

Recall Worksheet



RECALL WORKSHEET

(Include attachments, additional pages, label copies and flowcharts as necessary)

TODAY'S DATE: _____

ESTABLISHMENT NUMBERS: EST. _____ P- _____

ESTABLISHMENT NAME: _____

ADDRESS: _____

COMPANY RECALL COORDINATOR (name, title, telephone) _____

COMPANY MEDIA CONTACT (name, title, telephone) _____

COMPANY CONSUMER CONTACT (name, title, telephone) _____

REASON FOR RECALL: _____

IDENTIFY RECALLED PRODUCTS SEPARATELY BY:

BRAND NAME			
PRODUCT NAME			
PACKAGE (Type & Size)			
PACKAGE CODE (Use By/Sell By)			
PACKAGING DATE			
CASE CODE (Identifying)			
COUNT/CASE			
PRODUCTION DATE			
AMOUNT (lbs./cases) PRODUCED			
AMOUNT HELD AT ESTABLISHMENT			
AMOUNT (lbs./cases) DISTRIBUTED			
DISTRIBUTION LEVEL (institutional/retail/etc.)			
DISTRIBUTION AREA			
SCHOOL LUNCH (CN, AMS Contract)			
DEPT. OF DEFENSE (DSCP, Commissary, etc.)			



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DESCRIBE THE PRODUCTION/PROCESSING OPERATION AND/OR ATTACH A PROCESS FLOW DIAGRAM: _____

WHAT WERE THE "CLEAN-UP TO CLEAN-UP" TIMES (where applicable)? _____

HAS THE SOURCE OF THE CONTAMINATION BEEN IDENTIFIED? EXPLAIN: _____

ARE THERE DATA THAT COULD LIMIT THE AMOUNT OF PRODUCT AFFECTED?
EXPLAIN: _____

WERE THERE ANY DEVIATIONS REPORTED IN THE MEASURING AND/OR MIXING OF INGREDIENTS?
EXPLAIN: _____

DOES THE ESTABLISHMENT ROUTINELY USE METAL DETECTORS OR OTHER VISUAL IMAGING DEVICES?
EXPLAIN: _____

WERE OTHER PRODUCTS PRODUCED ON THE SAME LINE OR USING SOME OF THE SAME EQUIPMENT DURING THE "CLEAN-UP
TO CLEAN-UP" PERIOD? EXPLAIN: _____