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By Tracy Crews at 11:49 am, Aug 12, 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 500279	NAME OF AGENCY Columbia PD	DATE OF INSPECTION 08/12/2022
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LOCATION OF INSTRUMENT (STREET AND CITY) 600 E. Walnut Columbia	TIME OF INSPECTION 03:22:35
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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.

<input checked="" type="checkbox"/> DIAGNOSTIC RECORD	
DATE AND TIME <u>08/12/2022 03:22:38</u>	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTER 1
<input checked="" type="checkbox"/> SAMPLE CHAMBER <u>48.7°C</u>	<input checked="" type="checkbox"/> FILTER 2
<input checked="" type="checkbox"/> BREATH TUBE <u>42.6°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

<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>INTOXIMETERS</u>	LOT # <u>AG130104</u>	EXP. DATE <u>10/28/2023</u>
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<input type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) _____	SIM. SN _____	SIM. NIST EXP DATE _____
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<input checked="" type="checkbox"/> 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.
<input checked="" type="checkbox"/> 0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE
<input type="checkbox"/> 0.08% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE
<input type="checkbox"/> 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1: 0.101	TEST 2: 0.101	TEST 3: 0.101
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<input checked="" type="checkbox"/> PERFORM R.F.I. TEST
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INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:

REFUSALS: 1	0-.04: 2	.05-.09: 0	.10-.14: 1	.15-.19: 3	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>Mark D. Hoehne</i>	PRINT FULL NAME MARK D HOEHNE
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TYPE II PERMIT NUMBER 220158	EXPIRATION DATE 06/14/2024	TELEPHONE NUMBER 573-874-7585
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RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services by mail, fax, or email



Airgas USA, LLC (LAB)  
 3600 Bernard Street  
 St. Louis, Mo. 63108  
 Ph: (314) 833-3100  
 Fax: (314) 833-7928

## Certificate of Analysis

Customer Name  
 Exclusive Supplier  
 Intodmeters, Inc.  
 2081 Craig Road  
 St. Louis, Mo 63148

Test Date: 1-Nov-2021

Lot # AG130104 Model 108

Exp Date 28-Oct-2023	Cyl. Type 108	Component Ethanol Nitrogen	Certified Concentration 0.100 ± 2% BrAC (280 ppm)
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Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010001	392.1 ppm	EB0010003	393.0 ppm
EB0010570	250.8 ppm	EB0010559	200.2 ppm
EB0010288	208.0 ppm	EB0010596	200.3 ppm
EB0010681	103.8 ppm	EB0010582	104.2 ppm
EB0010661	62.12 ppm	EB0010579	62.61 ppm

  

CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC434888	800.0 ppm	0056649	390.1 ppm
CC214503	283.0 ppm	0056662	180.2 ppm

Analytical Method: NDR

Digitally signed by: Quality Control  
 Reason: Our pin algorithm out/breaks of analysis  
 Location: St. Louis, MO, USA, LLC (Lab)  
 Date: 2021.11.01 11:00

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

*Rod Marsala*

Rod Marsala

ISO 17025:2017 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

2

**PERMIT**  
**TYPE II**  
**MARK D HOEHNE**

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

**ALCO-SENSOR IV WITH PRINTER, 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 6/14/2022

*Mike Massman*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 220158

*Paula J. Nickelson*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 6/14/2024

MO 580-0771 (9-10)

LAB-4 (R6-10)

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 HOEHNE, MARK  
 Permit No 220158  
 Date Issued 6/14/2022 Date Expires 6/14/2024

