



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY

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

REVIEWED  
By: Tracy Crowe, at 8:16 am, May 23, 2022

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 111662	NAME OF AGENCY Clayton Police Dept	DATE OF INSPECTION 05/20/2022
LOCATION OF INSTRUMENT (STREET AND CITY) 10 S Brentwood Blvd Clayton, MO 63105		TIME OF INSPECTION 11:02 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 GUTH LOT # 21080 EXP. DATE 03/08/2023
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIM. SN MP5541 SIM. NIST EXP DATE 07/01/2022

- 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 → .096	TEST 2 → .096	TEST 3 → .096
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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)	(.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 Todd Shearrer
TYPE II PERMIT NUMBER/EXPIRATION DATE 210268 11/18/2023	TELEPHONE NUMBER (314) 645-3000

**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: 111662  
Version no: 532B

TEST RECORD 00037

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
05/28/22 11:02 .000  
Calibration Check:  
24 05/28/22 11:02 .096

Subject Name  
Monthly Maintenance  
Subject I.D.  
Test 1  
Operator Name, I.D.

SHEARER 210268  
Location  
10 S Brentwood Blvd  
Clayton, MO 63105

AS IV Serial no: 111662  
Version no: 532B

TEST RECORD 00038

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
05/28/22 11:04 .000  
Calibration Check:  
24 05/28/22 11:04 .096

Subject Name  
Monthly Maintenance  
Subject I.D.  
Test 2  
Operator Name, I.D.

SHEARER 210268  
Location  
10 S Brentwood Blvd  
Clayton, MO 63105

AS IV Serial no: 111662  
Version no: 532B

TEST RECORD 00039

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
05/28/22 11:05 .000  
Calibration Check:  
25 05/28/22 11:05 .096

Subject Name  
Monthly Maint.  
Subject I.D.  
Test 3  
Operator Name, I.D.

SHEARER 210268  
Location  
10 S Brentwood Blvd  
Clayton, MO 63105

AS IV Serial no: 111662  
Version no: 532B

TEST RECORD 00041

Temp Date Time <sup>s/</sup> 210L

UNIT: RTI  
12 05/28/22 11:09

Subject Name  
Monthly Maint.  
Subject I.D.  
RTI Test  
Operator Name, I.D.

SHEARER 210268  
Location  
10 S Brentwood Blvd  
Clayton, MO 63105

AS IV Serial no: 111662  
Version no: 532B

TEST RECORD 00042

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
05/28/22 11:19 .000  
Subject Test: N/A  
25 05/28/22 11:19 .000

Subject Name  
Monthly Maint.  
Subject I.D.  
Self Test  
Operator Name, I.D.

SHEARER 210268  
Location  
10 S Brentwood Blvd  
Clayton, MO  
63105



## 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 **21080** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **March 10, 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 **March 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: MP5541 Manufacturer: Guth
Model Number: 12V500
Agency: CLAYTON PD
Agency Address: 10 S BRENTWOOD BLVD, CLAYTON, MO 63105

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

Table with 3 columns: Simulator Average (34.00), NIST Average (34.00), Combined Uncertainty (.02)

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

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 7/1/2021
Certification Expiration: 7/1/2022
Simulator testing technician: M. BOND

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving: B. LUTMER
Certification No: MP5541\_712021

Signature of Brian Lutmer

DHSS BAP Scientist Approving



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



**PERMIT**  
**TYPE II**  
**TODD SHEARRER**

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 DMT**

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

NUMBER 210268

EXPIRES 11/18/2023

*Laura P. Way*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Donald A. Korman*

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 SHEARRER, TODD  
 Permit No 210268  
 Date Issued 11/18/2021 Date Expires 11/18/2023

