



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

RECEIVED
 By Carol Day at 2:40 pm, Sep 07, 2016

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 026999	PRINTER SN 13.1891.0969	DATE OF INSPECTION 09-03-2016
LOCATION OF INSTRUMENT (STREET AND CITY) 501 FARAON ST. JOSEPH		TIME OF INSPECTION 0930

CHECKLIST: Place a mark in the box by each item it 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 (1 O-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 # AG619401 EXP. DATE 07-12-2018
- 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 - .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	2	(.0-.04)	0	(.05-.09)	5	(.10-.14)	3	(.15-.19)	1	(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).

INSPECTING OFFICER	
SIGNATURE 	PRINT NAME SCOTT GARY
TYPE II PERMIT NUMBER/EXPIRATION DATE 250127 06-08-17	TELEPHONE NUMBER 816-271-5359

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: 026999
Version no: 7409

TEST RECORD 01826

Temp Date Time 210L
g/

Void: RFI
12 09/03/16 09:30

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IU Serial no: 026999
Version no: 7409

TEST RECORD 01827

Temp Date Time 210L
g/

Air Blank:
09/03/16 09:43 .000
Calibration Check:
21 09/03/16 09:43 .100

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IU Serial no: 026999
Version no: 7409

TEST RECORD 01828

Temp Date Time 210L
g/

Air Blank:
09/03/16 09:46 .000
Calibration Check:
21 09/03/16 09:46 .099

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IU Serial no: 026999
Version no: 7409

TEST RECORD 01829

Temp Date Time 210L
g/

Air Blank:
09/03/16 09:51 .000
Calibration Check:
22 09/03/16 09:51 .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**

SCOTT GARY

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

DATAMASTER, INTOX EC/IR II, 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 6/8/2015

NUMBER 250127

EXPIRES 6/8/2017

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 GARY, SCOTT
Permit No 250127
Date Issued 6/8/2015 Date Expires 6/8/2017