



NORTH DAKOTA OFFICE OF ATTORNEY GENERAL  
CRIME LABORATORY DIVISION

INTOXILYZER® 8000 INITIAL INSPECTION

Intoxilyzer® 8000 Serial Number: 80-00 4204

A. General Setup and Checks:

1. Initial start up
  - Power On
  - 5-minute countdown during initial warm-up
  - 1-minute countdown to begin test after standby mode
2.  Display Intensity (Ctrl + ↑ or ↓)
3. Password Security:
  - Level 1 (Operator)
  - Level 2 (Field Inspector)
  - Level 3 (Lab Personnel)
4.  Printer Setup (Level 3,S,P)
5.  Forms Load Completed (CMI, Inc., CoBrA Software)

B. Level 1 Setup and Checks:

1.  Internal Printer Test (Level 1,P). Sign and attach record.
  - Paper Feed
2.  External Printer Test (Level 1,P). Sign and attach record.
3. Barcode Reader (Level 1,B) (Tone sounds after each)
  - Operator ID
  - Invalid ID
  - ND License
  - R key: Refusal. Sign and attach record.

C. Level 2 Setup and Checks:

1.  Continuous Air Blank (Level 2,A)

Toxicology Unit - Breath Alcohol Section	Qualtrax ID: 11784 Revision: 2
Intoxilyzer 8000 Initial Inspection	Status: Published Published: 04/24/2023
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2.  Diagnostic (Level 2,D). Sign and attach test record.

3.  Prelim Data Entry (Level 2,E)

4. Ser Number/Version Info (Level 2,V):

Inst Ser#: 80-004204 DSP Ver: 1362.14  
Core Ver: 8164.14 CPLD Ver: 7

D. Level 3 Setup and Checks:

1. DVM Monitor (Level 3,D,D):

3: 12012 s: 0 C: 47.00  
9: 13187 s: 1 B: 45

DVM (3 & 9) between 9,000-16,000 counts

RFI indicator with keyed radio: 0-1

2. Function (F) Keys:

F5 – Tone

F9 - Fan

F6 – Green LED

F10 – Pump

F7 – Red LED

F11 – Solenoid

3. Atmospheric Monitor (Level 3,D,A): Atmo Sensor, P: 959 CF: 1.05

4. Flow Monitor (Level 3,D,F): Flow Sensor, R: 200 F: 0.000 L/s

5. Temperature Monitor (Level 3,D,T):

C: 47.0 A: 46.5 I: 0.0  
B: 45.0 V: 0.0

Cell Temperature (C) between  $47 \pm 0.02$  °C

Breath Hose Temperature (B) between 35.5 – 47 °C

Internal Ambient Temperature (A) above 41 °C

6. Tank Monitor (Level 3,D,G):

Display: 380 psi Regulator: 400 psi

Display and Regulator  $\pm 50$  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

7.  General Setup (Level 3,S,G)

8.  Configure Start Test (Level 3,S,T)

9.  Network (Level 3,S,N)

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E. Tests (Sign and attach all test records):

