

**Columbus Department of Public Health  
Body Art Studio and Artist Inspection Report**

Inspection Date: 11/12/2021

**CURRENT  
SCORE**

Studio Name: Little Bee Creations Permit #: BAP-106-000336

Address: 1414 33rd St Columbus, GA Zip 31904

PREVIOUS  
SCORE

100

**ADMINISTRATIVE**

- |   |   |   |
|---|---|---|
| 1. Permit/Inspection posted                 | 2 | ✓ |
| 2. Enforces age limit (none under 18 years) | 2 | ✓ |
| 3. No animals (except service animals)      | 2 | ✓ |

**STERILIZATION**

- |   |   |     |
|---|---|-----|
| 23. Autoclave operational / available   | 4 | N/A |
| 24. Puncture resistant container for nondisposables                                 | 4 | N/A |
| 25. Equipment bagged, dated and sealed  | 3 | N/A |
| 26. Autoclave timing (55 min/cold start; 35 min/hot start; 270 degrees & 15-30 PSI) | 4 | N/A |
| 27. Spore indicators once a week  | 3 | N/A |

**FLOOR PLAN**

- |   |   |   |
|---|---|---|
| 4. Customer privacy available   | 2 | ✓ |
| 5. Adequate ventilation/adequate lighting   | 2 | ✓ |
| 6. Light painted walls & ceilings   | 2 | ✓ |
| 7. Cleanable floors (no carpet in work area)  | 2 | ✓ |
| 8. Client sanitary toilet / hand washing facility   | 2 | ✓ |
| 9. Work area, hot/cold water with proper supplies: soap antibacterial solution, single use towels, nail brush | 4 | ✓ |

**TATTOO APPLICATION**

- |  |   |   |
|--|---|---|
| 28. Sterile, single use materials only                 | 4 | ✓ |
| 29. Antibacterial solution available                   | 3 | ✓ |
| 30. Client given written instructions on care in files | 3 | ✓ |

**DISINFECTION OF WORKPLACE**

- |   |   |   |
|---|---|---|
| 31. Cleaning schedule on file / work surfaces disinfected | 3 | ✓ |
| 32. Remove / replace protective covering                  | 3 | ✓ |

**FURNISHINGS & FIXTURES**

- |   |   |   |
|---|---|---|
| 10. Maintained intact & functional                                  | 2 | ✓ |
| 11. Clean, nest, free of litter & rubbish                           | 2 | ✓ |
| 12. Work tables & chairs for each artist                            | 2 | ✓ |
| 13. Table / chairs surfaces smooth, light colored, easily sanitized | 2 | ✓ |

**DISPOSAL OF WASTE**

- |  |   |   |
|--|---|---|
| 33. Needles in closed, puncture resistant containers | 3 | ✓ |
| 34. Containers close to work area / not overfilled   | 2 | ✓ |
| 35. Needles sent to approved disposal facility       | 2 | ✓ |
| 36. Covered trash container                          | 2 | ✓ |

**SUPPLIES**

- |                           |   |   |
|---------------------------|---|---|
| 14. Storage facilities    | 2 | ✓ |
| 15. Single use containers | 2 | ✓ |

**PERSONNEL**

- |   |   |   |
|---|---|---|
| 37. Employee files – Current certification in first aid/blood borne pathogen training (or health care professional) | 3 | ✓ |
| 38. Employee files – Hep B statement  | 2 | ✓ |

**CLIENT FILES**

- |   |   |   |
|---|---|---|
| 39. Keep minimum of 2 year: Record of tattoos, consent form, statement of no alcohol/drug use, procedures statement, and instructions on care | 2 | ✓ |
|---|---|---|

**SANITATION**

- |   |   |   |
|---|---|---|
| 19. Disposable latex / vinyl gloves             | 3 | ✓ |
| 20. Neat, trimmed fingernails / jewelry removed | 3 | ✓ |
| 21. Artist outer garment clean                  | 3 | ✓ |
| 22. Single razors for tattooed area             | 3 | ✓ |

**COMMENTS:**

No violations observed at time of inspection.  
Marshall slip issued.

DISCUSSED WITH:

Melissa Person

INSPECTED BY:

Yashin

TITLE:

owner

TITLE:

EHSTII