

# **Toe River District *Salmonella heidelberg* Outbreak**

## **April 18 - April 30<sup>th</sup> 2002**

### **Final Report**

#### **Introduction:**

The Toe River District (Avery, Mitchell and Yancey Counties), N.C., Health Director, Mr. Tom Singleton, was alerted by hospital healthcare providers on April 25, 2002, that an unusually large number of ill people were presenting at various regional medical facilities for evaluation and treatment of acute gastroenteritis. A common source was suspected. The following day (April 26), the Mitchell County Health Department's (HD) Nursing Supervisor received notice of a positive *Salmonella species* stool culture on one patient and learned of five hospitalized patients with presumptive diagnosis of salmonella gastroenteritis. Upon further investigation she discovered that all apparently had eaten at a single restaurant, the Western Sizzlin in Spruce Pines, NC, in the days prior to developing symptoms. By the end of the day, two cases of salmonellosis were confirmed, and approximately seven were pending confirmation. During this time period, the District's Health Director had conferred with the Acting Head of the State's General Communicable Disease Control Branch, Dr. Newt MacCormack. Over the weekend, the numbers of reports of similar illness increased dramatically, and by the afternoon of April 29, it was clear that the outbreak was ongoing and linked to the Western Sizzlin restaurant. The manager of the facility, Mr. Darren King, voluntarily closed the restaurant until an epidemiologic study could be conducted. On April 30, Dr. Pam Jenkins, Foodborne Disease Nurse Epidemiologist, was dispatched from the NC Division of Public Health to assist the Toe River District Health Department in the investigation.

#### **Methodology**

##### **Epidemiologic Study**

A case-control study was initiated on April 30. A case patient was defined as any individual having nausea, vomiting and/or three or more diarrheal stools per day and who ate at the Western Sizzlin in Spruce Pines between April 18<sup>th</sup> and April 30<sup>th</sup>. All three offices of the Toe River District conducted interviews on cases and controls using a standardized survey form. A toll free phone hotline was set up on May 1 and manned during regular working hours (Monday - Friday) and on Saturday, May 4. On April 30 a media point person was identified. Daily press releases were disseminated to keep the public informed about progress in the investigation.

##### **Environmental Investigation:**

On April 26 the Health Director and one of the Environmental Health (EH) specialists from the Mitchell County HD inspected the restaurant. The following deficiencies were noted: items improperly stored in ice bays; need to use shallow pans to store leftover foods; plates improperly stored (right side up near cash register); dirt beneath ice tray lid; build up on o-ring of tea dispenser nozzle; dirty fans in prep and kitchen areas; dirty gaskets on coolers in kitchen; improper storage of butter (placed on top of salads); meat not stored on bottom shelves in coolers; unclean grease traps; dirty "clean" dishes found;

unclean tomato dicer; improper multi-use of sink; uncovered items in storage; lack of back-flow preventor on faucets; and improper preparation of fresh fruit.

On April 29 the EH team collected food samples from an individual patron who had taken food home. The food collected for sampling included: hamburger steak with gravy, fried chicken, hamburger steak without gravy, and ham (which had been placed under the hamburger steak without gravy on the plate of food taken home). These specimens were sent to the State Laboratory for Public Health (SLPH) for analysis. The Health Director, EH Supervisor, and Regional EH Supervisor visited the restaurant and asked the manager to voluntarily close the restaurant pending results of the epidemiologic study. The manager, Darren King, closed his restaurant between 3-4pm on April 29.

The owners of the restaurant complained that their public water was muddy on April 22. They queried whether this could have been the source of the outbreak. On April 30 Mitchell County Health Department EH personnel obtained samples from the following sources at the restaurant: 1) water from the tap in the kitchen, 2) water from the waitress serving station, 3) leftover prepared mashed potatoes and gravy, and 4) unopened packages of dried mashed potatoes and gravy. These were sent to the SLPH for culture. On May 1 samples of ice from the bottom of the large ice chest in the kitchen area were obtained. That same day, the restaurant was toured by EH staff from the Mitchell County HD and Dr. Pam Jenkins from the State's Communicable Disease Control Branch.

In an attempt to try and identify the exact cause of the outbreak, further environmental samples were taken on May 13. These included culturing a pet snake of one of the asymptomatic but culture-positive employees, as well as fresh chicken, ham, strawberries, cantaloupe, cooked and raw roast beef, raw hamburger, hard boiled eggs, filet mignon with bacon, sirloin steak and NY strip.

Note: Prior to this outbreak, the Mitchell County Health Department's inspection of this restaurant had historically resulted in a 99% rating.

### **Laboratory**

Stool specimens were collected from as many individuals meeting case definition as possible. All three health departments in the Toe River Health District collected and processed the specimens. In addition, specimens were collected and processed by the Spruce Pines Community Hospital, other local hospitals and private doctor's offices. Isolates were sent to the SLPH for serotyping.

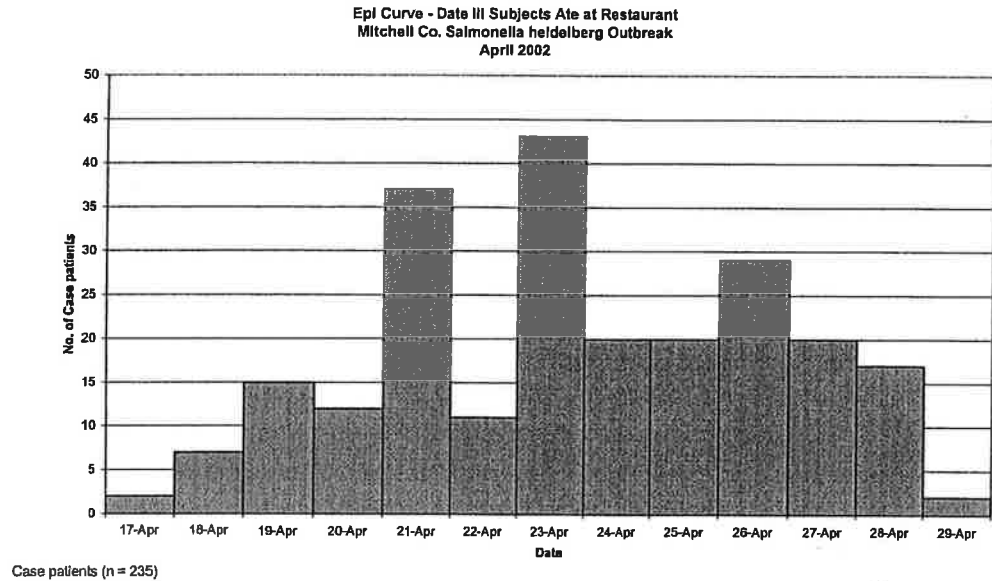
## Results

### **Epidemiologic Study**

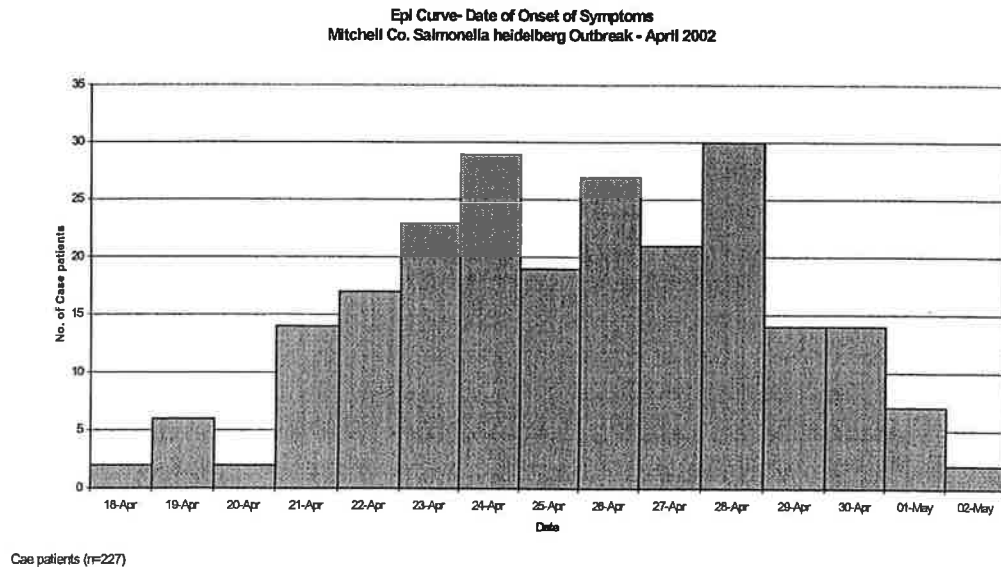
Univariate and stratified analyses were done using Epi6. Stepwise logistic regression modeling was done using SAS.

Figure 1 shows the relationship between the dates the case patients ate at the restaurant in contrast with Figure 2, which shows the date of onset of symptoms.

**FIGURE 1**



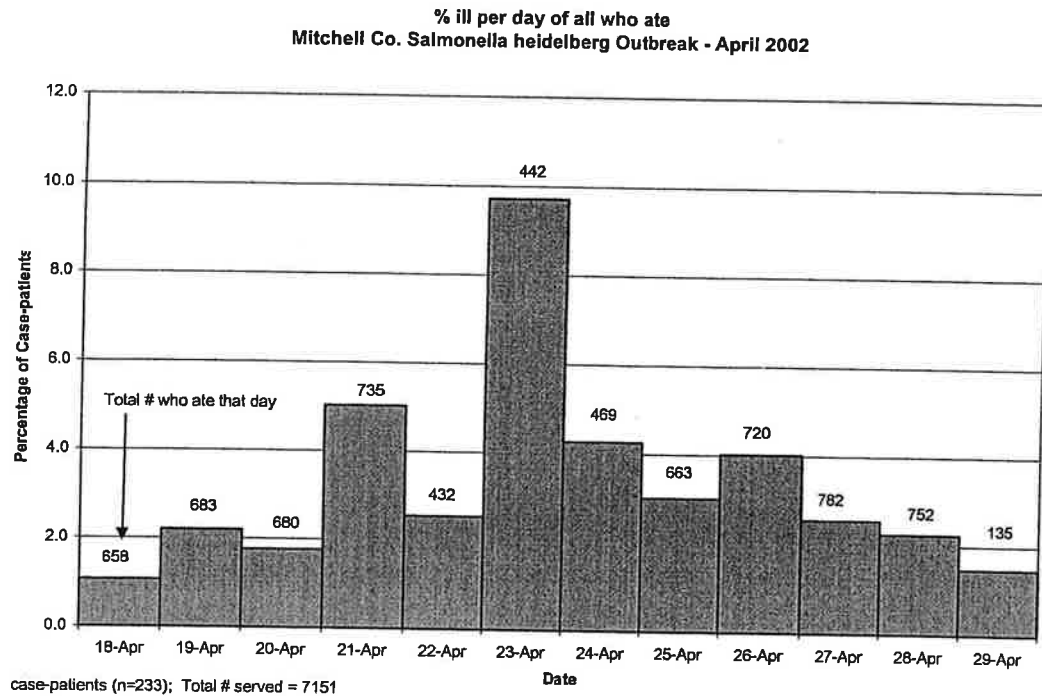
**FIGURE 2**



Both curves are consistent with a continuous source outbreak pattern.

Figure 3 shows the percentage ill of all those who ate each day at the restaurant. The total number of individuals who ate at the restaurant that day is also noted.

**FIGURE 3**



**The following are the results of the epidemiology study:**

Population at risk (i.e., those who ate at Western Sizzlin from 4/18 - 4/29)

Buffet Only	3004
Salad w/entree	658
Salad only	501
Entree	<u>2988</u>
Total	7151

A case-control was conducted. A total of 239 individuals meeting the case definition and 371 controls were selected for study. Individuals were requested to call the Toe River District toll-free hotline if they had eaten at the restaurant during the time period of April 18-29<sup>th</sup>. Controls were selected from this group of individuals. A questionnaire was developed using the restaurant's inventory of food items served during that time period (Appendix A).



The following are the results of the analysis of the surveys:

**Demographics:**

	Case N	Case %	Control N	Control %
Male	106	44	165	45
Female	132	56	199	55
White	234	98.7	361	98.9
Black	1	<1	0	0
Other	2	<1	4	1.1
Mean Age	38		42	

**Signs and Symptoms:**

	Cases No.	Cases %
Fever	124	55
Cramps	179	79
Vomiting	98	44
Bloody Diarrhea	20	9.4
Non-bloody diarrhea	158	72
Nausea	160	70
Watery diarrhea	184	79
Headache	125	56
Cough	37	17
Dehydration	53	26
Sinus pain/pressure	48	23
Hospitalized	22	9.2

Based on univariate analysis of the data collected, consumption of the following food items were identified risk factors for *Salmonella heidelberg* infection during this outbreak.

**TABLE 4**

Food item	Case Patients			Controls			Odds Ratio	95% Confidence Interval
	No.	%	Total	No.	%	Total		
Fresh Sauerkraut	8	3.5	228	1	.29	349	12.65	1.58,276.22
Penne Primo	6	2.7	226	2	.57	352	9.57	1.12,216.04
Beef gravy	69	30	231	28	7.9	354	4.96	2.99,8.27
(Roast beef) With gravy	28	12	232	10	2.9	350	4.67	2.10,10.59
Mashed potatoes	114	49	232	74	21	357	3.69	2.52,5.42
Roast Beef	41	18	231	25	7.1	351	2.81	1.60,4.96
Salisbury Steak	20	8.6	232	13	3.7	352	2.46	1.13,5.40
Sweet potatoes	21	9	232	15	4.2	354	2.25	1.07,4.74
Fresh chicken	44	19	232	34	9.7	352	2.19	1.13,3.66
Aujus gravy	24	10	231	18	5.1	350	2.14	1.08,4.25
Macaroni n'cheese	51	22	231	49	14	351	1.75	1.10,2.77
Green beans	57	25	232	56	16	354	1.73	1.12,2.69
Yeast rolls	132	57	230	169	47	358	1.51	1.06,2.14
Sweet tea*	87	40	217	146	42	352	0.94	0.66,1.36

\*Not significant in overall totals but does reach significance in daily totals

**TABLE 5**

Daily Odds Ratios by Univariate Analysis			
Date/Variable	OR	95%CI	% of ill who ate
April 20 <sup>th</sup>			
Mashed potatoes	28	2.12,835.32	67
April 21			
Mashed potatoes	4.07	1.33,12.84	60
April 22 <sup>th</sup>			
Mashed potatoes	undef	1.17, undef	55
April 23 <sup>rd</sup>			
Mashed potatoes	12.68	2,103.23	74
Beef gravy	10.98	1.18,254.90	55
April 24 <sup>th</sup>			
Mashed potatoes	13.06	1.93,112.71	58
April 25 <sup>th</sup>			
Mashed potatoes	18.67	1.90,451.94	40
Sweet tea	9	2.01,43.94	75
Macaroni n'cheese	7.27	1.10,60.50	35
April 26 <sup>th</sup>			
Sweet potatoes	13.33	1.36,323.28	17

Results of stratified analysis:

**TABLE 6**

<b>Stratified Analysis</b>					
	Crude OR	OR for Ill	95%CI	OR for Not Ill	95%CI
<b>Adjusted for beef gravy</b>					
Diarrhea & Mashed potatoes	3.69	2.54	0.71,9.10	2.61	1.65,4.20
<b>Adjusted for Mashed potatoes</b>					
Diarrhea & Beef gravy	4.96	2.79	1.41,5.55	2.87	0.91,9.12
<b>Adjusted for Aujus gravy</b>					
Diarrhea and Mashed potatoes	3.69	6.57	0.57,174.44	4.05	2.65,6.21
<b>Adjusted for Mashed potatoes</b>					
Diarrhea and aujus gravy	2.14	0.97	0.43,2.20	0.6	0.02,5.80
<b>Adjusted for (roast beef) with gravy</b>					
Diarrhea and Mashed potatoes	3.69	6	0.91,43.94	3.4	2.26,5.13
<b>Adjusted for Mashed potatoes</b>					
Diarrhea and (roast beef) with gravy	4.67	3.41	1.14,10.93	1.94	0.42,8.58
<b>Adjusted for Sweet tea</b>					
Diarrhea and Mashed potatoes	3.69	2.85	1.56,5.29	5.37	3.12,9.27
<b>Adjusted for Mashed potatoes</b>					
Diarrhea and Sweet tea	0.94	0.58	0.30,1.13	1.09	0.67,1.77
<b>Adjusted for beef gravy + with gravy</b>					
Diarrhea and Mashed potatoes	3.69	3.27	1.20,8.97	3.07	2.27,4.15
<b>Adjusted for Mashed potatoes</b>					
Diarrhea and Beef gravy + with gravy		2.62	1.54,4.49	2.46	1.02,5.96

From these results it still could not be determined which items were significant and which were confounders. The following significant results were obtained:

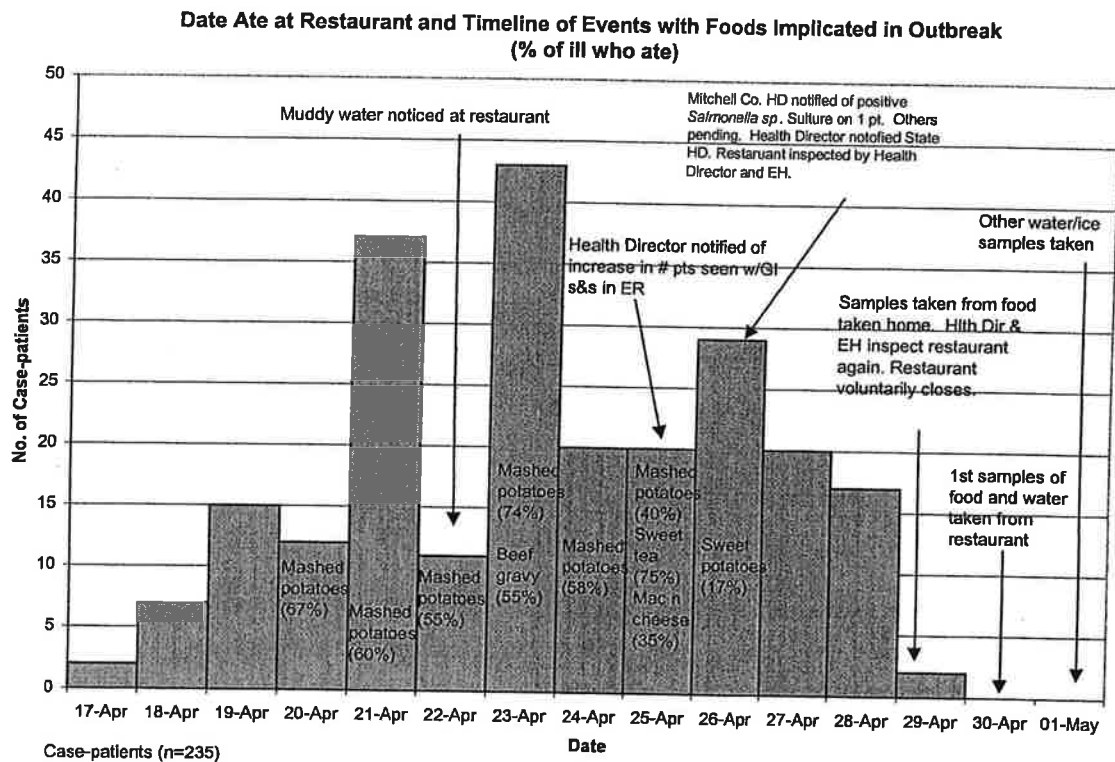
**TABLE 7**

<b>Results of Stepwise Regression</b>								
Parameter	DF	Estimate	Std Error	Wald Chi-Sq	Pr>ChiSq	Point Estimate	95% Wald CI	
Intercept	1	-0.9289	0.1085	73.2678	<.0001			
Mashed potatoes	1	0.8256	0.2125	15.0988	0.0001	2.283	1.506	3.463
Beef gravy	1	1.0019	0.2763	13.1500	0.0003	2.723	1.585	4.680
(roast beef)With gravy	1	0.9506	0.4022	5.5871	0.0181	2.587	1.176	5.691

## Summary Epidemiologic Curve

Figure 4 is an epidemiologic curve showing who ate at the restaurant, timeline of events, daily significant items, and the percent of the cases who ate those items.

**FIGURE 4**



## Laboratory Results:

The following is the results of the food sample cultures sent to the SLPH:

**TABLE 8**

<u>Items from an individual's home</u>	<u>Result</u>	<u>PFGE</u>
Hamburger steak with gravy	Positive for <i>S. heidelberg</i>	A
Hamburger steak without gravy	Negative	
Fried Chicken	Positive for <i>S. heidelberg</i>	A
Ham	Positive for <i>S. heidelberg</i>	A
Applicator stick marked "gravy"	Positive for <i>S. heidelberg</i>	A
<u>Items from Restaurant</u>	<u>Result</u>	
Leftover prepared gravy	Negative	

Leftover prepared mashed potatoes	Negative
Unopened dry mash potatoes	Negative
Unopened dry gravy mix	Negative

All water samples showed no coliforms.

<u>Items sampled on May13th</u>	<u>Result</u>
Pet snake	Negative
Fresh chicken	Negative
Ham	Negative
Strawberries	Negative
Cantaloupe	Negative
Cooked roast beef	Negative
Raw roast beef	Negative
Raw hamburger	Negative
Hard boiled eggs	Negative
Filet mignon with bacon	Negative
Sirloin steak	Negative
NY strip steak	Negative

## Stool Cultures

A total of 88 specimens were collected by the Toe River Health District HD. Fifty stool cultures from customers and employees were confirmed positive for *Salmonella heidelberg*. Of these 50, two were asymptomatic employees of the restaurant. Both individuals ate daily at the restaurant. Lengthy interviews with the two employees were conducted. The outbreak PFGE (Pulsed Field Gel Electrophoresis) pattern A was seen in 6 cases, with an additional case having a PFGE pattern R, which differed from pattern A by only one band and was therefore considered to be the same as pattern A. No further PFGE patterns were determined after these seven cases as it was felt that the outbreak pattern and link were well established.

There may be more results from private doctors' offices or local hospitals that were not reported to Toe River Health District.

## Conclusions:

- Toe River Health District reacted as soon as the outbreak was identified.
- It can not be determined if the mashed potatoes started the outbreak. Food samples taken of the dried mashed potatoes mix, as well as samples taken from prepared mashed potatoes in the restaurant failed to show any *Salmonella* growth. Samples taken from food will often not grow the organism of interest, even if it is present. Only a small sample was taken from a large tray of mashed potatoes, and the "hot spot" of contamination may have been missed.
- While the original source of the contamination could not be determined, the data show three items were significantly associated with illness: mashed potatoes, beef gravy, and (roast beef) with gravy. Interestingly, the items found to be significant in the daily analysis (i.e., mashed potatoes, beef gravy, sweet tea, macaroni n'cheese, and sweet potatoes) differed from those

found to be significant for the whole outbreak period. In either case, based on previous outbreaks in restaurants and on the data from this outbreak it is logical to conclude that poor food handling practices contributed significantly to the spread of the contamination from the original source -- whatever it was -- to several food items over the course of this outbreak.

- While two employees tested positive for *Salmonella heidelberg*, it could not be determine whether they got their infection from eating at the restaurant or infected the food at the restaurant.
- Management and employee education about proper food handling, including cross contamination prevention, was conducted shortly after the restaurant closed. It should be periodically repeated.
- The muddy water noted by the Manager did not contribute to this outbreak.

## FOR IMMEDIATE RELEASE

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

May 8, 2002

**Salmonella Investigation is Complete -Update 5/8/02**

The Salmonella investigation in Spruce Pine is over and the Western Sizzlin Steakhouse has reopened to the public.

During the time period of the outbreak April 18 to April 30, over 7,000 people ate at the restaurant. The Health Departments in the Toe River Health District handled over 900 telephone calls and conducted 621 surveys of people who ate at the restaurant. There were 369 reported illnesses that may have been linked to the outbreak. Of those with symptoms, there were 39 lab-confirmed cases of Salmonella infection. Data was also collected from 252 people who did not have symptoms, but ate at the restaurant between the dates mentioned.

No single source of food was identified that caused the outbreak. This was a case in which the salmonella bacteria was spread among several foods as a result of food handling. Salmonella bacteria are usually found in foods of animal origin, such as beef, chicken, turkey, eggs, or milk. But all foods, including fresh produce, can also have the Salmonella bacteria if they come into contact with animal waste. Therefore, it is very important to wash hands and fresh produce completely before preparing foods. Chicken, turkey, eggs, and meat, including hamburgers, should be well cooked (not pink in the middle) to completely kill the Salmonella bacteria.

Spreading the bacteria among different foods can be avoided by following some basic steps: uncooked meats should be kept separate from produce, cooked foods, and ready-to-eat foods. Cutting boards, knives, and other utensils should be washed thoroughly after handling uncooked foods. Hands should be washed before handling any food, and between handling different food items. Towels and sponges should be sterilized completely before re-using.

Health officials strongly urge everyone to continue following the basic hygiene practices such as immediately washing hands: after using the bathroom, helping a child use the bathroom, or changing a diaper. Hands should also be washed before preparing and eating food. These precautions are very important to prevent the bacteria from spreading.

The 800 hotline and local telephone numbers that were set up for the investigation have been turned off. For further information about Salmonella, or symptoms and concerns associated with it, please call your local health department

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**Toe River Health District *Salmonella heidelberg* Outbreak**  
**April 18 - April 30<sup>th</sup> 2002**

**Preliminary Report**

To: Tom Singleton, Health Director  
From Pam Jenkins, Nurse Epidemiologist, DHHS

Introduction: Mr. Tom Singleton was alerted by hospital healthcare providers on Thursday (4/25/02) that they were seeing an unusually large number of ill people with Gastrointestinal (GI) symptoms. They suspected a foodborne disease. On Friday (4/26) the Mitchell County Health Department's (HD) Nursing Supervisor received notice of a positive *Salmonella* species stool culture on one patient and learned of five hospitalized patients with presumptive diagnosis. Upon further investigation she discovered that the common link appeared to be eating at the Western Sizzlin in Spruce Pines, NC. By the end of Friday, she knew of a couple of confirmed cases and approximately 7 that were pending confirmation. During this time period, the District's Health Director was conferring with the Acting Head of the State's Communicable Disease Control Branch, Dr. Newt MacCormack. The number of cases grew over the weekend and by Monday afternoon it was apparent that the outbreak was continuing and was linked to the Western Sizzlin. The manager of the restaurant, Mr. Darren King, voluntarily closed the restaurant until an epidemiological study could be conducted. On Tuesday, Dr. Pam Jenkins, Foodborne Disease Nurse Epidemiologist was sent from the State Health Department to assist the Toe River Health District (Mitchell, Yancey, Avery Counties) in the investigation.

