

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

### INTOX DMT MAINTENANCE REPORT

REPORT #1

THE TOTAL PROPERTY OF THE PROP					
Complete this report at the time of the regular montl Complete this report whenever the instrument is ser Retain the original and send a copy within 15 days t	viced or repaired and wi	henever it is placed ir			
NTOX DMT \$N NAME OF AGENCY 500292 Cabool Police Department			12/30/2024		
LOCATION OF INSTRUMENT (STREET AND CITY) 510 Cedar Street, Cabool, MO.			TIME OF INSPECTION 17:17:28		
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 12/30/2024 17:17:31					
☑ PROGRAM	☑ PROGRAM ☑ FILTER 1				
☑ SAMPLE CHAMBER 49.0°C	SAMPLE CHAMBER 49.0°C 🛛 FILTER 2				
☑ BREATH TUBE 46.0°C ☑ FILTER 3					
☑ PUMP ☑ INTERNAL STANDARD					
BREATH ANALYZER ACCURACY STANDARDS					
☑ SIMULATOR STANDARD ☐ COMPRESSED ETHANOL-GAS MIXTURE					
☑ STANDARD SUPPLIER GUTH	LOT# <u>2</u> 4	4310	EXP. DATE <u>08</u>	/27/2026	
☑ SIMULATOR TEMP (34°C ± 0.2°C) 34.0	SIM. SN <u>[</u>	DR5384	SIM. NIST EXP DATE_	08/21/2025	
<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 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.0442% INCLUSIVE         □ 0.04% STANDARD - MUST READ BETWEEN 0.0442% INCLUSIVE         □ 0.044% STANDARD - MUST READ BETWEEN 0.0442% INCLUSIVE</li></ul>					
TEST 1: 0.098	1: 0.098 TEST 2: 0.098		TEST 3: 0.098		
PERFORM R.F.I. TEST					
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:					
REFUSALS: 0 004: 0 .0	0509: 0	1014: <b>0</b>	.1519: <b>0</b>	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	STORE THE INSTRUMENT TO	OPERATE SATISFACTORILY AN	D WITHIN	
Checked within DHSS Specifications					
MODEOTING OFFICER					
INSPECTING OFFICER  SIGNATURE / ALC CITY OF THE PRINT FULL NAME					
11/11/19			LTER L DARTER  TELEPHONE NUMBER		
230016	01/31/2025	417-962-3			
RETURN COMPLETED REPORT TO THE  Breath Alcohol Program, Missouri Department of Health and Senior Services by mail, fax, or email					



### Missouri Department of Health and Senior Services

P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010 RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2966 VOICE 1-800-735-2466



Paula Nickelson **Acting Director** 

Michael L. Parson Governor

# SIMULATOR CERTIFICATION REPORT

### SIMULATOR INFORMATION

Simulator Serial Number: DR5384

Manufacturer: Guth

Model Number:

2100

Agency:

CABOOL PD

Agency Address: 510 CEDAR ST, CABOOL, MO 65689

### NIST THERMOMETER INFORMATION

Serial Number:

17KMM00690

Bias:

0.00

Uncertainty:

0.02

Date of Certification:

10/27/2023

Date of Expiration: 10/27/2024

### **ENVIRONMENTAL CONDITIONS**

The environmental conditions during testing are within the tolerances of DHSS BAP method 3.

## VERIFICATION RESULTS

Simulator Average

**NIST Average** 

Combined Uncertainty

34.00

33.98

.04

The combined uncertainty is calculated with a k=2 value.

## ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing:

8/21/2024

Certification Expiration:

8/21/2025

Simulator testing technician: R. SCHILDKNECHT

Notes on Condition: none

Deviation(s) from method: none

**DHSS BAP Scientist Approving:** 

**BRIANNA MEDRANO** 

Certification No:

DR5384\_8212024

**DHSS BAP Scientist Approving** 

Simulator Calibration Certification

Issued by Lab Manager, DHSS BAP Revision Date: 06/25/2022

Breath Alcohol Program 1903 Northwood Drive, Suite 4 Poplar Bluff, MO 63901

**DHSS BAP Document 3.6A** Revision 2 Page 1 of 1



# STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



# PERMIT TYPE II

# WALTER L. DARTER

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	of expired air. Permit issued under the provisions of sections
577.020 through 577.041, RSMo and 306.111 through 306.119 RSM	o. Mile Massur
DATE1/31/2023	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230016	Daven J. Michelson
EXPIRES 1/31/2025	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
WO 580-0771 (6-10)	LAB-4 (R6-10)

ASIA

#### 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 DARTER, WALTER

Permit No 230016

Date Issued 1/31/2023 Date Expires 1/31/2025





### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 24310 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on August 28, 2024, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1209% (w/vol) ethyl alcohol. The expiration date for this lot number is August 27, 2026 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.