



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

| | |
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| TIME IN 1000 | TIME OUT 1230 |
| 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: <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L |
| ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY <input type="checkbox"/> C. STORE <input type="checkbox"/> CATERER <input type="checkbox"/> DELI <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS <input checked="" type="checkbox"/> RESTAURANT <input type="checkbox"/> SCHOOL <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> SUMMER F.P. <input type="checkbox"/> TAVERN <input type="checkbox"/> TEMP. FOOD | | | |
| 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 type="checkbox"/> Approved <input type="checkbox"/> Disapproved | | SEWAGE DISPOSAL <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE | |
| WATER SUPPLY <input checked="" type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY | | PRIVATE Results _____ | |
| Date Sampled _____ | | | |
| 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 |
|------------|---|-----|---|--|---|-----|---|
| IN | Person in charge present, demonstrates knowledge, and performs duties | | | OUT | Proper cooking, time and temperature | | |
| OUT | Employee Health | | | OUT | Proper reheating procedures for hot holding | | |
| OUT | Management awareness; policy present | | | OUT | Proper cooling time and temperatures | | |
| OUT | Proper use of reporting, restriction and exclusion | | | OUT | Proper hot holding temperatures | | |
| OUT | Good Hygienic Practices | | | OUT | Proper cold holding temperatures | | |
| OUT | Proper eating, tasting, drinking or tobacco use | | | OUT | Proper date marking and disposition | | |
| OUT | No discharge from eyes, nose and mouth | | | OUT | Time as a public health control (procedures / records) | | |
| OUT | Preventing Contamination by Hands | | | OUT | Consumer Advisory | | |
| OUT | Hands clean and properly washed | | | OUT | Consumer advisory provided for raw or undercooked food | | |
| OUT | No bare hand contact with ready-to-eat foods or approved alternate method properly followed | | | OUT | Highly Susceptible Populations | | |
| OUT | Adequate handwashing facilities supplied & accessible | | | OUT | Pasteurized foods used, prohibited foods not offered | | |
| OUT | Approved Source | | | OUT | Chemical | | |
| OUT | Food obtained from approved source | | | OUT | Food additives: approved and properly used | | |
| OUT | Food received at proper temperature | | | OUT | Toxic substances properly identified, stored and used | | |
| OUT | Food in good condition, safe and unadulterated | | | OUT | Conformance with Approved Procedures | | |
| OUT | Required records available: shellstock tags, parasite destruction | | | OUT | Compliance with approved Specialized Process and HACCP plan | | |
| OUT | 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 | | | |
| OUT | Food separated and protected | | | | | | |
| OUT | Food-contact surfaces cleaned & sanitized | | | | | | |
| OUT | 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 |
|----|-----|---|-----|---|----|-----|---|-----|---|
| X | | Pasteurized eggs used where required | | | X | | In-use utensils: properly stored | | |
| X | | Water and ice from approved source | | | X | | Utensils, equipment and linens: properly stored, dried, handled | | |
| | | Food Temperature Control | | | X | | Single-use/single-service articles: properly stored, used | | |
| X | | Adequate equipment for temperature control | | | X | | Gloves used properly | | |
| | X | Approved thawing methods used | | | | | Utensils, Equipment and Vending | | |
| | X | Thermometers provided and accurate | | | X | | Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used | | |
| | | Food Identification | | | X | | Warewashing facilities: installed, maintained, used; test strips used | | |
| X | | Food properly labeled; original container | | | X | | Nonfood-contact surfaces clean | | |
| | | Prevention of Food Contamination | | | | | Physical Facilities | | |
| X | X | Insects, rodents, and animals not present | | | X | | Hot and cold water available; adequate pressure | | |
| | X | Contamination prevented during food preparation, storage and display | X | | | | Plumbing installed; proper backflow devices | | |
| X | | Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry | | | X | | Sewage and wastewater properly disposed | | |
| | X | Wiping cloths: properly used and stored | | | X | | Toilet facilities: properly constructed, supplied, cleaned | | |
| X | | Fruits and vegetables washed before use | | | X | | Garbage/refuse properly disposed; facilities maintained | | |
| | | | | | X | | Physical facilities installed, maintained, and clean | | |

| | | | |
|--------------------------------------|-----------------------------------|---|--|
| Person in Charge /Title: Same | | Date: 02/29/2024 | |
| Inspector: | Telephone No. 573-888-9008 | EPHS No. 1647 | Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| | | Follow-up Date: 03/14/2024 | |
| MO 580-1074 (9-2013) | | DISTRIBUTION: WHITE - OWNER'S COPY CANARY - FILE COPY | |



