

Public Health Act 1997

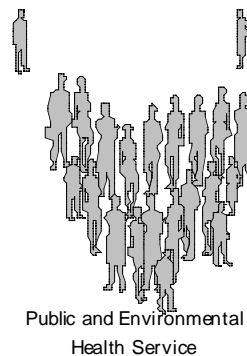
GUIDELINES

for

TATTOOING

Department of Health and Community Services

Issued by: Dr Mark Jacobs
Director of Public Health
GPO Box 125B, Hobart Tasmania 7001
Ph: 03 62333762
Fax: 03 62231163
Email: mark.jacobs@dchs.tas.gov.au



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Note:

These guidelines are for businesses that provide tattooing.

Separate guidelines are available for businesses providing:

- ear and body piercing; and
- acupuncture.

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GUIDELINES FOR TATTOOING

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GUIDELINES FOR TATTOOING

1. INTRODUCTION

Successful personal service businesses supply their clients with professionally competent, safe and hygienic services, provided in clean and congenial premises.

It is important that tattooists become aware of the possible wider effects of the procedures they employ.

Unsafe or unhygienic procedures can not only affect the health of the client, but also, jeopardise the health of the tattooist and aid the spread of infectious diseases.

For example, where procedures involving penetration of the skin are not performed correctly, they can be the means of transmitting organisms that cause diseases, like HIV (the virus which causes AIDS), hepatitis B, hepatitis C and skin infections caused by common bacteria such as staphylococcus.

It is essential for tattooists to be fully aware of the potential dangers of their procedures and to understand the precautions that need to be taken to minimise the likelihood of infection.

The purpose of these guidelines is to help tattooists to comply with the minimum requirements set out in the Act and these guidelines, by explaining how infection can be associated with procedures they employ and the precautions they should take to protect their clients, themselves and the community.

2. SCOPE

2.1. Application of guidelines

These guidelines apply to -

- all persons who perform tattooing procedures unless exempted under the *Public Health Act 1997*; and
- the premises in which tattooing is performed; and
- all equipment, instruments and materials used for the purpose of tattooing; and
- cosmetic tattooing.

Cosmetic tattooing is also called pigment implants, semi-permanent creations, permanent makeup or derma-impigmentation. All these processes involve the same method of application as tattooing and are therefore subject to the same controls and procedures outlined in these guidelines.

2.2. Important Note

In applying these guidelines, tattooists should note that the boxes headed "**outcomes required**" and "**requirements**", both of which are highlighted in shaded boxes, are enforceable as law under the provisions of the *Public Health Act 1997*.

Generally, text that is not highlighted is intended as guidance or recommendations to assist tattooists to achieve the outcomes required. However, in interpreting these guidelines "**must**" indicates that a statement is mandatory and "**should**" indicates a recommendation.

Whilst strict adherence to recommendations is not essential, achieving the outcome is essential. Achieving the required outcome by following an alternative procedure approved by the Director will be accepted as compliance with the requirements of these guidelines.

3. DEFINITIONS

3.1. The following definitions apply throughout these guidelines:

"**Act**" means *Public Health Act 1997*;

"**applicator**" includes single-use, disposable spatula or similar device;

"**article**" includes any equipment, instrument or other item used in the process of tattooing;

"**autoclave**" means a machine used for sterilising instruments employing steam at high pressure;

"**body substance**" means any part of a human body and includes blood, serum, saliva, secretions, or tissue extracted from a human body;

"**cleaning**" means the process of removing body substances and other debris and reducing the number of micro-organisms from the surface of an object by a process such as washing in detergent;

"council" means a council within the meaning of the *Local Government Act 1993*;

"cross-contamination" means the spread of micro-organisms from one surface to another or from something that is contaminated to something that is not;

"Director" means the Director of Public Health appointed under the Act;

"disinfection" means the process of eliminating all micro-organisms except bacterial spores;

"infection control" means the process of minimising the risk of spreading infection while providing tattooing procedures to clients;

"infectious waste" includes all waste arising from tattooing or related activities which is known to be or could be contaminated with disease-causing bacteria, bacterial spores or viruses and which presents a recognised infectious hazard to waste disposal workers and to the environment if appropriate precautions are not taken;

"instrument" includes an appliance, apparatus or tool (including a needle);

"mucous membrane" means thin elastic tissue which lines cavities connected with the skin, such as the eyes or mouth, nasal cavities and the respiratory tract;

"operator" means a person who performs a tattooing procedure;

"person" includes any body of persons, corporate or unincorporate;

"sharps" means any item designed to pierce, cut, puncture, tear or shave the skin or mucous membrane;

"sterilisation" means the process intended to destroy or eliminate all forms of microbial life, including bacterial spores;

"steriliser" includes -

- a) an autoclave; and
- b) a dry heat steriliser.

3.2. A word or phrase used in these guidelines and defined in the Act has the same meaning in these guidelines as in the Act.

4. HOW INFECTION CAN OCCUR

4.1. General

OUTCOME REQUIRED:

That the activity of tattooing, and the premises in which tattooing is performed, are operated in such a way as not to pose a threat to public health.

The potential for serious infection occurs during tattooing. The needles and instruments that are used to penetrate the skin at various sites on the body can become contaminated by blood or other body substances.

HIV, hepatitis B and hepatitis C viruses and common bacteria can be present in blood and other body substances, and are spread by infected blood or other body substances entering another person's bloodstream. This can happen during tattooing, when needles and equipment used for penetrating the skin are contaminated with infected blood or body substances, and are not sterilised before use on another person.

The person at risk may be, not only the next client being treated with the contaminated instrument, but also, the operator, if the operator accidentally penetrates his or her skin with the contaminated instrument. This is called a "needlestick" injury. Contact with infected blood, body substances or contaminated instruments on open cuts, sores, broken skin or mucous membranes can also lead to infection.

Blood or body substances do not have to be visible on an instrument or needle for infection to be transmitted.

Procedures, where instruments merely come in contact with blood, serum, other body substances or skin infections, may also present a risk of passing on infection, such as:

- staphylococcal bacterial infection (a major cause of wound infections)
- fungal infections like tinea (ringworm)
- herpes simplex I (cold sores) and herpes simplex II (genital herpes)
- human papilloma virus (warts)
- scabies or other parasitic mites

REQUIREMENTS:

All instruments that have the potential to penetrate the skin of a person, including needles, razors and attachments (such as nozzles, needle bars and tubes) must be sterile immediately before use on each client.

4.2. **Cross-contamination****OUTCOME REQUIRED:**

That there are adequate systems in place to prevent the risk of cross-contamination in premises used for the activity of tattooing.

Some of the ways in which cross-contamination can occur in tattooing procedures are as follows:

- if one or more operators share the same equipment or materials
- if used and clean instruments come into contact with one another
- if clean instruments are placed on unclean surfaces
- if strict operator hygiene is not observed
- if contaminated dressings, spatulas, disposable gloves and other materials are not disposed of immediately and appropriately after use
- if structural facilities, furnishings and fittings of the premises are not adequately protected, or thoroughly cleansed between clients
- if towels and other articles used on clients are not changed or thoroughly cleansed/disinfected between clients
- if there is excessive movement of personnel in and out of the room or if there is air movement due to draughts from open windows or doors.

