

ALCOHOL AND DRUG TESTING



Intoxilyzer 8000 (OH-5)
ODH Proficiency



This proficiency test is an examination of your ability to follow the instructions in this document and fill in the appropriate data as instructed. This test is required if you have not performed a complete, successful subject test (BrAC results are printed) in the Calendar year and you wish to maintain an active access card to operate the Intoxilyzer 8000 (OH-5).

You must use your access card for the operator section input to ensure the correct data is populated in this section. There are four (4) mandatory fields in the Subject Test (Subject's Last Name, Subject's First Name, Subject's Zip Code, and Subject's Date of Birth) that must be entered as indicated on this form. For a proficiency test all other fields are intentionally left blank. All data to be manually entered by the operator is in italics.

Many of the fields are left blank on this illustration. If you do not see any instruction for data entry, continue to press the enter key rather than entering any data.

START PROFICIENCY TEST



The **START TEST** button initiates the testing sequence.

Ready Mode
08/16/2019 09:40

Ready Mode
Push Button to Start





You MUST use your access card. If you are having difficulties with the Access Card contact the Alcohol & Drug Testing Program at 614-644-4609
BADT@ODH.OHIO.GOV



Place **OPERATOR ACCESS CARD** under the red light near the keyboard. The **2-D BAR CODE** reader is light sensitive. You may use a flashlight to illuminate the certification card in low light conditions.

**Swipe/scan Access Card
or press enter**

Type in your **4-DIGIT PIN NUMBER**
Press **ENTER** to continue.

Enter 4-Digit Pin #

VERIFY all the information as the prompts are displayed.
If the prompt information is correct, press **ENTER** to continue.
If the prompt information is incorrect, correct manually using the keyboard, then press **ENTER** to continue.

If you have issues with the access card and/or if the information on the card is incorrect, contact the Alcohol & Drug Testing Program at 614-644-4609.

If you have lost your card, please contact our office for further instruction.

Subtract one (1) hour from the current time.
Use 24-HOUR format 00:00 (The : automatically appears). Example: If the current time is 08:00, subtract 1:00 and ENTER 07:00.
Press **ENTER** to continue.

Time First Observed

The **"Y"** (Yes) response is displayed.
Press **ENTER** to continue.

Is Operator Arresting Officer?
Y

Press **ENTER** to manually enter the subject information for the Proficiency Test, following the instrument display.

**Please swipe/scan DL
or press enter**

DO NOT SCAN YOUR ACCESS CARD OR A DL.

On any fields that are NOT mandatory or not indicated, you will press the ENTER key.





For any mandatory field, enter data as indicated in these instructions and press ENTER.

Type in **TEST**

Press **ENTER** to continue.

Subject's Last Name?

TEST

Type in **TEST**

Press **ENTER** to continue.

Subject's First Name?

TEST

Type in **11111** for the **ZIP CODE**.

Press **ENTER** to continue.

Subject's Zip Code?

11111

Type in **01/01/2000**.

Press **ENTER** to continue.

Subject's Date of Birth

Sign YOUR NAME as the TESTING OFFICER on the SIGNATURE PAD.

Press **ACCEPT** on the signature pad or Press **ENTER**

Operator

Please Sign on Attached Pad

The "N" (No) response is displayed.

Press **ENTER** to continue with the testing sequence.

Refuse Breath Test?

N

PLACE A MOUTHPIECE ON THE BREATH TUBE.

Please Install Mouthpiece
Press Any Key to Proceed

PROVIDE A BREATH SAMPLE SUFFICIENT TO COMPLETE THE FIRST SAMPLE.

Please Blow Until
Tone Stops/R

DISCARD THE MOUTHPIECE

Press any Key to Proceed

Please Remove Mouthpiece
Press Any Key to Proceed

The remaining **COUNTDOWN** from subject sample one (2-minutes) is displayed.

Please Wait
Ready in 02:00

Place a new **MOUTHPIECE** on breath tube for the second subject sample.

Please Install Mouthpiece
Press Any Key to Proceed

PROVIDE A BREATH SAMPLE SUFFICIENT TO COMPLETE THE SECOND SAMPLE.

Please Blow Until
Tone Stops/R

DISCARD THE MOUTHPIECE

Press any Key to Proceed

The instrument continues until the test is complete.

Please Remove Mouthpiece
Press Any Key to Proceed





Printing of forms begins.

Printing

The instrument returns to “Ready Mode”.

Ready Mode
08/16/2019 10:15

A Successful “**Subject Test Report**” is required. (BrAC results are printed).

“**Subject Invalid Test Report**” is an **Unsuccessful Proficiency**.

“**Subject Test Refusal Report**” is an **Unsuccessful Proficiency**.

If a second attempt results in an invalid test report, contact BADT.

Once you are finished, turn both power switches off, wait a minute, then turn both power switches back on and press the “Start Test” button. When the instrument enters “Ready Mode”, Press Control U to download results.

