



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

RECEIVED
 By Tracy Crews at 2:52 pm, Oct 27, 2022

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 097444	NAME OF AGENCY MSHP	DATE OF INSPECTION 10/21/2022
LOCATION OF INSTRUMENT (STREET AND CITY) Troop D Zone 6 Office, Mt. Vernon		TIME OF INSPECTION

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>Repro</u>	LOT # <u>21001</u> EXP. DATE <u>06/16/2023</u>
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) <u>34</u>	SIM. SN <u>MP2151</u> SIM. NIST EXP DATE <u>03/16/2023</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-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(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 <i>T.A. Hadlock</i>	PRINT NAME T.A. Hadlock
TYPE II PERMIT NUMBER/EXPIRATION DATE 220128 / 05/11/2024	TELEPHONE NUMBER (417) 895-6868

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: 097444
Version no: 532B

TEST RECORD 00470

Temp Date Time 210L

Air Blank:
10/21/22 10:29 .000
Calibration Check:
23 10/21/22 10:29 .100

Subject Name

Subject I.D.

Operator Name, I.D.

T.A. Hadlock #789

Location

Troop D Zone 6

OFFICE

AS IV Serial no: 097444
Version no: 532B

TEST RECORD 00469

Temp Date Time 210L

Air Blank:
10/21/22 10:25 .000
Calibration Check:
23 10/21/22 10:25 .101

Subject Name

Subject I.D.

Operator Name, I.D.

T.A. Hadlock #789

Location

Troop D Zone 6

OFFICE

AS IV Serial no: 097444
Version no: 532B

TEST RECORD 00468

Temp Date Time 210L

Air Blank:
10/21/22 10:21 .000
Calibration Check:
22 10/21/22 10:21 .101

Subject Name

Subject I.D.

Operator Name, I.D.

T.A. Hadlock #789

Location

Troop D Zone 6

OFFICE

AS IV Serial no: 097444
Version no: 532B

TEST RECORD 00471

Temp Date Time 210L

VOID: RFI
12 10/21/22 10:31

Subject Name

Subject I.D.

Operator Name, I.D.

T.A. Hadlock #789

Location

Troop D Zone 6

OFFICE



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

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PERMIT
TYPE II
TODD A HADLOCK

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repair 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 5/11/2022

NUMBER 220128

EXPIRES 5/11/2024

Laura P. Wang

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

David J. Nicholson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-1)

 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: HADLOCK, TODD
Permit No: 220128
Date Issued 5/11/2022 Date Expires 5/11/2024

