(Technician completed)

AIR_01 1. Serial Number of AirWatch™ being tested __ __ __ __ - __ __ __ __

AIR_02 2. Serial Number of mouthpiece being tested __ __ __

AIR_03 3. Test date __ __ / __ __ / __ __
  month day year

4. Is this a new AirWatch™ device being tested? ❑₁ Yes ❑₀ No

AIR_04a If **Yes**, indicate reason. ❑₁ "old" AirWatch™ was lost
  ❑₂ "old" AirWatch™ failed testing
  ❑₃ other

		AirWatch™ (L/Min)	Jones FVC (L/Min)	**Clinic Use Only** **Relative Bias** $\frac{(\text{AirWatch™} - \text{Jones FVC})}{\text{Jones FVC}} * 100\%$	**Rank** smallest to largest
5.	Trial 1	**AIR_05a** __ __ __	**AIR_05b** __ __ __	__ __ __ . __ %	__
6.	Trial 2	**AIR_06a** __ __ __	**AIR_06b** __ __ __	__ __ __ . __ %	__
7.	Trial 3	**AIR_07a** __ __ __	**AIR_07b** __ __ __	__ __ __ . __ %	__
8.	Trial 4	**AIR_08a** __ __ __	**AIR_08b** __ __ __	__ __ __ . __ %	__
9.	Trial 5	**AIR_09a** __ __ __	**AIR_09b** __ __ __	__ __ __ . __ %	__

Clinic Use Only

Median Relative Bias __ __ __ . __ %   **Inter-quartile Range** __ __ . __ %

The **Median Relative Bias** is the third largest value of the 5 measures of relative bias.

The **Inter-quartile Range** is determined by subtracting the relative bias of rank 2 from the relative bias of rank 4.

When a subject receives a new AirWatch™ or mouthpiece for the first time, the median relative bias must be between -15% and +15%, AND the inter-quartile range must be less than 10%.

When a subject returns to the clinic with a used AirWatch™: *(i)* subtract the original median relative bias (the median relative bias when the AirWatch™ or mouthpiece was first dispensed) from the current median relative bias, and *(ii)* subtract the original inter-quartile range (the inter-quartile range when the AirWatch™ or mouthpiece was first dispensed) from the current inter-quartile range. The difference for (i) must be between -5% and +5% and the difference for (ii) must be less than +5% for the AirWatch™ to be reissued to the subject.

AIR_10 10. Did the AirWatch™ pass? ❑₁ Yes ❑₀ No

AIR_11 11. If **No**, is this the third mouthpiece tested with this AirWatch™ at this visit? ❑₁ Yes ❑₀ No

☞ If **No**, issue a new mouthpiece and complete another AirWatch™ Quality Control form.
☞ If **Yes**, issue a new AirWatch™ and mouthpiece and complete another AirWatch™ Quality Control form.