

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

ESTABLISHMENT Salon Revelations				DATE 02/27/24		SCORE		
OCATION 20 Medical Center Pkwy. Shannon Gannon					EST. NO. 665171643	100/100		
CITY, STATE, ZIPTYPEMurfreesboroTN 37128Permanent					PURPOSE Routine			
PERMITTEE SUZANNE VONGPHACHANK-SALON	REVELATIONS				FOLLOW- UP () YES REQUIRED NO			
PROHIBITED ACTS					LIGHTING			
1. Minor clients, tattoo removal, unhealt				19	Adequate			
2. Licensed artist not on duty		2	-		VENTILATION			
PHYSICAL FACILITIES			20. Sufficient, installed, maintained				1	
3. Work area separated		1			GENERAL OPERATIONS			
* 4. Autoclave meets minimum time, temp	perature, pressure	5	+	21.	Toxic items stored, labeled,	used	5	
5. Regulated waste properly disposed		2			Premises maintained free of	e of litter, unnecessary articles,		
WATER				22.	unauthorized personnel, animals, clean, maintenance,			
Water source approved, hot and cold under pressure		5			equipment properly stored	d		
SEWAGE	Children Street Contract		_		TATTOO EQUIPMEN	T & UTENSILS		
Sewage and liquid waste disposal		5		23.	Properly installed, maintained	Properly installed, maintained, constructed, designed		
PLUMBING		10-21		24.	No reuse of single use articles			
 Installed, maintained 		1		25.	Clean, free of abrasives and	Clean, free of abrasives and cleaners		
 Cross-connection, backflow, back-siphonage 		5		26.	Aisles unobstructed			
TOILET/HANDWASHING FA	CILITIES		011		TATTOO OPERATION	NS		
* 10. Installed, designed, number, convenie	nt, available	5	*	27.	Good hygienic practices, pro	oper handwashing	5	
Enclosed, tight-fitting doors, fixtures				28.	Clean clothing, lap cloth used, spill kits available		1	
 covered receptacles, antibacterial soap, disposable towels/hand drying devices 		1	•	29.	Employees with infectious lesions on hands restricted from tattooing			
GARBAGE & REFUSE DISPOSAL			*	30.	Monthly microbiological monitoring tests			
12. Containers clean, adequate number, covered, insect or rodent proof. Outside storage area clean, adequately sized, covered, controlled incineration		1	•	31.	Tubes and needles sterilized in an approved manner. Equipment sterilized for no more than one (1) year.			
			*	32.			5	
INSECT/RODENT CONTROL			*	33.	Sterile instruments properly handled		5	
 Presence/evidence of insects, rodents, openings protected 	harborage-outer	5	*	34.		ly handled	5	
openings protected.			-	35.	Approved dyes or pigments			
FLOORS/WALLS/CEILINGS/FURNISHINGS			-	36.	Tattoo log available 1 Instructions provided on care of tattoo/body piercing 1			
 Floors—constructed, drained, clean, g Walls—constructed, clean, good repa 		1	<u> </u>	31.	ADMINISTRATION	e of tailoo/body piercing	1	
Cailings/attached aguinment constru	· · · · · · · · · · · · · · · · · · ·		-				T	
16. repair	recent Boon	1		38.	Infections reported		0	
	0			39.	Current permit/license posted		0	
18. Work area furnishings-clean, good repair		1		40.	Most current complete inspection report available			

* 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		Ву	By				
Date of Signature	02/27/24	Time in/out	02:09 PM	02:28 PM			

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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

