



# BODY ART

## *The Basics*

A Resource For Business in Orange County



Orange County Health Care Agency  
Environmental Health Division

1241 E. Dyer Road, Suite 120  
Santa Ana, CA 92705-5611

(714) 433-6000 voice  
(714) 754-1768 fax



## DISCLAIMER

### **DIRECTOR**

Liza Frias  
Environmental Health  
Division

### **ASSISTANT DIRECTOR**

Christine Lane  
Environmental Health  
Division

### **PROGRAM MANAGER**

Darwin Cheng  
Hazardous Materials  
Surveillance Section

This publication is advisory only and does not give specific legal advice. It is intended to assist businesses with environmental health related issues. Compliance with applicable statutes is the responsibility of each individual.

Every attempt has been made to verify the accuracy of the information contained herein. However, it carries no warranty, expressed or implied, as to its accuracy, and the information presented is subject to change at any time without notice. Mention of any product, service, or process in this publication is for educational purposes only and does not constitute a recommendation or endorsement, nor does it attempt to reflect negatively on others which are not mentioned.

Neither the Orange County Board of Supervisors, the Orange County Health Care Agency, the Environmental Health Division, nor its employees assume responsibility for the content of this document. These entities also disclaim liability for injury or damage resulting from the use or effect of any information presented in this publication.

This document was produced by the Orange County Health Care Agency, Environmental Health Division, Hazardous Materials Surveillance Section.

Users of this document are encouraged to duplicate portions as needed. Reproduction of any portion for profit is expressly forbidden without prior written permission from the Director of the Environmental Health Division.

# TABLE OF CONTENTS

<b>Chapter 1</b>	<b>The Orange County Environmental Health Division.....</b>	<b>4</b>
<b>Chapter 2</b>	<b>What is Body Art? (H&amp;SC § 119301) .....</b>	<b>5</b>
<b>Chapter 3</b>	<b>What is Not Body Art? (H&amp;SC § 119301; 119325).....</b>	<b>6</b>
	Body Art Exemptions.....	6
<b>Chapter 4</b>	<b>What is a Body Art Facility? (H&amp;SC § 119312) .....</b>	<b>7</b>
<b>Chapter 5</b>	<b>Who Can Perform Body Art? (H&amp;SC §119306) .....</b>	<b>8</b>
	Body Art Practitioner Registration Conditions.....	8
	Bloodborne Pathogen Training Requirements.....	9
<b>Chapter 6</b>	<b>Where Can Body Art Be Performed? (H&amp;SC § 119306; 119316; 119317; 119318).....</b>	<b>10</b>
	Fixed Site Facility Permitting.....	10
	Body Art Facility Permit.....	11
	Fixed Site Construction Requirements.....	12
	Infection Prevention and Control Plan.....	13
	Annual Registration & Fees.....	14
<b>Chapter 7</b>	<b>Temporary Body Art Events (H&amp;SC § 119317,119318) .....</b>	<b>15</b>
	Demonstration Booths.....	16
<b>Chapter 8</b>	<b>Before Body Art is Performed (H&amp;SC § 119308) .....</b>	<b>17</b>
	Informed Consent Form & Medical Questionnaire.....	18
	Aftercare Instructions.....	19
<b>Chapter 9</b>	<b>When Performing Body Art (H&amp;SC § 119308) .....</b>	<b>20</b>
<b>Chapter 10</b>	<b>Cleaning &amp; Sterilization Guidelines (H&amp;SC § 119314; 119315).</b>	<b>21</b>
	Sterilization Records.....	23
	Autoclave Procedures.....	24
<b>Chapter 11</b>	<b>Sharps &amp; Disposal Requirements (H&amp;SC § 119314; 119315)...</b>	<b>25</b>
<b>Chapter 8</b>	<b>Education &amp; Inspection Guidelines (H&amp;SC § 119319).....</b>	<b>26</b>
	What to Expect During an Inspection.....	27
<b>Appendix A</b>	<b>Glossary (H&amp;SC § 119301).....</b>	<b>28</b>
<b>Appendix B</b>	<b>Web Links.....</b>	<b>29</b>
<b>Appendix C</b>	<b>Professional Trade Associations.....</b>	<b>30</b>
<b>Appendix D</b>	<b>Body Art Forms.....</b>	<b>31</b>



# 1. THE ORANGE COUNTY ENVIRONMENTAL HEALTH DIVISION

The purpose of this manual is to provide the reader with a quick and simple reference regarding the regulations of Body Art in the state of California.

State laws establishing minimum requirements for body art are provided in the [California Safe Body Art Act \(SBAA\)](#). The law was enacted to provide minimum statewide standards for body art practitioners and facilities. The requirements are intended to protect both the practitioner and the client from transmission of blood borne pathogens. The SBAA resides in the California Health and Safety Code (H&SC), Division 104, Part 15, Chapter 7, Sections 119300-119328.

In regards to body art, state law pertains to all facilities and persons providing tattoo, body piercing, permanent cosmetics, and branding services. In the County of Orange, the Health Care Agency, Environmental Health (OCHCA-EH) is authorized to administer and enforce the SBAA as applicable to body art practitioners and body art facilities and is the authorized local enforcement agency.

A copy of the SBAA can be obtained from the County of Orange Website:  
<http://www.ochealthinfo.com/eh/more/bodyart>

