



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

**RECEIVED**  
 By Carol Day at 11:53 am, Jun 27, 2016

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 80-002092	LOCATION OF INSTRUMENT KCI POLICE DEPT.	DATE OF INSPECTION 06/17/2016	TIME OF INSPECTION 14:57
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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	14:59	DRY	15615080A2	07/05/2017
Cal Check	0.080	14:59	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	15:00	N/A	N/A	N/A
Cal Check	0.079	15:00	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	15:00	0.080	CMI	
Cal Check	0.079	15:01	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	15:01	0.080		
Cal Check	0.079	15:01	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	15:01	0.079		
<b>Pass</b>			CALIBRATION CHECK RESULT 3		
			0.079		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			1.2%	0.001	

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
Test	Result	Time	Test	g/210L	Time
Voltage/Current Test	Pass		Air Blank	0.000	15:02
RAM Test	Pass		Subject Test	RFI*	15:02
EEPROM Checksum Test	Pass		Air Blank	0.000	15:02
Real Time Clock Test	Pass		*RFI Detect		
DSP Test	Pass		<b>Pass</b>		
Analytical Stability Test	Pass				
Modem Test	Pass				
Temperature Regulation Test	Pass				
<b>Pass</b>					

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	
1	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).

INSPECTING OFFICER			
SIGNATURE <i>Steve Ellis</i>		PRINT NAME OFFICER FILLPOT #4162	
TYPE II PERMIT NUMBER 250125	EXPIRATION DATE 06/18/2017	TELEPHONE NUMBER 8164828195	