NORTH CAROLINA 24 HOUR CONTINUING EDUCATION COURSE

License renewal 2019 - 2020
SECTION 1 HIV/AIDS and Communicable Diseases
(6 Credit Hours)

Course Learning Objectives
- The purpose of this course and the outcome expected is for participants to develop:
  - An increased understanding of the HIV virus and AIDS and related issues
  - A full knowledge of the Modes of HIV Transmission
  - The practical skills needed to apply various Infection Control Procedures
  - The knowledge of the core concepts of Clinical Management, testing and treatment of HIV/AIDS
  - A complete understanding of the skills necessary for applying HIV infection prevention practices
  - A more accurate perception of the attitudes people have towards HIV/AIDS
  - The ability to choose appropriate behavior in dealing with persons who may have the virus or syndrome

Course Overview:
Although there are concerns about many diseases, specific attention is being given to HIV infection and AIDS because of the varied and complicated issues they bring to our workplace and the community. This course takes a look at what HIV is when it came into the picture and where it has gone to over the last 25 years. Within the course material is a review of why and how HIV infection ultimately results in AIDS and the ways that prevention, testing and treatment are clinically managed. A special focus it given in this course on the stigma of HIV/AIDS and how this has played a major role in the spread, which has impeded the control of HIV/AIDS world wide. As well, looked at here is the impact the social stigma plays in the personal and career lives of those who may be infected with HIV, and the resulting laws that now prevail as a result of this. This course also makes suggestions on work place programs that have proven success in protecting the rights of those who may be infected and as such, reduce liability to salon professionals who otherwise may not be aware of how to appropriately deal with persons with the virus or syndrome. Another factor that stems from HIV/AIDS, co-infection with other diseases, particularly STD’s and STI’s is gone over with an emphasis on new strands of TB and various other communicable diseases and disorders that can affect the salon environment, and therefore should always be a constant concern to salon professionals. In summation this course features proper infection control practices to reduce and eliminate the spread of infection through the implementation of Universal/Standard controls and proper cleaning, disinfecting, sanitization and hand washing methods prescribed by the North Carolina Board of Cosmetic Arts Examiners under the authority given by law.

The epidemic continues to affect all groups; however, of the 40,000 Americans who will become infected with HIV this year, current research has indicated half will be under the age of 25. Infections among women and adolescents are increasing the fastest of all population groups. AIDS affects our children, our co-workers, our employees and our customers. Educating everyone about how to protect themselves and their loved ones is the only way that we can stop the spread of this needless threat to the public health and the world economy.

Number of people living with HIV in 2007
Total 33.2 million [30.6–36.1 million]
Adults 30.8 million [28.2–33.6 million]
Women 15.4 million [13.9–16.6 million]
Children under 15 years 2.5 million [2.2–2.6 million]

Bloodborne Pathogens
Bloodborne Pathogens means pathogenic microorganisms such as viruses or bacteria that are present in human blood and can cause disease in humans. There are many different bloodborne pathogens. These pathogens include, but are not limited to, malaria, syphilis, Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), and the Human Immunodeficiency Virus (HIV).
A Virus Called HIV Causes AIDS
HIV stands for human immunodeficiency virus. The term AIDS applies to the most advanced stages of HIV infection. It has been identified as the virus that causes AIDS (acquired immunodeficiency syndrome). Evidence indicates that AIDS is caused by the human immunodeficiency virus (HIV), which was discovered in 1983. HIV is spread from one person to another through sharing of needles, unprotected sexual contact, blood and body fluids. HIV infection could be described as having 3 stages: acute/early, middle and advanced (AIDS). The HIV virus attacks a person's immune system and, over time, destroys it. By the time an individual begins to experience diseases and infections as the consequence of the destructive process of HIV, his/her T-cell count is commonly below 200 per milliliter. An individual develops AIDS when his/her immune system can no longer successfully fight off disease and infection, and if not attended to, the person will die from complications. HIV does not discriminate and anybody can acquire the virus. People infected with HIV may seem and feel healthy for an extended period. Not uncommonly, it can take up to 10 years for a person infected with HIV to develop AIDS. Thus, infected people may spend a decade not knowing that they are infected, yet are all the while infecting others. Symptoms of infection differ from one person to another. Some people get fevers and diarrhea others get swollen glands. Commonly, people infected lose weight for no apparent reason while the virus cripples the body's defenses. At the time people develop AIDS, they might have illnesses that people not infected would usually resist. It is necessary to take a blood test in order to determine if an individual is infected with HIV.

The Centers of Disease Control and Prevention (CDC) are responsible for tracking the spread of AIDS in the United States. The CDC defines a person with AIDS as someone with:
- A positive HIV antibody or antigen test,
- A T-cell (CDR) count of fewer than 200 CD4+ T cells per cubic millimeter of blood. (Healthy adults usually have CD4+ T-cell counts of 1,000 or more.) and,
- A diagnosis of one or more opportunistic diseases or conditions associated with AIDS.

In addition, the definition includes 26 clinical conditions that affect people with advanced HIV disease, known as OI’s or opportunistic infections.

Modes of HIV Transmission
For more than 20 years, scientists have made new discoveries about HIV infection and AIDS. But one piece of information has never changed – how the disease spreads. Scientists have confirmed and reconfirmed this for more than 20 years. The basic facts about HIV transmission and prevention are sound. They can be trusted. These are some of the common ways, in which HIV is spread. The most effective method of HIV transmission is blood to blood, however, a sufficient amount of HIV blood must gain entry into the bloodstream to cause infection. Records have shown that contact between infected blood and intact skin (i.e. no breaks in the skin, lesions, or open sores) cannot transfer the virus from one person to another. Conversely, having vaginal, anal, or oral sex without a latex condom, or sharing needles or syringes will. It should also be known that AIDS can be transmitted from an infected mother to her baby during pregnancy, childbirth, and, although rarely, also through breast-feeding.

Risky Behavior
HIV can infect anyone who practices risky behaviors such as:
- Sharing drug needles or syringes
- Having sexual contact, including oral, with an infected person without using a condom
- Having sexual contact with someone whose HIV status is unknown

Infected Blood
HIV also is spread through contact with infected blood. Before donated blood was screened for evidence of HIV infection and before heat-treating techniques to destroy HIV in blood products were introduced, HIV was transmitted through transfusions of contaminated blood or blood components. Today, because of blood screening and heat treatment, the risk of getting HIV from such transfusions is extremely small.

Contaminated Needles
HIV is frequently spread among injection drug users by the sharing of needles or syringes contaminated with very small quantities of blood from someone infected with the virus.
It is rare, however, for a patient to give HIV to a health care worker or vice-versa by accidental sticks with contaminated needles or other medical instruments.

**Mother to Child**

Women can transmit HIV to their babies during pregnancy or birth. Approximately one-quarter to one-third of all untreated pregnant women infected with HIV will pass the infection to their babies. HIV also can be spread to babies through the breast milk of mothers infected with the virus. If the mother takes certain drugs during pregnancy, she can significantly reduce the chances that her baby will get infected with HIV. If health care providers treat HIV-infected pregnant women and deliver their babies by cesarean section, the chances of the baby being infected can be reduced to a rate of 1 percent. HIV infection of newborns has been almost eradicated in the United States due to appropriate treatment.

A study sponsored by the National Institute of Allergy and Infectious Diseases (NIAID) in Uganda found a highly effective and safe drug for preventing transmission of HIV from an infected mother to her newborn. Independent studies have also confirmed this finding. This regimen is more affordable and practical than any other examined to date. Results from the study show that a single oral dose of the antiretroviral drug nevirapine (NVP) given to an HIV-infected woman in labor and another to her baby within 3 days of birth reduces the transmission rate of HIV by half compared with a similar short course of AZT (Azidothymidine). For more information on preventing transmission from mother to child, you should visit their Web site at http://aidsinfo.nih.gov/guidelines.

**Saliva**

Although researchers have found HIV in the saliva of infected people, there is no evidence that the virus is spread by contact with saliva. Laboratory studies reveal that saliva has natural properties that limit the power of HIV to infect, and the amount of virus in saliva appears to be very low. Research studies of people infected with HIV have found no evidence that the virus is spread to others through saliva by kissing. HIV, however, can infect the lining of the mouth, and instances of HIV transmission through oral intercourse have been reported. Scientists have found no evidence that HIV is spread through sweat, tears, urine, or feces.

**Casual Contact**

Studies of families of HIV-infected people have shown clearly that HIV is not spread through casual contact such as the sharing of food utensils, towels and bedding, swimming pools, telephones, or toilet seats. HIV is not spread by biting insects such as mosquitoes or bedbugs.

**Sexually Transmitted Infections**

If you have a sexually transmitted infection (STI) such as syphilis, genital herpes, chlamydial infection, gonorrhea, or bacterial vaginosis appears, you may be more susceptible to getting HIV infection during sex with infected partners.

**Early Symptoms of the HIV Virus**

If you are like many people, you will not have any symptoms when you first become infected with HIV. You may, however, have a flu-like illness within a month or two after exposure to the virus. This illness may include:

- Fever
- Headache
- Tiredness

Enlarged lymph nodes (glands of the immune system easily felt in the neck and groin); these symptoms usually disappear within a few weeks to a month and are often mistaken for those of another viral infection. During this period, people are very infectious, and HIV is present in large quantities in genital fluids. More persistent or severe symptoms may not appear for 10 years or more after HIV first enters the body in adults, or within 2 years in children born with HIV infection. This period of "asymptomatic" infection varies greatly in each individual. Some people may begin to have symptoms within a few months, while others may be symptom-free for more than 10 years.

Even during the asymptomatic period, the virus is actively multiplying, infecting, and killing cells of the immune system. The virus can also hide within infected cells and lay dormant. The most obvious effect of HIV infection is a decline in the number of CD4 positive T (CD4+) cells found in the blood—the immune system's key infection fighters. The virus slowly disable or destroys these cells without causing symptoms. As the immune system worsens, a variety of complications start...
to take over. For many people, the first signs of infection are large lymph nodes or "swollen glands" that may be enlarged for more than 3 months.

Other symptoms often experienced months to years before the onset of AIDS include:
- Lack of energy
- Weight loss
- Frequent fevers and sweats
- Persistent or frequent yeast infections (oral or vaginal)
- Persistent skin rashes or flaky skin
- Pelvic inflammatory disease in women that does not respond to treatment
- Short-term memory loss

Some people develop frequent and severe herpes infections that cause mouth, genital, or anal sores, or a painful nerve disease called shingles. Children may grow slowly or be sick a lot.

Opportunistic Infections
HIV doesn't kill anybody directly. Instead, it weakens the body's ability to fight disease. Infections, which are rarely seen in those with normal immune systems, are deadly to those with HIV. In the United States, opportunistic infections continue to produce morbidity and mortality among the estimated 650,000-900,000 persons who are infected with HIV, especially among the estimated 200,000-250,000 persons who are severely immunosuppressed. People with HIV can get many infections (called opportunistic infections, or OIs), sometimes referred to as opportunistic diseases. Types of OI’s include:
- Bacterial and Mycobacterial
- Fungal Infections
- Malignancies
- Protozoal Infections
- Viral Infections
- Neurological Conditions

Cancers
Health care providers use radiation, chemotherapy, or injections of alpha interferon—a genetically engineered protein that occurs naturally in the human body—to treat Kaposi's sarcoma or other cancers associated with HIV infection.

Most opportunistic infections generally do not affect healthy people. In people with AIDS, these infections are often severe and sometimes fatal because the immune system is so ravaged by HIV that the body cannot fight off certain bacteria, viruses, fungi, parasites, and other microbes.

Symptoms of Opportunistic Infections
Common symptoms in people with AIDS include:
- Coughing and shortness of breath
- Seizures and lack of coordination
- Difficult or painful swallowing
- Mental symptoms such as confusion and forgetfulness
- Severe and persistent diarrhea
- Fever
- Vision loss
- Nausea, abdominal cramps, and vomiting
- Weight loss and extreme fatigue
- Severe headaches
- Coma

Children with AIDS may get the same opportunistic infections as do adults with the disease. In addition, they also have severe forms of the typically common childhood bacterial infections, such as conjunctivitis (pink eye), ear infections, and tonsillitis.

People with AIDS are also particularly prone to developing various cancers, especially those caused by viruses such as Kaposi's sarcoma and cervical cancer, or cancers of the immune system known as lymphomas. These cancers are usually
more aggressive and difficult to treat in people with AIDS. Signs of Kaposi's sarcoma in light-skinned people are round brown, reddish, or purple spots that develop in the skin or in the mouth. In dark-skinned people, the spots are more pigmented.

During the course of HIV infection, most people experience a gradual decline in the number of CD4+ T cells, although some may have abrupt and dramatic drops in their CD4+ T-cell counts. A person with CD4+ T cells above 200 may experience some of the early symptoms of HIV disease. Others may have no symptoms even though their CD4+ T-cell count is below 200.

Many people are so debilitated by the symptoms of AIDS that they cannot hold a steady job nor do household chores. Other people with AIDS may experience phases of intense life-threatening illness followed by phases in which they function normally.

Many of these illnesses are very serious, and they need to be treated. Some can be prevented. A number of available drugs help treat opportunistic infections. These drugs include:

- Foscarnet and ganciclovir to treat CMV (cytomegalovirus) eye infections
- Fluconazole to treat yeast and other fungal infections
- TMP/SMX (trimethoprim/sulfamethoxazole) or pentamidine to treat PCP (Pneumocystis carinii pneumonia)

**Facts About HIV/AIDS**

1) AIDS results from the late stage of infection with HIV. The onset of AIDS can take up to 10 or more years, and new drug therapies can delay the progression of the disease into AIDS even longer. A person infected with HIV may look and feel healthy for many years, but can still transmit the virus to others, which is why testing is so important.

2) HIV is transmitted through the exchange of any HIV infected body fluids. Transfer may occur during all stages of the disease. The HIV virus is found in the following fluids: blood, semen (and pre-ejaculated fluid), vaginal secretions, and breast milk. HIV does not survive long outside the body and therefore can only be transmitted when any of the above body fluids from an infected individual enters an uninfected individual.

3) HIV most frequently is transmitted sexually. The only way you can be completely sure to prevent the sexual transmission of HIV is by abstaining from all sexual contact. How can you have sex and still significantly reduce your risk of contracting HIV? By correctly using a latex condom from start to finish, every time you have vaginal sex or anal intercourse. Use a condom with each act of oral sex on a man. Oral sex can transmit HIV. Use a dental dam or a condom cut open while performing each act of oral sex with a woman. Bear in mind that all semen, even pre-ejaculated fluid, can carry the HIV virus. Engage in safer sex practices that involve no penetration, (such as kissing, massaging, hugging, touching, body rubbing, and masturbation).

4) It is important to know that in the US, all blood, organs, and tissues used during transfusions or surgeries have been tested for HIV. Medical professionals immediately and carefully dispose of all contaminated products. All medical and surgical instruments, including those used for tattooing and body piercing, must be completely sterilized or discarded properly after each use in order to prevent HIV transmission. For information on HIV/AIDS in the workplace, call the CDC National HIV/AIDS Hotline at 1-800-342-AIDS.

5) Anonymous HIV testing is the only form of HIV testing that is not name based. If you receive a test from an anonymous testing center, no one but you will know the results of your test. Currently, 40 states plus the District of Columbia and Puerto Rico offer anonymous testing.

6) You do not get HIV from donating blood, from mosquito bites or bites from other bugs, from the urine, sweat, or sneezes of an infected person, nor from public restrooms, saunas, showers or pools. You also do not get HIV from being friends with a person who has HIV/AIDS, touching, hugging, or dry kissing a person with HIV, sharing towels or clothing, or sharing eating utensils.

7) Young adults (under age 25) are quickly becoming the most at risk age group, now accounting for an estimated 50% of all new HIV infections in the United States. Teenagers and young people here and around the world need to take an active role in changing the course of the HIV/AIDS epidemic by adjusting their behaviors and attitudes toward the disease.
8) Discriminating against people who are infected with HIV/AIDS, or anyone thought to be at risk of infection, violates individual human rights. Every person infected with and affected by HIV/AIDS deserves compassion and support, regardless of the circumstances surrounding their infection. Education is crucial in getting this message out.

**Prevention and Safe Practices**

HIV is a very dangerous disease, that you may have less of a chance of contracting if you follow some basic guidelines for prevention. The following facts about HIV and AIDS will educate you on how to protect yourself. If you are sexually active and want to avoid HIV, you must have sex only with a partner who does not shoot drugs, does not share needles or syringes, is not infected, and is monogamous.

Are you asking if this is even possible? Remember that these things are impossible to know for sure about someone unless they never leave your side. There is never a 100% guarantee that a partner will not participate in risky behavior unbeknownst to you. You can safeguard yourself from the virus. Some of the primary methods are:

- Do not use drugs or alcohol. They keep you from making wise decisions and thinking clearly.
- Do not have sex. You can get infected from one sexual experience.
- Never share any kind of needle or syringe.
- If you do have sex, learn and use safe sex practices.
- Birth control pills and diaphragms will not protect you from HIV or other STD’s.

**Effectiveness of Condoms**

Condoms are classified as medical devices and are regulated by the Food and Drug Administration (FDA). There are many different types and brands of condoms available—however, only latex or polyurethane condoms provide a highly effective mechanical barrier to HIV. In laboratories, viruses occasionally have been shown to pass through natural membrane ("skin" or lambskin) condoms, which may contain natural pores and are therefore not recommended for disease prevention (they are documented to be effective for contraception). Condom manufacturers in the United States test each latex condom for defects, including holes, before it is packaged. The proper and consistent use of latex or polyurethane (a type of plastic) condoms when engaging in sexual intercourse—vaginal, anal, or oral—can greatly reduce a person’s risk of acquiring or transmitting sexually transmitted diseases, including HIV infection. For condoms to provide maximum protection, they must be put on prior to genital contact, they must be used consistently (every time) and correctly, from beginning to end, each time you have vaginal, anal, or oral sex.

Women may wish to consider using the female condom when a male condom cannot be used. There is always a chance you won’t know if you or your partner is infected. Condoms can provide protection for those who choose to have more than one sexual partner; however, condoms are not a 100% guarantee against the AIDS virus.

Condoms do not absolutely exclude the possibility of becoming infected because they can rupture, tear, or even slide off. Latex condoms are approximately 90% effective at preventing pregnancy and the passage of almost all sexually transmitted diseases. Similarly, numerous studies among sexually active people have demonstrated that a properly used latex condom provides a high degree of protection against a variety of sexually transmitted diseases, including HIV infection. This figure would be higher if everyone used a condom properly. For more detailed information about condoms, see the CDC publication “Male Latex Condoms and Sexually Transmitted Diseases.”

Make careful choices. Whether or not to have sex, or whether or not to use condoms, is a decision you may be faced with at one time or another. Many will be faced with this decision time and time again. Apply what you have learned to make judgments about sex that are beneficial to you and your mate. Get the most recent information from the CDC. It is impossible for a donor to get HIV from giving blood or plasma. In the United States every piece of equipment (needles, tubing, containers) used to draw blood is sterile and brand new. It is used only once and then destroyed.

The likelihood of acquiring HIV from a blood transfusion in the U.S. is currently remote. At the beginning of the epidemic, some people contracted the virus through infected blood in the nation’s blood supply. Subsequently, safeguards were implemented and the risk of getting an HIV contaminated transfusion has diminished significantly, being now estimated at two in one million units of blood.
There is no approved vaccine for HIV or a cure for AIDS. However, there are several medications that are now available to help treat the symptoms of AIDS and permit patients to live more comfortably. None of these medications can exclude a person from becoming infected with HIV, nor can they cure AIDS. On the other hand, people can take an active role in the prevention of HIV infection by understanding the facts and following the guidelines.

**Diagnosis Through Blood Tests**

The only way a person can know if he or she has been infected with HIV is to be tested. Specific blood tests are required to look for, and to verify the presence of HIV antibodies in the blood. In nearly all cases, the body develops antibodies to combat the virus that enters the bloodstream. If it is possible that you may be infected with HIV, you should consider taking an antibody blood test and get counseling both before and after being tested.

Accepted blood tests are over 99% accurate. Still, there is usually a window period of a few weeks to a few months subsequent to a person becoming infected before enough antibodies develop to be detected. Get in touch with your local public health department, Red Cross chapter, AIDS service organization, or doctor's office for more information about testing and HIV counseling.

**How HIV Tests Work**

When HIV enters the body, it begins to attack certain white blood cells called T4 lymphocyte cells (helper cells). Your doctor may also call them CD4 cells. The immune system then produces antibodies to fight off the infection. Although these antibodies are ineffective in destroying HIV, their presence is used to confirm HIV infection. Therefore, the presence of antibodies to HIV results from HIV infection. HIV tests look for the presence of HIV antibodies; they do not test for the virus itself.

**Test Models for HIV**

HIV testing consists of an initial screening with two types of tests commonly used to detect HIV infection. The most commonly used initial test is an enzyme immune assay (EIA) or the enzyme-linked immunosorbent assay (ELISA). If EIA test results show a reaction, the test is repeated on the same blood sample.

If the sample is repeatedly the same result or either duplicate test is reactive, the results are "confirmed" using a second test such as the Western blot. This more specific (and more expensive) test can tell the difference between HIV antibodies and other antibodies that can react to the EIA and cause false positive results. False positive EIA results are uncommon, but can occur. A person is considered infected following a repeatedly reactive result from the EIA, confirmed by the Western blot test.

In addition to the EIA or ELISA and Western blot, Other tests now available include:

- **Radioimmunoprecipitation assay (RIPA):** A confirmatory blood test that may be used when antibody levels are very low or difficult to detect, or when Western blot test results are uncertain. An expensive test, the RIPA requires time and expertise to perform.
- **Dot-blot immunobinding assay:** A rapid-screening blood test that is cost-effective and that may become an alternative to standard EIA and Western blot testing.
- **Immunofluorescence assay:** A less commonly used confirmatory blood test used on reactive ELISA samples or when Western blot test results are uncertain.
- **Nucleic acid testing (e.g., viral RNA or proviral DNA amplification method):** A less available blood test that can be used to resolve an initial indeterminate Western blot result in certain situations.
- **Polymerase chain reaction (PCR):** A specialized blood test that looks for HIV genetic information. Although expensive and labor-intensive, the test can detect the virus even in someone only recently infected.

**Alternatives Tests: Urine and Oral-fluid HIV Tests**

Urine and oral-fluid HIV tests offer alternatives for anyone reluctant to have blood drawn. Urine testing for HIV antibodies is not as sensitive or specific as blood testing.

Available urine tests include an EIA and a Western blot test that can confirm EIA results. A physician must order these tests, and the results are reported to the ordering physician or his or her assistant.
Rapid HIV Tests
A rapid HIV test is a test that usually produces results in up to 20 minutes. In comparison, results from the commonly used HIV-antibody screening test, the EIA, are not available for 1-2 weeks. There are currently four rapid HIV tests licensed for use in the United States:

- OraQuick Rapid HIV-1 and Advance HIV ½ Antibody Tests, manufactured by OraSure Technologies, Inc.
- Multispot, manufactured by Bio-Rad Laboratories
- Uni-Gold Recombigen, manufactured by Trinity Biotech

The availability of these tests may differ from one place to another. These rapid HIV blood tests are considered to be just as accurate as the EIA. As is true for all screening tests (including the EIA), a positive test result must be confirmed with an additional specific test before a diagnosis of infection can be given.

Home Test Kits
The Food and Drug Administration (FDA) has not approved home-use HIV test kits, which allow consumers to interpret their own HIV test results in a few minutes. The Federal Trade Commission has warned that these home-use HIV test kits, many of which are available on the Internet, supply inaccurate results.

Getting Tested
Evidence suggests that HIV, the virus that causes AIDS, has been in the United States at least since 1978. The following are known risk factors for HIV infection. If you answer yes to any of these questions, you should definitely seek counseling and testing. You may be at increased risk of infection if any of the following apply to you since 1978.

- Have you injected drugs or steroids or shared equipment (such as needles, syringes, cotton, water) with others?
- Have you had unprotected vaginal, anal, or oral sex with men who have sex with men, multiple partners, or anonymous partners?
- Have you exchanged sex for drugs or money?
- Have you been diagnosed with or treated for hepatitis, tuberculosis (TB), or a sexually transmitted disease (STD), like syphilis?
- Have you received a blood transfusion or clotting factor between 1978 and 1985?
- Have you had unprotected sex with someone who could answer yes to any of the above questions?

If you have had sex with someone whose history of risk-taking behavior is unknown to you or if you or they may have had many sex partners, then you have increased the chances that you might be HIV infected. If you plan to become pregnant, counseling and testing is even more important. If a woman is infected with HIV, medical therapies are available to lower the chance of passing HIV to the infant before, during, or after birth.

Detecting Infection
The HIV-antibody test is the only way to tell if you are infected. You cannot tell by looking at someone if he or she carries HIV. Someone can look and feel perfectly healthy and still be infected. In fact, an estimated one-third of those who are HIV positive do not know it. Neither do their sex partners.

When HIV enters the bloodstream, it begins to attack certain white blood cells called T4 lymphocyte cells (helper cells). The immune system then produces antibodies to fight off the infection. Therefore, the presence of antibodies to HIV result from HIV infection. Testing can tell you whether or not you have developed antibodies to HIV.

Exposure to HIV
To find out when you should be tested, discuss it with your testing site staff or personal physician. The tests commonly used to detect HIV infection actually look for antibodies produced by your body to fight HIV. Most people will develop detectable antibodies within 3 months after infection, the average being 20 days. In rare cases, it can take 6-12 months. During the time between exposure and the test, it is important to avoid any behavior that might result in exposure to blood, semen, or vaginal secretions.
HIV Infection Testing Locations
Many places offer HIV testing including local health departments, private doctors' offices, hospitals, and sites specifically set up to provide HIV testing. It is important to get tested at a place that also provides counseling about HIV and AIDS. Counselors can answer any questions you might have about risky behavior and ways you can protect yourself and others in the future. In addition, counselors can help you understand the meaning of the test results and tell you about AIDS-related resources in your area.

HIV Positive Test Results
If you test positive for HIV, immediate medical treatment and a healthy lifestyle can help you stay well. There are now many drugs that treat HIV infection and AIDS-related illnesses. Prompt medical care may help delay the onset of AIDS and prevent some life-threatening conditions. You can get prompt medical attention, allowing one to take a number of important steps to protect your health:

- See a doctor, even if you do not feel sick. Try to find a doctor who has experience in treating HIV.
- Have a TB (tuberculosis) test done. You may be infected with TB and not know it. Undetected TB can cause serious illness, but it can be successfully treated if caught early.
- Smoking cigarettes, drinking too much alcohol, or using illegal drugs (such as cocaine) can weaken your immune system. Cessation programs are available that can help you reduce or stop using these substances.
- Have a screening test for sexually transmitted diseases (STDs). Undetected STDs can cause serious health problems. It is also important to practice safe-sex behaviors so you can avoid getting STDs.

Stand-alone Testing Centers
Stand-alone sites, also known as freestanding sites, are generally operated by nongovernmental organizations (NGOs) and are not associated with medical institutions. Usually CT is the only service these sites offer, and the staff is dedicated full-time to providing counseling and testing. Because clients most often self refer to stand-alone sites, they are commonly called voluntary counseling and testing (VCT) sites. For reasons of cost and cost-benefit, stand-alone sites are often located in high population density areas and where HIV infection rates are high.

Treatment
Medical science has made progress in the treatment of HIV infection and the associated opportunistic infections (OIs) that come along with HIV. Expanded use of medications for preventing toxoplasmosis, tuberculosis, Mycobacterium avium complex (MAC) and, Pneumocystis carinii pneumonia (PCP), for example, has facilitated with the reduction in the number of people with HIV who ultimately develop serious illness and die from AIDS.

Also, a number of new compounds in the latest class of drugs, called protease inhibitors, have been federally approved to treat HIV infection. These drugs, when taken in combination with previously approved drugs such as AZT, 3TC and ddI, reduce the level of HIV particles circulating in the blood to very low levels in infected individuals. Treatment results using these drugs have been hopeful, as these drug combinations are more effective than any previously available therapies.

The Food and Drug Administration (FDA) has approved a number of drugs for treating HIV infection. The first group of drugs used to treat HIV infection, called nucleoside reverse transcriptase (RT) inhibitors, interrupts an early stage of the virus making copies of it. These drugs may decelerate the spread of HIV in the body and slow down the on set of opportunistic infections. This class of drugs, is referred to as nucleoside.

Nucleoside analogs include:
- AZT (Azidothymidine)
- ddC (zalcitabine)
- ddI (dideoxynosine)
- d4T (stavudine)
- 3TC (lamivudine)
- Abacavir (ziagen)
- Tenofovir (viread)
- Emtriva (emtricitabine)

Health care providers can prescribe non-nucleoside reverse transcriptase inhibitors (NNRTIs), such as:
Transcriptase inhibitors include:
- Delaviridine (Rescriptor)
- Nevirapine (Viramune)
- Efavirenz (Sustiva) (in combination with other antiretroviral drugs)

FDA also has approved a second class of drugs for treating HIV infection. These drugs, called protease inhibitors, interrupt the virus from making copies of itself at a later step in its life cycle.

Protease inhibitors include:
- Ritonavir (Norvir)
- Saquinavir (Invirase)
- Indinavir (Crixivan)
- Amprenavir (Agenerase)
- Nelfinavir (Viracept)
- Lopinavir (Kaletra)
- Atazanavir (Reyataz)
- Fosamprenavir (Lexiva)

FDA also has introduced a third new class of drugs, known as fusion inhibitors, to treat HIV infection. Fuzeon (enfuvirtide or T-20), the first approved fusion inhibitor, works by interfering with HIV-1's ability to enter into cells by blocking the merging of the virus with the cell membranes.

This inhibition blocks HIV's ability to enter and infect the human immune cells. Fuzeon is designed for use in combination with other anti-HIV treatment. It reduces the level of HIV infection in the blood and may be active against HIV that has become resistant to current antiviral treatment schedules.

ARV
ARV stands for antiretroviral. Antiretroviral medications are designed to inhibit the reproduction of HIV in the body. If ARV treatment is effective, the deterioration of the immune system and the onset of AIDS can be delayed for years. It is recommended that ARV drugs be used in combinations of at least three drugs.

HAART
Because HIV can become resistant to any of these drugs, health care providers must use a combination treatment to effectively suppress the virus. HAART stands for highly active antiretroviral therapy. It is the combination of at least three ARV drugs that attack different parts of HIV or stop the virus from entering blood cells. Even among people who respond well to HAART, the treatment does not get rid of HIV. The virus continues to reproduce but at a slower pace. Researchers have credited HAART as being a major factor in significantly reducing the number of deaths from AIDS in this country. While HAART is not a cure for AIDS, it has greatly improved the health of many people with AIDS and it reduces the amount of virus circulating in the blood to nearly undetectable levels.

Adverse effects
Despite the beneficial effects of HAART, there are side effects associated with the use of antiviral drugs that can be severe. Some of the nucleoside RT inhibitors may cause a decrease of red or white blood cells, especially when taken in the later stages of the disease. Some may also cause inflammation of the pancreas and painful nerve damage. There have been reports of complications and other severe reactions, including death, to some of the antiretroviral nucleoside analogs when used alone or in combination. Therefore, health care experts recommend that you be routinely seen and followed by your health care provider if you are on antiretroviral therapy. The most common side effects associated with protease inhibitors include nausea, diarrhea, and other gastrointestinal symptoms. In addition, protease inhibitors can interact with other drugs resulting in serious side effects. Fuzeon may also cause severe allergic reactions such as pneumonia, trouble breathing, chills and fever, skin rash, blood in urine, vomiting, and low blood pressure. Local skin reactions are also possible since it is given as an injection underneath the skin. Although more than two dozen different products are now available for the treatment of HIV infection, there is a growing need for new drugs. Significant problems related to long-term toxicity and adherence are anticipated with therapies that will presumably need to span whole decades. As a result, there is an urgent
need for new drugs that are easier to take, with high genetic barriers to the development of resistance and above all less toxic.

**Attitudes in the US towards HIV/AIDS**

The epidemic continues to affect all groups; however, of the 40,000 Americans who will become infected with HIV this year, current research has indicated half will be under the age of 25. Infections among women and adolescents are increasing the fastest of all population groups. High HIV infection rates in the United States are increasingly due to heterosexual risk behaviors, with increased rates in blacks and women. Black and Hispanic women together represent less than one quarter of all women in the U.S. population, but account for more than three fourths of cumulative AIDS cases among U.S. women through 2006. AIDS affects our children, our co-workers, our employees and our customers. Educating everyone about how to protect themselves and their loved ones is the only way that we can stop the spread of this needless threat to the public health and the world economy.

The attitude toward HIV/AIDS can cover a myriad of issues. They include attitudes toward the disease associated with social policy issues, the global crisis, such as, government efforts and participation, and discrimination and stigma. The publics’ knowledge and beliefs about issues influence the outcome of prevention and control measures. Statistics indicating attitudes and beliefs about fundamental questions associated with HIV/AIDS are listed in this section. The data was derived from a program developed to monitor the American public's knowledge and beliefs on major health issues and health care challenges. In a survey conducted by researchers on the public's attitudes towards HIV/AIDS and the related social issues, recent reports indicate the following:

**SURVEY FINDINGS**

The broad foreign policy context within which Americans view the global HIV epidemic hasn’t changed much in the past few years. Most Americans think the U.S. currently spends too much on foreign aid in general, and a strong majority believes the U.S. should address problems at home first rather than spending more money on the global HIV/AIDS epidemic.

But when asked specifically about foreign aid for HIV/AIDS, the public expects more action on the global HIV/AIDS epidemic from a variety of individuals and groups, and in general, people are somewhat supportive of the U.S. spending money to aid in the fight against global HIV/AIDS. There has been a substantial increase since 2007 in the share that believe that spending more money on HIV prevention in Africa will lead to meaningful progress.

African Americans and young people ages 18-29 are the groups in the U.S. that are most concerned about HIV/AIDS as a problem facing the nation, and the most likely to say that the government spends too little to fight the disease. In addition to being concerned about HIV/AIDS as a problem facing the nation, African Americans and Latinos are more likely to be personally concerned about the disease, both in terms of themselves and their children. African Americans are also more likely to know someone who has HIV or AIDS has died from AIDS, and more likely to say there is a lot of discrimination against people with HIV/AIDS in the U.S. today. Although advances in HIV treatment have changed the prognosis of HIV from acutely lethal to a chronic disease requiring life-long treatment, the majority of our respondents believed that individuals with HIV live less than 1 year after diagnosis. Importantly only 71% of this high-risk population knew that specific HIV treatment was available, a rate lower than that found in a large survey of American adults 18–64 years of age (86%) and black adults of that same age range (81%).

Overall, the public sees global HIV/AIDS as a serious problem, and they particularly recognize the impact of the epidemic in Africa. In fact, Americans seem to have a fairly accurate perception of the global epidemic. Half the public says that when it comes to the epidemic, the world today is losing ground, while four in ten say the world is making progress. Nearly four in ten know that less than ten percent of people worldwide who need treatment for HIV actually get it.

Most people think there is at least some discrimination against people with HIV/AIDS in the United States, and more than twenty years into the epidemic, a variety of misconceptions about how HIV is transmitted continue to exist among significant minorities of the public.

The vast majority of the public reports getting their information about HIV/AIDS mainly from the media, though young adults ages 18-29 are more likely to get such information from other sources. and many say they have seen a lot about the problem of AIDS in Africa in the last year.
About half of adults report ever having been tested for HIV, and African Americans, Latinos, and people under age 50 are the groups most likely to say they have been tested. The percent overall who says they have been tested for HIV has increased since 1997; however, the share who says they have been tested in the last twelve months has remained relatively stable since 1997 for most groups since 1997.

Many people are at least somewhat concerned about the possibility that they will become infected with HIV, and in 2006, significant minorities of the public still incorrectly think HIV might be transmitted through various forms of casual contact, such as kissing (37%), touching a toilet seat (16%) and sharing a drinking glass (22%). These and other lingering misconceptions are potential contributing factors to prejudice against HIV-positive individuals, since people who believe that HIV can be transmitted in these ways are much more likely to express discomfort about working with someone who has AIDS.

Few older women were interested in being tested for the virus that causes AIDS despite having significant risk factors for lifetime exposure, according to a study published in the July/August edition of the Journal of Women’s Health. The risk is especially great among black women, who represent 73 percent of new HIV cases in women ages 50 and older.

Basic Facts About HIV and the Law

As more effective drug therapies are extending the lives of HIV-positive people—and improving their quality of life—more workers are returning to the workforce and staying productive. Lawsuits filed by HIV-infected workers continue under the ADA. Most of these lawsuits are preventable through training and education.

The majority of people in 2006 who are infected with HIV are between the ages of 25-44 and are employed. The increase in the number of people with HIV means that in time there will be more employees with HIV on the job. That could mean that you, someone you know or employ, or an employee's family member or close friend is already coping with HIV or AIDS. It is important that you know the laws surrounding HIV/AIDS and how they affect labor leaders, managers, and you.

Laws Protecting People Living With HIV/AIDS

AIDS has generated more individual lawsuits across a broad range of health issues than any other disease in history. The following laws must be kept in mind when making decisions that affect any staff/worker with HIV/AIDS:

What Laws Affect You?

- The Americans with Disabilities Act of 1990 (ADA) prohibits employment discrimination on the basis of disability. The ADA, which covers employers of 15 or more people, applies to employment decisions at all stages. Court decisions have found that an individual with even asymptomatic HIV is protected under this law.

- The mission of the Occupational Safety and Health Administration (OSHA) is to save lives, prevent injuries, and protect the health of America’s workers. To accomplish this, Federal and state governments work in partnership with the more than 100 million working men and women and their six-and-one-half million employers who are covered by the Occupational Safety and Health Act of 1970.

- The Family Medical Leave Act of 1993 (FMLA) applies to private-sector employers with 50 or more employees within 75 miles of the work site. Eligible employees may take leave for serious medical conditions or to provide care for an immediate family member with a serious medical condition, including HIV/AIDS. Eligible employees are entitled to a total of 12 weeks of job-protected, unpaid leave during any 12-month period.

- The Health Insurance Portability and Accountability Act of 1996 (HIPAA) addresses some of the barriers to health care facing people with HIV as well as other vulnerable populations. HIPAA gives persons with group coverage new protections from discriminatory treatment, makes it easier for small groups (such as businesses with a small number of employees) to obtain and keep health insurance coverage, and gives persons losing/leaving group coverage new options for obtaining individual coverage.
The **Consolidated Omnibus Budget Reconciliation Act of 1986 (COBRA)** allows employees to continue their health insurance coverage at their own expense for a period of time after their employment ends. For most employees ceasing work for health reasons, the period of time to which benefits may be extended ranges from 18 to 36 months.

**Tuberculosis**

Tuberculosis (TB) is a contagious disease, caused by a bacterium called *Mycobacterium tuberculosis*. TB usually attacks the lungs (pulmonary TB), or vocal cords (laryngeal TB), but can also affect other parts of the body such as the lymph nodes, kidneys, bones, joints, etc. (extra-pulmonary TB).

In 2005 the total number of new cases of tuberculosis in the United States was (14,097), and was the tenth consecutive year the number of reported TB cases has decreased. However, as recently as April 2007 it is reported that Tuberculosis infection is present in 1.8 billion people worldwide. It can affect anyone of any age, and can be fatal.

The disease can now be treated, cured, and prevented. Antibiotic treatment for infectious TB disease will kill the bacteria in the sputum, usually after a few weeks of taking the pills. The person is no longer infectious to others, and can usually go back to their normal routine as soon as they feel up to it. However, scientists have never come close to wiping it out and TB remains one of the most serious diseases worldwide.

**Tuberculosis is not transmitted by contact with a person's,**
- clothing,
- bed linens,
- dishes and cooking utensils,
- sitting on a toilet seat, or
- handshakes with someone who has TB.

The TB bacteria is spread the same way that cold and flu viruses are spread: through the air. Tuberculosis infection may result after close contact with a person who has infectious TB disease. The greatest risk of TB transmission occurs when TB bacteria are found in the person's sputum (phlegm). A person with infectious TB disease, who is not taking tuberculosis medication, has the bacteria in their nose, throat, and lung secretions and they are propelled into the air whenever they cough, sneeze, laugh, talk, or spit. If another person breathes in these germs, there is a chance they will become infected by the TB germ.

A person with TB infection has breathed TB bacteria into his/her lungs. The tubercle bacilli a person inhaled may or may not cause tuberculosis. The human immune system has a variety of ways to capture and kill these bacteria. If the immune system is successful in doing so, the person will not become ill with TB. Many people who have TB infection never develop TB disease. In these people, the TB bacteria remain inactive for a lifetime without causing disease. But in other people, especially people who have weak immune systems, the bacteria become active and cause TB disease. If the immune system doesn't kill the TB bacteria, the bacteria can remain alive but inactive in the body. This is called TB infection. A person with TB infection is not and does not feel sick and cannot spread TB to others. However, they may progress to TB disease in the future, especially if their immune system weakens. Treatment of TB infection can prevent TB disease. Adults with TB infection have about a 10% chance of developing TB disease during their lifetime. Adults whose immune system is weakened (serious illness, diabetes, poor eating habits, heavy drinking), the TB bacteria may become active and cause TB disease. People with both TB and HIV infection have a much greater chance of developing TB disease.

Inhaled bacilli, however, may survive the immune system. They may travel throughout the body to organs other than the lungs. In some cases, the bacilli remain active enough to cause tuberculosis. In about 5 percent of all cases, a person develops tuberculosis within twelve to twenty-four months of being exposed to TB bacteria.

**Emerging Strains of TB: MDR-TB and XDR-TB**

The World Health Organization (WHO) has expressed concern over the emergence of virulent drug-resistant strains of tuberculosis (TB) and is calling for measures to be strengthened and implemented to prevent the global spread of the deadly TB strains. This follows research showing the extent of XDR-TB, a newly identified TB threat that leaves patients (including many people living with HIV) virtually untreatable using currently available anti-TB drugs.
What is MDR-TB and XDR-TB
TB can usually be treated with a course of four standard, or first-line, anti-TB drugs. If these are misused or mismanaged, multidrug-resistant TB (MDR-TB) can develop. MDR-TB takes longer to treat with second-line drugs, which are more expensive and have more side-effects. If these drugs are also misused or mismanaged, extensively drug-resistant TB (XDR-TB) can develop. Because XDR-TB is resistant to first- and second-line drugs, treatment options are seriously limited and so are the chances of cure.

MDR-TB (Multidrug Resistant TB) describes strains of tuberculosis that are resistant to at least the two main first-line TB drugs - isoniazid and rifampicin. XDR-TB or Extensively Drug Resistant TB (also referred to as Extreme Drug Resistance) is MDR-TB that is also resistant to three or more of the six classes of second-line drugs.