**Methodology**

**Epidemiological Study**

A Case-control study was instituted on Tuesday, April 30, 2002. A case was defined as any individual having nausea, vomiting and/or 3 or more diarrheal (loose) stools per day and who ate at the Western Sizzlin in Spruce Pine between the dates of April 18-30, 2002. All three HDs of the Toe River Health District conducted interviews on cases and controls using a standardized survey. Controls were those people who ate at the restaurant between April 18-30, 2002 and were not symptomatic. A 1-800 number hotline was set up on Wednesday and manned during regular working hours and on Saturday, May 4, 2002. On Tuesday (4/30/02) a media point person was identified and daily press releases were done to keep the public informed about the progress of the investigation.

**Environmental Investigation:**

On Friday (4/26/02), the Health Director and one of the Environmental Health (EH) personnel from the Mitchell County HD inspected the restaurant. Deficiencies were noted. On Monday, the EH team collected food samples from an individual patron who had taken food home. The food collected for sampling included: hamburger steak with gravy; fried chicken; hamburger steak without gravy; and ham (which was under the hamburger steak without gravy). These specimens were sent to the State Laboratory for Public Health (SLPH) for analysis. The Health Director, EH Supervisor and Regional EH Supervisor visited the restaurant and asked the manager to voluntarily close the restaurant pending



the results of the epidemiological study. The manager, Darren King, closed his restaurant around 3-4pm Monday 4/27/02.

On Tuesday EH obtained the following samples from the restaurant: 1) water from the tap in the kitchen; 2) water from the waitress serve station; 3) leftover prepared mashed potatoes and gravy from the restaurant and 4) unopened packages of dried mashed potatoes and gravy. These were also sent to the SLPH. On Wednesday (May 1, 2002), samples of ice from the bottom of the large ice chest in the kitchen area were obtained. The restaurant was toured by EH from Mitchell County HD and Pam Jenkins from the State HD.

### Laboratory

Stool specimens were collected on as many of the cases as possible. All three health departments collected the specimens. In addition, specimens were collected by the Spruce Pines Community Hospital, local hospitals and private doctor's offices. Collected specimens were sent to the SLPH for serotyping.

### Results

#### Epidemiological Study

The following are the results of the epidemiology study:

Population at risk (includes those who ate at Western Sizzlin from 4/18 - 4/29)

Buffet Only	3004
Salad w/entree	658
Salad only	501
Entree	<u>4163</u>
Total	7151

Number of Calls received at HDs (rough approximate): 931 - many represented groups of individuals. Many calls were not logged in but handled at the time of the call. The actual number of calls received by all 3 HDs may be larger than represented here.

Number of surveys conducted: 369 cases and 252 controls.

Number of surveys analyzed: 72 cases and 54 controls. (While it is ideal to have a case/control ratio of 1 to 2, the strength of the data allows for preliminary results to be given based on what has been entered. Further data entry will occur at the state level and all information will be forwarded to the Toe River Health District.)

The following are the results of the analysis of the surveys:

Males	58 (28 controls, 30 cases)
Females	68 (26 controls, 42 cases)
Symptoms:	81% had cramps
	23% had sinus problems
	62% had non-bloody diarrhea

51% had fever  
 65% had nausea  
 13% had a cough  
 84.5% had watery diarrhea

Hospitalized: 13%

Food items that are implicated in the outbreak are:

Item	OR	CI	% cases who remembered eating
Beef Gravy	7.69	1.55 - 51.86	23.5% (16/68)
Roast Beef	13.22	1.69 - 283.8	21% (14/68)
Salad Bar Eggs	9.57	2.00 - undefined	19.3% (11/57)*
Fresh Strawberries	5.79	1.14 - 39.74	19.1% (13/68)
Salad Bar Ham	7.34	1.49 - undefined	15.5% (9/58)*
Aujus Gravy	8.62	1.05 - 189.38.	15% (10/68)
Roast Beef Gravy	8.97	1.88 - undefined	14.7% (10/68)*
* None of well ate			

One item was found to be protective

Yogurt Toppings	0.14	0.02 < OR < 0.78	17% (9/52) of controls
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Two asymptomatic employees of the restaurant were found to be infected with *Salmonella*. Lengthy interviews with the two employees were conducted. Both individuals ate at the restaurant. It can not be determine whether they got their infection from eating at the restaurant or infected the food at the restaurant. The serotypes of cultures form the two asymptomatic restaurant workers has been identified as *Salmonella heidelberg*.

#### Environmental Results:

The following is the results of the food samples sent to the SLPH:

Items from an individual's home	Result
Hamburger steak with gravy	Positive for <i>S. heidelberg</i>
Hamburger steak without gravy	Negative
Fried Chicken	Positive for <i>S. heidelberg</i>
Ham	Positive for <i>S. heidelberg</i>

Items from Restaurant	Result
Applicator stick marked "gravy"	Positive for <i>S. heidelberg</i>
Leftover prepared gravy	Negative
Leftover prepared mashed potatoes	Negative
Unopened dry mash potatoes	Negative
Unopened dry gravy mix	Negative
All water samples showed no coliforms. Testing for <i>S. heidelberg</i> could not be done.	
Restaurant employees attended a food safety class.	

list of number, sample, and tests desired for other samples collected at the same establishment during the same investigation.  
by if unusual (such as field) method of sterilizing or sanitizing collection container or utensil or collecting sample is used.

MA-161 1/4 CATCHWGT

FOOD  
COLLECTION REPORT

40/F

IBP SIRLOIN, TOP BUTT CH

6-12/UP

011361 370009

400337-046

04/29 L174B01

WESTERN SIZZLIN-SPRUCE

US FOODSERVICE

2B

Reason for Collecting Sample:

☒ Food from alleged outbreak.☐ Food ingredient.☐ Environmental

Method of Collecting and Shipping Sample:

Method of Sterilizing: Container

Cut on

Location Food Stored When Sampled

Walk in Cooler

Shipped: ☒ Refrigerated, ☐ Frozen, ☐ Ambient

Product Identification: Name

Manufacturer's Name

Add

Symptoms of Victims:

☐ Nausea,☐ Vomiting,☐ Abdominal CrampTime of Eating Suspect Food/M meal:  
Date HourTime of Onset:  
Date Hour

Incubation Period

Duration of Illness

Investigator

Title

Agency

Date

Test Requested

Presence/  
Absence

Count/Concentration

Definitive Type

☐ Staphylococci☐ Staphylococcal enterotoxin☐ C. fringens☐ B. cereus☐ Salmonella☐ Shigella☐ E. coli☐ V. parahaemolyticus☐ C. botulinum☐ Botulinus toxin

absent

RECEIVED MAY 14 2002

nk

Condition of Food

Temperature:  
When received

Comments and Interpretations

Laboratory Analyst

Agency

Date/Hour:  
Received

Started

Completed

Agent Identified

MAY 09 2002

MAY 13 2002

a list of number, sample, and tests desired for other samples collected at the same establishment during the same investigation.  
only if unusual (such as field) method of sterilizing or sanitizing collection container or utensil or collecting sample is used.

FOOD  
SAMPLE COLLECTION REPORT

39F

Complaint Number  
Sample Number  
# 11

Place Collected <u>Western Supply</u>	Address	Phone <u>Fillet Mignon</u>
Person-In-Charge <u>off</u>	Sample <u>(Raw) Fillet Mignon &amp; Bacon</u>	Date/Time Collected <u>5/8/02 11:15am</u>

Reason for Collecting Sample:

☒ Food from alleged outbreak.

☐ Food ingredient.

☐ Environmental.

☐ Similar food prepared in similar manner to that involved in outbreak.

☐ Other (specify)

Method of Collecting and Shipping Sample:

Method of Sterilizing: Container? none 4/25/02

Collection Utensil?

Location Food Stored When Sent

Walk in Cooler

Shipped: ☐ Refrigerated, ☐ Frozen

Time Between Serving and Sampling

Unserved

Cost of Sample

Lot Number

Container Size or Weight

Other (specify)

Incubation Period: \_\_\_\_\_  
Duration of Illness

Date

Product Identification: Name

Fillet Mignon

Manufacturer's Name

IBP Inc/US Food

Symptoms of Victims:

☐ Nausea.

☐ Vomiting.

Time of Eating Suspect Food/Date Hour

Investigator

Test Requested

☐ Staphylococci

☐ Staphyloenterotoxin

☐ C. fringens

☐ B. cereus

☐ Salmonella absent

☐ Shigella

☐ E. coli

☐ V. parahaemolyticus

☐ C. botulinum

☐ Botulinus toxin

72.0

LB B2

32.7 KG

PACK DATE  
MAR 26  
2002  
23:14

SER 8767

EST. 969G

RECEIVED MAY 14 2002

Temperature:  
When received

Amount of Food

Notes and Interpretations

Primary Analyst

Agency

Date/Time Received

State

Completed

Agent Identified

List of number, sample, and tests desired for other samples collected at the same establishment during the same investigation.  
If any unusual (such as field) method of sterilizing or sanitizing collection container or utensil or collecting sample is used.



FOOD  
SAMPLE COLLECTION REPORT

3815

Complaint Number  
Sample Number<sup>1</sup>  
#10

Place Collected  
Address  
Person-In-Charge  
Sample  
None  
Mashed Strawberries  
from previous  
collection  
#4 Sample

Reason for Collecting Sample:

☐ Food from alleged outbreak.

☐ Food ingredient.

☐ Environmental.

CONTAMINATED

(MOLD COVERED BERRY.)

NO TEST

PERFORMED.

Method of Collecting and Shipping Sample:

Method of Sterilizing: Container<sup>2</sup>

Location Food Stored When Sampled

Temperature:

Food

Storage Unit

Time Between Serving and Sampling

Shipped: ☐ Refrigerated, ☐ Frozen, ☐ Ambient

Identification Mark

Cost of Sample

Identification: Name

Brand

Lot Number

Manufacturer's Name

Address

Container Size or Weight

Symptoms of Victims:

☐ Nausea,

☐ Vomiting,

☐ Abdominal Cramps,

☐ Fever,

☐ Diarrhea

☐ Other (specify)

Time of Eating Suspect Food/M meal:

Date

Hour

Time of Onset:

Date

Hour

Incubation Period

Duration of Illness

Investigator

Title

Agency

Date

Requested

Presence/  
Absence

Count/Concentration

Definitive Type

Staphylococci

Staphylococcal enterotoxin

C. perfringens

B. is

Salmonella

Shigella

E. coli

S. parahaemolyticus

C. botulinum

Clostridium toxin

absent

RECEIVED MAY 14 2002  
pk

Temperature:  
When received

Analyst

Agency

Date/Hour:

Received

Started

MAY 09 2002

Completed

Agent Identified

MAY 13 2002

of number, sample, and tests desired for other samples collected at the same establishment during the same investigation.  
if unusual (such as field) method of sterilizing or sanitizing collection container or utensil or collecting sample is used.

37F

LAB#  
R

PF-821 2/3 9103820123

Complaint Number

Sample Number

Place

PAPET

EGG, HRD CK SALAD

20#

Phone

Hard Cooked Eggs

Pers:

011361-080120

148963-015

04/22 L181B02

WESTERN SIZZL

Date/Hour Collected

5/8/02 11:10am

Reason for Collecting Sample:

☐ Food from alleged outh

Method of Collecting and Ship

Method of Sterilizing:

**SALAD STYLE  
HARD COOKED  
PEELED EGGS** <sup>U</sup>P

INGREDIENTS: Eggs, Water, Citric Acid, Sodium Benzoate

Location Food Stored

Time Between Serving and Sampling

Walk in Cooler  
Shipped: ☐ Refrigerated

DIST. BY:

Papetti's

HYGRADE EGG PRODUCTS INC.  
Elizabeth, New Jersey 07201

USE BY MAY 19 2002

NET WT. 20 LBS.

KEEP REFRIGERATED

34 - 39°F  
DO NOT FREEZE

Cost of Sample

Lot Number

Weight

ify)

Duration of Illness

Symptoms of Victims:

☐ Nausea,☐ VomiTime of Eating Suspect  
Date Hour

100 91038 20123 8

Investigator

Title

Agency

Date

Test Requested

Presence/  
Absence

Count/Concentration

Definitive Type

☐ Staphylococci☐ Staphyloenterotoxin☐ C. fringens☐ B. cereus☐ Salmonella☐ Shigella☐ E. coli☐ V. parahaemolyticus☐ C. botulinum☐ Botulinus toxin

absent

RECEIVED MAY 14 2002

Mh

Condition of Food

Temperature:  
When received

Notes and interpretations

Primary Analyst

Agency

Date/Hour:

MAY 09 2002

Completed

Agent Identified

a list of number, sample, and tests desired for other samples collected at the same establishment during the same investigation.  
only if unusual (such as field) method of sterilizing or sanitizing collection container or utensil or collecting sample is used.

36F

<div style="display: flex; justify-content: space-between;"> <div>LABORATORY SECTION - P.O. BOX 28047 RALEIGH, NORTH CAROLINA 27611</div> <div><b>SAMPLE COLLECTION REPORT</b></div> <div>Complaint Number</div> </div>				<div style="display: flex; justify-content: space-between;"> <div>Sample Number</div> <div># 8 Ground Beef</div> </div>	
Place Collected		Address		Phone	
Person-In-Charge		Sample		Date/Hour Collected	
Reason for Collecting Sample:					
<input checked="" type="checkbox"/> Food from alleged outbreak, <input type="checkbox"/> Food ingredient, <input type="checkbox"/> Environmental, <input type="checkbox"/> Similar food prepared in similar manner to that involved in outbreak, <input type="checkbox"/> Other (specify)					
Method of Collecting and Shipping Sample: <span style="float: right;">Collection Utensil<sup>2</sup></span> Method of Sterilizing: Container <sup>2</sup>					
Location Food Stored When Sampled		Temperature: Food		Time Between Serving and Sampling	
Shipped: <input type="checkbox"/> Refrigerated, <input type="checkbox"/> Frozen, <input type="checkbox"/> Ambient		Storage Unit		Unopened	
Product Identification: Name		Identification Marks		Cost of Sample	
Manufacturer's Name		Brand		Lot Number	
Address		Container Size or Weight			
Symptoms of Victims: <input type="checkbox"/> Nausea, <input type="checkbox"/> Vomiting, <input type="checkbox"/> Abdominal Cramps, <input type="checkbox"/> Fever, <input type="checkbox"/> Diarrhea, <input type="checkbox"/> Other (specify)					
Time of Eating Suspect Food/Meal:		Time of Onset:		Incubation Period	
Date Hour		Date Hour		Duration of Illness	
Investigator		Title		Agency	
Requested		Presence/Absence		Definitive Type	
<input type="checkbox"/> Staphylococci <input type="checkbox"/> Staphylococcal enterotoxin <input type="checkbox"/> C. fringens <input type="checkbox"/> E. coli <input type="checkbox"/> Salmonella <input type="checkbox"/> Shigella <input type="checkbox"/> V. parahaemolyticus <input type="checkbox"/> C. botulinum <input type="checkbox"/> Botulinus toxin		absent			
Type of Food		Temperature: When received			
Findings and Interpretations					
Analyst		Agency		Agent Identified	
Date/Time Received		Date/Time Started		Date/Time Completed	
MAY 03		MAY 13 2002		MAY 14 2002	
List of number, sample, and tests desired for other samples collected at the same establishment during the same investigation. If unusual (such as field) method of sterilizing or sanitizing collection container or utensil or collecting sample is used.					

RECEIVED MAY 14 2002

Completed



FOOD  
SAMPLE COLLECTION REPORT

Complaint Number  
Sample Number: **357**  
#7 Cooked Roast Beef

Place Collected  
Address  
Phone  
Person-In-Charge  
Sample  
Date/Hour Collected

Reason for Collecting Sample:  
☐ Food from alleged outbreak.  
☐ Food ingredient.  
☐ Environmental.  
☐ Similar food prepared in similar manner to that involved in outbreak.  
☐ Other (specify) **this is cooked product of sample #6**

Method of Collecting and Shipping Sample:  
Method of Sterilizing: Container? Collection Utensil?

Location Food Stored When Sampled  
Temperature: Food Storage Unit Time Between Serving and Sampling

Shipped: ☐ Refrigerated, ☐ Frozen, ☐ Ambient  
Identification Marks Cost of Sample

Product Identification: Name Brand Lot Number

Manufacturer's Name Address Container Size or Weight

Symptoms of Victims:  
☐ Nausea, ☐ Vomiting, ☐ Abdominal Cramps, ☐ Fever, ☐ Diarrhea ☐ Other (specify)

Time of Eating Suspect Food/Meal: Date Hour Time of Onset: Date Hour Incubation Period Duration of Illness

Investigator Title Agency Date

Test Requested Presence/Absence Count/Concentration Definitive Type

☐ Staphylococci  
☐ Staphyloenterotoxin  
☐ C. fringens  
☐ B. cereus  
☐ Salmonella  
☐ Shigella  
☐ E. coli  
☐ V. parahaemolyticus  
☐ C. botulinum  
☐ Botulinus toxin

RECEIVED MAY 14 2002  
mk

Condition of Food Temperature: When received

Notes and Interpretations

Primary Analyst Agency Date/Hour: Received MAY 09 2002 Completed MAY 13 2002 Agent Identified

List of number, sample, and tests desired for other samples collected at the same establishment during the same investigation.  
Only if unusual (such as field) method of sterilizing or sanitizing collection container or utensil or collecting sample is used.

L.C. DI MA-060 2/3 CATCHWGH1

LABOR IBP ROUND, INSD TOP CH

OOD  
LECTION REPORT

34F

RAL 3-18/UP

Place ( 011361 370027

400337-047

04729 1174801

WESTERN SIZZLIN-SPRUCE

US FOODSERVICE

Person-In-Charge

Sample

Phone

Date/Hour Collected

Complaint Number

Sample Number

#6 Beef  
Inside Round

5/8/02 10:50am

Reason for Collecting Sample:

☒ Food from alleged outbreak.☐ Food ingredi☐ Environ

anner to that involved in outbreak.

Method of Collecting and Shipping Sample:

Method of Sterilizing: Container<sup>2</sup>

Location Food Stored When Sampled

Walk in Cooler

Shipped: ☒ Refrigerated, ☐ Frozen, ☐ Ambient

Product Identification: Name

Beef Inside Round

Manufacturer's Name

IBP Inc

Symptoms of Victims:

☐ Nausea,☐ Vomiting,☐ Abdominal Cr

Time of Eating Suspect Food/M meal:

Date

Hour

Investigator

Test Requested

☐ Staphylococci☐ Staphyloenterotoxin☐ C. fringens☐ B. cereus☒ Salmonella☐ Shigella☐ E. coli☐ V. parahaemolyticus☐ C. botulinum☐ Botulinus toxin

D-6137-AH

BEEF INSIDE  
ROUND

U.S.D.A. CHOICE OR HIGHER

293d

RECEIVED MAY 14 2002

ack

Temperature:  
When received

Comments and Interpretations

Primary Analyst

Agency

Date/Hour:

Received

MAY 09 2002

Sample

Completed

Agent Identified

7

a list of number, sample, and tests desired for other samples collected at the same establishment during the same investigation.  
only if unusual (such as field) method of sterilizing or sanitizing collection container or utensil or collecting sample is used.

st of number, sample, and tests desired for other samples collected at the same establishment during the same investigation.  
y if unusual (such as field) method of sterilizing or sanitizing collection container or utensil or collecting sample is used

U. S. DEPARTMENT OF HUMAN RESOURCES  
Division of Health Services  
LABORATORY SECTION - P.O. BOX 26047  
RALEIGH, NORTH CAROLINA 27611

FOOD  
SAMPLE COLLECTION REPORT

32F

Complaint Number		Sample Number <sup>1</sup> #4 Strawberry
Place Collected Western Sizzlin	Address 11961 Hwy 226	Phone
Person-In-Charge	Sample Fresh Strawberries	Date/Hour Collected 10:40 am

Reason for Collecting Sample:

☒ Food from alleged outbreak.

☐ Food ingredient.

☐ Environmental.

☐ Similar food prepared in similar manner to that involved in outbreak.

☐ Other (specify)

Method of Collecting and Shipping Sample:

Method of Sterilizing: Container<sup>2</sup>

Collection Utensil<sup>2</sup>

Location Food Stored When Sampled

Temperature:

Food

Storage Unit

Time Between Serving and Sampling

Cold Box

Shipped: ☒ Refrigerated, ☐ Frozen, ☐ Ambient

Identification Marks

Cost of Sample

Just Placed on Box

Product Identification: Name

Strawberries

Brand

Strawberries

Lot Number

011292

Manufacturer's Name

Cross Valley Farms

Address

Columbia, MO 21045

Container Size or Weight

Symptoms of Victims:

☐ Nausea.

☐ V. infection.

☐ Abdominal Cramps.

☐ Fever.

☐ Diarrhea

☐ Other (specify)

Time of Eating  
Date

PA-010

4/4 5810806124

CVF

STRBRY, FRESH

8-1# CS

2B

011361 011292

400337-001

04/29 1174B01

WESTERN SIZZLIN-SPRUCE

US FOODSERVICE

Investigator

Test Requested

☐ Staphylococci

☐ Shigella

☐ C. perfringens

☐ B. cereus

☒ Salmonella

☐ Shigella

☐ E. coli

☐ V. parahaemolyticus

☐ C. botulinum

☐ Botulinus toxin

absent

Incubation Period

Duration of Illness

Agency

Date

Concentration

Definitive Type

RECEIVED MAY 14 2002

on of Food

Temperature:  
When received

nts and interpretations

ory Analyst

Agency

Date/Hours:  
Received

Started

Completed

Agent Identified

List of number, sample, and tests desired for other samples collected at the same establishment during the same investigation

LABORATORY DIVISION  
 MC-041 5/5 CATCHWGT  
 B/OAK HAM, CARVING  
 13# AVG  
 011361-402129  
 155780-076  
 04/25-1162B01  
 WESTERN SIZZLIN-SPRUCE  
 US FOODSERVICE  
 2B  
 y 226 Spruce Pine  
 COOKED HAM  
 5/8/02 10:20am  
 31 F  
 Complaint Number  
 Sample Number  
 #3  
 Cooked Ham  
 Phone  
 Date/Hour Collected

Reason for Collecting Sample:  
☒ Food from alleged outbreak.  
☐ Food ingredient.  
☐ Similar food prepared in similar manner to that involved in outbreak.  
☐ Environmental.  
☐ Other (specify)

Method of Collecting and Shipping Sample:  
 Method of Sterilizing: Container?  
 Collection Utensil?

Location Food Stored When Sampled  
 Temperature: Food 1400  
 Storage Unit Half bar  
 Time Between Serving and Sampling  
 Shipped: ☒ Refrigerated, ☐ Frozen, ☐ Ambient  
 Identification Marks EZ Slice Carving Ham  
 Cost of Sample  
 Product Identification: Name Hillsdale Farm  
 Brand Black Oak Brand  
 Lot Number 32822  
 Manufacturer's Name  
 Address PO Box 25111 Cinc. OH.  
 Container Size or Weight

Symptoms of Victims:  
☐ Nausea, ☐ Vomiting, ☐ Abdominal Cramps, ☐ Fever, ☐ Diarrhea, ☐ Other (specify)

Time of Eating Suspect Food/M meal:  
 Date Hour  
 Time of Onset:  
 Date Hour  
 Incubation Period  
 Duration of Illness  
 Investigator  
 Title  
 Agency  
 Date

Test Requested	Presence/Absence	Count/Concentration	Definitive Type
<input type="checkbox"/> Staphylococci	absent		
<input type="checkbox"/> Staphyloenterotoxin			
<input type="checkbox"/> C. fringens			
<input type="checkbox"/> B. cereus			
<input checked="" type="checkbox"/> Salmonella			
<input type="checkbox"/> Shigella			
<input type="checkbox"/> E. coli			
<input type="checkbox"/> V. parahaemolyticus			
<input type="checkbox"/> C. botulinum			
<input type="checkbox"/> Botulinus toxin			

Condition of Food  
 Temperature: When received

Comments and Interpretations  
 Laboratory Analyst  
 Agency  
 Date/Hour: Received MAY 09 2002  
 Completed  
 Agent Identified

When a list of number, sample, and tests desired for other samples collected at the same establishment during the same investigation.  
 Specify only if unusual (such as field) method of sterilizing or sanitizing collection container or utensil or collecting sample is used.

U.S. DEPARTMENT OF HUMAN RESOURCES  
Division of Health Services  
LABORATORY SECTION - P.O. BOX 28047  
RALEIGH, NORTH CAROLINA 27611

# FOOD SAMPLE COLLECTION REPORT

Complaint Number **30F** Sample Number **#2 Chi**

Phone

Place Collected

Western Sizzlin  
Person-In-Charge

Address

11961 Hwy 226 Spruce Pine

Sample

#2 Chicken (RAW)

Date/Hour Collected

5/8/01 10:1

Reason for Collecting Sample:

☒ Food from alleged outbreak.

☐ Food ingredient.

☐ Environmental.

☐ Similar food prepared in similar manner to that involved in outbreak.  
☐ Other (specify)

Method of Collecting and Shipping Sample:  
Method of Sterilizing: Container?

Location Food Stored When Sampled

Walk in Cooler  
Shipped: ☒ Refrigerated, ☐ Frozen, 4/15

Product Identification: Name

Bigger's Frying Chicken

Manufacturer's Name

Mar-Jac Poultry Inc

Symptoms of Victims:

☐ Nausea.

☐ Vomiting.

☐ Abdo

Time of Eating Suspect Food/Meal:  
Date Hour

Investigator

Test Requested

- ☐ Staphylococci
- ☐ Staphylocenterotoxin
- ☐ C. perfringens
- ☐ B. cereus
- ☒ Salmonella
- ☐ Shigella
- ☐ E. coli
- ☐ V. parahaemolyticus
- ☐ C. botulinum
- ☐ Botulinus toxin



Date Agency

Title

Presence/  
Absence

Count/Concentration

Definitive Type

absent

Location of Food

Comments and Interpretations

Laboratory Analyst

BDJ

Agency

Mitchell Co. Health

Date/Hour:  
Received

MAY 09 2002

Started

Completed

Temperature:  
When received

Agent

Attach a list of number, sample, and tests desired for other samples collected at the same establishment during the same investigation.  
Note: if unusual (such as field) method of sterilizing or sanitizing collection container or utensil or collecting sample is used.



