



**County of San Bernardino • Department of Public Health
Division of Environmental Health Services
COMMUNITY ENVIRONMENTAL HEALTH PROGRAM
BODY ART - OFFICIAL INSPECTION REPORT**

www.sbcounty.gov/dehs

(800) 442-2283

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|---|---------------------|---------|------|--|---------------------------------------|
| FACILITY NAME ART ATTACK TATTOO & BODY PIERCING | | | | DATE 5/21/2013 | SIGNATURE <i>Miguel A. Ramirez</i> |
| LOCATION 4380 HOLT BL N, MONTCLAIR, CA 91763 | | | | REINSPECTION DATE 6/04/2013 | PERMIT EXPIRATION 6/30/2013 |
| MAILING ADDRESS 4380 HOLT BL STE N, MONTCLAIR CA 91763 | | | | <input type="checkbox"/> FACILITY <input type="checkbox"/> OWNER <input checked="" type="checkbox"/> ACCOUNT REHS Juan Espinoza | |
| FA # FA0015573 | PR # PR0020703 | SR # | CO # | PE 2502 | PROGRAM IDENTIFIER: |
| TIME IN 1:13 PM | TIME OUT 2:40 PM | CONTACT | | SERVICE: 001 - Inspection - Routine RESULT: 05 - Corrective Action / Follow up Required ACTION: 03 - Reinspection Required | |

BODY ART - BODY ART FACILITY

Based on an inspection this day, the items marked below identify the violation(s) in operation or facilities which must be corrected. The Permittee has the right to a hearing if requested in writing within 15 calendar days of receipt of this notice, to show cause why the permit to operate should not be suspended or revoked.

Failure to correct listed violation(s) prior to the designated compliance date may necessitate an additional reinspection at a charge of \$61.25 per 15 minutes with a minimum time of 30 minutes, and a minimum charge of \$122.50

BODY ART INSPECTION

| | | |
|---|---|--|
| 1 | <input checked="" type="checkbox"/> IN <input type="checkbox"/> NA <input type="checkbox"/> OUT | - Autoclave effective - passed integrator test |
| 2 | <input type="checkbox"/> IN <input type="checkbox"/> NA <input checked="" type="checkbox"/> OUT | - Process of cleaning, labeling, packaging and sterilizing items appropriate |
| Comments: Observed packages containing sterilized equipment not properly labeled. Provide required labels. 119315. A body art facility shall conform to the following sterilization procedures: (a) The outside of the pack shall be labeled with the name of the instrument, the date sterilized, and the initials of the person operating the sterilizing equipment. | | |
| 3 | <input checked="" type="checkbox"/> IN <input type="checkbox"/> NA <input type="checkbox"/> OUT | - Autoclave loaded correctly/packages allowed to dry |
| 4 | <input type="checkbox"/> IN <input type="checkbox"/> NA <input checked="" type="checkbox"/> OUT | - Integrators used/monthly spore test/log maintained |
| Comments: No integrators are being used at this time. Obtain, maintain, and use integrators. 119315 (b) (3) Each sterilization load shall be monitored with mechanical indicators for time, temperature, pressure, and, at a minimum, Class V integrators. | | |
| 5 | <input checked="" type="checkbox"/> IN <input type="checkbox"/> NA <input type="checkbox"/> OUT | - Decontamination/sanitation area separate and supplied appropriately * |
| 6 | <input type="checkbox"/> IN <input type="checkbox"/> NA <input checked="" type="checkbox"/> OUT | - Invoices and log kept for disposable, pre-sterilized equipment, backup supplies adequate * |
| Comments: No log kept for the pre-sterilized disposable equipment observed. Maintain records in compliance with AB 300. 119315 (f) 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: (1) A record of purchase and use of all single-use instruments. (2) A log of all procedures, including the names of the practitioner and client and the date of the procedure. | | |
| 7 | <input checked="" type="checkbox"/> IN <input type="checkbox"/> NA <input type="checkbox"/> OUT | - Sharps containers supplied, labeled, used and disposed of appropriately * |
| 8 | <input checked="" type="checkbox"/> IN <input type="checkbox"/> NA <input type="checkbox"/> OUT | - Jewelry, tattoo and piercing equipment - clean and sterilized |
| 9 | <input checked="" type="checkbox"/> IN <input type="checkbox"/> NA <input type="checkbox"/> OUT | - No eating, drinking or smoking - clean clothes |
| 10 | <input checked="" type="checkbox"/> IN <input type="checkbox"/> NA <input type="checkbox"/> OUT | - Hands washed effectively and timely |
| 11 | <input type="checkbox"/> IN <input type="checkbox"/> NA <input checked="" type="checkbox"/> OUT | - Handwashing facilities properly supplied and accessible, warm potable water * |
| Comments: Provide handwashing sink in compliance with AB 300 to the "separate room". No sink observed. 119314 (b) (3) Be equipped with a sink supplied with hot and cold running water, containerized liquid soap, and single-use paper towels that are dispensed from a wall-mounted, touchless dispenser that is accessible to the practitioner. | | |
| 12 | <input checked="" type="checkbox"/> IN <input type="checkbox"/> NA <input type="checkbox"/> OUT | - Appropriate personal protective equipment available and used, eyewash station available * |
| 13 | <input type="checkbox"/> IN <input checked="" type="checkbox"/> NA <input type="checkbox"/> OUT | - Branding is completed with no other customers in procedure area |
| 14 | <input checked="" type="checkbox"/> IN <input type="checkbox"/> NA <input type="checkbox"/> OUT | - Customers eighteen (18) years of age or older |
| 15 | <input checked="" type="checkbox"/> IN <input type="checkbox"/> NA <input type="checkbox"/> OUT | - Skin adequately prepared for procedure. |



