



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 STATE PUBLIC HEALTH LABORATORY  
**ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT**

**RECEIVED**  
 By Tracy Crews at 9:15 am, Feb 13, 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 111328	PRINTER SN 099.3586.579	DATE OF INSPECTION 02/10/2020
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LOCATION OF INSTRUMENT (STREET AND CITY) 201 N. State Street, Knob Noster	TIME OF INSPECTION 7:34 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 Guth Laboratories                      LOT # 19370                      EXP. DATE 12/09/2021

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0                      SIMULATOR SN SD2231                      SIMULATOR EXP DATE 01/23/2021

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 → .100	TEST 2 → .099	TEST 3 → .099
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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).  
 Instrument working correctly within Dept. of Health Standards.

**INSPECTING OFFICER**

SIGNATURE Lt. Karl Van Vickle #4025	PRINT NAME Lt. Karl Van Vickle
TYPE II PERMIT NUMBER/EXPIRATION DATE 280204 / 05-24-2020	TELEPHONE NUMBER (660) 563-2233

**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: 111328  
Version no: 532B

TEST RECORD 00470

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
02/10/20 19:00 .000  
Calibration Check:  
21 02/10/20 19:00 .000  
Monthly Maint  
Subject Name

Blank Standard  
Subject I.D.

Lt. K. VanVickle 280204  
Operator Name, I.D.

201 N. State St.  
Location

Knob Noster, MO 65336

Knob Noster PD

AS IV Serial no: 111328  
Version no: 532B

TEST RECORD 00472

Temp Date Time <sup>s/</sup> 210L

VOID: RFI  
12 02/10/20 19:03  
Monthly Maint  
Subject Name

RFI ✓  
Subject I.D.

Lt. K. VanVickle 280204  
Operator Name, I.D.

201 N. State St  
Location

Knob Noster MO 65336

Knob Noster PD

AS IV Serial no: 111328  
Version no: 532B

TEST RECORD 00473

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
02/10/20 19:05 .000  
Calibration Check:  
21 02/10/20 19:05 .100  
Monthly Maint  
Subject Name

Test #1  
Subject I.D.

Lt. K. VanVickle 280204  
Operator Name, I.D.

201 N State St  
Location

Knob Noster MO 65336

Knob Noster PD

AS IV Serial no: 111328  
Version no: 532B

TEST RECORD 00474

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
02/10/20 19:07 .000  
Calibration Check:  
22 02/10/20 19:07 .099  
Monthly Maint  
Subject Name

Test #2  
Subject I.D.

Lt. K. VanVickle 280204  
Operator Name, I.D.

201 N. State St  
Location

Knob Noster MO 65336

Knob Noster PD

AS IV Serial no: 111328  
Version no: 532B

TEST RECORD 00475

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
02/10/20 19:09 .000  
Calibration Check:  
22 02/10/20 19:09 .099  
Monthly Maint  
Subject Name

Test #3  
Subject I.D.

Lt. K. VanVickle 280204  
Operator Name, I.D.

201 N. State ST  
Location

Knob Noster MO 65336

Knob Noster PD



**GUTH LABORATORIES, INC.**

580 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

## CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 19370 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on December 10, 2019, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1199% (w/vol) ethyl alcohol. The expiration date for this lot number is December 9, 2021 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President  
GUTH LABORATORIES, INC.

*NIST Traceability:*

*Testing was conducted using Cerilliant Reference Standard lot number FN04271602 whose values are traceable to NIST.*

*All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.*

COPY



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

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PERMIT  
TYPE II

KARL E VANVICKLE

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 5/24/2018

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 280204

EXPIRES 5/24/2020

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 550-0771 (6-10)

L48-4 (F6-10)

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 VANVICKLE, KARL  
Permit No 280204  
Date Issued 5/24/2018 Date Expires 5/24/2020

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