Keep Refrigerated

Processed & Packed By  
Mar-Jac Poultry, Inc.  
Gainesville, GA 30503  
Product of USA

298

RECEIVED MAY 14 2002  
mk

MAY 13 2002



FOOD  
SAMPLE COLLECTION REPORT

29 F

Complaint Number  
Sample Number  
#1 Chicken

Place Collected: Western Sizzlin  
Address: 11961 Hwy 226 Spruce Pine  
Person-In-Charge: Darren King  
Sample: #1 chicken (RAW)  
Date/Hour Collected: 5/8/01 10:10am

Reason for Collecting Sample:  
☒ Food from alleged outbreak.  
☐ Food ingredient.  
☐ Similar food prepared in similar manner to that involved in outbreak.  
☐ Environmental.  
☐ Other (specify):  
18-29 days  
25-27

Method of Collecting and Shipping Sample:  
Method of Sterilizing: Container<sup>2</sup>

Collection Utensil<sup>2</sup>

Location Food Stored When Sampled  
Temperature: Food Storage Unit Time Between Serving and Sampling

Shipped: ☒ Refrigerated, ☐ Frozen, ☐ Ambient  
4/15 Manufacture date  
Identification Marks: unserved samples  
Cost of Sample

Product Identification: Name Brand Lot Number

Biggers Freezing Chicken

without fat + Tailcup

Manufacturer's Name

H J Brand

Address

Greenville, GA 30503

Container Size or Weight

46 LBS

Symptoms of Victims:

☐ Nausea, ☐ Vomiting, ☐ Abdominal Cramps, ☐ Fever, ☐ Diarrhea

☐ Other (specify)

(0190000000002984(3202)

004600(21)7233146

Time of Eating Suspect Food/Meal:  
Date Hour

Time of Onset:  
Date Hour

Incubation Period

Duration of Illness

Investigator  
Title  
Agency: Mitchell Co. H.D.  
Date

Requested	Presence/Absence	Count/Concentration	Definitive Type
<input type="checkbox"/> Staphylococci	absent		
<input type="checkbox"/> Staphylococcal enterotoxin			
<input type="checkbox"/> C. fringens			
<input type="checkbox"/> B. cereus			
<input checked="" type="checkbox"/> Salmonella			
<input type="checkbox"/> Shigella			
<input type="checkbox"/> E. coli			
<input type="checkbox"/> V. parahaemolyticus			
<input type="checkbox"/> C. botulinum			
<input type="checkbox"/> Botulinus toxin			
on of Food			

RECEIVED MAY 14 2002  
ML

Notes and interpretations  
Temperature: When received

Primary Analyst: [Signature]  
Agency: [Signature]  
Date/Hour: Received MAY 09 2002  
Started: [Signature]  
Completed: [Signature]  
Agent Identified: [Signature]

List of number, sample, and tests desired for other samples collected at the same establishment during the same investigation.  
Only if unusual (such as field) method of sterilizing or sanitizing collection container or utensil or collecting sample is used.

RECEIVED

FOR IMMEDIATE RELEASE

JUN 20 2002

MARLER CLARK

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

May 8, 2002

**Salmonella Investigation is Complete -Update 5/8/02**

The Salmonella investigation in Spruce Pine is over and the Western Sizzlin Steakhouse has reopened to the public.

During the time period of the outbreak April 18 to April 30, over 7,000 people ate at the restaurant. The Health Departments in the Toe River Health District handled over 900 telephone calls and conducted 621 surveys of people who ate at the restaurant. There were 369 reported illnesses that may have been linked to the outbreak. Of those with symptoms, there were 39 lab-confirmed cases of Salmonella infection. Data was also collected from 252 people who did not have symptoms, but ate at the restaurant between the dates mentioned.

No single source of food was identified that caused the outbreak. This was a case in which the salmonella bacteria was spread among several foods as a result of food handling. Salmonella bacteria are usually found in foods of animal origin, such as beef, chicken, turkey, eggs, or milk. But all foods, including fresh produce, can also have the Salmonella bacteria if they come into contact with animal waste. Therefore, it is very important to wash hands and fresh produce completely before preparing foods. Chicken, turkey, eggs, and meat, including hamburgers, should be well cooked (not pink in the middle) to completely kill the Salmonella bacteria.

Spreading the bacteria among different foods can be avoided by following some basic steps: uncooked meats should be kept separate from produce, cooked foods, and ready-to-eat foods. Cutting boards, knives, and other utensils should be washed thoroughly after handling uncooked foods. Hands should be washed before handling any food, and between handling different food items. Towels and sponges should be sterilized completely before re-using.

Health officials strongly urge everyone to continue following the basic hygiene practices such as immediately washing hands: after using the bathroom, helping a child use the bathroom, or changing a diaper. Hands should also be washed before preparing and eating food. These precautions are very important to prevent the bacteria from spreading.

The 800 hotline and local telephone numbers that were set up for the investigation have been turned off. For further information about Salmonella, or symptoms and concerns associated with it, please call your local health department

\*\*\*



# Salmonella

## **What Is Salmonella?**

Salmonella is a bacteria infection. The medical term is called Salmonellosis. It causes diarrhea, stomach cramps, fever, nausea, and vomiting that lasts 4 to 7 days. The elderly, infants, and those with poor immune systems are more likely to be very sick.

## **Where Does Salmonella Come From?**

Salmonella live in the intestines of humans and animals. Humans usually get sick by eating foods that have come into contact with animal waste. It is often found in beef, chicken, turkey (poultry), eggs, and milk. Other foods may be infected if not washed or cleaned.

## **How Can You Get Salmonella?**

You get salmonella by eating food that has not been cleaned properly and/ or cooked to recommended temperatures.

## **How Do You Know If You Have It?**

People infected with salmonella usually get symptoms 12 to 72 hours after eating. Salmonella causes diarrhea, stomach cramps, fever, nausea, and vomiting that lasts 4 to 7 days.

## **How Is It Treated?**

A salmonella infection usually lasts 4 to 7 days and often does not require treatment unless the patient becomes dehydrated or the infection spreads. The elderly, infants, and those with poor immune systems are more likely to have a severe illness and may require hospital treatment

FOR IMMEDIATE RELEASE

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

May 6, 2002

**Salmonella Investigation is Complete -Update 5/6/02**

The investigation of the Salmonella outbreak in Spruce Pine is complete. Health officials have worked hard to control the outbreak and to assemble and organize all data to pinpoint the source of the outbreak.

The Health Departments in the Toe River Health District carried out food surveys from people who ate at a specific local restaurant between the dates of April 18 and April 30. The purpose of the food surveys was to obtain a list of each item that was eaten and a list of symptoms from those who were ill. The data was analyzed and several food items were implicated as the source of the outbreak.

Over the course of the investigation, there were 369 people who reported illness that may have been linked to the outbreak. Of those who reported symptoms, 39 people had a lab-confirmed case of Salmonellosis. Data was also collected from 252 people who did not experience any symptoms, but ate at the local restaurant between the dates indicated.

The foods that were implicated in the outbreak, in no particular order, include beef gravy, roast beef, salad bar eggs, fresh strawberries, salad bar ham, and roast beef gravy. This does not suggest that anyone who ate those items should have Salmonella. It simply means that according to the data that was analyzed, those food items are the common link between people who were sick and were diagnosed with Salmonellosis.

Western Sizzlin Steakhouse on Highway 226 in Spruce Pine has been very cooperative during the investigation. The restaurant is scheduled to re-open to the public on Tuesday, May 7.

Foods that are contaminated with Salmonella bacteria are the most common way to become sick with Salmonellosis. This was an evident case of cross-contamination of foods. Cross-contamination of foods can be avoided by following some basic steps: uncooked meats should be kept separate from produce, cooked foods, and ready-to-eat foods. Cutting boards, knives, and other utensils should be washed thoroughly after handling uncooked foods. Hands should be washed before handling any food, and between handling different food items. Towels and sponges should be sterilized completely before re-using.

Though symptoms may no longer appear, the Salmonella bacteria can continue to spread for up to two weeks. Therefore, daycare centers should be alert to children who had symptoms such as diarrhea, vomiting, or fever. Any child who possesses these signs and symptoms should either be cohorted or avoid attending daycare. Cohorting involves separating sick children from healthy children into separate rooms.

Health officials strongly urge everyone to continue following the basic hygiene practices such as immediately washing hands: after using the bathroom, helping a child use the bathroom, or changing a diaper. Hands should also be washed before preparing and eating food. These precautions are very important to prevent the bacteria from spreading.

\*\*\*

FOR IMMEDIATE RELEASE

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

May 4, 2002

**Spruce Pine Salmonella Outbreak -Update 5/4/02**

As the investigation of the Salmonella outbreak in Spruce Pine is nearing completion, health officials are working hard to assemble and organize all data in an effort to pinpoint the source of the outbreak.

There have been \_\_\_\_\_# people who have reported illness that may be linked to the outbreak. Of those who have reported symptoms, \_\_\_\_\_# people have a confirmed case of Salmonellosis.

The Health Departments in the Toe River Health District have been taking food surveys from people who ate a specific local restaurant between the dates of April 18 and April 30 to obtain a list of each item that was eaten. A list is also being compiled of symptoms from those who were ill. Once all data is collected, it will be analyzed to determine the cause of the Salmonella outbreak.

Foods that are contaminated with Salmonella bacteria are the most common way to become sick with Salmonellosis. Therefore, health officials strongly urge everyone to continue following basic hygiene practices such as immediately washing hands: after using the bathroom, helping a child use the bathroom, or changing a diaper. Hands should also be washed before preparing and eating food. Cross-contamination of foods should also be avoided. Uncooked meats should be kept separate from produce, cooked foods, and ready-to-eat foods. Hands, cutting boards, knives, and other utensils should be washed thoroughly after handling uncooked foods. These precautions are very important to prevent the bacteria from spreading any further.

\*\*\*

FOR IMMEDIATE RELEASE

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

May 3, 2002

**Cases of Salmonellosis in Spruce Pine -Update 5/3/02**

The Health Departments in the Toe River Health District are involved in an intensive, time consuming investigation to determine the source of the Salmonella outbreak that has occurred in Spruce Pine. Health officials have collected data from 229 people who have reported illnesses and 322 healthy people who ate at the restaurant. There are 33 lab-confirmed cases of Salmonellosis.

The information that is being compiled includes the types of foods eaten at a specific restaurant in Spruce Pine. The investigation is still occurring, but the information will soon be analyzed by epidemiologists to determine the source of the outbreak.

The most common means of transmission of salmonella bacteria is contaminated foods. Health officials strongly advise everyone to continue following basic hygiene practices such as immediately washing hands: after using the bathroom, helping a child use the bathroom, or changing a diaper. Hands should also be washed before preparing and eating food. These precautions are very important to prevent the bacteria from spreading.

Daycare centers should be alert to children who have symptoms such as diarrhea, vomiting, or fever. Any child who possesses these signs and symptoms should either be cohorted or avoid attending daycare, as Salmonella can quickly spread in this environment. Each childcare facility has the option of cohorting, which involves separating sick children from healthy children into separate rooms.

**Toe River Health District  
861 Greenwood Road  
Spruce Pine, NC 28777  
828-765-2239**

**MEMORANDUM**

TO: Toe River Health District Employees Taking Food Surveys  
FROM: Tom Singleton, Health Director  
DATE: May 3, 2002  
SUBJECT: A Change in Food Surveys for the Outbreak

We have received numerous food surveys for the Salmonella outbreak. **At this time, please begin calling only those who appear sick and those who are employees of Western Sizzlin.** If we need to follow the non-sick and non-employees at a later time, we may do so. But please be advised to call only those who are sick or who have been employed by the steakhouse. Thank you for your cooperation.

FOR IMMEDIATE RELEASE

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

May 2, 2002

**Salmonellosis in Spruce Pine -Update 5/2/02**

Every year, approximately 40,000 cases of Salmonellosis are reported in the United States. Because milder cases may not be diagnosed or reported, the actual number of infections may be greater.

There have been 21 confirmed cases of Salmonellosis in Spruce Pine. The investigation is proceeding, as a team of health specialists are working diligently to bring the investigation to a conclusion as quickly as possible.

The team, including Toe River Health District, North Carolina Department of Health and Human Services, and the North Carolina Office of Environmental Health have not yet determined a source of the Salmonella bacteria. However, they are working quickly to protect the public's health and to educate and prevent further problems.

While the investigation is underway, it is especially important to follow basic hygiene practices, such as keeping hands clean and immediately washing hands after using the bathroom, and before preparing and eating food. Any person who has been diagnosed with Salmonellosis should not prepare food or beverage for others until cleared by a health care provider. These precautions are very important so that the bacteria are not spread.

Salmonella may be found in feces, especially those with diarrhea, and people can become infected if they do not wash their hands after contact with these feces.

Because Salmonella are usually transmitted to humans by eating contaminated foods, cross-contamination of foods should be avoided. Uncooked meats should be kept separate from produce, cooked foods, and ready-to-eat foods. Hands, cutting boards, knives, and other utensils should be washed thoroughly after handling uncooked foods.

To report symptoms of Salmonellosis, please call one of the following numbers between the hours of 9:00 a.m. to 3:30 p.m.

toll free: 1-800-244-4695

local: 733-1821

**Toe River Health District**

861 Greenwood Road  
Spruce Pine, NC 28777  
828-765-2239

# **URGENT**

Please distribute this release to every  
child care provider in your facility

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

May 2, 2002

## **Salmonella Outbreak - Update 5/2/02**

An ongoing investigation of Salmonellosis is being conducted in Spruce Pine, North Carolina. No source has yet been identified and the investigation will continue until completed. The Western Sizzlin Steakhouse on Hwy 226 in the Grassy Creek Shopping Center in Spruce Pine has voluntarily closed and is cooperating fully on the outbreak.

Salmonellosis is an infection with a bacteria called Salmonella. Most persons infected with Salmonella develop diarrhea, fever, and abdominal cramps 6 to 72 hours after infection. The illness usually lasts 4 to 7 days. However, the diarrhea can be severe, and the person may be ill enough to require hospital treatment.

**Please be alert to children who have symptoms such as diarrhea, vomiting, or fever. Any child who possesses these signs and symptoms should either be cohorted or avoid attending daycare, as Salmonella can quickly spread in this environment.**

Each childcare facility has the option of cohorting, which involves separating sick children from healthy children into separate rooms. If your facility would like to set up a room for sick children, please call your local health department and an Environmental Health Specialist will assist you with the procedures.



**Please continue to follow basic hygiene principles such as immediately washing hands: after using the bathroom, helping a child use the bathroom, or changing a diaper. Hands should also be washed before preparing and eating food. Further, in accordance with health guidelines, please remember to use sanitizing solution and test strips when changing a diaper. These precautions are very important so that the bacteria are not spread.**

Salmonella may be found in feces, especially those with diarrhea, and people can become infected if they do not wash their hands after contact with these feces.

Salmonella are usually transmitted to humans by eating contaminated foods, which usually look and smell normal. Contaminated foods are usually of animal origin, such as beef, poultry, milk, or eggs. But all foods, including vegetables may become contaminated if not properly washed. Foods may also become contaminated by the unwashed hands of an infected food handler who forgot to wash his or her hands with soap after using the bathroom.

There is no vaccine to prevent Salmonellosis, but there are steps you can take to reduce your chances of becoming infected with the bacteria. Cook poultry, ground beef, and eggs thoroughly before eating. Stay away from eating or drinking foods that contain raw eggs, or unpasteurized milk. Raw eggs may be not be recognized in some foods such as hollandaise sauce, Caesar dressings, homemade ice cream, cookie dough, and frostings. Wash hands, kitchen work surfaces, and utensils with soap and water immediately after they have been in contact with raw meat or poultry. Produce should be thoroughly washed before handling any food, and between handling different food items. Be very careful with foods prepared for infants, the elderly, and those with compromised immune systems. Wash hands with soap after handling reptiles or birds, or after contact with pet feces.

Many different kinds of illnesses can cause the same symptoms as Salmonellosis. Determining that Salmonella is the cause of the illness depends on laboratory tests. Once Salmonella has been identified, a health care provider will determine the proper course of treatment.

It is very important that anyone - whether feeling sick or not -who ate at Western Sizzlin Steakhouse between the dates of April 18<sup>th</sup> and April 30<sup>th</sup>, call one of the following numbers between the hours of 9:00 a.m. to 3:30 p.m.

toll free: 1-800-244-4695

local: 733-1821

FOR IMMEDIATE RELEASE

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

May 1, 2002

**Salmonella Outbreak -Update 5/1/02**

An ongoing investigation of Salmonellosis is being conducted in Spruce Pine, North Carolina. No source has yet been identified and the investigation will continue until completed. The Western Sizzlin Steakhouse on Hwy 226 in the Grassy Creek Shopping Center in Spruce Pine has voluntarily closed and is cooperating fully on the outbreak.

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Children with diarrhea, vomiting, or fever should not be in daycare, as Salmonella can quickly spread in this environment.

Many different kinds of illnesses can cause the same symptoms as Salmonellosis. Determining that Salmonella is the cause of the illness depends on laboratory tests. Once Salmonella has been identified, a health care provider will determine the proper course of treatment.

It is very important that anyone - whether feeling sick or not - who ate at Western Sizzlin Steakhouse between the dates of April 18<sup>th</sup> and April 30<sup>th</sup>, call one of the following numbers between the hours of 9:00 a.m. to 3:30 p.m.

toll free: 1-800-244-4695

local: 733-1821

**Toe River Health District**

861 Greenwood Road  
Spruce Pine, NC 28777  
828-765-2239

# **URGENT**

Please distribute this release to every physician, and other health care provider in your hospital or clinic.

FOR IMMEDIATE RELEASE

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

April 30, 2002

## **Salmonella Outbreak**

An investigation of salmonella is currently being conducted in Spruce Pine, North Carolina. Western Sizzlin Steakhouse on Hwy 226 in the Grassy Creek Shopping Center in Spruce Pine has extended full cooperation and voluntarily closed for a full investigation of a Salmonella outbreak.

There have been 16 lab-confirmed cases of salmonella poisoning, and three additional cases pending. Others may have symptoms including fever, abdominal cramps, nausea, and diarrhea. Salmonella is a bacterial infection affecting the stomach and intestines and symptoms begin 6 to 72 hours after eating or drinking a contaminated food or beverage, and the illness usually lasts 4 to 7 days. However, the diarrhea can be severe, and the person may be ill enough to require hospital treatment.

Whether feeling sick or not, anyone who ate at this Western Sizzlin Steakhouse between the dates of April 18<sup>th</sup> and April 29<sup>th</sup>, should call one of the following numbers between the hours of 9:00 a.m. to 3:30 p.m.

toll free: 1-800-244-4695  
local: 733-1821

FOR IMMEDIATE RELEASE

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

April 30, 2002

**Salmonella Outbreak**

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Whether feeling sick or not, anyone who ate at this Western Sizzlin Steakhouse between the dates of April 18<sup>th</sup> and April 29<sup>th</sup>, should call one of the following numbers between the hours of 9:00 a.m. to 3:30 p.m.

toll free: 1-800-244-4695  
local: 733-1821

## **Press Statement**

April 30, 2002

The Toe River Health District in conjunction with the North Carolina Department of Health and Human Services and the North Carolina Office of Environmental Health are conducting an investigation of foodborne infection of the bacteria, Salmonella. Every effort is being made to identify and halt the spread of the outbreak. It has been linked to a food service establishment in Spruce Pine, this establishment has now been closed until the investigation is complete.

It is our goal to assure the integrity of the food supply and to assist anyone who has symptoms or has questions about this outbreak.

For further information, please call your local health department or health care provider.

## Press Release

FOR IMMEDIATE RELEASE

CONTACT:

Local Communicable Disease Nurse

Avery County Health Department 733-6031

Yancey County Health Department 682-6118

Mitchell County Health Department 688-2371

April 29, 2002

### **Ongoing Investigation of Salmonella**

An investigation of salmonellosis is currently being conducted in the Toe River Health District. Salmonellosis is a bacterial infection of variable severity, commonly expressed as gastroenteritis, caused by gram-negative bacteria, *Salmonella*. The signs and symptoms of *Salmonella* infection in humans are the following fever, abdominal cramps, and diarrhea beginning 6 to 72 hours after consuming a contaminated food or beverage. Common transmission of *Salmonella* occurs by ingestion of the organisms in food, or contaminated by animal products or an infected human. The fecal-oral route from person to person is an important means of transmission, especially when diarrhea is present. The elderly, infants, and those with impaired immune systems may have more severe illness. The illness usually lasts 4 to 7 days, and most persons recover without antibiotic treatment. However, the diarrhea can be severe, and the person may be ill enough to require hospitalization.

Currently Toe River Health District reports 8 confirmed cases and 6 probable cases of *Salmonella*. At this time the Public Health Epidemiological Investigation (Epi Team) of Toe River Health District and the N.C. State Office of Environmental Health are investigating a food service establishment in Spruce Pine, North Carolina dates of exposure are April 20 to April 27 of 2002. This is an ongoing investigation and the Epi team is moving in a timely and accurate manner. Due to the time required for testing, growing, and reading the lab culture, the investigation can be prolonged 3 to 4 days. If you have questions, concerns, or symptoms please call your local health department communicable diseases nurse at the Avery County Health Department 733-6031, Mitchell County Health Department 688-2371 or the Yancey County Health Department 682-6118.

**Toe River Health District  
861 Greenwood Road  
Spruce Pine, NC 28777  
828-765-2239**

**MEMORANDUM**

**TO:** All Toe River Health District employees  
**FROM:** Tom Singleton, Health Director  
**DATE:** May 2, 2002  
**SUBJECT:** The extra mile

In this crucial time of the Salmonellosis outbreak in the Toe River area, we have all been very busy trying to bring this investigation to a conclusion. However, the investigation is still ongoing and we are asking for volunteers to help with telephone surveys on Saturday.

We are still collecting data from those who ate at the Western Sizzlin Steakhouse in Spruce Pine between the dates of April 18 and April 30. Any person who can volunteer to work with us this Saturday, May 4<sup>th</sup>, please notify your supervisor. We hope to have enough volunteers to cover all phones in each health department. Your hard work and dedication to help protect the health of the public is very much appreciated.

On a different note, there has been some question about what to do with leftover food from people who ate at the Western Sizzlin. If a person has leftovers that have been refrigerated, please take their name, phone number, and address. We will send an Environmental Health Specialist to obtain the food if it is in the local area.

Thank you for your cooperation.



**Toe River Health District *Salmonella heidelberg* Outbreak**  
**April 18 - April 30<sup>th</sup> 2002**

**Preliminary Report**

To: Tom Singleton, Health Director  
From Pam Jenkins, Nurse Epidemiologist, DHHS

Introduction: Mr. Tom Singleton was alerted by hospital healthcare providers on Thursday (4/25/02) that they were seeing an unusually large number of ill people with Gastrointestinal (GI) symptoms. They suspected a foodborne disease. On Friday (4/26) the Mitchell County Health Department's (HD) Nursing Supervisor received notice of a positive *Salmonella* species stool culture on one patient and learned of five hospitalized patients with presumptive diagnosis. Upon further investigation she discovered that the common link appeared to be eating at the Western Sizzlin in Spruce Pines, NC. By the end of Friday, she knew of a couple of confirmed cases and approximately 7 that were pending confirmation. During this time period, the District's Health Director was conferring with the Acting Head of the State's Communicable Disease Control Branch, Dr. Newt MacCormack. The number of case grew over the weekend and by Monday afternoon it was apparent that the outbreak was continuing and was linked to the Western Sizzlin. The manager of the restaurant, Mr. Darren King, voluntarily closed the restaurant until an epidemiological study could be conducted. On Tuesday, Dr. Pam Jenkins, Foodborne Disease Nurse Epidemiologist was sent from the State Health Department to assist the Toe River Health District (Mitchell, Yancey, Avery Counties) in the investigation.

**Methodology**

**Epidemiological Study**

A Case-control study was instituted on Tuesday, April 30, 2002. A case was defined as any individual having nausea, vomiting and/or 3 or more diarrheal (loose) stools per day and who ate at the Western Sizzlin in Spruce Pine between the dates of April 18-30, 2002. All three HDs of the Toe River Health District conducted interviews on cases and controls using a standardized survey. Controls were those people who ate at the restaurant between April 18-30, 2002 and were not symptomatic. A 1-800 number hotline was set up on Wednesday and manned during regular working hours and on Saturday, May 4, 2002. On Tuesday (4/30/02) a media point person was identified and daily press releases were done to keep the public informed about the progress of the investigation.

**Environmental Investigation:**

On Friday (4/26/02), the Health Director and one of the Environmental Health (EH) personnel from the Mitchell County HD inspected the restaurant. Deficiencies were noted. On Monday, the EH team collected food samples from an individual patron who had taken food home. The food collected for sampling included: hamburger steak with gravy; fried chicken; hamburger steak without gravy; and ham (which was under the hamburger steak without gravy). These specimens were sent to the State Laboratory for Public Health (SLPH) for analysis. The Health Director, EH Supervisor and Regional EH Supervisor visited the restaurant and asked the manager to voluntarily close the restaurant pending

the results of the epidemiological study. The manager, Darren King, closed his restaurant around 3-4pm Monday 4/27/02.

On Tuesday EH obtained the following samples from the restaurant: 1) water from the tap in the kitchen; 2) water from the waitress serve station; 3) leftover prepared mashed potatoes and gravy from the restaurant and 4) unopened packages of dried mashed potatoes and gravy. These were also sent to the SLPH. On Wednesday (May 1, 2002), samples of ice from the bottom of the large ice chest in the kitchen area were obtained. The restaurant was toured by EH from Mitchell County HD and Pam Jenkins from the State HD.

### **Laboratory**

Stool specimens were collected on as many of the cases as possible. All three health departments collected the specimens. In addition, specimens were collected by the Spruce Pines Community Hospital, local hospitals and private doctor's offices. Collected specimens were sent to the SLPH for serotyping.

## **Results**

### **Epidemiological Study**

The following are the results of the epidemiology study:

Population at risk (includes those who ate at Western Sizzlin from 4/18 - 4/29)

Buffet Only	3004
Salad w/entree	658
Salad only	501
Entree	<u>4163</u>
Total	7151

Number of Calls received at HDs (rough approximate): 931 - many represented groups of individuals. Many calls were not logged in but handled at the time of the call. The actual number of calls received by all 3 HDs may be larger than represented here.

Number of surveys conducted: 369 cases and 252 controls.

Number of surveys analyzed: 72 cases and 54 controls. (While it is ideal to have a case/control ratio of 1 to 2, the strength of the data allows for preliminary results to be given based on what has been entered. Further data entry will occur at the state level and all information will be forwarded to the Toe River Health District.)

The following are the results of the analysis of the surveys:

Males	58 (28 controls, 30 cases)
Females	68 (26 controls, 42 cases)
Symptoms:	81% had cramps
	23% had sinus problems
	62% had non-bloody diarrhea

51% had fever  
 65% had nausea  
 13% had a cough  
 84.5% had watery diarrhea

Hospitalized: 13%

Food items that are implicated in the outbreak are:

Item	OR	CI	% cases who remembered eating
Beef Gravy	7.69	1.55 - 51.86	23.5% (16/68)
Roast Beef	13.22	1.69 - 283.8	21% (14/68)
Salad Bar Eggs	9.57	2.00 - undefined	19.3% (11/57)*
Fresh Strawberries	5.79	1.14 - 39.74	19.1% (13/68)
Salad Bar Ham	7.34	1.49 - undefined	15.5% (9/58)*
Aujus Gravy	8.62	1.05 - 189.38.	15% (10/68)
Roast Beef Gravy	8.97	1.88 - undefined	14.7% (10/68)*
* None of well ate			

One item was found to be protective

Yogurt Toppings	0.14	0.02 < OR < 0.78	17% (9/52) of controls
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Two asymptomatic employees of the restaurant were found to be infected with *Salmonella*. Lengthy interviews with the two employees were conducted. Both individuals ate at the restaurant. It can not be determine whether they got their infection from eating at the restaurant or infected the food at the restaurant. The serotypes of cultures from the two asymptomatic restaurant workers has been identified as *Salmonella heidelberg*.