## CONTACT US

**Address:** 1241 E. Dyer Road, Suite 120, Santa Ana, CA 92705

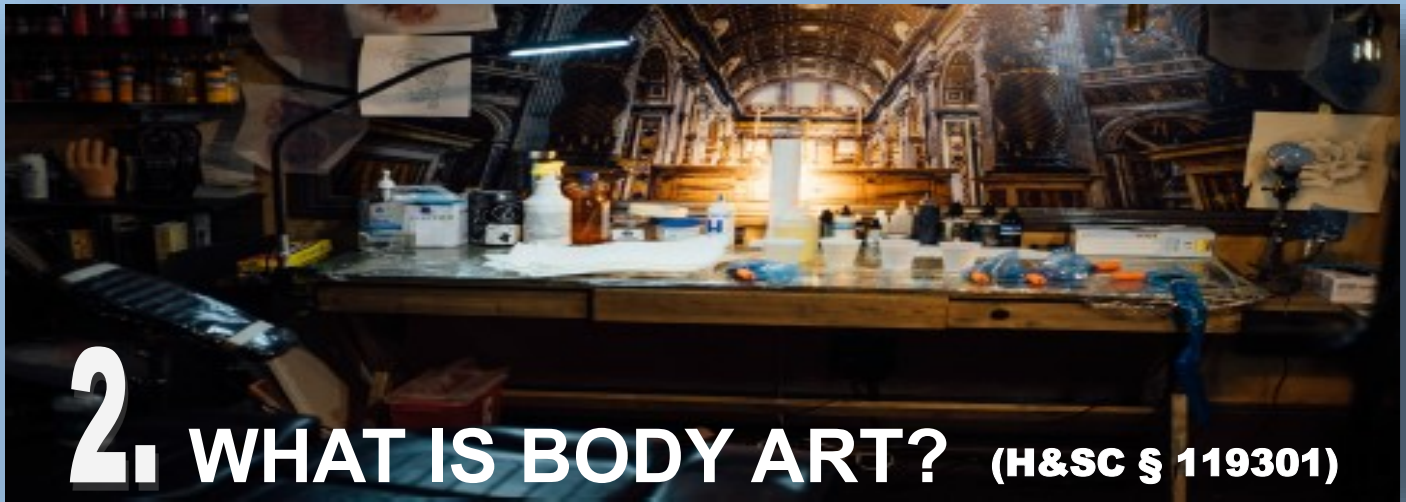
**Phone:** 1 (714) 433-6000

**Email:** [ocbodyart@ochca.com](mailto:ocbodyart@ochca.com)

**Reception Hours:** 8:00 AM - 5:00 PM

**Cashier Hours:** 8:00 AM - 4:30 PM

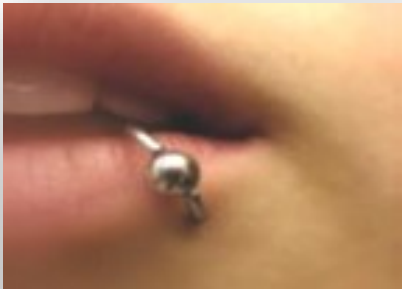




## Body Art Includes:

### Body Piercing

---



### Application of Permanent Cosmetics

---



### Tattooing

---



### Branding

---



### Body Suspension

---



© Dukkha Photos

### Microblading

---



© SPCP.org

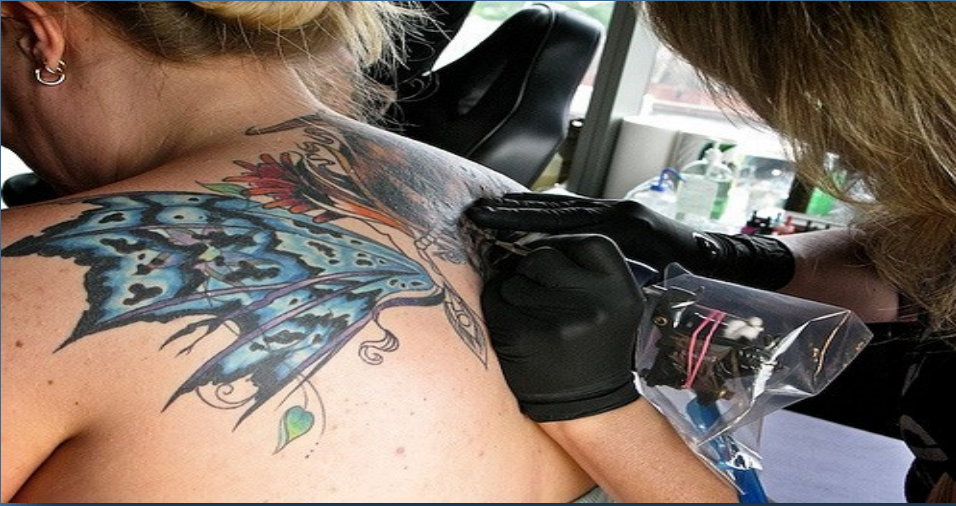


# 3

## WHAT IS NOT BODY ART?

### Not covered by the Safe Body Art Act

- Scarification
- Esthetician & barbering procedures
- Laser tattoo removal
- Chemical tattoo removal
- Micro-needling
- General medical procedures
- Mechanical Stud and Clasp Ear piercing, excluding the tragus, with a disposable, single-use, pre-sterilized stud and clasp or solid needle that is applied using a mechanical device to force the needle or stud through the ear.



# 4

## WHAT IS A BODY ART FACILITY?

**All Body Art Facilities in Orange County need to have a permit to operate issued from OCHCA-EH.** A Body art facility is a permitted location where a practitioner performs body art, or demonstrates body art for the purpose of instruction.

The Body Art Facility includes all areas where the client has contact such as:

- The reception area.
- The procedure area.
- Decontamination and sterilization areas.

When applying, the facilities include any location where body art will be performed, such as:

- A specified building.
- A section of a building, i.e. a suite room or studio.



# 5

## WHO CAN PERFORM BODY ART? (H&SC § 119306 - 119311)

A Body Art Practitioner means a person who performs body art on a client. **Body Art may only be performed by a Practitioner currently registered with OCHCA and only when working at a physical location permitted by OCHCA.**

### Registration Conditions

To become registered in Orange County an applicant must file in person at OCHCA-EH and :

1. Be at least 18 years old (Valid photo ID required).
2. Each individual must file a Body Art Practitioner Registration Application, with OCHCA in person.
3. Complete an approved **Bloodborne Pathogen (BBP) Exposure Control Training** and attach the certificate of completion to application:  
Go to <http://www.ochealthinfo.com/eh/more/bodyart> to find an approved training program for Orange County.
4. Attach photocopy of current vaccination card demonstrating **Hepatitis B immunity** through current vaccination, boosters, or titers to application; **OR** see No. 5.
5. You may decline to receive the Hepatitis B Vaccine (see application).
6. Sign and self-certify to comply with the requirements of the Safe Body Art Act.
7. Obtain all necessary permits, business licenses, certificate of occupancy use permit, and registrations required for the locations where body art is performed.
8. Display current registration in a visible location within workstation.
9. Pay fees and renew annually with OCHCA before the registration expiration date.



# **Bloodborne Pathogen (BBP) Exposure Control Training Requirements**



Owners of body art facilities must provide Bloodborne Pathogen Exposure Control Training in accordance with California Bloodborne Pathogen Control Standards for all employees, contractors, and volunteers who perform duties within the decontamination and sterilization area or procedure area (H&SC § 119307 (b)).

Practitioners must complete a Bloodborne Pathogen (BBP) Exposure Control Training before registering (H&SC § 119307).

## **Training must be:**

- At least 2 hours of instruction done annually.
- Specific to performing body art.
- Conducted by an OCHCA-EH approved instructor who is knowledgeable in exposure control and infection prevention in the body art setting.