The description of XDR-TB was first used earlier in 2006, following a joint survey by WHO and the US Centers for Disease Control and Prevention (CDC). Resistance to anti-TB drugs in populations is a phenomenon that occurs primarily due to poorly managed TB care. Problems include incorrect drug prescribing practices by providers, poor quality drugs or erratic supply of drugs, and also patient non-adherence.

People at Risk
- You have spent time with a person known to have active TB disease or suspected to have active TB disease; or
- You have HIV infection or another condition that puts you at high risk for active TB disease; or
- You have signs and symptoms of active TB disease; or
- You are from a country where active TB disease is very common (most countries in Latin America and the Caribbean, Africa, Asia, Eastern Europe, and Russia); or
- You live somewhere in the United States that active TB disease is more common, such as a homeless shelter, migrant farm camp, prison or jail, and some nursing homes); or
- You inject illegal drugs.

TB and HIV Co-infection
HIV is a virus that weakens the cells in the immune system required to fight TB infection. A person who has TB and HIV infection is at a very high risk of TB infection progressing to TB disease. Adults with TB infection have about a 10 % chance of developing TB disease in their lifetime. Adults with TB and HIV infection have a 10 % risk of developing TB disease every year. TB infection also makes HIV infection progress to AIDS faster. Because their immune system is weak, people with TB and HIV infection may not respond to TB skin tests and their chest x-ray may look normal even if they have TB disease. A person with HIV infection is more likely to develop TB outside the lungs. TB disease may spread from the lungs to the lymph nodes or even to the brain. The symptoms may not be typical, delaying the diagnosis of TB disease and the treatment of TB disease.

Early Detection of Co-infection
People with TB and HIV infection need to know about both diseases as soon as possible. They also need to be seen by a doctor who is an expert in this area to find out if they have TB disease. Treatment of TB infection and treatment of TB disease by an expert could save their life!

Symptoms of TB Disease
People with TB disease of the lungs or vocal cords feel sick. They usually have symptoms such those listed below and may cause the following:
- a bad cough that lasts longer than 2 weeks
- pain in the chest
- coughing up blood or sputum (phlegm)
- weakness or feeling very tired
- weight loss
- no appetite
- chills
- fever
- night sweats
By the time they see a doctor, they may need to be hospitalized. In the hospital they are kept in a special isolation room to protect other patients and health-care workers from becoming infected with TB. They are asked to wear a mask if they have to leave this room.

**Extrapulmonary Tuberculosis**

TB disease outside the lungs is most often found in the lymph.

Most people with TB disease outside the lungs feel sick or weak, lose weight, and have fever and night sweats. In addition, they may have symptoms from the affected area. Some of the tissues and organs in which extrapulmonary tuberculosis may appear are the following:

- **Bones** (the spine and the ends of the long bones)
- **Kidneys** (kidneys, bladder, the prostate gland (in men), and other nearby organs and tissues)
- **Female reproductive organs** (infection of the ovaries)
- **Abdominal cavity** (membrane lining the abdominal cavity)
- **Joints** (hips and knees. Less commonly, the wrist, hand, and elbow joints) may become painful and inflamed.
- **Meninges** (tissues that cover the brain and the spinal cord. causes tubercular meningitis)
- **Skin, intestines, adrenal glands, and blood vessels** (aorta infection)
- **Miliary tuberculosis** (when very large numbers of tubercle bacilli spread throughout the body).

**TB Testing**

Because people with TB infection do not feel sick and may not know they have been exposed to TB. Having a TB skin test is the best way to find out if you have been infected. Not all people need a TB test. You should get a TB test if you are at increased risk. See below for conditions or activities that place persons at increased risk.

**The TB Skin Test**

The TB skin test is a way to find out if a person has TB infection. Although there is more than one TB skin test, the preferred method of testing is to use the Mantoux test. A significant reaction to the Mantoux skin test indicates the presence of Tuberculosis. This test can prove the presence of TB, even when there are no symptoms of tuberculosis or the presence TB organisms in the sputum (the expectorated material coughed up from the respiratory tree). The disease itself is characterized by the appearance of symptoms, the presence of organisms in the sputum, as well as a significant reaction to a Mantoux skin test.

**QuantiFERON®-TB Gold Test**

The QuantiFERON®-TB Gold test (QFT-G) is a whole-blood test for use as an aid in diagnosing TB infection, including latent tuberculosis infection (LTBI) and tuberculosis (TB) disease. This test was approved by the U.S. Food and Drug Administration (FDA) in 2005. In order to spread the TB germs, a person must have TB disease. Having TB infection is not enough to spread the germ. Tuberculosis may last for a lifetime as an infection, never developing into the disease. The symptoms of TB disease include a low-grade fever, night sweats, fatigue, weight loss, and a persistent cough. Some people may not have obvious symptoms.

Most people infected with the germ that causes TB never develop active TB. If active TB does develop, it can occur anytime from 2 months after infection to many years later. The risk of active disease lessens as time passes. A person with TB disease may remain contagious until he/she has been on appropriate treatment for several weeks. However, a person with TB infection, but not disease, cannot spread the infection to others, since there are no TB germs in the sputum.

**Treatment for TB**

In the past, treatment of tuberculosis was primarily supportive. Patients were kept in isolation, away from the healthy population. They were encouraged to rest and to eat well. If these measures failed, surgery was used. Today, surgical procedures are used much less often. Instead, drug therapy has become the primary means of treatment. Patients with TB can now safely rest at home; they pose no threat to other members of the household.
Directly Observed Therapy

Directly observed therapy (DOT) is a component of case management that helps to ensure that clients adhere to therapy. DOT means that a health care worker personally watches the client swallow each dose of TB medication. DOT ensures an accurate account of how much medication the client took. It also provides a mechanism for the early detection of medication adverse reactions or non-adherence.

Drug Therapy

People with active TB disease must complete a course of curative therapy. Initial treatment includes at least four anti-TB drugs for a minimum of 6 months. Medications may be altered based on laboratory test results. A physician must determine the exact medication plan. People with medical risk factors should be skin tested for TB, and their skin test results should noted in their medical record.

Drugs provide the most effective treatment for TB patients. Three principles govern the use of drug treatment for tuberculosis:

- First, the number of bacilli must be lowered as quickly as possible. By so doing, the risk of transmitting the disease to other people is reduced.
- Second, efforts must be made to prevent the development of drug resistance. If a person develops a resistance to a drug, it will no longer be helpful in curing the disease. As a result, most patients are given a combination of two or three different drugs at first.
- Third, drug treatment must be continued to prevent reoccurrence of the disease.

Five drugs are used today to treat tuberculosis are:
- isoniazid (INH);
- rifampin
- pyrazinamide
- streptomycin and
- ethambutol

Surgery

Treatment for TB can require surgery. Surgery is sometimes used to treat tuberculosis when medication is not effective. One form of surgery involves the introduction of air into the chest. This procedure causes the lung to collapse. In a second procedure, one or more ribs may be removed. A third procedure involves the removal of all or part of a diseased lung. Other forms of surgery may be used in cases of extrapulmonary tuberculosis.

It is VERY IMPORTANT to keep taking TB drugs to complete treatment, otherwise drug-resistant TB may develop. Contact tracing is done to find and skin test family, friends and coworkers to look for the spread of TB infection. Some parts of the population are at higher risk of getting TB than others. The high-risk groups are:

- Elderly people
- Minorities including:
  - African Americans
  - Hispanics,
  - Asians, and people from the
  - Pacific Islands
- People who are infected with HIV/AIDS

Prevention of TB

People infected with TB should be evaluated for a course of preventive therapy, which usually includes treatments of an anti-tuberculosis medication for 6 to 12 months. A physician must determine the exact preventive therapy plan. Because HIV infection weakens the immune system, persons with TB infection and HIV infection have a very high risk of getting TB disease. HIV infection strongly increases the risk for tuberculosis infection. TB disease occurs in 7%–10% of patients with HIV infection each year. The increase in numbers of patients with both HIV infection and TB has raised the potential for increasing transmission of drug-resistant tuberculosis strains.
HIV infection, when it occurs in tandem with TB infection, without treatment, can work together to shorten the life of an infected person. Other medical risk factors, which increase the chance of developing TB disease, include diabetes mellitus, prolonged corticosteroid therapy, Immuno-suppressive therapy, cancer, silicosis, as well as being 10 percent or more below ideal body weight.

Seek treatment if TB infection has occurred. It should be noted that TB is one of the few diseases related to HIV infection that is easily prevented and cured with medication. People that are immune-compromised are currently being treated with drug combinations containing three and four different drugs simultaneously. Conversely, in addition to spreading the disease to others, an untreated person will become severely ill or die.

The most important way to stop the spread of tuberculosis is to cover the mouth and nose when coughing, and to take all the TB medication exactly as prescribed by the physician. Some strains of TB have the ability to grow and multiply even in the presence of certain drugs that would normally kill them. There have been some studies that found strongly increased risks for multidrug-resistant TB (MDR TB) among patients coinfected with TB and HIV.

Other people who may develop drug-resistant tuberculosis include TB patients who have failed to take anti-tuberculosis medications as prescribed, TB patients who have been prescribed an ineffective treatment plan, and people who have been treated previously for TB. For patients with disease due to multi-drug-resistant organisms, expert consultation from a specialist in treating multi-drug-resistant TB should be obtained. Patients with multi-drug-resistant disease should be treated with a minimum of two or three drugs to which their organisms are susceptible.

It is currently unknown whether preventive therapy can effectively prevent the development of active TB disease in people who are infected with MDR-TB strains. Nevertheless, recommendations concerning preventive therapy for people who have been infected with MDR-TB are being developed by the Centers for Disease Control (CDC).

The most important ways to stop the spread of MDR-TB remain the same—to cover the mouth and nose when coughing, and to seek adequate treatment. It is also essential that health officials directly oversee the administration of TB medications to people who, due to mental illness or incapacity, are unable to follow the prescribed regimens themselves.

**Hepatitis**

The word *hepatitis* simply means inflammation of the liver. Hepatitis is characterized as a severe inflammation of the liver. It can result from medications, alcohol, or other means including the viruses that cause herpes, mumps, measles, and infectious mononucleosis. Those infected will usually develop liver disease, according to the national Centers for Disease Control and Prevention.

**Viral Hepatitis**

Hepatitis A (HAV), Hepatitis B (HBV), or Hepatitis C (HCV), are the forms of hepatitis commonly referred to by health professionals when they speak of viral hepatitis.

**The Differences between Hepatitis A, B and C**

Although hepatitis A, B and C have some similarities, the viruses are significantly different. Hepatitis A (HAV) is found in the stool (feces) of persons with hepatitis A. HAV is usually spread from person to person by putting something in the mouth (even though it may look clean) that has been contaminated with the stool of a person with hepatitis A.

Symptoms usually appear within 2-6 weeks, but are not followed by the chronic problems that hepatitis B and C viruses can cause. The hepatitis B and C viruses can infect a person if his/her mucous membranes or blood is exposed to an infected person's blood, saliva, wound exudates, semen or vaginal secretions. Symptoms appear more gradually than in hepatitis A. Unlike the hepatitis A virus, the hepatitis B and C viruses can stay in the body sometimes for a lifetime, and may eventually cause chronic and serious liver diseases.

**Infection Control**

Because the different viruses that cause hepatitis enter the body in different ways, there are several steps you can take to protect yourself from infection.
Practicing Universal Precautions, proper handwashing, and good personal hygiene are good first steps in the prevention and spread on many infectious diseases as you read on steps and practices you can follow to help control the spread of infection are included for you.

The Symptoms of Viral Hepatitis

The list of signs and symptoms mentioned in various sources for Viral Hepatitis includes the symptoms listed below:

**Initial Infection:**
- No symptoms - in some cases
- Mild symptoms - in some cases

**Early Symptoms of Hepatitis Include:**
- fatigue
- headache
- tenderness in the upper right abdomen
- sore muscles & joints
- loss of appetite
- an altered sense of taste & smell
- nausea,
- vomiting
- diarrhea
- low-grade fever
- malaise

**Later symptoms of Hepatitis Include:**
- jaundice - abnormally yellow skin & eyes caused by bile entering the blood
- darkened urine;
- light-colored or gray stool
- yellowing skin
- yellowing eyes
- foamy urine

**Diagnosis of Hepatitis**

Although health providers use information about a person's symptoms, health history and behaviors to help make a diagnosis, only blood tests can confirm the diagnosis and pinpoint which type of hepatitis a person has.

**Treatments for Viral Hepatitis**

Since there's no medication that can treat the initial illness that viral hepatitis causes, health professionals manage symptoms as they occur and try to help the body's immune system fight the infection. If you have viral hepatitis, your health care provider may tell you to:
- Avoid alcohol and other drugs, large doses of vitamins, and prescription drugs metabolized by the liver (sometimes including birth control pills)
- Drink high-calorie fluids such as fruit juices and eat a balanced diet that includes dairy products; meat, poultry or seafood; breads and cereals; and fruits and vegetables (To control nausea, try eating several smaller meals)
- Limit activity if your hepatitis is symptomatic; this typically means bed rest at first, progressing to normal activity as symptoms disappear.

Your health professional may recommend hospitalization if you experience severe vomiting or do not feel better after several weeks. You should know that researchers are making gains in treating the chronic liver disease associated with both hepatitis B and C. There is not much available for treatment. Interferon has been approved in chronic hepatitis B and C cases for those aged 18 or older. Prevention is still the best option. The list of treatments mentioned in various sources for Viral Hepatitis includes the following list. Always seek professional medical advice about any treatment or change in treatment plans.
Hepatitis A (HAV)
Hepatitis A is a liver disease caused by the hepatitis A virus (HAV). Hepatitis A can affect anyone. In the United States, hepatitis A can occur in situations ranging from isolated cases of disease to widespread epidemics. Hepatitis A infects 125,000 - 200,000 people each year and can be easily transmitted. Hepatitis A is passed in the stool of infected persons.

Transmission is from person-to-person contact or through contaminated food and water. You can become infected by eating or drinking something that has been contaminated by someone who has the disease.

Symptoms of HAV
Symptoms occur 2-6 weeks after infection and can persist from several days to six months. The virus typically causes some illness and has been known to be mistaken for a stomach virus, although occasionally symptoms are more serious. It is seldom fatal and does not cause permanent liver damage. A person with hepatitis A is considered infectious, which means they can transmit the virus to others as early as two weeks before symptoms appear. The hepatitis A virus does not cause the permanent, chronic symptoms that other hepatitis viruses can cause.

Behavior Practices Associated with Hepatitis A Infection
- Eating contaminated food, such as undercooked shellfish from contaminated water or food handled by someone who has hepatitis A.
- Using silverware, cups or glasses that an infected person touched with unwashed hands.
- Changing diapers or linens that contain stool from someone with hepatitis A and neglecting to wash your hands.
- Sharing food with an infected person or drinking water contaminated with sewage.
- Oral or anal sexual contact with an infected person.
- Traveling to developing countries where the disease is common.
- Sharing needles can also put you at risk. The hepatitis A virus can be transmitted through blood if needles are shared. However, poor hygiene, amongst drug users, may account for the high prevalence seen in the drug community.

Preventive Practices: Monitor Your Meals
Practice good personal hygiene. Always wash your hands after any contact with blood, when cleaning or after using the toilet, and before preparing or eating food. Avoid foods that could be contaminated, such as uncooked shellfish or food that's been prepared by someone who has the virus. When traveling to developing countries, drink only bottled or boiled water, don't use ice, which can expose you to hepatitis A, and don't eat raw fruits or vegetables unless they've been peeled. Foods should be washed thoroughly, and then cooked at temperatures high enough to kill germs.

Hepatitis A Vaccine - Two-Dose Schedules
It is also a good idea to get the hepatitis A vaccine. Several inactivated and attenuated hepatitis A vaccines have been developed and evaluated in human clinical trials and in nonhuman primate models of HAV infection; however, only inactivated vaccines have been evaluated for efficacy in controlled clinical trials (36,109). The vaccines currently licensed in the United States are HAVRIX® and VAQTA®. Both are inactivated vaccines.

Exposure to Hepatitis A
If you think you've been directly exposed to the hepatitis A virus, visit your health care provider immediately for treatment. Some treatments can help ward off the infection if administered in time (hepatitis A vaccine and IgG). All people who have close household or sexual contact with an infected person also need treatment.

Preventing the Spread of Hepatitis A
If you think you may be infected with hepatitis A.
- Always wash your hands well after using the toilet.
- Don't prepare or handle food for others while you are infectious.
- Avoid sexual contact with other people until you have fully recovered.

Hepatitis B (HBV)
More than 400 million people worldwide are chronically infected with hepatitis B virus (HBV). Effective therapy is necessary to prevent the progression of chronic hepatitis B to cirrhosis, hepatocellular carcinoma, and death. In the United States, approximately 300,000 people are infected with HBV annually, from which some cases become fatal. "Hepatitis"
means "inflammation of the liver," and its name implies, Hepatitis B is a virus that infects the liver. Hepatitis B is transmitted through 'blood-to-blood' contact.

Hepatitis B initially causes inflammation of the liver, but it can lead to more serious conditions, the virus can cause lifelong infection, cirrhosis (scarring) of the liver and liver cancer, liver failure, and death.

The Hepatitis B virus is very resilient, and it can survive in dried blood for as many as seven days. Because of this fact, this virus tends to be of primary concern for employees such as custodians, laundry personnel, housekeepers, funeral directors, and not uncommonly salon professionals, along with other employees who may come in contact with blood or potentially infectious materials.

**Symptoms of HBV**

With both forms of hepatitis, an infected person may experience different degrees of symptoms. Some may exhibit no signs of the disease, while others may suffer months of severe symptoms. The symptoms of HBV are like a mild "flu". Initially there is a sense of fatigue, possible stomach pain, loss of appetite, and even nausea. As the disease continues to develop, jaundice (a distinct yellowing of the skin and eyes), and darkened urine often develop.

**Prevention of Hepatitis B by HBV Vaccine**

Just as the human immunodeficiency virus (HIV), is a bloodborne pathogen of primary concern so it the hepatitis B virus (HBV), and hepatitis C virus (HCV). Hepatitis B is one of the fastest-spreading sexually transmitted infections (STI), and also can be spread by sharing needles or by any behavior in which a person's mucus membranes are exposed to an infected person's blood, semen, vaginal secretions, or saliva. Although seldom fatal, 10 percent of people who get hepatitis B are infected for life and run a high risk of developing serious, long-term liver diseases such as cirrhosis of the liver or liver cancer which can cause serious complications or death. A safe, effective vaccine that prevents hepatitis B is available. If you or someone you know practices behaviors that can spread hepatitis B, ask a medical professional about the vaccine.

**Risk Behaviors for Contracting HBV**

1) Practicing unsafe sex. The more partners with whom you have vaginal, anal or oral contact, the higher your risk of becoming infected with hepatitis B. Abstinence is the most effective way to prevent sex-related transmission. If you have vaginal, anal or oral contact, always use barrier protection. People who have sex with multiple partners should ask their health provider about getting vaccinated for hepatitis B.

2) Sharing needles. No matter what drug is injected, whether its crack, heroin or steroids, sharing needles is extremely risky. In fact, an estimated 60-80 percent of the people who share needles is or has been infected with hepatitis B. Similarly, beware of needles that could be contaminated when getting tattoos, having acupuncture or your ears pierced. Select a reputable professional for these services.

3) Close, frequent contact with the blood, semen, vaginal secretions or saliva of infected persons. Occasionally, people who share living quarters for a long time with others who have hepatitis B have gotten infected. Receiving a blood transfusion or other blood products no longer carries the threat of hepatitis B that it once did. Today, all blood is screened for hepatitis B before it is used.

If you are at risk of contracting hepatitis B, get vaccinated. The hepatitis B vaccine is an inactivated antigen (genetically engineered; not a live or killed virus). It is administered in a series of three injections over a six-month period. Approximately 95% of persons who receive the three injections obtain full immunity after receiving the vaccine.

You are asked to report side effects (rash, nausea, joint pain, and/or fatigue) to your health care provider. Also, avoid high-risk behaviors and practice good personal hygiene when sharing food and using bathrooms. Don't share razors, toothbrushes or pierced earrings with others.

**Exposure to Hepatitis B**

If you have not been vaccinated against hepatitis B but are exposed to the virus, your health professional can treat you with hepatitis B immune globulin (HBIG), combined with the hepatitis B vaccination. Don't delay, get immunized and vaccinated as soon as possible after exposure.
Safe Practices for Preventing Hepatitis B
- Don't engage in sexual contact without a condom
- Don't donate blood. Bandage all cuts and open sores
- Don't share anything that could be contaminated with your blood, semen, vaginal secretions or saliva – such as needles, razors or toothbrushes
- Wash your hands well after using the toilet
- If you have hepatitis B and you're pregnant, your baby must be immunized at birth. All pregnant women should be screened for hepatitis B

Hepatitis C (HCV)
HCV is widely viewed as one of the most serious of the five hepatitis viruses. The Hepatitis C virus is spread primarily through contact with infected blood and can cause cirrhosis (irreversible and potentially fatal liver scaring), liver cancer, or liver failure. Hepatitis C is the major reason for liver transplants in the United States, accounting for 1,000 of the procedures annually. The disease is responsible for between 8,000 and 10,000 deaths yearly. Some estimates say the number of HCV-infected people may be four times the number of those infected with the AIDS virus. Hepatitis C is less likely than the other hepatitis viruses to cause serious illness at first (only one quarter of the people infected actually develop symptoms); about 70% of those infected develop chronic liver disease. Like hepatitis B, hepatitis C can be spread by contact with infected blood, and possibly semen, vaginal secretions and saliva. Hepatitis C infects about 150,000 Americans each year.

Risk Behaviors for Contracting HCV
Risk behaviors follow the same fundamentals, as does HIV, as hepatitis B and hepatitis C are also bloodborne pathogens, and transmission occurs in almost the exact same ways. You are at risk if you share needles; or have sexual contact without barrier protection with infected partners.

Symptoms of hepatitis C include:
- Loss of appetite
- Dark yellow urine or light-colored stools
- Persistent nausea or pains in the stomach
- Lingering fever
- Yellowish eyes or skin know as jaundice
- Fatigue, or tiredness
- Diarrhea
If you have reason to believe that you may be infected or have these symptoms, see a doctor for testing.

Prevention of Hepatitis C
Since hepatitis C is transmitted in much the same way as hepatitis B, you can help avoid infection by using some of the same precautions. Always use barrier protection during sexual contact; practice good personal hygiene; and never share needles, razors, toothbrushes or pierced earrings with anyone.

All donated blood is screened for the virus. Drugs are licensed for treatment of persons with chronic infection, though they are only about 15-30% effective. Currently, there is no vaccine available.

Hepatitis C Treatment
Some patients learn they have hepatitis through a routine physical or when they donate blood and a blood test shows elevated liver enzymes.
Once diagnosed, health professionals recommend the following:
- See a doctor regularly
- If liver damage is present, get vaccinated against hepatitis A, a food- and water-borne virus.
- Don’t start any new medicines or use over-the-counter, herbal, or other drugs without consulting with a doctor.
- Stop using alcohol
Co-infection with HIV and Hepatitis C Virus

About one quarter of HIV-infected persons in the United States are also infected with hepatitis C virus (HCV). HCV is one of the most important causes of chronic liver disease in the United States and HCV infection progresses more rapidly to liver damage in HIV infected persons. HCV infection may also impact the course and management of HIV infection. The latest U.S. Public Health Service/Infectious Diseases Society of America (USPHS/IDSA) guidelines recommend that all HIV-infected persons should be screened for HCV infection. Prevention of HCV infection for those not already infected and reducing chronic liver disease in those who are infected are important concerns for HIV-infected individuals and their health care providers.

Syphilis

Syphilis, a bacterial infection, is primarily a sexually transmitted disease (STD). Any person that is sexually active can be infected with syphilis, although there is a greater incidence among young people between the ages of 15 and 30 years. It is more prevalent in urban areas.

Transmission of Syphilis

Syphilis is spread by sexual contact with an infected individual, with the exception of congenital syphilis, which is spread from mother to fetus. Transmission by sexual contact requires exposure to moist lesions of skin or mucous membranes.

Symptoms of Syphilis

The first sign of syphilis is generally one or more painless sores that become visible at the site of initial contact. It might be accompanied by swollen glands, which develop within a week after the appearance of the first sore. The sore will persist for 1 to 5 weeks and will vanish by itself, even if no medical care is obtained. Roughly 6 weeks after the sore first appears, a person will enter the second stage of the disease. The most likely symptom during this stage is a rash, which might appear on any part of the body: trunk, arms, legs, palms, soles, etc. Other, more generalized symptoms include fatigue, swollen glands, fever, headaches, loss of appetite, and sore throat. These symptoms will last 2 to 6 weeks and will disappear with or without medical care.

After the second stage of the disease, the only way syphilis can be detected is through a blood test, although secondary symptoms might sporadically occur again. Persons having syphilis for over four years may suffer from illness in the skin, bones, central nervous system, and heart, and may experience a reduced life expectancy, impaired health, and eventually can limit occupational efficiency.

Symptoms can emerge from 10 to 90 days after an individual becomes infected, though usually within 3 to 4 weeks. Symptoms often go unnoticed or are thought to be minor abrasions or heat rash, thus treatment is not sought. When, and for how long is a person able to spread syphilis? Syphilis is considered contagious for a duration of up to 2 years, perhaps more. The extent of communicability depends on the existence of infectious lesions (sores), which may or may not be visible. There is no natural immunity to syphilis and prior infection lends no defense to the patient.

Treatment of Syphilis

Syphilis is treated with penicillin or tetracycline. The amount of medication a patient must take and treatment depends on the stage of syphilis. Expectant women with a history of allergic reaction to penicillin should undergo penicillin desensitization, followed by appropriate penicillin therapy. Untreated syphilis can lead to destruction of soft tissue and bone, heart failure, insanity, blindness, and a variety of other conditions, which may be mild to incapacitating. Equally as important, a pregnant woman with untreated syphilis will transmit the disease to her unborn child, which may result in death or deformity of the child. Physicians and hospitals are required to test pregnant women for syphilis at prenatal visits. Tests of newborns or their mothers are required at the time of delivery.

Prevention of Syphilis

There are a number of ways to prevent the spread of syphilis:

- Limit your number of sex partners.
- Use a condom.
- Carefully wash genitals after sexual relations.
- If you think you are infected, avoid any sexual contact and visit your local STD clinic, a hospital, or your doctor.
- Notify all sexual contacts immediately so they can obtain examination and treatment.
- All pregnant women should receive at least one prenatal blood test for syphilis.
Pediculosis
Pediculosis is an infestation of the hairy parts of the body or clothing with the larvae, eggs, or adult lice. The crawling stages of this insect consume human blood, which causes excessive itching in areas of infestation. Head lice are usually located on the scalp, crab lice in the pubic area, and body lice along seams of clothing, traveling to the skin to feed. Anyone can become louse infested under appropriate conditions.

Transmission of Pediculosis
Pediculosis is easily transmitted from person to person through direct contact. Head lice infestations are commonly found in school settings or institutions. Crab lice infestations can be found among sexually active individuals. Body lice infestation generally can be found in people living in unsanitary conditions, and lacking hygiene where clothing is infrequently changed or laundered. For both head lice and body lice, transmission can occur during direct contact with an infested individual, or through sharing of clothing, combs or brushes. While other means are possible, crab lice are most often transmitted through sexual contact.

Symptoms of Infestation
Usually, the first evidence of an infestation is the itching or scratching in the area of the body where the lice feed. Scratching at the back of the head or around the ears should lead to an examination for head louse eggs (nits) on the hair. Itching around the genital area should lead to an examination for crab lice or their eggs. Scratching can be sufficiently intense to result in secondary bacterial infection in these areas. It may take as long as 2 to 3 weeks or longer for a person to notice the intense itching associated with this infestation. Pediculosis can be spread as long as lice or eggs remain alive on the infested person or clothing.

Treating Pediculosis
Medicated shampoos or cream rinses containing lindane or pyrethrin are used to kill lice. Products containing lindane are available only through a physician's prescription. Lindane is a nerve poison, an organochlorine pesticide, an insecticide, and is suspected of being a carcinogen. In the U.S. the Environmental Protection Agency, (EPA) recently banned all agricultural uses of lindane. Lindane is not recommended for infants, young children, and pregnant or lactating women.

The Food and Drug Administration (FDA), requires products containing lindane be labeled with prominent warnings about possible neurotoxicity, particularly in young patients. Because the skin of children and the elderly is more permeable, their skin is more vulnerable to the toxic effects, of lindane. It is to be used with extreme caution if at all, in anyone under 110 pounds. Patients who have conditions, such as HIV infection, or take certain medications that may lower the seizure threshold may be at greater risk for serious adverse events.

There are many safer and more effective treatments available. The pyrethrins are a pair of natural organic compounds that have potent insecticidal activity. Products containing pyrethrin are available over-the-counter. Pyrethrins are particularly harmful to aquatic life, but are far less toxic to mammals and birds than many synthetic insecticides. Although considered to be amongst the safest insecticides, pyrethrins are still known to irritate eyes, skin, and respiratory systems. Re-treatment after 7 to 10 days is recommended to assure that no eggs have survived. Nit combs are available to help remove nits from hair. Dose and duration of shampoo treatment should be followed according to label instructions.

Prevention of Pediculosis
Physical contact with infested individuals and their belongings, especially clothing, headgear, combs, and bedding, should be avoided. Health education on the life history of lice, proper treatment, and the importance of laundering clothing and bedding in hot water (140°F for 20 minutes), or dry cleaning to destroy lice and eggs, is extremely valuable. In addition, regular inspection of children, especially of children in schools, institutions, and summer camps, is crucial in detecting infestation.

Ringworm
Ringworm is a skin infection caused by a fungus that affects the scalp, skin, fingers, toenails, or feet. Anyone can get ringworm. Children are more susceptible to certain varieties, while adults may be more affected by others.

Transmission of Ringworm
Transmission of these fungal agents can occur by direct skin-to-skin contact with infected people or pets, or indirectly by contact with such items as barber clippers, hair from infected people, shower stalls or floors.
Symptoms of Ringworm
Ringworm of the scalp usually begins as a small pimple, which becomes larger in size, leaving scaly patches of temporary baldness. Infected hairs become brittle and break off easily. Occasionally, yellowish cup-like, crusty areas are seen. With ringworm of the nails, the affected nails become thicker, discolored, and brittle, or they will become chalky and disintegrate. Ringworm of the body appears as flat, spreading, ring-shaped areas. The edge is reddish and may be both dry and scaly, or moist and crusted. As it spreads, the center area clears and appears normal. Ringworm of the foot appears as a scaling or cracking of the skin, especially between the toes.

Treatment of Ringworm
The incubation period is unknown for most of these agents, however, ringworm of the scalp is usually seen 10 to 14 days after contact, and ringworm of the body is seen 4 to 10 days after initial contact. Your doctor may prescribe fungicidal tablets to swallow, or powders that can be applied directly to the affected areas.

Prevention of Ringworm
Towels, hats, and clothing of the infected individual should not be shared with others. Young children who are infected should minimize close contact with other children until they are effectively treated.

Sexually Transmitted Diseases and Infections (STD’s) and (STI’s)
Sexually transmitted diseases (STD) are also referred to as sexually transmitted infections (STI). More than 300 million new cases of curable sexually transmitted infections (STI) occur each year, with a global distribution that closely mirrors that of HIV. Each new infection not only increases HIV transmission risk but also carries the potential of other serious complications including fetal loss, stillbirths, infertility, ectopic pregnancy and severe congenital infections. Syphilis alone, when present during pregnancy, results in fetal loss in a third of cases, and half the surviving infants suffer congenital disability.

The STDs, HIV Co-infection Connection
Sexually Transmitted Diseases (STDs), also known as sexually transmitted infections or STI, come in a variety of types. There are fungi, bacteria, parasites, and viruses. As explained in the previous section on the subject of Tuberculosis, HIV can affect persons carrying the virus with an increase of multiple medical conditions. Carriers stand an increase chance of contracting many airborne diseases. Germs in their environment can become increasingly troublesome, much more so than for persons not infected. As time continues persons with the HIV virus experience a brake down in their immune system, followed by a break down in their health. The continued weakening of the infected individuals’ ability to fight off sicknesses eventually progresses to an accelerated rate. As persons infected with the HIV virus are more susceptible to all types of infections, and illness from the environment, they are equally more susceptible to infections from fungi, bacteria, parasites, and viruses they may come in contact with during a sexual encounter. For this reason it is fitting to review the subject of STDs. Several STDs cause lesions or open sores to occur which may serve as portals of entry directly into the bloodstream and better facilitate HIV infection.
1. Some STDs are considered to be co-factors, which assist in the immune system malfunction leading to AIDS.
2. People who leave themselves open to STD infections also leave themselves open to eventual HIV infection.

Prevention and Treatment of STD’s and STI’s
Sexually active individuals should get routine checkups. Some STD’s do not produces immediate symptoms. A long time may pass before signs that there is something wrong appear, alerting the infected individual. Moreover, the sexually active should use every precaution to protect from contracting any one of the many STD’s from their sexual partner. This should be a given, but it is not always the case. Fidelity and loyalty are a valued part of a relationship, however statistics show infidelity occurs in some relationships.

Overall, if you are remotely unsure about your sexual partners’ faithfulness, and you are not using protection, you are gambling your life; it’s as simple as that. Because there are so many different STD’s/STI’s to cover in the context of this course the list here has been confined to STD’s/STI’s which are prevalent and pose an accelerated threat when compounded with HIV infection the list is of the STD’s that are not uncommonly found in sexually active people that either did not use protection or the protection used failed.
Getting Tested For STDs
For those, which are fungal or bacterial infections, you can be tested as soon as two weeks after exposure. For the viral infections, you will have to wait for your body to produce enough antibodies to that specific virus to take what is called a "titer" blood test. That time is generally 3 months after exposure. An important rule of thumb: should you experience any symptoms after sexual contact, it is advisable to seek the advice of a physician as soon as possible.

Letting symptoms get worse or putting off STD testing can result in severe illness, sterility, Pelvic Inflammatory Disease, passing an infection to your next partner, irreversible damage to your nervous system, or even death. Currently Within the state of North Carolina, all Public Health Departments offer STD testing. The North Carolina HIV/AIDS Hotline has a listing of STD test sites throughout the state of North Carolina. Contact information for a state run test site could be found on the Internet by doing a search.

STDs and STI's Index
Acquired Immunodeficiency Syndrome (AIDS)
Syphilis
Gonorrhea
Genital Herpes
Genital Warts
Chlamydia
Trichomoniasis (Trich)
Candida/Vaginal Thrush
Pediculosis Pubis (pubic lice)
Scabies
Moluscocum Contagiosum
Hepatitis A
Hepatitis B
Hepatitis C

AIDS Drug Assistance Programs (ADAPs)
AIDS Drug Assistance Programs (ADAPs) provide FDA-approved HIV-related prescription drugs to low-income people with HIV/AIDS who have limited or no prescription drug coverage. They do so directly or by purchasing health insurance that includes medications. ADAPs reached approximately one quarter of people with HIV/AIDS estimated to be receiving care in the United States. Each state operates its own ADAP, including determining eligibility criteria and other program elements, resulting in wide variation in ADAPs across the country. Clients must be HIV positive, low-income, and under- or uninsured. Effective July 1, 2007, requiring ADAPs to cover at least one medication from within each antiretroviral drug class. There are currently four classes.

Appropriate behavior in dealing with HIV Positive People
A discussion on the appropriate behavior in dealing with persons who are or who may be infected with the HIV virus or who have the AIDS syndrome is not complete, free of pointing out the laws that protect HIV positive individuals from discrimination. Appropriate behavior toward HIV positive people and the law are interconnected. Appropriate behavior is always better appreciated when it comes from the heart and with sensitivity. People with HIV infection or AIDS also feel anxious about their health and about how coworkers will treat them. They want to live and work without being singled out or harassed. They need your understanding and sensitivity.

Regrettably, not everyone is compassionate or caring. Realistically though ... it’s no secret; some people are just down right rude, and some are even mean and hateful. An unfortunate product made necessary by people who fit this group, are the many laws, which have been established to protect HIV positive people from unfair treatment. These laws, not unlike the disease itself, tend to be complicated and can be perplexing. They are designed to protect the rights of HIV positive people, by making certain conduct compulsory so as to compel certain behavior or face the risk of costly legal actions.

Because discrimination laws are complex and compound, without a complete understanding of them, people not intending to be malicious can inadvertently behave contrary to that of which is required by these laws. The only way to protect you from legal actions stemming from conduct contrary to the law is to understand what the laws call for. As always the information in this program is not intended as legal advice. The courts make decisions on a case-by-case basis. Before you
get involved in anything that pertains to the information given here, to protect yourself from becoming subject to a court review it is best advised that you consult with an attorney about any questions you may have. This information is intended as a general overview of current laws that protect the rights of HIV positive people, with the expectation you will develop a better understanding of both voluntary behavior toward people with HIV/AIDS, and compulsory behavior toward people with HIV/AIDS, the latter of which if followed can help protect you from unwanted legal actions.

**HIV Positive Coworkers or Customers**

If someone you know has HIV infection or AIDS, you may feel anxious. That is a normal reaction. People with HIV infection or AIDS also feel anxious about their health and about how coworkers will treat them. Be supportive of coworkers with HIV infection or AIDS. If you have a close relationship, you can let the person know you are concerned and offer support.

1. Most people with HIV infection or AIDS are able to function normally and independently. They want to live and work without being singled out or harassed. They need your understanding and sensitivity.
2. Let the person with HIV infection or AIDS decide whom to tell about their situation. Do not spread rumors or gossip about someone with HIV infection or AIDS.
3. People infected with the virus have damaged immune systems. Be careful not to expose them to your colds or coughs. Even a minor cold can be dangerous to someone with HIV infection or AIDS.
4. Your coworkers may have a spouse, family member, life-partner or close friend with the virus. Be supportive of them.

**Discrimination**

**Forms of Discrimination to HIV Positive People**

- Denying a person with AIDS the opportunity to participate;
- Providing different or separate benefits or services;
- Continual harassment;
- Pre-employment inquiries about health status or disability;
- Questions as to the nature of a disability in the sale or rental of housing;
- Questions about sexual behavior or sexual orientation;
- Denial of housing based on a disability;
- Discrimination based on associating with a person with AIDS;
- Failure to make reasonable changes for benefits;
- Violating the confidentiality of a person with AIDS or HIV infection;
- Failure to stop discrimination;
- Retaliation for a complaint
- Keeping medical examination records

**Rules protecting HIV positive individuals**

1. The ADA also requires employers to make "reasonable accommodations" or their disabled workers. "Reasonable accommodations" mean adapting the workplace to the employee's disability so that he/she can continue working.
2. The person with the disability must identify him or herself as having a disability and must request the accommodation.
3. In North Carolina any person who maliciously, or for monetary gain, breaches the confidentiality of sexually transmitted Disease information commits a felony of the third degree.
4. HIV positive people cannot be fired for using health or disability benefits.
5. Plan participants and beneficiaries cannot be discharged, fined, suspended, expelled, disciplined, or discriminated against for exercising any right or prospective rights under a plan.
6. Treatment of employees with AIDS or who is HIV positive should be consistent with treatment of other employee medical conditions.
7. The Employee Retirement Income Security Act of 1974 (ERISA) prohibits forced retirement of an employee with AIDS or HIV infection; denial of short or long term disability payments; denial of disability pension, or discontinuation of health insurance.
8. The Americans with Disabilities Act does also prohibit discrimination in the terms and conditions of employment, including health and disability insurance benefits.
9. An employer may not ask or require a job applicant to take a medical examination before making a job offer. It cannot make any pre-offer inquiry about a disability or the nature or severity of a disability.
Workplace Programs and Policies
Design policies and implement workplace programs before being confronted by the issue. Then, you can:

- help prevent the spread of HIV infection among your employees and their families and within your community
- plan for reasonable accommodations as you would for other persons with disabilities
- reduce employee fear, work disruption, and customer concern
- demonstrate your company’s responsiveness and compassion
- meet national and State anti-discrimination requirements as mandated in the ADA, the Rehabilitation Act of 1973, and State and local statutes
- where applicable, address the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens Standard in your policy, mandating the use of infection-control procedures and the establishment of written exposure control plans to protect workers

Building Your Own Workplace Program
A division of the CDC known as “Business/Labor Responds to AIDS”, (BRTA/LRTA), is a resource for workplace programs that can protect you your employees and your business. If you are an employee it can protect you from unnecessary litigation and costly court cases, and if you are a person living with HIV/AIDS it can help you know your rights and be treated fairly.

The Five Workplace Program Components
There are five components to the BRTA/LRTA programs. Each of these components can be implemented individually, but the program works best when all five components are implemented as a group. The BRTA/LRTA components are relevant to large and small businesses, labor unions, and other organizations, both domestically and internationally. These components can be used for a specific HIV/AIDS prevention program or can be incorporated into a larger, overall health and wellness program:

**HIV/AIDS Policy Development**, a written policy that covers HIV that complies with U.S. Federal, state, and local laws or relevant laws in other countries and describes the parameters of legal and other workplace issues. Such as reasonable accommodation, confidentiality, hiring, benefits, non-discrimination, other employment practices, universal precautions, co-worker anxiety, insurance and other healthcare issues, and implementation of workplace education efforts.

**Training for managers, supervisors, and labor leaders**, to address HIV issues in the workplace. This includes imparting knowledge of the organization's policy and strengthening the ability of leaders and managers to exercise the skills necessary to address the full scope of HIV issues in the workplace.

**HIV/AIDS education for employees/workers** to address HIV transmission, prevention practices, workplace issues, and the company's HIV policies in these and related areas; with the increased turnover and high mobility of today's workplace, it is necessary to continue with educational efforts consistent with sound training principles. Training sessions must be an ongoing process of information dissemination.

**HIV/AIDS education for employees/workers' families**, through the employee/worker or directly from the employer to the family.
SECTION 2
SANITATION, STERILIZATION, AND NCAC SALON REQUIREMENTS
(6 CE Hours)

Learning objectives
• Explain the difference between pathogenic and nonpathogenic bacteria.
• Identify the primary forms of pathogenic microorganisms and explain their relationship to disease.
• List infections caused by common viruses, bacteria and fungus that may exist in a salon.
• List the steps necessary to properly sanitize hands, and to disinfect, handle and store tools appropriately.
• List infection control responsibilities required by the North Carolina
• Board of Cosmetology for salon operation and the practice of cosmetology in North Carolina.
• List Environmental Protection Agency regulations relating to nail salons, beauty shops, and barber shops in North Carolina.
• After completing this section, participants should be able to:
  • Know the classifications of bacteria and list the different types
  • Explain what a bloodborne pathogen is and name the ones that are a concern in the modern salon
  • List the differences between animal and vegetable parasites sometimes seen in the salon
  • Define the term decontamination and explain various methods used to decontaminate various objects
  •list the differences between sterilization, disinfection and sanitation.
  • List the different types of disinfectants and how they are used
  • Describe how to disinfect salon tools and surfaces
  • Demonstrate how to properly wash hands and when hand washing should be done
  • Explain OSHA procedure for blood spills and the proper disposal of contaminated items
  • Understand the meaning of Universal Precautions and how to apply them to the salon environment.

