



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 STATE PUBLIC HEALTH LABORATORY  
 BREATH ALCOHOL PROGRAM  
**INTOX DMT MAINTENANCE REPORT**

**RECEIVED**  
 By Tracy Crews at 9:27 am, Aug 18, 2022

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 500143	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 08/12/2022
LOCATION OF USE 65 BUSINESS PARK DR., TROY, MISSOURI 63379		TIME OF INSPECTION 13:54:09

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>08/12/2022 13:54:11</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>43.1°C</u>	<input checked="" type="checkbox"/> FILTER 3
<input checked="" type="checkbox"/> PUMP	<input checked="" type="checkbox"/> INTERNAL STANDARD

**BREATH ANALYZER ACCURACY STANDARDS**

<input type="checkbox"/> SIMULATOR STANDARD	<input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
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<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>INTOXIMETERS</u>	LOT # <u>AG102002</u>	EXP. DATE <u>01/20/2023</u>
<input type="checkbox"/> 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: 0.098	TEST 3: 0.098
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**PERFORM R.F.I. TEST**

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

REFUSALS: 0	0-.04: 0	.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 <i>Bryan W Long #655</i>	PRINT FULL NAME BRYAN W LONG	
TYPE II PERMIT NUMBER 210311	EXPIRATION DATE 12/14/2023	TELEPHONE NUMBER 636-300-2800

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

# Airgas

Airgas USA LLC (LAB)  
3500 Bernard Street  
St. Louis, Mo 63103  
Ph (314) 533-3100  
Fax (314) 533-7378

## Certificate of Analysis

Customer Name  
Erickson Supply  
Instruments, Inc.  
2081 Craig Road  
St Louis, Mo 63146

Test Date: 21-Jan-2021

Lot # AG102002 Model 108cccd

Exp. Date: 20-Jan-2023  
Cyl. Type: 108  
Component: Ethanol  
Nitrogen  
Certified Concentration: 0.100 ± 2% B/A/C (260 ppm)  
Balance

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010381	392.4 ppm	EB0010463	333.0 ppm
EB0010570	269.8 ppm	EB0010559	258.2 ppm
EB0010283	208.0 ppm	EB0010535	208.3 ppm
EB0010581	103.6 ppm	EB0010642	104.2 ppm
EB0010681	52.92 ppm	EB0010579	52.81 ppm

  

CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC727481	800.0 ppm	CC727493	380.0 ppm
CC727498	233.0 ppm	CC727488	150.0 ppm

Analytical Method: NDIR

Quality signed by: *Rod Marsala*  
Date: 2021 (11) 14 17:44:08  
Balance by: *[Signature]*  
Location: Airgas USA (11C 211)

Approved for Release: \_\_\_\_\_

*Rod Marsala*  
Rod Marsala

ISO 17025:2005 A2LA accredited, Certificate Number 3082.08  
ISO 17034:2016 A2LA accredited, Certificate Number 3082.07



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

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**PERMIT**  
**TYPE II**  
**BRYAN W. LONG**

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 12/14/2021

*Laura P. Way*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 210311

*Donald A. Kamm*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 12/14/2023

 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 LONG, BRYAN  
 Permit No 210311  
 Date Issued 12/14/2021 Date Expires 12/14/2023

