

# 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 <span style="font-size: 2em; font-weight: bold;">1</span>	Date <u>12/3/19</u>
Establishment <span style="font-size: 1.5em;">China Express</span>		License/Permit # <span style="font-size: 1.5em;">453</span>	No. of Repeat Risk Factor/Intervention Violations <span style="font-size: 2em; font-weight: bold;">0</span>	Time In <u>1:30pm</u>
Street Address <span style="font-size: 1.5em;">903 S. Illinois Ave</span>		City/State <span style="font-size: 1.5em;">Carbondale, IL</span>	Permit Holder <span style="font-size: 1.5em;">Sam Chang</span>	Time Out <u>2:35pm</u>
City/State <span style="font-size: 1.5em;">Carbondale, IL</span>		ZIP Code <span style="font-size: 1.5em;">62901</span>	Purpose of Inspection <span style="font-size: 1.5em;">Routine</span>	Risk Category <span style="font-size: 2em; font-weight: bold;">I</span>

## 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
<b>Supervision</b>							
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		
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		
<b>Employee Health</b>							
3	<input checked="" type="radio"/> In, <input type="radio"/> Out			17	<input checked="" type="radio"/> In, <input type="radio"/> Out		
4	<input checked="" type="radio"/> In, <input type="radio"/> Out			<b>Time/Temperature Control for Safety</b>			
5	<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		
<b>Good Hygienic Practices</b>							
6	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/O			19	<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			20	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O		
<b>Preventing Contamination by Hands</b>							
8	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/O			21	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O		
9	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O			22	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O		
10	<input checked="" type="radio"/> In, <input type="radio"/> Out			23	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O		X
<b>Approved Source</b>							
11	<input checked="" type="radio"/> In, <input type="radio"/> Out			24	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O		
12	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O			<b>Consumer Advisory</b>			
13	<input checked="" type="radio"/> In, <input type="radio"/> Out			25	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A		
14	<input checked="" type="radio"/> In, <input type="radio"/> Out, <input type="radio"/> N/A, <input type="radio"/> N/O			<b>Highly Susceptible Populations</b>			
<b>GOOD RETAIL PRACTICES</b>							
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							
Compliance Status		COS	R	Compliance Status		COS	R
<b>Safe Food and Water</b>							
30	Pasteurized eggs used where required			<b>Proper Use of Utensils</b>			
31	Water and ice from approved source			43	<input checked="" type="checkbox"/> In-use utensils: properly stored		X
32	Variance obtained for specialized processing methods			44	Utensils, equipment & linens: properly stored, dried, & handled		
<b>Food Temperature Control</b>							
33	Proper cooling methods used; adequate equipment for temperature control			45	Single-use/single-service articles: properly stored and used		
34	Plant food properly cooked for hot holding			46	Gloves used properly		
35	Approved thawing methods used			<b>Utensils, Equipment and Vending</b>			
36	Thermometers provided & accurate			47	<input checked="" type="checkbox"/> Food and non-food contact surfaces cleanable, properly designed, constructed, and used		X
<b>Food Identification</b>							
37	Food properly labeled; original container			48	Warewashing facilities: installed, maintained, & used; test strips		
<b>Prevention of Food Contamination</b>							
38	Insects, rodents, and animals not present			49	<input checked="" type="checkbox"/> Non-food contact surfaces clean		
39	<input checked="" type="checkbox"/> Contamination prevented during food preparation, storage and display			<b>Physical Facilities</b>			
40	Personal cleanliness			50	Hot and cold water available; adequate pressure		
41	Wiping cloths: properly used and stored			51	Plumbing installed; proper backflow devices		
42	Washing fruits and vegetables			52	Sewage and waste water properly disposed		
<b>Employee Training</b>							
57	All food employees have food handler training			53	Toilet facilities: properly constructed, supplied, & cleaned		
58	Allergen training as required			54	Garbage & refuse properly disposed; facilities maintained		
				55	<input checked="" type="checkbox"/> Physical facilities installed, maintained, and clean		
				56	Adequate ventilation and lighting; designated areas used		

# Food Establishment Inspection Report

Establishment: China Express Establishment #: 453  
 Water Supply:  Public  Private Waste Water System:  Public  Private  
 Sanitizer Type: Chlorine PPM: 50 Heat: N/A

TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
make table top AA	30.0°	White Rice	116.8°		
° bottom AA	40.3	Brown Rice	116.4°		
° Chicken (cooked)	39.3°	egg drop soup	174.6°		
° Shrimp	32.8°	Hot & sour soup	114.7°		
Cocacola fridge	38.6°				
True Sliding	40.1°				
Single door cooler	34.7°				

### OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.	
39	Keep all foods in walk-in cooler covered <del>cover</del> freezer covered to prevent/eliminate any potential for contamination. Upon inspection, cooked food in freezer not stored in proper containers.	NRI
43	Refrain from storing in-use rice scoops in water/sanitizer. These items must be stored in a smooth, non-absorbant, and easily cleanable container, dry.	COS
47	Repair/Repaint back of cocacola cooler. Upon inspection, paint peeling. Surface no longer smooth/easily cleanable.	NRI
47	Refrain from using wiping cloth to close gaps in vent hood. These items are not approved, non-absorbant, smooth, and easily cleanable surfaces.	COS
49	Clean interior bottom of the cocacola cooler in the hallway. Food debris noted.	NRI
49	Clean sides of cook equipment between wok and fryer. Grease/food debris build-up noted.	NRI

CFPM Verification (name, expiration date, ID#):  
 Hsiau Ya Chang #21496813 exp: 8/23

HACCP Topic: #8, #43,

Sau dy Person in Charge (Signature) 12/3/19 Date

Buttampfer / SW Inspector (Signature) Follow-up:  Yes  No (Check one) Follow-up Date: \_\_\_\_\_

