



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 500011	NAME OF AGENCY Richmond Heights Police Department	DATE OF INSPECTION 08/03/2024
LOCATION OF INSTRUMENT (STREET AND CITY) 7447 Dale Avenue, Richmond Heights MO 63117		TIME OF INSPECTION 04:20:03

CHECKLIST: Place a mark in the box by each item if found to be satisfactory and operating within established limits. (Write in observed values where determined). Unmarked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC RECORD	<input checked="" type="checkbox"/> DETECTOR
DATE AND TIME <u>08/03/2024 04:20:06</u>	<input checked="" type="checkbox"/> FILTER 1
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTER 2
<input checked="" type="checkbox"/> SAMPLE CHAMBER <u>48.8°C</u>	<input checked="" type="checkbox"/> FILTER 3
<input checked="" type="checkbox"/> BREATH TUBE <u>48.1°C</u>	<input checked="" type="checkbox"/> INTERNAL STANDARD
<input checked="" type="checkbox"/> PUMP	

BREATH ANALYZER ACCURACY STANDARDS	
<input type="checkbox"/> SIMULATOR STANDARD	<input type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE

<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>INTOXIMETERS</u>	LOT # <u>222222</u>	EXP. DATE <u>10/17/2024</u>
<input type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) _____	SIM. SN _____	SIM. NIST EXP DATE _____

<input checked="" type="checkbox"/> CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED FOR THIS 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: 0.098	TEST 2: 0.098	TEST 3: 0.098
---------------	---------------	---------------

<input checked="" type="checkbox"/> 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
-------------	----------	------------	------------	------------	-------------

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 	PRINT FULL NAME CARL GOODMAN
TYPE II PERMIT NUMBER 230208	TELEPHONE NUMBER 314-655-3630
EXPIRATION DATE 09/22/2025	

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

**RECEIVED**  
 By Tracy Crews at 12:04 pm, Aug 06, 2024



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:** 18-Oct-2022  
**Exp. Date:** 17-Oct-2024

**Lot #** AG229002 **Tank No.** 003 **Cylinder Type** 108 **Model** 108cadd

Component	Requested Concentration	Actual Concentration	Total Relative Uncertainty
Ethanol	260 ppm (0.100 BrAC )	259.2 ppm (0.0995 BrAC )	±1.5%
Nitrogen	Balance		

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010581	392.1 ppm	EB0010603	393.0 ppm
EB0010570	259.8 ppm	EB0010559	258.2 ppm
EB0010285	208.0 ppm	EB0010595	208.3 ppm
EB0010561	103.6 ppm	EB0010562	104.2 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm

CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC434668	800.0 ppm	0056649	390.1 ppm
CC234503	253.0 ppm	0056662	150.2 ppm

**Analytical Method:** NDIR

This cylinder has been analytically certified as directly traceable to NIST with a total analytical uncertainty as stated above with a confidence level of 95%, in accordance with Airgas ISO procedures. There are no significant impurities which affect the use of this calibration mixture. All concentrations are on a volume/volume basis unless otherwise noted.

Digitally signed by:Quality Control  
 Reason:Dry gas standard certification of analysis  
 Location:Airgas USA LLC (Lab)  
 Date:10.18.2022 17:00

Approved for Release:   
 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**  
**CARL GOODMAN**

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 9/22/2023

NUMBER 230208

EXPIRES 9/22/2025

*Mike Mason*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*David J. Nickelson*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

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 GOODMAN, CARL  
Permit No 230208  
Date Issued 9/22/2023 Date Expires 9/22/2025

