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Address

City

## TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

COS R WT

O Farmer's Market Food Unit Panera #1012 Establishment Name Permanent O Mobile Type of Establishment 401 S. Mt.Juliet Rd., STE 160

O Temporary O Seasonal **Mount Juliet** Time in 10:05 AM AM / PM Time out 11:17: AM AM / PM

08/30/2024 Establishment # 605194604 Embargoed 0 Inspection Date

**K**Routine O Follow-up O Complaint O Preliminary O Consultation/Other Purpose of Inspection

Number of Seats 200 Risk Category О3 Follow-up Required O Yes 疑 No

|                   | N=in o | compli | ance |    | OUT=not in compliance NA=not  | applicable NO=not obse                               | rved |   | C  | 05  | S=corrected on-site during inspection |    |     |    |     | spection R*repeat (violatio        |
|-------------------|--------|--------|------|----|-------------------------------|--|------|---|----|-----|---------------------------------------|----|-----|----|-----|------------------------------------|
| Compliance Status |        |        |      |    |                               |  | COS  | R | WT | ] [ |                                       |    |     |    |     | Compliance Status                  |
| Г                 | IN     | OUT    | NA   | NO | Superv                        | islon  |      |   |    | 1 [ |                                       | IN | оит | NA | NO  | Cooking and Reheating of 1         |
| Ε.                | . 89   |        | -    |    | Person in charge present, dem | erson in charge present, demonstrates knowledge, and |      |   | Τ. | 11  |                                       |    |     |    |     | Control For Safety (1              |
| יו                | 氮      | 0      |      |    | performs duties               |  | 0    | 0 | 9  | 11  | 16                                    | 0  | 0   | 0  | X   | Proper cooking time and temperate  |
|                   | IN     | OUT    | NA   | NO | Employee                      | Health   |      |   |    | 1 [ | 17                                    | 0  | 0   | 0  | 200 | Proper reheating procedures for hi |
| 2                 | DK     | 0      |      |    | Management and food employe   | e awareness; reporting                               | 0    | 0 |    | 11  |                                       | IN | OUT |    |     | Cooling and Holding, Date Me       |
|                   |        |        |      |    |                               |  |      |   |    |     |                                       |    |     |    |     |                                    |

| 1  | 羅   | 0   |    |    | Person in charge present, demonstrates knowledge, and<br>performs duties                  | 0 | 0 | 5 |
|----|-----|-----|----|----|---|---|---|---|
|    | IN  | OUT | NA | NO | Employee Health   |   |   |   |
| 2  | ЭX  | 0   |    |    | Management and food employee awareness; reporting   | 0 | 0 |   |
| 3  | ×   | 0   |    |    | Proper use of restriction and exclusion   | 0 | 0 | 5 |
|    | IN  | OUT | NA | NO | Good Hygienic Practices   |   |   |   |
| 4  | *   | 0   |    | 0  | Proper eating, tasting, drinking, or tobacco use  | 0 | 0 |   |
| 5  | *   | 0   |    | 0  | No discharge from eyes, nose, and mouth   | 0 | 0 | 0 |
|    | IN  | OUT | NA | NO | Preventing Contamination by Hands   |   |   |   |
| 6  | 100 | 0   |    | 0  | Hands clean and properly washed   | 0 | 0 |   |
| 7  | 왮   | 0   | 0  | 0  | No bare hand contact with ready-to-eat foods or approved<br>alternate procedures followed | 0 | 0 | 5 |
| 8  | X   | 0   |    |    | Handwashing sinks properly supplied and accessible  | 0 | 0 | 2 |
|    | IN  | OUT | NA | NO | Approved Source   |   |   |   |
| 9  | 黨   | 0   |    |    | Food obtained from approved source  | 0 | 0 |   |
| 10 | ×   | 0   | 0  | 0  | Food received at proper temperature   | 0 | 0 |   |
| 11 | ×   | 0   |    |    | Food in good condition, safe, and unadulterated   | 0 | 0 | 5 |
| 12 | 0   | 0   | ×  | 0  | Required records available: shell stock tags, parasite<br>destruction                     | 0 | 0 |   |
|    | IN  | OUT | NA | NO | Protection from Contamination   |   |   |   |
| _  | _   | _   |    | -  |   |   |   |   |

