

## TATTOO ESTABLISHMENT INSPECTION REPORT TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH

| ESTABLISHMENT Kustom Thrills Tattoo |   |  |            | - 13     | (100 C)  | ATE<br>/04/23 | SCORE   |  |     |
|-------------------------------------|---|--|------------|----------|----------|---------------|---|--|-----|
| LOCA 1603 F                         |   | STAFF<br>Justin Wilson   |            |          |          |               | T. NO.<br>55306743  | 100/100  |     |
| CITY,<br>Nashv                      | STATE, ZIP<br>ille TN 37206   | TYPE<br>Permanent  |            |          | - 10     |               | JRPOSE<br>utine   |  |     |
| PERMI                               | TTEE  |  |            |          |          |               | DLLOW- UP ( ) YES<br>EQUIRED NO                                   |  |     |
|                                     | PROHIBITED ACTS   |  |            |          |          |               | LIGHTING  |  |     |
| 1.                                  | Minor clients, tattoo removal, unhealth   | y site   | 2          |          | 19       |               | Adequate  |  | 1   |
| 2.                                  | Licensed artist not on duty   |  | 2          |          |          |               | VENTILATION   |  | -   |
|                                     | PHYSICAL FACILITIES   |  |            |          | 20.      |               | Sufficient, installed, maintaine                                  | d  | 1   |
| 3.                                  | Work area separated   |  | 1          |          |          | -             | GENERAL OPERATION   | is   |     |
| * 4.                                | Autoclave meets minimum time, tempo   | erature, pressure  | 5          | *        | 21       |               | Toxic items stored, labeled, us                                   | ed   | 5   |
| 5.                                  | Regulated waste properly disposed<br>WATER  |  | 2          |          | 22       | 5             | Premises maintained free of lit<br>unauthorized personnel, anima  |  | 1   |
| * 6.                                | Water source approved, hot and cold un  | nder pressure  | 5          |          |          |               | equipment properly stored   |  |     |
|                                     | SEWAGE  | 110011111111111111111111111111111111111  |            |          |          | _             | TATTOO EQUIPMENT  | & UTENSILS   |     |
| * 7.                                | Sewage and liquid waste disposal  |  | 5          |          | 23       |               | Properly installed, maintained,                                   | constructed, designed  | 1   |
|                                     | PLUMBING  |  |            |          | 24       |               | No reuse of single use articles                                   |  | 5   |
| 8.                                  | Installed, maintained   |  | 1          |          | 25       |               | Clean, free of abrasives and cle                                  | caners   | 1   |
| * 9.                                | Cross-connection, backflow, back-siph   | onage  | . 5        |          | 26       |               | Aisles unobstructed   |  | 1   |
|                                     | TOILET/HANDWASHING FAC  | CILITIES   |            | OIL      |          |               | TATTOO OPERATIONS   |  |     |
| * 10.                               | Installed, designed, number, convenien  | t, available   | 5          | *        | 27       |               | Good hygienic practices, propo                                    | er handwashing   | 5   |
|                                     | Enclosed, tight-fitting doors, fixtures cl  |  |            |          | 28       |               | Clean clothing, lap cloth used,                                   | spill kits available   | 1   |
| 11.                                 | covered receptacles, antibacterial soap,<br>towels/hand drying devices            |  | 1          |          | 29       |               | Employees with infectious lesi<br>from tattooing                  | Noted a William Countries of Treatment   | 5   |
|                                     | GARBAGE & REFUSE DISPOS   |  |            | *        | 30       |               | Monthly microbiological moni                                      | and the same of th | 5   |
| 12.                                 | Containers clean, adequate number, co-<br>rodent proof. Outside storage area clea | Three 1 and 40 annual 7 and mark 1 and 1 and 1   | 1          | *        | 31.      |               | Tubes and needles sterilized in<br>Equipment sterilized for no me | ore than one (1) year.   | 5   |
|                                     | covered, controlled incineration  |  |            | *        | 32       | _             | Work room equipped and resto                                      |  | 5   |
|                                     | INSECT/RODENT CONTROL   | COLLEGE DE LA COLLEGE DE L |            |          | 33.      | -             | Sterile instruments properly ha                                   |  | 5   |
| * 13.                               | Presence/evidence of insects, rodents, l<br>openings protected.                   | narborage— outer   | 5          | -        | 34       | -             | Reusable instruments properly                                     | nandied  | 5   |
|                                     |   | UDNICHINGS   |            | $\vdash$ | 35.      | $\rightarrow$ | Approved dyes or pigments   |  | 1   |
| **                                  | FLOORS/WALLS/CEILINGS/FURNISHINGS   |  |            | $\vdash$ | 36.      | -             | Tattoo log available  | P A  | 1   |
| 14.                                 | Floors constructed, drained, clean, go  |  | 1          | 1        | 37.      | •             | Instructions provided on care of                                  | of tattoo/body piercing  | 1   |
| 15.                                 | Walls—constructed, clean, good repair<br>Ceilings/attached equipment—construc     |  | 1          |          |          | 1             | ADMINISTRATION  |  | T   |
| 16.                                 | repair  |  | 1          | -        | 38.      | -             | Infections reported   |  | 0   |
| 17.                                 | Work area furnishings—sanitized betw  |  | 1          |          | 39       |               | Current permit/license posted                                     | Mississippi northeball   | 0   |
| 18.                                 | Work area furnishings—clean, good re  | pair   | 1          |          | 40       |               | Most current complete inspect                                     | ion report available   | 0   |
|                                     | fies critical items<br>orner any violations of critical items within seven (7) do | ws or failure to correct violat  | ions of an | v nonce  | itical i | items         | s within fourteen (14) days may result in s                       | unension of your tattoo establishm   | ent |

