



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 2:08 pm, Aug 31, 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 108266	PRINTER SN 099.3586.822	DATE OF INSPECTION 08/27/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 600 E WALNUT COLUMBIA		TIME OF INSPECTION 6:15 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 # AG505101 EXP. DATE 02/20/2017

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 .100

TEST 2 .099

TEST 3 .098

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	4	(0-.04)	1	(.05-.09)	3	(.10-.14)	3	(.15-.19)	1	(OVER .19)	2
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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).

REPLACED BATTERY ON 8/27/15.

**INSPECTING OFFICER**

SIGNATURE

2113

PRINT NAME

SPRIT STEVENS

TYPE II PERMIT NUMBER/EXPIRATION DATE

344517 11/17/16

TELEPHONE NUMBER

(573) 874-7652

**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



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:** 23-Feb-2015

**Lot #** AG505101

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
20-Feb-2017	108	Ethanol Nitrogen	0.100 ± 2% BrAC (272 ppm) Balance

**Certification Traceable to N.I.S.T. RGM Ethanol Standards:**

<u>Serial No.</u>	<u>Concentration</u>	<u>Serial No.</u>	<u>Concentration</u>
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: 2015.02.23 15:38:13 -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**

AS IV Serial no: 108266  
Version no: 532B

TEST RECORD 00482

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
08/27/15 18:10 .000  
Calibration Check:  
22 08/27/15 18:10 .100

Subject Name  
Cal 1  
Subject I.D.

Operator Name, I.D.  
S. Stevens 2113  
Location  
CPD

AS IV Serial no: 108266  
Version no: 532B

TEST RECORD 00483

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
08/27/15 18:12 .000  
Calibration Check:  
23 08/27/15 18:12 .099

Subject Name  
Cal 2  
Subject I.D.

Operator Name, I.D.  
S. Stevens 2113  
Location  
CPD

AS IV Serial no: 108266  
Version no: 532B

TEST RECORD 00484

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
08/27/15 18:14 .000  
Calibration Check:  
23 08/27/15 18:14 .098

Subject Name  
Cal 3  
Subject I.D.

Operator Name, I.D.  
S. Stevens 2113  
Location  
CPD

AS IV Serial no: 108266  
Version no: 532B

TEST RECORD 00485

Temp Date Time <sup>s/</sup> 210L

VOID: RFI  
12 08/27/15 18:15

Subject Name  
RFI  
Subject I.D.

Operator Name, I.D.  
S. Stevens 2113  
Location  
CPD