



NORTH DAKOTA OFFICE OF ATTORNEY GENERAL  
CRIME LABORATORY DIVISION

INTOXILYZER® 8000 ANNUAL INSPECTION

Intoxilyzer® 8000 Serial Number: 80-00 6689 Inspection Location: TOXL

A. Pre-Inspection

1. Items with Instrument:
  - Gas Cylinder Yes or No (If Yes, Lot # \_\_\_\_\_ Cyl. # \_\_\_\_\_)
  - Keys Yes or No
  - Power Cord Yes or No
2.  Download Data
3.  Upload Operator File
4.  Current Location Code: TOXL
5.  Battery Check
  - Was the external battery pack replaced? Yes or No
6.  O-Rings
  - Replaced Simulator O-Ring Yes or No
  - Replaced Breath Tube O-Ring Yes or No

B. General Setup and Checks:

1.  Diagnostics passed and instrument in "Ready" mode
2.  Breath tube heated
3.  Date, time and location code (Level 2,E). Re-set if necessary.  
Time Zone: CST or MDT (Time on test records will be in time zone circled).
4.  Print test (Level 1,P). Sign and attach test record.
5.  Tank monitor (Level 3,D,G).  
Display: 621 psi Regulator: 600 psi  
Display and Regulator ± 50 psi of each other Yes or No  
Gas tank tare necessary? Yes or No  
If Yes, display readings after tare (Level 3,M,C,G):  
Display: \_\_\_\_\_ psi Regulator: \_\_\_\_\_ psi

C. Tests (Sign and attach test records):

1.  Configure simulator for the following test (Level 1,S).  
Wet Calibration Check - Low AC (Level 1,C)  
Known Value ≤ 0.03 AC: 0.020 AC  
Sim. Ser #: MP5318  
Lot #: 202201A  
Exp. Date: 11Jan24  
 Results ± 0.005 of known AC

Toxicology Unit - Breath Alcohol Section	Qualtrax ID: 11698 Revision: 1
Intoxilyzer 8000 Annual Inspection	Status: Published Published: 03/24/2023
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2.  Configure simulator for the following test (Level 1,S).  
 Wet Calibration Check - High AC (Level 1,C)  
 Known Value  $\geq$  0.25 AC: 0.300 AC  
 Sim. Ser #: MP6039  
 Lot #: 202201F  
 Exp. Date: 18Jan24  
 Results  $\pm$  5% AC of known AC
3.  Configure dry gas standard for the remaining tests (Level 1,S).  
 Known Value : 0.080 AC  
 Gas Cylinder Lot #: 34921080A1  
 Cylinder #: 33  
 Exp. Date: 215124
4.  Interferent Check (Level 1,B)  
 Known Value: 0.10 AC + 0.05% Acetone  
 Sim. Ser #: DR5113  
 Lot #: ICS7  
 Exp. Date: NIA  
 Display reads "Interferent Detect"
5.  RFI Check (CMS Mode)  
 Display reads "RFI Detect"
6.  Dry Calibration Check (Level 1,C)  
 Test 1 0.079      Test 4 0.079      Test 7 0.079  
 Test 2 0.079      Test 5 0.079      Test 8 0.080  
 Test 3 0.079      Test 6 0.079      Test 9 0.079  
 Average 0.079  
 Results  $\pm$  0.005 AC of known AC

D. Remarks/Maintenance: NIA

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Instrument is acceptable to be used in the field. Yes or No

If No, state reason(s) why: \_\_\_\_\_

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If Yes, change location code back to A.4.

An [Signature]  
 Inspector Signature

05Apr2023  
 Date

Janelle Putschler  
 Reviewer

10 Apr 2023  
 Date

Toxicology Unit - Breath Alcohol Section	Qualtrax ID: 11698 Revision: 1
Intoxilyzer 8000 Annual Inspection	Status: Published Published: 03/24/2023
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Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000        SN 80-006689  
Location = TOXL                 8164.14.00 09/16  
04/05/2023                        14:43

\*\*\*\*\* Printer Test \*\*\*\*\*

abcdefghijklmnopqrstuvwxyz1234567890- = |  
ABCDEFGHIJKLMNPOQRSTUVWXYZ!@#%^&\*()\_+?

abcdefghijklmnopqrstuvwxyz1234567890- = |  
ABCDEFGHIJKLMNPOQRSTUVWXYZ!@#%^&\*()\_+?