Your Professional Responsibility
The purpose of this section is for you to learn how to conduct services in a safe environment, and taking measures to prevent the spread of infectious and contagious diseases. You have many responsibilities as a salon professional. None is more important than your responsibility to protect your client’s health and safety as well as your own. Secondly you have responsibilities to the state and your profession to learn and follow the rules and regulations designed and enacted to protect the welfare of the public. Never take shortcuts when it comes to sanitation and disinfection. As a cosmetologist serving the public, you will come in close contact with many clients. To avoid the spread of disease-producing bacteria, it is necessary for you to follow good sanitation and sterilization practices. You should understand the rules and the regulations, and you must always follow them to the letter of the law, for your own protection and for the protection of your clients. This is how you, your colleagues, and your clients can maintain a sense of trust and respect for each other. Overall, health, safety, and cleanliness should be an integral part of your normal routine and the routines of all those who work with you. In this way, you and your coworkers can project a steadfast professional image.

Violations can result in spreading infection and diseases to the very people that have trusted you with their safety, as well as discipline and fines by the board of cosmetology. The sanitation and sterilization of equipment and surroundings are very important and, in order for you, to understand how important and necessary it is, you must first study bacteria. You must understand how the spread of disease can be prevented and become familiar with the precautions that must be taken to protect you and the clients’ health.

It is the responsibility of the salon staff to keep the salon clean and sanitary. It is the responsibility of the individual to keep the instruments that they use compliant with the law. Some states now have consumer complaint forms available online. These forms are quick and convenient to use. They allow the public to communicate possible infractions to the regulating board. A growing number of states are beginning to use electronic complaint forms. Along with the introduction of this method of communication by the consumer will come a scrutiny from the governing boards and, therefore, should aid in an improved salon environment for a growing number of salons. Keeping a clean and sanitary salon will not only protect the client and the salon professional, but it will also ensure the salon professional will not run into troubles resulting from non-compliance with the sanitation laws of the state. The North Carolina law governing salon sanitation will be discussed later in this course. For now let’s take a look at bacteria, the growth of bacteria, and how they reproduce.
In this section we will examine pathogens, the life cycle, and the role they play in the spread of infection and disease. We will also look at methods of infection control and what we can do in the salon and the barbershop to prevent the spread of microorganisms that cause infections and disease. By reading this section you will know the infection control practices that you are responsible to follow under North Carolina law as well as the concept of Universal Precautions and how universal precautions should be implemented in cases of a bloodspill. In general you will be able to understand and follow the infection control rules and laws of the State of North Carolina, so you can comply with you legal and moral responsibilities as a licensed personal service professional.

**Contagious Diseases**
The transfer of infectious material causes skin infections, as well as blood poisoning, from one individual to another. Another way which infectious material can transfer is by unsanitary implements (such as combs, hairpins, brushes, etc.). These tools of the trade can act as a vehicle, being used first on an infected person, and then on another without having been cleaned or sterilized properly.

**Microorganisms and infectious agents**
Microorganisms are tiny living particles (organisms) with many different characteristics. They live in our air, water and earth, and are found everywhere on the planet. Some microorganisms are associated with infection or disease; others are harmless or even helpful. Bacteria, viruses and parasites are three major categories of microorganisms that you encounter every day.

**Bacteria**
Bacteria are tiny. They consist of one-celled microorganisms found roughly everywhere. Bacteria are particularly abundant in dust, dirt, refuse, and diseased tissues. Commonly, bacteria are not perceptible except with the aid of a microscope. Just to give you an idea of the size, fifteen hundred rod-shaped bacteria will barely reach a pinpoint. They will become noticeable when thousands of them grow to form a "colony" and can be seen as a mass. Bacteria are classified as to their harmful or beneficial qualities. It must be kept in mind that not all bacteria are harmful to us. In fact, a great majority of bacteria are helpful and useful. There are two classifications of bacteria:

1. Non-pathogenic organisms constitute the majority of all bacteria and perform many useful functions, such as decomposing refuse and improving the fertility of the soil. To this group belongs the saprophyte, which lives on dead matter.

2. Pathogenic organisms (microbes or germs), although in the minority, produce considerable damage by invading plant or animal tissues. Pathogenic bacteria are harmful because they produce disease. To this group belong the parasites, which require living material for their growth.

**Harmful Bacteria**
Bacteria are responsible for a large percentage of illness and suffering. For this reason, the practice of sterilization and sanitation is necessary in a salon, barbershop or specialty salon.

**Pathogenic Bacteria Classification**
As to form or general appearance, there are three major groups of bacteria.

1. Cocci (singular, coccus) are round shaped organisms, which appear singly or in groups:
   - Staphylococci (singular, staphylococcus) — pus-forming organisms which grow in bunches or clusters, and are present in abscesses, pustules and boils.
   - Streptococci (singular, streptococcus) — pus-forming organisms which grow in chains, as found in blood poisoning.
   - Diplococci (singular, diplococcus) — grow in pairs and cause pneumonia.
   - Gonococci (singular, gonococcus) — cause gonorrhea.
   - Meningococci (singular, Meningococci) — cause meningitis.

2. Bacilli (singular, bacillus) are rod-shaped organisms, which vary greatly in thickness. They are the most common and produce such diseases as tetanus (lockjaw), influenza, typhoid, tuberculosis, and diphtheria. Many bacilli are spore forming.

3. Spirilla (singular, spirillum) are curved or corkscrew-shaped organisms. They are further subdivided into several groups. The sub-group of chief importance is that of spirilla. The spirilla called Treponema pallida is the causative agent in syphilis.

**Growth and Reproduction**
Bacteria consist of an outer cell wall and internal protoplasm. They manufacture their own food from the surrounding environment, give off waste products, and are capable of growth and reproduction. Bacteria may exhibit two distinct phases in their life cycles — the active stage and the inactive or spore-forming stage.
Active Stage
Bacteria grow and reproduce. These microorganisms live and multiply in warm, dark, damp, and dirty places where sufficient food is present. Many parts of the human anatomy offer suitable breeding places for bacteria. When conditions are as mentioned above, bacteria reproduce at an unbelievable rate. As food is absorbed and converted into protoplasm, the bacterial cell increases in size. When the limit of growth is reached, it divides crossways in half, forming two daughter cells. From one bacterium, as many as sixteen million more may develop in half a day.

Spore-Forming Stage
When favorable conditions cease to exist, bacteria either die or cease to multiply. Some bacteria can form spherical spores, which have a tough outer covering and are able to withstand long periods of dryness, periods of lacking food, or unsuitable temperature. Examples of bacteria that are capable of such action would be the anthrax and tetanus bacilli. In the spore stage, the spore can be blown about in the dust and is not harmed by disinfectants, heat or cold. When favorable conditions are restored, the spore changes back into the active, vegetative form and again starts to grow and reproduce.

Viruses
Viruses are found wherever there is life and have probably existed since living cells first evolved. The origin of viruses is unclear because they do not form fossils, so molecular techniques have been the most useful means of investigating how they arose. These ultramicroscopic infectious agents are so small they will pass through filters. Viral populations do not grow through cell division, because they are acellular. Instead, they use the machinery and metabolism of a host cell to produce multiple copies of themselves, and they assemble in the cell. Unlike bacteria, viruses do not survive for any length of time outside of a host cell. The range of structural and biochemical effects that viruses have on the host cell is extensive. These are called cytopathic effects. Most virus infections eventually result in the death of the host cell. Often cell death is caused by cessation of its normal activities because of suppression by virus-specific proteins, not all of which are components of the virus particle. Some viruses cause no apparent changes to the infected cell. Cells in which the virus is latent and inactive show few signs of infection and often function normally. This is often the case with herpes, it causes persistne infections and then the virus is often dormant for months even years.

Viruses are the basis of diseases like hepatitis, influenza and measles, and are the source of colds, chicken pox, cold sores and genital herpes, mononucleosis, hepatitis and HIV/AIDS. Viruses are a particular concern in salons because of their potential severity and the way they spread. Viruses occupy the surfaces of objects you touch, including door handles, coffee mugs and scissors; they can be inhaled on tiny dust particles, or travel on the minute amount of saliva expelled in a cough. Viral infections can be transmitted from one person to another through casual contact with an infected individual or contact with what he or she touched. Both hand-to-surface and hand-to-hand contact are both highly effective methods for transferring virus particles from one individual to another.

Filterable Viruses
These organisms are so small they will pass through filters. Such diseases as infantile paralysis, influenza, small pox, rabies, and the common cold are examples of viral infection. Rickettsia are microorganisms much smaller than ordinary germs, but are larger than the viruses that cause disease among insects, as well as, man and are responsible for the transmission of typhus fever and Rocky Mountain spotted fever. Insects, ticks, fleas, and lice can transmit and infect people with rickettsia.

Plant parasites
Plant parasites, such as fungus or mold, mildew and yeasts, are multi-cellular organisms that are as prevalent as bacteria and consume both live and dead tissue to survive. Fungi usually prefer a damp environment, but can also survive in a warm, dry climate. They reproduce and spread a number of different ways, and can invade the human body easily, requiring no break in the skin.

Ringworm and athlete’s foot are two common contagious diseases that are spread by fungi. Another is favus, which affects the scalp. Cosmetologists should not serve any individual with signs of any fungal infection. You should not work if you think you have a fungal infection yourself, but should seek treatment immediately. If you think a client has ringworm, identified by a ring-shaped, circular pattern on the skin, or athlete’s foot, do not provide service to him or her because it is highly contagious. Tell the person to consult a physician for treatment.
Precautions with plant parasites
Fungal infections can be stubborn. Many affect the skin, but fungal infections can also cause severe respiratory infections. More common versions of fungal infection are those caused by yeast, including nail fungus, athletes’ foot, jock itch and ringworm. Both over-the-counter and prescription treatments are available for relief from the unpleasant, itchy symptoms of many yeast infections. Plant parasites, like fungus and mold, are contagious, with nail fungus a significant risk to clients receiving nail services. Fungi can spread not only from one nail to another, but also from a client to a technician or the reverse, given improper sanitation techniques at a salon. Nail fungus appears as discoloration of the nail plate (on either the fingernails or toenails), initially appearing white but growing darker over time. Clients with nail fungus should be referred to a physician for treatment.

Molds and mildews do not infect fingernails, and rarely if ever appear under the nail. Greenish bacterial infections, which may appear yellowish or yellow-green initially, can continue to stain the nail plate long after an infection has subsided, and are sometimes mistakenly attributed to mold. Nails can harbor dangerous bacteria, which can thrive on the oils and moisture that exist between an improperly prepared or unsanitized nail plate and an applied enhancement. Clients with nail fungus or other infections should not receive nail services but can be assisted in removing an artificial nail from the infected natural nail. If you are asked to expose the natural nail, follow these precautionary steps:
1. Wear gloves during the removal of artificial nails.
2. Follow the manufacturer’s instructions for removal.
3. Discard any implements, including orangewood sticks, items with porous surfaces and any abrasives used.
4. Disinfect all implements and work surfaces.
5. Refer the client to a physician for treatment once the natural nail is exposed.

Animal parasites
Animal parasites may be single-cell protozoans, like malaria or amoebas, or multi-cell, like mites or lice. Protozoans consume both plant and animal tissue and are found in blood and body fluids, water and food. The multi-cell mites and lice can hide in the hair and tunnel under the skin. Be aware of the signs of scabies, identified by bite marks on the client; Rocky Mountain spotted fever; or typhus, caused by rickettsia, animal parasites carried by fleas, lice and tics that are even smaller than bacteria.

If a client has a visible communicable disease, like pediculosis more commonly called head lice, open sores or marks suggesting scabies, it is recommended that you ask the person to furnish a statement signed by a physician that the disease or condition is not in an infectious, contagious or communicable stage. The same is true if a cosmetologist has symptoms or indications of a visible disease, lice or open sores; he or she should not practice cosmetology until obtaining a statement signed by a physician stating that the disease or condition is not in an infectious, contagious or communicable stage.

Bacterial Infections
Diseases are communicable or contagious when they can be transmitted from one individual to another. Working with the public puts you in a particularly susceptible position in which encountering potentially dangerous pathogens and opportunistic organisms occur everyday. When it does happen you can see it, most persons don’t show any symptoms. Always assume your clients, co-workers and environment could be carrying illness, and use proper infection control procedures every day.

Pathogenic bacteria become dangerous to health only when they successfully invade the body. An infection occurs if the body is unable to cope with the bacteria or their harmful toxins. An infection may be localized, as in a boil, or a general infection (the most dangerous) may result when the blood stream carries the bacteria and their toxins to all parts of the body, which is what occurs in blood poisoning or syphilis. The presence of pus is a sign of infection. Pus contains bacteria, body cells and blood cells, both living and dead. An infection is considered contagious when it tends to spread more or less readily from one person to another by direct or indirect contact. Precautions must be followed to prevent the spread of infection when it is in this contagious stage.

Skin is our first line of defense; when there are no cuts or scrapes, skin is excellent protection against pathogens. In the vast majority of cases, bacteria, fungi and viruses enter the body through the portals of the nose and mouth, small tears or openings in the skin, and to a lesser extent, the eyes and ears. Once inside the body, the pathogen reproduces rapidly, at a rate that can overwhelm the immune system, resulting in disease. Transmission may occur through direct or indirect contact. Germs may spread from one individual to another through direct contact—holding hands or kissing, for example— or indirectly—inhal ing contaminated droplets in the air (airborne transmission), or touching a contaminated surface and then
touching one’s nose, eyes or a mucous membrane. Try to avoid touching your face during the day, and always wash your hands between clients.

Yeast, scabies, lice and many other skin infections do not require an open sore or mucosal surface to infect. Athlete’s foot contaminates through indirect transmission. When someone with athlete’s foot walks barefoot on a wet bathroom floor, for example, the person leaves spores behind that will stick to the foot of anyone else walking barefoot on that floor, infecting the individual even if he or she has no cuts or openings on the feet. Fungi, like athlete’s foot, will survive for some time on a damp or wet floor. Shower stalls and soaking baths that retain small amounts of water must be thoroughly cleaned and disinfected with the appropriate disinfectant.

The primary modes of travel for common contagions are:
- Mouth and nose discharge
- Shared cups or towels.
- Open sores
- Coughing or sneezing
- Unclean hands
- Unclean implements
- Pus
- Spitting

Pathogenic bacteria can also enter the body through:
- The mouth during eating and drinking
- The nose and the mouth during breathing
- A break in the skin,

How Bacteria Enter Our Bodies
Bacteria and other infectious agents can enter the body through any of the following routes —
- Through the mouth, by food, drinking liquids, or items placed in the mouth
- Through the nose and mouth when we breathe
- Through the eyes by way of dirt, dirty hands, or unclean objects such as poorly maintained contact lenses; and
- Through breaks or wounds in the skin, scratches, sores, cuts, blemishes

Humans are excellent sources of contamination because we are constantly leaving organic particles behind, wherever we go – a mixture of dead skin cells with viral, bacterial and fungal particles, and other microorganisms that consume skin cells or use us to travel to an appropriate host. Every time you touch something, you deposit some of this organic matter on another surface. Simple actions like touching a client’s hair, brushing some of your hair out of your eyes with your hand, or touching a spray bottle can move microorganisms from one item to another, from you to your client, or your client to you.

Individuals who are susceptible to infection due to a compromised protection system or some failure in their ability to resist invasion are also the targets of opportunistic microorganisms. In contrast to pathogens, opportunistic organisms do not cause initial illness, but will infect an individual once pathogenic organisms have already weakened its immune system. Opportunistic organisms cling to the skin and the hair and exist in the bodies of healthy people.

Microbes also contaminate ventilation systems; to discourage their growth, vents, filters, humidifiers and dehumidifiers should be cleaned and maintained regularly. Investigate any mildew or musty odors, which are a good indication of microbe growth. Germs in a ventilation system easily spread throughout a salon, landing on people, surfaces and implements, whenever the blower or fan turns on. Germs not only float through the air, settling constantly on salon surfaces such as sinks and countertops, they also can also “hitchhike” on human skin, hair and clothing, contaminating anything with which they come into contact. Pathogenic and opportunistic microorganisms are able to thrive in a salon’s warm, moist places, such as the drain of the shampoo sink, the footbaths, and hot and cold water handles and taps. Implements such as scissors, files, brushes or nippers can be major sources of contamination because they often contain organic matter, an optimum growth environment for pathogenic and opportunistic microorganisms.

Some of the most dangerous areas in your salon are the places you keep contaminated manicuring tools or equipment, including the manicure table and the trashcans in which you deposit dirty implements. Microbes can also exist on seemingly unlikely products – bars of soap, for example. Because germs and other microorganisms have been shown to thrive on bar soap, many salons prefer to use liquid soap that can be dispensed from a container for each customer. In addition, soaking
Immunity

Immunity is the ability of the body to resist and destroy bacteria once they have entered the body. Immunity against disease is a sign of good health. It may be natural or acquired. Natural immunity is partly inherited and partly developed by hygienic living. Acquired immunity is secured after the body has, by itself overcome certain disease, or when it has been assisted by injections to fight bacteria.

Human Carrier

A person may be immune to a disease and still carry germs that can infect others. Such a person is called a human disease carrier. The diseases most frequently transmitted in this manner are typhoid fever and diphtheria. Physical agents such as heat (boiling, steaming, baking, or burning), and chemical agents such as antiseptics, disinfectants or germicides can accomplish destruction of bacteria.

Decontaminating your environment

You have a responsibility to control exposure to pathogens by decontaminating your environment and tools. Remember that pathogens collect anytime an object or surface is exposed to air. Doorknobs, handles, the telephone, money, cabinets, the cash register – all are surfaces touched by coworkers and clients that can harbor harmful pathogens, and so should be decontaminated to some degree.

Cleaning is only the first step of the process. The following sections review the meaning of sanitation, sterilization and disinfection, terms that are commonly used interchangeably, but have very different meanings and require different procedures.

Principles of Prevention

There is no better way for a salon to make a good first impression than to maintain the highest level of cleanliness. This makes a positive statement that fills clients with confidence. There is more to a clean salon, however, than a well-swept floor or vacuumed rugs. Proper care must be taken to meet rigorous health standards. Otherwise, the salon could be contributing to the spread of disease. Controlling infection and disease is a vitally important aspect of the salon industry. Clients depend on you to ensure their safety. One careless action could cause injury of serious illness. Being a salon professional can be fun and rewarding, but it is also a great responsibility. Fortunately, preventing the spread of dangerous disease is not hard to do if you know how to do it and, more important yet, if you practice what you know.

Decontamination

Take a look around you. What do you see? No doubt, whatever you are, you are looking at some sort of surface. It could be a table, the wall, the floor, the doorknob, or your hand. Almost everything presents a surface of some kind. These surfaces may seem clean to you, even sparkling, but no matter how clean they appear to the naked eye, chances are they are contaminated.

Surface of tools or other objects that are not free from dirt, oils, and microbes are covered with contaminants, which are any substance that can cause contamination. Many things can be contaminants, such as hair left in a comb, makeup on a towel or brush, or nail dust on a file.

Of course, a salon can never be completely free from all contamination, and it would not make sense to attempt such a goal. However, it is you responsibility as a salon professional to be on constant alert for disease causing contaminants.

The removal of pathogens and other substances from tools and surfaces is called decontamination. Decontamination involves the use of physical or chemical means to remove, inactivate, or destroy pathogens so that the object is rendered safe for handling, or disposal. There are three main levels of decontamination: sterilization, disinfection, and sanitation. Only disinfection and sanitation are required in the salon.
Sterilization
Sterilization is the highest level of decontamination. It completely destroys every organism on a surface, whether beneficial or harmful. Sterilization even kills bacterial spores, the most resistant form of life on Earth. Methods of sterilization include the steam autoclave and dry heat (a form of extreme heat.)

Sterilization is a process used by dentists and surgeons, whose tools are designed to break and penetrate the skin barrier. Estheticians also use needles and probes that lance the skin, so they must follow the same sterilization procedures. Sterilized disposable lancets or needles are a simpler solution to the issue of sterilization.

The word "sterilize" is often used incorrectly. For example, some practitioners tell clients that they are "sterilizing the nail plate of skin". This is impossible. Sterilizing the skin would quickly kill it and would destroy the nail or openings that permit liquids of gases to pass through. Metal implements are nonporous and can be sterilized, but wood surfaces, which are porous, cannot. In short, sterilization is impractical and unnecessary in salons.

Disinfection
Disinfection is a higher level of decontamination than sanitation. It is second only to sterilization. Disinfection controls microorganisms on hard nonporous surfaces such as cuticle nippers and other salon implements.

Disinfection provides the level of protection required by the salon to kill most organisms, with one exception. Disinfection does not kill bacterial spores, but this is not necessary in the salon environment. It is important only in hospitals and other health-care facilities where instruments are used to penetrate or cut the skin. Lancets and other metal implements used in advanced facial treatments should be sterilized, or disposable implements should be used.

Disinfectants are chemical agents used to destroy most bacterial and some viruses and to disinfect implements and surfaces. Disinfectants are not for use on human skin, hair or nails. Never use disinfectants as hand cleaners. Any substance powerful enough to quickly and efficiently destroy pathogens can also damage skin.

Read Carefully Before Using
Manufacturers take great care to develop safe and highly effective systems. However, just because something is safe does not mean that it cannot be dangerous if used improperly. Any professional salon product can be dangerous if used incorrectly. Like all tools, disinfectants must always be used in strict accordance with the manufacturer’s instructions.

All disinfectants must be approved by the Environmental Protection Agency (EPA) and each individual state. The disinfectant’s label must also have an EPA registration number. Look for this number when choosing a disinfectant. It is the only way to ensure that the EPA has the necessary test data on file and that the product has been proven effective against certain organisms. The product label will also tell you exactly which organisms the disinfectant has been tested for, such as HIV-1 or the Hepatitis B virus. The law requires testing for specific organisms, or it should not appear on the label.

Besides the EPA registration number, federal law requires manufacturers to provide you with important information in the form of a Material Safety Data Sheet (MSDS), along with other important information, such as directions for proper use, safety precautions, and a list of active ingredients. The MSDS provides all pertinent information on products, range from content and associated hazards to combustion levels and storage requirements. These sheets should be available for every product used in the salon.

Choosing A Disinfectant
Disinfectants are chemicals. To use a disinfectant properly, you must read and follow the manufacturer’s instructions. Such variables as mixing precautions and exposure times demand particular attention. The product label will explain what the disinfectant has been tested for. To meet salon requirements a disinfectant must have the correct efficacy (effectiveness) to be used against bacteria, fungi, and viruses. A disinfectant that is “Formulated for Hospitals and health Care Facilities,” or a Hospital Grade Disinfectant,” just be pseudomonacidal, effective against the bacteria Pseudomonas, in addition to being bactericidal, fungicidal, and virucidal. If a disinfectant has been tested for additional organisms such as HIV-1, it will be stated on the label. Check for the label number and efficacy standard on the label.

Proper Use of Disinfectants
Any item that is used on a client must be disinfected or discarded after each use. Items that do not have the capacity to be disinfected, such as orangewood sticks, must be discarded. Combs, brushes, scissors, razors, clipper blades, nippers, electrodes, and other commonly used, nonporous tools must be disinfected.
Even the best disinfectants will not work well in mixed or used incorrectly. All implements should be thoroughly cleaned before soaking to avoid contaminating the disinfecting solution. Hair, nail filings, creams, oils, and makeup will lessen the effectiveness of the solution. Besides, a dirty jar of disinfectant would not fill your clients with confidence. Implements must be completely submerged for proper disinfection.

Ultrasonic cleaners use high-frequency sound waves to create powerful cleaning bubbles in the liquid. This cleansing action is an effective way to clean tiny crevices that are impossible to reach with a brush. Without an effective disinfectant solution, however, their devices only sanitize implements.

Ultrasonic cleaners are a useful addition to your disinfection process, but are not required. Many systems disinfect with a great effectiveness with out relying on such devices. However, some salons feel that this added cleansing benefit is well worth the extra expense. It also saves time by eliminating cleaning by hand.

**Types of Disinfectants**

There are a variety of disinfectants that the salon can choose from.

**Quats**

Quaternary ammonium compounds: commonly called quats, is a type of disinfectant considered non-toxic, odorless, and fast acting. Older formulas were not very effective, but the newest products, called dual formulas, are dramatically more effective.

Most quat solutions disinfect implements in 10 to 15 minutes. Leaving some tools in the solution for too long may damage them. Keep in mind that long-term exposure to any water solution of disinfection may damage fine steel. With today's modern formulas, however, corrosion of metal surfaces can be easily avoided, especially if you keep implements separated while disinfecing. Metal implements such as scissors and nail clippers should be oiled regularly to keep them in perfect working order.

Quats are also very effective for cleaning tables and countertops.

**Phenols**

Like quats, phenolic or phenols, have been used reliably over the years to disinfect implements. Phenol is a caustic poison, but it can be safe and extremely effective is used according to instructions. One disadvantage is that most rubber and plastic materials may be softened of discolored by phenols. Phenols in 5% solution are used mostly for metal implements.

Extra care should be taken to avoid skin contact with phenols. Phenolic disinfectants can cause skin irritation, and concentrated phenols can disinfectants can cause skin irritation, and concentrated phenols can seriously burn the skin and eyes. Some are poisonous if accidentally ingested.

**Alcohol and Bleach**

The word alcohol is often misunderstood. There are many chemical compounds that may be classified as alcohol. The three most widely used are methyl alcohol, ethyl alcohol (ethanol), and isopropyl alcohol (isopropanol or rubbing alcohol).

In the salon, ethyl and isopropyl alcohol are sometimes used to disinfect implements. To be effective, the strength of ethyl alcohol must be no less than 70%, and the strength of isopropyl alcohol must be 99%. Since alcohol is not an EPA-registered disinfectant, it is not permitted for use with implements in states requiring hospital disinfection. This means it is not legal to use alcohol as a disinfectant in most states.

These are many disadvantages to using alcohols. They are extremely flammable, evaporate quickly, and are slow-acting and less effective when compared to other recommended disinfectants. Alcohols corrode tools and cause sharp edges to become dull. They also discolor and damage the surface of floors and countertops. The vapors formed on evaporation can cause headaches and nausea when inhaled in high concentrations or after prolonged exposure.

Household bleach, sodium hypochlorite, is an effective disinfectant, but shares some of the same drawbacks as alcohols. Neither bleach nor alcohols are professionally designed and tested for disinfection of salon implements. Bleach and alcohol may have been used extensively in the past, but have since been replaced by more advanced and effective technologies. Bleach is, however, a very effective laundering additive.
Although quats are perfectly suitable for cleaning any surface (unless otherwise specified in the manufacturer's directions), you may wish to clean floors, bathrooms, sinks, and waste receptacles with a commercial cleaner such as Lysol or Pine-Sol. Bother are very effective disinfectants, but should not be used on salon implements. They are general "household level" disinfectants and are not designed for professional tools.

Disinfectant Safety
Disinfectants are powerful, professional-strength tools that can be hazardous if use incorrectly. Disinfectants can be poisonous if ingested and can cause serious skin and eye damage, especially in a concentrated form. A good rule to remember is use caution! In addition, you should:
- always wear gloves and safety glasses when mixing chemicals with water
- always add disinfectant to water, not water to disinfectant
- Use thongs, gloves, or a draining basket to remove implements from disinfectants
- always keep disinfectants away from children
- never pour quats, phenols, formalin, alcohol (not legal in most states), or any other disinfectant over your hands. This hazardous practice can cause skin irritation and increase the chance of infection. Wash you hands with soap and warm water and dry them thoroughly
- carefully weigh and measure all products to ensure that they perform at their peak efficiency.
- never place any disinfectant or other product in an unmarked container. Disinfectants come in different forms such as ready to use sprays (for surface cleaning) liquid concentrate, and powders. Some disinfectants appear clear while others are a little cloudy
- always follow manufacturer's recommendations for mixing and using. and check the efficacy to make sure you are using the right disinfectant
- avoid over exposure. Disinfectants are chemicals, and over use is detrimental to the environment

Jars or containers used to disinfect implements are often incorrectly called wet sanitizers. Of course, the purpose of these containers is not to sanitize but to disinfect. The disinfecting soak solution must be changed daily and kept free from debris unless other directed by the manufacturer's instructions. Strict adherence to the principles of good hygiene and disinfection must be maintained.

Disinfecting Procedures
Always disinfect your tools or other implements according to the guidelines listed for EPA wet disinfectants. This means complete immersion for the required amount of time. The following are guidelines for specific salon materials.

Disinfecting Implements
Most tools and implements can be disinfected. These include combs, brushes, rollers, picks, styling tools, scissors, tweezers, nail clippers, and some nail filers.
1. Clean implements to remove hair, filings, and other such loose matter by scrubbing with soap and water.
2. Rinse thoroughly and pat dry with a clean towel.
3. Put on gloves, goggles, or safety glasses.
4. Mix disinfectant according to manufacturer's directions, always adding disinfectant to the water.
5. Using gloves or tongs completely immerse implements or tools and leave for the required amount of time, as per manufacturer's instructions.
6. Remove implements with tongs basket, or gloves so as not to contaminate the disinfectant.
7. Rinse thoroughly and dry.
8. Place disinfected implements in a clean, closed, dry, disinfected container (such as a plastic container with a lid).

Disinfecting Linens and Capes
All lines should be used once and then laundered with bleach according to label directions. Capes or drapes that come into contact with a client's skin should be laundered in the same manner.

Laundry
Soiled linens may harbor pathogens, but rarely transmit disease. Handle used linens as little as possible to avoid contamination. All soiled linen should be bagged or placed in containers at the location where it was used and should not be sorted or rinsed in the location of use. While sorting soiled linen, employees should wear, gloves and other appropriate protective apparel.
Commercial laundry facilities often use water temperatures of at least 160 degrees F and 50-150 ppm of chlorine bleach to remove significant quantities of microorganisms from contaminated linen. In the salon, normal washing and drying cycles including “hot” cycles are adequate to ensure client safety (studies suggest that satisfactory reduction of microbial contamination can be achieved at water temperatures lower than 160 degrees F if laundry chemicals suitable for low-temperature washing are used at proper concentrations). Follow instructions by the manufacturers of the machine and the detergent or wash additive should be followed closely.

**Disinfecting Electrical Equipment**

The contact points of equipment that cannot be immersed in liquid, such as hair clippers, electrotherapy tools, and nail drills, should be wiped or sprayed with an EPA-registered, hospital-grade disinfectant created especially for electrical equipment. Electrical equipment must be kept in good repair.

**Disinfecting Work Surfaces**

Before and after each client and EPA-registered, hospital-grade disinfectant should be used on the work surface (manicure table, workstation, esthetic bed, and the sort). The disinfectant should be left on the surface the full amount of time prescribed by the manufacture’s directions. Remember to disinfect all surfaces. This includes doorknobs, m handles, and so on.

The shampoo bowl should be cleaned and the drain cleared of all hair after each client. The neck of the bowl should be disinfected the same as other work surfaces.

**EPA-registered disinfectant.**

**Steps for nail sanitation**

1. Spray the top of manicure tabletop with an EPA-approved disinfectant and wipe dry before starting on new client.
2. Cover table and manicuring cushion with clean towel.
3. Have the client sanitize his/her hands, and sanitize your own hands using the procedure outlined above. Provide instructions for your clients, listing the steps required for effectively sanitizing their hands.
4. Set out a new emery board, orangewood stick, cotton balls and other disposable materials on manicuring table.
5. After concluding service with the client, discard disposable materials in a closed waste receptacle. Empty waste receptacle daily.
6. Spray the table with disinfectant.
7. Disinfect metal equipment or tools with an EPA-registered disinfectant and store them in a clean, closed, and clearly labeled container after use with each client.

**Other tips:**

- Use single-use implements as often as possible, being certain to dispose of them properly. Have as many complete sets of implements as is necessary to insure that you will have enough time to properly disinfect implements between customers. At least two complete sets are recommended for busy days, one set can be disinfecting while you work.
- Use a dusk mask and safety goggles when appropriate.
- Keep caps on all products to reduce the amount of vapor that escapes into the air.

**Whirlpool Pedicure Foot Spas**

While it is characteristic of doctors and dentists to maintain a sterile environment, most clients do not consider that the same standards should be set for those who are digging, filing, and clipping away at their feet and fingernails when visiting a nail salon. Yet, the consequences, of an unsanitary salon and the failure of strict compliance to sanitation and disinfection rules and regulations to be followed, can be the same as those at any medical facility. Bacterial infections are becoming more common among nail salon clients. Recently, Mycobacterium fortuitum and other rapidly growing mycobacteria have been found to cause severe skin and soft-tissue infections in association with nail salon whirlpool footbaths. The CDC now recommends to doctors in cases that involve persistent mycobacterial skin infections in a patient's lower extremities, that they ask the patient about any recent pedicures. Aside from the obvious risk to the health and welfare of the public and the actions of the CDC shines an unfortunate, yet necessary light on the risks of having nail services at a salon. Which is detrimental to the nail salon industry, and negatively affects all professionals that make their career providing nail services. This is how an individual’s responsibility to follow the rules impacts their colleagues. We owe it to the clients, to our self and to everyone in the industry to make the salon and the services that are offered in the salon safe.
As a result, state laws have been passed to increase the decontamination and disinfection of equipment in nail salons, however increasing the requirements in association with the disinfection process of nail salon equipment, particularly the whirlpool footbaths will have no effective benefit unless they are understood, and complied with to the exact letter of the law. These rules and regulations are designed to protect the health and welfare of public that puts their trust in the licensed professionals that provide nail services. When using whirlpool pedicure foot spas, you must follow proper disinfection procedures to ensure proper maintenance of the equipment and to prevent the spread of bacterial or parasitic disease. Take time to carefully read the manufacturer's cleaning instructions and ask your manufacturer and/or distributor for a demonstration as well. Improperly disinfected equipment can harbor bacteria that may spread disease or infection to clients, cosmetologist, or nail technicians who come into contact with it.

**DISINFECTING FOOT SPA PROCEDURE**

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### After each customer:

1. Drain all water and remove all foreign matter from the foot spa.
2. Clean the surface and walls of the foot spa with antibacterial soap and rinse with clean, clear water.
3. Disinfect with an EPA-registered disinfectant with bactericidal, fungicidal, virucidal efficacy, according to manufacturer's instructions.
4. Rinse and wipe dry with a clean towel.

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### At the end of each day:

1. Remove the screen and clean all debris trapped behind the screen of each foot spa.
2. Wash the screen and inlet with antibacterial soap or detergent and rinse well with clean, clear water.
3. Then totally immerse in an EPA-registered disinfectant with a bactericidal, fungicidal, virucidal efficacy, according to manufacture's instructions.
4. Flush the system with low-sudsing soap and warm water for ten minutes. Then rinse the spa well, drain, and let air-dry.
5. Record the date and time of the cleaning and disinfecting for each spa, maintain these records in case requested by the state.

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### Every two weeks:

1. Read the manufacturer instructions before using any disinfectant to determine which solution will not cause damage to the surface of your spa pedicure.
2. After following the recommended daily cleaning procedure described above, fill the foot spa tub with 9 parts water to 1 part board approved disinfectant solution (10% board approved solution).
3. Circulate the solution through the foot spa system for 5 to 10 minutes.
4. Let the solution sit over night (at least 6 or more hours).
5. The following morning, in advance of the first customer, drain and flush the system.

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*(21 NCAC 14H .0403.DISINFECTION PROCEDURES governs equipment sanitation requirements, it is necessary to refer to this rule to be compliant as changes do occur. Periodically refer to the North Carolina Administrative Code for the most recent updates).*

**Blood Spill Disinfection**

For bloodborne pathogens, OSHA issued a policy in 1997 stating that in order to comply with OSHA's Bloodborne Pathogens Standard, the use of an EPA-registered tuberculocidal disinfectant or an EPA-registered labeled as effective against HIV and HBV is required. For this reason, when salon implements accidentally come into contact with blood or body fluids, they should be cleaned and completely immersed in an EPA-registered disinfectant that kills HIV-1 AND Hepatitis B virus, or in a tuberculocidal disinfectant. The National Interstate Council of State Cosmetology Boards (NICS) follows this standard for examinations as well.

Blood spills occur when you or a client are accidentally cut with a sharp instrument. If a blood spill should occur during a procedure, proper steps must be taken for the safety of both people.

1. If a cut is sustained, stop the service and clean the injured area.
2. Use a finger guard of gloves as appropriate.
3. Apply antiseptic and/or liquid or spray styptic without contaminating the container.
4. Cover the injury with a Band-Aid or other appropriate dressing.
5. Clean client and workstation as necessary.
6. Discard all disposable contaminated objects such as wipes of cotton balls by double-bagging (place the waste in a plastic bag and then in a trash bag). Use a biohazard sticker (red or orange) or a container for contaminated waste. Deposit sharp disposables in a sharps box.

7. Remove your gloves. Wash your hands with soap and warm water before returning to the service.

8. All tools and implements that have come in contact with blood or body fluids must be disinfected by complete immersion in an EPA-registered, hospital-grade disinfectant that kills HIV-1 and Hepatitis B Virus or in a tuberculocidal disinfectant. Be sure to mix and use the disinfectant according to the manufacturers' directions.

Because blood can carry many pathogens, you should never touch a client's open sore or wound.

Dispensary

The dispensary must be kept clean and orderly, with all containers marked clearly as to content. An MSDS on every chemical in stock should be kept readily available to all those working in the salon or school. MSDS should also indicate the appropriate disinfectant to be used with each chemical.

Handling Disposable Supplies

To prevent the spread of disease, all disposable supplies, such as orangewood sticks, emery boards, cotton, gauze, neck strips and such, should be thrown away. Anything exposed to blood, including microdermabrasion debris, must be double-bagged and marked with a biohazard sticker or marked and disposed of according to OSHA standards (separated from other waste and disposed according to federal, state, and local regulations). Puncture-proof containers should be used in the disposal of all sharps. Remember: Disinfect or Discard.

Sanitation

The third, or lowest level of decontamination is called sanitization or sanitizing. These words are often frequently misused and misunderstood. To sanitize means, "to significantly reduce the number of pathogens or disease-producing organisms found on a surface." Cleaning with soaps or detergents will sanitize salon tools and other surfaces.

Sanitized surfaces may still harbor pathogens or other organisms. Removing hair from a brush and washing the brush with detergent is considered sanitation. Putting antiseptics designed for hands or feet on your skin or washing your hands is another example of sanitation. Your hands may appear very clean when you are finished but will still harbor pathogens found in the tap water and on the towel.

An emerging health concern is the growth of mold and mildew in buildings. Mold is a fungus growth that usually grows in dark, damp places. Mildew is a moldy coating produced by bungi that can appear on walls, fabrics, and such, and also occurs in damp areas. Mold spores carry toxins that can cause allergic reactions and sickness in some people. These spores are almost always present in outdoor and indoor air and on most furnishings and construction materials. Dirt on surfaces provides nutrients for mold. Practicing proper sanitation provides protection against the growth of mildew and mold in the salon.

Hand Washing

Hand washing is one of the most important actions that can be taken to prevent the transfer of microorganisms from one person to another. Hand washing removes microorganisms from the folds and grooves of the skin by lifting and rinsing them from the skin surface.

Sanitizing Hands

As a licensed professional dealing with multiple clients per day, it is necessary to sanitize your hands as much as it is your implements, especially in the nail and facial industries.

Note: A sanitized nailbrush may be used for a more precise cleaning. This must be done before you service each new client. (Remember that cash is one of the dirtiest things you will handle. It is covered with germs that get passed from one individual to another.)

Cleaning Agents for Hands

Cleaning agents assist in the process of removing substances from surfaces. Soaps and detergents are two common cleaning agents that are often confused for one-another, but are composed of very different ingredients and have different cleaning properties. Soaps are the product of a chemical reaction, formed by vegetable oil reacting with lye, for example, and the addition of chemicals that add a desirable smell or quality to the soap, such as glycerin, to make it milder. While soap does not kill microorganisms, soap and water will help remove them from surfaces.
Detergents are manufactured for the express purpose of cleaning specific substances off specific items, and are created using chemicals that can be very harsh to skin. In contrast to detergents that do not leave a residue or require rinsing, soaps leave a coating or residue on the body; typically one designed to make skin smoother or more attractive. Soaps also remove less fat from the skin than detergents, which have a drying quality and may strip the skin. Be sure to use the appropriate cleaning agent for the job. Different cleaning and disinfecting agents have many different properties. Always read the ingredients, instructions, and recommendations for use on the item’s label.

In the salon, hands should be thoroughly washed before and after each service. When washing your hands in a public rest room, avoid touching items such as bar soap, a towel dispenser, or a doorknob after washing and before leaving the restroom. This way you avoid contaminating your clean hands with any microorganisms. At the end of the day, wash your hands to prevent carrying microorganisms outside of the salon.

Soap and warm water are general sufficient for hand washing, although some antibacterial soaps can kill microorganisms in deeper layers of the skin than plain soap or detergents do. When over used, however, the relatively harsh, drying action of antibacterial soaps may actually leave the skin vulnerable to the skin problems such as eczema. Alcohol-based no-rinse products designed for use without water are also very drying to the skin.

**Hand washing and Drying — Prevents Infection**

Hand washing is a simple habit — one that requires minimal training and no special equipment. Yet it is one of the best ways to avoid getting sick. This simple habit requires only soap and warm water or an alcohol-based hand sanitizer — a cleanser that does not require water. Do you know the benefits of good hand hygiene and when and how to wash your hands properly?

Hand washing is defined as the vigorous, brief rubbing together of all surfaces of lathered hands, followed by rinsing under a stream of water.

Handwashing suspends microorganisms and mechanically removes them by rinsing with water. The fundamental principle of hand washing is removal, not killing. The amount of time spent washing hands is important to reduce the transmission of pathogens to other food, water, other people and inanimate objects (fomites), such as doorknobs, hand railings and other frequently touched surfaces. Proper hand hygiene involves the use of soap and warm, running water, rubbing hands vigorously for at least 20 seconds. The use of a nailbrush is not necessary or desired, but close attention should be paid to the nail areas, as well as the area between the fingers.

Wet hands have been known to transfer pathogens much more readily than dry hands or hands not washed at all. The residual moisture determines the level of bacterial and viral transfer following hand washing. Careful hand drying is a critical factor for bacterial transfer to skin, food and environmental surfaces.

The drying times required to reduce the transfer of these pathogens varies with drying methods. Repeated drying of hands with reusable cloth towels should be avoided. Recommended hand drying methods and drying times are outlined below:

**The dangers of not washing your hands**

Despite the proven health benefits of hand washing, many people do not practice this habit as often as they should — even after using the bathroom. Throughout the day, you accumulate germs on your hands from a variety of sources, such as direct contact with people, contaminated surfaces, foods, even animals and animal waste.