### Environmental Results:

The following is the results of the food samples sent to the SLPH:

<u>Items from an individual's home</u>	<u>Result</u>
Hamburger steak with gravy	Positive for <i>S. heidelberg</i>
Hamburger steak without gravy	Negative
Fried Chicken	Positive for <i>S. heidelberg</i>
Ham	Positive for <i>S. heidelberg</i>

<u>Items from Restaurant</u>	<u>Result</u>
Applicator stick marked "gravy"	Positive for <i>S. heidelberg</i>
Leftover prepared gravy	Negative
Leftover prepared mashed potatoes	Negative
Unopened dry mash potatoes	Negative
Unopened dry gravy mix	Negative
All water samples showed no coliforms. Testing for <i>S. heidelberg</i> could not be done.	
Restaurant employees attended a food safety class.	

## **Laboratory Results**

The Toe River Health District collected a total of 88 specimens. Of those, 39 have been confirmed *Salmonella*. More results from private doctor's offices, local hospitals and from SLPH are pending. The serotypes from the two asymptomatic restaurant workers has been identified as *Salmonella heidelberg*.

## **Plan of Action:**

1. The investigation of the *S.heidelberg* outbreak at the Western Sizzlin is completed. The data collected is large enough to allow for extensive analysis. No further surveys should be collected.
2. Stool cultures of symptomatic individuals should be collected at the discretion of healthcare providers. As laboratory results are returned from the SLPH and from various private practice offices and local hospitals, they will be added to the database.
3. The Environmental Section and the District Health Director will determine when the restaurant reopens. Although the restaurant has been thoroughly sanitized, close surveillance may need to be continued for a period of time to ensure the outbreak does not start again.
4. Further data entry and analysis will continue at the State HD and all data will be given to the Health District. Critical to this component is the constant communication between the Epi Team Leader at the Toe River Health District and the Nurse Epidemiologist at the State HD.
5. Once the data set has been cleaned and more surveys analyzed, thought should be given to a joint (State and Health District) publication of the results to MMWR.

# Salmonella

## What Is Salmonella?

Salmonella is a bacteria infection. The medical term is called Salmonellosis. It causes diarrhea, stomach cramps, fever, nausea, and vomiting that lasts 4 to 7 days. The elderly, infants, and those with poor immune systems are more likely to be very sick.

## Where Does Salmonella Come From?

Salmonella live in the intestines of humans and animals. Humans usually get sick by eating foods that have come into contact with animal waste. It is often found in beef, chicken, turkey (poultry), eggs, and milk. Other foods may be infected if not washed or cleaned.

## How Can You Get Salmonella?

You get salmonella by eating food that has not been cleaned properly and/ or cooked to recommended temperatures.

## How Do You Know If You Have It?

People infected with salmonella usually get symptoms 12 to 72 hours after eating. Salmonella causes diarrhea, stomach cramps, fever, nausea, and vomiting that lasts 4 to 7 days.

## How Is It Treated?

A salmonella infection usually lasts 4 to 7 days and often does not require treatment unless the patient becomes dehydrated or the infection spreads. The elderly, infants, and those with poor immune systems are more likely to have a severe illness and may require hospital treatment.

Please distribute this letter to each physician and all other health care providers in your facility.

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

May 6, 2002

**Salmonella Investigation is Complete -Update 5/6/02**

The investigation of the Salmonella outbreak in Spruce Pine is complete. Health officials have worked hard to control the outbreak and to assemble and organize all data to pinpoint the source of the outbreak.

The Health Departments in the Toe River Health District carried out food surveys from people who ate at a specific local restaurant between the dates of April 18 and April 30. The purpose of the food surveys was to obtain a list of each item that was eaten and a list of symptoms from those who were ill. The data was analyzed and several food items were implicated as the source of the outbreak.

Over the course of the investigation, there were 369 people who reported illness that may have been linked to the outbreak. Of those who reported symptoms, 39 people had a lab-confirmed case of Salmonellosis. Data was also collected from 252 people who did not experience any symptoms, but ate at the local restaurant between the dates indicated.

The foods that were implicated in the outbreak, in no particular order, include beef gravy, roast beef, salad bar eggs, fresh strawberries, salad bar ham, and roast beef gravy. This does not suggest that anyone who ate those items should have Salmonella. It simply means that according to the data that was analyzed, those food items are the common link between people who were sick and were diagnosed with Salmonellosis.

Western Sizzlin Steakhouse on Highway 226 in Spruce Pine has been very cooperative during the investigation. The restaurant is scheduled to re-open to the public on Tuesday, May 7.

Foods that are contaminated with Salmonella bacteria are the most common way to become sick with Salmonellosis. This was an evident case of cross-contamination of foods. Cross-contamination of foods can be avoided by following some basic steps: uncooked meats should be kept separate from produce, cooked foods, and ready-to-eat foods. Cutting boards, knives, and other utensils should be washed thoroughly after handling uncooked foods. Hands should be

washed before handling any food, and between handling different food items. Towels and sponges should be sterilized completely before re-using.

Though symptoms may no longer appear, the Salmonella bacteria can continue to spread for up to two weeks. Therefore, daycare centers should be alert to children who had symptoms such as diarrhea, vomiting, or fever. Any child who possesses these signs and symptoms should either be cohorted or avoid attending daycare. Cohorting involves separating sick children from healthy children into separate rooms.

Health officials strongly urge everyone to continue following the basic hygiene practices such as immediately washing hands: after using the bathroom, helping a child use the bathroom, or changing a diaper. Hands should also be washed before preparing and eating food. These precautions are very important to prevent the bacteria from spreading.

\*\*\*

**FOR IMMEDIATE RELEASE****Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

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Though symptoms may no longer appear, the Salmonella bacteria can continue to spread for up to two weeks. Therefore, daycare centers should be alert to children who had symptoms such as diarrhea, vomiting, or fever. Any child who possesses these signs and symptoms should either be cohorted or avoid attending daycare. Cohorting involves separating sick children from healthy children into separate rooms.

Health officials strongly urge everyone to continue following the basic hygiene practices such as immediately washing hands: after using the bathroom, helping a child use the bathroom, or changing a diaper. Hands should also be washed before preparing and eating food. These precautions are very important to prevent the bacteria from spreading.

\*\*\*

## FOR IMMEDIATE RELEASE

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

May 4, 2002

**Spruce Pine Salmonella Outbreak -Update 5/4/02**

As the investigation of the Salmonella outbreak in Spruce Pine is nearing completion, health officials are working hard to assemble and organize all data in an effort to pinpoint the source of the outbreak.

There have been \_\_\_\_\_ # people who have reported illness that may be linked to the outbreak. Of those who have reported symptoms, \_\_\_\_\_ # people have a confirmed case of Salmonellosis.

The Health Departments in the Toe River Health District have been taking food surveys from people who ate at a specific local restaurant between the dates of April 18 and April 30 to obtain a list of each item that was eaten. A list is also being compiled of symptoms from those who were ill. Once all data is collected, it will be analyzed to determine the cause of the Salmonella outbreak.

Foods that are contaminated with Salmonella bacteria are the most common way to become sick with Salmonellosis. Therefore, health officials strongly urge everyone to continue following basic hygiene practices such as immediately washing hands: after using the bathroom, helping a child use the bathroom, or changing a diaper. Hands should also be washed before preparing and eating food. Cross-contamination of foods should also be avoided. Uncooked meats should be kept separate from produce, cooked foods, and ready-to-eat foods. Hands, cutting boards, knives, and other utensils should be washed thoroughly after handling uncooked foods. These precautions are very important to prevent the bacteria from spreading any further.

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**FOR IMMEDIATE RELEASE****Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

May 3, 2002

**Cases of Salmonellosis in Spruce Pine -Update 5/3/02**

The Health Departments in the Toe River Health District are involved in an intensive, time consuming investigation to determine the source of the Salmonella outbreak that has occurred in Spruce Pine. Health officials have collected data from 229 people who have reported illnesses and 322 healthy people who ate at the restaurant. There are 33 lab-confirmed cases of Salmonellosis.

The information that is being compiled includes the types of foods eaten at a specific restaurant in Spruce Pine. The investigation is still occurring, but the information will soon be analyzed by epidemiologists to determine the source of the outbreak.

The most common means of transmission of salmonella bacteria is contaminated foods. Health officials strongly advise everyone to continue following basic hygiene practices such as immediately washing hands: after using the bathroom, helping a child use the bathroom, or changing a diaper. Hands should also be washed before preparing and eating food. These precautions are very important to prevent the bacteria from spreading.

Daycare centers should be alert to children who have symptoms such as diarrhea, vomiting, or fever. Any child who possesses these signs and symptoms should either be cohorted or avoid attending daycare, as Salmonella can quickly spread in this environment. Each childcare facility has the option of cohorting, which involves separating sick children from healthy children into separate rooms.

**Toe River Health District  
861 Greenwood Road  
Spruce Pine, NC 28777  
828-765-2239**

**MEMORANDUM**

**TO:** Toe River Health District Employees Taking Food Surveys  
**FROM:** Tom Singleton, Health Director  
**DATE:** May 3, 2002  
**SUBJECT:** A Change in Food Surveys for the Outbreak

We have received numerous food surveys for the Salmonella outbreak. **At this time, please begin calling only those who appear sick and those who are employees of Western Sizzlin.** If we need to follow the non-sick and non-employees at a later time, we may do so. But please be advised to call only those who are sick or who have been employed by the steakhouse. Thank you for your cooperation.

**Toe River Health District  
861 Greenwood Road  
Spruce Pine, NC 28777  
828-765-2239**

**MEMORANDUM**

**TO:** All Toe River Health District employees  
**FROM:** Tom Singleton, Health Director  
**DATE:** May 2, 2002  
**SUBJECT:** The extra mile

In this crucial time of the Salmonellosis outbreak in the Toe River area, we have all been very busy trying to bring this investigation to a conclusion. However, the investigation is still ongoing and we are asking for volunteers to help with telephone surveys on Saturday.

We are still collecting data from those who ate at the Western Sizzlin Steakhouse in Spruce Pine between the dates of April 18 and April 30. Any person who can volunteer to work with us this Saturday, May 4<sup>th</sup>, please notify your supervisor. We hope to have enough volunteers to cover all phones in each health department. Your hard work and dedication to help protect the health of the public is very much appreciated.

On a different note, there has been some question about what to do with leftover food from people who ate at the Western Sizzlin. If a person has leftovers that have been refrigerated, please take their name, phone number, and address. We will send an Environmental Health Specialist to obtain the food if it is in the local area.

Thank you for your cooperation.

**FOR IMMEDIATE RELEASE****Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

May 2, 2002

**Salmonellosis in Spruce Pine -Update 5/2/02**

Every year, approximately 40,000 cases of Salmonellosis are reported in the United States. Because milder cases may not be diagnosed or reported, the actual number of infections may be greater.

There have been 21 confirmed cases of Salmonellosis in Spruce Pine. The investigation is proceeding, as a team of health specialists are working diligently to bring the investigation to a conclusion as quickly as possible.

The team, including Toe River Health District, North Carolina Department of Health and Human Services, and the North Carolina Office of Environmental Health have not yet determined a source of the Salmonella bacteria. However, they are working quickly to protect the public's health and to educate and prevent further problems.

While the investigation is underway, it is especially important to follow basic hygiene practices, such as keeping hands clean and immediately washing hands after using the bathroom, and before preparing and eating food. Any person who has been diagnosed with Salmonellosis should not prepare food or beverage for others until cleared by a health care provider. These precautions are very important so that the bacteria are not spread.

Salmonella may be found in feces, especially those with diarrhea, and people can become infected if they do not wash their hands after contact with these feces.

Because Salmonella are usually transmitted to humans by eating contaminated foods, cross-contamination of foods should be avoided. Uncooked meats should be kept separate from produce, cooked foods, and ready-to-eat foods. Hands, cutting boards, knives, and other utensils should be washed thoroughly after handling uncooked foods.

To report symptoms of Salmonellosis, please call one of the following numbers between the hours of 9:00 a.m. to 3:30 p.m.

toll free: 1-800-244-4695

local: 733-1821

**Toe River Health District**

861 Greenwood Road  
Spruce Pine, NC 28777  
828-765-2239

# URGENT

Please distribute this release to every  
child care provider in your facility

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

May 2, 2002

## **Salmonella Outbreak - Update 5/2/02**

An ongoing investigation of Salmonellosis is being conducted in Spruce Pine, North Carolina. No source has yet been identified and the investigation will continue until completed. The Western Sizzlin Steakhouse on Hwy 226 in the Grassy Creek Shopping Center in Spruce Pine has voluntarily closed and is cooperating fully on the outbreak.

Salmonellosis is an infection with a bacteria called Salmonella. Most persons infected with Salmonella develop diarrhea, fever, and abdominal cramps 6 to 72 hours after infection. The illness usually lasts 4 to 7 days. However, the diarrhea can be severe, and the person may be ill enough to require hospital treatment.

**Please be alert to children who have symptoms such as diarrhea, vomiting, or fever. Any child who possesses these signs and symptoms should either be cohorted or avoid attending daycare, as Salmonella can quickly spread in this environment.**

Each childcare facility has the option of cohorting, which involves separating sick children from healthy children into separate rooms. If your facility would like to set up a room for sick children, please call your local health department and an Environmental Health Specialist will assist you with the procedures.



**Please continue to follow basic hygiene principles such as immediately washing hands: after using the bathroom, helping a child use the bathroom, or changing a diaper. Hands should also be washed before preparing and eating food. Further, in accordance with health guidelines, please remember to use sanitizing solution and test strips when changing a diaper. These precautions are very important so that the bacteria are not spread.**

Salmonella may be found in feces, especially those with diarrhea, and people can become infected if they do not wash their hands after contact with these feces.

Salmonella are usually transmitted to humans by eating contaminated foods, which usually look and smell normal. Contaminated foods are usually of animal origin, such as beef, poultry, milk, or eggs. But all foods, including vegetables may become contaminated if not properly washed. Foods may also become contaminated by the unwashed hands of an infected food handler who forgot to wash his or her hands with soap after using the bathroom.

There is no vaccine to prevent Salmonellosis, but there are steps you can take to reduce your chances of becoming infected with the bacteria. Cook poultry, ground beef, and eggs thoroughly before eating. Stay away from eating or drinking foods that contain raw eggs, or unpasteurized milk. Raw eggs may not be recognized in some foods such as hollandaise sauce, Caesar dressings, homemade ice cream, cookie dough, and frostings. Wash hands, kitchen work surfaces, and utensils with soap and water immediately after they have been in contact with raw meat or poultry. Produce should be thoroughly washed before handling any food, and between handling different food items. Be very careful with foods prepared for infants, the elderly, and those with compromised immune systems. Wash hands with soap after handling reptiles or birds, or after contact with pet feces.

Many different kinds of illnesses can cause the same symptoms as Salmonellosis. Determining that Salmonella is the cause of the illness depends on laboratory tests. Once Salmonella has been identified, a health care provider will determine the proper course of treatment.

It is very important that anyone - whether feeling sick or not - who ate at Western Sizzlin Steakhouse between the dates of April 18<sup>th</sup> and April 30<sup>th</sup>, call one of the following numbers between the hours of 9:00 a.m. to 3:30 p.m.

toll free: 1-800-244-4695  
local: 733-1821

## FOR IMMEDIATE RELEASE

**Contact Information:**

Tom Singleton, Health Director  
Toc River Health District  
828-765-2239 Ext. 16

May 1, 2002

**Salmonella Outbreak -Update 5/1/02**

An ongoing investigation of Salmonellosis is being conducted in Spruce Pine, North Carolina. No source has yet been identified and the investigation will continue until completed. The Western Sizzlin Steakhouse on Hwy 226 in the Grassy Creek Shopping Center in Spruce Pine has voluntarily closed and is cooperating fully on the outbreak.

Salmonellosis is an infection with a bacteria called Salmonella. Most persons infected with Salmonella develop diarrhea, fever, and abdominal cramps 6 to 72 hours after infection. The illness usually lasts 4 to 7 days. However, the diarrhea can be severe, and the person may be ill enough to require hospital treatment.

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Children with diarrhea, vomiting, or fever should not be in daycare, as Salmonella can quickly spread in this environment.

Many different kinds of illnesses can cause the same symptoms as Salmonellosis. Determining that Salmonella is the cause of the illness depends on laboratory tests. Once Salmonella has been identified, a health care provider will determine the proper course of treatment.

It is very important that anyone - whether feeling sick or not -who ate at Western Sizzlin Steakhouse between the dates of April 18<sup>th</sup> and April 30<sup>th</sup>, call one of the following numbers between the hours of 9:00 a.m. to 3:30 p.m.

toll free: 1-800-244-4695

local: 733-1821

**Toe River Health District**

861 Greenwood Road  
Spruce Pine, NC 28777  
828-765-2239

# URGENT

Please distribute this release to every physician, and other health care provider in your hospital or clinic.

FOR IMMEDIATE RELEASE

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

April 30, 2002

## Salmonella Outbreak

An investigation of salmonella is currently being conducted in Spruce Pine, North Carolina. Western Sizzlin Steakhouse on Hwy 226 in the Grassy Creek Shopping Center in Spruce Pine has extended full cooperation and voluntarily closed for a full investigation of a Salmonella outbreak.

There have been 16 lab-confirmed cases of salmonella poisoning, and three additional cases pending. Others may have symptoms including fever, abdominal cramps, nausea, and diarrhea. Salmonella is a bacterial infection affecting the stomach and intestines and symptoms begin 6 to 72 hours after eating or drinking a contaminated food or beverage, and the illness usually lasts 4 to 7 days. However, the diarrhea can be severe, and the person may be ill enough to require hospital treatment.

Whether feeling sick or not, anyone who ate at this Western Sizzlin Steakhouse between the dates of April 18<sup>th</sup> and April 29<sup>th</sup>, should call one of the following numbers between the hours of 9:00 a.m. to 3:30 p.m.

toll free: 1-800-244-4695  
local: 733-1821

## FOR IMMEDIATE RELEASE

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

April 30, 2002

**Salmonella Outbreak**

An investigation of salmonella is currently being conducted in Spruce Pine, North Carolina. Western Sizzlin Steakhouse on Hwy 226 in the Grassy Creek Shopping Center in Spruce Pine has extended full cooperation and voluntarily closed for a full investigation of a Salmonella outbreak.

There have been 16 lab-confirmed cases of salmonella poisoning, and three additional cases pending. Others may have symptoms including fever, abdominal cramps, nausea, and diarrhea. Salmonella is a bacterial infection affecting the stomach and intestines and symptoms begin 6 to 72 hours after eating or drinking a contaminated food or beverage, and the illness usually lasts 4 to 7 days. However, the diarrhea can be severe, and the person may be ill enough to require hospital treatment.

Whether feeling sick or not, anyone who ate at this Western Sizzlin Steakhouse between the dates of April 18<sup>th</sup> and April 29<sup>th</sup>, should call one of the following numbers between the hours of 9:00 a.m. to 3:30 p.m.

toll free: 1-800-244-4695  
local: 733-1821

## **Press Statement**

April 30, 2002

The Toe River Health District in conjunction with the North Carolina Department of Health and Human Services and the North Carolina Office of Environmental Health are conducting an investigation of foodborne infection of the bacteria, Salmonella. Every effort is being made to identify and halt the spread of the outbreak. It has been linked to a food service establishment in Spruce Pine, this establishment has now been closed until the investigation is complete.

It is our goal to assure the integrity of the food supply and to assist anyone who has symptoms or has questions about this outbreak.

For further information, please call your local health department or health care provider.

## Press Release

### FOR IMMEDIATE RELEASE

#### CONTACT:

Local Communicable Disease Nurse

Avery County Health Department 733-6031

Yancey County Health Department 682-6118

Mitchell County Health Department 688-2371

April 29, 2002

## Ongoing Investigation of Salmonella

An investigation of salmonellosis is currently being conducted in the Toe River Health District. Salmonellosis is a bacterial infection of variable severity, commonly expressed as gastroenteritis, caused by gram-negative bacteria, *Salmonella*. The signs and symptoms of *Salmonella* infection in humans are the following fever, abdominal cramps, and diarrhea beginning 6 to 72 hours after consuming a contaminated food or beverage. Common transmission of *Salmonella* occurs by ingestion of the organisms in food, or contaminated by animal products or an infected human. The fecal-oral route from person to person is an important means of transmission, especially when diarrhea is present. The elderly, infants, and those with impaired immune systems may have more severe illness. The illness usually lasts 4 to 7 days, and most persons recover without antibiotic treatment. However, the diarrhea can be severe, and the person may be ill enough to require hospitalization.

Currently Toe River Health District reports 8 confirmed cases and 6 probable cases of *Salmonella*. At this time the Public Health Epidemiological Investigation (Epi Team) of Toe River Health District and the N.C. State Office of Environmental Health are investigating a food service establishment in Spruce Pine, North Carolina dates of exposure are April 20 to April 27 of 2002. This is an ongoing investigation and the Epi team is moving in a timely and accurate manner. Due to the time required for testing, growing, and reading the lab culture, the investigation can be prolonged 3 to 4 days. If you have questions, concerns, or symptoms please call your local health department communicable diseases nurse at the Avery County Health Department 733-6031, Mitchell County Health Department 688-2371 or the Yancey County Health Department 682-6118.



May. 17. 2002 2:29AM

No. 0797 P. 2

**Questionnaire for Salmonellosis Outbreak- April, 2002**

Interviewer Initials: \_\_\_\_\_ Interview Date: \_\_\_\_\_

Respondent's name: \_\_\_\_\_

What day and time did you arrive at the steakhouse? Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_\_ am/pm

Race/Ethnicity: ☐ White, non-Hispanic ☐ Black, non-Hispanic ☐ Asian/Pacific Islander  
☐ American Indian/Alaska native ☐ Hispanic ☐ Unknown

Respondent's sex (circle one): M / F Respondent's date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Work phone number: \_\_\_\_\_ Home phone number: \_\_\_\_\_

Home street address (no P.O. box #s): \_\_\_\_\_

City: \_\_\_\_\_ Zip code: \_\_\_\_\_

Did you have nausea, or vomiting and/or 3 or more diarrheal (loose) stools /day from April 18 through May 3? Y/ N

*(If "NO" then skip to Section B, Exposure History)*

May. 17. 2002 2:29AM

No. 0797 P. 3

## \*\*\*\*\*Section A: Symptoms (ILL RESPONDENTS)\*\*\*\*\*

First I want to ask you some questions about the type of illness that you had.

Onset Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Duration of symptoms (days): \_\_\_\_\_

Check all symptoms that apply AND circle the symptom that occurred first:

Vomiting	Yes/No
Abdominal cramps	Yes/No
Nausea	Yes/No
Headache	Yes/No
Sinus pain/pressure	Yes/No
Cough	Yes/No
Bloody diarrhea	Yes/No
Non-bloody diarrhea	Yes/No
Watery diarrhea	Yes/No

If patient had diarrhea, what was the maximum number of loose stools per day? \_\_\_\_\_

Fever Yes/No if yes, highest temp \_\_\_\_\_

Dehydration Yes/No

Other: \_\_\_\_\_

Did you take any over-the-counter medications for any of these symptoms? Yes/No

If yes, what medications did you take? \_\_\_\_\_

Were you ill enough to require a doctor / hospital/clinic visit? Yes/No

(If "NO" then skip to Section B: Exposure History)

## Clinical History:

Physician/hospital/nurse visit date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Name of healthcare provider or clinic: \_\_\_\_\_  
Telephone: \_\_\_\_\_

Were you hospitalized? Yes/No Hospital admission date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Hospital Name: \_\_\_\_\_

What did the doctor tell you that you had? \_\_\_\_\_

Were you treated with antibiotics? Yes/No If yes, which Rx: \_\_\_\_\_ Rx start date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Lab Specimens

Did you submit a stool sample to a doctor or the health department? \_\_\_\_ Yes \_\_\_\_ No

Collection date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Where did you leave the specimen? \_\_\_\_\_ Results: \_\_\_\_\_

## Family Members

Since you became ill has anyone else in your family been ill? Yes/No

If yes, please list the name(s) \_\_\_\_\_

May. 17. 2002 2:29AM

No. 0797 P. 4

\*\*\*\*\*Section B: Exposure History (ALL RESPONDENTS)\*\*\*\*\*

Now I need to ask you about everything that you ate or drank at the steakhouse.

