MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

CMI INTOXILYZER 8000 MAINTENANCE REPORT

Complete this report in duplicate at the time of the regular monthly preventive maintenance repaired. Send one copy to Department of Health and Senior Services, and retain one cop

RECEIVED
By Carol Day at 12:37 pm, Jul 13, 2015

INSTRUMENT SERIAL NUMBER	LOCATION OF INSTRUMENT	DATE OF INSPECTION	TIME OF INSPECTION
80-005854	LIBERTY POLICE DEPT.	07/06/2015	19:55

CALIBRATION CHECK RESULTS

Test	g/210L	Time
Air Blank	0.000	19:58
Cal Check	0.100	19:58
Air Blank	0.000	19:59
Cal Check	0.100	19:59
Air Blank	0.000	20:00
Cal Check	0.100	20:00
Air Blank	0.000	20:01

Pass

CALIBRATION CHECK SUMMARY

STANDARD TYPE	STANDARD LOT #	STANDARD EXPIRATION DATE
DRY	AG319201	07/11/2015
SIM SOLUTION TYPE	SIM SOLUTION LOT NUMBER	SIM SOLUTION EXPIRATION DATE
N/A	N/A	N/A
STANDARD VALUE	STANDARD SUPPLIER	
0.100	INTOXIMETERS	

CALIBRATION CHECK RESULT 1: 0.100
CALIBRATION CHECK RESULT 2: 0.100
CALIBRATION CHECK RESULT 3: 0.100

DIFFERENCE BETWEEN MOST NEW AND OLDER	BREATH BOSTER CONCENTRATION
0.0%	0.000

DIAGNOSTIC TEST RESULTS

Voltage/Current Test	Pass
RAM Test	Pass
EEPROM Checksum Test	Pass
Real Time Clock Test	Pass
DSP Test	Pass
Analytical Stability Test	Pass
Modem Test	Pass
Temperature Regulation Test	Pass

Pass

RFI TEST RESULTS

Test	g/210L	Time
Air Blank	0.000	20:01
Subject Test	RFI*	20:01
Air Blank	0.000	20:02

*RFI Detect

Pass

NUMBER OF REFUSALS AND SUBJECT BREATH TESTS IN EACH RANGE SINCE LAST MAINTENANCE REPORT

0	0	0	0	0	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)

OPERATING WITHIN SPECIFICATIONS

INSPECTING OFFICER

SIGNATURE	PRINTED NAME	
	ROBERT D. BRATCHER	
TECHNICIAN NUMBER	CERTIFICATION DATE	TELEPHONE NUMBER
230145	08/01/2015	8164394701

Airgas

Airgas USA LLC (LAB)
3500 Bernard Street
St. Louis, Mo. 63103
Ph: (314) 533-3100
Fax: (314) 533-7023

Certificate of Analysis

Customer Name
Intoximeters, Inc
2551 Craig Road
St Louis, Mo 63146

Test Date: 11-Jul-2013

Lot # AG319201

Exp. Date	Cyl. Type	Component	Certified Concentration
11-Jul-2015	108	Ethanol	0.100 ± 2% BrAC (260 ppm)
		Nitrogen	Balance

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

Serial No.	Concentration	Serial No.	Concentration
EB0010581	391.8 ppm	EB0010603	392.5 ppm
EB0010570	259.3 ppm	EB0010569	258.9 ppm
EB0010285	209.0 ppm	EB0010595	208.9 ppm
EB0010551	103.7 ppm	EB0010562	104.9 ppm
EB0010631	52.22 ppm	EB0010578	52.94 ppm

Analytical Method: NDIR

Digitally signed by Quality Control
Date: 2013.07.11 [illegible]
Reason: Digital standard certification of analysis
Location: Airgas USA LLC (LAB)

Analyst: Rod Marsala
Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 2989.01

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

2

PERMIT

TYPE II

ROBERT D BRATCHER

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

INTOXILYZER 5000, INTOXILYZER 8000

for the determination of the alcoholic content of blood from a sample of breath as Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 8/1/2013

NUMBER 230145

EXPIRES 8/1/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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

INSTRUMENT OPERATOR CARD

Operator BRATCHER, ROBERT
Permit No 230145
Date Issued 8/1/2013 Date Expires 8/1/2015