

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 o Send copy to Department of Health and Senio	f the regular monthly preventative main r Services; retain original in departmen	ntenance check, and whenever instrument is repaired. t file.		
ALCO SENSOR IV SN 113777 - St. Louis County PD	PRINTER SN 161037253	DATE OF INSPECTION 01/23/2020		
LOCATION OF INSTRUMENT (STREET AND CITY) MODOT TMC - 14301 South Outer 40 Ro	TIME OF INSPECTION 12:24 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.) Unmarked items must be corrected before using instrument.				
DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)				
TEMPERATURE OF ALCO SENSOR (10°C - 40°C) 20°C				
✓ PRINTER WORKING PROPERLY				
TIME AND DATE DISPLAYING PROPERL	_Y			
BREATH ALCOHOL ACCURACY STANDARD	OS .			
☐ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE				
STANDARD SUPPLIER Intoximeters	LOT # AG82970	8 EXP. DATE 10/24/2020		
SIMULATOR TEMPERATURE (34°C ± 0.2	e°C) SIMULATOR SN	SIMULATOR EXP DATE		
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	EST 2 ▼ .099	TEST 3 .098		
RFI DETECTOR OPERATING				
INDICATE THE NUMBER OF BREATH TESTS (DO NOT INCLUDE SELF-ADMINISTERED TO	S IN THE FOLLOWING RANGES SINGESTS)	CE THE LAST MAINTENANCE REPORT:		
REFUSALS 0 (004) 0	(.0509) 0 (.1014) 0	(.1519) 0 (OVER .19) 0		
List any new parts and describe any alteration established limits (use other side if necessary).	or modification that was made to rest	ore the instrument to operate satisfactorily and within		
INCOPOTING OFFICER				
INSPECTING OFFICER SIGNATURE Po A Ros C 2 1 4		PRINT NAME Officer D. Rose, DSN 2721		
TYPE II PERMIT NUMBER/EXPIRATION DATE 290248 10/16/2021	3	TELEPHONE NUMBER (636) 529-8210		
2875 Jame	phol Program, MO Department of Healt s Boulevard f, MO 63901	h and Senior Services, Southeast District Office		

AS IV Serial no: 113777 Version no: 532C

TEST RECORD 00201

Temp Date Time 210L

Air Blank: 01/23/20 12:24 .000

Calibration Check: 20 01/23/20 12:24 .100

Subject Name

Subject I.D.

Operator Name, I.D.

Nocary

Location THE

AS IV Serial no: 113777 Version no: 532C

TEST RECORD 00202

Temp Date Time 210L

Air Blank: 01/23/20 12:27 .000

Calibration Check: 21 01/23/20 12:27 .099

Subject Name

Subject I.D.

Operator Name, I.D.

Location Location

MOST TIME

AS IV Serial no: 113777 Version no: 5320

TEST RECORD 00203

g/ Temp Date Time 210L

Air Blank: 01/23/20 12:28 .000

01/23/20 12:28 .000 Calibration Check: 22 01/23/20 12:28 .098

Subject Name

N/T Subject I.D.

Operator Name, I.D.

Nosc274

Location

Masor Time

AS IV Serial no: 113777 Version no: 532C

TEST RECORD 00204

Temp Date Time 210L

VOID: RFI

12 01/23/20 12:30

Subject Name

Subject I.D.

Operator Name, I.D

Rese 272

Locat ion

Meixo7 Tuc



Airgas USA LLC (LAB)

3500 Bernard Street St. Louis, Mo. 63103 Ph: (314) 533-3100

Fax: (314) 533-7328

Certificate of Analysis

Customer Name

Exclusive Supplier Intoximeters, Inc. 2081 Craig Road St. Louis, Mo 63146 **Test Date: 25-Oct-2018**

Lot # AG829708 Model 108cacd

Exp. Date 24-Oct-2020

Cyl. Type 108

Component Ethanol Certified Concentration 0.100 ± 2% BrAC (272 ppm)

Nitrogen

Balance

Certification Traceable to N.I.S.T. RGM Ethanol Standards:

Serial No.	<u>Concentration</u>	<u>Serial No.</u>	<u>Concentration</u>
EB0010581	392.1 ppm	EB0010603	393.0 ppm
EB0010570	259.8 ppm	EB0010559	258.2 ppm
EB0010285	208.0 ppm	EB0010595	208.3 ppm
EB0010561	103.6 ppm	EB0010562	104.2 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm

Analytical Method:

NDIR

Digitally signed by Quality Control Date: 2018.10.25 14:13:39 -05:00 Reason: Dry gas standard certification of analysis Location: Airgas USA LLC (Lab)

Approved for Release:

Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 3082.06



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT TYPE II

DAVID M ROSE

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, INTOX DMT

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.

DATE10/16/2019	Wa no	
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY	
NUMBER 290248		
EXPIRES 10/16/2021	DIRECTOR OF DEPARTMENT OF HEALTH AND SERVICES	
MO 580-0771 (6-10)	LAB-4 (R6-10	