

NORTH DAKOTA OFFICE OF ATTORNEY GENERAL CRIME LABORATORY DIVISION

INTOXILYZER® 8000 ANNUAL INSPECTION

Intoxily	zer® 8	000 Serial Number: 80-00 1098 Inspection Location: TOXL
Α.	1.	Items with Instrument: Gas Cylinder Yes or No (If Yes, Lot #
		Download Data
	3.	Upload Operator File
	4.	Current Location Code: 10G
	5.	Battery Check Was the external battery pack replaced? Yes or No
	6.	□ O-Rings
		Replaced Simulator O-Ring Replaced Breath Tube O-Ring Yes or No Yes or No
B.		Diagnostics passed and instrument in "Ready" mode Breath tube heated 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). Print test (Level 1,P). Sign and attach test record. Tank monitor (Level 3,D,G). Display: ☐ → ♀ □ psi Regulator: ☐ □ 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): Configure simulator for the following test (Level 1,S).
		Wet Calibration Check - Low AC (Level 1,C) Known Value ≤ 0.03 AC:O

Intoxilyzer 8000 Annual Inspection

Document ID: 11698 Revision: 2

Laboratory Unit: Toxicology Unit - Breath Alcohol Section

Status: Published
Date Approved: 02/29/2024

Approved By: Laboratory Director

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	2.	Configure simulator for the following test (Level 1,S).		
		Wet Calibration Check - High AC (Level 1,C)		
		Known Value ≥ 0.25 AC: <u>0.400</u> AC		
		Sim. Ser #: <u>MP 6036</u>		
		Lot #: 2022/2C		
		Exp. Date: 08Dec24 Results ± 5% AC of known AC		
	2			
	3.	Configure dry gas standard for the remaining tests (Level 1,S).		
		Known Value : O O O AC		
		Gas Cylinder Lot #: 019 2308 0 A3 Cylinder #: 55		
		Exp. Date: 2 5 25		
	4.	☐ Interferent Check (Level 1,B)		
	4.			
		Known Value: 0.10 AC + 0.05% Acetone		
		Sim. Ser #:		
		Exp. Date: NIA		
		☑ Display reads "Interferent Detect"		
	5.	☐ RFI Check (CMS Mode)		
	5.			
	•	☐ Display reads "RFI Detect"		
	6.	Dry Calibration Check (Level 1,C)		
		Test 1 0.082 Test 4 0.082 Test 7 0.082		
		Test 2 0.082 Test 5 0.082 Test 8 0.082		
		Test 3 0.082 Test 6 0.082 Test 9 0.081		
		Average D.08		
		Results ± 0.005 AC of known AC		
D.	Doma	irks/Maintenance: N/A		
J.	Kema	iks/Maintenance. N/A		
nstru	ment is	s acceptable to be used in the field. Yes or No		
Hotru	mont ic	raddeptable to be used in the field. (163 of 140		
f No,	state re	eason(s) why:		
f Yes	s, chang	ge location code back to A.4. 🛛		
	(0		
nene	ctor Sic	gnature Date		
nspe	CIOI OIL	gnature Date 08 May 2024 Date 08 May 2024 Date		
Janulle Portscheller U8 army 2024				
Revie	wer	Date		
V- 110				

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Laboratory Unit: Toxicology Unit - Breath Alcohol Section

Approved By: Laboratory Director

UNCONTROLLED WHEN PRINTED Uploaded 10May2024

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AEN

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-007098
Location = TOXL 8164.16.00 09/18
05/08/2024 10:17

******* Printer Test ********

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

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

Current Instrument Setup

Data Entry Mode: Enabled Start Test Sequence: Display Prelim Rslt? DABACABA Yes Display Third Digit? Yes Inhib Printer(Y/N)? No Display Volume? No Disable On Memfull? Yes # of Print Copies?
Select Std (D/W/I)? Dry Standard Value? 0.080 Standard Lot #? 28423080A3 Standard Cyl #? 46 Standard Expiration? 11/05/2025 Oper No? 133237

Flow Cal. Date: 09/26/2018 Slope 684 Intercept -588446

IR Calibration Date: 09/26/2018
3um 9um

Oth Coef(*100): -40948 -15551
1st Coef(*100): 237555 134140
2nd Coef(*100): 2571 1433
H2O adj(mg/l*10k): 1097 457

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

Operator Signature
ANNA NAREHOOD

Remarks: Punt Test

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = TOXL
05/08/2024

Alcohol Analyzer SN 80-007098 8164.16.00 09/18 10:22

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	10:23
02 Std. Sol.	0.020	10:24
03 Room Air	0.000	10:24
04 Std. Sol.	0.020	10:25
05 Room Air	0.000	10:26
06 Std. Sol.	0.019	10:26
07 Room Air	0.000	10:27

08 Sim Temp = 34.0°C

Simul Ser No = MP3002 Std Sol No = 202301E

County = 08

Oper No. = 133237

Operator Signature ANNA NAREHOOD

Remarks: LOWAC Check - 0.020AC

CMI, Inc. Intoxilyzer North Dakota Model 8000 Location = TOXL 05/08/2024

Alcohol Analyzer SN 80-007098 8164.16.00 09/18 10:35

WET CAL CHECK

Test			AC	Time
01	Room	Air	0.000	10:36
02	Std.	Sol.	0.393	10:36
03	Room	Air	0.000	10:37
04	Std.	Sol.	0.394	10:38
05	Room	Air	0.000	10:38
06	Std.	Sol.	0.396	10:39
07	Room	Air	0.000	10:40

08 Sim Temp = 34.0°C

Simul Ser No = MP6036 Std Sol No = 202212C

County = 08

Oper No. = 133237

Operator Signature ANNA NAREHOOD

Remarks: High Ac Check - 0.400Ac

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-007098
Location = TOXL 8164.16.00 09/18
05/08/2024 10:40

Test	AC	Time
01 Room Air	0.000	10:41
02 *Subject Test	INT*	10:41
03 Room Air	0.000	10:42

^{*}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 = 01923080A3

Cyl No = 55

Expiration Date = 02/05/2025

County = 08 Oper No. = 133237

Operator Signature
ANNA NAREHOOD

Remarks: Interterent check

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-007098
Location = TOXL 8164.16.00 09/18
05/08/2024 10:42

Test	AC	Time
01 Diagnostic	OK	10:43
02 Room Air	0.000	10:44
03 *Subject Test	RFI*	10:44
04 Room Air	0.000	10:44

*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 = 01923080A3

Cyl No = 55

Expiration Date = 02/05/2025

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 Cheuk

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = TOXL
05/08/2024

Alcohol Analyzer SN 80-007098 8164.16.00 09/18 10:45

DRY CAL CHECK

Test			AC	Time
01	Room	Air	0.000	10:45
02	Std.	Gas	0.082	10:46
03	Room	Air	0.000	10:46
04	Std.	Gas	0.082	10:46
05	Room	Air	0.000	10:47
06	Std.	Gas	0.082	10:47
07	Room	Air	0.000	10:48

Lot No = 01923080A3

Cyl No = 55

Exp Date = 02/05/2025

County = 08

Oper No. = 133237

Operator Signature ANNA NAREHOOD

Remarks: Dry Cal Check #1-2

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = TOXL
05/08/2024

Alcohol Analyzer SN 80-007098 8164.16.00 09/18 10:48

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	10:49
02 Std. Gas	0.082	10:49
03 Room Air	0.000	10:49
04 Std. Gas	0.082	10:50
05 Room Air	0.000	10:50
06 Std. Gas	0.082	10:51
07 Room Air	0.000	10:51

Lot No = 01923080A3

Cyl No = 55

Exp Date = 02/05/2025

County = 08

Oper No. = 133237

Operator Signature ANNA NAREHOOD

Remarks: Dy Cal Cheuc #4-6

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = TOXL
05/08/2024

SN 80-007098 8164.16.00 09/18 10:51

DRY CAL CHECK

Test			AC	Time
01	Room	Air	0.000	10:52
02	Std.	Gas	0.082	10:52
03	Room	Air	0.000	10:53
04	Std.	Gas	0.082	10:53
05	Room	Air	0.000	10:54
06	Std.	Gas	0.081	10:54
07	Room	Air	0.000	10:55

Lot No = 01923080A3

Cyl No = 55

Exp Date = 02/05/2025

County = 08

Oper No. = 133237

Operator Signature ANNA NAREHOOD

Remarks: Dry Cau Cherk #7-9