



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

TIME IN	8:44am	TIME OUT	11:50am
DATE	10-7-16	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 & Theresa Bauman		PERSON IN CHARGE: Jordan Mull	
ADDRESS: 300 N. Desloge Dr.			ESTABLISHMENT NUMBER: 4807		COUNTY: 187
CITY/ZIP: Desloge, 63601		PHONE: 573-431-1113		FAX: na	
P.H. PRIORITY : <input checked="" 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 type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____					
FROZEN DESSERT <input checked="" 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 <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper reheating procedures for hot holding		
<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 cooling time and temperatures		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper hot holding temperatures		
<b>Good Hygienic Practices</b>				<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper cold holding temperatures		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Proper eating, tasting, drinking or tobacco use	✓		<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper date marking and disposition		✓
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	No discharge from eyes, nose and mouth			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Time as a public health control (procedures / records)		✓
<b>Preventing Contamination by Hands</b>				<b>Consumer Advisory</b>			
<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	Consumer advisory provided for raw or undercooked food		
<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			<b>Highly Susceptible Populations</b>			
<input type="checkbox"/> IN <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	Pasteurized foods used, prohibited foods not offered		
<b>Approved Source</b>				<b>Chemical</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	Food additives: approved and properly used		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> COS <input type="checkbox"/> N/A	Food received at proper temperature			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Toxic substances properly identified, stored and used		✓
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated			<b>Conformance with Approved Procedures</b>			
<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	Compliance with approved Specialized Process and HACCP plan		
<b>Protection from Contamination</b>				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 COS=Corrected On Site      R=Repeat Item			
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food separated and protected						
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized	✓					
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO	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
<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"/>	Single-use/single-service articles: properly stored, used		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Adequate equipment for temperature control			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Gloves used properly		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	✓		<b>Utensils, Equipment and Vending</b>				
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Thermometers provided and accurate			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
<b>Food Identification</b>					<input type="checkbox"/>	<input checked="" type="checkbox"/>	Warewashing facilities: installed, maintained, used; test strips used		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food properly labeled; original container			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Nonfood-contact surfaces clean		
<b>Prevention of Food Contamination</b>					<b>Physical Facilities</b>				
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Insects, rodents, and animals not present			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hot and cold water available; adequate pressure		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Contamination prevented during food preparation, storage and display			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sewage and wastewater properly disposed		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used and stored			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Toilet facilities: properly constructed, supplied, cleaned		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fruits and vegetables washed before use			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage/refuse properly disposed; facilities maintained		
					<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge: <i>Jordan Mull</i>		Jordan Mull		Date: October 7, 2016	
Inspector: <i>John Wiseman</i>		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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**FOOD ESTABLISHMENT INSPECTION REPORT**

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
Pizza prep cooler amb		38	Sandwich prep cooler amb		32
Pizza freezer amb		0	CldHld: ham, cheese, tomatoes		37,37,33
CldHld:cheese,cooked beef,mushrooms		42,38,39	HotHld: hotdogs, gravy, Gehl's cheese		158,143,155
Delfield cooler/freezer		34, 0	Retail sandwich reach-in		40
Pepsi cooler at drive-up		36	Retail creamer		42

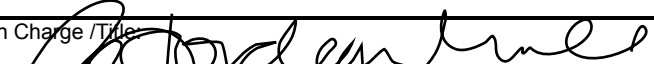

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
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	Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>		
3-501.17A	Additional Temps (F): Beer cave = 32, W/I beer cooler = 34, W/I freezer = 0, Soup heated for hot holding = 177	COS	Jm
	Discard dates were not observed on open packages of cooked burgers, chicken breast and eggs. Potentially hazardous foods held refrigerated shall be marked with the day or date, not to exceed seven days, by which time the food will be sold, consumed or discarded. COS by marking with the discard date.	COS	
2-401.11A	An employee beverage was observed stored on the food prep surface in the kitchen. Employees shall eat or drink in designated areas where contamination of food and food contact surfaces cannot occur. COS by removing the beverage.	COS	
7-102.11	An unlabeled spray bottle of cleaner was observed hanging above the mop sink. Working containers of toxic materials shall be clearly and individually labeled with the common name of the material. COS by labeling.	COS	
7-201.11	A spray bottle of chlorine sanitizer was observed stored on the food prep surface in the kitchen. Toxic materials shall be stored where they cannot contaminate food, food contact surfaces, single service items and clean linens. COS by removing the sanitizer.	COS	
4-601.11A	Food residue was observed on the upper interior of the microwave in the sandwich/service area. Food contact surfaces shall be clean to sight and touch. COS by washing, rinsing and sanitizing.	COS	

Code Reference	CORE ITEMS	Correct by (date)	Initial
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	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>		
6-301.11	Soap was not available at the hand wash sink in the kitchen. Hand wash sinks shall be provided with a supply of hand soap. COS by providing soap.	COS	Jm
3-501.13	Bags of prepackaged soup were observed thawing in warm water in the three compartment sink. Potentially hazardous foods shall be thawed under refrigerated conditions, in 70F running water, or as part of the cooking process. COS by discussion with the staff.	COS	
4-601.11C	An accumulation of food residue and mold was observed on the door seals of the pizza freezer and pizza cooler in the kitchen. Non-food contact surface shall be kept free of dust, dirt, food residue and debris. Please clean and disinfect the door seals as often as necessary.	10-10-16	
4-302.14	The kitchen uses both chlorine and quaternary ammonia as food contact surface sanitizers. Chlorine test strips were available but quaternary test strip were not available. Please obtain test strips for the quaternary ammonia sanitizer.	10-21-16	
6-301.14	Hand wash signs were not posted in the men's & women's restroom. A sign or poster that notifies food employees to wash their hands shall be provided at all handwashing sinks used by food employees and shall be clearly visible to food employees. Please post hand wash signs at all hand wash sinks.		
3-501.19	The facility is holding sandwiches and pizza using time as a public health control. The sandwiches and pizza are marked with the discard time. A written policy for this procedure must be established. COS by establishing TPC policy.	COS	

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title:  Jordan Mull		Date: October 7, 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
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FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
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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.**

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Code Reference	CORE ITEMS	Correct by (date)	Initial
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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.**

3-305.11A	Boxes of food and single service items were observed stored on the floor in the outside storage building. Food and single service items shall be protected from contamination by storing them at least six inches off of the floor.	10-7-16	JM
4-903.11A	Boxes of food were observed stored on the floor in the walk-in freezer. Food shall be protected from contamination by storing it at least six inches off of the floor.	COS	
3-305.11A	A waste can was not provided at the hand wash sink in the back room. Hand wash sinks shall be provided with a waste receptacle for used paper towels. COS by providing a waste can.	COS	
4-903.11A	A box of drinking straws was observed stored beside the indirect drain for the water filtering system. Single service items shall be protected from sources of contamination. COS by moving the straws.	COS	
3-305.11A	Cardboard boxes of soda syrup were observed stored on the floor in the back room. Food shall be protected from contamination by storing it at least six inches off of the floor. Please store food off of the floor. COS placing the soda syrup on crates.	COS	
4-903.11A	Single service cup lids were observed stored on the floor in the back room. Single service items shall be protected from contamination by storing at least six inches off of the floor. COS by moving the cup lids.	COS	

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