

Kansas Department of Agriculture
Division of Food Safety and Lodging
 1320 Research Park Drive, Manhattan, KS 66502
 (office) 785-564-6767 (fax) 785-564-6779

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Insp Date: 11/5/2012 **Business ID:** 95384RS
Business: WALGREENS #11369

Inspection: 07002104
Store ID:
Phone: 8473153404
Inspector: KDA07
Reason: 01 Routine
Results: No Follow-up

2100 N SUMMIT ST
 ARKANSAS CITY, KS 67005

Time In / Time Out

Date	In	Out	Insp	Travel	Total	Mileage	Notes:
11/05/12	02:40 PM	03:45 PM	1:05	0:05	1:10	0	
Total:			1:05	0:05	1:10	0	

FOOD ESTABLISHMENT PROFILE

Updated Risk Category _____ Updated Sq. Footage _____
 Insp. Notification Email _____ Critical Violations _____ Lic. Insp. No _____
 Sent Notification To _____
 Address Verified p

INSPECTION INFORMATION

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of food-borne illness or injury. Public health interventions are control measures to prevent food-borne illness or injury.

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals and physical objects into foods.

Violations cited in this report must be corrected within the time frames entered below, or as stated in sections 8-405.11 of the food code.

HACCP=Hazard Analysis-Critical Control Point, BHC=Bare Hand Contact, RTE=Ready to Eat, CRITICAL=Critical Violation, SWING=Swing Violation (May be critical or non-critical), HSP=Highly Susceptible Population, K.S.A.=Kansas Statutes Annotated, All temperatures are measured in degrees Fahrenheit (°F).

PLEASE CALL (785) 296-5600 OR VISIT www.ksda.gov/food_safety/ IF YOU HAVE ANY QUESTIONS.

COMPLIANCE KEY: Y=in compliance; N=not in compliance; O=not observed; A=not applicable; C=corrected on-site during inspection; R=repeat violation.

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Demonstration of Knowledge

1. Certification by accredited program, compliance with Code, or correct responses.

Y N O A C R
 p

Employee Health

2. Management awareness; policy present.

Y N O A C R
 p

3. Proper use of reporting, restriction and exclusion.

p

Good Hygienic Practices

Y N O A C R

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Good Hygienic Practices		Y	N	O	A	C	R
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|---|--|---|----|----|----|----|----|
| 4. Proper eating, tasting, drinking, or tobacco use | | p | .. | .. | .. | .. | .. |
| 5. No discharge from eyes, nose and mouth. | | p | .. | .. | .. | .. | .. |

Preventing Contamination by Hands		Y	N	O	A	C	R
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|--|--|----|----|----|----|----|----|
| 6. Hands clean and properly washed. | | .. | .. | p | .. | .. | .. |
| 7. No bare hand contact with RTE foods or approved alternate method properly followed. | | .. | .. | p | .. | .. | .. |
| 8. Adequate handwashing facilities supplied and accessible. | | .. | .. | .. | p | .. | .. |

Approved Source		Y	N	O	A	C	R
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|--|--|----|----|----|----|----|----|
| 9. Food obtained from approved source. | | p | .. | .. | .. | .. | .. |
| 10. Food received at proper temperature. | | .. | .. | p | .. | .. | .. |
| 11. Food in good condition, safe and unadulterated. | | p | .. | .. | .. | .. | .. |
| <i>This item has Notes. See Footnote 1 at end of questionnaire.</i> | | .. | .. | .. | .. | .. | .. |
| 12. Required records available: shellstock tags, parasite destruction. | | .. | .. | .. | p | .. | .. |

Protection from Contamination		Y	N	O	A	C	R
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|---|--|---|----|----|----|----|----|
| 13. Food separated and protected. | | p | .. | .. | .. | .. | .. |
| 14. Food-contact surfaces: cleaned and sanitized. | | p | .. | .. | .. | .. | .. |
| 15. Proper disposition of returned, previously served, reconditioned and unsafe food. | | p | .. | .. | .. | .. | .. |

Potentially Hazardous Food Time/Temperature		Y	N	O	A	C	R
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|--|--|----|----|----|----|----|----|
| 16. Proper cooking time and temperatures. | | .. | .. | .. | p | .. | .. |
| 17. Proper reheating procedures for hot holding. | | .. | .. | .. | p | .. | .. |
| 18. Proper cooling time and temperatures. | | .. | .. | .. | p | .. | .. |
| 19. Proper hot holding temperatures. | | .. | .. | .. | p | .. | .. |
| 20. Proper cold holding temperatures. | | p | .. | .. | .. | .. | .. |
| <i>This item has Notes. See Footnote 2 at end of questionnaire.</i> | | p | .. | .. | .. | .. | .. |
| 21. Proper date marking and disposition. | | .. | .. | p | .. | .. | .. |
| 22. Time as a public health control: procedures and record. | | .. | .. | p | .. | .. | .. |

Consumer Advisory		Y	N	O	A	C	R
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|--|--|----|----|----|---|----|----|
| 23. Consumer advisory provided for raw or undercooked foods. | | .. | .. | .. | p | .. | .. |
|--|--|----|----|----|---|----|----|

