



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

DATAMASTER MAINTENANCE REPORT

RECEIVED

By Carol Day at 2:48 pm, Apr 19, 2016

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 201240	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 04/17/2016
LOCATION OF INSTRUMENT (STREET AND CITY) Piedmont Police Department, 116 West Green Street, Piedmont, MO, 63957		TIME OF INSPECTION 7:57 pm

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.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	DATE AND TIME (from printout) <u>04/17/2016 - 19:57</u>
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER _____ 49 °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER Guth Laboratories Inc. LOT # 16040 EXP. DATE 01/20/2018

SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN MP2210 EXP. DATE 08/31/2016

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)

- 0.100% 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 .101%	TEST 2 .101%	TEST 3 .102%
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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)	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).

Operating within DHSS specifications.

INSPECTING OFFICER

SIGNATURE 	PRINT FULL NAME Trooper John J. West
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TYPE II PERMIT NUMBER/EXPIRATION DATE 240065 - 02/04/2018	TELEPHONE NUMBER (573) 840-9500
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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 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **16040** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **January 22, 2016**, 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 **January 20, 2018** 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 FN08051301 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 MISSOURI
PIEDMONT POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201240
04/17/16

TESTING OFFICER:
WEST/JOHN/J
OFFICER I.D.: 1145
PERMIT NUMBER: 240065
EXPIRATION DATE: 02/04/18
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	20:08
INTERNAL STANDARD	VERIFIED	20:08
EXTERNAL STANDARD	.101	20:09
BLANK TEST	.000	20:09
EXTERNAL STANDARD	.101	20:10
BLANK TEST	.000	20:10
EXTERNAL STANDARD	.102	20:11
BLANK TEST	.000	20:11

N = 3
SIM. = .1
AVG. = .1013

Operator Signature



Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
PIEDMONT POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201240
04/17/16
19:57

--- DIAGNOSTIC CHECK ---

COMPUTER:	OKAY
PROGRAM (04-07-2009):	OKAY
HEATERS	
SAMPLE CHAMBER:	49c
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST

!"#\$%&'()*+,-./0123456789:;<=>?@ABCDEFGHIJ
KLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmnop
qrstuvwxyz{|}~

Operator Signature



Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
PIEDMONT POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201240
04/17/16

ARREST TIME: 19:00
SUBJECT NAME:
TEST
DOB: 10/10/90 SEX: M
STATE/D.L.: MO/1234567890
ARRESTING OFFICER:
WEST/JOHN/J
OFFICER I.D.: 1145
TESTING OFFICER:
WEST/JOHN/J
OFFICER I.D.: 1145
PERMIT NUMBER: 240065
EXPIRATION DATE: 02/04/18
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST	.000	20:16
INTERNAL STANDARD	VERIFIED	20:16
RADIO INTERFERENCE		

Operator Signature 