

Food Establishment Inspection Report

Jackson County Health Department PO Box 307 – 415 Health Department Rd Murphysboro IL 62966		(618) 684-3143 ext. 128	No. of Risk Factor/Intervention Violations 0	Date 4/11/19
Establishment 2 Guys Pizza		License/Permit # 1136	No. of Repeat Risk Factor/Intervention Violations 0	Time In 2:40pm
Street Address 715 N. Giant City Rd Suite 8		Permit Holder Lamy Hooker	Risk Category II	
City/State Carbondale, IL		ZIP Code 62901	Purpose of Inspection Routine	

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item IN =in compliance OUT =not in compliance N/O =not observed N/A =not applicable Mark "X" in appropriate box for COS and/or R COS =corrected on-site during inspection R =repeat violation			Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.		
Compliance Status	COS	R	Compliance Status	COS	R
Supervision			Protection from Contamination		
1	<input checked="" type="radio"/> In <input type="radio"/> Out		15	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O	
Person in charge present, demonstrates knowledge, and performs duties			Food separated and protected		
2	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		16	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A	
Certified Food Protection Manager (CFPM)			Food-contact surfaces; cleaned and sanitized		
Employee Health			Time/Temperature Control for Safety		
3	<input checked="" type="radio"/> In <input type="radio"/> Out		17	<input checked="" type="radio"/> In <input type="radio"/> Out	
Management, food employee and conditional employee; knowledge, responsibilities and reporting			Proper disposition of returned, previously served, reconditioned and unsafe food		
4	<input checked="" type="radio"/> In <input type="radio"/> Out		18	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O	
Proper use of restriction and exclusion			Proper cooking time and temperatures		
5	<input checked="" type="radio"/> In <input type="radio"/> Out		19	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O	
Procedures for responding to vomiting and diarrheal events			Proper reheating procedures for hot holding		
Good Hygienic Practices			20	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O	
6	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O		Proper cooling time and temperature		
Proper eating, tasting, drinking, or tobacco use			21	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O	
7	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O		Proper hot holding temperatures		
No discharge from eyes, nose, and mouth			22	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O	
Preventing Contamination by Hands			Proper cold holding temperatures		
8	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O		23	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O	
Hands clean and properly washed			Proper date marking and disposition		
9	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		24	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O	
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			Time as a Public Health Control; procedures & records		
10	<input checked="" type="radio"/> In <input type="radio"/> Out		Consumer Advisory		
Adequate handwashing sinks properly supplied and accessible			25	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A	
Approved Source			Consumer advisory provided for raw/undercooked food		
11	<input checked="" type="radio"/> In <input type="radio"/> Out		Highly Susceptible Populations		
Food obtained from approved source			26	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A	
12	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		Pasteurized foods used; prohibited foods not offered		
Food received at proper temperature			Food/Color Additives and Toxic Substances		
13	<input checked="" type="radio"/> In <input type="radio"/> Out		27	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A	
Food in good condition, safe, and unadulterated			Food additives: approved and properly used		
14	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		28	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A	
Required records available: shellstock tags, parasite destruction			Toxic substances properly identified, stored, and used		
GOOD RETAIL PRACTICES			Conformance with Approved Procedures		
Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods. Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R COS =corrected on-site during inspection R =repeat violation			29	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A	
Safe Food and Water			Compliance with variance/specialized process/HACCP		
30	<input type="checkbox"/>		Proper Use of Utensils		
Pasteurized eggs used where required			43	<input type="checkbox"/>	
31	<input type="checkbox"/>		In-use utensils: properly stored		
Water and ice from approved source			44	<input type="checkbox"/>	
32	<input type="checkbox"/>		Utensils, equipment & linens: properly stored, dried, & handled		
Variance obtained for specialized processing methods			45	<input type="checkbox"/>	
Food Temperature Control			Single-use/single-service articles: properly stored and used		
33	<input type="checkbox"/>		46	<input type="checkbox"/>	
Proper cooling methods used; adequate equipment for temperature control			Gloves used properly		
34	<input type="checkbox"/>		Utensils, Equipment and Vending		
Plant food properly cooked for hot holding			47	<input type="checkbox"/>	
35	<input type="checkbox"/>		Food and non-food contact surfaces cleanable, properly designed, constructed and used		
Approved thawing methods used			48	<input type="checkbox"/>	
36	<input type="checkbox"/>		Warewashing facilities: installed, maintained, & used; test strips		
Thermometers provided & accurate			49	<input type="checkbox"/>	
Food Identification			Non-food contact surfaces clean		
37	<input type="checkbox"/>		Physical Facilities		
Food properly labeled; original container			50	<input type="checkbox"/>	
Prevention of Food Contamination			Hot and cold water available; adequate pressure		
38	<input type="checkbox"/>		51	<input type="checkbox"/>	
Insects, rodents, and animals not present			Plumbing installed; proper backflow devices		
39	<input type="checkbox"/>		52	<input type="checkbox"/>	
Contamination prevented during food preparation, storage and display			Sewage and waste water properly disposed		
40	<input type="checkbox"/>		53	<input type="checkbox"/>	
Personal cleanliness			Toilet facilities: properly constructed, supplied, & cleaned		
41	<input type="checkbox"/>		54	<input type="checkbox"/>	
Wiping cloths: properly used and stored			Garbage & refuse properly disposed; facilities maintained		
42	<input type="checkbox"/>		55	<input type="checkbox"/>	
Washing fruits and vegetables			Physical facilities installed, maintained, and clean		
Employee Training			56	<input type="checkbox"/>	
57	<input type="checkbox"/>		Adequate ventilation and lighting; designated areas used		
All food employees have food handler training			Employee Training		
58	<input type="checkbox"/>		57	<input type="checkbox"/>	
Allergen training as required			All food employees have food handler training		
			58	<input type="checkbox"/>	
			Allergen training as required		

