



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED

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

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 034874	PRINTER SN 096.3580.926	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 12:26 pm
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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 ➔ .083

TEST 2 ➔ .081

TEST 3 ➔ .081

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
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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.N.* 663

PRINT NAME
Mike Johnson

TYPE II PERMIT NUMBER/EXPIRATION DATE
200198 / July 8, 2022

TELEPHONE NUMBER
(636) 949-3000

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 (L49)
10000
10000
10000
10000
10000

Certificate of Analysis

20-Aug-2018

Customer Name:
Estimate Supplier:
Instruments, Inc.
205 F. Craig Road
St. Louis, Mo 63130

Lot# AG824102 Model#

Exp. Date	Cyl. Type	Component	Concentration
29-Aug-2020	106	Ethane	100% (218 ppm)

Certification Traceable to N.L.S.T. RGM Ethanol Standard

Serial No.	Concentration	Serial No.	Concentration
EB0010531	392.1 ppm	EB0010531	393.0 ppm
EB0010570	259.8 ppm	EB0010570	260.2 ppm
EB0010225	208.9 ppm	EB0010225	209.3 ppm
EB0010531	103.8 ppm	EB0010531	104.2 ppm
EB0010531	52.12 ppm	EB0010531	52.11 ppm

Analytical Method: NDR

Quality Approved by Quality Control
Date: 20180820 14:22:26 -0500
Warning: Do not exceed distribution of material
Location: Airgas USA LLC (L49)

Approved for Release: Rod Marsala
Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 300206



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

2

**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

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 200198

EXPIRES 7/8/2022

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

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: 034874
Version no: 532C

TEST RECORD 00048

Temp Date Time ^{s/} 210L

Air Blank:
08/03/20 12:26 .000
Calibration Check:
23 08/03/20 12:26 .083

Subject Name

TEST

Subject I.D.

#1

Operator Name, I.D.

~~Room 663~~ 200198

Location

SCCPD

AS IV Serial no: 034874
Version no: 532C

TEST RECORD 00049

Temp Date Time ^{s/} 210L

Air Blank:
08/03/20 12:28 .000
Calibration Check:
24 08/03/20 12:28 .081

Subject Name

TEST

Subject I.D.

#2

Operator Name, I.D.

~~Room 663~~ 200198

Location

SCCPD

AS IV Serial no: 034874
Version no: 532C

TEST RECORD 00050

Temp Date Time ^{s/} 210L

Air Blank:
08/03/20 12:29 .000
Calibration Check:
24 08/03/20 12:29 .081

Subject Name

TEST

Subject I.D.

#3

Operator Name, I.D.

~~Room 663~~ 200198

Location

SCCPD

AS IV Serial no: 034874
Version no: 532C

TEST RECORD 00051

Temp Date Time ^{s/} 210L

VOID: RFI
12 08/03/20 12:31

Subject Name

TEST VOID

Subject I.D.

RFI

Operator Name, I.D.

~~Room 663~~ 200198

Location

SCCPD

AS IV Serial no: 034874
Version no: 532C

TEST RECORD 00052

Temp Date Time ^{s/} 210L

Air Blank:
08/03/20 12:32 .000
Subject Test: Auto
26 08/03/20 12:32 .000

Subject Name

SELF TEST

Subject I.D.

#1

Operator Name, I.D.

~~Room 663~~ 200198

Location

SCCPD