

Risk Category

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit King Noodles Establishment Name Permanent O Mobile Type of Establishment

1722-E SOUTH RUTHERFORD BLVD O Temporary O Seasonal Address Murfreesboro Time in 12:57; PM AM / PM Time out 01:37; PM

City 03/22/2023 Establishment # 605317796 Embargoed 0 Inspection Date

О3

KRoutine O Follow-up O Complaint O Preliminary Purpose of Inspection O Consultation/Other

Number of Seats 50 04 rted to the Centers for Dis ase Control and Prevention

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS T, NA, NO) for each numbered from. For Items marked OUT, mark COS or R for each Item as applicable.

ited compliance status (IN, OUT, NA, HO) for e OUT=not in compl IN-in compliance NA=not ap NO=not obs COS R WT Compliance Status IN OUT NA NO Supervision Person in charge present, demonstrates knowledge, and 製し 0 0 5 performs duties IN OUT NA NO **Employee Health** 2 X O Management and food employee awareness, reporting 0 0 3 🕱 O Proper use of restriction and exclusion 0 0 **Good Hygienic Practices** IN OUT NA NO 4 嵐 O 5 嵐 O Proper eating, tasting, drinking, or tobacco use 0 0 5 O No discharge from eyes, nose, and mouth IN OUT NA NO Preventing Contamination by Hands O Hands clean and properly washed 6 🚊 O 0 0 No bare hand contact with ready-to-eat foods or approved 0 0 0 7 **巡** O 0 alternate procedures followed 8 O 💥 IN OUT NA NO Handwashing sinks properly supplied and accessible 0 0 2 Approved Source 9 🕱 O 0 0 Food obtained from approved source 10 O O O 0 0 Food received at proper temperature Food in good condition, safe, and unadulterated 5 Required records available: shell stock tags, parasite 0 12 O O 🐹 0 0 destruction IN OUT NA NO **Protection from Contamination** 0 0 4 夏 0 0 Food separated and protected 14 寒 O O Food-contact surfaces: cleaned and sanitized 0 0 5 Proper disposition of unsafe food, returned food not re 15 選 O 0 0 2

| | | | | | Compliance Status | COS | R | WT |
|----|----|-----|----------|----|---|-----|---|----|
| | IN | оит | NA | NO | Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods | | | |
| 16 | | 0 | 0 | 0 | Proper cooking time and temperatures | 0 | 0 | 5 |
| 17 | 0 | 0 | 0 | 3% | Proper reheating procedures for hot holding | 0 | 0 | ٠ |
| | IN | оит | NA | NO | Cooling and Holding, Date Marking, and Time as 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 | 786 | 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 food | 0 | 0 | 4 |
| | IN | OUT | NA | NO | Highly Susceptible Populations | | | |
| 24 | 0 | 0 | 333 | | Pasteurized foods used; prohibited foods not offered | 0 | 0 | 5 |
| Ī | IN | оит | NA | NO | Chemicals | | | |
| 25 | | 0 | X | | Food additives: approved and properly used | 0 | 0 | 5 |
| 26 | 2 | 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 HACCP plan | 0 | 0 | 5 |

级 Yes O No

R=repeat (violation of the same code provision)

Follow-up Required

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

| | | | GOO | D R | a/. | IL. | PRA | CTIC | 28 |
|----|-----|--|---------|--------|-------|------|--------|------|---|
| | | OUT=not in compliance COS=com | ected o | n-site | durin | g in | specti | on | R-repeat (violation of the same code provi |
| | | Compliance Status | COS | R | WT |] [| | | Compliance Status |
| | OUT | Safe Food and Water | | | | П | | OUT | Utensiis and Equipment |
| 28 | 0 | Pasteurized eggs used where required | 0 | ТО | 1 | 1 1 | 45 | 0 | Food and nonfood-contact surfaces cleanable, properly designed |
| 29 | 0 | Water and ice from approved source | 0 | | 2 | 1 1 | 40 | 0 | constructed, and used |
| 30 | 0 | Variance obtained for specialized processing methods | 0 | 0 | 1 |] [| 46 | 0 | Warewashing facilities, installed, maintained, used, test strips |
| | OUT | Food Temperature Control | | | | П | 40 | • | vvarewasning racilities, installed, maintained, used, test strips |
| | ┰ | Proper cooling methods used; adequate equipment for temperature | ┰ | ┰ | | П | 47 | 0 | Nonfood-contact surfaces clean |
| 31 | 0 | control | 0 | 0 | 2 | H | | OUT | Physical Facilities |
| 32 | 0 | Plant food properly cooked for hot holding | 0 | 0 | 1 | 11 | 48 | 0 | Hot and cold water available; adequate pressure |
| 33 | _ | Approved thawing methods used | ō | ō | 1 | 11 | 49 | _ | Plumbing installed: proper backflow devices |
| 34 | 0 | Thermometers provided and accurate | 0 | 0 | 1 | 11 | 50 | 0 | Sewage and waste water properly disposed |
| | OUT | Food Identification | Ť | - | | H | 51 | ō | Toilet facilities: properly constructed, supplied, cleaned |
| 35 | 0 | Food properly labelled; original container; required records available | 0 | 0 | 1 | 11 | 52 | 0 | Garbage/refuse properly disposed; facilities maintained |
| | OUT | Prevention of Food Contamination | | | | H | 53 | 0 | Physical facilities installed, maintained, and clean |
| 36 | 0 | Insects, rodents, and animals not present | 0 | 0 | 2 | $\ $ | 54 | 0 | Adequate ventilation and lighting; designated areas used |
| 37 | 缸 | Contamination prevented during food preparation, storage & display | 0 | 0 | 1 | П | | OUT | Administrative Items |
| 38 | 0 | Personal cleanliness | 0 | 0 | 1 | 11 | 55 | | Current permit posted |
| 39 | 186 | Wiping cloths; properly used and stored | 0 | 0 | 1 | 11 | 56 | 0 | Most recent inspection posted |
| 40 | 0 | Washing fruits and vegetables | 0 | 0 | 1 | ll | | | Compliance Status |
| | OUT | Proper Use of Utensils | | | | 11 | | | Non-Smokers Protection Act |
| 41 | 120 | In-use utensils; properly stored | 0 | 0 | 1 | ll | 57 | | Compliance with TN Non-Smoker Protection Act |
| 42 | 0 | Utensils, equipment and linens; properly stored, dried, handled | 0 | 0 | 1 | ll | 58 | | Tobacco products offered for sale |
| 43 | | Single-use/single-service articles; properly stored, used | 0 | 0 | 1 | 1 [| 59 | | If tobacco products are sold, NSPA survey completed |
| 44 | 0 | Gloves used properly | 0 | 10 | 1 | ι. | | | |

