

RECEIVED

By Tracy Crews at 9:25 am, Jan 24, 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 102456	PRINTER SN 096.3580.982	DATE OF INSPECTION 01/18/2020
LOCATION OF INSTRUMENT (STREET AND CITY) 600 East Walnut Columbia		TIME OF INSPECTION 2:18 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 # AG826302 EXP. DATE 09/20/2020 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 .101

TEST 2 .101

TEST 3 .101

 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)	3	(.10-.14)	1	(.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).

Spot Check Maintenance

INSPECTING OFFICER

SIGNATURE

PRINT NAME

Mark D. Hoehne

TYPE II PERMIT NUMBER/EXPIRATION DATE

280211 06/11/2020

TELEPHONE NUMBER

(573) 874-7585

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: 182456
Version no: 532B

TEST RECORD 00888

Temp Date Time 210L

Air Blanks
01/18/20 02:20 .000
Calibration Check:
20 01/18/20 02:20 .101

Subject Name

Test #1

Subject J.J.

Hoehne, Mark D. 2078

Operator Name, I.J.

Location

AS IV Serial no: 182456
Version no: 532B

TEST RECORD 00889

Temp Date Time 210L

Air Blanks
01/18/20 02:24 .000
Calibration Check:
20 01/18/20 02:24 .101

Subject Name

Test #3

Subject J.J.

Hoehne, Mark D. 2078

Operator Name, I.J.

Location

AS IV Serial no: 182456
Version no: 532B

TEST RECORD 00891

Temp Date Time 210L

VQTD: RPI
12 01/18/20 02:25

Subject Name

RFI check

Subject J.J.

Hoehne, Mark D. 2078

Operator Name, I.J.

Location

AS IV Serial no: 182456
Version no: 532B

TEST RECORD 00892

Temp Date Time 210L

Air Blanks
01/18/20 02:27 .000
Subject Test: Auto
20 01/18/20 02:27 .000

Subject Name

self test

Subject J.J.

Hoehne, Mark D. 2078

Operator Name, I.J.

Location



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



**PERMIT
 TYPE II**

MARK D HOEHNE

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 DMT

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 6/11/2018

NUMBER 280211

EXPIRES 6/11/2020

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

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 **HOEHNE, MARK**
 Permit No **280211**
 Date Issued **6/11/2018** Date Expires **6/11/2020**