



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

RECEIVED
By Tracy Crews at 2:19 pm, Feb 01, 2021

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 094804	NAME OF AGENCY Kansas City P.D.	DATE OF INSPECTION 01/26/2021
LOCATION OF INSTRUMENT (STREET AND CITY) 1200 S Holden Warrensburg		TIME OF INSPECTION 08:11

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.

<input checked="" type="checkbox"/> DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)
<input checked="" type="checkbox"/> TEMPERATURE OF ALCO SENSOR (10°C - 40°C)
<input checked="" type="checkbox"/> PRINTER WORKING PROPERLY
<input type="checkbox"/> TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

<input type="checkbox"/> SIMULATOR SOLUTION	<input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER Guth	LOT # AG014102 EXP. DATE 05-20-2022
<input type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C)	SIM. SN _____ SIM. NIST EXP DATE _____

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)

<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
<input type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 • .097	TEST 2 • .096	TEST 3 • .096
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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)
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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).

INSPECTING OFFICER

SIGNATURE Donald D. DeBoer	PRINT NAME Donald D DeBoer
TYPE II PERMIT NUMBER/EXPIRATION DATE 290122 06/13/2021	TELEPHONE NUMBER (660) 593-004

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

AS IV Serial no: 094804
Version no: 532B

TEST RECORD 00679

Temp Date Time ^{s/} 210L

Air Blank:
01/26/21 08:11 .000
Subject Test: Man
27 01/26/21 08:11 .097

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 094804
Version no: 532B

TEST RECORD 00681

Temp Date Time ^{s/} 210L

Air Blank:
01/26/21 08:15 .000
Subject Test: Man
27 01/26/21 08:15 .096

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 094804
Version no: 532B

TEST RECORD 00680

Temp Date Time ^{s/} 210L

Air Blank:
01/26/21 08:13 .000
Subject Test: Man
27 01/26/21 08:13 .096

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 094804
Version no: 532B

TEST RECORD 00682

Temp Date Time ^{s/} 210L

VOID: RFI
12 01/26/21 08:16

Subject Name

Subject I.D.

Operator Name, I.D.

Location



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: 20-May-2020

Lot # AG014102 Model 108caccd

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
20-May-2022	108	Ethanol	0.100 ± 2% BrAC (272 ppm)
		Nitrogen	Balance

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

<u>RGM Serial No.</u>	<u>Concentration</u>	<u>RGM 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

<u>CRM Serial No.</u>	<u>Concentration</u>	<u>CRM Serial No.</u>	<u>Concentration</u>
CC434668	800.0 ppm	0056649	390.1 ppm
CC234503	253.0 ppm	0056662	150.2 ppm

Analytical Method: NDIR

Digitally signed by Quality Control
Date: 2020.05.20 19:51:54 -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
ISO 17034:2016 A2LA accredited. Certificate Number 3082.07



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

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**PERMIT
 TYPE II**

DONALD D DEBOARD

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

INTOX DMT, INTOXILYZER 8000, INTOX EC/IR II, ASIV W/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 6/13/2019

NUMBER 290122

EXPIRES 6/13/2021

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES