



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

RECEIVED 6/25/14-CD

REVIEWED REPORT #7
 By Carol Day at 3:37 pm, Aug 12, 2014

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 107973	PRINTER SN 099.3586.816	DATE OF INSPECTION 6/13/14
LOCATION OF INSTRUMENT (STREET AND CITY) ST JOHN PD 8944 ST CHARLES RIVER ST JOHN MO 63114		TIME OF INSPECTION 2051

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 **2051 6/13/14**

BREATH ALCOHOL ACCURACY STANDARDS

SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER **GLUTH LABORATORIES** LOT # **14030** EXP. DATE **1/20/16**

SIMULATOR TEMPERATURE (34°C ± 0.2°C) **34.0°C** SIMULATOR SN **SD3317** SIMULATOR EXP DATE **07/10/2014**

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 .101	TEST 2 .101	TEST 3 .101
--------------------	--------------------	--------------------

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	1	(.0-.04)	1	(.05-.09)	0	(.10-.14)	1	(.15-.19)	1	(OVER .19)	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).

INSPECTING OFFICER

SIGNATURE J. Manuele	PRINT NAME J. Manuele
TYPE II PERMIT NUMBER/EXPIRATION DATE 230095 05/28/2015	TELEPHONE NUMBER (314) 427-8700

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



GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-664-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14030 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on January 22, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1215% (w/vol) ethyl alcohol. The expiration date for this lot number is January 20, 2016 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 FN122211-02 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.

AS IV Serial no: 107973
Version no: 532B

TEST RECORD 00113

Temp Date Time 210L
s/

Air Blank:
06/13/14 20:55 .000
Calibration Check:
23 06/13/14 20:55 .101

Subject Name

Simulator
Subject I.D.

Operator Name, I.D.

Manuele 142
Location

8944 ST CHARLES RK RD

ST JOHN MO 63114

AS IV Serial no: 107973
Version no: 532B

TEST RECORD 00112

Temp Date Time 210L
s/

Air Blank:
06/13/14 20:53 .000
Calibration Check:
23 06/13/14 20:53 .101

Subject Name

Simulator
Subject I.D.

Operator Name, I.D.

Manuele 142
Location

8944 ST CHARLES RK RD

ST JOHN MO 63114

AS IV Serial no: 107973
Version no: 532B

TEST RECORD 00111

Temp Date Time 210L
s/

Air Blank:
06/13/14 20:51 .000
Calibration Check:
22 06/13/14 20:51 .101

Subject Name

Simulator
Subject I.D.

Operator Name, I.D.

Manuele 142
Location

8944 ST CHARLES RK RD

ST JOHN MO 63114

AS IV Serial no: 107973
Version no: 532B

TEST RECORD 00114

Temp Date Time 210L
s/

UID: RPI
12 06/13/14 20:57

Subject Name

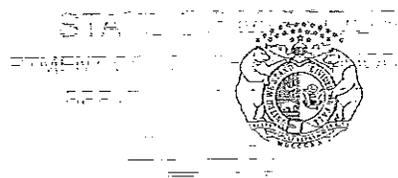
Simulator
Subject I.D.

Operator Name, I.D.

Manuele 142
Location

8944 ST CHARLES RK RD

ST JOHN MO 63114



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

2

**PERMIT
TYPE II**

VALERIE MANUELE

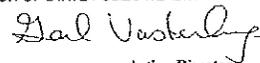
is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

ALCO-SENSOR IV 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 05/28/2013
NUMBER 230095
EXPIRES 05/28/2015



DIRECTOR OF STATE PUBLIC HEALTH LABORATORY


Acting Director
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES