



TENNESSEE DEPARTMENT OF HEALTH
FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE
95

Establishment Name Usa Sports Grill
Address 151 Adams Lane Plz, STE 15
City Mount Juliet
Inspection Date 10/05/2022
Risk Category 01
Number of Seats 100

Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health interventions are control measures to prevent illness or injury.

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Table with 2 main columns: Supervision, Employee Health, Good Hygienic Practices, Preventing Contamination by Hands, Approved Source, Protection from Contamination, Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods, Cooling and Holding, Date Marking, and Time as a Public Health Control, Consumer Advisory, Highly Susceptible Populations, Chemicals, Conformance with Approved Procedures.

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

GOOD RETAIL PRACTICES

Table with 2 main columns: Safe Food and Water, Food Temperature Control, Food Identification, Prevention of Food Contamination, Proper Use of Utensils, Utensils and Equipment, Physical Facilities, Administrative Items, Non-Smokers Protection Act.

Failure to correct any violations of risk factor items within ten (10) days may result in suspension of your food service establishment permit. Repeated violation of an identical risk factor may result in revocation of your food service establishment permit.

Signature of Person In Charge [Signature] 10/05/2022
Signature of Environmental Health Specialist [Signature] 10/05/2022

TENNESSEE DEPARTMENT OF HEALTH  
 DIVISION OF ENVIRONMENTAL HEALTH  
 FOOD INSPECTION DATA



<b>Establishment Information</b>	
Establishment Name:	Usa Sports Grill
Establishment Number #:	605188342

<b>NSPA Survey – To be completed if #57 is "No"</b>	
Age-restricted venue does not affirmatively restrict access to its buildings or facilities at all times to persons who are twenty-one (21) years of age or older.	Yes
Age-restricted venue does not require each person attempting to gain entry to submit acceptable form of identification.	Yes
"No Smoking" signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance.	Yes
Garage type doors in non-enclosed areas are not completely open.	Yes
Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	Yes
Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	Yes
Smoking observed where smoking is prohibited by the Act.	Yes

<b>Warewashing Info</b>			
Machine Name	Sanitizer Type	PPM	Temperature ( Fahrenheit)
CMA	Cl	100	

<b>Equipment Temperature</b>	
Description	Temperature ( Fahrenheit)
Ascend ric	39
Ascend rif	1
M3 Turbo air ric	31
Wic	38

<b>Food Temperature</b>		
Description	State of Food	Temperature ( Fahrenheit)
Chicken tenders	Cold Holding	40
Diced tomatoes	Cold Holding	39
Chili	Cold Holding	40
Cheese dip	Cold Holding	39
Burger	Cold Holding	40
Chicken tenders	Cooking	173

**Observed Violations**

Total # 4

Repeated # 0

36: Several gnats in kitchen flying around coolers

45: Severely grooved cutting board on ric

47: Inside microwave is dirty

53: Grease build up around fryers and debris under equipment



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**Comments/Other Observations**

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: (IN): An employee health policy is available.
- 3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.
- 4: (IN) Employee isn't drinking, eating, or using tobacco in a food preparation area.
- 5: (IN) No employees exhibiting persistent coughing, sneezing, runny nose, or watery eyes.
- 6: Employee washed hands after handling raw chicken
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
- 8: (IN): All handsinks are properly equipped and conveniently located for food employee use.
- 9: See source info
- 10: (NO): No food received during inspection.
- 11: (IN) All food was in good, sound condition at time of inspection.
- 12: (NA) Shell stock not used and parasite destruction not required at this establishment.
- 13: (IN) All raw animal food is separated and protected as required.
- 14: (IN) All food contact surfaces of equipment and utensils cleaned and sanitized using approved methods.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: See food temps
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: (NO) TCS food is not being held hot during inspection.
- 20: See food temps
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NA) No food held under time as a public health control.
- 23: (NA) Establishment does not serve animal food that is raw or undercooked.
- 24: (NA) A highly susceptible population is not served.
- 25: (NA) Establishment does not use any additives or sulfites on the premises.
- 26: (IN) All poisonous or toxic items are properly identified, stored, and used.
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.
- 57:
  - 1:
  - 2:
  - 3:
  - 4:
  - 5:
  - 6:
  - 7:
- 58:
  - 1:
  - 2:
  - 3:

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

**Additional Comments**

**See last page for additional comments.**

\*\*\*See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

***Establishment Information***

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***Comments/Other Observations (cont'd)***

***Additional Comments (cont'd)***

***See last page for additional comments.***

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**Sources**

Source Type: Food Source: Restaurant Depot, Kroger, GFS,

Source Type: Water Source: City

Source Type: Source:

Source Type: Source:

Source Type: Source:

**Additional Comments**