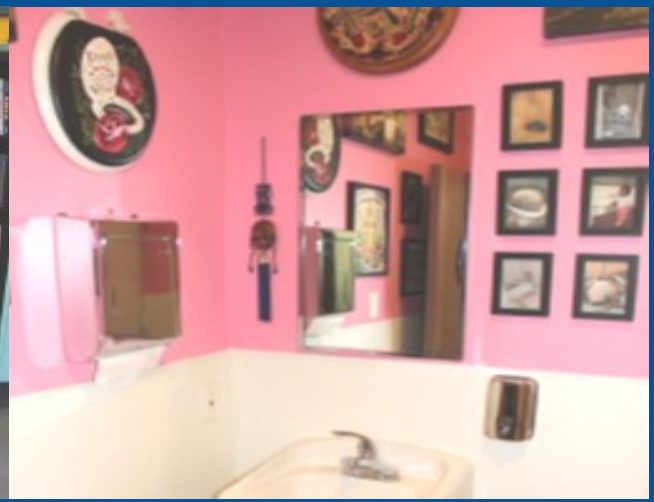
**Training records must be maintained and be available for review for a period of at least 3 years.**

## **Training must provide:**

- A copy and explanation of the California Occupational Safety and Health Administration BBP standard, as well as any local city or county legislation in regards to BBP.
- Information on the paperwork required for biohazard sharps as well as the importance of properly labeling chemicals and supplies.
- Provide information on hepatitis B vaccine, including safety and accessibility.
- Opportunities for interactive questions and answers with the instructor.

## **Training must discuss:**

- Transmission, control, and symptoms of the diseases caused by BBP.
- Tasks involved in performing body art and how those tasks may lead to exposure to BBP for the client or practitioner.
- Types and uses of all personal protective equipment, including an explanation of the limitations of the equipment.
- Types, proper technique and order of tasks to be conducted before and after putting on and removing personal protective equipment to avoid contamination.
- Importance of hand hygiene and demonstrate proper technique.
- Types, use, and storage of disinfectants and antiseptics.
- A BBP exposure incident that includes:
  - Examples of BBP exposure and how the exposure can occur.
  - Risk of infection following a BBP incident.
  - Procedures that must be taken following a BBP incident.



# 6

## WHERE CAN BODY ART BE PERFORMED?

(H&SC § 119312; 119316; 119317; 119318)

### Fixed Site Facility Permitting

Body Art may only be performed at a **Body Art Facility**, which is a physical location permitted by OCHCA and all Practitioners working at the facility must be registered with OCHCA.

A **Body Art Facility** may be a building or a section of a building; i.e. a specific room or procedure area, that meets SBAA standards. A Facility may be a fixed, permanent location or a temporary event / demonstration (training) booth.

A Body Art Facility permit application must be filed with OCHCA-EH prior to operation. Contact your city for local zoning and licensing requirements prior to selecting a facility location.

It is extremely difficult to meet all the residential SBAA requirements. Most cities won't allow this type of business at a residence. Body Art may not be performed at a private residence unless it meets all **SBAA standards and is permitted**.

**A valid health permit is only valid:**

- For the location of the facility
- For the time period indicated on the permit
- For the owner who received the permit

**Transferring permits to another owner or facility is prohibited.**

# Body Art Facility Permit

The Body Art Facility Permit Application must be submitted with all of the following required attachments:

- Construction plans for review and approval.
- A copy of the facility's Infection Prevention Control Plan.
- Current practitioner registration for all body art practitioners working on site.

Owners operating a Body Art Facility must:

- Obtain all permits if required by city to conduct business including; health, building, and business permits.
- Ensure that all practitioners who are independent contractors, if any, have business licenses if required by the city.
- Post health permit and current registrations in a visible place at the body art facility.
- Provide Bloodborne Pathogen Control Training.
- Notify OCHCA within thirty days of the resignation, termination or new hire of a body art practitioner.
- Renew permits and submit fees annually.

# Fixed Site Construction Requirements

## **Body Art Facility Owner Must:**

- Submit body art practice site construction plans to OCHCA for review prior to obtaining building, plumbing or electrical permits.
- Comply with all facility site requirements of the SBAA.
- Ensure the body art facility is approved before body art can be performed at the facility.



## **Fixed Site Body Art Facility Must:**

- Have floors, walls, and ceilings. Floors and walls must be smooth, nonabsorbent, free of open holes, and washable.
- Be free of insect and rodent infestation.
- Be unattached from any residential areas used for sleeping, bathing, or meal preparation.
- Have adequate toilet facilities.
- Be separated from all business not related to body art, at the discretion of OCHCA.
- If a sterilization room is required because reusable instruments are used at the location, a separate sterilization room sink is required.

## **Body Art Procedure Areas must:**

- Be equipped with adequate lighting in procedure area.
- Have a wall or ceiling-to-floor partition from any nail and hair activities.
- Be separated from decontamination/sterilization areas by a space of at least five feet or by a cleanable barrier.
- Have lined waste containers and a sharps disposal container in each procedure area.
- Be equipped with sink that has hot and cold running water, liquid soap, and a wall mounted touchless paper towel dispenser accessible to the practitioner.



# Infection Prevention and Control Plan

(H&SC §119313)



**All body Art Facilities must maintain and follow a written Infection Prevention and Control Plan, which must be located onsite.**

The Plan must include:

