



MILFORD HEALTH DEPARTMENT

NEW REGULATIONS FOR FOOD ESTABLISHMENTS 2022 FDA FOOD CODE

2023 Food Establishment Training

As of February 17, 2023, the FDA
Food Code is CT's Food Code





The FDA Food Code is based on scientific data gathered during field inspections and is updated every 4 years

GOAL: REDUCE THE RISKS OF FOODBORNE ILLNESS

HOW: Through ACTIVE MANAGERIAL CONTROL of foodborne illness risk factors

TOP 5 RISK FACTORS CONTRIBUTING TO FOODBORNE ILLNESS



- Improper holding temperatures
- Inadequate cooking, such as undercooking raw shell eggs
- Contaminated equipment
- Food from unsafe sources
- Poor personal hygiene

INTERVENTIONS

- Keep hot foods hot - 135 degrees or above, keep cold foods cold - 41 degrees or below
- Cook foods to the required minimum temperatures
- Food equipment and utensils are clean & sanitized
- Obtain food from local, state or federally regulated food facilities
- Prevent contamination by employees - Train food handlers

BACKGROUND

In 2017, the Milford Health Department AND Milford food establishments (FE) began implementing new requirements under Public Act 17-83

- ✓ UPDATED FOOD ESTABLISHMENT (FE) RISK CLASSIFICATION CATEGORIES
- ✓ CHANGES TO HOT AND COLD HOLDING TEMPERATURE REQUIREMENTS
- ✓ QUALIFIED FOOD OPERATORS (QFO) BECAME KNOWN AS CERTIFIED FOOD PROTECTION MANAGERS (CFPM)
- ✓ REQUIREMENT TO EMPLOY CERTIFIED FOOD PROTECTION MANAGERS (CFPM) AT FE'S
- ✓ REQUIRING ALL CFPM CERTIFICATES ARE CURRENT/NOT EXPIRED

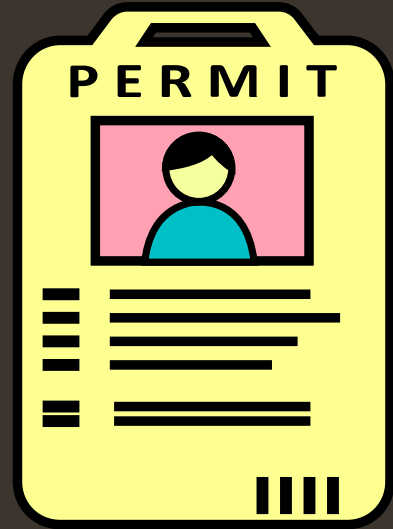
OUR FOCUS TODAY....



- ▶ License Holder and the Person in Charge (PIC) have specific required and identified responsibilities
- ▶ Sanitarians will be using a new inspection form
- ▶ New Signage & Advisory requirements
- ▶ Date marking system requirements

LICENSE HOLDER RESPONSIBILITIES

The License Holder Shall:



Be the Person in Charge (PIC) or shall designate a PIC at the food establishment.

Ensure that a PIC is present at the FE during ALL hours of operation

Post the permit in a location in the food establishment that is conspicuous to the consumer.

Notify customers that a copy of the most recent establishment inspection report is available upon request by:
Posting a sign or placard in a location in the food establishment that is conspicuous to customers or by another method approved by MHD.



PERSON IN CHARGE (PIC)



- ▶ The PIC shall be present at the FE during all hours of operation
- ▶ The person in charge is the Individual present at a food establishment who is responsible for the operation at the time of the inspection
- ▶ Each Class 1, 2, 3, and 4 food establishment shall have a person in charge (PIC) who meets the requirements of section 2-102.11 of the Food Code AND who is on-site at the food establishment at all times the establishment is operating.
- ▶ The person in charge at all Class 2, 3, and 4 food establishments shall be a Certified Food Protection Manager (CFPM) and hold a valid/current certificate.

PERSON IN CHARGE (PIC)

DEMONSTRATION OF KNOWLEDGE (3-WAYS)

Certification by an accredited program as specified in the Food Code

OR

Complying with the Food Code by having no Priority or Priority Foundation Item violations

OR

Responding correctly to the Food Inspector's questions regarding public health practices and principles applicable to their food establishment operation

PERSON IN CHARGE (PIC)

17 DUTIES (FOOD CODE SEC. 2-103)

the Conference for FOOD Protection Standard for Accreditation of FOOD Protection Manager Certification Programs is deemed to comply with §2-102.12.

2-103 Duties

2-103.11 Person in Charge.

The PERSON IN CHARGE shall ensure that:

- (A) FOOD ESTABLISHMENT operations are not conducted in a private home or in a room used as living or sleeping quarters as specified under § 6-202.111;^{Pf}
- (B) PERSONS unnecessary to the FOOD ESTABLISHMENT operation are not allowed in the FOOD preparation, FOOD storage, or WAREWASHING areas, except that brief visits and tours may be authorized by the PERSON IN CHARGE if steps are taken to ensure that exposed FOOD; clean EQUIPMENT, UTENSILS, and LINENS; and unwrapped SINGLE-SERVICE and SINGLE-USE ARTICLES are protected from contamination;^{Pf}
- (C) EMPLOYEES and other PERSONS such as delivery and maintenance PERSONS and pesticide applicators entering the FOOD preparation, FOOD storage, and WAREWASHING areas comply with this Code;^{Pf}
- (D) EMPLOYEES are effectively cleaning their hands, by routinely monitoring the EMPLOYEES' handwashing;^{Pf}
- (E) EMPLOYEES are visibly observing FOODS as they are received to determine that they are from APPROVED sources, delivered at the required temperatures, protected from contamination, UNADULTERED, and accurately presented, by routinely monitoring the EMPLOYEES' observations and periodically evaluating FOODS upon their receipt;^{Pf}
- (F) EMPLOYEES are verifying that FOODS delivered to the FOOD ESTABLISHMENT during non-operating hours are from APPROVED sources and are placed into appropriate storage locations such that they are maintained at the required temperatures, protected from contamination, UNADULTERATED, and accurately presented;^{Pf}
- (G) EMPLOYEES are properly cooking TIME/TEMPERATURE CONTROL FOR SAFETY FOOD, being particularly careful in cooking those FOODS known to

