



SOUTHERN NEVADA HEALTH DISTRICT
FOOD ESTABLISHMENT INSPECTION

280 SOUTH DECATUR BLVD • LAS VEGAS, NV • 89107 • 702-759-1258 (DIRECT PLAN REVIEW) • 702-759-1110 (DIRECT FOOD OPS) •

FACILITY INFORMATION

PERMIT # PR0012494, ESTABLISHMENT NAME Vegas Express Sushi, PHONE # 702-248-0097, ADDRESS 7835 S. Rainbow Blvd Las Vegas NV 89139, RISK CAT. 3, P.E. Code, DISTRICT, LOCATION, MILES, NEVADA CLEAN INDOOR AIR ACT, CONTACT PERSON, CURRENT SERVICE 1484, SERVICE 916, DATE Oct 1, 2019, TIME IN 1130, TIME OUT 1455, TRAVEL MIN, DEMERITS 33, GRADE C, HEALTH CARDS, RESULT 30, OPEN TIME, CLOSE TIME, CAPACITY, SEWER M, WATER M, PERMIT STATUS, FUTURE ACTION 51, ACTION, DATE 10/22/2019

SPECIAL NOTES
SPECIAL PROCESSES

Imminent Health Hazards - Notify SNHD and cease Operations as Directed

- Interruption of electrical service, Lack of adequate refrigeration, Emergency such as fire and/or flood, No potable water or hot water, Lack of adequate employee toilets and handwashing, Other condition or circumstance that may endanger public health, Gross unsanitary occurrence or conditions including pest, Misuse of poisonous and toxic materials, Sewage or liquid waste not disposed of in an approved manner, Suspected foodborne illness outbreak

CT = Cooking temp. HH = Hot Holding temp. CH = Cold Holding temp. RH = ReHeat temp. TC = Time as Control temp. COOL = Cooling temp.

Temperatures

Table with columns: Food, Temperature, Code, Food, Temperature, Code, Food, Temperature, Code. Includes handwritten entry 'ginger'.

IN = In compliance OUT = Not in compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site during inspection R = Repeat violation

SECTION 1 - The Critical Violations listed below are to be assessed 5 demerits for each violation. SECTION 2 - The Major Violations listed below are to be assessed 3 demerits for each violation. Table with 7 columns: Violation description, IN, OUT, COS, NO, NA, R.

SECTION 3 - Good Management Practices to Prevent Unsanitary Conditions		IN	OUT	NA
24	Acceptable personal hygiene practices, clean outer garments, proper hair restraints used. Living quarters and childcare completely separated from food service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25	Non-PHF and food storage containers properly labeled and dated as required. Food stored off the floor when required. Non-PHF/TCS not spoiled and within shelf-life. Proper retail storage of chemicals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26	Facilities for washing and sanitizing kitchenware approved, adequate, properly constructed, maintained and open.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27	Appropriate sanitizer test kits provided and used. Equipment and ware washing thermometer(s) are required. Wiping cloths and linens stored and used properly.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
28	Small wares and portable appliances approved, properly designed, in good repair.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29	Utensils, equipment, and single serve items properly handled, stored, and dispensed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30	Nonfood contact surfaces and equipment properly constructed, installed, maintained and clean.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31	Restrooms, mop sink, and custodial areas maintained and clean. Premises maintained free of litter, unnecessary equipment, or personal effects. Trash areas adequate, pest proof, and clean.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
32	Facility in sound condition and maintained (floors, walls, ceilings, plumbing, lighting, ventilation, etc.).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Observations and Corrective Actions

Violation	Corrective Action
3 - Documentation of parasite destruction missing for salmon.	Provide written documentation and maintain for 90 days past date of sale (3-402.12)
COS: No sales of salmon until documentation provided.	
6 - Two containers of cream cheese expired 16 Sep 2019 in reach in refrigerator.	Expired food shall not be held past shelf life on product (3-501.17)
COS: Voluntarily discarded	
9 - Cream cheese measured 45°F in cooler holding in danger zone (See Violation #17)	Maintain PHF(TCS) foods at 41°F or below (3-501.16)
COS: Voluntarily discarded.	

Comments

Joint inspection with Alexis Barajas. C Downgrade Invoice Number: IN0233207

Food establishment regulations (2010) and educational materials available at www.SouthernNevadaHealthDistrict.org/ferl

Section 1 Demerits	<u>15</u>
Section 2 Demerits	<u>18</u>
Total Demerits	<u>33</u>
Inspection Grade	<u>C</u>
<input type="checkbox"/> This grade resulted from a repeat critical or major violation.	
Fee required to be paid within 10 business days or prior to <u>\$477 by 10/15/2019</u>	

0 to 10 demerits = A (Identical consecutive critical or major violations shall be downgraded to next lower grade.)
 11 to 20 demerits or identical consecutive critical or major violation = B; Re-inspection after 15 days, or sooner if requested. Inspection must result in 10 demerits or less, with no identical repeat critical or major violations. Failure on re-inspection will result in a "C" grade with associated fee and may require a supervisory conference.
 21 to 40 demerits = C; Re-inspection after 15 days, or sooner if requested. Inspection must result in 10 demerits or less, with no identical repeat critical or major violations. Failure on re-inspection will result in a closure of the facility with associated fee and may require a supervisory conference.
 41 or more demerits = Closure or Imminent Health Hazard requiring closure; All food activities must remain suspended until approved by Health Authority. Re-inspection upon operator request must result in 10 demerits or less, with no identical repeat critical or major violations. Failure on re-inspection will result in continued closed status with associated fee and may require a supervisory conference.

Inspector name and phone number: Veronica Cummins 702-759-1110 Reviewed By:

Received by (signature)	Received by (printed)	EHS (signature)
<u>[Signature]</u>	<u>Khren H/CNWC</u>	<u>[Signature]</u>

