



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY  
CMI INTOXILYZER 8000 MAINTENANCE REPORT

**RECEIVED**

By Carol Day at 3:00 pm, Mar 30, 2015

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send one copy to Department of Health and Senior Services, and retain one copy in department file.

INSTRUMENT SERIAL NUMBER 80-005828	LOCATION OF INSTRUMENT WEBB CITY P. D.	DATE OF INSPECTION 03/27/2015	TIME OF INSPECTION 01:55
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CALIBRATION CHECK RESULTS		
Test	g/210L	Time
Air Blank	0.000	01:57
Cal Check	0.099	01:58
Air Blank	0.000	01:58
Cal Check	0.100	01:59
Air Blank	0.000	01:59
Cal Check	0.099	02:00
Air Blank	0.000	02:01

**Pass**

CALIBRATION CHECK SUMMARY		
STANDARD TYPE WET	STANDARD LOT # 14200	STANDARD EXPIRATION DATE 08/05/2016
SIM TEMPERATURE 34.0	SIM SERIAL NUMBER SD2754	SIM CERTIFICATE EXPIRATION 08/14/2015
STANDARD VALUE 0.100	STANDARD SUPPLIER GUTH LABORATORIES	
CALIBRATION CHECK RESULT 1 0.099		
CALIBRATION CHECK RESULT 2 0.100		
CALIBRATION CHECK RESULT 3 0.099		
MAXIMUM DEVIATION (MUST BE WITHIN 5%) 1.0%	SPREAD (MUST BE .005 OR LESS) 0.001	

DIAGNOSTIC TEST RESULTS		
Voltage/Current Test	Pass	
RAM Test	Pass	
EEPROM Checksum Test	Pass	
Real Time Clock Test	Pass	
DSP Test	Pass	
Analytical Stability Test	Pass	
Modem Test	Pass	
Temperature Regulation Test	Pass	

**Pass**

RFI TEST RESULTS		
Test	g/210L	Time
Air Blank	0.000	02:04
Subject Test	RFI*	02:04
Air Blank	0.000	02:04
*RFI Detect		

**Pass**

NUMBER OF REFUSALS AND SUBJECT BREATH TESTS IN EACH RANGE SINCE LAST MAINTENANCE REPORT							
REFUSALS	.00-.04	.05-.09	.10-.14	.15-.19	OVER .19		
0	0	0	0	0	0	0	0

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).  
MONTHLY MAINT. TEST

<b>INSPECTING OFFICER</b>		PRINT NAME	
SIGNATURE		GREGORY PACHLHOFER	
TYPE II PERMIT NUMBER	EXPIRATION DATE	TELEPHONE NUMBER	
240295	06/27/2016	4176731911	



**GUTH LABORATORIES, INC.**

590 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 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.*