



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

TIME IN	11:18am	TIME OUT	1:55pm
DATE	10-5-17	PAGE	1 of 4

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: Pizza Hut		OWNER: Heartland Pizza, LLC		PERSON IN CHARGE: Cindy Moore	
ADDRESS: 401 North State Street			ESTABLISHMENT NUMBER: 4579		COUNTY: 187
CITY/ZIP: Desloge, 63601		PHONE: 573-431-6190		FAX: na	
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 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 checked="" type="checkbox"/> OUT N/O N/A	Proper cooking, time and temperature		
	<b>Employee Health</b>			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O 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 N/A	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O N/A	Proper hot holding temperatures		
	<b>Good Hygienic Practices</b>			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O N/A	Proper cold holding temperatures		
<input checked="" type="checkbox"/> OUT N/O	Proper eating, tasting, drinking or tobacco use			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O N/A	Proper date marking and disposition		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> OUT 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)		
	<b>Preventing Contamination by Hands</b>				<b>Consumer Advisory</b>		
<input checked="" type="checkbox"/> OUT 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 N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				<b>Highly Susceptible Populations</b>		
<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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Food obtained from approved source	<input checked="" type="checkbox"/>		<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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Toxic substances properly identified, stored and used		<input checked="" type="checkbox"/>
<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 N/A	Food separated and protected						
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT N/A	Food-contact surfaces cleaned & sanitized	<input checked="" type="checkbox"/>					
<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		
		<b>Food Temperature Control</b>			<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					<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 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		
		<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 checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage and display			<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	Toilet facilities: properly constructed, supplied, cleaned		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fruits and vegetables washed before use			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Garbage/refuse properly disposed; facilities maintained		
					<input type="checkbox"/>	<input checked="" type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge: <i>Cindy Moore</i>		Cindy Moore		Date: October 5, 2017	
Inspector: <i>John Wiseman</i>		John Wiseman		Telephone No. (573)431-1947	EPHS No. 1507
				Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				Follow-up Date: 10-19-17	



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**FOOD ESTABLISHMENT INSPECTION REPORT**

ESTABLISHMENT NAME Pizza Hut		ADDRESS 401 North State Street		CITY /ZIP Desloge, 63601	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Salad Bar: potato sld, cottage cheese, lettuce		40, 40	Sandwich table amb		36
Pizza Make Table amb		41	Cold hold: ham, meatballs, tomato, pasta		39, 36
Cold hold: cheese, ham, ground beef, chicken		34	Wingstreet freezer		38, 40
		41, 41	Pizza as prepared, chicken alfredo as prep		0
		41, 41			212, 210

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. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>	Correct by (date)	Initial
3-501.17A	A discard date was not observed on a container of cooked chicken stored in the sandwich table cooler. Potentially hazardous foods stored refrigerated shall be marked with the day or date, not to exceed seven days total, by which time the food shall be sold, consumed or discarded. COS by marking the food with a discard date.	COS	
4-601.11A	An accumulation of food debris was observed on the interior of the microwave above the sandwich table. Food contact surfaces shall be clean to sight and touch. COS by wash, rinse and sanitizing the microwave interior.	COS	
4-601.11A	Food debris was observed on the interior of a plastic container in clean storage. Food contact surfaces shall be clean to sight and touch. COS by moving the container to ware washing.	COS	
7-202.11	A can of Raid insect spray was observed in the cabinet below the service desk. Only those insecticides approved for use in a food establishment may be present on the premises. COS by removing the insecticide from the premises.	COS	
3-201.11A	Two cartons of farm eggs were observed in the cabinet below the service counter. Only food obtained from inspected and approved sources that comply with law may be present on the premises. COS by removing the eggs from the premises.	COS	

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). <b>These items are to be corrected by the next regular inspection or as stated.</b>	Correct by (date)	Initial
4-501.11B	The door seals of the salad bar cooler are broken and accumulation mold and debris. Equipment components such as door seals shall be kept intact and in good repair. Please replace the door seals.	10-19-17	
4-601.11A	Grease residue was observed on the floor of the make table cooler. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the interior of the cooler.		
4-601.11C	Food splatters were observed on the interior of the cold well covers at the pizza make station. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the interior of the cold well covers.		
4-601.11C	Mildew was observed on door seals of various refrigerators and freezers throughout the facility. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean and disinfect the door seals of all the cold holding units in the facility.		
4-601.11C	The open wire shelving in use throughout the facility for storage of soiled equipment, clean equipment, dry goods, cleaning supplies, ect. is generally soiled with grease, food debris and dirt. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Thoroughly clean the wire shelving throughout the facility.		

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: Cindy Moore Date: October 5, 2017

Inspector: John Wiseman Telephone No. (573) 431-1947 EPHS No. 1507 Follow-up:  Yes  No Follow-up Date: 10-19-17



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ESTABLISHMENT NAME Pizza Hut		ADDRESS 401 North State Street		CITY /ZIP Desloge, 63601	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Walk-in cooler		30			
Walk-in freezer		10			

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. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>	Correct by (date)	Initial
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4-601.11C	An accumulation of grease was observed on the plastic shielding adjacent to the fryers. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the plastic shielding attached to the side of the cart.	10-19-17	
4-903.11A	Food drips were observed on open packages of single service food wrappers stored below the Wingstreet station. Single use items shall be protected from sources of contamination. Please protect single use items from contamination.	10-19-17	
5-501.116 B	Food splatters were observed on trash cans throughout the facility. Waste handling receptacles shall be cleaned at a frequency that prevents the build-up of soil or becoming attractants for insects and rodents. Please clean the facility trash cans.		
6-501.12A	An accumulation of dirt and debris was observed on the floor below the facility three compartment sink and the mechanical dishwasher. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the floor in the kitchen and ware washing area.		
6-501.14A	An accumulation of dust was observed on ceiling vents in the ware washing area. Intake and exhaust ducts shall be cleaned so they are not a source of contamination by dust, dirt, and other materials. Please clean the ceiling vents.		
4-601.11C	An accumulation of mold and food debris was observed on the wire shelving in the walk-in cooler. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Clean and disinfect the wire shelving in the walk-in cooler.		

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Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Follow-up Date: 10-19-17



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FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F

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6-501.12A	Food debris was observed on the floor of the walk-in cooler. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the floor of the walk-in cooler.	10-19-17	
6-501.14A	A heavy accumulation of dust and debris was observed on the fan covers of the cooling unit in the walk-in cooler. Intake and exhaust ducts shall be cleaned so they are not a source of contamination by dust, dirt, and other materials. Please clean the fan covers.		
6-501.12A	An accumulation of water and mold was observed on the floor outside the walk-in freezer and on shelving and equipment in this same area. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean and disinfect this area and equipment affected by the mold.		
4-901.11	Plastic containers were observed to be wet nested in the dry storage area. After cleaning and sanitizing, equipment shall be air dried. Please thoroughly dry equipment prior to placing in storage.		

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