Operators should be aware of the potential for unprotected surfaces and equipment to become contaminated with blood and body substances during tattooing.

Unprotected surfaces and equipment may become contaminated during tattooing when operators:

- adjust overhead light fittings
- adjust settings on equipment or power packs
- answer telephones
- touch curtains, drapes or bin lids
- adjust furniture and equipment.

Clients, operators and the community can be at risk if cross-contamination occurs.

4.3. **How to minimise infection**

Infection control is the process of minimising the risks of spreading infections while providing tattooing services to clients.

The blood and body substances of all clients should always be treated as being potentially infectious, as it is impossible to determine if clients have HIV or other blood-borne viruses. Clients are not required to disclose this information.

4.4. **Choice of instruments and needles**

Pre-sterilised, single-use, disposable needles and instruments should be used wherever possible.

Deterioration of plated metal surfaces of equipment occurs as a result of repeated use, and as a result of repeated sterilising and autoclaving. Therefore, if reusable tattooing equipment is chosen, it is recommended that good quality stainless steel needles and instruments be used and maintained for use in tattooing procedures.

REQUIREMENTS:

- **Disposable needles and instruments must be disposed of into sharps containers immediately after use.**
- **Items marked by their manufacturer as single use must not be re-used.**
- **Re-useable instruments that are used for penetration of the skin must be cleaned and sterilised before being re-used on another client.**
- **Other instruments that have accidentally penetrated the skin or are contaminated with blood or body substance must be properly cleaned and sterilised before further use.**

4.5. **Dispensing**

To avoid cross-contamination, any fluid, cream, ointment or similar substance should be removed from its original container or tube only by the use of a clean single-use, disposable applicator. Because of the high risk of cross-contamination of the pump outlet, self-dispensing pumps for cream, ointment or similar substances should be used only to dispense onto a clean single-use, disposable applicator.

Liquid soap dispensers and spray bottles should be cleaned and dried before refilling, and should not be topped up due to the risk of cross-contamination.

REQUIREMENTS:

- **Operators must use single use disposable applicators when dispensing.**
- **Any leftover cream, ointment or similar substance, which has been removed from a container, must not be returned to the original container and must not be used on another client.**
- **Any applicator used for dispensing a substance must not be re-dipped into the original container and must be disposed of after each use.**
- **Left over substances and applicators must be disposed of in the infectious waste bin.**

5. **HEALTH AND SAFETY IN THE WORKPLACE**

OUTCOME REQUIRED:

That each person engaged in the activity of tattooing is adequately trained in hygiene practices and infection control and is provided with adequate facilities and equipment, including protective clothing and suitable disposable gloves.

5.1. **General**

In addition to their responsibilities under the *Public Health Act 1997*, employers and self-employed persons have duties and obligations relating to the health and safety of all persons under the *Workplace Health and Safety Act 1995*. Copies of the *Workplace Health and Safety Act 1995* can be obtained from the Printing Authority of Tasmania, 2 Salamanca Place, Hobart.

In the tattoo industry, safety involves, amongst other things, the provision of:

- adequate staff training including hygiene practices and infection control
- properly maintained facilities and equipment, including the provision of protective equipment, such as disposable gloves
- a clean and suitably designed studio, to include the safe storage of goods such as chemicals to minimise potential hazards.

5.2. Handling and disposal of sharps

OUTCOME REQUIRED:

That sharps are handled in such a way as to prevent accidental needlestick injury.

Sharps represent the major cause of accidents involving potential exposure to blood-borne diseases. Operators using sharps are responsible for their management and disposal.

REQUIREMENTS:

- **All sharps must be placed in an appropriate container when not in use.**
- **Contaminated sharps must not be passed from the hand of one operator to another.**
- **If needles are required to be bent, this must be done prior to contamination with blood or any body substance, and the needle must not be rendered unsterile during the bending process.**
- **All used sharps must be placed in a clearly labelled, puncture resistant container, that complies with Australian Standard AS 4031, immediately after the skin penetration procedure is completed.**

- **Re-usable sharps (i.e. tattoo needles, not being discarded) must be placed in a suitable, clearly labelled, puncture-proof container set aside from sterile or unused instruments.**

5.3. Hepatitis B Vaccination

A safe and effective vaccine for the prevention of hepatitis B is available. Vaccination is recommended for all tattooists and staff involved in skin penetration procedures and for staff who may be involved in cleaning skin penetration instruments and equipment.

A primary vaccination course usually consists of three injections over six months. At the end of this time, a blood test can be done to check that the vaccination has been effective. It is recommended that booster doses be given in five to seven year intervals after the primary course, or as directed by a medical practitioner.

For those who are unsure of their hepatitis B immunity, a special vaccination called an immunoglobulin, if given within 72 hours after a needlestick injury, should prevent infection, if the source of the needlestick injury is a hepatitis B carrier.

Vaccination and blood tests can be arranged through a local doctor.

5.4. Contact with blood or body substance

Because of the risk of blood borne infection, operators and clients should avoid contact with the blood and body substances of others.

If contact occurs onto intact skin:

- wash the area of contact thoroughly with soap and warm water

If contact has occurred onto an open wound, broken skin, mucous membrane (mouth, eyes) or from a needlestick injury:

- irrigate the area with water in the case of contact with a mucous membrane
- encourage bleeding from the wound, and in the case of open wounds and broken skin, wash the area thoroughly with soap and water
- report the contact to a doctor who will give advice
- in the case of a penetrating needlestick injury, refer to Appendix C.

5.5. **Bleeding**

Should bleeding occur at any time during the course of a tattooing procedure, or accidentally, the following action is recommended:

- put on disposable gloves and protective clothing, if they are not already being worn
- stop the bleeding by applying pressure to the wound with a dry sterile disposable dressing and seek medical advice if bleeding is difficult to control by applying pressure
- handle disposable dressings and contaminated instruments carefully to avoid contact with blood or body substance from the client or the instrument
- pick up broken glass, or any other sharp object involved in the incident, with forceps and dispose of in a sharps container
- dispose of contaminated instruments into a sharps container or, if they are reusable, place them in the appropriately labelled container in preparation for cleaning and sterilisation
- clean surfaces, such as benches, chairs or floors, that have become contaminated with blood or other body fluids, as soon as possible, using detergent and water and a disposable cloth or paper towel. Then wipe surfaces with another disposable cloth soaked in diluted bleach at 1:4 dilution (see section 6.8)
- if a spill occurs on carpet, the area should be shampooed or steam cleaned
- dispose of all cloths or paper towels, used for wiping up blood spills, by placing them in the bin marked "infectious waste"
- after treating wounds, handling contaminated dressings or cleaning up blood or other body fluids, remove both gloves, dispose of them in the "infectious waste" bin and wash hands thoroughly.

6. **REQUIREMENTS FOR TATTOOING**

6.1. **Preparation of work area and setting up of equipment**

OUTCOME REQUIRED:

That there are adequate systems in place to prevent the risk of cross-contamination in premises used for tattooing, and that operators are adequately trained in hygiene practices and infection control.

