

COMMUNICABLE DISEASE CONTROL
HEALTH PROTECTION AND SAFETY

Guidelines for Ear and Body Piercing



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PURPOSE

To describe the requirements for Personal Service Establishments (PSEs) carrying out piercing of the ears, lips, eyebrows, nose, tongue, nipples, navel, genitals and other body parts.

INTRODUCTION

Body piercing carries an elevated risk of infection or injury, due to the difficulty in maintaining control of infection in a non-sterile site or proximity to delicate body structures. Risks include damage to nerve tissue, hepatitis B, hepatitis C, tetanus and HIV. Local infections can cause illness, loss of sensation (numbness), deformity and scarring. Clients undergoing this procedure should be advised to discuss these risks with their family physician. Individuals with skin disorders, infections or bleeding disorders should not be pierced.

When a person chooses to be pierced, it is important for that person to be aware of the health risks involved, so they can make an informed decision about getting pierced. This booklet is designed to provide owners and staff of body piercing establishments with a set of guidelines that will help them prevent health risks both to their clients and themselves, particularly the spread of infectious or communicable diseases. It also addresses the issue of informed consent.

Public Health Officials may refer to this document and to the British Columbia Ministry of Health's *Guidelines for Personal Services Establishments (PSEs)* (see internet site: <http://www.hlth.gov.bc.ca/protect/persserv.html>) when assessing whether a piercing establishment is being operated in accordance with the *Personal Services Establishment Regulation*. However, following the guidelines listed in this document does not relieve the owner and/or operator of the obligation to take any additional measures necessary to prevent health hazards from occurring in the establishment. Operators are also responsible for ensuring that they are carrying on business in compliance with municipal and other regulatory requirements, and for obtaining business licences and/or operating permits from the appropriate licensing authorities.

INFORMED CONSENT

Operators must consider the issue of informed consent by their customers in addition to taking measures to prevent disease transmission and injury. A large percentage of complaints regarding the piercing industry arise from the piercing of minors. It is recommended that operators seek legal advice on the use and form of a declaration of health risks and a consent to being pierced. In general terms, operators should satisfy themselves that customers are undertaking the procedure of their own free will and not as a result of a bet or a dare, that they are not under the influence of alcohol or other judgement-altering drugs, and that they are aware that piercing carries health risks, although these risks are reduced if these guidelines are followed. In order to give their informed consent minors must have the maturity to and must understand all the implications of being pierced. It is recommended that operators require minors to obtain parental consent.

1. PREMISES AND GENERAL OPERATION

Refer to *Guidelines for Personal Service Establishments (PSEs)* - Sec. 2.

A hand basin with hot and cold running water is required in every treatment room where piercing is carried out.

All surfaces, including counters, tables, equipment and chairs in service areas shall be made of smooth, non-absorbent and non-porous material.

Smoking is not permitted in the piercing area.

Lighting in piercing work areas should be capable of 100 foot candle illumination.

The area where piercing takes place should be separated from the rest of the establishment by a wall or partition to provide privacy as needed.

A standard No. 2 Unit Kit (first aid), as recommended by the Workers' Compensation Board is to be fully stocked and readily available for use at all times.

Mobile or temporary body piercing facilities must be approved by the Medical Health Officer or his delegate before they start operation.

2. PREPARATION AND HANDLING OF INSTRUMENTS AND EQUIPMENT

Refer to *Guidelines for Personal Service Establishments (PSEs)* - Sec. 3.

See also *Infection Prevention and Control Practices for Personal Services: Tattooing, Ear/Body Piercing, and Electrolysis*, published by Health Canada/Canada Communicable Disease Report (also on the internet, at <http://www.hc-sc.gc.ca/hpb/lcdc/publicat/ccdr/99vol25/25s3/index.html>).

Body piercing implements must be used as directed by the manufacturer.

Use disposable tray and table covers.

Reusable, non-sterile implements (ie. callipers, scissors, haemostats, Penningtons, clamps, pliers) must be sterilized after each use as per the Critical Items section in Appendix A of the *Guidelines for Personal Service Establishments* and stored in clean, sterilized containers.

