Body Art Facility Infection Prevention and Control Plan Guideline

In accordance with the California Health and Safety Code, Section 119313, a body art facility shall maintain and follow a written Infection Prevention and Control Plan, provided by the owner or established by the practitioners, specifying procedures to achieve compliance with the Safe Body Art Act. A Copy of the Infection Prevention and Control Plan shall be filed with the Local Enforcement Agency and a copy maintained in the body art facility.

The body art facility owner shall provide onsite training on the facility's Infection Prevention and Control Plan to the body art practitioners and employees or individuals involved with decontamination and sterilization procedures.

Training shall be provided when tasks where occupational exposures may occur are initially assigned, anytime there are changes in the procedures or tasks and when new technology is adopted for use in the body art facility, but not less than once each year. Records of training shall be maintained on-site for three years.

Name of Body Art Facility:	
Site Address:	
City, State, Zip:	
ype of Body Art Facility:	
Contact Person:	Telephone:
	E-mail:
A. Decontamination and Disinfection: Describe surfaces (California Health and Safety Code 1	e the procedures for decontaminating and disinfecting of workstation and 19308 (b) and 119309 (a)(b)(c)(d)(e)).
1. Workstation surfaces/counter tops:	
2. Workstation chairs/stools:	
3. Trays:	
o. Hays.	
4. Armrests:	
5. Headrests:	

6. Procedure area:
7. Tables:
8. Tattoo machine and Clip Cord:
9. Reusable instruments, calipers, needle tubes, etc. portable light fixtures or other:
10. Permanent Cosmetic Machine:
3. Reusable Instruments or Disposable: Describe the procedures used for decontaminating, sterilizing, packaging and storing of reusable instruments. Include the procedures for labeling of sterilized peel-pack. Indicate whether the body art facility uses pre-sterilized, single-use and disposable instruments. Describe the record keeping logs and procedure logs maintained on-si when using 100% pre-sterilized, single-use and disposable instruments (California Health and Safety Code 119309 and 119315).
1. Needle tubes:
2. Calipers:
3. Other instruments:

C. Storage: Describe the storage location and equipment used for the storage of clean and sterilized instrument peel pack protect the packages from exposure to dust and moisture (California Health and Safety Code 119315 (c)).	s to
 D. Set Up and Tear Down of Workstation: Describe the procedure for setting up and tearing down the workstation for the following procedures (California Health and Safety Code 119308, 119309 (c), 119311, and 11913 (b)(4)). 1. Tattoo: 	
2. Piercing:	
3. Permanent Cosmetics:	
4. Branding:	
E. Prevention of Cross Contamination: Describe the techniques used to prevent the contamination of instruments, tatto machines, trays, tables, chairs, clip cords, power supplies, squeeze bottles, inks, pigments, lamps, stools, soaps, proce sites and additional areas of potential contamination during body art prepared for a body art procedures. (California Hea Safety Code 119308, 119309, and 119311 (c)(d)(e)(f)).	edure
F. Sharp Containers: Describe the procedures used for the safe handling of sharps and indicate the location of the in-use containers. Indicate disposal frequency for sharps waste (California Health and Safety Code 119314 (e)).	sharps

G. Sharps Disposal: Describe the disposal of sharps used during a body art procedure (California Health and Safety Code 119308 (b)(3) and 119311 (g)).1. Needles and needle bars:
2. Razors:
3. Other sharps or single-use marking pens used on open skin:
H. List the Medical Waste Hauler, Mail-back System or Alternative Treatment Technology used for the disposal sharps containers (California Health and Safety Code 119314 (e)):
Medical Waste Hauler:
Street Address:
City, State, ZIP: Sterilization of Jewelry: Describe the procedure used for the sterilization of jewelry prior to placing into newly pierced skin (California Health and Safety Code 119310(a) and 119315).
J. Sterilization room: Describe the procedure used for decontaminating instruments prior to placing them into the autoclave. Indicate whether instruments are manually washed or machine washed, such as with an Ultrasonic machine. Describe the material used for soaking dirty instruments in the machine, such as Tergazyme (California Health and Safety Code 119309 (e)(g). 119314 (c), and 119315 (b)).
 C. Disinfection Products: List the disinfectant products used at the body art facility (California Health and Safety Code 11930 (k) and 119308 (b)(6)).

L.	Time and Temperature: List the temperature of the autoclave and duration of time at that temperature required for the sterilization of clean instruments. Indicate where the sterilization log is maintained on-site. Indicate whether each sterilization load is tested using Class 5 intergrators (California Health and Safety Code 119315 (b)(3)(5)).
Μ.	Personal Protective Equipment: List the personal protective equipment used during a body art procedure for the practitione and the client (California Health and Safety Code 119308 (a) and 119309 (j)).
N.	Handwashing Sink: List the locations of the handwash sinks and describe the items supplied at each sink (California Health and Safety Code 119314 (b)(3)).
Ο.	Aftercare Procedure: Describe the written recommendation and care information provided to the client after a body art procedure. List the type of bandages or wrapping provided after a body art procedure (California Health and Safety Code 119308 (b)(1)(2)(3)).
Ρ.	Procedure for an Accidental Spill: Describe the clean-up and disinfection procedure taken when there is an accidental spill of sharps (California Health and Safety Code 119309 (a)(b)(c)).
Q.	Trash Receptacles and Disposal of Contaminated Trash: List the type of trash receptacles used and their location throughout the body art facility. Describe the procedure for the disposal of contaminated items, such as gloves (California Health and Safety Code 119311 (a) and 119314 (d)).
R.	Negative/Failed Spore Test: Describe the procedure conducted when a monthly spore test has failed. Indicate where the facility maintains a spore test log on-site (California Health and Safety Code 119315 (b)(2)(4)).

