
Health Standards and Guidelines for Body and Ear Piercing

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I. Introduction

Ear piercing and more recently body piercing have become an established custom for the attachment of jewelry to body parts. With the increase of body and ear piercing, there is also an increased concern about the potential spread of communicable diseases through these practices such as human immunodeficiency virus (HIV), hepatitis B virus (HBV) and hepatitis C virus (HCV), etc. Other concerns such as bacterial infections and reactions to the needles and jewelry are also common.

This standard outlines infection prevention techniques that are critical in reducing the risk of disease transmission during the body and ear piercing procedure.

What is Body Piercing?

Body and ear piercing involves the insertion of metal jewelry, e.g. rings, studs, barbells, into tissue. Sites that are frequently pierced include the ear lobe, ear cartilage, nose, navel, lip, tongue, nipples and genitals.⁽¹⁾ Body piercing implements must be used as directed by the manufacturer. For example, a specialized spring ear-piercing gun is to be used specifically on the fleshy part of the earlobe and not on other body parts. Concerns arising from the use of an ear lobe piercing "gun" include the earring stud embedding into the ear lobe and consequently causing infection⁽²⁾. The device may also fail to disengage properly, which would then require the jewelry be removed traumatically from the ear⁽³⁾. Generally, needles are used to pierce the skin prior to insertion of the jewelry item.

Equipment and supplies

The following equipment and supplies are required by the practitioner to carry out safe skin piercing.

- Sterilizer (steam or dry heat*)
- Instrument packaging/heat indicator tape
- Bacterial spore test strips for sterilizer
- sharps disposal container
- instrument containers
- ultrasonic cleaning device
- small cleaning brush
- disinfectants
- skin antiseptic

- needles (hollow)
- forceps
- needle receiving tubes
- jewelry insertion tapers
- jewelry (316-L, 316-LVM is recommended, niobium, titanium 6-4, 14K solid gold)
- marking implements (i.e. marking pens, toothpicks, gentian violet)
- ring expanding and closing pliers
- calipers

- tongue depressor
- disposable gloves
- paper drapes, tissues
- towels
- elastics
- toothpicks and ink
- cotton swabs or gauze
- corks
- disposable paper cups
- antibacterial mouthwash
- handsoap
- detergent

* a dry heat sterilizer may discolor jewelry

II. OPERATIONAL REQUIREMENTS

1. Informed Consent

Prior to conducting the piercing procedure, the piercer should have the client sign a dated consent form acknowledging that he/she is:

- undertaking this procedure of his/her own will, and
- not under the influence of drugs or alcohol

2. Preparation and Handling of Instruments and Equipment

Every precaution must be taken to prevent contamination of the equipment, and to follow proper infection control practices during the procedure.

- a. Body piercing implements must be used as directed by the manufacturer.
- b. The ear lobe piercing instrument "spring gun" that is not disposable but which touches the skin during piercing must be cleaned and disinfected.
- c. The ear-piercing instrument that has a disposable cartridge must be wiped with 70% alcohol between clients after the cartridge is disposed of.
- d. Insertion tapers, forceps and needle receiving tubes shall be thoroughly cleaned and sterilized prior to initial use and between clients.
- e. Insertion tapers, needle receiving tubes and needles shall not come into contact with any contaminated surface. If so, these items must be sterilized again prior to use.
- f. Needles used for piercing shall be pre-sterilized and must be DISCARDED AFTER USE. (Needles can not be cleaned and sterilized effectively)
- g. Jewelry for fresh piercing must be sterilized prior to use. Jewelry made from acrylic, bone and horn shall not be used for fresh piercing.
- h. Callipers used to measure skin-piercing sites to create a symmetrical appearance should be cleaned and disinfected.
- i. Toothpicks, elastic bands and other single use implements shall only be used once and discarded.
- j. Forceps used to hold the marked skin taut for the needle piercing should be cleaned and sterilized.
- k. All sterilized instruments and jewelry should remain in the sterile packages until use.

3. Skin Preparation

- a. The skin site should be evaluated prior to each treatment and any skin condition that may lead to skin irritation should be discussed. Skin should not be pierced if there are signs of infection.
- b. Before treatment, the skin site shall be wiped clean with an acceptable skin antiseptic such as Betadine. Betadine should be allowed to dry before marking the site. If doing an oral piercing, rinse with full strength antibacterial mouthwash.
- c. A marking pen that comes into contact with fluids, broken skin, or skin not cleaned must be discarded.

4. Post-Treatment Skin Care

- a. The pierced site shall be wiped with an appropriate skin antiseptic.
- b. If ointment is used, a single use ointment applicator shall be used.

