



Retail Food Establishment Inspection Report part 1

As Governed by Title 50, Chapter 50 Montana Code Annotated (MCA) and the Administrative Rules of Montana (ARM): Title 37, Chapter 110, Subchapter 2

Establishment Magic Diamond Casino	No. of Risk Factor/Intervention Violations 0	Date 3/6/18
Address 209 N. Merrill Ave	No. of Repeat Risk Factor/Intervention Violations 0	Time In 9:03 AM
City Gardiner County: Dawson	Water: <input checked="" type="radio"/> City Private Public PWS# 209	Time Out 9:18 AM
Licensee: Northern Lounge Email: Bobbie@bigskygaming.com	Wastewater: <input checked="" type="radio"/> City Private Public MPDDS# 21628	Risk Category
License # F/FL 309553 License Subtype(s): ES	Current water test Y/N 1 2 3 4	
Purpose of Inspection: Regular <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Pre-opening <input type="checkbox"/> Complaint <input type="checkbox"/> Illness <input type="checkbox"/> HACCP <input type="checkbox"/> Investigation <input type="checkbox"/> Other <input type="checkbox"/>		

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item. Mark "X" in appropriate box for COS and/or R

IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable COS=corrected on-site during inspection R=repeat violation

Compliance Status		COS	R	Compliance Status		COS	R
SUPERVISION							
1	IN OUT			18	IN OUT N/A N/O		
	Person in charge present, demonstrates knowledge, and performs duties				Proper cooking time & temperatures		
2	IN OUT NA			19	IN OUT N/A N/O		
	Certified Food Protection Manager				Proper reheating procedures for hot holding		
Employee Health							
3	IN OUT			20	IN OUT N/A N/O		
	Management, food employee and conditional employee, knowledge, responsibilities and reporting.				Proper cooling time & temperatures		
4	IN OUT			21	IN OUT N/A N/O		
	Proper use of restriction and exclusion				Proper hot holding temperatures		
5	IN OUT			22	IN OUT N/A N/O		
	Procedures for responding to vomiting and diarrheal events				Proper cold holding temperatures		
Good Hygienic Practices							
6	IN OUT N/O			23	IN OUT N/A N/O		
	Proper eating, tasting, drinking, or tobacco use				Proper date marking & disposition		
7	IN OUT N/O			24	IN OUT N/A N/O		
	No discharge from eyes, nose, and mouth				Time as a public health control: procedures & records		
Preventing Contamination by Hands							
8	IN OUT N/O			Consumer Advisory			
	Hands clean & properly washed			25	IN OUT N/A		
9	IN OUT N/A N/O				Consumer advisory provided for raw or undercooked foods		
	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			Highly Susceptible Populations			
10	IN OUT			26	IN OUT N/A		
	Adequate handwashing sinks properly set up & accessible				Pasteurized foods used; prohibited foods not offered		
Approved Source							
11	IN OUT			Food/Color Additives and Toxic Substances			
	Food obtained from approved source			27	IN OUT N/A		
12	IN OUT N/A N/O				Food additives: approved & properly used		
	Food received at proper temperature			28	IN OUT N/A		
13	IN OUT				Toxic substances properly identified, stored, & used		
	Food in good condition, safe, & unadulterated			Conformance with Approved Procedures			
14	IN OUT N/A N/O			29	IN OUT N/A		
	Required records available: shellstock tags, parasite destruction				Compliance with variance/specialized process/HACCP		
Protection from Contamination Arm							
15	IN OUT N/A N/O			Risk factors are improper 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.			
	Food separated & protected						
16	IN OUT N/A						
	Food-contact surfaces: cleaned & sanitized						
17	IN OUT						
	Proper disposition of returned, previously served, reconditioned, & unsafe food						

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				Proper Use of Utensils			
	Pasteurized eggs used where required			43			
31					In-use utensils: properly stored		
	Water & ice from approved source			44			
32					Utensils, equipment & linens: properly stored, dried, & handled		
	Variance obtained for specialized processing methods			45			
Food Temperature Control							
					Single-use/single-service articles: properly stored & used		
33				46			
	Proper cooling methods used; adequate equipment for temperature control				Gloves used properly		
34				Utensils, Equipment and Vending			
	Plant food properly cooked for hot holding			47			
35					Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
	Approved thawing methods used			48			
36					Warewashing facilities: installed, maintained, & used; test strips		
	Thermometers provided & accurate			49			
					Non-food contact surfaces clean		
Food Identification							
37				Physical Facilities			
	Food properly labeled; original container			50			
Prevention of Food Contamination							
38					Hot & cold water available; adequate pressure		
	Insects, rodents, & animals not present			51			
39					Plumbing installed; proper backflow devices		
	Contamination prevented during food preparation, storage & display			52			
40					Sewage & waste water properly disposed		
	Personal cleanliness			53			
41					Toilet facilities: properly constructed, supplied, & cleaned		
	Wiping cloths: properly used & stored			54			
42					Garbage & refuse properly disposed; facilities maintained		
	Washing fruits & vegetables			55			
					Physical facilities installed, maintained, & clean		
				56			
					Adequate ventilation & lighting; designated areas used		

Person in Charge (Signature) *[Signature]* Date: **3-6-18**

Inspector (Signature) *[Signature]* Follow-up: YES NO (Circle one) Follow-up Date:

