



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED

By Tracy Crews at 3:17 pm, Apr 24, 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 111660	PRINTER SN 09B.3589.435	DATE OF INSPECTION 04/24/2020
LOCATION OF INSTRUMENT (STREET AND CITY) 120 W. Main Sst. - Fredericktown		TIME OF INSPECTION 10:25 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 GUTH Laboratories LOT # 07/09/2121 EXP. DATE 07/09/2021
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN MP2936 SIMULATOR EXP DATE 02/12/2021

- 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 .101	TEST 2 .100	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 Operating Properly

INSPECTING OFFICER	
SIGNATURE 	PRINT NAME Sgt. Michael Sletten
TYPE II PERMIT NUMBER/EXPIRATION DATE 280281 - 09/19/2020	TELEPHONE NUMBER (573) 783-3660

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



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

2

**PERMIT
 TYPE II**

MICHAEL D SLETTEN

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 9/19/2018

NUMBER 280281

EXPIRES 9/19/2020

MO 580-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 SLETTEN, MICHAEL
 Permit No 280281
 Date Issued 9/19/2018 Date Expires 9/19/2020





GUTH LABORATORIES, INC.

590 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 **19160** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **July 10, 2019**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1202%** (w/vol) ethyl alcohol. The expiration date for this lot number is **July 9, 2021** at 11:59 PM.

When used in a calibrated Simulator, operating at $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L \pm 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.

AS IV Serial no: 111660
Version no: 532B

TEST RECORD 00508

Temp	Date	Time	s/ 210L
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Air Blank:
04/24/20 10:25 .000
Subject Test: Auto
20 04/24/20 10:25 .000

Subject Name

BLANK TEST

Subject I.D.

MONTHLY MAINT.

Operator Name, I.D.

M. SLETTEN - 280281

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 532B

TEST RECORD 00509

Temp	Date	Time	s/ 210L
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Air Blank:
04/24/20 10:26 .000
Calibration Check:
20 04/24/20 10:26 .101

Subject Name

SAMPLE TEST #1

Subject I.D.

MONTHLY MAINT.

Operator Name, I.D.

M. SLETTEN - 280281

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 532B

TEST RECORD 00510

Temp	Date	Time	s/ 210L
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Air Blank:
04/24/20 10:28 .000
Calibration Check:
21 04/24/20 10:28 .100

Subject Name

SAMPLE TEST #2

Subject I.D.

MONTHLY MAINT.

Operator Name, I.D.

M. SLETTEN - 280281

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 532B

TEST RECORD 00511

Temp	Date	Time	s/ 210L
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Air Blank:
04/24/20 10:29 .000
Calibration Check:
22 04/24/20 10:29 .069

Subject Name

INCOMPLETE SAMPLE

Subject I.D.

MONTHLY MAINT.

Operator Name, I.D.

M. SLETTEN - 280281

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 532B

TEST RECORD 00512

Temp	Date	Time	s/ 210L
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Air Blank:
04/24/20 10:32 .000
Calibration Check:
23 04/24/20 10:32 .099

Subject Name

SAMPLE TEST #3

Subject I.D.

MONTHLY MAINT.

Operator Name, I.D.

M. SLETTEN - 280281

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 532B

TEST RECORD 00513

Temp	Date	Time	s/ 210L
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VOID: RFI
12 04/24/20 10:34

Subject Name

RFI CHECK

Subject I.D.

MONTHLY MAINT.

Operator Name, I.D.

M. SLETTEN - 280281

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 002B

Last Calibration:
11/25/19 15:06 .100

Test Results:
00500 94 Test Test: Auto
-20 94/24/24 18:25 .000
01.7 L/L, 14.1 Sec.
00503 7.0 Precision Check:
-20 94/24/24 18:26 .191
00.8 L/L, 17.0 Sec.
00510 7.0 Precision Check:
-20 94/24/24 18:28 .196
00.8 L/L, 17.0 Sec.
00517 7.0 Precision Check:
-20 94/24/24 18:30 .191
00.8 L/L, 17.0 Sec.
00524 7.0 Precision Check:
-20 94/24/24 18:32 .191
00.8 L/L, 17.0 Sec.
00531 7.0 Precision Check:
-20 94/24/24 18:34 .191
00.8 L/L, 17.0 Sec.
00538 7.0 Precision Check:
-20 94/24/24 18:36 .191
00.8 L/L, 17.0 Sec.