It is important to prepare the work area before commencing a tattooing procedure. Leaving the client during a tattooing procedure to get something increases the risk of cross-contamination.

It is recommended that operators:

- ensure that the work area is clean and tidy
- make sure all the items needed are in easy reach, and that any items not required are removed from the immediate area

REQUIREMENTS:

- **Cover any work surfaces with disposable coverings or clean linen (this makes cleaning the work surfaces easier). Change these coverings between clients.**
- **Place a puncture-proof container labelled "dirty instruments for sterilising" in the work area, for the collection of these instruments.**

Packages containing sterile needles or instruments should be opened in front of the client to show that sterile procedures are being used.

To prevent surfaces from being contaminated, if an item has to be handled or adjusted while tattooing is in progress, it is recommended that operators:

- cover any surfaces which may need to be touched, for example, light fittings and power pack controls, with cling film
- cover that part of the tattooing machine which is adjacent to the needle bar with cling film secured with elastic bands
- store tissues or wipes to be used during tattoo procedures where they cannot become contaminated. Enough wipes to be used on one client should be kept in the work area and any not used should be immediately discarded after each client
- wearing gloves, open sterilising bags containing sterile needles, needle bars and tubes, and set up the tattoo machine in front of the client, to show that sterile instruments are being used.

REQUIREMENTS:

- Cover spray-bottles and ink bottles with single-use plastic bags, so that only the nozzles are exposed.
- Place the required number of single-use, disposable ink caps into stainless steel ink cap trays and dispense inks into ink caps. Alternatively, dispense inks onto a single-use, disposable tray. Any left over ink must be discarded with the container, after each client.
- Place water, to be used for rinsing between colours, in disposable cups and dispose of the water and cups after each client.
- Take care when inspecting needles for defects, such as damaged or blunt points. Needles must be cleaned and sterilised prior to inspection, and then re-sterilised before they are used on a client.
- Solder sterile needles onto the sterile needle bars using a lead free solder, and then clean them to remove any flux residue. After soldering, they must then be re-sterilised according to section 6.5 and appendix B, prior to being used on a client.
- Needles must never be tested for sharpness on the operator's skin.
- Wash hands thoroughly (see section 9.1), and wear disposable gloves.
- Replace any sterile instruments accidentally touched by you or contaminated in any other way, either before or during a treatment, with another sterile instrument or needle.

6.2. Skin preparation**OUTCOME REQUIRED:**

That the risk of cross infecting the client with bacteria, fungus, spores or viruses from the client's skin surface is minimised.

Skin can be disinfected by use of any of the following preparations:

- 70% w/w ethyl alcohol
- 80% v/v ethyl alcohol
- 60% v/v isopropyl alcohol
- alcoholic (isopropyl and ethyl) formulations of 0.5 to 4% w/v chlorhexidine
- aqueous or alcoholic povidone-iodine (1% w/v available iodine).

Skin disinfectants may be decanted from their original container into a single-use container. On completion of each tattooing procedure for a client, any remaining fluid, single-use container and disposable cloth must be discarded with the container.

Alternatively, sterile, disposable, alcohol swabs (70% w/w isopropyl alcohol) may be used to disinfect the skin.

REQUIREMENTS:

Skin preparation:

- **The client's skin must be clean and free from apparent infection, sores or wounds on or around the tattoo site.**
- **If the area to be tattooed needs to be shaved, a new disposable safety razor must be used. After use, the razor must be immediately disposed of into a sharps container. If water is needed to rinse the razor during this process, the operator should use running water. If a bowl of water is used, then the bowl must be sterilised between clients.**
- **Prior to tattooing, the skin around the site must be disinfected. For the area around the eyes the site should be cleansed with warm water.**
- **Use-by dates on disinfectants must be observed.**

REQUIREMENTS:**When tattooing:**

- **A detergent-based lotion containing one of the above anti-bacterial preparations may be used on the skin, prior to placement of a stencil. The application of this lotion on to the skin should be the same as for anti-bacterial skin cleansers. Multiple-use roll-on deodorants must not be used to place a stencil.**
- **Because of the high risk of cross-contamination with blood, stencils must not be re-used on other clients.**
- **Before tattooing, the client's skin may be covered with lubricating jelly. Jelly must be removed from the original container using a clean single-use applicator. If extra jelly is required for the client, a new applicator should be used each time.**
- **Because of the high risk of cross-contamination from the pump outlet, self-dispensing pumps for lubricating jelly must be dispensed onto a clean single-use applicator.**
- **Lubricating jelly must not be removed from a container using gloves or bare fingers. Left-over jelly must be discarded and must not be used on another client.**

Although not a requirement, single use sachets of lubricating jelly are recommended.

6.3. Cleaning of work area after tattooing**OUTCOME REQUIRED:**

That the premises and any equipment used in the tattooing procedure are kept in a clean and hygienic state.

After the completion of each tattoo procedure on a client, it is recommended that:

- anti-bacterial lotions or creams be applied to the treated area of the skin, if necessary

- a suitable anti-bacterial skin cleanser, such as those listed in section 6.2, may be used on the area of the skin where the tattoo has been applied. This can also be used on the tattoo during the tattooing procedure
- a clean sterile dressing should be applied over the completed tattoo
- advice should be given to each client on how to care for their tattoo, and how to prevent infection from occurring
- if infection occurs, the client should be advised to seek medical advice.

REQUIREMENTS:

(See Appendix A, diagram 1 of these Guidelines for cleaning and sterilising sequence)

- **Dismantle tubes, needles and needle bars from the tattoo machine and place them into a puncture resistant sterilisable container, with a lid, immediately after completing the treatment. This container should be labelled "dirty instruments for sterilisation" and be used only for this purpose.**
- **Remove disposable gloves and dispose of them into the "infectious waste bin". Wash hands thoroughly as described in section 9.1.**
- **Whilst wearing heavy duty gloves, remove dirty instruments to the cleaning area of the premises and, as soon as possible, clean and sterilise them according to the procedures described in sections 6.5, 6.6 and Appendix B.**
- **Place other dirty articles, which do not require sterilisation or disposal, in the cleaning area and clean them as soon as possible.**
- **Do not store instruments or needles in disinfectant before or after cleaning.**
- **Dispose of all used single-use items, (other than sharps), such as applicators, ink caps, used tissues and wipes, into the infectious waste bin.**
- **Any linen used during a treatment should be placed in a dirty linen container and washed using the procedure outlined in section 6.6. Use disposable cloths and protective coverings on surfaces when a skin penetration procedure is performed on a client.**
- **Remove the elastic bands and plastic coverings from the tattoo machine and dispose of them into the infectious waste bin.**
- **Clean the tattoo machine by first wiping with a clean dry cloth, and then thoroughly wiping with clean cotton wool or a pad saturated with 70% w/w ethyl alcohol. Allow to dry naturally. Store handpiece in a clean, puncture proof, covered container.**
- **Clean containers used for collecting dirty instruments.**
- **Clean and sterilise or dispose of ink cap trays.**

6.3.1. Cleaning work surfaces

OUTCOME REQUIRED:

That all work surfaces are kept in a clean and hygienic state.

During a tattooing procedure, the surfaces of chairs, couches, and the like, as well as benches, tables and other working surfaces, should be protected so that direct contact with the client is minimised.

After use by each client, surfaces that have been in contact with the client's skin should be washed with warm water and detergent, dried with a clean disposable wipe and then either:

- covered with a clean towel; or
- covered with disposable paper.

Alternatively, remove any protective coverings on surfaces and equipment, taking care not to contaminate the surfaces which have been protected.

In addition to this, wash these surfaces, including wash basins, sinks and floors, with warm water and detergent at the end of each working day and when they become visibly soiled.

REQUIREMENTS:

Any surfaces or coverings, which have become contaminated with blood or any other body substances, must be cleaned as soon as possible in accordance with section 5.5 or disposed of in an infectious waste container.

6.4. **Cleaning tattoo instruments prior to sterilisation (and any instrument contaminated with blood or body substance)**

Refer to Appendix A, diagram 1 attached to these guidelines.

OUTCOME REQUIRED:

That instruments are cleaned to a standard that ensures effective sterilisation.

As soon as possible after use, reusable instruments must be cleaned. This is an essential first step prior to sterilisation. Cleaning should take place in the cleaning area set aside for this purpose.

Tattooing needles and instruments need to be cleaned and sterilised before use, if they are not purchased pre-sterilised.

- Wear thick, heavy duty rubber gloves when washing contaminated instruments. This makes handling them safer. Care must be taken at all times to prevent any penetration of the skin or splashing of mucous membranes (such as eyes) during the cleaning process and it is therefore recommended that protective eyewear (goggles) be worn.
- Carefully rinse the item in warm running water. Hot water could thicken protein material and make it stick to the instrument. Cold water will harden fats making cleaning more difficult.
- Fully dismantle the instruments.
- Immerse instruments in hot water and detergent in a sink. While holding the instruments under the surface of the water, scrub the instruments with a heat disinfected (see below) clean brush. This step may be carried out using an ultrasonic cleaner. Ultrasonic cleaners work by subjecting instruments to high frequency, high energy sound waves, causing material to be dislodged from instruments and dropped to the bottom of the tank or to be sufficiently loosened to be removed during the rinsing process:
- Rinse cleaned instruments in hot running water.
- Carefully dry instruments with a lint-free, single-use, disposable towel.
- Check condition of the equipment.

Note: Cleaning materials used in the process of cleaning equipment such as nylon brushes and pads, should be disinfected by boiling them for at least five minutes after each cleaning session. When not in use, they should be stored dry.

Ultrasonic cleaners must be operated with the lid on to prevent any micro-organisms present in the cleaning solution from becoming airborne and contaminating surfaces in the premises. They must be operated and maintained according to the manufacturer's directions and must comply with Australian Standard AS 2773.

It must be stressed that ultrasonic cleaners do not sterilise or disinfect instruments. However, they do provide a very safe and effective means of cleaning instruments prior to sterilisation.

REQUIREMENTS:

- **As soon as possible after use, reusable instruments must be cleaned in preparation for sterilisation.**
- **New, re-usable needles and instruments must be cleaned and sterilised before use, if they are not purchased pre-sterilised.**

6.5. Sterilising tattoo instruments (and any instrument contaminated with blood or body substance)

OUTCOME REQUIRED:

That all tattooing instruments which are used to penetrate client's skin are sterile before use.

Tattooing instruments which must be sterile before use are the tube, nozzle, needle, needle bar and any other instrument that may have been contaminated with blood or body substances.

Instruments must be cleaned and sterilised before they are used on another client, and forceps used to handle sterile instruments must also be sterile.

Effective sterilisation depends on the following factors:

- **Cleanliness.** The articles to be sterilised must be thoroughly pre-cleaned to allow good contact for all surfaces to be sterilised
- **Temperature.** The correct temperature must be maintained throughout the time the articles are being sterilised

- **Time.** The sterilising temperature must be maintained for the correct period of time.

The only appropriate method of sterilisation is in a machine which conforms to the relevant Australian Standard for that machine. For example, bench top autoclaves must conform with Australian Standard AS 2182, and dry heat sterilisers must conform with Australian Standard AS 2487. Several types of sterilisers are available. The procedure to sterilise instruments is outlined in Appendix B.

Sterilisation **cannot** be achieved using microwave ovens, pressure cookers, ultraviolet cabinets, boiling water units, ultrasonic cleaners and similar appliances.

Wiping instruments with disinfectant prior to use **does not** sterilise them.

REQUIREMENTS:

- **Instruments must be cleaned and sterilised before they are used on another client, and forceps used to handle sterile instruments must also be sterile.**
- **Sterilisers which conform with the relevant Australian Standards must be used for sterilisation and must be operated and maintained in accordance with the manufacturer's specifications.**
- **Instruments must not be stored in disinfectants before or after cleaning or sterilising.**

6.6. Cleaning of other instruments and articles

Refer to Appendix A, diagram 2 attached to these guidelines.

OUTCOME REQUIRED:

That all tattooing instruments and articles that are not intended to penetrate skin, but are used on clients, will be clean before use.

Follow this procedure with instruments and articles that can be immersed in water:

- wear heavy duty gloves
- dismantle instruments and rinse in warm water

- thoroughly wash with hot water and soap or detergent, using a good scrubbing action under water
- rinse in hot water (not less than 70°C) and allow to dry
- store instruments in a clean, puncture-proof and covered container
- disinfect brushes (see section 6.4)

Follow this procedure with instruments and articles that would be damaged if immersed in water, for example, an electrical hand piece:

- wear heavy duty gloves
- thoroughly wipe with a clean cloth and then wipe with a clean cotton pad saturated with 70% w/w ethyl alcohol
- allow to dry naturally
- store clean instruments in a clean, clearly labelled, puncture-proof and covered container.

Follow this procedure with garments and other washable fabrics:

- wash with soap or detergent in hot water, rinse and dry
- alternatively, have them commercially laundered
- store items in a clean, appropriate area such as a cupboard or drawer.

REQUIREMENTS:

- **All instruments and articles that are not intended to penetrate the skin, but that are used on clients, must be thoroughly cleaned before and after each use.**
- **Containers, including their lids, used for the storage of items and for the collection of dirty instruments, must also be thoroughly cleaned before and after each use.**

6.7. Disinfectants - should they be used?

With the exception of the use of 70% alcohol to disinfect instruments that would be damaged if immersed in water, all non skin penetration instruments used in tattooing procedures can be brought to a satisfactory level of freedom from micro-organisms if they are thoroughly cleansed in accordance with "instruments and articles that can be immersed in water" (section 6.6).

The routine use of disinfectants, including glutaraldehyde, is no longer recommended. Disinfecting solutions that have been used by many tattooists in the past, have

been found to be ineffective, have not been used properly, or have been found to be inappropriate for use in the tattooing industry. All reusable tattooing instruments must be thoroughly cleaned and sterilised according to the procedure in these guidelines.

