

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

RECEIVED By Tracy Crews at 11:48 am, Nov 06, 2024

REPORT #7

Complete this report in duplicate at the time Send copy to Department of Health and Seni	of the regular monthly p or Services; retain origi	preventative mainten nal in department fil	nance check, an e.	d whenev	er instrument is r	repaired.
ALCO SENSOR IV SN 111736	NAME OF AGENCY Missouri State H	ighway Patrol		DATE OF 11/05/2	INSPECTION 2024	
LOCATION OF INSTRUMENT (STREET AND CITY) 6012 NE Antioch Road, Gladstone, MO	54119			TIME OF I 7:40 pr	NSPECTION M	
CHECKLIST: Place a mark in the box by each where determined.) Unmarked items must be	item if found to be satis	factory or if operatin instrument.	g within establish	ned limits.	(Write in observe	d values
DIGITAL READOUT (ALL ELEMENTS C						
TEMPERATURE OF ALCO SENSOR (1)	0°C - 40°C)					
	RLY					
BREATH ALCOHOL ACCURACY STANDA						
SIMULATOR SOLUTION			ED ETHANOL-G	GAS MIXT	URE	
STANDARD SUPPLIER Guth Laborate	oriesL	.от # <u>2</u> 3180	EXP. DATI	E 05/17/2	2025	
SIMULATOR TEMPERATURE (34°C ± 0		M. SN MP24	24 SIM.	NIST EXF	P DATE 11/27/2	024
Run three tests using a standard solution less. Check the box corresponding to the ✓ 0.100% STANDARD - MUST READ 0.080% STANDARD - MUST READ 0.040% STANDARD - MUST READ	standard solution being BETWEEN 0.095% an BETWEEN 0.076% an	g used. (PRINTOUT d 0.105% INCLUSI d 0.084% INCLUSI	ATTACHED) VE VE		nave a spread o	
TEST 1 🖝 .100	TEST 2 🖝 .100		TEST 3 🖝 .1	01		
RFI DETECTOR OPERATING						
INDICATE THE NUMBER OF BREATH TES (DO NOT INCLUDE SELF-ADMINISTERED		IG RANGES SINCE	THE LAST MA	INTENAN	ICE REPORT:	
		(10-14) 0		0		0
REFUSALS 0 (004) 0 List any new parts and describe any alterati established limits (use other side if necessar		((.1519) e the instrument		(OVER .19) te satisfactorily a	
INSPECTING OFFICER			PRINT NAME			
· The			CPL. B. E.		N #1256	
TYPE II PERMIT NUMBER/EXPIRATION DATE 240111 05/21/2026			(816) 622-0			
Return completed report to the: Breath A by mail,	lcohol Program, MO De fax, or email.	epartment of Health	and Senior Serv	vices, Sou	theast District Of	fice

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CERTIFICATE OF ANALYSIS

Certified Alcoho Reference Solution for Simulator

Random Samples of Lot Number 23180 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on May 18, 2023, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N 610N9030209, and found to contain 0.1220% (w/vol) ethyl alcohol. The expiration date for this lot number is May 17, 2025 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C. this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 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 Cerdliant Reference Standard lot number FN11172002 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.



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



PERMIT TYPE II BRUCE E. THOMAN

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.

Mike Masson

DATE _____5/21/2024

NUMBER 240111

EXPIRES 5/21/2026

MO 580-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Daven I. Nichelson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

