



TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

98

Establishment Name Popeye's Louisiana Kitchen, Inc. #4581 Type of Establishment ☒ Farmer's Market Food Unit ☐ Permanent ☐ Mobile
Address 4720 Showcase Blvd. ☐ Temporary ☐ Seasonal
City Memphis Time in 12:30 PM AM / PM Time out 01:15 PM AM / PM
Inspection Date 02/20/2024 Establishment # 605193928 Embargoed 000
Purpose of Inspection ☒ Routine ☐ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other
Risk Category ☐ 1 ☒ 2 ☐ 3 ☐ 4 Follow-up Required ☐ Yes ☒ No Number of Seats 50

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="checkbox"/>	<input type="checkbox"/>			Person in charge present, demonstrates knowledge, and performs duties										<input type="checkbox"/>	<input type="checkbox"/>	5	16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time and temperatures										<input type="checkbox"/>	<input type="checkbox"/>	5	
	IN	OUT	NA	NO	Employee Health															<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding										<input type="checkbox"/>	<input type="checkbox"/>		
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Management and food employee awareness, reporting										<input type="checkbox"/>	<input type="checkbox"/>	5		IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control													
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Proper use of restriction and exclusion										<input type="checkbox"/>	<input type="checkbox"/>																				
	IN	OUT	NA	NO	Good Hygienic Practices													18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time and temperature										<input type="checkbox"/>	<input type="checkbox"/>	5	
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use										<input type="checkbox"/>	<input type="checkbox"/>		19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures										<input type="checkbox"/>	<input type="checkbox"/>		
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	No discharge from eyes, nose, and mouth										<input type="checkbox"/>	<input type="checkbox"/>		20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Proper cold holding temperatures										<input type="checkbox"/>	<input type="checkbox"/>		
	IN	OUT	NA	NO	Preventing Contamination by Hands													21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking and disposition										<input type="checkbox"/>	<input type="checkbox"/>		
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	Hands clean and properly washed										<input type="checkbox"/>	<input type="checkbox"/>	5	22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Time as a public health control: procedures and records										<input type="checkbox"/>	<input type="checkbox"/>		
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with ready-to-eat foods or approved alternate procedures followed										<input type="checkbox"/>	<input type="checkbox"/>				IN	OUT	NA	NO	Consumer Advisory												
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Handwashing sinks properly supplied and accessible										<input type="checkbox"/>	<input type="checkbox"/>	2	23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Consumer advisory provided for raw and undercooked food										<input type="checkbox"/>	<input type="checkbox"/>	4	
	IN	OUT	NA	NO	Approved Source														IN	OUT	NA	NO	Highly Susceptible Populations													
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Food obtained from approved source										<input type="checkbox"/>	<input type="checkbox"/>	5	24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Pasteurized foods used; prohibited foods not offered										<input type="checkbox"/>	<input type="checkbox"/>	5	
10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature										<input type="checkbox"/>	<input type="checkbox"/>				IN	OUT	NA	NO	Chemicals												
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Food in good condition, safe, and unadulterated										<input type="checkbox"/>	<input type="checkbox"/>			25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Food additives: approved and properly used										<input type="checkbox"/>	<input type="checkbox"/>	5
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Required records available: shell stock tags, parasite destruction										<input type="checkbox"/>	<input type="checkbox"/>		26	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Toxic substances properly identified, stored, used										<input type="checkbox"/>	<input type="checkbox"/>			
	IN	OUT	NA	NO	Protection from Contamination														IN	OUT	NA	NO	Conformance with Approved Procedures													
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Food separated and protected										<input type="checkbox"/>	<input type="checkbox"/>	4	27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Compliance with variance, specialized process, and HACCP plan										<input type="checkbox"/>	<input type="checkbox"/>	5	
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Food-contact surfaces: cleaned and sanitized										<input type="checkbox"/>	<input type="checkbox"/>	5																			
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Proper disposition of unsafe food, returned food not re-served										<input type="checkbox"/>	<input type="checkbox"/>	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	
OUT	Safe Food and Water										
28	<input type="radio"/>	Pasteurized eggs used where required						<input type="radio"/>	<input type="radio"/>	1	
29	<input type="radio"/>	Water and ice from approved source						<input type="radio"/>	<input type="radio"/>	2	
30	<input type="radio"/>	Variance obtained for specialized processing methods						<input type="radio"/>	<input type="radio"/>	1	
OUT	Food Temperature Control										
31	<input type="radio"/>	Proper cooling methods used; adequate equipment for temperature control						<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	
33	<input type="radio"/>	Approved thawing methods used						<input type="radio"/>	<input type="radio"/>	1	
34	<input type="radio"/>	Thermometers provided and accurate						<input type="radio"/>	<input type="radio"/>	1	
OUT	Food Identification										
35	<input checked="" type="radio"/>	Food properly labeled; original container; required records available						<input type="radio"/>	<input type="radio"/>	1	
OUT	Prevention of Food Contamination										
36	<input type="radio"/>	Insects, rodents, and animals not present						<input type="radio"/>	<input type="radio"/>	2	
37	<input type="radio"/>	Contamination prevented during food preparation, storage & display						<input type="radio"/>	<input type="radio"/>	1	
38	<input type="radio"/>	Personal cleanliness						<input type="radio"/>	<input type="radio"/>	1	
39	<input type="radio"/>	Wiping cloths: properly used and stored						<input type="radio"/>	<input type="radio"/>	1	
40	<input type="radio"/>	Washing fruits and vegetables						<input type="radio"/>	<input type="radio"/>	1	
OUT	Proper Use of Utensils										
41	<input type="radio"/>	In-use utensils; properly stored						<input type="radio"/>	<input type="radio"/>	1	
42	<input type="radio"/>	Utensils, equipment and linens; properly stored, dried, handled						<input type="radio"/>	<input type="radio"/>	1	
43	<input 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	