6.8. **Bleach**

- Follow manufacturer's recommendations for use and safety.
- All references to "bleach", throughout these guidelines, relate to household grade bleach products with a concentration of 40,000 parts per million available chlorine (ppm avCl) or 4% avCl.
- To dilute bleach for a 1:4 dilution, add 1 cup of bleach (250 ml) to 3 cups of water (750 ml).
- Only dilute bleach on the same day it is to be used as its effectiveness deteriorates rapidly.
- To prevent deterioration, store bleach in dark, cool areas. Use-by dates on bleach products must be strictly observed.
- Wear gloves when handling bleach, as it can cause skin irritation.
- Take care to avoid bleach coming into contact with most metals as they can be easily rusted or corroded.

7. **REGISTRATION AND LICENSING**

There are a number of things which a person must do before opening a tattooing business. These include registration and licensing with the local council.

It is recommended that, before applying for registration and licensing, tattooists:

- contact the appropriate industry association for advice
- after selecting potential premises, consult with the local council to discuss their suitability
- contact the Business Licence Information Service and Small Business Tasmania, both of which are services provided by Tasmania Development & Resources, for business advice and information

7.1. **Registration of Premises**

A person conducting a business of tattooing must register with the local council any premises in which that business is conducted.

To apply for registration:

- submit detailed plans of the interior layout of the premises with the local council. Seek advice from the local council health department
- obtain local council approval of the plans. It is recommended that you do not commence work on your premises until approval of your plans has been received
- submit an application for registration with the council together with the appropriate fee
- obtain council registration of the premises prior to opening the business.

7.2. **Licensing**

A person who intends to carry on business as a tattooist must apply to the local council for a licence to carry on a public health risk activity.

All persons who engage in the activity of tattooing must be licensed. The only exception to this requirement is an employee, trainee or assistant who is under the direct supervision of a licensed person. No tattooing may be performed unless a licensed person is present.

To apply for a licence:

- submit an application for a licence to carry on a public health risk activity to the council together with the appropriate fee
- the licence to commence a public health risk activity should be obtained before the operator commences business.

Applicants should note that:

- applicants will be assessed as to their knowledge of the hygiene and infection control measures necessary to ensure competent, safe and hygienic services
- authorised officers from the local council will inspect the tattooing premises to ensure that the premises, and the systems and procedures used in those premises, do not pose a threat to public health.

8. PREMISES

OUTCOME REQUIRED:

That premises used for tattooing be kept in a clean and hygienic state.

8.1. General recommendations

The premises should be planned carefully to provide client treatment areas totally separate from areas set aside for cleaning and/or sterilising equipment.

The cleaning area should be arranged so that dirty instruments are received in one area. All dirty instruments should be moved through the cleaning area in a one way direction so that sterile instruments, clean instruments and dirty instruments remain separate from one another.

There should be sufficient bench space to accommodate equipment.

There should also be good lighting and ventilation throughout the premises.

REQUIREMENTS:

- **In the areas where tattooing is carried out and where instruments and equipment are cleaned, disinfected or sterilised, the floor, benches, shelving, fittings and furniture must be constructed of smooth, impervious materials and must be kept clean and in good repair.**
- **A hand basin, with hot and cold running water supplied through a single outlet, plus liquid soap or detergent and disposable paper towels, must be installed in the immediate area where tattooing is carried out.**
- **Hand basin taps must be "hands free" design, for example, elbow operated, foot operated, electronically controlled or knee operated.**
- **A sink with cold and hot water, additional to the hand basin, must be provided exclusively for washing equipment and instruments and should be located in the cleaning area.**
- **Clean covering material must be provided and changed between clients on surfaces in the work area where spillage or spattering of**

blood or body fluids is likely to occur, and for the protection of the client and the client's clothing.

8.2. Protective coverings

Soiled protective clothing used by the operator should be placed in a suitable receptacle, such as a clothes basket, and then cleaned as described in section 6.6.

All clean coverings and clothing should be stored in an appropriate clean area, such as a cupboard or drawer to prevent soiling or contamination.

Only clean linen, garments, towels or paper strips should be used or placed on clients.
Note: these items should not be regarded as sterile.

8.3. Disposal of sharps, infectious waste and non-infectious waste

OUTCOME REQUIRED:

That the risk of infection as a result of needlestick injury or from infectious waste is minimised.

It is essential that infectious wastes are properly segregated, packaged, labelled, handled and transported to minimise the risk of needle-stick injuries, and the transmission of infectious diseases, to waste handlers and the community.

The Department of Environment and Land Management (DELM) requirements for the management of infectious waste are detailed in the "Guidelines for the disposal of medical wastes in Tasmania" issued by DELM.

Operators should contact their local council for advice and assistance or contact the Land Environment and Planning division of DELM. For waste removal contractors, refer to the Yellow Pages under "Waste Reduction & Disposal Services".

8.4. Sharps

To prevent accidents involving potential transmission of blood borne diseases, such as HIV, hepatitis B and hepatitis C, sharps, such as needles, must be handled with care during procedures which involve their use.

Do not attempt to force items into the sharps container as injury to the operator's hand may result. Place multiple-use sharp instruments into the container at the end of their life.

Place sharps containers in all areas where sharps are used. Take care where these containers are placed so that children cannot reach them under any circumstances.

Once the container reaches the full level, seal it and dispose of it in accordance with the relevant requirements of DELM and the local council.

REQUIREMENTS

Sharps

- **Dispose of used sharps into an Australian Standard (AS 4031) specified, disposable sharps container immediately after use.**
- **The person who uses the disposable sharp instrument must be the person who places it into the sharps container.**

8.5. Disposal of infectious waste

All waste should be segregated into sharps, other infectious waste and non-infectious waste, and placed in a clearly labelled and appropriate container. The infectious waste bin liner should be a leak-resistant, sturdy yellow bag or container with the biohazard symbol and the words "infectious waste" clearly marked in black.

Infectious waste should be disposed of in accordance with the relevant requirements of DELM and the local council.

REQUIREMENTS:

Infectious waste, such as blood-stained swabs and blood-contaminated gloves, produced on the premises must be placed into a bin clearly marked "infectious waste" and kept out of reach of children.

8.6. Non-infectious waste

All non-infectious wastes, papers and so on, should be placed into a suitable refuse receptacle as soon as practicable after treating each client, and removed from inside the premises at least daily.

8.7. Animals

REQUIREMENTS:

Animals are not permitted in premises used for tattooing. This does not apply to guide or hearing dogs in the company of a vision or hearing impaired person.

9. STAFF HYGIENE

OUTCOME REQUIRED:

That each person engaged in the activity of tattooing maintains adequate standards in hygiene practices and infection control.

9.1. Hand washing

Rings should not be worn during tattooing, cleaning or hand washing.

Hand washing is the first step in any infection control program. The surface of hands and nails must be clean before any client contact. Abrasions, cuts or lesions must be covered by a waterproof dressing and gloves must be worn.

When to wash hands:

- before and after contact with each client
- immediately after contact with any blood or body substance
- immediately prior to wearing any new disposable gloves and attending a client
- immediately after removing disposable gloves for any reason
- after carrying out a procedure on a client
- after smoking
- after going to the toilet

How to wash hands:

- use soap or detergent with warm running water
- for a minimum of 15 seconds, rub hands vigorously during washing
- wash hands all over including backs of hands, wrists, between fingers, under fingernails and forearms up to the elbows
- rinse hands well
- thoroughly dry hands with a new single-use, disposable paper towel or dry them thoroughly under an air drier.

