



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

INTOX DMT MAINTENANCE REPORT

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 500049	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 10/14/2020
LOCATION OF INSTRUMENT (STREET AND CITY) 107 S 11th St, Lexington, MO		TIME OF INSPECTION 22:35:02

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>10/14/2020 22:35:04</u>	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTER 1
<input checked="" type="checkbox"/> SAMPLE CHAMBER <u>48.8°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 # AG004403 EXP. DATE 02/13/2022

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: **0.100** TEST 2: **0.099** TEST 3: **0.099**

PERFORM R.F.I. TEST

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

REFUSALS: 0	0-.04: 0	.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)

DISPLAY SCREEN REPLACED BY INTOXIMETERS

IN SERVICE

INSPECTING OFFICER

SIGNATURE 	PRINT FULL NAME M J HANRAHAN
---------------	--

TYPE II PERMIT NUMBER 290089	EXPIRATION DATE 04/22/2021	TELEPHONE NUMBER 816-622-0800
--	--------------------------------------	---

RETURN COMPLETED REPORT TO THE **Breath Alcohol Program, Missouri Department of Health and Senior Services**
by mail, fax, or email

STANDARD CHANGE

Missouri State Highway Patrol
INTOX dmt: 500049

Date: 10/14/2020
Time: 22:30:51

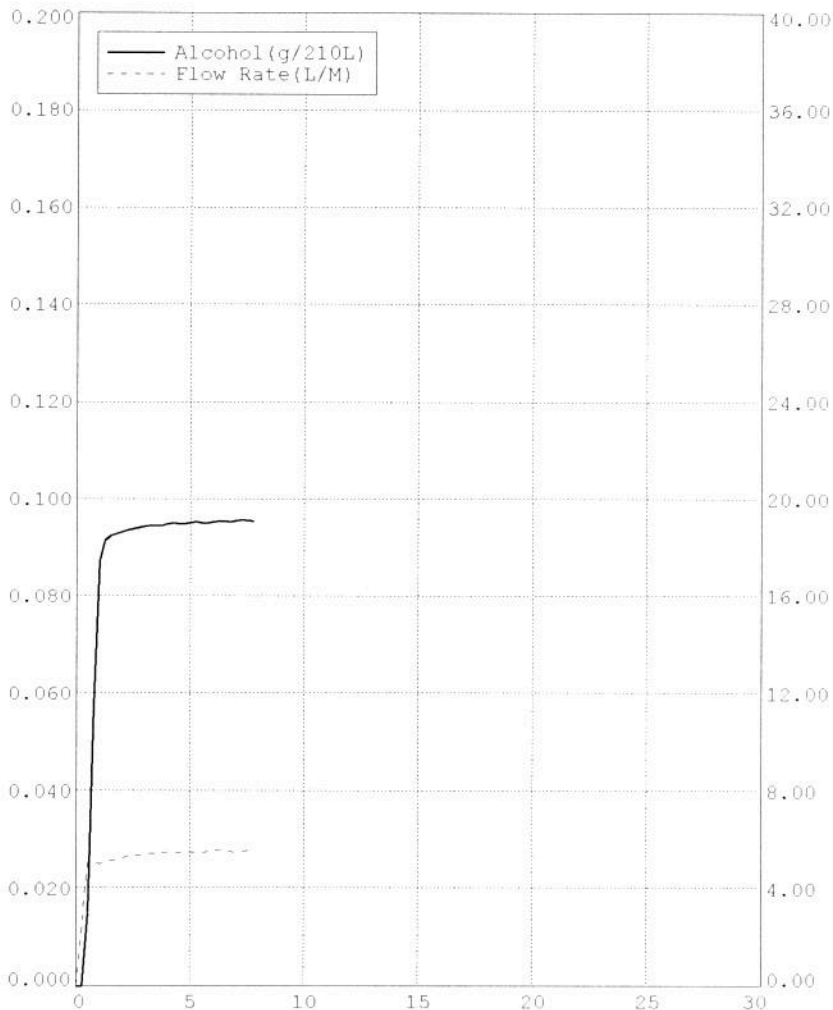
OPERATOR NAME:
M J HANRAHAN
PERMIT NUMBER: 290089
EXPIRATION DATE: 04/22/2021

LOT #: AG004403
SUPPLIER: INTOXIMETERS
EXPIRATION: 02/13/2022
SIMULATOR TYPE: DRY GAS

STANDARD INFORMATION
CONCENTRATION: 0.100
TARGET: 0.096

BLANK TEST	0.000	22:31
INTERNAL STANDARD	VERIFIED	22:31
EXTERNAL STANDARD	0.096	22:32
BLANK TEST	0.000	22:33

Average = 0.0960
Std Dev = 0.0000
Spread = 0.0000



M J Hanrahan



Airgas USA LLC (LAB)
 3500 Bernard Street
 St Louis, Mo 63103
 Ph: (314) 593-3100
 Fax: (314) 593-7328

Certificate of Analysis

Test Date: 17-Feb-2020

Customer Name:
Exclusive Buyer:
 Intoshire, Inc.
 2081 Craig Road
 St Louis, Mo 63103

Lot # AG004403 Model 108cacd

<u>Exp. Date:</u> 13-Feb-2020	<u>Cyl. Type:</u> 108	<u>Component:</u> Ethanol Nitrogen	<u>Certified Concentration:</u> 0.100 ± 2% BrAC (260 ppm) Balance
----------------------------------	--------------------------	--	---

Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

<u>RGM Serial No.</u>	<u>Concentration</u>	<u>RGM Serial No.</u>	<u>Concentration</u>
EB0010581	392.1 ppm	EB0010603	393.0 ppm
EB0010570	259.8 ppm	EB0010559	258.2 ppm
EB0010289	208.0 ppm	EB0010595	208.3 ppm
EB0010561	103.6 ppm	EB0010562	104.2 ppm
EB0010581	52.12 ppm	EB0010579	52.81 ppm
<u>CRM Serial No.</u>	<u>Concentration</u>	<u>CRM Serial No.</u>	<u>Concentration</u>
CC43466	800.0 ppm	0056649	390.1 ppm
CC23450	253.0 ppm	0056662	150.2 ppm

Analyte: Ethanol
Method: NDIR

Airgas USA LLC (LAB)
 3500 Bernard Street
 St Louis, Mo 63103
 Ph: (314) 593-3100
 Fax: (314) 593-7328

Approved for Release: Rod Marsala
 Rod Marsala



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

2

**PERMIT
TYPE II**

MATTHEW HANRAHAN

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, 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 4/22/2019

NUMBER 290089

EXPIRES 4/22/2021

MO 560 (2/21/19)

[Signature]
DIRECTOR OF STATE PUBLIC HEALTH (LABORATORIES)

[Signature]
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
(LABORATORIES)

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

INSTRUMENT OPERATOR CARD

This permit card is to be used only by individuals authorized to operate an evidential breath alcohol analyzer for the determination of the alcoholic content in breath for the purpose of enforcing the laws of Missouri.

Operator HANRAHAN, MATTHEW
Permit No. 290089
Date Issued 4/22/2019 Date Expires 4/22/2021

