

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



Michael L. Parson Governor

# **SIMULATOR CERTIFICATION REPORT**

#### SIMULATOR INFORMATION

Simulator Serial Number: SD2055

Randall W. Williams, MD, FACOG

Director

Manufacturer: Guth

Model Number: 10-4D

Agency: MISSOURI SAFETY CENTER

Agency Address: 1200 SOUTH HOLDEN ST, WARRENSBURG, MO 64093

#### NIST THERMOMETER INFORMATION

Serial Number:	17KMM00689	Bias:	0.00
Uncertainty:	0.02		

12/15/2020

**Date of Certification:** 

**Date of Expiration:** 12/15/2021

### **ENVIRONMENTAL CONDITIONS**

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

#### **VERIFICATION RESULTS**

Simulator Average 34.00 NIST Average 34.01 Combined Uncertainty .03

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

## ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing:1/19/2021Certification Expiration:1/19/2022Simulator testing technician:M. BOND

Notes on Condition: none

Deviation(s) from method: none

**DHSS BAP Scientist Approving:** 

**Certification No:** 

B. LUTMER

SD2055\_1192021

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DHSS BAP Scientist Approving

Simulator Calibration Certification Issued by Lab Manager, DHSS BAP Revision Date: 05/16/2018 Breath Alcohol Program 1903 Northwood Drive, Suite 4 Poplar Bluff, MO 63901 DHSS BAP Document 3.6A Revision 1 Page 1 of 1