HAMILTON COUNTY PREVENT PROMOTE PROTECT				·	Art Esta ection C			Timothy I. Ingram Health Commissioner 250 William Howard Taft Road, 2nd Floor Cincinnati, OH 45219 Phone 513.946.7800 Fax 513.946.7890 hamiltoncountyhealth.org				
Fa	cility	Name:	Got Ink Studios		Date:	5/1/20)17	Т	ime:	12:15 PM	Jurisdiction:	Mt Healthy
Fa	acility	Address	: 7408 Hamilton Avenue						Fac	ility Phone #:	(513) 312-05	97
Operator Name: Cameron Baxter							Operator Phone #:					
Fa	acility	Email:	gotinkbooking@gmail.co	m								
Η	ealth I	District:	Hamilton County	Inspector(s):	Tony	Schoei	nlein					
Place an X in the appropriate column to denote compliance status. "See Note" indicates an observation relating to this regulation was noted in the comments section of the report. It does not necessarily mean the facility was out of compliance. This checklist is not all inclusive of regulations applicable to body art facility operations.												
Т	his is a	a: 🗆 C	Comprehensive Inspection	□ Partial Inspection	Reinsj	pection	n D	≤ Li	censing	g Inspection	× Com	nents on Back
Yes XXXX XXXX XXXXX XXXXXXXXXXXXXXXXXXXX		-9-02 B((A) (B) (B) (M) -9-04 Sa (A) (A) (A) (A) (C) (C) (C) (C) (C) (C) (C) (C	oard of Health Approval Approval to operate Plan approval (8) Written infection preve Services not performed o except as approved fety & Sanitation Standar Premises at least 100 squa Each individual shall have Complete privacy is availa Entire procedure room an in a clean, sanitary conditi 40 foot-candles of light at All floors impervious, sm All tables and other equip Restrooms available to en No tattoo equipment or su Hand washing sink in clos No exposed plumbing cre Closed receptacles for disp dressings, and trash Animals not permitted in e	utside the premises, rds are feet e at least 36 square feet able, if desired. d equipment maintained ion and in good repair. tattoo level ooth, washable surface ment easily cleanable uployees and patrons pplies stored in restroor se proximity of operato ating potential hazard posal of gloves,	n N	See Note	1-9-05	 (1) (1)	 Disp All 1 Sing Proceeding Proceeding Proceeding Proceeding Proceeding Solution Anter to prepare 	bosable razors marking instru- gle use product cedure areas c ps, inks, dyes, lied using ase taminate the c on-single use c nd washing as sinfecting, and atron provide HD when a c sal of sharps i d of procedu es: name, add lors, lot numb ing size, mate al Requireme o be tattooed	leaned and disinfe- pigments, ointmo- ptic technique and original container; equipment disinfe- nd gloves worn du d sterilizing proce- d verbal and writt complaint of infec n accordance with tres maintained for tress, date, placem- pers, manufacturer erial composition, ents for Tattoo Se cleaned with soap iseptic solution ap	y disposed ngle use of or absorb blood ected ents dispensed and d so as not to single use applicators cted and sterilized uring cleaning, dures en aftercare tion received nOAC 3745-27 r 2 years and tent of procedure rs jewelry used manufacturer ervices and water then
\times			No food or drink consume cosmetics applied, persona	ed, contact lenses handl				(B)		oducts applied		g stencils, must be
			vaporizing devices handle tattoo/b.p. or sterilization	d, or similar activities i				(C)	Use or	nly commercia	ally manufactured sable containers for	inks intended for or inks. Remove
\mathbf{X}		(M)	Water/wastewater systems and Infectious waste dispo Artists have received app Infection prevention and o	s, solid waste disposal, osal meets requirements ropriate training					excess Wash Use st	dye with clea completed tat erile, non-occ	n, absorbent, disp too with appropria	
\times			Artist restrictions Restrictions on procedures	estrictions ions on procedures for persons under 18		370		6 Additional Body Pier (A) Area to be pierced		-	-	& water, then
\leq		(Q) (R) (S)	 Patrons with conditions w healing process Body art procedures perforsion surface Observe standard precauti the following: (1) Sterile instruments and all times 	which could affect the cormed only on a healthy ons in accordance with				(B)	prepare provide labret, Only s ASTM platinu	ed with antise ed with alcoho or cheek piero erialized jewe F138 steel, s	ptic solution. Ora ol free antiseptic r cing shall follow l elry made of AST olid 14 or 18 kara aced in a new pier	l piercing patrons nouthwash. Lip, poth procedures.
\times			(2) Hand washing before a(3) Disposable gloves worn including setup and tea	n during entire procedur	re							

changed/replaced as necessary

Yes	See NA or or Note DNI 3701-9-07 Ear Piercing Gun Standards □ ○ □ ○ (A) Training records for ear piercing gun □ ○ ○ ○			See Note	NA or DNI	 (B) Monitor the function of sterilizers with the following: (1) Sterilization pouches with process indicator that changes color (2) Sterilization integrator used in each load (3) Weekly biological indicator tests submitted to lab (C) Documentation that indicators, integrators and biologic. 				
		 (2) Rinsed and patted dry (3) Disassembled or placed in open position (4) Visually inspected for cleanliness and damage (5) Cleaned in tepid water and appropriate detergent (6) Fully submerged in disinfectant per manufacturer (7) Rinsed and patted dry (8) Placed in ultrasonic unit filled with appropriate solution per manufacturer (9) Rinsed and air dried (10) Individually packed in sterilization pouches. Each pouch labeled with date of processing (11) Sterilized in a steam sterilizer Ultrasonic units and steam sterilizers used, cleaned, and 				 tests were performed. Records are Maintained for 2 years and includes the following: Date and time the load was run Name of person who ran the load Results of integrator Report from lab on biological indicator test Documentation kept in each patrons file for needles and instruments used on that patron. New and replacement sterilizers shall be designed to sterilize hollow instruments and equipped with mechanical drying cycle If wetness/moisture remains in/on pouches or if sterilizer malfunctions then instruments shall be considered contaminated and re-packaged/re-sterilized Sterilized instruments remain in pouches until use Malfunctioning sterilizer not used until repaired or replaced Sterilized instruments stored in pouches, handled with gloves, stored in clean, dry, closed area. Re-sterilized if 				
	Insne	maintained according to manufacturer. Records of maintenance kept for 2 yrs.	\times			integrity of pouch is compromised. (I) Instruments re-sterilized after 1 year				
		ng Inspection:								
Cameron Baxter, operator, has received the appropriate training.										
	Busines	s to perform tattoo body art.								
Facility meets requirements. <> Hand washing sinks in close proximity. <> Restrooms available for patrons. <> All equipment available; disinfectants, equipment, etc.										
\$300 license fee received. The facility's 2017 license effective through December 31, 2017.										
		Tony Schoenlein		đ	M	• May 1, 2017				

Print Name of Inspector Completing Form