

Guidelines For Body Piercing Good Practices

Body Piercing Working Group

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Definition

Body Piercing is the practice of piercing parts of the human body into which jewellery is inserted.

Introduction

These guidelines are aimed at minimising the dangers associated with body piercing, i.e. Hepatitis B and C, HIV transmission, bacterial sepsis and subsequent scarring. If pre-sterilised equipment is used and these guidelines are followed closely, the risk will be reduced.

General

The operator and premises must be licensed by the Local Authority under Section 6 of the London Local Authorities Act 1991.

Method Statement

The licensee shall submit, for approval, a written statement which should include the following points:

1. Body piercing shall not be undertaken on any person under the age of 18. Proof of age, preferably photo identification, should be sought if there is any uncertainty.
2. The operator shall discuss the client's medical history and ask whether he/she has suffered from the following:
 - Heart Disease
 - Eczema
 - Impetigo
 - Haemorrhaging
 - Seizures, e.g. epilepsy
 - Diabetes
 - HIV Infection
 - Hepatitis A,B and C
 - Acne
 - Psoriasis
 - Cellulitis
 - Allergic responses – anaesthetics, adhesive plasters and jewellery metal
 - Genital warts – if relevant to the piercing requested.

Where any of the above conditions exist, or there is a past history, written authorisation from the client's GP shall be required.

3. A written record¹ shall be taken of the client's personal details, medical history and any piercing carried out by the operator. Such records must be kept on the premises named in the licence, for a period of at least 3 years.

¹ Possible consideration for consent form – See Appendix 1

4. A notice shall be prominently displayed on the premises informing potential clients of the risks associated with body piercing including:
 - Blood poisoning (septicaemia)
 - Localised severe swelling and trauma around the piercing site
 - Localised infection, e.g. sepsis or urethritis
 - Scarring
 - Jewellery embedding
 - Allergic reaction to jewellery materials and antiseptics
 - Migration of jewellery.
5. Both the operator and the client shall not be under the influence of drugs, alcohol or other substances.
6. Prior to piercing, the operator shall “surgical scrub” with a suitable bactericidal soap and hot water (nails, hands and elbows), dry with clean disposable paper towels and then wear new disposable gloves for each client.
7. All piercings must be undertaken in conditions of appropriate privacy.
8. If the piercing site is to be marked then this should be done with a fine indelible pen, preferably genetian violet, prior to cleansing the piercing site.
9. In every case the skin in the area of the piercing site must be appropriately cleansed using a skin safe antiseptic solution prior to carrying out the piercing.
10. The administering of local anaesthetics’ injections other than by a registered medical practitioner, is an offence under the Medicines Act 1968. The administering of surface local anaesthetics is not recommended.
11. Pre packed, pre sterilised needles shall be used for piercing and shall only be used once before disposal in an approved yellow “sharps box” (BS7320 1990).
12. Hollow piercing needles should be a minimum of 1.55mm in diameter. To help reduce healing complications, a needle over 2.5mm should not be used.
13. All surgical instruments in contact with broken skin and all jewellery that is to be inserted into the skin must be sterilised by an approved autoclave and stored under sterile conditions.
14. All equipment (e.g. Autoclave/ultrasonic cleaner) shall have a suitable maintenance and testing programme in accordance with the manufacturers guidelines.
15. A “No Touch” technique, e.g. using forceps should be used as much as possible to reduce the risk of infection.
16. Jewellery shall be of a suitable grade, i.e. surgical stainless steel, solid 14K or 18K gold, niobium, titanium and platinum.
17. There shall be no attempt to increase the size of the piercing until it is completely healed. Such increasing should be carried out gradually by the insertion of progressively larger gauge sterile jewellery. No subsequent bleeding or tearing should occur.

18. Clients shall be given verbal and written information regarding body piercing to include:

- Normal bathing and showering is permitted but otherwise keep dry
- Clean hands before touching jewellery
- Turn jewellery when wound is not dry
- Do not cover wound closely, allow access air
- Expected healing time of the wound
- Possible indications of complications
- Advice on how to deal with slight redness/swelling/pain
- Advice to return to the piercer or visit their GP if redness/swelling/pain continues to be experienced.

General Considerations

1. Whilst there are no formal qualifications currently for Body Piercing, it is expected that the piercer should have first obtained suitable knowledge and supervised experience.
2. There must be a first aid kit on site that complies with the Health and Safety (First Aid) Regulations 1981 and it is recommended that the piercer holds an HSE approved Basic First Aid qualification.
3. It is strongly recommended that the piercer is vaccinated against the Hepatitis B virus.
4. Body piercing shall not be undertaken by persons under the age of 18 years².
5. Ear piercing guns must not be used for other parts of the body, however, the following guns are acceptable for the nose:
 - Medisept
 - Blomdahl Medical Ear Piercing System

However, the use of these guns still poses a high risk as a nose piercing cannot be performed hygienically.

Additional Advice for Genital Piercings

1. All genital piercing must be by appointment only. The client must be recommended to bring a friend for moral support and help ensure there is no misunderstanding or allegation of impropriety.
2. The piercer must hold a current HSE approved Basic First Aid qualification.