Please Note: If more than one person is conducting a proficiency test, perform the above steps after the last proficiency is completed.

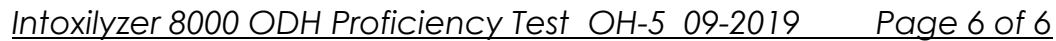
Make sure the person who performs the CTRL U stands by the instrument to ensure a successful download. If the first CTRL U fails, turn both power switches off, then turn both power switches back on, press the START TEST button, wait for the countdown to finish, and then press CTRL U again. If the second download fails, contact BADT@odh.ohio.gov and/or leave a message at 614-644-4609.

Once the records are received at the program office, they will be evaluated. Successful tests will result in the card status being updated. Tests take at least 48 hours to cycle to be uploaded. Unsuccessful attempts will result in a notice to the operator that they must complete another test.

The operator can check the status of their operator card by searching this website:
<http://publicapps.odh.ohio.gov/BreathInstrument/default.aspx>

The screenshot shows a web browser window with the URL <http://publicapps.odh.ohio.gov/BreathInstrument/>. The page features a header with the Ohio.gov logo and navigation links. Below the header is a search form titled "Breath Instrument Data Center". The form includes fields for "Last Name", "First Name", "Date From", "Date To", "Page", "Size", "State", and "Refused?". There are also buttons for "Clear All", "Submit Query", and "Help". A sidebar on the left contains links for "Subject Info", "Officer Info", and "Violation Details".






http://pubs.kpi.state.ohio.gov/BreathInstrument/

Breath Instrument Data Center

File Edit View Favorites Tools Help

Go to: Ohio Department of Health Proficiencies Accredited BADT ERIE ForeCep Govt Legal Media Personal Purchases Restaurants Sifers Training Weather 124.9 The River - Positive American Heart Association AP 230 - Processing Trans...



Breath Instrument Data Center

Help Contact Us Ohio Dept. of Health

Clear All Submit Query

Subject Info:

Last Name:

First Name:

Date From:

Date To:

Age: From: To:

Sex:

Race:

Refusal?

Officer Info:

Arresting Officer:

Last Name:

First Name:

Operator:

Last Name: Smith

First Name:

Unit Serial #:

Agency Name:

Agency Court Code:

Agency HDE #:

Breath Alcohol Test Search Results

Report	Date	Subject	Arresting Agency	Arresting Officer	Breath Test Operator
Report	01/10/2016	THOMAS, DAVID	POLIA HIGHWAY PATROL	SMITH, JEREMIAH	SMITH, JEREMIAH
Report	19/02/16	TEST, TEST	ATHENS HIGHWAY PATROL	SMITH, NATHAN	SMITH, NATHAN
Report	17/02/16	WANG, LILLIAN	BUTLER COUNTY SHERIFF'S OFFICE	OPSON, MICHAEL	SMITH, ANDREW
Report	15/02/16	BAZ, CARLOS	SPRINGFIELD POLICE DEPARTMENT	SMITH, CEREK	SMITH, CEREK
Report	16/02/16	BAZ, CARLOS	SPRINGFIELD POLICE DEPARTMENT	SMITH, CEREK	SMITH, CEREK
Report	16/02/16	COLEMAN, RONDA	SPRINGFIELD POLICE DEPARTMENT	SMITH, CEREK	SMITH, CEREK
Report	15/02/16	COLEMAN, RONDA	SPRINGFIELD POLICE DEPARTMENT	SMITH, CEREK	SMITH, CEREK
Report	13/02/16	HOUSE, CODY	BUTLER COUNTY SHERIFF'S OFFICE	BARABANO, DONALD	SMITH, ANDREW
Report	12/02/16	TEST, TEST	WILKINGTON HIGHWAY PATROL	SMITH, CHAD	SMITH, CHAD
Report	12/02/16	TEST, TEST	TRIP CITY POLICE DEPARTMENT	SMITH, ANTHONY	SMITH, ANTHONY
Report	12/02/16	TEST, TEST	SHARONVILLE POLICE DEPARTMENT	SMITH, DEANNA	SMITH, DEANNA
Report	12/02/16	TEST, TEST	SHARONVILLE POLICE DEPARTMENT	SMITH, DEANNA	SMITH, DEANNA
Report	12/02/16	MASON, CARLTON	SPRINGFIELD POLICE DEPARTMENT	SMITH, CEREK	SMITH, CEREK
Report	12/02/16	TEST, TEST	TOLEDO POLICE DEPARTMENT	SMITH, MICHAEL	SMITH, MICHAEL
Report	12/02/16	TEST, TEST	BAIRSVILLE HIGHWAY PATROL	HIGHSMITH, JASON	HIGHSMITH, JASON

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Do NOT send emails concerning the test(s) – incomplete/unsuccessful tests will be evaluated and notices will be sent to you or to your agency.

PROFICIENCY TEST COMPLETE