Did you order an entrée? Which one: \_\_\_\_\_

Please identify which items you ate off the buffet:

**SALAD BAR/COLD BAR**

FRESH ORANGE	Y/N	MARGARINE	Y/N	BEEF GRAVY	Y/N
FRESH HONEYDEW MELON	Y/N	IMITATION BACON BITS	Y/N	FETTUCINI PASTA	Y/N
FRESH KIWI FRUIT	Y/N	FRUIT SALAD	Y/N	SPAGHETTI PASTA	Y/N
FRESH CANTALOUPE	Y/N	SPICED APPLES	Y/N	LONG GRAIN RICE	Y/N
FRESH RED GRAPE (SEEDLESS)	Y/N	SLICED PEAR	Y/N	BEEF NOODLE SOUP	Y/N
FRESH WHITE GRAPE	Y/N	SLICED APPLE	Y/N	CHICKEN NOODLE SOUP	Y/N
FRESH WATERMELON	Y/N	SLICED PEACHES	Y/N	TOMATO SOUP	Y/N
FRESH BANANA	Y/N	PINEAPPLE TIDBITS	Y/N	CLAM CHOWDER	Y/N
FRESH RED GRAPEFRUIT	Y/N	CRUSHED PINEAPPLE	Y/N	COOKED MEATBALL	Y/N
FRESH STRAWBERRY	Y/N	MANDARIN ORANGE	Y/N	SHORT BEEF RIB	Y/N
FRESH RED SEEDLESS GRAPE	Y/N	GREAT NORTHERN BEANS	Y/N	SALISBURY STEAK	Y/N
FRESH LEMON	Y/N	THREE BEAN SALAD	Y/N	CARVING HAM	Y/N
FRESH PINEAPPLE	Y/N	FRESH SAURKRAUT	Y/N	DICED HAM/TURKEY	Y/N
FRESH LEMON (FANCY)	Y/N	SALAD DRESSINGS:		TURKEY CORN DOG	Y/N
ICEBERG LETTUCE LINER	Y/N	FRENCH	Y/N	BONELESS PORK BUTT	Y/N
FRESH SALAD MIX (COLORED)	Y/N	ITALIAN	Y/N	FAT BACK PORK	Y/N
YELLOW ONION	Y/N	RANCH	Y/N	FRESH CHICKEN	Y/N
FRESH CHERRY TOMATOES	Y/N	THOUSAND ISLAND	Y/N	SKINLESS TURKEY BREAST	Y/N
FRESH CAULIFLOWER	Y/N	OTHER: _____	Y/N	ROTISERIE TURKEY BREAST	Y/N
FRESH CABBAGE	Y/N			FRESH OYSTERS	Y/N
FRESH MUSHROOM	Y/N	<b>HOT BAR</b>		IMITATION SHRIMP/CRAB	Y/N
FRESH TOMATO SLICES	Y/N	WHOLE WHITE POTATO	Y/N	BREADED CATFISH	Y/N
FRESH CUCUMBER	Y/N	SWEET POTATO	Y/N	CRAB CAKE	Y/N
FRESH BELL PEPPER	Y/N	PINTO BEANS	Y/N	TOMATO, MACARONI, & BEEF	Y/N
FRESH GREEN ONION	Y/N	SLICED BEET	Y/N	MACARONI AND CHEESE	Y/N
FRESH CARROT	Y/N	KETCHUP	Y/N	CHICKEN AND NOODLES	Y/N
FRESH RED PEPPER	Y/N	GOLDEN HOMINY	Y/N	RICE/ CHEESE/BROCCOLI	
FRESH GRAPE TOMATO	Y/N	BLACKEYE PEAS	Y/N	CASSEROLE	Y/N
FRESH BROCCOLI	Y/N	VEGETABLE STEW	Y/N	MACARONI & CHEESE	Y/N
FRESH BELL PEPPER	Y/N	MIXED VEGETABLES	Y/N	TOMATO & PORK BBQ	Y/N
FRESH MACARONI SALAD	Y/N	MUSHROOMS	Y/N	MEATLOAF	Y/N
FRESH SOUTHERN MUSTARD		GREEN BEANS	Y/N	CHICKEN AND DUMPLINGS	Y/N
POTATO SALAD	Y/N	PINTO BEANS	Y/N	WHITE CHEDDER	
FRESH DELI MUSTARD		SPINACH	Y/N	CHEESE PASTA	Y/N
POTATO SALAD	Y/N	CHICKEN AND DUMPLINGS	Y/N	CHICKEN ON A STICK	Y/N
FRESH COLE SLAW SHREDDED	Y/N	GREEN BEANS	Y/N	POTATO AND LEEK SOUP	Y/N
PENNE PRIMO SALAD	Y/N	CHILI W/ BEANS	Y/N	MACARONI & CHEESE	Y/N
COTTAGE CHEESE	Y/N	MASHED POTATO	Y/N	ALL MEAT CHILI	Y/N
EGG & CHICKEN SALAD	Y/N	AJUS GRAVY	Y/N	FRICASSEE CHICKEN	Y/N

# EXHIBIT A

Score: 95 + 0 = 95  
Final Score

N.C. Department of Environment and Natural Resources  
Division of Environmental Health

Current Identification Number

Health Department

# INSPECTION OF RESTAURANT OR OTHER FOODHANDLING ESTABLISHMENT

Old ID Number (if status I or T)

Status Code: A

Date of Inspection or Change

Water Supply: ☒ Community ☐ Transient Non-Community  
☐ Non-Transient Non-Community ☐ Non-Public Water Supply

Water sample taken today? ☐ Yes ☒ No  
☐ Name Change ☐ Re-Inspection  
☒ Inspection ☐ Verification of Closure

Wastewater System: ☒ Community ☐ On-Site System

Name of Establishment: Western Diggins Steak House Permittee: Harold Allen

Street Address: Hwy 226 Mailing Address (if different):

City: Spencer Pine State: NC Zip: 28777

City: State: Zip:

## FOOD SOURCES [2608; .2612; .2615; .2622]

1. Food from approved sources, no spoilage, adulteration, contamination

5 2.5

## FOOD PROTECTION [2609; .2610; .2611; .2612; .2613; .2614; .2622; .2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation

5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage

5 2.5

4. Food not re-served

5 2.5

5. Thermometers provided, accurate, available

3 1.5

6. Appropriate written notice of clean plates

1 .5

7. Dry foods stored properly and labeled accordingly

2 1

## SONNEL [2609(c); .2616]

8. Personnel with infections or communicable diseases restricted

5 2.5

9. Proper handwashing, good hygienic practices

5 2.5

10. Clean clothes, hair restraints

1 .5

## EQUIPMENT AND UTENSILS [2612; .2613; .2617; .2618; .2619; .2620; .2621; .2622; .2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided

5 2.5

12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used

3 1.5

13. Food contact surfaces clean and in good repair

3 1.5

14. Food service equipment NSF or equal, utensils approved

2 1

15. Air-drying, storage and handling of clean equipment and utensils

3 1.5

16. Single service articles properly stored and handled

2 1

17. Non-food contact surfaces clean and in good repair

2 1

## WATER SUPPLY [2618; .2623]

18. Source in accordance with 15A NCAC 18A .1700; Hot and cold water under pressure, meets temperature requirements

5 2.5

19. No cross-connections or other potential sources of contamination

5 2.5

## LAVATORY AND TOILET FACILITIES [2609(c); .2624; .2625]

20. Approved, accessible, in good repair

4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs

2 1

## WASTE DISPOSAL [2612; .2613; .2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system

5 2.5

23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

2 1

## ANIMALS AND PEST CONTROL [2610; .2629; .2633]

24. Animal or pests presence

4 2

25. Doors self-closing where required; all windows screened

2 1

26. Pests breeding places or rodent harborage

1 .5

## FLOORS, WALLS AND CEILINGS [2613; .2624(a); .2627; .2628]

27. Properly constructed

2 1

28. Clean, maintained in good repair

1 .5

## LIGHTING AND VENTILATION [2630; .2631]

29. Meets illumination requirements; shielded

1 .5

30. Ventilation clean, in good repair

1 .5

## STORAGE SPACES AND OTHER [2620(d); .2632; .2633]

31. Toxic substances properly stored and marked

5 2.5

32. Outside premises clean and storage spaces clean

1 .5

33. Not used for domestic purposes

1 .5

34. Linen properly handled, stored

1 .5

TOTAL DEDUCTIONS

9.5

Inspection Conducted by

DENR 4007 (Revised 9/98)

Environmental Health Services Section (Review 4/01)

Signature of Report Recipient

EHS ID#

042

Comment Sheet Attached

☐ Yes ☒ No

Score: 93 + 0 = 93  
[2609(b)] Final Score

N.C. Department of Environment and Natural Resources

Division of Environmental Health

INSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENT

Current Identification Number  
6101010060  
Old ID Number (if status I or T)  
3113100  
Date of Inspection or Change

Status Code: A

Water Supply: ☒ Community ☐ Transient Non-Community  
☒ Non-Transient Non-Community ☐ Non-Public Water Supply

Water sample taken today? ☐ Yes ☒ No  
☐ Name Change ☐ Re-Inspection  
☒ Inspection ☐ Verification of Closure

Wastewater System: ☒ Community ☐ On-Site System

Name of Establishment: Western Singlin's Steak House

Permittee: Harold Allen

Street Address: 223 Spruce Pine Shopping Center

Mailing Address  
(if different):

City: Spruce Pine State: NC Zip: 28777

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

FOOD SOURCES [2608; 2612; 2615; 2622]

1. Food from approved sources, no spoilage, adulteration, contamination 5 2.5

FOOD PROTECTION [2609; 2610; 2611; 2612; 2613; 2614; 2622; 2632]

2. Potentially hazardous food meets temperature and/or time requirements 5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, 5 2.5

transported to prevent contamination, adulteration, spoilage

4. Food not re-served 5 2.5

5. Thermometers provided, accurate, available 3 1.5

6. Appropriate written notice of clean plates 1 .5

7. Dry foods stored properly and labeled accordingly 2 1

1. SONNEL [2609(c); 2616]

8. Personnel with infections or communicable diseases restricted 5 2.5

9. Proper handwashing, good hygienic practices 5 2.5

10. Clean clothes, hair restraints 1 .5

EQUIPMENT AND UTENSILS [2612; 2613; 2617; 2618; 2619; 2620; 2621; 2622; 2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing 5 2.5

12. Approved utensil-washing facilities of sufficient size, with accurate 3 1.5

thermometers and test kits available and used

13. Food contact surfaces clean and in good repair 3 1.5

14. Food service equipment NSF or equal, utensils approved 2 1

15. Air-drying, storage and handling of clean equipment and utensils 3 1.5

16. Single service articles properly stored and handled 2 1

17. Non-food contact surfaces clean and in good repair 2 1

WATER SUPPLY [2618; 2623]

18. Source in accordance with 15A NCAC 18A .1700; Hot and cold water under 5 2.5

pressure, meets temperature requirements

19. No cross-connections or other potential sources of contamination 5 2.5

LATORY AND TOILET FACILITIES [2609(c); 2624; 2625]

20. Approved, accessible, in good repair 4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, 2 1

soap, towels, dryer, signs

WASTE DISPOSAL [2612; 2613; 2626]

22. Wastewater discharged into approved, properly operating wastewater 5 2.5

treatment and disposal system

23. Garbage cans, containerized systems properly maintained, cleaning facilities 2 1

provided or contract maintained for cleaning

ANIMALS AND PEST CONTROL [2610; 2629; 2633]

24. Animal or pests presence 4 2

25. Doors self-closing where required; all windows screened 2 1

26. Pests breeding places or rodent harborages 1 .5

FLOORS, WALLS AND CEILINGS [2613; 2624(a); 2627; 2628]

27. Properly constructed 2 1

28. Clean, maintained in good repair 1 .5

LIGHTING AND VENTILATION [2630; 2631]

29. Meets illumination requirements; shielded 1 .5

30. Ventilation clean, in good repair 1 .5

STORAGE SPACES AND OTHER [2620(d); 2632; 2633]

31. Toxic substances properly stored and marked 5 2.5

32. Outside premises clean and storage spaces clean 1 .5

33. Not used for domestic purposes 1 .5

34. Linen properly handled, stored 1 .5

TOTAL DEDUCTIONS 7

Comments

① Everyone in kitchen area must wear hair restraints.

② Test kits for Sanitizing Solution

③ Riddle and screens need cleaning

④ Bottoms of Coolers, make as coolers

⑤ Toilets need cleaning

⑥ Clean under equipment needs cleaning

⑦ Ventilation over grill needs cleaning

⑧ Storage Areas, need cleaning, old equipment gotten rid of

Inspection Conducted by: John K. Schuler

EHS I.D. # 11216

Comment Sheet Attached

DENR 4007 (Revised 9/98)

Environmental Health Services Section (Review 4/01)

Signature of Report Recipient Victoria Sullivan

☐ Yes ☒ No

Score: 100 + 0 = 100  
Final Score

N.C. Department of Environment and Natural Resources  
Division of Environmental Health

INSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENT

Current Identification Number

Old ID Number (if status I or T)

Date of Inspection or Change

Health Department

Status Code: I

Water Supply: ☒ Community ☐ Transient Non-Community  
☐ Non-Transient Non-Community ☐ Non-Public Water Supply

Water sample taken today? ☐ Yes ☒ No  
☐ Name Change ☐ Re-Inspection  
☒ Inspection ☐ Verification of Closure

Wastewater System: ☒ Community ☐ On-Site System

Name of Establishment: Western Sizzlin Steak House

Permittee:

Street Address: 11961 S 226th Hwy

Mailing Address  
(if different):

City: Spring Pine State: NC Zip: 29779

City:  State:  Zip:

FOOD SOURCES [.2608; .2612; .2615; .2622]

1. Food from approved sources, no spoilage, adulteration, contamination 5 2.5

FOOD PROTECTION [.2609; .2610; .2611; .2612; .2613; .2614; .2622; .2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation 5 2.5  
3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage 5 2.5  
4. Food not re-served 5 2.5  
5. Thermometers provided, accurate, available 3 1.5  
6. Appropriate written notice of clean plates 1 .5  
Dry foods stored properly and labeled accordingly 2 1

PERSONNEL [.2609(c); .2616]

8. Personnel with infections or communicable diseases restricted 5 2.5  
9. Proper handwashing, good hygienic practices 5 2.5  
10. Clean clothes, hair restraints 1 .5

EQUIPMENT AND UTENSILS [.2612; .2613; .2617; .2618; .2619; .2620; .2621; .2622; .2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided 5 2.5  
12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used 3 1.5  
13. Food contact surfaces clean and in good repair 3 1.5  
14. Food service equipment NSF or equal, utensils approved 2 1  
15. Air-drying, storage and handling of clean equipment and utensils 3 1.5  
16. Single service articles properly stored and handled 2 1  
17. Non-food contact surfaces clean and in good repair 2 1

WATER SUPPLY [.2618; .2623]

18. Source in accordance with 15A NCAC 18A .1700; Hot and cold water under pressure, meets temperature requirements 5 2.5  
19. No cross-connections or other potential sources of contamination 5 2.5

ATORY AND TOILET FACILITIES [.2609(c); .2624; .2625]

20. Approved, accessible, in good repair 4 2  
21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs 2 1

WASTE DISPOSAL [.2612; .2613; .2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system 5 2.5  
23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning 2 1

ANIMALS AND PEST CONTROL [.2610; .2629; .2633]

24. Animal or pests presence 4 2  
25. Doors self-closing where required; all windows screened 2 1  
26. Pests breeding places or rodent harborages 1 .5

FLOORS, WALLS AND CEILINGS [.2613; .2624(a); .2627; .2628]

27. Properly constructed 2 1  
28. Clean, maintained in good repair 1 .5

LIGHTING AND VENTILATION [.2630; .2631]

29. Meets illumination requirements; shielded 1 .5  
30. Ventilation clean, in good repair 1 .5

STORAGE SPACES AND OTHER [.2620(d); .2632; .2633]

31. Toxic substances properly stored and marked 5 2.5  
32. Outside premises clean and storage spaces clean 1 .5  
33. Not used for domestic purposes 1 .5  
34. Linen properly handled, stored 1 .5

TOTAL DEDUCTIONS

Comments

Inspection Conducted by: Robert L. Lister

EHS I.D. # PT#1726 Comment Sheet Attached

DENR 4007 (Revised 9/98)

Environmental Health Services Section (Review 4/01)

Signature of Report Recipient

☐ Yes ☒ No



Score: 95.5 + 2 = 97.5  
[2606(b)] Final Score  
Health Department

N.C. Department of Environment and Natural Resources  
Division of Environmental Health

INSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENT

Current Identification Number  
01061010065  
Old ID Number (if status I or T)  
9125/00  
Date of Inspection or Change

Status Code: A

Water Supply: ☒ Community ☒ Transient Non-Community  
☒ Non-Transient Non-Community ☒ Non-Public Water Supply

Water sample taken today? ☐ Yes ☒ No  
☐ Name Change ☐ Re-Inspection  
☒ Inspection ☐ Verification of Closure

Wastewater System: ☒ Community ☒ On-Site System  
Name of Establishment: Western Kebab Steak House

Permittee: Dan R. King

Street Address: 11961 Spruce Pine Shopping Center

Mailing Address  
(if different):

City: Spruce Pine State: NC Zip: 28777

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

FOOD SOURCES [.2608; .2612; .2615; .2622]

1. Food from approved sources, no spoilage, adulteration, contamination

Deduction  
Full/half  
(Circle One)  
5 2.5

Comments

FOOD PROTECTION [.2609; .2610; .2611; .2612; .2613; .2614; .2622; .2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation

5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage

5 2.5

4. Food not re-served

5 2.5

5. Thermometers provided, accurate, available

3 1.5

6. Appropriate written notice of clean plates

1 .5

7. Dry foods stored properly and labeled accordingly

2 1

PERSONNEL [.2609(c); .2616]

8. Personnel with infectious or communicable diseases restricted

5 2.5

9. Proper handwashing, good hygienic practices

5 2.5

10. Clean clothes, hair restraints

1 .5

EQUIPMENT AND UTENSILS [.2612; .2613; .2617; .2618; .2619; .2620; .2621; .2622; .2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided

5 2.5

12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used

3 1.5

13. Food contact surfaces clean and in good repair

3 1.5

14. Food service equipment NSF or equal, utensils approved

2 1

15. Air-drying, storage and handling of clean equipment and utensils

3 1.5

16. Single service articles properly stored and handled

2 1

17. Non-food contact surfaces clean and in good repair

2 1

WATER SUPPLY [.2618; .2623]

18. Source in accordance with 15A NCAC 18A .1700; Hot and cold water under pressure, meets temperature requirements

5 2.5

19. No cross-connections or other potential sources of contamination

5 2.5

LATORY AND TOILET FACILITIES [.2609(c); .2624; .2625]

20. Approved, accessible, in good repair

4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs

2 1

WASTE DISPOSAL [.2612; .2613; .2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system

5 2.5

23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

2 1

ANIMALS AND PEST CONTROL [.2610; .2629; .2633]

24. Animal or pests presence

4 2

25. Doors self-closing where required; all windows screened

2 1

26. Pests breeding places or rodent harborages

1 .5

FLOORS, WALLS AND CEILINGS [.2613; .2624(a); .2627; .2628]

27. Properly constructed

2 1

28. Clean, maintained in good repair

1 .5

LIGHTING AND VENTILATION [.2630; .2631]

29. Meets illumination requirements; shielded

1 .5

30. Ventilation clean, in good repair

1 .5

STORAGE SPACES AND OTHER [.2620(d); .2632; .2633]

31. Toxic substances properly stored and marked

5 2.5

32. Outside premises clean and storage spaces clean

1 .5

33. Not used for domestic purposes

1 .5

34. Linen properly handled, stored

1 .5

TOTAL DEDUCTIONS 40.5

Inspection Conducted by: John F. Suter

EHS I.D. # 1726

Comment Sheet Attached

☐ Yes ☒ No



Score: 960 + 2 = 962  
[2606(b)] Final Score

N.C. Department of Environment and Natural Resources

Division of Environmental Health

Current Identification Number

01061010005  
Old ID Number (if status I or T)

Date of Inspection or Change

Health Department

# INSPECTION OF RESTAURANT OR OTHER FOODHANDLING ESTABLISHMENT

Status Code: A

Water Supply: ☒ Community ☒ Transient Non-Community  
☒ Non-Transient Non-Community ☐ Non-Public Water Supply

Water sample taken today? ☐ Yes ☒ No  
☐ Name Change ☐ Re-Inspection  
☒ Inspection ☐ Verification of Closure

Wastewater System: ☒ Community ☒ On-Site System

Name of Establishment: Western Sigsbee Steak House

Permittee: Darren Hines

Street Address: 11961 5226 Hwy

Mailing Address  
(if different):

City: Spencer Pine State: NC Zip: 28777

City: State: Zip:

## FOOD SOURCES [.2608; .2612; .2615; .2622]

1. Food from approved sources, no spoilage, adulteration, contamination

5 2.5

## FOOD PROTECTION [.2609; .2610; .2611; .2612; .2613; .2614; .2622; .2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation

5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage

5 2.5

4. Food not re-served

5 2.5

5. Thermometers provided, accurate, available

3 1.5

6. Appropriate written notice of clean plates

1 .5

7. Dry foods stored properly and labeled accordingly

2 1

## PERSONNEL [.2609(c); .2616]

8. Personnel with infections or communicable diseases restricted

5 2.5

9. Proper handwashing, good hygienic practices

5 2.5

10. Clean clothes, hair restraints

1 .5

## EQUIPMENT AND UTENSILS [.2612; .2613; .2617; .2618; .2619; .2620; .2621; .2622; .2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided

5 2.5

12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used

3 1.5

13. Food contact surfaces clean and in good repair

3 1.5

14. Food service equipment NSF or equal, utensils approved

2 1

15. Air-drying, storage and handling of clean equipment and utensils

3 1.5

16. Single service articles properly stored and handled

2 1

17. Non-food contact surfaces clean and in good repair

2 1

## WATER SUPPLY [.2618; .2623]

18. Source in accordance with 15A NCAC 18A .1700; Hot and cold water under pressure, meets temperature requirements

5 2.5

19. No cross-connections or other potential sources of contamination

5 2.5

## LATRINE AND TOILET FACILITIES [.2609(c); .2624; .2625]

20. Approved, accessible, in good repair

4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs

2 1

## WASTE DISPOSAL [.2612; .2613; .2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system

5 2.5

23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

2 1

## ANIMALS AND PEST CONTROL [.2610; .2629; .2633]

24. Animal or pests presence

4 2

25. Doors self-closing where required; all windows screened

2 1

26. Pests breeding places or rodent harborages

1 .5

## FLOORS, WALLS AND CEILINGS [.2613; .2624(a); .2627; .2628]

27. Properly constructed

2 1

28. Clean, maintained in good repair

1 .5

## LIGHTING AND VENTILATION [.2630; .2631]

29. Meets illumination requirements; shielded

1 .5

30. Ventilation clean, in good repair

1 .5

## STORAGE SPACES AND OTHER [.2620(d); .2632; .2633]

31. Toxic substances properly stored and marked

5 2.5

32. Outside premises clean and storage spaces clean

1 .5

33. Not used for domestic purposes

1 .5

34. Linen properly handled, stored

1 .5

TOTAL DEDUCTIONS

EHS I.D. # 17216

Inspection Conducted by: John K. Siler

DENR 4007 (Revised 9/98)

Environmental Health Services Section (Review 4/01)

Signature of Report Recipient

Comment Sheet Attached

☐ Yes ☒ No

Score: 97.5 + 0 = 97.5  
[2606(b)] Final Score

N.C. Department of Environment and Natural Resources  
Division of Environmental Health

Current Identification Number

Old ID Number (if status I or T)

Date of Inspection or Change

**INSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENT**

Health Department

Status Code: A

Water Supply: ☒ Community ☐ Transient Non-Community  
☐ Non-Transient Non-Community ☐ Non-Public Water Supply

Water sample taken today? ☐ Yes ☒ No  
☐ Name Change ☐ Re-Inspection  
☒ Inspection ☐ Verification of Closure

Wastewater System: ☒ Community ☐ On-Site System

Name of Establishment: Western Sign & Steel House

Permittee: Dennis King

Street Address: 119615 226 Hwy

Mailing Address  
(if different):

City: Spencer Pk State: NC Zip: 28777

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**FOOD SOURCES [2608; 2612; 2615; 2622]**

1. Food from approved sources, no spoilage, adulteration, contamination

5 2.5

**FOOD PROTECTION [2609; 2610; 2611; 2612; 2613; 2614; 2622; 2632]**

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation

5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage

5 2.5

4. Food not re-served

5 2.5

5. Thermometers provided, accurate, available

3 1.5

6. Appropriate written notice of clean plates

1 .5

Dry foods stored properly and labeled accordingly

2 1

**PERSONNEL [2609(c); 2616]**

8. Personnel with infections or communicable diseases restricted

5 2.5

9. Proper handwashing, good hygienic practices

5 2.5

10. Clean clothes, hair restraints

1 .5

**EQUIPMENT AND UTENSILS [2612; 2613; 2617; 2618; 2619; 2620; 2621; 2622; 2632(b)]**

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided

5 2.5

12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used

3 1.5

13. Food contact surfaces clean and in good repair

3 1.5

14. Food service equipment NSF or equal, utensils approved

2 1

15. Air-drying, storage and handling of clean equipment and utensils

3 1.5

16. Single service articles properly stored and handled

2 1

17. Non-food contact surfaces clean and in good repair

2 1

**WATER SUPPLY [2618; 2623]**

18. Source in accordance with 15A NCAC 18A.1700; Hot and cold water under pressure, meets temperature requirements

5 2.5

19. No cross-connections or other potential sources of contamination

5 2.5

**LATORY AND TOILET FACILITIES [2609(c); 2624; 2625]**

20. Approved, accessible, in good repair

4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs

2 1

**WASTE DISPOSAL [2612; 2613; 2626]**

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system

5 2.5

23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

2 1

**ANIMALS AND PEST CONTROL [2610; 2629; 2633]**

24. Animal or pests presence

4 2

25. Doors self-closing where required; all windows screened

2 1

26. Pests breeding places or rodent harborages

1 .5

**FLOORS, WALLS AND CEILINGS [2613; 2624(a); 2627; 2628]**

27. Properly constructed

2 1

28. Clean, maintained in good repair

1 .5

**LIGHTING AND VENTILATION [2630; 2631]**

29. Meets illumination requirements; shielded

1 .5

30. Ventilation clean, in good repair

1 .5

**STORAGE SPACES AND OTHER [2620(d); 2632; 2633]**

31. Toxic substances properly stored and marked

5 2.5

32. Outside premises clean and storage spaces clean

1 .5

33. Not used for domestic purposes

1 .5

34. Linen properly handled, stored

1 .5

**TOTAL DEDUCTIONS**

4.5

**Comments**

Re-inspection at 1200, Re-inspection at 1300

Storage of all the floor in large

Plaster clean in all areas

Re-inspection and re-inspection and clean

As the kitchen is clean - no more work

Inspection Conducted by: John K. Wilson

EHS I.D. # 17216

Comment Sheet Attached

DENR 4007 (Revised 9/98)

Environmental Health Services Section (Review 4/01)

Signature of Report Recipient Dennis King

☐ Yes ☒ No

Score: 96.0 + 2 = 98.0  
[2609(b)] Final Score  
Health Department

N.C. Department of Environment and Natural Resources  
Division of Environmental Health

INSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENT

Current Identification Number  
01061010069  
Old ID Number (if status I or T)  
612101  
Date of Inspection or Change

Status Code: A

Water Supply: ☒ Community ☒ Transient Non-Community  
☒ Non-Transient Non-Community ☒ Non-Public Water Supply

Water sample taken today? ☐ Yes ☒ No  
☐ Name Change ☐ Re-Inspection  
☒ Inspection ☐ Verification of Closure

Wastewater System: ☒ Community ☒ On-Site System

Name of Establishment: Western Supply Store House

Permittee: Debra King

Street Address: 11901 S 276 Hwy

Mailing Address  
(if different):

City: Spencer Pine State: NC Zip: 28777

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

FOOD SOURCES [2608; 2612; 2615; 2622]

1. Food from approved sources, no spoilage, adulteration, contamination

Deduction  
Full/half  
(Circle One)

5 2.5

FOOD PROTECTION [2609; 2610; 2611; 2612; 2613; 2614; 2622; 2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation

5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage

5 2.5

4. Food not re-served

5 2.5

5. Thermometers provided, accurate, available

3 1.5

6. Appropriate written notice of clean plates

1 .5

7. Dry foods stored properly and labeled accordingly

2 1

PERSONNEL [2609(c); 2616]

8. Personnel with infections or communicable diseases restricted

5 2.5

9. Proper handwashing, good hygienic practices

5 2.5

10. Clean clothes, hair restraints

1 .5

EQUIPMENT AND UTENSILS [2612; 2613; 2617; 2618; 2619; 2620; 2621; 2622; 2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided

5 2.5

12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used

3 1.5

13. Food contact surfaces clean and in good repair

3 1.5

14. Food service equipment NSF or equal, utensils approved

2 1

15. Air-drying, storage and handling of clean equipment and utensils

3 1.5

16. Single service articles properly stored and handled

2 1

17. Non-food contact surfaces clean and in good repair

2 1

WATER SUPPLY [2618; 2623]

18. Source in accordance with 15A NCAC 18A .1700; Hot and cold water under pressure, meets temperature requirements

5 2.5

19. No cross-connections or other potential sources of contamination

5 2.5

LAATORY AND TOILET FACILITIES [2609(c); 2624; 2625]

20. Approved, accessible, in good repair

4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs

2 1

WASTE DISPOSAL [2612; 2613; 2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system

5 2.5

23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

2 1

ANIMALS AND PEST CONTROL [2610; 2629; 2633]

24. Animal or pests presence

4 2

25. Doors self-closing where required; all windows screened

2 1

26. Pests breeding places or rodent harborages

1 .5

FLOORS, WALLS AND CEILINGS [2613; 2624(a); 2627; 2628]

27. Properly constructed

2 1

28. Clean, maintained in good repair

1 .5

LIGHTING AND VENTILATION [2630; 2631]

29. Meets illumination requirements; shielded

1 .5

30. Ventilation clean, in good repair

1 .5

STORAGE SPACES AND OTHER [2620(d); 2632; 2633]

31. Toxic substances properly stored and marked

5 2.5

32. Outside premises clean and storage spaces clean

1 .5

33. Not used for domestic purposes

1 .5

34. Linen properly handled, stored

1 .5

TOTAL DEDUCTIONS 4.0

Comments

17 meat cooler lids clean, backs of doors clean.