You have the right to request a hearing regarding this report by n ten (10) days of the date of th 14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

03/22/2023

Signature of Person In Charge

Date

03/22/2023

Date

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YES NO WT

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

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15) RDA 629) 6158987889 Please call (to sign-up for a class.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

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

Smoking observed where smoking is prohibited by the Act.



Establishment Information

Establishment Name: King Noodles
Establishment Number #: [605317796]

| 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. | |

| Warewashing Info | | | | | | | |
|------------------|----------------|-----|---------------------------|--|--|--|--|
| Machine Name | Sanitizer Type | PPM | Temperature (Fahrenheit) | | | | |
| Dish machine | CI | 100 | | | | | |
| 3 comp sink | CI | 100 | | | | | |

| Equipment Temperature | | | | | | | |
|-----------------------|----------------------|------|--|--|--|--|--|
| Description | Temperature (Fahren | helt | | | | | |
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| Food Temperature | | |
|------------------------------|---------------|---------------------------|
| Description | State of Food | Temperature (Fahrenheit) |
| Chicken stove | Cooking | 189 |
| Raw shrimp make line cooler | Cold Holding | 39 |
| Raw beef make line cooler | Cold Holding | 40 |
| Raw chicken make line cooler | Cold Holding | 39 |
| Raw beef make lin ric | Cold Holding | 42 |
| White rice steam pot | Hot Holding | 160 |
| Raw beef ric 2 | Cold Holding | 39 |
| Raw shrimp ric 2 | Cold Holding | 39 |
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| Observed Violations |
|--|
| Total # 4 |
| Repeated # 0 |
| 8: No paper towels at front hand sink. Hand sink near dish washer was not accessible, had table located directly in front of it. Corrected by pic restocking hand sink with paper towels and pic moving table so hand sink can be easily accessible. |
| 37: Employee cell phone stored on food prep table. Employee drinks stored directly next to clean plates and dishes. |
| 39: Wiping cloths not stored in a santi bucket. |
| 41: Utentils for rice stored in standing water. Discussed proper methods. |
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: King Noodles
Establishment Number: 605317796

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Policy is present and 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: Employees stayed on task.
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
- 9: See food source.
- 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: See food temp.
- 17: (NO) No TCS foods reheated during inspection.
- 18: No cooling observed.
- 19: See food temps.
- 20: See food temps.
- 21: (NA) No Ready-to-eat, TCS foods prepared on premise and held, or commercial containers of ready-to-eat food opened and held, over 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.

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^{***}See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

| Establishment Number: 605317796 | Establishment Information | |
|---|--|--|
| Establishment Number: 605317796 Comments/Other Observations (cont'd) Additional Comments (cont'd) | Establishment Name: King Noodles | |
| Additional Comments (cont'd) | Establishment Number: 605317796 | |
| Additional Comments (cont'd) | | |
| Additional Comments (cont'd) | Comments/Other Observations (cont'd) | |
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| Establishment Inform | nation | | | |
|-------------------------|---------------------------|--------------------------------|--|-----|
| Establishment Name: Ki | ng Noodles | | | |
| Establishment Number #: | 605317796 | | | 1 |
| | | | | |
| Sources | | | | |
| Source Type: | Food | Source: | Pfg | |
| Source Type: | Water | Source: | Murfreesboro city | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| Additional Comme | nts | | | |
| Completed 30 day ro | outine inspection. Printe | ed off and delivered applicabl | e food safety fact sheets, went over a | and |
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