



# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

# 96

Establishment Name Los Compadres @ I40 Type of Establishment ☒ Farmer's Market Food Unit ☐ Permanent ☐ Mobile  
 Address 818 S. Cumberland St. ☐ Temporary ☐ Seasonal  
 City Lebanon Time in 01:19 PM AM / PM Time out 01:37 PM AM / PM  
 Inspection Date 11/08/2022 Establishment # 605224531 Embargoed 0  
 Purpose of Inspection ☐ Routine ☒ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other  
 Risk Category ☐ 1 ☒ 2 ☐ 3 ☐ 4 Follow-up Required ☐ Yes ☒ No Number of Seats 215

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

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

| IN=in compliance  |                                  |                                  |                                  |                                  | OUT=not in compliance                                                                  |  |  |  |  | NA=not applicable                |                                  |  |   |    | NO=not observed                  |                                  |                                  |                                  |                                      | COS=corrected on-site during inspection                                |                                  |                                                                          |  |  | R=repeat (violation of the same code provision) |                                  |                                  |                                  |   |   |   |    |  |
|-------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------------------------------------------------------------|--|--|--|--|----------------------------------|----------------------------------|--|---|----|----------------------------------|----------------------------------|----------------------------------|----------------------------------|--------------------------------------|------------------------------------------------------------------------|----------------------------------|--------------------------------------------------------------------------|--|--|-------------------------------------------------|----------------------------------|----------------------------------|----------------------------------|---|---|---|----|--|
| Compliance Status |                                  |                                  |                                  |                                  |                                                                                        |  |  |  |  | COS                              |                                  |  | R |    | WT                               |                                  | Compliance Status                |                                  |                                      |                                                                        |                                  |                                                                          |  |  |                                                 |                                  | COS                              |                                  |   | R |   | WT |  |
|                   | IN                               | OUT                              | NA                               | NO                               | Supervision                                                                            |  |  |  |  |                                  |                                  |  |   |    |                                  |                                  |                                  | IN                               | OUT                                  | NA                                                                     | NO                               | Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods |  |  |                                                 |                                  |                                  |                                  |   |   |   |    |  |
| 1                 | <input checked="" type="radio"/> | <input checked="" type="radio"/> |                                  |                                  | Person in charge present, demonstrates knowledge, and performs duties                  |  |  |  |  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |  |   | 5  | 16                               | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/>     | Proper cooking time and temperatures                                   |                                  |                                                                          |  |  | <input checked="" type="radio"/>                | <input checked="" type="radio"/> |                                  |                                  | 5 |   |   |    |  |
|                   | IN                               | OUT                              | NA                               | NO                               | Employee Health                                                                        |  |  |  |  |                                  |                                  |  |   |    |                                  |                                  | 17                               | <input checked="" type="radio"/> | <input checked="" type="radio"/>     | <input checked="" type="radio"/>                                       | <input checked="" type="radio"/> | Proper reheating procedures for hot holding                              |  |  |                                                 |                                  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |   |   |   |    |  |
| 2                 | <input checked="" type="radio"/> | <input checked="" type="radio"/> |                                  |                                  | Management and food employee awareness, reporting                                      |  |  |  |  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |  |   | 5  |                                  | IN                               | OUT                              | NA                               | NO                                   | Cooling and Holding, Date Marking, and Time as a Public Health Control |                                  |                                                                          |  |  |                                                 |                                  |                                  |                                  |   |   |   |    |  |
| 3                 | <input checked="" type="radio"/> | <input checked="" type="radio"/> |                                  |                                  | Proper use of restriction and exclusion                                                |  |  |  |  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |  |   |    | 18                               | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/>     | Proper cooling time and temperature                                    |                                  |                                                                          |  |  | <input checked="" type="radio"/>                | <input checked="" type="radio"/> |                                  |                                  | 5 |   |   |    |  |
|                   | IN                               | OUT                              | NA                               | NO                               | Good Hygienic Practices                                                                |  |  |  |  |                                  |                                  |  |   |    |                                  |                                  | 19                               | <input checked="" type="radio"/> | <input checked="" type="radio"/>     | <input checked="" type="radio"/>                                       | <input checked="" type="radio"/> | Proper hot holding temperatures                                          |  |  |                                                 |                                  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |   |   |   |    |  |
| 4                 | <input checked="" type="radio"/> | <input checked="" type="radio"/> |                                  | <input checked="" type="radio"/> | Proper eating, tasting, drinking, or tobacco use                                       |  |  |  |  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |  |   | 5  | 20                               | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/>     | Proper cold holding temperatures                                       |                                  |                                                                          |  |  | <input checked="" type="radio"/>                | <input checked="" type="radio"/> |                                  |                                  |   |   |   |    |  |
| 5                 | <input checked="" type="radio"/> | <input checked="" type="radio"/> |                                  | <input checked="" type="radio"/> | No discharge from eyes, nose, and mouth                                                |  |  |  |  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |  |   | 21 | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/>     | Proper date marking and disposition                                    |                                  |                                                                          |  |  | <input checked="" type="radio"/>                | <input checked="" type="radio"/> |                                  |                                  |   |   |   |    |  |
|                   | IN                               | OUT                              | NA                               | NO                               | Preventing Contamination by Hands                                                      |  |  |  |  |                                  |                                  |  |   |    |                                  |                                  | 22                               | <input checked="" type="radio"/> | <input checked="" type="radio"/>     | <input checked="" type="radio"/>                                       | <input checked="" type="radio"/> | Time as a public health control: procedures and records                  |  |  |                                                 |                                  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |   |   |   |    |  |