SEE
HANDOUT

RECAP



THE PIC SHALL BE A CFPM AND SHALL BE PRESENT ON-SITE DURING ALL HOURS OF OPERATION


THE CFPM SHALL HOLD A VALID CERTIFICATE FROM AN APPROVED TESTING ORGANIZATION

The License Holder of a **Class II, III or IV** FE *may* appoint an alternate PIC **ONLY**:



- 1 During non-peak hours of operation, such as an overnight shift
- 2 When no more than 2-employees are on the premises
- 3 When the PIC cannot be present
- 4 **And** there is limited or no food prep taking place

Appointment shall be in writing on prescribed form from CT DPH

Risk Category:		Food Establishment Inspection Report		Page 1 of ____									
Establishment type: Permanent Temporary Mobile Other _____			Date: _____										
Establishment				Time In _____ AM/PM Time Out _____ AM/PM									
Address				LHD									
Town/City				Purpose of Inspection: Routine Pre-op									
Permit Holder				Reinspection Other _____									
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS													
<small>Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Interventions are control measures to prevent foodborne illness or injury.</small>													
<small>Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered item IN=In compliance OUT=not in compliance N/A=not applicable N/O=not observed</small>													
<small>P=Priority item PF=Priority foundation item C=Core item V=violation type Mark in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation</small>													
IN	OUT	N/A	N/O	V	COS	R	IN	OUT	N/A	N/O	V	COS	R
Supervision						Protection from Contamination							
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Person/Alternate Person in charge present, demonstrates knowledge and performs duties						Food separated and protected							
2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Certified Food Protection Manager for Classes 2, 3, & 4						Food-contact surfaces: cleaned & sanitized							
Employee Health						Time/Temperature Control for Safety							
3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	17	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Management, food employee and conditional employee; knowledge, responsibilities and reporting						Proper cooking time and temperatures							
4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper use of restriction and exclusion						Proper reheating procedures for hot holding							
5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written procedures for responding to vomiting and diarrheal events						Proper cooling time and temperatures							
Good Hygienic Practices						Consumer Advisory							
6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	20	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper eating, tasting, drinking, or tobacco products use						Consumer advisory provided: raw/undercooked food							
7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Highly Susceptible Population						
No discharge from eyes, nose, and mouth						Pasteurized foods used; prohibited foods not offered							
Preventing Contamination by Hands						Food/Color Additives and Toxic Substances							
8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	21	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hands clean and properly washed						Food additives: approved and properly used							
9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	22	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed						Toxic substances properly identified, stored & used							
10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Conformance with Approved Procedures						
Adequate handwashing sinks, properly supplied/accessible						Compliance with variance/specialized process/ROP criteria/HACCP Plan							
Approved Source						GOOD RETAIL PRACTICES							
11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<small>Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.</small>						
Food obtained from approved source						<small>Mark OUT if numbered item is not in compliance V=violation type Mark in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation</small>							
12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	OUT	N/A	N/O	V	COS	R	
Food received at proper temperature						Safe Food and Water							
13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food in good condition, safe, and unadulterated						Pasteurized eggs used where required							
14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	31	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Required records available: molluscan shellfish identification, parasite destruction						Water and ice from approved source							
GOOD RETAIL PRACTICES						Proper Use of Utensils							
30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	43	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safe Food and Water						In-use utensils: properly stored							
31	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	44	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pasteurized eggs used where required						Utensils/equipment/linens: properly stored, dried, & handled							
32	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	45	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water and ice from approved source						Single-use/single-service articles: properly stored & used							
33	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	46	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Variance obtained for specialized processing methods						Gloves used properly							
Food Temperature Control						Utensils and Equipment							
33	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	47	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper cooling methods used; adequate equipment for temperature control						Food and non-food contact surfaces cleanable, properly designed, constructed, and used							
34	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	48	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plant food properly cooked for hot holding						Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available							
35	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	49	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Approved thawing methods used						Non-food contact surfaces clean							
36	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Physical Facilities						
Thermometers provided and accurate						50	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification						51	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	52	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food properly labeled; original container						53	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination						54	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	55	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insects, rodents, and animals not present						56	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Adequate ventilation and lighting; designated areas used						
Contamination prevented during food preparation, storage & display						Natural rubber latex gloves not used per CGS §19a-36f							
40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Violations documented						
Personal cleanliness						Priority Item Violations							
41	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Priority Foundation Item Violations						
Wiping cloths: properly used and stored						Core Item Violations							
42	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Risk Factor/Public Health Intervention Violations						
Washing fruits and vegetables						Repeat Risk Factor/Public Health Intervention Violations							
Personnel						Good Retail Practices Violations							
Person In Charge (Signature) _____			Date _____			Requires Reinspection - check box if you intend to reinspect							
Person In Charge (Printed) _____			Date _____			Appeal: The owner or operator of a food establishment aggrieved by this order to correct any inspection violation identified by the food inspector or to hold, destroy, or dispose of unsafe food, may appeal such order to the Director of Health, not later than forty-eight hours after issuance of such order.							
Inspector (Signature) _____			Date _____										
Inspector (Printed) _____			Date _____										

NEW INSPECTION REPORT FORM

- ▶ Inspections will no longer result in a numerical score
- ▶ Inspections will be based more on procedural questions and answers and evaluating ACTIVE MANAGERIAL CONTROL
- ▶ Inspections will prioritize making corrections while the inspector is on site. (COS)
- ▶ 29 Foodborne Illness Risk Factors and Public Health Interventions - Top half of inspection report form
- ▶ 27 Good Retail Practices - Systems to control basic operational and sanitation conditions within a food establishment. - Bottom half of inspection report form.

