



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 099362	NAME OF AGENCY 509 SFS	DATE OF INSPECTION 17 OCT 22
LOCATION OF INSTRUMENT (STREET AND CITY) 1031 VANDENBERG AVE, WHITEMAN AFB		TIME OF INSPECTION 0825

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

- SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE
- STANDARD SUPPLIER GUTH LOT # 22310 EXP. DATE 11 AUG 24
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 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 → .101	TEST 2 → .099	TEST 3 → .099
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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)	02	(.10-.14)	02	(.15-.19)	0	(OVER .19)	03
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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 	PRINT NAME Thomas G. HUTFLES
TYPE II PERMIT NUMBER/EXPIRATION DATE 200309 / 30 DEC 22	TELEPHONE NUMBER 660-687-1821

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: 099362
Version no: 532B

TEST RECORD 01674 ^{g/}
Temp Date Time 210L

Air Blank: 10/17/22 08:33 .000
Subject Test: Auto
22 10/17/22 08:33 .099

Subject Name
Thomas G. HURFLES
Subject I.D.
200309
Operator Name, I.D.

Location

AS IV Serial no: 099362
Version no: 532B

TEST RECORD 01675 ^{g/}
Temp Date Time 210L

VOID: KFI
12 10/17/22 08:35

Subject Name
Thomas G. HURFLES
Subject I.D.
200309
Operator Name, I.D.

Location

AS IV Serial no: 099362
Version no: 532B

TEST RECORD 01673 ^{g/}
Temp Date Time 210L

Air Blank: 10/17/22 08:32 .000
Subject Test: Auto
21 10/17/22 08:32 .099

Subject Name
Thomas G. HURFLES
Subject I.D.
200309
Operator Name, I.D.

Location

AS IV Serial no: 099362
Version no: 532B

TEST RECORD 01671 ^{g/}
Temp Date Time 210L

Air Blank: 10/17/22 08:28 .000
Subject Test: Auto
21 10/17/22 08:28 .101

Subject Name
Thomas G. HURFLES
Subject I.D.
200309
Operator Name, I.D.

Location



GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **22310** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **August 16, 2022**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1205%** (w/vol) ethyl alcohol. The expiration date for this lot number is **August 11, 2024** at 11:59 PM.

When used in a calibrated Simulator, operating at $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L \pm 3%**.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN03052002 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.



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



**PERMIT
 TYPE II**

THOMAS G. HUTFLES

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 12/30/2020

NUMBER 200309

EXPIRES 12/30/2022

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 HUTFLES, THOMAS
Permit No 200309
Date Issued 12/30/2020 **Date Expires** 12/30/2022

