

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 STATE PUBLIC HEALTH LABORATORY  
 BREATH ALCOHOL PROGRAM  
 INTOX DMT MAINTENANCE REPORT

REPORT #1

**RECEIVED**

*By Carol Day at 3:40 pm, Jul 18, 2016*

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

INTOX DMT SN 500131	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 07/04/2016
LOCATION OF INSTRUMENT (STREET AND CITY) Laclede Co. SO 240 N. Adams Ave., Lebanon		TIME OF INSPECTION 00:28:36

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

DATE AND TIME <u>07/04/2016 00:28:38</u>	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTER 1
<input checked="" type="checkbox"/> SAMPLE CHAMBER <u>48.7°C</u>	<input checked="" type="checkbox"/> FILTER 2
<input checked="" type="checkbox"/> BREATH TUBE <u>47.8°C</u>	<input checked="" type="checkbox"/> FILTER 3
<input checked="" type="checkbox"/> PUMP	<input checked="" type="checkbox"/> INTERNAL STANDARD

BREATH ANALYZER ACCURACY STANDARDS

SIMULATOR STANDARD       COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER ILMO      LOT # 25814080A3      EXP. DATE 10/05/2016

SIMULATOR TEMP (34°C ± 0.2°C) \_\_\_\_\_      SIMULATOR SN \_\_\_\_\_      SIMULATOR EXP DATE \_\_\_\_\_

CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)  
 Run three tests using a standard. 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 being used.

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: 0.077      TEST 2: 0.077      TEST 3: 0.078

PERFORM R.F.I. TEST

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

REFUSALS: <u>0</u>	<u>0-04: 0</u>	<u>.05-.09: 2</u>	<u>10-14: 3</u>	<u>15-19: 2</u>	<u>OVER .19: 1</u>
--------------------	----------------	-------------------	-----------------	-----------------	--------------------

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)

---



---



---

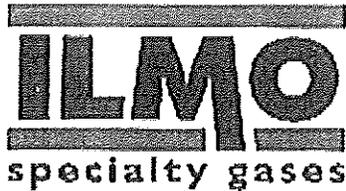


---

**INSPECTING OFFICER**

SIGNATURE 	PRINT FULL NAME J E CONWAY	
TYPE II PERMIT NUMBER 260016	EXPIRATION DATE 01/15/2018	TELEPHONE NUMBER 573-368-2345

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



7 Eastgate Dr. • P.O. Box 790 • Jacksonville, IL 62651-0790  
217-245-2183 • Fax: 217-243-7634 • www.ilmo-products.com

## Certificate of Analysis

Certificate ID: 7199  
Part #: BAC108L080T  
Cylinder Size: 108L  
Lot Number: 25814080A3  
Expiration: 10/5/2016

0.080 BAC (For the calibration of instruments used to determine breath alcohol concentration)

Contents: 108 Liters @ 1200 psig 70°F (21°C)

Component:	Concentration:	Accuracy:	Method:
Ethanol	209 ppm	± 0.002 or 1%	NDIR
Nitrogen	balance	BAC whichever is greater	

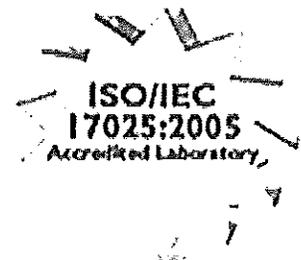
\*NIST Standard Reference Material  
Cylinder No. CC14293 / Job No. 09160202  
Certified 212.8 µmol/mol Ethanol in Nitrogen  
for ILMO Products Co., Jacksonville, IL

Store in dry area, away from sources of heat, ignition  
and direct sunlight. Do not allow storage area to  
exceed 52 °C (125 °F).

*Jacob Pilatte*  
Specialty Gas Lab Tech

09/25/14  
Date

Distributed by: CMI Inc.  
316 East Ninth Street  
Owensboro, KY 42303  
Phone 866-835-0690  
[www.alcoholtek.com](http://www.alcoholtek.com)





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

2

**PERMIT**  
**TYPE II**  
**JAMES E CONWAY**

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 DMT**

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 1/15/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 260016

EXPIRES 1/15/2018

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB 4 (R5 10)



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

**INSTRUMENT OPERATOR CARD**

*The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri*



Operator CONWAY, JAMES  
Permit No 260016  
Date Issued 1/15/2016 Date Expires 1/15/2018