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By Tracy Crews at 9:53 am, Aug 04, 2020



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 031393	PRINTER SN 08C.3527.093	DATE OF INSPECTION 08/03/2020
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LOCATION OF INSTRUMENT (STREET AND CITY) SCCPD / 101 Sheriff Dierker Court, O'Fallon, Missouri 63366	TIME OF INSPECTION 10:35 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 LOT # AG824102 EXP. DATE 08/29/2020

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 ➔ .079

TEST 2 ➔ .079

TEST 3 ➔ .079

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)	1	(.10-.14)	1	(.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).

INSPECTING OFFICER

SIGNATURE P.O. Johnson 663	PRINT NAME Mike Johnson
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TYPE II PERMIT NUMBER/EXPIRATION DATE 200198 / 07-08-2022	TELEPHONE NUMBER (636) 949-3000
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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

Airgas

Airgas USA, LLC (LAB)
3600 Ballard Street
St. Louis, Mo. 63103
PH: (314) 533-3100
Fax: (314) 533-7328

Certificate of Analysis

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

Test Date: 29-Aug-2018

Lot # AG824102 Model 108caci

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
29-Aug-2020	108	Ethanol	0.080 ± 0.002 BrAC (218 ppm)
		Nitrogen	Balance

Certification Traceable to N.I.S.T. RGM Ethanol Standards:

<u>Serial No.</u>	<u>Concentration</u>	<u>Serial No.</u>	<u>Concentration</u>
EB0010581	392.1 ppm	EB0010563	393.0 ppm
EB0010570	259.8 ppm	EB0010559	258.2 ppm
EB0010285	208.0 ppm	EB0010595	208.3 ppm
EB0010561	103.5 ppm	EB0010562	104.2 ppm
EB0010584	52.12 ppm	EB0010579	52.81 ppm

Analytical Method: NDIR

Digitally signed by Quality Control
Date: 2018.08.29 18:38:20 -05:00
Reason: Dry gas standard certification of analysis
Location: Airgas USA LLC (Lab)

Approved for Release:


Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 3082.06



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



**PERMIT
 TYPE II**

MIKE JOHNSON

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 7/8/2020

NUMBER 200198

EXPIRES 7/8/2022

MO 580-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

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 **JOHNSON, MIKE**
 Permit No **200198**
 Date Issued **7/8/2020** Date Expires **7/8/2022**



AS IV Serial no: 031393
Version no: 532C

TEST RECORD 00213

Temp Date Time ^{9/} 210L

Air Blank:
08/03/20 10:35 .000
Calibration Check:
26 08/03/20 10:35 .079

Subject Name

TEST

Subject I.D.

1

Operator Name, I.D.

~~P.4~~ 663 200198

Location

SCCPD

AS IV Serial no: 031393
Version no: 532C

TEST RECORD 00214

Temp Date Time ^{9/} 210L

Air Blank:
08/03/20 10:37 .000
Calibration Check:
27 08/03/20 10:37 .079

Subject Name

TEST

Subject I.D.

2

Operator Name, I.D.

~~P.4~~ 663 200198

Location

SCCPD

AS IV Serial no: 031393
Version no: 532C

TEST RECORD 00215

Temp Date Time ^{9/} 210L

Air Blank:
08/03/20 10:38 .000
Calibration Check:
27 08/03/20 10:38 .079

Subject Name

TEST

Subject I.D.

3

Operator Name, I.D.

~~P.4~~ 663 200198

Location

SCCPD

AS IV Serial no: 031393
Version no: 532C

TEST RECORD 00216

Temp Date Time ^{9/} 210L

VOID: RFI
12 08/03/20 10:39

Subject Name

TEST VOID

Subject I.D.

RFI

Operator Name, I.D.

~~P.4~~ 663 200198

Location

SCCPD

AS IV Serial no: 031393
Version no: 532C

TEST RECORD 00217

Temp Date Time ^{9/} 210L

Air Blank:
08/03/20 10:44 .000
Subject Test: Auto
27 08/03/20 10:44 .000

Subject Name

SELF TEST

Subject I.D.

1

Operator Name, I.D.

~~P.4~~ 663 200198

Location

SCCPD