



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY

**ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT**

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 102456	PRINTER SN 096.3580.982	DATE OF INSPECTION 04/30/2016
LOCATION OF INSTRUMENT (STREET AND CITY) 600 E. WALNUT, COLUMBIA (COLUMBIA PD)		TIME OF INSPECTION 6:44 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 INTOXIMETER 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  .096	TEST 2  .096	TEST 3  .096
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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)	0	(.10-.14)	3	(.15-.19)	3	(OVER .19)	1
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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 NATHAN TURNER
TYPE II PERMIT NUMBER/EXPIRATION DATE 250099 05/11/2017	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

**Exp. Date**

20-Feb-2017

**Cyl. Type**

108

**Component**

Ethanol  
Nitrogen

**Certified Concentration**

0.100 ± 2% BrAC (272 ppm)  
Balance

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

**Serial No.**

EB0010581  
EB0010570  
EB0010285  
EB0010561  
EB0010681

**Concentration**

391.8 ppm  
259.8 ppm  
209.0 ppm  
103.7 ppm  
52.22 ppm

**Serial No.**

EB0010603  
EB0010559  
EB0010595  
EB0010562  
EB0010579

**Concentration**

392.5 ppm  
258.9 ppm  
208.9 ppm  
104.9 ppm  
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: 182456  
Version no: 532B

TEST RECORD 00079

Temp Date Time <sup>9/</sup> 210L

Air Blank:  
04/30/16 18:44 .000  
Subject Test: Man  
22 04/30/16 18:44 .096

Subject Name

Test

Subject I.D.

Operator Name, I.D.

Turner 1985

Location

CPD

AS IV Serial no: 182456  
Version no: 532B

TEST RECORD 00081

Temp Date Time <sup>9/</sup> 210L

Air Blank:  
04/30/16 18:47 .000  
Calibration Check:  
24 04/30/16 18:47 .096

Subject Name

Test

Subject I.D.

Operator Name, I.D.

Turner 1985

Location

CPD

AS IV Serial no: 182456  
Version no: 532B

TEST RECORD 00083

Temp Date Time <sup>9/</sup> 210L

VOID: RTI  
12 04/30/16 18:50

Subject Name

Test

Subject I.D.

Operator Name, I.D.

Turner 1985

Location

CPD

AS IV Serial no: 182456  
Version no: 532B

TEST RECORD 00082

Temp Date Time <sup>9/</sup> 210L

Air Blank:  
04/30/16 18:49 .000  
Calibration Check:  
24 04/30/16 18:49 .096

Subject Name

Test

Subject I.D.

Operator Name, I.D.

Turner 1985

Location

CPD