If you do not wash your hands frequently enough, you can infect yourself with these germs by touching your eyes, nose or mouth. In addition, you can spread these germs to others by touching them or by touching surfaces that they also touch, such as doorknobs.

Infectious diseases commonly spread through hand-to-hand contact include the common cold, flu and infectious diarrhea. While most people will get over a cold, the flu is much more serious. Some people with the flu, particularly older adults and people with chronic medical problems, such as HIV/AIDS, can develop pneumonia. The combination of the flu and pneumonia, in fact, is the seventh leading cause of death among Americans.

**Proper hand-washing techniques**
Good hand-washing techniques include washing your hands with soap and water or using an alcohol-based hand sanitizer. Antimicrobial wipes or towelettes are just as effective as soap and water in cleaning your hands but are not as good as alcohol-based sanitizers.

Antibacterial soaps have become increasingly popular in recent years. However, these soaps are no more effective at killing germs than are regular soap and water. Using these soaps may lead to the development of bacteria that are resistant to the products’ antimicrobial agents — making it even harder to kill these germs in the future. In general, regular soap is fine. The combination of scrubbing your hands with soap — antibacterial or not — and rinsing them with water loosens and removes bacteria from your hands.

**Proper hand washing with soap and water**

Before serving any client, the following process of sanitizing your hands should be followed: First, you must have an antibiotic/hospital recommended cleanser. You must use tepid water with a generous amount of cleanser. Place the cleanser in the palm of your hand and rub vigorously to lather cleanser from inside to outside of hands and fingers.

Once the surfaces of your hands and fingers have been cleansed thoroughly, rub the tips of your fingers and nails in the palm of the opposite hand to enable cleansing of the underside of the nails. Then repeat this same process a second time. Be sure to rinse thoroughly after each process. Dry your hands with a paper towel, and be sure to use a paper towel to turn off the water.

**Proper use of an alcohol-based hand sanitizer**

Alcohol-based hand sanitizers — which don't require water — are an excellent alternative to hand washing, particularly when soap and water aren't available. They are actually more effective than soap and water in killing bacteria and viruses that cause disease. Commercially prepared hand sanitizers contain ingredients that help prevent skin dryness. Use only the alcohol-based products.

**To use an alcohol-based hand sanitizer:**

- Apply about 1/2 tsp of the product to the palm of your hand.
- Rub your hands together, covering all surfaces of your hands, until they are dry.

If your hands are visibly dirty, however, wash with soap and water rather than a sanitizer.

**When should you wash your hands?**

Although it is impossible to keep your bare hands germ-free, times exist when it is critical to wash your hands to limit the transfer of bacteria, viruses and other microbes.

**Always wash your hands:**

- After using the bathroom
- After changing a diaper - wash the diaper-wearer’s hands
- After touching animals or animal waste
- Before and after preparing food, especially before and immediately after handling raw meat, poultry or fish
- Before eating
- After blowing your nose
- After coughing or sneezing into your hands
- Before and after treating wounds or cuts
- Before and after touching a sick or injured person
- After handling garbage
- Before inserting or removing contact lenses
- When using public restrooms

**Note:** Antiseptics can kill, retard, or prevent the growth of bacteria, but they are not classified as disinfectants. Antiseptics such as 3% solutions of hydrogen peroxide are weaker than disinfectants and are safe for application to skin (usually used prior to a manicure or pedicure). They are considered sanitizer and are not adequate for use on instruments and surfaces.
Universal Precautions
Many infectious diseases do not present visible symptoms on the infected person. Because you will not necessarily be able to identify clients with infectious diseases, the same infection control practices should be used with all clients. Universal precautions are an approach to infection control. Universal precautions, developed by the CDC is defined as a set of precautions designed to prevent transmission of human immunodeficiency virus, hepatitis B virus, hepatitis C virus, and other bloodborne pathogens when providing first aid or health care.

As previously mentioned, in the salon and spa environment accidental cuts from sharp tools and minor accidents cause the occasional need for first aid to be rendered, and for blood to be handled and removed from surface areas where it landed. These types of situations produce the majority of the instances in which a salon professional becomes exposed to blood. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for bloodborne pathogens.

OSHA sets the standard that must be used in the industry for dealing with bloodborne pathogens. The standard prescribes the use of Universal Precautions as the approach to infection control. Universal Precautions are a set of guidelines and controls, published by the Centers of Disease Control and Prevention (CDC), that require the employer and the employee to assume that all human blood and specified human body fluids are infectious for HIV, HBV, and other bloodborne pathogens. Precautions include hand-washing, the use of gloves, personal protective equipment such as goggles, injury prevention, and proper handling and disposal of needles, other sharp instruments, and product that have been contaminated by blood or other body fluids.

In most instances, clients who are infected with Hepatitis B Virus or other bloodborne pathogens are asymptomatic, which means that they show no signs of infection. Many individuals who have a minor, nonspecific symptom may not even know they are infected. Exposure to blood in the salon setting presents a risk of exposure to various diseases, including Hepatitis and AIDS. Therefore, the blood of all clients should be treated as if infected.

Standard/Universal Precautions
Although less likely to pose the same degree of risk to exposure than that routinely encountered in a health care facility, the salon is known to have a measurably higher level of risk to exposure from bloodborne pathogens and infectious body fluids, than many other professions. Razors, scissors, neck trimmers, and cuticle nippers, just to name a few, are sharp tools used every day for cutting in the salon and spa environment.

Because of the physical contact with larger numbers of the public, the use of sharp cutting tools and the consequential injuries resulting in blood spills, it is imperative that all professionals learn and practice proper infection control procedures and biohazard practices so they are prepared to safely handle blood spills, and to competently protect against the spread of contaminants, bloodborne pathogens, and subsequent infectious disease.

In order to do this, professionals use infection control procedures established by the CDC known as Universal Precautions and the newly established counterpart, Standard Precautions. In conjunction with the infection control standards set by the State of North Carolina approved for salons.

Sanitation and Sterilization Recommendations
Universal Barrier protection, personal cleanliness, and proper disinfection are the three “precautions” that make up the meaning of “Universal Precautions.” All three methods must be used to be completely effective.

Barrier Protection - Puts a shield between you and your clients.
Personal Cleanliness - Includes washing your hands, keeping your work area clean, etc.
Disinfection - Refers to removing germs from your tools, equipment, and work area.

Basic Rules
The salon must be well-lighted, heated, and ventilated, in order to keep the salon in a clean and sanitary condition. The walls, curtains, and the floor coverings in all work booths must be washable and kept clean. All salons must be sup plied with running hot and cold water. All plumbing fixtures should be sufficient in number and properly installed. The premises should be kept free from rodents, vermin, flies or other similar insects through cleanliness, use of screens, and an exterminator. All hair, cotton, or other waste material must be removed from the floor without delay, and deposited in a closed container. Waste material should be removed from the premises at frequent intervals. Objects dropped on the floor are not to be used
until sterilized. Hairpins must not be placed in the mouth, combs must not be carried in the pockets of uniforms, and hairnets must not be carried in cuffs or pockets of the uniform. When giving a manicure, provide finger bowls with individual paper cups for each client. Headrest coverings and neck strips must be changed for each client.

Below is a list of guidelines in a quick reference checklist, it includes most requirements that must be followed but may not include all. This list is a helpful tool but for a complete list of requirements refer to the North Carolina Administrative Code.

1. Have a first-aid kit available in case of a blood spill. The kit should include adhesive bandages, gauze, antiseptic, and disposable latex gloves.
2. Do not allow pets or animals in a salon, except those trained to assist impaired or disabled individuals.
3. Premises must be kept free from rodents, vermin, or other animals.
4. Plumbing must be installed properly and provide both hot and cold water.
5. You must have one running sink and toilet. Toilet tissue and waste receptacles must be provided.
6. Working area must be well lighted, heated, and ventilated.
7. A drinking fountain with paper cups should be provided.
8. Clean doorknobs, especially in restrooms
9. Clean floors, sinks and toilets with commercial products that kill germs
10. Walls, ceilings, floors, and equipment must be free from dust.
11. Sanitize your work area with a disinfectant.
12. Hair needs to be removed from the floor and placed in a closed container.
13. The use of a brush, comb or other article on more than one patron without being disinfected is prohibited.
14. Cosmetologists should wear a clean clothing or uniform.
15. Always wash hands after using the restroom, and between each client.
16. Hand cleaning with anti-microbial liquid soap, sanitary towels or a hand-drying blower must be provided.
17. Do not place items in your mouth, such as combs, bobby pins, tools etc.
18. Do not place combs or other instruments in pockets.
19. Do not treat any inflammatory disease or condition of skin, scalp, face or hands.
20. Gloves need to be worn during manicuring, waxing, facials, shampoos, pedicuring, tweezing and any service where you may come in contact with any blood or body fluids.
21. Keep your nail services in a separate area of the salon.
22. Avoid touching your client’s face or eye area
23. Clean dust and nail filings from your work area after every client.
24. Discard emery board, orangewood stick, and any other disposable materials after use with one client.
25. All products used directly on patrons should be labeled, be clean and be in closed containers.
26. Always use a hospital-grade disinfectant on salon implements.
27. Disinfecting products should be available at all times to clean scissors, razors, clippers, etc.
28. Place all disinfected implements in a covered container. Each container should be labeled with cosmetologist’s or nail tech’s name, especially for booth licensees.
29. Clippers and other nail-care tools should be cleaned after every use and stored only with other cleaned instruments.
30. Clipper guards should be disinfected and kept closed in a covered container, away from clippers.
31. Clippers can be stored in a drawer only if in a closed container. Hanging is recommended.
32. Scissors should be disinfected and kept in a closed clean drawer or closed clean container.
33. Cotton should be in a storage area or covered container so hair does not contaminate.
34. All paraffin wax that has come in contact with a client’s skin should be disposed after each use. Used wax should never be re-used.
35. Headrests of chairs should be cleaned with a hospital-grade.
36. Clean linens should be kept in a dust-proof cabinet.
37. Soiled linens should be kept in closed receptacles.
38. Always use clean cotton balls, sponges or tissues when applying any cosmetics or skin creams.
39. Make-up should never be shared.
40. Never use the same towel on more than one client.
41. Capes should not touch clients’ skin.
42. Sanitary towel/neck strips need to be provided for every patron.

North Carolina EPA Regulations Relating to Nail Salons, Beauty Shops, or Barbershops
North Carolina EPA Regulations Relating to Nail Salons, Beauty Shops, or Barbershops
The following information regarding EPA (Environmental Protection Agency) regulations for salon operation and sanitation in North Carolina EPA Regulations Relating to Nail Salons, Beauty Shops, or Barbershops can be found online.

Please refer to this site directly for current text and recent regulatory changes: If you are running a nail salon, beauty shop or barbershop, you need to be aware of the North Carolina EPA Regulations Relating to Nail Salons, Beauty Shops, or Barbershops EPA regulations that apply to your business. If you have wastewater discharges from your business or generate other wastes, North Carolina EPA may regulate these activities.

It is important to understand and comply with the regulations to help avoid violations. The following section we explore important requirements of the North Carolina EPA that might apply to your salon. Please keep in mind that reviewing this section does not cover all rules and regulations that may apply to your salon, however, the following information is important to be aware of and will give you some idea what regulations you are required to comply with.

Beauty/barber combination facilities
The North Carolina State Board of Cosmetology and the North Carolina Barber Board will approve beauty/barber combination facilities with the following guidelines. The facility has applied and received a salon license issued by the North Carolina State Board of Cosmetology and a barbershop application. The facility must comply with the rules of both boards. The cosmetology salon must designate a station(s) for the barber to work and submit a revised floor plan indicating location of the barber(s). Once a station has been assigned to the barber, only a barber is permitted to work at that station.

Managing wastes
Under North Carolina’s regulations, any business that generates a waste needs to evaluate it to see if it is hazardous waste. Nonhazardous wastes that you generate include clippings, packaging, paper and empty containers that you put in the trash. Products you use in your business include tints, coloring, peroxide, toners, lighteners, relaxers, polish removers and other chemicals. Some of these may contain acids, alkalies or flammable solvents. You are trained to protect you and your customers from any harmful effects from these chemicals.

These same harmful properties may make these products become hazardous wastes when you can no longer use them. A waste that is ignitable, corrosive, reactive or toxic is defined as a characteristic hazardous waste. In addition, there are specific lists of hazardous wastes in North Carolina EPA’s regulations.

Outdated products, partially full containers or unwanted products are considered wastes. And these may be hazardous wastes. Spent solvent from processing nails may also be hazardous waste. Under the regulations, hazardous waste must be sent for disposal at a permitted hazardous waste disposal facility. Hazardous waste cannot be disposed of in the trash. To help reduce hazardous waste generation, use up all of the products that you purchase and consider reusing solvents where possible.

You can call your local North Carolina EPA district office, Division of Hazardous Waste Management, for more information on the hazardous waste regulations.

Wastewater
If the sinks in your salon connected to a public wastewater treatment plant, you may be able to discharge your process wastewater to the treatment plant. Many wastewater treatment plants (also called POTWs) are operated by the city. However before you discharge wastewater to the POTW, though, you must contact the utility and check if it can handle the type of wastewater that will come from your shop.

Depending on the size and nature of your business, you may be required to get a permit before you can discharge your wastewater to the public plant. It is important to know that North Carolina EPA’s regulations do not allow for the discharge of process wastewater or chemicals into an on-site sewage treatment system, like a septic tank and leach field. Discharging chemicals into an on-site septic system can kill the helpful bacteria that break down sewage wastes. In addition, chemicals can leach from the system into nearby groundwater. If you want to run a salon from your home or from a business location that is connected to an on-site sewage treatment system, contact North Carolina EPA to discuss options for managing your wastewater.

You can contact your local North Carolina EPA district office, Division of Surface Water for more information on the wastewater discharge and permitting requirements. If you are unsure of whom your local POTW contact is, you can also call the Division of Surface Water for assistance.

The Salons Drinking Water
The water supplied in the salon and intended for consumption must be odorless, colorless and free from any foreign matter.
Crystal clear water may still be unsanitary because of the presence of pathogenic bacteria, which cannot be seen with the naked eye. Salons that have its own well that supplies water for drinking, cooking, washing hands, washing dishes or bathing, may meet North Carolina EPA’s definition of a public water system. A public water system is one that has at least 15 service connections or regularly provides water to 25 or more people for 60 or more days a year. Establishments that meet these standards fall under the public water system regulations; as such, plans to install or change a well must be submitted. Well systems must be tested periodically and the test results records must be reported to North Carolina EPA. For more information on well system requirements contact your North Carolina EPA district office, Division of Drinking and Ground Water.

NORTH CAROLINA ADMINISTRATIVE CODE
COSMETIC ARTS SALON RULES

North Carolina State Board of Cosmetic Arts Examiners: Salon Operation and Sanitation Rules
The following information are citations from the North Carolina Administrative Code. The entire NCAC Revised and Administrative Code regarding salon operation and sanitation, the statutory authority, effective dates and review dates for the selected law has not been included for practical purposes. The full chapter of cosmetology laws and rules can be found at http://reports.oah.state.nc.us/ncac.asp?folderName=Title 21 - Occupational Licensing Boards and Commissions/Chapter 14 - Cosmetic Art Examiners. Please refer to this site directly for current text or recent regulatory changes.

The following information regarding sanitation and sterilization must be displayed in a conspicuous place within the salon as required by 21 NCAC 14H.0102. An appropriate display copy may be found at the following web address:
21 NCAC 14H.0102 COPY OF RULES TO BEAUTY ESTABLISHMENTS
The Board shall give copies of the rules of sanitation governing the practice of cosmetic art to all beauty establishments.

NORTH CAROLINA BOARD OF COSMETIC ART EXAMINERS
North Carolina Administrative Code (NCAC)

21 NCAC 14H - SANITATION

SECTION .0100 - SANITATION

21 NCAC 14H .0101.COPY OF RULES TO COSMETOLOGY STUDENTS
Cosmetic art schools shall give a copy of the sanitation rules governing the practice of the cosmetic arts to each student for study.

21 NCAC 14H .0102.COPY OF RULES TO BEAUTY ESTABLISHMENTS
The Board shall give copies of the rules of sanitation governing the practice of cosmetic art to all beauty establishments.

SECTION .0200 - SHOP LICENSING AND PHYSICAL DIMENSIONS

(a) Rules in this Subchapter apply to all cosmetic art shops making initial application to operate a cosmetic art shop after the effective date of these Rules

(b) Shops licensed prior to March 1, 2012 may choose to comply with Rules .0202, .0203(c), .0204 and .0301 of this Subchapter.

(c) Shops licensed prior to March 1, 2012 must comply with Rules .0201, .0203(a)-(b), .0302-.0304 and Sections .0400 and .0500 of this Subchapter.

(d) Shops licensed prior to March 1, 2012 that make any structural changes must come into compliance with all rules in this Subchapter.

(e) Persons desiring to open a cosmetic art shop in the State of North Carolina shall make application to the North Carolina State Board of Cosmetic Art Examiner on the Board’s application form. Persons desiring to change ownership of a cosmetic art shop, relocate or reopen a shop which has been closed more than 90 days shall make application to the North Carolina State Board of Cosmetic Art Examiner on the Board’s application form.
21 NCAC 14H.0203 NEWLY ESTABLISHED SHOPS
(a) A cosmetic art shop shall be separate and apart from any building or room used for any other business or purpose, separated by a solid wall of at least seven feet in height and must have a separate outside entrance.
(b) A newly established cosmetic art shop, shall be separate and apart from any building or room used for living, dining or sleeping and shall be separate and apart from any other room used for any other purpose by a solid wall of ceiling height, making separate and apart rooms used for a cosmetic art shop. All entrances to the cosmetic art shop shall be through solid, full length doors installed in solid walls of ceiling height.
(c) A residential cosmetic art shop shall furnish bathroom facilities separate and apart from the residence.
(d) An entrance to a cosmetic art shop from a passageway, walkway or mall area used only for access to the shop, or to the shop and other businesses, may be open.

21 NCAC 14H.0204 DIMENSIONS WITHIN COSMETIC ART SHOPS
Within the clinic area each shop shall maintain no less than the following working distances:

1. 48 inches of space from the center to the center of each styling chair, esthetics table or manicuring table;
2. 24 inches from the center of the chair forward;
3. 48 inches from the back of the chair to any other styling chair, esthetics table or manicuring table; and
4. at least 30 inches of space from the back of each styling chair, esthetics table or manicuring table to the wall of the shop.

SECTION .0300 - COSMETIC ART SHOP AND EQUIPMENT

21 NCAC 14H.0301 WATER
(a) Cosmetic art shops shall have a sink with hot and cold running water in the clinic area, separate from restrooms.
(b) When a service is provided in a room closed off by a door, the sink required in this Rule must be within 20 feet of the door or 25 feet from the service table or chair. The restroom sink shall not be used to meet this requirement.

21 NCAC 14H.0302 VENTILATION AND LIGHT
(a) Ventilation shall be provided at all times in the areas where patrons are serviced in all cosmetic art shops and there must be a continuous exchange of air.
(b) All doors and windows, if open for ventilation, must be effectively screened.
(c) Light shall be provided in the service area.
(d) All cosmetic art shops must adhere to any federal, state and local government regulation or ordinance regarding fire safety codes, plumbing and electrical work.

21 NCAC 14H.0303 BATHROOM FACILITIES
(a) Toilet and hand washing facilities consisting of at least one commode and one hand washing sink with hot and cold running water, liquid soap and individual clean towels or hand air dryer shall be provided.
(b) Shops with an initial licensure date after March 1, 2012 must have toilet and hand washing facilities in the bathroom.

21 NCAC 14H.0304 EQUIPMENT
Cosmetic art shops shall maintain equipment and supplies to safely perform any cosmetic art service offered in the shop.

SECTION .0400 - SANITATION PROCEDURES AND PRACTICES

21 NCAC 14H.0401 LICENSEES AND STUDENTS
(a) Notwithstanding Rule .0201 in this Subchapter, this Rule applies to students and licensees in practice in cosmetic art schools and shops. Each licensee and student shall wash his or her hands with soap and water or an equally effective cleansing agent immediately before and after serving each client.
(b) Each licensee and student shall wear clean garments and shoes while serving patrons.
(c) Licensees or students must not use or possess in a cosmetic art school or shop any of the following:
   (1) Methyl Methacrylate Liquid Monomer a.k.a. MMA;
   (2) Razor-type callus shavers designed and intended to cut growths of skin including skin tags, corns and callouses;
   (3) FDA rated Class III devices;
   (4) Carbolic acid (phenol) over two percent strength;
   (5) Animals including insects, fish, amphibians, reptiles, birds or mammals to perform any service; or
   (6) A variable speed electrical nail file on a natural nail unless it has been designed for use on a natural nail.

(d) A licensee or student must not:
   (1) Use any product, implement or piece of equipment in any manner other than the product's, implement's or equipment's intended use as described or detailed by the manufacturer;
   (2) Diagnose any medical condition or treat any medical condition unless referred by a physician;
   (3) Provide any service unless trained prior to performing the service;
   (4) Perform services on a client if the licensee has reason to believe the client has any of the following:
       (A) a contagious condition or disease;
       (B) an inflamed, infected, broken, raised or swollen skin or nail tissue; or
       (C) an open wound or sore in the area to be worked on;
   (5) Alter or duplicate a license issued by the Board;
   (6) Advertise or solicit clients in any form of communication in a manner that is false or misleading;
   (7) Use any FDA rated Class II device without the documented supervision of a licensed physician;
   (8) Use any product that will penetrate the dermis; or
   (9) Make any statement to a member of the public either verbally or in writing stating or implying action is required or forbidden by Board rules when such action is not required or forbidden by Board rules. A violation of this prohibition is considered practicing or attempting to practice by fraudulent misrepresentation.

(e) In using a disinfectant, the user shall wear any personal protective equipment, such as gloves, recommended by the manufacturer in the Material Safety Data Sheet.

21 NCAC 14H .0402 COSMETIC ART SHOPS AND SCHOOLS
(a) Notwithstanding Rule .0201 in this Subchapter, this Rule applies to all cosmetic art schools and shops. A cosmetic art school or shop shall be kept clean.
(b) Waste material shall be kept in receptacles with a disposable liner. The area surrounding the waste receptacles shall be maintained in a sanitary manner.
(c) All doors and windows shall be kept clean.
(d) Furniture, equipment, floors, walls, ceilings and fixtures must be clean and in good repair.
(e) Animals or birds shall not be in a cosmetic art shop or school. Fish in an enclosure and animals trained for the purpose of accompanying disabled persons are exempt from the prohibition in this Paragraph.
(f) Cosmetic art shops and schools shall designate the entrance by a sign or lettering.
(g) The owner of a cosmetic art shop or school shall not post any sign that states or implies that some action is required or forbidden by Board rules when such action is not required or forbidden by Board rules. A violation of this prohibition is considered practicing or attempting to practice by fraudulent misrepresentation.

21 NCAC 14H .0403 DISINFECTION PROCEDURES
(a) Sanitation rules which apply to towels and cloths are as follows:
   (1) Clean protective capes, drapes, linens and towels shall be used for each patron;
   (2) After a protective cape has been in contact with a patron's neck it shall be laundered in a clean, used container until laundered with soap and hot water and dried in a heat dryer. Capes that cannot be laundered and dried in a heat dryer may be disinfected with an EPA registered hospital grade disinfectant mixed and used in accordance with the manufacturer directions; and
   (3) After a drape, linen or towel has been in contact with a patron's skin it shall be placed in a clean, covered container until laundered with soap and hot water and dried in a heat dryer. A covered container may have an opening so soiled items may be dropped into the container.
(b) Any paper or nonwoven protective drape or covering shall be discarded after one use.
(c) There shall be a supply of clean protective capes, linens and towels at all times.
(d) Clean capes, capes, linens, towels and all other supplies shall be stored in a clean area.
(e) Bathroom facilities must be kept clean.
All implements shall be cleaned and disinfected after each use in the following manner:

1. They shall be washed with warm water and a cleaning solution and scrubbed to remove debris and dried.
2. They shall be disinfected in accordance with the following:
   a. EPA registered hospital/pseudomonacidal (bactericidal, virucidal, and fungicidal) or tuberculocidal that is mixed and used according to the manufacturer's directions. They shall be rinsed with hot tap water and dried with a clean towel before their next use. They shall be stored in a clean, closed cabinet or container until they are needed; or
   b. 1 and 1/3 cup of 5.25 percent household bleach to one gallon of water for 10 minutes. They shall be rinsed with hot tap water and dried with a clean towel before their next use. They shall be stored in a clean, closed cabinet or container until they are needed; or
   c. UV-C, ultraviolet germicidal irradiation used accordance with the manufacturer's directions.
3. If the implement is not immersible or is not disinfected by UV-C irradiation, it shall be cleaned by wiping it with a clean cloth moistened or sprayed with a disinfectant EPA registered, hospital/pseudomonacidal (bactericidal, virucidal, and fungicidal) or tuberculocidal, used in accordance with the manufacturer's directions.
4. Implements that come in contact with blood, shall be disinfected by:
   a. disinfectant, used in accordance with the manufacturer's instructions, that states the solution will destroy HIV, TB or HBV viruses and approved by the Federal Environmental Protection Agency; or
   b. EPA registered hospital/pseudomonacidal (bactericidal, virucidal, and fungicidal) and tuberculocidal that is mixed and used according to the manufacturer's directions; or
   c. household bleach in a 10 percent solution (1 and 2/3 cup of bleach to 1 gallon of water) for 10 minutes.

All disinfected non-electrical implements shall be stored in a clean closed cabinet or clean closed container.

All disinfected electrical implements shall be stored in a clean area.

Disposable and porous implements and supplies must be discarded after use or upon completion of the service.

Clean, closable storage must be provided for all disinfected implements not in use. Containers with open faces may be covered/closed with plastic wrapping. Disinfected implements must be kept in a clean closed cabinet or clean closed container and must not be stored with any implement or item that has not been disinfected.

Lancets, disposable razors, and other sharp objects shall be disposed in puncture-resistant containers.

All creams, lotions, wax, cosmetics, and other products dispensed to come in contact with patron's skin must be kept in clean, closed containers, and must conform in all respects to the requirements of the Pure Food and Drug Law. Any product apportioned for use and removed from original containers must be distributed in a sanitary manner that prevents contamination of product or container. Any product dispensed in portions into another container must be dispensed into a sanitized container and applied to patrons by means of a disinfected or disposable implement or other sanitized methods. Any product dispensed in portions not dispensed into another container must be used immediately and applied to patrons by means of a disinfected or disposable implement or other sanitized methods. No product dispensed in portions may be returned to the original container.

As used in this Rule whirlpool or footspa means any basin using circulating water.

After use by each patron each whirlpool or footspa must be cleaned and disinfected as follows:

1. All water must be drained and all debris removed from the basin;
2. The basin must be disinfected by filling the basin with water and circulating:
   a. Two tablespoons of automatic dishwashing powder and 1/4 cup of 5.25 percent household bleach to one gallon of water through the unit for 10 minutes; or
   b. Surfactant or enzymatic soap with an EPA registered disinfectant with bactericidal, tuberculocidal, fungicidal and virucidal activity used according to manufacturer's instructions through the unit for 10 minutes;
3. The basin must be drained and rinsed with clean water; and
4. The basin must be wiped dry with a clean towel.

At the end of the day each whirlpool or footspa must be cleaned and disinfected as follows:

1. The screen must be removed and all debris trapped behind the screen removed;
2. The screen and the inlet must be washed with surfactant or enzymatic soap or detergent and rinsed with clean water;
3. Before replacing the screen one of the following procedures must be performed:
   a. The screen must be totally immersed in a household bleach solution of 1/4 cup of 5.25 percent household bleach to one gallon of water for 10 minutes; or
(B) The screen must be totally immersed in an EPA registered disinfectant with bactericidal, tuberculocidal, fungicidal and virucidal activity in accordance to the manufacturer's instructions for 10 minutes;

(4) The inlet and area behind the screen must be cleaned with a brush and surfactant soap and water to remove all visible debris and residue; and

(5) The spa system must be flushed with low sudsing surfactant or enzymatic soap and warm water for at least 10 minutes and then rinsed and drained.

(q) Every week after cleaning and disinfecting pursuant to Paragraphs (a) and (b) of this Rule each whirlpool and footspa must be cleaned and disinfected in the following manner:

1) The whirlpool or footspa basin must be filled with water and 1/4 cup of 5.25 percent household bleach for each one gallon of water or EPA registered disinfectant with bactericidal, tuberculocidal, fungicidal and virucidal activity in accordance to the manufacturer's instructions; and

2) The whirlpool or footspa system must be flushed with the bleach and water or EPA registered disinfectant solution for 10 minutes and allowed to sit for at least six hours; and

3) The whirlpool or footspa system must be drained and flushed with water before use by a patron.

(r) A record must be made of the date and time of each cleaning and disinfecting as required by this Rule including the date, time, reason and name of the staff member who performed the cleaning. This record must be made for each whirlpool or footspa and must be kept and made available for at least 90 days upon request by either a patron or inspector.

(s) The water in a vaporizer machine must be emptied daily and the unit disinfected daily after emptying.

(t) The area where services are performed that come in contact with the patron's skin including treatment chairs, treatment tables and beds shall be disinfected between patrons.

21 NCAC 14H .0404 FIRST AID

(a) Each cosmetic art shop and school must have antiseptics, gloves or finger guards, sterile bandages and other necessary supplies available to provide first aid.

(b) If the skin of the licensee or student is punctured, the licensee or student shall immediately do the following:

1) Apply antiseptic and a sterilized bandage;

2) Disinfect any implement exposed to blood before proceeding; and

3) Put on disposable, protective gloves or a finger guard.

(c) If the skin of the patron is punctured, the licensee or student shall immediately do the following:

1) Make available to the patron antiseptic and a sterilized bandage;

2) Disinfect any implement exposed to blood before proceeding; and

3) Put on disposable, protective gloves or a finger guard.

SECTION .0500 - ENFORCEMENT, MAINTENANCE OF LICENSURE

21 NCAC 14H .0501 INSPECTION OF COSMETIC ART SHOPS

(a) A newly established cosmetic art shop, a shop which has been closed for more than 90 days, or a shop which has changed ownership must file an application for licensure with the Board prior to opening. A newly established cosmetic art shop, a shop which has been closed for more than 90 days, a shop which has changed ownership or a shop which has been operating without a license shall be inspected before a license will be issued.

(b) Each cosmetic art shop must pass inspection by an agent of the Board pursuant to this Subchapter. Inspections shall be conducted annually and may be conducted without notice.

21 NCAC 14H .0502 FAILURE TO PERMIT INSPECTION

If an inspector is twice unable to inspect a salon after making an appointment to inspect the salon the Board may initiate proceedings to revoke or suspend the salon license or may refuse to renew the shop license.

21 NCAC 14H .0503 SANITARY RATINGS AND POSTING OF RATINGS

(a) The sanitary rating of a beauty establishment shall be based on a system of grading outlined in this Subchapter. Based on the grading, all establishments shall be rated in the following manner:

1) All establishments receiving a rating of at least 90 percent or more shall be awarded a grade A;
(2) all establishments receiving a rating of at least 80 percent, and less than 90 percent, shall be awarded grade B;
(3) all establishments receiving a rating of at least 70 percent or more, and less than 80 percent shall be awarded grade C;
(4) any cosmetic art shop or school with a sanitation grade of 70 percent or below shall be awarded a failed inspection notice.

(b) Every beauty establishment shall be given a sanitary rating. A cosmetic art school shall be graded no less than three times a year, and a cosmetic art shop shall be graded once a year.
(c) The sanitary rating or failed inspection notice given to a beauty establishment shall be posted in plain sight near the front entryway at all times.
(d) All new establishments must receive a rating of at least 90 percent before a license will be issued.
(e) The operation of a cosmetic art shop or school which fails to receive a sanitary rating of at least 70 percent (grade C) shall be sufficient cause for revoking or suspending the license.
(f) A re-inspection for the purpose of raising the sanitary rating of a beauty establishment shall not be given within 30 days of the last inspection unless the rating at the last inspection was less than 80 percent.
(g) A whirlpool and footspa sanitation record must be kept on each whirlpool and footspa for inspection on a form provided by the Board.
(h) All cosmetic art shops and schools with a failed inspection report shall be sufficient cause for the immediate suspension of licensure. All cosmetic art shops and schools with a failed inspection report must close until the sanitation conditions have improved to be awarded a passing grade.
(i) Mobile cosmetic art shops and schools are prohibited.
(j) A copy of the itemized and graded inspection report must be provided to the operator at the time of the inspection.

21 NCAC 14H .0504 SYSTEMS OF GRADING BEAUTY ESTABLISHMENTS
The system of grading the sanitary rating of cosmetic art schools and shops based on the rules set out in this subchapter shall be as follows, setting out areas to be inspected and considered, and the maximum points given for compliance:

<table>
<thead>
<tr>
<th>Sanitation</th>
<th>Point Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Each licensee and student shall wash his or her hands with soap and water or an equally effective cleansing agent immediately before and after serving each client.</td>
<td>2</td>
</tr>
<tr>
<td>Each licensee and student shall wear clean garments and shoes while serving patrons.</td>
<td>2</td>
</tr>
<tr>
<td>The cosmetic art facility shall be kept clean.</td>
<td>3</td>
</tr>
<tr>
<td>Waste material shall be kept in receptacles with a disposable liner. The area surrounding the waste receptacles shall be maintained in a sanitary manner.</td>
<td>4</td>
</tr>
<tr>
<td>All doors and windows shall be kept clean.</td>
<td>2</td>
</tr>
<tr>
<td>Furniture, equipment, floors, walls, ceilings and fixtures must be clean and in good repair.</td>
<td>3</td>
</tr>
<tr>
<td>Clean protective capes, drapes, linens and towels shall be used for each patron.</td>
<td>3</td>
</tr>
<tr>
<td>After a cape, drape, linen or towel has been in contact with a patron's skin it shall be placed in a clean, closed container until laundered with soap and hot water and dried in a heated dryer.</td>
<td>5</td>
</tr>
<tr>
<td>Any paper or nonwoven protective drape or covering shall be discarded after one use.</td>
<td>2</td>
</tr>
<tr>
<td>There shall be a supply of clean protective drapes, linens and towels at all times.</td>
<td>2</td>
</tr>
<tr>
<td>Clean drapes, capes, linens and towels shall be stored in a clean area.</td>
<td>5</td>
</tr>
<tr>
<td>Bathroom facilities must be kept cleaned.</td>
<td>3</td>
</tr>
<tr>
<td>All implements shall be washed with warm water and a cleaning solution and scrubbed to remove debris and dried.</td>
<td>2</td>
</tr>
<tr>
<td>All implements shall be disinfected.</td>
<td>10</td>
</tr>
</tbody>
</table>
All disinfected electrical implements shall be stored in a clean area.  

Disposable and porous implements and supplies must be discarded after use or upon completion of the service.  

Any product that comes into contact with the patron must be discarded upon completion of the service.  

Disinfected implements must be kept in a clean closed cabinet or clean closed container and must not be stored with any implement or item that has not been disinfected.  

Lancets, disposable razors, and other sharp objects shall be disposed in puncture-resistant containers.  

All creams, lotions, wax, cosmetics, and other products dispensed to come in contact with patron's skin must be kept in clean, closed containers and dispensed in a sanitary manner. No product dispensed in portions may be returned to the container.  

After each patron's use each whirlpool or footspa must be cleaned and disinfected.  

The water in a vaporizer machine must be emptied daily and the unit disinfected daily.  

The area where services are performed that come in contact with the patron's skin including chairs, tables and beds shall be disinfected between patrons.  

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### 21 NCAC 14H .0505 RULE COMPLIANCE AND ENFORCEMENT MEASURES

(a) The use of or possession of the following products or equipment in a school or shop shall result in civil penalty in the amount of three hundred dollars ($300.00) per container of product or piece of equipment:

1. Methyl Methacrylate Liquid Monomer a.k.a. MMA; or
2. Razor-type callus shavers designed and intended to cut growths of skin including but not limited to skin tags, corns and calluses.

(b) The use of or possession of the following in a school or shop shall result in civil penalty in the amount of one hundred dollars ($100.00) per use or possession:

1. Animals including insects, fish, amphibians, reptiles, birds or mammals to perform any service; or
2. Variable speed electrical nail file on the natural nail unless it has been designed for use on the natural nail.

(c) The action of any student or licensee to violate the Board rules in the following manner shall result in civil penalty in the amount of one hundred dollars ($100.00) per instance of each action:

1. Use of any product, implement or piece of equipment in any manner other than the product's, implement's or equipment's intended use as described or detailed by the manufacturer; or
2. Diagnosis of any medical condition or treatment of any medical condition unless referred by a physician; or
3. Use of any product that will penetrate the dermis; or
4. Provision of any service unless trained prior to performing the service; or
5. Performance of services on a client if the licensee has reason to believe the client has any of the following:
   A. a contagious condition or disease;
   B. inflamed infected, broken, raised or swollen skin or nail tissue; or
   C. an open wound or sore in the area to be worked on; or
6. Alteration of or duplication of a license issued by the Board; or
7. Advertisement or solicitation of clients in any form of communication in a manner that is false or misleading; or
8. Use of any FDA rated class II device without the documented supervision of a licensed physician.

(d) The presence of animals or birds in a cosmetic art shop or school shall result in civil penalty in the amount of twenty-five dollars ($25.00) per animal or bird. Fish in an enclosure and animals trained for the purpose of accompanying disabled persons are exempt.

(e) The failure to record the date and time of each cleaning and disinfecting of a footspa in a cosmetic art school or shop as required by this Subchapter including the date, time, reason and name of the staff member who performed the cleaning or the failure to keep or make such record available for at least 90 days upon request by either a patron or inspector shall result in civil penalty in the amount of twenty-five dollars ($25.00) per footspa.
(f) The failure to clean and disinfect a footspa in a cosmetic art shop or school as required by this Subchapter shall result in civil penalty in the amount of one hundred dollars ($100.00) per footspa.

(g) The failure to maintain in a cosmetic art shop and school antiseptics, gloves or finger guards, and sterile bandages available to provide first aid shall result in civil penalty in the amount of twenty-five dollars ($25.00) per item.

(h) The failure to maintain a sink with hot and cold running water in the clinic area, separate from restrooms, shall result in civil penalty in the amount of one hundred dollars ($100.00).

(i) The failure to maintain a water supply within 20 feet of the door or 25 feet from the service table or chair shall result in civil penalty in the amount of fifty dollars ($50.00) per inspection occurrence.

(j) The failure to provide ventilation at all times in the areas where patrons are serviced in all cosmetic art shops shall result in civil penalty in the amount of twenty-five dollars ($25.00).

(k) The failure to effectively screen all doors and windows open for ventilation shall result in civil penalty in the amount of twenty-five dollars ($25.00).

(l) The failure to maintain equipment and supplies necessary to safely perform any cosmetic art service offered in the shop shall result in civil penalty in the amount of one hundred dollars ($100.00).

(m) The failure to maintain a sanitation grade of 80 percent or higher shall result in a civil penalty in the amount of two hundred dollars ($200.00).

(n) Repeated violations of the rules in this Subchapter exceeding three written notifications of any one rule documented to any one individual, shop or school shall result in a mandatory disciplinary hearing.
SECTION 3

OSHA FOR THE NORTH CAROLINA SALON
(4 Credit Hours)

Section Learning Objectives:
The purpose of this course and the outcome expected is for participants to:
• Boost awareness of OSHA history
• Understand OHSA Regulation.
• Understand FDA Regulation.
• Increase knowledge of MSDS Sheets
• Know the changing standards in MSDS format
• Learn the recommended safe practices
• Become familiar with hazardous chemicals sometimes used in salons and salon products

Section Overview: This course covers areas regulated by the Occupational Health and Safety Administration (OSHA) that is pertinent to the cosmetology industry. It will educate readers on applicable Food and Drug Administration regulations and material safety data sheets. The course material will recommend proper placement of MSDS’s and provide suggestions for easy organization of these sheets. It will provide a list of hazardous chemicals commonly used in the salons today, their toxic effects, and where they are found.

North Carolina OSHA Regulations
North Carolina businesses must follow the regulations of the federal Occupational Safety and Health Administration, which provides health and safety guidelines for workplaces around the country. North Carolina is not among the 26 states that implement their own health and safety rules as part of a state OSHA program. Instead, only the federal regulations apply.

What is a State OSHA Program?
Section 18 of the Occupational Safety and Health Act of 1970 (the Act) encourages States to develop and operate their own job safety and health programs. OSHA approves and monitors State plans and provides up to 50 percent of an approved plan’s operating costs. There are currently 26 States and jurisdictions operating complete State plans (covering both the private sector and State and local government employees) and 5 - Connecticut, Illinois, New Jersey, New York and the Virgin Islands - which cover public employees only. (Eight other States were approved at one time but subsequently withdrew their programs).

The Occupational Health and Safety Administration- History and Mission
December 29, 1970 President Richard M. Nixon signed the Occupational Safety and Health Act of 1970. In May of the following year the first standards were adopted to provide a baseline for safety and health protection in American workplaces.

OSHA’s mission is to ensure safe and healthful workplaces in America. Since the agency was created in 1971, workplace fatalities have been cut in half and occupational injury and illness rates have declined 40 percent. OSHA is focusing on three strategies:
1) strong, fair, and effective enforcement;
2) outreach, education, and compliance assistance; and
3) partnerships and voluntary programs.

While no specific rules exist, individuals engaged in the practice of cosmetology are expected to abide by basic rules contained within the Code of Federal Regulations (29 CFR) that deal with workplace safety and health. These rules describe the responsibilities of employers and employees in dealing with hazardous chemicals, personal protective devices, proper ventilation, prevention from over exposure to dusts, and overall health and safety plans.

OSHA Services
OSHA has approximately 2100 inspectors, plus complaint discrimination investigators, engineers, physicians, educators, standards writers, and other technical support personnel spread throughout the country. OSHA strives to ensure safe and healthful workplaces for all Americans.
throughout the country. This staff works to establish protective standards, implement and enforces those standards, and reaches out to employers and employees through technical assistance and consultation programs.

**OSHA's Jurisdiction**

Nearly every working man and woman in the nation comes under OSHA's jurisdiction (with some exceptions such as miners, transportation workers, many public employees, and the self-employed). Other users and recipients of OSHA services include: occupational safety and health professionals, the academic community, lawyers, journalists, and personnel of other government entities.

**Strong, Fair, and Effective Enforcement Program.**

OSHA’s efforts to protect workers’ safety and health are built on the foundation of a strong, fair, and effective enforcement program. OSHA seeks to assist the majority of employers who want to do the right thing while focusing its enforcement resources on sites in high hazard industries -- especially those with high injury and illness rates.

**Outreach, Education, and Compliance Assistance**

OSHA plays a vital role in preventing on-the-job injuries and illnesses through outreach, through education, and compliance assistance. OSHA offers an extensive website at www.osha.gov. It includes a special section devoted to assisting small business as well as interactive e-Tools to help employers and employees. For example, the agency provides a broad array of training and information materials on its record keeping standard as well as materials to assist employers and workers in understanding and complying.

