MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED
By Carol Day at 2:12 pm, May 14, 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	PRINTER SN	DATE OF INSPECTION
108390	099.3586.811	05/07/2014

LOCATION OF INSTRUMENT (STREET AND CITY)	TIME OF INSPECTION
2501 W. Mechanic, Harrisonville MO 64701	8:55 am

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 # AG402002 EXP. DATE 01/20/2016

☐ 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 ☛ .099	TEST 2 ☛ .098	TEST 3 ☛ .097

☑ 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)
2	6		1	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).

INSPECTING OFFICER

SIGNATURE	PRINT NAME
▸ [signature] #655	Deputy Gary Crow

TYPE II PERMIT NUMBER/EXPIRATION DATE	TELEPHONE NUMBER
240001 01-03-2016	(816) 380-5200

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

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER
services provided on a nondiscriminatory basis

AS IV Serial no: 108390
Version no: 532B

TEST RECORD 00098

Temp	Date	Time	g/ 210L
Air Blank:			
	05/07/14	08:07	.000
Calibration Check:			
21	05/07/14	08:07	.099

Subject Name

Subject I.D.

Operator Name, I.D.

Dep. A. Crow 240001

Location

AS IV Serial no: 108390
Version no: 532B

TEST RECORD 00099

Temp	Date	Time	g/ 210L
Air Blank:			
	05/07/14	08:12	.000
Calibration Check:			
22	05/07/14	08:12	.098

Subject Name

Subject I.D.

Operator Name, I.D.

Dep. A. Crow 240001

Location

AS IV Serial no: 108390
Version no: 532B

TEST RECORD 00100

Temp	Date	Time	g/ 210L
Air Blank:			
	05/07/14	08:17	.000
Calibration Check:			
23	05/07/14	08:17	.097

Subject Name

Subject I.D.

Operator Name, I.D.

Dep. Crow 240001

Location

AS IV Serial no: 1083
Version no: 532B

TEST RECORD 00101

Temp	Date	Time	2
VOID: RFI			
12	05/07/14	08:19	

Subject Name

Subject I.D.

Operator Name, I.D.

Dep. Crow 240001

Location

Airgas USA LLC (LAB)
3500 Bernard Street
St. Louis, Mo. 63103
Ph: (314) 533-3100
Fax: (314) 533-7328

Certificate of Analysis

Customer Name
Intoximeters, Inc.
2081 Craig Road
St. Louis, Mo 63146

Test Date: 21-Jan-2014

Lot # AG402002

Exp. Date	Cyl. Type	Component	Certified Concentration
20-Jan-2016	108	Ethanol	0.100 ± 2% BrAC (272 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	259.8 ppm	EB0010559	258.9 ppm
EB0010285	209.0 ppm	EB0010595	208.9 ppm
EB0010561	103.7 ppm	EB0010562	104.9 ppm
EB0010681	52.22 ppm	EB0010579	52.94 ppm

Analytical Method: **NDIR**

Digitally signed by Quality Control
Date: 2014.01.21 13:44:31 -06:00
Reason: Dry gas standard certification of analysis
Location: Airgas USA LLC (Lab)

Analyst: 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

GARY M CROW

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 5000

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 **1/3/2014**

NUMBER **240001**

EXPIRES **1/3/2016**

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 CROW, GARY
Permit No 240001
Date Issued 1/3/2014 **Date Expires** 1/3/2016