



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 111633	NAME OF AGENCY Kansas City Police Department	DATE OF INSPECTION 04/29/2022
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LOCATION OF INSTRUMENT (STREET AND CITY) 9701 MARION PARK DR, KANSAS CITY	TIME OF INSPECTION 1916
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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 **INTOXIMETERS** LOT # **AG019702** EXP. DATE **07/15/2022**

SIMULATOR TEMPERATURE (34°C ± 0.2°C) _____ 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 .079	TEST 2 .079	TEST 3 .079
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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) 0	(.10-.14) 1	(.15-.19) 1	(OVER .19) 3
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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).

Instrument meets all DOHSS standards and guidelines.

INSPECTING OFFICER

SIGNATURE *[Signature]* 5765

PRINT NAME **Wade Robinson**

TYPE II PERMIT NUMBER/EXPIRATION DATE **210266 - 11/18/2023**

TELEPHONE NUMBER **() 816-482-8141**

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: 111633
Version no: 532B

TEST RECORD 00194

Temp	Date	Time	s/ 210L
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Air Blank:
04/29/22 19:16 .000
Calibration Check:
24 04/29/22 19:16 .079

Subject Name

Test 1

Subject I.D.

Operator Name, I.D.

Robinson #210266
Location

AS IV Serial no: 111633
Version no: 532B

TEST RECORD 00196

Temp	Date	Time	s/ 210L
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Air Blank:
04/29/22 19:20 .000
Calibration Check:
25 04/29/22 19:20 .079

Subject Name

Test 3

Subject I.D.

Operator Name, I.D.

Robinson #210266
Location

AS IV Serial no: 111633
Version no: 532B

TEST RECORD 00195

Temp	Date	Time	s/ 210L
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Air Blank:
04/29/22 19:18 .000
Calibration Check:
24 04/29/22 19:18 .079

Subject Name

Test 2

Subject I.D.

Operator Name, I.D.

Robinson #210266
Location

AS IV Serial no: 111633
Version no: 532B

TEST RECORD 00197

Temp	Date	Time	s/ 210L
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VOID: RFI
12 04/29/22 19:21

Subject Name

RFI

Subject I.D.

Operator Name, I.D.

Robinson #210266
Location

Airgas

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

Certificate of Analysis

Test Date: 20-Jul-2020

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

Lot # AG019702 Model 108caod

Exp. Date
15-Jul-2022

CYL Type
108

Component
Ethanol
Nitrogen

Certified Concentration
0.082 ± 0.002 BrAC (223 ppm)
Balance

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010581	392.1 ppm	EB0010603	393.0 ppm
EB0010570	259.8 ppm	EB0010589	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
CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC434668	800.0 ppm	0058649	390.1 ppm
CC234503	253.0 ppm	0058652	150.2 ppm

Analytical Method: NDIR

Quality System by Quality Control
Date: 2020/07/20 15:23:22 -0500
Location: St. Louis, MO
Operator: Airgas USA, LLC (LAB)

Approved for Release:

Rod Marsala
Rod Marsala

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



PERMIT
TYPE II
WADE ROBINSON

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, INTOXILYZER 8000

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 11/18/2021

Laura A. Day
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 210266

David A. Robinson
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 11/18/2023

USA 99-10

MO 99-071 (9-10)

STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM
INSTRUMENT OPERATOR CARD

This named candidate is authorized to operate an Intoxilizer breath alcohol instrument for the determination of the alcoholic content of breath from an expired air specimen.

ROBINSON, WADE
Permit No. 210266
Date Issued 11/18/2021 Date Expires 11/18/2023