



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

RECEIVED

By Tracy Crews at 2:19 pm, Jan 14, 2022

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 80-005830	LOCATION OF INSTRUMENT 101 E. KANSAS ST.	DATE OF INSPECTION 01/13/2022	TIME OF INSPECTION 14:38
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE	STANDARD LOT #	STANDARD EXPIRATION DATE
-----	-----	-----	DRY	AG130104	10/28/2023
Air Blank	0.000	14:40	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Cal Check	0.102	14:41	N/A	N/A	N/A
Air Blank	0.000	14:41	STANDARD VALUE	STANDARD SUPPLIER	
Cal Check	0.101	14:41	0.100	INTOXIMETERS	
Air Blank	0.000	14:42	CALIBRATION CHECK RESULT 1		
Cal Check	0.101	14:42	0.102		
Air Blank	0.000	14:42	CALIBRATION CHECK RESULT 2		
Cal Check	0.101	14:42	0.101		
Air Blank	0.000	14:43	CALIBRATION CHECK RESULT 3		
Pass			MAXIMUM DEVIATION (MUST BE WITHIN 5%)		SPREAD (MUST BE .005 OR LESS)
			2.0%		0.001

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
			Test	g/210L	Time
Voltage/Current Test	Pass		-----	-----	-----
RAM Test	Pass		Air Blank	0.000	14:43
EEPROM Checksum Test	Pass		Subject Test	RFI*	14:44
Real Time Clock Test	Pass		Air Blank	0.000	14:44
DSP Test	Pass		*RFI Detect		
Analytical Stability Test	Pass		Pass		
Modem Test	Pass				
Temperature Regulation Test	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).
OPERATING WITHIN SPECIFICATIONS

INSPECTING OFFICER		
SIGNATURE	PRINT NAME	
	ROBERT D. BRATCHER	
TYPE II PERMIT NUMBER 210192	EXPIRATION DATE 09/02/2023	TELEPHONE NUMBER 816.439.4701

