



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

INTOX EC/IR II MAINTENANCE REPORT

REPORT #3

RECEIVED to exceed 35  
By Carol Day at 2:22 pm, Oct 23, 2015

Complete this report at the time of the regular monthly preventive maintenance (days). Complete this report whenever the instrument is serviced or repaired and into service. Retain the original and send a copy within 15 days to the Breath Alcohol Program, DPHS.

INTOX EC/IR II SN 12039 NAME OF AGENCY Lake Lotawana DATE OF INSPECTION 10/21/2015

LOCATION OF INSTRUMENT (STREET AND CITY) 100 Lake Lotawana Dr Lake Lotawana TIME OF INSPECTION 13:08 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.

- DIAGNOSTIC RECORD
  - BLANK CHECK
  - FC 1 TEMP
  - SRC TEMP
  - DET TEMP
  - BT TEMP
  - STD 2 TEMP
  - ETH CHECK
  - CO2 CHECK
  - FLOW CHECK
  - FCB CHECK
  - CRC COMP CHECK
  - CRC CAL CHECK
  - PRINT TEST

BREATH ANALYZER ACCURACY STANDARDS

SIMULATOR SOLUTION  COMPRESSED ETHANOL-GAS MIXTURE  
STANDARD SUPPLIER GUTH LOT# 14200 EXP. DATE 08/05/2016  
 SIMULATOR TEMP (34°C ±0.2°C) 34°C +/- .2° SIMULATOR S/N dr6933 SIMULATOR EXP DATE 02/09/2016

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)  
 0.10% 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 = 0.100 g/210L TEST 2 = 0.100 g/210L TEST 3 = 0.100 g/210L

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

REFUSALS	1	0-.04	0	.05-.09	0	.10-.14	0	.15-.19	0	OVER .19	0
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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 *Chris Hawkins* 308 PRINT FULL NAME HAWKINS, CHRIS  
TYPE II PERMIT NUMBER 240311 EXPIRATION DATE 07/30/2016 TELEPHONE NUMBER (816) 578-4333

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

**GUTH LABORATORIES, INC.**

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-664-6470

**CERTIFICATE OF ANALYSIS**

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14200 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on August 6, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1213% (w/vol) ethyl alcohol. The expiration date for this lot number is August 5, 2016 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 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.*

**Intox EC/IR-II: Calibration**

Lake Lotawana 100 Lake Lotawana Dr Lake Lotawana  
Serial Number: 012839 Test Number: 147  
Test Date: 10/21/2015 Test Time: 12:48 CDT  
Operator's Name: HAWKINS, CHRIS  
Operator's Permit #: 240311  
Permit Expiration Date: 07/30/2016

Wet Gas Target: 0.100  
Lot Number: 14200 Exp Date: 08/05/2016  
System Check: Passed

Test	g/210L	Time
BLK	0.000	12:48
CAL	0.100	12:49

**Success**

Calibration CRC: 9CC9B155



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



**PERMIT**  
**TYPE II**  
**CHRIS HAWKINS**

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

**INTOX EC/IR II**

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 7/30/2014

NUMBER 240311

EXPIRES 7/30/2016

MO 680-0771 (8-10)

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DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

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DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES  
LAB-4 (RS-10)