

August 2016



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 3:29 pm, Aug 12, 2016

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

ALCO SENSOR IV SN 097424	PRINTER SN 096.3580.984	DATE OF INSPECTION 08/08/2016
LOCATION OF INSTRUMENT (STREET AND CITY) 1019 Schroeder Creek Blvd., Wentzville, MO 63385		TIME OF INSPECTION 2:13 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 # AG533902 EXP. DATE 12/05/2017
- 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 ← 0.097	TEST 2 ← 0.97	TEST 3 ← 0.97
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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	5	(0-.04)	0	(.05-.09)	1	(.10-.14)	1	(.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).

True-Cal Reading: 0.098

INSPECTING OFFICER

SIGNATURE 	PRINT NAME Matthew J. Schneider
TYPE II PERMIT NUMBER/EXPIRATION DATE 260006 / January 6, 2018	TELEPHONE NUMBER (636) 327-5105

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 IV Serial no: 097424
Version no: 532B

TEST RECORD 00536

Temp Date Time ^{s/} 210L

Air Blank:
08/08/16 14:13 .000
Calibration Check:
24 08/08/16 14:13 .097

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 097424
Version no: 532B

TEST RECORD 00537

Temp Date Time ^{s/} 210L

Air Blank:
08/08/16 14:15 .000
Calibration Check:
25 08/08/16 14:15 .097

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 097424
Version no: 532B

TEST RECORD 00538

Temp Date Time ^{s/} 210L

Air Blank:
08/08/16 14:16 .000
Calibration Check:
25 08/08/16 14:16 .097

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 097424
Version no: 532B

TEST RECORD 00539

Temp Date Time ^{s/} 210L

VOID: RFI
12 08/08/16 14:17

Subject Name

Subject I.D.

Operator Name, I.D.

Location



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



**PERMIT
TYPE II**

MATTHEW J SCHNEIDER

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 1/6/2016

NUMBER 260006

EXPIRES 1/6/2018

MO 580-0773 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 **SCHNEIDER, MATTHEW**
Permit No **260006**
Date Issued **1/6/2016** Date Expires **1/6/2018**