



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

RECEIVED
07/18/23 09:41:17 AM CDR

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 80-005846	LOCATION OF INSTRUMENT IPD BATVAN STATION 2	DATE OF INSPECTION 10/12/2023	TIME OF INSPECTION 14:36
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE DRY	STANDARD LOT # AG306503	STANDARD EXPIRATION DATE 03/06/2025
Air Blank	0.000	14:38	SIM TEMPERATURE N/A	SIM SERIAL NUMBER N/A	SIM CERTIFICATE EXPIRATION N/A
Cal Check	0.099	14:38	STANDARD VALUE 0.100	STANDARD SUPPLIER INTOXIMETERS, INC	
Air Blank	0.000	14:39	CALIBRATION CHECK RESULT 1 0.099		
Cal Check	0.098	14:39	CALIBRATION CHECK RESULT 2 0.098		
Air Blank	0.000	14:40	CALIBRATION CHECK RESULT 3 0.100		
Cal Check	0.100	14:40	MAXIMUM DEVIATION (MUST BE WITHIN 5%) 2.0%	SPREAD (MUST BE .005 OR LESS) 0.002	
Air Blank	0.000	14:40	Pass		

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
Voltage/Current Test	Pass		Test	g/210L	Time
RAM Test	Pass		Air Blank	0.000	14:41
EEPROM Checksum Test	Pass		Subject Test	RFI*	14:41
Real Time Clock Test	Pass		Air Blank	0.000	14:42
DSP Test	Pass		*RFI Detect		
Analytical Stability Test	Pass				
Modem Test	Pass				
Temperature Regulation Test	Pass				
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	
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).

APPEARS TO BE FUNCTIONING PROPERLY

INSPECTING OFFICER		
SIGNATURE 	PRINT NAME KENNETH GIBSON	
TYPE II PERMIT NUMBER 230196	EXPIRATION DATE 08/31/2025	TELEPHONE NUMBER 8163257300



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: 7-Mar-2023

Lot # AG306503 **Model** 108

Exp Date 6-Mar-2025	Cyl. Type 108	Component Ethanol Nitrogen	Certified Concentration 0.100 ± 2% BrAC (260 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	391.8 ppm	EB0010603	392.5 ppm
EB0010570	259.8 ppm	EB0010559	258.9 ppm
EB0010285	209.0 ppm	EB0010562	104.2 ppm
EB0010561	103.7 ppm	EB0010579	52.94 ppm
EB0010681	52.22 ppm		

CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC727481	800.0 ppm	CC727493	390.0 ppm
CC727496	253.0 ppm	CC727498	150.0 ppm

Analytical Method: NDIR

Digitally signed by: Quality Control
 Reason: Dry gas standard certification of analysis
 Location: Airgas USA LLC (Lab)
 Date: 03.09.2023 20:47

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

2

PERMIT
TYPE II
KENNETH GIBSON

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

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 8/31/2023

Mike Mason

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 230196

David J. Nickelson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 8/31/2025

 **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 GIBSON, KENNETH
 Permit No 230196
 Date Issued 8/31/2023 Date Expires 8/31/2025

