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By Tracy Crews at 1:12 pm, Nov 10, 2022



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 500143	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 11/02/2022
LOCATION OF INSTRUMENT (STREET AND CITY) Lincoln County Sheriff's Office, Troy, MO.		TIME OF INSPECTION 14:58:43

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>11/02/2022 14:58:44</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>45.1°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 INTOXIMETERS LOT # AG102002 EXP. DATE 01/20/2023

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: 0.098	TEST 2: 0.097	TEST 3: 0.097
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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: 1	.10-.14: 3	.15-.19: 2	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)

INSPECTING OFFICER

SIGNATURE <i>B.W. Long</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)
3308 Emerald Street
St. Louis, Mo 63183
PA 317533-3100
Fax 317533-3278

Certificate of Analysis

Customer Name
Eaton Diesel
Waldorf, MD, Inc.
7081 Camp Road
St. Louis, Mo 63144

INSTRUMENT 21-JAN-2021

Lot # AG102002 Model 105cccd

Gas Bal 20-714-7073 Cyl. Type 150 Calibration Gas ppm Method N/A

Control Concentration 0.100 ± 2% WAC (750 ppm) # of Runs

Calibration Traceable to NIST, RCM and to CRM (if applicable) Standards:

CRM Label No.	Concentration	CRM Label No.	Concentration
E80010281	397.8 ppm	E80010603	303.0 ppm
E80010278	189.8 ppm	E80010559	358.2 ppm
E80010283	368.0 ppm	E80010330	308.3 ppm
E80010281	133.6 ppm	E80010602	104.2 ppm
E80010661	57.92 ppm	E80010279	87.01 ppm
CRM Label No.	Concentration	CRM Label No.	Concentration
CC777481	888.8 ppm	CC777483	388.8 ppm
CC777488	133.8 ppm	CC777489	158.8 ppm

Calibration Method: NDCR

For Release Use Only
Customer Signature

Approved for Release:

Rod Marsala
Rod Marsala

ISO 17025:2005 A3LA accredited. Certificate Number 3082.08
ISO 17034:2016 A3LA accredited. Certificate Number 3087.07



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



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

NUMBER 210311

EXPIRES 12/14/2023

[Signature]
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

[Signature]
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO-AD 07/16/15

1-AD-4 (12-15)

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 from expired air in Missouri.

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