Highly Susceptible Populations		Y	N	O	A	C	R
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|---|--|----|----|----|---|----|----|
| 24. Pasteurized foods used; prohibited foods not offered. | | .. | .. | .. | p | .. | .. |
|---|--|----|----|----|---|----|----|

Chemical		Y	N	O	A	C	R
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|--|--|----|----|----|----|----|----|
| 25. Food additives: approved and properly used. | | .. | .. | .. | p | .. | .. |
| 26. Toxic substances properly identified, stored and used. | | p | .. | .. | .. | .. | .. |

Conformance with Approved Procedures		Y	N	O	A	C	R
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|---|--|----|----|---|----|----|----|
| 27. Compliance with variance, specialized process and HACCP plan. | | .. | .. | p | .. | .. | .. |
|---|--|----|----|---|----|----|----|

GOOD RETAIL PRACTICES

Safe Food and Water		Y	N	O	A	C	R
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|---|--|---|----|----|----|----|----|
| 28. Pasteurized eggs used where required. | | p | .. | .. | .. | .. | .. |
|---|--|---|----|----|----|----|----|

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Safe Food and Water	Y	N	O	A	C	R
29. Water and ice from approved source.	p	..	..	..	..	..
30. Variance obtained for specialized processing methods.	p	..	..	..	..	..
Food Temperature Control	Y	N	O	A	C	R
31. Proper cooling methods used; adequate equipment for temperature control.	p	..	..	..	..	..
32. Plant food properly cooked for hot holding.	p	..	..	..	..	..
33. Approved thawing methods used.	p	..	..	..	..	..
34. Thermometers provided and accurate.	p	..	..	..	..	..
Food Identification	Y	N	O	A	C	R
35. Food properly labeled; original container.	p	..	..	..	..	..
Prevention of Food Contamination	Y	N	O	A	C	R
36. Insects, rodents and animals not present; no unauthorized persons.	p	..	..	..	..	..
37. Contamination prevented during food preparation, storage and display.	p	..	..	..	..	..
38. Personal cleanliness.	p	..	..	..	..	..
39. Wiping cloths: properly used and stored.	..	..	p	..	..	..
40. Washing fruits and vegetables.	..	..	p	..	..	..
Proper Use of Utensils	Y	N	O	A	C	R
41. In-use utensils: properly stored.	..	..	p	..	..	..
42. Utensils, equipment and linens: properly stored, dried and handled.	..	..	p	..	..	..
43. Single-use and single-service articles: properly used.	..	..	p	..	..	..
44. Gloves used properly.	..	..	..	p	..	..
Utensils, Equipment and Vending	Y	N	O	A	C	R
45a. Food and non-food contact surfaces cleanable, properly designed, constructed and used- Critical items	p	..	..	..	..	..
45b. Food and non-food contact surfaces cleanable, properly designed, constructed and used- non-critical items	p	..	..	..	..	..
46. Warewashing facilities: installed, maintained, and used; test strips.	p	..	..	..	..	..
47. Non-food contact surfaces clean.	p	..	..	..	..	..
Physical Facilities	Y	N	O	A	C	R
48. Hot and cold water available; adequate pressure.	p	..	..	..	..	..
49. Plumbing installed; proper backflow devices.	p	..	..	..	..	..
50. Sewage and waste water properly disposed.	p	..	..	..	..	..
51. Toilet facilities: properly constructed, supplied and cleaned.	p	..	..	..	..	..
52. Garbage and refuse properly disposed; facilities maintained.	p	..	..	..	..	..
53. Physical facilities installed, maintained and clean.	p	..	..	..	..	..
54. Adequate ventilation and lighting; designated areas used.	p	..	..	..	..	..
Administrative/Other	Y	N	O	A	C	R
55. Other violations	p	..	..	..	..	..

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

EDUCATIONAL MATERIALS

The following educational materials were provided

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Footnote 1

Notes:

On retail shelves 2 bottles of Simlac Expert Cure Neosure baby formula expired 1OCT2012 Lot number 031515V Manager pulled from shelves for return. No longer a violation due per FDA but removal recommended.

Footnote 2

Notes:

Walk in cooler air 42, Freezer and Frozen foods ok, Milk 40, Eggs 36, 39, Raw bacon 39, Tea 38

KANSAS DEPARTMENT OF AGRICULTURE EGG INSPECTION

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 ARKANSAS CITY, KS 67005

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FULL OR LABEL INSPECTION

TYPE OF INSPECTION LABEL

CARTON INFORMATION

USDA/EPIA # P13827 PERMIT # K050

LABEL NAME Sunups Premium Eggs CASE TEMPERATURE (° F) 36

BRAND NAME Sunups Premium Eggs COOLER TEMPERATURE (° F) 40

MANUFACTURER ADDRESS _____

MANUFACTURER CITY Siloam Springs STATE Ark ZIP 72764

DISTRIBUTED BY Cal Maine Foods Inc

DISTRIBUTER ADDRESS PO Box 2960

DISTRIBUTER CITY Jackson STATE MS ZIP 39207

This item has Notes. See Footnote 1 at end of questionnaire.

KANSAS DEPARTMENT OF AGRICULTURE EGG INSPECTION

Footnote 1

Notes:

Benton County Foods Siloam Springs Ark 72764