



TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE
88

Establishment Name CR Noodle House Restaurant Type of Establishment Farmer's Market Food Unit Permanent Mobile
 Address 5270 Murfreesboro Rd. Temporary Seasonal
 City La Vergne Time in 12:15 PM AM / PM Time out 01:45 PM AM / PM
 Inspection Date 04/24/2024 Establishment # 605211986 Embargoed 6
 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.)

Compliance Status					COS	R	WT
IN	OUT	NA	NO				
Supervision							
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Person in charge present, demonstrates knowledge, and performs duties	<input type="checkbox"/>	<input type="checkbox"/>	5
Employee Health							
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Management and food employee awareness, reporting	<input type="checkbox"/>	<input type="checkbox"/>	5
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Proper use of restriction and exclusion	<input type="checkbox"/>	<input type="checkbox"/>	5
Good Hygienic Practices							
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	<input type="checkbox"/>	<input type="checkbox"/>	5
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose, and mouth	<input type="checkbox"/>	<input type="checkbox"/>	5
Preventing Contamination by Hands							
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean and properly washed	<input type="checkbox"/>	<input type="checkbox"/>	5
7	<input checked="" 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"/>	5
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks properly supplied and accessible	<input type="checkbox"/>	<input type="checkbox"/>	2
Approved Source							
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>	5
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>	5
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe, and unadulterated	<input type="checkbox"/>	<input type="checkbox"/>	5
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shell stock tags, parasite destruction	<input type="checkbox"/>	<input type="checkbox"/>	5
Protection from Contamination							
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>	4
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"/>	<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

Compliance Status					COS	R	WT
OUT							
Safe Food and Water							
28	<input type="checkbox"/>	Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1
29	<input type="checkbox"/>	Water and ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2
30	<input type="checkbox"/>	Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1
Food Temperature Control							
31	<input checked="" type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2
32	<input type="checkbox"/>	Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1
33	<input checked="" type="checkbox"/>	Approved thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1
34	<input type="checkbox"/>	Thermometers provided and accurate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1
Food Identification							
35	<input type="checkbox"/>	Food properly labeled; original container; required records available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1
Prevention of Food Contamination							
36	<input type="checkbox"/>	Insects, rodents, and animals not present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2
37	<input checked="" type="checkbox"/>	Contamination prevented during food preparation, storage & display	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1
38	<input type="checkbox"/>	Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1
39	<input type="checkbox"/>	Wiping cloths: properly used and stored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1
40	<input type="checkbox"/>	Washing fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1
Proper Use of Utensils							
41	<input type="checkbox"/>	In-use utensils; properly stored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1
42	<input type="checkbox"/>	Utensils, equipment and linens; properly stored, dried, handled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1
43	<input type="checkbox"/>	Single-use/single-service articles; properly stored, used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1
44	<input type="checkbox"/>	Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1

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, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

Signature of Person In Charge [Signature] Date 04/24/2024 Signature of Environmental Health Specialist [Signature] Date 04/24/2024

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

TENNESSEE DEPARTMENT OF HEALTH
 DIVISION OF ENVIRONMENTAL HEALTH
 FOOD INSPECTION DATA



Establishment Information

Establishment Name: CR Noodle House Restaurant
 Establishment Number #: 605211986

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, set to soak Dish machine	Qa tabs Cl	100	

Equipment Temperature

Description	Temperature (Fahrenheit)
Reac in cooler (ric)	42
Reach in 2	41
Reach in 3	39

Food Temperature

Description	State of Food	Temperature (Fahrenheit)
Rice, pot	Hot Holding	172
Shrimp spring rolls, counter, 10min	Cooling	70
Cooked chicken, ric, night before	Cooling	45
Rice noodles, ric, night before	Cooling	43
Cooked duck, ric	Cold Holding	40
All tcs, whit freezer, highest temp	Thawing	38
Raw marinated chicken, pc	Cold Holding	48
All other tcs, pc	Cold Holding	39
Cut cabbage, ml, 2 hrs	Cooling	49
All proteins, ml	Cold Holding	41
Garlic in water, grill station	Cold Holding	71
Bean sprouts, ric2	Cold Holding	41
Cut melon, ric 2	Cold Holding	38
Milks, ric 3	Cold Holding	40

Observed Violations

Total # 8

Repeated # 0

18: Observed cooked chicken at 45°F and cooked noodles at 43°F in the reach in cooler. Pic stated it was made before close, cooled in an ice bath for 30-60min and then placed in the ric over night. Pic stated that it had not been taken out since, other items observed at 41°F or below. COS embargoed 6lbs of chicken, discussed proper cooling procedures

19: Observed egg rolls sitting out on the counter below 135°F and not under any time of temperature control. Pic stated they made a large batch for the lunch rush 20minutes prior COS egg roll reheated in fryer above 165°F , and Discussed proper hot holding with pic.

20: Observed raw marinated chicken in the prep cooler, above 41°F, pic stated it was made several days 2days prior and has been in the cooler since. Also observed garlic in water by the grills station above 41°F , pic stated it is from gfs, observed on the container "keep refrigerated" COS by embargoing approximately 2 lbs of raw chicken, and embargo garlic in water. Discussed proper cold holding temperatures. Will send fact sheets. This item has been noted on 3 consecutive routine inspections, and revocation letter will be requested.

31: Shrimp spring rolls made, according to pic, 10 minutes prior and left out under counter to cool

33: Imitation crab meat left out on counter thawing

37: Water bottles stored throughout kitchen among food intended for customers, rice left for personal use left on counter next to rice pot intended for customers.

50: Mop water being disposed at the hand sink

53: Main reach in cooler has inconsistent temperatures and dirty air vents, white standing freezer out of temp and food starting to thaw.



Establishment Information

Establishment Name: CR Noodle House Restaurant

Establishment Number : 605211986

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Pic has fact sheet on hand to reference
- 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 employees stay on task
- 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: Uses approved sources
- 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: Did not observe any raw items cooked at time of the inspection
- 17: (NO) No TCS foods reheated during inspection.
- 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:
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.
- 57:
- 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.

Establishment Information

Establishment Name: CR Noodle House Restaurant

Establishment Number : 605211986

Comments/Other Observations (cont'd)

Additional Comments (cont'd)

See last page for additional comments.

Establishment Information

Establishment Name: CR Noodle House Restaurant

Establishment Number #: 605211986

Sources

Source Type: Food Source: Gfs, restaurant depo, sams

Source Type: Water Source: Lv city

Source Type: Source:

Source Type: Source:

Source Type: Source:

Additional Comments

Will return sometime within 10 days to ensure the correction of the observed priority item violations

Email: crnoodlehouse615@gmail.com

Will email fact sheets in english and attempted thai translations.

Revocation request will be submitted due to #20 being noted on 3 consecutive routine inspections.