



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

RECEIVED
 By Tracy Crews at 7:32 am, Mar 25, 2024

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 111660	NAME OF AGENCY Fredericktown Police Dept.	DATE OF INSPECTION 03/24/2024
LOCATION OF INSTRUMENT (STREET AND CITY) 120 W. Main St. - Fredericktown, MO		TIME OF INSPECTION 8:55 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 # 23390 EXP. DATE 10/17/2025
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIM. SN MP 2936 SIM. NIST EXP DATE 01/29/2025

- 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 ➡ .101	TEST 3 ➡ .100
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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	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(OVER .19)	1
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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).

Time changed forward 1 hour. Instrument is operating properly.

INSPECTING OFFICER

SIGNATURE 	PRINT NAME Michael Sletten
TYPE II PERMIT NUMBER/EXPIRATION DATE 220261 - 11/17/24	TELEPHONE NUMBER (573) 783-3660

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: 111660
Version no: 532B

TEST RECORD 00833

Temp Date Time ^{s/} 210L

Air Blank:
03/24/24 07:55 .000
Subject Test: Auto
20 03/24/24 07:55 .000

Subject Name

BLANK TEST

Subject I.D.

MONTHLY MAINT.

Operator Name, I.D.

W. SÜETTEN-220261

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 532B

TEST RECORD 00835

Temp Date Time ^{s/} 210L

Air Blank:
03/24/24 09:02 .000
Calibration Check:
21 03/24/24 09:02 .102

Subject Name

SAMPLE TEST #1

Subject I.D.

MONTHLY MAINT.

Operator Name, I.D.

W. SÜETTEN-220261

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 532B

TEST RECORD 00836

Temp Date Time ^{s/} 210L

Air Blank:
03/24/24 09:03 .000
Calibration Check:
22 03/24/24 09:03 .101

Subject Name

SAMPLE TEST #2

Subject I.D.

MONTHLY MAINT.

Operator Name, I.D.

W. SÜETTEN-220261

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 532B

TEST RECORD 00837

Temp Date Time ^{s/} 210L

Air Blank:
03/24/24 09:05 .000
Calibration Check:
23 03/24/24 09:05 .100

Subject Name

SAMPLE TEST #3

Subject I.D.

MONTHLY MAINT.

Operator Name, I.D.

W. SÜETTEN-220261

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 532B

TEST RECORD 00838

Temp Date Time ^{s/} 210L

VOID: RFI
12 03/24/24 09:06

Subject Name

RFI CHECK

Subject I.D.

MONTHLY MAINT.

Operator Name, I.D.

W. SÜETTEN-220261

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 532B

Last Calibration:
04/25/23 10:07 .100

Test Results:
00827 VOID: RFI
12 03/23/24 20:17
00.0 Lit. 00.0 Sec.
00828 VOID: RFI
12 03/23/24 20:18
00.0 Lit. 00.0 Sec.
00829 VOID: RFI
12 03/23/24 20:18
00.0 Lit. 00.0 Sec.
00830 VOID: INSP SAMP
6 03/23/24 20:21
00.0 Lit. 00.0 Sec.
00831 Subject Test: Auto
21 03/23/24 20:23 .226
01.9 Lit. 10.0 Sec.
00832 VOID: TEST RFSD
25 03/23/24 20:38
00.0 Lit. 00.0 Sec.
00833 Subject Test: Auto
20 03/24/24 07:55 .000
01.9 Lit. 04.2 Sec.
00834 Subject Test: Man
21 03/24/24 09:00 .000
00.0 Lit. 00.0 Sec.
00835 Calibration Check:
21 03/24/24 09:02 .102
00.0 Lit. 00.0 Sec.
00836 Calibration Check:
22 03/24/24 09:03 .101
00.0 Lit. 00.0 Sec.
00837 Calibration Check:
23 03/24/24 09:05 .100
00.0 Lit. 00.0 Sec.
00838 VOID: RFI
12 03/24/24 09:06
00.0 Lit. 00.0 Sec.



Paula Nickelson
 Acting Director

Michael L. Parson
 Governor

SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: MP2936 **Manufacturer:** Guth
Model Number: 12V500
Agency: FREDERICKTOWN PD
Agency Address: 120 W MAIN ST, FREDERICKTOWN, MO 63645

NIST THERMOMETER INFORMATION

Serial Number: 17KMM00690 **Bias:** 0.00
Uncertainty: 0.02
Date of Certification: 10/27/2023 **Date of Expiration:** 10/27/2024

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>
33.99	34.00	.03

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

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 1/29/2024
Certification Expiration: 1/29/2025
Simulator testing technician: R. SCHILDKNECHT

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving: BRIANNA MEDRANO

Certification No: MP2936_1292024

X

DHSS BAP Scientist Approving



GUTH LABORATORIES, INC.

590 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 **23390** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **October 18, 2023**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1207%** (w/vol) ethyl alcohol. The expiration date for this lot number is **October 17, 2025** 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 **FN03072301** 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

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PERMIT
TYPE II
MICHAEL D. SLETTEN

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 11/17/2022

NUMBER 220261

EXPIRES 11/17/2024

Mike Maxson

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Douglas J. Nickelson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-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 SLETTEN, MICHAEL
Permit No 220261
Date issued 11/17/2022 Date Expires 11/17/2024

