

TENNESSEE DEPARTMENT OF HEALTH
FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

83

Establishment Name	IHOP		Type of Establishment	<input checked="" type="radio"/> Permanent	<input type="radio"/> Mobile
Address	8484 Wilkinsville Rd.			<input type="radio"/> Temporary	<input type="radio"/> Seasonal
City	Millington	Time in	09:45 AM	AM / PM	Time out
					11:15 AM
Inspection Date	07/06/2023	Establishment #	605203238	Embargoed	0000
Purpose of Inspection	<input checked="" type="radio"/> Routine <input type="radio"/> Follow-up <input type="radio"/> Complaint <input type="radio"/> Preliminary <input type="radio"/> Consultation/Other				
Risk Category	<input type="radio"/> 1	<input checked="" type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	Follow-up Required <input checked="" type="radio"/> Yes <input type="radio"/> No
					Number of Seats 180

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 (IK, 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	
	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	
	IN	OUT	NA	NO	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"/>		
	IN	OUT	NA	NO	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"/>		
	IN	OUT	NA	NO	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"/>	<input type="checkbox"/>	No bare hand contact with ready-to-eat foods or approved alternate procedures followed			<input type="checkbox"/>	<input type="checkbox"/>		
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Handwashing sinks properly supplied and accessible			<input type="checkbox"/>	<input type="checkbox"/>	2	
	IN	OUT	NA	NO	Approved Source						
9	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature			<input type="checkbox"/>	<input type="checkbox"/>		
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Food in good condition, safe, and unadulterated			<input type="checkbox"/>	<input type="checkbox"/>		
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Required records available: shell stock tags, parasite destruction			<input type="checkbox"/>	<input type="checkbox"/>		
	IN	OUT	NA	NO	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 type="checkbox"/>	<input checked="" 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"/>			Proper disposition of unsafe food, returned food not re-served			<input type="checkbox"/>	<input type="checkbox"/>	2	

