



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

**RECEIVED**  
 By Tracy Crews at 9:18 am, Feb 18, 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 111768	PRINTER SN 09B.3589.448	DATE OF INSPECTION 02/17/2020
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LOCATION OF INSTRUMENT (STREET AND CITY) 81 SOUTH ORCHARD BOULEVARD, FAIR GROVE, MO	TIME OF INSPECTION 9:04 am
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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**

<input checked="" type="checkbox"/> SIMULATOR SOLUTION	<input type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>GUTH LABS</u> LOT # <u>17130</u> EXP. DATE <u>06/12/2020</u>	
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) <u>33.98</u> SIMULATOR SN <u>MP2944</u> SIMULATOR EXP DATE <u>10/28/2020</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)

- 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  .100
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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).

<b>INSPECTING OFFICER</b>	
SIGNATURE ▶	PRINT NAME SGT. BRIAN D. WAY
TYPE II PERMIT NUMBER/EXPIRATION DATE 290235 10/01/2021	TELEPHONE NUMBER (417) 759-6482

**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 IU Serial no: 111768  
Version no: 532B

TEST RECORD - RDRP/MP

TEST RECORD 00470

Temp Date Time 210L

Air Blank:

02/17/20 09:04 .000

Subject Test: Auto

22 02/17/20 09:04 .101

Subject Name

Test 1

Subject I.D.

Wray

Operator Name, I.D.

290235

Location

AS IU Serial no: 111768  
Version no: 532B

TEST RECORD 00471

Temp Date Time 210L

Air Blank:

02/17/20 09:07 .000

Subject Test: Auto

23 02/17/20 09:07 .101

Subject Name

Test 2

Subject I.D.

Wray

Operator Name, I.D.

290235

Location

AS IU Serial no: 111768  
Version no: 532B

TEST RECORD 00472

Temp Date Time 210L

Air Blank:

02/17/20 09:08 .000

Subject Test: Auto

23 02/17/20 09:08 .100

Subject Name

Test 3

Subject I.D.

Wray

Operator Name, I.D.

290235

Location

AS IU Serial no: 111768  
Version no: 532B

TEST RECORD 00473

Temp Date Time 210L

U010: RTI

12 02/17/20 09:10

Subject Name

RF1

Subject I.D.

Wray

Operator Name, I.D.

290235

Location

AS IU Serial no: 111768  
Version no: 532B

TEST RECORD 00474

Temp Date Time 210L

Air Blank:

02/17/20 09:10 .000

Subject Test: Auto

24 02/17/20 09:10 .000

Subject Name

Blank Test

Subject I.D.

Wray

Operator Name, I.D.

290235

Location

Fair Grove PD



**GUTH LABORATORIES, INC.**

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-654-5470

## CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 18190 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on June 14, 2018, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1215% (w/vol) ethyl alcohol. The expiration date for this lot number is June 12, 2020 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 ZN04271602 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.*



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

2

**PERMIT**  
**TYPE II**

**BRIAN D WAY**

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 10/1/2019

NUMBER 290235

EXPIRES 10/1/2021

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 690-0771 (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 WAY, BRIAN  
 Permit No 290235  
 Date Issued 10/1/2019 Date Expires 10/1/2021

