

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY BREATH ALCOHOL PROGRAM RECEIVED
By Tracy Crews at 8:51 am, Feb 26, 2021

INTOX DMT MAINTENANCE REPORT

REPORT #1

THE STEP STATE OF	BUILDIANGE	VEI OIVI				REPORT #1
Complete this report at the time Complete this report whenever the Retain the original and send a complete this report whenever the complete this report at the time.	the instrument is servi	ced or repaired	and whenev	er it is placed i	ceed 35 days). nto service.	
NAME OF AGENCY MARYVILLE DEPARTMENT OF PUBLIC SAFETY					DATE OF INSPECTION 02/15/2021	
101 N. VINE					TIME OF INSPECTION 08:15:58	
CHECKLIST: Place a mark in t values where determined). Unm	ne box by each item if arked items must be	found to be sa	itisfactory or i	s operating wit	thin established limits. (Write	e in observed
☑ DIAGNOSTIC RECORD						
DATE AND TIME <u>02/15/2021 08:16:00</u> ☑ DETECTOR						
☑ PROGRAM ☑ FILTER 1						
☑ SAMPLE CHAMBER 48.8°C				I FILTER 2		
☑ BREATH TUBE 48.0°C ☑ FILTER 3						
☑ PUMP ☑ INTERNAL STANDARD						
BREATH ANALYZER ACCURACY STANDARDS						
☑ SIMULATOR STANDARD ☐ COMPRESSED					ETHANOL-GAS MIXTURE	
STANDARD SUPPLIER G	UTH	LO ⁻	Г#_20420		EXP. DATE 09/22	2/2022
☑ SIMULATOR TEMP (34°C :	0.2°C)_34.0	SIM	SN_SD228	31	SIM. NIST EXP DATE 08	3/31/2021
 □ 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: 0.098 TEST 2: 0.098				TEST 3: 0.098		
☑ PERFORM R.F.I. TEST						
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:						
REFUSALS: 2 004: (.05-	.09: 1	.1014	: 5	.1519: 2	OVER .19: 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) INTOX DMT #500288 CONFORMS TO DEPARTMENT OF HEALTH SPECIFICATIONS.						
INSPECTING OFFICER						
SIGNATURE () () (So)				NE L WILSO		
TYPE II PERMIT NUMBER 290162		07/29/202		660-562-		
RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services by mail, fax, or email						



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 20420 of Alcohol Reference Solution for Simulator were analyzed by chromatography on September 23, 2020, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1208% (w/vol) ethyl alcohol. The expiration date for this lot number is September 22, 2022 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

> Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN03052002 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM



WAYNE L WILSON

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

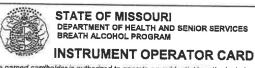
INTOX DMT

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 _____7/29/2019 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY NUMBER 290162 EXPIRES 7/29/2021 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 alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.

Operator WILSON, WAYNE

Permit No

Date Issued 7/29/2019 **Date Expires** 7/29/2021

