



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

RECEIVED
 REPORT #7
 By Carol Day at 10:34 am, Apr 27, 2015

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 102470	PRINTER SN 086.3419.040	DATE OF INSPECTION 04/23/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 10405 MO-180 St. Ann		TIME OF INSPECTION 12:06 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 Guth Laboratories LOT # 14200 EXP. DATE 08/05/2016
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN DR2856 SIMULATOR EXP DATE 07/15/2015

- 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 .098	TEST 2 .099	TEST 3 .099
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- 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)	0
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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).

Operating within DHSS specifications

INSPECTING OFFICER

SIGNATURE 	PRINT NAME Shawn Thiemann
TYPE II PERMIT NUMBER/EXPIRATION DATE 240401 11/13/2016	TELEPHONE NUMBER (314) 427-8000

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

AS IU Serial no: 102470
Version no: 532B

TEST RECORD 00146 %
Temp Date Time 210L

RFI TEST

00146 RFI
12 04/23/15 12:14

Subject Name
Subject I.D.
Operator Name I.D.
Location

AS IU Serial no: 102470
Version no: 532B

TEST RECORD 00145 %
Temp Date Time 210L

Subject Name
Subject I.D.
Operator Name I.D.
Location

AS IU Serial no: 102470
Version no: 532B

TEST RECORD 00144 %
Temp Date Time 210L

Subject Name
Subject I.D.
Operator Name I.D.
Location

AS IU Serial no: 102470
Version no: 532B

TEST RECORD 00143 %
Temp Date Time 210L

Subject Name
Subject I.D.
Operator Name I.D.
Location

AS IU Serial no: 102470
Version no: 532B

TEST RECORD 00142 %
Temp Date Time 210L

Subject Name
Subject I.D.
Operator Name I.D.
Location

AS IU Serial no: 102470
Version no: 532B

TEST RECORD 00141 %
Temp Date Time 210L

Subject Name
Subject I.D.
Operator Name I.D.
Location



Simulator Calibration Report

This calibration report is to certify the alcohol reference simulator listed below has been examined and tested using standards traceable to the National Institute of Standards and Technology (NIST) in accordance with the standards set by the Missouri Department of Health and Senior Services Rules and Regulations:
19 CSR 25-30.051 (4).



Technician Printed Name: Donald D. DeBoard

Technician Signature: Donald D. DeBoard

Date: 07/15/2014

Contact: Missouri Safety Center
Breath-Alcohol Instrument Training Program
660-543-4834



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

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**PERMIT
 TYPE II**

SHAWN J THIEMANN

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, INTOX EC/IR II

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 11/13/2014

NUMBER 240401

EXPIRES 11/13/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

,acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES



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 **14200** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **August 6, 2014**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1213%** (w/vol) ethyl alcohol. The expiration date for this lot number is **August 5, 2016** at 11:59 PM.

When used in a calibrated Simulator, operating at $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L \pm 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.