Compliance Status								COS	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods					
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time and temperatures			<input type="checkbox"/>	<input type="checkbox"/>	5
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding			<input type="checkbox"/>	<input type="checkbox"/>	
	IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control					
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper cooling time and temperature			<input type="checkbox"/>	<input type="checkbox"/>	5
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			<input type="checkbox"/>	<input type="checkbox"/>	
20	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Proper cold holding temperatures			<input type="checkbox"/>	<input type="checkbox"/>	
21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking and disposition			<input type="checkbox"/>	<input type="checkbox"/>	
22	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Time as a public health control: procedures and records			<input type="checkbox"/>	<input type="checkbox"/>	
	IN	OUT	NA	NO	Consumer Advisory					
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Consumer advisory provided for raw and undercooked food			<input type="checkbox"/>	<input type="checkbox"/>	4
	IN	OUT	NA	NO	Highly Susceptible Populations					
24	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pasteurized foods used; prohibited foods not offered			<input type="checkbox"/>	<input type="checkbox"/>	5
	IN	OUT	NA	NO	Chemicals					
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Food additives: approved and properly used			<input type="checkbox"/>	<input type="checkbox"/>	5
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Toxic substances properly identified, stored, used			<input type="checkbox"/>	<input type="checkbox"/>	
	IN	OUT	NA	NO	Conformance with Approved Procedures					
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Compliance with variance, specialized process, and HACCP plan			<input type="checkbox"/>	<input type="checkbox"/>	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	Compliance Status				COS	R	WT						
	OUT	Safe Food and Water								OUT	Utensils and Equipment								
28	<input type="radio"/>	Pasteurized eggs used where required				<input type="radio"/>	<input type="radio"/>	1			45	<input checked="" type="radio"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used				<input type="radio"/>	<input type="radio"/>	1
29	<input type="radio"/>	Water and ice from approved source				<input type="radio"/>	<input type="radio"/>	2			46	<input type="radio"/>	Warewashing facilities, installed, maintained, used, test strips				<input type="radio"/>	<input type="radio"/>	1
30	<input type="radio"/>	Variance obtained for specialized processing methods				<input type="radio"/>	<input type="radio"/>	1			47	<input checked="" type="radio"/>	Nonfood-contact surfaces clean				<input type="radio"/>	<input type="radio"/>	1
	OUT	Food Temperature Control									OUT	Physical Facilities							
31	<input type="radio"/>	Proper cooling methods used; adequate equipment for temperature control				<input type="radio"/>	<input type="radio"/>	2			48	<input type="radio"/>	Hot and cold water available; adequate pressure				<input type="radio"/>	<input type="radio"/>	2
32	<input type="radio"/>	Plant food properly cooked for hot holding				<input type="radio"/>	<input type="radio"/>	1			49	<input type="radio"/>	Plumbing installed; proper backflow devices				<input type="radio"/>	<input type="radio"/>	2
33	<input type="radio"/>	Approved thawing methods used				<input type="radio"/>	<input type="radio"/>	1			50	<input type="radio"/>	Sewage and waste water properly disposed				<input type="radio"/>	<input type="radio"/>	2
34	<input type="radio"/>	Thermometers provided and accurate				<input type="radio"/>	<input type="radio"/>	1			51	<input type="radio"/>	Toilet facilities: properly constructed, supplied, cleaned				<input type="radio"/>	<input type="radio"/>	1
	OUT	Food Identification									52	<input type="radio"/>	Garbage/refuse properly disposed; facilities maintained				<input type="radio"/>	<input type="radio"/>	1
35	<input type="radio"/>	Food properly labeled; original container; required records available				<input type="radio"/>	<input type="radio"/>	1			53	<input checked="" type="radio"/>	Physical facilities installed, maintained, and clean				<input type="radio"/>	<input type="radio"/>	1
	OUT	Prevention of Food Contamination									54	<input type="radio"/>	Adequate ventilation and lighting; designated areas used				<input type="radio"/>	<input type="radio"/>	1
36	<input type="radio"/>	Insects, rodents, and animals not present				<input type="radio"/>	<input type="radio"/>	2				OUT	Administrative Items						
37	<input checked="" type="radio"/>	Contamination prevented during food preparation, storage & display				<input type="radio"/>	<input type="radio"/>	1			55	<input checked="" type="radio"/>	Current permit posted				<input type="radio"/>	<input type="radio"/>	0
38	<input type="radio"/>	Personal cleanliness				<input type="radio"/>	<input type="radio"/>	1			56	<input type="radio"/>	Most recent inspection posted				<input type="radio"/>	<input type="radio"/>	
39	<input type="radio"/>	Wiping cloths: properly used and stored				<input type="radio"/>	<input type="radio"/>	1			Compliance Status				YES	NO	WT		
40	<input type="radio"/>	Washing fruits and vegetables				<input type="radio"/>	<input type="radio"/>	1					Non-Smokers Protection Act						
	OUT	Proper Use of Utensils									57		Compliance with TN Non-Smoker Protection Act				<input checked="" type="radio"/>	<input type="radio"/>	
41	<input checked="" type="radio"/>	In-use utensils; properly stored				<input type="radio"/>	<input type="radio"/>	1			58		Tobacco products offered for sale				<input type="radio"/>	<input checked="" type="radio"/>	0
42	<input type="radio"/>	Utensils, equipment and linens; properly stored, dried, handled				<input type="radio"/>	<input type="radio"/>	1			59		If tobacco products are sold, NSPA survey completed				<input type="radio"/>	<input type="radio"/>	
43	<input type="radio"/>	Single-use/single-service articles; properly stored, used				<input type="radio"/>	<input type="radio"/>	1											
44	<input type="radio"/>	Gloves used properly				<input type="radio"/>	<input type="radio"/>	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, 68-14-710, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