**OSHA Regulation**

OSHA regulates the chemical materials decided to be hazardous, ensuring appropriate warnings, proper labels, emergency planning, precautions for safe handling and use, and other health related issues. The Food and Drug Administration has the responsibility and authority to ensure that all chemicals and cosmetics used in a salon are deemed safe. Chemicals and cosmetics will not cause harm if used properly, and there are many precautions to help ensure that the products you use daily are safe. As a cosmetology professional, you should become educated on the safety rules for proper use and disposal of all chemicals and cosmetics used in the cosmetology profession, as well as their health hazards, warnings and emergency procedures.

**Material Safety Data Sheets**

The standard's design is simple. Chemical manufacturers and importers must evaluate the hazards of the chemicals they produce or import. Using that information, they must then prepare labels for containers, and more detailed technical bulletins called Material Safety Data Sheets (MSDS). Material Safety Data Sheets (MSDS) are mandatory and must be supplied to you by all manufacturers. These sheets have vital information about the safety of the products you use daily. Your suppliers must also send you a properly completed Material Safety Data Sheet at the time of the first shipment of the chemical, and with the next shipment after the MSDS is updated with new and significant information about the hazards. Some of the common yet important information located on the MSDS is as follows:

**CHEMICAL AND PHYSICAL DATA**

This will provide technical information necessary for the proper use of the product. It will explain how the product could become dangerous if not used properly. For example, improper mixtures of products can burn or explode.

**FIRE AND EXPLOSION HAZARD DATA**

This is important because some products used in your salon or shop are flammable. This part of the MSDS tells you when an ingredient will catch fire or explode and how to put out the fire.

**HEALTH HAZARD DATA**

This indicates what kind of health problems a particular product or ingredient may cause, how it may hurt you, and what types of exposure should be avoided. It gives you medical conditions could be made worse by exposure, and what emergency procedures to take if you are exposed in a dangerous way.
HAZARDOUS INGREDIENTS
This section provides the names and information about ingredients classified as "hazardous." Products are mixtures of ingredients, and the hazards from the product will be different from that of the ingredient. Remember that this does not mean the product is unsafe for intended use, but that special precautions may be necessary to use it safely.

PRECAUTIONS FOR SAFE HANDLING AND USE
This section gives instructions about how to protect you, co-workers, and clients when using products containing a particular ingredient. It will tell you what to do if it is spilled, how to safely discard the material, and how to safely handle and store this ingredient.

PRODUCT INFORMATION
This section provides the name of the product, the manufacturer’s name and address, and a telephone number to call in case of an emergency.

SPECIAL PROTECTION INFORMATION:
This section gives specific information about how to protect you when using this product. It will tell you about necessary ventilation, breathing something dangerous, and whether special equipment or clothing is needed to protect your hands, eyes, or other parts of the body. It is wise to be knowledgeable on how to do your job safely. By being properly trained, well informed, and by knowing where to look for information, you can be assured of safety for you and your clients.

One regulation that indirectly impacts the cosmetology profession is placed on the manufacturers of many of the products that you may use in your business. The federal government requires that product manufacturers make available to customers Material Safety Data Sheets (MSDSs). Each MSDS must contain basic information on the each product manufactured.

Recommended Format for Material Safety Data Sheets (MSDSs) OSHA's Hazard Communication Standard (HCS) specifies certain information that must be included on MSDSs, but does not require that any particular format be followed in presenting this information (see 29 CFR 1910.1200 (g)). In order to promote consistent presentation of information, OSHA recommends that MSDSs follow the 16-section format established by the American National Standards Institute (ANSI) standard for preparation of MSDSs-(Z400.1).

By following this recommended format, the information of greatest concern to workers is featured at the beginning of the data sheet, including information on chemical composition and first aid measures. More technical information that addresses topics such as the physical and chemical properties of the material and toxicological data appears later in the document. While some of this information (such as ecological information) is not required by the HCS, the 16-section MSDS is becoming the international norm.

The 16 sections are:
- Identification
- Hazard(s) identification
- Composition/information on ingredients
- First-aid measures
- Fire-fighting measures
- Accidental release measures
- Handling and storage
- Exposure controls/personal protection
- Physical and chemical properties
- Stability and reactivity
- Toxicological information
- Ecological information
- Disposal considerations
- Transport information
- Regulatory information
- Other information
SAMPLE - MATERIAL SAFETY DATA SHEET (MSDS) Front Page

### Material Safety Data Sheet

May be used to comply with OSHA's Hazard Communication Standard, 29 CFR 1910.1200. Standard must be consulted for specific requirements.

#### Identify (As Used on Label and List)

Note: Blank spaces are not permitted. If any item is not applicable or no information is available, the space must be marked to indicate that.

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manufacturer’s Name</td>
<td></td>
</tr>
<tr>
<td>Emergency Telephone Number</td>
<td></td>
</tr>
<tr>
<td>Address (Number, Street, City, State, and Zip Code)</td>
<td></td>
</tr>
<tr>
<td>Telephone Number for information</td>
<td></td>
</tr>
<tr>
<td>Date Prepared</td>
<td></td>
</tr>
<tr>
<td>Signature of Preparer (optional)</td>
<td></td>
</tr>
</tbody>
</table>

#### Section II — Hazardous Ingredients/Identity Information

<table>
<thead>
<tr>
<th>Hazardous Components (Specific Chemical Identity; Common Name(s))</th>
<th>OSHA PEL</th>
<th>ACGIH TLV</th>
<th>Other Limits Recommended</th>
<th>% (optional)</th>
</tr>
</thead>
</table>

#### Section III — Physical/Chemical Characteristics

<table>
<thead>
<tr>
<th>Property</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boiling Point</td>
<td></td>
</tr>
<tr>
<td>Specific Gravity (H₂O - 1)</td>
<td></td>
</tr>
<tr>
<td>Vapor Pressure (mm Hg)</td>
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</tr>
<tr>
<td>Melting Point</td>
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</tr>
<tr>
<td>Vapor Density (Air - 1)</td>
<td></td>
</tr>
<tr>
<td>Evaporation Rate (Boil Acetone - 1)</td>
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<td>Solubility in Water</td>
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<tr>
<td>Appearance and Odor</td>
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</table>

#### Section IV — Fire and Explosion Hazard Data

<table>
<thead>
<tr>
<th>Property</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flash Point (Method Used)</td>
<td></td>
</tr>
<tr>
<td>Flammable Limits</td>
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<tr>
<td>LEL</td>
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<td>UEL</td>
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<td>Extinguishing Media</td>
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<tr>
<td>Special Fire Fighting Procedures</td>
<td></td>
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<tr>
<td>Unusual Fire and Explosion Hazards</td>
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</tbody>
</table>

(Reproduce locally)
In 1985, OSHA established a voluntary format for MSDSs (OSHA Form 174) to assist manufacturers and importers who desired guidance on organizing MSDS information. When completed correctly, an MSDS prepared using Form 174 contains all of the information required by OSHA. However, Form 174 does not use the more organized and comprehensive 16-section format. OSHA believes that use of a consistent format will improve the effectiveness of MSDSs by making information easier for the reader to find, regardless of the supplier of the MSDS. Because the 16-section format is accepted by consensus as the
most appropriate format, OSHA no longer endorses that Form 174 be used for the preparation of MSDSs. Use of Form 174, however, is still acceptable under the HCS if it is completed correctly.

**The Food and Drug Administration**

FDA regulates over $1 trillion worth of products, which account for 25 cents of every dollar spent annually by American consumers.

The Food and Drug Administration touches the lives of virtually every American every day. For it is FDA's job to see that the food we eat is safe and wholesome, the cosmetics we use won't hurt us, the medicines and medical devices we use are safe and effective, and that radiation-emitting products such as microwave ovens won't do us harm. Feed and drugs for pets and farm animals also come under FDA scrutiny. FDA also ensures that all of these products are labeled truthfully with the information that people need to use them properly.

FDA is one of our nation's oldest consumer protection agencies. Its approximately 9,000 employees monitor the manufacture, import, transport, storage and sale of about $1 trillion worth of products each year. It does that at a cost to the taxpayer of about $3 per person.

First and foremost, FDA is a public health agency, charged with protecting American consumers by enforcing the Federal Food, Drug, and Cosmetic Act and several related public health laws. To carry out this mandate of consumer protection, FDA has some 1,100 investigators and inspectors who cover the country's almost 95,000 FDA-regulated businesses. These employees are located in district and local offices in 157 cities across the country.

**Inspections and Legal Sanctions**

These investigators visit more than 15,000 facilities a year, seeing that products are made right and labeled truthfully. As part of their inspections, they collect about 80,000 domestic and imported product samples for examination by FDA scientists or for label checks. If a company is found violating any of the laws that FDA enforces, the FDA encourages the firm to voluntarily correct the problem or to recall a faulty product from the market. A recall is generally the fastest and most effective way to protect the public from an unsafe product.

When a company can't or won't correct a public health problem with one of its products voluntarily, FDA has legal sanctions it can bring to bear. The agency can go to court to force a company to stop selling a product and to have items already produced seized and destroyed. When warranted, criminal penalties, which may include prison sentences, are sought against manufacturers that are noncompliant. About 3,000 products a year are found to be unfit for consumers and are withdrawn from the marketplace, either by voluntary recall or by court-ordered seizure. In addition, about 30,000 import shipments a year are detained at the port of entry because the goods appear to be unacceptable.

**Hazards the Cosmetologist Faces**

While the salon profession can be extremely rewarding, it can have its drawbacks, the least of which is the impact that daily work in a salon can have on an individual's overall health. Salon professionals have at least three major complaints about their work: they suffer from back and leg problems, hand and arm stress, and allergic reactions to the chemicals they use in the salon. Moreover, a study by the NIOSH found that cosmetologists in North Carolina who worked full-time and performed a range of chemical services had a moderately increased risk of miscarriage. Another agency study concluded that cosmetologists had a higher risk of developing lung disorders as a result of exposure to hair spray.

**Long Periods of Standing**

Standing all day can put a strain on feet - especially in salons where concrete floors are the rule. A regular shift for a stylist lasts from eight to ten hours, and hairdressers are usually on their feet for most of that time. This can result in stabbing pains radiating up the legs and development of varicose veins. Lower back, knee and joint paint can also result from several of the repetitive movements that a stylist makes such as leaning over to shampoo clients. Upper back pain is another compliant particularly pain in the shoulder blades that causes the most problems.

Here are a few steps you can take to help alleviate some of these pains:

- Support your weight on both feet. If you lean to one side constantly and do not distribute your weight evenly, it can result in pinched nerves.
- Invest in a side chair. To give you feet a rest, invest in one of the versatile working stools available for salon professionals. These are little seats with no arms that can be adjusted according to the client's height. At the same time, these chairs can help raise the cosmetologist to a more appropriate level, which might alleviate the shoulder blade problem.
• Exercise and watch your diet. The more weight you carry, the more strain is placed on your feet, legs, and back.
• Use a rubber mat in your workspace. Covering the floor around your client's chair with a rubber mat will help cushion your feet and protect your back.
• Invest in a good pair of shoes. Experts recommend that employees should wear flat shoes with no more than a 2-inch heel. Ideally, the shoes should have shock absorbent pads, skid resistant soles, and laces, which provide more support. Salon professionals who already have foot pain might want to buy a pair of insoles or orthotic device, according to the association.
• Get regular massages. Take time to pamper your body. Massage can help alleviate back pain, and massage therapists can determine your specific problems and give you tips on how to avoid them. If pain persists, see your doctor.

Preventing Repetitive Injuries
Many salon professionals also suffer from repetitive strain injuries from the repetitive nature of haircutting and other salon work. These injuries, caused by repeating the same motions hundreds and even thousands of times a day, are a serious hazard. Tendonitis can cause excruciating pain and make it difficult or impossible to perform even the simplest of tasks. Carpal tunnel syndrome, a pinching of the median nerve in the wrist, may cause irreversible nerve damage and require surgery.

If you feel like your fingers and arms are starting to ache, tangle at night, or cramp up for long periods, experts suggest the following precautions:

1. Take breaks: When working on a job like this, take breaks as often as possible. Stretch your hands and shoulders. If time allows, try to schedule jobs that take more than a couple of hours over a two-day period.
2. Get professional help: See a physician immediately if you suffer numbness or tingling in your fingers: this is a sign of carpal tunnel syndrome. You should also see a doctor if you feel chronic pain or a heavy feeling in the arms or hands, which can signal tendonitis. The treatments may include prolonged rest, physical therapy, and (in the case of carpal tunnel) surgery.
3. Invest in ergonomically correct tools: You might want to check out, for example, a relatively new product called swivel-thumb scissors, which allow your thumb to rotate 360 degrees while cutting hair and gives you more mobility in your wrist and elbow, thus relieving pressure on those areas.

State Initiatives: Reducing Workplace Risks
State plan states have been a strong national force in recognizing emerging workplace hazards and originating new methods for addressing those hazards, including the adoption of new standards. State plans emphasize that whatever the emerging issue, employers are still required to provide a safe and healthful place of employment.

In particular, California was the first state in the nation to adopt an ergonomic standard in 1997. State plans are continuing efforts to reduce the number and severity of musculoskeletal disorders caused by risk factors in the workplace. Several state programs are developing formal rules as well as voluntary guidelines to help prevent workplace violence. In 1997 California’s Repetitive Motion Injury (RMI) standard, which became effective July 3, 1997, was the first ergonomic standard adopted in the nation. The application of the standard is triggered when at least two employees at the employer’s worksite report RMIs that were: (1) diagnosed by a licensed physician and (2) predominantly caused by identical work activity, and (3) occurred within 12 months of each other. However, ergonomics continues to be a difficult issue to regulate.
# HAZARDOUS CHEMICAL SUBSTANCE LIST

<table>
<thead>
<tr>
<th>Chemical Name</th>
<th>Toxic Effects</th>
<th>Occurrence</th>
<th>Precautions</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACETIC ACID</td>
<td>In weak concentrations, acetic acid can be a mild skin and eye irritant.</td>
<td>Oxidizing materials (trace).</td>
<td>Some alkaline silicates can cause fibrotic changes (scarring) of lung tissue.</td>
</tr>
<tr>
<td>ACETONE (dimethyl ketone)</td>
<td>Prolonged inhalation can cause headache, dryness, and throat irritation.</td>
<td>Nail glue remover, polish remover, nail sterilizer, and brush cleaner.</td>
<td>Aminophenol is a mixture that has three isomers. Para-, Ortho- and Meta-aminophenol.</td>
</tr>
<tr>
<td>ALKYLATED SILICATES</td>
<td>Alkylated Silicates affect skin as mild caustic agents, causing damage to the keratin layer. Chronic exposure to alkalinity can lead to a skin condition that resembles eczema.</td>
<td>Bleach powders.</td>
<td>Overexposure can cause conjunctivitis, swelling of eyelids, coughing, dyspnea and vomiting. Corneal burns can result from eye contact.</td>
</tr>
<tr>
<td>AMINOPHENOL</td>
<td>A.) Para-aminophenol has high to moderate oral toxicity. A skin and eye irritant. Allergic sensitivities can develop to the material B.) Ortho-aminophenol is found to be moderately toxic when introduced to the system via ingestion. It is a skin and eye irritant. C.) Meta-aminophenol is found to be moderately toxic when introduced to the system via ingestion. It is a skin and eye irritant.</td>
<td>Oxidation hair color.</td>
<td>Aminophenol is a mixture that has three isomers. Para-, Ortho- and Meta-aminophenol.</td>
</tr>
<tr>
<td>AMMONIA</td>
<td>A powerful eye and respiratory tract irritant.</td>
<td>Alkaline wave lotions bleach oils, oxidation hair dyes, permanent wave solutions, and permanent hair color.</td>
<td>High toxicity via oral and inhalation routes.</td>
</tr>
<tr>
<td>AMMONIUM HYDROXIDE</td>
<td>A powerful eye irritant.</td>
<td>Hair spray (trace), waving lotions, thioglycolate waving lotions, and oxidation dyes.</td>
<td>It can be a fire hazard if it is reacted with organic materials or reducing agents such as acids. It is a strong oxidizing agent. The material must be stored carefully as it readily decomposes.</td>
</tr>
<tr>
<td>AMMONIUM PERSULFATE</td>
<td>A moderate tissue irritant and allergen.</td>
<td>Bleaching agents, pre-lighteners.</td>
<td>This material can cause dermatitis and is a strong allergen.</td>
</tr>
<tr>
<td>AMMONIUM THIOGLYCOLATE</td>
<td>High toxicity via oral and inhalation routes.</td>
<td>Permanent waving solution.</td>
<td>A skin and eye irritant.</td>
</tr>
<tr>
<td>BENZYL ALCOHOL</td>
<td>Moderate toxicity via ingestion and inhalation.</td>
<td>Permanent waving solutions.</td>
<td>Butane is an asphyxiant. Breathing the gas may cause drowsiness. Butane is a dangerous fire/explosion risk.</td>
</tr>
<tr>
<td>BUTANE</td>
<td>Moderate toxicity via inhalation.</td>
<td>Nail enamel dryer, aérosol propellants (MANP)</td>
<td>The material is a strong respiratory irritant.</td>
</tr>
<tr>
<td>Chemical Name</td>
<td>Toxic Effects</td>
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</tr>
<tr>
<td>BUTOXYETHANOL (ethylene glycol monobutyl ether)</td>
<td>Moderately toxic via ingestion, a mild to moderate skin and eye irritant.</td>
<td>Direct non-oxidation dyes.</td>
<td>In high concentrations the material can cause respiratory irritation and narcosis.</td>
</tr>
<tr>
<td>n-BUTYL ACETATE</td>
<td>A skin and eye irritant, low toxicity via ingestion, inhalation. It is a mild allergen.</td>
<td>Nail lacquer.</td>
<td>Local exposure yields irritation.</td>
</tr>
<tr>
<td>CAMPHOR</td>
<td>High to moderate irritation, ingestion hazard.</td>
<td>Hair relaxer.</td>
<td>A skin and eye irritant.</td>
</tr>
<tr>
<td>CETYL ALCOHOL</td>
<td>Low oral toxicity, an irritant.</td>
<td>Hair relaxer.</td>
<td>EDTA is found in products as either tetrasodium or dessiatine salt. It reacts chemically to &quot;bind&quot; metals.</td>
</tr>
<tr>
<td>EDTA (ethylene diamine tetracetic acid)</td>
<td>Eye irritation. High oral toxicity.</td>
<td>Shampoo (trace), Penn neutralizer, and thiglycolate permanent waves, products that remove coatings from hair.</td>
<td>Experimentally, ethanolamine causes severe eye irritation. It is a caustic material, which causes moderate burns. Inhalation tolerance is low.</td>
</tr>
<tr>
<td>ETHANOLAMINE</td>
<td>Tissue damage. Oral toxicity.</td>
<td>Waving lotions, oxidation dyes.</td>
<td>Repeated exposure can cause conjunctivitis and corneal clouding. High concentrations can cause congestion of the liver and kidneys. It is a dangerous fire risk.</td>
</tr>
<tr>
<td>ETHYL ACETATE</td>
<td>Causes irritation to mucous linings in eyes, respiratory tract and gums. It can act as a mild narcotic. It can also cause dermatitis.</td>
<td>Nail lacquer solvent.</td>
<td>It is oxidized by the liver to form carbon dioxide and water. It is generally not considered an occupational health hazard, however it is a safety hazard due to its flammability.</td>
</tr>
<tr>
<td>ETHYL ALCOHOL (S.D. Alcohol)</td>
<td>The term &quot;S.D.A.&quot; or &quot;S.D. Alcohol&quot; means &quot;specifically denatured alcohol&quot;. S.D.A. is ethyl alcohol, to which another substance, such as methyl isobutyl ketone, has been added, making it unfit for human consumption.</td>
<td>Hair spray, setting lotions, mousse, conditioner, nail sterilizer. Ethyl alcohol is familiar as the alcohol in beverages.</td>
<td>In low concentrations, the material can cause skin irritation. Products containing hydrogen peroxide must be capped and stored securely.</td>
</tr>
<tr>
<td>HYDROGEN PEROXIDE</td>
<td>Concentrated solutions are highly toxic and strong irritants. Solutions of 35% can blister the skin. The material is a powerful oxidant, which readily reacts to release oxygen, and can therefore be a dangerous fire and explosion risk.</td>
<td>Oxidation hair dye developer, neutralizers for permanent waves, hair lighteners, peroxide based neutralizers, permanent wave activator solutions, oxidizers, and enzyme developers.</td>
<td>A dangerous fire risk when exposed to heat, flame or oxidizers.</td>
</tr>
<tr>
<td>ISOBUTANE (2-methyipropane)</td>
<td>A simple asphyxiant, this material is otherwise practically non-toxic.</td>
<td>Aerosol propellants.</td>
<td>The material can de-fat and dry the skin. The material is a physical hazard due to its high flammability.</td>
</tr>
<tr>
<td>Chemical Name</td>
<td>Toxic Effects</td>
<td>Occurrence</td>
<td>Precautions</td>
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<tr>
<td>ISOPROPYL ALCOHOL</td>
<td>Eyes, nose, and throat irritant. In high air concentrations it can induce mild narcosis and can cause corneal burns and eye damage.</td>
<td>Permanent dye, hair spray, nail enamel dryer, oil hair dressing, hair styling mousse, setting gels/lotions, bleach oils, semi-permanent and oxidation hair dyes, and peroxide-based neutralizers.</td>
<td>Liquefied petroleum gas is a mixture of propane, isobutane, isobutylene, and other short chain hydrocarbons. The material is a simple asphyxiant, and its chief health hazard is attributable to its high flammability.</td>
</tr>
<tr>
<td>GLYCEROL</td>
<td>Low toxicity generally, but can be a respiratory irritant when in mist form.</td>
<td>Mousse, oxidation hair colors, permanent hair colors, LPG (liquefied petroleum gas) hairspray propellants.</td>
<td>A moderate fire risk when exposed to heat, flame, or oxidizers.</td>
</tr>
<tr>
<td>METHACRYLIC ACID (glacial)</td>
<td>A strong skin irritant</td>
<td>Acrylic, nail-bonding agents.</td>
<td>Vapors can cause lung irritation and pulmonary edema. Prolonged exposure can cause dermatitis, liver and brain damage. It is a suspected carcinogen. The body metabolizes methylene chloride to carbon monoxide. Heavy smokers and those with cardiovascular disease or anemia are at increased risk.</td>
</tr>
<tr>
<td>METHYLENE CHLORIDE (dichloromethane)</td>
<td>Very dangerous to the eyes; vapors have narcotic properties, which include fatigue, headache, and dizziness.</td>
<td>Nail enamel dryer, oil hair-dressing, aerosols.</td>
<td>Serious fire hazard and risk</td>
</tr>
<tr>
<td>MINERAL SPIRITS</td>
<td>Moderately irritating to skin, eyes, and mucous membranes.</td>
<td>Hairdressings, hair sprays.</td>
<td>An experimental carcinogen and mutagen.</td>
</tr>
<tr>
<td>PHENACETIN</td>
<td>Toxic via inhalation and ingestion routes.</td>
<td>Peroxide-based neutralizers.</td>
<td>This material is a powerful skin irritant, which is implicated as a cause of aplastic anemia and is a suspected carcinogen.</td>
</tr>
<tr>
<td>PARA-PHENYLENEDIAMINE</td>
<td>When used in hair dye, it has been known to produce vertigo, anemia, gastritis, exfoliative dermatitis, and is suspect in at least one death.</td>
<td>Oxidation hair dyes, permanent hair dyes, semi-permanent hair dyes.</td>
<td>A skin, eye, and respiratory tract irritant.</td>
</tr>
<tr>
<td>PHOSPHORIC ACID</td>
<td>A skin, eye and respiratory tract irritant.</td>
<td>Oxidizers, neutralizers.</td>
<td>The material will liberate oxygen when exposed to heat or chemicals, and is therefore a moderate fire risk. It will decompose if not stored properly.</td>
</tr>
<tr>
<td>POTASSIUM PERSULFATE</td>
<td>A moderate tissue irritant and allergen.</td>
<td>Bleach powders, lightener powders.</td>
<td>A skin and eye irritant.</td>
</tr>
<tr>
<td>PROPYLENE GLYCOL</td>
<td>A skin and eye irritant.</td>
<td>Oxidation hair dye base, semi-permanent hair dye base, hair relaxer, and thioglycolate,</td>
<td>This material can cause serious eye and skin injury in susceptible individuals. If the material is in a carrier, which can be absorbed through the</td>
</tr>
</tbody>
</table>
# HAZARDOUS CHEMICAL SUBSTANCE LIST

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<tbody>
<tr>
<td>RESOKCINOL</td>
<td>Primarily a skin irritant.</td>
<td>Oxidation hair dyes.</td>
<td>Prolonged exposure to crystalline silica dust can lead to fibrotic changes (scarring) of lung tissue, however the health hazard is minimal if exposure is controlled. Fumed silica is found in some products. Colloidal type silica does not pose the toxic risks of the crystalline type.</td>
</tr>
<tr>
<td>SILICAS</td>
<td>Silica in dust form can constitute an inhalation hazard.</td>
<td>Frosts, activator powders.</td>
<td>Concentrated solutions are strong irritants to skin and other tissues.</td>
</tr>
<tr>
<td>SODIUM BISULFITE</td>
<td>The material is an allergen.</td>
<td>Oxidation shampoos.</td>
<td>Prolonged exposure to dilute solutions can cause burns and ulceration of skin and other tissues and can cause severe eye damage.</td>
</tr>
<tr>
<td>SODIUM PEROXIDE</td>
<td>Toxic by ingestion and may cause severe burns to the skin and scalp.</td>
<td>Hair relaxer, thioglycolate permanent waves, waving gel</td>
<td>An oxidizer, which needs to be stored carefully, as the material decomposes in moist air.</td>
</tr>
<tr>
<td>SODIUM PERSULFATE</td>
<td>A strong tissue irritant, toxic by ingestion.</td>
<td>Bleach powders, lightener powders.</td>
<td>Toxic by ingestion.</td>
</tr>
<tr>
<td>TETRASODIUM PYROPHOSPHATE</td>
<td>Toxic by ingestion.</td>
<td>Oxidizers (trace).</td>
<td>Hydrogen sulfide gas derived from this material. Irritant to skin and eyes.</td>
</tr>
<tr>
<td>THIOGLYCOLIC ACID</td>
<td>Corrosive to mucous membranes.</td>
<td>Waving lotions, oxidation dyes.</td>
<td>The material can react violently with lithium and other metals.</td>
</tr>
<tr>
<td>TITANIUM DIOXIDE</td>
<td>A skin irritant, which is also an experimental neoplastic and tumorogenic agent.</td>
<td>Hair relaxers, dyes, nail powder.</td>
<td>Eye irritant, toxic when ingested.</td>
</tr>
<tr>
<td>TRICRESYL PHOSPHATE</td>
<td>Eye irritant.</td>
<td>Nail lacquer.</td>
<td>Vapors have narcotic action and can cause headache and nausea. The material is an experimental mutagen.</td>
</tr>
<tr>
<td>TOLUENE</td>
<td>Chronic toluene overexposure can lead to changes in the blood-forming organs (bone marrow).</td>
<td>Nail lacquer solvent.</td>
<td></td>
</tr>
</tbody>
</table>

## Records
OSHA regulations stipulate that employers must allow employees to see any records the employer has regarding an employee's exposure to potentially harmful substances. Companies must use OSHA forms to record work-related illnesses and injuries and post summaries of those records in the workplace. Companies are exempt if they have 10 or fewer workers or operate in a field that OSHA classifies as low-risk, such as retail and finance.
Protective Equipment
Employers must provide protective equipment for all workers at no cost to the worker. Depending on the line of work, examples include helmets, goggles, earplugs and hard-toed boots or shoes.

Hazard Communication
Any employer whose business deals with hazardous materials must properly label containers that hold the materials. Employers must train workers in using the labels to identify and safely handle hazardous materials.

Reporting Accidents
A company must report a workplace accident to the OSHA within eight hours if the accident causes either a death or the hospitalization of at least three employees. OSHA may investigate the accident and rule on whether a violation of agency guidelines was a factor.

Enforcement
OSHA has the right to investigate companies after receiving an accident report or a safety complaint from an employee, as well as to conduct regularly scheduled investigations. The average penalty for a violation is $1,000, but some of the most egregious violations carry a penalty of $70,000. OSHA hopes to toughen sanctions.

Not Covered
OSHA does not cover a few categories of workers in North Carolina. These include anyone who is self-employed, works on a farm where only members of the farm owner's immediate family work, or works at a place of employment covered by other federal agencies or laws. For example, mine workers have their own set of federal protections.
SECTION 4
NORTH CAROLINA COSMETIC ARTS LAWS AND RULES
(8 Credit Hours)

Course Learning Objectives

- Understand the administrative processes directed by the board
- Explain the purpose and procedure of a hearing.
- Know the staggered renewal schedule and renewal fees
- Learn the sanitation rules and salon requirements
- Recognize the proper way to sanitize a foot spa
- Know the sanitary ratings system and inspection process
- Be able to follow North Carolina rules and laws outlining disinfection procedures
- List the requirements for practicing with a cosmetic art license.
- Learn what is required to open a cosmetic arts school
- List the schedule of civil penalties
- Learn the new continuing education rules and the fines for failure to comply

The statement that “knowledge is power” has never had more meaning than when it comes to knowing the laws that you are required to follow in your workplace as a beauty professional. Knowing the law protects you from getting into trouble on many levels. The first segment of this course unit contains the laws and rules of the state as they relate to the cosmetology profession, and the second segment of this course unit contains the North Carolina Administrative Code (NCAC) rules that are relevant to the cosmetology profession.

The more information that you can retain on the North Carolina rules and laws the better off you, your clients and the salon owner will be. Learning and follow the rules not only allows you to avoid fines and liability but it allows you to take advantage of opportunity that is afforded you under the law.

Read carefully and thoroughly. Keep in mind the laws in North Carolina have changed significantly in the last few years and they are still changing. The laws in this section were current at the time this course unit was developed however that is no guarantee that some will not have changed by the time you are reading this. For this reason you should refer to the most current version of the rules before you rely on them. You see the full version of the rules including the history, and can keep up with changes as they happen at:

http://reports.oah.state.nc.us/ncac.asp?folderName=\Title 21 - Occupational Licensing Boards and Commissions\Chapter 14 - Cosmetic Art Examiners

http://www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/ByChapter/Chapter_88B.html
The following definitions apply in this Chapter:

1. "Beauty Establishment" refers to both cosmetic art schools and cosmetic art shops.
2. "Cosmetology School" is any cosmetic art school that teaches cosmetic art as defined by G.S. 88B-2(5), but is not solely a manicurist or an esthetics school.
3. "Cosmetology Student" is a student in any cosmetic art school whose study is the full curriculum.
4. "Manicurist School" is a cosmetic art school that teaches only the cosmetic art of manicuring.
5. "Manicurist Student" is a student in any cosmetic art school whose study is limited to the manicurist curriculum set forth in 21 NCAC 14K .0102.
6. "Successful Completion" is the completion of an approved cosmetic art curriculum with a minimum grade of "C" or 70%, whichever is deemed as passing by the cosmetic art school.
7. "Esthetician School" is any cosmetic art school that teaches only the cosmetic art of skin care.
8. "Esthetician Student" is a student in any cosmetic art school whose study is limited to the esthetician curriculum set forth in 21 NCAC 14O .0102.
9. "Licensing cycle" for cosmetologists is a three-year period beginning on the first day of October and ending on the third following first day of October and continuing thereafter in three year intervals. For estheticians, natural hair care specialists and manicurists, the licensing cycle is one year in length beginning on the first day of October and ending on the next first day of October. For teachers, the licensing cycle is a two-year period beginning on the first day of October of an even-numbered year and ending on the next first day of October of the next even-numbered year.
10. "Renewal period" for individual licensees is a three-month period beginning on the first day of July and ending on the first day of October of a renewal year. The "renewal period" for salon licensees is a two-month period beginning on the first day of December and ending on the first day of February of a renewal year.
21 NCAC 14A .0404 FEES
(a) Fees paid by personal checks that are returned for any reason shall be treated in the same manner as though no fee had been tendered and the bank's returned check fee not to exceed twenty five dollars ($25.00) shall be assessed to the account holder. All subsequent payments must be submitted via credit card, money order or certified check.
(b) All moneys tendered in payment of fees shall be in the exact amount required for said fees.
(c) Licenses, certifications, duplicates, inactivations, or reactivations will not be processed until all fees and assessed civil penalties are paid in full.

SUBCHAPTER 14B - RULE-MAKING PROCEDURES
SECTION .0100 - PETITIONS FOR RULE-MAKING

21 NCAC 14B .0101 PETITIONS
Any person wishing to submit a petition requesting the adoption of a rule by the Board must address a petition to the chairman of the Board at the Board's address.

21 NCAC 14B .0102 CONTENTS OF PETITIONS
The petition must contain the following information:
(1) a draft of the proposed rule or amendment,
(2) a summary of the contents of the proposed rule or amendment,
(3) reason for the proposal,
(4) effect of the new rule or amendment on existing rules,
(5) data supporting the rule proposal,
(6) effect of the proposed rule or amendment on existing practices in the area involved, including cost factors, and
(7) name and address of each petitioner.

21 NCAC 14B .0103 AMENDMENT OR REPEAL
21 NCAC 14B .0104 CONTENTS OF PETITIONS

21 NCAC 14B .0105 GRANTING OR DENYING PETITIONS
The Board must determine, based on a study of the facts stated in the petition, whether the public interest will be better served by granting or denying the petition. The Board must consider all the contents of the submitted petitions plus any additional information deemed relevant.

21 NCAC 14B .0107 FINAL DECISION
Within 30 days of submission of the petition or at its next regularly scheduled meeting, whichever is later, the Board will render a final decision. If the decision is to deny the petition, the chairman of the Board will notify the petitioner in writing stating the reasons therefore. If the decision is to grant the petition, the Board will initiate a rule-making proceeding.

SECTION .0200 - NOTICE

21 NCAC 14B .0201 NOTICE TO PUBLIC
Upon a determination to hold rule-making proceedings, either in response to a petition or otherwise, the Board will give 30 days notice by publication in the North Carolina Register.

SECTION .0300 - HEARINGS

21 NCAC 14B .0302 PROCEDURE FOR MAKING ORAL PRESENTATION AT HEARING
(a) A person desiring to make an oral presentation on a proposed rule or amendment to rule at a rule-making hearing must file a request to make a presentation with the chairman of the Board, at the Board's address, at least 15
days before the hearing. The presiding officer at the hearing may, however, waive or excuse a person's failure to give this notice for good reason.

(b) A request to make an oral presentation must contain a brief summary of the subject on which the individual desires to speak and an estimation of the length of time needed. An oral presentation may not exceed five minutes unless the presiding officer, either before or at the hearing, grants an extension of time for good reason.

(c) A person who makes an oral presentation at a rule-making hearing is encouraged to submit a written copy of the presentation to the Board either before or at the hearing.

21 NCAC 14B .0304 ACKNOWLEDGEMENT OF A REQUEST TO MAKE AN ORAL PRESENTATION

Upon receipt of a request to make an oral presentation at a rule-making hearing, the chairman must acknowledge receipt of the request and inform the person requesting time for an oral presentation of the imposition of any limitations deemed necessary to the end of a full and effective public hearing on the proposed rule or amendment.

21 NCAC 14B .0305 WRITTEN STATEMENT

(a) Any person may file a written statement containing data, comments, or arguments in support of or in opposition to a proposed rule or rule change. Such statements may be filed before, during, or for five days after the hearing by delivering the statement by mail or in person to the chairman of the Board, at the Board's mailing address.

(b) An extension of time for filing written statements may be granted either in the notice of the particular rule-making hearing or by the presiding officer of the hearing.

(c) All such submitted statements should clearly state the rule or proposed rule to which the comments are addressed.

21 NCAC 14B .0306 ACKNOWLEDGEMENT

Acknowledgement of all written comments received by the Board will be issued by the Chairman of the North Carolina State Board of Cosmetic Art Examiners.

21 NCAC 14B .0307 CONTROL OF HEARINGS

(a) Purpose. The purpose of this Rule is to provide uniform procedures for the conduct of public comment hearings.

(b) The presiding officer at the hearings shall have control of the proceedings including the following:

(1) extension of any time requirements,

(2) recognition of speakers,

(3) time allotment for presentations, and

(4) direction of the flow of discussion and the management of the hearing.

(c) The presiding officer at all times shall take care that each person participating in the hearing is given an opportunity to present views, data and comments.

(d) Public comment hearings shall be open to the public, and members of the public shall be entitled to testify, subject to the provisions of this Rule.

(e) Public comment hearing shall be open to print and electronic media, subject to the following limitations by the board, or the person designated by the board to preside over the hearing, when such pooling are necessary to allow the hearing to go forward:

(1) Pooling of the number of media representatives when their number and equipment together with the number of members of the public present exceeds the capacity of the hearing room;

(2) Limitation on the placement of cameras to specific locations within the hearing room; or

(3) Prohibition of interviews conducted within the hearing room during the hearing.

(f) Public comment hearings shall be presided over by the board or an individual knowledgeable in the subject area of the proposed rules who has been designated by the chairman to preside over the hearing.

(g) The person presiding over the hearing shall:

(1) Call the hearing to order;

(2) Identify the proposed rules which are the subject matter of the hearing, and provide copies of them upon request;

(3) Cause a recording of the hearing to be made;

(4) Establish speaker time limits;

(5) Recognize those who wish to be heard;

(6) If necessary, refuse to recognize people for speaking, or revoke recognition of speakers;
(7) If necessary, limit the activity of the media;
(8) If necessary, continue or move the hearing; and
(9) Adjourn or continue the hearing.

(h) The hearing shall be continued when:
(1) The weather is so inclement that it is reasonable to conclude that people wishing to attend the hearing are unable to do so;
(2) The chairman or the individual designated by the chairman to preside over the hearing is ill or unavoidably absent; or
(3) Continuing the hearing will facilitate greater participation by the public.

(i) The hearing may be moved to another location when the original location is not able to accommodate the number of people who wish to attend the hearing.

(j) The hearing shall be continued past the scheduled time or to another date when:
(1) The time available is not sufficient to give each person who wishes to speak a reasonable opportunity to do so; or
(2) The capacity of the room in which the hearing is to be held does not accommodate the number of people who wish to attend the hearing and it is not possible to move the hearing to another location.

(k) People who wish to speak about the rules which are the subject matter of the hearing shall be asked to write on the speaker's list their full names and if they represent other persons, the identity of the persons represented.

(l) People who wish to speak shall be asked to provide the information called for by Paragraph (k) of this Rule no later than before the last speaker on the list has finished speaking.

(m) People whose names appear on the speaker's list shall be afforded an opportunity to speak at the hearing within the limits on public participation.

(n) Written comments must be submitted by the deadline listed in the rule making notice.

(o) The person presiding over the hearing shall:
(1) Refuse to recognize for speaking or revoke the recognition of any person who:
   (A) Speaks or acts in an abusive or disruptive manner; or
   (B) Refuses to keep comments relevant to the proposed rules which are the subject matter of the hearing;
(2) Limit the duration of the hearing and limit the amount of time each speaker may speak to a time which allocates approximately equal speaking time to each person shown on the speaker's list as wishing to speak; and
(3) Limit presentations on behalf of the same organization or entity to no more than three, provided that all those representing such organization or entity may enter their names and addresses into the record as supporting the position of the organization or entity.

21 NCAC 14B.0308 REQUEST FOR STATEMENT ON ADOPTED RULE
Any person or agency desiring a concise statement of the principal reasons for and against the adoption of a rule by the Board and the factors that led to sustaining or overruling the considerations urged for or against its adoption may submit a request in writing to the chairman of the Board at the Board's address. Such requests may be submitted either prior to the rule-making hearing or within 30 days thereafter.

21 NCAC 14B.0309 RECORDS
(a) A record of all rule-making proceedings will be maintained as long as the rule is in effect and for five years thereafter. This record will contain the following:
(1) the original petition, if any;
(2) the notice;
(3) all written memoranda and information submitted;
(4) a record or summary of oral presentations, if any; and
(5) any statement of reasons for and against adoption of a rule issued by the Board.
(b) The record will be maintained in a file at the Board's address.
SECTION .0500 - DECLARATORY RULINGS

21 NCAC 14B .0501 REQUEST FOR DECLARATORY RULING
Any person substantially affected by a statute administered or rule promulgated by the Board may request a declaratory ruling as to how the statute or rule applies to a given factual situation or whether a particular board rule is valid. All requests for declaratory rulings must be in writing and mailed to the chairman of the Board at the Board's address.

21 NCAC 14B .0502 CONTENTS OF REQUEST
All requests for a declaratory ruling must include the following information:
1. Name and address of petitioner;
2. Statute or rule to which the petition relates;
3. Concise statement of the manner in which the petitioner is aggrieved, or thinks that he may be aggrieved by the rule or statute and its application to him; and
4. Statement of whether an oral hearing is desired and if so the reasons therefor.

21 NCAC 14B .0503 REFUSAL TO ISSUE DECLARATORY RULING
Whenever the Board believes for good reason that the issuance of a declaratory ruling is inappropriate, it may refuse to do so. When good reason is deemed to exist, the Board will notify the petitioner of its decision in writing stating reasons for the denial of a declaratory ruling.

21 NCAC 14B .0504 ISSUANCE OF DECLARATORY RULING
Where a declaratory ruling is deemed appropriate the Board will issue the ruling within 60 days of receipt of the petition.

21 NCAC 14B .0505 PROCEDURE
A declaratory ruling procedure may consist of written statements, oral hearings or such other procedures as may be appropriate in a particular case.

21 NCAC 14B .0506 CIRCUMSTANCES
The Board may refuse to issue a declaratory ruling on the validity of a rule if:
1. When the Board has already made a controlling decision on substantially similar facts in a contested case;
2. When the facts underlying the request for a ruling were specifically considered at the time of the adoption of the rule in question; and
3. When the subject matter of the request is involved in pending litigation in North Carolina.

SECTION .0600 - FEES

21 NCAC 14B .0601 COPYING CHARGES
The Board may charge a small fee for providing copies of its rules, Chapter 88 of the North Carolina General Statutes, and other public documents in its possession.

21 NCAC 14B .0603 POSTAGE AND HANDLING
There will be a five dollar ($5.00) charge for postage and handling for all mailings.

