



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 BUREAU OF ENVIRONMENTAL HEALTH SERVICES  
**FOOD ESTABLISHMENT INSPECTION REPORT**

TIME IN	2:20pm	TIME OUT	5:30pm
DATE	8-10-16	PAGE	1 of 3

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: Desloge River Mart		OWNER: Paul Bauman, Theresa Bauman		PERSON IN CHARGE: Brandon Casey	
ADDRESS: 300 N. Desloge Dr.			ESTABLISHMENT NUMBER: 4807		COUNTY: 187
CITY/ZIP: Desloge, 63601		PHONE: 573-431-1113		FAX: na	
P.H. PRIORITY : <input type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L					
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY RESTAURANT <input checked="" type="checkbox"/> C. STORE SCHOOL <input type="checkbox"/> CATERER SENIOR CENTER <input type="checkbox"/> DELI SUMMER F.P. <input type="checkbox"/> GROCERY STORE TAVERN <input type="checkbox"/> INSTITUTION TEMP.FOOD <input type="checkbox"/> MOBILE VENDORS					
PURPOSE <input checked="" type="checkbox"/> Pre-opening <input type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____					
FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input checked="" type="checkbox"/> Not Applicable License No. _____		SEWAGE DISPOSAL <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE		WATER SUPPLY <input checked="" type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> PRIVATE Date Sampled _____    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
<input checked="" type="checkbox"/> OUT	Person in charge present, demonstrates knowledge, and performs duties			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper cooking, time and temperature		
<b>Employee Health</b>							
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper cooling time and temperatures		
<b>Good Hygienic Practices</b>							
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO	Proper eating, tasting, drinking or tobacco use			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Proper hot holding temperatures		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	No discharge from eyes, nose and mouth			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper cold holding temperatures		
<b>Preventing Contamination by Hands</b>							
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Hands clean and properly washed	✓		<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Proper date marking and disposition		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> 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)		
<input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Consumer Advisory		
<b>Approved Source</b>							
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Consumer advisory provided for raw or undercooked food		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/C <input type="checkbox"/> N/A	Food received at proper temperature			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Highly Susceptible Populations		
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated				Pasteurized foods used, prohibited foods not offered		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Required records available: shellstock tags, parasite destruction			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Chemical		
<b>Protection from Contamination</b>							
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food separated and protected				Food additives: approved and properly used		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized	✓			Toxic substances properly identified, stored and used	✓	
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO	Proper disposition of returned, previously served, reconditioned, and unsafe food				Conformance with Approved Procedures		
<p>The letter to the left of each item indicates that item's status at the time of the inspection.</p> <p>IN = in compliance      OUT = not in compliance            N/A = not applicable      N/O = not observed            COS = Corrected On Site      R = Repeat Item</p>							

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

Person in Charge / Title: Brandon Casey		Date: August 10, 2016	
Inspector: 	John Wiseman	Telephone No. (573)431-1947	EPHS No. 1507
Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Follow-up Date:	