21 walls of bathroom, etc.

28 floor in good repair, clean in all areas, tiles on walls

30 Vents clean, have grill over

32 Storage space clean, neat

Inspection Conducted by: Philip K. Silvers

EHS I.D. # 1726

Comment Sheet Attached

DNHR 4007 (Revised 9/98)

Environmental Health Services Section (Review 4/01)

Signature of Report Recipient [Signature]

☐ Yes ☒ No

Score: 100 [2606(b)] Final Score

N.C. Department of Environment and Natural Resources

Division of Environmental Health

**INSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENT**

Current Identification Number  
01061010008  
Old ID Number (if status I or T)  
9/15/101  
Date of Inspection or Change

Health Department

Status Code: A

Water Supply: ☒ Community ☐ Transient Non-Community  
☐ Non-Transient Non-Community ☐ Non-Public Water Supply

Water sample taken today? ☐ Yes ☒ No  
☐ Name Change ☐ Re-Inspection  
☒ Inspection ☐ Verification of Closure

Wastewater System: ☒ Community ☐ On-Site System

Name of Establishment: Mountain Ridge

Permittee: Danica King

Street Address: 11941 S. 226 Hwy

Mailing Address  
(if different):

City: Spencer Pine State: NC Zip: 29577

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**FOOD SOURCES** [.2608; .2612; .2615; .2622]

1. Food from approved sources, no spoilage, adulteration, contamination

Deduction  
Full/half  
(Circle One)  
5 2.5

**FOOD PROTECTION** [.2609; .2610; .2611; .2612; .2613; .2614; .2622; .2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation

5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage

5 2.5

4. Food not re-served

5 2.5

5. Thermometers provided, accurate, available

3 1.5

6. Appropriate written notice of clean plates

1 .5

7. Dry foods stored properly and labeled accordingly

2 1

1. SONNEL [.2609(c); .2616]

8. Personnel with infections or communicable diseases restricted

5 2.5

9. Proper handwashing, good hygienic practices

5 2.5

10. Clean clothes, hair restraints

1 .5

**EQUIPMENT AND UTENSILS** [.2612; .2613; .2617; .2618; .2619; .2620; .2621; .2622; .2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided

5 2.5

12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used

3 1.5

13. Food contact surfaces clean and in good repair

3 1.5

14. Food service equipment NSF or equal, utensils approved

2 1

15. Air-drying, storage and handling of clean equipment and utensils

3 1.5

16. Single service articles properly stored and handled

2 1

17. Non-food contact surfaces clean and in good repair

2 1

**WATER SUPPLY** [.2618; .2623]

18. Source in accordance with 15A NCAC 18A .1700; Hot and cold water under pressure, meets temperature requirements

5 2.5

19. No cross-connections or other potential sources of contamination

5 2.5

**LATORY AND TOILET FACILITIES** [.2609(c); .2624; .2625]

20. Approved, accessible, in good repair

4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs

2 1

**WASTE DISPOSAL** [.2612; .2613; .2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system

5 2.5

23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

2 1

**ANIMALS AND PEST CONTROL** [.2610; .2629; .2633]

24. Animal or pests presence

4 2

25. Doors self-closing where required; all windows screened

2 1

26. Pests breeding places or rodent harborages

1 .5

**FLOORS, WALLS AND CEILINGS** [.2613; .2624(a); .2627; .2628]

27. Properly constructed

2 1

28. Clean, maintained in good repair

1 .5

**LIGHTING AND VENTILATION** [.2630; .2631]

29. Meets illumination requirements; shielded

1 .5

30. Ventilation clean, in good repair

1 .5

**STORAGE SPACES AND OTHER** [.2620(d); .2632; .2633]

31. Toxic substances properly stored and marked

5 2.5

32. Outside premises clean and storage spaces clean

1 .5

33. Not used for domestic purposes

1 .5

34. Linen properly handled, stored

1 .5

TOTAL DEDUCTIONS 20

EHS I.D. # 17212

Comment Sheet Attached

Inspection Conducted by: John A. Silver

DENR 4007 (Revised 9/98)

Environmental Health Services Section (Review 4/01)

Signature of Report Recipient [Signature]

☐ Yes ☒ No

Score: 97.5 20 = 97.5  
2606(b) Final Score

Health Department

Status Code: A

N.C. Department of Environment and Natural Resources  
Division of Environmental Health

# INSPECTION OF RESTAURANT OR OTHER FOODHANDLING ESTABLISHMENT

Current Identification Number  
01061010068  
Old ID Number (if status I or T)  
12119101  
Date of Inspection or Change

Water Supply: ☒ Community ☐ Transient Non-Community  
☐ Non-Transient Non-Community ☐ Non-Public Water Supply

Water sample taken today? ☐ Yes ☒ No  
☐ Name Change ☐ Re-Inspection  
☒ Inspection ☐ Verification of Closure

Wastewater System: ☒ Community ☐ On-Site System

Name of Establishment: Western Sausage

Permittee: Narson King

Street Address: 11961 S 226 Hwy

Mailing Address  
(if different):

City: Apex Pine State: NC Zip: 28777

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## FOOD SOURCES [2608; 2612; 2615; 2622]

1. Food from approved sources, no spoilage, adulteration, contamination

Deduction  
Full/half  
(Circle One)  
5 2.5

## Comments

## FOOD PROTECTION [2609; 2610; 2611; 2612; 2613; 2614; 2622; 2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation

5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage

5 2.5

4. Food not re-served

5 2.5

5. Thermometers provided, accurate, available

3 1.5

6. Appropriate written notice of clean plates

1 .5

Dry foods stored properly and labeled accordingly

2 1

## PERSONNEL [2609(c); 2616]

8. Personnel with infections or communicable diseases restricted

5 2.5

9. Proper handwashing, good hygienic practices

5 2.5

10. Clean clothes, hair restraints

1 .5

## EQUIPMENT AND UTENSILS [2612; 2613; 2617; 2618; 2619; 2620; 2621; 2622; 2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided

5 2.5

12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used

3 1.5

13. Food contact surfaces clean and in good repair

3 1.5

14. Food service equipment NSF or equal, utensils approved

2 1

15. Air-drying, storage and handling of clean equipment and utensils

3 1.5

16. Single service articles properly stored and handled

2 1

17. Non-food contact surfaces clean and in good repair

2 1

17 microwave clean top of meat cooler in kitchen

## WATER SUPPLY [2618; 2623]

18. Source in accordance with 15A NCAC 18A.1700; Hot and cold water under pressure, meets temperature requirements

5 2.5

19. No cross-connections or other potential sources of contamination

5 2.5

## L. TORY AND TOILET FACILITIES [2609(c); 2624; 2625]

20. Approved, accessible, in good repair

4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs

2 1

## WASTE DISPOSAL [2612; 2613; 2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system

5 2.5

23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

2 1

## ANIMALS AND PEST CONTROL [2610; 2629; 2633]

24. Animal or pests presence

4 2

25. Doors self-closing where required; all windows screened

2 1

26. Pests breeding places or rodent harborages

1 .5

## FLOORS, WALLS AND CEILINGS [2613; 2624(a); 2627; 2628]

27. Properly constructed

2 1

28. Clean, maintained in good repair

1 .5

27 floors in good repair in all areas

28 floors clean in all areas

## LIGHTING AND VENTILATION [2630; 2631]

29. Meets illumination requirements; shielded

1 .5

30. Ventilation clean, in good repair

1 .5

## STORAGE SPACES AND OTHER [2620(d); 2632; 2633]

31. Toxic substances properly stored and marked

5 2.5

32. Outside premises clean and storage spaces clean

1 .5

33. Not used for domestic purposes

1 .5

34. Linen properly handled, stored

1 .5

TOTAL DEDUCTIONS

2.5

Inspection Conducted by: John K. L. L.

EHS I.D. # 17210

Comment Sheet Attached

DENR 4007 (Revised 9/98)

Environmental Health Services Section (Review 4/01)

Signature of Report Recipient [Signature]

☐ Yes ☒ No



Score: 97.5 + 2 = 99.5  
Final Score  
Health Department

N.C. Department of Environment and Natural Resources  
Division of Environmental Health

INSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENT

Current Identification Number  
01061010068  
Old ID Number (if status I or T)  
2121102  
Date of Inspection or Change

Status Code: A

Water Supply: ☒ Community ☐ Transient Non-Community  
☐ Non-Transient Non-Community ☐ Non-Public Water Supply

Water sample taken today? ☐ Yes ☒ No  
☐ Name Change ☐ Re-Inspection  
☒ Inspection ☐ Verification of Closure

Wastewater System: ☒ Community ☐ On-Site System

Name of Establishment: Western Express

Permittee: Darren King

Street Address: 11961 S 226 Hwy

Mailing Address  
(if different):

City: Spruce Pine State: NC Zip: 28707

City: State: Zip:

FOOD SOURCES [2608; 2612; 2615; 2622]

1. Food from approved sources, no spoilage, adulteration, contamination

5 2.5

FOOD PROTECTION [2609; 2610; 2611; 2612; 2613; 2614; 2622; 2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation

5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage

5 2.5

4. Food not re-served

5 2.5

5. Thermometers provided, accurate, available

3 1.5

6. Appropriate written notice of clean plates

1 .5

7. Dry foods stored properly and labeled accordingly

2 1

PERSONNEL [2609(c); 2616]

8. Personnel with infections or communicable diseases restricted

5 2.5

9. Proper handwashing, good hygienic practices

5 2.5

10. Clean clothes, hair restraints

1 .5

EQUIPMENT AND UTENSILS [2612; 2613; 2617; 2618; 2619; 2620; 2621; 2622; 2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided

5 2.5

12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used

3 1.5

13. Food contact surfaces clean and in good repair

3 1.5

14. Food service equipment NSF or equal, utensils approved

2 1

15. Air-drying, storage and handling of clean equipment and utensils

3 1.5

16. Single service articles properly stored and handled

2 1

17. Non-food contact surfaces clean and in good repair

2 1

WATER SUPPLY [2618; 2623]

18. Source in accordance with 15A NCAC 18A .1700; Hot and cold water under pressure, meets temperature requirements

5 2.5

19. No cross-connections or other potential sources of contamination

5 2.5

LATRY AND TOILET FACILITIES [2609(c); 2624; 2625]

20. Approved, accessible, in good repair

4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs

2 1

WASTE DISPOSAL [2612; 2613; 2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system

5 2.5

23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

2 1

ANIMALS AND PEST CONTROL [2610; 2629; 2633]

24. Animal or pests presence

4 2

25. Doors self-closing where required; all windows screened

2 1

26. Pests breeding places or rodent harborages

1 .5

FLOORS, WALLS AND CEILINGS [2613; 2624(a); 2627; 2628]

27. Properly constructed

2 1

28. Clean, maintained in good repair

1 .5

LIGHTING AND VENTILATION [2630; 2631]

29. Meets illumination requirements; shielded

1 .5

30. Ventilation clean, in good repair

1 .5

STORAGE SPACES AND OTHER [2620(d); 2632; 2633]

31. Toxic substances properly stored and marked

5 2.5

32. Outside premises clean and storage spaces clean

1 .5

33. Not used for domestic purposes

1 .5

34. Linen properly handled, stored

1 .5

TOTAL DEDUCTIONS

2.5

Inspection Conducted by:

John K. Johnson

EHS I.D. # 1726

Comment Sheet Attached

☐ Yes ☒ No

**Questionnaire for Salmonellosis Outbreak- April, 2002**

Interviewer Initials: \_\_\_\_\_ Interview Date: \_\_\_\_\_

Respondent's name: \_\_\_\_\_

What day and time did you arrive at the steakhouse? Date: \_\_/\_\_/\_\_ Time: \_\_\_\_\_ am/pm

Race/Ethnicity: ☐ White, non-Hispanic ☐ Black, non-Hispanic ☐ Asian/Pacific Islander  
☐ American Indian/Alaska native ☐ Hispanic ☐ Unknown

Respondent's sex (circle one): M / F Respondent's date of birth: \_\_/\_\_/\_\_

Work phone number: \_\_\_\_\_ Home phone number: \_\_\_\_\_

Home street address (no P.O. box #s): \_\_\_\_\_

City: \_\_\_\_\_ Zip code: \_\_\_\_\_

Did you have nausea, or vomiting and/or 3 or more diarrheal (loose) stools /day from April 18 through May 3? Y/N

*(If "NO" then skip to Section B, Exposure History)*

\*\*\*\*\*Section A: Symptoms (ILL RESPONDENTS) \*\*\*\*\*

First I want to ask you some questions about the type of illness that you had.

Onset Date: \_\_\_/\_\_\_/\_\_\_ Duration of symptoms (days): \_\_\_\_\_

Check all symptoms that apply AND circle the symptom that occurred first:

Vomiting Yes/No  
 Abdominal cramps Yes/No  
 Nausea Yes/No  
 Headache Yes/No  
 Sinus pain/pressure Yes/No  
 Cough Yes/No  
 Bloody diarrhea Yes/No  
 Non-bloody diarrhea Yes/No  
 Watery diarrhea Yes/No

If patient had diarrhea, what was the maximum number of loose stools per day? \_\_\_\_\_

Fever Yes/No if yes, highest temp \_\_\_\_\_

Dehydration Yes/No

Other: \_\_\_\_\_

Did you take any over-the-counter medications for any of these symptoms? Yes/No

If yes, what medications did you take? \_\_\_\_\_

Were you ill enough to require a doctor / hospital/clinic visit? Yes/No

(If "NO" then skip to Section B: Exposure History)

**Clinical History:**

Physician/hospital/nurse visit date: \_\_\_/\_\_\_/\_\_\_ Name of healthcare provider or clinic: \_\_\_\_\_  
 Telephone: \_\_\_\_\_

Were you hospitalized? Yes/No Hospital admission date: \_\_\_/\_\_\_/\_\_\_ Hospital Name: \_\_\_\_\_

What did the doctor tell you that you had? \_\_\_\_\_

Were you treated with antibiotics? Yes/No If yes, which Rx: \_\_\_\_\_ Rx start date: \_\_\_/\_\_\_/\_\_\_

**Lab Specimens**

Did you submit a stool sample to a doctor or the health department? \_\_\_\_ Yes \_\_\_\_ No

Collection date: \_\_\_/\_\_\_/\_\_\_

Where did you leave the specimen? \_\_\_\_\_ Results: \_\_\_\_\_

**Family Members**

Since you became ill has anyone else in your family been ill? Yes/No

If yes, please list the name(s) \_\_\_\_\_



\*\*\*\*\*Section B: Exposure History (ALL RESPONDENTS)\*\*\*\*\*

Now I need to ask you about everything that you ate or drank at the steakhouse.

Did you order an entrée? Which one: \_\_\_\_\_

Please identify which items you ate off the buffet:

**SALAD BAR/COLD BAR**

FRESH ORANGE	Y/N	MARGARINE	Y/N	BEEF GRAVY	Y/N
FRESH HONEYDEW MELON	Y/N	IMITATION BACON BITS	Y/N	FETTUCINI PASTA	Y/N
FRESH KIWI FRUIT	Y/N	FRUIT SALAD	Y/N	SPAGHETTI PASTA	Y/N
FRESH CANTALOUPE	Y/N	SPICED APPLES	Y/N	LONG GRAIN RICE	Y/N
FRESH RED GRAPE (SEEDLESS)	Y/N	SLICED PEAR	Y/N	BEEF NOODLE SOUP	Y/N
FRESH WHITE GRAPE	Y/N	SLICED APPLE	Y/N	CHICKEN NOODLE SOUP	Y/N
FRESH WATERMELON	Y/N	SLICED PEACHES	Y/N	TOMATO SOUP	Y/N
FRESH BANANA	Y/N	PINEAPPLE TIDBITS	Y/N	CLAM CHOWDER	Y/N
FRESH RED GRAPEFRUIT	Y/N	CRUSHED PINEAPPLE	Y/N	COOKED MEATBALL	Y/N
FRESH STRAWBERRY	Y/N	MANDARIN ORANGE	Y/N	SHORT BEEF RIB	Y/N
FRESH RED SEEDLESS GRAPE	Y/N	GREAT NORTHERN BEANS	Y/N	SALISBURY STEAK	Y/N
FRESH LEMON	Y/N	THREE BEAN SALAD	Y/N	CARVING HAM	Y/N
FRESH PINEAPPLE	Y/N	FRESH SAURKRAUT	Y/N	DICED HAM/TURKEY	Y/N
FRESH LEMON (FANCY)	Y/N	SALAD DRESSINGS:		TURKEY CORN DOG	Y/N
ICEBERG LETTUCE LINER	Y/N	FRENCH	Y/N	BONELESS PORK BUTT	Y/N
FRESH SALAD MIX (COLORED)	Y/N	ITALIAN	Y/N	FAT BACK PORK	Y/N
YELLOW ONION	Y/N	RANCH	Y/N	FRESH CHICKEN	Y/N
FRESH CHERRY TOMATOES	Y/N	THOUSAND ISLAND	Y/N	SKINLESS TURKEY BREAST	Y/N
FRESH CAULIFLOWER	Y/N	OTHER: _____	Y/N	ROTISIREE TURKEY BREAST	Y/N
FRESH CABBAGE	Y/N			FRESH OYSTERS	Y/N
FRESH MUSHROOM	Y/N	<b>HOT BAR</b>		IMITATION SHRIMP/CRAB	Y/N
FRESH TOMATO SLICES	Y/N	WHOLE WHITE POTATO	Y/N	BREADED CATFISH	Y/N
FRESH CUCUMBER	Y/N	SWEET POTATO	Y/N	CRAB CAKE	Y/N
FRESH BELL PEPPER	Y/N	PINTO BEANS	Y/N	TOMATO, MACARONI, & BEEF	Y/N
FRESH GREEN ONION	Y/N	SLICED BEET	Y/N	MACARONI AND CHEESE	Y/N
FRESH CARROT	Y/N	KETCHUP	Y/N	CHICKEN AND NOODLES	Y/N
FRESH RED PEPPER	Y/N	GOLDEN HOMINY	Y/N	RICE/ CHEESE/BROCCOLI	
FRESH GRAPE TOMATO	Y/N	BLACKEYE PEAS	Y/N	CASSEROLE	Y/N
FRESH BROCCOLI	Y/N	VEGETABLE STEW	Y/N	MACARONI & CHEESE	Y/N
FRESH BELL PEPPER	Y/N	MIXED VEGETABLES	Y/N	TOMATO & PORK BBQ	Y/N
FRESH MACARONI SALAD	Y/N	MUSHROOMS	Y/N	MEATLOAF	Y/N
FRESH SOUTHERN MUSTARD		GREEN BEANS	Y/N	CHICKEN AND DUMPLINGS	Y/N
POTATO SALAD	Y/N	PINTO BEANS	Y/N	WHITE CHEDDER	
FRESH DELI MUSTARD		SPINACH	Y/N	CHEESE PASTA	Y/N
POTATO SALAD	Y/N	CHICKEN AND DUMPLINGS	Y/N	CHICKEN ON A STICK	Y/N
FRESH COLE SLAW SHREDDED	Y/N	GREEN BEANS	Y/N	POTATO AND LEEK SOUP	Y/N
PENNE PRIMO SALAD	Y/N	CHILI W/ BEANS	Y/N	MACARONI & CHEESE	Y/N
COTTAGE CHEESE	Y/N	MASHED POTATO	Y/N	ALL MEAT CHILI	Y/N
EGG & CHICKEN SALAD	Y/N	AJUS GRVY	Y/N	FRICASSEE CHICKEN	Y/N

Score: 172 (2609(d)) = Final ScoreN.C. Department of Environment and Natural Resources  
Division of Environmental HealthCurrent Identification Number 12

Health Department

INSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENT

Old ID Number (if status I or T)

Date of Inspection or Change 12/20/00Status Code: AWater Supply: ☒ Community ☒ Transient Non-Community  
☒ Non-Transient Non-Community ☒ Non-Public Water SupplyWater sample taken today? ☐ Yes ☒ NoWastewater System: ☒ Community ☒ On-Site System☐ Name Change☐ Re-Inspection☒ Inspection☐ Verification of ClosureName of Establishment: Western Diner Steak HousePermittee: Harold GibsonStreet Address: High 226Mailing Address  
(if different):City: Apex, NC State: NC Zip: 27527

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## FOOD SOURCES [2608; 2612; 2615; 2622]

1. Food from approved sources, no spoilage, adulteration, contamination

Deduction  
Full/half  
(Circle One)  
5 2.5

## FOOD PROTECTION [2609; 2610; 2611; 2612; 2613; 2614; 2622; 2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation
- 
3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage
- 
4. Food not re-served
- 
5. Thermometers provided, accurate, available
- 
- Appropriate written notice of clean plates
- 
- Dry foods stored properly and labeled accordingly

5 2.5  
5 2.5  
5 2.5  
3 1.5  
1 .5  
2 1

## PERSONNEL [2609(c); 2616]

8. Personnel with infections or communicable diseases restricted
- 
9. Proper handwashing, good hygienic practices
- 
10. Clean clothes, hair restraints

5 2.5  
5 2.5  
1 .5

## EQUIPMENT AND UTENSILS [2612; 2613; 2617; 2618; 2619; 2620; 2621; 2622; 2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided
- 
12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used
- 
13. Food contact surfaces clean and in good repair
- 
14. Food service equipment NSF or equal, utensils approved
- 
15. Air-drying, storage and handling of clean equipment and utensils
- 
16. Single service articles properly stored and handled
- 
17. Non-food contact surfaces clean and in good repair

5 2.5  
3 1.5  
3 1.5  
2 1  
3 1.5  
2 1  
1 1

## WATER SUPPLY [2618; 2623]

18. Source in accordance with 15A NCAC 18A .1700; Hot and cold water under pressure, meets temperature requirements
- 
19. No cross-connections or other potential sources of contamination

5 2.5  
5 2.5

## L. TORY AND TOILET FACILITIES [2609(c); 2624; 2625]

20. Approved, accessible, in good repair
- 
21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs

4 2  
2 1

## WASTE DISPOSAL [2612; 2613; 2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system
- 
23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

5 2.5  
2 1

## ANIMALS AND PEST CONTROL [2610; 2629; 2633]

24. Animal or pests presence
- 
25. Doors self-closing where required; all windows screened
- 
26. Pests breeding places or rodent harborage

4 2  
2 1  
1 .5

## FLOORS, WALLS AND CEILINGS [2613; 2624(a); 2627; 2628]

27. Properly constructed
- 
28. Clean, maintained in good repair

2 1  
1 .5

## LIGHTING AND VENTILATION [2630; 2631]

29. Meets illumination requirements; shielded
- 
30. Ventilation clean, in good repair

1 .5  
1 .5

## STORAGE SPACES AND OTHER [2620(d); 2632; 2633]

31. Toxic substances properly stored and marked
- 
32. Outside premises clean and storage spaces clean
- 
33. Not used for domestic purposes
- 
34. Linen properly handled, stored

5 2.5  
1 .5  
1 .5  
1 .5TOTAL DEDUCTIONS 9.5Inspection Conducted by Ch. L. CampbellRHS ID # 0423

Comment Sheet Attached

DENR 4007 (Revised 9/98)

Environmental Health Services Section (Review 4/01) Signature of Report Recipient Harold Gibson☐ Yes ☒ No

Score: 93 + 10 = 103  
2609(b) Final ScoreN.C. Department of Environment and Natural Resources  
Division of Environmental HealthINSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENTCurrent Identification Number  
6-100101000  
Old ID Number (if status I or T)  
3113100  
Date of Inspection or ChangeStatus Code: AWater Supply: ☒ Community ☐ Transient Non-Community  
☐ Non-Transient Non-Community ☐ Non-Public Water SupplyWater sample taken today? ☐ Yes ☒ NoWastewater System: ☒ Community ☐ On-Site System☐ Name Change ☐ Re-Inspection  
☒ Inspection ☐ Verification of ClosureName of Establishment: Western Dining Steak HousePermittee: Harold AllenStreet Address: 327 Spruce Pine Shopping CenterMailing Address  
(if different):City: Spruce Pine State: NC Zip: 28777

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## FOOD SOURCES [2608; 2612; 2615; 2622]

1. Food from approved sources, no spoilage, adulteration, contamination

5 2.5

## FOOD PROTECTION [2609; 2610; 2611; 2612; 2613; 2614; 2622; 2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation

5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage

5 2.5

4. Food not re-served

5 2.5

5. Thermometers provided, accurate, available

3 1.5

- Appropriate written notice of clean plates

1 .5

- Dry foods stored properly and labeled accordingly

2 1

## PERSONNEL [2609(c); 2616]

8. Personnel with infections or communicable diseases restricted

5 2.5

9. Proper handwashing, good hygienic practices

5 2.5

10. Clean clothes, hair restraints

1 .5

## EQUIPMENT AND UTENSILS [2612; 2613; 2617; 2618; 2619; 2620; 2621; 2622; 2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided

