



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

RECEIVED

By Carol Day at 10:57 am, Jan 08, 2016

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 108393	PRINTER SN 099.3586.801	DATE OF INSPECTION 01/05/2016
LOCATION OF INSTRUMENT (STREET AND CITY) 14301 S. OUTER FORTY CHESTERFIELD, MO		TIME OF INSPECTION 1:17 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 # AG533901 EXP. DATE 08/05/2017

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 .097	TEST 2 .097	TEST 3 .097
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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	0	(0-.04)	1	(.05-.09)	1	(.10-.14)	1	(.15-.19)	0	(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).

CALIBRATED TO .098 FOR ELEVATION PURPOSES

INSPECTING OFFICER

SIGNATURE 	PRINT NAME DONALD M. JACQUIN
TYPE II PERMIT NUMBER/EXPIRATION DATE 250318 12/28/2017	TELEPHONE NUMBER (314) 677-9921

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

ALCO-SENSOR IV MONTHLY MAINTENANCE REPORT

JANUARY 2016

UNIT #108393

PRINTER #099.3586.801

AS IV Serial no: 108393
Version no: 532B

TEST RECORD 00199
Temp Date Time 210L

Air Blank: 01/05/16 13:20 .000
Calibration Check: 28 01/05/16 13:20 .097

Subject Name TEST #1
Subject I.D. N/A

Operator Name, I.D. JACQUIN 250318
Location MODOT

14301 S. OUTER FORTY

AS IV Serial no: 108393
Version no: 532B

TEST RECORD 00200
Temp Date Time 210L

Air Blank: 01/05/16 13:21 .000
Calibration Check: 28 01/05/16 13:21 .097

Subject Name TEST #2
Subject I.D. N/A

Operator Name, I.D. JACQUIN 250318
Location MODOT

14301 S. OUTER FORTY

AS IV Serial no: 108393
Version no: 532B

TEST RECORD 00201
Temp Date Time 210L

Air Blank: 01/05/16 13:23 .000
Calibration Check: 28 01/05/16 13:23 .097

Subject Name TEST #3
Subject I.D. N/A

Operator Name, I.D. JACQUIN 250318
Location MODOT

14301 S. OUTER FORTY

AS IV Serial no: 108393
Version no: 532B

TEST RECORD 00198
Temp Date Time 210L

Air Blank: 01/05/16 13:17 .000
Calibration: 27 01/05/16 13:17 .098

Subject Name CAL
Subject I.D. N/A

Operator Name, I.D. JACQUIN 250318
Location MODOT

14301 S. OUTER FORTY

AS IV Serial no: 108393
Version no: 532B

TEST RECORD 00202

Temp Date Time 210L

VOID: RFI
12 01/05/16 13:54

Subject Name

RFI

Subject I.D.

N/A

Operator Name, I.D.

JACQUIN 250318

Location

MODOT

14301 S. OUTER FORTY