Food separated and protected

Food-contact surfaces: cleaned and sanitized

Proper disposition of unsafe food, returned food not re

|    |    |     |          |    |   | _ | _ |   |
|----|----|-----|----------|----|---|---|---|---|
|    | IN | оит | NA       | NO | Cooking and Reheating of Time/Temperature<br>Control For Safety (TCS) Foods |   |   |   |
| 16 | 0  | 0   | 0        | 寒  | Proper cooking time and temperatures  | 0 | 0 | 5 |
| 17 | 0  | 0   | 0        | 3% | Proper reheating procedures for hot holding                                 | 0 | 0 | 9 |
|    | IN | оит | NA       | NO | Cooling and Holding, Date Marking, and Time as<br>a Public Health Control   |   |   |   |
| 18 | 0  | 0   | 0        | 涎  | Proper cooling time and temperature   | 0 | 0 |   |
| 19 | ×  | 0   | 0        | 0  | Proper hot holding temperatures   | 0 | 0 |   |
| 20 | 24 | 0   | 0        |    | Proper cold holding temperatures  | 0 | 0 | 5 |
| 21 | *  | 0   | 0        | 0  | Proper date marking and disposition   | 0 | 0 |   |
| 22 | 0  | 0   | ×        | 0  | Time as a public health control: procedures and records                     | 0 | 0 |   |
|    | IN | OUT | NA       | NO | Consumer Advisory   |   |   |   |
| 23 | 0  | 0   | ×        |    | Consumer advisory provided for raw and undercooked<br>food                  | 0 | 0 | 4 |
|    | IN | OUT | NA       | NO | Highly Susceptible Populations  |   |   |   |
| 24 | 0  | 0   | M        |    | Pasteurized foods used; prohibited foods not offered                        | 0 | 0 | 5 |
|    | IN | оит | NA       | NO | Chemicals   |   |   |   |
| 25 | 0  | 0   | <b>X</b> |    | Food additives: approved and properly used                                  | 0 | 0 | 5 |
| 26 | 菜  | 0   |          |    | Toxic substances properly identified, stored, used                          | 0 | 0 | 9 |
|    | IN | OUT | NA       | NO | Conformance with Approved Procedures  |   |   |   |
| 27 | 0  | 0   | ×        |    | Compliance with variance, specialized process, and<br>HACCP plan            | 0 | 0 | 5 |

#### od Retail Practices are preventive me ures to control the introduction of pathogens, chemicals, and physical objects into foods.

