



Quality Control Incident Report

Provide the following information to your Nutrition Specialist (NS)

School Name: _____ Location Code: _____

Region (Check One): ☐ North ☐ South ☐ East ☐ West Check One: ☐ Prep ☐ NNC

FSM Name: _____ FSM Phone: _____ AFSS Name: _____

Date of Incident: _____ Date of Report *if different* from Incident Date: _____

Incident Type (Check One):

☐ Served – Food Quality ☐ Received – Food Quality ☐ Foreign Object in Food

☐ Paper Goods/Supplies ☐ Delivery ☐ Allergic Reaction ☐ Other: _____

If Foodborne Illness is suspected, contact your AFSS immediately and complete the Suspected Foodborne Illness Incident Report.

Briefly Describe Incident (DO NOT LEAVE BLANK): _____

- **COLLECT AND SAVE ANY REMAINING PRODUCT.**
- **DO NOT** discard items or containers it came in until instructed to do so by Food Services.
- **Hold the product, label it with “Do Not Use”, date, and place in the proper storage area – freezer, refrigerator, or dry storage.**
- **When possible, attach photos of product(s) and any identifying information on the case (i.e., labels or stamps with lot code, dates, etc.).**

Product/Situation Involved: _____

Number of Portions Served: _____ Number of Students that Ate Product: _____

Enter Number/Amount of Damaged or Bad Product: _____ Pound(s) _____ Case(s) _____ Package(s) _____ Each

Brand of Product: _____ Production Date (usually stamped on the box): _____

CMS/Recipe #: _____ Lot Code: _____ Delivery Date: _____ Date Served: _____

Indicate Type of Usage Date and Write in Date Listed: ☐ Expiration ☐ Best By ☐ Use By Date: _____

Provide 10-digit STO/Invoice # (starts with 5100) for product(s) received from the **Warehouse**: 5100

Provide Invoice # for product(s) received by direct delivery (i.e., Driftwood, Clearbrook, Gold Star): _____

If incident involves student(s) burned by food, provide the age and name of student(s), along with copies of temperature logs from the related meal and/or item.

Please scan and email this report (with pictures, when possible) to the NS for your Region.

North: Bobbie Diamond, MPH, RD bobbie.diamond@lausd.net

South: Kayley Drain, MPH, RD kayley.drain@lausd.net

East: Kim Nguyen duyen.nguyen@lausd.net

West: Ivy Marx, RD ivy.marx@lausd.net