



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 RCSO109345	PRINTER SN 99.3586.999	DATE OF INSPECTION 06/26/2016
LOCATION OF INSTRUMENT (STREET AND CITY) 2319 GREEN ST CENTERVILLE (REYNOLDS COUNTY SO)		TIME OF INSPECTION 1:34 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 # AG601303 EXP. DATE 01/13/2018

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 = .080

TEST 2 = .079

TEST 3 = .079

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)

1

(.10-.14)

2

(.15-.19)

(OVER .19)

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 *SGT. Randall Martin* 5705

PRINT NAME
SGT. RANDALL MARTIN

TYPE II PERMIT NUMBER/EXPIRATION DATE
260227 / 06/01/2018

TELEPHONE NUMBER
(573) 648-2491

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
Exclusive Supplier
Intoximeters, Inc.
2081 Craig Road
St. Louis, Mo 63146

Test Date: 13-Jan-2016

Lot # AG601303 Model 108cadd

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
13-Jan-2018	108	Ethanol	0.080 ± 0.002 BrAC (218 ppm)
		Nitrogen	Balance

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

<u>Serial No.</u>	<u>Concentration</u>	<u>Serial No.</u>	<u>Concentration</u>
EB0010581	391.8 ppm	EB0010603	392.5 ppm
EB0010570	259.8 ppm	EB0010559	258.9 ppm
EB0010285	209.0 ppm	EB0010595	208.9 ppm
EB0010561	103.7 ppm	EB0010562	104.9 ppm
EB0010681	52.22 ppm	EB0010579	52.94 ppm

Analytical Method: NDIR

Digitally signed by Quality Control
Date: 2016.01.13 17:23:00 -05:00
Reason: Dry gas standard certification of analysis
Location: Airgas USA LLC (Lab)

Analyst: Rod Marsala
Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 2989.01

AS IU Serial no: 109345
Version no: 532B

TEST RECORD 00290

Temp Date Time ^{9/} 210L

Air Blank:
06/26/16 13:36 .000
Calibration Check:
24 06/26/16 13:36 .079

Subject Name
Monday Test
Subject I.D.

Operator Name, I.D.
Martin 5508
Location
KCSO

AS IU Serial no: 109345
Version no: 532B

TEST RECORD 00268

Temp Date Time ^{9/} 210L

Air Blank:
06/26/16 13:34 .000
Calibration Check:
22 06/26/16 13:34 .080

Subject Name
Monday Test
Subject I.D.

Operator Name, I.D.
Martin 5508
Location
KCSO

AS IU Serial no: 109345
Version no: 532B

TEST RECORD 00291

Temp Date Time ^{9/} 210L

VOID: RFI
12 06/26/16 13:37

Subject Name
Monday Test
Subject I.D.

Operator Name, I.D.
Martin 5508
Location
KCSO

AS IU Serial no: 109345
Version no: 532B

TEST RECORD 00289

Temp Date Time ^{9/} 210L

Air Blank:
06/26/16 13:35 .000
Calibration Check:
23 06/26/16 13:35 .079

Subject Name
Monday Test
Subject I.D.

Operator Name, I.D.
Martin 5508
Location
KCSO



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



PERMIT
TYPE II

RANDALL E MARTIN

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 308.111 through 308.119 RSMo.

DATE 6/1/2016

NUMBER 260227

EXPIRES 6/1/2018

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 590-0771 (6-10)

LAD-4 (RS-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 MARTIN, RANDALL
Permit No 260227
Date Issued 6/1/2016 Date Expires 6/1/2018