An autoclave sterilizer in proper working order should be used to sterilize critical instruments and equipment. Time temperature test strips should be used to monitor the sterilizer's effectiveness, at an interval recommended by the manufacturer.

All non-porous equipment (ie. forceps, french clothespins, receiving tubes) must be pre-sterilized and disposed of immediately after a single use in an appropriate manner. Porous equipment that cannot be sterilized should be disinfected as per Appendix A of the *Guidelines for Personal Service Establishments*. Use only single use razors.

Where items are prepackaged (ie. needles and instruments) the plastic/paper packaging must not be reused. Packages that are torn, punctured or wet should **not** be considered as sterile, and must be re-sterilized or disposed of.

A small flashlight or transdermal illuminator should be used to illuminate skin/tissue to avoid piercing blood vessels in certain areas of the body, e.g. the scrotum. The flashlight or illuminator should be covered with a single-use plastic sheath prior to use. Following use for one client the flashlight or illuminator should be cleaned and disinfected with a low level disinfectant.

Work surfaces should be damp-wiped with an appropriate disinfectant (eg. 10% household bleach solution or 70% isopropyl alcohol) after each client. (See also *Guidelines for Personal Service Establishments (PSEs)*, appendix A - Methods of sterilization and disinfection).

3. INFECTION CONTROL

General

Refer to *Guidelines for Personal Service Establishments (PSEs)* - Sec. 4.

Single-use, pre-sterilized, stainless steel needles must be used for all types of body piercing, with the exception of ear lobes (see Section 3a, below).

All pre-sterilized needles must be used only once and discarded in a sharps container.

Piercing needles should be maintained in a sterile condition prior to being used and should not come into contact with any contaminated surface during use.

The use of styptic pencils or alum solids to control blood flow is prohibited.

Single-use disposable paper products, and single-use protective gloves shall be used for each client.

Disposable products (eg. corks, elastic bands, cotton swabs, razors etc.) that come into contact with the area(s) to be pierced shall be stored in closeable clean containers and removed either with sterile forceps or using a fresh pair of rubber gloves to avoid contamination of other items in the container.

A surgical alcohol-based marking pen should be used to mark piercing points. The pen should be used only after the skin has been cleaned (see skin cleaning).

Jewellery used in piercing must be non-allergenic only and includes implant-grade stainless steel (300 series, e.g. 316L), 14 to 18 carat gold, niobium, and titanium. The use of other metals or alloys increases the risk of allergic reaction to the insert.

Skin Preparation

The skin area to be pierced should be examined for signs of infection, open lesions, rashes or other irregularities and if these are found the piercing should be postponed.

Piercers shall clean the client's skin, except for the areas around the eyes, by washing it with an approved antiseptic solution (see Appendix A in the *Guidelines for Personal Service Establishments*) applied with a clean single-use paper product (e.g. Q-tip) before and after piercing the client's skin. For the area around the eyes the skin should be cleaned with warm water. An antibacterial mouth wash may be used before piercing the tongue, lips or cheeks.

Cleaning

Contaminated or dirty instruments must be pre-cleaned before the disinfection or sterilization process.

Ultrasonic cleaners should be used as a method of cleaning debris from reusable instruments before sterilization, however, the solution must be discarded after each client. Ultrasonic cleaners must be operated with the lid on to prevent any micro-organisms from becoming airborne and contaminating surfaces in the establishment. Ultrasonic cleaners **do not** sterilize or disinfect.

If rubber bands are used on clamps, the rubber bands should be removed and disposed of before the clamps are cleaned.

Used or dirty linens shall be disposed of or stored in a closed covered container until laundered.

Disinfection

All work surfaces and equipment which cannot be autoclaved (e.g. ear piercing guns) should be damp-wiped with a disinfectant such as 10 per cent household bleach solution, 70% isopropyl alcohol or equivalent after each client. (See also *Guidelines for Personal Service Establishments (PSEs)*, Appendix A).

All jewellery should be sterilized or disinfected by soaking in 70% isopropyl alcohol for 5 to 10 minutes prior to use.

Sterilization

Previously used or worn jewellery must be autoclaved prior to being inserted.

