

**Infrared Instrument
Weekly Calibration Verification Test Record**

Department: _____

Instrument Serial #: _____

Test Date	Simulator Solution Lot #	Simulator Temperature			Sim. Serial#	Test Results			Breath Analysis Supervisor	Sim. Sol. Change *
		1	2	3		1	2	3		
12/21/22	22390	34.03	34.03	34.03	100191	.10	.10	.10	Cusack	N
12/28/22	22390	34.03	34.03	34.03	MP4192	.10	.10	.10	Ellis	✓
1/2/23	22390	34.02	34.03	34.03	MP4192	.10	.10	.10	OSIRA	U
1/4/23	22390	34.03	34.03	34.03	MP4192	.10	.10	.10	DANQUER	N
1/13/23	22390	34.02	34.02	34.03	MP4192	.10	.10	.10	OSIRA	✓
1/14/23	22390	34.03	34.03	34.03	MP4192	.10	.10	.10	DANQUER	N
1/25/23	22390	34.02	34.02	34.02	MP4192	.10	.10	.10	Sorrentino	N
2/1/23	22420	34.02	34.02	34.03	MP4192	.10	.10	.10	DANQUER	Y
2/9/23	22420	34.03	34.03	34.03	MP4192	.10	.10	.10	OSIRA	N
2/15/23	22420	34.03	34.03	34.03	MP4192	.10	.10	.10	DANQUER	N
2/23/23	22420	34.03	34.03	34.03	MP4192	.10	.10	.10	Cusack	N
3/1/23	22420	34.03	34.03	34.03	MP4192	.10	.10	.10	DANQUER	Y

* - Please enter a ✓ to denote simulator solution change taking place