FOODBORNE ILLNESS RISK FACTORS

5 BROAD CATEGORIES

- ▶ Food from unsafe sources
- ▶ Inadequate Cooking
- ▶ Improper Holding Temperatures
- ▶ Contaminated Equipment
- ▶ Poor Personal Hygiene

Inspections are based more on procedural questions and answers and discussing interventions (active managerial control) to reduce foodborne illness risk

Violation categories

Connecticut Department of Public Health DH-108 Rev. 2/19/23

Food Establishment Inspection Report Page 1 of ____

Risk Category: _____

Establishment type: Permanent Temporary Mobile Other _____ Date: _____

Establishment _____ Time In _____ AM/PM Time Out _____ AM/PM

Address _____ LHD _____

Town/City _____ Purpose of Inspection: Routine Pre-op

Permit Holder _____ Reinspection Other _____

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Interventions are control measures to prevent foodborne illness or injury.

Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered item IN=In compliance OUT=not in compliance N/A=not applicable N/O=not observed

P=Priority item PF=Priority foundation item C=Core item V=violation type Mark in appropriate box for CO\$ and/or R CO\$=corrected on-site during inspection R=repeat violation

Supervision				Protection from Contamination			
IN	OUT	N/A	N/O	IN	OUT	N/A	N/O
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1				15			
Person/Alternate Person in charge present, demonstrates knowledge and performs duties				Food separated and protected			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2				16			
Certified Food Protection Manager for Classes 2, 3, & 4				Food-contact surfaces: cleaned & sanitized			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3				17			
Management, food employee and conditional employee; knowledge, responsibilities and reporting				Proper disposition of returned, previously served, reconditioned, and unsafe food			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4				18			
Proper use of restriction and exclusion				Time/Temperature Control for Safety			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5				19			
Written procedures for responding to vomiting and diarrheal events				Proper cooking time and temperatures			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6				20			
Good Hygienic Practices				Proper reheating procedures for hot holding			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7				21			
Proper eating, tasting, drinking, or tobacco products use				Proper cooling time and temperatures			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8				22			
Preventing Contamination by Hands				Proper hot holding temperatures			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9				23			
Hands clean and properly washed				Proper cold holding temperatures			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10				24			
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed				Proper date marking and disposition			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11				25			
Adequate handwashing sinks, properly supplied/accessibile				Time as a public health control: procedures and records			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12				26			
Approved Source				Consumer Advisory			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13				27			
Food obtained from approved source				Highly Susceptible Population			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14				28			
Food received at proper temperature				Food/Color Additives and Toxic Substances			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15				29			
Food in good condition, safe, and unadulterated				Food additives: approved and properly used			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16				30			
Required records available: molluscan shellfish identification, parasite destruction				Toxic substances properly identified, stored & used			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17				31			
GOOD RETAIL PRACTICES				Conformance with Approved Procedures			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18				32			
Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.				Compliance with variance/specialized process/ROP criteria/HACCP Plan			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19				33			
Mark OUT if numbered item is not in compliance V=violation type Mark in appropriate box for CO\$ and/or R CO\$=corrected on-site during inspection R=repeat violation				GOOD RETAIL PRACTICES			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20				34			
Safe Food and Water				Proper Use of Utensils			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21				35			
Pasteurized eggs used where required				In-use utensils: properly stored			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22				36			
Water and ice from approved source				Utensils/equipment/linens: properly stored, dried, & handled			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23				37			
Variance obtained for specialized processing methods				Single-use/single-service articles: properly stored & used			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24				38			
Food Temperature Control				Gloves used properly			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25				39			
Proper cooling methods used; adequate equipment for temperature control				Utensils and Equipment			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26				40			
Plant food properly cooked for hot holding				Food and non-food contact surfaces cleanable, properly designed, constructed, and used			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27				41			
Approved thawing methods used				Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28				42			
Thermometers provided and accurate				Non-food contact surfaces clean			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29				43			
Food Identification				Physical Facilities			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30				44			
Food properly labeled; original container				Hot and cold water available; adequate pressure			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31				45			
Prevention of Food Contamination				Plumbing installed; proper backflow devices			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32				46			
Insects, rodents, and animals not present				Sewage and waste water properly disposed			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33				47			
Contamination prevented during food preparation, storage & display				Toilet facilities: properly constructed, supplied, & clean			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34				48			
Personal cleanliness				Garbage and refuse properly disposed; facilities maintained			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35				49			
Wiping cloths: properly used and stored				Physical facilities installed, maintained, and clean			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36				50			
Washing fruits and vegetables				Adequate ventilation and lighting; designated areas used			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37				51			
Violations documented				Natural rubber latex gloves not used per C.G.S. §19a-36f			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38				52			
Person In Charge (Signature) _____ Date _____				Date corrections due _____ # _____			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39				53			
Person In Charge (Printed) _____				Priority item Violations _____			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40				54			
Inspector (Signature) _____ Date _____				Priority Foundation Item Violations _____			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41				55			
Inspector (Printed) _____				Core Item Violations _____			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42				56			
Appeal: The owner or operator of a food establishment aggrieved by this order to correct any inspection violation identified by the food inspector or to hold, destroy, or dispose of unsafe food, may appeal such order to the Director of Health, not later than forty-eight hours after issuance of such order.				Risk Factor/Public Health Intervention Violations _____			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43				57			
Repeat Risk Factor/Public Health Intervention Violations _____				Good Retail Practices Violations _____			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44				58			
Requires Reinspection - check box if you intend to reinspect _____				Requires Reinspection - check box if you intend to reinspect _____			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



PRIORITY (P)

Priority items eliminate, prevent, or reduce to an acceptable level, hazards that cause foodborne illness or injury (e.g., appropriate handwashing)



PRIORITY FOUNDATION (PF)

Priority foundation items provide support to Priority items (e.g., soap provided to support proper handwashing)



CORE (C)

Core items are related to general sanitation /maintenance and standard operating procedures (e.g., floors are easily cleanable)

These categories align with the risk of foodborne illness relative to the violation.