S. Commercial Ink or Pigment Manufacturers: List the procedure for dilution of inks. Only sterile water stends (b)(c)(d)(e)).		
T. Permanent Cosmetic Machine Name and Manumachine(s) used (California Health and Safety Co		odel name and number for the permanent cosmetic
U. Service Animals: Describe the facility's policy re sterilization areas (California Health and Safety California Health And Safet		resence in procedure, decontamination, and
Maintain a copy of this completed document in your shown at the top of page 1). I hereby certify that all body art practitioners per involved with decontamination and sterilization per the page in this document. To the best of my kind of the page of the pag	forming body art at this procedures have been to	facility and employees or individuals rained with the procedures and information
contained in this document. To the best of my known true. Signature of Body Art Facility Owner		Date
Print Name of Body Art Facility Owner		Title
	For Office Use Only	
FA#: PR#:	- I of Office Ose Offiy	
	ceived By:	
Infection Prevention & Exposure Control Plan: Ap	<u> </u>	By: Date:

Sterilization Procedures

When a body art facility is equipped with a decontamination and sterilization room and will be sterilizing reusable instruments and body art jewelry, the following sterilization procedures must be followed:

- 1. Clean instruments to be sterilized shall first be sealed in peel-packs that contain either a sterilizer indicator or internal temperature indicator. The outside of the pack shall be labeled.
- 2. Sterilizers shall be loaded, operated, decontaminated and maintained according to manufacturer' directions, and shall meet all of the following standards:
 - Only equipment manufactured for the sterilization of medical instruments shall be used.
 - Sterilization equipment shall be tested using a commercial biological indicator monitoring system after the initial installation, after any major repair, and at least once per month. The expiration date of the monitor shall be checked prior to each use.
 - Each sterilization load shall be monitored with mechanical indicators for time, temperature, pressure, and at minimum, class V integrators. The Class V integrator gives an immediate response on whether the sterilization has been achieved. Each individual sterilization pack shall have an indicator.
 - Biological indicator monitoring test results shall be recorded in a log that shall be kept on site for two years after the date of the results.
 - A written log of each sterilization cycle shall be retained on site for two years and shall include all of the following information:
 - The date of the load.
 - A list of the contents of the load.
 - The exposure time and temperature.
 - The results of the Class V integrator.
 - For cycles where the results of the biological indicator monitoring test are positive, indicate how the items were cleaned, and proof of a negative test before reuse.
- 3. Clean instruments and sterilized instrument packs shall be placed in clean, dry, labeled containers, or stored in a labeled cabinet that is protected from dust and moisture. Use clean gloves to handle sterilized packages to prevent cross contamination of the sterilized item when the package is opened for use.
- 4. Sterilized instruments shall be store in the intact peel-packs or in the sterilization equipment cartridge until time of use.
- 5. Sterile instrument pack shall be evaluated at the time of storage and before use. If the integrity of a pack is compromised, including, but not limited to, cases where the pack is torn, punctured, wet or displaying any evidence of moisture contamination, the pack shall be discarded or reprocessed before use.
- 6. A body art facility that does not afford access to a decontamination and sterilization area that meets the standards of subdivision (c) of Section 119314 of the California Health and Safety Code or that does not have sterilization equipment shall use only purchased disposable, single-use, pre-sterilized instruments. In place of the requirements for maintaining sterilization records, the following records shall be kept and maintained for a minimum of 90 days following the use of the instruments at the site of practice for the purpose of verifying the use of disposable, single-use, pre-sterilized instruments:
 - A record of purchase and use of all single-use instruments.
 - A log of all procedure, including the names of the practitioner and client and the date of the procedure.

Operating Conditions for Autoclave

Cleaning: Remove all material on the instruments during the cleaning process to ensure that the sterilization process is achieved. The cleaning process can be a manual cleaning or by use of an ultrasonic machine.

Packaging: Package the instruments with hinges in the open position to ensure that the ridges and crevices of the instruments are sterilized.

Loading: Load the autoclave with the packages upright on their sides. Peel packs should be on edge with the plastic side next to a paper side to allow for steam penetration. Do not overload the autoclave to allow proper flow of the steam to achieve sterilization.

Steam Sterilization: Temperature should be 121° C or 250° F: pressure should be 106kPa (15lbs/in2); 30 minutes for packaged items. At a higher temperature of 132° C or 279° F, pressure should be 30 lbs/in2; 15 minutes for packaged items.

Allow all items to dry before removing them from the autoclave. Use clean gloves to handle packaged items. Pressure settings (kPa or lbs/in2) may vary slightly depending on the autoclave used. Follow manufacturer's recommendations for your autoclave.

Exposure time begins only after the autoclave has reached the target temperature.

Source: Adopted from Principles and Methods of Sterilization in Health Sciences. JJ Perkins. 1983

Sterilization Log

Date	Load #	Contents	Operator	Time	Temp	Psi	Temp indicator Results	Attach Integrator	Spore Test Results	Action Taken due to Failed Results

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