NOTE: The Prohibition of Female Circumcision Act 1985 states that a person who “*excise, infibulate or otherwise mutilates the whole or any part of the labia majora or labia minora or clitoris of another person*” are guilty of a criminal offence. Therefore piercing the female genitalia could be an offence and this must be borne in mind should such a piercing be requested.

Appendices

1. Specimen of consent form
2. Aftercare Guidelines for Skin Piercings and approximate healing times
3. Sources of information

² Consideration may be given to licensing those under 18 if suitable experience has been obtained

Appendix 1

SKIN PIERCING CONSENT FORM

To be filled in clearly and correctly by persons wishing to be pierced

NAME

ADDRESS

.....

TELEPHONE

AGE

This is to certify that I, the above named and undersigned, today gave my correct name, address and age when asked to do so by

ADDRESS OF SKIN PIERCING ESTABLISHMENT

I fully understand that I must be 18 years of age to be pierced or to attempt to obtain any body piercing.

This is to certify that I, the above named and undersigned, do give my permission to be pierced and I am fully aware of the process involved and understand the importance of the daily aftercare procedure.

SIGNED

DATE

TYPE OF PIERCING

Appendix 2

After care guidelines for Skin Piercing

Clients are advised to follow the simple aftercare procedure outlined below:

A Normal Piercing:

- May be tender, itchy, slightly red or bruised for a few weeks.
- May bleed a little for the first few days.
- May secrete a whitish-yellow fluid (plasma) which crusts on the jewellery; this is not pus.
- May tighten around the jewellery as it heals, making turning somewhat difficult.

Cleaning / Healing Process:

- Consult the pharmacist about gentle antibacterial soaps containing triclosan, however, if you are sensitive to triclosan there are alternatives available.
- Wash hands well before cleansing the pierce. First let the water help remove any crusted matter, then rotate a little liquid antibacterial soap gently into the piercing for no more than 2-3 minutes, then rinse thoroughly while rotating jewellery. Do not allow residue to remain in the piercing.
- Clean the piercing no more than twice a day. Cleaning more frequently may damage the delicate skin cells and cleaning less frequently may invite an infection. When cleaning is not in progress the piercing should be left alone.
- With an **oral** piercing, after eating, smoking or putting anything in the mouth, rinse with antibacterial mouthwash at a dilution of 50% - 75% to avoid damaging new skin cells. It is also necessary to disinfect the piercing, twice a day, with warm salt water or a mild antiseptic mouthwash.
- Many piercees have found that Vitamin C, multivitamins and a Zinc supplement speed regeneration of tissue.
- Hot soaks and compresses, with the optional addition of ¼ teaspoon of sea salt per cup of clean water are strongly suggested for **navel** piercings. Avoid wearing belts, tight trousers or restrictive clothing for about 6 months – 1 year.
- **Genital** piercees (male/female) can use a pantyliner to absorb excess moisture and cushion the piercing. Avoid restrictive clothing, irritating clothing or clothing that limits oxygen flow to the area. Any sexual contact should be gentle and latex barriers should be used to protect the piercing from partner's body fluids.

Changing and Removing Jewellery

Everyone heals at a different rate. The average healing times for piercings, provided they are cleaned twice daily and treated like new healing tissue, are shown below. It is important to remember that even after the initial healing period, the piercing will still need one full year or longer to completely heal. Always treat the piercing with care and gentleness.

- Lip, Labret: 6-8 weeks
- Tongue: 4-6 weeks
- Cheek: 2-3 months
- Naval: 6 months to 2 full years
- Nipple: 2-6 months
- Genital Piercings: 4-8 weeks

The piercing will not be completely healed for several years. Jewellery should not be changed during the initial healing period (often at least 6 months). Clients should be advised to always wear the appropriate jewellery in the piercings, even when fully healed. The piercer should be contacted, for further advice, if removal of the jewellery is being considered on a temporary or permanent basis.

What to do in the case of infection:

Infections are caused by contact with bacteria, fungi or other living pathogens. Piercing infections can usually be traced to one of the following activities:

- Touching the piercing with unwashed hands
- Oral contact with the piercing, including your own saliva
- Contact with hair, cosmetics, oils, infrequently washed bedding or other agents
- Going into a pool, hot tub, lake, ocean or other body of water.

The following are indications of infection:

- Redness and swelling
- A sensation of heat at the piercing site
- Pain, especially throbbing or spreading pain
- Unusual discharge. It may be yellowish, greenish or greyish.

While it is never inappropriate to contact the doctor, a visit to the piercer may be beneficial. Do not remove the jewellery as this may aggravate the problem by closing off the drainage for the discharge matter. You might consult the doctor regarding the use of oral antibiotics.

Common problems that can be avoided:

- Overcleaning, vigorous cleaning, or using a cleanser that is too strong can produce symptoms very similar to an infection. The skin may be very tender and appear shiny, and there may be a clear discharge.
- Friction caused by tight or heavy clothing, rough sexual activity, or excessive movement of the area can cause dark redness, a hard growth of skin over the scar (keloids), discharge and rejection/migration.
- Stress, poor diet or illness can cause longer healing times or migration of the piercing.
- Occasionally, the selected jewellery may not be appropriate. This may or may not be due to circumstances that occurred after the piercing. If the jewellery is too thin or too heavy, too large or too small in diameter, or not the appropriate style, healing problems may be experienced. The piercer should be contacted if a change in jewellery is required.