



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

RECEIVED

By Tracy Crews at 9:21 am, Jan 02, 2020

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 002005 | PRINTER SN 096.3580.878 | DATE OF INSPECTION 01/02/2020 |
| LOCATION OF INSTRUMENT (STREET AND CITY) 9701 Marion Park Drive, Kansas City MO 64137 | | TIME OF INSPECTION 4:01 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 Intoximeters LOT # AG905605 EXP. DATE 02/25/2021

SIMULATOR TEMPERATURE (34°C ± 0.2°C) _____ SIMULATOR SN _____ SIMULATOR 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 .081

TEST 2 .083

TEST 3 .083

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 | 2 | (0-.04) | 0 | (.05-.09) | 1 | (.10-.14) | 1 | (.15-.19) | 1 | (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

PRINT NAME
Magers, Nathan #5243

TYPE II PERMIT NUMBER/EXPIRATION DATE
290118 05/29/2021

TELEPHONE NUMBER
(816) 482-8220

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Boulevard
Poplar Bluff, MO 63901



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



Airgas USA LLC (LAB)
3500 Bernard Street
St. Louis, Mo, 63103
Ph: (314) 533-9100
Fax: (314) 533-7328

PERMIT
TYPE II

NATHAN I MAGERS

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 5/29/2019

NUMBER 290118

EXPIRES 5/29/2021

MO 588-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
L-04- (60-10)

Certificate of Analysis

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

Test Date: 26-Feb-2019

Lot # AG905605 Model 108Cacd

Exp. Date
25-Feb-2021

CYL Type
108

Component
Ethanol
Nitrogen

Certified Concentration
0.082 ± 0.002 BPA-C (228 ppm)
Balance

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 | EB0010559 | 258.2 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 | CRM Serial No. | Concentration |
| CC434668 | 800.0 ppm | 0056649 | 390.1 ppm |
| CC234503 | 253.0 ppm | 0056662 | 150.2 ppm |

Analytical Method: NDIR

STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM
INSTRUMENT OPERATOR CARD

The named cardholder is authorized to operate an official breath alcohol instrument for the determination of the alcoholic content in breath from a suspected air in Missouri.

Operator: **MAGERS, NATHAN**
Permit No: **290118**
Date Issued: **5/29/2019** Date Expires: **5/29/2021**

Digitally signed by Quality Control
Date: 2019.02.26 16:33:46 -0800
Reason: I am the approving supervisor of analysis
Location: Algas USA LLC (Lab)

Approved for Release:

Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 3082.06
ISO 17034:2016 A2LA accredited. Certificate Number 3082.07

AS IV Serial no: 002005
Version no: 5370

TEST RECORD 00264

Temp Date Time 210L

Air Blank:
01/02/20 04:00 .000
Calibration Check:
22 01/02/20 04:00 .001

Subject Name

Test 1

Subject I.D.

Operator Name, I.D.

Magers 5243

Location

AS IV Serial no: 002005
Version no: 5370

TEST RECORD 00265

Temp Date Time 210L

Air Blank:
01/02/20 04:00 .000
Calibration Check:
23 01/02/20 04:00 .000

Subject Name

Test 2

Subject I.D.

Operator Name, I.D.

Magers 5243

Location

AS IV Serial no: 002005
Version no: 5370

TEST RECORD 00266

Temp Date Time 210L

Air Blank:
01/02/20 04:00 .000
Calibration Check:
24 01/02/20 04:00 .000

Subject Name

Test 3

Subject I.D.

Operator Name, I.D.

Magers 5243

Location

AS IV Serial no: 002005
Version no: 5370

TEST RECORD 00267

Temp Date Time 210L

VOID: RFI
12 01/02/20 04:00

Subject Name

Test 4 RFI

Subject I.D.

Operator Name, I.D.

Magers 5243

Location