



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

TIME IN 1015	TIME OUT 1115
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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: <i>Orlando's Nails</i>	OWNER: <i>Jonell Worthen</i>	PERSON IN CHARGE:				
ADDRESS: <i>90023 E 1st</i>		COUNTY: <i>Shawnee</i>				
CITY/ZIP: <i>Birchtree 65438</i>	PHONE: <i>573/292/1177</i>	FAX:				
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY <input type="checkbox"/> RESTAURANT		<input type="checkbox"/> C. STORE <input type="checkbox"/> SCHOOL	<input type="checkbox"/> CATERER <input type="checkbox"/> SENIOR CENTER	<input type="checkbox"/> DELI <input type="checkbox"/> TEMP. FOOD	<input type="checkbox"/> GROCERY STORE <input type="checkbox"/> TAVERN	<input type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS
PURPOSE <input type="checkbox"/> Pre-opening <input type="checkbox"/> Routine <input checked="" type="checkbox"/> Follow-up <input checked="" type="checkbox"/> Complaint <input type="checkbox"/> Other						
FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable License No. _____	SEWAGE DISPOSAL <input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	WATER SUPPLY <input 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				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 OUT N/A	Food separated and protected				IN = in compliance N/A = not applicable N/O = not observed		
IN OUT N/A	Food-contact surfaces cleaned & sanitized				COS = Corrected On Site R = Repeat Item		
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	COS				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: *IN* *IN* Date: *8/12/25*

Inspector: *2801* Telephone No. *913/297/4131* EPHS No. *1773* Follow-up: Yes No
Follow-up Date: _____



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ESTABLISHMENT NAME	ADDRESS	CITY	ZIP
FOOD PRODUCT/LOCATION	TEMP.	FOOD PRODUCT/ LOCATION	TEMP.
Grand Mc. Neil's - B	90023 Mc E 1st	Birchtree	65438
Chickpeas 26451	38	Eggs	42
Cheese	37	Sausage	59
Pasta Salad	39	Milk	40
Hamburger	30	Bacon	37
Cheese	38	Pie	39

Code Reference	Priority Items	Correct by (date)	Initial
	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.		
4-601.11A	Vent hood dirty w/ dripping grease & dust Wipe down		
4-202.111	Countertop tops, cutting board etc in prep areas Needs replaced, Chipped Formica is not Cannot be sanitized.		
7-201.11	Improper storage of toxics - choco, Eggs Refrigerator, toxics can store below food not choco		

Code Reference	CORE ITEMS		Correct by (date)	Initial
	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.			
03-501	13	Improper throwing Paper cups out thru Under Running Water or In Refridgerator	COS	
06-501	12(A)	<p>⇒ Dirty Ceiling, greasy, dust crusted on Line coming from drink coolers Please Clean</p> <p>⇒ Dirty Ceiling in Restrooms need Not for sweeping dust off vent fans</p>		
5-501	17	⇒ No covered waste basket in women Restroom		
6-202	11A	Light bulbs in Kitchen un covered Replace covers, clear fixtures		
12/11				

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title:

Date: 8/12/25

Inspector: D

Telephone No.

DEPHS No

Follow-up: Yes No
Follow-up Date: 8/29/25