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

RECEIVED REPORT #6
By Carol Day at 9:36 am, Apr 10, 2014

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

DATAMASTER SN 204189 NAME OF AGENCY MSHP DATE OF INSPECTION 3-27-2014

LOCATION OF INSTRUMENT (STREET AND CITY) MO. 254 HERMITAGE TIME OF INSPECTION 1035

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) 3-27-14 1040
 COMPUTER DETECTOR
 PROGRAM FILTERS
 HEATERS SAMPLE CHAMBER 50 °C QUARTZ STANDARD
 FLOW DETECTOR CALIBRATION
 PUMP HIGH SPEED PRINTER

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER GLTH LAB LOT # 13280 EXP. DATE 10-16-15

SIMULATOR TEMP (34°C ± 0.2°C) 34.1 °C SIMULATOR SN G6808 EXP. DATE 12-12-14

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 0.098 TEST 2 0.098 TEST 3 0.099

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

INSPECTING OFFICER

SIGNATURE RJ Fillipi PRINT FULL NAME RUSSELL TERRY FILLIPI

TYPE II PERMIT NUMBER/EXPIRATION DATE 240049 3-7-16 TELEPHONE NUMBER 4178956868

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



GUTH LABORATORIES, INC.

590 NORTH 87th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-6470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **13280** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **October 18, 2013**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1217%** (w/vol) ethyl alcohol. The expiration date for this lot number is **October 16, 2015** at 11:59 PM.

When used in a calibrated Simulator, operating at $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L \pm 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 Cerilliant Reference Standard lot number FN122211-02 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.



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

2

PERMIT
TYPE II
RUSSELL J FILLIPI

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, INTOX DMT

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 3/7/2014

NUMBER 240049

EXPIRES 3/7/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB 4 (R6-10)

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

INSTRUMENT OPERATOR CARD

The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.



Operator FILLIPI, RUSSELL
 Permit No 240049
 Date Issued 3/7/2014 Date Expires 3/7/2016

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 284139
#3/27/14

ARREST TYPE: 00000

SUBJECT NAME:

DEARLEK

DOB: 01/01/66 SEX: M

STATE/D.L.C. NO.: 123456

ARRESTING OFFICER:

FILLIPINI

OFFICER I.D.#: 0352

TESTING OFFICER:

SAME

OFFICER I.D.#: 0352

PERMIT NUMBER: 1400047

EXPIRATION DATE: 03-07-14

MISCELLANEOUS DATA:

N

RFI

***** BREATH ANALYSIS *****

NUMB TEST	0000	11401
INTEGRAL STANDARD	VERIFIED	03401
RADIO INTERFERENCE		

Operator Signature