Each violation category has its own compliance timeline associated with it (Section 8-405 of the Food Code).



Compliance Timelines (Sec. 8-405) Violation of Priority Item or Priority Foundation Item

- ▶ PERMIT HOLDER shall at the time of inspection correct a violation of a PRIORITY ITEM or PRIORITY FOUNDATION ITEM - Corrected on Site (COS)

- ▶ AN INSPECTOR MAY,
Consider the nature of the potential hazard involved and the complexity of the corrective action needed, agree to or specify a longer time frame, not to exceed:
 - (1) 72 hours after the inspection for a PRIORITY ITEM; or
 - (2) 10 calendar days after the inspection for a PRIORITY FOUNDATION ITEM



Compliance Timelines Sec. (8-405.11) Violation of Core Item(S)

- ▶ (A) The PERMIT HOLDER shall correct CORE ITEM VIOLATIONS (C) by a date and time agreed to or specified by the Inspector BUT no later than 90 calendar days after the inspection.



HOWEVER

- ▶ (B) The Milford Health Department **MAY** approve a compliance schedule that extends beyond the 90 day time limit **IF** a written schedule of compliance is submitted (by the license holder) **AND** no health hazard exists or will result from allowing an extended schedule for compliance.

Verification & Documentation of Correction



VERIFY CORRECTED ON SITE



(A) After observing at the time of inspection a correction of a violation of a PRIORITY ITEM or PRIORITY FOUNDATION ITEM or a HACCP PLAN deviation, the Certified Food Inspector shall enter the violation and information about the corrective action on the inspection report.

ACTION



If the violation is not corrected during the inspection, after receiving notification that the license holder has corrected a violation of a PRIORITY ITEM OR PRIORITY FOUNDATION ITEM or HACCP PLAN deviation, or at the end of the specified period of time, the Certified Food Inspector shall verify correction of the violation, document the information on an inspection report, and enter the report in the MHD records.

VERIFICATION DOCUMENTATION



The owner, operator or person in charge may submit documentation of the completion of corrective action to the food inspector in a form and manner acceptable to the food inspector. Such documentation may include, but not be limited to, photographic evidence of the correction or the owner's or operator's notarized attestation affirming that the required corrective action has been completed.

SIGNAGE & ADVISORIES

Handwashing - A sign or poster that notifies food employees to wash their hands shall be provided at all handwashing sinks used by food employees and shall be clearly visible.



SIGNAGE & ADVISORIES

Inspection Report - Notify customers that a copy of the most recent establishment inspection report is available upon request by posting a sign or placard in a location in the food establishment that is conspicuous to customers or by another method approved by MHD

*A copy of the most recent
establishment inspection report
is available upon request.*

SIGNAGE & ADVISORIES

Allergens - The license holder shall notify consumers by written notification of the presence of major food allergens as an ingredient in unpackaged food items that are served or sold to the consumer. (Section 3-602-12)

Written notification format includes:

- Brochures
- Deli case or menu notifications
- Table tents
- Placards
- Or other effective written means.

Notifying the consumer to the presence of major food allergens may prevent an inadvertent exposure.



VOMITING & DIARRHEA CLEAN-UP PROCEDURE



- ▶ Food establishments shall have a written policy regarding procedures for employees to follow when responding to vomiting or diarrheal events in the food establishment.
- ▶ The procedure shall address the specific actions employees must take to minimize the spread of contamination and the exposure of employees, consumers, food, and surfaces. Section 2-501.11.

**SEE
HANDOUT**

DATE MARKING

SEC. 3-501.17



Food establishments must have a system in place to date mark foods. The food code requires the date marking of food as an active managerial control of the temperature and time combination for cold holding by having a system for identifying the date or day by which the food must be consumed, sold, or discarded.

Date marking requirements apply to containers of processed food that have been opened and to food prepared by a food establishment, in both cases if held for more than 24 hours and while the food is under the control of the food establishment.

**SEE
HANDOUT**

EMPLOYEE HEALTH POLICY



The Food Code requires all food establishments to adopt an employee health policy effective in preventing the transmission of foodborne illness

Three interventions effective in preventing foodborne viruses and bacteria in food establishments

- 1 Restrict or exclude ill food employees from working with food
- 2 Use proper handwashing procedures
- 3 Eliminate bare hand contact with foods that are ready-to-eat (RTE) using proper handwashing procedures

FDA Food Code 2022 Annex 7: Model Forms, Guides, and Other Aids

FORM 1-B Conditional Employee or Food Employee Reporting Agreement

Preventing Transmission of Diseases through Food by Infected Conditional Employees or Food Employees with Emphasis on Illness due to Norovirus, *Salmonella* Typhi, *Shigella* spp., or Shiga toxin-producing *Escherichia coli* (STEC), nontyphoidal *Salmonella* or Hepatitis A Virus

The purpose of this agreement is to inform conditional employees or food employees of their responsibility to notify the person in charge when they experience any of the conditions listed so that the person in charge can take appropriate steps to preclude the transmission of foodborne illness.

