



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 STATE PUBLIC HEALTH LABORATORY
ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED
 By Carol Day at 12:14 pm, Sep 22, 2014
 REPORT #7

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

ALCO SENSOR IV SN 105447	PRINTER SN 099.3586.790	DATE OF INSPECTION 09/17/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 231 S Main Carthage, Mo. 64836		TIME OF INSPECTION 3:04 pm

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

- DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)
- TEMPERATURE OF ALCO SENSOR (10°C - 40°C)
- PRINTER WORKING PROPERLY
- TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

- SIMULATOR SOLUTION
- COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER Intoximeters LOT # AG420204 EXP. DATE 03/21/2016

SIMULATOR TEMPERATURE (34°C ± 0.2°C) _____ SIMULATOR SN _____ SIMULATOR EXP DATE _____

- CALIBRATION CHECK – (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)
 Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)
 - 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
 - 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE
 - 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 ← .078 TEST 2 ← .078 TEST 3 ← .078

- RFI DETECTOR OPERATING

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS	(0-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
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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).
 Switched to Dry Gas operating within MODHSS Standards

INSPECTING OFFICER

SIGNATURE 	PRINT NAME Joe Houdyshell
TYPE II PERMIT NUMBER/EXPIRATION DATE 230163 08-14-2015	TELEPHONE NUMBER (417) 358-8177

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
 2875 James Boulevard
 Poplar Bluff, MO 63901



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



**PERMIT
 TYPE II**

JOSEPH L HOUDYSHELL

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

DATAMASTER, INTOXILYZER 8000, ALCO-SENSOR IV W/PRINTER

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.

DATE 8/14/2013

NUMBER 230163

EXPIRES 8/14/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

,acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)

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 HOUDYSHELL, JOSEPH
 Permit No 230163
 Date Issued 8/14/2013 Date Expires 8/14/2015

TEST RECORD 00328

Temp Date Time 210L

VOID: RFI
12 09/17/14 15:50

Subject Name
RFI Test
Subject I.D.

Operator Name, I.D. 8-14-15
Handysbell 230163
Location
231 Main

Carthage, Mo, 64836

AS IV Serial no: 105447
Version no: 532B

TEST RECORD 00325

Temp Date Time 210L

Air Blank:
09/17/14 15:45 .000
Subject Test: Man
28 09/17/14 15:45 .078

Subject Name
Test 1
Subject I.D.

Operator Name, I.D. 8-14-15
Handysbell 230163
Location
231 Main

Carthage, Mo, 64836

AS IV Serial no: 105447
Version no: 532B

TEST RECORD 00326

Temp Date Time 210L

Air Blank:
09/17/14 15:47 .000
Subject Test: Man
28 09/17/14 15:47 .078

Subject Name
Test 2
Subject I.D.

230163 8-14-15
Operator Name, I.D.
Handysbell 378
Location
231 Main

Carthage, Mo

AS IV Serial no: 105447
Version no: 532B

TEST RECORD 00327

Temp Date Time 210L

Air Blank:
09/17/14 15:49 .000
Subject Test: Man
29 09/17/14 15:49 .078

Subject Name
Test 3
Subject I.D.

230163 8-14-15
Operator Name, I.D.
Handysbell 378
Location
231 Main

Carthage, Mo, 64836