



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY  
**CMI INTOXILYZER 8000 MAINTENANCE REPORT**

**RECEIVED**  
By Tracy Crews at 7:11 am, Nov 10, 2024

SPD

REPORT #2

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send one copy to Department of Health and Senior Services, and retain one copy in department file.

INSTRUMENT SERIAL NUMBER 80-007512	LOCATION OF INSTRUMENT KANSAS CITY POLICE	DATE OF INSPECTION 05/07/2024	TIME OF INSPECTION 22:52
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE	STANDARD LOT #	STANDARD EXPIRATION DATE
Air Blank	0.000	22:54	DRY	14323080A4	06/05/2025
Cal Check	0.080	22:54	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	22:55	N/A	N/A	N/A
Cal Check	0.081	22:55	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	22:56	0.080	CMI INC	
Cal Check	0.080	22:56	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	22:57	0.080		
<b>Pass</b>			CALIBRATION CHECK RESULT 2		
			0.081		
			CALIBRATION CHECK RESULT 3		
			0.080		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			1.2%	0.001	

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
Test	Result	Time	Test	g/210L	Time
Voltage/Current Test	Pass		Air Blank	0.000	22:57
RAM Test	Pass		Subject Test	RFI*	22:58
EEPROM Checksum Test	Pass		Air Blank	0.000	22:58
Real Time Clock Test	Pass		*RFI Detect		
DSP Test	Pass		<b>Pass</b>		
Analytical Stability Test	Pass				
Modem Test	Pass				
Temperature Regulation Test	Pass				

NUMBER OF REFUSALS AND SUBJECT BREATH TESTS IN EACH RANGE SINCE LAST MAINTENANCE REPORT						
REFUSALS	.00-.04	.05-.09	.10-.14	.15-.19	OVER .19	
0	0	0	0	3	2	

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).

INSTRUMENT MEETS ALL DHSS STANDARDS & GUIDELINES

<b>INSPECTING OFFICER</b>			
SIGNATURE 		PRINT NAME R. KAIGHEN	
TYPE II PERMIT NUMBER 230209	EXPIRATION DATE 09/22/2025	TELEPHONE NUMBER 8164828190	



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

2

**PERMIT  
TYPE II**

**RYAN KAIGHEN**

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, INTOXILYZER 8000**

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.

*Mike Mason*

DATE 9/22/2023  
NUMBER 230209  
EXPIRES 9/22/2025

MO 580-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Douglas J. Nicholas*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES  
LAB-4 (PR-10)

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

**INSTRUMENT OPERATOR CARD**

The named operator is authorized to operate an instrument for the determination of the alcoholic content of the breath from an individual.

Operator: KAIGHEN, RYAN  
Permit No: 230209  
Date Issued: 9/22/2023  
Date Expires: 9/22/2025




7 Eastgate Dr. • P.O. Box 790 • Jacksonville, IL 62651-0790  
217-245-2183 • Fax: 217-243-7634 • www.ilmoproducts.com

**Certificate of Analysis**

Certificate ID: 15752  
Part #: BAC105L080T  
Cylinder Size: 105L  
Lot Number: 14323080A4  
Expiration: 6/5/2025

0.080 BAC (For the calibration of instruments used to determine breath alcohol concentration)

Contents: 105 Liters @ 1000 psig 70°F (21°C)

Component:	Ethanol	Reported Concentration:	286 ppr	Accuracy (U, K=2):	+/- 0.002 BAC (0.218%)	Analytical Method:	NDIR	Distributed by:	CMI Inc.
	Nitrogen		Balance		(5.2 ppm)				316 East Ninth Street
									Owensboro, KY 42303
									Phone 866-835-0690
									www.alcoholtest.com

\*Traceable to:  
Certified Reference Material - 261.0 µmol/mol  
Ethanol in Nitrogen - Serial No. ND7017 Lot No. 08072E2

Store in dry area, away from sources of heat,  
ignition and direct sunlight. Do not allow storage  
area to exceed 52 °C (125 °F).

*Adrian*  
Specialty Gas Lab Tech

06-01-2023  
Issuance Date



Accreditation and Testing  
Accreditation 661895

This calibration results were obtained at the facility listed. The facility is subject to periodic audits and compliance with applicable regulatory requirements. The results are provided for your information only and are not intended to be used for legal or regulatory purposes. The information on this certificate is for informational purposes only. This certificate applies only to the item identified and shall not be reproduced without the facility's written consent.

ISO/IEC 17025:2017 Accredited Laboratory