



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

RECEIVED

By Tracy Crews at 3:20 pm, Jan 02, 2024

DRT #

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 <u>100286</u>	NAME OF AGENCY <u>Cuba PD</u>	DATE OF INSPECTION <u>1-1-24</u>
LOCATION OF INSTRUMENT (STREET AND CITY) <u>602 S. Franklin St Cuba</u>		TIME OF INSPECTION <u>1:08 pm</u>

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 Gudke LOT # 22430 EXP. DATE 11-30-24

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34° SIM. SN MP3872 SIM. NIST EXP DATE 5-4-24

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 → .102 TEST 2 → .102 TEST 3 → .102

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) 1 (.15-.19) 0 (OVER .19) 1

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 <u>Michael Centurzi</u>	PRINT NAME <u>Michael Centurzi</u>
TYPE II PERMIT NUMBER/EXPIRATION DATE <u>220115 / 4-29-24</u>	TELEPHONE NUMBER <u>(573) 885-7979</u>

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: 100286
Version no: 532B

TEST RECORD 01262

Temp Date Time 210L
Air Blank: 01/01/24 13:08 .000
Calibration Check: 20 01/01/24 13:08 .102

Subject Name
Blank

Subject I.D.
Test 1

Operator Name: I.D.
Cantunui / 220115

Location
602 S Franklin St
Cuba

AS IV Serial no: 100286
Version no: 532B

TEST RECORD 01263

Temp Date Time 210L
Air Blank: 01/01/24 13:10 .000
Calibration Check: 20 01/01/24 13:10 .102

Subject Name
Blank

Subject I.D.
Test 2

Operator Name: I.D.
Cantunui / 220115

Location
602 S Franklin St
Cuba

AS IV Serial no: 100286
Version no: 532B

TEST RECORD 01264

Temp Date Time 210L
Air Blank: 01/01/24 13:12 .000
Calibration Check: 20 01/01/24 13:12 .102

Subject Name
Blank

Subject I.D.
Test 3

Operator Name: I.D.
Cantunui / 220115

Location
602 S Franklin St
Cuba

AS IV Serial no: 100286
Version no: 532B

TEST RECORD 01265

Temp Date Time 210L
VDI: RPI
12 01/01/24 13:14

Subject Name
Blank

Subject I.D.
RPI

Operator Name: I.D.
Cantunui / 220115

Location
602 S. Franklin St
Cuba



GUTH LABORATORIES, INC.

580 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **22430** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **December 1, 2022**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1216%** (w/vol) ethyl alcohol. The expiration date for this lot number is **November 30, 2024** at 11:59 PM.

When used in a calibrated Simulator, operating at $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L \pm 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 Cerilliant Reference Standard lot number FN03052002 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.



Paula Nickelson
 Acting Director

Michael L. Parson
 Governor

SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: MP3872 **Manufacturer:** Guth
Model Number: 12V500
Agency: CUBA PD
Agency Address: 602 S FRANKLIN, CUBA, MO 65453

NIST THERMOMETER INFORMATION

Serial Number: 17KMM00690 **Bias:** 0.00
Uncertainty: 0.02
Date of Certification: 10/24/2022 **Date of Expiration:** 10/24/2023

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>
34.01	34.02	.03

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

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 5/4/2023
Certification Expiration: 5/4/2024
Simulator testing technician: R. SCHILDKNECHT

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving: BRIANNA MEDRANO
Certification No: MP3872_542023

X *Brianna Medrano*

DHSS BAP Scientist Approving



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

2

PERMIT
TYPE II

MICHAEL S. CENTUNZI

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 4/29/2022
NUMBER 220115
EXPIRES 4/29/2024

F. Ann G. Nag
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

David J. Nielsen
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
LAB-119

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

INSTRUMENT OPERATOR CARD

This card is valid only if used in accordance with the instructions for the determination of the alcoholic content in breath form of expired air.

Operator: **CENTUNZI, MICHAEL**
Permit No: **220115**
Exp: **4/29/2024** ID No: **4612000**

