

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

INTOX EC/IR II MAINTENANCE REPORT

REPORT #3

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 wit	hin 15 days to the	Breath Alcohol Program, DHSS.		
INTOX EC/IR II SN	NAME OF AGENCY		DATE OF INSPECTION		
12818	DI. IMIN ID		10/03/2024		
LOCATION OF INSTRUMENT (STREET AND CITY)			TIME OF INSPECTION		
10405 St. Charles Rock R St. Ann			06:37 CDT		
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.					
X DIAGNOSTIC RECORD					
X BLANK CHECK					
X FC 1 TEMP					
X SRC TEMP					
X DET TEMP					
X BT TEMP					
X ETH CHECK					
BREATH ANALYZER ACCURACY STANDARDS					
SIMULATOR SOLUTION X COMPRESSED ETHANOL-GAS MIXTURE					
X STANDARD SUPPLIER INTOXIMETERS LOT# AG309502 EXP. DATE 04/05/2025					
SIMULATOR TEMP (34°C +0.2°C)	SIM.	SN	SIM. NIST EXP	DATE	
X CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)					
Run three tests using a standard solution. 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 solution being					
used.					
X 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 0.100 g/210L	TEST 2 0.100	g/210L TEST 3 0.100 g/210L			
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:					
REFUSALS 0 004 25	.0509 0	.1014 0	.1519 0	OVER .19 0	
LIST ANY NEW PARTS AND DESCRIBE ANY ALTE	RATION OR MODIFICATION	N THAT WAS MADE TO RE	STORE THE INSTRUMENT	TO OPERATE	
SATISFACTORILY AND WITHIN RECEIVED By Tracy Crews at 10:02 am, Oct 04, 2024 LIMITS (USE OTHER SIDE IF NECESSARY).					
THE DESCRIPTION OF THE CERT		3.5万里在10万里的中心的地方在10万里。			
INSPECTING OFFICER		DD TN/II EITH VAND			
SIGNATURE 190	SONTHEIMER, ERIC				
		TELEPHONE NUMBER			
		(314) 427-8000	0		
RETURN COMPLETED REPORT TO THE:					
Breath Alcohol Program, Missouri Department of Health and Senior Services,					
by mail, fax, or e-mail					



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: 5-Apr-2023

Lot # AG309502 Model 108

Exp Date

Cyl. Type

Component

Certified Concentration 0.100 ± 2% BrAC (272 ppm)

5-Apr-2025

108

Ethanol Nitrogen

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

RGM Serial No. Concentration
EB0010581 391.8 ppm
EB0010570 259.8 ppm
EB0010285 209.0 ppm
EB0010561 103.7 ppm
EB0010681 52.22 ppm

RGM Serial No. Concentration
EB0010603 392.5 ppm
EB0010559 258.9 ppm
EB0010562 104.2 ppm
EB0010579 52.94 ppm

CRM Serial No. CC727481

Concentration 800.0 ppm 253.0 ppm CRM Serial No. CC727493 CC727498

Concentration 390.0 ppm 150.0 ppm

Analytical Method: NDIR

CC727496

Digitally signed by:Quality Control
Reason:Dry gas standard certification of analysis
Location:Airgas USA LLC (Lab)
Date:04.05.2023 17:55

Approved for Release:

Rod Marsala

ISO 17025:2017 A2LA accredited. Certificate Number 3082.06 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07