Compliance Status								COS	R	WT
OUT	Utensils and Equipment									
45	<input checked="" type="radio"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used						<input type="radio"/>	<input type="radio"/>	1
46	<input type="radio"/>	Warewashing facilities, installed, maintained, used, test strips						<input type="radio"/>	<input type="radio"/>	1
47	<input type="radio"/>	Nonfood-contact surfaces clean						<input type="radio"/>	<input type="radio"/>	1
OUT	Physical Facilities									
48	<input type="radio"/>	Hot and cold water available; adequate pressure						<input type="radio"/>	<input type="radio"/>	2
49	<input type="radio"/>	Plumbing installed; proper backflow devices						<input type="radio"/>	<input type="radio"/>	2
50	<input type="radio"/>	Sewage and waste water properly disposed						<input type="radio"/>	<input type="radio"/>	2
51	<input type="radio"/>	Toilet facilities: properly constructed, supplied, cleaned						<input type="radio"/>	<input type="radio"/>	1
52	<input type="radio"/>	Garbage/refuse properly disposed; facilities maintained						<input type="radio"/>	<input type="radio"/>	1
53	<input type="radio"/>	Physical facilities installed, maintained, and clean						<input type="radio"/>	<input type="radio"/>	1
54	<input type="radio"/>	Adequate ventilation and lighting; designated areas used						<input type="radio"/>	<input type="radio"/>	1
OUT	Administrative Items									
55	<input type="radio"/>	Current permit posted						<input type="radio"/>	<input type="radio"/>	0
56	<input type="radio"/>	Most recent inspection posted						<input type="radio"/>	<input type="radio"/>	0
Compliance Status								YES	NO	WT
Non-Smokers Protection Act										
57		Compliance with TN Non-Smoker Protection Act						<input checked="" type="radio"/>	<input type="radio"/>	0
58		Tobacco products offered for sale						<input type="radio"/>	<input checked="" type="radio"/>	0
59		If tobacco products are sold, NSPA survey completed						<input type="radio"/>	<input type="radio"/>	0

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



Establishment Information

Establishment Name: Popeye's Louisiana Kitchen, Inc. #4581
Establishment Number #: 605193928

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.	No
Age-restricted venue does not require each person attempting to gain entry to submit acceptable form of identification.	No
"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.	No
Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	No
Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	No
Smoking observed where smoking is prohibited by the Act.	No

Warewashing Info

Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)
3 compartment sink	Hydriion	100	65

Equipment Temperature

Description	Temperature (Fahrenheit)
Refrigerator	34
Refrigerator	36
Refrigerator	40
Freezer	-4

Food Temperature

Description	State of Food	Temperature (Fahrenheit)
Mashed potatoes	Hot Holding	155
Macaroni and cheese	Hot Holding	145
Chicken	Hot Holding	159
Chicken nuggets	Hot Holding	157
Slaw	Cold Holding	36
Chicken tenders	Hot Holding	165
Beans	Hot Holding	167

Observed Violations**Total #** 2**Repeated #** 0

35: Improper labeling of flour bin in the kitchen area.

45: Microwave need cleaning.

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Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Employee illness policy posted.
- 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: Observed hands cleaned and properly washed.
- 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:
- 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:
- 17: (NO) No TCS foods reheated during inspection.
- 18: No cooling done at the time of inspection.
- 19:
- 20:
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22:
- 23: (NA) Establishment does not serve animal food that is raw or undercooked.
- 24: (NA) A highly susceptible population is not served.
- 25:
- 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.

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Establishment Number : 605193928

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

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Sources

Source Type:	Food
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Source: CDI

Source Type:

Source:

Source Type:

Source:

Source Type:

Source:

Source Type:

Source:

Additional Comments