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| FACILITY NAME ART ATTACK TATTOO & BODY PIERCING | DATE 5/21/2013 | SIGNATURE <i>Miguel A. Espinoza</i> |
| LOCATION 4380 HOLT BL N, MONTCLAIR, CA 91763 | REHS Juan Espinoza | |

BODY ART INSPECTION

16 IN NA OUT - Client records approved and available - Consent form & questionnaire

Comments:

Observed consent form and medical questionnaire missing information. Provide and maintain consent form and medical questionnaire in compliance with AB 300.

119303. (a) Prior to the performance of body art, the client shall read, complete, and sign an informed consent form that shall include, but not be limited to, all of the following information:

- (1) A description of the procedure.
- (2) A description of what the client should expect following the procedure, including suggested care and any medical complications that may occur as a result of the procedure.
- (3) A statement regarding the permanent nature of body art.

119303 (b) Prior to the performance of body art, the client shall receive, complete, and sign a questionnaire that includes all of the following information:

- (1) Whether the client may be pregnant.
- (2) Whether the client has a history of herpes infection at the proposed procedure site, diabetes, allergic reactions to latex or antibiotics, hemophilia or other bleeding disorder, or cardiac valve disease.
- (3) Whether the client has a history of medication use or is currently using medication, including being prescribed antibiotics prior to dental or surgical procedures.
- (4) Other risk factors for bloodborne pathogen exposure.

17 IN NA OUT - Appropriate aftercare instructions given to client

Comments:

Provide after care form in compliance with AB 300. Observed after care form missing the following information: 119303 (C) 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. 119303 (D) Signs and symptoms that indicate the need to seek medical care.

