



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

RECEIVED
 02/10/2021 11:10 am, MHL

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 80-005855	LOCATION OF INSTRUMENT CARTHAGE POLICE	DATE OF INSPECTION 03/02/2020	TIME OF INSPECTION 09:24
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE DRY	STANDARD LOT # AG924701	STANDARD EXPIRATION DATE 09/04/2021
-----	-----	-----	SIM TEMPERATURE N/A	SIM SERIAL NUMBER N/A	SIM CERTIFICATE EXPIRATION N/A
Air Blank	0.000	09:26	STANDARD VALUE 0.100	STANDARD SUPPLIER INTOXIMETERS	
Cal Check	0.100	09:26	CALIBRATION CHECK RESULT 1 0.100		
Air Blank	0.000	09:26	CALIBRATION CHECK RESULT 2 0.099		
Cal Check	0.099	09:27	CALIBRATION CHECK RESULT 3 0.100		
Air Blank	0.000	09:27	MAXIMUM DEVIATION (MUST BE WITHIN 5%) 1.0%		
Cal Check	0.100	09:28	SPREAD (MUST BE .005 OR LESS) 0.001		
Air Blank	0.000	09:28	<h1>Pass</h1>		

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	09:29
Real Time Clock Test	Pass		Subject Test	RFI*	09:29
DSP Test	Pass		Air Blank	0.000	09:29
Analytical Stability Test	Pass		<h1>Pass</h1>		
Modem Test	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	
0	0	0	0	0	0	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).

FEB MAINTENANCE 2020

INSPECTING OFFICER		
SIGNATURE 	PRINT NAME HOLE, TREVOR	
TYPE II PERMIT NUMBER 290030	EXPIRATION DATE 02/08/2021	TELEPHONE NUMBER 417 237 7200



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: 4-Sep-2019

Lot # AG924701 Model 108cadd

Exp. Date

4-Sep-2021

Cyl. Type

108

Component

Ethanol

Nitrogen

Certified Concentration

0.100 ± 2% BrAC (260 ppm)

Balance

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

RGM Serial No.

EB0010581

Concentration

392.1 ppm

EB0010570

259.8 ppm

EB0010285

208.0 ppm

EB0010561

103.6 ppm

EB0010681

52.12 ppm

RGM Serial No.

EB0010603

Concentration

393.0 ppm

EB0010559

258.2 ppm

EB0010595

208.3 ppm

EB0010562

104.2 ppm

EB0010579

52.81 ppm

CRM Serial No.

CC434668

Concentration

800.0 ppm

CC234503

253.0 ppm

CRM Serial No.

0056649

Concentration

390.1 ppm

0056662

150.2 ppm

Analytical Method:

NDIR

Digitally signed by Quality Control
Date: 2019.09.05 10:26:43 -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