5 2.5

12. Approved utensil washing facilities of sufficient size, with accurate thermometers and test kits available and used

3 1.5

13. Food contact surfaces clean and in good repair

3 1.5

14. Food service equipment NSF or equal, utensils approved

2 1

15. Air-drying, storage and handling of clean equipment and utensils

3 1.5

16. Single service articles properly stored and handled

2 1

17. Non-food contact surfaces clean and in good repair

2 1

## WATER SUPPLY [2618; 2623]

18. Source in accordance with 15A NCAC 18A.1700; Hot and cold water under pressure, meets temperature requirements

5 2.5

19. No cross-connections or other potential sources of contamination

5 2.5

## L. ATORY AND TOILET FACILITIES [2609(c); 2624; 2625]

20. Approved, accessible, in good repair

4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs

2 1

## WASTE DISPOSAL [2612; 2613; 2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system

5 2.5

23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

2 1

## ANIMALS AND PEST CONTROL [2610; 2629; 2633]

24. Animal or pests presence

4 2

25. Doors self-closing where required; all windows screened

2 1

26. Pests breeding places or rodent harborages

1 .5

## FLOORS, WALLS AND CEILINGS [2613; 2624(a); 2627; 2628]

27. Properly constructed

2 1

28. Clean, maintained in good repair

1 .5

## LIGHTING AND VENTILATION [2630; 2631]

29. Meets illumination requirements; shielded

1 .5

30. Ventilation clean, in good repair

1 .5

## STORAGE SPACES AND OTHER [2620(d); 2632; 2633]

31. Toxic substances properly stored and marked

5 2.5

32. Outside premises clean and storage spaces clean

1 .5

33. Not used for domestic purposes

1 .5

34. Linen properly handled, stored

1 .5

TOTAL DEDUCTIONS 7

## Comments

① Surfaces in kitchen area must wear gloves

② Test kits for sanitizing solution

③ Drills and screws need cleaning

④ Bottom of coolers, make sure rollers are

⑤ Toilets need cleaning

⑥ Clean under equipment needs cleaning

⑦ Ventilation area give more cleaning

⑧ Storage Areas need cleaning old equipment gotten rid of

Inspection Conducted by: John T. SullivanEHS I.D. # 11926

Comment Sheet Attached

DENR 4007 (Revised 9/98)  
Environmental Health Services Section (Review 4/01)Signature of Report Recipient Harold Allen☐ Yes ☒ No

Score: 100 + 0 = 100  
Final Score

Health Department

Status Code: I

N.C. Department of Environment and Natural Resources

Division of Environmental Health

INSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENT

Current Identification Number

Old ID Number (if status I or T)

Date of Inspection or Change

Water Supply: ☒ Community ☒ Transient Non-Community  
☒ Non-Transient Non-Community ☐ Non-Public Water SupplyWater sample taken today? ☐ Yes ☒ NoWastewater System: ☒ Community ☒ On-Site System☐ Name Change☐ Re-Inspection☒ Inspection☐ Verification of ClosureName of Establishment: Western Sizzlin Steak House

Permittee: \_\_\_\_\_

Street Address: 11901 S 226 Hwy

Mailing Address

(if different): \_\_\_\_\_

City: Spencer Pine State: NC Zip: 28777

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## FOOD SOURCES [2608; 2612; 2615; 2622]

1. Food from approved sources, no spoilage, adulteration, contamination

5 2.5

## FOOD PROTECTION [2609; 2610; 2611; 2612; 2613; 2614; 2622; 2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation

5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage

5 2.5

4. Food not re-served

5 2.5

Thermometers provided, accurate, available

3 1.5

Appropriate written notice of clean plates

1 .5

7. Dry foods stored properly and labeled accordingly

2 1

## PERSONNEL [2609(c); 2616]

8. Personnel with infections or communicable diseases restricted

5 2.5

9. Proper handwashing, good hygienic practices

5 2.5

10. Clean clothes, hair restraints

1 .5

## EQUIPMENT AND UTENSILS [2612; 2613; 2617; 2618; 2619; 2620; 2621; 2622; 2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided

5 2.5

12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used

3 1.5

13. Food contact surfaces clean and in good repair

3 1.5

14. Food service equipment NSF or equal, utensils approved

2 1

15. Air-drying, storage and handling of clean equipment and utensils

3 1.5

16. Single service articles properly stored and handled

2 1

17. Non-food contact surfaces clean and in good repair

2 1

## WATER SUPPLY [2618; 2623]

18. Source in accordance with 15A NCAC 18A .1700; Hot and cold water under pressure, meets temperature requirements

5 2.5

1. No cross-connections or other potential sources of contamination

5 2.5

## LAVATORY AND TOILET FACILITIES [2609(c); 2624; 2625]

20. Approved, accessible, in good repair

4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs

2 1

## WASTE DISPOSAL [2612; 2613; 2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system

5 2.5

23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

2 1

## ANIMALS AND PEST CONTROL [2610; 2629; 2633]

24. Animal or pests presence

4 2

25. Doors self-closing where required; all windows screened

2 1

26. Pests breeding places or rodent harborages

1 .5

## FLOORS, WALLS AND CEILINGS [2613; 2624(a); 2627; 2628]

27. Properly constructed

2 1

28. Clean, maintained in good repair

1 .5

## LIGHTING AND VENTILATION [2630; 2631]

29. Meets illumination requirements; shielded

1 .5

30. Ventilation clean, in good repair

1 .5

## STORAGE SPACES AND OTHER [2620(d); 2632; 2633]

31. Toxic substances properly stored and marked

5 2.5

32. Outside premises clean and storage spaces clean

1 .5

33. Not used for domestic purposes

1 .5

34. Linen properly handled, stored

1 .5

TOTAL DEDUCTIONS

Inspection Conducted by: Lloyd HiseEHS I.D. # PT41726

Comment Sheet Attached

Score: 95.5 + 2 = 97.5  
Final ScoreN.C. Department of Environment and Natural Resources  
Division of Environmental Health

Health Department

INSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENTCurrent Identification Number  
01041010065  
Old ID Number (if status I or T)  
9125/00  
Date of Inspection or ChangeStatus Code: AWater Supply: ☒ Community ☐ Transient Non-Community  
☐ Non-Transient Non-Community ☐ Non-Public Water SupplyWater sample taken today? ☐ Yes ☒ NoWastewater System: ☒ Community ☐ On-Site System☐ Name Change ☐ Re-Inspection  
☒ Inspection ☐ Verification of ClosureName of Establishment: Western Signatures Steak HousePermittee: Dan S. KingStreet Address: 11960 Spruce Pine Shopping CenterMailing Address  
(if different):City: Spruce Pine State: NC Zip: 28777

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## FOOD SOURCES [2608; 2612; 2615; 2622]

1. Food from approved sources, no spoilage, adulteration, contamination

5 2.5

## FOOD PROTECTION [2609; 2610; 2611; 2612; 2613; 2614; 2622; 2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation

5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage

5 2.5

4. Food not re-served

5 2.5

5. Thermometers provided, accurate, available

3 1.5

6. Appropriate written notice of clean plates

1 .5

7. Dry foods stored properly and labeled accordingly

2 1

## PERSONNEL [2609(c); 2616]

8. Personnel with infectious or communicable diseases restricted

5 2.5

9. Proper handwashing, good hygienic practices

5 2.5

10. Clean clothes, hair restraints

1 .5

## EQUIPMENT AND UTENSILS [2612; 2613; 2617; 2618; 2619; 2620; 2621; 2622; 2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided

5 2.5

12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used

3 1.5

13. Food contact surfaces clean and in good repair

3 1.5

14. Food service equipment NSF or equal, utensils approved

2 1

15. Air-drying, storage and handling of clean equipment and utensils

3 1.5

16. Single service articles properly stored and handled

2 1

17. Non-food contact surfaces clean and in good repair

2 1

## WATER SUPPLY [2618; 2623]

18. Source in accordance with 15A NCAC 18A .1700; Hot and cold water under pressure, meets temperature requirements

5 2.5

19. No cross-connections or other potential sources of contamination

5 2.5

## LAVATORY AND TOILET FACILITIES [2609(c); 2624; 2625]

20. Approved, accessible, in good repair

4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs

2 1

## WASTE DISPOSAL [2612; 2613; 2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system

5 2.5

23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

2 1

## ANIMALS AND PEST CONTROL [2610; 2629; 2633]

24. Animal or pests presence

4 2

25. Doors self-closing where required; all windows screened

2 1

26. Pests breeding places or rodent harborages

1 .5

## FLOORS, WALLS AND CEILINGS [2613; 2624(a); 2627; 2628]

27. Properly constructed

2 1

28. Clean, maintained in good repair

1 .5

## LIGHTING AND VENTILATION [2630; 2631]

29. Meets illumination requirements; shielded

1 .5

30. Ventilation clean, in good repair

1 .5

## STORAGE SPACES AND OTHER [2620(d); 2632; 2633]

31. Toxic substances properly stored and marked

5 2.5

32. Outside premises clean and storage spaces clean

1 .5

33. Not used for domestic purposes

1 .5

34. Linen properly handled, stored

1 .5

TOTAL DEDUCTIONS 40.5Inspection Conducted by: John E. HiseEHS I.D. # 1726

Comment Sheet Attached

Deduction  
Full/half  
(Circle One)

## Comments

② Can you drink fountain sprouts

① Packs were where you dishes  
dried needs cleaning

② Floors clean, tiles replaced

③ Vents over grill area

④ Trash area needs to be kept clean  
E.C. in damage, metal tiles  
in trash room, food trays



Score: 96.0 + 2 = 98.0  
[2606(b)] Final Score

N.C. Department of Environment and Natural Resources

Division of Environmental Health

Current Identification Number

Old ID Number (if status T or T)

Date of Inspection or Change

Health Department

INSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENTStatus Code: AWater Supply: ☒ Community ☐ Transient Non-Community☐ Non-Transient Non-Community ☐ Non-Public Water SupplyWater sample taken today? ☐ Yes ☒ No☐ Name Change☐ Re-InspectionWastewater System: ☒ Community ☐ On-Site System☒ Inspection☐ Verification of ClosureName of Establishment: Wichita Diner Steak HousePermittee: Danone WangStreet Address: 11961 3226 Hwy

Mailing Address

(if different):

City: Spencer Pine State: NC Zip: 28777

City:

State:

Zip:

## FOOD SOURCES [2608; 2612; 2615; 2622]

1. Food from approved sources, no spoilage, adulteration, contamination

5 2.5

## FOOD PROTECTION [2609; 2610; 2611; 2612; 2613; 2614; 2622; 2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation

5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage

5 2.5

4. Food not re-served

5 2.5

5. Thermometers provided, accurate, available

3 1.5

6. Appropriate written notice of clean plates

1 .5

7. Dry foods stored properly and labeled accordingly

2 1

## PERSONNEL [2609(c); 2616]

8. Personnel with infections or communicable diseases restricted

5 2.5

9. Proper handwashing, good hygienic practices

5 2.5

10. Clean clothes, hair restraints

1 .5

## EQUIPMENT AND UTENSILS [2612; 2613; 2617; 2618; 2619; 2620; 2621; 2622; 2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided

5 2.5

12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used

3 1.5

13. Food contact surfaces clean and in good repair

3 1.5

14. Food service equipment NSF or equal, utensils approved

2 1

15. Air-drying, storage and handling of clean equipment and utensils

3 1.5

16. Single service articles properly stored and handled

2 1

17. Non-food contact surfaces clean and in good repair

2 1

## WATER SUPPLY [2618; 2623]

18. Source in accordance with 15A NCAC 18A .1700; Hot and cold water under pressure, meets temperature requirements

5 2.5

19. No cross-connections or other potential sources of contamination

5 2.5

## LABATORY AND TOILET FACILITIES [2609(c); 2624; 2625]

20. Approved, accessible, in good repair

4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs

2 1

## WASTE DISPOSAL [2612; 2613; 2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system

5 2.5

23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

2 1

## ANIMALS AND PEST CONTROL [2610; 2629; 2633]

24. Animal or pests presence

4 2

25. Doors self-closing where required; all windows screened

2 1

26. Pests breeding places or rodent harborages

1 .5

## FLOORS, WALLS AND CEILINGS [2613; 2624(a); 2627; 2628]

27. Properly constructed

2 1

28. Clean, maintained in good repair

1 .5

## LIGHTING AND VENTILATION [2630; 2631]

29. Meets illumination requirements; shielded

1 .5

30. Ventilation clean, in good repair

1 .5

## STORAGE SPACES AND OTHER [2620(d); 2632; 2633]

31. Toxic substances properly stored and marked

5 2.5

32. Outside premises clean and storage spaces clean

1 .5

33. Not used for domestic purposes

1 .5

34. Linen properly handled, stored

1 .5

TOTAL DEDUCTIONS

EHS I.D. # 17212

Comment Sheet Attached

☐ Yes ☒ NoInspection Conducted by: John K. Siler

DENR 4007 (Revised 9/98)

Environmental Health Services Section (Review 4/01)

Signature of Report Recipient

Score: 97.5N.C. Department of Environment and Natural Resources  
Division of Environmental Health

Current Identification Number

Old ID Number (if status I or T)

Date of Inspection or Change

Health Department

INSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENTStatus Code: AWater Supply: ☒ Community ☒ Transient Non-Community  
☒ Non-Transient Non-Community ☐ Non-Public Water SupplyWater sample taken today? ☐ Yes ☒ No☐ Name Change☐ Re-InspectionWastewater System: ☒ Community ☒ On-Site System☒ Inspection☐ Verification of ClosureName of Establishment: Western Highway Steak HousePermittee: Dan KingStreet Address: 119615 226 HwyMailing Address  
(if different):City: Spencer Dine State: NC Zip: 27577

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## FOOD SOURCES [2608; 2612; 2615; 2622]

1. Food from approved sources, no spoilage, adulteration, contamination

5 2.5

## FOOD PROTECTION [2609; 2610; 2611; 2612; 2613; 2614; 2622; 2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation

5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage

5 2.5

4. Food not re-served

5 2.5

Thermometers provided, accurate, available

3 1.5

Appropriate written notice of clean plates

1 .5

5. Dry foods stored properly and labeled accordingly

2 1

## PERSONNEL [2609(c); 2616]

8. Personnel with infections or communicable diseases restricted

5 2.5

9. Proper handwashing, good hygienic practices

5 2.5

10. Clean clothes, hair restraints

1 .5

## EQUIPMENT AND UTENSILS [2612; 2613; 2617; 2618; 2619; 2620; 2621; 2622; 2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided

5 2.5

12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used

3 1.5

13. Food contact surfaces clean and in good repair

3 1.5

14. Food service equipment NSF or equal, utensils approved

2 1

15. Air-drying, storage and handling of clean equipment and utensils

3 1.5

16. Single service articles properly stored and handled

2 1

17. Non-food contact surfaces clean and in good repair

2 1

## WATER SUPPLY [2618; 2623]

18. Source in accordance with 15A NCAC 18A.1700; Hot and cold water under pressure, meets temperature requirements

5 2.5

1. No cross-connections or other potential sources of contamination

5 2.5

## LAVATORY AND TOILET FACILITIES [2609(c); 2624; 2625]

20. Approved, accessible, in good repair

4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs

2 1

## WASTE DISPOSAL [2612; 2613; 2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system

5 2.5

23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

2 1

## ANIMALS AND PEST CONTROL [2610; 2629; 2633]

24. Animal or pests presence

4 2

25. Doors self-closing where required; all windows screened

2 1

26. Pests breeding places or rodent harborages

1 .5

## FLOORS, WALLS AND CEILINGS [2613; 2624(a); 2627; 2628]

27. Properly constructed

2 1

28. Clean, maintained in good repair

1 .5

## LIGHTING AND VENTILATION [2630; 2631]

29. Meets illumination requirements; shielded

1 .5

30. Ventilation clean, in good repair

1 .5

## STORAGE SPACES AND OTHER [2620(d); 2632; 2633]

31. Toxic substances properly stored and marked

5 2.5

32. Outside premises clean and storage spaces clean

1 .5

33. Not used for domestic purposes

1 .5

34. Linen properly handled, stored

1 .5

TOTAL DEDUCTIONS 4.5Inspection Conducted by: John H. HiseEHS ID. # 1701

Comment Sheet Attached

DENR 4007 (Revised 9/98)

Signature of Report Recipient John H. Hise☐ Yes ☒ No

Score: 96.0 + 0 = 96.0  
Final ScoreN.C. Department of Environment and Natural Resources  
Division of Environmental HealthCurrent Identification Number  
0126101008  
Old ID Number (if status T or T)  
1631101  
Date of Inspection or Change

Health Department

INSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENTStatus Code: AWater Supply: ☒ Community ☒ Transient Non-Community  
☒ Non-Transient Non-Community ☒ Non-Public Water SupplyWater sample taken today? ☐ Yes ☒ No  
☐ Name Change ☐ Re-Inspection  
☒ Inspection ☐ Verification of ClosureWastewater System: ☒ Community ☒ On-Site SystemName of Establishment: Western Supply Store HomePermittee: Dennis KingStreet Address: 11901 S 236 HwyMailing Address  
(if different):City: Spencer Pine State: NC Zip: 28077

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## FOOD SOURCES [2608; 2612; 2615; 2622]

1. Food from approved sources, no spoilage, adulteration, contamination

5 2.5

## FOOD PROTECTION [2609; 2610; 2611; 2612; 2613; 2614; 2622; 2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation

5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage

5 2.5

4. Food not re-served

5 2.5

5. Thermometers provided, accurate, available

3 1.5

6. Appropriate written notice of clean plates

1 .5

7. Foods stored properly and labeled accordingly

2 1

## PERSONNEL [2609(c); 2616]

8. Personnel with infections or communicable diseases restricted

5 2.5

9. Proper handwashing, good hygienic practices

5 2.5

10. Clean clothes, hair restraints

1 .5

## EQUIPMENT AND UTENSILS [2612; 2613; 2617; 2618; 2619; 2620; 2621; 2622; 2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided

5 2.5

12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used

3 1.5

13. Food contact surfaces clean and in good repair

3 1.5

14. Food service equipment NSF or equal, utensils approved

2 1

15. Air-drying, storage and handling of clean equipment and utensils

3 1.5

16. Single service articles properly stored and handled

2 1

17. Non-food contact surfaces clean and in good repair

2 1

## WATER SUPPLY [2618; 2623]

18. Source in accordance with 15A NCAC 18A .1700; Hot and cold water under pressure, meets temperature requirements

5 2.5

19. No cross-connections or other potential sources of contamination

5 2.5

## LA BRY AND TOILET FACILITIES [2609(c); 2624; 2625]

20. Approved, accessible, in good repair

4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucets, soap, towels, dryer, signs

2 1

## WASTE DISPOSAL [2612; 2613; 2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system

5 2.5

23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

2 1

## ANIMALS AND PEST CONTROL [2610; 2629; 2633]

24. Animal or pests presence

4 2

25. Doors self-closing where required; all windows screened

2 1

26. Pests breeding places or rodent harborage

1 .5

## FLOORS, WALLS AND CEILINGS [2613; 2624(a); 2627; 2628]

27. Properly constructed

2 1

28. Clean, maintained in good repair

1 .5

## LIGHTING AND VENTILATION [2630; 2631]

29. Meets illumination requirements; shielded

1 .5

30. Ventilation clean, in good repair

1 .5

## STORAGE SPACES AND OTHER [2620(d); 2632; 2633]

1. Toxic substances properly stored and marked

5 2.5

2. Outside premises clean and storage spaces clean

1 .5

3. Not used for domestic purposes

1 .5

4. Linen properly handled, stored

1 .5

TOTAL DEDUCTIONS 4.0Inspection Conducted by: Lloyd HiseEHS I.D. # 1726

Comment Sheet Attached

ENR 4007 (Revised 9/98)

Environmental Health Services Section (Review 4/01)

Signature of Report Recipient Lloyd Hise☐ Yes ☒ No

## Comments

Deduction  
Full/half  
(Circle One)17. present cooler lids clean, tracks  
of doors clean.21. walls of bathroom, floor28. floors in good repair, clean and  
all surfaces, tables are clean29. Ventilation clean - house with fans30. Storage space clean except



Signature: Mitchell Co. Final Score: 283

Health Department

Status Code: A

N.C. Department of Environment and Natural Resources  
Division of Environmental Health  
**INSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENT**

Current Identification Number  
01061010008  
Old ID Number (if status I or T)  
9134101  
Date of Inspection or Change

Water Supply: ☒ Community ☐ Transient Non-Community ☐ Non-Transient Non-Community ☐ Non-Public Water Supply  
Water sample taken today? ☐ Yes ☒ No

Wastewater System: ☒ Community ☐ On-Site System ☐ Name Change ☐ Re-Inspection

Name of Establishment: Western Burger Inspection ☒ Verification of Closure ☐

Street Address: 11961 S. 226 Hwy Permittee: Danica King

City: Spencer Pine State: NC Zip: 28777 Mailing Address (if different):

**FOOD SOURCES** [.2608; .2612; .2615; .2622]

1. Food from approved sources, no spoilage, adulteration, contamination 5 2.5

**FOOD PROTECTION** [.2609; .2610; .2611; .2612; .2613; .2614; .2622; .2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation 5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage 5 2.5

4. Food not re-served 5 2.5

5. Thermometers provided, accurate, available 3 1.5

Appropriate written notice of clean plates 1 .5

Dry foods stored properly and labeled accordingly 2 1

**PERSONNEL** [.2609(c); .2616]

8. Personnel with infections or communicable diseases restricted 5 2.5

9. Proper handwashing, good hygienic practices 5 2.5

10. Clean clothes, hair restraints 1 .5

**EQUIPMENT AND UTENSILS** [.2612; .2613; .2617; .2618; .2619; .2620; .2621; .2622; .2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided 5 2.5

12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used 3 1.5

13. Food contact surfaces clean and in good repair 3 1.5

14. Food service equipment NSF or equal, utensils approved 2 1

15. Air-drying, storage and handling of clean equipment and utensils 3 1.5

16. Single service articles properly stored and handled 2 1

17. Non-food contact surfaces clean and in good repair 2 1

**WATER SUPPLY** [.2618; .2623]

18. Source in accordance with 15A NCAC 18A .1700; Hot and cold water under pressure, meets temperature requirements 5 2.5

19. No cross-connections or other potential sources of contamination 5 2.5

**1. ATORY AND TOILET FACILITIES** [.2609(c); .2624; .2625]

20. Approved, accessible, in good repair 4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucets, soap, towels, dryer, signs 2 1

**WASTE DISPOSAL** [.2612; .2613; .2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system 5 2.5

23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning 2 1

**ANIMALS AND PEST CONTROL** [.2610; .2629; .2633]

24. Animal or pests presence 4 2

25. Doors self-closing where required; all windows screened 2 1

26. Pests breeding places or rodent harborages 1 .5

**FLOORS, WALLS AND CEILINGS** [.2613; .2624(a); .2627; .2628]

27. Properly constructed 2 2

28. Clean, maintained in good repair 1 1

**LIGHTING AND VENTILATION** [.2630; .2631]

29. Meets illumination requirements; shielded 1 .5

30. Ventilation clean, in good repair 1 .5

**STORAGE SPACES AND OTHER** [.2620(d); .2632; .2633]

31. Toxic substances properly stored and marked 5 2.5

32. Outside premises clean and storage spaces clean 1 .5

33. Not used for domestic purposes 1 .5

34. Linen properly handled, stored 1 .5

TOTAL DEDUCTIONS

Inspection Conducted by: John Hise

DENR 4007 (Revised 9/98)

Environmental Health Services Section (Review 4/01)

Signature of Report Recipient

EHS I.D. # 17216

Comment Sheet Attached

☐ Yes ☒ No

## Comments

21 Bathroom floors, floors in good repair

27 Floors in good repair

31 Storage area in back kept clean

34 Linen stored in cooler container

Score: 97.5 + 20 = 99.5Health Department  
Final ScoreStatus Code: AN.C. Department of Environment and Natural Resources  
Division of Environmental HealthINSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENTCurrent Identification Number  
01061 01006  
Old ID Number (if status I or T)  
12119101  
Date of Inspection or ChangeWater Supply: ☒ Community ☐ Transient Non-Community  
☐ Non-Transient Non-Community ☐ Non-Public Water SupplyWater sample taken today? ☐ Yes ☒ No  
☐ Name Change ☐ Re-Inspection  
☒ Inspection ☐ Verification of ClosureWastewater System: ☒ Community ☐ On-Site SystemName of Establishment: Western HospitalityPermittee: Narissa KingStreet Address: 11961 S 226 HwyMailing Address  
(if different):City: Apex, NC State: NC Zip: 27579

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## FOOD SOURCES [.2608; .2612; .2615; .2622]

1. Food from approved sources, no spoilage, adulteration, contamination

Deduction  
Full/half  
(Circle One)  
5 2.5

## FOOD PROTECTION [.2609; .2610; .2611; .2612; .2613; .2614; .2622; .2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation
- 
3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage
- 
4. Food not re-served
- 
5. Thermometers provided, accurate, available
- 
- Appropriate written notice of clean plates
- 
- Dry foods stored properly and labeled accordingly

5 2.5

5 2.5

5 2.5

3 1.5

1 .5

2 1

## PERSONNEL [.2609(c); .2616]

8. Personnel with infections or communicable diseases restricted
- 
9. Proper handwashing, good hygienic practices
- 
10. Clean clothes, hair restraints

5 2.5

5 2.5

1 .5

## EQUIPMENT AND UTENSILS [.2612; .2613; .2617; .2618; .2619; .2620; .2621; .2622; .2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided
- 
12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used
- 
13. Food contact surfaces clean and in good repair
- 
14. Food service equipment NSF or equal, utensils approved
- 
15. Air-drying, storage and handling of clean equipment and utensils
- 
16. Single service articles properly stored and handled
- 
17. Non-food contact surfaces clean and in good repair

5 2.5

3 1.5

3 1.5

2 1

3 1.5

2 1

2 1

## WATER SUPPLY [.2618; .2623]

18. Source in accordance with 15A NCAC 18A .1700; Hot and cold water under pressure, meets temperature requirements
- 
19. No cross-connections or other potential sources of contamination

5 2.5

5 2.5

## LA. TOILET AND TOILET FACILITIES [.2609(c); .2624; .2625]

20. Approved, accessible, in good repair
- 
21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs

4 2

2 1

## WASTE DISPOSAL [.2612; .2613; .2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system
- 
23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

5 2.5

2 1

## ANIMALS AND PEST CONTROL [.2610; .2629; .2633]

24. Animal or pests presence
- 
25. Doors self-closing where required; all windows screened
- 
26. Pests breeding places or rodent harborages

4 2

2 1

1 .5

## FLOORS, WALLS AND CEILINGS [.2613; .2624(a); .2627; .2628]

27. Properly constructed
- 
28. Clean, maintained in good repair

2 1

1 1

## LIGHTING AND VENTILATION [.2630; .2631]

29. Meets illumination requirements; shielded
- 
30. Ventilation clean, in good repair

1 .5

1 .5

## STORAGE SPACES AND OTHER [.2620(d); .2632; .2633]

31. Toxic substances properly stored and marked
- 
32. Outside premises clean and storage spaces clean
- 
33. Not used for domestic purposes
- 
34. Linen properly handled, stored

5 2.5

1 .5

1 .5

1 .5

TOTAL DEDUCTIONS 2.5Inspection Conducted by: John K. L...EHS ID. # 17210

Comment Sheet Attached

Score: 97.5 + 2 = 99.5  
Final Score

N.C. Department of Environment and Natural Resources

Division of Environmental Health

INSPECTION OF RESTAURANT OR  
OTHER FOODHANDLING ESTABLISHMENTCurrent Identification Number  
01061010068  
Old ID Number (if status I or T)  
2131102  
Date of Inspection or Change