18 IN NA OUT - Safe machine design

19 IN NA OUT - Machines cleaned and disinfected between clients

20 IN NA OUT - Parts replaced between clients - grommets, elastic bands, etc.

21 IN NA OUT - Workstation/procedure area decontaminated

22 IN NA OUT - Appropriate chemical disinfectant used Chemical used:

23 IN NA OUT - Disinfectant used appropriately/sufficient contact time Wet contact time provided:

24 IN NA OUT - Barriers available and used appropriately *

25 IN NA OUT - Products applied to skin are single use/dispensed aseptically

26 IN NA OUT - Storage of inks, pigments, needles, tubes, etc.

27 IN NA OUT - Jewelry, Inks, Needles etc approved and used correctly

28 IN NA OUT - Cross-contamination avoided during all phases of procedure

29 IN NA OUT - Areas separated/no living or sleeping quarters/no animals *

30 IN NA OUT - Floors and walls clean and in good repair, adequate light *

31 IN NA OUT - Workstation, surfaces, including chairs, armrests, etc. in good repair; trash removed frequently *

32 IN NA OUT - Permit/registration and required signs posted *



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| FACILITY NAME ART ATTACK TATTOO & BODY PIERCING | DATE 5/21/2013 | SIGNATURE <i>Margaret A. ...</i> |
| LOCATION 4380 HOLT BL N, MONTCLAIR, CA 91763 | REHS Juan Espinoza | |

BODY ART INSPECTION

33 IN NA OUT - IPCP and employee training records and Hepatitis B vaccination status present

Comments:

No IPCP observed. Provide and maintain an approved IPCP.

119313. (a) 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 the procedures to achieve compliance with each applicable requirement of this chapter.

(b) The Infection Prevention and Control Plan shall include all of the following:

- (1) Procedures for decontaminating and disinfecting environmental surfaces.
- (2) Procedures for 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 set up and tear down 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.
- (c) The Infection Prevention and Control Plan shall be revised when changes are made in infection prevention practices, procedures, or tasks.
- (d) Onsite training on the facility's Infection Prevention and Control Plan shall take place when tasks where occupational exposure may occur are initially assigned, 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.
- (e) Records of training required pursuant to this section shall be maintained for three years and shall be available for inspection upon request of the enforcement officer.

34 IN NA OUT - Restrooms available, stocked *

35 IN NA OUT - Plan Review



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| FACILITY NAME ART ATTACK TATTOO & BODY PIERCING | DATE 5/21/2013 | SIGNATURE <i>Margarito G. Roldan Jr.</i> |
| LOCATION 4380 HOLT BL N, MONTCLAIR, CA 91763 | REHS Juan Espinoza | |

BODY ART INSPECTION

36 IN NA OUT - Permits Obtained & Available *

Comments:

Observed one body art artists (Margarito G. Roldan Jr.) registered with San Bernardino County prior to July 1, 2012 and one body art artist (Scott Simacek) not registered. Margarito G. Roldan Jr. must obtain, within two weeks, certificate of registration in compliance with AB 300. Scott Simacek is prohibited to provide services as body art artist in San Bernardino County.

119306. (a) A person shall not perform body art if he or she is not registered with the local enforcement agency.

(b) As a condition of registration, the applicant shall provide all of the following:

(1) Evidence of current hepatitis B vaccination, including applicable boosters, unless the practitioner can demonstrate hepatitis B immunity or has complied with current federal OSHA hepatitis B vaccination declination requirements.

(2) Evidence of completion of OSHA Bloodborne Pathogen Training consistent with Section 119307 and pursuant to paragraph (2) of subdivision (g) of Section 5193 of Title 8 of the California Code of Regulations or its successor.

(3) Proof that he or she is 18 years of age or older.

(4) Self-certification of, knowledge of, and commitment to meet state law and relevant local regulations pertaining to body art safety.

(5) For first-time registrants, documentation evidencing a minimum of six months of related experience. The local enforcement agency may require documentation that includes, but is not limited to, dates, type, and location of work, and the name and contact information of the registrant's supervisor or supervisors.

(6) His or her business address and the address at which he or she will perform any activity regulated by this chapter.

(7) Payment of a registration fee directly to the local enforcement agency.

37 IN NA OUT - Impoundment

38 IN NA OUT - Hearing Scheduled

39 IN NA OUT - Closure *

Overall Inspection Comments:

This facility is scheduled for a re-inspection on or after 06-04-13 due to listed violations on this report. Failure to comply with request on or before 06-04-13 will result in legal action taken.

Attachments:

No Attachments

Person in Charge:

Inspector: Juan Espinoza

Follow-up:

Yes

No

Follow-up Date: