



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

(800) 442-2283

www.sbcounty.gov/dehs

FACILITY NAME INK CREATIONS				DATE 6/19/2013	SIGNATURE <i>M. Rosales</i>
LOCATION 9773 SIERRA AV G 8, FONTANA, CA 92335				REINSPECTION DATE 5/19/2014	PERMIT EXPIRATION 2/28/2014
MAILING ADDRESS 4426 ROOSEVELT ST, CHINO CA 91710				<input type="checkbox"/> FACILITY <input type="checkbox"/> OWNER <input checked="" type="checkbox"/> ACCOUNT REHS Patrick Baccari	
FA # FA0015958	PR # PR0021219	SR # Not Specified	CO # Not Specified	PE 2502	PROGRAM IDENTIFIER: Straight back, then right. Shop on left. Closed on
TIME IN 2:34 PM	TIME OUT 4:19 PM	CONTACT Not Captured			SERVICE: 003 - Inspection - Follow Up Inspection
					RESULT: 03 - Corrective Action / No Follow up Required
					ACTION: 01 - No Further Action Required

BODY ART - BODY ART FACILITY

25BA06 Invoices and log kept for disposable, pre-sterilized equipment, backup supplies adequate **CRITICAL**

Compliance Date: Not Specified
 Not In Compliance
 Violation Reference -

Inspector Comments: Provide a record of purchase and use of all single-use instruments. No purchase order is available.

Violation Description:

25BA16 Client records approved and available - Consent form & questionnaire **CRITICAL**

Compliance Date: Not Specified
 Not In Compliance
 Violation Reference -

Inspector Comments: Provide a statement regarding the permanent nature of body art, on consent form. Medical questionnaire is to be removed from records after 2 years.

Violation Description:

25BA17 Appropriate aftercare instructions given to client **CRITICAL**

Compliance Date: Not Specified
 Not In Compliance
 Violation Reference -

Inspector Comments: Provide after care form in compliance with AB 300. 119303 (a) (4) Postprocedure instructions that include all of the following:
 (A) Information on the care of the procedure site.
 (B) Restrictions on physical activities such as bathing, recreational water activities, gardening, or contact with animals, and the duration of the restrictions.
 (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.
 (D) Signs and symptoms that indicate the need to seek medical care.

Violation Description:

Overall Inspection Comments

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. Provide additional specific details to Infection Prevention and Control Plan.

Photo Attachments:

No Photo Attachments