



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

TIME IN	10:20 am	TIME OUT	12:05 pm
DATE	July 5, 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: Pizza Hut		OWNER: A & D Management Company	PERSON IN CHARGE: Teresa Shanks	
ADDRESS: 401 North State Street		ESTABLISHMENT NUMBER: 4579	COUNTY: St. Francois	
CITY/ZIP: Desloge 63601		PHONE: 573.431.6190	FAX: 573.431.1715	P.H. PRIORITY : <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L
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				
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 checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper cooking, time and temperature		
Employee Health				<input checked="" 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	Management awareness; policy present			<input checked="" 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"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper hot holding temperatures		
Good Hygienic Practices				<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <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"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <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 checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Time as a public health control (procedures / records)		
Preventing Contamination by Hands				<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Consumer Advisory		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Hands clean and properly washed			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input 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			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Highly Susceptible Populations		
<input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Pasteurized foods used, prohibited foods not offered		
Approved Source				<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Chemical		
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Food additives: approved and properly used		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Food received at proper temperature			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Conformance with Approved Procedures		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Required records available: shellstock tags, parasite destruction			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input 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 checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food separated and protected						
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized						
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	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	COS	R	IN	OUT	COS	R
Safe Food and Water				Proper Use of Utensils			
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Food Temperature Control				Utensils, Equipment and Vending			
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Food Identification				Physical Facilities			
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
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<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		

Person in Charge /Title: <i>Teresa Shanks</i> Teresa Shanks		Date: July 5, 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: July 9, 2018



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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
Beverage cooler/dining, ambient		40	Salad bar, top: eggs, cottage cheese		37, 39
Traulsen Wings freezer, ambient		12	Salad bar, bottom: ambient, eggs		39, 32
Sausage pizza, oven		206	Pasta prep cooler, top: ham, cooked pasta		40, 40
Walk-in freezer, ambient		20	Pasta prep cooler, bottom: ambient, chix wings,		32 33
Hot hold: pastas		156, 144	Walk-in cooler: ambient, chicken wings, cheese		38, 36, 39

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.			
NOTE	TEMPERATURES, continued, in degrees Fahrenheit: Pizza prep cooler (left side), top: sausage 45, salami 45, pepperoni 44 Pizza prep cooler (middle), top: chicken 45, hamburger 44, chicken 49 Pizza prep cooler (right side), top: cheese 51, cut tomatoes 51 Pizza prep cooler, bottom, left side 40; right side 40		TS
4-601.11A	Mold was observed on the housing around the soda dispenser nozzles in the wait beverage station. Food contact surfaces shall be washed, rinsed, and sanitized at least daily for non-potentially hazardous food. Please clean entire area around nozzles to prevent debris/mold from getting into beverage.	7/5/18	TS
4-601.11A	Debris was observed on a plate, stored above the pass-through heated table. Food contact surfaces shall be clean to sight and touch. CORRECTED ON SITE by placing wash, rinse, and sanitize.	COS	
4-601.11A	Food debris observed on several spatulas, stored in three containers on the prep table. Please inspect all spatulas in these buckets and re-clean those with food debris. Please pre-clean equipment and utensils before cleaning in the warewash machine; inspect for cleanliness prior to storing. COS by scrubbing and re-cleaning all spatulas in the buckets.	COS	
4-601.11A	Several pasta bowls, stored by the pasta prep cooler, were observed with debris on them. COS by taking to warewashing machine for cleaning.	COS	
3-501.16A	The temperatures of the food in the top of the pizza prep cooler were between 45 and 50F. Potentially hazardous food shall be held at 41F or lower. According to manager, the food was placed in this unit approximately 1.25 hours prior to taking these temperatures. NOTE: potentially hazardous food held in this cooler was moved to the bottom of the cooler at 40F. A repair person will be on site today.	7/6/18	

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.			
4-901.11	Metal inserts were stored wet-nested on the clean equipment rack. Equipment shall be allowed to completely air dry prior to storing nested. CORRECTED ON SITE by unstacking to allow drying.	COS	TS
4-601.11C	Black debris, possibly mold, was observed on the outside glass access doors on the walk-in cooler. Nonfood contact surfaces shall be cleaned at a frequency to prevent debris accumulation.	7/9/18	
4-501.11A	Water was pooling in the bottom of the pizza prep cooler. Please determine source of water and repair. Keep cooler dry to reduce mold and bacterial growth.	7/9/18	
4-601.11C	Accumulation of debris observed on the racks holding delivery bags, and on the rack that holds dirty dishes. Please clean racks as often as needed to keep clean.	7/9/18	
4-501.14	Debris observed on the spray nozzle and faucets of the 3-vat sink. Warewashing equipment shall be cleaned at least daily. Please clean all surfaces of warewashing equipment and sinks daily. COS by cleaning	COS	
6-501.12A	Mold and debris observed on the wall behind the 3-vat sink. Physical facilities shall be cleaned at a frequency to prevent debris accumulation. Please clean and use a sanitizer on the wall to reduce mold growth. COS by cleaning	COS	
6-501.12A	Black mold and debris observed on the doors and outside areas of the walk-in freezer and the walk-in cooler. Please clean doors and outsides of coolers as often as needed to keep clean. COS by cleaning.	COS	

EDUCATION PROVIDED OR COMMENTS

A line through an item on page one indicates it was not observed or is not applicable.
 A copy of this report will be emailed to this store.

Person in Charge /Title: <i>Teresa Shanks</i> Teresa Shanks		Date: July 5, 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: July 9, 2018



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ESTABLISHMENT NAME Pizza Hut	ADDRESS 401 North State Street	CITY / ZIP Desloge 63601
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FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F

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4-601.11A	Food debris observed on several pans, stored on the rack by the walk-in freezer. Please pre-clean equipment and inspect for cleanliness before storing. COS by taking to 3-vat for pre-cleaning.	COS	TJ
4-601.11A	Food debris observed on several pizza pans, stored in the back storage area. Please inspect all equipment and return those with food debris to the warewashing area.	7/5/18	

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
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