1.  Configure wet bath simulator for the following test (Level 1,S)  
Zero AC-Wet Calibration Check (Level 1,C):  
Sim ser #: MP3066 Lot #: 33023 Exp date: NIA  
Known value: 0.000 AC  
 Results are Zero AC
2.  Configure wet bath simulator for the following test (Level 1,S)  
Low AC-Wet Calibration Check (Level 1,C):  
Known Value  $\leq 0.03$  AC: 0.020 AC  
Sim ser #: MP5318 Lot #: 202201A Exp date: 11Jan24  
 Results  $\pm 0.005$  of known AC
3.  Configure wet bath simulator for the following test (Level 1,S)  
High AC-Wet Calibration Check (Level 1,C):  
Known Value  $\geq 0.25$  AC: 0.300 AC  
Sim ser #: MP6039 Lot #: 202201F Exp date: 18Jan24  
 Results  $\pm 5\%$  of known AC
4.  Configure dry gas standard for the following tests (Level 1,S)  
Known Value: 0.080 AC  
Gas Cylinder Lot #: 34921080A1 Cylinder #: 49 Exp. Date: 2/5/24
5. 0.10% Ethanol + 0.05% Acetone (Level 1,B):  
Sim. Ser #: DR3841 Lot #: ICS7 Exp. Date: NIA  
 Display reads "Interferent Detect"
6. 0.05% Acetone (Level 1,B):  
Sim. Ser #: DR7349 Lot #: ACE3 Exp. Date: NIA  
 Display reads "Interferent Detect"
7. 0.10% Methanol (Level 1,B):  
Sim. Ser #: DR7347 Lot #: MET3 Exp. Date: NIA  
 Display Reads "Interferent Detect"
8. 0.10% Isopropanol (Level 1,B):  
Sim. Ser #: DR7350 Lot #: IPA3 Exp. Date: NIA  
 Display Reads "Interferent Detect"
9.  Ambient Fail (Level 1,B): Display read and test record correct.
10.  Invalid Sample (Level 1,B): Display read and test record correct.
11.  Sequence Aborted (Level 1,B): Display read test record correct.
12.  ABA (Level 1,B): Test record correct.

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- 13.  Calibration check out of tolerance (CMS mode): Display read and test record correct.
- 14.  RFI Detected (B,C, or CMS mode): Display read and test record correct.
- 15.  Tank Pressure Below Minimum (CMS mode): Display reads correct.
- 16.  Deficient Samples (CMS mode): Display read and test record correct.
- 17.  Improper Sample (CMS mode): Display read and test record correct.
- 18.  Difference Too Great (CMS mode): Display read and test record correct.
- 19.  CMS (CMS mode): Test record correct.
- 20. Stability Test (Level 3,T,S):

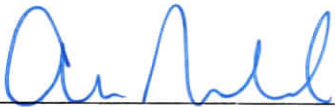
Ave: 0.0802 Std Dev: 0.0005 Rel Std Dev: 0.66%  
0.0795 AEN 0.0004 AEN 0.81% AEN  
28 June 23

Maintenance/Repairs/Notes: N/A

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

If No, state reason(s) why:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

  
 Inspector Signature

28 June 23  
~~25 Apr 2023~~  
 Date

  
 Reviewer

30 June 2023  
 Date

Toxicology Unit - Breath Alcohol Section	Qualtrax ID: 11784 Revision: 2
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INTOXILYZER 8000  
 Instrument Initialization  
 07:48 04/25/2023

Intoxilyzer Test Record and Checklist  
 NDDAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer  
 North Dakota Model 8000 SN 80-004204  
 Location = TOXL 8164.14.00 09/16  
 04/25/2023 09:41

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

12 char/line  
 abcdefghijkl  
 ABCDEFGHIJKL

16 char per line  
 abcdefghijklmnop  
 ABCDEFGHIJKLMNOP

21 chars per line  
 abcdefghijklmnopqrstu  
 ABCDEFGHIJKLMNOPQRSTU

24 characters per line  
 abcdefghijklmnopqrstuvw  
 ABCDEFGHIJKLMNOPQRSTUWX

32 characters per line  
 abcdefghijklmnopqrstuvwxyz123456  
 ABCDEFGHIJKLMNOPQRSTUVWXYZ123456

42 characters per line  
 abcdefghijklmnopqrstuvwxyz1234567890abcdef  
 abcdefghijklmnopqrstuvwxyz1234567890abcdef

Q  
 Start Test Sequence: Unchecked  
 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)? Wet  
 Standard Value? 0.020  
 Standard Solution #? 21340  
 Sim Serial #? MP5290  
 Oper No? 133237

Flow Cal. Date: 04/15/2020  
 Slope 657  
 Intercept -673032

IR Calibration Date: 04/15/2020  

	3um	9um
-----		
0th Coef(*100):	-31094	-28730
1st Coef(*100):	265331	134630
2nd Coef(*100):	1555	1069
H2O adj(ng/l*10K):	516	483