| 6                 | <input checked="" type="radio"/> | <input checked="" type="radio"/> |                                  | <input checked="" type="radio"/> | Hands clean and properly washed                                                        |  |  |  |  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |  |   | 5  |                                  | IN                               | OUT                              | NA                               | NO                                   | Consumer Advisory                                                      |                                  |                                                                          |  |  |                                                 |                                  |                                  |                                  |   |   |   |    |  |
| 7                 | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/> | No bare hand contact with ready-to-eat foods or approved alternate procedures followed |  |  |  |  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |  |   |    | 23                               | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/>     | Consumer advisory provided for raw and undercooked food                |                                  |                                                                          |  |  | <input checked="" type="radio"/>                | <input checked="" type="radio"/> |                                  |                                  | 4 |   |   |    |  |
| 8                 | <input checked="" type="radio"/> | <input checked="" type="radio"/> |                                  |                                  | Handwashing sinks properly supplied and accessible                                     |  |  |  |  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |  |   | 2  |                                  | IN                               | OUT                              | NA                               | NO                                   | Highly Susceptible Populations                                         |                                  |                                                                          |  |  |                                                 |                                  |                                  |                                  |   |   |   |    |  |
|                   | IN                               | OUT                              | NA                               | NO                               | Approved Source                                                                        |  |  |  |  |                                  |                                  |  |   |    |                                  |                                  | 24                               | <input checked="" type="radio"/> | <input checked="" type="radio"/>     | <input checked="" type="radio"/>                                       | <input checked="" type="radio"/> | Pasteurized foods used; prohibited foods not offered                     |  |  |                                                 |                                  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |   |   | 5 |    |  |
| 9                 | <input checked="" type="radio"/> | <input checked="" type="radio"/> |                                  |                                  | Food obtained from approved source                                                     |  |  |  |  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |  |   | 5  |                                  | IN                               | OUT                              | NA                               | NO                                   | Chemicals                                                              |                                  |                                                                          |  |  |                                                 |                                  |                                  |                                  |   |   |   |    |  |
| 10                | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/> | Food received at proper temperature                                                    |  |  |  |  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |  |   |    | 25                               | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/>     | Food additives: approved and properly used                             |                                  |                                                                          |  |  | <input checked="" type="radio"/>                | <input checked="" type="radio"/> |                                  |                                  | 5 |   |   |    |  |
| 11                | <input checked="" type="radio"/> | <input checked="" type="radio"/> |                                  |                                  | Food in good condition, safe, and unadulterated                                        |  |  |  |  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |  |   |    | 26                               | <input checked="" type="radio"/> | <input checked="" type="radio"/> |                                  |                                      | Toxic substances properly identified, stored, used                     |                                  |                                                                          |  |  | <input checked="" type="radio"/>                | <input checked="" type="radio"/> |                                  |                                  |   |   |   |    |  |
| 12                | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/> | Required records available: shell stock tags, parasite destruction                     |  |  |  |  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |  |   |    | IN                               | OUT                              | NA                               | NO                               | Conformance with Approved Procedures |                                                                        |                                  |                                                                          |  |  |                                                 |                                  |                                  |                                  |   |   |   |    |  |
|                   | IN                               | OUT                              | NA                               | NO                               | Protection from Contamination                                                          |  |  |  |  |                                  |                                  |  |   |    |                                  |                                  | 27                               | <input checked="" type="radio"/> | <input checked="" type="radio"/>     | <input checked="" type="radio"/>                                       | <input checked="" type="radio"/> | Compliance with variance, specialized process, and HACCP plan            |  |  |                                                 |                                  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |   |   | 5 |    |  |
| 13                | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/> |                                  | Food separated and protected                                                           |  |  |  |  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |  |   | 4  |                                  |                                  |                                  |                                  |                                      |                                                                        |                                  |                                                                          |  |  |                                                 |                                  |                                  |                                  |   |   |   |    |  |
| 14                | <input checked="" type="radio"/> | <input checked="" type="radio"/> | <input checked="" type="radio"/> |                                  | Food-contact surfaces: cleaned and sanitized                                           |  |  |  |  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |  |   | 5  |                                  |                                  |                                  |                                  |                                      |                                                                        |                                  |                                                                          |  |  |                                                 |                                  |                                  |                                  |   |   |   |    |  |
| 15                | <input checked="" type="radio"/> | <input checked="" type="radio"/> |                                  |                                  | Proper disposition of unsafe food, returned food not re-served                         |  |  |  |  | <input checked="" type="radio"/> | <input checked="" type="radio"/> |  |   | 2  |                                  |                                  |                                  |                                  |                                      |                                                                        |                                  |                                                                          |  |  |                                                 |                                  |                                  |                                  |   |   |   |    |  |

