



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY

**ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT**

RECEIVED  
BY: [unclear] DATE: 04/01/2021

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<br>107989  | PRINTER SN<br>099.3586.794 | DATE OF INSPECTION<br>04/01/2021 |
| LOCATION OF INSTRUMENT (STREET AND CITY)<br>1700 US Hwy 67 Florissant Missouri 63031 |                            | TIME OF INSPECTION<br>9:30 am    |

**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 INTOXIMETERES LOT # AG906601 EXP. DATE 03/07/2021

SIMULATOR TEMPERATURE (34°C ± 0.2°C) \_\_\_\_\_ SIMULATOR SN \_\_\_\_\_ SIMULATOR 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 .099      TEST 2 .100      TEST 3 .100

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) |
|----------|---------|-----------|-----------|-----------|------------|

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).

Instrument working within D.O.H. guidelines.

**INSPECTING OFFICER**

|   |                                     |
|---|-------------------------------------|
| SIGNATURE<br>   | PRINT NAME<br>Kyle Feldmann DSN 623 |
| TYPE II PERMIT NUMBER/EXPIRATION DATE<br>200262 10/2/2022 | TELEPHONE NUMBER<br>(314) 831-7000  |

**Return completed report to the:** Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office  
2875 James Boulevard  
Poplar Bluff, MO 63901

AS 10 Serial no: 107989  
Version no: 532B

TEST RECORD 01183

| Temp | Date | Time | % | 210L |
|------|------|------|---|------|
|------|------|------|---|------|

Air Blank:  
04/01/22 09:30 .000  
Calibration Check:  
23 04/01/22 09:30 .099

Subject Name

TEST 1

Subject I.D.

Operator Name, I.D.

FELDMANN 250262

Location

FPD

AS 10 Serial no: 107989  
Version no: 532B

TEST RECORD 01184

| Temp | Date | Time | % | 210L |
|------|------|------|---|------|
|------|------|------|---|------|

Air Blank:  
04/01/22 09:32 .000  
Calibration Check:  
23 04/01/22 09:32 .100

Subject Name

TEST 2

Subject I.D.

Operator Name, I.D.

FELDMANN 250262

Location

FPD

AS 10 Serial no: 107989  
Version no: 532B

TEST RECORD 01185

| Temp | Date | Time | % | 210L |
|------|------|------|---|------|
|------|------|------|---|------|

Air Blank:  
04/01/22 09:34 .000  
Calibration Check:  
23 04/01/22 09:34 .100

Subject Name

TEST 3

Subject I.D.

Operator Name, I.D.

FELDMANN 250262

Location

FPD

AS 10 Serial no: 107989  
Version no: 532B

TEST RECORD 01186

| Temp | Date | Time | % | 210L |
|------|------|------|---|------|
|------|------|------|---|------|

Air Blank:  
12 04/01/22 09:36

Subject Name

RFI

Subject I.D.

Operator Name, I.D.

FELDMANN 250262

Location

FPD

AS 10 Serial no: 107989  
Version no: 532B

TEST RECORD 01187

| Temp | Date | Time | % | 210L |
|------|------|------|---|------|
|------|------|------|---|------|

Air Blank:  
04/01/22 09:37 .000  
Subject Test: Auto  
12 04/01/22 09:37 .000

Subject Name

Blank

Subject I.D.

Operator Name, I.D.

FELDMANN 250262

Location

FPD



Airgas USA LLC (LAB)  
 3500 Bernard Street  
 St. Louis, Mo. 63103  
 Ph: (314) 533-3100  
 Fax: (314) 533-7328

## Certificate of Analysis

**Customer Name**  
*Exclusive Supplier*  
 Intoximeters, Inc.  
 2081 Craig Road  
 St. Louis, Mo 63146

**Test Date:** 2-Mar-2021

**Lot # AG106001 Model 108cacc**

|                                |                         |   |  |
|--------------------------------|-------------------------|---|--|
| <b>Exp. Date</b><br>1-Mar-2023 | <b>Cyl. Type</b><br>108 | <b>Component</b><br>Ethanol<br>Nitrogen | <b>Certified Concentration</b><br>0.100 ± 2% BrAC (272 ppm)<br>Balance |
|--------------------------------|-------------------------|---|--|

Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

| <u>RGM Serial No.</u> | <u>Concentration</u> | <u>RGM Serial No.</u> | <u>Concentration</u> |
|-----------------------|----------------------|-----------------------|----------------------|
| EB0010581             | 392.1 ppm            | EB0010603             | 393.0 ppm            |
| EB0010570             | 259.8 ppm            | EB0010559             | 258.2 ppm            |
| EB0010285             | 208.0 ppm            | EB0010595             | 208.3 ppm            |
| EB0010561             | 103.6 ppm            | EB0010562             | 104.2 ppm            |
| EB0010681             | 52.12 ppm            | EB0010579             | 52.81 ppm            |

  

| <u>CRM Serial No.</u> | <u>Concentration</u> | <u>CRM Serial No.</u> | <u>Concentration</u> |
|-----------------------|----------------------|-----------------------|----------------------|
| CC727481              | 800.0 ppm            | CC727493              | 390.0 ppm            |
| CC727496              | 253.0 ppm            | CC727498              | 150.0 ppm            |

**Analytical Method:** NDIR

Approved for Release: 

*ISO 17025:2005 A2LA accredited. Certificate Number 3082.06*  
*ISO 17034:2016 A2LA accredited. Certificate Number 3082.07*



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

2

**PERMIT  
 TYPE II**

**KYLE J FELDMANN**

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, INTOX EC/IR II**

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 10/2/2020

NUMBER 200262

EXPIRES 10/2/2022

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 **FELDMANN, KYLE**  
 Permit No **200262**  
 Date Issued **10/2/2020**    Date Expires **10/2/2022**