



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 STATE PUBLIC HEALTH LABORATORY
CMI INTOXILYZER 8000 MAINTENANCE REPORT

RECEIVED
 By Carol Day at 8:22 am, Nov 10, 2014

REPORT #2

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send one copy to Department of Health and Senior Services, and retain one copy in department file.

INSTRUMENT SERIAL NUMBER 80-005843	LOCATION OF INSTRUMENT KCMO POLICE DEPT.	DATE OF INSPECTION 11/04/2014	TIME OF INSPECTION 04:25
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE	STANDARD LOT #	STANDARD EXPIRATION DATE
Air Blank	0.000	04:26	DRY	05514080A1	04/01/2016
Cal Check	0.079	04:27	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	04:27	N/A	N/A	N/A
Cal Check	0.079	04:28	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	04:28	0.080	CMI	
Cal Check	0.079	04:28	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	04:28	0.079		
Cal Check	0.079	04:28	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	04:29	0.079		
Pass			CALIBRATION CHECK RESULT 3		
			0.079		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			1.2%	0.000	

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
			Test	g/210L	Time
Voltage/Current Test	Pass		Air Blank	0.000	04:30
RAM Test	Pass		Subject Test	RFI*	04:30
EEPROM Checksum Test	Pass		Air Blank	0.000	04:30
Real Time Clock Test	Pass		*RFI Detect		
DSP Test	Pass				
Analytical Stability Test	Pass				
Modem Test	Pass				
Temperature Regulation Test	Pass				
Pass			Pass		

NUMBER OF REFUSALS AND SUBJECT BREATH TESTS IN EACH RANGE SINCE LAST MAINTENANCE REPORT							
REFUSALS	.00-.04	.05-.09	.10-.14	.15-.19	OVER .19		
0	0	0	0	0	0		0

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

TESTED AND CERTIFIED WITHIN DHSS GUIDELINES

INSPECTING OFFICER			
SIGNATURE 		PRINT NAME NATHAN MAGERS	
TYPE II PERMIT NUMBER 240265		EXPIRATION DATE 06/02/2016	TELEPHONE NUMBER N/A