

RECEIVED

By Tracy Crews at 9:10 am, Oct 19, 2020



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 500202	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 09/27/2020
LOCATION OF INSTRUMENT (STREET AND CITY) Reynolds Co. Sheriff's Dept, Centerville, MO		TIME OF INSPECTION 13:25:54

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>09/27/2020 13:25:56</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>44.8°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: 0.101 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: 3	.05-.09: 0	.10-.14: 0	.15-.19: 0	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 	PRINT FULL NAME THOMAS W MEYER	
TYPE II PERMIT NUMBER 200244	EXPIRATION DATE 09/08/2022	TELEPHONE NUMBER 417-469-3121

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

SRO Number: SRO-040991

Received Date: 07/08/2020

Completion Date: 07/13/2020

SRO Type: REPAIR

SRO Description: EC/IR 2 Repair

Customer ID: C000MOCEN1

Customer PO: 07082020-Bond

Contact: Matt Bond

Email: mbond@ucmo.edu

Ship To:

University Of Central Missouri
Central Receiving
415 East Clark Street
Southeast Complex Bldg B

Units on SRO

1	18-0760-00	EC/IR II(F210-04)WET/DRY MISSOURI
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Service Line: 1 **All Instruments are Calibrated to Factory Specifications**

Unit Type: (18-0760-00) EC/IR II(F210-04)WET/DRY MISSOURI

Serial Number: 18012686

Reason: EC/IR II displayed a Status Message

FC leak

Reason Notes: Customer Reported Issue: fuel cell leaks

Resolution: Fuel Cell

Air Leak

Resolution Notes: Instrument shows a very large fuel cell leak in the instrument menu. Took cell out of IR bench, and took off of the sampling assembly. Found that there was a air gap in diaphragm. Replaced diaphragm and retainer, re-assembled and tested- still has a large leak. Removed cell and replaced with a new fuel cell, and again re-assembled and tested- there is now NO leak present in both leak column testing, and also in instrument menu testing.

Parts: Qty	Part Number	Part Description
1	27-4590-05	FUEL CELL LOW LOSS (F64-05)

Reason: ECIR II Mechanical or Physical

Reason Notes: Instrument had a very high ethanol delta on a breath blank(.018).

Resolution: Cleaned

cleaned

Resolution Notes: Decided to break IR bench down and wash/clean.

1	27-6450-00	MECH DIAPHRAGM AS4
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Reason: Preventive Maintenance

Reason Notes: Dynamco gas valve is 7 years old.

Resolution: Prev M

planned

Resolution Notes: Replaced the gas valve and fitting.

1	27-6570-00	MECH RETAINER AS4
1	27-6630-00	MECH SOLENOID DYNAMCO D1X295-2
1	000949-00	DMT HRDW BARB TUBE FIT 1-16IDX10-32
1	27-6290-00	LABEL VOID EC, EC2, AMCC

Order Packing Slip Report

Intoximeters
Experience • Service • Integrity

8/10/2020 9:43:33 AM

Packing Slip: 208917

Pack Date: 8/10/2020

SRO: SRO-040991



From: Intoximeters, Inc
2081 Craig Road
St Louis MO 63146
USA

Customer: C000MOCEN1

Ship To: 32

University Of Central Missouri
Accounts Payable
Administration 316
Warrensburg MO 64093
USA

University Of Central Missouri
Central Receiving
415 East Clark Street
Southeast Complex Bldg B
Warrensburg MO 64093
USA

Customer PO: 07082020-Bond

Ship Via: FDX

FED EX

Weight: 23.00

Delivery Terms : GND

FOB : ORIGIN

Packages: 1

Customer Ship Account :

Line Number	Item	UOM	Ordered Quantity	Shipment Quantity	Backorder Quantity
1	18-0760-00	EC/IR II(F210-04)WET/DRY MISSOURI			18012686
1	27-4590-05	EA		1.00	0.00
	FUEL CELL LOW LOSS (F64-05)				
2	27-6450-00	EA		1.00	0.00
	MECH DIAPHRAGM AS4				
3	27-6570-00	EA		1.00	0.00
	MECH RETAINER AS4				
4	27-6630-00	EA		1.00	0.00
	MECH SOLENOID DYNAMCO D1X295-2				
5	000949-00	EA		1.00	0.00
	DMT HRDW BARB TUBE FIT 1-16IDX10-32				
6	27-6290-00	EA		1.00	0.00
	LABEL VOID EC, EC2, AMCC				



Airgas USA LLC (LAB)

3500 Bernard Street

St. Louis, Mo. 63103

Ph: (314) 533-3100

Fax: (314) 533-7328

Certificate of Analysis

Customer Name*Exclusive Supplier*

Intoximeters, Inc.

2081 Craig Road

St. Louis, Mo 63146

Test Date: 17-Feb-2020**Lot # AG004403 Model 108cadd**

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
13-Feb-2022	108	Ethanol	0.100 ± 2% BrAC (260 ppm)
		Nitrogen	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
EB0010285	208.0 ppm	EB0010595	208.3 ppm
EB0010561	103.6 ppm	EB0010562	104.2 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm

<u>CRM Serial No.</u>	<u>Concentration</u>	<u>CRM Serial No.</u>	<u>Concentration</u>
CC434668	800.0 ppm	0056649	390.1 ppm
CC234503	253.0 ppm	0056662	150.2 ppm

Analytical Method: NDIR

Digitally signed by Quality Control
 Date: 2020.02.18 10:32:01 -06:00
 Reason: Dry gas standard certification of analysis
 Location: Airgas USA LLC (Lab)

Approved for Release: _____

Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 3082.06
ISO 17034:2016 A2LA accredited. Certificate Number 3082.07



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

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PERMIT
TYPE II

BENJAMIN R. KAUFMAN

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 EC/IR II

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 8/18/2020

NUMBER 200228

EXPIRES 8/18/2022

MO 580-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 KAUFMAN, BENJAMIN
Permit No 200228
Date Issued 8/18/2020 **Date Expires** 8/18/2022