



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 STATE PUBLIC HEALTH LABORATORY
ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED
 By Tracy Crews at 8:44 am, Apr 26, 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 **111776** NAME OF AGENCY **Kansas City Police Department** DATE OF INSPECTION **04/09/2022**

LOCATION OF INSTRUMENT (STREET AND CITY) **9701 MARION PARK DR, KANSAS CITY** TIME OF INSPECTION **1441**

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 # **AG011202** EXP. DATE **04/21/2022**

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 **.081.** TEST 2 **.081** TEST 3 **.080**

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) (0.05-.09) (0.10-.14) **1** (0.15-.19) **2** (OVER .19) **1**

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 *Wade Robinson* 5785

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: 111776
Version no: 532B

TEST RECORD 00291

Temp	Date	Time	s/ 210L
------	------	------	------------

Air Blank:
04/09/22 14:41 .000
Calibration Check:
18 04/09/22 14:41 .081

Subject Name

Test 1

Subject I.D.

Operator Name, I.D.

Robinson #210266

Location

AS IV Serial no: 111776
Version no: 532B

TEST RECORD 00292

Temp	Date	Time	s/ 210L
------	------	------	------------

Air Blank:
04/09/22 14:42 .000
Calibration Check:
20 04/09/22 14:42 .081

Subject Name

Test 2

Subject I.D.

Operator Name, I.D.

Robinson #210266

Location

AS IV Serial no: 111776
Version no: 532B

TEST RECORD 00293

Temp	Date	Time	s/ 210L
------	------	------	------------

Air Blank:
04/09/22 14:44 .000
Calibration Check:
21 04/09/22 14:44 .080

Subject Name

Test 3

Subject I.D.

Operator Name, I.D.

Robinson #210266

Location

AS IV Serial no: 111776
Version no: 532B

TEST RECORD 00294

Temp	Date	Time	s/ 210L
------	------	------	------------

VOID: RFI
12 04/09/22 14:45

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) 833-3100
Fax: (314) 533-7328

Certificate of Analysis

Test Date: 21-Apr-2020

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

Lot # AG011202 Model 108caod

Exp. Date
21-Apr-2022

Com. Type
Ethanol
Nitrogen

Certified Concentration
0.082 ± 0.002 BMAC (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	258.8 ppm	EB0010559	258.2 ppm
EB0010285	208.0 ppm	EB0010595	208.3 ppm
EB0010561	103.6 ppm	EB0010582	104.2 ppm
EB0010681	52.42 ppm	EB0010579	52.81 ppm
CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC434668	800.0 ppm	0056649	390.1 ppm
CC234503	253.0 ppm	0056662	150.2 ppm

Analytical Method: NDIR

Digitally signed by Rod Marsala
DN: cn=Rod Marsala, o=Airgas USA, LLC, email=rod.marsala@airgas.com

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
NUMBER 210266
EXPIRES 11/18/2023
MO 589-0771 (9-10)

Deanna Q. Day
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Deanna A. Robinson
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
LMB-916-10

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

The named operator is authorized to operate an Intoximetric breath alcohol analyzer in Missouri.
This permit is valid for the determination of the alcoholic content in breath from or expired air.

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