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

# DATAMASTER MAINTENANCE REPORT

RECEIVED
By Carol Day at 1:24 pm, May 19, 2015

REPORT #6

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 whenever it is placed into service.
Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

| DATAMASTER SN | NAME OF AGENCY | DATE OF INSPECTION |
|---|---|---|
| 950011 | Viburnum Police Dept | 5-2-15 |
| LOCATION OF INSTRUMENT (STREET AND CITY) | | TIME OF INSPECTION |
| #1 Missouri Ave Viburnum MO 65566 | | 2047 |

**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.

- [x] DIAGNOSTIC CHECK (PRINTOUT ATTACHED) — DATE AND TIME (from printout) 5-2-15 2047
- [x] COMPUTER
- [x] DETECTOR
- [x] PROGRAM
- [x] FILTERS
- [x] HEATERS SAMPLE CHAMBER 49 °C
- [x] QUARTZ STANDARD
- [x] FLOW DETECTOR
- [x] CALIBRATION
- [x] PUMP HIGH SPEED
- [x] PRINTER
- [x] INDICATOR LIGHTS
- [x] SIMULATOR SOLUTION SUPPLIER Guth Labs LOT # Z3290 EXP. DATE 10-25-15
- [x] SIMULATOR TEMP (34°C ± 0.2°C) 34°C °C SIMULATOR SN 3D2759 EXP. DATE 7-30-15
- [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] 0.100% 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 | .100 | .101 |

- [x] 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 |
|---|---|---|---|---|---|
| 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).

**INSPECTING OFFICER**

| SIGNATURE | PRINT FULL NAME |
|---|---|
| [signature] | Charles N. Hedrick |
| TYPE II PERMIT NUMBER/EXPIRATION DATE | TELEPHONE NUMBER |
| 230241 7-25-15 | 573-244-5220 |

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.
699 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 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.***

Face This Side Down - This Edge In First

**BAC DataMaster**
**Evidence Ticket**

STATE OF [illegible]

[illegible]

Operator Signature

Face This Side Down - This Edge In First

**BAC DataMaster**
**Evidence Ticket**

STATE OF MISSOURI

[illegible]

BAC DATAMASTER SERIAL NUMBER [illegible]

[illegible]

SUPERVISOR MODE

| | | |
|---|---|---|
| BLANK TEST | .000 | [illegible] |
| EXTERNAL STANDARD | [illegible] | [illegible] |
| BLANK TEST | .000 | [illegible] |
| CRITICAL STANDARD | .100 | [illegible] |
| BLANK TEST | .000 | [illegible] |
| [illegible] STANDARD | [illegible] | [illegible] |
| BLANK TEST | .000 | [illegible] |

Operator Signature

Face This Side Down - This Edge In First

**BAC DataMaster**
Evidence Ticket

Operator Signature