9.2. Smoking or consuming food or drink

Operators must not smoke or consume food or drink when carrying out procedures on a client.

Smoking is unhygienic as bacteria can be transferred from the mouth to fingers and then to clients.

REQUIREMENTS:

- **Operators must maintain personal hygiene at all times.**
- **Broken skin or infected exposed parts of the operator's body must be kept covered with a waterproof dressing that completely covers the affected area.**

10. PROTECTIVE WEAR FOR STAFF

OUTCOME REQUIRED:

That each person engaged in the activity of tattooing is provided with adequate protective wear and equipment.

10.1. Gloves

Operators must always wear disposable gloves whilst carrying out tattoo procedures and their hands must be thoroughly washed immediately prior to wearing gloves and immediately after removing them. It is important to remove gloves upon completion of each procedure.

Operators should wear heavy duty gloves whilst cleaning instruments prior to sterilisation. These gloves may be re-used but they should be replaced if torn, cracked, peeling or showing signs of deterioration.

10.2. Clothing

Operators should wear a clean washable garment, such as an apron or a uniform, intended exclusively for use when attending clients. Protective clothing protects the wearer's clothing or skin from contamination with blood.

10.3. Face and eye protection

Eye protection and masks are recommended when performing any procedure that may cause splash or spray of blood or body substance. It is possible to be infected with a bloodborne virus by getting infected blood in the eyes.

10.4. Footwear

To prevent needlestick injury from dropped instruments, operators should wear covered footwear at all times.

Protective clothing and equipment should be changed between clients and should be cleaned as required (refer section 6.6).

REQUIREMENTS:

- **Operators must always wear disposable gloves whilst carrying out tattoo procedures.**
- **Gloves must be:**
 - (a) removed and disposed of before leaving a client for any reason;**
 - (b) disposed of if they become torn, are pierced, show signs of deterioration, become contaminated with blood or are removed for any reason;**
 - (c) changed when performing separate and distinct procedures on the same client to avoid cross-contamination;**
 - (d) changed between attending clients;**
 - (e) never washed or re-used; and**
 - (f) disposed of in an infectious waste bag, lining a clearly labelled infectious waste bin. The infectious waste bag must be a yellow labelled bio-hazard bag.**

11. RECORD KEEPING

It is important to keep accurate records of every client. These records should include name, address and the date the treatment was given. A record of work done would also be useful. All record entries should be signed and dated by the operator.

These records will be valuable if there is any question of an infection problem later and may often help to protect the operator (for example, if the incubation period is too long or too short for the infection to have been transmitted to the customer as a result of a treatment given by the operator).

12. MOBILE TATTOOING

Due to the high risk of spread of infection where skin penetration procedures are carried out, such as tattooing, mobile tattooing businesses are not permitted.

Operators must not conduct the activity of tattooing on any premises which are not registered. For example, providing a home visit service is prohibited.

13. AGE LIMITS

In Tasmania it is against the law to tattoo any person under the age of 18 (*Police Offences Act 1935*).

APPENDIX A

Diagrams

- After removing and discarding plastic cover and elastic bands as infectious waste, dismantle tubes and the needle bar from tattooing machine and place them in a puncture resistant, sterilisable container with a lid. This container should be labelled “dirty instruments for sterilizing and be used only for this purpose.
- Remove disposable gloves and dispose them into the infectious waste bin. Wash hands thoroughly.

Diagram 1: Cleaning instruments required to be sterilised prior to the process of sterilisation (see section 6.4)