I AGREE TO REPORT TO THE PERSON IN CHARGE:

Any Onset of the Following Symptoms, Either While at Work or Outside of Work, Including the Date of Onset:

1. Diarrhea
2. Vomiting
3. Jaundice
4. Sore throat with fever
5. Infected cuts or wounds, or lesions containing pus on the hand, wrist, an exposed body part, or other body part and the cuts, wounds, or lesions are not properly covered (such as boils and infected wounds, however small)

Future Medical Diagnosis:

Whenever diagnosed as being ill with Norovirus, typhoid fever (*Salmonella* Typhi), shigellosis (*Shigella* spp. infection), *Escherichia coli* O157:H7 or other STEC infection, nontyphoidal *Salmonella* or hepatitis A (hepatitis A virus infection)

Future Exposure to Foodborne Pathogens:

1. Exposure to or suspicion of causing any confirmed disease outbreak of Norovirus, typhoid fever, shigellosis, *E. coli* O157:H7 or other STEC infection, or hepatitis A.
2. A household member diagnosed with Norovirus, typhoid fever, shigellosis, illness due to STEC, or hepatitis A.
3. A household member attending or working in a setting experiencing a confirmed disease outbreak of Norovirus, typhoid fever, shigellosis, *E. coli* O157:H7 or other STEC infection, or hepatitis A.

I have read (or had explained to me) and understand the requirements concerning my responsibilities under the Food Code and this agreement to comply with:

1. Reporting requirements specified above involving symptoms, diagnoses, and exposure specified;
2. Work restrictions or exclusions that are imposed upon me; and
3. Good hygienic practices.

I understand that failure to comply with the terms of this agreement could lead to action by the food establishment or the food regulatory authority that may jeopardize my employment and may involve legal action against me.

Conditional Employee Name (please print) _____ Date _____
Signature of Conditional Employee _____ Date _____
Food Employee Name (please print) _____ Date _____
Signature of Food Employee _____ Date _____
Signature of Permit Holder or Representative _____ Date _____

Annex 7 -5

EMPLOYEE HEALTH POLICY

The policy must require all employees report to the PIC information about their health as it relates to diseases that can be transmitted through food.



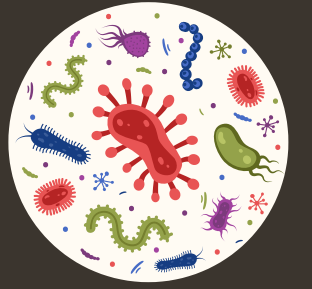
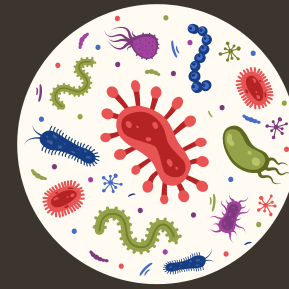
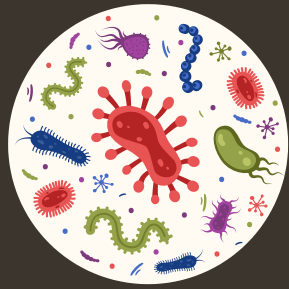
Who is responsible? Sec 2-201

- ▶ THE PERMIT HOLDER: shall require food employees to **report** to the PIC information about their health and know what to do with that information.
- ▶ THE PIC: shall ensure that a food employee who exhibits or **reports** a symptom or **reports** a diagnosed illness is excluded from the food establishment AND IMMEDIATELY NOTIFY THE MILFORD HEALTH DEPARTMENT
- ▶ THE EMPLOYEE: shall **report** illness symptoms immediately to the PIC.

SYMPTOMS:

Including but not limited to: Vomiting, Diarrhea, Jaundice, Sore throat with fever, Infected Wound

EMPLOYEE HEALTH POLICY



Reportable Pathogens

Norovirus

Salmonella Typhi

E. Coli (Shiga toxin producing)

Salmonella (Nontyphoidal)

