

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

CMI INTOXILYZER 8000 MAINTENANCE REPORT

REPORT #2

STRUMENT SERIAL NUMBER	LIBERTY POLI			L2/2020	TIME OF INSPECTION 07:00		
CALIBRATION CHECK			CALIBRATION				
Test	g/210L	Time	STANDARD TYPE DRY SIM TEMPERATURE	STANDARD LOT # AG9247 SIM SERIAL NUMB	701 STAI	STANDARD EXPIRATION DATE 09/04/2021 SIMCERTIFICATE EXPIRATION	
Air Blank Cal Check Air Blank Cal Check Air Blank Cal Check Air Blank	0.000 0.100 0.000 0.101 0.000 0.100 0.000	07:02 07:02 07:03 07:03 07:04 07:04	N/A N/A N/A STANDARD VALUE STANDARD SUPPLIER 0.100 CALIBRATION CHECK RESULT 1 0.100 CALIBRATION CHECK RESULT 2 0.101 CALIBRATION CHECK RESULT 3 0.100 MAXIMUM DEVIATION (MUST BE WITHIN 5%) SPREAD (MUST BE .005 OR LESS) 1.0% 0.001				
IAGNOSTIC TEST RE	SULTS		RFI TEST RES	ULTS			
Voltage/Current Test Pass RAM Test Pass EEPROM Checksum Test Pass Real Time Clock Test Pass DSP Test Pass Analytical Stability Test Pass Modem Test Pass Temperature Regulation Test Pass			Test		g/210L Tin 0.000 07: RFI* 07: 0.000 07:		
UMBER OF REFUSA	Pass LS AND SUBJECT BREAT04 0 .0509	TH TESTS IN	EACH RANGE S		ISS AINTENANC	E REPORT OVER .19	

and within established limits (use other side if necessary).

OPERATING WITHIN SPECIFICATIONS

	INSPECTING OF	FICER					
	SIGNATURE		+	PRINT NAME			
/	(Coler	(alex)) Malch		ROBERT D BRATCHER			
,	TYPE II PERMIT NUMBER			· · · · · · · · · · · · · · · · · · ·		TELEPHONE NUMBER	
	290182		08/19/20	21		8164394701	