



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 03079	PRINTER SN 84.9324.152	DATE OF INSPECTION 01/28/2020
LOCATION OF INSTRUMENT (STREET AND CITY) 415 Elm Grove Lane Hazelwood		TIME OF INSPECTION 12:10 PM

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, Inc LOT # 18370 EXP. DATE 12/05/2020

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.1 SIMULATOR SN SD2742 SIMULATOR EXP DATE 07/09/2020

- 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 .103 TEST 2 .103 TEST 3 .103

- 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

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).

Simulator Solution Bottle Number 1490
 Changed 9 volt battery.

INSPECTING OFFICER

SIGNATURE PRINT NAME
 Michael A. Monticelli

TYPE II PERMIT NUMBER/EXPIRATION DATE TELEPHONE NUMBER
 280302 / 10/12/2020 (314) 838-5000

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

AS IV Serial no: 030791
Version no: 532B

TEST RECORD 00476

Temp Date Time 210L

Air Blank: 01/28/20 12:46 .000
Calibration Check: 21 01/28/20 12:46 .103

Subject Name
TEST #1

Subject I.D.

Operator Name, I.D.

Monnell 200302

Location

Hazlewood BPT Van

AS IV Serial no: 030791
Version no: 532B

TEST RECORD 00477

Temp Date Time 210L

Air Blank: 01/28/20 12:48 .000
Calibration Check: 23 01/28/20 12:48 .103

Subject Name

TEST #2

Subject I.D.

Operator Name, I.D.

Monnell 200302

Location

Hazlewood BPT Van

AS IV Serial no: 030791
Version no: 532B

TEST RECORD 00478

Temp Date Time 210L

Air Blank: 01/28/20 12:50 .000
Calibration Check: 24 01/28/20 12:50 .103

Subject Name

TEST #3

Subject I.D.

Operator Name, I.D.

Monnell 200302

Location

Hazlewood BPT Van

AS IV Serial no: 030791
Version no: 532B

TEST RECORD 00479

Temp Date Time 210L

U010: RFI
12 01/28/20 12:52

Subject Name

TEST #4

Subject I.D.

Operator Name, I.D.

Monnell 200302

Location

Hazlewood BPT Van

AS IV Serial no: 030791
Version no: 532B

TEST RECORD 00480

Temp Date Time 210L

Air Blank: 01/28/20 12:53 .000
Subject Test: Au10
25 01/28/20 12:53 .000

Subject Name

TEST #5

Subject I.D.

Operator Name, I.D.

Monnell 200302

Location

Hazlewood BPT Van

Blank TEST



GUTH LABORATORIES, INC.

600 NORTH 6TH STREET • HARRISBURG, PA 17111-4611 • TELEPHONE: 717-604-6470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 18370 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on December 6, 2018, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1218% (w/vol) ethyl alcohol. The expiration date for this lot number is December 5, 2020 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 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 Certified Reference Standard lot number EN04271602 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.



Missouri Department of Health and Senior Services
 P.O. Box 670, Jefferson City, MO 64102-0570 Phone: 573-751-8400 FAX: 573-751-8010
 RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2800 VOICE 1-800-735-2488
 Randall W. Williams, MD, FACOG
 Director



Michael L. Parson
 Governor

SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: SD2742 Manufacturer: Guth
 Model Number: 10-4D
 Agency: HAZELWOOD PD
 Agency Address: 415 ELM GROVE LANE, HAZELWOOD, MO 63042

NIST THERMOMETER INFORMATION

Serial Number: 17KMM00689 Bias: 0.00
 Uncertainty: 0.02
 Date of Certification: 12/11/2018 Date of Expiration: 12/11/2019

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>
34.00	33.97	.06

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

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 7/9/2019
 Certification Expiration: 7/9/2020
 Simulator testing technician: M. BOND

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving: B. LUTMER
 Certification No: SD2742_792019

X

DHSS BAP Scientist Approving



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



PERMIT
TYPE II

MICHAEL A MONTICELLI

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, INTOX EC/IR II

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 308.111 through 308.119 RSMo.

DATE 10/12/2018

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 280302

EXPIRES 10/12/2020

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 680-2771 (8-10)

LAB-1 (8-10)

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

INSTRUMENT OPERATOR CARD

The named certificate holder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of accepted use in Missouri.

Operator **MONTICELLI, MICHAEL**
Permit No **280302**
Date issued **10/12/2018** Date Expires **10/12/2020**