Shigella

Hepatitis A Virus

Reportable Symptoms

Vomiting

Diarrhea

Sore throat with fever

Jaundice

Infected cuts and burns

Scratch Baking

Food Safety

Allergen

Awareness



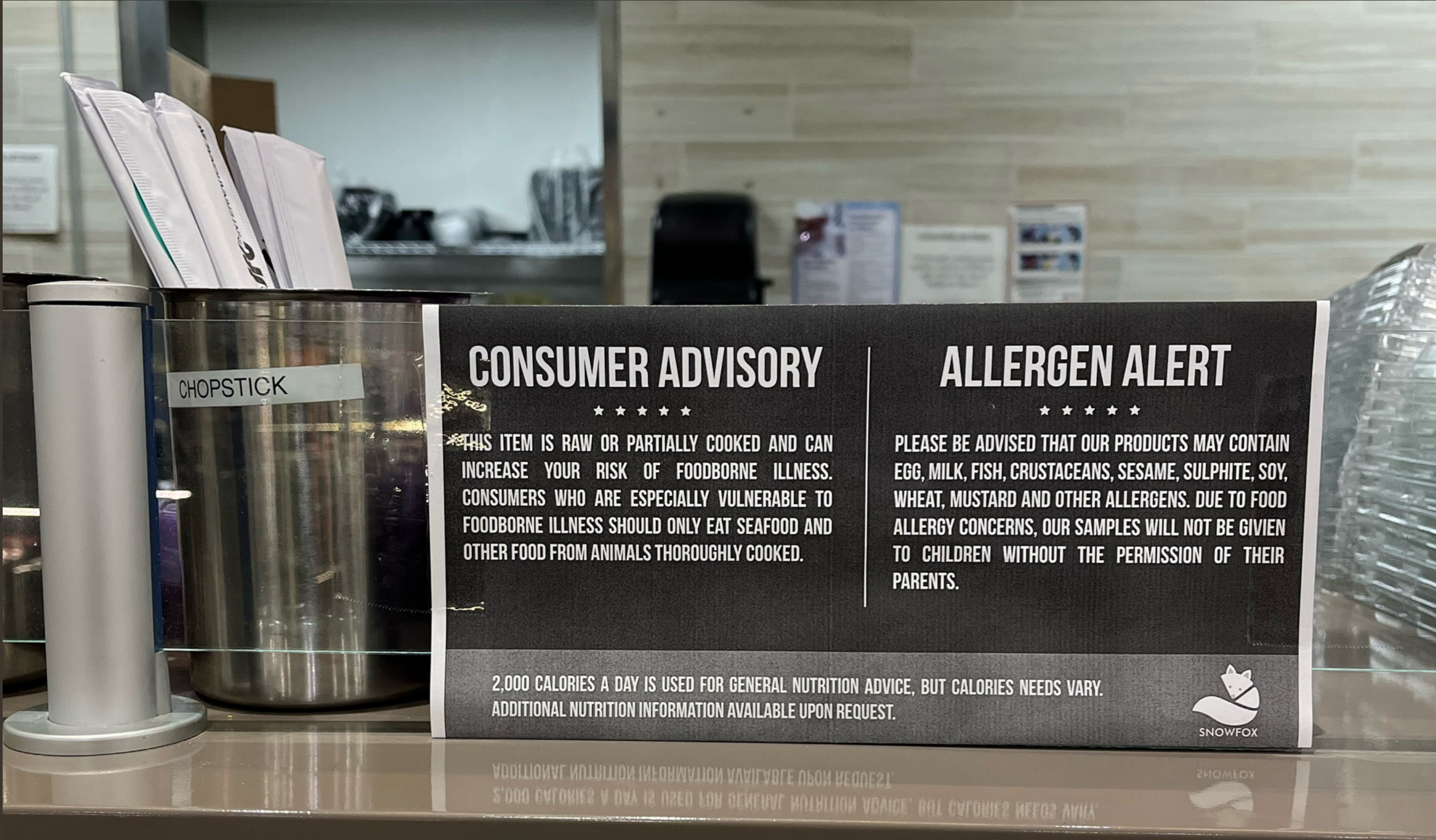
Allergen Warning:

Edible Arrangements® products contain, or may have come in contact with strawberries, apples, oranges, pineapples, bananas and other fruit, as well as tree nuts (almonds, hazelnuts, coco-nuts, and pistachios), peanuts, wheat, eggs, milk and soy. Edible®, Edible Arrangements®, Edible To Go®, and the Fruit Basket Logo are registered Trademarks of Edible IP, LLC. © 2020 Edible IP, LLC. All Rights Reserved.

2,000 calories a day is used for general nutrition advice, but calorie needs may vary. Nutritional information is available upon request.

Before placing your
order, please inform
your server if a person
in your party has a food
allergy.





CHOPSTICK

CONSUMER ADVISORY

THIS ITEM IS RAW OR PARTIALLY COOKED AND CAN INCREASE YOUR RISK OF FOODBORNE ILLNESS. CONSUMERS WHO ARE ESPECIALLY VULNERABLE TO FOODBORNE ILLNESS SHOULD ONLY EAT SEAFOOD AND OTHER FOOD FROM ANIMALS THOROUGHLY COOKED.

ALLERGEN ALERT

PLEASE BE ADVISED THAT OUR PRODUCTS MAY CONTAIN EGG, MILK, FISH, CRUSTACEANS, SESAME, SULPHITE, SOY, WHEAT, MUSTARD AND OTHER ALLERGENS. DUE TO FOOD ALLERGY CONCERNS, OUR SAMPLES WILL NOT BE GIVEN TO CHILDREN WITHOUT THE PERMISSION OF THEIR PARENTS.

2,000 CALORIES A DAY IS USED FOR GENERAL NUTRITION ADVICE, BUT CALORIES NEEDS VARY. ADDITIONAL NUTRITION INFORMATION AVAILABLE UPON REQUEST.



