



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

RECEIVED

By Tracy Crews at 9:43 am, Dec 10, 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 111769	NAME OF AGENCY Columbia Police Department	DATE OF INSPECTION 12/05/2021
-----------------------------	--	----------------------------------

LOCATION OF INSTRUMENT (STREET AND CITY) 600 East Walnut Columbia	TIME OF INSPECTION 3:02 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

<input type="checkbox"/> SIMULATOR SOLUTION	<input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
---	--

<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Intoximeters</u> LOT # <u>AG020401</u> EXP. DATE <u>07/22/2022</u>

<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)
 - 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>.100</u>
----------------------	----------------------	----------------------

- 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>0</u>	(0-.04) <u>0</u>	(.05-.09) <u>1</u>	(.10-.14) <u>2</u>	(.15-.19) <u>3</u>	(OVER .19) <u>1</u>
-------------------	------------------	--------------------	--------------------	--------------------	---------------------

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).

Monthly Maintenance

INSPECTING OFFICER	
SIGNATURE ▶ <i>Mark D. Hoehne</i>	PRINT NAME Mark D. Hoehne
TYPE II PERMIT NUMBER/EXPIRATION DATE 200187 06/15/2022	TELEPHONE NUMBER (573-874-7585)

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: 111769
Version no: 532B

TEST RECORD 00163

Temp	Date	Time	a/ 210L
------	------	------	------------

Air Blank:
12/05/21 03:03 .000
Calibration Check:
26 12/05/21 03:03 .100

Subject Name

Test # 1

Subject I.D.

Hoehne, Mark D. 2078

Operator Name, I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00164

Temp	Date	Time	a/ 210L
------	------	------	------------

Air Blank:
12/05/21 03:05 .000
Calibration Check:
26 12/05/21 03:05 .100

Subject Name

Test # 2

Subject I.D.

Hoehne, Mark D. 2078

Operator Name, I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00165

Temp	Date	Time	a/ 210L
------	------	------	------------

Air Blank:
12/05/21 03:07 .000
Calibration Check:
27 12/05/21 03:07 .100

Subject Name

Test # 3

Subject I.D.

Hoehne, Mark D. 2078

Operator Name, I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00166

Temp	Date	Time	a/ 210L
------	------	------	------------

VOID: RFI
12 12/05/21 03:08

Subject Name

RFI Check

Subject I.D.

Hoehne, Mark D. 2078

Operator Name, I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00167

Temp	Date	Time	a/ 210L
------	------	------	------------

Air Blank:
12/05/21 03:09 .000
Subject Test: Auto
27 12/05/21 03:09 .000

Subject Name

Self-Test

Subject I.D.

Hoehne, Mark D. 2078

Operator Name, I.D.

Location



Airgas USA LLC (LAB)
 3600 Bernard Street
 St. Louis, Mo. 63103
 Ph: (314) 533-3100
 Fax: (314) 533-7329

Certificate of Analysis

Customer Name
 Exclusive Supplier
 Intoximeters, Inc.
 2081 Craig Road
 St. Louis, Mo 63146

Test Date: 22-Jul-2020

Lot # AG020401 Model 108cadd

<u>Exp. Date</u> 22-Jul-2022	<u>Cyl. Type</u> 108	<u>Component</u> Ethanol Nitrogen	<u>Certified Concentration</u> 0.100 ± 2% BrAG (272 ppm) 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
EB0010670	259.8 ppm	EB0010559	258.2 ppm
EB0010285	208.0 ppm	EB0010595	208.3 ppm
EB0010561	103.6 ppm	EB0010582	104.2 ppm
EB0010681	52.12 ppm	EB0010679	52.81 ppm

<u>CRM Serial No.</u>	<u>Concentration</u>	<u>CRM Serial No.</u>	<u>Concentration</u>
CC434668	800.0 ppm	0058849	390.1 ppm
CC234503	253.0 ppm	0058862	150.2 ppm

Analytical Method: NDIR

Digitally signed by Quality Control
 Date: 2020.07.22 10:21:40 -05:00
 Reason: Dry gas standard certification of analyzers
 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



**PERMIT
TYPE II**

MARK D HOEHNE

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.

DATE 6/15/2020

NUMBER 200187

EXPIRES 6/15/2022

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 800-0771 (9-10)

LAD-4 (RD-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 from of expired air in Missouri.

Operator **HOEHNE, MARK**
Permit No **200187**
Date Issued **6/15/2020** Date Expires **6/15/2022**

