



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

REPORT #7

RECEIVED
 By Carol Day at 11:22 am, Jul 20, 2015

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

ALCO SENSOR IV SN <i>102461</i>	PRINTER SN <i>096.3580.922</i>	DATE OF INSPECTION <i>07/13/15</i>
LOCATION OF INSTRUMENT (STREET AND CITY) <i>106 Progress Drive Sullivan MO 63080</i>		TIME OF INSPECTION <i>1345</i>

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) *23°C*
- PRINTER WORKING PROPERLY
- TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

- SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER *Cuth Labs* LOT # *14220* EXP. DATE *09/24/16*

SIMULATOR TEMPERATURE (34°C ± 0.2°C) *34°C* SIMULATOR SN *SD3322* SIMULATOR EXP DATE *2/23/16*

- 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 *.099%*

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

Instrument is operating within D.O.H. specifications.

INSPECTING OFFICER	
SIGNATURE <i>Gregory A. West</i>	PRINT NAME <i>Gregory A. West</i>
TYPE II PERMIT NUMBER/EXPIRATION DATE <i>250940 06/15/17</i>	TELEPHONE NUMBER <i>573-468-8001</i>

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: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14220 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on September 25, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1209% (w/vol) ethyl alcohol. The expiration date for this lot number is September 24, 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 FN08051301 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 IU Serial no: 182461
Version no: 5828

TPST RECORD 00200

Temp Date Time 210L s/

U01D: 001

12 07/13/15 13:50

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IU Serial no: 182461
Version no: 5828

TPST RECORD 00199

Temp Date Time 210L s/

Air Blank:

07/13/15 13:56 .000

Calibration Check:

24 07/13/15 13:56 .099

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IU Serial no: 182461
Version no: 5828

TPST RECORD 00198

Temp Date Time 210L s/

Air Blank:

07/13/15 13:52 .000

Calibration Check:

24 07/13/15 13:52 .099

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IU Serial no: 182461
Version no: 5828

TPST RECORD 00197

Temp Date Time 210L s/

Air Blank:

07/13/15 13:50 .000

Calibration:

23 07/13/15 13:50 .099

Subject Name

Subject I.D.

Operator Name, I.D.

Location



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

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PERMIT
TYPE II
GREGORY A WEST

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

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 6/15/2015

NUMBER 250140

EXPIRES 6/15/2017

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 WEST, GREGORY
 Permit No 250140
 Date Issued 6/15/2015 Date Expires 6/15/2017