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ServSafe Manager Exam Sample Questions (Q26-Q31):

NEW QUESTION # 26

A food handler who is diagnosed with norovirus and is symptomatic should be

- A. excluded from the operation.
- B. terminated as soon as possible.
- C. allowed to stay off work for 12 hours.
- D. restricted from working around food.

Answer: A

Explanation:

The "Big 6" pathogens, which include Norovirus, are highly contagious and can cause severe foodborne illness even in small doses. According to the ServSafe Manager curriculum, there is a strict distinction between "restricting" and "excluding" an employee. If an employee is diagnosed with Norovirus and is exhibiting symptoms (such as vomiting or diarrhea), the Person in Charge (PIC) must exclude them from the operation entirely. This means they are not allowed to be in the building, as they pose a high risk of spreading the virus through the air or surface contact.

Norovirus is the leading cause of foodborne illness in the U.S. and is often spread through the fecal-oral route.

An excluded employee cannot return to work until they have been asymptomatic for at least 24 hours (some jurisdictions require 48 hours) or provide a written release from a medical practitioner. Managers must report these diagnoses to the local regulatory authority. Simply "restricting" the employee (Option D)-which would mean letting them do non-food tasks like taking out the trash-is insufficient for Norovirus because of its high transmissibility. Correct management of sick employees is a primary component of "Active Managerial Control." By following the mandatory exclusion rules, the manager protects the health of the customers and the reputation of the business.

NEW QUESTION # 27

A non-food-contact surface must be

- A. color coded.
- B. nonabsorbent.
- C. Underwriters Laboratories (UL) certified.
- D. Occupational Safety and Health Agency (OSHA) approved.

Answer: B

Explanation:

According to the ServSafe Manager curriculum and the FDA Food Code, the physical requirements for surfaces in a foodservice operation are strictly categorized into food-contact and non-food-contact surfaces. A non-food-contact surface-such as the exterior of a refrigerator, the legs of a prep table, or the walls of the kitchen-is not designed to come into direct contact with food during normal operations. However, these surfaces must still be constructed from materials that are nonabsorbent, smooth, and durable.

This requirement is fundamental because surfaces that absorb moisture (like unsealed wood or porous grout) can trap food particles, liquid, and grease, which eventually leads to the growth of bacteria, mold, and unpleasant odors.

Furthermore, an absorbent surface is significantly harder to clean and sanitize. Moisture trapped within a surface can harbor pathogens like *Listeria monocytogenes*, which thrives in damp environments and can easily be transferred to food-contact surfaces through "splash-back" or a food handler's hands. While Underwriters Laboratories (UL) provides safety certifications for electrical components (Option A) and OSHA (Option C) focuses on workplace safety rather than food hygiene, the FDA Food Code focuses on the "cleanability" of the facility. Being nonabsorbent ensures that cleaning solutions can effectively reach the entire surface and that the area can be dried completely, which is a key step in preventing pest infestations and maintaining overall kitchen sanitation. Managers must ensure that any repairs or new installations in the facility use materials that meet these non-absorbent standards to remain in compliance with local health regulations.

NEW QUESTION # 28

For a foodborne illness to be considered a confirmed outbreak, at least how many people must become sick?

- A. 0
- B. 1
- C. 2
- **D. 3**

Answer: D

Explanation:

According to the National Restaurant Association and the CDC standards used by ServSafe, a foodborne- illness outbreak is defined by three specific criteria. First, two or more people must experience the same symptoms after eating the same food. Second, an investigation must be conducted by state or local regulatory authorities (such as the health department). Third, the outbreak must be confirmed by laboratory analysis, which identifies the specific pathogen (like Salmonella or Norovirus) in both the affected individuals and the food source.

Understanding this definition is vital for a Food Protection Manager because the reporting and investigation process only "confirms" an outbreak when that second person is linked to the event. A single case (Option A) is considered an "illness" but not an "outbreak," though it should still be taken seriously. There are rare exceptions-such as cases of Botulism or Scombroid poisoning-where even a single case may trigger an immediate emergency investigation, but for the general purposes of the ServSafe exam and standard regulatory definitions, the number is two. When a suspected outbreak occurs, the Manager's role is to cooperate with the authorities, isolate any remaining suspected food (labeling it "Do Not Use/Do Not Discard"), and provide records like temperature logs and staff schedules. This helps investigators trace the source of the contamination, whether it was a failure in the "Flow of Food" (like improper cooling) or a sick employee. Proactive management and adherence to the FDA Food Code are designed to prevent these outbreaks from occurring by breaking the chain of contamination before it can affect multiple guests.

NEW QUESTION # 29

Which of the following practices of dispensing single-service items prevents contamination?

- A. Place unwrapped items in clean and sanitary dispensers.
- B. Distribute the unwrapped items to the customer upon request.
- **C. Provide individually wrapped ware.**
- D. Display unwrapped and left upright in containers with handles down.

Answer: C

Explanation:

Single-service items, such as plastic forks, spoons, and knives, are designed to be used once and then discarded. Because they cannot be cleaned and sanitized after being touched by a customer, they must be protected from contamination before use. Providing individually wrapped ware is the most effective method for preventing contamination. The wrapping acts as a physical barrier against dust, droplets from coughs or sneezes, and, most importantly, the hands of other customers or employees.

The ServSafe standards emphasize that the "Flow of Food" includes the service stage, where cross- contamination is a frequent risk. If items are not wrapped, they must be dispensed in a way that the customer touches only the item they are taking. Placing unwrapped items in a bin where customers must reach in (Option D) is a major violation, as it allows for "hand-to-item" contamination. Even if items are placed

"handles down," there is a high risk that a customer will accidentally touch the "business end" (the tines of a fork or the bowl of a spoon) of an adjacent utensil. While sanitary dispensers (Option B) are an approved method if they dispense one item at a time by the handle, individual wrapping (Option A) provides a superior level of protection during transport, storage, and customer self-service. Managers are responsible for ensuring that any single-service items that become soiled or are touched by customers are discarded immediately. This protocol is part of a larger strategy to minimize bare-hand contact with surfaces that will touch a customer's mouth.

NEW QUESTION # 30

When sanitizing utensils using hot water in a three-compartment sink, the temperature of the hot water must be at least

- **A. 171**