All items for sterilization should be packaged in paper, plastic or paper/plastic “peel down” pouches/bags to protect the instrument when it is sterile and permit its removal without becoming contaminated. Hinged instruments should be opened (“crossed out”) before placing in bags.

Sterile packages should be removed from the sterilizer without contamination (ie with forceps) and stored in clean, designated storage cabinets. Instruments should remain in their sterile packages until used.

All equipment should be sterilized before use by autoclaving (steam under pressure) or dry heat. See *Guidelines for Personal Service Establishments (PSEs)* - Section 4 and appendix A.

*Sterilization can **not** be achieved by using a glass bead sterilizer, microwave oven, domestic oven, pressure cooker, boiling pot or ultraviolet cabinet.*

3a. REQUIREMENTS FOR FACILITIES PROVIDING EARLOBE PIERCING ONLY

Specialized ear piercing guns should only be used for piercing of the earlobe. No other part of the body or ear should be pierced by using a piercing gun.

Facilities should use an ear piercing gun manufactured and designed to both minimize contact with the client's skin and to insert a pre-packaged sterilized ear piercing stud into the ear lobe simultaneously with piercing.

The ear piercing gun shall be made of non-porous material which is able to be disinfected. All parts of the ear piercing gun in direct contact with the client's skin, blood or body fluids should be disinfected before and after use on a client.

Ear piercing guns designed with a disposable stud-holding cartridge are highly recommended. The disposable cartridge must be removed following the piercing of the ear lobe, and a new sterile cartridge put in place for the next client.

Single-use prepackaged sterilized ear piercing studs should be used for each client.

New or disinfected ear piercing guns should be stored separately from used or soiled guns or instruments.

If piercing is done from client to client without interruption a second ear piercing gun will be needed to allow enough time to properly disinfect the first gun before it is used again.

4. OTHER MATERIALS

Refer to *Guidelines for Personal Service Establishments (PSEs)* - Sec. 5.

5. WASTE DISPOSAL

Refer to *Guidelines for Personal Service Establishments (PSEs)* - Sec. 4G regarding disposal of sharps and other potentially contaminated items.

Disposable materials (eg. cotton, gauze, paper towelling, etc.) should be discarded after each use on a client.

6. PERSONAL SERVICE WORKERS

Refer to *Guidelines for Personal Service Establishments (PSEs)* - Sec. 6.

The piercer should follow Standard Precautions Guidelines (see Health File #29, attached) with every client.

It is recommended that all piercers be immunized against Hepatitis B and tetanus (lockjaw).

It is recommended that at least three sets of single-use latex or vinyl gloves be used during the piercing process (ie. 1) to set up tray; 2) to clean and mark customer and open sterile packs; and 3) to perform actual piercing procedure). Gloves must be changed between clients and must not be re-used. The regular changing of gloves is not a substitute for hand washing between clients. Ask for a copy of the Workers' Compensation Board publication *Dealing with "Latex Allergies at Work"*. (You can also view this on the internet at: <http://www.worksafebc.com/pubs/brochures/howto/latex.asp>)

The piercer should wash his/her hands before and after piercing and after glove removal. See *Guidelines for Personal Services Establishments (PSEs)* - Sec. 4 Infection Control (Wash your hands!).

Each piercer should wear a clean outer garment.

Eye shields are recommended if the spattering of blood is likely to occur while providing services.

It is recommended that the operator have basic first aid training.

The piercer should consult a physician immediately if there is an accidental exposure to blood or other body fluids (e.g. a needlestick injury). Time is of the essence in reducing the risk of infection from such an exposure. (See Health File #29, attached).

7. POST-PIERCING AFTER CARE

Oral and written instructions for care at home should be provided to the client. The signs and symptoms of possible complications should be discussed. Advise the client how to deal with slight redness, pain and swelling. The client should be advised to seek medical advice if infection develops. Do not remove jewelry from an infected piercing but seek medical advice.

Oral contact with or handling new piercings can cause infection and should be avoided.

During the healing process of piercings of the genitalia, couples can promote good hygiene by wearing a condom during intercourse to minimize the risk of infection.

This booklet may be viewed on Ministry of Health's Internet site, at
<http://www.hlth.gov.bc.ca/protect/persserv.html>