

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	5	Date	6/29/21
Establishment		License/Permit #		No. of Repeat Risk Factor/Intervention Violations	0	Time In	2:00pm
Buffalo Wild Wings		630		Permit Holder	Ryan Loberg	Time Out	4:50pm
Street Address		City/State		Purpose of Inspection		Risk Category	
1735 E. Main St		Carbondale, IL		Routine		I	
		ZIP Code					
		62901					

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							
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		<input checked="" type="checkbox"/>
	Certified Food Protection Manager (CFPM)				Food-contact surfaces; cleaned and sanitized		
Employee Health							
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			Time/Temperature Control for Safety			
	Proper use of restriction and exclusion			18	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
5	<input checked="" type="radio"/> In <input type="radio"/> Out				Proper cooking time and temperatures		
	Procedures for responding to vomiting and diarrheal events			19	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
Good Hygienic Practices							
6	<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		
	Proper eating, tasting, drinking, or tobacco use				Proper cooling time and temperature		
7	<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		
	No discharge from eyes, nose, and mouth				Proper hot holding temperatures		
Preventing Contamination by Hands							
8	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		<input checked="" type="checkbox"/>	22	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		<input checked="" type="checkbox"/>
	Hands clean and properly washed				Proper cold holding temperatures		
9	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <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		
	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed				Proper date marking and disposition		
10	<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		
	Adequate handwashing sinks properly supplied and accessible				Time as a Public Health Control; procedures & records		
Approved Source							
11	<input checked="" type="radio"/> In <input type="radio"/> Out			Consumer Advisory			
	Food obtained from approved source			25	<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			Highly Susceptible Populations			
	Food received at proper temperature			26	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
13	<input checked="" type="radio"/> In <input type="radio"/> Out			Food/Color Additives and Toxic Substances			
	Food in good condition, safe, and unadulterated			27	<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				Food additives: approved and properly used		
	Required records available: shellstock tags, parasite destruction			28	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
					Toxic substances properly identified, stored, and used		
				Conformance with Approved Procedures			
				29	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
					Compliance with variance/specialized process/HACCP		

GOOD RETAIL PRACTICES

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
Safe Food and Water							
30	Pasteurized eggs used where required			Proper Use of Utensils			
31	Water and ice from approved source			43	In-use utensils: properly stored		
32	Variance obtained for specialized processing methods			44	Utensils, equipment & linens: properly stored, dried, & handled		
Food Temperature Control							
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	<input checked="" type="checkbox"/> Gloves used properly		
35	Approved thawing methods used			Utensils, Equipment and Vending			
36	Thermometers provided & accurate			47	Food and non-food contact surfaces cleanable, properly designed, constructed, and used		
Food Identification							
37	Food properly labeled; original container			48	Warewashing facilities: installed, maintained, & used; test strips		
Prevention of Food Contamination							
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			Physical Facilities			
40	<input checked="" type="checkbox"/> 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		
				53	Toilet facilities: properly constructed, supplied, & cleaned		
				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		
Employee Training							
57	All food employees have food handler training						
58	Allergen training as required						

Food Establishment Inspection Report

Establishment: Buffalo Wild Wings Establishment #: 630

Water Supply: Public Private Waste Water System: Public Private

Sanitizer Type: Chlorine / QUAT PPM: 50/200 Heat: N/A

TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Cold drawer prep table	20.8	Tramonia (to-go area)	40°	2-drawer hot hold AA	146
2-door True Freezer	13°	"grill" make table		Chili (Steam table)	150°
Southwest make table		◦ Sliced tomatoes	29°	Hot hold unit (to-go)	168°
◦ bleu cheese	47°	◦ Cabbage	32°		
◦ picade gallo	47°	◦ AA lower	41°		
◦ AA drawer (upper)	49°	Breading Station			
◦ AA drawer (lower)	54°	◦ Batter	48°		
Chicken walk-in	38°	◦ Water	48°		
Walkin (BOH)	41°				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.	Correct By
2	Provide Certified food protection manager (CFPM) on site at all times food is being prepared or served. Upon inspection no CFPM on site. Eric Tanaka (asst manager) only has food handlers.	NKI
8/46	Provide proper handwashing procedures for all employees in kitchen. Upon inspection employee wearing gloves put on haircover, touched clothing (w/ gloves on) and kept same gloves on to continue food prep.	COB
22	Provide proper cold holding temperature (41°F or below) for all TCS products. Upon inspection AA temperature @ 49°-54° in lower section of Southwest make table. All TCS products discarded.	7/7/21
23	Provide proper 7-day discard of all TCS opened prepackaged or cooked + cooled food products. Upon inspection multiple items found in-use passed discard date as follows: (→)	COB

CFPM Verification (name, expiration date, ID#):

Ryan Loberg (not on site) #1160245 exp: 11/2021	Eric Tanaka #3979712 exp: BM	
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HACCP Topic: 2, 16, 8, 10, 22, 23

Person in Charge (Signature) *[Signature]* Date 6/29/21

Inspector (Signature) *[Signature]* Follow-up: Yes No (Check one) Follow-up Date: 7/7/21

Food Establishment Inspection Report

Establishment: Buffalo Wild Wings

Establishment #: 630

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.	
23 (cont'd)	pro de gallo - 6/26, chili aioli - 6/4, sauteed onions - 6/25	COS
23 (cont'd)	Sliced tomatoes - 6/27, Cheese cake slices - 6/15 + 6/25. All products discarded.	
23	Provide proper 7-day discard labeling for all TCS products (pre-packaged/open). Upon inspection container of white sauce and bacon crumbles unlabeled. All product discarded.	COS
16	Refrain from storing dirty knives on magnetic strip. Once a knife is used it must be wash, rinsed & sanitized before placing back in "clean storage".	COS
39	Provide covers for food product (open) in refrigerator/freezer storage to prevent potential contamination. Upon inspection cardboard box in contact w/ breaded chicken wings in 2-door thru freezer.	7/7/21
40	Provide effective hair restraint for all employees in food prep and dish areas. Multiple employees seen helping with food prep without hair coverings throughout kitchen.	
49	Clean interior/exterior of oven. Carbon build-up/food debris noted.	
49	Clean exterior/lids of sauce bottles (stored at room-temp) on side of grill make table. Excessive debris/sauce build-up noted.	
49	Clean stainless shelving/prep tables throughout kitchen. Food debris/grime build-up noted.	
49	Clean refrigeration vents in top inside of both southwest & grill make tables. Food splash/debris noted.	
55	Clean floor throughout kitchen dish area & mop sink storage. Pay close attention to areas under shelving, equipment & prep tables. Food debris/grease noted.	
55	Clean floor of walk-in freezer. Batter spill noted.	
55	Repair 3-comp. sink to hold water.	
<p>Notes:</p> <p>* Facility must watch date mark label discard dates including BMJ Not following companies own discard dates (Sirloin 6/27 burger 6/27) or the 7-day discard of potentially hazardous foods/TCS products.</p>		

[Signature]
Person in Charge (Signature)

6/29/21
Date

[Signature]
Inspector (Signature)

Follow-up: Yes No (Check one)

Follow-up Date: 7/7/21

