MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
BREATH ALCOHOL PROGRAM

DATAMASTER MAINTENANCE REPORT

recevied 9/9/14-cd REPORT #6

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 3 days).
Complete this report whenever the instrument is serviced or repaired and whenever it is placed into se
Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

REVIEWED
By Carol Day at 11:23 am, Sep 25, 2014

DATAMASTER SN	NAME OF AGENCY	DATE OF INSPECTION
204065	MSHP	09/01/2014

LOCATION OF INSTRUMENT (STREET AND CITY)	TIME OF INSPECTION
LACLEDE COUNTY SHERIFF DEPARTMENT	9:57 pm

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

☑ DIAGNOSTIC CHECK (PRINTOUT ATTACHED) DATE AND TIME (from printout) 09/01/14 21:57

☑ COMPUTER ☑ DETECTOR

☑ PROGRAM ☑ FILTERS

☑ HEATERS SAMPLE CHAMBER 49 °C ☑ QUARTZ STANDARD

☑ FLOW DETECTOR ☑ CALIBRATION

☑ PUMP HIGH SPEED ☑ PRINTER

☑ INDICATOR LIGHTS

☑ SIMULATOR SOLUTION SUPPLIER Guth Laboratories, Inc. LOT # 13290 EXP. DATE 10/29/2015

☑ SIMULATOR TEMP (34°C ± 0.2°C) 34 °C SIMULATOR SN G6778 EXP. DATE 05/19/2015

☑ CALIBRATION CHECK – **(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)**

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

☑ 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE
☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE
☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1 ☛	TEST 2 ☛	TEST 3 ☛
.099	.101	.101

☑ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS	(0-.04)	(.05-.09)	(.10-.14)	(.15-.19)	OVER .19
2		1			1

LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY).

INSPECTING OFFICER

SIGNATURE	PRINT FULL NAME
▸ 1/12	JAMES E CONWAY
TYPE II PERMIT NUMBER/EXPIRATION DATE	**TELEPHONE NUMBER**
230015 02/08/2015	(573) 368-2345

RETURN COMPLETED REPORT TO THE: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Blvd.
Poplar Bluff, MO 63901

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER
services provided on a nondiscriminatory basis

GUTH LABORATORIES, INC.
660 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **13290** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **October 31, 2013,** using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1202%** (w/vol) ethyl alcohol. The expiration date for this lot number is **October 29, 2015** at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L +/- 3%.**

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:
Testing was conducted using Certiliant Reference Standard lot number FNI22211-02 whose values are traceable to NIST.
All balances are calibrated annually by an outside agency using NIST traceable weights.
Calibration verification is done prior to each use utilizing NIST traceable weights.

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204065
09/01/14
21:57

--- DIAGNOSTIC CHECK ---

COMPUTER:	OKAY
PROGRAM (04-07-2009):	OKAY
HEATERS	
SAMPLE CHAMBER:	49c
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST
!"#$%&'()*+,-./0123456789:;<=>?@ABCDEFG
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmno
pqrstuvwxyz{|}~

Operator Signature 472

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204065
09/01/14

TESTING OFFICER:
CONWAY/J/E
OFFICER I.D.: 472
PERMIT NUMBER: 230015
EXPIRATION DATE: 02/08/15
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	22:03
INTERNAL STANDARD	VERIFIED	22:03
EXTERNAL STANDARD	.099	22:03
BLANK TEST	.000	22:04
EXTERNAL STANDARD	.101	22:05
BLANK TEST	.000	22:06
EXTERNAL STANDARD	.101	22:06
BLANK TEST	.000	22:07

N = 3
SIM. = .1
AVG. = .1003

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204065
09/01/14

ARREST TIME: 12:00
SUBJECT NAME:
DRUNK/IM/A
DOB: 01/01/01 SEX: M
STATE/D.L.: MO/123456789
ARRESTING OFFICER:
CONWAY/J/E
OFFICER I.D.: 472
TESTING OFFICER:
CONWAY/J/E
OFFICER I.D.: 472
PERMIT NUMBER: 230015
EXPIRATION DATE: 02/08/15
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST	.000	22:12
INTERNAL STANDARD	VERIFIED	22:12
RADIO INTERFERENCE		

STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES

BREATH ALCOHOL PROGRAM

2

PERMIT

TYPE II

JAMES E CONWAY

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 02/08/2013

NUMBER 230015

EXPIRES 02/08/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 650-0771 (10-10)

LAB-1 (10-10)