



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 80-005852	LOCATION OF INSTRUMENT JOPLIN POLICE DEPT	DATE OF INSPECTION 02/16/2023	TIME OF INSPECTION 08:07
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**CALIBRATION CHECK RESULTS**

Test	g/210L	Time
Air Blank	0.000	08:09
Cal Check	0.101	08:10
Air Blank	0.000	08:10
Cal Check	0.100	08:10
Air Blank	0.000	08:11
Cal Check	0.100	08:11
Air Blank	0.000	08:12
<b>Pass</b>		

**CALIBRATION CHECK SUMMARY**

CALIBRATION CHECK SUMMARY		
STANDARD TYPE DRY	STANDARD LOT # AG213101	STANDARD EXPIRATION DATE 05/11/2024
SIM TEMPERATURE N/A	SIM SERIAL NUMBER N/A	SIM CERTIFICATE EXPIRATION N/A
STANDARD VALUE 0.100	STANDARD SUPPLIER INTOXIMETERS	
CALIBRATION CHECK RESULT 1 0.101		
CALIBRATION CHECK RESULT 2 0.100		
CALIBRATION CHECK RESULT 3 0.100		
MAXIMUM DEVIATION (MUST BE WITHIN 5%) 1.0%	SPREAD (MUST BE .005 OR LESS) 0.001	

**DIAGNOSTIC TEST RESULTS**

Voltage/Current Test	Pass
RAM Test	Pass
EEPROM Checksum Test	Pass
Real Time Clock Test	Pass
DSP Test	Pass
Analytical Stability Test	Pass
Modem Test	Pass
Temperature Regulation Test	Pass
<b>Pass</b>	

**RFI TEST RESULTS**

Test	g/210L	Time
Air Blank	0.000	08:12
Subject Test	RFI*	08:13
Air Blank	0.000	08:13
*RFI Detect		
<b>Pass</b>		

**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	2	7	1	4

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).

NONE

**INSPECTING OFFICER**

SIGNATURE 	PRINT NAME MORA, NETISHA
TYPE II PERMIT NUMBER 210165	EXPIRATION DATE 08/04/2023
	TELEPHONE NUMBER 4176233131



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:** 11-May-2022

**Lot #** AG213101 **Model** 55

Exp Date	Cyl. Type	Component	Certified Concentration
11-May-2024	55	Ethanol Nitrogen	0.100 ± 2% BrAC (260 ppm)

**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

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**  
**NETISHA MORA**

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 **8/4/2021**

NUMBER **210165**

EXPIRES **8/4/2023**

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)



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 MORA, NETISHA

Permit No 210165

Date Issued 8/4/2021 Date Expires 8/4/2023