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|--|---|-----------------------------------|-------------------------|-------------------------------------|-------------------|
| ESTABLISHMENT NAME Great River Chinese Restaurant | | ADDRESS 1124 N Douglass | | CITY/ZIP Malden, MO 63863 | |
| FOOD PRODUCT/LOCATION | | TEMP. in ° F | FOOD PRODUCT/ LOCATION | | TEMP. in ° F |
| Walk in Cooler | | 38 | Double Door Freezer | | 5 |
| Walk in Freezer | | 3 | Soup/Warmer | | 175 |
| Turbo Air | | 7 | Tomatoes/Cooler | | 38 |
| Whole Eggs/Prep Cooler | | 34 | Chicken Stir Fry/Warmer | | 168 |
| Pork/Prep Cooler | | 38 | | | |
| 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) |
| 6-501.111 | Mice feces observed below waitress station cabinets and handsink cabinets | | | | 3/14 |
| 3-501.17 | cooked egg rolls in m3 and walk in cooler not dated, ready to eat food shall be dated with 7 day dis | | | | 3/14 |
| 3-501.17 | Multiple items in walk in cooler not dated (egg rolls, sliced carrots, sliced onions) | | | | 3/14 |
| 3-302.11 | Cooked noodles on bottom shelf in kitchen with no means of temp control and uncovered, creating potential for contamination | | | | 3/14 |
| 3-301.11B | Observed employee slicing oranges without gloves, shall wash hands and wear gloves when handling ready to eat foods | | | | 3/14 |
| 3-302.11A | Multiple buckets of chicken in walk in cooler uncovered, shall be covered to protect from contamination | | | | 3/14 |
| 7-102.11 | Unlabeled spray bottle next to kitchen handsink | | | | 3/14 |
| 4-601.11A | Ice maker baffles soiled with black residue, wash, rinse and sanitize | | | | 3/14 |
| | Core items | | | | 3/14 |
| 6-102.11 | Floors throughout lobby soiled and stained, clean | | | | 3/14 |
| 4-501.11 | 2 door cooler has torn door seals, repair or replace | | | | 3/14 |
| 6-201.11 | Walls next to mop sink soiled with debris, clean | | | | 3/14 |
| 4-601.11C | Shelving in rear stock room soiled with food and debris | | | | 3/14 |
| 4-601.11C | M3 turbo freezer in rear stock room soiled with food and debris | | | | 3/14 |
| 3-304.14 | Wiping cloths not placed in sanitizer kitchen | | | | 3/14 |
| 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) |
| 4-601.11C | Multiple tears and torn fabric on seating in dining area, repair or replace | | | | 3/14 |
| 6-201.11 | Mold like residue on the inside of walk in cooler door, clean | | | | 3/14 |
| 5-205.11B | Repeat; Handsink blocked with dishes | | | | 3/14 |
| 4-501.11 | Repeat: Walk in Freezer door seal torn and damaged, repair or replace | | | | 3/14 |
| 3-303.12 | Repeat: Walk in Freezer has heavy ice build up, creating the potential for contamination of food, repair | | | | 3/14 |
| 6-501.114 | Repeat: Unnecessary items and clutter in sushi bar area and rear stock room | | | | 3/14 |
| 6-501.12A | Repeat Shelving, floors and equipment soiled with food and debris in sushi area, | | | | 3/14 |
| 4-204.112 | No thermometer in m3 cooler | | | | 3/14 |
| 6-501.18 | Handsink dirty in kitchen | | | | 3/14 |
| 4-601.11C | Multiple prep tables have rusted bottom shelves, shall be smooth, nonabsorbent and easily cleaned | | | | 3/14 |
| 4-601.11C | Shelving below prep table soiled with food and debris | | | | 3/14 |
| 6-201.11 | Walls and floors soiled with grease and debris behind equipment | | | | 3/14 |
| 6-501.16 | Mops laying on floor in rear stock room, shall be hung when not in use | | | | 3/14 |
| 3-305.11 | Onions on floor in rear stock room, shall be at least 6 inches off the floor | | | | 3/14 |
| 4-601.11C | Using duct tape to patch tears on seating in dining area, surface shall be smooth and easily cleaned | | | | 3/14 |
| 4-204.112 | No thermometer in prep cooler | | | | 3/14 |
| 4-601.11C | Kitchen door soiled with food and debris (inside and out) | | | | 3/14 |
| EDUCATION PROVIDED OR COMMENTS | | | | | |
| | | | | | |
| Person in Charge /Title: Same <i>Sam</i> | | | | Date: 02/29/2024 | |
| Inspector: <i>Michael D. Paul</i> | | Telephone No. 573-888-9008 | | EPHS No. 1647 | |
| Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | Follow-up Date: 03/14/2024 | | | |