



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

**RECEIVED**  
By Carol Day at 9:00 am, Feb 02, 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 <u>102461</u>	PRINTER SN <u>096.3580922</u>	DATE OF INSPECTION <u>01/20/16</u>
LOCATION OF INSTRUMENT (STREET AND CITY) <u>106 Progress Drive Sullivan, MO 63080</u>		TIME OF INSPECTION <u>1315</u>

**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) 25°C

PRINTER WORKING PROPERLY

TIME AND DATE DISPLAYING PROPERLY

**BREATH ALCOHOL ACCURACY STANDARDS**

SIMULATOR SOLUTION  COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER Guth Labs LOT # 15120 EXP. DATE 04/29/17

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 31°C SIMULATOR SN S03322 SIMULATOR EXP DATE 02/23/16

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 • .099% TEST 2 • .100% TEST 3 • .099%

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-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
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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).

*Instrument is operating within O.O.H. specifications.*

**INSPECTING OFFICER**

SIGNATURE <u>Gregory A. West</u>	PRINT NAME <u>Gregory A. West</u>
TYPE II PERMIT NUMBER/EXPIRATION DATE <u>25040 / 06/15/17</u>	TELEPHONE NUMBER <u>573-468-8001</u>

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



## 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 15120 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on May 4, 2015, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1209% (w/vol) ethyl alcohol. The expiration date for this lot number is April 29, 2017 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 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 FN08051301 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.*

AS 1U Serial) not 182461  
Version not 582B

TRST RPTNRD 00276

Temp Date Time 210L %/

Air Diamo:

01/28/16 13:26 .000

Subject Test: Man

25 01/28/16 13:26 .099

Subject Name:

Subject I.D.

Operator Name: J.M.

Location

AS 1U Serial) not 182461  
Version not 582B

TRST RPTNRD 00277

Temp Date Time 210L %/

Air Diamo:

01/28/16 13:29 .000

Subject Test: Man

25 01/28/16 13:29 .100

Subject Name:

Subject I.D.

Operator Name: J.M.

Location

AS 1U Serial) not 182461  
Version not 582B

TRST RPTNRD 00278

Temp Date Time 210L %/

Air Diamo:

01/28/16 13:27 .000

Subject Test: Man

25 01/28/16 13:27 .099

Subject Name:

Subject I.D.

Operator Name: J.M.

Location

AS 1U Serial) not 182461  
Version not 582B

TRST RPTNRD 00279

Temp Date Time 210L %/

007M NTJ

12 01/28/16 13:29

Subject Name:

Subject I.D.

Operator Name: J.M.

Location



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

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**PERMIT**  
**TYPE II**  
**GREGORY A WEST**

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**

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 6/15/2015

NUMBER 250140

EXPIRES 6/15/2017

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 WEST, GREGORY  
 Permit No 250140  
 Date Issued 6/15/2015 Date Expires 6/15/2017