



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

TIME IN 1300 TIME OUT 1410  
PAGE 1 of 2

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: **Great River Chinese Restaurant** OWNER: **Fang Yang & Wei Lin** PERSON IN CHARGE: **Same**  
ADDRESS: **1124 N Douglass** COUNTY: **Dunklin**  
CITY/ZIP: **Malden, MO 63863** PHONE: **573-276-6106** FAX: P.H. PRIORITY: ☒ H ☐ M ☐ L

ESTABLISHMENT TYPE  
☐ BAKERY ☐ C. STORE ☐ CATERER ☐ DELI ☐ GROCERY STORE ☐ INSTITUTION ☐ MOBILE VENDORS  
☒ RESTAURANT ☐ SCHOOL ☐ SENIOR CENTER ☐ SUMMER F.P. ☐ TAVERN ☐ TEMP. FOOD  
PURPOSE  
☐ Pre-opening ☒ Routine ☐ Follow-up ☐ Complaint ☐ Other

FROZEN DESSERT ☐ Approved ☐ Disapproved  
SEWAGE DISPOSAL ☒ PUBLIC ☐ PRIVATE  
WATER SUPPLY ☒ COMMUNITY ☐ NON-COMMUNITY ☐ 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 checked="" type="checkbox"/>	OUT N/O N/A	Proper cooking, time and temperature			
Employee Health											
<input checked="" type="checkbox"/>	OUT	Management awareness; policy present				<input checked="" type="checkbox"/>	OUT N/O N/A	Proper reheating procedures for hot holding			
<input checked="" type="checkbox"/>	OUT	Proper use of reporting, restriction and exclusion				<input checked="" type="checkbox"/>	OUT N/O N/A	Proper cooling time and temperatures			
Good Hygienic Practices											
<input checked="" type="checkbox"/>	OUT N/O	Proper eating, testing, drinking or tobacco use				<input checked="" type="checkbox"/>	OUT N/O N/A	Proper hot holding temperatures			
<input checked="" type="checkbox"/>	OUT N/O	No discharge from eyes, nose and mouth				<input checked="" type="checkbox"/>	OUT N/O N/A	Proper cold holding temperatures		<input checked="" type="checkbox"/>	
Preventing Contamination by Hands											
<input checked="" type="checkbox"/>	OUT N/O	Hands clean and properly washed				<input checked="" type="checkbox"/>	OUT N/A	Proper date marking and disposition			
<input checked="" type="checkbox"/>	OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Consumer Advisory					
<input checked="" type="checkbox"/>	OUT	Adequate handwashing facilities supplied & accessible		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	OUT N/O N/A	Consumer advisory provided for raw or undercooked food			
Highly Susceptible Populations											
<input checked="" type="checkbox"/>	OUT	Food obtained from approved source				<input checked="" type="checkbox"/>	OUT N/A	Pasteurized foods used, prohibited foods not offered			
<input checked="" type="checkbox"/>	OUT	Food received at proper temperature				<input checked="" type="checkbox"/>	OUT	Chemicals			
<input checked="" type="checkbox"/>	OUT	Food in good condition, safe and unadulterated				Food additives: approved and properly used					
<input checked="" type="checkbox"/>	OUT	Required records available: shellstock tags, parasite destruction				Toxic substances properly identified, stored and used					
Conformance with Approved Procedures											
<input checked="" type="checkbox"/>	OUT	Food separated and protected				<input checked="" type="checkbox"/>	OUT N/A	Compliance with approved Specialized Process and HACCP plan			
Protection from Contamination											
<input checked="" type="checkbox"/>	OUT N/A	Food-contact surfaces cleaned & sanitized		<input checked="" type="checkbox"/>		The letter to the left of each item indicates that item's status at the time of the inspection.					
<input checked="" type="checkbox"/>	OUT N/A	Proper disposition of returned, previously served, reconditioned, and unsafe food				IN = in compliance                      OUT = not in compliance					
N/A = not applicable                      N/O = not observed											

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

Person in Charge / Title: **Same** Date: **09/03/2020**  
Inspector: **[Signature]** Telephone No. **573-888-9008** EPHS No. **1647** Follow-up: ☐ Yes ☐ No  
Follow-up Date: \_\_\_\_\_

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ESTABLISHMENT NAME <b>Great River Chinese Restaurant</b>		ADDRESS <b>1124 N Douglass</b>		CITY / ZIP <b>Malden, MO 63863</b>	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Walk in Cooler		37	Double Door Freezer		-9
Walk in Freezer		-5			
Turbo Air		36			
Whole Eggs/Prep Cooler		37			
Pork/Prep Cooler		36			

**PRIORITY ITEMS**

Code Reference	Priority items contribute directly to the prevention, prevention or reduction to an acceptable level, hazards associated with foodborne illness. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours as stated.	Corrected by	Initial
4-6011.11A	Ice scoop handle laying in ice in ice maker, must be stored handle up or in ice scoop holder	COS	8/3
3-501.17	Cut watermelon and honey dew not dated, once cut must be dated with discard date	COS	8/3

**CORE ITEMS**

Code Reference	Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SOPs). These items are to be corrected by the next regular inspection or as stated.	Corrected by	Initial
6-302.12	No towels at kitchen hand sink	COS	8/3
4-904.11	Single serve items facing ceiling, invert to protect food contact surface from contamination	COS	8/3
6-501.11	Missing ceiling tile in kitchen, repair or replace	NRI	8/3
40501.11	Walk in Freezer door seal torn and damaged, repair or replace	NRI	8/3
3-303.12	Walk in Freezer has heavy ice build up, creating the potential for contamination of food, repair	NRI	8/3
NRI	Next Routine Inspection		

EDUCATION PROVIDED OR COMMENTS

Charge / Title: **Same** 

Telephone No. **573-888-9008** EPHS No. **1647** Date: **09/03/2020**

Follow-up: ☐ Yes ☐ No  
Follow-up Date:

DISTRIBUTION: WHITE - OWNER'S COPY CANARY - FILE COPY

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