

## **Body Art Establishment Inspection Checklist**

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Fa	cility	Name	e: Salon Lofts - Katy Keffer	Date:	1	1/17/2	2016	Ti	me:	11:00AM	Jurisdiction:	Madeira
Fa	acility	Addre	ess: 8110 Montgomery Road						Fac	ility Phone #:		
O	perato	r Nam	ne:						Oper	ator Phone #:		
Fa	cility	Email	l:									
Н	ealth I	Distric	et: Hamilton County Inspector(s):		Cale	eb Pas	s					
			ne appropriate column to denote compliance status. "See No									
the	e repor	t. It doe	es not necessarily mean the facility was out of compliance.	This chec	cklist	is not	all inc	lusive	of regu	lations applicab	le to body art facili	y operations.
T	his is a	a: 🗵	Comprehensive Inspection	☐ Re	einsp	ection	ı	☐ Li	censing	g Inspection	ĭ Comi	nents on Back
Yes	See	NA			Yes	See	NA					
	Note	or DNI				Note	$\stackrel{or}{DNI}$					
_	3701		Board of Health Approval			$\boxtimes$					ngle use, disposal	
$\boxtimes$	$\forall$		A) Approval to operate (B) Plan approval		$\boxtimes$	H	H				used and properly ments shall be sign	
$\boxtimes$	Ħ		B)(8) Written infection prevention and control plan			Ħ	H					of or absorb blood
$\times$			M) Services not performed outside the premises,		$\boxtimes$			(8	) Proc	edure areas cl	eaned and disinfe	ected
	2701	0.04	except as approved Safety & Sanitation Standards		$\times$			(9			pigments, ointme otic technique and	ents dispensed and
$\times$	3701·		(A) Premises at least 100 square feet									single use applicators
$\times$			Each individual shall have at least 36 square feet		$\times$					-		cted and sterilized
$\boxtimes$			Complete privacy is available, if desired.  B) Entire procedure room and equipment maintained	4	$\times$			()			nd gloves worn du sterilizing proced	
$\times$		□ (	in a clean, sanitary condition and in good repair.	J		$\times$		(T)			d verbal and writt	
$\times$			(C) 40 foot-candles of light at tattoo level		$\boxtimes$						omplaint of infec	
$\boxtimes$	$\Box$		<ul><li>(D) All floors impervious, smooth, washable surface</li><li>(E) All tables and other equipment easily cleanable</li></ul>		$\Box$	$\boxtimes$	H				n accordance with res maintained fo	
$\boxtimes$	$\boxtimes$	_	F) Restrooms available to employees and patrons		ш		ш	( ,, )			ress, date, placem	
$\square$			No tattoo equipment or supplies stored in restroor								ers, manufacturer	
$\boxtimes$			(G) Hand washing sink in close proximity of operato	r		370	100	5 A A			rial composition,  nts for Tattoo Se	
$\boxtimes$	R		(H) No exposed plumbing creating potential hazard (I) Closed receptacles for disposal of gloves,		$\boxtimes$						cleaned with soap	
_	_	_	dressings, and trash		_						iseptic solution ap	oplied with
$\boxtimes$	$\mathbb{H}$		<ul><li>(J) Animals not permitted in establishment</li><li>(K) No food or drink consumed, contact lenses handl</li></ul>	ad	$\boxtimes$	П	П			use applicator oducts applied	to skin, including	g stencils, must be
	Ш		cosmetics applied, personal grooming performed			ш	ш		single	use		
			vaporizing devices handled, or similar activities i	n	$\times$					•	lly manufactured able containers fo	inks intended for
$\boxtimes$	П	$\Box$ (	tattoo/b.p. or sterilization areas  L) Water/wastewater systems, solid waste disposal,								n, absorbent, disp	
		_	and Infectious waste disposal meets requirements	3	$\times$			(D)				ate antiseptic solution
$\boxtimes$			(M) Artists have received appropriate training	1-4-							hall not be used.	dressing. Non-medica
$\times$		=	Infection prevention and control plan kept up to of Artist restrictions	uate		370	1-9-0	6 Ad	-	al Body Pierc		
$\boxtimes$		=	P) Restrictions on procedures for persons under 18		$\times$			(A)	Area to	be pierced c	leaned with soap	
$\boxtimes$			(Q) Patrons with conditions which could affect the healing process     (R) Body art procedures performed only on a healthy	7							otic solution. Oral	piercing patrons
	П	$\square$ (									ing shall follow b	
_			skin surface		$\times$				-	-	lry made of AST	
		(;	S) Observe standard precautions in accordance with the following:									t gold, niobium, or cing. Mill certificates
$\times$			(1) Sterile instruments and aseptic techniques used	d at					-	elry maintain	_	<i>volumentos</i>
$ \nabla $			all times (2) Hand washing before and after each procedure	!								
$\times$		Ħ	(3) Disposable gloves worn during entire procedure									