21 NCAC 14B .0605 COSMETOLOGIST LICENSE FEE AND STAGGERED LICENSE RENEWAL SCHEDULE
(a) All cosmetology licenses expiring on and after October 1, 2013 shall pay the renewal fee of thirty-nine dollars ($39.00), and complete 24 hours of continuing education as required by G.S. 88B-21 to be eligible for license renewal.
(b) Upon renewal of the license expiring October 1, 2010 the Board shall issue a new license with staggered expiration dates. Licensees shall be divided into renewal groups by first digit of license number and shall pay prorated fees for renewal as follows:

<table>
<thead>
<tr>
<th>License Number (1st digit in number)</th>
<th>Staggered Expiration Date</th>
<th>Fees/CE Hours Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>3, 4 or 5</td>
<td>October 1, 2011</td>
<td>$13/0 hours</td>
</tr>
<tr>
<td>6 or 7</td>
<td>October 1, 2012</td>
<td>$26/12 hours</td>
</tr>
<tr>
<td>0, 1, 2, 8 or 9</td>
<td>October 1, 2013</td>
<td>$39/24 hours</td>
</tr>
</tbody>
</table>

21 NCAC 14B .0606  RESERVED FOR FUTURE CODIFICATION

21 NCAC 14B .0607  WAIVERS
(a) Individuals who wish to request a waiver of a rule shall submit to the Board a written request which includes:
   (1) The rule for which a waiver is requested;
   (2) The reason for requesting the waiver along with supporting documents;
   (3) Evidence of how the waiver will provide for the health and safety of the consumer or licensee; and
   (4) The signature of applicant.
(b) The Board shall approve a waiver request only if:
   (1) The administrative rule for which the waiver is being requested is not mandated by law; and
   (2) The Board finds that approval of the requested waiver shall not jeopardize the health and safety of employees or the public.

SUBCHAPTER 14C - CONTESTED CASES
SECTION .0100 - GENERAL RULES

21 NCAC 14C .0101  ADMINISTRATIVE HEARINGS
Whenever the Board proposes to deny, revoke, or suspend a license, permit, certificate of registration, or letter of approval issued by it, or at any other time when it deems a hearing legally required, it must give notice to the person affected of the Board's proposed action and the person's right to a hearing. The person may request a hearing by mailing or delivering to the Board a written request for a hearing. The Board will take the proposed action described in the notice unless it receives a request for a hearing prior to the date on which the Board proposes to act or the date specified in the notice. A request mailed to the Board is deemed timely if postmarked prior to the date on which the Board proposes to act or the date specified in the notice.

21 NCAC 14C .0103  PRESIDING OFFICER
If no other presiding officer has been designated by the Board, or if the designated presiding officer is unavailable or disqualifies himself, the chairman of the Board shall act as presiding officer for purposes of issuing subpoenas, ordering the production of records, responding to motions for continuances or extensions of time, controlling and ruling on issues surrounding discovery, and otherwise acting on matters arising in connection with a pending hearing and shall have all powers granted to the presiding officer under Article 3A of Chapter 150B of the North Carolina General Statutes.

SECTION .0200 - REQUEST FOR A HEARING

21 NCAC 14C .0201  REQUEST
When any person believes his rights, duties or privileges have been affected by administrative action of the Board, he may request an administrative hearing.
21 NCAC 14C .0203  WRITTEN REQUEST
Following such an informal contact with the Board as set out in 21 NCAC 14C .0202, if still dissatisfied, one may file a written request for an administrative hearing with the chairman of the Board at its address.

21 NCAC 14C .0204  CONTENTS OF REQUEST
A written request for an administrative hearing must contain the following information:
   (1) name and address of petitioner,
   (2) a concise statement of the Board action being challenged,
   (3) a concise statement of the way in which the petitioner has been aggrieved, and
   (4) a clear and specific demand for a hearing.

21 NCAC 14C .0205  ACKNOWLEDGEMENT
Requests for administrative hearings must be promptly acknowledged by the Board and, if the person making the request is a person aggrieved, a hearing must be scheduled within a reasonable amount of time.

21 NCAC 14C .0503  ADDITIONAL INFORMATION ON NOTICES OF HEARINGS
In addition to the items specified in North Carolina General Statutes 150B-38(b) to be included in the notice, notices of administrative hearings must include the following information:
   (1) the name, position, address and phone number of a member, employee, or agent of the Board to contact for further information or discussion;
   (2) the date and place for any prehearing conference;
   (3) the right to file a written response to the allegations in the notice of hearing no later than ten days prior to the scheduled hearing date; and
   (4) other information deemed relevant to informing the party or parties as to the procedure for the hearing.

SECTION .0600 - WHO SHALL HEAR CONTESTED CASES

21 NCAC 14C .0601  HEARING PANEL
Administrative hearings before the Board will normally be heard by a majority of the Board.

SECTION .0800 - INTERVENTION

21 NCAC 14C .0801  INTERVENTION OF RIGHT
A motion to intervene of right as provided for in the North Carolina Rules of Civil Procedure, Rule 24, must be granted if timely and the petitioner meets the criteria of that rule. For the purposes of intervention, any time prior to the designated hearing's termination must be considered timely unless a grant of the right to intervene would cause substantial prejudice to the rights of a party, substantial added expense, or compellingly serious inconvenience to the parties.

21 NCAC 14C .0802  PERMISSIVE INTERVENTION
A motion to intervene permissively as provided for in North Carolina Rules of Civil Procedure, Rule 24, must be granted if the petitioner meets the criteria of that rule and the Board determines that:
   (1) There is sufficient legal or factual similarity between the petitioner's rights, privileges, or duties and those of the other parties to the hearing; and
   (2) Permitting intervention by the petitioner as a party would aid the purposes of the hearing.

21 NCAC 14C .0803  DISCRETIONARY INTERVENTION
Discretionary intervention must be allowed by the Board upon a motion made before the termination of the hearing itself when the Board finds intervention would be helpful to a determination of the issues in the hearing.
21 NCAC 14C .0804 ADVISABILITY
Discretionary intervention will be deemed advisable when:
(1) The information the petitioner desires to present is relevant and not repetitious or merely cumulative; and
(2) The petitioner would lend added impact to arguments of the parties.

21 NCAC 14C .0805 WRITTEN MOTION
A person desiring to intervene in a contested case must file a written motion with the chairman of the Board at the Board's address.

21 NCAC 14C .0807 ALLOWANCE
If the Board decides to allow intervention, notification of that decision will be issued promptly to all parties including the movant. In cases of discretionary intervention such notification will include a statement of the limitations, if any, of time, subject matter, evidence or any other matters deemed necessary by the Board which are imposed upon the intervenor.

21 NCAC 14C .0808 DENIAL
If the Board decides to deny intervention, the movant must be notified promptly in writing. The notification must state the reasons for the decision and must be issued to the movant and to all parties.

SECTION .0900 - HEARING OFFICERS

21 NCAC 14C .0903 BIAS OF BOARD MEMBER
If for any reason a board member determines that personal bias or other factors would keep that member from being able to hear a contested case and perform all duties concerning the hearing in an impartial manner, that member shall submit in writing to the Board his or her disqualifications and the reasons therefor.

21 NCAC 14C .0904 BIAS CLAIMED BY PARTY
If for any reason a party in a contested case believes that a board member is personally biased or otherwise unable to conduct the hearing and perform all duties in an impartial manner, the party may file with the Board a sworn notarized affidavit stating the reasons for such belief and all relevant facts.

21 NCAC 14C .0906 FILING AFFIDAVIT
An affidavit of disqualification will be considered timely if filed at least ten days prior to the scheduled hearing date. Any other affidavit may be found timely provided it is filed at the first opportunity after the party becomes aware of facts which give rise to a reasonable belief that any board member may be disqualified.

21 NCAC 14C .0907 DISQUALIFICATION
The remainder of the members of the board shall decide whether to disqualify the person being challenged by the following procedural rules:
(1) The person whose disqualification is to be determined will not participate in the decision but may be called upon to furnish information to the remaining members of the Board conducting the hearing.
(2) The Board shall appoint a member of the Board or the executive secretary or any other appropriate person to investigate the allegations of the affidavit, if necessary and report his or her findings or recommendations.
(3) The Board shall decide whether to disqualify the challenged individual on the basis of all relevant and appropriate information available to it.

21 NCAC 14C .0908 NEW HEARING
When a board member is disqualified after the hearing has begun, a new hearing must be initiated upon request if any party would be prejudiced by the denial of the request.
SUBCHAPTER 14D - CONDUCT OF THE CONTESTED CASE
SECTION .0100 - FAILURE TO APPEAR

21 NCAC 14D .0101 PROCEEDING WITHOUT PARTY
Should a party who has been served with notice fail to appear at a scheduled hearing without having previously been
granted a continuance, the Board may either proceed with the hearing in the party's absence, continue the hearing, or
dismiss the proceeding.

21 NCAC 14D .0103 CONTINUANCES
A continuance will be granted to a party only in compelling circumstances. Usually only one such postponement will be
allowed.

21 NCAC 14D .0104 PETITION TO REOPEN
(a) If a hearing is conducted and if a decision is reached in the absence of a party, the party may petition the Board for a
reopening of the case. Petitions will not be granted except when the petitioners show that the reason for failure to appear
was justifiable and unavoidable and that fairness and justice require a reopening of the case.
(b) All petitions for reopening of the case shall be in writing and addressed to the chairman of the Board at its address,
and shall contain the following information:
   (1) the name and address of the petitioner,
   (2) a full identification of the hearing which the petitioner is seeking to reopen, and
   (3) a detailed explanation of the reasons for the petitioner's desire to reopen the hearing.

21 NCAC 14D .0105 CRITERIA FOR REOPENING A CASE
The Board shall make a decision on whether to reopen the petitioner's case based upon the merits of the petition or other
pertinent information in the Board's possession. A copy of the decision will be sent to the petitioner and made a part of
the permanent record of the contested case.

SECTION .0300 - SUBPOENAS

21 NCAC 14D .0302 ISSUANCE
Subpoenas requiring the attendance of witnesses or those to produce documents, evidence or things must be issued by the
chairman of the Board or his agent within three business days of the receipt of a request from a party to a contested case.

21 NCAC 14D .0303 SERVICE OF SUBPOENAS
(a) Subpoenas may be served in any manner provided by law.
(b) Subpoenas shall be issued in duplicate with a "Return of Service" form attached to each copy. The person serving
the subpoena shall fill out the "Return of Service" form for each copy and promptly return one copy of the subpoena with
the attached "Return of Service" form completed to the Board.

21 NCAC 14D .0305 OBJECTIONS
Any person receiving a subpoena may object thereto by filing a written objection with the Board.

21 NCAC 14D .0306 STATEMENT OF REASONS
An objection to a subpoena must include a concise but complete statement of reasons why the subpoena should be
revoked or modified. These reasons may include lack of relevancy of the evidence requested, lack of particularity in the
description of the evidence sought, or any other reason sufficient in law for holding the subpoena invalid, such as that the
evidence is privileged or that appearance or production would be so disruptive as to be unreasonable in light of the
significance of the evidence sought or would produce some other undue hardship.

21 NCAC 14D .0307 SERVICE OF OBJECTIONS
Any objections to a subpoena filed with the Board must be simultaneously served on the party requesting the subpoena.
21 NCAC 14D .0308  RESPONSES TO OBJECTIONS
The party requesting the subpoena, within 10 days, may file a written response to the objection. The response shall be served in like manner as the objection.

21 NCAC 14D .0309  HEARINGS ON SUBPOENA CHALLENGES
After receipt of the objection and a response thereto, if any, the hearing board or the presiding officer shall issue a notice of hearing to the party who requested the subpoena and the party challenging it and may notify all other parties of a hearing before the Board to be scheduled within a reasonable time at which hearing evidence and testimony may be presented by all parties limited to the questions raised by the subpoena, the objection, and subsequent responses thereto.

21 NCAC 14D .0310  RULINGS
Promptly after the close of any hearing on an objection to a subpoena, the Board will issue a written decision. Based on the evidence presented and the record, the Board may revoke or modify the subpoena for good cause, based on such issues as oppressiveness, relevancy, and other appropriate factors, or may overrule the objection to the subpoena. A written copy of the decision will be served on the person objecting to the subpoena and all parties to the hearing.

SUBCHAPTER 14G - REQUIREMENTS FOR THE ESTABLISHMENT OF COSMETIC ART SCHOOLS
SECTION .0100 - PERMANENT FILES

21 NCAC 14G .0101  REQUIREMENTS FOR OPERATING COSMETIC ART SCHOOLS
Persons desiring to operate a cosmetic art school in the state of North Carolina must make application to the Board on an application blank to be furnished by the Board, and must furnish proof of reliability, financial and otherwise.

21 NCAC 14G .0103  SPACE REQUIREMENTS
(a) The Cosmetic Art Board shall issue letters of approval only to cosmetic art schools that have at least 2,800 square feet of inside floor space for 20 stations or 4,200 square feet of inside floor space for 30 stations located within the same building. An additional 140 square feet of floor space is required for each station above 20 stations, up to and including a total of 30 stations. Thereafter, an additional 40 square feet is required for each station in excess of 30 stations. For purpose of this Rule, the day and night classes is counted as separate enrollments. A school may have a recitation room located in an adjacent building or another building within 500 feet of the main cosmetology building.
(b) Each cosmetic art school must have no less than 20 hairdressing stations, arranged to accommodate not less than 20 students and arranged so that the course of study and training cosmetology, as prescribed in 21 NCAC 14J .0306, may be given. All stations must be numbered numerically.
(c) Cosmetic art schools must have a beginner department containing sufficient space to comfortably accommodate at least 10 students and having at least 40 inches between mannequins.
(d) The Board shall issue a letter of approval only to manicurist schools that have at least 1,000 square feet of inside floor space located within the same building.
(e) Manicurist schools with 1,000 square feet of inside floor space shall enroll no more than 20 students at one time, and for each student enrolled in addition to 20 students, 40 square feet of inside floor space must be provided.
(f) Manicurist schools must have 10 manicurist tables and chairs a minimum of two feet apart, side to side, arranged to comfortably accommodate ten students.
(g) The Board shall issue a letter of approval only to esthetician schools that have at least 1,500 square feet of inside floor space located within the same building.
(h) Esthetician schools with 1,500 square feet of inside floor space shall enroll no more than 20 students at one time, and for each student enrolled in addition to 20 students, 50 square feet of inside floor space must be provided.
(i) The Board shall issue a letter of approval only to natural hair care schools that have at least 2000 square feet of inside floor space located within the same building.
(j) Natural hair care schools with 2000 square feet of inside floor space shall enroll no more than 20 students at one time, and for each student enrolled in addition to 20 students, 50 square feet of inside floor space must be provided. Schools combining manicuring, esthetics and natural hair care training programs with 2000 feet of inside floor space shall enroll no more than a total of 20 students at one time and for each student enrolled in addition to 20 students, 50 square feet of inside floor space must be provided. Equipment requirements for manicuring, esthetics and natural hair care schools shall be followed.
21 NCAC 14G .0107  EQUIPMENT AND TEACHERS
(a) A cosmetic art school shall have the necessary classrooms and equipment for teaching as required by Subchapters 14I, 14J, 14K and 14O and shall provide a staff of cosmetic art teachers licensed by the Board.
(b) The Board shall not accept an application for a letter of approval until all furniture, supplies and equipment as prescribed by the Rules in this Chapter have been installed and the entire school is complete.
(c) All courses in a cosmetic art school must be taught by a licensed cosmetology teacher, except that manicuring courses may be taught by either a licensed cosmetology teacher or a licensed manicurist teacher, natural hair care courses may be taught by either a licensed cosmetology teacher or a licensed natural hair care teacher, and esthetics courses may be taught by either a licensed cosmetology teacher or a licensed esthetician teacher.
(d) Notwithstanding Paragraph (c) of this Rule, a licensed cosmetologist not licensed to teach cosmetic art may substitute for a cosmetology, esthetician, natural hair care or manicurist teacher; a licensed manicurist not licensed as a manicurist teacher may substitute for a manicurist teacher; a licensed natural hair care specialist not licensed as a natural hair care teacher may substitute for a natural hair care teacher; and a licensed esthetician not licensed as an esthetic teacher may substitute for an esthetician teacher. In no event may such a substitution last for more than 15 working days per year per teacher.

21 NCAC 14G .0108  VISITATION
The Board shall visit every cosmetic art school that applies for a letter of approval.

21 NCAC 14G .0109  STUDENT CREDIT
No student shall be given credit for any hours earned in a cosmetic art school before the date the school is granted a letter of approval.

21 NCAC 14G .0110  TRANSFERABILITY OF LETTERS OF APPROVAL
Letters of approval issued to cosmetic art schools are not transferable, and are valid only for the location for which issued, and to the person to whom issued.

21 NCAC 14G .0111  CHANGE OF LOCATION: OWNERSHIP OR MANAGEMENT
If the location of a cosmetic art school changes, or if there is a transfer of majority ownership of a cosmetic art school, whether by sale, lease or otherwise, a new approval application is required.

21 NCAC 14G .0112  CONDITION OF EQUIPMENT
All equipment in the school must be in good, workable, clean, safe condition.

21 NCAC 14G .0113  TEACHER/STUDENT RATIO
(a) All cosmetic art schools shall provide one teacher for every 25 enrolled students. In theory or demonstration classes the student teacher ratio may exceed 1:25. During student practical work on live models, there must be a ratio of one teacher for every 20 students.
(b) These ratios shall be adhered to at all time schools are in operation. Refer to 21 NCAC 14G .0115.

21 NCAC 14G .0114  SCHOOL AFFILIATION WITH COSMETIC ART SHOPS AND OTHER BUSINESS
(a) No cosmetic art shop or any other business shall be operated as a cosmetic art school.
(b) When a school and a shop are under the same ownership or otherwise associated, separate operation of the shop and school shall be maintained:
   (1) If the school and shop are located in the same building, separate entrances and visitor reception areas shall be maintained; and
   (2) The school and shop shall have separate public information releases, advertisements, names and advertising signs.

21 NCAC 14G .0115  FAILURE TO COMPLY WITH RULES
Failure of a cosmetic art school to comply with the rules adopted by the Board is cause to revoke or suspend the school's letter of approval.

21 NCAC 14G .0116  RE-EVALUATION OF SCHOOLS
The Board reserves the authority to re-evaluate any cosmetic art school at any time.
21 NCAC 14G .0117   CHANGES IN TEACHING STAFF
A change in teaching staff must be reported to the Board immediately after it occurs. A change in teaching staff includes any substitution for the regularly scheduled teacher and any change, scheduled or otherwise, in the list of teachers last given to the Board's school administrator.

21 NCAC 14G .0118   SCHOOL CURRICULUM APPROVAL
Licensed cosmetic art schools must submit, for Board approval, course curriculum for all disciplines of cosmetic art.

You covered the sanitation rules and laws in the sanitation and Infection control course unit of this course. Because of the enormous importance that sanitation rules play in the protection of the health and welfare of the public, including your co-workers and yourself we have retained the sanitation rules here in the law section as a review.

SUBCHAPTER 14H - SANITATION
SECTION .0100 - SANITATION

21 NCAC 14H .0101   COPY OF RULES TO COSMETOLOGY STUDENTS
Cosmetic art schools shall give a copy of the sanitation rules governing the practice of the cosmetic arts to each student for study.

21 NCAC 14H .0102   COPY OF RULES TO BEAUTY ESTABLISHMENTS
The Board shall give copies of the rules of sanitation governing the practice of cosmetic art to all beauty establishments.

SECTION .0200 - SHOP LICENSING AND PHYSICAL DIMENSIONS

21 NCAC 14H .0201   APPLICATION FOR SHOP LICENSE
(a) Rules in this Subchapter apply to all cosmetic art shops making initial application to operate a cosmetic art shop after the effective date of these Rules.
(b) Shops licensed prior to March 1, 2012 may choose to comply with Rules .0202, .0203(c), .0204 and .0301 of this Subchapter.
(c) Shops licensed prior to March 1, 2012 must comply with Rules .0201, .0203(a)-(b), .0302-.0304 and Sections .0400 and .0500 of this Subchapter.
(d) Shops licensed prior to March 1, 2012 that make any structural changes must come into compliance with all rules in this Subchapter.
(e) Persons desiring to open a cosmetic art shop in the State of North Carolina shall make application to the North Carolina State Board of Cosmetic Art Examiner on the Board's application form. Persons desiring to change ownership of a cosmetic art shop, relocate or reopen a shop which has been closed more than 90 days shall make application to the North Carolina State Board of Cosmetic Art Examiner on the Board's application form.

21 NCAC 14H .0203   NEWLY ESTABLISHED SHOPS
(a) A cosmetic art shop shall be separate and apart from any building or room used for any other business or purpose, separated by a solid wall of at least seven feet in height and must have a separate outside entrance.
(b) A newly established cosmetic art shop, shall be separate and apart from any building or room used for living, dining or sleeping and shall be separate and apart from any other room used for any other purpose by a solid wall of ceiling height, making separate and apart rooms used for a cosmetic art shop. All entrances to the cosmetic art shop shall be through solid, full length doors installed in solid walls of ceiling height.
(c) A residential cosmetic art shop shall furnish bathroom facilities separate and apart from the residence.
(d) An entrance to a cosmetic art shop from a passageway, walkway or mall area used only for access to the shop, or to the shop and other businesses, may be open.

21 NCAC 14H .0204   DIMENSIONS WITHIN COSMETIC ART SHOPS
Within the clinic area each shop shall maintain no less than the following working distances:
   (1)  48 inches of space from the center to the center of each styling chair, esthetics table or manicuring table;
(2) 24 inches from the center of the chair forward;
(3) 48 inches from the backrest behind the chair to any other styling chair, esthetics table or manicuring table; and
(4) at least 30 inches of space from the back of each styling chair, esthetics table or manicuring table to the wall of the shop.

SECTION .0300 - COSMETIC ART SHOP AND EQUIPMENT

21 NCAC 14H .0301 WATER
(a) Cosmetic art shops shall have a sink with hot and cold running water in the clinic area, separate from restrooms.
(b) When a service is provided in a room closed off by a door, the sink required in this Rule must be within 20 feet of the door or 25 feet from the service table or chair. The restroom sink shall not be used to meet this requirement.

21 NCAC 14H .0302 VENTILATION AND LIGHT
(a) Ventilation shall be provided at all times in the areas where patrons are serviced in all cosmetic art shops and there must be a continuous exchange of air.
(b) All doors and windows, if open for ventilation, must be effectively screened.
(c) Light shall be provided in the service area.
(d) All cosmetic art shops must adhere to any federal, state and local government regulation or ordinance regarding fire safety codes, plumbing and electrical work.

21 NCAC 14H .0303 BATHROOM FACILITIES
(a) Toilet and hand washing facilities consisting of at least one commode and one hand washing sink with hot and cold running water, liquid soap and individual clean towels or hand air dryer shall be provided.
(b) Shops with an initial licensure date after March 1, 2012 must have toilet and hand washing facilities in the bathroom.

21 NCAC 14H .0304 EQUIPMENT
Cosmetic art shops shall maintain equipment and supplies to safely perform any cosmetic art service offered in the shop.

SECTION .0400 - SANITATION PROCEDURES AND PRACTICES

21 NCAC 14H .0401 LICENSEES AND STUDENTS
(a) Notwithstanding Rule .0201 in this Subchapter, this Rule applies to students and licensees in practice in cosmetic art schools and shops. Each licensee and student shall wash his or her hands with soap and water or an equally effective cleansing agent immediately before and after serving each client.
(b) Each licensee and student shall wear clean garments and shoes while serving patrons.
(c) Licensees or students must not use or possess in a cosmetic art school or shop any of the following:
   (1) Methyl Methacrylate Liquid Monomer a.k.a. MMA;
   (2) Razor-type callus shavers designed and intended to cut growths of skin including skin tags, corns and calluses;
   (3) FDA rated Class III devices;
   (4) Carbolic acid (phenol) over two percent strength;
   (5) Animals including insects, fish, amphibians, reptiles, birds or mammals to perform any service; or
   (6) A variable speed electrical nail file on a natural nail unless it has been designed for use on a natural nail.
(d) A licensee or student must not:
   (1) Use any product, implement or piece of equipment in any manner other than the product's, implement's or equipment's intended use as described or detailed by the manufacturer;
   (2) Diagnose any medical condition or treat any medical condition unless referred by a physician;
   (3) Provide any service unless trained prior to performing the service;
   (4) Perform services on a client if the licensee has reason to believe the client has any of the following:
      (A) a contagious condition or disease;
      (B) an inflamed, infected, broken, raised or swollen skin or nail tissue; or
      (C) an open wound or sore in the area to be worked on;
   (5) Alter or duplicate a license issued by the Board;
   (6) Advertise or solicit clients in any form of communication in a manner that is false or misleading;
(7) Use any FDA rated Class II device without the documented supervision of a licensed physician;
(8) Use any product that will penetrate the dermis; or
(9) Make any statement to a member of the public either verbally or in writing stating or implying action is required or forbidden by Board rules when such action is not required or forbidden by Board rules. A violation of this prohibition is considered practicing or attempting to practice by fraudulent misrepresentation.

e) In using a disinfectant, the user shall wear any personal protective equipment, such as gloves, recommended by the manufacturer in the Material Safety Data Sheet.

21 NCAC 14H .0402  COSMETIC ART SHOPS AND SCHOOLS
(a) Notwithstanding Rule .0201 in this Subchapter, this Rule applies to all cosmetic art schools and shops. A cosmetic art school or shop shall be kept clean.
(b) Waste material shall be kept in receptacles with a disposable liner. The area surrounding the waste receptacles shall be maintained in a sanitary manner.
(c) All doors and windows shall be kept clean.
(d) Furniture, equipment, floors, walls, ceilings and fixtures must be clean and in good repair.
(e) Animals or birds shall not be in a cosmetic art shop or school. Fish in an enclosure and animals trained for the purpose of accompanying disabled persons are exempt from the prohibition in this Paragraph.
(f) Cosmetic art shops and schools shall designate the entrance by a sign or lettering.
(g) The owner of a cosmetic art shop or school shall not post any sign that states or implies that some action is required or forbidden by Board rules when such action is not required or forbidden by Board rules. A violation of this prohibition is considered practicing or attempting to practice by fraudulent misrepresentation.

21 NCAC 14H .0403  DISINFECTION PROCEDURES
(a) Sanitation rules which apply to towels and cloths are as follows:
   (1) Clean protective capes, drapes, linens and towels shall be used for each patron;
   (2) After a protective cape has been in contact with a patron's neck it shall be placed in a clean, closed container until laundered with soap and hot water and dried in a heated dryer. Capes that cannot be laundered and dried in a heater dryer may be disinfected with an EPA registered hospital grade disinfectant mixed and used in accordance with the manufacturer directions; and
   (3) After a drape, linen or towel has been in contact with a patron's skin it shall be placed in a clean, covered container until laundered with soap and hot water and dried in a heated dryer. A covered container may have an opening so soiled items may be dropped into the container.
(b) Any paper or nonwoven protective drape or covering shall be discarded after one use.
(c) There shall be a supply of clean protective drapes, linens and towels at all times.
(d) Clean drapes, capes, linens, towels and all other supplies shall be stored in a clean area.
(e) Bathroom facilities must be kept clean.
(f) All implements shall be cleaned and disinfected after each use in the following manner:
   (1) They shall be washed with warm water and a cleaning solution and scrubbed to remove debris and dried.
   (2) They shall be disinfected in accordance with the following:
      (A) EPA registered hospital/pseudomonacidal (bactericidal, virucidal, and fungicidal) or tuberculocidal that is mixed and used according to the manufacturer's directions. They shall be rinsed with hot tap water and dried with a clean towel before their next use. They shall be stored in a clean, closed cabinet or container until they are needed; or
      (B) 1 and 1/3 cup of 5.25 percent household bleach to one gallon of water for 10 minutes. They shall be rinsed with hot tap water and dried with a clean towel before their next use. They shall be stored in a clean, closed cabinet or container until they are needed; or
      (C) UV-C, ultraviolet germicidal irradiation used in accordance with the manufacturer's directions.
   (3) If the implement is not immersible or is not disinfected by UV-C irradiation, it shall be cleaned by wiping it with a clean cloth moistened or sprayed with a disinfectant EPA registered, hospital/pseudomonacidal (bactericidal, virucidal, and fungicidal) or tuberculocidal, used in accordance with the manufacturer's directions.
   (4) Implements that come in contact with blood, shall be disinfected by:
      (A) disinfectant, used in accordance with the manufacturer's instructions, that states the solution will destroy HIV, TB or HBV viruses and approved by the Federal Environmental Protection Agency; or
      (B) EPA registered hospital/pseudomonacidal (bactericidal, virucidal, and fungicidal) and tuberculocidal that is mixed and used according to the manufacturer's directions; or
(C) household bleach in a 10 percent solution (1 and 2/3 cup of bleach to 1 gallon of water) for 10 minutes.

(g) All disinfected non-electrical implements shall be stored in a clean closed cabinet or clean closed container.

(h) All disinfected electrical implements shall be stored in a clean area.

(i) Disposable and porous implements and supplies must be discarded after use or upon completion of the service.

(j) Product that comes into contact with the patron must be discarded upon completion of the service.

(k) Clean, closable storage must be provided for all disinfected implements not in use. Containers with open faces may be covered/closed with plastic wrapping. Disinfected implements must be kept in a clean closed cabinet or clean closed container and must not be stored with any implement or item that has not been disinfected.

(l) Lancets, disposable razors, and other sharp objects shall be disposed in puncture-resistant containers.

(m) All creams, lotions, wax, cosmetics, and other products dispensed to come in contact with patron's skin must be kept in clean, closed containers, and must conform in all respects to the requirements of the Pure Food and Drug Law. Any product apportioned for use and removed from original containers must be distributed in a sanitary manner that prevents contamination of product or container. Any product dispensed in portions into another container must be dispensed into a sanitized container and applied to patrons by means of a disinfected or disposable implement or other sanitized methods. Any product dispensed in portions not dispensed into another container must be used immediately and applied to patrons by means of a disinfected or disposable implement or other sanitized methods. No product dispensed in portions may be returned to the original container.

(n) As used in this Rule whirlpool or footspa means any basin using circulating water.

(o) After use by each patron each whirlpool or footspa must be cleaned and disinfected as follows:

1. All water must be drained and all debris removed from the basin;
2. The basin must be disinfected by filling the basin with water and circulating:
   A. Two tablespoons of automatic dishwashing powder and 1/4 cup of 5.25 percent household bleach to one gallon of water through the unit for 10 minutes; or
   B. Surfactant or enzymatic soap with an EPA registered disinfectant with bactericidal, tuberculocidal, fungicidal and virucidal activity used according to manufacturer's instructions through the unit for 10 minutes;
3. The basin must be drained and rinsed with clean water; and
4. The basin must be wiped dry with a clean towel.

(p) At the end of the day each whirlpool or footspa must be cleaned and disinfected as follows:

1. The screen must be removed and all debris trapped behind the screen removed;
2. The screen and the inlet must be washed with surfactant or enzymatic soap or detergent and rinsed with clean water;
3. Before replacing the screen one of the following procedures must be performed:
   A. The screen must be totally immersed in a household bleach solution of 1/4 cup of 5.25 percent household bleach to one gallon of water for 10 minutes; or
   B. The screen must be totally immersed in an EPA registered disinfectant with bactericidal tuberculocidal, fungicidal and virucidal activity in accordance to the manufacturer's instructions for 10 minutes;
4. The inlet and area behind the screen must be cleaned with a brush and surfactant soap and water to remove all visible debris and residue;
5. The spa system must be flushed with low sudsing surfactant or enzymatic soap and warm water for at least 10 minutes and then rinsed and drained.

(q) Every week after cleaning and disinfecting pursuant to Paragraphs (a) and (b) of this Rule each whirlpool and footspa must be cleaned and disinfected in the following manner:

1. The whirlpool or footspa basin must be filled with water and 1/4 cup of 5.25 percent household bleach for each one gallon of water or EPA registered disinfectant with bactericidal, tuberculocidal, fungicidal and virucidal activity in accordance to the manufacturer's instructions; and
2. The whirlpool or footspa system must be flushed with the bleach and water or EPA registered disinfectant solution for 10 minutes and allowed to sit for at least six hours; and
3. The whirlpool or footspa system must be drained and flushed with water before use by a patron.

(r) A record must be made of the date and time of each cleaning and disinfecting as required by this Rule including the date, time, reason and name of the staff member who performed the cleaning. This record must be made for each whirlpool or footspa and must be kept and made available for at least 90 days upon request by either a patron or inspector.

(s) The water in a vaporizer machine must be emptied daily and the unit disinfected daily after emptying.

(t) The area where services are performed that come in contact with the patron’s skin including treatment chairs, treatment tables and beds shall be disinfected between patrons.
21 NCAC 14H .0404  FIRST AID
(a) Each cosmetic art shop and school must have antiseptics, gloves or finger guards, sterile bandages and other necessary supplies available to provide first aid.
(b) If the skin of the licensee or student is punctured, the licensee or student shall immediately do the following:
   (1) Apply antiseptic and a sterilized bandage;
   (2) Disinfect any implement exposed to blood before proceeding; and
   (3) Put on disposable, protective gloves or a finger guard.
(c) If the skin of the patron is punctured, the licensee or student shall immediately do the following:
   (1) Make available to the patron antiseptic and a sterilized bandage;
   (2) Disinfect any implement exposed to blood before proceeding; and
   (3) Put on disposable, protective gloves or a finger guard.

SECTION .0500 - ENFORCEMENT, MAINTENANCE OF LICENSURE

21 NCAC 14H .0501  INSPECTION OF COSMETIC ART SHOPS
(a) A newly established cosmetic art shop, a shop which has been closed for more than 90 days, or a shop which has changed ownership must file an application for licensure with the Board prior to opening. A newly established cosmetic art shop, a shop which has been closed for more than 90 days, a shop which has changed ownership or a shop which has been operating without a license shall be inspected before a license will be issued.
(b) Each cosmetic art shop must pass inspection by an agent of the Board pursuant to this Subchapter. Inspections shall be conducted annually and may be conducted without notice.

21 NCAC 14H .0502  FAILURE TO PERMIT INSPECTION
If an inspector is twice unable to inspect a salon after making an appointment to inspect the salon the Board may initiate proceedings to revoke or suspend the salon license or may refuse to renew the shop license.

21 NCAC 14H .0503  SANITARY RATINGS AND POSTING OF RATINGS
(a) The sanitary rating of a beauty establishment shall be based on a system of grading outlined in this Subchapter. Based on the grading, all establishments shall be rated in the following manner:
   (1) all establishments receiving a rating of at least 90 percent or more shall be awarded a grade A;
   (2) all establishments receiving a rating of at least 80 percent, and less than 90 percent, shall be awarded grade B;
   (3) all establishments receiving a rating of at least 70 percent or more, and less than 80 percent shall be awarded grade C;
   (4) any cosmetic art shop or school with a sanitation grade of 70 percent or below shall be awarded a failed inspection notice.
(b) Every beauty establishment shall be given a sanitary rating. A cosmetic art school shall be graded no less than three times a year, and a cosmetic art shop shall be graded once a year.
(c) The sanitary rating or failed inspection notice given to a beauty establishment shall be posted in plain sight near the front entryway at all times.
(d) All new establishments must receive a rating of at least 90 percent before a license will be issued.
(e) The operation of a cosmetic art shop or school which fails to receive a sanitary rating of at least 70 percent (grade C) shall be sufficient cause for revoking or suspending the license.
(f) A re-inspection for the purpose of raising the sanitary rating of a beauty establishment shall not be given within 30 days of the last inspection unless the rating at the last inspection was less than 80 percent.
(g) A whirlpool and footspa sanitation record must be kept on each whirlpool and footspa for inspection on a form provided by the Board.
(h) All cosmetic art shops and schools with a failed inspection report shall be sufficient cause for the immediate suspension of licensure. All cosmetic art shops and schools with a failed inspection report must close until the sanitation conditions have improved to be awarded a passing grade.
(i) Mobile cosmetic art shops and schools are prohibited.
(j) A copy of the itemized and graded inspection report must be provided to the operator at the time of the inspection.
### Sanitation

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<thead>
<tr>
<th>Description</th>
<th>Points</th>
<th>Value</th>
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<tbody>
<tr>
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### 21 NCAC 14H .0505 RULE COMPLIANCE AND ENFORCEMENT MEASURES

(a) The use or possession of the following products or equipment in a school or shop shall result in civil penalty in the amount of three hundred dollars ($300.00) per container of product or piece of equipment:

1. Methyl Methacrylate Liquid Monomer a.k.a. MMA; or
2. Razor-type callus shavers designed and intended to cut growths of skin including but not limited to skin tags, corns and calluses.

(b) The use of or possession of the following in a school or shop shall result in civil penalty in the amount of one hundred dollars ($100.00) per use or possession:

1. Animals including insects, fish, amphibians, reptiles, birds or mammals to perform any service; or
(2) Variable speed electrical nail file on the natural nail unless it has been designed for use on the natural nail.

(c) The action of any student or licensee to violate the Board rules in the following manner shall result in civil penalty in the amount of one hundred dollars ($100.00) per instance of each action:

(1) Use of any product, implement or piece of equipment in any manner other than the product's, implement's or equipment's intended use as described or detailed by the manufacturer;

(2) Diagnosis of any medical condition or treatment of any medical condition unless referred by a physician; or

(3) Use of any product that will penetrate the dermis; or

(4) Provision of any service unless trained prior to performing the service; or

(5) Performance of services on a client if the licensee has reason to believe the client has any of the following:
   (A) a contagious condition or disease;
   (B) inflamed infected, broken, raised or swollen skin or nail tissue; or
   (C) an open wound or sore in the area to be worked on; or

(6) Alteration of or duplication of a license issued by the Board; or

(7) Advertisement or solicitation of clients in any form of communication in a manner that is false or misleading; or

(8) Use of any FDA rated class II device without the documented supervision of a licensed physician.

(d) The presence of animals or birds in a cosmetic art shop or school shall result in civil penalty in the amount of twenty-five dollars ($25.00) per animal or bird. Fish in an enclosure and animals trained for the purpose of accompanying disabled persons are exempt.

(e) The failure to record the date and time of each cleaning and disinfecting of a footspa in a cosmetic art school or shop as required by this Subchapter including the date, time, reason and name of the staff member who performed the cleaning or the failure to keep or make such record available for at least 90 days upon request by either a patron or inspector shall result in civil penalty in the amount of twenty-five dollars ($25.00) per footspa.

(f) The failure to clean and disinfect a footspa in a cosmetic art shop or school as required by this Subchapter shall result in civil penalty in the amount of one hundred dollars ($100.00) per footspa.

(g) The failure to maintain in a cosmetic art shop and school antiseptics, gloves or finger guards, and sterile bandages available to provide first aid shall result in civil penalty in the amount of twenty-five dollars ($25.00) per item.

(h) The failure to maintain a sink with hot and cold running water in the clinic area, separate from restrooms, shall result in civil penalty in the amount of one hundred dollars ($100.00).

(i) The failure to maintain a water supply within 20 feet of the door or 25 feet from the service table or chair shall result in civil penalty in the amount of fifty dollars ($50.00) per inspection occurrence.

(j) The failure to provide ventilation at all times in the areas where patrons are serviced in all cosmetic art shops shall result in civil penalty in the amount of twenty-five dollars ($25.00).

(k) The failure to effectively screen all doors and windows open for ventilation shall result in civil penalty in the amount of twenty-five dollars ($25.00).

(l) The failure to maintain equipment and supplies necessary to safely perform any cosmetic art service offered in the shop shall result in civil penalty in the amount of one hundred dollars ($100.00).

(m) The failure to maintain a sanitation grade of 80 percent or higher shall result in a civil penalty in the amount of two hundred dollars ($200.00).

(n) Repeated violations of the rules in this Subchapter exceeding three written notifications of any one rule documented to any one individual, shop or school shall result in a mandatory disciplinary hearing.

SUBCHAPTER 14I - OPERATIONS OF SCHOOLS OF COSMETIC ART
SECTION .0100 - RECORD KEEPING

21 NCAC 14I .0101 PERMANENT FILES

(a) A section of a cosmetic art school shall contain at least a desk, chair and a permanent file suitable for permanent records of matriculations of all students enrolled.

(b) Permanent files shall be kept under lock and key, in the beauty establishment, subject to inspection by the Board or its authorized agents.

(c) Included in this file shall be permanent records of the matriculations of all students enrolled along with proof of documentation for verification purposes including the following:

(1) names and addresses of students;

(2) places and dates of birth;

(3) Social Security number;
(4) date students entered school;
(5) number of hours earned;
(6) breakdown of practical work performed by the student;
(7) grades on all examinations taken by the student; and
(8) date of graduation.

(d) The original of all enrollment forms is to be filed with the Board, and a duplicate is to be held by the school.

21 NCAC 14I .0102 DAILY RECORD
A daily record shall be kept for each student, showing the actual number of hours of attendance and a complete breakdown of live model performances and completions. This record shall be posted on the permanent record weekly.

21 NCAC 14I .0103 INSPECTION REPORTS AND REPORTS OF STUDENTS HOURS
(a) In addition to such other reports as may be required by the Board, cosmetic art schools shall report to the Board or its authorized agent, upon inspection of the cosmetic art school and at other times upon specific request, the names of all students currently enrolled and the hours completed by each.
(b) The owner or manager of the cosmetic art school shall read each inspection report made of the school by an authorized agent of the Board to determine that the information on the inspection report is correct and shall sign the report. If any part of the information on the report is incorrect, it shall be corrected by the authorized agent of the Board or an exception to the report signed by the owner or manager shall be attached to the report.
(c) The Board shall be notified by written correspondence prior to demonstrators, lecturers or observers being in the school.

21 NCAC 14I .0104 WITHDRAWALS
(a) When a student who is enrolled in a cosmetic art school withdraws from such school, whether by reason of transfer to another school, dismissal, suspension, voluntary disenrollment, or for any reason other than graduation, the cosmetic art school shall report the withdrawal to the Board within 30 working days.
(b) Such report shall contain the following:
   (1) name of the student;
   (2) Social Security number;
   (3) the last day of attendance;
   (4) the reason for withdrawal (if known);
   (5) the hours completed at the time of withdrawal; and
   (6) copy of all live model/mannequin performances completed at the time of withdrawal.
(c) If a student withdraws from a cosmetic art program within the first five days, hours earned during the time period prior to withdrawal will not be credited.

21 NCAC 14I .0105 TRANSFER OF CREDIT
(a) In order that hours may be transferred from one cosmetic art school to another, a student must pass an entrance examination given by the school to which the student is transferring.
(b) A cosmetology student must complete at least 500 hours in the cosmetic art school certifying his or her application for the state board examination.
(c) Upon written petition by the student, the Board shall make an exception to the requirements set forth in Paragraph (b) of this Rule if the student shows that circumstances beyond the student's control prohibited him or her from completing 500 hours at the school that certifies his or her application.
(d) A student who transfers from a cosmetology curriculum to a manicuring, natural hair care or an esthetics curriculum shall not receive credit for hours received in the cosmetology curriculum.
(e) A student who transfers from a manicuring, natural hair care or an esthetic curriculum to a cosmetology curriculum shall not receive credit for hours received in the manicuring, natural hair care or an esthetic curriculum.
(f) If a student is transferring from another state, the student shall submit certification of hours and performances to the cosmetic art school in which they are enrolled.
(g) Licensed manicuring, natural hair care or estheticians may apply up to 50 percent of required hours earned toward another cosmetic art curriculum.
(h) Up to 50 percent of all credit earned in an approved esthetician, natural hair care or manicurist teacher training program may be transferred to a cosmetology teacher training program. A maximum of 160 hours earned in either an esthetician, natural hair care or manicurist teacher training program may be transferred between programs.
21 NCAC 14I .0106 STUDENT DAILY RECORDS
All daily records kept by a cosmetic art school on a student must be kept in the school's permanent files for future reference until the date the student is accepted for the state board examination or five years (effective November 1, 1998) after the date the student first enrolled in the school, whichever occurs earlier.

