RECOMMENDED PROCEDURE FOR EAR PIERCING.

PREMISES: These should be generally clean. A clean table surface covered with a plastic laminate or other impervious surface should be available. The operator should have easy access to hot and cold running water, soap and paper towels, and should wash their hands before and after each session.

RECORDS: It is advisable to keep records of the name and address of every patient, and the date of the ear piercing. It is important for professional practitioners to keep records of their patients and customers. Scrupulous records prove valuable if there is any question of an infection problem later. Records should be kept for a minimum of one year. A daybook or diary is adequate. A card index may be an additional help.

PROCEDURE:

- 1. Wash and dry hands prior to carrying out piercing.
- 2. Seat customer, mark ear lobes, preferably with GENTIAN VIOLET PEN.
- 3. Place clean paper tissue or towel on table top, or customer's shoulder
- 4. Clean customer's ears with spirit swab (e.g. medi-swab).
- 5. Clean operator's hands with fresh spirit swab.
- 6. Open pre-sterilised pack and pierce ears.
- 7. Adjust tightness of earring in each ear using clean tissue to hold earring.
- 8. Dispose of plastic capsule or holders, swabs and paper tissues and towel in plastic-lined bin.
- 9. Clean hands with spirit-swab.
- 10. Explain after-care to customer.
- 11. Begin again at 2) on next customer. If the earrings required adjustment after inserting into the ear lobe, begin at 1).

AFTER-CARE:

- a. No antibiotic lotions, creams or ointments should be used on the pierced ear, unless prescribed by a doctor.
- b. Normally keeping the ear clean and dry should be adequate. If the ear becomes wet i.e. after bath, shower, washing or swimming, it should be dried with a clean paper tissue. The only "disinfectant" that is likely to be useful is surgical spirit, which should be used sparingly, if at all. Most other disinfectants are unlikely to be helpful and may cause an allergy.