



DELAWARE COUNTY HEALTH DEPARTMENT  
 100 WEST MAIN STREET, ROOM 207  
 MUNCIE, IN 47305  
 (765)747-7721 OR FAX (765)747-7747

**TATTOO ESTABLISHMENT INSPECTION REPORT**

Based on an inspection this day the item(s) checked and/or itemized below identify violation(s) of: COUNTY ORDINANCE 98-007 "A"

<b>ESTABLISHMENT NAME</b> <i>RIVERS EDGE Body MODIFICATION</i>	
<b>ESTABLISHMENT ADDRESS</b> (number, street, city, state, zip) <i>916 N. WALNUT ST.</i>	<b>PERSON IN CHARGE</b> <i>DONNIE CRAIG</i>
<b>EST. TELEPHONE NUMBER</b> <i>765 372 2181</i>	<b>PURPOSE</b> <i>ROUTINE</i>
<b>Section 1- Premises:</b> Shall maintain the premises in a sanitary manner.	<b>Section 13- Needles:</b> Needles are individually packaged, sterilized prior to use, single use only. Needles discarded in sharps containers. Needles are not bent or recapped.
<b>Section 3/5/6/7- Responsibilities, training, certification:</b> Records of blood-borne pathogen training on file for all employees. Written materials displayed explaining universal precautions. Proof of parlor's written policy to meet IOSHA standards (29 CFR 1910.1030). Written materials displayed / where to report violations. No illicit drugs or alcohol consumption.	<b>Section 14- Reusable Equipment:</b> Cleaned prior to sterilization. Reusable contaminated equipment stored properly in labeled puncture-resistant containers. Heat sterilization is used for heat-stable, non-disposable equipment. Records available to demonstrate effective sterilization of equipment done monthly, including duration and maintenance.
<b>Section 8- Patron Records (Select records to inspect):</b> Patron records maintained for (2) two years. Record includes: Name, Address, Age, Date of procedure, Design, Location on body, Artist name, Parental consent form.	<b>Section 15- Dyes/Pigments:</b> Dyes or pigments must be from professional suppliers for tattooing of human skin. Clean sterilized container available for single use, individual portions of dye then discarded.
<b>Section 9- Illness:</b> Personnel with acute disease are effectively refrained from providing tattoos.	<b>Section 16- Work Environment:</b> No tattooing is conducted in living quarters. No unauthorized live animals. No tobacco, food, and all beverages in work areas. All equipment is clean and decontaminated. Work surfaces are clean and decontaminated. Work surfaces are nonabsorbent, smooth, cleanable, and in good condition. Disinfectant solution is EPA approved and made no more than 24 hours prior to use. Chemical solution containers labeled and dated.
<b>Section 10- Hand-washing:</b> Readily accessible in same room. Single-use towels, Soap, and running water. Adequate soap and running water available. Wash hands - before & after using protective equipment.	<b>Section 17, 18- Infectious Waste/Treatment:</b> Bio-haz waste containers labeled and available. Proof of effective treatment of infectious waste.
<b>Section 11- Personal Protective Equipment:</b> Personnel protective equipment used for procedures where potentially infectious materials are available Masks, eye protection, gloves, Eye protection and/or face mask, gloves.	<b>Section 19- Permits:</b> Establishment permit displayed Artist permit displayed (for all artists)
<b>Section 12- Tattooing Equipment:</b> - Single use razors used. Stencils properly disposed of after single use. For design drawn directly onto the skin must be applied with single use article only.	

NOTE:

A THIRD ROOM IS BEING REMODELLED FOR AN ARTIST - NO RUNNING WATER INT YET.  
 Sec. 8 incomplete records.

<b>INSPECTED BY:</b> <i>Chickie Mac</i>	<b>RECEIVED BY:</b> <i>Donnie Craig</i>	<b>DATE:</b> <i>7/13/2010</i>
--	--	----------------------------------