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By Tracy Crews at 3:46 pm, Nov 04, 2021



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

INTOX DMT MAINTENANCE REPORT

REPORT #1

WIND THE WANTE WATER AND THE SAME				
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 S00157 NAME OF AGENCY Missouri State Highway Patrol DATE OF INSPECTION 10/30/2021				
LOCATION OF INSTRUMENT (STREET AND CITY) 280 West Main, Kingston, Missouri 64650 TIME OF INSPECTION 20:57:12				
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 10/30/2021 20:57:14				
☑ PROGRAM ☑ FILTER 1				
☑ SAMPLE CHAMBER 48.9°C				
☑ BREATH TUBE 48.1°C ☑ FILTER 3				
☑ PUMP ☑ 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: 0.099 TEST 2: 0.099 TEST 3: 0.099				
☑ PERFORM R.F.I. TEST				
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:				
REFUSALS: 1 004: 0 .0509: 1 .1014: 1 .1519: 1 OVER .19: 1				
IST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN STABLISHED LIMITS (USE OTHER SIDE IF NECESSARY)				
VODE OT UN OFFICE AND A STATE OF THE STATE O				
NSPECTING OFFICER IGNATURE PRINT FULL NAME				
ANDREW A HENRY				
200034 EXPIRATION DATE TELEPHONE NUMBER 816-387-2345				
RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services by mail, fax, or email				



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 108cacd

Exp. Date 13-Feb-2022 Cyl. Type 108

Component

Certified Concentration Ethanol 0.100 ± 2% BrAC (260 ppm)

Nitrogen

Balance

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
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
CRM Serial No.	Concentration	CRM Serial No.	Concentration
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:

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

ANDREW A HENRY

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

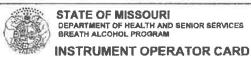
INTOX DMT

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 1/7/2020	want		
DATE TO THE TOTAL THE TOTAL TO THE TOTAL TOT	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY		
NUMBER 200034			
EXPIRES 1/7/2022	Ef Ville		
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES		

MO 580-0771 (6-10)

LAB-4 (R6-10)



The named cardholder is authorized to operate an evidential breath elcohol instrument for the determination of the alcoholic content in breath form of expired as in Missouri.

Operator HE

HENRY, ANDREW

Permit No 200034 Date issued 1/7/2020

77/2020 Date Expires 1/7/2022