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0 0

|                         |     |   | GO    | OD R   | 11 | AIL    | PRA  | erric | ES .   |     |    |          |
|-------------------------|-----|---|-------|--|----|--------|--|-------|--|-----|----|----------|
|                         |     | OUT=not in compliance COS=com   |       |  |    |        | nspectio   | on    | R-repeat (violation of the same code provision)            |     |    |          |
|                         |     | Compliance Status   | COS   | R  | W  | Т      |  |       | Compliance Status  | COS | R  | WT       |
| OUT Safe Food and Water |     |   |       |  |    |        |  | OUT   | Utensils and Equipment                                     |     |    |          |
| 28                      |     | Pasteurized eggs used where required                                  | 0     | O 1 45 S Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used |    | 0      | 0  | 1     |  |     |    |          |
| 29                      |     | Water and ice from approved source                                    | 0     | 0  | 2  |        |  |       | constructed, and used                                      | _   | _  | <u> </u> |
| 30                      |     | Variance obtained for specialized processing methods                  | 0 0 1 |  | 46 | 0      | Warewashing facilities, installed, maintained, used, test strips | 0     | l٥   | 1   |    |          |
|                         | OUT | Food Temperature Control  |       |  | _  | 4      |  | _     |  | -   | _  | _        |
| 31                      | 0   | Proper cooling methods used; adequate equipment for temperature       | 0     | 0  | 2  |        | 47   | 0     | Nonfood-contact surfaces clean                             | 0   | 0  | 1        |
|                         | _   | control   | _     | 1 -  | -  |        |  | OUT   | Physical Facilities  |     |    |          |
| 32                      | 0   | Plant food properly cooked for hot holding                            | 0     | 0  | 1  |        | 48   | 0     | Hot and cold water available; adequate pressure            | 0   | 0  | 2        |
| 33                      | 0   | Approved thawing methods used   | 0     | 0  | 1  | $\neg$ | 49   | 0     | Plumbing installed; proper backflow devices                | 0   | 0  | 2        |
| 34                      | 0   | Thermometers provided and accurate                                    | 0     | 0  | 1  | 7      | 50   | 0     | Sewage and waste water properly disposed                   | 0   | 0  | 2        |
|                         | OUT | Food Identification   |       |  |    |        | 51   | 0     | Toilet facilities: properly constructed, supplied, cleaned | 0   | 0  | 1        |
| 35                      | ×   | Food properly labeled; original container; required records available | 0     | 0  | 1  | 7      | 52   | 0     | Garbage/refuse properly disposed; facilities maintained    | 0   | 0  | 1        |
|                         | OUT | Prevention of Feed Contamination                                      |       |  |    |        | 53   | 0     | Physical facilities installed, maintained, and clean       | 0   | 0  | 1        |
| 36                      | 0   | Insects, rodents, and animals not present                             | 0     | 0  | 2  |        | 54   | 0     | Adequate ventilation and lighting; designated areas used   | 0   | 0  | 1        |
| 37                      | 0   | Contamination prevented during food preparation, storage & display    | 0     | 0  | 1  |        |  | OUT   | Administrative Items                                       |     |    |          |
| 38                      | 0   | Personal cleanliness  | 0     | 0  | 1  | П.     | 55   | 0     | Current permit posted                                      | 0   | 0  | _        |
| 39                      | 0   | Wiping cloths; properly used and stored                               | 0     | 0  | 1  | Π.     | 56   | 0     | Most recent inspection posted                              | 0   | 0  | ۰        |
| 40                      | 0   | Washing fruits and vegetables   | 0     | 0  | 1  | 7      | $\Box$   |       | Compliance Status  | YES | NO | WT       |
|                         | OUT | Proper Use of Utensils  |       |  |    |        |  |       | Non-Smokers Protection Act                                 |     |    |          |
| 41                      | 0   | In-use utensils; properly stored                                      | 0     |  | 1  |        | 57   |       | Compliance with TN Non-Smoker Protection Act               | X   | 0  | $ \Box $ |
| 42                      |     | Utensils, equipment and linens; properly stored, dried, handled       | 0     | 0  | 1  |        | 58   |       | Tobacco products offered for sale                          | 0   | 0  | 0        |
| 43                      |     | Single-use/single-service articles; properly stored, used             | 0     | 0  | 1  |        | 59   |       | If tobacco products are sold, NSPA survey completed        | 0   | 0  |          |
| 44                      | 0   | Gloves used properly  | 0     | 0  | 1  |        |  |       |  |     |    |          |

You have the right to request a l ten (10) days of the date of th

08/30/2024

08/30/2024

Signature of Person In Charge

Date

\*\*\*\* Additional food safety information can be found on our website, http://tn.gov/health/article/eh-foodservice \*\*\*\*

Date

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

Smoking observed where smoking is prohibited by the Act.



#### Establishment Information

Establishment Name: Panera #1012
Establishment Number #: | 605194604

| 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.   |  |

| Warewashing Info |                 |     |                           |  |  |  |  |  |  |
|------------------|-----------------|-----|---------------------------|--|--|--|--|--|--|
| Machine Name     | Sanitizer Type  | PPM | Temperature ( Fahrenhelt) |  |  |  |  |  |  |
| Ecolab           | CI              | 100 |                           |  |  |  |  |  |  |
| Bucket           | Ecolab sink and | 550 |                           |  |  |  |  |  |  |
|                  |                 |     |                           |  |  |  |  |  |  |