21 NCAC 14I .0107 REPORT OF ENROLLMENT
(a) A cosmetic art school shall report cosmetology enrollments to the Board not later than 30 working days after a student enrolls in school. A cosmetic art school shall report manicurist, natural hair care specialist and esthetician enrollments to the Board not later than 15 working days after a student enrolls in school. If a student's enrollment is not reported within 30 working days for cosmetology and 15 working days for esthetician, natural hair care specialist and manicurist, the cosmetic art school shall file a copy of the student's daily time records when it reports the student's enrollment.
(b) The school must report the enrollment of students prior to the student applying for the cosmetologist, manicurist, natural hair care specialist or esthetician examination and before any hours can be credited.

21 NCAC 14I .0108 SEAL
Each cosmetic art school must have a unique, raised seal identifying the school and physical location to be used on all applications, reports, drop-out notices, and other official papers. Electronically sent enrollments and drop-out notices are exempted from this requirement.

21 NCAC 14I .0109 SUMMARY OF COSMETIC ART EDUCATION
(a) The manager of each cosmetic art school must compile, from the school's records, a summary of hours, live model/mannequin performance completions, date of enrollment, and last date of attendance.
(b) The graduation form documentation must be signed by a teacher, and the student and must have the seal of the school affixed.
(c) The original graduation form documentation must be prepared on a form furnished by the Board. The cosmetic art school shall mail, within 30 days after the student's graduation date, with the school seal affixed the graduation form documentation to the Board at the Board's address.

21 NCAC 14I .0110 UNIFORM
A waiver of the uniform requirement in 21 NCAC 14J, 21 NCAC 14K, 21 NCAC 14O and 21 NCAC 14S may be requested for enrollment classes of cosmetic art students. Cosmetic art schools may request from the Board a waiver of the uniform requirement no more than once per year.

SECTION .0200 - RECEPTION AREA

21 NCAC 14I .0201 RECEPTION AREA
Each cosmetic art school must provide a reception area for its patrons.

21 NCAC 14I .0202 RECEPTION AREA SIGN
Each cosmetic art school must display a sign in a conspicuous place in the reception area. The sign cannot be smaller than 12 inches by 18 inches, and must read as follows and in no other way: "Cosmetic Art School--Work Done Exclusively by Students."

21 NCAC 14I .0203 BULLETIN BOARD
Each cosmetic art school must have a bulletin board in a conspicuous place in the reception area on which must be displayed at all times the letter of approval and annual school certificate issued by the Board, and any letter, bulletin, or memorandum issued by the Board which states that it is to be posted.

21 NCAC 14I .0204 SANITATION RULES
A copy of the sanitation rules governing the practice of cosmetic arts must be posted in a conspicuous place in the reception area of a cosmetic art school so all persons can read the rules.
21 NCAC 14I .0205  DRESSING ROOM
(a) Each cosmetic art school must provide a dressing room for its students.
(b) The dressing room must have lockers or suitable space for storing wearing apparel of each student.

SECTION .0300 - CLASSROOMS

21 NCAC 14I .0301  RECITATION ROOM
(a) Each cosmetic art school shall have a recitation room, of no less than 300 square feet with a minimum one-side width or depth of 12 feet and shall accommodate no more than 20 students, which shall be equipped with desks or chairs suitable for classroom work, chair(s) suitable for demonstrating cosmetology practices, a dry erase board, and charts, except that the demonstration chair(s) in a manicurist school need be suitable only for demonstrating manicuring and pedicuring practices.
(b) Charts in the recitation room shall include those with illustrations of the skin, bones, muscles, and nerves of the head, neck, feet, and hands, except that the set of charts in a manicurist school need not include those illustrating the head and neck. The set of charts in a natural hair care school need not include those illustrating the feet and hands.

21 NCAC 14I .0302  LIBRARY
(a) A cosmetic art school shall have a library of reference books available for the students' use.
(b) The library of all cosmetic art schools shall include the textbooks used in the school, a standard dictionary, a medical dictionary and any other books relative to the cosmetic arts. The library in a cosmetology school shall also include reference books covering major ethnic cultures (caucasian, black, Asian, Hispanic) in the State of North Carolina. Students shall be able to research in the school's library the field of cosmetic art which they are studying.

21 NCAC 14I .0303  CLASSROOM BULLETIN BOARD
(a) Each classroom must have a bulletin board on the wall.
(b) Any memorandum, letter, or bulletin issued by the Board, which states that it is to be posted in a cosmetic art school for the information of the students, must be posted on this bulletin board.
(c) A copy of the sanitation rules must be posted on this bulletin board, also.

21 NCAC 14I .0304  CLASSROOM WORK
(a) All of the work outlined in the Beginners' Department and the Advanced Department shall be given to the students through practical demonstrations and lectures, questions and answers on textbooks, and written exam.
(b) A minimum of five hours of lectures, questions and answers on textbooks, and written exam shall be given to full-time students per week. A minimum of two and one-half hours of lectures, questions and answers on textbooks, and written exam shall be given to part-time students per week.
(c) All papers written shall be carefully graded and returned to the students in order that the students may see their errors.

SECTION .0400 - LICENSURE OF INDIVIDUALS WHO HAVE BEEN CONVICTED OF A FELONY

21 NCAC 14I .0401  APPLICATION/LICENSURE/INDIVIDUALS WHO HAVE BEEN CONVICTED OF A FELONY
(a) Any applicant convicted of a felony or charged with a felony that is still pending may apply for Board approval upon enrollment in a cosmetic art school. All documentation submitted shall have no effect on an individual's ability to attend a cosmetic art school, take an examination administered by the Board, or apply for a license; is not binding on the Board with respect to any future application from the individual reviewed; and is not a final agency decision.
(b) The applicant shall supply the following:
   (1) A statement of facts of the crime accompanied by a certified copy of the indictment (or, in the absence of an indictment, a copy of the "information" that initiated the formal judicial process), the judgment and any commitment order for each felony for which there has been a conviction;
   (2) A copy of the applicant's restoration of rights certificate, if applicable;
(3) At least three letters attesting to the applicant's character from individuals unrelated by blood or marriage. If available, one of these letters must be from someone familiar with the applicant's cosmetology training and experience, one from the applicant's probation or parole officer, and one from the applicant's vocational rehabilitation officer. If letters from persons in these positions are unavailable, the applicant shall submit an explanatory statement as to why they are unavailable;

(4) The name and address of the applicant's current employer;

(5) A summary of the applicant's personal history since conviction including, if applicable, date of release, parole or probation status, employment, and military service;

(6) Records of any cosmetology, esthetics, natural hair care or manicurist school disciplinary actions;

(7) A description of any pending criminal charges with a copy of the indictment or, if there is not yet an indictment, the arrest warrant for each pending charge; and

(8) Any other information which in the opinion of the applicant would be useful or pertinent to the consideration by the Board of the applicant's request;

(c) If a felony conviction was for an offense involving drugs or alcohol, the applicant shall also provide evidence showing that he or she is drug/alcohol free. Examples of evidence, which will be considered, are:

   (1) enrollment in an on-going licensed treatment program;
   (2) drug analysis test results; and
   (3) certification of completion of a licensed treatment program.

SUBCHAPTER 14J - COSMETOLOGY CURRICULUM
SECTION .0100 - BEGINNERS' DEPARTMENT

21 NCAC 14J .0101 DEPARTMENT SYSTEM
(a) The students in each cosmetology school must be divided into two departments known as beginner and advanced departments.
(b) Each student with 300 hours or less must wear a pin, or something similar, stating "Beginner Department."
(c) The beginner department must be separated from the advanced department and must be designated by a sign in a conspicuous place, which must read: "Beginner Department."

21 NCAC 14J .0102 UNIFORM
All students must wear a clean washable uniform or professional attire and nametag identifying academic status.

21 NCAC 14J .0103 TIME REQUIREMENTS ACCORDING TO HOURS
(a) The maximum time a student may earn in a cosmetology school in any one day is eight clock hours. The maximum time a student may earn in a cosmetology school in any one week is 40 clock hours.
(b) Hours earned on one day shall not be credited to another day.
(c) Each student must complete 1200 hours in a cosmetology school before applying to the Board for the cosmetologist's examination, except those students enrolled for the manicurist or esthetician course only.
(d) Each student must spend 300 hours in the beginner department before entering the advanced department and may not work on members of the public during this 300 hours except shampoo and scalp manipulations.
(e) Hours earned in the beginner department must be devoted to scientific study and mannequin practice.
(f) Manicuring practice in the beginner department must be done during the first 300 hours of instruction and shall be done on the students enrolled in the cosmetology school.

21 NCAC 14J .0106 EQUIPMENT FOR BEGINNER DEPARTMENT
The beginner department shall be equipped with the following minimum equipment for every 20 students in the department:

   (1) one manicure table and stool;
   (2) two shampoo bowls and chairs, each bowl must be at least 40 inches apart center of bowl to center of bowl;
   (3) one mannequin with hair per student;
   (4) thermal styling equipment for the purpose of curling or straightening the hair;
visual aids;
(6) one mannequin practice table to accommodate at least ten students; and
(7) five dozen cold wave rods for each student in the department.

21 NCAC 14J .0107 APPROVED FIELD TRIPS
Cosmetology Educational Field Trips include the following activities:
(1) Beauty Shops;
(2) Cosmetology Conventions;
(3) Competition Training;
(4) Other Schools;
(5) State Board Office and Archives Museum;
(6) Supply Houses;
(7) College or Career Day at School;
(8) Fashion Shows;
(9) Rest Homes/Nursing Homes;
(10) Hospitals; and
(11) Funeral Homes.

An instructor must be present during these educational field trips, for credit to be given to student, with a ratio of one instructor per 20 students present. The maximum number of hours a student may earn for field trips is 40 credit hours for cosmetology students, 20 credit hours for esthetician students and 10 credit hours for manicurist students.

SECTION .0200 - ADVANCED DEPARTMENT

21 NCAC 14J .0201 ELIGIBILITY FOR ADVANCED DEPARTMENT
(a) The advanced department shall be separated from the beginner department and shall be designated by a sign placed in a conspicuous place, which shall read: "Advanced Department."
(b) Each student with more than 300 hours shall wear a pin, or something similar, stating "Advanced Department."

21 NCAC 14J .0202 PRACTICAL WORK FOR ADVANCED STUDENTS
(a) The hours earned in the advanced department must be devoted to study and live model performance completions.
(b) Work in this department may be done on the public. Students with less than 300 hours credit must not work in this department and are not allowed to work on the public except shampoo and scalp manipulations.
(c) All work done by students on the public must be checked by the cosmetology teacher as the work is being performed and after the service has been completed so that the teacher may point out errors to the student in order that they may be corrected.

21 NCAC 14J .0203 STORING AND LABELING OF COSMETICS
All bottles and jars in the advanced department containing supplies and cosmetics shall be kept securely covered and labeled, stating contents and instructions for use.

21 NCAC 14J .0206 EQUIPMENT IN ADVANCED DEPARTMENT
The advanced department must be equipped with the following equipment:
(1) for departments with 20 to 29 stations, two manicure tables and stools;
(2) for departments with 30 or more stations, four manicure tables and stools;
(3) for departments with 20 to 29 stations, eight dryers and chairs;
(4) for departments with 30 or more stations, 12 dryers and chairs;
(5) eight shampoo bowls and chairs, each bowl must be at least 40 inches apart center of bowl to center of bowl;
(6) 20 dressing tables and styling chairs;
(7) for departments with 20 to 29 stations, one facial chair;
(8) for departments with 30 or more stations, two facial chairs; and
(9) thermal styling equipment for the purpose of curling or straightening the hair.
21 NCAC 14J .0207 LIVE MODEL/MANNEQUIN PERFORMANCE REQUIREMENTS

(a) The following live model/mannequin performance completions shall be done by each student in the advanced department before the student is eligible to take the cosmetologist's examination. Sharing of performance completions is not allowed. Credit for a performance shall be given to only one student.

<table>
<thead>
<tr>
<th></th>
<th>1200 Hours</th>
<th>1500 Hours</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Live Model</td>
<td>Maniq.</td>
</tr>
<tr>
<td>(1)</td>
<td>scalp and hair treatments with massage</td>
<td>8</td>
</tr>
<tr>
<td>(2)</td>
<td>fullhead fingerwave and style</td>
<td>3 OR 3</td>
</tr>
<tr>
<td>(3)</td>
<td>fullhead pincurl and style</td>
<td>3 OR 3</td>
</tr>
<tr>
<td>(4)</td>
<td>Hair Styling – sets, blowdrying Thermal press/flat iron, artificial hair</td>
<td>80</td>
</tr>
<tr>
<td>(5)</td>
<td>haircuts</td>
<td>60</td>
</tr>
<tr>
<td>(6)</td>
<td>chemical reformation or permanent waving and relaxers</td>
<td>16</td>
</tr>
<tr>
<td>(7)</td>
<td>temporary color</td>
<td>3</td>
</tr>
<tr>
<td>(8)</td>
<td>Color Application – semi, demi, Permanent color, and hair lightening</td>
<td>24</td>
</tr>
<tr>
<td>(9)</td>
<td>Multidimensional Color – low/high Lighting, cap, bleach</td>
<td>3</td>
</tr>
<tr>
<td>(10)</td>
<td>lash and brow tinting</td>
<td>2</td>
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<tr>
<td>(11)</td>
<td>Nail Care – manicures and pedicures</td>
<td>12</td>
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<tr>
<td>(12)</td>
<td>artificial nails</td>
<td>4 OR 4</td>
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<tr>
<td>(13)</td>
<td>facials with massage/makeup</td>
<td>3</td>
</tr>
<tr>
<td>(14)</td>
<td>hair removal</td>
<td>3</td>
</tr>
</tbody>
</table>

(b) Certification of live model or mannequin performance completions is required along with the application for the examination.

(c) A live model may be substituted for a mannequin for any mannequin service.

(d) All mannequin services may be performed using a simulated product.

(e) Simulated product is not allowed for credit for live model performance.

21 NCAC 14J .0208 INTERNSHIPS

Schools and cosmetic art shops desiring to implement an internship program shall follow these requirements:

(1) Schools wishing to participate in an internship program must notify the Board of intent to implement a program before credit for an internship may be granted. Cosmetic art shops and student selection criteria must be submitted along with the notification.

(2) Schools shall report to the Board all cosmetic art shops contracted and students selected to participate in the program.

(3) Internships may be arranged in various time frames but shall never exceed 10 percent of a student's training period.

(4) Credit for an internship shall be granted upon submission of student hours verification based on a daily attendance record. Hours must be recorded on a form approved by the school.

(5) Students may be assigned a variety of duties, but client services are restricted. Cosmetology and natural hair care students may only provide shampoo services, manicurist students may only remove nail polish and esthetician students may only drape and prep clients. Cosmetic art shop violation of restrictions or school requirements may result in the termination of the internship contract and the loss of student training hours.

(6) Students must follow all cosmetic art shop employee rules and regulations. Violations of cosmetic art shop rules or any misconduct may result in dismissal of the intern or loss of training hours.

(7) A licensed teacher need not be in attendance during this internship.

(8) Students participating in the program shall not receive compensation for duties performed in the cosmetic art shop.
SECTION .0300 - COMBINED STUDIES

21 NCAC 14J .0302 EQUIPMENT
Each cosmetology school shall provide training in the decontamination methods used to prevent the growth of germs and bacteria. Each cosmetology school shall provide the following equipment or supplies for use in the training and teaching of all students:

1. containers of sufficient size for the purpose of disinfecting implements by the immersion of implements in an EPA recommended, hospital grade disinfectant solution;
2. covered containers for storage of disinfected implements until they are needed to prevent contamination.

21 NCAC 14J .0303 STUDENTS' PERSONAL SUPPLIES
Each student shall have the following minimum supplies:

1. manicure supplies and implements for a complete manicure;
2. six combs;
3. six brushes;
4. sufficient pin curl clips;
5. sufficient smooth rollers;
6. hard rubber or nonflammable comb for heat protection used in thermal styling;
7. one electric curling iron, marcel;
8. one razor;
9. two scissors, one tapered and one straight;
10. one eyebrow tweezer;
11. one tint comb;
12. one blow dryer; and
13. one copy of "An Act to Regulate the Practice of Cosmetic Art in the State of North Carolina" and a copy of the course curriculum requirements, both of which shall be at no charge to the student for the first copy.

21 NCAC 14J .0306 COURSE WORK REQUIREMENTS FOR BEGINNERS AND ADVANCED
The course work done by beginners and advanced students shall be as follows:

1. orientation,
2. your professional image,
3. sanitation and bacteriology,
4. properties of the scalp and hair,
5. draping, shampooing, rinses,
6. hair shaping,
7. hair and hairstyling,
8. thermal pressing and styling,
9. permanent waving and chemical relaxing,
10. hair coloring,
11. artificial hair,
12. nails and manicuring,
13. facials, makeup, and skin care,
14. anatomy,
15. electricity,
16. chemistry,
17. salon business.

21 NCAC 14J .0307 TESTS
Written tests and examinations shall be given in all subjects.
SECTION .0500 – CREDIT FOR COSMETOLOGY STUDY OUTSIDE OF NORTH CAROLINA

21 NCAC 14J .0501  APPROVAL OF CREDIT FOR COSMETOLOGY INSTRUCTION/ANOTHER STATE
(a) An applicant shall receive credit for instruction taken in another state if the conditions set forth in this Rule are met.
(b) The applicant's record shall be certified by the state agency or department that issues licenses to practice in the cosmetic arts. If this agency or department does not maintain any student records or if the state does not give license to practice in the cosmetic arts, then the records may be certified by any state department or state agency that does maintain such records and is willing to certify their accuracy. If no state department or board will certify the accuracy of the student's records, then the Board shall review the student's records on a case-by-case basis.

SUBCHAPTER 14L – COSMETIC ART TEACHERS
SECTION .0100 – TEACHER QUALIFICATIONS AND EXAMINATIONS

21 NCAC 14L .0106  APPLICATION TO TAKE EXAMINATION
(a) To apply to be a cosmetic art teacher, an applicant must apply to the Board on a form provided by the Board.
(b) The Board shall not consider an application until the applicant submits all the information required by the application rules.
(c) An applicant cannot take the cosmetic art teacher examination until the Board approves the applicant's application.

21 NCAC 14L .0208  SUPERVISION OF COSMETIC ART TEACHER TRAINEE
(a) A cosmetic art teacher trainee shall be supervised by a cosmetic art teacher at all times when the trainee is at a cosmetic art school except as set out in Paragraph (b) of this Rule.
(b) A manicurist, natural hair care or esthetician teacher may not supervise a cosmetologist teacher trainee with regard to any cosmetic art other than manicuring or esthetics, as appropriate.
(c) Violation of this Rule is just cause to revoke the Board's approval of the cosmetic art school's teacher trainee program for a period of one year.

21 NCAC 14L .0209  TIME REQUIREMENTS FOR TEACHER TRAINEE PROGRAM
(a) A cosmetic art teacher trainee program may be a full-time program or a part-time program. A cosmetic art teacher trainee, however, may not receive credit for more than eight hours per day.
(b) The cosmetic art school in which the teacher trainee is enrolled must keep a record of the hours a trainee earns each day. The record of hours is subject to inspection by the Board.

21 NCAC 14L .0210  EFFECT ON STUDENT-TEACHER RATIO
(a) A student who is either a cosmetology, esthetics or manicurist teacher trainee need not be counted as a student in computing the allowable student-teacher ratio set by 21 NCAC 14G .0113. However, a cosmetic art school must have at least:
   (1) One cosmetology teacher for every five cosmetology teacher trainees, or cosmetologist, manicurist, and esthetician trainees combined; or
   (2) For manicurist teacher trainees only, one cosmetology or manicurist teacher for every five manicurist teacher trainees.
(b) A cosmetic art school may not count a teacher trainee as a cosmetic art teacher in computing the allowable student-teacher ratio set by 21 NCAC 14G .0113. Teachers included in the ratio determined under 21 NCAC 14G .0113 may be included in computing the ratio required by this Rule.

21 NCAC 14L .0211  WORK ON PUBLIC PROHIBITED
A cosmetic art teacher trainee may not perform clinical services on a patron at the cosmetic art school.

21 NCAC 14L .0215  TEACHER'S MANUAL AND SUPERVISION
(a) Persons receiving teacher training in a cosmetic art school shall be furnished a teacher's manual and shall spend all of their training time under the direct supervision of a licensed cosmetic art teacher and shall not be left in charge of students or the school at any time.
(b) Teacher trainees may present lessons they have prepared under the direct supervision of a licensed cosmetic art teacher as long as the supervising teacher is present in the classroom.
21 NCAC 14L .0216  TEACHER TRAINING CURRICULUM
(a) To meet the approval of the Board, a cosmetologist teacher training course must consist of at least 800 hours of instruction in theory and practical application, divided as follows:

   (1) One hundred fifty hours of instruction on methods of teaching and the laws governing cosmetology, to include the following topics:
       (A) instruction in teaching techniques;
       (B) instruction in preparing lesson plans;
       (C) instruction in preparing class lectures and presentations;
       (D) instruction in preparing examinations; and
       (E) G.S. 88B and the rules of the Board.

   (2) Six hundred fifty hours of practice teaching, to include the following:
       (A) conducting theory classes from prepared lesson plans;
       (B) preparing and giving examinations; and
       (C) giving practical demonstrations.

(b) To meet the approval of the Board, a manicurist teacher training course must consist of at least 320 hours of instruction in theory and practical application, divided as follows:

   (1) One hundred and fifteen hours of instruction on methods of teaching and the laws governing manicuring, to include the following topics:
       (A) instruction in teaching techniques;
       (B) instruction in preparing lesson plans;
       (C) instruction in preparing class lectures and presentations;
       (D) instruction in preparing examinations;
       (E) instruction in chemical usage; and
       (F) G.S. 88B and the rules of the Board.

   (2) Two hundred and five hours of practice teaching, to include the following:
       (A) conducting theory classes from prepared lesson plans;
       (B) preparing and giving examinations; and
       (C) giving practical demonstrations.

(c) To meet the approval of the Board, an esthetician teacher training course must consist of at least 650 hours of instruction in theory and practical application, divided as follows:

   (1) One hundred and twenty hours of instruction on methods of teaching and the laws governing skin care to include the following topics:
       (A) instruction in teaching techniques;
       (B) instruction in preparing lesson plans;
       (C) instruction in preparing class lectures and presentations;
       (D) instruction in preparing examinations;
       (E) instruction in chemical usage; and
       (F) G.S. 88B and the rules of the Board.

   (2) Five hundred and thirty hours of practice teaching, to include the following:
       (A) conducting theory classes from prepared lesson plans;
       (B) preparing and giving examinations; and
       (C) giving practical demonstration.

SUBCHAPTER 14P – CIVIL PENALTY
SECTION .0100 – CIVIL PENALTY

21 NCAC 14P .0101  SCHEDULE OF CIVIL PENALTIES
The rules in this Subchapter establish the schedule of civil penalties required by G.S. 88B-29(c). The amounts stated are the presumptive amounts which may be modified in accordance with G.S. 88B-29(b). Those violations that are lst offense correctable are identified with the word “warning” appended to it. If the offense is not corrected within the 30 day time allotted, the presumptive civil penalty in parenthesis shall apply.
21 NCAC 14P .0102 QUALIFICATIONS FOR LICENSING TEACHERS
The presumptive civil penalty for submitting false or fraudulent documentation on the application for licensure as a teacher is:
(1) 1st offense $1,000
(2) subsequent offense revocation of license and $1,000 penalty

21 NCAC 14P .0104 LICENSING OF COSMETIC ART SHOPS
(a) The presumptive civil penalty for operating a cosmetic art shop without first filing an application for a cosmetic art shop license:
(1) 1st offense $100.00
(2) 2nd offense $200.00
(3) 3rd offense $300.00
(b) The presumptive civil penalty for moving or changing location or ownership of an existing cosmetic art shop without first submitting the appropriate form and fee to the Board:
(1) 1st offense $100.00
(2) 2nd offense $200.00
(3) 3rd offense $300.00

21 NCAC 14P .0105 RENEWALS; EXPIRED LICENSES; LICENSES REQUIRED
(a) The presumptive civil penalty for operating a cosmetic art shop/school with an expired license is:
(1) 1st offense $100.00
(2) 2nd offense $250.00
(3) 3rd offense $500.00
(b) The presumptive civil penalty for practicing cosmetology, manicuring, or esthetics with an expired license is:
(1) 1st offense $50.00
(2) 2nd offense $100.00
(3) 3rd offense $250.00
(c) The presumptive civil penalty for allowing an apprentice or someone with a temporary permit to practice cosmetic art without direct supervision is:
(1) 1st offense $100.00
(2) 2nd offense $300.00
(3) 3rd offense $500.00
(d) The presumptive civil penalty for practicing in a cosmetic art shop with an apprentice license or a temporary permit without direct supervision is:
(1) 1st offense $100.00
(2) 2nd offense $300.00
(3) 3rd offense $500.00
(e) The presumptive civil penalty for an improperly licensed cosmetic art shop (incorrect number of chairs licensed) is:
(1) 1st offense warning ($50.00)
(2) 2nd offense $100.00
(3) 3rd offense $200.00
(f) The presumptive civil penalty for teaching with an expired license is:
(1) 1st offense $100.00
(2) 2nd offense $250.00
(3) 3rd offense $500.00

21 NCAC 14P .0106 LICENSES REQUIRED
(a) The presumptive civil penalty for practicing cosmetic art without a license is:
(1) 1st offense $200.00
(2) 2nd offense $250.00
(3) 3rd offense $500.00
(b) The presumptive civil penalty for performing services which the practitioner is not licensed to perform is:
(1) 1st offense $100.00
(2) 2nd offense $250.00
(3) 3rd offense $500.00
(c) The presumptive civil penalty for practicing cosmetic art teaching without a license is:
21 NCAC 14P .0107 LICENSES TO BE POSTED
(a) The presumptive civil penalty for failure to display a current cosmetic art shop/school license is:
   (1) 1st offense  $250.00
   (2) 2nd offense  $350.00
   (3) 3rd offense  $500.00

(b) The presumptive civil penalty for failure to display a current individual license is:
   (1) 1st offense  $50.00
   (2) 2nd offense  $100.00
   (3) 3rd offense  $200.00

(c) The presumptive civil penalty for a school/shop for allowing an employee to practice cosmetic art without displaying a current license is:
   (1) 1st offense  $50.00
   (2) 2nd offense  $100.00
   (3) 3rd offense  $200.00

(d) The presumptive civil penalty for displaying a copied license is:
   (1) 1st offense  $50.00
   (2) 2nd offense  $100.00
   (3) 3rd offense  $200.00

21 NCAC 14P .0108 REVOCATION OF LICENSES AND OTHER DISCIPLINARY MEASURES
(a) The presumptive civil penalty for allowing unlicensed practitioners to practice in a licensed cosmetic art shop is:
   (1) 1st offense  $500.00
   (2) 2nd offense  $750.00
   (3) 3rd offense  $1,000.00

(b) The presumptive civil penalty for practicing cosmetology, natural hair care, manicuring or esthetics with a license issued to another person is:
   (1) 1st offense  $500.00
   (2) 2nd offense  $800.00
   (3) 3rd offense  $1,000.00

(c) The presumptive civil penalty for altering a license, permit or authorization issued by the Board is:
   (1) 1st offense  $500.00
   (2) 2nd offense  $800.00
   (3) 3rd offense  $1,000.00

(d) The presumptive civil penalty for submitting false or fraudulent documents is:
   (1) 1st offense  $500.00
   (2) 2nd offense  $800.00
   (3) 3rd offense  $1,000.00

(e) The presumptive civil penalty for refusing to present photographic identification is:
   (1) 1st offense  $100.00
   (2) 2nd offense  $250.00
   (3) 3rd offense  $500.00

(f) The presumptive civil penalty for permitting an individual to practice cosmetic art with an expired license is:
   (1) 1st offense  $50.00
   (2) 2nd offense  $100.00
   (3) 3rd offense  $250.00

(g) The presumptive civil penalty for practicing or attempting to practice by fraudulent misrepresentation is:
   (1) 1st offense  $500.00
   (2) 2nd offense  $800.00
   (3) 3rd offense  $1,000.00

(h) The presumptive civil penalty for the illegal use or possession of equipment in a cosmetic art shop or school is:
   (1) 1st offense  $300.00
   (2) 2nd offense  $500.00
### 21 NCAC 14P .0109 INSPECTIONS
The presumptive civil penalty for refusal to permit or interference with an inspection:

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<td>3rd</td>
<td>$500.00</td>
<td>$1000.00</td>
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### 21 NCAC 14P .0110 LICENSING OF BEAUTY SALONS
(a) The presumptive civil penalty for use of a cosmetic art shop as living, dining, or sleeping quarters is:

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(b) The presumptive civil penalty for failure to provide a separate entrance into the cosmetic art shop is:

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<td>warming ($50.00)</td>
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(c) The presumptive civil penalty for re-opening a cosmetic art shop which has been closed for more than 90 days without making application to the Board for a new license:

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<td>3rd</td>
<td>$400.00</td>
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</table>

### 21 NCAC 14P .0111 ESTABLISHMENT OF COSMETIC ART SCHOOLS
(a) The presumptive civil penalty for failure to provide minimum floor space or equipment and supplies as required by Subchapters 14G, 14I, 14J, 14K, 14O, 14S and 14T is:

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<th>1st offense</th>
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<tr>
<td>3rd</td>
<td>$500.00</td>
<td>$650.00</td>
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(b) The presumptive civil penalty for failure to provide instruction at a ratio required is:

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<th>1st offense</th>
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<td>1st</td>
<td>warming ($100.00)</td>
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<td>3rd</td>
<td>$400.00</td>
<td>$800.00</td>
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(c) The presumptive civil penalty for failure to report a change in the teaching staff is:

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<th>1st offense</th>
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<td>1st</td>
<td>warming ($50.00)</td>
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<tr>
<td>3rd</td>
<td>$200.00</td>
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(d) The presumptive civil penalty for failure to submit an application for the approval of a school in the case of a change of location or ownership is:

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<td>3rd</td>
<td>$400.00</td>
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### 21 NCAC 14P .0112 SANITARY RATINGS AND POSTING OF RATINGS - APPLICABLE TO ESTABLISHMENTS WITH A SANITATION GRADE OF LESS THAN 80%
(a) The presumptive civil penalty for failure to display an inspection grade card is:

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<td>3rd</td>
<td>$200.00</td>
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(b) The presumptive civil penalty for non-working toilet facilities is:

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<th>1st offense</th>
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<th>3rd offense</th>
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<td>1st</td>
<td>warming ($50.00)</td>
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<td>2nd</td>
<td>$100.00</td>
<td>$200.00</td>
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<tr>
<td>3rd</td>
<td>$200.00</td>
<td>$400.00</td>
<td>$800.00</td>
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</table>

(c) The presumptive civil penalty for failure to maintain equipment, furnishings and floor coverings is:

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<th>1st offense</th>
<th>2nd offense</th>
<th>3rd offense</th>
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<tbody>
<tr>
<td>1st</td>
<td>warming ($25.00)</td>
<td>$50.00</td>
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<tr>
<td>2nd</td>
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<td>3rd</td>
<td>$100.00</td>
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</table>
(d) The presumptive civil penalty for failure to provide hot and cold running water is:
   (1) 1st offense    warning ($50.00)
   (2) 2nd offense $1 00.00
   (3) 3rd offense $2 00.00

(e) The presumptive civil penalty for keeping any animal or bird in a cosmetic art shop or school is: (Trained animals accompanying sightless or hearing impaired persons are exempt)
   (1) 1st offense    warning ($25.00)
   (2) 2nd offense $5 00.00
   (3) 3rd offense $1 00.00

(f) The presumptive civil penalty for failure of operators in cosmetic art shops to wear clean outer garments with sleeves is:
   (1) 1st offense    warning ($50.00)
   (2) 2nd offense $1 00.00
   (3) 3rd offense $2 00.00

(g) The presumptive civil penalty for failure to store used or clean protective drapes, linens or towels, or failure to launder used protective drapes, linens or towels is:
   (1) 1st offense    warning ($50.00)
   (2) 2nd offense $1 00.00
   (3) 3rd offense $2 00.00

(h) The presumptive civil penalty for failure to dispose of supplies or instruments which come in direct contact with a patron and which cannot be disinfected is:
   (1) 1st offense    warning ($50.00)
   (2) 2nd offense $1 00.00
   (3) 3rd offense $2 00.00

(i) The presumptive civil penalty for failure to disinfect non-electrical instruments and equipment is:
   (1) 1st offense    warning ($50.00)
   (2) 2nd offense $1 00.00
   (3) 3rd offense $2 00.00

(j) The presumptive civil penalty for failure to store and label creams, powders, and other cosmetic preparations is:
   (1) 1st offense    warning ($25.00)
   (2) 2nd offense $5 00.00
   (3) 3rd offense $1 00.00

(k) The presumptive civil penalty for failure to have necessary first aid equipment on hand is:
   (1) 1st offense    warning ($25.00)
   (2) 2nd offense $5 00.00
   (3) 3rd offense $1 00.00

(l) The presumptive civil penalty for failure to provide necessary lighting or ventilation is:
   (1) 1st offense    warning ($50.00)
   (2) 2nd offense $1 00.00
   (3) 3rd offense $2 00.00

(m) The presumptive civil penalty for windows and doors not effectively screened is:
   (1) 1st offense    warning ($50.00)
   (2) 2nd offense $1 00.00
   (3) 3rd offense $2 00.00

(n) The presumptive civil penalty for trash containers not covered is:
   (1) 1st offense    warning ($25.00)
   (2) 2nd offense $5 00.00
   (3) 3rd offense $1 00.00

(o) The presumptive civil penalty for failure to use EPA approved disinfectant is:
   (1) 1st offense $5 00.00
   (2) 2nd offense $1 00.00
   (3) 3rd offense $2 00.00

(p) The presumptive civil penalty for failure to maintain a sanitary establishment (80% rating or better) is:
   (1) 1st offense    warning ($25.00)
   (2) 2nd offense $5 00.00
21 NCAC 14P .0113 OPERATIONS OF SCHOOLS OF COSMETIC ART
(a) The presumptive civil penalty for failure to record student's hours of daily attendance is:
   (1) 1st offense warning ($100.00)
   (2) 2nd offense $200.00
   (3) 3rd offense $300.00
(b) The presumptive civil penalty for failure to report withdrawal or graduation of a student within 30 working days is:
   (1) 1st offense warning ($50.00)
   (2) 2nd offense $100.00
   (3) 3rd offense $200.00
(c) The presumptive civil penalty for failure to submit cosmetology enrollments within 30 working days or manicurist, natural hair care specialist and esthetician enrollments within 15 working days is:
   (1) 1st offense warning ($50.00)
   (2) 2nd offense $100.00
   (3) 3rd offense $200.00
(d) The presumptive civil penalty for failure to display a copy of the sanitation rules is:
   (1) 1st offense warning ($50.00)
   (2) 2nd offense $100.00
   (3) 3rd offense $200.00
(e) The presumptive civil penalty for failure to post consumer sign "Cosmetic Art School - Work Done Exclusively by Students" is:
   (1) 1st offense warning ($50.00)
   (2) 2nd offense $100.00
   (3) 3rd offense $200.00
(f) The presumptive civil penalty for allowing a cosmetic art shop to operate within a cosmetic art school is:
   (1) 1st offense $200.00
   (2) 2nd offense $400.00
   (3) 3rd offense $600.00
(g) The presumptive civil penalty for a cosmetic art school that is not separated from a cosmetic art shop or other business by a solid wall, floor to ceiling, with an separate entrance and a door that stays closed at all times is:
   (1) 1st offense $200.00
   (2) 2nd offense $400.00
   (3) 3rd offense $600.00
(h) The presumptive civil penalty for failure to have any student wear a clean washable uniform or identification is:
   (1) 1st offense warning ($50.00)
   (2) 2nd offense $100.00
   (3) 3rd offense $200.00

21 NCAC 14P .0114 COSMETOLOGY CURRICULUM
(a) The presumptive civil penalty for a school allowing cosmetology or apprentice cosmetology students with less than 300 hours credit to work on the public. (Shampoo and scalp manipulations are exempt) is:
   (1) 1st offense $1 00.00
   (2) 2nd offense $2 00.00
   (3) 3rd offense $3 00.00
(b) The presumptive civil penalty for a school for manicurist students with less than 60 hours credit working on the public is:
   (1) 1st offense $1 00.00
   (2) 2nd offense $2 00.00
   (3) 3rd offense $3 00.00
(c) The presumptive civil penalty for a school for esthetician students with less than 75 hours credit working on the public is:
   (1) 1st offense $1 00.00
   (2) 2nd offense $2 00.00
   (3) 3rd offense $3 00.00
(d) The presumptive civil penalty for a school for natural hair care students with less than 60 hours credit working on the public is:

1st offense $1 00.00
2nd offense $2 00.00
3rd offense $3 00.00

21 NCAC 14P .0115 SANITARY RATINGS
The presumptive civil penalty for failure to display a current inspection grade card is:

1st offense $5 00.00
2nd offense $1 00.00
3rd offense $2 00.00

21 NCAC 14P .0116 CIVIL PENALTY PROCEDURES
(a) Citations. The Board, through its duly authorized representatives, shall issue a citation with respect to any violation for which a civil penalty may be assessed. Each citation shall be in writing and shall describe the nature of the violation, including a reference to the specific provision alleged to have been violated. The civil penalty, if any, shall attach at the time the citation is written. The citation shall include an order to correct any condition or violation which lends itself to corrections, as determined by the Board.

(b) Correction of Violation. Any licensee who has been issued a warning citation must present written proof satisfactory to the Board, or its executive director, that the violation has been corrected. This provision applies only to a licensee's first violation in any one year period for a violation with a first offense warning penalty. Proof of correction shall be presented to the Board, through its executive director, within 30 days of the date the warning citation was issued. The Board may extend for a reasonable period, the time within which to correct the warning citation in case of a death or hospitalization. Notices of correction filed after the prescribed date shall not be acceptable and the civil penalty shall be paid.

(c) Contested Case. Persons to whom a notice of violation or a citation is issued and a civil penalty assessed, may contest the civil penalty by filing written notice with the Board. The Board shall institute a contested case by sending a notice of hearing pursuant to G.S. 150B, Article 3A. The issuance of notice of hearing shall stay the civil penalty until the Board renders a final agency decision in the contested case.

(d) Final Agency Decision. The Board, after the hearing has been concluded, may affirm, reduce, or dismiss the charges filed in the notice of hearing or any penalties assessed. In no event shall the civil penalty be increased.

(e) Failure to File. If no written notice contesting the civil penalty is filed as set forth in Paragraph (c), the civil penalty becomes a final agency decision.

(f) Any offender who has not committed a previously cited offense for which a civil penalty has been assessed for a three year period shall have his record of the specific offense cleared. The next subsequent violation shall be treated as a first offense.

21 NCAC 14R .0105 CONTINUING EDUCATION
(a) This Rule pertains to all cosmetic art licensees. Each licensee wishing to maintain his or her license shall obtain continuing education during each licensing period. The licensee shall maintain records of attendance at a continuing education course including the following information:

1. Course title and description;
2. Date conducted;
3. Address of location where the course was conducted; and
4. Continuing education hours earned.

(b) Each licensee must ensure at least 50 percent of the subject matter in a course broadens the licensee's knowledge of the cosmetic arts profession in which he or she is licensed.

(c) Each cosmetic art teacher must ensure at least 50 percent of the subject matter in a course taken for the purpose of license renewal relates to teacher training techniques and enhances the ability to communicate.

(d) Continuing education courses shall be approved by the board providing the courses meet the requirements above.

(e) The Board or an agent of the Board may conduct audits of the licensee's continuing education at any time. Upon the Board's request each licensee shall provide completed records to the Board to support the last affirmation given pursuant to Subparagraph (j)(3) of this Rule. Records must be maintained until the end of the next renewal cycle after the affirmation for audit purposes.

(f) Continuing education courses completed prior to an individual's being licensed by the Board shall not qualify for continuing education credit.
(g) Apprentices do not need to earn continuing education for license renewal.

(h) Licenses are exempt from the eight hours of continuing education requirement until the licensing period commencing after their initial licensure.

(i) After completion of the continuing education requirements for any licensing cycle the licensee shall forward to the Board the following:

1. the license renewal application;
2. the license renewal fee; and
3. A date and signature affirming the following pledge: "I hereby certify that I have obtained all continuing education hours required in accordance with the G.S. 88B-21 and board rules and regulations. I am aware that 1) false or dishonest misleading information may be grounds for disciplinary action against my license; and further that 2) false statements are punishable by law."

(j) Failure to produce documents or file a response to a request for audit from the Board within 30 days of the request shall result in a civil penalty to the licensee in the amount of two hundred fifty dollars ($250.00).

(k) The presentation of fraudulent continuing education documentation to the Board by a licensee shall result in a civil penalty of five hundred dollars ($500.00).

(l) Licensees in inactive status may reactivate licensure by taking no fewer than eight hours of continuing education per year of inactivity up to 24 total hours.

SUBCHAPTER 14T – COSMETIC ART SCHOOLS
SECTION .0100 - SCOPE AND SCHOOL APPLICATIONS

21 NCAC 14T .0101 SCOPE
(a) These Rules apply to existing and new schools as follows:

1. Rules in this Subchapter apply to all cosmetic art schools making initial application to operate a cosmetic art school after the effective date of these Rules.
2. Schools with a letter of approval dated prior to the effective date of the rules in this Subchapter may choose to comply with Section .0100 and .0200, Rules .0302-.0305 of this Subchapter.
3. Schools with a letter of approval dated prior to the effective date of the rules in this Subchapter must comply with Rule .0301, Section .0400, Rules .0602-.0610, .0614, and .0615 of this Subchapter upon the enrollment of students after the effective date of these Rules.
4. Schools with a letter of approval dated prior to the effective date of the rules in this Subchapter must comply with Rules .0501, .0502, .0601, .0611-.0613, .0616-.0901 upon the effective date of the rules in this Subchapter.

