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By Stephen Wilson at 8:51 am, May 18, 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 108270	PRINTER SN 099.3586.823	DATE OF INSPECTION 05/15/2020
LOCATION OF INSTRUMENT (STREET AND CITY) 110 West 3rd Street Holden, Mo.		TIME OF INSPECTION 19:57

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.

<input checked="" type="checkbox"/> DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)
<input checked="" type="checkbox"/> TEMPERATURE OF ALCO SENSOR (10°C - 40°C)
<input checked="" type="checkbox"/> PRINTER WORKING PROPERLY
<input checked="" type="checkbox"/> 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>AG914003</u> EXP. DATE <u>05/20/2021</u>	
<input type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) <u>34</u> SIMULATOR SN <u>MP3572</u> SIMULATOR EXP DATE <u>04/16/2021</u>	

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)

<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
<input type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 ← .101	TEST 2 ← .100	TEST 3 ← .098
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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	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 	PRINT NAME Thomas L. Wehr
TYPE II PERMIT NUMBER/EXPIRATION DATE 290146/07-02-2021	TELEPHONE NUMBER (816) 850-4154

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: 108270
Version no: 532B

TEST RECORD 00748

Temp Date Time ^{g/} 210L

Air Blank:
05/15/20 20:00 .000
Calibration Check:
20 05/15/20 20:00 .098

Subject Name

Subject I.D.

Operator Name, I.D.

Wehr 306

Location

Holden PD

AS IV Serial no: 108270
Version no: 532B

TEST RECORD 00747

Temp Date Time ^{g/} 210L

Air Blank:
05/15/20 19:59 .000
Calibration Check:
20 05/15/20 19:59 .100

Subject Name

Subject I.D.

Operator Name, I.D.

Wehr 306

Location

Holden PD

AS IV Serial no: 108270
Version no: 532B

TEST RECORD 00746

Temp Date Time ^{g/} 210L

Air Blank:
05/15/20 19:57 .000
Calibration Check:
20 05/15/20 19:57 .101

Subject Name

Subject I.D.

Operator Name, I.D.

Wehr 306

Location

Holden PD

AS IV Serial no: 108270
Version no: 532B

TEST RECORD 00749

Temp Date Time ^{g/} 210L

VOID: RFI
12 05/15/20 20:01

Subject Name

Subject I.D.

Operator Name, I.D.

Wehr 306

Location

Holden PD



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



PERMIT
TYPE II
TOM WEHR

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 7/2/2019

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 290146

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 7/2/2021

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 WEHR, TOM
 Permit No 290146
 Date Issued 7/2/2019 Date Expires 7/2/2021