

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 102466 LOCATION OF INSTRUMENT (STREET AND CITY)	NAME OF AGENCY Sullivar Police	Dept. Date of Inspection 2 Feb 2022 TIME OF INSPECTION	
IDG PROGRESS Drive	ch item if found to be satisfactory or if operating corrected before using instrument.	77.12 12.	
DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)			
TEMPERATURE OF ALCO SENSOR (10°C-40°C) 23°C	_	
PRINTER WORKING PROPERLY	1		
TIME AND DATE DISPLAYING PROPE	ERLY		
BREATH ALCOHOL ACCURACY STANDA	RDS		
M SIMULATOR SOLUTION	☐ COMPRESSI	ED ETHANOL-GAS MIXTURE	
STANDARD SUPPLIER buth	Labs LOT# 21380	EXP. DATE <u>09/13/23</u>	
SIMULATOR TEMPERATURE (34°C ±	0.2°C) 34°C SIM. SN <u>SD 33,2</u> :	SIM. NIST EXP DATE <u>01/26/23</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 = 100%	TEST 2 # 100%	TEST 3 ₩ , 100 Z ₀	
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 D (004) D (.0509) D (.1014) D (.1519) D (OVER.19) D 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). Tostmonest is operating within D.O.H. Specifications.			
NSPECTING OFFICER SIGNATURE LUCY C		PRINT NAME Cresory A. West TELEPHONE NUMBER 573-468-8001 and Senior Services, Southeast District Office	
by mail, fax, or email.			

AS IV Serial not 182466 Version not 532B	leire Leire	AS IV Serial no: 182466 Version no: 532B TEST RECORD 01119	AS IV Serial no: 182466 Version no: 532B TEST RECORD 01120
TEST RECORD 01117 9/ Temp Date Time 210L	from the III	Fred 1	1
Air Blank: 82/82/22 18:45 .888 Calibration Check:	Air Blank: 82/62/22 18:47 .088 Calibration Check: 23 82/82/22 18:47 .180	9 (119)	14 82/82/22 10:32 Subject Name
23 82/82/22 18:45 .168 Subject Name	Subject Mane	Subject None	Subject I.D.
Subject I.D.	Subject I.D.	Subject I.D.	Operator Name, J.D.
Operator Name: I.D.	Operator Wame, I.D.	Operator Name: I.D.	Location
Torat (ch	.ccation		



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 21380 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on September 15, 2021, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1214% (w/vol) ethyl alcohol. The expiration date for this lot number is September 13, 2023 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 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 GREGORY A. WEST

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

ALCÓ-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.

DATE6/4/2021	wante
210121	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 210121	1/1/21/1/
EXPIRES 6/4/2023	
MO 580-0771 (6-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
	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 WEST, GREGORY

Permit No 210121

Date Issued 6/4/2021 Date Expires 6/4/2023

