

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

#### INTOX DMT MAINTENANCE REPORT

REPORT #

Complete this report at the time of the regular month Complete this report whenever the instrument is ser Retain the original and send a copy within 15 days t	viced or repaired and whe	enever it is placed into		
INTOX DMT SN NAME OF AGENCY 500197 Thayer Police D	)epartment		DATE OF INSPECTION 10/27/2024	
LOCATION OF INSTRUMENT (STREET AND CITY) 102 Front St. Thayer Mo. 65791		TIME OF INSPECTION 17:11:46		
CHECKLIST: Place a mark in the box by each item values where determined). Unmarked items must be	if found to be satisfactor e corrected before using i	y or is operating within	established limits. (Write	in observed
☑ DIAGNOSTIC RECORD				
DATE AND TIME 10/27/2024 17:11:49	X	DETECTOR		
☑ PROGRAM ☑ FILTER 1				
☑ SAMPLE CHAMBER 48.8°C	SAMPLE CHAMBER 48.8°C      SAMPLE CHAMBER 48.8°C			
☑ BREATH TUBE 45.1°C ☑ FILTER 3				
☑ PUMP ☑ INTERNAL STANDARD				
BREATH ANALYZER ACCURACY STANDARDS				
		COMPRESSED ETH	ANOL-GAS MIXTURE	
STANDARD SUPPLIER GUTH	LOT # <u>23</u> :	390	EXP. DATE <u>10/17</u>	7/2025
☑ SIMULATOR TEMP (34°C ± 0.2°C) 34.0	SIM. SN M	IP2943 S	M. NIST EXP DATE <u>0</u> 5	5/15/2025
<ul> <li>         □ 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         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.044% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.044% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.044% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.044% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.044% INCLUSIVE         □ 0.04% STAN</li></ul>				
TEST 1: 0.099	EST 1: 0,099 TEST 2: 0.099		TEST 3: 0.099	
⊠ PERFORM R.F.I. TEST				
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:				
REFUSALS: 0 004: 3	0509: 0	014: 0	.1519: 0	OVER .19: 0
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFIC ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY)	CATION THAT WAS MADE TO RES	TORE THE INSTRUMENT TO C	PERATE SATISFACTORILY AND W	VITHIN
October Maintenance/Set Up Test				
INSPECTING OFFICER				
SIGNATURE LATER PLAN		RINT FULL NAME KEITH M PRICE		
TYPE II PERMIT NUMBER 220283	EXPIRATION DATE 12/21/2024	TELEPHONE NUME 417-280-14		
RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services by mail, fax, or email				



#### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 23390 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on October 18, 2023, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1207% (w/vol) ethyl alcohol. The expiration date for this lot number is October 17, 2025 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN03072301 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.



IMO 580-0771 (6-10)

### STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



LAB-4 (R6-10)

# PERMIT TYPE II

## KEITH PRICE

and operate the following breath analyzer(s):	rs, train instructors, inspect, calibrate, perform field service and repairs
IN.	TOX DMT
577.020 through 577.041, RSMo and 306.111 through 3	om a sample of expired air. Permit issued under the provisions of section 306.119 RSMo.  Wile Massacrates
DATE12/21/2022	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 220283	Daves J. Nichelson
EXPIRES 12/21/2024	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES