



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 500113	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 04/11/2020
LOCATION OF INSTRUMENT (STREET AND CITY) Dent Co. Jail, 112 E. 5th St. Salem		TIME OF INSPECTION 11:55:44

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>04/11/2020 11:55:46</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>47.0°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 # AG815503 EXP. DATE 06/04/2020

SIMULATOR TEMP (34°C ± 0.2°C) _____ SIMULATOR SN _____ SIMULATOR 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: **0.097** TEST 2: **0.097** TEST 3: **0.097**

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: **1** .10-.14: **2** .15-.19: **1** 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)

INSPECTING OFFICER

SIGNATURE *KDWilmont* PRINT FULL NAME **KYLE D WILMONT**

TYPE II PERMIT NUMBER **200072** EXPIRATION DATE **01/22/2022** TELEPHONE NUMBER **573-368-2345**

RETURN COMPLETED REPORT TO THE **Breath Alcohol Program, MO Department of Health and Senior Services
Southeast District Office
2875 James Blvd, Poplar Bluff, MO 63901**



Airgas USA LLC (LAB)
 3506 Bernard Street
 St Louis Mo 63103
 Ph (314) 533-3100
 Fax (314) 533-7378

Certificate of Analysis

Customer Name
 Exclusive Supplier
 Inoximeters, Inc
 7081 Craig Road
 St Louis Mo 63146

Test Date: 4-Jun-2018

Lot # AG815503 Model 108cadd

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
4-Jun-2020	108	Ethanol Nitrogen	0 100 ± 2% BrAC (260 ppm) Balance

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

<u>Serial No.</u>	<u>Concentration</u>	<u>Serial No.</u>	<u>Concentration</u>
EB0010581	391.8 ppm	EB0010603	392.5 ppm
EB0010570	258.8 ppm	EB0010559	258.9 ppm
EB0010285	289.0 ppm	EB0010395	208.3 ppm
EB0010561	103.7 ppm	EB0010662	104.9 ppm
EB0010681	52.22 ppm	EB0010579	52.94 ppm

Analytical Method: NDIR

Printed on Demand by Quality Control
 Date: 2018-06-04 10:31:51 -0500
 Location: ST. LOUIS, MO
 Operator: Airgas USA LLC LAB

Approved for Release: _____

Rod Marsala
 Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 3082.06



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



PERMIT
TYPE II
KYLE D WILMONT

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

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 1/22/2020

NUMBER 200072

EXPIRES 1/22/2022

MO-BS-001 (11/17)

[Signature]

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

[Signature]

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

1-400-485-1111

 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 analyzer instrument for the determination of the alcoholic content in breath from expired air in Missouri.

Operator WILMONT, KYLE
Permit No 200072
Date issued 1/22/2020 Date Expires 1/22/2022

