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By Tracy Crews at 7:26 am, Jun 02, 2023



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

REPORT #2

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 80-005829	LOCATION OF INSTRUMENT JASPER CO. SHERIFF	DATE OF INSPECTION 06/02/2023	TIME OF INSPECTION 03:30
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE DRY	STANDARD LOT # AG128602	STANDARD EXPIRATION DATE 10/13/2023
Air Blank	0.000	03:31	SIM TEMPERATURE N/A	SIM SERIAL NUMBER N/A	SIM CERTIFICATE EXPIRATION N/A
Cal Check	0.078	03:32	STANDARD VALUE 0.080	STANDARD SUPPLIER INTOXIMETERS	
Air Blank	0.000	03:32	CALIBRATION CHECK RESULT 1 0.078		
Cal Check	0.077	03:32	CALIBRATION CHECK RESULT 2 0.077		
Air Blank	0.000	03:33	CALIBRATION CHECK RESULT 3 0.078		
Cal Check	0.078	03:33	MAXIMUM DEVIATION (MUST BE WITHIN 6%) 3.7%	SPREAD (MUST BE .005 OR LESS) 0.001	
Air Blank	0.000	03:34			
Pass					

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
Voltage/Current Test	Pass		Test	g/210L	Time
RAM Test	Pass		Air Blank	0.000	03:34
EEPROM Checksum Test	Pass		Subject Test	RFI*	03:35
Real Time Clock Test	Pass		Air Blank	0.000	03:35
DSP Test	Pass		*RFI Detect		
Analytical Stability Test	Pass		Pass		
Modem Test	Pass				
Temperature Regulation Test	Pass				
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
2	0	1	1	1	2

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 NAME CHRISTOPHER CALVIN
TYPE II PERMIT NUMBER 220052	TELEPHONE NUMBER 4173588177
EXPIRATION DATE 02/19/2024	



Airgas USA LLC (LAB)
 3500 Bernard Street
 St. Louis, Mo. 63103
 Ph: (314) 533-3100
 Fax: (314) 533-7328

Certificate of Analysis

Customer Name
Exclusive Supplier
 Intoximeters, Inc.
 2081 Craig Road
 St. Louis, Mo 63146

Test Date: 13-Oct-2021

Lot # AG128602 Model 108

Exp Date 13-Oct-2023	Cyl. Type 108	Component Ethanol Nitrogen	Certified Concentration 0.080 ± 0.002 BrAC (208 ppm)
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Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010581	392.1 ppm	EB0010603	393.0 ppm
EB0010570	259.8 ppm	EB0010559	258.2 ppm
EB0010285	208.0 ppm	EB0010595	208.3 ppm
EB0010561	103.6 ppm	EB0010562	104.2 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm

CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC434668	800.0 ppm	0056649	390.1 ppm
CC234503	253.0 ppm	0056662	150.2 ppm

Analytical Method: NDIR

Digitally signed by: Quality Control
 Reason: Dry gas standard certification of analysis
 Location: Airgas USA LLC (Lab)
 Date: 10.13.2021 19:10

Approved for Release: _____



Rod Marsala

ISO 17025:2017 A2LA accredited. Certificate Number 3082.06
ISO 17034:2016 A2LA accredited. Certificate Number 3082.07



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



PERMIT
TYPE II
CHRISTOPHER CALVIN

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

ALCO-SENSOR IV WITH PRINTER, INTOXILYZER 8000

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 2/19/2022

NUMBER 220052

EXPIRES 2/19/2024

Laura P. Day

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Christopher Calvin

acting director
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO:580:0771 (6-10)

LAB 4 (06/10)

 **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 CALVIN, CHRISTOPHER
 Permit No 220052
 Date Issued 2/19/2022 Date Expires 2/19/2024

