

# Retail Food Establishment Inspection Report

- First aid kit
- Allergy policy
- Vomit clean up
- Employee health

Date: <b>4/24/2023</b>	Time in: <b>12:45</b>	Time out: <b>2:45</b>	License/Permit # <b>need current/to post</b>	Est. Type	Risk Category	Page <u>1</u> of <u>2</u>
---------------------------	--------------------------	--------------------------	---	-----------	---------------	---------------------------

<b>Purpose of Inspection:</b> <input checked="" type="checkbox"/> 1-Routine <input type="checkbox"/> 2-Follow Up <input type="checkbox"/> 3-Complaint <input type="checkbox"/> 4-Investigation <input type="checkbox"/> 5-CO/Construction <input type="checkbox"/> 6-Other							<b>TOTAL/SCORE</b>
Establishment Name: <b>Dodie's Cajun Diner</b>			Contact/Owner Name:		* Number of Repeat Violations: _____ ✓ Number of Violations COS: _____		<b>29/71/C</b>
Physical Address: <b>2067 Summer Lee Rockwall, TX</b>			Pest control : <b>PSSI/2-2026</b>	Hood <b>H&amp;M/1-2024</b>	Grease trap : <b>EarthTek/1500gal/1/31/2024</b>	Follow-up: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

**Compliance Status:** Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation W- Watch  
 Mark the appropriate points in the OUT box for each numbered item Mark '✓' a checkmark in appropriate box for IN, NO, NA, COS Mark an X in appropriate box for R

Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days											
Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Time and Temperature for Food Safety</b> (F = degrees Fahrenheit)						<b>Employee Health</b>					
3						✓					
3						✓					
✓						<b>Preventing Contamination by Hands</b>					
	✓					3					
		✓				✓					
✓						<b>Highly Susceptible Populations</b>					
<b>Approved Source</b>						✓					
✓						<b>Chemicals</b>					
✓						✓					
<b>Protection from Contamination</b>						3					
✓						<b>Water/ Plumbing</b>					
3						✓					
✓						✓					

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days											
Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Demonstration of Knowledge/ Personnel</b>						<b>Food Temperature Control/ Identification</b>					
✓						2					
✓						✓					
<b>Safe Water, Recordkeeping and Food Package Labeling</b>						✓					
✓						<b>Permit Requirement, Prerequisite for Operation</b>					
✓											
<b>Conformance with Approved Procedures</b>						<b>Utensils, Equipment, and Vending</b>					
✓						✓					
<b>Consumer Advisory</b>						2					
✓						2					

Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection, Whichever Comes First											
Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Prevention of Food Contamination</b>						<b>Food Identification</b>					
✓						1					
✓						<b>Physical Facilities</b>					
1						1					
1						✓					
1						✓					
<b>Proper Use of Utensils</b>						1					
1						✓					
1						✓					

Received by: (signature) <i>Lisa Reinhold</i>	Print: <b>Lisa Reinhold</b>	Title: Person In Charge/ Owner <b>Manager</b>
Inspected by: (signature) <i>Christy Cortez, RS</i>	Print: <b>Christy Cortez, RS</b>	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: <b>Dodie's Cajun Diner</b>	Physical Address: <b>2067 Summer Lee</b>	City/State: <b>Rockwall, TX</b>	License/Permit # need current/to post	Page <b>2</b> of <b>2</b>
---	---	------------------------------------	--	---------------------------

TEMPERATURE OBSERVATIONS					
Item/Location	Temp F	Item/Location	Temp F	Item/Location	Temp F
oysters on ice	36-50	cooked corn	62	right side cooler/shrimp	41
WIC/dirty rice	82	reach in freezer	3	crawfish	35-51
white rice	95	glass front freezer/ambient	4	pico	41
Mac n cheese sauce	45-51	lobster freezer ambient	9	under/chicken	41
sausage	45	left cold top/all TCS well over 41F	50-64F	fish	41
tomatoes/pico	41/44	steam table/rice	166	Black freezer ambient	5
leafy greens	41	gumbo/red beans	171/169	salad cooler/cut tomatoes	42
cooked potatoes	64	sauce	170		

OBSERVATIONS AND CORRECTIVE ACTIONS	
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:
	Hand sink 140F equipped
10/33	Dishwasher not sanitizing/changed sanitizer source/COS to 100ppm chlorine
45	Need to clean floor drains
2	Not enough ice on oysters/discarded those over 41F/COS by adding more ice to cover
1/27	Discarded rice, potatoes, corn, and sauces and soups made yesterday and more than 4 hours ago
	2 hours from 135F to 70F then 4 hours to 41F or below/use shallow metal pans, down stack, no kids until 41F
	Stir often, take temps often, use ice slurry baths and ice paddles if necessary
W	WIC to cold hold at 41F or below/watch as outside temps are about to sky rocket and will affect the coolers
45	Replace ceiling tile over WIC
32	Some rusty shelves under prep tables and some in the WIC
45	Some missing grout in cookline/To repair holes in walls and broken tiles over pass thru
	Line hand sink 100+F equipped /3 comp sink 145F
36	Need to store wiping cloths in sani buckets
32	Need to address cutting boards in cook line/replace when necessary
40	Avoid use of Styrofoam to go cups as scoops/use a handled scoop instead, also avoid use of to go cups as scoops in various places
38	Need to thaw under running cool water/not leave in counter at room temp
W	Save a days to be discarded at 4 hours/don't keep overnight after use
37	Time to defrost lobster freezer
41/40	Bulk spices need to be properly labeled/ avoid re-use with different spice, avoid re-use of single use containers
2	Avoid over stacking in cold tops/discarded foods over 41F/stocked yesterday
39	Discard frayed and broken spatulas, and containers
45	Left side cold top/door completely broken off/time for a new unit/habitual offender for temperatures
18	To label spray bottles and store low and separate, not next to ice scoop
10	To clean ice deflector panel
42	Clean shelves under drink counter/sticky, clean equipment in/around, and on
W	Drink hand sink 100+F/need hand soap
	Bar hand sink 100+F
10/33	Bar not sanitizing/ changed sanitizer source, COS to 100ppm chlorine

Received by: (signature) <i>Lisa Reinhold</i>	Print: <b>Lisa Reinhold</b>	Title: Person In Charge/ Owner <b>Manager</b>
Inspected by: (signature) <i>Christy Cortez, RS</i>	Print: <b>Christy Cortez, RS</b>	Samples: Y N # collected

Form EH-06 (Revised 09-2015)