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By Tracy Crews at 8:29 am, Apr 17, 2023



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 097412	NAME OF AGENCY Kansas City Police Department	DATE OF INSPECTION 04/06//2023
LOCATION OF INSTRUMENT (STREET AND CITY) 9701 MARION PARK DR, KANSAS CITY		TIME OF INSPECTION 2314 hours

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 # AG132803 EXP. DATE 11/24/2023

SIMULATOR TEMPERATURE (34°C ± 0.2°C) _____ SIM. SN _____ SIM. NIST 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	0.080	TEST 2	0.080	TEST 3	0.080
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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	11	(0-.04)	1	(.05-.09)	4	(.10-.14)	1	(.15-.19)	1	(OVER .19)	5
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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 meets all DOHSS standards and guidelines.

INSPECTING OFFICER

SIGNATURE

PRINT NAME **Douglas Davidson**

TYPE II PERMIT NUMBER/EXPIRATION DATE **230065 04/06/2025**

TELEPHONE NUMBER **() 816-234-5000**

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: 097412
Version no: 532B

TEST RECORD 00780

Temp	Date	Time	^{a/} 210L
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Air Blank:
04/06/23 23:14 .000
Calibration Check:
23 04/06/23 23:14 .080

Subject Name

Test # 1

Subject I.D.

Operator Name, I.D.

Davidson 5646

Location

230065 04/06/2025

AS IV Serial no: 097412
Version no: 532B

TEST RECORD 00781

Temp	Date	Time	^{a/} 210L
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Air Blank:
04/06/23 23:16 .000
Calibration Check:
24 04/06/23 23:16 .080

Subject Name

Test # 2

Subject I.D.

Operator Name, I.D.

Davidson 5646

Location

230065 04/06/2025

AS IV Serial no: 097412
Version no: 532B

TEST RECORD 00782

Temp	Date	Time	^{a/} 210L
------	------	------	--------------------

Air Blank:
04/06/23 23:17 .000
Calibration Check:
25 04/06/23 23:17 .080

Subject Name

Test # 3

Subject I.D.

Operator Name, I.D.

Davidson 5646

Location

230065 04/06/2025

AS IV Serial no: 097412
Version no: 532B

TEST RECORD 00783

Temp	Date	Time	^{a/} 210L
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VOID: RFI
12 04/06/23 23:19

Subject Name

RFI Test

Subject I.D.

Operator Name, I.D.

Davidson 5646

Location

230065 04/06/2025

Airgas

Airgas USA LLC (LAB)
3500 Bernard Street
St. Louis, Mo. 63103
Ph: (314) 533-3100
Fax: (314) 533-7328

Certificate of Analysis

Test Date: 29-Nov-2021

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

Lot # AG132803 Model 108

Exp Date
24-Nov-2023

Cyl. Type
108

Component
Ethanol
Nitrogen

Certified Concentration
0.082 ± 0.002 BxAc (223 ppm)

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010581	392.1 ppm	EB0010603	393.0 ppm
EB0010570	259.8 ppm	EB0010599	288.2 ppm
EB0010285	208.0 ppm	EB0010595	208.3 ppm
EB0010561	103.6 ppm	EB0010562	104.2 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm

CRM Serial No.	Concentration
CC434568	800.0 ppm
CC234593	253.0 ppm

CRM Serial No.	Concentration
0056649	390.1 ppm
0058682	150.2 ppm

Analytical Method: NDIR

Quality Control
Please refer to the Quality Control
tabular information on the
bottom of page 1 for the
DMS-11-02-2021 1342

Approved for Release:

Rod Marsala

Rod Marsala

ISO 17025:2017 A2LA accredited. Certificate Number 3082.06
ISO 17034:2016 A2LA accredited. Certificate Number 3082.07



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



DOUGLAS D. DAVIDSON

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, INTOXILYZER 8000

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 4/6/2023

NUMBER 230065

EXPIRES 4/6/2025

MO 5650771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

David J. Davidson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

L-94- (64-10)

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

INSTRUMENT OPERATOR CARD

This instrument is the property of the Department of Health and Senior Services. It is loaned to the user for use only. The user is responsible for the safekeeping of the instrument. The instrument must be returned to the Department of Health and Senior Services upon completion of the loan.

Operator: **DAVIDSON, DOUGLAS**
Date Issued: **2/2/2023** Date Expires: **4/6/2025**