



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

**RECEIVED**  
 By Tracy Crews at 11:48 am, Mar 07, 2024

REPORT #1

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.

INTOX DMT SN 500239	NAME OF AGENCY Mexico Public Safety Department	DATE OF INSPECTION 03/06/2024
LOCATION OF INSTRUMENT (STREET AND CITY) 300 N. Coal, Mexico, MO 65265		TIME OF INSPECTION 14:36:43

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>03/06/2024 14:36:45</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>47.1°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 INTOXIMETERS      LOT # AG220102      EXP. DATE 07/20/2024

SIMULATOR TEMP (34°C ± 0.2°C) \_\_\_\_\_      SIM. SN \_\_\_\_\_      SIM. NIST 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: 0.102      TEST 2: 0.102      TEST 3: 0.102

**PERFORM R.F.I. TEST**

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

REFUSALS: 0      0-.04: 21      .05-.09: 0      .10-.14: 0      .15-.19: 0      OVER .19: 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)

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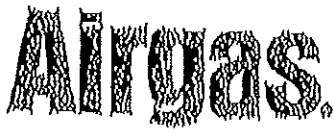
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**INSPECTING OFFICER**

SIGNATURE <i>Stuart Thompson</i>	PRINT FULL NAME STUART J THOMPSON
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TYPE II PERMIT NUMBER 220267	EXPIRATION DATE 12/02/2024	TELEPHONE NUMBER 573-581-2100
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RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services by mail, fax, or email



Airgas USA LLC (LAB)  
 3100 Belmont Blvd  
 St. Louis, Mo, 63103  
 PH (314) 886-3100  
 FAX (314) 886-7828

### Certificate of Analysis

Customer Name  
 Specialty Supplier  
 Hydroxymethyl, Inc.  
 2004 Cindy Road  
 St. Louis, Mo 63140

Print Date: 20-Jul-2022

Lot # AG220102 Model 100

Exp Date: 20-Jul-2024      Cyl. Type: 100      Component: Ethanol Nitrogen      Certified Concentration: 0.100 ± 2% BrAC (200 ppm)

Certification Traceable to NIST/US DoM and to ASTM Standard Standards

NIST Serial No.	Concentration	NIST Serial No.	Concentration
1B0010003	814.0 ppm	1B0010006	802.0 ppm
1B0010070	810.0 ppm	1B0010080	800.0 ppm
1B0010201	800.0 ppm	1B0010002	104.2 ppm
1B0010004	103.7 ppm	1B0010070	102.0 ppm
1B0010014	102.2 ppm		

ASTM Serial No.	Concentration	ASTM Serial No.	Concentration
01727403	800.0 ppm	01727403	800.0 ppm
01727400	200.0 ppm	01727400	100.0 ppm

Analytical Method: NDIR

Method 1001 (100% O2) and Method 1002 (20% O2) are used for analysis.

Approved for Release: Paul Marzola  
 Paul Marzola

ISO 17020:2017 A2LA accredited. Certificate Number 8002.03  
 ISO 17025:2017 A2LA accredited. Certificate Number 0002.07



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



PERMIT  
TYPE II

STUART J. THOMPSON

is hereby authorized to install and supervise operators, train instructors, inspect, calibrate, perform field services and repair and operate the following breath analyzer(s)

INTOX DM7

for the determination of the alcohol content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 578.111 through 578.119, RSMo.

DATE 12/12/2022

*Mike Mason*

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES

NUMBER 202207

*Debra K. Henderson*

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 12/31/2024

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STATE OF MISSOURI  
DEPARTMENT OF HEALTH AND SENIOR SERVICES  
INSTRUMENT OPERATOR CARD

Operator: THOMPSON, STUART  
Date Issued: 12/12/22 Date Expires: 12/31/24