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

*Anna Narehood*

Operator Signature  
 ANNA NAREHOOD

Remarks:  
*Internal print test*

Form 106-18000

Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000            SN 80-004204  
Location = TOXL                    8164.14.00 09/16  
04/25/2023                            09:45

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

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

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

Current Instrument Setup

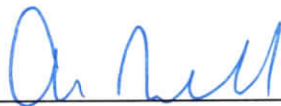
Data Entry Mode:            Enabled  
Start Test Sequence:        DABACABA  
Display Prelim Rslt?        Yes  
Display Third Digit?        Yes  
Inhib Printer(Y/N)?        No  
Display Volume?            No  
Disable On Memfull?        Yes  
# of Print Copies?          1  
Select Std (D/W/I)?        Wet  
Standard Value?            0.020  
Standard Solution #?        21340  
Sim Serial #?                MP5290  
Oper No?                    133237

Flow Cal. Date:              04/15/2020  
Slope                        657  
Intercept                    -673032

IR Calibration Date:        04/15/2020

	3um	9um
0th Coef(*100):	-31094	-28730
1st Coef(*100):	265331	134630
2nd Coef(*100):	1555	1069
H2O adj(mg/l*10k):	516	483

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



Operator Signature  
ANNA NAREHOOD

Remarks: External Print Test

Form 106-I8000







Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501


CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-004204  
Location = TOXL      8164.14.00 09/16  
04/25/2023      13:24

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:25
02 Std. Sol.	0.000	13:26
03 Room Air	0.000	13:26
04 Std. Sol.	0.000	13:27
05 Room Air	0.000	13:28
06 Std. Sol.	0.000	13:28
07 Room Air	0.000	13:29

08 Sim Temp = 34.0°C

Simul Ser No = MP3066  
Std Sol No = 33023  
County = 08      Oper No. = 133237

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

Remarks: *Zero Ae Check*

Form 106-I8000



Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

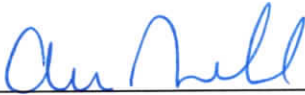
CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000            SN 80-004204  
Location = TOXL                      8164.14.00 09/16  
04/25/2023                              13:36

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:36
02 Std. Sol.	0.297	13:38
03 Room Air	0.000	13:38
04 Std. Sol.	0.300	13:39
05 Room Air	0.000	13:39
06 Std. Sol.	0.297	13:40
07 Room Air	0.000	13:41

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-0.300Ac

Form 106-I8000





Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000        SN 80-004204  
Location = TOXL                    8164.14.00 09/16  
04/25/2023                            13:50

Test	AC	Time
01 Room Air	0.000	13:53
02 *Subject Test	INT*	13:53
03 Room Air	0.000	13:54

\*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 = 49  
Expiration Date = 02/05/2024  
County = 08                          Oper No. = 133237



Operator Signature  
ANNA NAREHOOD

Remarks: MeOH Interferent Check

Form 106-I8000







Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer                      Alcohol Analyzer  
North Dakota Model 8000                      SN 80-004204  
Location = TOXL                              8164.14.00 09/16  
04/25/2023    14:03

Test	AC	Time
01 Room Air	0.000	14:04
02 Invalid Sample	X.XXX	14:04
03 Room Air	0.000	14:05

\*Invalid Test - Mouth Alcohol

Sub Name = TEST, DONOR2 NONE  
Sub DOB = 07/25/1998  
Sub Sex = Male                                      Weight = NA  
Test = OTH                                      Cit = INVALID SAMPLE  
Dr. Lic. = ND/TES989643  
Lot No = 34921080A1  
Cyl No = 49  
Expiration Date = 02/05/2024  
County = 08                                      Oper No. = 133237



Operator Signature  
ANNA NAREHOOD

Remarks: Invalid Sample

Form 106-I8000



Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer                      Alcohol Analyzer  
North Dakota Model 8000                      SN 80-004204  
Location = TOXL                              8164.14.00 09/16  
04/25/2023    14:11