HI

Beautiful. Fresh. Grab-N-



May 5, 2023 at 11:45:29 AM

4-1 END 4-8

WASH YOUR HANDS



USE SOAP AND RUNNING WATER



RUB YOUR HANDS & ARMS VIGOROUSLY FOR 20 SECONDS



WASH ALL SURFACES INCLUDING FINGERS, IF COMPLETELY SOILED, RUB WITH A BRUSH. MAKE YOUR HANDS WET



DRY YOUR HANDS WITH A PAPER TOWEL

HandWash
SINK
2010



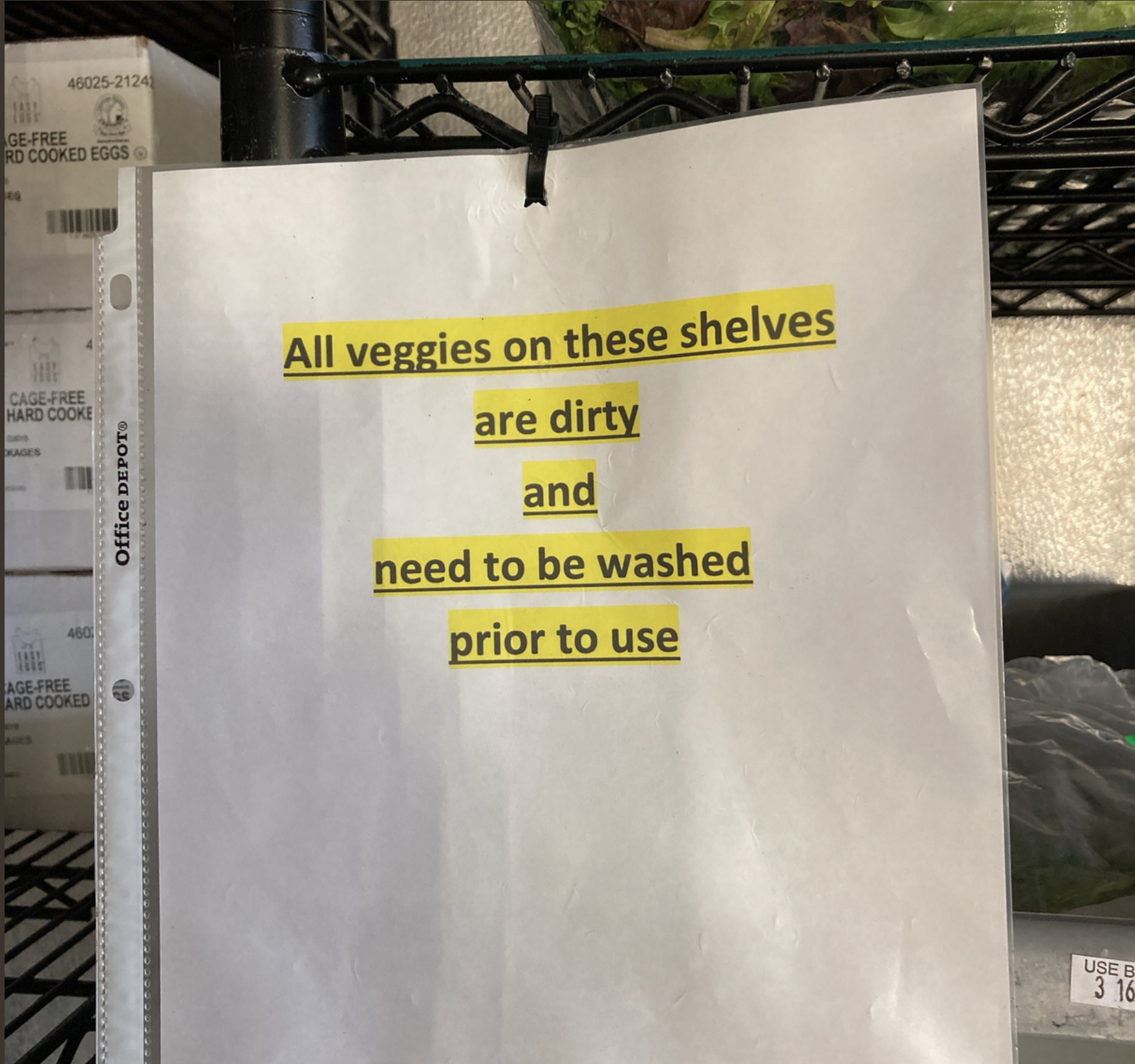


Employees Must Wash
Hands Before Returning
To Work



REGULAR
REGULAR

DONUT SHOP
BLEND
REGULAR - LIGHT ROAST



All veggies on these shelves

are dirty

and

need to be washed

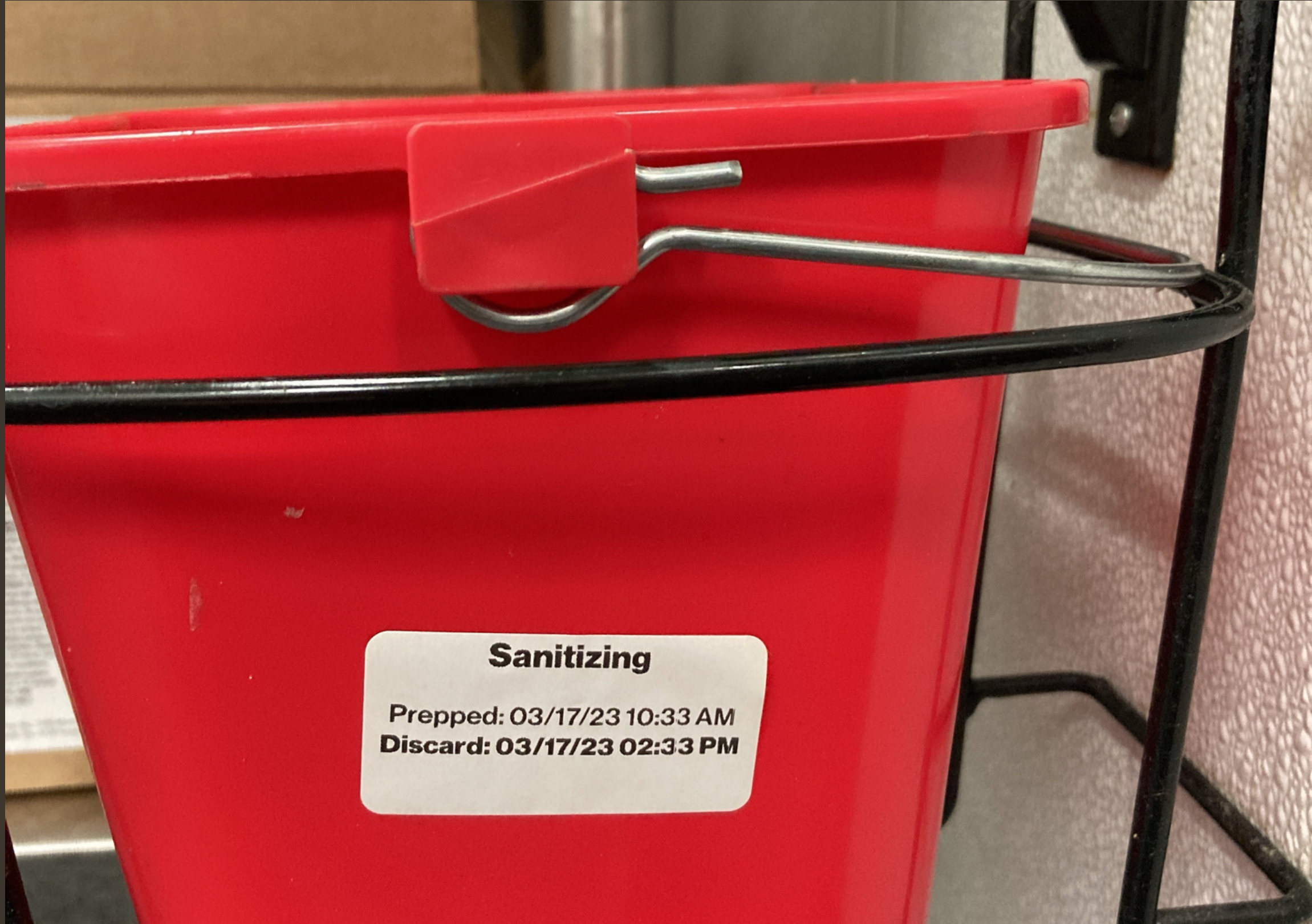
prior to use

46025-2124
CAGE-FREE
HARD COOKED EGGS
Office DEPOT®
460
CAGE-FREE
HARD COOKED

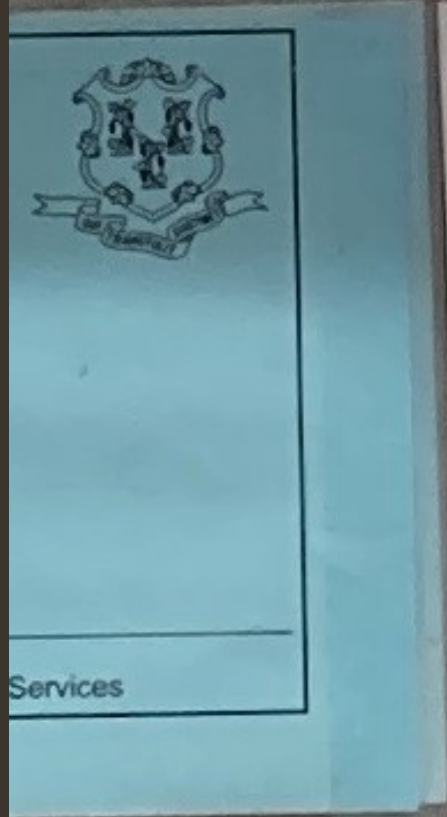
USE BY
3 16

Pickled
Onions

USE BY
3 16



Sanitizing
Prepped: 03/17/23 10:33 AM
Discard: 03/17/23 02:33 PM



**THE HEALTH DEPARTMENT
INSPECTION REPORT IS
AVAILABLE UPON REQUEST.**



Inspection Report is AVAILABLE for Viewing

MAXIMUM OCCUPANCY
NOT TO EXCEED

49



PER ORDER OF THE
FIRE MARSHAL
MILFORD FIRE DEPARTMENT

KEEP POSTED UNDER PENALTY OF LAW

“Milford Health
Department food
service inspection
available upon
request”

Pasquale Pizza Milford 





Exceeds OSHA/ANSI Standards



BLOODBORNE PATHOGEN & BODILY FLUID SPILL KIT

Used by medical professionals worldwide

 Medical Disposable Mask	 Industrial Container Bag & Clean-Up Towels	 Germicidal Wipes
 Nitrile Exam Gloves	 Fluid Scooper	 Antibacterial Wipes
 Biohazard Bag	 Scoop/Spatula	 Bodily Fluid Pick-Up Guide
 Disposable Gown	 Disposable Shoe Covers	 Headcap