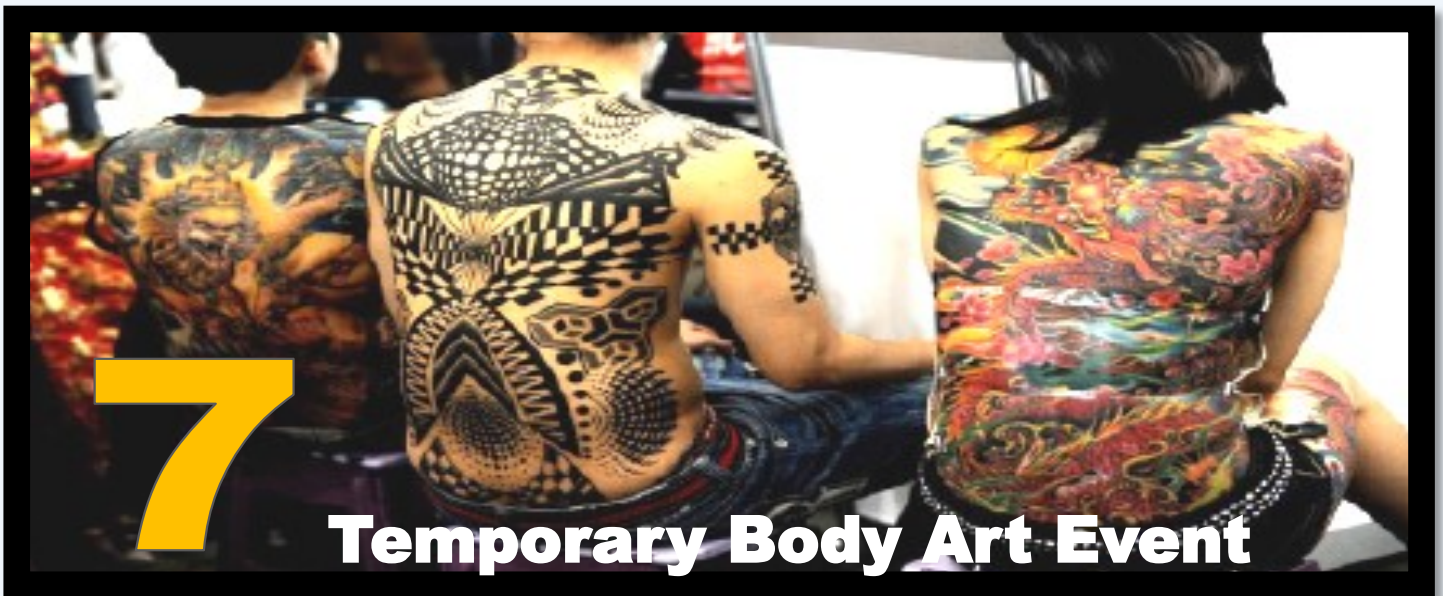
- 1) Procedures for cleaning and decontaminating environmental surfaces.
- 2) Procedures for cleaning, decontaminating, packaging, sterilizing, and storing reusable instruments.
- 3) Procedures for protecting clean instruments and sterile instrument packs from exposure to dust and moisture during storage.
- 4) A setup and teardown procedure for any form of body art performed at the body art facility.
- 5) Techniques to prevent the contamination of instruments or the procedure site during the performance of body art.
- 6) Procedures for safe handling and disposal of sharps waste.
- 7) The Infection Prevention and Control Plan shall be revised when changes are made in infection prevention practices. Keep a list of all revisions in the plan.
- 8) Onsite training on the facility's Infection Prevention and Control Plan shall take place when jobs or tasks where occupational exposure may occur are initially assigned, or any time there are changes in the procedures or tasks, and when new technology is adopted for use in the facility, but not less than once each year.
- 9) Training records shall be maintained for three years. Keep a list or record of your personnel who have completed training in the plan. Records must be available for inspection upon request of the enforcement officer.



## **Annual Registration & Fees**

Artist and facility registration must be renewed annually:

- To access our Fee Schedule, please visit:  
<http://ochealthinfo.com/documents/HMSS20182019Fees1.pdf>
- Email annual Bloodborne Pathogens Certificates to :  
[ocbodyart@ochca.com](mailto:ocbodyart@ochca.com).
- Artist/Practitioner registration is active if BBP training is current and fees are paid.
- Practitioners are responsible for providing current contact info to [ocbodyart@ochca.com](mailto:ocbodyart@ochca.com).



### **Practitioners Working in Temporary Demonstration Booths Must:**

- Not work more than 7 days in a 90 day period.
- Display or have practitioner registration available upon request.
- Out of state artist must be registered with OCHCA and obtain a practitioner registration.
- Store supplies in compliance with sterile practices.
- Store and maintain informed consent, medical questionnaires, aftercare instructions and single use instrument logs.

### **Sponsors of Body Art Events Must:**

- Submit a complete temporary facility permit application to OCHCA at least 30 days before the event.
- Obtain all necessary permits to conduct business.
- Ensure all practitioners are registered.
- Provide support facilities for practitioners.
- Use a licensed medical waste disposal company for removal of all sharps waste containers used during the event.
- Provide frequent trash pickup from booths.
- Refill potable water tanks, and empty discharge water tanks.
- Display the name, telephone number, and directions for the nearest emergency room.

# Demonstration Booths

## To Meet Requirements the Demonstration Booth Must be :

**Located within a building that has hand washing facilities equipped with:**

- Hot and cold running water.
- Containerized liquid soap.
- Single-use paper towels stored in a touchless dispenser.

**- AND**

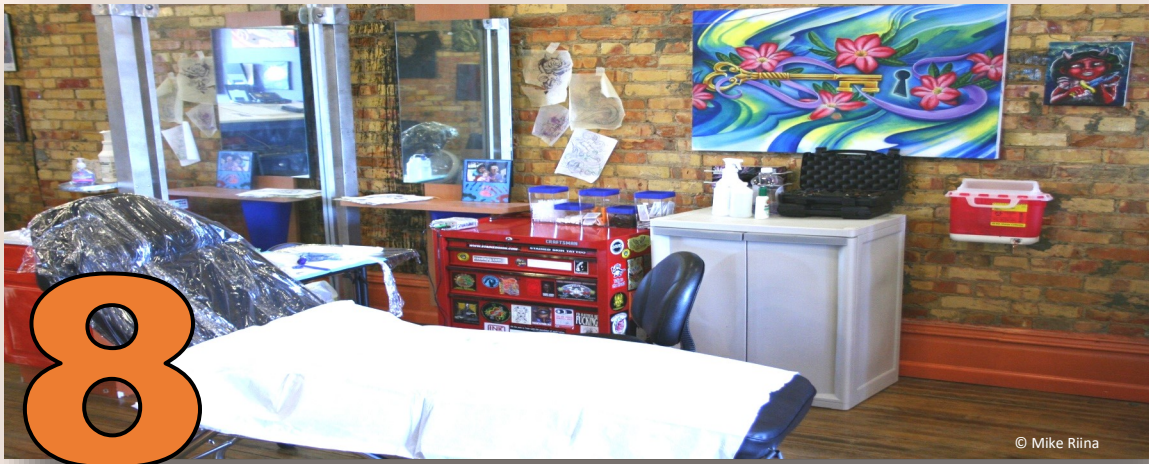
**Have hand washing areas for the exclusive use of the practitioner:**

- Two demonstration booths may share one handwashing station.
- The handwashing station must be separated from the public by a partition of at least three feet.
- Hand washing stations must have containerized liquid soap and single-use paper towels stored in a touchless dispenser.
- Five gallon or larger container of potable water accessible via spigot.
- Water collection and holding tank of corresponding size.

## In Addition the Demonstration Booth Must:

- Be constructed with a partition of at least three feet in height separating the procedure area from the public.
- Be free of insect and rodent infestation.
- Have smooth cleanable floors, sharps waste, and trash receptacles for each practitioner area.
- Be used exclusively for performing body art and have at least 50 square feet for each practitioner.
- Be equipped with adequate light where practitioner is performing body art.
- Refill potable water and evacuate holding tank every four procedures or four hours; whichever occurs first.
- Not allow animals, food, drinks, or tobacco products within the confines of the demonstration booth.
- Operate with all necessary permits to conduct business, or may be subject to closure of temporary body art event and a penalty.
- In the absence of blood or bodily fluid contamination hand sanitizer may be used in lieu of hygienic hand washing when it is applied to all surfaces of the hands including under the fingernails.