5. Waste Disposal

- a. All waste sharps, such as needles, shall be placed in a puncture resistant container with a tight fitting lid and disposed in accordance with the Regional Health Authority's requirements.

6. Record Keeping

The operator shall maintain a daily record of names and addresses of clients, name of piercer, and store them for two years. This will assist in the tracing of infectious diseases should they occur.

7. Removal of Jewelry

It is recommended that only a physician removes any jewelry that is required to be removed because of an infection.

9. Personal Service Worker - Health and Safety

- a. The piercer shall wash his/her hands thoroughly with soap and water before and after the piercing procedure.
- b. The piercer should wear single-use gloves during the procedure.
- c. Any piercer with open lesions or weeping dermatitis such as eczema on the hands or other areas that are not adequately covered should refrain from direct contact with clients until the condition clears.

- d. It is recommended that all piercers be immunized against Hepatitis B.
- e. The piercer should handle needles with care to reduce accidental needlestick injuries.

Response Procedures for Accidental Exposure to Blood and Body Fluid

Exposure to blood or body fluids presents the greatest risk of transmission of bloodborne pathogens such as hepatitis B (HBV), hepatitis C (HCV) or human immunodeficiency virus (HIV).

The following could result in exposure to blood-borne pathogens:

- Needlestick or cut from a used needle or sharp object contaminated with blood/body fluid.
- Splash of blood/body fluid onto broken skin (open cut, wound dermatitis).
- Splash of blood/body fluid onto mucous membrane (eyes, nose, mouth).

If an accidental exposure occurs, follow these procedures:

1. Wash the exposed surface with water, soap or a germicidal handwashing solution. If the area is bleeding, allow it to bleed freely. After cleaning the wound, apply a skin antiseptic and cover with a sterile dressing or band-aid. If there has been a splash onto the mucous membrane, flush the area thoroughly with water.
2. The owner/operator shall immediately contact the Regional Health Authority/Medical Officer of Health in your area. In addition, the piercer should contact his/her physician.
3. Determine if the piercer has had a Hepatitis B vaccine and the date of completion.
4. Inform the client that he or she may be asked to submit blood samples for testing.
5. Keep a record of the incident including the following:
 - name, address and phone number of the client
 - name of piercer
 - date of injury
 - circumstances surrounding the injury
 - action taken

III. Cleaning, Disinfection & Sterilization

9. Cleaning

Cleaning must occur as a first step before disinfection or sterilization or the process of disinfection or sterilization will be ineffective.

- a. At the end of each session, **NEEDLES** must be **DISCARDED** into a puncture resistant container. (Caution should be taken to avoid needlestick injuries.)
- b. All contaminated instruments including callipers, forceps, needle pushers, insertion tapers and receiving tubes shall be stored in a suitable container prior to cleaning.
- c. All containers used to hold contaminated instruments should be cleaned daily.
- d. Prior to sterilization or disinfection, **all items must be cleaned** with warm water and detergent to remove organic matter. An ultrasonic cleaner may be used to assist with cleaning.

- e. The ultrasonic cleaning device should be emptied after use and cleaned daily with detergent and water. (The ultrasonic cleaner **will not** disinfect or sterilize instruments).

10. Disinfection

How the item is used determines the classification and type of disinfectant needed. (refer to Appendix 1 – Classification of Items for Disinfection).

- a. The ear-piercing instrument (the part that holds the earring stud) that is not disposable must be cleaned and disinfected between clients with an intermediate disinfectant.
- b. The removable cartridge of the ear-piercing instrument should be discarded after use. The remaining part of the instrument surface should be wiped with an intermediate level disinfectant.
- c. Callipers should be cleaned with a low level disinfectant if the skin is intact.
- d. Callipers used on mucous membranes should be disinfected with high level disinfectant or sterilized.
- e. All containers used to hold contaminated instruments should be cleaned and disinfected daily using a low level disinfectant.

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| <p>Low level</p> <p>Quaternary ammonium compounds. Some phenols and 3% hydrogen peroxide.</p> | <p>Kills some bacteria and viruses e.g. staphylococcus, herpes, HBV, HCV, and HIV. Does not kill <i>Mycobacterium tuberculosis</i>, fungi, or spores.</p> | <p>Low level disinfectants should be used to disinfect non-critical items, e.g. work surfaces, service tray. The disinfectant should be prepared and used according to manufacturers' directions.</p> |
| <p>Intermediate level</p> <p>5.25% household bleach; 1 part bleach and 9 parts water; 70% isopropyl alcohol, and iodophors.</p> | <p>Kills the microorganisms for low level disinfectants plus fungi but does not kill <i>Mycobacterium tuberculosis</i>, or spores.</p> | <p>Intermediate level disinfectants are used on some semi-critical items and may be used in place of a low level disinfectant to disinfect work surfaces and equipment.</p> |
| <p>High level</p> <p>2% glutaraldehyde or 6% hydrogen peroxide</p> <p>★ Most disinfectants at this level may also achieve sterilization if used for longer time periods.</p> | <p>Kills all viruses, bacteria (including <i>Mycobacterium tuberculosis</i>) but does not kill spores.</p> | <p>Used for semi-critical items and for critical items that cannot withstand heat sterilization.</p> |