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

## GOOD RETAIL PRACTICES

| OUT=not in compliance |                                  |                                                                         |  |  | COS=corrected on-site during inspection |                       |    |                   |                                  | R=repeat (violation of the same code provision)                                       |  |     |                                  |                       |    |
|-----------------------|----------------------------------|-------------------------------------------------------------------------|--|--|-----------------------------------------|-----------------------|----|-------------------|----------------------------------|---------------------------------------------------------------------------------------|--|-----|----------------------------------|-----------------------|----|
| Compliance Status     |                                  |                                                                         |  |  | COS                                     | R                     | WT | Compliance Status |                                  |                                                                                       |  |     | COS                              | R                     | WT |
|                       | OUT                              | Safe Food and Water                                                     |  |  |                                         |                       |    |                   | OUT                              | Utensils and Equipment                                                                |  |     |                                  |                       |    |
| 28                    | <input type="radio"/>            | Pasteurized eggs used where required                                    |  |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 45                | <input checked="" type="radio"/> | Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used |  |     | <input type="radio"/>            | <input type="radio"/> | 1  |
| 29                    | <input type="radio"/>            | Water and ice from approved source                                      |  |  | <input type="radio"/>                   | <input type="radio"/> | 2  | 46                | <input type="radio"/>            | Warewashing facilities, installed, maintained, used, test strips                      |  |     | <input type="radio"/>            | <input type="radio"/> | 1  |
| 30                    | <input type="radio"/>            | Variance obtained for specialized processing methods                    |  |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 47                | <input type="radio"/>            | Nonfood-contact surfaces clean                                                        |  |     | <input type="radio"/>            | <input type="radio"/> | 1  |
|                       | OUT                              | Food Temperature Control                                                |  |  |                                         |                       |    |                   | OUT                              | Physical Facilities                                                                   |  |     |                                  |                       |    |
| 31                    | <input type="radio"/>            | Proper cooling methods used; adequate equipment for temperature control |  |  | <input type="radio"/>                   | <input type="radio"/> | 2  | 48                | <input type="radio"/>            | Hot and cold water available; adequate pressure                                       |  |     | <input type="radio"/>            | <input type="radio"/> | 2  |
| 32                    | <input type="radio"/>            | Plant food properly cooked for hot holding                              |  |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 49                | <input type="radio"/>            | Plumbing installed; proper backflow devices                                           |  |     | <input type="radio"/>            | <input type="radio"/> | 2  |
| 33                    | <input type="radio"/>            | Approved thawing methods used                                           |  |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 50                | <input type="radio"/>            | Sewage and waste water properly disposed                                              |  |     | <input type="radio"/>            | <input type="radio"/> | 2  |
| 34                    | <input checked="" type="radio"/> | Thermometers provided and accurate                                      |  |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 51                | <input type="radio"/>            | Toilet facilities: properly constructed, supplied, cleaned                            |  |     | <input type="radio"/>            | <input type="radio"/> | 1  |
|                       | OUT                              | Food Identification                                                     |  |  |                                         |                       |    | 52                | <input type="radio"/>            | Garbage/refuse properly disposed; facilities maintained                               |  |     | <input type="radio"/>            | <input type="radio"/> | 1  |
| 35                    | <input type="radio"/>            | Food properly labeled; original container; required records available   |  |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 53                | <input type="radio"/>            | Physical facilities installed, maintained, and clean                                  |  |     | <input type="radio"/>            | <input type="radio"/> | 1  |
|                       | OUT                              | Prevention of Food Contamination                                        |  |  |                                         |                       |    | 54                | <input type="radio"/>            | Adequate ventilation and lighting; designated areas used                              |  |     | <input type="radio"/>            | <input type="radio"/> | 1  |
| 36                    | <input type="radio"/>            | Insects, rodents, and animals not present                               |  |  | <input type="radio"/>                   | <input type="radio"/> | 2  |                   | OUT                              | Administrative Items                                                                  |  |     |                                  |                       |    |
| 37                    | <input type="radio"/>            | Contamination prevented during food preparation, storage & display      |  |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 55                | <input type="radio"/>            | Current permit posted                                                                 |  |     | <input type="radio"/>            | <input type="radio"/> | 0  |
| 38                    | <input type="radio"/>            | Personal cleanliness                                                    |  |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 56                | <input type="radio"/>            | Most recent inspection posted                                                         |  |     | <input type="radio"/>            | <input type="radio"/> |    |
| 39                    | <input type="radio"/>            | Wiping cloths: properly used and stored                                 |  |  | <input type="radio"/>                   | <input type="radio"/> | 1  |                   | Compliance Status                |                                                                                       |  | YES | NO                               | WT                    |    |
| 40                    | <input type="radio"/>            | Washing fruits and vegetables                                           |  |  | <input type="radio"/>                   | <input type="radio"/> | 1  |                   |                                  | Non-Smokers Protection Act                                                            |  |     |                                  |                       |    |
|                       | OUT                              | Proper Use of Utensils                                                  |  |  |                                         |                       |    | 57                |                                  | Compliance with TN Non-Smoker Protection Act                                          |  |     | <input checked="" type="radio"/> | <input type="radio"/> |    |
| 41                    | <input checked="" type="radio"/> | In-use utensils; properly stored                                        |  |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 58                |                                  | Tobacco products offered for sale                                                     |  |     | <input type="radio"/>            | <input type="radio"/> | 0  |
| 42                    | <input type="radio"/>            | Utensils, equipment and linens; properly stored, dried, handled         |  |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 59                |                                  | If tobacco products are sold, NSPA survey completed                                   |  |     | <input type="radio"/>            | <input type="radio"/> |    |
| 43                    | <input checked="" type="radio"/> | Single-use/single-service articles; properly stored, used               |  |  | <input type="radio"/>                   | <input type="radio"/> | 1  |                   |                                  |                                                                                       |  |     |                                  |                       |    |
| 44                    | <input type="radio"/>            | Gloves used properly                                                    |  |  | <input type="radio"/>                   | <input type="radio"/> | 1  |                   |                                  |                                                                                       |  |     |                                  |                       |    |