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ESTABLISHMENT NAME Desloge River Mart		ADDRESS 300 N. Desloge Dr.		CITY /ZIP Desloge, 63601		
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F	
Pepsi cooler at drive-up		38	Sandwich prep cooler		32	
Delfield cooler in kitchen		36	Sandwich prep cold hold: cheese, ham		41, 41	
Delfield freezer in kitchen		0	turkey, roast beef		41, 41	
Pizza prep cooler		36	Customer access reach-in sandwich cooler		28	
Pizza prep freezer		0	Great American sandwich cooler		30	
Code Reference	<b>PRIORITY ITEMS</b> 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>				Correct by (date)	Initial
7-201.11B	A can of stainless steel cleaner was observed on the food prep surface in the kitchen. Toxic amaterials shall be stored were they cannot contaminate food, food contact surfaces, equipment and single service items. COS by removing the cleaner.				COS	
7-102.11	An unlabeled spray bottle was observed stored beside the three compartment sink. Working containers for storing toxic materials shall be labeled with the common name of the material. COS by discarding the bottle.				COS	
2-301.14H	A food service employee was observed donning new disposable gloves without first washing their hands. Food employees shall wash their hands prior to donning new gloves. COS by discussion with the staff and manager.				COS	
4-501.114 A,C	Prepared Chlorox Spray cleaner was observed used as a food surface sanitizer. This product may not be used as a food contact sanitizer. Only unscented bleach diluted to 50-100 ppm chlorine or quaternary ammonia prepared at the manufacturer's recommended concentration shall be used for sanitizing food contact surfaces in this establishment. COS by preparing a bucket of quaternary ammonia sanitizer with a clean cloth to be used for surface sanitizing.				COS	
Code Reference	<b>CORE ITEMS</b> 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>				Correct by (date)	Initial
6-301.12A	Paper towels were not available at the hand wash sinks in the drive-up area, in the kitchen area and near the ice machine in the back storage area. All hand wash sinks shall be provided with a sanitary means of hand drying. COS by supplying paper towels to these locations.				COS	
6-301.11	The soap dispenser was not attached to the wall at the hand wash sink in the drive-up area. All hand wash sinks shall be provided with hand soap. COS by attaching the dispenser to the wall.				COS	BM
3-305.11A 3	A box of bakery products and a box of single service items were observed on the floor in the kitchen. Food and single service items shall be stored at least six inches off of the floor. COS by removing these items from the floor.				COS	
4-903.11A 3						
4-303.14	Test strips for determining correct quaternary ammonia sanitizer concentration were not available. Please obtain appropriate test strips for the sanitizer in use.				8-11-16	
6-301.14	Hand wash signs reminding employees to wash their hands are not present at the hand wash sinks. Please post sings at all hand wash sinks reminding employees to wash their hands.				8-11-16	
4-302.12	An appropriately scaled food thermometer was not available for kitchen use. Please obtain a food thermometer capable of measuring temperatures from 0 - 220 F.				8-11-16	
EDUCATION PROVIDED OR COMMENTS						
Person in Charge /Title:		Brandon Casey			Date: August 10, 2016	
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FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Dippin Dots freezer		0	Gehl's cheese dispensers		Not in use
Walk-in freezer		15			
Beer cooler		28			
Reach-in beer/soda cooler		38			
Hunt Bros. Pizza hot display case		Not in use			

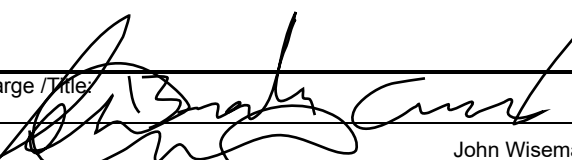

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
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3-501.16A 3-501.19	<p>Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b></p> <p>Note: A Hunt Brothers Pizza heated display case is present at the customer access portion of the front service area. If this unit will be used to hold food hot, it must be capable of keeping food at a temperature of 135F or greater. If the food displayed within this cabinet will be held by Time as a Public Health Control; a written procedure shall be prepared in advance and maintained in the establishment and made available to the regulatory authority upon request that specifies:</p> <ol style="list-style-type: none"> <li>1) The food held by time shall have an internal temperature of at least 135F or greater when removed from hot holding, or cooked to the appropriate temperature for the type of food it is, prior to holding by time.</li> <li>2) The food shall be marked with a discard time that is no greater than four hours from preparation of removal from hot holding.</li> <li>3) The food shall be discarded at the time specified on the food.</li> </ol> <p>This facility is approved to operate as a food establishment.</p>		BL
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Code Reference	CORE ITEMS	Correct by (date)	Initial
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5-205.11B	<p>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></p> <p>Note: A sink has been installed in the customer self-service coffee island. According to the owner, this sink is not intended as a hand wash sink. Hand wash sinks shall be use for hand washing exclusively. Please post a sign at this sink that indicates that it is not a hand wash sink.</p>	First routine inspection	BL
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EDUCATION PROVIDED OR COMMENTS

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