



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

TIME IN: 1:00	TIME OUT: 2:00
PAGE 12 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: Dos Rios		OWNER: Rodney Michler	PERSON IN CHARGE: Janet Sherrish Hurrell	
ADDRESS: 115 Stewart's Landing			COUNTY: Shannon	
CITY/ZIP: Eminence Mo 65116	PHONE: 573/226/1370	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"/> RESTAURANT <input type="checkbox"/> SCHOOL <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> TEMP. FOOD <input type="checkbox"/> TAVERN <input type="checkbox"/> MOBILE VENDORS				
PURPOSE <input type="checkbox"/> Pre-opening <input 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 <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
IN OUT	Person in charge present, demonstrates knowledge, and performs duties			IN OUT N/O N/A	Proper cooking, time and temperature		
	Employee Health			IN OUT N/O N/A	Proper reheating procedures for hot holding		
IN OUT	Management awareness; policy present			IN OUT N/O N/A	Proper cooling time and temperatures		
IN OUT	Proper use of reporting, restriction and exclusion			IN OUT N/O N/A	Proper hot holding temperatures		
	Good Hygienic Practices			IN OUT N/A	Proper cold holding temperatures		
IN OUT N/O	Proper eating, tasting, drinking or tobacco use			IN OUT N/O N/A	Proper date marking and disposition		
IN OUT N/O	No discharge from eyes, nose and mouth			IN OUT N/O (N/A)	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands			IN OUT N/A	Consumer Advisory		
IN OUT N/O	Hands clean and properly washed			IN OUT N/A	Consumer advisory provided for raw or undercooked food		
IN OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
IN OUT	Adequate handwashing facilities supplied & accessible			IN OUT N/O N/A	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemical		
IN OUT	Food obtained from approved source			IN OUT N/A	Food additives: approved and properly used		
IN OUT N/O N/A	Food received at proper temperature			IN OUT	Toxic substances properly identified, stored and used		
IN OUT	Food in good condition, safe and unadulterated				Conformance with Approved Procedures		
IN OUT N/O N/A	Required records available: shellstock tags, parasite destruction			IN OUT 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 COS = Corrected On Site R = Repeat Item			
IN OUT N/A	Food separated and protected						
IN OUT N/A	Food-contact surfaces cleaned & sanitized						
IN OUT 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
		Pasteurized eggs used where required					In-use utensils: properly stored		
		Water and ice from approved source					Utensils, equipment and linens: properly stored, dried, handled		
		Food Temperature Control					Single-use/single-service articles: properly stored, used		
		Adequate equipment for temperature control					Gloves used properly		
		Approved thawing methods used					Utensils, Equipment and Vending		
		Thermometers provided and accurate					Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification					Warewashing facilities: installed, maintained, used; test strips used		
		Food properly labeled; original container					Nonfood-contact surfaces clean		
		Prevention of Food Contamination					Physical Facilities		
		Insects, rodents, and animals not present					Hot and cold water available; adequate pressure		
		Contamination prevented during food preparation, storage and display					Plumbing installed; proper backflow devices		
		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry					Sewage and wastewater properly disposed		
		Wiping cloths: properly used and stored					Toilet facilities: properly constructed, supplied, cleaned		
		Fruits and vegetables washed before use					Garbage/refuse properly disposed; facilities maintained		
							Physical facilities installed, maintained, and clean		

Person in Charge / Title: _____			Date: 6/7/22		
Inspector: [Signature]	Telephone No. 417/967/4131	EPHS No. 1773	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			Follow-up Date: _____		



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PAGE 2 of 2	

ESTABLISHMENT NAME DOS KTOS		ADDRESS 115 Stewart's Landing		CITY Ferguson	ZIP 63466	
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/LOCATION		TEMP.	
Tamales Hot box		110	Queso Pasa Line		155	
Tamales 165°F		50	Shrimp prep line		55	
Sauce Refrig		38	Chicken F.J.'s		53	
Refined Beans Prep line		105	Brd F.J.'s		55	
Sauce Crema Prep line		45	Refined Beans Walk-in		50	
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
2-201.11	Food not labeled w/ Walk-in cooler, should have date, it was prepared & date of expiration					
3-30	2.11 Raw meat on counter above 41°F - fix it turn down					
4-601.11A	Vent hood dirty allowing for grease to drip on grill					
3-403.11	Hot food not held above 135°F Tamales, Beans etc					
3-501.16A(1)						
3-501.16A(2)	Hazardous foods not held below 40°F, Sauce cream, toppings, etc on prep line in Refrig, Walk-in, no thermometer -					
4-501.11B	No sanitizer coming through dishwasher,					
2-102.11	PIC - Front of House not kept clean, dirty floors, hot or cold hold area 135°F 40°F, etc,					
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
7-204.11	Sanitizer for floors > 500 ppm should be 100 ppm					
3-304.11	Wiping cloths not stored in sanitizer, discarded w/ each use					
3-502.11A4	Food on prep table not covered w/ metal lid to prevent cross contamination					
4-601.11C	Must not touch food contact surface due to the point of contact, nothing in back, including behind grill, floor of wash room, water drain					
4-501.11	Cool washing hands in 3 vent sink.					
3-602.11C	Food, meat, veg, etc. and stored in Walk-in not LADLED OR Poured, what is it, when made, when it, then out					
4-501.11	Dirty, there is dirt & dirty dish water, inside trays are cleaned also					
60-501.12A	Dirty walls floor in foreground cleaning. One Box in drink Rack is BLACK from SINK					

EDUCATION PROVIDED OR COMMENTS

This Establishment Needs Substantial Improvement in ONE WEEK or I will Begin Action to Revoke Your Food Establishment Permit!

Person in Charge / Title: <i>[Signature]</i>			Date: 6/27/22	
Inspector: <i>[Signature]</i>	Telephone No. 417/967/1131	EPHS No. 1773	Follow-up: <input type="checkbox"/> Yes <input type="checkbox"/> No	Follow-up Date: