



Denver Environmental Health Body Art Facility Inspection Report

Type of Inspection

1. Regular
2. Follow-up
3. Complaint
4. Temp Event

Date

4/24/15

Est. #

1651082

Exp

1/28/16

Facility Name

Land Mark Tattoo

Phone #

Address

609 E 13th Ave

City

Zip

Manager

Nikolas Pew

Legend:

- C = Compliance
NC = Non-Compliance
NA = Not applicable

NC	NA	Sect.		C	NC	NA	Sect.				
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A1-2	BODY ARTIST			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8-9	TEMPORARY EVENT
				UP knowledge & renewal (3 years), HBV							Clean up
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2A4	BUSINESS LICENSE			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10	INFECTION / EXPOSURE CONTROL
				Knowledge, paperwork, license							WRITTEN PROCEDURES
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3A	EMPLOYEE INFORMATION							Compliance, instrument and procedure area
				Legal name, home address, phone number, HBV proof							cleaning and sterilization, UP procedures,
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3B1-6	FACILITY RECORDS			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11A	STERILIZER REQUIREMENTS
				Sharps disposal, spore test log, client records,							Sterilizer must be steam autoclave, clean and
				manufacturer's info on sterilization equip, written							maintained
				infection control procedures							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5A	CUSTOMER RECORDS			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11A5	SINGLE USE ITEMS
				For minimum of 2 years							Proper disposal, no re-use
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5B1-8	CLIENT MEDICAL HISTORY			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11B	INSTRUMENT CLEANING
				Proper documented risk factors							Packaging & sterilization, glove use – multi use,
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5C1-6	CLIENT CONSENT FORMS			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11C	INSTRUMENT PACKAGING / WRAPPING
				Client info, procedure date, type and location of body							Clean gloves, sterilizer indicator, labeled with
				art, aftercare, side effects							sterilization time & date
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6	FLOORS, WALLS AND CEILINGS			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11D	INSTRUMENT STERILIZATION
				Construction, outer openings protected, compliance							Labeled medical instrument, operators manual,
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7A-B	PREMISES							cleaned & maintained, load log available
				Clean, good repair							w/instrument description, date & time cycle time
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7C	LIGHTING							& temperature (2 years)
				50 ft candles			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11E	STERILIZED INSTRUMENTS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7D	SURFACES			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11F	SPORE TESTING
				Construction in critical areas							Monthly, maintain records (2 years), use of lab
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7E	HANDSINKS			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12A	PROHIBITIONS
				Hot & cold, accessible to procedure areas, toilet areas,							Persons under influence, smoking, eating,
				soap and drying devices							drinking in procedure/instrument cleaning
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7F	SEPARATION OF EQUIPMENT							areas, procedures on unhealthy conditions
				Cleaning, packaging, handling, storage			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12B	BODY ARTIST'S PRACTICES
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7G	SEPARATION OF SINKS							Handwashing between clients, new clean
				Handwashing, instrument cleaning, utility							groves, fresh linens, instruments remaining
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7J	WAITING AREA; TOILET FACILITIES							packaged prior to use, cross-contamination
				Separated, construction, availability							prevention, supplies properly disposed,
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7K	REUSABLE CLOTH ITEMS			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12C	TATTOOING PROCEDURES
				Mechanically washed 140 degrees + or disinfectant or							Hectographic or single-use stencils for outlines,
				heat dryer							non-toxic single use markers for free hand,
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7L	ANIMALS							multi-use stencils only if disinfected prior to
				Prohibited in critical areas							use, area cleaned and treated, unused ink
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7M	REFUSE							properly disposed, excess ink properly
				Lined receptacles, frequency of disposal							removed after body area covered.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7N	HANDLING SHARPS / INFECTIOUS WASTE			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12D	BODY PIERCING PROCEDURES
				Sharps containers, bio-hazard bags, contracted							Needles are sterile, single use, manufactured
				treatment facility, on site disposal, labeling, storage,							for use, disposed properly, jewelry is new or
				use of chemicals							disinfected, clean and good repair, studs-and-
											clasp used according to manufacturer
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8-9	TEMPORARY EVENT							
				Waste water collected, handwashing facilities, on site							
				sterilization or negative spore test (30 days)							

Facility Name: Landmark

[illegible]