| Equipment Temperature          |                           |  |  |  |  |  |
|--------------------------------|---------------------------|--|--|--|--|--|
| Description                    | Temperature ( Fahrenheit) |  |  |  |  |  |
| Randell ric prepped sandwiches | 35                        |  |  |  |  |  |
| Randell ric salad              | 36                        |  |  |  |  |  |
| Randell ric sandwich           | 37                        |  |  |  |  |  |
| Wic                            | 34                        |  |  |  |  |  |

| Food Temperature                  |               |                           |
|-----------------------------------|---------------|---------------------------|
| Description                       | State of Food | Temperature ( Fahrenheit) |
| Half and half                     | Cold Holding  | 38                        |
| Tuna salad                        | Cold Holding  | 40                        |
| Roasted corn                      | Cold Holding  | 39                        |
| Hummus                            | Cold Holding  | 40                        |
| Eggs                              | Hot Holding   | 141                       |
| Chicken and rice soup             | Hot Holding   | 137                       |
| Street corn chowder               | Hot Holding   | 141                       |
| Avacado                           | Cold Holding  | 42                        |
| Green goddess dressing house made | Cold Holding  | 38                        |
| Mac and cheese                    | Cold Holding  | 34                        |
| 3 cheese soufflé                  | Hot Holding   | 151                       |
| Spinach bacon soufflé mix         | Cold Holding  | 37                        |
| Steak meat                        | Cold Holding  | 38                        |
| Yogurt delivery                   | Cold Holding  | 38                        |
|                                   |               |                           |

| Observed Violations   |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| Total # B   |  |  |  |  |  |  |  |
| Repeated # ()   |  |  |  |  |  |  |  |
| 35: Container with red lid stored under prep table in bakers area not labeled |  |  |  |  |  |  |  |
| 42: Pans stacked wet on shelf under prep table across from dish machine       |  |  |  |  |  |  |  |
| 45: Severely grooved cutting board in 3 comp sink                             |  |  |  |  |  |  |  |
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<sup>&</sup>quot;"See page at the end of this document for any violations that could not be displayed in this space.

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



## Establishment Information

Establishment Name: Panera #1012 Establishment Number: 605194604

## Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: Discussed policy with pic
- 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: Employees washing hands when changing gloves. Employee washed hands when starting shift. Employee washed hands when returning from break
- 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: (IN) All food received was in good condition and at the proper temperature.
- 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: No food cooked during inspection
- 17: (NO) No TCS foods reheated during inspection.
- 18: No food being cooled during inspection
- 19: See food temps
- 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:

58:

## Additional Comments

See last page for additional comments.

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

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

| stablishment Name: Panera #1012<br>stablishment Number: 605194604 | Establishment Information              |  |
|---|--|--|
| comments/Other Observations (cont'd)  Comments (cont'd)           | Establishment Name: Panera #1012       |  |
| additional Comments (cont'd)                                      | Establishment Number: 605194604        |  |
| additional Comments (cont'd)                                      |  |  |
| additional Comments (cont'd)                                      | Comments/Other Observations (cont'd)   |  |
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|   | Additional Comments (cont'd)           |  |
| see last page for additional comments.                            |  |  |
|   | See last page for additional comments. |  |
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| Establishment Information |             |         |             |  |  |  |  |  |  |
|---------------------------|-------------|---------|-------------|--|--|--|--|--|--|
|                           | anera #1012 |         |             |  |  |  |  |  |  |
| Establishment Number #    | 605194604   |         |             |  |  |  |  |  |  |
|                           |             |         |             |  |  |  |  |  |  |
| Sources                   |             |         |             |  |  |  |  |  |  |
| Source Type:              | Water       | Source: | City        |  |  |  |  |  |  |
| Source Type:              | Food        | Source: | GFS, Panera |  |  |  |  |  |  |
| Source Type:              |             | Source: |             |  |  |  |  |  |  |
| Source Type:              |             | Source: |             |  |  |  |  |  |  |
| Source Type:              |             | Source: |             |  |  |  |  |  |  |
| Additional Comme          | ents        |         |             |  |  |  |  |  |  |
|                           |             |         |             |  |  |  |  |  |  |
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