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By Tracy Crews at 2:00 pm, Aug 13, 2021



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 500149	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 08/10/2021
LOCATION OF INSTRUMENT (STREET AND CITY) 504 S.E.BLUE PARKWAY, LEES SUMMIT, MO 64063		TIME OF INSPECTION 12:49:54

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>08/10/2021 12:49:57</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>41.5°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 REPCO      LOT # 19002      EXP. DATE 10/16/2021

SIMULATOR TEMP (34°C ± 0.2°C) 33.9      SIM. SN CD05509      SIM. NIST EXP DATE 12/30/2021

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: 0.103      TEST 2: 0.102      TEST 3: 0.103

PERFORM R.F.I. TEST

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:

REFUSALS: 2	0-.04: 8	.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)

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INSPECTING OFFICER

SIGNATURE 	PRINT FULL NAME J C UTZ	
TYPE II PERMIT NUMBER 200080	EXPIRATION DATE 02/07/2022	TELEPHONE NUMBER

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

STANDARD CHANGE

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Missouri State Highway Patrol  
INTOX dmt: 500149  
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Date: 08/10/2021  
Time: 12:45:58

OPERATOR NAME:  
J C UTZ  
PERMIT NUMBER: 200080  
EXPIRATION DATE: 02/07/2022

LOT #: 19002  
SUPPLIER: REPCO  
EXPIRATION: 10/16/2021  
SIMULATOR TYPE: WET BATH

STANDARD INFORMATION  
CONCENTRATION: 0.100

BLANK TEST	0.000	12:46
INTERNAL STANDARD	VERIFIED	12:47
EXTERNAL STANDARD	0.103	12:47
BLANK TEST	0.000	12:48

Average = 0.1030  
Std Dev = 0.0000  
Spread = 0.0000

