



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 094804	NAME OF AGENCY Kansas City MO PD	DATE OF INSPECTION 09/03/2020
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LOCATION OF INSTRUMENT (STREET AND CITY) 9701 Marion Park Drive, Kansas City MO 64137	TIME OF INSPECTION 2219
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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

<input type="checkbox"/> SIMULATOR SOLUTION	<input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Intoximeters</u>	LOT # <u>AG905605</u> EXP. DATE <u>02/25/2021</u>
<input type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C)	SIM. SN _____ SIM. NIST 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 .080	TEST 3 .080
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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 1	(0-.04) 6	(.05-.09) 3	(.10-.14) 6	(.15-.19) 2	(OVER .19) 2
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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).

TESTED AND CERTIFIED

INSPECTING OFFICER

SIGNATURE #5221	PRINT NAME PO Jeremy White
TYPE II PERMIT NUMBER/EXPIRATION DATE 200231 08/20/2022	TELEPHONE NUMBER () 816-482-8141

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: 094804
Version no: 532B

TEST RECORD 00638

Temp Date Time ^{a/} 210L

Air Blank:
09/03/20 22:19 .000
Calibration Check:
24 09/03/20 22:19 .079

Subject Name

Test #1

Subject I.D.

Operator Name, I.D.
White 5771 200231
08/20/2022
Location

AS IV Serial no: 094804
Version no: 532B

TEST RECORD 00639

Temp Date Time ^{a/} 210L

Air Blank:
09/03/20 22:22 .000
Calibration Check:
25 09/03/20 22:22 .000

Subject Name

Test #2

Subject I.D.

Operator Name, I.D.
White 5771 200231
08/20/2022
Location

AS IV Serial no: 094804
Version no: 532B

TEST RECORD 00641

Temp Date Time ^{a/} 210L

Air Blank:
09/03/20 22:29 .000
Calibration Check:
25 09/03/20 22:29 .000

Subject Name

Test #3

Subject I.D.

Operator Name, I.D.
White 5771 200231
08/20/2022
Location

AS IV Serial no: 094804
Version no: 532B

TEST RECORD 00642

Temp Date Time ^{a/} 210L

VOID: RFI
12 09/03/20 22:31

Subject Name

RFI Test

Subject I.D.

Operator Name, I.D.
White 5771 200231
08/20/2022
Location



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



Airgas USA LLC (LAE)
3500 Bernard Street
St. Louis, Mo. 63103
Ph: (314) 533-3100
Fax: (314) 533-7328

PERMIT
TYPE II

JEREMY A. WHITE

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

AIRCO-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 8/20/2020

NUMBER 200231

EXPIRES 8/20/2022

NO 988-0771 (5-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

[Signature]

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
LAB-4 (PR)-103

Certificate of Analysis

Test Date: 26-Feb-2019

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

Lot # AG905605 Model 108cadd

Expo. Date 25-Feb-2021
Cyl. Type 108
Component Ethanol
Nitrogen
Certified Concentration 0.082 ± 0.002 B/A/C (Z23 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	EB0010503	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

Digitally signed by Quality Control
Date: 2018.02.26 14:34:45 -0600
Reason: Dry gas standard certification of analysis
Version: 1.0 (aes)

Approved for Release: *[Signature]*
Rod Marsala

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

The named operator is authorized to operate an Intoximeter 8000 in Missouri for the determination of the alcoholic content in breath from a subject.

Operator: WHITE, JEREMY
Permit No. 200231
Date Issued 8/20/2020 Date Expires 8/20/2022

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