## **Before Body Art is performed**

*\*Practitioners have the right to refuse service to anyone*

### **Before performing body art, the practitioner must:**

- ◆ Check the age of the client is 18 years or older. Only piercing can be performed on minors with parental consent and presence.\*
- ◆ Have the client read, complete and sign an Informed Consent Form and a Medical Questionnaire.
- ◆ Practitioners must practice good hygiene and personal safety, and wear clean clothes.

\*NOTE: piercing of the nipples or genitals may **NOT** be performed on anyone under 18 years of age.

### **Facilities must secure the confidential information of the clients. Facilities must:**

- ◆ Comply with all state and federal HIPAA laws with respect to the protection of a client's personal information.
- ◆ Maintain the privacy of information.
- ◆ Protect the information from being sold, shared, or transferred.
- ◆ Store the Informed Consent Form and Medical Questionnaire, in a secure location on-site and have records available for review for a period of two years.
- ◆ Shred any confidential medical information from the client after a period of two years.



## Informed Consent Form Requirements

### The Informed Consent Form must include:

- A description of the procedure
- A description of what the client should expect following the procedure, including suggested care and any medical complications that may occur due to the procedure
- A statement on the permanent nature of body art
- A notice that tattoo inks, dyes, and pigments have not been approved by the Food and Drug Administration (FDA) and that health consequences of using these products are unknown.
- A Medical questionnaire, which asks:**

- ② Whether the client may be pregnant?
- ② Whether the client has a history of medication use or is currently using medication, including being prescribed antibiotics prior to dental or surgical procedures?
- ② If there have been any possible exposure to blood borne pathogens?
- ② If the client has a history of Cardiac Valve Disease, Diabetes or herpes infection at the site of the procedure?
- ② If the client has allergic reactions to latex or antibiotics?
- ② If the client has Hemophilia or any other bleeding disorder.?

See Appendix or follow link to view a [sample Informed Consent Form](#)

# AFTERCARE INSTRUCTIONS

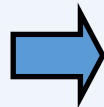


The Aftercare form **MUST** include post procedure instructions on the care of the procedure site that include:

Information on the care of the procedure site.

Restrictions on physical activities such as:

- ◆ Bathing
- ◆ Recreational water activities
- ◆ Gardening
- ◆ Contact with animals
- ◆ The number of days the restrictions on the activities above will last.



If a client notices any signs and symptoms of infection, this indicates the need to seek medical care. This may include, but is not limited to:

- ◆ Redness
- ◆ Swelling
- ◆ Tenderness
- ◆ Red streaks going from procedure site to heart
- ◆ Elevated body temperature
- ◆ Purulent drainage from the procedure site

# 9

## When Performing Body Art



### Practice Good Hygiene!

- ⇒ Always wash your hands with soap and water.
- ⇒ Dry hands with paper towels from a single sheet dispenser.
- ⇒ Put on a clean apron, bib, or lap pad over clean, dry clothing.
- ⇒ Put on personal protective equipment appropriate for the task.
- ⇒ Always wear a new pair of disposable gloves.
- ⇒ Replace gloves if gloves touch a surface other than client's skin.
- ⇒ If gloves are removed at any time during procedure, hygienic hand washing must occur before putting on a new pair of clean, previously unused gloves.
- ⇒ When shaving a procedure site, wash client's skin with soap and water before shaving with a disposable, single use razor.
- ⇒ Clean client's skin with an antiseptic, antimicrobial, or microbicide solution immediately before procedure.
- ⇒ Soaps and other products in multiple-use containers shall be dispensed into single-use containers. Discard solutions and single-use containers immediately after use.

### The following are prohibited in procedure area:

**\*Including those belonging to the client.**

- Food & drinks
- Tobacco products
- Personal effects
- Animals (unless they are service animals)



### When Performing Body Art

If client needs to eat, drink or smoke, client must leave procedure area.  
The procedure area must then be protected from contamination.





# 10 Cleaning & Sterilization

(H&SC § 119314; 119315)



**Jewelry must be purchased pre-sterilized or be sterilized prior to piercing. Evaluate sterile jewelry packs for tears, punctures, or moisture contamination.**

**Only use jewelry that is made of:**

- ◆ ASTM F138
- ◆ ISO 5832-1
- ◆ AISI 316L
- ◆ AISI 316LVM
- ◆ Implant grade stainless steel
- ◆ 14-karat-18-karat Yellow/white gold
- ◆ Niobium
- ◆ ASTM F136 6A4V
- ◆ Titanium
- ◆ Platinum
- ◆ Other equally biocompatible material



## **Prevent Contamination**

- ⇒ Use commercially manufactured inks, dyes, pigments. When using multiple use containers pour out inks, pigments, soaps, and other products into sterile, single use, disposable containers.
- ⇒ Discard unused portions in single-use containers immediately upon completion of procedure.
- ⇒ Use a machine to insert pigments that is designed with removable tip parts between the tip and motor housing that will prevent backflow.
- ⇒ Note: For micro-blading, dispose of handle portion of hand tool along with the needle into a sharps container with sharps intact unless it is reusable. If reusable, it must be sterilized before each use.
- ⇒ Use clean calipers, toothpicks and ink, or single use pen if skin is being measured and marked.

# Cleaning & Sterilization Guidelines

## Surfaces:

- ✓ Decontaminate all solid surfaces and objects that have come into contact with client. This can include but not limited to: chairs, armrests, tables, counter tops, and trays.
- ✓ Disinfect all solid surfaces and objects in procedure area using an EPA and DPR registered disinfectant after each procedure.
- ✓ Disinfectant used must kill HIV & Hepatitis B.
- ✓ Disinfectant requires time to be effective, be sure to read usage instructions.
- ✓ Disinfect surface and objects again immediately before procedure if the area has been used for any activity following its previous disinfection.



## Instruments:

- ✓ Wear disposable gloves when touching, handling or sterilizing equipment.
- ✓ Sterilize or dispose of instruments that come into contact, with non-intact skin or mucosal membranes.
- ✓ Place reusable item into a basin of water (with or without detergent) until sterilization is performed.
- ✓ Discard or reprocess instrument packs if compromised with tears, punctures, or contamination of moisture.
- ✓ Decontaminate tray after each procedure if it is reusable. Dispose of tray if single-use.