Failure to correct any violations of critical items within seven (7) days or failure to correct violations of any noncritical items within fourteen (14) days may result in suspension of your tattoo establishment permit. If a second critical violation is committed within the period of one (1) year (calendar or otherwise), the tattoo studio shall be subject to a civil penalty of up to five hundred dollars (\$500) and the tattoo studio's permit may be revoked. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the tattoo establishment permit in a conspicuous manner and to keep this inspection report available at this facility for public disclosure to any person who requests to review it. You have the right to request a review regarding this report by filing a written request with the local health department within ten (10) days of the date of this report. T.C.A. Sections 62-38-201 et. seq., 68-1-103, 4-5-202, and 4-5-320.

| Signature of<br>Person in Charge | QUS.     | Ву          | JW       |          | EHS |
|----------------------------------|----------|-------------|----------|----------|-----|
| Date of Signature                | 05/04/23 | Time in/out | 01:30 PM | 02:05 PM |     |

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| Establishment Info  | ormation              |   |
|---------------------|-----------------------|---|
| Establishment Name: | Kustom Thrills Tattoo |   |
| Establishment Numbe | r: 665306743          |   |
|                     |                       | · |
|                     |                       |   |
| Observed Violation  | าร                    |   |

| 40: Most recent inspection not pos      | ted. |  |
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## Additional Comments

Areas checked: Hayden Combs, Adam Wakitsch, Caitlin Keiffer, Justin Gill- occupied, Max Nance, Kyle Frary, spill kit, paperwork, aftercare

<sup>\*\*\*</sup>See page at the end of this document for any violations that could not be displayed in this space.

<sup>\*\*\*</sup>See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

| Establishment Name: Kustom Th<br>Establishment Number: 665306 |   |  |  |
|---|---|--|--|
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| Observed Violations (cont'd)                                  |   |  |  |
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| Additional Comments (cont'd                                   | 0 |  |  |
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Establishment Information

## Many people have hepatitis C and do not know it

CDC now recommends all adults be tested for hepatitis C



Licensed facilities use safe tattooing and/or piercing techniques that are proven to prevent hepatitis C and other infections such as HIV



Get Tested, Treatment Cures





