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 111640		PRINTER SN 09B.3589.433		DATE OF INSPECTION 01/30/2020			
LOCATION OF INSTRUMENT (STREET AND CITY) Riverview Police Department - 9699 Lilac Dr., Riverview, MO					TIME OF INSPECTION 5:20 pm		
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). Here are the corrected before union; instrument							
ues 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 # 19160 EXP. DATE 07/09/2021							
SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0C SIMULATOR SN SD 2769 SIMULATOR EXP DATE 11/12/2020							
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 ☞ 0.100 %		TEST 2 ☞ 0.100 %	TEST 3 0	TEST 3 ▼ 0.100 %			
☑ 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	(004) 0	(.0509) 0	(.1014) 0	(.1519)	0	(OVER .19) 0	
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 operating within DOHSS standards							
INSPECTING OFFICER							
SIGNATURE Patn. Eddis Lee 311				Patrolman Eddie Lee #311			
TYPE II PERMIT NUMBER/EXPIRATION 980192 / 05-22-2020			TELEPHONE NUMBER (314) 868-9130				
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							