



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

RECEIVED

By Tracy Crews at 7:16 am, Sep 20, 2023

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 111322	NAME OF AGENCY EDMUNDSON	DATE OF INSPECTION 09/20/2023
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LOCATION OF INSTRUMENT (STREET AND CITY) 4430 Holman Lane, Edmundson, MO	TIME OF INSPECTION 2:07 am
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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, INC LOT # AG231902 EXP. DATE 11/15/2024

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 .098

TEST 2 .099

TEST 3 .098

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).

None at this time

INSPECTING OFFICER

SIGNATURE

PRINT NAME
Patrolman Brandon Lange DSN 74

TYPE II PERMIT NUMBER/EXPIRATION DATE
230147 07/21/2025

TELEPHONE NUMBER
(314) 428-5477

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: 111322
Version no: 532B

TEST RECORD 00495

Temp Date Time ^{g/} 210L

Air Blank:
09/20/23 02:07 .000
Calibration Check:
23 09/20/23 02:07 .098

Subject Name

mant 1
Subject I.D.

N/A
Operator Name, I.D.

Sample 24
Location

EPD

AS IV Serial no: 111322
Version no: 532B

TEST RECORD 00496

Temp Date Time ^{g/} 210L

Air Blank:
09/20/23 02:08 .000
Calibration Check:
23 09/20/23 02:08 .099

Subject Name

mant 2
Subject I.D.

N/A
Operator Name, I.D.

Sample 24
Location

EPD

AS IV Serial no: 111322
Version no: 532B

TEST RECORD 00497

Temp Date Time ^{g/} 210L

Air Blank:
09/20/23 02:10 .000
Calibration Check:
24 09/20/23 02:10 .098

Subject Name

mant 3
Subject I.D.

N/A
Operator Name, I.D.

Sample 24
Location

EPD

AS IV Serial no: 111322
Version no: 532B

TEST RECORD 00498

Temp Date Time ^{g/} 210L

VOID: RFI
12 09/20/23 02:11

Subject Name

BFI
Subject I.D.

N/A
Operator Name, I.D.

Sample 24
Location

EPD

AS IV Serial no: 111322
Version no: 532B

TEST RECORD 00499

Temp Date Time ^{g/} 210L

Air Blank:
09/20/23 02:12 .000
Subject Test: Auto
24 09/20/23 02:12 .000

Subject Name

Sample
Subject I.D.

24
Operator Name, I.D.

Sample 24
Location

EPD



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

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PERMIT
TYPE II
BRANDON W. LANGE

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 7/21/2023

NUMBER 230147

EXPIRES 7/21/2025

MO 580-0771 (6-10)

Mike Masoma

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Dave J. Nickelson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 LANGE, BRANDON

Permit No 230147

Date Issued 7/21/2023 **Date Expires** 7/21/2025

