



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY  
**CMI INTOXILYZER 8000 MAINTENANCE REPORT**

REPORT #2

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send one copy to Department of Health and Senior Services, and retain one copy in department file.

INSTRUMENT SERIAL NUMBER 80-005847	LOCATION OF INSTRUMENT IPD DETENTION	DATE OF INSPECTION 09/09/2020	TIME OF INSPECTION 10:35
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE DRY	STANDARD LOT # AG928002	STANDARD EXPIRATION DATE 10/07/2021
Air Blank	0.000	10:36	SIM TEMPERATURE N/A	SIM SERIAL NUMBER N/A	SIM CERTIFICATE EXPIRATION N/A
Cal Check	0.079	10:36	STANDARD VALUE 0.080	STANDARD SUPPLIER INTOXIMETERS, INC	
Air Blank	0.000	10:37	CALIBRATION CHECK RESULT 1 0.079		
Cal Check	0.080	10:37	CALIBRATION CHECK RESULT 2 0.080		
Air Blank	0.000	10:37	CALIBRATION CHECK RESULT 3 0.080		
Cal Check	0.080	10:38	MAXIMUM DEVIATION (MUST BE WITHIN 5%) 1.2%		
Air Blank	0.000	10:38	SPREAD (MUST BE .005 OR LESS) 0.001		

Pass

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
Voltage/Current Test	Pass		Test	g/210L	Time
RAM Test	Pass		-----		
EEPROM Checksum Test	Pass		Air Blank	0.000	10:39
Real Time Clock Test	Pass		Subject Test	RFI*	10:39
DSP Test	Pass		Air Blank	0.000	10:40
Analytical Stability Test	Pass		*RFI Detect		
Modem Test	Pass		Pass		
Temperature Regulation Test	Pass				

NUMBER OF REFUSALS AND SUBJECT BREATH TESTS IN EACH RANGE SINCE LAST MAINTENANCE REPORT						
REFUSALS	.00-.04	.05-.09	.10-.14	.15-.19	OVER .19	
1	1	0	0	1	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).

THE TIME WAS CHANGED TO MATCH DISPATCH TIME AND INSTRUMENT WAS TESTED  
THE TIME WAS CHANGED TO MATCH DISPATCH TIME AND INSTRUMENT WAS TESTED  
WITHIN STATE STANDARDS.

INSPECTING OFFICER			
SIGNATURE 		PRINT NAME RON BALTZER	
TYPE II PERMIT NUMBER 290150	EXPIRATION DATE 07/17/2021	TELEPHONE NUMBER 816-325-7300	



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:** 7-Oct-2019

**Lot # AG928002 Model 108cacd**

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
7-Oct-2021	108	Ethanol Nitrogen	0.080 ± 0.002 BrAC (208 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
EB0010285	208.0 ppm	EB0010595	208.3 ppm
EB0010561	103.6 ppm	EB0010562	104.2 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm

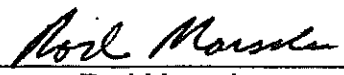
  

<u>CRM Serial No.</u>	<u>Concentration</u>	<u>CRM Serial No.</u>	<u>Concentration</u>
CC434668	800.0 ppm	0056649	390.1 ppm
CC234503	253.0 ppm	0056662	150.2 ppm

**Analytical Method:** NDIR

Digitally signed by Quality Control  
Date: 2019.10.07 16:34:11 -05:00  
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



**PERMIT**  
**TYPE II**  
**RON BALTZER**

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

**INTOXILYZER 8000**

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 7/17/2019

NUMBER 290150

EXPIRES 7/17/2021

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 680-0771 (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 **BALTZER, RON**  
 Permit No **290150**  
 Date issued **7/17/2019** Date Expires **7/17/2021**

