

State of Maine Health Inspection Record of Complaint

INTAKE

Complaint #	Date of Intake	Time of Intake	Intake Person	Paper Form
4270	04/27/2020	12:00 PM	REBECCA WALSH	

ESTABLISHMENT/BODY ARTIST CITED

Establishment/Body Artist Name	Est. ID#	Lic. Exp. Date	Telephone	Lic. Type
SUSANS	5609	11/28/2020	207-878-3240	MUN - EATING PLACE
Street Address	City	ZipCode	Owner Name	
1135 FOREST AVE	PORTLAND	04103-3323	EKLUND, SUSAN	

COMPLAINT DESCRIPTION

Complaint types:		Date of occurrence: 4/25/20		Time of occurrence: 2-3pm	
Foodborne Illness	<input checked="" type="checkbox"/>	Smoking	<input type="checkbox"/>	Ants	<input type="checkbox"/>
Hygienic Practices	<input type="checkbox"/>	Septic	<input type="checkbox"/>	Bats	<input type="checkbox"/>
Sanitation Practices	<input type="checkbox"/>	Tattoo	<input type="checkbox"/>	Bedbugs	<input type="checkbox"/>
Physical Facilities	<input type="checkbox"/>	Body Piercing	<input type="checkbox"/>	Cockroaches	<input type="checkbox"/>
Food injury/safety	<input type="checkbox"/>	Electrology	<input type="checkbox"/>	Mice	<input type="checkbox"/>
Waterborne illness	<input type="checkbox"/>	Micropigmentation	<input type="checkbox"/>	Rats	<input type="checkbox"/>
Unlicensed	<input type="checkbox"/>	Other	<input checked="" type="checkbox"/>	<i>If Other checked, see notes under Description below:</i>	

Complainant's family ordered takeout on 4/25/20 ~2-3pm; fish & chips; fish & chips w/ scallops; fried shrimp; fried scallops; fried haddock sandwich w/ potato salad; corn chowder, seafood chowder, clam chowder; fried meals came with french fries & cole slaw. When takeout order was given to customer, employee was within 6 ft of the customer & no mask was worn. Family ate meal ~20 min later & noticed that the seafood was cold and raw inside; not cooked properly, so all food was ...

COMPLAINT INVESTIGATION

Investigated	Investigated by	Inspection Triggered	Date of Last Inspection
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	TOM WILLIAMS	<input type="checkbox"/> Yes <input type="checkbox"/> No	10/10/2019

COMPLAINT FINDINGS

Foodborne Illness	<input type="checkbox"/> O <input checked="" type="checkbox"/> N	Smoking	<input type="checkbox"/> O <input type="checkbox"/> N	Ants	<input type="checkbox"/> O <input type="checkbox"/> N	Dogs	<input type="checkbox"/> O <input type="checkbox"/> N
Hygienic Practices	<input type="checkbox"/> O <input type="checkbox"/> N	Septic	<input type="checkbox"/> O <input type="checkbox"/> N	Bats	<input type="checkbox"/> O <input type="checkbox"/> N	Cats	<input type="checkbox"/> O <input type="checkbox"/> N
Sanitation Practices	<input type="checkbox"/> O <input type="checkbox"/> N	Tattoo	<input type="checkbox"/> O <input type="checkbox"/> N	Bedbugs	<input type="checkbox"/> O <input type="checkbox"/> N	Flies	<input type="checkbox"/> O <input type="checkbox"/> N
Physical Facilities	<input type="checkbox"/> O <input type="checkbox"/> N	Body Piercing	<input type="checkbox"/> O <input type="checkbox"/> N	Cockroaches	<input type="checkbox"/> O <input type="checkbox"/> N		
Food injury/safety	<input type="checkbox"/> O <input type="checkbox"/> N	Electrology	<input type="checkbox"/> O <input type="checkbox"/> N	Mice	<input type="checkbox"/> O <input type="checkbox"/> N	O=Observed	
Waterborne illness	<input type="checkbox"/> O <input type="checkbox"/> N	Micropigmentation	<input type="checkbox"/> O <input type="checkbox"/> N	Rats	<input type="checkbox"/> O <input type="checkbox"/> N	N=Not Observed	
Unlicensed	<input type="checkbox"/> O <input type="checkbox"/> N	Other	<input checked="" type="checkbox"/> O <input type="checkbox"/> N	<i>If Other checked, see Comments below:</i>			

INSPECTOR COMMENTS

Unable to confirm cause of illness. Food is received fresh from approved supplier and came in the day before. Discussed proper holding temperatures and prevention of contamination. Discussed proper procedures related to Covid-19 guidance and instructed that all employees must wear face coverings per city council order that took place 2 days after this complaint. All orders are taken outside.

Corrective Actions

Food is then handed to customer while they wait in their car.

REFERRALS

Referred to:	Date	Referred to:	Date	Referred to:	Date
<input type="checkbox"/> Attorney General's Office		<input type="checkbox"/> Fire Marshal		<input type="checkbox"/> Department of Education	
<input type="checkbox"/> Department of Agriculture		<input type="checkbox"/> Liquor Licensing		<input type="checkbox"/> Inland Fisheries & Wildlife	
<input type="checkbox"/> Subsurface Wastewater Program		<input type="checkbox"/> State Police		<input type="checkbox"/> Tobacco Enforcement	
<input type="checkbox"/> Drinking Water Program		<input type="checkbox"/> Disease Control		<input type="checkbox"/> Board of Pesticide Control	
<input type="checkbox"/> Marine Resources		<input type="checkbox"/> Municipality CEO/LPI		<input type="checkbox"/> Other	

Person in Charge (Signature) SUSAN EKLUND (PRINTED WITH PERMISSION)	Date: 4/28/2020
Health Inspector (Signature) Tom Williams	

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Complaint # 4270

Complaint Description Continued...

not consumed. Called Susan's back about this issue & was told to bring the food back to the establishment. Complainant had 1.5 scallops; ~20 min later felt nauseous then vomited; that evening developed diarrhea that lasted thru 4/26/20. 1 child who had ~1/2 of the fried shrimp developed nausea then vomited. Spouse who had haddock sandwich & other child did not get ill; brother-in-law who had fried scallops developed some nausea & cramps.

Person in Charge (Signature)

SUSAN EKLUND (PRINTED WITH PERMISSION)

Date: 4/28/2020

Health Inspector (Signature)