# Sterilization Records

## Sterilization Records For Facilities Without Autoclaves

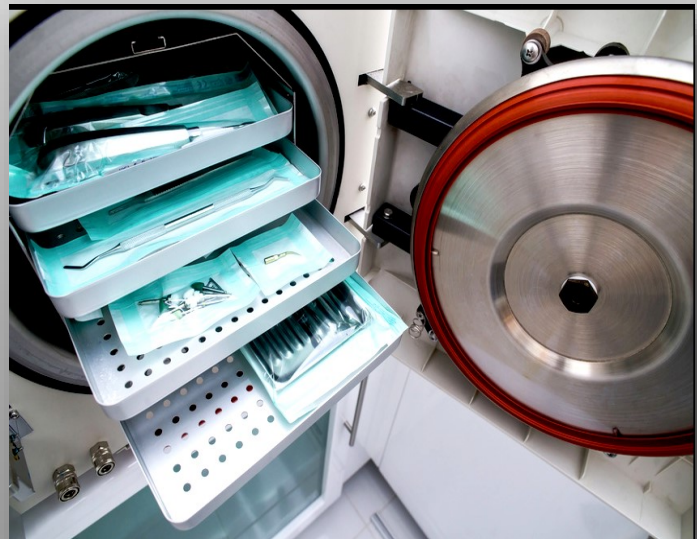
If a body art facility does not have access to an autoclave, it shall only use purchased single-use, pre-sterilized instruments. Records shall be maintained for a minimum of 90 days following the use of instruments at the site.

- ◆ A record of purchase and use of all single-use equipment.
- ◆ A log of all procedures, including the names of the practitioner and client and the date of the procedure. (sample log in appendix C)
- ◆ Written proof on company letterhead showing an invoice that identifies name or item number of sterilized instruments and sterilization batch number.

## Sterilization Records For Facilities With Autoclaves

Facilities with autoclaves must keep a written log of each sterilization cycle performed for three years. Records must be available for inspection by the enforcement officer, and need to include:

- ◆ 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, how the items were cleaned, and proof of a negative test before reuse.





# Reusable Instrument Sterilization Steps



1. Sterilize reusable instruments with a steam autoclave only. No other sterilization method can be used.
2. Seal clean instruments that will be cleaned in a peel-pack that contains a sterilizer indicator or internal temperature indicator.
3. Label outside of peel pack with name of instrument, date of sterilization, and initials of the person operating the sterilizer.
4. Place clean and sterilized instruments in peel packs or sterilization equipment cartridge.
5. Store packed instruments in a clean, dry, and labeled container **OR** a labeled cabinet that is protected from dust and moisture.
6. Evaluate integrity of sterile instrument packs before use for tears, punctures, wetness, or contamination of moisture.
7. Discard or reprocess if sterile instrument pack is compromised.

## **Autoclave Testing Requirements:**

- Include a Class V Integrator, at a minimum, to each sterilizer load and monitor mechanical indicators for time, temperature, and pressure.
- Use only equipment manufactured for sterilization of medical instruments.
- Check expiration date of biological indicator prior to use.
- Keep records of testing for 3 years.
- Test sterilization equipment using a commercial biological indicator monitoring system after:
  - ◊ Initial installation
  - ◊ Any major repairs
  - ◊ Once each month

# 11

## Sharps and Disposal



### Sharps Waste

All sharps waste (needle/ piercing: needle bar assembly) and single use razors used to shave hair from the procedure site, shall be disposed of into a sharps container. Documentation of proper disposal of sharps waste shall be maintained for three years.

### The Sharps Container Must:

- ◇ Be portable.
- ◇ Be within arm's reach of the practitioner in each procedure area or sterilization area.
- ◇ Be labeled "sharps waste" or with the international biohazard symbol and the word "BIOHAZARD".
- ◇ Be rigid, leak proof, puncture resistant, hard to open and designed specifically for sharps waste.

### All Sharps Waste Must Be Removed and Disposed By:

- ◆ A registered medical waste transporter or an approved sharps mail back system.
- ◆ An approved alternative treatment technology method and disposed as solid waste.



# 12 Education & Inspection Guidelines



## Education

Onsite or phone consultations with local inspectors are available to assist body art facilities in their efforts to understand and comply with the regulatory requirements contained in SBAA. If you are interested please contact us by email or phone.

When emailing [ocbodyart@ochca.com](mailto:ocbodyart@ochca.com) please provide the name of the Facility, name of the Artist, and address of the Facility.

## Inspections

The local enforcement agency OCHCA, is required to inspect tattoo, permanent cosmetics, branding, and piercing facilities for compliance for SBAA.

**Unannounced inspections are performed by OCHCA to monitor your facility's compliance and may result in regulatory actions that could include:**

- ◆ Misdemeanors or issuance of citations
- ◆ Securing samples or photographs
- ◆ Permit suspension or revocation
- ◆ Closure
- ◆ Suspension of certificate of registration
- ◆ Barred from operation until proof of compliance is achieved
- ◆ Based upon inspection findings or other evidence, an enforcement officer may impound instruments that are found to be unsafe to use, used in an unapproved manner, or used in an unapproved location.
- ◆ Within 30 days, the local enforcement agency that has impounded the equipment shall commence proceedings to release the instrument or to seek administrative or legal remedy for its disposal.

# What to Expect During an Inspection

During an annual unannounced inspection the health inspector will verify:

- Everyone at your facility that is practicing body art is a registered body art practitioner with OCHCA and valid registrations are posted in a readily visible location at the facility.
- Any previous violations in your most recent health inspection report have been corrected.
- The health permit is posted in a visible location.
- Ensure your IPCP plan is onsite, and utilized. Three years of your IPCP training records will be reviewed.
- Three years of your steam autoclave maintenance and testing records will be reviewed.
- All re-usable equipment that has been sterilized is stored securely so that it is protected from dust and moisture and sterilization pouches are labeled with the date of sterilization and the initials of person who did the sterilization.
- The facility is clean, and the proper disinfectants are being used to clean facility surfaces.
- All equipment is properly covered and cleaned.
- All practitioners and apprentices are using gloves, bibs, lap pads, and or aprons during the performance of body art as well as during cleaning and sterilization.
- All employees know proper hand washing practices and glove procedures.
- The sharps waste container is within arms reach of the practitioner chair. Three years of sharps waste disposal records will be reviewed.
- Two years of the Informed Consent Form/Client Questionnaire and the Aftercare Instructions will be reviewed.
- Each sink has hot and cold running water, containerized liquid soap and hands free paper towels dispensers.
- No eating, drinking or smoking during the performance of body art is allowed by the practitioner, nor the client in the procedural areas.

## A. Appendix – Glossary

**Antiseptic solution:** means a liquid or semiliquid substance that is approved by the federal Food and Drug Administration to reduce the number of microorganisms present on the skin and on mucosal surfaces.

**(BBP) Bloodborne Pathogen:** a disease causing microorganism that, when present in the blood, can be transmitted to humans, including but not limited to Hepatitis B virus, Hepatitis C virus, and human immunodeficiency virus (HIV).