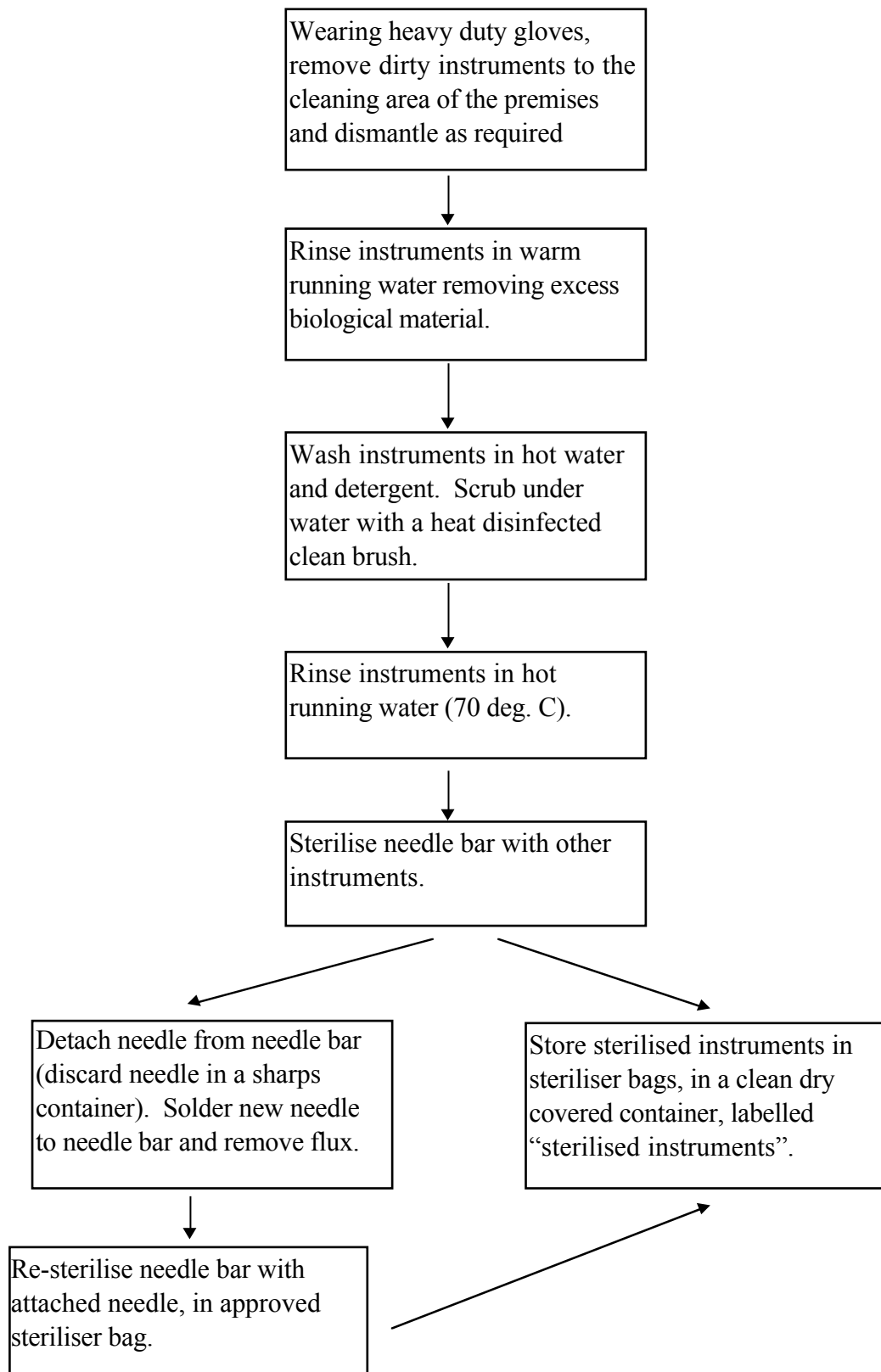
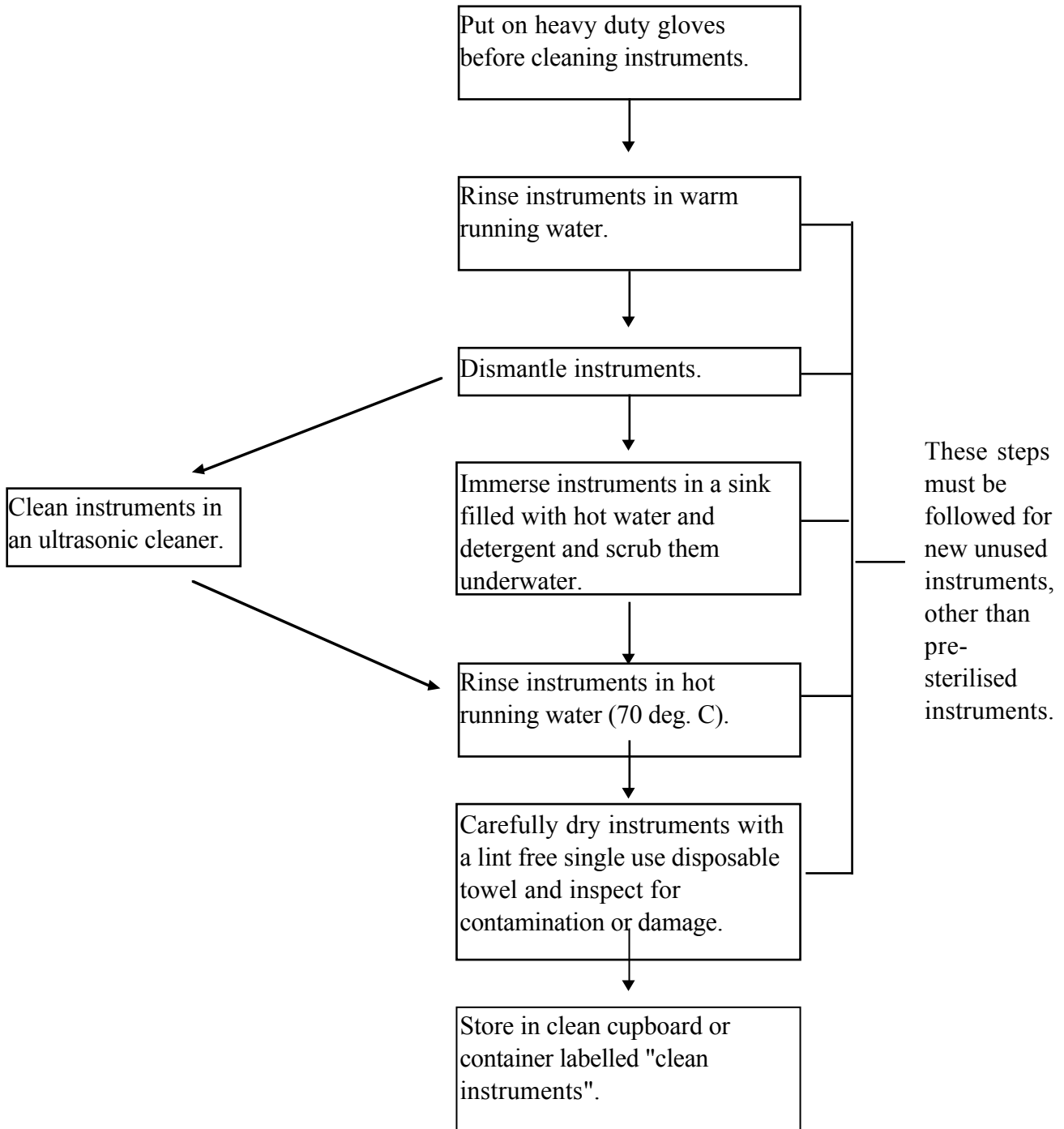


Diagram 2: Cleaning and handling instruments which do not penetrate skin and which can be immersed in water



APPENDIX B

How to sterilise instruments

1. Sterilisers

Autoclaving (steam under pressure) is the recommended method of sterilising instruments used in skin penetration procedures.

Ensure all people responsible for operating sterilisers are trained in their use. Specific instructions on the packing and the use of sterilisers should be displayed next to the machine. Sterilisers should be used in accordance with the manufacturer's instructions.

Before sterilising any item, make sure that it can be sterilised by the relevant method and that it has been cleaned according to the procedure outlined in these guidelines.

Sterile supply departments of many hospitals and other commercial services may contract to sterilise instruments on a fee-for-service basis. For many tattooists, this may offer a reasonable alternative to purchasing and maintaining a steriliser.

If a commercial service is used, it is important that the tattooist provide an appropriate and safe system for storage and transport of

- (a) soiled items; and
- (b) sterilised items.

If this option is chosen, it is important that records are maintained of the dates upon which instruments are sterilised and the name and address of the sterilising service.

2. Packaging of instruments prior to autoclaving

There are a number of self-sealing autoclave bag systems on the market, which can be obtained from most surgical supply companies. The purpose of placing cleaned instruments into these bags for autoclaving is to protect the contents from becoming contaminated after sterilising and to enable instruments to be more easily stored in a sterile condition. Sufficient instruments for use on one client should be packed in each bag.

If the autoclave does not have a drying cycle, autoclave bags must not be used and instruments must be used immediately after sterilising. If they are not used immediately they must be resterilised before use.

Autoclave bags are porous when they are wet and therefore, the instruments inside are liable to be contaminated if the bags are removed from the autoclave while they are still wet. Never open the door to aid the drying process.

Only a small number of well-spaced (to allow adequate air circulation), sealed packets of instruments are to be placed in autoclaves which do not have a drying cycle.

A chemical colour indicator should be included on the autoclave bag to indicate those instruments that have been sterilised. Autoclave bags are to be used once only and then disposed of.

3. Loading, operating and unloading the steriliser

When loading the steriliser care needs to be taken to ensure that the air will be able to freely circulate around the articles to be sterilised and that all surfaces will be exposed to steam or hot air.

Ensure that one of the following is reached whenever an autoclave is used:

- autoclave at a minimum of 121°C for 15 minutes (at a corresponding pressure of 103 KPa [15psi])
- autoclave at a minimum of 126°C for 10 minutes (at a corresponding pressure of 138 KPa [20psi])
- autoclave at a minimum of 132°C for 4 minutes (at a corresponding pressure of 186 KPa [27psi])
- autoclave at a minimum of 134°C for 3 minutes (at a corresponding pressure of 206 KPa [30psi]).

