



## **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: \_\_\_\_\_

Type of Body Art Facility: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone: \_\_\_\_\_

**A. Decontamination and Disinfection:** Describe the procedures for decontaminating and disinfecting of workstation and surfaces.

1. Workstation surfaces/counter tops:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Workstation chairs/stools:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



County of Riverside  
**DEPARTMENT OF ENVIRONMENTAL HEALTH**

[www.rivcoeh.org](http://www.rivcoeh.org)

3. Trays:

---

---

---

4. Armrests:

---

---

---

5. Headrests:

---

---

---

6. Procedure area:

---

---

---

7. Tables:

---

---

---

8. Tattoo machine:

---

---

---

9. Reusable instruments, calipers, needle tubes, etc., or other:

---

---

---

**B. Reusable Instruments:** Describe the procedures used for decontaminating, sterilizing, packaging and storing of reusable instruments. Include the procedures for labeling of sterilized peel-packs.

1. Needle tubes:

---

---

---



County of Riverside  
**DEPARTMENT OF ENVIRONMENTAL HEALTH**

[www.rivcoeh.org](http://www.rivcoeh.org)

2. Calipers:

---

---

---

3. Other instruments:

---

---

---

**C. Storage:** Describe the storage location and equipment used for the storage of clean and sterilized instrument peel packs to protect the packages from exposure to dust and moisture.

---

---

---

**D. Set Up and Tear Down of Workstation:** Describe the procedure for setting up and tearing down the workstation for the following procedures.

1. Tattoo:

---

---

---

2. Piercing:

---

---

---

3. Permanent Cosmetics:

---

---

---

4. Branding:

---

---

---



County of Riverside  
**DEPARTMENT OF ENVIRONMENTAL HEALTH**

[www.rivcoeh.org](http://www.rivcoeh.org)

**E. Prevention of Cross Contamination:** Describe the techniques used to prevent the contamination of instruments, tattoo machine, trays, tables, chairs, clip cords, power supplies, squeeze bottles, inks, pigments, lamps, stools, soaps and the procedure site or other items during a body art procedure. Include barriers provided to prevent cross contamination. Describe how the procedure site is prepared for a body art procedure.

---

---

---

---

---

---

---

---

**F. Sharps containers:** Describe the procedures for the safe handling of sharps and indicate the location of the sharps containers.

---

---

---

**G. Sharps Disposal:** Describe the disposal of sharps used during a body art procedure.

1. Needles and needle bars:

---

---

---

2. Razors:

---

---

---

3. Other sharps or single-use marking pens:

---

---

---



County of Riverside  
**DEPARTMENT OF ENVIRONMENTAL HEALTH**

www.rivcoeh.org

**H. List the Medical Waste Hauler, Mail-Back System or Alternative Treatment Technology for the disposal of sharps containers:**

\_\_\_\_\_

\_\_\_\_\_

Medical Waste Hauler \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**I. Sterilization of Jewelry:** Describe the procedure for the sterilization of jewelry prior to placing into newly pierced skin.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**J. Sterilization Equipment:** List the equipment used in the decontamination and sterilization room and describe the procedure for decontaminating instruments prior to placing inside the autoclave. Indicate whether instruments are manually washed or machine washed, such as with an Ultrasonic machine. Include the material used for soaking dirty instruments in the machine, such as Tergazyme.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**K. Disinfection Products:** List the disinfectant products used at the body art facility.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**L. Time and Temperature:** List the duration of time and temperature of the autoclave required for the sterilization of clean instruments.

Time \_\_\_\_\_

Temperature \_\_\_\_\_

Psi \_\_\_\_\_

**M. Personal Protective Equipment:** List the personal protective equipment used during a body art procedure.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



County of Riverside  
**DEPARTMENT OF ENVIRONMENTAL HEALTH**

www.rivcoeh.org

**N. Handwashing Sink:** List the locations of the handwash sinks and describe the items supplied at each sink.

---

---

---

**O. Aftercare Procedure:** Describe the written recommendations and care provided to the client after a body art procedure. List the type of bandages or wrappings provided after a body art procedure.

---

---

---

**P. Procedure for an Accidental Spill:** Describe the clean-up and disinfection procedure taken when there is an accidental spill of sharps or biohazardous waste.

---

---

---

**Q. Trash Receptacles and disposal of contaminated trash:** List the type of trash receptacles and their location throughout the body art facility. Describe the procedure for the disposal of contaminated items, such as gloves.

---

---

---

**R. Negative/Failed Spore Test:** Describe the procedure conducted when a monthly spore test has failed.

---

---

---

Maintain a copy of this document in your files. Submit one copy to the Local Enforcement Agency.

I hereby certify that to the best of my knowledge and belief, the statements made herein are correct and true.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_