

From: Virginia DeBoard  
To: [redacted]  
Subject: Field Maintenance Request  
Date: Wednesday, March 9, 2022 5:47:42 PM  
Please find attached the maintenance for Lone Jack  
Virginia DeBoard  
> Have a great day!



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 105446	NAME OF AGENCY Lone Jack	DATE OF INSPECTION 03/03/2022
LOCATION OF INSTRUMENT (STREET AND CITY) 401 N Bynum Road, Lone Jack		TIME OF INSPECTION 11:59 pm

**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 Laboratories, Inc LOT # 2 0420 EXP. DATE 09/22/2022
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34 SIM. SN MP 6535 SIM. NIST EXP DATE 02/01/2023

- 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  .102	TEST 2  .102	TEST 3  .101
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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) <u>1</u>	(.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 	PRINT NAME Virginia DeBoard
TYPE II PERMIT NUMBER/EXPIRATION DATE 210030 2/23/2023	TELEPHONE NUMBER (816) 697-2417

**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: 185446  
Version no: 532B

TEST RECORD 00924

Temp Date Time 210L

Air Blank:  
03/03/22 23:59 .000  
Calibration Check:  
22 03/03/22 23:59 .102

Subject Name

Subject I.D.

Operator Name, I.D.

DeBoard 378

Location  
401 N Bynum Rd

Lone Jack MO

AS IV Serial no: 185446  
Version no: 532B

TEST RECORD 00925

Temp Date Time 210L

Air Blank:  
03/04/22 00:01 .000  
Calibration Check:  
22 03/04/22 00:01 .102

Subject Name

Subject I.D.

Operator Name, I.D.

DeBoard 378

Location  
401 N Bynum Rd

Lone Jack MO

AS IV Serial no: 185446  
Version no: 532B

TEST RECORD 00926

Temp Date Time 210L

Air Blank:  
03/04/22 00:03 .000  
Calibration Check:  
23 03/04/22 00:03 .101

Subject Name

Subject I.D.

Operator Name, I.D.

DeBoard 378

Location  
401 N Bynum Rd

Lone Jack MO

AS IV Serial no: 185446  
Version no: 532B

TEST RECORD 00927

Temp Date Time 210L

VOID: RFI  
12 03/04/22 00:03

Subject Name

Subject I.D.

Operator Name, I.D.

DeBoard 378

Location  
401 N Bynum Rd

Lone Jack MO



**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 **20420** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **September 23, 2020**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1208%** (w/vol) ethyl alcohol. The expiration date for this lot number is **September 22, 2022** 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

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**PERMIT  
TYPE II  
VIRGINIA DEBOARD**

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 2/23/2021

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 210030

EXPIRES 2/23/2023

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 380-9771 (8-18)

LAB-4 (PS-10)

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

**INSTRUMENT OPERATOR CARD**

This permit cardholder is authorized to operate an alcohol breath alcohol analyzer for the determination of the alcoholic content in breath from a sample of expired air in Missouri.

Operator DEBOARD, VIRGINIA  
Permit No 210030  
Date Issued 2/23/2021 Date Expires 2/23/2023





**Missouri Department of Health and Senior Services**  
 P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010  
 RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2966 VOICE 1-800-735-2466  
**Richard W. Moore**  
 Acting Director



**Michael L. Parson**  
 Governor

# SIMULATOR CERTIFICATION REPORT

## SIMULATOR INFORMATION

**Simulator Serial Number:** MP6535      **Manufacturer:** Guth  
**Model Number:** 12V500  
**Agency:** LONE JACK PD  
**Agency Address:** 401 N BYNUM RD, LONE JACK, MO 64070

## NIST THERMOMETER INFORMATION

**Serial Number:** 17KMM00690      **Bias:** 0.01  
**Uncertainty:** 0.02  
**Date of Certification:** 11/10/2021      **Date of Expiration:** 11/10/2022

## ENVIRONMENTAL CONDITIONS

The environmental conditions during testing are within the tolerances of DHSS BAP method 3.

## VERIFICATION RESULTS

<u>Simulator Average</u>	<u>NIST Average</u>	<u>Combined Uncertainty</u>
34.00	34.01	.03

The combined uncertainty is calculated with a k=2 value.

## ADJUSTMENT RESULTS

No adjustment was needed.

**Date of testing:** 2/1/2022  
**Certification Expiration:** 2/1/2023  
**Simulator testing technician:** D. DEBOARD

**Notes on Condition:** none

**Deviation(s) from method:** none

**DHSS BAP Scientist Approving:** BRIANNA MEDRANO  
**Certification No:** MP6535\_212022

X

DHSS BAP Scientist Approving

Simulator Calibration Certification  
 Issued by Lab Manager, DHSS BAP  
 Revision Date: 05/16/2018

Breath Alcohol Program  
 1903 Northwood Drive, Suite 4  
 Poplar Bluff, MO 63901

DHSS BAP Document 3.6A  
 Revision 1  
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