Test	AC	Time
01 Room Air	0.000	14:12
02 Subject Test 1	0.000	14:12
03 Room Air	0.000	14:12
04 Reported AC	0.000	14:12

No RFI Detected

Sub Name = TEST, DONOR2 NONE  
Sub DOB = 07/25/1998  
Sub Sex = Male                                      Weight = NA  
Test = OTH    Cit = ABA TEST  
Dr. Lic. = ND/TES989643  
Lot No = 34921080A1  
Cyl No = 49  
Expiration Date = 02/05/2024  
County = 08    Oper No. = 133237



Operator Signature  
ANNA NAREHOOD

Remarks: ABA Test

Form 106-I8000

Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

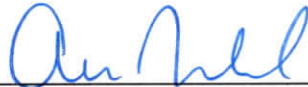
CMI, Inc. Intoxilyzer                      Alcohol Analyzer  
North Dakota Model 8000                      SN 80-004204  
Location = TOXL                              8164.14.00 09/16  
04/25/2023    14:18

Test	AC	Time
01 Diagnostic	OK	14:19
02 Room Air	0.000	14:19
03 Subject Test 1	0.000	14:20
04 Room Air	0.000	14:22
05 Std. Gas	0.051*	14:23
06 Room Air	0.000	14:23

\*Cal Check Out of Tolerance

Sub Name = TEST, DONOR2 NONE  
Sub DOB = 07/25/1998  
Sub Sex = Male                                      Weight = NA  
Test = OTH    Cit = CAL CK OOT  
Dr. Lic. = ND/TES989643  
Lot No = 34921080A1  
Cyl No = 49  
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: Calibration check out of tolerance

Form 106-I8000

Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000            SN 80-004204  
Location = TOXL                    8164.14.00 09/16  
04/25/2023                            14:24

Test	AC	Time
01 Room Air	0.000	14:25
02 *Subject Test	RFI*	14:25
03 Room Air	0.000	14:25

\*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 = 49  
Expiration Date = 02/05/2024  
County = 08                                Oper No. = 133237



Operator Signature  
ANNA NAREHOOD

Remarks: RFI Check

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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 80-004204  
Location = TOXL                              8164.14.00 09/16  
04/25/2023    14:26

Test	AC	Time
01 Diagnostic	OK	14:26
02 Room Air	0.000	14:27
03 *Subject Test	0.000*	14:30
04 Room Air	0.000	14:33
05 Std. Gas	0.081	14:34
06 Room Air	0.000	14:35
07 *Subject Test	0.000*	14:39
08 Room Air	0.000	14:40

No RFI Detected

\*Deficient Sample - Value Printed was  
Highest Obtained

Sub Name = TEST, DONOR2 NONE  
Sub DOB = 07/25/1998  
Sub Sex = Male                                      Weight = NA  
Test = OTH    Cit = DEFICIENT  
Dr. Lic. = ND/TES989643  
Lot No = 34921080A1  
Cyl No = 49  
Expiration Date = 02/05/2024  
County = 08                                      Oper No. = 133237

20 minute waiting period ascertained? Y  
Clean Mouthpiece used and disposed? Y  
Clean Mouthpiece used and disposed? Y

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



Operator Signature  
ANNA NAREHOOD

Remarks: Deficient Sample

Form 106-I8000

Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

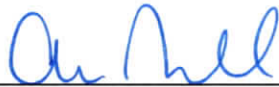
CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000            SN 80-004204  
Location = TOXL                    8164.14.00 09/16  
04/25/2023                            14:41

Test	AC	Time
01 Diagnostic	OK	14:41
02 Room Air	IPS*	14:42
03 Room Air	0.000	14:42

\*Improper Sample

Sub Name = TEST, DONOR2 NONE  
Sub DOB = 07/25/1998  
Sub Sex = Male                            Weight = NA  
Test = OTH                                Cit = IMPROPER  
Dr. Lic. = ND/TES989643  
Lot No = 34921080A1  
Cyl No = 49  
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: *Improper Sample*