Temperature Pressure And Holding Time

TEMPERATURE	PRESSURE		HOLDING TIME
°C	KPA	PSI	MINUTES
121	103	15	15
126	138	20	10
132	186	27	04
134	206	30	03

The times given here are only "holding times" and do not include the time taken for the autoclave to reach the required temperature.

When using dry heat steriliser:

- Sterilise at 160°C for a minimum of one hour plus penetration time. This is s sterilising time which commences when the equipment to be sterilised reaches the required temperature
- Follow the manufacturer's recommendations at all times.

When unloading sterile instruments from the steriliser, care needs to be taken to avoid contaminating them. Items that have been dropped, torn, have broken seals or are wet are no longer sterile. Chemical indicators on sterilising packages should be checked to ensure that the steriliser reached the required temperature.

Sterile instruments that are not wrapped, must be removed from the steriliser using sterile forceps, and placed into a sterile container or work area, or stored in a way which maintains their sterility.

Used, dirty instruments must never be stored near clean areas where sterilised instruments are unloaded from the steriliser.

4. **Monitoring the sterilisation process**

There is clearly no point in using a steriliser, if it is not sterilising properly. Using instruments that are believed to be sterile may place clients at a considerable risk of infection. Therefore it is very important to monitor the sterilisation process on a regular basis to ensure that the steriliser is working correctly.

Sterilisers must be fitted with gauges to measure time, temperature and pressure as appropriate. During each use, these gauges must be viewed to ensure that the readings are correct and these readings should also be recorded.

Chemical indicator strips (such as those on autoclave bags) are available to use in autoclaves to test for procedural errors and equipment malfunction. These strips however only test physical characteristics of the autoclave, such as temperature and pressure.

Biological indicators need to be used to ensure that the sterilising process is destroying all forms of microbial life. Biological indicators must be used during installation, testing and after repairs and must be used according to the manufacturer's instructions. Biological indicator results should be recorded.

Sterilisers must be serviced at six monthly intervals to make sure that they are working correctly. Service records should be kept for information purposes.

5. **Storage of sterilised instruments**

If there is a need to store sterile instruments, they must be stored in a condition so as to maintain their sterility.

Sterile, packaged instruments must remain in the original sealed, sterilising bag and be kept in a clean, dry, covered container until ready for use.

Unpackaged, sterile instruments must be handled with sterile forceps, and be stored in a sterile container until ready for use.

APPENDIX C

Extract from the Guidelines for Needlestick and Blood Accidents issued by the then Australian National Council on Aids (issued March 1995)

Management of exposure to blood/body fluids contaminated with blood including needlestick/sharps injuries, with a potential for Human Immunodeficiency Virus (HIV), hepatitis B (HBV), hepatitis C (HCV) or other blood borne infections

PART A - INFORMATION FOR THE AFFECTED PERSON

At once:

- if skin is penetrated, wash the area well with soap and water (alcohol based hand rinses or foams [60-90% alcohol by weight] should be used when water is not available);
- if blood gets on the skin, irrespective of whether there are cuts or abrasions, wash well with soap and water;
- if the eyes are contaminated, rinse the area gently but thoroughly with water or normal saline, while the eyes are open; and
- if blood gets in the mouth, spit it out and then rinse the mouth with water several times.

Then report IMMEDIATELY to your supervisor or occupational health officer.

Complete an accident report form and include:

- date and time of exposure
- how the incident occurred; and
- name of the source individual (if known).

If a needle/syringe was involved, place it in a rigid-walled container. Take it with you to your doctor. Do not attempt to cover the needle because you run the risk of further injury.

In the event of an exposure to a source individual who has been previously tested and confirmed as HIV, HBV or HCV positive, the affected person should immediately be evaluated by a physician with experience in the management of those infections.

PART B - INFORMATION TO SUPERVISORS, MANAGERS AND OCCUPATIONAL HEALTH AND SAFETY OFFICERS

If an employee has suffered a possible or definite exposure it is important that you make sure that immediate steps are taken to reduce the risk to the employee of contracting a serious illness. An exposure may include one of the following:

- a superficial injury with a needle contaminated with blood or other body substance
- a wound that is not associated with visible bleeding produced by an instrument contaminated with blood or other body substance
- a skin lesion contaminated with blood or other body substance
- a mucous membrane or conjunctival contact with blood
- skin penetrating injury with a needle contaminated with blood or other body substance
- an injection of blood or other body substance
- a laceration or similar wound which causes bleeding
- any direct inoculation.

Ensure that the exposed area has been washed thoroughly.

Arrange for blood to be taken from the employee for pathology testing.

Find out whether a known source individual is involved in the incident and if so, contact a medical officer to organise for blood to be taken from the source individual to be tested for HIV antibody, HBV surface antigen and HCV antibody. Blood samples should be collected as soon as possible after the incident and processed urgently. Remember informed consent is required.

When the source individual is known to be positive to either HIV antibody, HBV surface antigen and HCV antibody, be sure that a doctor with experience in management of these infections has been contacted.

Ask the employee to complete an Incident Report Form.

Check to see that it is correctly filled out.

Make sure that the form includes the date and time of the incident, how the incident happened and whether the affected person has been stabbed by a syringe or other sharp or has been splashed.

Reassure the employee that only a small proportion of accidental exposure to blood results in infection.

The risk of infection with HIV following one needlestick exposure to blood from a client known to be infected with HIV has been reported as 0.3% (Annals Int. Medicine 1990; 113;740-746). The risk may vary according to the stage of infection of the source individual. Low risk is asymptomatic and high risk with symptomatic HIV infections (AIDS). This rate is considerably lower than for HBV.

(For further information contact ANCARD - see Appendix D.)

APPENDIX D**Contact details**

Public and Environmental Health Service, 1st Floor, 34 Davey St., GPO Box 125B,
Hobart TAS 7000
Ph 03 6233 3762
Fax 03 6223 1163

Standards Australia
Standards referred to in these guidelines can be obtained from Government Info Shop, 31
Criterion Street, Hobart TAS 7000
Ph 03 6234 1403

Local Government Association of Tasmania, 34 Patrick St., Hobart TAS. 7000
Ph 03 6231 0666

Professional Tattooing Association of Australia (PTTA), PO Box 6154, South Lismore
NSW 2480.
Ph 02 6621 8020

Regional Environmental Health Officer (North), Department of Community & Health
Services, Henty House, Launceston TAS 7250
Ph 03 6336 2229

Regional Environmental Health Officer (North West), Department of Community &
Health Services, Jones St, Burnie TAS 7320
Ph 03 6434 6477

Department of Environment and Land Management, GPO Box 44A, Hobart TAS 7001
Ph 03 6233 8011

Tasmania Development and Resources (Business Licensing Information Service), 22
Elizabeth St, Hobart TAS 7000
Ph 03 6233 5858

Australian National Council on AIDS and Related Diseases (ANCARD), C/ Department
of Health and Family Services, MDP 13, GPO Box 9848, Canberra ACT 2601
Ph 02 6289 7767

Workplace Standards Authority, PO Box 56, Rosny Park Tas 7018
Ph 1300 366 322

