

**BREATH ALCOHOL EQUIPMENT  
REPAIR AND MAINTENANCE**

Instrument: 8000 Serial Number: 80-005946 Location: Tox L

1. Instrument repairs/maintenance performed:

CEE 8/30/19 - INSTRUMENT WILL BE CHECKED FOR POSSIBLE  
CONTAMINATION ~~OF~~ <sup>CEE</sup> DUE TO CRACK IN BREATH HOSE BY RUNNING  
NUMEROUS GAS & SIMULATOR SOLUTIONS OVER NEXT FEW MONTHS.  
CEE 12/20/19 - NO CONTAMINATION PRESENT AFTER RUNNING NUMEROUS  
STABILITY TESTS IN SEPT., OCT., NOV. & DEC. OF 2019. CALIBRATION  
ADJUSTMENT WILL BE PERFORMED AFTER STABILITY TESTING <sup>USED TO</sup> ~~TO CEE~~  
RULE OUT CONTAMINATION.  
\*NOTE: CAL. ADJ. WILL BE PERFORMED ON INSTRUMENT. TESTING WILL  
BE DONE DURING CAL. ADJ.

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. ✓

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 700 709 PSI display reading 700  
CEE CEE

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 \_\_\_\_\_

  
\_\_\_\_\_  
Field Inspector's Signature

1/16/2020  
Date

NA  
\_\_\_\_\_  
Reviewed by

NA  
\_\_\_\_\_  
Date