11. Sterilization

- a. All instruments and equipment requiring sterilization including jewelry, forceps, piercing needles, insertion tapers and receiving tubes shall be cleaned and sterilized for each client.
- b. Sterile packages should be stored in clean, designated storage cabinets. Instruments should remain in their sterile packages until used. (Check with the manufacturers specifications for storage times)
- c. Sterilization devices should be tested at least once every month or every 10 cycles to monitor the effectiveness of sterilization.

| | | |
|---|---|---|
| <p>Sterilization equipment and supplies:</p> <ul style="list-style-type: none"> • Steam autoclave or dry heat sterilizer. | <p>The sterilizer is used to kill micro-organisms on instruments.</p> | <p>Steam or dry heat should be used to sterilize critical items that may come into contact with the client's blood stream. Sterilized items should be kept in the clean zone of the shop.</p> |
| <ul style="list-style-type: none"> • Heat indicator tape. | <p>Heat indicator tape or heat indicator bags should be used with each load that is placed in the sterilizer.</p> | <p>The heat indicator tape verifies that the package has been exposed to the correct exposure of heat or steam.</p> |
| <ul style="list-style-type: none"> • Spore test strips or vials | <p>The spore test confirms that the sterilizer kills all micro-organisms.</p> | <p>The spore test should be performed at least once every month or every 10 cycles to monitor the effectiveness of sterilization.</p> |

APPENDIX 1

Classification of Items for Disinfection⁽⁴⁾

| Classification | Disinfectant | Method |
|--|--|--|
| Non-critical | | |
| <p>Items that may come into contact with intact skin and/or are used for routine housekeeping.</p> <p>Items that are rarely contaminated with blood/body fluid, e.g. client chair and table</p> <p>Items that are often contaminated with blood/body fluid, e.g. lamp handles, dirty instrument tray.</p> | <p>Low level disinfectants are good for non-critical items.</p> <p>Detergent is adequate</p> <p>Low level disinfectants, e.g. quaternary ammonium compounds or "Quats", or a combination of a low level disinfectant-detergent; 3% hydrogen peroxide compounds</p> | <p>Clean to remove dust or soil from items/equipment and surfaces with a solution of detergent and warm water.</p> <p>Clean and follow with low level disinfection for reusable items and environmental surfaces that may be contaminated. Wet or spray a paper towel to wipe the clean item/surface with the disinfectant prepared and used according to the manufacturer's directions, i.e. allow sufficient surface contact time with the disinfectant.</p> |
| Semi-Critical | | |
| <p>Items come into contact with mucous membrane or non-intact skin, or they hold a sterile item.</p> <p>Items that cannot be soaked and hold a sterile item that may have been splattered with blood/body fluids.</p> <p>Items capable of being soaked and hold a sterile item that may have been splattered with blood/body fluids, e.g. needle pusher.</p> | <p>Intermediate and high level disinfectants are good for items that come into contact with mucous membranes or non-intact skin, or that hold a sterile item.</p> <p>Intermediate level disinfectants, e.g. 70% isopropyl alcohol or 1 part 5.25% household bleach and 9 parts water. Bleach may be corrosive to metal.</p> <p>High level disinfectants, e.g. 2% glutaraldehyde or 6% hydrogen peroxide.</p> | <p>Clean item is wet wiped with an intermediate level disinfectant level disinfectant and air dried after each client.</p> <p>Clean item is soaked for a number of minutes, as specified by the manufacturer, to achieve a high level of disinfection.</p> |
| Critical | | |
| <p>Items which enter deep in the skin, e.g. tattoo or ear/body piercing needles, hypodermic needle used during electrolysis, jewelry.</p> | <p>Sterile items must be used to enter the skin.</p> <p>Metal items to pierce the skin should be purchased sterile or packaged and sterilized by a steam or dry heat method.</p> | <p>Pre-sterilized, single use, packaged needles or earring studs should be used. Items that are not pre-packaged as sterile must be sterilized. Sterile electrolysis needles should never be saved and reused on the same client</p> <p>Chemicals that sterilize are not recommended for critical items as it is difficult to monitor and confirm that sterilization has been achieved and the packaging of items to maintain sterility is not possible.</p> |

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