TENNESSEE DEPARTMENT OF HEALTH ----

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	6					FOOD SER	VICE ESTA	BL	ISH	IME	ENT	T II	NSI	PEC	TI	ON REPORT	sco	RE		
TITLE T																				
IHOP Establishment Name						Tur	o of l	Establi	ie litore o	Farmer's Market Food Unit Permanent O Mobile	X	ŗ								
Add	iress				2810 Wolfc	reek Pkwy						i yş	xe or i	-stabi	snme	O Temporary O Seasonal	U			
City					Memphis		Time in	03	3:0	QF	M	A	M/P	м ті	me o	ut 04:05; PM AM / PM				
Insc	ectio	on Da	rte		02/15/20	23 Establishment						_	d 0							
			spect		Routine	O Follow-up	O Complaint			- O Pr			-	-	Cor	nsuitation/Other				
Risi	Cat	egon	,		01	<u>\$</u> 22	03			04		2		Fo	ollow-	up Required 🕱 Yes O No	Number of S	ieats	17	0
		R														to the Centers for Disease Cont control measures to prevent illu	rol and Preven			
					one marcing rac					_						INTERVENTIONS	nas of injury.			
		<u> </u>		algnat					items							ach llem as applicable. Deduct points for		_		
IN	Pinc	ompli	ance	_	OUT=not in complia Com	nce NA=not applicable pliance Status	 NO=not observe 	cos	R		\$=00	mecte	d on-s	ite dun	ng ins	spection R=repeat (violation of th Compliance Status			R	WT
	_		NA	NO	Decese is shares	Supervision	Incudadas, and					IN	ουτ	NA	NO	Cooking and Reheating of Time/ Control For Safety (TCS)				
1	邕	0			Person in charge performs duties	present, demonstrates	÷.	0	0	5		0	0			Proper cooking time and temperatures		0	0	5
2	X		NA	NO	Management and	Employee Health food employee awarer		0			17	-	0			Proper reheating procedures for hot hok Ceoling and Holding, Date Marking		0	0	
3	黨	0			,	riction and exclusion		0	0	5		IN	OUT		NO	a Public Health Contr	ol			
4	IN XX	-	NA			od Hygionic Practic ting, drinking, or tobac		0		5	18	0 定	0	8		Proper cooling time and temperature Proper hot holding temperatures		00	0	
	X		NA			eyes, nose, and mou ing Contamination		0	0	•	20	0	×		~	Proper cold holding temperatures Proper date marking and disposition		00	8	5
6	0		1404		Hands clean and	properly washed		0	0		22	_	8	ō	-	Time as a public health control: procedu	res and records	0	ŏ	
7	X	0	0	0	No bare hand con alternate procedu	tact with ready-to-eat f res followed	oods or approved	0	0	5		-	OUT	-		Consumer Advisory		-	-	
8	N N	애	NA	NO	Handwashing sink	s properly supplied an Approved Source	d accessible	0	0	2	23	0	0	麗		Consumer advisory provided for raw and food	undercooked	0	0	4
	黨		~			m approved source proper temperature		0	0			IN	OUT	_	NO	Highly Susceptible Popula	tions		_	
11	×	ŏ	_		Food in good cond	tition, safe, and unadu		ŏ	ŏ	5	24	0	0	×		Pasteurized foods used; prohibited food	s not offered	0	٥	5
12	0	0	×	0	destruction	available: shell stock t		0	0			IN	OUT		NO	Chemicals				
		OUT	NA	NO	Prote Food separated a	ction from Contami nd protected	nation	0		4	25	0 度	8	X	J	Food additives: approved and properly u Toxic substances properly identified, sto		00	0	5
	õ					aces: cleaned and san		Ō	Ō	5		IN	OUT	NA	NO	Conformance with Approved F	Procedures	_	_	
15	X	0			Proper disposition served	of unsafe food, return	ed food not re-	0	0	2	27	0	0	×		Compliance with variance, specialized p HACCP plan	rocess, and	0	٥	5
				Goo	d Retail Practi	ces are preventive	measures to co	ontro	l the	intr	oduc	tion	ofp	atho	gens	, chemicals, and physical object	s into foods.			
								GOO	D R	ATA	L PR	LACT	ICE	5	_					
				00	T=not in compliance Com	pliance Status	COS=come		n-site R		inspe	ection				R-repeat (violation of the san Compliance Status	ne code provision)	COS	R	WT
	0	OUT	Dect		Safe Food and Water d eggs used where required				<u> </u>	_			UT			Utensils and Equipment	to declare d		_	
2	8 9	0	Wate	r and	ice from approved	source		0	8	2	45 Solution and nonfood-contact surfaces cleanable, properly designed, constructed, and used					ty designed,	0	٥	1	
3	0	OUT		ince d		ized processing metho mperature Control	xds	0	0	1	4	6	o v	Varew	ashin	g facilities, installed, maintained, used, te	st strips	0	٥	1
3	1	0	Prop		oling methods used	t; adequate equipment	for temperature	0	0	2	4	_	0 N	lonfoo	d-cor	ntact surfaces clean Physical Facilities		0	0	1
-	2		Plant	food	properly cooked for				0			8	0			f water available; adequate pressure		0		2
	3 4		<u> </u>		thawing methods u eters provided and			8	0	1	4	_	_			stalled; proper backflow devices		00	0	2
	_	OUT				d identification		Ě				_	-			es: properly constructed, supplied, cleane	d	õ	õ	1
3	5		Food	i prop		al container; required r		0	0	1			-	-	·	use properly disposed; facilities maintaine	id bi	0	0	1
2	6	out	Incor	de ro	Prevention dents, and animals	of Food Contaminat	lon	0	0	2						ilities installed, maintained, and clean intilation and lighting; designated areas u	sad	0	0	1
	-	-				,	a di setta d	-	\mapsto	-	F	+	UT	weque	ne ve		XCU	-	<u> </u>	
	8	0			ition prevented dur	ring food preparation, s	zorage & display	0	0	1	5		_	himani	ner	Administrative items		0	0	
3	9	Ó	Wipi	ng cic	ths; properly used			0	0	1		_			-	inspection posted		0	0	0
4	0	O OUT	Was	hing f	ruits and vegetable Prope	s r Use of Utensils		0	0	1	H	_	_			Compliance Status Non-Smokers Protection	Act	YES	NO	WT
	1	0			nsils; properly store	ed .	ad bandled		8		5	7				with TN Non-Smoker Protection Act		×	읭	
- 4	23	0	Singl	e-use	/single-service art	ns; properly stored, dri cles; properly stored, u			0	1	5	8 9				ducts offered for sale roducts are sold, NSPA survey completed	1	0		0
	4				ed properly				0											
serv	ice e	stablis	hmen	t perm	sit. Items identified a	s constituting imminent	health hazards shall b	e corre	cted i	mmed	iately	or op	eration	ns shall	l ceas	Repeated violation of an identical risk factor e. You are required to post the food service of	establishment permit	t in a c	onspi	icuous
						ort in a conspicuous ma 14-708, 68-14-709, 68-14-				t a hei	ring	egard	ling th	is repo	rt by f	fling a written request with the Commissioner	within ten (10) days	of the	date	of this
	-	H		D			02/2	15/2	02?	3				_	/	$\langle \rangle$	()2/1	5/2	2023
Sig	natu	re of	Pers	on In	Charge				_	Date	Si	gnatu	ire of	Envir	onme	ental Health Specialist				Date