KIT CONTAINS:

- 2 - Antibacterial Wipes
- 2 - Biohazard Bags
- 1 - Bodily Fluid Pick Up Guide
- 2 - Clean Up Towels
- 2 - Industrial Container Bags
- 1 - Disposable Gown
- 2 - Disposable Shoe Covers
- 1 - Medical Disposable Mask
- 2 - Germicidal Wipes
- 1 - Headcap
- 2 - Nitrile Exam Gloves
- 1 - Scoop/Spatula
- 1 - Fluid Solidifier
- 2 - Twist Ties
- 1 - Wall Mount Bracket with Hardware
- 1 - HD PVC Case



ITEM # 829-L088-1



RAPID CARE INC.
CARLSBAD, CA 92011
rapidcarefirstaid.com

Required under OSHA
Bloodborne Pathogen and Respiratory Protection
www.OSHA-safety.com

Bloodborne Pathogen & Bodily Fluid Spill Cleanup Kit

Botiquín para asear derramamiento de Líquidos Corporales / Botiquín para limpiar derramamiento de Líquidos Corporales



PACK CONTENTS - 22 PIECE KIT INCLUDES:

- (4) Disposable Vinyl Gloves
- (1) Face Mask with Eye Shield
- (1) Red Biohazard Bag 24" x 24"
- (1) Scoop & Scraper
- (1) Red Z Pouch 3/4 OZ
- (1) Germicidal Wipe
- (2) Twist Ties
- (1) Impervious Gown
- (1) Absorbent Towel
- (1) Instruction / Contents Insert
- (1) 8" x 10" Poly Bag
- (5) Antiseptic Wipe (BZK)
- (1) Paws Antimicrobial Towelette



Serves as a refill pack or a stand alone BBP kit

Item / SKU: URG-2651

2184 06/2025

Made in USA. Meets federal OSHA regulation 29-CFR-1910.1030(d)(2)(ii)
Urgent First Aid, 1207 Industry Street, Concord, CA 94520 | www.urgentfirstaid.com | 1-800-URGENT-1ST-AID

 **URGENT** First Aid



CLEAN-UP
BUCKET
FOR VOMIT & D.





MILFORD HEALTH DEPARTMENT



Website - <https://www.ci.milford.ct.us/health-department-0>

203-783-3287