



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

TIME IN	8:54 am	TIME OUT	11:12 am
DATE	Sept. 26, 2018	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: Panera Bread		OWNER: Panera Bread Company		PERSON IN CHARGE: James Green, Asst. Mngr.	
ADDRESS: 685 West Karsch Boulevard			ESTABLISHMENT NUMBER: 4760		COUNTY: St. Francois
CITY/ZIP: Farmington 63640		PHONE: (573)760-1347		FAX: (573)760-1368	
PURPOSE: <input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____					
ESTABLISHMENT TYPE: <input checked="" type="checkbox"/> BAKERY RESTAURANT <input 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					
FROZEN DESSERT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input checked="" type="checkbox"/> Not Applicable		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 _____	
License No. _____					

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 type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper cooking, time and temperature		
	Employee Health			<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"/> N/O <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		
	Good Hygienic Practices			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper cold holding temperatures		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Proper eating, tasting, drinking or tobacco use			<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 type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
<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				Highly Susceptible Populations		
<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		
	Approved Source				Chemical		
<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"/> N/A	Food received at proper temperature			<input checked="" type="checkbox"/> OUT	Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated				Conformance with Approved Procedures		
<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		
	Protection from Contamination				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 type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" 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"/> 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
<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 type="checkbox"/>	<input checked="" type="checkbox"/>	Utensils, equipment and linens: properly stored, dried, handled	✓	
		Food Temperature Control			<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used					Utensils, Equipment and Vending		
<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		
		Food Identification			<input checked="" type="checkbox"/>	<input 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	✓	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Insects, rodents, and animals not present			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical Facilities		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Contamination prevented during food preparation, storage and display			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hot and cold water available; adequate pressure		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used and stored			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sewage and wastewater properly disposed		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Fruits and vegetables washed before use	✓		<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied, cleaned		
					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Garbage/refuse properly disposed; facilities maintained		
					<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge / Title: <i>James Green</i>		James Green, Asst. Mngr.		Date: September 26, 2018	
Inspector: <i>Rose Mier</i>		Rose Mier		Telephone No. (573)431-1947	EPHS No. 1390
				Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				Follow-up Date: Oct. 10, 2018	



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

ESTABLISHMENT NAME Panera Bread		ADDRESS 685 West Karsch Boulevard		CITY /ZIP Farmington 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
			See temperatures recorded below		

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
----------------	----------------	-------------------	---------

NOTE	<p>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.</p> <p>TEMPERATURES, in degrees Fahrenheit: Prep Line: cold hold - corn 37, chicken 40, tomatoes 40, egg whites 40 drawer 1 - ambient 40, greens 40; #2 - ambient 38, chicken 40; #3- ambient 41; #4 - ambient 40 drawer 1 - ambient 35; drawer 2 - ambient 40 hot hold #1: eggs 143; sausage 160; potato soup 163 Espresso cooler, ambient 35 drawers holding extra salad and bleu cheese: ambient 50, lettuce 48, ambient 45, yogurt dressing 45 beverage cooler, ambient 40 cooler, beverages, ambient: 39, 40 refrigerator holding eggs, ambient 38 prep cooler, top: chicken 37, pork 41, cut tomatoes 40, turkey 41 drawers, ambient: 41, 41, 40, 40 Drive up: hot hold: chili 184, cheese soup 172, potato soup 163 cooler, ambient 31; cooler 40; 1/2 and 1/2 34 drawer 1-4, ambient: 30, 41, 39, 40 Service counter: beverage cooler 38, display cooler 36 Bakery: walk-in cooler, ambient 39 Walk-in cooler 39, walk-in freezer 0, rethermolizer 180</p>		
------	---	--	--

Code Reference	CORE ITEMS	Correct by (date)	Initial
----------------	------------	-------------------	---------

6-202.15A	Daylight was observed between the front entry doors. Outside entries shall be sealed to protect against pest entry. Please seal door.	10/10/18	
4-601.11C	Water was pooled on a middle shelf in the prep area; sleeves of bowls were laying in the water. Single use items shall be protected from contamination while in storage. CORRECTED ON SITE by discarding bowls and cleaning shelf.	COS	
4-903.11A			
3-202.15A	According to manager, bananas are not washed prior to peeling. All produce shall be washed prior to peeling, cutting, cooking, or serving whole. Please wash all produce. COS by discussion with manager	COS	
4-903.11A	Debris observed on the inside of three holders containing plastic utensils in the drive-up area. Please routinely clean the holders to protect the utensils from being contaminated from debris. COS by cleaning containers.	COS	
4-903.11A	A holder containing spreading utensils was dirty, and non-sanitized items were intermixed with the sanitized utensils in the bakery drawer. Please clean the holder and separate sanitized and non-sanitized items. COS by cleaning holder and removing non-sanitized items.	COS	
4-901.11A	Flat trays, stored on the bakery rack, were wet nested. Equipment shall be air dried before storing nested. COS by removing wet trays and recleaning.	COS	
4-601.11C	Debris observed on the seat of one high chair. Please wash, rinse, and sanitize all surfaces of high chairs after each use. CORRECTED ON SITE by cleaning chair.	COS	
5-501.115	Accumulation of trash and leaves observed in the outside dumpster enclosure. Trash enclosures shall be maintained free of trash. Please clean enclosure as often as needed to prevent debris accumulation.	9/30/18	

EDUCATION PROVIDED OR COMMENTS

NOTE: a line through an item on page one indicates the item is not applicable or was not observed.

Person in Charge /Title: 		James Green, Asst. Mngr.		Date: September 26, 2018	
Inspector: 	Rose Mier	Telephone No. (573)431-1947	EPHS No. 1390	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Follow-up Date: Oct. 10, 2018



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

ESTABLISHMENT NAME Panera Bread		ADDRESS 685 West Karsch Boulevard		CITY / ZIP Farmington 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F

Code Reference	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.	Correct by (date)	Initial
3-501.16A	Refrigerated drawers in the lower half of the prep cooler had temperatures greater than 41F. This unit was being used as an extra holding space, so two of the drawers were empty, and the top was not in use. According to the manager, the food held in two of the drawers was placed in them approximately one hour prior. Their temperatures were: cut lettuce 48F, bleu cheese 47F. These foods were removed and placed in the walk-in cooler. All managers will be notified via internal email to not use the cooler until it is repaired and reliably holds food at 41F or lower.	9/30/18	<i>th</i>
4-202.11A	The blade on a can opener was rusted. Food contact surfaces shall be free of rust and other imperfections. CORRECTED ON SITE by discarding can opener.	COS	
4-601.11A	A flat tray on the bakery rack was observed with debris. Food contact surfaces shall be clean to sight and touch. Please inspect equipment and utensils after cleaning. COS by pulling dirty trays for recleaning.	COS	
4-202.11A	A hole was observed in the bottom of the ice bucket. Food contact surfaces shall be free of breaks and other imperfections. Please discard ice bucket.	9/30/18	

Code Reference	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.	Correct by (date)	Initial
3-305.11A	A large amount of frost was observed on all surfaces in the walk-in freezer. Food shall be protected from contamination while in storage. NOTE: According to manager, a part is on order for this freezer. Please keep freezer as free of frost as possible, and protect food from contamination by always keeping tightly covered.	10/10/18	<i>JE</i>

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: <i>James Green</i> James Green, Asst. Mngr.		Date: September 26, 2018
Inspector: <i>Rose Mier</i> Rose Mier	Telephone No. (573)-431-1947	EPHS No. 1390
Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Follow-up Date: Oct. 10, 2018