ 1220	\$
EMPAT		Fungi Direct Exam		\$ 1160	\$
Expedited		Expedited Retest Data Review Fee		\$ 250	\$
N/A	N/A	International Shipping Fee (will not apply if FedEx or UPS account number provided)		\$ 125	\$
N/A	N/A	VA residents please add 6% sales tax			\$

TOTAL \$

FedEx or UPS Account Number: _____

Are you currently an AIHA PAT Program participant?

☐ No ☐ Yes **IF YES, Participant ID:** _____

Contact Name: _____

Organization: _____

Address: _____

City: _____

State/Province: _____

Zip/Postal Code: _____

Country: _____

Telephone: _____

Fax: _____

E-mail: _____

Payment Method

- ☐ Check: Enclose check for full amount due made payable to AIHA PAT Programs
- ☐ Purchase Order: PO# _____
- ☐ Credit Card: Submit credit card information using the separate Credit Card Charge Authorization Form

Email your completed form to info.PATLLC@aiha.org

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Questions?

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