



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 111765	PRINTER SN 09B.3589.431	DATE OF INSPECTION 12/07/2021
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LOCATION OF INSTRUMENT (STREET AND CITY) 4001 NE Lakewood Court Lee's Summit Missouri 64064	TIME OF INSPECTION 1:48 pm
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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) 21°
- PRINTER WORKING PROPERLY
- TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

- SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER Intoximeters LOT # AG006306 EXP. DATE 03/03/2022

SIMULATOR TEMPERATURE (34°C ± 0.2°C) _____ SIMULATOR SN _____ SIMULATOR 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)
- 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 <u>.100</u>	TEST 2 <u>.100</u>	TEST 3 <u>.099</u>
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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	<u>4</u>	(0-.04)	<u>0</u>	(.05-.09)	<u>2</u>	(.10-.14)	<u>6</u>	(.15-.19)	<u>4</u>	(OVER .19)	<u>3</u>
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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 meets all DHSS standards and guidelines.

INSPECTING OFFICER

SIGNATURE 	PRINT NAME DEP. S. PLAIN #101/0448
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TYPE II PERMIT NUMBER/EXPIRATION DATE 200054 01/10/2022	TELEPHONE NUMBER (816) 795-1960
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Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Boulevard
Ponlar Bluff MO 63901

AS IV Serial no: 111765
Version no: 532B

TEST RECORD 00331 %/
Temp Date Time 210L

Air Blank: 12/07/21 13:48 .000
Calibration Check: 21 12/07/21 13:48 .100

Subject Name
Monthly Maint.
Subject I.D.

Operator Name, I.D.
Dep. S. Plain #107
Location
JCSO GHB

AS IV Serial no: 111765
Version no: 532B

TEST RECORD 00332 %/
Temp Date Time 210L

Air Blank: 12/07/21 14:00 .000
Calibration Check: 21 12/07/21 14:00 .100

Subject Name
Monthly Maint.
Subject I.D.

Operator Name, I.D.
Dep. S. Plain #107
Location
JCSO GHB

AS IV Serial no: 111765
Version no: 532B

TEST RECORD 00333 %/
Temp Date Time 210L

Air Blank: 12/07/21 14:02 .000
Calibration Check: 22 12/07/21 14:02 .099

Subject Name
Monthly Maint.
Subject I.D.

Operator Name, I.D.
Dep. S. Plain #107
Location
JCSO GHB

AS IV Serial no: 111765
Version no: 532B

TEST RECORD 00334 %/
Temp Date Time 210L

VOID: RFI 12 12/07/21 14:03

Subject Name
Monthly Maint.
Subject I.D.

Operator Name, I.D.
Dep. S. Plain #107
Location
JCSO GHB



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: 4-Mar-2020

Lot # AG006306 Model 108cadd

<u>Exp. Date</u> 3-Mar-2022	<u>Cyl. Type</u> 108	<u>Component</u> Ethanol Nitrogen	<u>Certified Concentration</u> 0.100 ± 2% BrAC (272 ppm) Balance
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Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

<u>RGM Serial No.</u> EB0010581 EB0010570 EB0010285 EB0010581 EB0010681	<u>Concentration</u> 392.1 ppm 259.8 ppm 208.0 ppm 103.6 ppm 52.12 ppm	<u>RGM Serial No.</u> EB0010603 EB0010559 EB0010595 EB0010562 EB0010579	<u>Concentration</u> 393.0 ppm 258.2 ppm 208.3 ppm 104.2 ppm 52.81 ppm
<u>CRM Serial No.</u> CC434668 CC234503	<u>Concentration</u> 800.0 ppm 253.0 ppm	<u>CRM Serial No.</u> 0056649 0056662	<u>Concentration</u> 390.1 ppm 150.2 ppm

Analytical Method: NDIR

Digitally signed by Quality Control
 Date: 2020.03.05 13:27:24 -06:00
 Reason: Dry gas standard certification of analysis
 Location: Airgas USA LLC (Lab)

Approved for Release: Rod Marsala
 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
SEAN PLAIN

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 1/10/2020

NUMBER 200054

EXPIRES 1/10/2022

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (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 PLAIN, SEAN
Permit No 200054
Date Issued 1/10/2020 Date Expires 1/10/2022