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MEMO TO: AGENCY INTOXILYZER® FIELD INSPECTORS
FROM: CHARLES E. EDER, STATE TOXICOLOGIST
DATE: MAY 10, 2011
REGARDING: CHANGES IN PROCEDURES FOR CYLINDER INSTALLS, INSTRUMENT INSTALLS,
AND FILING OF DOCUMENTS

Charles E. Eder
10 MAY 11

Please immediately post this information near your Intoxilyzer® in order to notify all your operators of these changes.

The lab is implementing changes in the procedures for ACA tests, Intoxilyzer® installs, subject test record filing, and Intoxilyzer® Record (SFN 50496, Form 120-G) usage and filing.

ACA Changes:

ACA tests will only be run when a gas cylinder is changed (and no longer run every 45 days or 50 tests).

Intoxilyzer® Installation Changes (Field Inspectors Only):

The Intoxilyzer® installation process has changed to require **only one ACA test being performed instead of two tests required in the past** (one previously was done with the cylinder install and one was done with the instrument install).

Subject Test Record Changes:

A copy of the subject test will no longer be sent to the Crime Lab. It will be the agency's responsibility to retain the records. Only four subject test records will need to be printed and distributed as follows:

- Officer Copy
- Subject Copy
- Prosecuting Attorney Copy
- DOT Report and Notice Copy

Intoxilyzer® Record (Form 120-G) Changes:

A copy of the Intoxilyzer® Record (SFN 50496, Form 120-G) will no longer be sent to the Crime Lab. It will be the agency's responsibility to retain the record. Its intended purpose will be to collect the information regarding tests completed (i.e. dates and who performed the tests). Place the Form 120-G near the instrument as a record of its use.

Due to the mentioned changes, the **Intoxilyzer® 8000 Installation and Repair Checkout (SFN 59281, Form 104-G)**, **Intoxilyzer® Record (SFN 40596, Form 120-G)**, and **Ethanol Breath Standard Cylinder Report (SFN 59282, Form 105-G)** have been revised and are now available on the Crime Lab's website (www.ag.nd.gov/CrimeLab/CrimeLab.htm) by following the links **Breath Alcohol Program** and then **Operator Forms**.



INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT
 OFFICE OF ATTORNEY GENERAL
 CRIME LABORATORY DIVISION
 Toxicology Section/Breath Alcohol Program
 SFN 59281 (5-2011)

Serial Number:	Instrument Location:
Reason for Install/Repair:	
<input type="checkbox"/> Install After Receiving from Crime Laboratory	<input type="checkbox"/> Install After Location Change
<input type="checkbox"/> Other (Specify)	

Check When Done:

- 1. Surge Protector Installed/Properly Grounded.
- 2. Telephone Line Connected to Intoxilyzer® 8000.
- 3. Breath Tube Heated.
- 4. Enter Preliminary Data (i.e. Date, Time, DST (Y), and Location). (Level 2, Function E)
- 5. Scan/Enter Gas Cylinder Information. (Level 1, Function S)
- 6. Run Tests:
 - A. Print Test (Level 1, Function P).
 - B. ACA Test (Level 1, Function C).
 - C. RFI Test (Use CMS Mode – Key Radio During First Room Air).
- 7. Repair and/or Maintenance Performed (if Any): _____
- 8. Complete the Top Portion of the Intoxilyzer® Record (SFN 50496, Form 120-G) and Place it by the Intoxilyzer® for Use.
- 9. File Previous Intoxilyzer® Record (SFN 50496, Form 120-G) at the Intoxilyzer® Location at the Agency.
- 10. Send the Following to the Crime Laboratory: Completed Intoxilyzer® 8000 Installation and Repair Checkout (SFN 59281, Form 104-G), Print Test, ACA Test, and RFI Test.

 Field Inspector Signature

 Date

 Reviewed By

 Date



ETHANOL BREATH STANDARD CYLINDER REPORT
OFFICE OF ATTORNEY GENERAL
CRIME LABORATORY DIVISION
 Toxicology Section/Breath Alcohol Program
 SFN 59282 (5-2011)

Chemical Test Operator Name (Print):		
Location:		Intoxilyzer® Serial Number:
Gas Lot Number:	Gas Cylinder Number:	Gas Expiration Date:

Check When Done:

- 1. Scan/Enter Gas Cylinder Information. (Level 1, Function S)
- 2. Perform an ACA Test. (Level 1, Function C)

Write in the ACA Test Results (Reported to 3 Digits, Ex. 0.081):

- A. 0.____ AC
- B. 0.____ AC
- C. 0.____ AC

- 3. Complete the Top Portion of the Intoxilyzer® Record (SFN 50496, Form 120-G) and Place it by the Intoxilyzer® for Use.
- 4. File Previous Intoxilyzer® Record (SFN 50496, Form 120-G) at the Intoxilyzer® Location at the Agency.
- 5. Send the Following to the Crime Laboratory:
 - A. Ethanol Breath Standard Cylinder Report (SFN 59282, Form 105-G).
 - B. ACA Test Record.

 Chemical Test Operator Signature

 Date

 Reviewed By (Crime Laboratory Use Only)

 Date