**Body Art:** body piercing, tattooing, branding, or application of permanent cosmetics.

**Body Art Facility:** a building or a section of a building; i.e. a specific room / procedure area, that meets SBAA standards. A Facility may be a fixed, permanent location or a temporary event / demonstration (training) booth and including reception, the procedure and decontamination and sterilization areas.

**Bodying Piercing:** the creation of an opening in a human body for the purpose of inserting jewelry or decoration.

**Decontamination:** the use of physical or chemical means to remove, inactivate or destroy blood-borne pathogens on a surface or item to the point where the pathogen is no longer capable of transmitting infectious particles and is rendered safe from handling or disposal.

**Disinfectant:** A product that is registered by the Environmental Protection Agency (EPA) and DPR, as indicated on the label, to reduce or eliminate the presence of disease-causing microorganism, including HIV and HBV for use in decontaminating of work surfaces.

**Hand Hygiene:** thoroughly washing all surfaces of the hands and under the fingernails with soap and warm water. In the absence of possible contamination with blood or other bodily fluids, or obvious soiling, antiseptic solutions may be used if applied to all surfaces of the hand including under the fingernails.

**Owner:** the person or persons whose names appear on the health permit, business license, property deed or rental agreement of the body art facility or a person acting as a principal of a corporation or partnership who employs practitioners to perform regulated body art activities.

**Sponsor:** an individual or business entity, including an event coordinator or manager, responsible for the organization of a convention, trade show, or other temporary event that includes a body art demonstration booth. A sponsor may also be a body art practitioner.

## B. Appendix - Web links

**OCHCA forms and body art related documents:**

<http://ochealthinfo.com/eh/more/bodyart/forms>

**OCHCA Fee Schedule:**

<http://ochealthinfo.com/civicax/filebank/blobdload.aspx?BlobID=18232>

**California Safe Body Art Act:**

<http://www.ochealthinfo.com/civicax/filebank/blobdload.aspx?BlobID=13554>

**Frequently Asked Questions:**

<http://ochealthinfo.com/eh/more/bodyart/faq>

## Appendix C - Trade Associations

**The Society of Permanent Cosmetic Professionals** membership represents professionals in the industry who are dedicated to promoting the ideals and standards of the SPCP, offering cosmetic tattooing that is conducted in accordance with safety standards specific to the permanent cosmetic process, and those who stay abreast of and participate in industry activities <http://www.spcp.org>

**The Alliance of Professional Tattooist, Inc.** is a non-profit organization whose mission is to address the health and safety issues facing the growing national tattoo industry. <http://www.safe-tattoos.com/>

**International Suspension Alliance (ISA)** is a non-profit organization dedicated to the unification of the body suspension community through research, education, outreach, and the dissemination of information pertaining to the safe practice of human suspension to practitioners, the general public and healthcare professionals. <https://suspension.org>

**Association of Professional Piercers** is an international non-profit organization dedicated to the dissemination of vital health and safety information about body piercing to piercers, health care professionals legislators and the general public. <https://www.safepiercing.org/>



## 1. Appendix D - BODY ART Forms

- ⇒ Body Art Practitioner Registration
- ⇒ Body Art Practitioner Registration Renewal
- ⇒ Body Art Facility Permit - Business Owner Application
- ⇒ Log of Procedures For Artist's Utilizing Pre-sterilized Equipment
- ⇒ Sample Body Art Consent Form and Medical Questionnaire
- ⇒ Sample Aftercare Form
- ⇒ Sterilizer Log



COUNTY OF ORANGE HEALTH CARE AGENCY
BODY ART PRACTITIONER REGISTRATION

1241 E. Dyer Rd, Suite 120, Santa Ana, CA 92705
(714) 433-6000 | OCBodyArt@ochca.com

PRACTITIONER INFORMATION

Form with fields for FA, PR, DATE OF BIRTH, FIRST NAME, MIDDLE NAME, LAST NAME, PHONE, RESIDENTIAL ADDRESS, E-MAIL, CITY, STATE, ZIP CODE, BUSINESS TYPE, MAILING ADDRESS, PRIMARY LOCATION OF PRACTICE.

REQUIRED ATTACHMENTS

- 1. Provide Copy of Current BLOODBORNE PATHOGEN (BBP) Exposure Control Training Certificate
2. Attach Proof of Hepatitis B Vaccine OR Immunity OR Signed Hepatitis B Declination Form

Hepatitis B Vaccination Declination Statement

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring the Hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with Hepatitis B vaccine, however, I decline the Hepatitis B vaccination at this time.

CHECK TO ACCEPT: [ ]

TEMPORARY or TRAINING EVENTS (only)

Form with fields for NAME AND LOCATION WHERE TEMPORARY OR TRAINING EVENT IS BEING HELD, EVENT DATES, EVENT SPONSOR / TRAINER BUSINESS NAME, CONTACT, ADDRESS, PHONE #

CERTIFICATION STATEMENT

I self-certify under penalty of law that I have personally examined the information submitted and the information is true, accurate, and complete; and I have knowledge of, and commitment to meet state law and relevant local regulations pertaining to body art
I AGREE TO COMPLY WITH THE REQUIREMENTS OF THE CA SAFE BODY ART ACT AND FOR BODY ART PRACTITIONER REQUIREMENTS
I UNDERSTAND THAT VIOLATIONS OF THE CA SAFE BODY ART ACT ARE SUBJECT TO CIVIL AND/OR CRIMINAL PROSECUTION

Form with fields for SIGNATURE OF PRACTITIONER, DATE, PRINT NAME

OFFICE USE ONLY

Form with fields for VERIFICATION OF AGE, PREPAID, INVOICE, REGISTRATION APPROVED BY, DATE, EXPIRATION DATE, HSO#, Payment Type, Date, Amount \$, Initials



Environmental Health – Body Art Program  
 County of Orange Health Care Agency  
 1241 E Dyer Road, Suite 120, Santa Ana, CA 92705  
 (714) 433-6000

# WARNING

## BODY ART PRACTITIONER REGISTRATION RENEWAL

**Your Body Art Practitioner Registration has or will expire. You must renew your registration in order to perform body art.**

To renew your registration, you must do the following:

Provide proof of completion of a minimum of two hours of an approved Bloodborne Pathogens (BBP) Exposure Control refresher/update training from an approved training provider.

Visit [www.ochalthinfo.com/eh/more/bodyart](http://www.ochalthinfo.com/eh/more/bodyart) for list of approved courses and training providers.

Review current registration information below – This is your renewal form. Provide changes or additions on this form. Sign and Submit this form along with current, annual BBP Training certificate to this Agency.

