Statement from CMI in light of COVID-19

The safety of our staff and customers is a top priority. Our customer service business hours are 7:00am – 5:00pm, Monday – Friday. If guidance or instruction is needed, please call us during our business hours and you will be transferred to someone who can help.

As a reminder of best practice usage of our Intoxilyzers, before, during, and after testing, please review the following:

Hand cleanliness: In any season of heightened susceptibility, it is always advisable to follow proper hygienic procedures. Hand cleanliness is covered very well by the Centers for Disease Control (CDC) at the following link. Even with clean hands, the operator should avoid touching their face throughout the administration of the test.

The CDC also defines Everyday Preventative Actions that Can Help Fight Germs, like Flu.

Additional recommended, hygienic practices while utilizing Intoxilyzers are as follows:

Before testing:
- Maintain sanitary conditions around the Intoxilyzer by wiping down the area with non-alcoholic, disinfecting wipes. (Guidelines can again be found on the CDC website.)
- Do not allow the subject to handle or touch the Intoxilyzer.
- Do not allow the subject to touch unopened mouthpieces.
- Mouthpieces should be stored in a manner that prevents the subject’s exhalations from falling on them.
- A clean mouthpiece should be unwrapped just before performing the test, taking care to preserve the wrapper so that it can be used to remove the used mouthpiece after the subject has provided a sample.

During testing:
- Attach mouthpiece to the Intoxilyzer before presenting it to the subject. For handheld Intoxilyzers, ensure the subject’s breath is directed away from other persons and testing supplies.
- As always, use the correct mouthpiece supplied by CMI and designed for use with the Intoxilyzer. (See SD-2, SD-5, 200, 240, 300, 400, 400PA, 500, 600, 800, 5000, 8000, 9000)
- For the Intoxilyzer 5000, 8000, and 9000, the CMI mouthpiece, 015111, with a non-return valve (which prevents suck-back), and a lip-stop (which prevents subject breath hose contact), should be utilized as it is both DOT-approved for use and provides better hygienic protection for subject and operator.

After testing:
- With handheld instruments, Intoxilyzer SD-2, SD-5, 200, 240, 300, 400, 400PA, 500, and 600, the mouthpiece can be removed without touching it by utilizing the side of a waste container. Simply hold the mouthpiece just over the lip of the container and pull back, allowing the mouthpiece to fall into the waste container. The Intoxilyzer 800 utilizes a tab on the top of the mouthpiece that can be used to eject the mouthpiece in a similar manner.
- With the Intoxilyzer 5000, 8000, and 9000, use something such as the wrapper, or better a disposable glove, to remove the mouthpiece and discard it in a waste container.
- Take care while wiping down the instrument utilizing a non-alcoholic wipe after each use, making sure to allow surfaces to dry before the next use.
- Be sure to follow CDC guidelines for hand cleanliness after administering a breath test.

CMI stands ready to assist you with your breath testing needs, whatever they may be. Be vigilant, stay safe, and call us with any questions you may have.

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Release Date: 03-20-2020