Current Instrument Setup

Data Entry Mode:                Enabled  
Start Test Sequence:            DABACABA  
Display Prelim Rslt?            Yes  
Display Third Digit?            Yes  
Inhib Printer(Y/N)?            No  
Display Volume?                No  
Disable On Memfull?            Yes  
# of Print Copies?              1  
Select Std (D/W/I)?            Dry  
Standard Value?                0.080  
Standard Lot #?                 05620080A1  
Standard Cyl #?                 45  
Standard Expiration?            04/05/2022  
Oper No?                        133237

Flow Cal. Date:                 05/29/2020  
Slope                            643  
Intercept                        -576193

IR Calibration Date:            05/29/2020  
                                    3um                            9um

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0th Coef(\*100):                -25870                        -28277  
1st Coef(\*100):                287704                        139899  
2nd Coef(\*100):                26                             744  
H2O adj(mg/l\*10k):            293                            328

\*\*\*\*\* Printer Test End \*\*\*\*\*



Operator Signature  
ANNA NAREHOOD

Remarks: *Print Test*

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CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-006689  
Location = TOXL      8164.14.00 09/16  
04/05/2023      14:54

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	14:55
02 Std. Sol.	0.020	14:56
03 Room Air	0.000	14:57
04 Std. Sol.	0.021	14:57
05 Room Air	0.000	14:58
06 Std. Sol.	0.021	14:59
07 Room Air	0.000	14:59

08 Sim Temp = 34.0°C

Simul Ser No = MP5318

Std Sol No = 202201A

County = 08

Oper No. = 133237



Operator Signature  
ANNA NAREHOOD

Remarks:

LOW AC CHECK - 0.020 AC

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North Dakota Model 8000      SN 80-006689  
Location = TOXL      8164.14.00 09/16  
04/05/2023      15:00

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	15:01
02 Std. Sol.	0.298	15:02
03 Room Air	0.000	15:02
04 Std. Sol.	0.299	15:03
05 Room Air	0.000	15:04
06 Std. Sol.	0.300	15:04
07 Room Air	0.000	15:05

08 Sim Temp = 34.0°C

Simul Ser No = MP6039  
Std Sol No = 202201F  
County = 08      Oper No. = 133237



Operator Signature  
ANNA NAREHOOD

Remarks: High Ac Check - 0.300 Ac

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CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-006689  
Location = TOXL      8164.14.00 09/16  
04/05/2023      15:35

Test	AC	Time
01 Room Air	0.000	15:36
02 *Subject Test	INT*	15:36
03 Room Air	0.000	15:37

\*Invalid Test  
Interferent Detected

Sub Name = TEST, DONOR2 NONE  
Sub DOB = 07/25/1998  
Sub Sex = Male      Weight = NA  
Test = OTH      Cit = INTERFERENT CK  
Dr. Lic. = ND/TES989643  
Lot No = 34921080A1  
Cyl No = 33  
Expiration Date = 02/05/2024  
County = 08      Oper No. = 133237



Operator Signature  
ANNA NAREHOOD

Remarks: *Interferent Check*

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CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-006689  
Location = TOXL      8164.14.00 09/16  
04/05/2023      15:37

Test	AC	Time
01 Diagnostic	OK	15:38
02 Room Air	0.000	15:39
03 *Subject Test	RFI*	15:39
04 Room Air	0.000	15:39

\*Invalid Test  
Inhibited - RFI

Sub Name = TEST, DONOR2 NONE  
Sub DOB = 07/25/1998  
Sub Sex = Male      Weight = NA  
Test = OTH      Cit = RFI CHECK  
Dr. Lic. = ND/TES989643  
Lot No = 34921080A1  
Cyl No = 33  
Expiration Date = 02/05/2024  
County = 08      Oper No. = 133237

I followed the Approved Method and the instructions displayed by the Intoxilyzer in conducting this test.



Operator Signature  
ANNA NAREHOOD

Remarks:

RFI check

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CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-006689  
Location = TOXL      8164.14.00 09/16  
04/05/2023      15:40

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	15:40
02 Std. Gas	0.079	15:41
03 Room Air	0.000	15:41
04 Std. Gas	0.079	15:41
05 Room Air	0.000	15:42
06 Std. Gas	0.079	15:42
07 Room Air	0.000	15:43

Lot No = 34921080A1  
Cyl No = 33  
Exp Date = 02/05/2024  
County = 08      Oper No. = 133237

  
\_\_\_\_\_  
Operator Signature  
ANNA NAREHOOD

Remarks:  
Dry Cal check #1-3

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CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000        SN 80-006689  
Location = TOXL                    8164.14.00 09/16  
04/05/2023                            15:43

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	15:44
02 Std. Gas	0.079	15:44
03 Room Air	0.000	15:45
04 Std. Gas	0.079	15:45
05 Room Air	0.000	15:46
06 Std. Gas	0.079	15:46
07 Room Air	0.000	15:47

Lot No = 34921080A1  
Cyl No = 33  
Exp Date = 02/05/2024  
County = 08                            Oper No. = 133237

  
\_\_\_\_\_  
Operator Signature  
ANNA NAREHOOD

Remarks: DRY CAL CHECK #4-4

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CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-006689  
Location = TOXL      8164.14.00 09/16  
04/05/2023      15:47

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	15:48
02 Std. Gas	0.079	15:48
03 Room Air	0.000	15:49
04 Std. Gas	0.080	15:49
05 Room Air	0.000	15:49
06 Std. Gas	0.079	15:50
07 Room Air	0.000	15:50

Lot No = 34921080A1  
Cyl No = 33  
Exp Date = 02/05/2024  
County = 08      Oper No. = 133237



Operator Signature  
ANNA NAREHOOD

Remarks:

Dry cal Check #7-9

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