Additional food safety information can be found on our website, http://tn.gov/health/article/eh-foodservice ****								
PH-2267 (Rev. 6-15)	Free food safety training classes are available each month Please call () 9012229200	at the county health department. to sign-up for a class.	RDA 629					

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: IHOP Establishment Number #: 605118847

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)				
Commercial Dishwasher			165				

Equipment Temperature	
Description	Temperature (Fahrenheit)
Freezer	1
Cooler	40
Double Refrigerator	40
Double Freezer	0

DecoriptionState of FSteakCold HoAngus BeefCold HoLettuceCold HoTomatoCold Ho	olding 40 olding 40
Angus Beef Cold Ho Lettuce Cold Ho	olding 40
Lettuce Cold He	5
	oldina 41
Tomato Cold Ho	
	olding 50
American SLICED Cold Ho	olding 55
Swiss SLICED Cold He	olding 56
Sausage Cold Ho	olding 41
Raw Chicken Cold Ho	olding 40
Ham Cold Ho	olding 37
Ham DICED Cold Ho	olding 36
Pot Roast Cold Ho	olding 38
Ham LOAF Cold Ho	olding 37
Chicken Breast Cold Ho	olding 36
Chicken Breast #2 Cold He	oldina 37

Total # 8

Repeated # ()

6: Educate employees on the importance of washing hands between tasks. 14: Observed severely stained cutting boards at the grill station.

20: The top of the cold holding table is not holding items at the proper cold holding temperature.

22: No written procedure for the TPHC practice for cold holding items.

35: Observed unlabeled bottles in the kitchen area.

45: Observed ice build up in the walk-in freezer.

51: Observed loose faucet handles in the mens and women's restroom. The toilet of the women's restroom is dirty. The floor in the large stall of the mens restroom needs to be cleaned.

53: Observed stained ceiling tiles in the kitchen.

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Establishment Information

Establishment Name: IHOP Establishment Number : 605118847

Comments/Other Observations	
1: PIC is Serv Safe certified.	
2: 3:	
3:	
4:	
4: 5: 7:	
8: Di Frank in alterin al fram Darfarmana, Frank Oraun DFC	
9: Food is obtained from Performance Food Group PFG.	
10:	
11: 12:	
13:	
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*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: 605118847

Comments/Other Observations (cont'd)

Additional Comments (cont'd) See last page for additional comments.

Establishment Information

Establishment Name: IHOP

Establishment Number # 605118847

Sources			
Source Type:	Food	Source:	Performance Food Group PFG
Source Type:		Source:	
Additional Comme	ents		

Provided safe food donation brochure. Due to priority violations, a follow-up is scheduled.