

**RECEIVED**

By Tracy Crews at 2:28 pm, Jan 28, 2022


 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 <b>107977</b>	NAME OF AGENCY <b>Excelsior Springs Police Department</b>	DATE OF INSPECTION <b>01/21/2022</b>
LOCATION OF INSTRUMENT (STREET AND CITY) <b>301 S Main St, Excelsior Springs, MO 64024</b>		TIME OF INSPECTION <b>0811</b>

**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 # 21190 EXP. DATE 06/08/2023
 SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 C SIM. SN MP3564 SIM. NIST EXP DATE 06/09/2022
 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 .101TEST 2 .099TEST 3 .099
 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>2</u>	(0-.04) <u>0</u>	(.05-.09) <u>0</u>	(.10-.14) <u>0</u>	(.15-.19) <u>0</u>	(OVER .19) <u>0</u>
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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

**Brian K Kennedy**

TYPE II PERMIT NUMBER/EXPIRATION DATE

TELEPHONE NUMBER

**210044 03/16/2023****816-629-7105**

**Return completed report to the:** Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

AS IU Serial no: 107977  
Version no: 532B

TEST RECORD 01100

Temp Date Time 210L  
g/

Air Blank: 01/21/22 08:19 .000  
Calibration Check: 19 01/21/22 08:19 .101

Subject Name  
SIMULATOR

Subject I.D.

Operator Name, I.D.  
KENNEDY 911

Location  
ESPD

AS IU Serial no: 107977  
Version no: 532B

TEST RECORD 01101

Temp Date Time 210L  
g/

Air Blank: 01/21/22 08:21 .000  
Calibration Check: 19 01/21/22 08:21 .099

Subject Name  
SIMULATOR

Subject I.D.

Operator Name, I.D.  
KENNEDY 911

Location  
ESPD

AS IU Serial no: 107977  
Version no: 532B

TEST RECORD 01102

Temp Date Time 210L  
g/

Air Blank: 01/21/22 08:22 .000  
Calibration Check: 20 01/21/22 08:22 .099

Subject Name  
SIMULATOR

Subject I.D.

Operator Name, I.D.  
KENNEDY 911

Location  
ESPD

AS IU Serial no: 107977  
Version no: 532B

TEST RECORD 01103

Temp Date Time 210L  
g/

VOID: RFI  
12 01/21/22 08:23

Subject Name  
SIMULATOR

Subject I.D.

Operator Name, I.D.  
KENNEDY 911

Location  
ESPD



**GUTH LABORATORIES, INC.**

690 NORTH 67th STREET • HARRISBURG, PA 17111-4611 • TELEPHONE: 717-564-5470

## CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **21190** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **June 9, 2021**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1206%** (w/vol) ethyl alcohol. The expiration date for this lot number is **June 8, 2023** 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.*



# SIMULATOR CERTIFICATION REPORT

## SIMULATOR INFORMATION

**Simulator Serial Number:** MP3564      **Manufacturer:** Guth  
**Model Number:** 12V500  
**Agency:** EXCELSIOR SPRINGS  
**Agency Address:** 301 S MAIN, EXCELSIOR SPRINGS, MO 64024

## NIST THERMOMETER INFORMATION

**Serial Number:** 17KMM00690      **Bias:** 0.00  
**Uncertainty:** 0.02  
**Date of Certification:** 11/6/2020      **Date of Expiration:** 11/6/2021

## 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>
33.99	34.00	.03

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

## ADJUSTMENT RESULTS

No adjustment was needed.

**Date of testing:** 6/9/2021  
**Certification Expiration:** 6/9/2022  
**Simulator testing technician:** M. BOND

**Notes on Condition:** none

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

**DHSS BAP Scientist Approving:** B. LUTMER  
**Certification No:** MP3564\_692021

X *Brian Lutmer*

DHSS BAP Scientist Approving



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

2

PERMIT  
 TYPE II

**BRIAN K. KENNEDY**

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 3/16/2021

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 210044

EXPIRES 3/16/2023

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 KENNEDY, BRIAN  
 Permit No 210044  
 Date Issued 3/16/2021 Date Expires 3/16/2023