**TENNESSEE DEPARTMENT OF HEALTH  
DIVISION OF ENVIRONMENTAL HEALTH  
FOOD INSPECTION DATA**



**Establishment Information**

Establishment Name: Los Compadres @ I40

Establishment Number #: 605224531

**NSPA Survey – To be completed if #57 is "No"**

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.

Age-restricted venue does not require each person attempting to gain entry to submit acceptable form of identification.

"No Smoking" signs or the International "Non-Smoking" symbol are not conspicuously posted at every entrance.

Garage type doors in non-enclosed areas are not completely open.

Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.

Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.

Smoking observed where smoking is prohibited by the Act.

**Warewashing Info**

| Machine Name | Sanitizer Type | PPM | Temperature ( Fahrenheit) |
|--------------|----------------|-----|---------------------------|
|              |                |     |                           |

**Equipment Temperature**

| Description | Temperature ( Fahrenheit) |
|-------------|---------------------------|
|             |                           |

**Food Temperature**

| Description      | State of Food | Temperature ( Fahrenheit) |
|------------------|---------------|---------------------------|
| Pico             | Cold Holding  | 41                        |
| Lettuce          | Cold Holding  | 41                        |
| Cheese           | Cold Holding  | 41                        |
| Chicken          | Cold Holding  | 41                        |
| Mixed Vegetables | Cold Holding  | 35                        |
| Steak            | Cold Holding  | 41                        |
| Fish             | Cold Holding  | 39                        |
| Shrimp           | Cold Holding  | 35                        |

**Observed Violations****Total #** 4**Repeated #** 0

34:

41:

43:

45:

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FOOD INSPECTION DATA



***Establishment Information***

Establishment Name: Los Compadres @ I40

Establishment Number : 605224531

***Comments/Other Observations***

57:

58:

\*\*\*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**

Establishment Name: Los Compadres @ I40

Establishment Number : 605224531

**Comments/Other Observations (cont'd)****Additional Comments (cont'd)*****See last page for additional comments.***

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**Sources**

|              |         |
|--------------|---------|
| Source Type: | Source: |
| Source Type: | Source: |
| Source Type: | Source: |
| Source Type: | Source: |
| Source Type: | Source: |

**Additional Comments**

Priority violations corrected