This is the only notice that you will receive. If you do not submit the renewal form within 60 days, your Practitioners Registration will expire and your account will be inactivated. You may be charged additional fees to re-activate your account. Practicing body art without a current Registration is subject to fines and penalties. Additionally, the Health Permit for a facility where you are performing body art may be suspended due to unregistered artists working at the facility. The facility/shop/studio may incur fines and penalties for having unregistered artists.

You may FAX your renewal and certificate to (714) 754-1768 or scan and email to [ocbodyart@ochca.com](mailto:ocbodyart@ochca.com)

---

### CURRENT INFORMATION

---

### CHANGES/UPDATES

Name: _____ Address: _____ _____ _____ E-mail Address: _____ Phone: _____ Mailing Address: _____ _____ Primary Location of Practice: (shop/studio name) _____ _____	_____ _____ _____ _____ _____ _____ _____
--	---

*I certify that I have adequate training and knowledge of, and a personal commitment to safely perform body art activities pursuant to state law and relevant local regulations.*

SIGNATURE: \_\_\_\_\_

No Signature Required if Submitted by Email

BLOODBORNE PATHOGEN TRAINING Certification (enclosed)

Current Expiration Date:		
«Facility_ID»:	«Record_ID»:	





## LOG OF PROCEDURES

(For use by artists utilizing purchased pre-sterilized instruments)

Business Name /Address \_\_\_\_\_

<i>Date of Procedure (month/day/year)</i>	<i>Name of Practitioner/Artist</i>	<i>Name of Client</i>



# BODY ART CONSENT FORM

## CLIENT INFO

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of Identification Provided:

Drivers License                  Passport                  Birth Certificate  
DL #:

Circle the type of body art being performed:

Tattoo                  Permanent cosmetics                  Branding                  Piercing

Procedure Site: \_\_\_\_\_ Description of Procedure: \_\_\_\_\_

## MEDICAL HISTORY

Please circle any conditions listed below that apply to you.

TB	Asthma	Eczema/Psoriasis	Gonorrhea
HIV	Hepatitis	Cardiac Valve Disease	Syphilis
Herpes	Skin Conditions	Pregnant/Nursing	MRSA/Staph Infections
Diabetes	Blood Thinners	Fainting/Dizziness	Latex Allergies
Epilepsy	Hemophilia	Scarring/Keloiding	Antibiotic Allergies

Do you have any additional allergies to metals, soaps, cosmetics or alcohol?

Do you use any medications that might affect the healing of the body art you wish to receive?

Do you have a history of herpes or any other skin conditions that may affect the outcome of your procedure?

Have you ever been prescribed antibiotics prior to dental or surgical procedures?

Other medical conditions?

I, \_\_\_\_\_ (print name) have been fully informed of the risks of body art including but not limited to infection, scarring, difficulties in detecting melanoma, and allergic reactions to tattoo pigment, latex gloves, and antibiotics. Having been informed of the potential risks associated with a body art procedure, I still wish to proceed with the body art application and I assume any and all risks that may arise from body art. \*Aftercare Instructions have been provided.

Signature of Client: \_\_\_\_\_ Date: \_\_\_\_\_ Signature of Practitioner: \_\_\_\_\_ Date: \_\_\_\_\_

## INFORMED CONSENT TO RECEIVE BODY ART

PLEASE READ AND CHECK THE BOXES WHEN YOU ARE CERTAIN YOU UNDERSTAND THE IMPLICATIONS OF SIGNING

In consideration of receiving BODY ART from, \_\_\_\_\_ (Name of the Practitioner)

the practitioner at \_\_\_\_\_ (Name of Body Art Business)

I \_\_\_\_\_ (Client's Name) confirm the following by initialing each applicable item:

**NOTICE\*:** Tattoo inks, dyes, and pigments that have not been approved by the federal Food and Drug Administration have health consequences that are unknown.

\_\_\_\_\_ I am the person on the legal ID presented as proof that I am at least 18 years of age.

\_\_\_\_\_ I am under the age of 18 years old and have the presence of my parent or guardian to receive the body piercing. **(Applicable only to underage body piercing. N/A if not applicable).**

\_\_\_\_\_ I am not under the influence of alcohol or drugs and that I am voluntarily submitting myself to receive body art without duress or coercion.

\_\_\_\_\_ I acknowledge that the information that I have provided in the medical questionnaire is complete and true to the best of my knowledge.

\_\_\_\_\_ I understand the permanent nature of receiving body art and that removal can be expensive and may leave scars on the procedure site.

\_\_\_\_\_ The body art described or shown on the client record form is correctly placed to my specifications.

\_\_\_\_\_ All questions about the body art procedure have been answered to my satisfaction, and I have been given written aftercare instructions for the procedure I am about to receive.

\_\_\_\_\_ I understand the restrictions on physical activities such as bathing, recreational water activities, gardening, contact with animals, and the durations of the restrictions.

\_\_\_\_\_ I am aware of the signs and symptoms of infection, including, but not limited to redness, swelling, tenderness of the procedure site, red streaks going from the procedure site towards the heart, elevated body temperature, or purulent drainage from the procedure site.

\_\_\_\_\_ I understand there is a possibility of getting an infection as a result of receiving body art and I will seek professional medical attention if signs and symptoms of infection occur.

\_\_\_\_\_ I understand that there is a chance I might feel lightheaded, dizzy during or after being tattooed.

\_\_\_\_\_ I agree to immediately notify the artist in the event I feel lightheaded, dizzy and/or faint before, during or after the procedure.

\*Any medical information obtained will be subject to the Health Insurance Portability and Accountability Act of 1996 (HIPPA)

## INSTRUMENT LOG

Date	Supplier	Instrument/Needle	Lot/ID #	Sterilization Date Expiration

\*A record of purchase and use of all single-use instruments shall be maintained for each procedure for a minimum of 90 days.

## **AFTERCARE INSTRUCTIONS**

CLIENT NAME: \_\_\_\_\_

The following verbal and/or written instructions were communicated to the client:

1. Information on the care of the procedure site.
2. Restrictions on physical activities such as bathing, recreational water activities, gardening, or contact with animals, and the duration of the restrictions.
3. Signs and symptoms of infection including but not limited to redness, swelling, tenderness of the procedure site, red streaks going from the procedure site towards the heart, elevated body temperature, or purulent drainage from the procedure site.
4. Instructions to call a physician if any of the addressed signs and symptoms appear or for any other reason related to the Body Art procedure(s).
5. If physician care is required by the client related to the Body Art procedure(s), the client is to notify the Body Art facility and practitioner of the problem and the resolution by a physician or clinic. This information shall be placed in the client's file.

COMMENTS:

---

---

---

---

To the best of my knowledge this information is correct:

Signature of Client: \_\_\_\_\_ Date: \_\_\_\_\_ Signature of Practitioner: \_\_\_\_\_ Date: \_\_\_\_\_

