



TENNESSEE DEPARTMENT OF HEALTH
FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

80

Establishment Name Gyro City MT#1221
Address 1497 County Hospital Rd
City Nashville Time in 02:35 PM AM / PM Time out 03:10 PM AM / PM
Inspection Date 05/02/2024 Establishment # 605324723 Embargoed 5
Purpose of Inspection ☒ Routine ☐ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other
Risk Category ☐ 1 ☒ 2 ☐ 3 ☐ 4 Follow-up Required ☒ Yes ☐ No Number of Seats

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									
Supervision																													
1	IN	OUT	NA	NO	Person in charge present, demonstrates knowledge, and performs duties					O					O					5									
Employee Health																													
2	IN	OUT	NA	NO	Management and food employee awareness, reporting					O					O					5									
3	IN	OUT	NA	NO	Proper use of restriction and exclusion					O					O														
Good Hygienic Practices																													
4	IN	OUT	NA	NO	Proper eating, tasting, drinking, or tobacco use					O					O					5									
5	IN	OUT	NA	NO	No discharge from eyes, nose, and mouth					O					O														
Preventing Contamination by Hands																													
6	IN	OUT	NA	NO	Hands clean and properly washed					O					O					5									
7	IN	OUT	NA	NO	No bare hand contact with ready-to-eat foods or approved alternate procedures followed					O					O														
8	IN	OUT	NA	NO	Handwashing sinks properly supplied and accessible					O					O					2									
Approved Source																													
9	IN	OUT	NA	NO	Food obtained from approved source					O					O					5									
10	IN	OUT	NA	NO	Food received at proper temperature					O					O														
11	IN	OUT	NA	NO	Food in good condition, safe, and unadulterated					O					O														
12	IN	OUT	NA	NO	Required records available: shell stock tags, parasite destruction					O					O														
Protection from Contamination																													
13	IN	OUT	NA	NO	Food separated and protected					O					O					4									
14	IN	OUT	NA	NO	Food-contact surfaces: cleaned and sanitized					O					O					5									
15	IN	OUT	NA	NO	Proper disposition of unsafe food, returned food not re-served					O					O					2									

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

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

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. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the food service establishment permit in a conspicuous manner and post the most recent inspection report in a conspicuous manner. You have the right to request a hearing regarding this report by filing a written request with the Commissioner within ten (10) days of the date of this report. T.C.A. sections 68-14-703, 68-14-706, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329.

Signature of Person In Charge 05/02/2024 Signature of Environmental Health Specialist 05/02/2024

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

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DIVISION OF ENVIRONMENTAL HEALTH
FOOD INSPECTION DATA**



Establishment Information	
Establishment Name:	Gyro City MT#1221
Establishment Number #:	605324723

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)
3 comp sink	QA		

Equipment Temperature	
Description	Temperature (Fahrenheit)
Reach in cooler	53
Prep cooler	

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Rice in cooker	Hot Holding	128
Diced tomatoes on prep cooler	Cold Holding	56
Raw chicken in reach in cooler	Cold Holding	39
Raw chicken in prep cooler	Cold Holding	54
Cooked gyro meat in container in front of cooker	Hot Holding	80

Observed Violations

Total # 9

Repeated # 0

- 1: Present employee does not demonstrate proper food handlers knowledge, "manager" only available via phone. CA: discussed with PIC (on phone) importance of anyone working food unit must be knowledgeable of basic food prep.
- 8: Observed raw chicken (bagged) thawing in hand sink.
- 11: Observed severely dent can of hummus stored with wholesome cans on prep cooler. CA: embargoed
- 19: Rice in rice cooker (128F) not holding at proper temp. CA: discussed proper hot holding temps with cook, reheated on flat top to at least 165F; turn cooker on.
- 19: Cooked gyro meat (80F) in container in front of gyro cooker not holding at proper temp. CA: embargoed.
- 20: Prep cooler not holding tcs product: diced tomatoes (56F) and raw chicken (54F) at proper temp. CA: embargoed product, discussed proper cold holding temps with cook (and PIC on phone)
- 33: Observed raw chicken thawing(open air) in hand sink.
- 34: No visible working thermometer in reach in cooler
- 46: Not QA test strips available.

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Comments/Other Observations

- 2: 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 adequate hand washing practice.
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
- 9:
- 10: (NO): No food received during 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: Not observed.
- 17: (NO) No TCS foods reheated during inspection.
- 18: Not observed.
- 21: (NO) There are no foods requiring date marking in the facility at the time of the inspection.
- 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: No smoking sign not available on truck entrance or near propane tanks.
- 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.

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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

Source Type: Source:

Source Type: Source:

Source Type: Source:

Source Type: Source:

Additional Comments

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