Health Department

Status Code: AWater Supply: ☒ Community ☐ Transient Non-Community  
☒ Non-Transient Non-Community ☐ Non-Public Water SupplyWater sample taken today? ☐ Yes ☒ NoWastewater System: ☒ Community ☐ On-Site System☐ Name Change ☐ Re-Inspection  
☒ Inspection ☐ Verification of ClosureName of Establishment: Western SeafoodPermittee: Dr. KingStreet Address: 11961 S 226 HwyMailing Address  
(if different):City: Apex Pine State: NC Zip: 27507

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## FOOD SOURCES [.2608; .2612; .2615; .2622]

1. Food from approved sources, no spoilage, adulteration, contamination

5 2.5

## FOOD PROTECTION [.2609; .2610; .2611; .2612; .2613; .2614; .2622; .2632]

2. Potentially hazardous food meets temperature and/or time requirements during storage, preparation, display, service and transportation

5 2.5

3. Food stored, thawed, prepared, cooked, handled, displayed, served, transported to prevent contamination, adulteration, spoilage

5 2.5

4. Food not re-served

5 2.5

5. Thermometers provided, accurate, available

3 1.5

Appropriate written notice of clean plates

1 .5

Dry foods stored properly and labeled accordingly

2 1

## PERSONNEL [.2609(c); .2616]

8. Personnel with infections or communicable diseases restricted

5 2.5

9. Proper handwashing, good hygienic practices

5 2.5

10. Clean clothes, hair restraints

1 .5

## EQUIPMENT AND UTENSILS [.2612; .2613; .2617; .2618; .2619; .2620; .2621; .2622; .2632(b)]

11. Food contact surfaces cleaned and sanitized by approved methods, sanitizing solution provided

5 2.5

12. Approved utensil-washing facilities of sufficient size, with accurate thermometers and test kits available and used

3 1.5

13. Food contact surfaces clean and in good repair

3 1.5

14. Food service equipment NSF or equal, utensils approved

2 1

15. Air-drying, storage and handling of clean equipment and utensils

3 1.5

16. Single service articles properly stored and handled

2 1

17. Non-food contact surfaces clean and in good repair

2 1

## WATER SUPPLY [.2618; .2623]

18. Source in accordance with 15A NCAC 18A .1700; Hot and cold water under pressure, meets temperature requirements

5 2.5

19. No cross-connections or other potential sources of contamination

5 2.5

## LAVATORY AND TOILET FACILITIES [.2609(c); .2624; .2625]

20. Approved, accessible, in good repair

4 2

21. Toilet rooms with self-closing doors, fixtures and rooms clean, mixing faucet, soap, towels, dryer, signs

2 1

## WASTE DISPOSAL [.2612; .2613; .2626]

22. Wastewater discharged into approved, properly operating wastewater treatment and disposal system

5 2.5

23. Garbage cans, containerized systems properly maintained, cleaning facilities provided or contract maintained for cleaning

2 1

## ANIMALS AND PEST CONTROL [.2610; .2629; .2633]

24. Animal or pests presence

4 2

25. Doors self-closing where required; all windows screened

2 1

26. Pests breeding places or rodent harborage

1 .5

## FLOORS, WALLS AND CEILINGS [.2613; .2624(a); .2627; .2628]

27. Properly constructed

2 1

28. Clean, maintained in good repair

1 .5

## LIGHTING AND VENTILATION [.2630; .2631]

29. Meets illumination requirements; shielded

1 .5

30. Ventilation clean, in good repair

1 .5

## STORAGE SPACES AND OTHER [.2620(d); .2632; .2633]

31. Toxic substances properly stored and marked

5 2.5

32. Outside premises clean and storage spaces clean

1 .5

33. Not used for domestic purposes

1 .5

34. Linen properly handled, stored

1 .5

TOTAL DEDUCTIONS 2.5Inspection Conducted by: John E. L. L. L.EHS I.D. # 1726

Comment Sheet Attached

FOR IMMEDIATE RELEASE

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

May 6, 2002

**Salmonella Investigation is Complete -Update 5/6/02**

The investigation of the Salmonella outbreak in Spruce Pine is complete. Health officials have worked hard to control the outbreak and to assemble and organize all data to pinpoint the source of the outbreak.

The Health Departments in the Toe River Health District carried out food surveys from people who ate at a specific local restaurant between the dates of April 18 and April 30. The purpose of the food surveys was to obtain a list of each item that was eaten and a list of symptoms from those who were ill. The data was analyzed and several food items were implicated as the source of the outbreak.

Over the course of the investigation, there were 369 people who reported illness that may have been linked to the outbreak. Of those who reported symptoms, 39 people had a lab-confirmed case of Salmonellosis. Data was also collected from 252 people who did not experience any symptoms, but ate at the local restaurant between the dates indicated.

The foods that were implicated in the outbreak, in no particular order, include beef gravy, roast beef, salad bar eggs, fresh strawberries, salad bar ham, and roast beef gravy. This does not suggest that anyone who ate those items should have Salmonella. It simply means that according to the data that was analyzed, those food items are the common link between people who were sick and were diagnosed with Salmonellosis.

Western Sizzlin Steakhouse on Highway 226 in Spruce Pine has been very cooperative during the investigation. The restaurant is scheduled to re-open to the public on Tuesday, May 7.

Foods that are contaminated with Salmonella bacteria are the most common way to become sick with Salmonellosis. This was an evident case of cross-contamination of foods. Cross-contamination of foods can be avoided by following some basic steps: uncooked meats should be kept separate from produce, cooked foods, and ready-to-eat foods. Cutting boards, knives, and other utensils should be washed thoroughly after handling uncooked foods. Hands should be washed before handling any food, and between handling different food items. Towels and sponges should be sterilized completely before re-using.

Though symptoms may no longer appear, the Salmonella bacteria can continue to spread for up to two weeks. Therefore, daycare centers should be alert to children who had symptoms such as diarrhea, vomiting, or fever. Any child who possesses these signs and symptoms should either be cohorted or avoid attending daycare. Cohorting involves separating sick children from healthy children into separate rooms.

Health officials strongly urge everyone to continue following the basic hygiene practices such as immediately washing hands: after using the bathroom, helping a child use the bathroom, or changing a diaper. Hands should also be washed before preparing and eating food. These precautions are very important to prevent the bacteria from spreading.

\*\*\*

**Toe River Health District**

861 Greenwood Road  
Spruce Pine, NC 28777  
828-765-2239

# **URGENT**

Please distribute this release to every  
child care provider in your facility

**Contact Information:**

Tom Singleton, Health Director  
Toe River Health District  
828-765-2239 Ext. 16

May 2, 2002

## **Salmonella Outbreak - Update 5/2/02**

An ongoing investigation of Salmonellosis is being conducted in Spruce Pine, North Carolina. No source has yet been identified and the investigation will continue until completed. The Western Sizzlin Steakhouse on Hwy 226 in the Grassy Creek Shopping Center in Spruce Pine has voluntarily closed and is cooperating fully on the outbreak.

Salmonellosis is an infection with a bacteria called Salmonella. Most persons infected with Salmonella develop diarrhea, fever, and abdominal cramps 6 to 72 hours after infection. The illness usually lasts 4 to 7 days. However, the diarrhea can be severe, and the person may be ill enough to require hospital treatment.

**Please be alert to children who have symptoms such as diarrhea, vomiting, or fever. Any child who possesses these signs and symptoms should either be cohorted or avoid attending daycare, as Salmonella can quickly spread in this environment.**

Each childcare facility has the option of cohorting, which involves separating sick children from healthy children into separate rooms. If your facility would like to set up a room for sick children, please call your local health department and an Environmental Health Specialist will assist you with the procedures.

**Please continue to follow basic hygiene principles such as immediately washing hands: after using the bathroom, helping a child use the bathroom, or changing a diaper. Hands should also be washed before preparing and eating food. Further, in accordance with health guidelines, please remember to use sanitizing solution and test strips when changing a diaper. These precautions are very important so that the bacteria are not spread.**

Salmonella may be found in feces, especially those with diarrhea, and people can become infected if they do not wash their hands after contact with these feces.

Salmonella are usually transmitted to humans by eating contaminated foods, which usually look and smell normal. Contaminated foods are usually of animal origin, such as beef, poultry, milk, or eggs. But all foods, including vegetables may become contaminated if not properly washed. Foods may also become contaminated by the unwashed hands of an infected food handler who forgot to wash his or her hands with soap after using the bathroom.

There is no vaccine to prevent Salmonellosis, but there are steps you can take to reduce your chances of becoming infected with the bacteria. Cook poultry, ground beef, and eggs thoroughly before eating. Stay away from eating or drinking foods that contain raw eggs, or unpasteurized milk. Raw eggs may not be recognized in some foods such as hollandaise sauce, Caesar dressings, homemade ice cream, cookie dough, and frostings. Wash hands, kitchen work surfaces, and utensils with soap and water immediately after they have been in contact with raw meat or poultry. Produce should be thoroughly washed before handling any food, and between handling different food items. Be very careful with foods prepared for infants, the elderly, and those with compromised immune systems. Wash hands with soap after handling reptiles or birds, or after contact with pet feces.

Many different kinds of illnesses can cause the same symptoms as Salmonellosis. Determining that Salmonella is the cause of the illness depends on laboratory tests. Once Salmonella has been identified, a health care provider will determine the proper course of treatment.

It is very important that anyone - whether feeling sick or not - who ate at Western Sizzlin Steakhouse between the dates of April 18<sup>th</sup> and April 30<sup>th</sup>, call one of the following numbers between the hours of 9:00 a.m. to 3:30 p.m.

toll free: 1-800-244-4695

local: 733-1821



**Toe River Health District *Salmonella heidelberg* Outbreak**  
**April 18 - April 30<sup>th</sup> 2002**

**Preliminary Report**

To: Tom Singleton, Health Director  
From Pam Jenkins, Nurse Epidemiologist, DHHS

**Introduction:** Mr. Tom Singleton was alerted by hospital healthcare providers on Thursday (4/25/02) that they were seeing an unusually large number of ill people with Gastrointestinal (GI) symptoms. They suspected a foodborne disease. On Friday (4/26) the Mitchell County Health Department's (HD) Nursing Supervisor received notice of a positive *Salmonella* species stool culture on one patient and learned of five hospitalized patients with presumptive diagnosis. Upon further investigation she discovered that the common link appeared to be eating at the Western Sizzlin in Spruce Pines, NC. By the end of Friday, she knew of a couple of confirmed cases and approximately 7 that were pending confirmation. During this time period, the District's Health Director was conferring with the Acting Head of the State's Communicable Disease Control Branch, Dr. Newt MacCormack. The number of cases grew over the weekend and by Monday afternoon it was apparent that the outbreak was continuing and was linked to the Western Sizzlin. The manager of the restaurant, Mr. Darren King, voluntarily closed the restaurant until an epidemiological study could be conducted. On Tuesday, Dr. Pam Jenkins, Foodborne Disease Nurse Epidemiologist was sent from the State Health Department to assist the Toe River Health District (Mitchell, Yancey, Avery Counties) in the investigation.

**Methodology**

**Epidemiological Study**

A Case-control study was instituted on Tuesday, April 30, 2002. A case was defined as any individual having nausea, vomiting and/or 3 or more diarrheal (loose) stools per day and who ate at the Western Sizzlin in Spruce Pine between the dates of April 18-30, 2002. All three HDs of the Toe River Health District conducted interviews on cases and controls using a standardized survey. Controls were those people who ate at the restaurant between April 18-30, 2002 and were not symptomatic. A 1-800 number hotline was set up on Wednesday and manned during regular working hours and on Saturday, May 4, 2002. On Tuesday (4/30/02) a media point person was identified and daily press releases were done to keep the public informed about the progress of the investigation.

**Environmental Investigation:**

On Friday (4/26/02), the Health Director and one of the Environmental Health (EH) personnel from the Mitchell County HD inspected the restaurant. Deficiencies were noted. On Monday, the EH team collected food samples from an individual patron who had taken food home. The food collected for sampling included: hamburger steak with gravy; fried chicken; hamburger steak without gravy; and ham (which was under the hamburger steak without gravy). These specimens were sent to the State Laboratory for Public Health (SLPH) for analysis. The Health Director, EH Supervisor and Regional EH Supervisor visited the restaurant and asked the manager to voluntarily close the restaurant pending



the results of the epidemiological study. The manager, Darren King, closed his restaurant around 3-4pm Monday 4/27/02.

On Tuesday EH obtained the following samples from the restaurant: 1) water from the tap in the kitchen; 2) water from the waitress serve station; 3) leftover prepared mashed potatoes and gravy from the restaurant and 4) unopened packages of dried mashed potatoes and gravy. These were also sent to the SLPH. On Wednesday (May 1, 2002), samples of ice from the bottom of the large ice chest in the kitchen area were obtained. The restaurant was toured by EH from Mitchell County HD and Pam Jenkins from the State HD.

### **Laboratory**

Stool specimens were collected on as many of the cases as possible. All three health departments collected the specimens. In addition, specimens were collected by the Spruce Pines Community Hospital, local hospitals and private doctor's offices. Collected specimens were sent to the SLPH for serotyping.

### **Results**

#### **Epidemiological Study**

The following are the results of the epidemiology study:

Population at risk (includes those who ate at Western Sizzlin from 4/18 - 4/29)

Buffet Only	3004
Salad w/entree	658
Salad only	501
Entree	<u>4163</u>
Total	7151

Number of Calls received at HDs (rough approximate): 931 - many represented groups of individuals. Many calls were not logged in but handled at the time of the call. The actual number of calls received by all 3 HDs may be larger than represented here.

Number of surveys conducted: 369 cases and 252 controls.

Number of surveys analyzed: 72 cases and 54 controls. (While it is ideal to have a case/control ratio of 1 to 2, the strength of the data allows for preliminary results to be given based on what has been entered. Further data entry will occur at the state level and all information will be forwarded to the Toe River Health District.)

The following are the results of the analysis of the surveys:

Males	58 (28 controls, 30 cases)
Females	68 (26 controls, 42 cases)
Symptoms:	81% had cramps
	23% had sinus problems
	62% had non-bloody diarrhea

51% had fever  
 65% had nausea  
 13% had a cough  
 84.5% had watery diarrhea

Hospitalized: 13%

Food items that are implicated in the outbreak are:

Item	OR	CI	% cases who remembered eating
Beef Gravy	7.69	1.55 - 51.86	23.5% (16/68)
Roast Beef	13.22	1.69 - 283.8	21% (14/68)
Salad Bar Eggs	9.57	2.00 - undefined	19.3% (11/57)*
Fresh Strawberries	5.79	1.14 - 39.74	19.1% (13/68)
Salad Bar Ham	7.34	1.49 - undefined	15.5% (9/58)*
Ajus Gravy	8.62	1.05 - 189.38	15% (10/68)
Roast Beef Gravy	8.97	1.88 - undefined	14.7% (10/68)*
* None of well ate			

One item was found to be protective

Yogurt Toppings	0.14	0.02 < OR < 0.78	17% (9/52) of controls
-----------------	------	------------------	------------------------

Two asymptomatic employees of the restaurant were found to be infected with *Salmonella*. Lengthy interviews with the two employees were conducted. Both individuals ate at the restaurant. It can not be determine whether they got their infection from eating at the restaurant or infected the food at the restaurant. The serotypes of cultures from the two asymptomatic restaurant workers has been identified as *Salmonella heidelberg*.

#### Environmental Results:

The following is the results of the food samples sent to the SLPH:

<u>Items from an individual's home</u>	<u>Result</u>
Hamburger steak with gravy	Positive for <i>S. heidelberg</i>
Hamburger steak without gravy	Negative
Fried Chicken	Positive for <i>S. heidelberg</i>
Ham	Positive for <i>S. heidelberg</i>

<u>Items from Restaurant</u>	<u>Result</u>
Applicator stick marked "gravy"	Positive for <i>S. heidelberg</i>
Leftover prepared gravy	Negative
Leftover prepared mashed potatoes	Negative
Unopened dry mash potatoes	Negative
Unopened dry gravy mix	Negative
All water samples showed no coliforms. Testing for <i>S. heidelberg</i> could not be done.	
Restaurant employees attended a food safety class.	

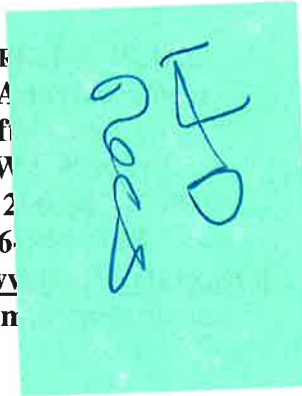
## Laboratory Results

The Toe River Health District collected a total of 88 specimens. Of those, 39 have been confirmed *Salmonella*. More results from private doctor's offices, local hospitals and from SLPH are pending. The serotypes from the two asymptomatic restaurant workers has been identified as *Salmonella heidelberg*.

## Plan of Action:

1. The investigation of the *S.heidelberg* outbreak at the Western Sizzlin is completed. The data collected is large enough to allow for extensive analysis. No further surveys should be collected.
2. Stool cultures of symptomatic individuals should be collected at the discretion of healthcare providers. As laboratory results are returned from the SLPH and from various private practice offices and local hospitals, they will be added to the database.
3. The Environmental Section and the District Health Director will determine when the restaurant reopens. Although the restaurant has been thoroughly sanitized, close surveillance may need to be continued for a period of time to ensure the outbreak does not start again.
4. Further data entry and analysis will continue at the State HD and all data will be given to the Health District. Critical to this component is the constant communication between the Epi Team Leader at the Toe River Health District and the Nurse Epidemiologist at the State HD.
5. Once the data set has been cleaned and more surveys analyzed, thought should be given to a joint (State and Health District) publication of the results to MMWR.

MARLER CLARK  
4301 Bank of America  
701 Fifth Avenue  
Seattle, WA 98101  
Telephone: 206-461-1000  
FAX: 206-461-1001  
Web Address: [www.marlerclark.com](http://www.marlerclark.com)  
E-Mail: [mail@marlerclark.com](mailto:mail@marlerclark.com)



To: MARK C. KURDYS – 828-253-7200  
From: WILLIAM D. MARLER, Marler Clark, LLP, PS  
Re: WESTERN SIZZLIN  
Date: 5/30/02

<i>DOCUMENTS TRANSMITTED</i>	<i>NUMBER OF PAGES</i>
	❖
Toe River Health Dept. Records	36

❖ Not counting cover sheet. If you do not receive all pages, please contact Patsy immediately at 206-346-1895.

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**THANKS.**

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Web Address: [www.marlerclark.com](http://www.marlerclark.com)  
E-Mail: [mail@marlerclark.com](mailto:mail@marlerclark.com)

To: MARK C. KURDYS - 828-253-7200  
From: WILLIAM D. MARLER, Marler Clark, LLP, PS  
Re: WESTERN SIZZLIN  
Date: 5/30/02

DOCUMENTS TRANSMITTED	NUMBER OF PAGES
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Toe River Health Dept. Records	36

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THANKS.

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Local Name  
Company Logo

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4301 Bank of America Tower  
701 Fifth Ave.  
Seattle, WA 98102  
Telephone: 206-346-1888  
FAX: 206-346-1898  
Web Address: [www.marlerclark.com](http://www.marlerclark.com)  
E-Mail: [mail@marlerclark.com](mailto:mail@marlerclark.com)

To: MARK C. KURDYS - 828-253-7200  
From: PAMELA A. TOKARZ - 800-432-4297  
Re: PATSY CHANDLER, Marler Clark, LLP, PS  
Date: WESTERN SIZZLIN  
5/30/02

DOCUMENTS TRANSMITTED	NUMBER OF PAGES
SEE BELOW	1

♦ Not counting cover sheet. If you do not receive all pages, please contact Patsy immediately at 206-346-1895.

PLEASE DISREGARD THE LANGUAGE PRINTED ON THE FAX SHEET THAT WAS ATTACHED TO THE 5/30/02 CLIENT LIST AND TO THE FAX ATTACHED TO THE HEALTH DEPT. RECORDS.

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1	453	ROBERTS & STEVENS	5-30-02; 3:29PM	36"	1 / 1	EC	BC	CP 14.4
2	453	918004324297	3:30PM	36"	1 / 1	EC	BC	CP 14.4

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**Web Address: www.marlerclark.com**  
**E-Mail: mail@marlerclark.com**

**FAX NUMBER TRANSMITTED TO: 828-765-9082**

**To: THOMAS SINGLETON**  
**From: ANDREW WEISBECKER, Marler Clark, LLP, PS**  
**Re: SALMONELLA OUTBREAK**  
**Date: 5/14/02**

<i><b>DOCUMENTS TRANSMITTED</b></i>	<i><b>NUMBER OF PAGES</b></i>
	❖
LETTER DATED 5/14/02	2

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1	968	918287659082	5-14-02; 2:26PM	46"	3/ 3	EC		CP 24.0

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**FAX NUMBER TRANSMITTED TO: 828-765-9082**

**To: TONY CROWDER**  
**From: ANDREW WEISBECKER, Marler Clark, LLP, PS**  
**Re: SALMONELLA OUTBREAK**  
**Date: 5/14/02**

<i>DOCUMENTS TRANSMITTED</i>	<i>NUMBER OF PAGES</i>
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ANDREW WEISBECKER  
WRITER'S DIRECT LINE  
(206) 346-1888

May 14, 2002

VIA Fax - 828-765-9082

Mr. Tony Crowder  
Health Inspector  
Toe River District Health Dept.  
861 Greenwood Rd.  
Spruce Pine, NC 28777

**RE: Salmonella Illness Outbreak, April, 2002**  
**Western Sizzlin Steakhouse**  
**Spruce Pine, NC.**  
**FOIA/Public Records Law Records Request**

Dear Mr. Crowder:

Our firm represents a number of persons who became severely ill as part of a Salmonella illness outbreak which occurred in late April, 2002. The outbreak has been linked to food served at a Western Sizzlin Steakhouse restaurant in Spruce Pine, Mitchell County, NC. Over 350 persons became ill as part of this outbreak.

This letter is a request for copies of all related and not confidential public records in your possession, pursuant to all applicable freedom of information and public records disclosure acts and regulations. Specifically, we are requesting copies of all public records that relate to the investigation of the Salmonella illness outbreak linked to the Western Sizzlin restaurant in Spruce Pine, NC. We do not seek information protected by privacy statutes, but any such records can and should be redacted to avoid publication of the identity of any affected individual.

While the list below is not intended to be exhaustive, the kinds of public records sought include the following:

- all epidemiological questionnaires, interview notes, and case-control study data (redacted, if necessary);
- food/environmental sample collection reports;

- all lab and test results;
- written communications with any state Departments of Public Health, the FDA, the CDC, and/or other local county health departments or districts;
- all memorandum, announcements, press releases, electronic mail, reports, notes, meeting summaries, or writings of any kind that relate to the outbreak investigation; and
- any final report or memorandum that discusses or summarizes the result of the outbreak investigations.

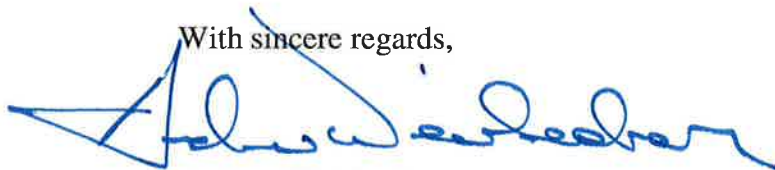
We are also hereby requesting copies of all health inspections conducted at the Western Sizzlin restaurant during the last five years, as well as copies of any complaints or citations received during that period. We recognize that it may be difficult to provide us with the documents requested above regarding the outbreak before the final report is completed. These regular and routine health inspection reports and records should be readily available, however, and should be produced as soon as possible.

Please mail all related information and documents to the attention of our co-counsel, Lloyd Hise, Jr., at 208 Oak Avenue A, Spruce Pine, NC 28777. We are willing to pay all related reasonable fees and charges, if any.

If you deny any part of this request, please identify the nature of the information not provided, and cite each specific reason that you believe justifies your refusal to release that information. Please also notify me of the appeal procedures available under the law.

Please do not hesitate to telephone me at the Marler Clark telephone number, *i.e.*, (800) 884-9840, if the foregoing requests are unclear or confusing in any way. Otherwise, thank you in advance for your assistance and attention to this matter. We look forward to receiving your prompt response.

With sincere regards,



Andrew Weisbecker

AW:pac

Cc: Lloyd Hise, Jr., Esq.

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ANDREW WEISBECKER  
WRITER'S DIRECT LINE  
(206) 346-1888

May 14, 2002

VIA Fax - 828-765-9082

Mr. Thomas Singleton  
Acting health Director  
Toe River District Health Dept.  
861 Greenwood Rd.  
Spruce Pine, NC 28777

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**Western Sizzlin Steakhouse**  
**Spruce Pine, NC.**  
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- all lab and test results;
- written communications with any state Departments of Public Health, the FDA, the CDC, and/or other local county health departments or districts;
- all memorandum, announcements, press releases, electronic mail, reports, notes, meeting summaries, or writings of any kind that relate to the outbreak investigation; and
- any final report or memorandum that discusses or summarizes the result of the outbreak investigations.

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With sincere regards,



Andrew Weisbecker

AW:pac

Cc: Lloyd Hise, Jr., Esq.  
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FAX NUMBER TRANSMITTED TO: 828-765-7194

To: LLOYD HISE  
From: ANDREW WEISBECKER, Marler Clark, LLP, PS  
Re: SALMONELLA OUTBREAK  
Date: 5/14/02

DOCUMENTS TRANSMITTED	NUMBER OF PAGES
LETTER DATED 5/14/02 RE FOIA REQUESTS AND FEE AGREEMENT AND QUESTIONNAIRE OF NICHOLAS D'ALLEVA	9

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1	972	918287657194	5-14-02; 2:28PM	2'01"	1/ 10	G3		0220 7200
2	972	918287657194	2:31PM	9'56"	10/ 10	G3	RE	1 CP 9600

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TM: Terminated by user  
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WS: Waiting Send

**Patsy Chandler**

---

**From:** Andrew Weisbecker [aweisbecker@marlerclark.com]  
**Sent:** Monday, May 06, 2002 2:25 PM  
**To:** tesingleton@trhd.dst.nc.us  
**Cc:** aweisbecker@marlerclark.com; BMARLER@marlerclark.com; dbabcock@marlerclark.com; pchandler@marlerclark.com

**Subject:** Spruce Pine Salmonella outbreak

Dear Mr. Singleton, our firm represents a number of persons who became ill as part of the Salmonella outbreak that occurred in Spruce Pine during the last week of April. It is my understanding that the outbreak has been linked to a Western Sizzlin restaurant located in that town, and that a number of persons became ill. I would appreciate it if you would give me, or Dave Babcock in my office, a call at 1-800-884-9840 at your convenience to discuss this outbreak, and your related investigation; thanks, and I look forward to talking to you soon;  
Andy Weisbecker

Andy Weisbecker

Marler Clark

4301 Bank of America Tower

701 Fifth Avenue

Seattle, WA 98104

(206) 346-1888

5/7/2002