

		Denver Environmental Health Body Art Facility Inspection Report		Type of Inspection 1. Regular X 2. Follow-up 3. Complaint 4. Temp Event		Date 2/5/15		
						Est. #1070722		
						Exp 4/8/15		
Facility Name Ritual Tattoo and Gallery				Phone #		Legend: C = Compliance NC = Non-Compliance NA = Not applicable		
Address 2033 W 32 nd Ave		City Denver		Zip				
Manager Sandi Castro								
C	NC	NA	Sect.		C	NC	NA	Sect.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A1-2	BODY ARTIST UP knowledge & renewal (3 years), HBV	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	8-9
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2A4	BUSINESS LICENSE Knowledge, paperwork, license	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	10
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3A	EMPLOYEE INFORMATION Legal name, home address, phone number, HBV proof	TEMPORARY EVENT Clean up			
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3B1-6	FACILITY RECORDS Sharps disposal, spore test log, client records, manufacturer's info on sterilization equip, written infection control procedures	INFECTION / EXPOSURE CONTROL WRITTEN PROCEDURES Compliance, instrument and procedure area cleaning and sterilization, UP procedures, infectious waste management			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5A	CUSTOMER RECORDS For minimum of 2 years	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5B1-8	CLIENT MEDICAL HISTORY Proper documented risk factors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11A5
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	5C1-6	CLIENT CONSENT FORMS Client info, procedure date, type and location of body art, aftercare, side effects	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11B
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6	FLOORS, WALLS AND CEILINGS Construction, outer openings protected, compliance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11C
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7A-B	PREMISES Clean, good repair	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11D
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7C	LIGHTING 50 ft candles	INSTRUMENT CLEANING Packaging & sterilization, glove use – multi use, soaked, disassembled			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7D	SURFACES Construction in critical areas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11E
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	7E	HANDSINKS Hot & cold, accessible to procedure areas, toilet areas, soap and drying devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11F
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7F	SEPARATION OF EQUIPMENT Cleaning, packaging, handling, storage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7G	SEPARATION OF SINKS Handwashing, instrument cleaning, utility	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	12B
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7J	WAITING AREA; TOILET FACILITIES Separated, construction, availability	STERILIZED INSTRUMENTS Hands washed prior to handling, store in dry & clean area			
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	7K	REUSABLE CLOTH ITEMS Mechanically washed 140 degrees + or disinfectant or heat dryer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12C
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7L	ANIMALS Prohibited in critical areas	SPORE TESTING Monthly, maintain records (2 years), use of lab			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7M	REFUSE Lined receptacles, frequency of disposal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12D
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	7N	HANDLING SHARPS / INFECTIOUS WASTE Sharps containers, bio-hazard bags, contracted treatment facility, on site disposal, labeling, storage, use of chemicals	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	12D
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	8-9	TEMPORARY EVENT Waste water collected, handwashing facilities, on site sterilization or negative spore test (30 days)	PROHIBITIONS Persons under influence, smoking, eating, drinking in procedure/instrument cleaning areas, procedures on unhealthy conditions			
					BODY ARTIST'S PRACTICES Handwashing between clients, new clean groves, fresh linens, instruments remaining packaged prior to use, cross-contamination prevention, supplies properly disposed, disinfection of procedure area			
					TATTOOING PROCEDURES Hectographic or single-use stencils for outlines, non-toxic single use markers for free hand, multi-use stencils only if disinfected prior to use, area cleaned and treated, unused ink properly disposed, excess ink properly removed after body area covered.			
					BODY PIERCING PROCEDURES Needles are sterile, single use, manufactured for use, disposed properly, jewelry is new or disinfected, clean and good repair, studs-and-clasp used according to manufacturer			

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NUMBER	VIOLATION		CORRECT BY:
A1-2	BBP/UP was not provided for any artists. Proof of HBV or declination of HBV was not provided for any artists. Provide missing information.		2/20
2A4	Melissa Rhysing's license expired on 1/27/15. Artist is ORDERED to cease and desist all body art procedures until copy of updated license has been emailed to inspector.		2/6
3A	Employee files were not provided. Employee files shall be maintained and include the following information: legal name, home address, phone number and proof of HBV or declination of HBV.		2/20
3B1-6	Facility records were missing the following information: exposure control plan and owner's manual for autoclave.		2/20
5C1-6	The following information is not being documented on all client records: ink lot numbers, type & location of body art and package/lot number of needles. Artist name is missing from aftercare information. Update DEH information provided on guidance handout labeled "Guidelines for Body Art Aftercare Instructions."		2/6 & 2/20
7E	Two hand sinks were not equipped with paper towels. Hand sinks shall be equipped with paper towels.		2/6
7N	Razors are being disposed of in the regular trash cans. Razors are considered sharps and shall be disposed of in the sharps containers. Sharps container is not present at 1 station. Regulated/infectious waste such as rinse water soaked paper towels, ink/body fluid soiled paper towels, gloves used on broken skin, etc is being disposed of as regular garbage in open trash cans. Regulated/infectious waste shall be disposed of in covered/bio-hazard labeled trash cans and shall be removed by a medical waste removal company.		2/6 & 2/20
10	Exposure control plan was not provided. Provide plan and update annually.		2/20
11B	Soiled instruments such as tubes and grips were soaking in uncovered containers. Cover soaking instruments.		2/6
11C	Several packages of tubes stored in artists' stations were torn and no longer considered sterile. Packages of expired tubes were present in an artist's station. Expired needles were present in an artist's station. Packaging shall be in good condition and expired instruments shall either be disposed of properly (needles) or re-sterilized (tubes/grips.)		2/6
11D	Operator's manual was not provided for autoclave. Provide manual.		2/20
12B	Artist observed changing his gloves several times during a procedure without washing his hands. Note: Artist was touching several surfaces in between the glove changes such as storage container, clean packaging, etc. Hands shall be washed after removing soiled gloves, in between glove changes, etc. Discussed with artist and corrected.		2/5
Comments:	Label all chemicals.		
		Received by: <i>(Print Name)</i> Crystal Castro, Manager	Title
Inspected by: Katie Paulson 720-865-5397 Katie.paulson@denvergov.org		Received by: <i>(Signature)</i> Via email 2/6/15	