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

INTOX EC/IR II MAINTENANCE REPORT

REPORT #3

RECEIVED
By Carol Day at 10:43 am, Nov 05, 2015

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days). Complete this report whenever the instrument is serviced or repaired and when [illegible] into service. Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

INTOX EC/IR II SN	NAME OF AGENCY	DATE OF INSPECTION
12708	Olivette Police Dept.	10/28/2015
LOCATION OF INSTRUMENT (STREET AND CITY)		TIME OF INSPECTION
9473 Olive Blvd. Olivette		20:17 CDT

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

[X] **DIAGNOSTIC RECORD**

[X] BLANK CHECK	[X] CO2 CHECK
[X] FC 1 TEMP	[X] FLOW CHECK
[X] SRC TEMP	[X] FCB CHECK
[X] DET TEMP	[X] CRC COMP CHECK
[X] BT TEMP	[X] CRC CAL CHECK
[X] STD 2 TEMP	[X] PRINT TEST
[X] ETH CHECK	

BREATH ANALYZER ACCURACY STANDARDS

[ ] SIMULATOR SOLUTION [X] COMPRESSED ETHANOL-GAS MIXTURE

[X] STANDARD SUPPLIER INTOXIMETERS LOT# AG400803 EXP. DATE 01/08/2016

[ ] SIMULATOR TEMP (34°C ±0.2°C)	SIMULATOR S/N	SIMULATOR EXP DATE

[X] 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)

[X] 0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE
[ ] 0.08% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE
[ ] 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1	TEST 2	TEST 3
0.100 g/210L	0.100 g/210L	0.100 g/210L

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:

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

New solenoid adjustment by factory at Intoximeters.

INSPECTING OFFICER

SIGNATURE	PRINT FULL NAME
► [signature]	FORD, STEPHEN
TYPE OF PERMIT NUMBER / EXPIRATION DATE	TELEPHONE NUMBER
230288 / 11/26/2015	(314) 645-3000

RETURN COMPLETED REPORT TO THE:

Breath Alcohol Program, Missouri Department of Health and Senior Services,
Southeast District Office, 2875 James Blvd, Poplar Bluff, MO 63901

ORIGINAL

STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES

BREATH ALCOHOL PROGRAM

2

PERMIT

TYPE II

STEPHEN D FORD

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

INTOX EC/IR II, INTOXILYZER 5000

he determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of section .020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

E 11/26/2013

ABER 230208

IRES 11/26/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (RG-11)

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

INSTRUMENT OPERATOR CARD

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

Operator FORD, STEPHEN
Permit No 230208
Date Issued 11/20/2013 Date Expires 11/26/2015

Airgas USA LLC (LAB)
3600 Bernard Street
St. Louis, Mo. 63103
Ph: (314) 533-3100
Fax: (314) 533-7828

Certificate of Analysis

Customer Name
Intoximeters, Inc.
2081 Craig Road
St. Louis, Mo 63146

Test Date: 8-Jan-2014

Lot # AG400803

Exp. Date	Cyl. Type	Component	Certified Concentration
8-Jan-2016	10B	Ethanol	0.100 ± 2% BrAC (272 ppm)
		Nitrogen	Balance

Certification Traceable to N.I.S.T. RGM Ethanol Standards:

Serial No.	Concentration	Serial No.	Concentration
EB0010581	391.8 ppm	EB0010603	392.6 ppm
EB0010570	259.8 ppm	EB0010659	258.9 ppm
EB0010286	209.0 ppm	EB0010695	208.9 ppm
EB0010561	103.7 ppm	EB0010562	104.9 ppm
EB0010581	52.22 ppm	EB0010579	52.94 ppm

Analytical Method: NDIR

Digitally signed by Quality Control
Date: 2014.01.09 00:12:24 -06'00'
Reason: Dry gas standard calibration of analysis
Location: Airgas USA LLC (Lab)

Analyst: Rod Marsala

ISO 17025:2006 A2LA accredited. Certificate Number 2989.01

SRO Work Order Report

Intoximeters
Experience • Service • Integrity

10/27/2015 11:31:47 AM

SRO: SRO-011984

Description: EC1R2 Repair

Customer: C000MOOL10

Phone: 314-983-5207

Contact: Stephen Ford

Ship To: 1

Ship to Address

Olivette Police Dept
Customer Pickup by: Sgt. Stephen Ford
St. Louis MO 63146
USA

SRO Type: REPAIR

Ship Via: FDX

Del Terms:

FOB: N/A

Cust PO: Warranty-Extended

Customer Ship Account:

Description: EC/IR II(F210-04)WET/DRY MISSOURI **Unit:** 18012708

Line: 1 **Item:** 18-0760-00 **Qty:** 1.00 **UM:** EA

Operation: 10 **Operation Code:** REPAIR Repair

General Reason: EC2 Err EC/IR II displayed a Status Message **Specific Reason:** Set sol Set Solenoid Error

Customer Reported Issue: Solenoid Error

General Resolution: Adjusted Set Solenoid Error **Specific Resolution:** Mech adj Set Solenoid Error

Checked solenoid plunger
Adjusted plunger tube
Adjusted sample solenoid
Instrument Calibrated to Factory Specifications

Parts

Seq	Qty	UM	Item	Description
1	1.00	EA	27-6290-00	LABEL VOID EC, EC2, AMCC