

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

ESTABLISHMENT ONE DROP INK					DATE 11/28/23		SC CIRE			
LOCATION 1511 JEFFERSON ST  CITY, STATE, ZIP Nashville  TN 37208  STAFF Michael Abella  TYPE Permanent						EST. NO. 665240420		1.000000	100/100	
	- TO 11 - ST -	O mercin consumation				- 11		JRPOSE		
PE	RMI	TTEE					2010	DLLOW- UP ( ) YES EQUIRED NO		_
		PROHIBITED ACTS						LIGHTING		
	1.	Minor clients, tattoo removal, unhealthy	site	2		19	).	Adequate	1	
	2.	Licensed artist not on duty		2				VENTILATION		Ī
_		PHYSICAL FACILITIES		-		20	).	Sufficient, installed, maintained	1	Г
	3.	Work area separated		1				GENERAL OPERATIONS		
*	4.	Autoclave meets minimum time, temper	rature, pressure	5	*	21		Toxic items stored, labeled, used	5	,
	5.	Regulated waste properly disposed		2	22. unauthorized personnel, animals, cle			Premises maintained free of litter, unnecessary article	s,	
		WATER		The same			unauthorized personnel, animals, clean, maintenance,		L	
*	6.	Water source approved, hot and cold un	der pressure	5				equipment properly stored		
		SEWAGE	10000					TATTOO EQUIPMENT & UTENSILS		
*	7.	Sewage and liquid waste disposal		5		23	3.	Properly installed, maintained, constructed, designed	- 1	
		PLUMBING			*	24		No reuse of single use articles	5	,
	8.	Installed, maintained		1		25	5.	Clean, free of abrasives and cleaners	_ 1	1
*	9.	Cross-connection, backflow, back-sipho	onage	. 5		26	5.	Aisles unobstructed	_ 1	
		TOILET/HANDWASHING FACILITIES						TATTOO OPERATIONS		
	10.	Installed, designed, number, convenient, available			*	27	1.	Good hygienic practices, proper handwashing		1
		Enclosed, tight-fitting doors, fixtures cle				28	3.	Clean clothing, lap cloth used, spill kits available		1 1 5 1 1 5 5 5 5 5 5 1 1 1 1 0 0 0 0 0
	11.	covered receptacles, antibacterial soap, towels/hand drying devices	disposable	1		29		Employees with infectious lesions on hands restricted from tattooing	5	
	- 0	GARBAGE & REFUSE DISPOS.	AL	37-75	*	30	),	Monthly microbiological monitoring tests	5	
	12.	Containers clean, adequate number, cov rodent proof. Outside storage area clean		1	•	31		Tubes and needles sterilized in an approved manner. Equipment sterilized for no more than one (1) year.		
_		covered, controlled incineration				32	$\rightarrow$	Work room equipped and restocked as required	_	_
		INSECT/RODENT CONTROL				33	$\rightarrow$	Sterile instruments properly handled	_	-
	13.	Presence/evidence of insects, rodents, h openings protected.	arborage—outer	5	-	34	-	Reusable instruments properly handled	_	_
_			IDALICITIANO		$\vdash$	35	$\rightarrow$	Approved dyes or pigments	_	_
	1.4	FLOORS/WALLS/CEILINGS/FU			-	36	$\rightarrow$	Tattoo log available	_	-
-	14.	Floors—constructed, drained, clean, goo	od repair	1	1	37	•	Instructions provided on care of tattoo/body piercing	1	-
-	15.	Walls—constructed, clean, good repair Ceilings/attached equipment—construct	ted clean good	1			1	ADMINISTRATION		
	16.	repair		1		38		Infections reported	0	)
	17.	Work area furnishings—sanitized between	een clients	1		39	).	Current permit/license posted	0	)
	18.	Work area furnishings-clean, good rep	pair	1		40	),	Most current complete inspection report available	0	)

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 imspection 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 Person in Charge	Verent De y	By	MAhella		EHS
Date of Signature	11/28/23	Time in/out	01:50 PM	03:10 PM	

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Establishment I	Information
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Establishment Name: ONE DROP INK Establishment Number: 665240420

Observed Violations	
Total # 0	

## Additional Comments

Tattoo artists:

Michael mucker: 664241552 Leah Garrett: 664250815 Christin Baumgart: 664254808

Tattoo studio:

One Drop ink tattoo: 665240420

All items are disposable. Work station is good.

Logs or page at the end of this occument for any extra Additional Comments that could not be displayed in this space.

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

	me: ONE DROP INK mber: 665240420		
Observed Viola	tions (cont'd)		
Additional Com	ments (cont'd)		

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





