



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED

By Tracy Crews at 9:48 am, Mar 27, 2023

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 03791	NAME OF AGENCY Hazelwood Police Department	DATE OF INSPECTION 03/27/2023
LOCATION OF INSTRUMENT (STREET AND CITY) 415 Elm Grove Lane / Hazelwood, Missouri 63042		TIME OF INSPECTION 7:00 am

**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 Guth Laboratories LOT # 22080 EXP. DATE 03/07/2024

☒ SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIM. SN MP6029 SIM. NIST EXP DATE 07/11/2023

☒ 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 .10

TEST 2 .10

TEST 3 .10

☒ 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)	0	(.05-.09)	0	(.10-.14)	0	(.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).

BA Maintenance, March 2023  
Simulator Solution Bottle #394

**INSPECTING OFFICER**

SIGNATURE

PRINT NAME  
Michael A. Monticelli

TYPE II PERMIT NUMBER/EXPIRATION DATE  
220234 / 09/14/2024

TELEPHONE NUMBER  
(314) 838-5000

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

AS IV Serial no: 030791  
Version no: 532B

TEST RECORD 00846

Temp Date Time 210L

Air Blank:

03/27/23 06:36 .000

Calibration Check:

20 03/27/23 06:36 .100

Subject Name

TEST #1

Subject I.D.

Operator Name, I.D.

Montreux 220234

Location

Hazelwood BAT Van

AS IV Serial no: 030791  
Version no: 532B

TEST RECORD 00847

Temp Date Time 210L

Air Blank:

03/27/23 06:38 .000

Calibration Check:

21 03/27/23 06:38 .100

Subject Name

TEST #2

Subject I.D.

Operator Name, I.D.

Montreux 220234

Location

Hazelwood BAT Van

AS IV Serial no: 030791  
Version no: 532B

TEST RECORD 00848

Temp Date Time 210L

Air Blank:

03/27/23 06:40 .000

Calibration Check:

22 03/27/23 06:40 .100

Subject Name

TEST #3

Subject I.D.

Operator Name, I.D.

Montreux 220234

Location

Hazelwood BAT Van

AS IV Serial no: 030791  
Version no: 532B

TEST RECORD 00849

Temp Date Time 210L

VOID: RFI

12 03/27/23 06:41

Subject Name

TEST #4

Subject I.D.

RFI TEST

Operator Name, I.D.

Montreux 220234

Location

Hazelwood BAT Van

AS IV Serial no: 030791  
Version no: 532B

TEST RECORD 00850

Temp Date Time 210L

Air Blank:

03/27/23 06:43 .000

Subject Test: Auto

24 03/27/23 06:43 .000

Subject Name

TEST #5

Subject I.D.

BLANK TEST

Operator Name, I.D.

Montreux 220234

Location

Hazelwood BAT Van



Missouri Department of Health and Senior Services  
P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010  
RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2966 VOICE 1-800-735-2466



Paula Nickelson  
Acting Director

Michael L. Parson  
Governor

## SIMULATOR CERTIFICATION REPORT

### SIMULATOR INFORMATION

Simulator Serial Number: MP6029 Manufacturer: Guth  
Model Number: 12V500  
Agency: HAZELWOOD PD  
Agency Address: 415 ELM GROVE LANE, HAZELWOOD, MO 63042

### NIST THERMOMETER INFORMATION

Serial Number: 17KMM00690 Bias: 0.01  
Uncertainty: 0.02  
Date of Certification: 11/10/2021 Date of Expiration: 11/10/2022

### ENVIRONMENTAL CONDITIONS

The environmental conditions during testing are within the tolerances of DHSS BAP method 3.

### VERIFICATION RESULTS

<u>Simulator Average</u>	<u>NIST Average</u>	<u>Combined Uncertainty</u>
34.00	34.01	.03

The combined uncertainty is calculated with a k=2 value.

### ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 7/11/2022  
Certification Expiration: 7/11/2023  
Simulator testing technician: M. BOND

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving: BRIANNA MEDRANO  
Certification No: MP6029\_7112022

X

*Brianna Medrano*

DHSS BAP Scientist Approving

Simulator Calibration Certification  
Issued by Lab Manager, DHSS BAP  
Revision Date: 06/25/2022

Breath Alcohol Program  
1903 Northwood Drive, Suite 4  
Poplar Bluff, MO 63901

DHSS BAP Document 3.6A  
Revision 2  
Page 1 of 1



## GUTH LABORATORIES, INC.

890 NORTH 67th STREET • HARRISBURG, PA 17114-4811 • TELEPHONE: 717-364-5470

### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 22080 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 9, 2022, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1214% (w/vol) ethyl alcohol. The expiration date for this lot number is March 7, 2024 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 Certified Reference Standard lot number FNA3052002 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.



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

2

**PERMIT  
TYPE II**

**MICHAEL A. MONTICELLI**

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 9/14/2022

NUMBER 220234

EXPIRES 9/14/2024

*Mike Massman*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*David J. Nickelson*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (9-10)

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 MONTICELLI, MICHAEL  
Permit No 220234  
Date Issued 9/14/2022 Date Expires 9/14/2024

