



**CAPE GIRARDEAU COUNTY PUBLIC HEALTH CENTER  
ENVIRONMENTAL SECTION  
FOOD ESTABLISHMENT INSPECTION REPORT**

TIME IN	TIME OUT
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BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO COMPLY WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME:	OWNER:	PERSON IN CHARGE:	
ADDRESS:	ESTABLISHMENT #:	COUNTY:	
CITY/ZIP:	PHONE:	FAX:	P.H. PRIORITY : H M L
ESTABLISHMENT TYPE	C. STORE	CATERER	DELI
BAKERY	SCHOOL	SENIOR CENTER	SUMMER F.P.
RESTAURANT			
			GROCERY STORE
			TAVERN
			INSTITUTION
			TEMP.FOOD
			MOBILE VENDORS
PURPOSE			
Pre-opening	Routine	Follow-up	Complaint
			Other
FROZEN DESSERT	SEWAGE DISPOSAL	WATER SUPPLY	
Approved Disapproved	PUBLIC PRIVATE	COMMUNITY NON-COMMUNITY	
Not Applicable		Date Sampled _____	
License No. _____		PRIVATE Results _____	

**RISK FACTORS AND INTERVENTIONS**

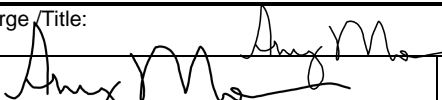
**Risk factors** are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. **Public health interventions** are control measures to prevent foodborne illness or injury.

Compliance	Demonstration of Knowledge			COS	R	Compliance	Potentially Hazardous Foods			COS	R
IN OUT	Person in charge present, demonstrates knowledge, and performs duties					IN OUT N/O N/A	Proper cooking, time and temperature				
Employee Health											
IN OUT	Management awareness; policy present					IN OUT N/O N/A	Proper reheating procedures for hot holding				
IN OUT	Proper use of reporting, restriction and exclusion					IN OUT N/O N/A	Proper cooling time and temperatures				
Good Hygienic Practices											
IN OUT N/O	Proper eating, tasting, drinking or tobacco use					IN OUT N/O N/A	Proper hot holding temperatures				
IN OUT N/O	No discharge from eyes, nose and mouth					IN OUT N/O N/A	Proper cold holding temperatures				
Preventing Contamination by Hands											
IN OUT N/O	Hands clean and properly washed					IN OUT N/A	Proper date marking and disposition				
IN OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed						Time as a public health control (procedures / records)				
IN OUT	Adequate handwashing facilities supplied & accessible					IN OUT N/O N/A	Consumer Advisory				
Approved Source											
IN OUT	Food obtained from approved source					IN OUT N/A	Consumer advisory provided for raw or undercooked food				
IN OUT N/O N/A	Food received at proper temperature					IN OUT	Highly Susceptible Populations				
IN OUT	Food in good condition, safe and unadulterated					IN OUT N/O N/A	Pasteurized foods used, prohibited foods not offered				
IN OUT N/O N/A	Required records available: shellstock tags, parasite destruction					IN OUT N/A	Chemical				
Protection from Contamination											
IN OUT N/A	Food separated and protected					The letter to the left of each item indicates that item's status at the time of the inspection. IN = in compliance                                      OUT = not in compliance N/A = not applicable                                      N/O = not observed					
IN OUT N/A	Food-contact surfaces cleaned & sanitized										
IN OUT N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food										

**GOOD RETAIL PRACTICES**

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

IN	OUT	Safe Food and Water			COS	R	IN	OUT	Proper Use of Utensils			COS	R
		Pasteurized eggs used where required							In-use utensils: properly stored				
		Water and ice from approved source							Utensils, equipment and linens: properly stored, dried, handled				
Food Temperature Control													
		Adequate equipment for temperature control							Single-use/single-service articles: properly stored, used				
		Approved thawing methods used							Gloves used properly				
		Thermometers provided and accurate							Utensils, Equipment and Vending				
									Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used				
Food Identification													
		Food properly labeled; original container							Warewashing facilities: installed, maintained, used; test strips used				
									Nonfood-contact surfaces clean				
Prevention of Food Contamination													
		Insects, rodents, and animals not present							Physical Facilities				
		Contamination prevented during food preparation, storage and display							Hot and cold water available; adequate pressure				
		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry							Plumbing installed; proper backflow devices				
		Wiping cloths: properly used and stored							Sewage and wastewater properly disposed				
		Fruits and vegetables washed before use							Toilet facilities: properly constructed, supplied, cleaned				
									Garbage/refuse properly disposed; facilities maintained				
									Physical facilities installed, maintained, and clean				

Person in Charge / Title:		Date:
Inspector:	Telephone No.:	EPHS No.:
		Follow-up: Yes No
		Follow-up Date:



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ESTABLISHMENT NAME		ADDRESS		CITY/ZIP		
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F	
<b>Code Reference</b>	<b>PRIORITY ITEMS</b>				<b>Correct by (date)</b>	<b>Initial</b>
	<b>Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. <u>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</u></b>					
<b>Code Reference</b>	<b>CORE ITEMS</b>				<b>Correct by (date)</b>	<b>Initial</b>
	<b>Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). <u>These items are to be corrected by the next regular inspection or as stated.</u></b>					

**EDUCATION PROVIDED OR COMMENTS**

<b>Person in Charge /Title:</b>		<b>Date:</b>							
<b>Inspector:</b>	<b>Telephone No.</b>	<b>EPHS No.</b>	<table style="width: 100%; border: none;"> <tr> <td style="border: none;"><b>Follow-up:</b></td> <td style="border: none; text-align: center;">Yes</td> <td style="border: none; text-align: center;">No</td> </tr> <tr> <td style="border: none;"><b>Follow-up Date:</b></td> <td colspan="2" style="border: none;"></td> </tr> </table>	<b>Follow-up:</b>	Yes	No	<b>Follow-up Date:</b>		
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