



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

RECEIVED

By Tracy Crews at 12:32 pm, Dec 17, 2020

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 12/11/2020
LOCATION OF INSTRUMENT (STREET AND CITY) 107 S 11th St, Lexington, MO		TIME OF INSPECTION 21:27:58

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>12/11/2020 21:28:00</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>48.1°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: 0.100 TEST 3: 0.100

PERFORM R.F.I. TEST

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

REFUSALS: 0	0-.04: 10	.05-.09: 0	.10-.14: 0	.15-.19: 1	OVER .19: 0
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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)

TIME UPDATED

INSPECTING OFFICER

SIGNATURE <i>M J Hanrahan</i>	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



Quality USA, Inc. (QUSA)
10000 W. 10th Ave
Denver, CO 80202
Tel: 303.440.1100
Fax: 303.440.1101
www.mirage.com

Certificate of Analysis

Test Date: 17 Feb 2025

Customer Name: [Redacted]

Product: [Redacted]

SI No: 1

Lot # AG004403 Model 1080acd

EXP. Part No.	Exp. Type	Component	Certified Concentration
738	105	105	9.105 ± 0.2% (BAC) (260 ppm)
		105	0.315 ppm

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010561	392.1 ppm	EB0010603	393.0 ppm
EB0010571	259.8 ppm	EB0010559	258.2 ppm
EB0010573	208.0 ppm	EB0010595	208.3 ppm
EB0010581	103.6 ppm	EB0010562	104.2 ppm
EB0010581	52.12 ppm	EB0010575	52.81 ppm

CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC43443	800.0 ppm	9056649	390.1 ppm
CC23443	253.0 ppm	9056652	150.2 ppm

Approved for Release: NDIR

Approved for Release

Rod Marsala
Rod Marsala



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

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**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

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

