



BG4 FUNCTION TEST RECORD APPARATUS #													
Function Test Date (month as Jan – Dec)	mmm/dd/yy												
First initial, last name of trainee	J.Smith												
O ₂ Cylinder Hydrostatic Test / MFG date	mm/yy mm/yy												
Visual Inspection	OK / Replaced	Pass	Fail										
Face Mask Inspection / Apply Anti-fog	OK / Repaired	Pass	Fail										
No Pressure Warning (flashing light)	<1.4 mbar	Pass	Fail										
Inhalation Valve (1-2 quick pumps)	> +10 mbar	Pass	Fail										
Exhalation Valve (1-2 quick pumps)	> -10 mbar	Pass	Fail										
Pressure Relief Valve	2-5 mbar	Pass	Fail										
Moisture Relief Valve	15-25 mbar	Pass	Fail										
Positive Pressure Leak	7-7.5 mbar	Pass	Fail										
High-Pressure Leak Test	OK / Repaired	Pass	Fail										
Constant Dosage Rate	1.5 - 1.9 L/min	Pass	Fail										
Bypass Valve	OK / Repaired	Pass	Fail										
Minimum Valve Activation Pressure	0.1 - 2.5 mbar	Pass	Fail										
O ₂ Cylinder Pressure	>185 bar												
Low Pressure Alarm (55 bar)	OK / Repaired	Pass	Fail										
Battery Test	ОК	Pass											
Date soda lime to be replaced (6 months)	mmm/dd/yy												
Unit sealed and dated	Yes	Yes											