including setup and tear down. Gloves must be

changed/replaced as necessary

Yes	See	NA		Yes	See	NA	
	Note	or DNI			Note	or DNI	
	3701		Ear Piercing Gun Standards				(B) Monitor the function of sterilizers with the following:
H	H		<ul><li>(A) Training records for ear piercing gun</li><li>(B) Disposable gloves shall be used and available</li></ul>	X	Ш	Ш	<ol> <li>Sterilization pouches with process indicator that changes color</li> </ol>
Ħ	Ħ		(C) Ear piercing gun cleaned/disinfected after each use	$\times$			(2) Sterilization integrator used in each load
			(D) Gun stored in covered container or cabinet	$\boxtimes$			(3) Weekly biological indicator tests submitted to lab
		$\times$	(E) Patron notification of disinfection frequency/methods	$\times$	Ш	Ш	(C) Documentation that indicators, integrators and biological tests were performed. Records are Maintained for 2 years
	37		08 Sterilize & Disinfection Procedures				and includes the following:
			(A) All non disposable equipment shall be cleaned and sterilized in the following manner:	$\boxtimes$			(1) Date and time the load was run
$\times$			(1) Soaked in an enzymatic pre-cleaner	$\boxtimes$		H	<ul><li>(2) Name of person who ran the load</li><li>(3) Results of integrator</li></ul>
$\times$			(2) Rinsed and patted dry	$\boxtimes$	Ħ	H	(4) Report from lab on biological indicator test
$\times$			(3) Disassembled or placed in open position	$\boxtimes$			(C) Documentation kept in each patrons file for needles and
$\boxtimes$	$\forall$	$\forall$	<ul><li>(4) Visually inspected for cleanliness and damage</li><li>(5) Cleaned in tepid water and appropriate detergent</li></ul>	<u> </u>			instruments used on that patron.
$\boxtimes$	H	H	(6) Fully submerged in disinfectant per manufacturer	$\times$	Ш	Ш	(D) New and replacement sterilizers shall be designed to sterilize hollow instruments and equipped with
$\overline{\times}$			(7) Rinsed and patted dry				mechanical drying cycle
$\times$			(8) Placed in ultrasonic unit filled with appropriate	$\times$			(E) If wetness/moisture remains in/on pouches or if sterilizer malfunctions then instruments shall be considered
$\nabla$	П	П	solution per manufacturer  (9) Rinsed and air dried				contaminated and re-packaged/re-sterilized
$\boxtimes$	Ħ	H	(10) Individually packed in sterilization pouches.	$\times$			(F) Sterilized instruments remain in pouches until use
_	_	_	Each pouch labeled with date of processing	$\boxtimes$			(G) Malfunctioning sterilizer not used until repaired or replaced
$\square$	H	H	(11) Sterilized in a steam sterilizer Ultrasonic units and steam sterilizers used, cleaned, and	$\times$			(H) Sterilized instruments stored in pouches, handled with gloves, stored in clean, dry, closed area. Re-sterilized if
	ш		maintained according to manufacturer. Records of				integrity of pouch is compromised.
			maintenance kept for 2 yrs.	$\times$			(I) Instruments re-sterilized after 1 year
_	Ins	pec	tion Remarks				
-	No	expi	red inks observed during inspection.				
-			ashing sink properly working.				
			nd cold water available from sink.				
-			ms available to customers down the hall.				
-			er paperwork provided during inspection.				
		-	kept in a clean and sanitary condition.				
-	Equ	ıpını	ent is in pre-sterilized packaging.				
L						_	
Coloh Door						C	November 17, 2016
			Caleb Pass		A LIE	<u> </u>	110 venioei 17, 2010