BREATH ALCOHOL EQUIPMENT
REPAIR AND MAINTENANCE

Instrument: **8000** Serial Number: **80-005951** Location: **ToxL**

1. Instrument repairs/maintenance performed:

— *DIFFICULTIES CONNECTING TO INSTRUMENT AT WATF. BROUGHT BACK TO LAB TO CHECK MODEM CONNECTIONS. ALL ATTEMPTS TO CONNECT BY MODEM WERE SUCCESSFUL. FORMS LOADS, DOWNLOADS & FLASH UPDATE WERE ALL SUCCESSFUL.*

— *ISSUES WITH CONNECTION APPEAR TO BE PHONE LINE BETWEEN WATFORD CITY AND BISMARCK.*
— *REPLACED EXTERNAL BATTERY & TRAINED BATTERY*

2. Does the instrument require further testing?   Yes or **No**
    If Yes, continue.
    If No, sign and date below.

3. If needed, set the time, date, and location.   **N/A**

4. Does the flow need to be calibrated?   Yes or **No**
    If Yes, attach paperwork.

5. Does the optical bench need to be calibrated?   Yes or **No**
    If Yes, attach test records.

6. Does the gas regulator need to be calibrated?   Yes or **No**

    PSI gauge reading _____ PSI display reading _____

Set instrument to Wet Bath and run tests:

7. Low AC. Use < 0.03 AC in ACA mode. Attach test record.   _____

    Sim SN: _____ Lot #: _____ AC: _____

8. Linearity Test. Use ≥ 0.25 AC in ACA mode. Attach test record.   _____

    Sim SN: _____ Lot #: _____ AC: _____

Set instrument to Gas and run tests:

9.   Print test. Attach test record.   _____

10.   Interferent Check. Use a 0.10 AC ethanol plus 0.05% acetone in ABA mode.
       Attach test record.   _____

       Sim SN: _____ Lot #: _____ AC: _____

11.   RFI Check. Run in CMS mode. Key radio during any room air or subject test.
       Attach test record.   _____

12.   Calibration Check. Use a valid 0.080 AC Ethanol Gas Standard. Run three
       calibration sets in ACA mode. Attach test records.   _____

Lot No. _____   Cylinder No. _____   Expiration Date _____

       Test 1 _____   Test 1 _____   Test 1 _____
       Test 2 _____   Test 2 _____   Test 2 _____
       Test 3 _____   Test 3 _____   Test 3 _____

Average _____

_____   _16 DEC. 16_____
Field Inspector's Signature   Date

_____   _20 Dec 16_____
Reviewed by   Date