 Signature of Person In Charge	07/06/2023 Date	 Signature of Environmental Health Specialist	07/06/2023 Date
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**** 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:	IHOP
Establishment Number #:	605203238

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.	No
Age-restricted venue does not require each person attempting to gain entry to submit acceptable form of identification.	No
"No Smoking" signs or the International "Non-Smoking" symbol are not conspicuously posted at every entrance.	No
Garage type doors in non-enclosed areas are not completely open.	No
Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	No
Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	No
Smoking observed where smoking is prohibited by the Act.	No

Warewashing Info			
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)
Eco Lab	Chlorine	200	

Equipment Temperature	
Description	Temperature (Fahrenheit)
RIC (server area)	41
Walk-in refrigerator	45
Walk-in freezer	25
RIC 1 (cold holding station line)	40

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Lettuce	Cold Holding	55
Tomatoes, sliced	Cold Holding	57
Cheese, sliced	Cold Holding	50
Chicken tenders	Hot Holding	145
Ham	Hot Holding	150
Chicken tenders 2	Hot Holding	150
Liquid eggs	Cold Holding	36
Hashbrowns	Cold Holding	48

Observed Violations

Total # 11

Repeated # 0

8: Hand washing sink in dishwasher area has a leak. Please fix leak at hand washing sink.

14: Ice machine is not clean. Please discard ice machine, and wash, rinse, and sanitize interior.

20: Cold holding foods are not at 41 degrees or below. Please maintain cold foods at 41 degrees or below.

21: Several items found past discard date. Please use or discard items by their discard date. Some containers were not labeled. Please label containers including discard date.

22: Paperwork is not present for time as a public health control. Please provide paperwork for time as a public health procedure and specific items.

37: Food containers are not covered in freezer on cook line. Please cover all food in storage.

41: Plates are stored upright. Please invert plates on serving line.

45: There is ice buildup in walk-in freezer on floor and on shelves. The microwaves, toasters, and waffle makers are not clean. Coolers and freezer on serving line are not clean. One is observed with water on the bottom. The stove is not clean. Please clean equipment and maintain cleanliness.

47: The handles of equipment are greasy and sticky. The microwaves, coolers, and freezers, etc. The area around toasters and waffle makers are not clean. The area around the serving plates are not clean on both sides. Please clean exterior of equipment and counters.

53: The wall and ceiling are dirty or stained in certain areas. The vents are loose and dusty in kitchen. The floor is wet in the dry storage area and beside ice machine. Please maintain facilities.

55: The current permit is not posted. Please renew permit. Call 901-222-9175 for more information p.

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Establishment Information

Establishment Name: IHOP

Establishment Number : 605203238

Comments/Other Observations

- 1: PIC can demonstrate knowledge.
- 2: Policy posted on back board by ice machine
- 3:
- 4:
- 5:
- 6:
- 7:
- 9:
- 10: No delivery
- 11:
- 12:
- 13:
- 15:
- 16: Observed several orders being prepared adequately.
- 17:
- 18: No foods are cooked, cooled, and reheated. All side dishes are stored either frozen and cooked to order or fresh and cooked to order. No foods are cooled and reheated.
- 19:
- 23: The consumer advisory is present for both reminder and disclosure on menu.
- 24:
- 25:
- 26:
- 27:
- 57:
- 1:
- 2:
- 3:
- 4:
- 5:
- 6:
- 7:
- 58:
- 1:
- 2:
- 3:
- 4:
- 5:

***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: IHOP

Establishment Number : 605203238

Comments/Other Observations (cont'd)**Additional Comments (cont'd)*****See last page for additional comments.***

Establishment Information

Establishment Name: IHOP

Establishment Number #: 605203238

Sources

Source Type: Food Source: PFG

Source Type: Source:

Source Type: Source:

Source Type: Source:

Source Type: Source:

Additional Comments

Safe food donation pamphlet donation given