

TATTOO ESTABLISHMENT INSPECTION REPORT TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH

ESTABLISHMENT Salon Revelations				- 13	DATE 07/05/24 SCO		SCORE	
A20 Medical Center Pkwy. Shannon Gannon					EST. NO. 665171643		100/100	
CITY, STATE, ZIPTYPEMurfreesboroTN 37128Permanent					PURPOSE Routine			
PERMITTEE SUZANNE VONGPHACHANK-SALON	REVELATIONS				FOLLOW- U REQUIRED	P () YES		
PROHIBITED ACTS					LIGHTIN	NG		
1. Minor clients, tattoo removal, unhealt	hy site	2		19	Adequate			1
2. Licensed artist not on duty		2			VENTIL	ATION		
PHYSICAL FACILITIES				20	. Sufficient,	installed, maintai	ned	1
3. Work area separated		1	_		GENERA	L OPERATIO	ONS	
* 4. Autoclave meets minimum time, tem	perature, pressure	5	+	21	. Toxic item	s stored, labeled,	used	5
5. Regulated waste properly disposed		2			Premises n	aintained free of	litter, unnecessary articles,	
WATER		10.000		22	. unauthoriz	ed personnel, anir	nals, clean, maintenance,	1
 6. Water source approved, hot and cold 	6. Water source approved, hot and cold under pressure				equipment	equipment properly stored		
SEWAGE	Children's with a		_		TATTOO	D EQUIPMENT	Γ & UTENSILS	
 Sewage and liquid waste disposal 	 7. Sewage and liquid waste disposal 			23	. Properly in	Properly installed, maintained, constructed, designed		1
PLUMBING		11-11		24	. No reuse o	No reuse of single use articles		5
8. Installed, maintained 1				25	. Clean, free	Clean, free of abrasives and cleaners		
9. Cross-connection, backflow, back-siphonage 5		5		26	. Aisles uno	Aisles unobstructed		1
TOILET/HANDWASHING FA	CILITIES		010		TATTOO	OPERATION	NS	
* 10. Installed, designed, number, convenie	nt, available	5		27. Good hygienic practices, proper handwashing		oper handwashing	5	
Enclosed, tight-fitting doors, fixtures				28	and the second	surgery of the state of the sta	d, spill kits available	1
 covered receptacles, antibacterial soap, disposable towels/hand drying devices 		1	•	29	Employees with infectious lesions on hands restricted from tattooing		5	
GARBAGE & REFUSE DISPO	SAL	0 O	*	30	Monthly m	Monthly microbiological monitoring tests		5
12. rodent proof. Outside storage area clo			•	31	Equipment sterilized for no more than one (1) year.		more than one (1) year.	5
covered, controlled incineration			*	32		and the second sec	stocked as required	5
INSECT/RODENT CONTROL	- 11 [*	33.		Sterile instruments properly handled		5
 Presence/evidence of insects, rodents, 	rodents, harborage- outer		*	34	-	struments proper	ly handled	5
openings protected.		5		35		lyes or pigments		1
FLOORS/WALLS/CEILINGS/FURNISHINGS				36				1
14. Floors-constructed, drained, clean, g	and the second se	1	L	37				
15. Walls-constructed, clean, good repa		1	-	_	ADMINI	STRATION		1
16. Ceilings/attached equipment—constru repair		1		38	•		0	
	9			39	the state of the state	mit/license poste		0
18. Work area furnishings—clean, good repair		1		40	. Most curre	Most current complete inspection report available		0

Identifies critical items

Failure to correct any violations of critical items within seven (7) days or failure to correct violations of any noncritical items within fourteen (14) days may result in suspension of your tattoo establishment permit. If a second critical violation is committed within the period of one (1) year (calendar or otherwise), the tattoo studio shall be subject to a civil penalty of up to five hundred dollars (\$500) and the tattoo studio's permit may be revoked. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the tattoo establishment permit in a conspicuous manner and to keep this inspection report available at this facility for public disclosure to any person who requests to review it. You have the right to request a review regarding this report by filing a written request with the local health department within ten (10) days of the date of this report. T.C.A. Sections 62-38-201 et. seq., 68-1-103, 4-5-202, and 4-5-320.

Signature of Person in Charge

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07/05/24	

By	\leq	EHS	
Time in/out	02:40 PM	02:54 PM	

Date of Signature

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Establishment Information

Establishment Name: Salon Revelations Establishment Number: 665171643

Observed Violations

Total # 0

***See page at the end of this document for any violations that could not be displayed in this space.

Additional Comments

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Establishment Information

Establishment Name: Salon Revelations Establishment Number: 665171643

Observed Violations (cont'd)

Additional Comments (cont'd) Source Type: Water

Source: City

Many people have hepatitis C and do not know it

CDC now recommends all adults be tested for hepatitis C

Licensed facilities use safe tattooing and/or piercing techniques that are proven to prevent hepatitis C and other infections such as HIV







For more information, call your local health department https://www.tn.gov/health/health-program-areas/localdepartments.html

