# Food Establishment Inspection Report

## Establishment Information
- **Establishment Name:** Rhodes 101
- **Owner:** PAJCO
- **Address:** 10 S West End Blvd, Cape Girardeau, MO 63701
- **Telephone:** 334-5760
- **Fax:**
- **License No.:** ____________
- **Compliance:**

## Environmental Section

### Establishment Type
- Pre-opening
- Routine
- Follow-up
- Complaint
- Other

### FROZEN DESSERT
- Approved
- Disapproved
- Not Applicable

### SEWAGE DISPOSAL
- Public
- Private

### WATER SUPPLY
- Community
- Non-Community
- Private

### Risks Factors and Interventions

**Risk Factors:**
- 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

<table>
<thead>
<tr>
<th>Item</th>
<th>COS</th>
<th>R</th>
<th>In</th>
<th>Out</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demonstration of Knowledge</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Person in charge present, demonstrates knowledge, and performs duties</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Employee Health</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Management awareness; policy present</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proper use of reporting, restriction and exclusion</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Good Hygiene Practices</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proper eating, tasting, drinking or tobacco use</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No discharge from eyes, nose and mouth</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Approved Source

<table>
<thead>
<tr>
<th>Item</th>
<th>COS</th>
<th>R</th>
<th>In</th>
<th>Out</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food obtained from approved source</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food received at proper temperature</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food in good condition, safe and unadulterated</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Protection from Contamination

<table>
<thead>
<tr>
<th>Item</th>
<th>COS</th>
<th>R</th>
<th>In</th>
<th>Out</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food separated and protected</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food-contact surfaces cleaned &amp; sanitized</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proper disposition of returned, previously served, reconditioned, and unsafe food</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Good Retail Practices

- Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.
- **Safe Food and Water**
  - Pasteurized eggs used where required
  - Water and ice from approved source

- **Food Temperature Control**
  - Adequate equipment for temperature control
  - Approved thawing methods used

- **Footwear Identification**
  - Food properly labeled; original container

- **Prevention of Food Contamination**
  - In-use utensils: properly stored
  - Utensils, equipment and linens: properly stored, dried, handled

- **Food and Water Temperature**
  - Single-use/single-service articles: properly stored, used

- **Food Preparation and Processing**
  - Gloves used properly

### RISK FACTORS AND INTERVENTIONS

- **Compliance:**
  - In : Compliant
  - Out : Not compliant
  - R: Results

### Date Sampled: 05-07-2014

### Results:

- 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

### Summary:

- **Food Temperature Control:**
  - Adequate equipment for temperature control
  - Proper use of reporting, restriction and exclusion

- **Physical Facilities:**
  - Adequate equipment for temperature control
  - Proper use of reporting, restriction and exclusion

### Follow-up:

- **Follow-up Date:** 

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**Person in Charge:**
**Telephone No.:** 335-7846
**EPRH No.:** 1399

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**Inspector:**
**Date:** 05-07-2014
# Rhodes 101

**Address:** 10 S West End Blvd  
**City/Zip:** Cape Girardeau 63701

<table>
<thead>
<tr>
<th>Food Product/Location</th>
<th>Temp. in °F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambient air/reach in cooler</td>
<td>39.3</td>
</tr>
<tr>
<td>Ambient air/walk in cooler</td>
<td>40.6</td>
</tr>
<tr>
<td>Ambient air/sandwich service cooler</td>
<td>40.3</td>
</tr>
<tr>
<td>Brat/rollers</td>
<td>142.2</td>
</tr>
</tbody>
</table>

## Priority Items

Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items **MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.**

No priority items at this time

## Core Items

Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.

### Code Reference

<table>
<thead>
<tr>
<th>Code Reference</th>
<th>Description</th>
<th>Correct by (date)</th>
<th>Initial</th>
</tr>
</thead>
<tbody>
<tr>
<td>4-601.11</td>
<td>Inside of reach in cooler and freezer are soiled with food debris</td>
<td>NRI</td>
<td></td>
</tr>
<tr>
<td>6-501.12</td>
<td>Floor under boxes of drink mix for the frozen drink machine has a few spills</td>
<td>NRI</td>
<td></td>
</tr>
<tr>
<td>4-601.11</td>
<td>Cabinets in customer service area are soiled with spills and debris</td>
<td>NRI</td>
<td></td>
</tr>
<tr>
<td>5-205.11</td>
<td>Handsink in customer service area being used as a dump sink</td>
<td>NRI</td>
<td></td>
</tr>
</tbody>
</table>

NRI = Next Routine Inspection

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**Education Provided or Comments**

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**Person in Charge /Title:**

**Date:** 05-07-2014

**Inspector:**  
**Telephone No.:** 335-7846  
**EPhS No.:** 1399  
**Follow-up:** ☐ Yes ☐ No  
**Follow-up Date:** _______