



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 500073	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 10/19/2020
LOCATION OF INSTRUMENT (STREET AND CITY) Phelps County Jail, 500 W. 2nd Street, Rolla		TIME OF INSPECTION 19:02:16

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>10/19/2020 19:02:18</u>	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTER 1
<input checked="" type="checkbox"/> SAMPLE CHAMBER <u>48.9°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 # AG831903 EXP. DATE 11/15/2020

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: 0.098 TEST 2: 0.098 TEST 3: 0.098

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: 2	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)

INSPECTING OFFICER

SIGNATURE <i>CRJPMES</i>	PRINT FULL NAME JEREMY R MCCURDY
TYPE II PERMIT NUMBER 290006	EXPIRATION DATE 01/11/2021
TELEPHONE NUMBER 573-368-2345	

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

Airgas

Airgas USA LLC (LA 8)
3020 General Street
St Louis, Mo 63103
Ph: (314) 523-3100
Fax: (314) 523-7309

Certificate of Analysis

Test Date: 27-Nov-2018

Customer Name:
Customer Supplier:
Ingram Micro, Inc.
3231 Gandy Road
St Louis, Mo 63146

Lot # AG831903 Model 100cccd

Exp. Date:
12/31/2020

Old Test:
103

Component:
Oxygen
Nitrogen

Certified Concentration:
0.100 ± 2% BWAC (280 ppm)
Balance

Conformances Traceable to NIST, ISO 9000 Internal Standards:

Sample	Concentration	Batch No.	Concentration
01010001	200.1 ppm	01010001	200.0 ppm
01010002	200.0 ppm	01010002	200.2 ppm
01010003	200.0 ppm	01010003	200.3 ppm
01010004	199.9 ppm	01010004	200.3 ppm
01010005	201.12 ppm	01010005	201.01 ppm

Analysis Method: MDU

Traceable to NIST
NIST 1515a
NIST 1515b
NIST 1515c
NIST 1515d
NIST 1515e
NIST 1515f
NIST 1515g
NIST 1515h
NIST 1515i
NIST 1515j
NIST 1515k
NIST 1515l
NIST 1515m
NIST 1515n
NIST 1515o
NIST 1515p
NIST 1515q
NIST 1515r
NIST 1515s
NIST 1515t
NIST 1515u
NIST 1515v
NIST 1515w
NIST 1515x
NIST 1515y
NIST 1515z

Approved for Release:

Rod Marsala
Rod Marsala

ISO 17025:2005 ABLA accredited. Certificate Number 3092.05



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



PERMIT
TYPE II

JEREMY R MCCURDY

is hereby authorized to instruct and supervise operators, train instructors, report, calibrate, perform field services and maintain the following breath analyzer(s):

INTOX DMT

for the determination of the alcoholic content of blood from a sample of expired air. Permits issued under the provisions of sections 577.009 through 577.041, RSMo and 308.111 through 308.119 RSMo.

DATE: 10/1/2019

NUMBER: 128004

EXPIRES: 12/31/2021

[Signature]
DIRECTOR OF PUBLIC HEALTH MEDICAL

[Signature]
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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

DEPARTMENT OPERATOR CARD

Operator: JEREMY R MCCURDY
Permit No: 128004
Date Issued: 10/1/2019

EXPIRES 12/31/2021