Form 106-I8000

Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-004204  
Location = TOXL      8164.14.00 09/16  
04/25/2023      14:42

Test	AC	Time
01 Diagnostic	OK	14:43
02 Room Air	0.000	14:44
03 Subject Test 1	0.000*	14:44
04 Room Air	0.000	14:46
05 Std. Gas	0.081	14:47
06 Room Air	0.000	14:49
07 Subject Test 2	0.041*	14:49
08 Room Air	0.000	14:50

\*Difference Too Great

Sub Name = TEST, DONOR2 NONE  
Sub DOB = 07/25/1998  
Sub Sex = Male      Weight = NA  
Test = OTH      Cit = DIFF TOO GREAT  
Dr. Lic. = ND/TES989643  
Lot No = 34921080A1  
Cyl No = 49  
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: *Difference Too Great*

Form 106-I8000



Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-004204  
Location = TOXL      8164.14.00 09/16  
04/25/2023      14:51

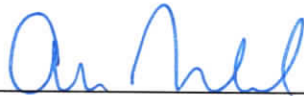
Test	AC	Time
01 Diagnostic	OK	14:52
02 Room Air	0.000	14:52
03 Subject Test 1	0.000	14:53
04 Room Air	0.000	14:55
05 Std. Gas	0.079	14:56
06 Room Air	0.000	14:58
07 Subject Test 2	0.000	14:58
08 Room Air	0.000	15:10
09 Reported AC	0.000	14:53

Difference OK  
No RFI Detected

Sub Name = TEST, DONOR2 NONE  
Sub DOB = 07/25/1998  
Sub Sex = Male      Weight = NA  
Test = OTH      Cit = CMS TEST  
Dr. Lic. = ND/TES989643  
Lot No = 34921080A1  
Cyl No = 49  
Expiration Date = 02/05/2024  
County = 08      Oper No. = 133237

20 minute waiting period ascertained? Y  
Clean Mouthpiece used and disposed? Y  
Clean Mouthpiece used and disposed? Y

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



Operator Signature  
ANNA NAREHOOD

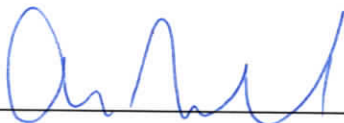
Remarks: CMS Test

Form 106-I8000

Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-004204  
Location = TOXL      8164.14.00 09/16  
06/28/2023      12:32

Test	AC	Time
01 Room Air	0.000	12:32
02 Std. Gas	0.078	12:33
03 Room Air	0.000	12:33
04 Std. Gas	0.079	12:34
05 Room Air	0.000	12:34
06 Std. Gas	0.079	12:34
07 Room Air	0.000	12:35
08 Std. Gas	0.080	12:35
09 Room Air	0.000	12:36
10 Std. Gas	0.079	12:36
11 Room Air	0.000	12:37
12 Std. Gas	0.079	12:37
13 Room Air	0.000	12:38
14 Std. Gas	0.080	12:38
15 Room Air	0.000	12:38
16 Std. Gas	0.079	12:39
17 Room Air	0.000	12:39
18 Std. Gas	0.080	12:40
19 Room Air	0.000	12:40
20 Std. Gas	0.080	12:40
21 Room Air	0.000	12:41
22 Std. Gas	0.080	12:41
23 Room Air	0.000	12:42
24 Std. Gas	0.080	12:42
25 Room Air	0.000	12:43
26 Std. Gas	0.080	12:43
27 Room Air	0.000	12:44
28 Std. Gas	0.079	12:44
29 Room Air	0.000	12:44
30 Std. Gas	0.080	12:45
31 Room Air	0.000	12:45
32 Cal Check Stats:		
33 Average	0.0795	
34 Std Dev	0.0006	
35 Rel Std Dev	0.81%	

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

Remarks: *Stability Test*