



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

Table with 2 columns: TIME IN, TIME OUT and PAGE 1 of

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.

Form containing fields for ESTABLISHMENT NAME, OWNER, PERSON IN CHARGE, ADDRESS, ESTABLISHMENT #, COUNTY, CITY/ZIP, PHONE, FAX, P.H. PRIORITY (H, M, L), ESTABLISHMENT TYPE (BAKERY, RESTAURANT, etc.), PURPOSE (Pre-opening, Routine, etc.), FROZEN DESSERT (Approved, Disapproved, etc.), SEWAGE DISPOSAL (PUBLIC, PRIVATE), WATER SUPPLY (COMMUNITY, NON-COMMUNITY), and 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.

Table with columns for Compliance (IN, OUT, N/A), Demonstration of Knowledge (Person in charge, Employee Health, Good Hygienic Practices, Preventing Contamination by Hands, Approved Source, Protection from Contamination), COS, R, Potentially Hazardous Foods (Proper cooking, reheating, cooling, holding temperatures, date marking, consumer advisory, chemical), and COS, R. Includes a legend for IN, OUT, N/A.

GOOD RETAIL PRACTICES

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

Table with columns for IN, OUT, Safe Food and Water (Pasteurized eggs, water/ice), Food Temperature Control (Adequate equipment, thawing methods, thermometers), Food Identification (Food properly labeled), Prevention of Food Contamination (Insects, rodents, personal cleanliness, wiping cloths, fruits/vegetables), Proper Use of Utensils (In-use utensils, equipment/linens, single-use articles, gloves), Utensils, Equipment and Vending (Cleanable surfaces, warewashing), and Physical Facilities (Hot/cold water, plumbing, sewage, toilet facilities, garbage/refuse).

Form for Person in Charge / Title, Date, Inspector (Mistake Lawrence), Telephone No., EPHS No., Follow-up: Yes/No, and Follow-up Date.



Prevent. Promote. Protect.

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

TIME IN	TIME OUT
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ESTABLISHMENT NAME	ADDRESS	CITY/ZIP
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FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>			

Code Reference	CORE ITEMS	Correct by (date)	Initial
Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). <b>These items are to be corrected by the next regular inspection or as stated.</b>			

EDUCATION PROVIDED OR COMMENTS			

Person in Charge /Title:			Date: _____
Inspector: <i>Natalie Larson</i>	Telephone No. _____	EPHS No. _____	Follow-up: <input type="checkbox"/> Yes <input type="checkbox"/> No
			Follow-up Date: _____