21 NCAC 14T .0102 NEW SCHOOL APPLICATIONS
(a) Persons desiring to operate a cosmetic art school in the state of North Carolina must make application for licensure and a letter of approval by submitting to the Board the Board's School Application. School applications must be submitted complete with:

1. Proof of bond as required by G.S. 88B-17;
2. Diagram with location of equipment placement and marking square footage of all areas including classrooms, dispensary, water supplies, stations, locker room/dressing room, office areas, reception areas and restroom facilities;
3. Course curriculum for each cosmetic art discipline and teacher training program to be taught in the school;
4. Plans for record keeping of student hours, minimum course requirement qualifications, and student performances;
5. Evaluation plans for the assignment of performance services, the qualifications for passing a performance requirement and techniques for grading of performances;
6. Handbook for students containing student policies on attendance, leave of absence policy, performance assignment, and a plan to assist students to achieve the required minimum hours and performances;
7. A raised seal identifying the school name and physical location to be used on all Board forms, reports, and other official papers;
8. Documentation of local municipality electrical and plumbing approval; and
9. School operation schedule including days, hours and observed holidays.
(b) The Board shall not approve an application for a license until all plans, furniture, supplies and equipment as prescribed by the rules in this Subchapter have been installed.
(c) The Board shall issue a license to any cosmetic art school that meets the requirements of this Subchapter.

SECTION .0200 - PHYSICAL REQUIREMENTS FOR COSMETIC ART SCHOOLS

21 NCAC 14T .0201 ALL COSMETIC ART SCHOOLS
(a) Cosmetic Art schools must have the following physical departments:
   (1) Beginner Department – a minimum of 200 square feet with a table or tables and or stands to accommodate at least 10 students and have at least 40 inches between each mannequin. Cosmetic art schools must provide an additional 5 square feet in the beginner department for each student over the maximum of 10. This area shall have at least one mirror of a minimum of two square feet. This area shall be dedicated to the instruction of beginner students;
   (2) Advanced Department – the clinic floor for performance of all cosmetic art services. Within the clinic area each school shall have:
      (A) 48 inches of space from the center to the center of each styling chair, esthetics table or manicuring table;
      (B) 24 inches from the center of the chair forward;
      (C) 48 inches from the backrest behind the chair to any other styling chair, esthetics table or manicuring table; and
      (D) at least 30 inches of space from the back of each styling chair, esthetics table or manicuring table to the wall of the shop.
   (3) Dispensary – a room or area to organize and maintain supplies, equipment for disinfection of all implements and a sink with hot and cold running water. All cosmetic art schools must have the required equipment to carry out disinfection procedures;
   (4) Theory classroom – classroom with a minimum of 300 square feet to accommodate a maximum of 25 students. Cosmetic art schools must provide an additional 8 square feet in the theory classroom for each student over the maximum of 25;
   (5) Office – administrative office for the secure/locked facilitation of student records and files. This office must be outfitted with a minimum of one desk and one chair;
   (6) Reception area – a reception area for clients to wait prior to receiving services;
   (7) Break room for student use;
   (8) Restrooms for student/public use;
   (9) Locker/dressing room – a locker or room for students to secure/lock personal belongings throughout the day; and
   (10) All stations must be numbered numerically.
(b) Each cosmetic art school must display a sign in a conspicuous place in the reception area. The sign cannot be smaller than 12 inches by 18 inches, with lettering at least one and one half inches in size and must read as follows: "Cosmetic Art School Work Done Exclusively by Students."
(c) Each of the requirements listed within this Rule must be located within the same building with the exception of the theory classroom which may be located in an adjacent building or another building within 500 feet of the main cosmetic art building.
(d) All Cosmetic Art schools must post hours of operation per cosmetic art discipline and submit this information to the Board. Any changes to the hours of operation must be posted and submitted to the Board. A school will be considered open by the Board when cosmetic art instruction, services or performances are provided.
(e) Cosmetic art schools may not offer student hours or performances unless they are in compliance with Paragraph (a) of this Rule.
(f) All cosmetic art schools must adhere to any federal, state and local government regulation or ordinance regarding fire safety codes, plumbing and electrical work.
(g) All cosmetic art schools must maintain a ventilation system in good working order with temperature control. During school operating hours the temperature must be maintained between 60 and 85 degrees Fahrenheit.
(h) All equipment in cosmetic art schools shall be in working order; kept in safe repair; and installed in such a manner as to facilitate proper usage.
(i) All cosmetic art school buildings shall be maintained.
(j) All cosmetic art schools must maintain a bulletin board in plain sight of the clinic floor. The bulletin board shall be used to display at all times the Board sanitation rules and the sanitation grade card issued to the school.
(k) All cosmetic art schools must post together the school letter of approval, the school license and all cosmetic art licenses issued to the teachers on staff.
(l) Each room in a cosmetic art school must be labeled according to its assigned purpose.
(m) Each theory classroom shall be equipped with desks or chairs suitable for classroom work and one chair suitable for demonstrating cosmetic art practices.
(n) When a school and a shop are under the same ownership, separate operation of the shop and school shall be maintained and if the school and shop are located in the same building, separate entrances and visitor reception areas shall be maintained and the school and shop shall have separate public information releases, advertisements, names and advertising signs.

21 NCAC 14T .0202 COSMETOLOGY SCHOOLS
Cosmetology Schools must have the following physical departments: Advanced Department - a minimum clinic floor of 1200 square feet which shall accommodate a maximum of 40 enrolled advanced students. All cosmetology schools must provide an additional 10 square feet on the clinic floor for each enrolled advanced student over 40. Each side approach shampoo bowl must be at least 40 inches apart, center of bowl to center of bowl; free standing shampoo bowls must be at least 31 inches apart, center of bowl to center of bowl.

21 NCAC 14T .0203 ESTHETICS SCHOOLS
Esthetics Schools must have the following physical departments: Advanced Department - a minimum clinic floor of 900 square feet which shall accommodate a maximum of 20 enrolled advanced students. Schools must provide an additional 7.5 square feet on the clinic floor for each enrolled advanced student over 20.

21 NCAC 14T .0204 MANICURING SCHOOLS
Manicuring Schools must have the following physical departments: Advanced Department- a minimum clinic floor of 600 square feet which shall accommodate a maximum of 20 enrolled advanced students. Schools must provide an additional 5 square feet on the clinic floor for each enrolled advanced student over 20.

21 NCAC 14T .0205 NATURAL HAIR CARE SCHOOLS
Natural Hair Care Styling Schools must have the following physical departments: Advanced Department - a minimum clinic floor of 600 square feet which shall accommodate a maximum of 16 enrolled advanced students. Schools must provide an additional 7.5 square feet on the clinic floor for each enrolled advanced student over 16.

SECTION .0300 - SCHOOL EQUIPMENT AND SUPPLIES

21 NCAC 14T .0301 EQUIPMENT FOR ALL COSMETIC ART SCHOOLS
All cosmetic art schools shall maintain for student use, in a dispensary, supplies for all cosmetic art services offered in the school.

21 NCAC 14T .0302 EQUIPMENT FOR COSMETOLOGY SCHOOLS
(a) The beginner department in a cosmetology school must be equipped with the following equipment:
   (1) One manicure table and stool;
   (2) Two shampoo bowls and chairs. Each side approach shampoo bowl must be at least 40 inches apart, center of bowl to center of bowl, free standing shampoo bowls must be at least 31 inches apart, center of bowl to center of bowl;
   (3) Thermal styling equipment for the purpose of curling and straightening the hair;
   (4) Visual aids;
   (5) One mannequin practice table/stand to accommodate each student enrolled in the beginner department; and
   (6) Five dozen cold wave rods for each student in the department.
(b) The advanced department in a cosmetology school must be equipped with the following equipment for up to 40 students in the department:

1. 20 stations: a station shall include one mirror, one electrical outlet and one hydraulic chair;
2. Six hooded floor type dryers and chairs;
3. Four shampoo bowls and chairs. Each side approach shampoo bowl must be at least 40 inches apart, center of bowl to center of bowl, free standing shampoo bowls must be at least 31 inches apart, center of bowl to center of bowl, all other types of shampoo bowls must be at least 31 inches apart, center of bowl to center of bowl;
4. Two manicure tables and stools;
5. One pedicure station: a pedicure station shall include a chair, a foot bath and a stool; and
6. One facial treatment table or chair and a stool.

(c) The advanced department in a cosmetology school must be equipped with the following equipment if there are more than 40 enrolled advanced students:

1. One station for each additional two students;
2. One hooded floor type dryer for each additional 10 students;
3. One shampoo bowl for each additional 10 students;
4. One manicure table and stool for each additional 15 students;
5. One pedicure station for each additional 20 students; and
6. One facial lounge or chair for each additional 40 students.

(d) Cosmetology schools that also offer the disciplines of esthetics, manicuring and natural hair care must be equipped with one additional station (as defined in this section per discipline) per five students and the equipment requirements specific to the discipline.

21 NCAC 14T .0303 EQUIPMENT FOR ESTHETICS SCHOOLS

(a) The beginner department in an esthetics school must be equipped with the following equipment:

1. One mannequin practice table/stand to accommodate each student enrolled in the beginner department;
2. One sink with hot and cold running water.

(b) The advanced department in an esthetics school shall be equipped with the following equipment for 1-20 students:

1. Ten facial treatment chairs or treatment tables;
2. Ten esthetician's stools and waste container at each station;
3. One facial vaporizer;
4. One galvanic current apparatus;
5. One infra-red lamp;
6. One woods lamp;
7. One magnifying lamp;
8. One hair removal wax system;
9. One thermal wax system;
10. One suction machine;
11. One exfoliation machine with brushes; and
12. One hand washing sink with hot and cold running water, separate from restrooms.

(c) The advanced department in an esthetics school must be equipped with the following equipment if there are more than 20 enrolled advanced students:

1. One station for each additional two students: a station shall include one facial treatment table or chair and one stool; and
2. Two hand washing sinks with hot and cold running water, separate from restrooms.

21 NCAC 14T .0304 EQUIPMENT FOR MANICURING SCHOOLS

(a) The beginner department in a manicuring school must be equipped with the following equipment:

1. One mannequin practice table/stand to accommodate each student enrolled in the beginner department; and
2. One hand washing sink with hot and cold running water, separate from restrooms.

(b) The advanced department in a manicuring school must be equipped with the following equipment:

1. Two hand washing sinks with hot and cold running water, separate from restrooms, located in or adjacent to the clinic area;
(2) Ten work tables with two chairs per table;
(3) Ten pedicure chairs and basins;
(4) A waste container at each station; and
(5) A covered container for soiled or disposable towels located in the clinic area.

(c) The advanced department in a manicuring school must be equipped with the following equipment if there are more than 20 enrolled advanced students:
(1) One station for each additional two students a station shall include one work table and two chairs; and
(2) Two hand washing sinks with hot and cold running water, separate from restrooms.

21 NCAC 14T .0305 EQUIPMENT FOR NATURAL HAIR CARE STYLING SCHOOLS
(a) The beginner department in a natural hair care styling school must be equipped with the following:
(1) One shampoo bowl and chair. Each side approach shampoo bowl must be at least 40 inches apart, center of bowl to center of bowl; free standing shampoo bowls must be at least 31 inches apart, center of bowl to center of bowl;
(2) Styling equipment for the purpose of natural hair care;
(3) Visual aids;
(4) One mannequin practice table/stand to accommodate each student.

(b) The advanced department in a natural hair care styling school must be equipped with the following:
(1) Two shampoo bowls and chairs. Each side approach shampoo bowl must be 40 inches apart center of bowl to center of bowl; free standing shampoo bowls must be 31 inches apart center of bowl to center of bowl;
(2) Eight stations. A station shall include one mirror and one hydraulic chair;
(3) Two hooded floor type dryers; and
(4) Styling equipment for the purpose of natural hair care.

(c) The advanced department in a natural hair care styling school must be equipped with the following if there are more than 16 enrolled advanced students:
(1) One station for each additional two students; a station shall include one mirror and one hydraulic chair;
(2) One hooded dryer for each additional 10 students; and
(3) One shampoo bowl for each additional 10 students.

SECTION .0400 - STUDENT EQUIPMENT

21 NCAC 14T .0401 COSMETOLOGY AND APPRENTICE STUDENT EQUIPMENT
Each cosmetology and apprentice cosmetology student shall be supplied with following equipment:
(1) Implements for a complete manicure;
(2) 12 combs;
(3) Two capes;
(4) Six brushes;
(5) Thirty-six assorted clips;
(6) Assorted smooth rollers;
(7) Hard rubber or nonflammable comb for heat protection used in thermal styling;
(8) One electric marcel iron;
(9) One razor and one clipper;
(10) One thinning shears;
(11) One shaping shears;
(12) One eyebrow tweezer;
(13) One tint brush;
(14) One mannequin with hair; and
(15) One blow dryer.

21 NCAC 14T .0402 ESTHETICS STUDENT EQUIPMENT
Each esthetics school shall supply each esthetician student with the following:
(1) Draping;
(2) Spatulas;
(3) Tweezers;
(4) Make up supplies; and
(5) One mannequin.

21 NCAC 14T .0403 MANICURING STUDENT EQUIPMENT
Each manicuring school shall provide each manicurist student with the following:
(1) A manicurist bowl;
(2) Nail brushes;
(3) A tray for manicuring supplies;
(4) One mannequin hand;
(5) A manicuring kit containing proper implements for manicuring and pedicuring; and
(6) Implements for artificial nails, nail wraps and tipping.

21 NCAC 14T .0404 NATURAL HAIR CARE STYLING STUDENT EQUIPMENT
Each natural hair care school shall supply each natural hair care student with the following:
(1) Six combs;
(2) Six brushes;
(3) Ten clips;
(4) Mannequin with hair;
(5) One blowdryer; and
(6) Two capes.

SECTION .0500 - RECORD KEEPING

21 NCAC 14T .0501 SUBMISSION OF RECORDS
All cosmetic art schools must submit to the Board the appropriate, completed, original Board form for each student including enrollment, transfer, withdrawal and graduation. Cosmetic art student forms shall be submitted to the Board within the required time frame established in the following table.

<table>
<thead>
<tr>
<th>15 Days</th>
<th>30 Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Esthetics, Manicuring, Natural Hair Care and Teacher trainee forms including: enrollments, withdrawals, and transfers</td>
<td>Cosmetology forms including: enrollments, withdrawals, transfers and graduations</td>
</tr>
<tr>
<td>Esthetics, Manicuring, Natural Hair care and Teacher trainee graduation forms</td>
<td>Esthetics, Manicuring, Natural Hair care and Teacher trainee graduation forms</td>
</tr>
</tbody>
</table>

21 NCAC 14T .0502 PERMANENT RECORDS, FORMS AND DOCUMENTATION
(a) Cosmetic art schools must maintain a secure and locked permanent file of matriculations for all enrolled students and students who have withdrawn or graduated within the last six months together in one room within the approved square footage of the cosmetic art school. Withdrawal and graduation forms reviewed by the Board or an agent of the Board may be removed from this room. The permanent file shall include a copy of:
(1) Board Enrollment Form;
(2) Documentation of student receipt of school policies, school and student contract and the Board felony policy;
(3) All applicable Board Withdrawal Forms;
(4) Social security card for any individual who has a social security number or tax ID card or student visa information;
(5) Government issued ID and proof of date of birth;
(6) Grades for all examinations and documentation for pass/fail performances;
(7) Documentation for any leave of absence over 30 days;
(8) Transfer of hours form documenting hours earned in other schools and hours accepted by current school; and
(9) Graduation Form.
(b) The school shall keep records of hours earned daily including field trip hours and documentation of field trip hours (updated and subtotaled weekly with a running grand total):
(1) A daily record shall be kept of the performances for each student, showing the actual date of the performance and the teacher who approved;
(2) A daily record shall be kept of the actual number of hours of attendance; and
(3) Performance Record (updated and subtotaled weekly).

(c) When a student enrolled in a cosmetic art school withdraws from such school, the cosmetic art school shall report to the Board its administrative decision to withdraw the student.

(d) If a student withdraws from a cosmetic art program within the first five days, the school need not submit the enrollment to the Board.

(e) The graduation form documentation must be signed by on site school staff or on site school administrators and must have the seal of the school affixed. The original graduation form documentation must be prepared on the Board form. The cosmetic art school shall mail the graduation form to the Board at the Board's address within 30 days of the student's graduation date with the school seal affixed.

(f) All forms submitted to the Board must be sealed originals and a copy shall be maintained in the school file. All forms submitted to the Board must be completed, except for student signatures as necessary, by on site school staff or on site school administrators. Board forms shall be used for the sole purpose of documenting to the Board student records and shall not be used to notify students of enrollment, transfer of hours, withdrawal or graduation.

(g) Changes or corrections made by the school to any Board form must be submitted to the Board with supporting documentation.

(h) All cosmetic art schools must maintain on file at the school an original daily record of enrolled students' hour and performances. This record must be kept in a secured location under lock and key but made available for review by the Board or its agent at any time.

(i) All records kept by a cosmetic art school on a student who has withdrawn or graduated must be kept in the school's locked files for future reference until the date the student is accepted for the Board examination or five years after the date the student first enrolled in the school, whichever occurs earlier. Forms reviewed by the Board or an agent of the Board may be removed from this room.

(j) The record of all hours and performances must be documented in writing. Credit issued to students that cannot be verified may be eliminated from the student record by an agent of the Board.

(k) Access to student records must be limited to agents of the Board, teachers and administrators of the school. Records cannot be altered onsite. Records altered onsite must have documentation supporting the change attached.

(l) All individuals in a cosmetic art school receiving cosmetic art education, earning hours, performing or practicing cosmetic art services must be enrolled in the school.

(m) Only teachers reported to the Board as employees of a cosmetic art school may grade practical student examinations and evaluate pass/fail of student performances. Only on site teachers, on site school administrators or on site school staff shall record student hours and performances, grade examinations and determine completion and record credit of live model and mannequin performances.

(n) Minimum scores required for examinations and the successful completion of live model/mannequin performances as determined through the school's evaluation plan that is approved by the Board at the time of application shall be disclosed to students at the time of enrollment. Passing grades and performances cannot be credited to students who fail to meet the requirements of the evaluation plan.

(o) Cosmetic art schools must provide to each student a copy of school policies, the Board felony policies and shall retain for the permanent file a copy of the student's acknowledgement of receipt of these policies.

(p) The names of students with unsatisfied academic obligations shall not be submitted to the Board as graduates but may be submitted as withdrawn.

(q) Cosmetic art schools shall not report to the Board the unsatisfied financial obligations of any cosmetic art student. Cosmetic art schools shall not prevent the graduation of students who have met the Board minimum requirements and passed all school academic requirements.

(r) Records of hours must be rounded to no more than the nearest quarter hour. Cosmetic art schools shall not give or deduct hours or performances as a rewards or penalties.

(s) An applicant may receive credit for instruction taken in another state if the conditions set forth in this Rule are met. In order to determine if the conditions have been met the applicant's record shall be certified by the state agency or department that issues licenses to practice in the cosmetic arts. If this agency or department does not maintain any student records or if the state does not give license to practice in the cosmetic arts, then the records may be certified by any state department or state agency that does maintain such records and is willing to certify their accuracy. If no state department or board will certify the accuracy of the student's records, then the Board shall review the student's records on a case-by-case basis.

(t) Hours transferred between open North Carolina schools must be obtained by the submission of the Board transfer form mailed directly from the school in which the hours are earned with the school seal affixed, with grades for
examinations and performances to the new school in which a student enrolls. Such original documentation shall be submitted to the Board with enrollment.

(u) A student must pass an entrance examination given by the school to which the student is transferring for the hours to be transferred from one cosmetic art school to another.

SECTION .0600 - CURRICULA

21 NCAC 14T .0601 COSMETIC ART CURRICULA
(a) Cosmetic art schools must develop and submit to the Board a curriculum of each discipline to be taught at the school. The curriculum, once approved by the Board's standards listed in Rules .0602-.0610 of this Section must be adhered to and lessons developed from the approved curriculum.

(b) Before a student may move from the beginner department to the advanced, the minimum requirements shall be met.

(c) Performances shall be defined as the systematic completion of the steps for safe and effective cosmetic art services to a client.

(d) All cosmetic art students shall receive training on Material Safety Data Sheets prepared by the manufacturer on all products used by the school's students in performances.

21 NCAC 14T .0602 COSMETOLOGY CURRICULUM
(a) To meet the approval of the Board, a cosmetologist training course must consist of 1500 hours of instruction in theory and practical application, divided as follows:

<table>
<thead>
<tr>
<th>Theory</th>
<th>Hours</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginners: Professional image, sanitation, bacteriology, disinfection, first aid, anatomy, electricity, chemistry, professional ethics, draping, shampooing, roller sets, pin curls, ridge curls with C shaping, fingerwaves, braids, artificial hair, up-styles, blowdrying brush control, blowdrying with curling iron, pressing/thermal, hair cutting, partings, perm wraps, relaxer sectioning, color application sectioning, scalp treatments, manicures, pedicures, and artificial nails.</td>
<td>300</td>
<td></td>
</tr>
<tr>
<td>Advanced: Styles and techniques of cosmetology services including arranging, dressing, curling, waving; cutting techniques and implements including razors, clippers, thinning shears, and shears, cleansing, cutting, singeing, bleaching or coloring hair; esthetics and manicuring; and business management and salon business.</td>
<td>1200</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Performance Requirements</th>
<th>Mannequin</th>
<th>Live Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scalp and hair treatments</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>Fullhead fingerwave and style</td>
<td>5 or 5</td>
<td></td>
</tr>
<tr>
<td>Fullhead pincurl and style</td>
<td>5 or 5</td>
<td></td>
</tr>
<tr>
<td>Hair styling - sets, blowdrying, thermal press/flat iron, and artificial hair</td>
<td>70 100</td>
<td></td>
</tr>
<tr>
<td>Haircuts</td>
<td>10 75</td>
<td></td>
</tr>
<tr>
<td>Chemical reformation or permanent waving and relaxers</td>
<td>25 10</td>
<td></td>
</tr>
<tr>
<td>Temporary color</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Color application - semi, demi, permanent color and hair lightening</td>
<td>10 30</td>
<td></td>
</tr>
<tr>
<td>Multidimensional color - low/high lighting, cap, bleach</td>
<td>10 15</td>
<td></td>
</tr>
<tr>
<td>Lash and brow color</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Nail care - manicures and pedicures</td>
<td>15</td>
<td></td>
</tr>
<tr>
<td>Artificial nails sets</td>
<td>5 or 5</td>
<td></td>
</tr>
<tr>
<td>Facials with surface manipulations</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>Makeup application</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Hair removal</td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>
(b) A minimum of 300 hours of theory is required prior to conducting live model performances on the public.
(c) Certification of live model or mannequin performance completions is required along with the graduation form and application for the Board examination.
(d) A live model may be substituted for a mannequin for any mannequin service.
(e) All mannequin services may be performed using a simulated product.
(f) Simulated product is not allowed for credit for live model performance.
(g) Mannequin services shall not be substituted for live model services.
(h) Sharing of performance completions is not allowed.
(i) Credit for a performance shall be given to only one student.
(j) A nail set is one hand including all four fingers and thumb.

21 NCAC 14T .0603  APPRENTICE COSMETOLOGY CURRICULUM

(a) To meet the approval of the Board, an apprentice cosmetologist training course must consist of 1200 hours of instruction in theory and practical application, divided as follows:

<table>
<thead>
<tr>
<th>Theory</th>
<th>Hours</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginners: Professional image, sanitation,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>bacteriology, disinfection, first aid,</td>
<td>300</td>
<td></td>
</tr>
<tr>
<td>anatomy, electricity, chemistry, professional ethics, draping, shampooing, roller sets, pin curls, ridge curls with C shaping, fingerwaves, braids, artificial hair, up-styles, blowdrying brush control, blowdrying with curling iron, pressing/thermal, hair cutting, partings, perm wraps, relaxer sectioning, color application sectioning, scalp treatments, manicures, pedicures, and artificial nails.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advanced: Styles and techniques of cosmetology services including arranging, dressing, curling, waving; cutting techniques and implements including razors, clippers, thinning shears, and shears, cleansing, cutting, singeing, bleaching or coloring hair; esthetics and manicuring; and business management and salon business.</td>
<td>900</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Performance Requirements</th>
<th>Mannequin</th>
<th>Live Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scalp and hair treatments</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>Fullhead fingerwave and style</td>
<td>3 or 3</td>
<td></td>
</tr>
<tr>
<td>Fullhead pincurl and style</td>
<td>3 or 3</td>
<td></td>
</tr>
<tr>
<td>Hair styling - sets, blowdrying, thermal press/flat iron, and artificial hair</td>
<td>56 or 80</td>
<td></td>
</tr>
<tr>
<td>Haircuts</td>
<td>8</td>
<td>60</td>
</tr>
<tr>
<td>Chemical reformation or permanent waving and relaxers</td>
<td>19 or 8</td>
<td></td>
</tr>
<tr>
<td>Temporary color</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Color application - semi, demi, permanent color and hair lightening</td>
<td>8 or 11</td>
<td></td>
</tr>
<tr>
<td>Multidimensional color - low/high lighting, cap, bleach</td>
<td>3 or 8</td>
<td></td>
</tr>
<tr>
<td>Lash and brow color</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Nail care - manicures and pedicures</td>
<td>12</td>
<td></td>
</tr>
<tr>
<td>Artificial nails sets</td>
<td>4 or 4</td>
<td></td>
</tr>
<tr>
<td>Facials with surface manipulations</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Makeup application</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Hair removal</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

(b) A minimum of 300 hours of theory is required prior to conducting live model performances on the public.
(c) Certification of live model or mannequin performance completions is required along with the graduation form and application for the Board examination.
(d) A live model may be substituted for a mannequin for any mannequin service.
(e) All mannequin services may be performed using a simulated product.
(f) Simulated product is not allowed for credit for live model performance.
(g) Mannequin services shall not be substituted for live model services.
(h) Sharing of performance completions is not allowed.
(i) Credit for a performance shall be given to only one student.
(j) A nail set is one hand including all four fingers and thumb.

21 NCAC 14T .0604 ESTHETICS CURRICULUM
(a) To meet the approval of the Board, an esthetician training course must consist of at least 600 hours of instruction in theory and practical application, divided as follows:

<table>
<thead>
<tr>
<th>Theory and Performance Requirements</th>
<th>Hours</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginners: anatomy/physiology, hygiene, disinfection, first aid, chemistry, draping, facial/body treatment (cleansing, manipulations, masks), hair removal, basic dermatology, machines, electricity, apparatus, aromatherapy, nutrition, make-up/color theory,</td>
<td>75</td>
<td></td>
</tr>
<tr>
<td>Advanced: Styles and techniques of esthetics services including facials, makeup application, performing skin care, hair removal, eyelash extensions and applying brow and lash color; business management; and professional ethics</td>
<td>525</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Performance Requirements</th>
<th>Mannequin</th>
<th>Live Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facials Manual (skin analysis, cleansing, surface manipulations, packs and masks)</td>
<td>10</td>
<td>30</td>
</tr>
<tr>
<td>Facials Electronic (the use of electrical modalitus, including dermal lights, and electrical apparatus for facials and skin care including galvanic and faradic)</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>Eyebrow arching</td>
<td>5</td>
<td>15</td>
</tr>
<tr>
<td>Hair removal (hard wax, soft wax, depilitories)</td>
<td>5</td>
<td>25</td>
</tr>
<tr>
<td>Makeup application (skin analysis, complete and corrective makeup)</td>
<td>10</td>
<td>20</td>
</tr>
<tr>
<td>Eyelash extensions</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Brow and lash color</td>
<td>5</td>
<td>5</td>
</tr>
</tbody>
</table>

(b) A minimum of 75 hours of theory is required prior to conducting live model performances on the public.
(c) Certification of live model or mannequin performance completions is required along with the graduation form and application for the examination.
(d) A live model may be substituted for a mannequin for any mannequin service.
(e) All mannequin services may be performed using a simulated product.
(f) Simulated product is not allowed for credit for live model performance.
(g) Mannequin services shall not be substituted for live model services.
(h) Sharing of performance completions is not allowed.
(i) Credit for a performance shall be given to only one student.

21 NCAC 14T .0605 MANICURING CURRICULUM
(a) To meet the approval of the Board, a manicurist training course must consist of at least 300 hours of instruction in theory and practical application, divided as follows:
### Theory and Performance Requirements

| Beginners: Manicuring theory, disinfection, first aid, trimming, filing, shaping, decorating, arm and hand manipulation, sculptured and artificial nails; and pedicuring | 60 |  |
| Advance: Styles and techniques for the care, treatment and decoration of fingernails, toenails, cuticles, nail extensions and artificial nails; electric file; business management; and professional ethics | 240 |  |

#### Performance Requirements

<table>
<thead>
<tr>
<th>Services</th>
<th>Mannequin</th>
<th>Live Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manicures including trimming, filing, shaping, decorating and arm and hand manipulations</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>Applications or repair of sculptured or artificial nail sets</td>
<td>5</td>
<td>15</td>
</tr>
</tbody>
</table>

(b) A minimum of 60 hours theory is required prior to conducting live model performances on the public.

c) Certification of live model or mannequin performance completions is required along with the graduation form and application for the examination.

d) A live model may be substituted for a mannequin for any mannequin service.

e) All mannequin services may be performed using a simulated product.

(f) Simulated product is not allowed for credit for live model performance.

g) Mannequin services shall not be substituted for live model services.

(h) Sharing of performance completions is not allowed.

(i) Credit for a performance shall be given to only one student.

(j) A nail set is one hand including all four fingers and thumb.

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### 21 NCAC 14T .0606  NATURAL HAIR CARE CURRICULUM

(a) To meet the approval of the Board, a natural hair care styling training course must consist of 300 hours of instruction in theory and practical application, divided as follows:

<table>
<thead>
<tr>
<th>Theory</th>
<th>Hours</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginners: Sanitation, bacteriology, disinfection, first aid, shampooing, draping, anatomy, disorders of the hair and scalp, client consultation.</td>
<td>60</td>
<td></td>
</tr>
<tr>
<td>Advanced: Styles and techniques of natural hair styling including twisting, wrapping, extending, locking, blowdry and thermal iron; and business management and professional ethics.</td>
<td>240</td>
<td></td>
</tr>
</tbody>
</table>

#### Performance Requirements

<table>
<thead>
<tr>
<th>Services</th>
<th>Mannequin</th>
<th>Live Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Braids</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Twists</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Knots</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Corn rows</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Hairlocking</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Artificial hair and decorations</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Blow dry and thermal iron</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Braid Removal</td>
<td>5</td>
<td>5</td>
</tr>
</tbody>
</table>

(b) A minimum of 60 hours theory is required prior to conducting live model performances on the public.

c) Certification of live model or mannequin performance completions is required along with the graduation form and application for the Board examination.

d) A live model may be substituted for a mannequin for any mannequin service.

e) All mannequin services may be performed using a simulated product.

(f) Simulated product is not allowed for credit for live model performance.

g) Mannequin services shall not be substituted for live model services.

(h) Sharing of performance completions is not allowed unless the live model service consists of 20 or more lengths of hair.

(i) Credit for a performance shall be given to only one student.

(j) A performance shall consist of 10 or more lengths of hair.
21 NCAC 14T.0607  COSMETOLOGY TEACHER TRAINEE CURRICULUM  
(a) To meet the approval of the Board, a cosmetologist teacher training course must consist of at least 800 hours of instruction in theory and practical application, divided as follows:

<table>
<thead>
<tr>
<th>Requirement Description</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theory: observation theory, motivation, business management, student relations, teaching techniques, preparing lesson plans, facilitating student shop internship, preparing class lectures and presentations, preparing examinations, grading and G.S. 88B and the rules of the Board</td>
<td>150</td>
</tr>
<tr>
<td>Practical Application: Conducting theory classes from prepared lessons, preparing and giving examinations and giving practical demonstrations</td>
<td>650</td>
</tr>
</tbody>
</table>

(b) A minimum of 150 hours of theory is required prior to trainees' being permitted to instruct in a cosmetology classroom.

21 NCAC 14T.0608  ESTHETIC TEACHER TRAINEE CURRICULUM  
(a) To meet the approval of the Board, under the standards set out in these Rules an esthetician teacher training course must consist of at least 650 hours of instruction in theory and practical application, divided as follows:

<table>
<thead>
<tr>
<th>Requirement Description</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theory: observation theory, motivation, business management, student relations, teaching techniques, preparing lesson plans, preparing class lectures and presentations, preparing examinations, grading and G.S. 88B and the rules of the Board</td>
<td>120</td>
</tr>
<tr>
<td>Practical Application: Conducting theory classes from prepared lessons, preparing and giving examinations and giving practical demonstrations</td>
<td>530</td>
</tr>
</tbody>
</table>

(b) A minimum of 120 hours of theory is required prior to trainees' being permitted to instruct in a cosmetology classroom.

21 NCAC 14T.0609  MANICURIST TEACHER TRAINEE CURRICULUM  
(a) To meet the approval of the Board, under the standards set out in these Rules a manicurist teacher training course must consist of at least 320 hours of instruction in theory and practical application, divided as follows:

<table>
<thead>
<tr>
<th>Requirement Description</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theory: observation theory, motivation, business management, student relations, teaching techniques, preparing lesson plans, grading, preparing class lectures and presentations, preparing examinations and G.S. 88B and the rules of the Board</td>
<td>115</td>
</tr>
<tr>
<td>Practical Application: Conducting theory classes from prepared lessons, preparing and giving examinations and giving practical demonstrations</td>
<td>205</td>
</tr>
</tbody>
</table>

(b) A minimum of 115 hours of theory is required prior to trainees' being permitted to instruct in a cosmetology classroom.

21 NCAC 14T.0610  NATURAL HAIR CARE TEACHER CURRICULUM  
(a) To meet the approval of the Board, under the standards set out in these Rules natural hair care teacher training course must consist of at least 320 hours of instruction in theory and practical application, divided as follows:

<table>
<thead>
<tr>
<th>Requirement Description</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theory: observation theory, motivation, business management, student relations, teaching techniques, preparing lesson plans, grading, preparing class lectures and presentations, preparing examinations and GS 88B and the rules of the Board</td>
<td>115</td>
</tr>
<tr>
<td>Practical Application: Conducting theory classes from prepared lessons, preparing and giving examinations and giving practical demonstrations</td>
<td>205</td>
</tr>
</tbody>
</table>
(b) A minimum of 115 hours of theory is required prior to trainees' being permitted to instruct in a cosmetic art classroom.

21 NCAC 14T .0611 ONLINE INSTRUCTION
Online instruction and course hours are not accepted by the Board for any cosmetic art discipline. Online resources, course supplements and internet research may be used during the course of study with the supervision of a cosmetic art teacher within a cosmetic art school.

21 NCAC 14T .0612 INSTRUCTION GUIDELINES
(a) The hours earned in the advanced department must be devoted to study and performance completions.
(b) Work in the advanced department may be done on the public. Cosmetology and apprentice students with fewer than 300 hours, esthetician students with fewer than 75 hours, and manicurist and natural hair care students with fewer than 60 hours shall not work in this department and are not allowed to work on the public except shampoo and scalp manipulations.
(c) All work done by students on the public must be checked by the cosmetic art teacher as the work is being performed and after the service has been completed so that the teacher may point out errors to the student in order that the errors may be corrected.
(d) Cosmetic art students shall receive training on theory of any cosmetic art service prior to performing that service.
(e) Theory work shall include lectures on theory subjects as well as demonstrations, questions and answers on textbooks, written examinations, and in-class practice of procedures and methods.
(f) Cosmetic art teacher trainees must be enrolled in school to earn hours.
(g) Cosmetic art schools must supply each student with a copy of the North Carolina Cosmetic Art Act, Board rules, and the student handbook.
(h) All of the work outlined in the beginners' department and the advanced department shall be given to the students through practical demonstrations and lectures, questions and answers on textbooks, and written exam.
(i) A minimum of 10 percent of scheduled attendance time each week will be spent on theory instruction, questions and answers on textbooks, and the administration of a written exam to full time students.
(j) All papers shall be graded and returned to the students.
(k) Cosmetic art students shall receive training and practice only in the discipline in which they are enrolled.
(l) Live model performances on the public must be done in the advanced department. Mannequin performances and live model performances on other students may be performed in the advanced department classroom or room within the school with the required space and equipment for practice.
(m) Textbooks shall not be used more than five years after original publication date.
(n) Schools must provide textbooks and supplementary educational materials and equipment to students.

21 NCAC 14T .0613 UNIFORMS AND IDENTIFICATION
(a) Each cosmetic arts school must define what constitutes a uniform for students and acceptable attire for teachers. Students and teachers shall wear the uniform or acceptable attire as defined by the school so that Board members or agents of the Board can identify by sight students and teachers.
(b) Each school's definition of acceptable attire cannot change more than once per year.
(c) Students must wear a name tag identifying student name, cosmetic art discipline and academic status. At no time shall a student fail to wear a name tag.
(d) Each cosmetic art school may permit students to be out of uniform a maximum of four days per year. Notice to the Board must be submitted prior to any day uniforms will not be worn.

21 NCAC 14T .0614 INTERNSHIPS
Schools and cosmetic art shops desiring to implement an internship program shall follow these requirements:
(1) Schools wishing to participate in an internship program must notify the Board of intent to implement a program before credit for an internship may be granted. Cosmetic art shops and student selection criteria must be submitted along with the notification.
(2) Schools shall report to the Board all cosmetic art shops contracted and students selected to participate in the program.
(3) Internships may be arranged in various time frames but shall never exceed five percent of a student's training period.
(4) Credit for an internship shall be granted upon submission of student hours verification based on a daily attendance record. Hours must be recorded on a form approved by the school.
(5) Students may be assigned a variety of duties, but client services are restricted. Cosmetology and natural hair care students may provide only shampoo services, manicurist students may only remove nail polish and esthetician students may only drape and prep clients.

(6) Students must follow all Board rules and regulations.

(7) A licensed teacher need not be in attendance during this internship.

(8) Students participating in the program shall not receive compensation for duties performed in the cosmetology shop.

21 NCAC 14T .0615 FIELD TRIPS
(a) Cosmetic art schools must notify the Board prior to any field trip and record the field trip hours of each student. Cosmetic Art Educational Field Trips include the following activities:

(1) Cosmetic art shops;
(2) Cosmetic art Conventions;
(3) Competition Training;
(4) Other Schools;
(5) State Board Office;
(6) Supply Houses;
(7) College or Career Day at School;
(8) Fashion Shows;
(9) Rest Homes/Nursing Homes;
(10) Hospitals; and
(11) Funeral Homes.

(b) An instructor must be present during these educational field trips listed in Paragraph (a) of this Rule, for credit to be given to students, with a ratio of one instructor per 25 students present.

(c) The maximum number of hours a student may earn for field trips is 40 credit hours for cosmetology students, 20 credit hours for esthetician students and 10 credit hours for manicurist or natural hair care students.

(d) Students may earn up to four additional hours of credit for interviews at a licensed cosmetology shop.

21 NCAC 14T .0616 ADDITIONAL HOURS
(a) Notwithstanding any other provision of the rules in this Subchapter, pursuant to G.S. 88B-18(d) a cosmetologist, esthetician, manicurist, natural hair care specialist or teacher candidate who has failed either section of the examination three times, shall complete the following amounts of study at an approved cosmetology school before reapplication for examination shall be accepted by the Board:

(1) Cosmetologist 200 hours;
(2) Esthetician 80 hours;
(3) Manicurist 40 hours;
(4) Natural Hair Care Specialist 40 hours; and
(5) Teacher:
   (A) cosmetology 100 hours;
   (B) esthetician 80 hours; and
   (C) manicurist 40 hours.

(b) Schools shall evaluate students returning to complete additional hours to fulfill three time examination failure requirements and shall provide remedial assistance and training in the areas of deficiency.

(c) Teacher candidates with no prior cosmetology teacher training program experience shall provide a written affidavit documenting a minimum of required work experience as outlined in 21 NCAC 14N .0115 or complete a minimum of the hours required for the teacher curriculum in the discipline in which they hold a license.

21 NCAC 14T .0617 TEACHER TRAINEES
(a) A cosmetic art teacher trainee may not perform clinical services on a patron at the cosmetic art school.

(b) A cosmetic art teacher trainee shall be supervised by a cosmetic art teacher at all times when the trainee is at a cosmetic art school except as set out in Paragraph (c) of this Rule.

(c) A manicurist, natural hair care or esthetician teacher may supervise a cosmetic art teacher trainee with regard to manicuring, natural hair care or esthetics, as appropriate.

(d) A cosmetic art teacher trainee program may be a full time program or a part time program. A cosmetic art teacher trainee, however, may not receive credit for more than eight hours per day.
(e) Teacher trainees may present lessons they have prepared under the direct supervision of a licensed cosmetic art teacher as long as the supervising teacher is present in the classroom.

(f) Persons receiving teacher training in a cosmetic art school shall be furnished a teacher's manual and shall spend all of their training time under the direct supervision of a licensed cosmetic art teacher and shall not be left in charge of students or the school at any time.

SECTION .0700 - SCHOOL LICENSURE, OPERATIONS, CLOSING AND RELOCATING SCHOOLS

21 NCAC 14T .0701 SCHOOL OPERATIONS/LICENSURE MAINTENANCE

(a) No individual shall be given credit for any hours earned in a cosmetic art school before the date the school is granted a license, before the student is enrolled or after graduation or withdrawal without a new enrollment.

(b) All Cosmetic Art schools must submit hours of operation per cosmetic art discipline to the Board. Any changes to the hours of operation must be submitted to the Board. A school will be considered open by the Board when cosmetic art instruction, services or performances are provided.

(c) Students may be required to clean and disinfect work areas, reception areas, implements and the dispensary. Students shall not be required to perform regular maintenance.

(d) All cosmetic art schools must adhere to all Board sanitation regulations located in 21 NCAC 14H Sanitation.

(e) Cosmetic art schools may permit students to leave the cosmetic art school during instructional time to visit on campus libraries and other educational resource rooms such as computer labs for research and study under the supervision of a cosmetic art instructor.

(f) Cosmetic art schools shall use the following grading scale as a minimum for passing grades:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>100-90</td>
</tr>
<tr>
<td>B</td>
<td>80-89</td>
</tr>
<tr>
<td>C</td>
<td>70-79</td>
</tr>
<tr>
<td>F (Fail)</td>
<td>0-69</td>
</tr>
</tbody>
</table>

(g) Cosmetic art schools shall not graduate any student who has not met the minimum school and Board requirements for graduation.

(h) Examinations shall be administered in all subjects of the cosmetic art curriculum.

(i) Students present at school must be supervised by a cosmetic art teacher at all times. If a guest lecturer is leading a class, at least one cosmetic art teacher must be present in the lecture.

(j) All cosmetic art schools shall provide:

1. One teacher for every 25 students enrolled in the beginner department;
2. One teacher for every 20 students during practical work on live models in the advanced department; and
3. Cosmetic art teachers at a ratio of 1:25 teacher to teacher trainees; or
   (A) one teacher and up to 25 beginner cosmetic art students and 5 teacher trainees; or
   (B) one teacher and up to 20 cosmetic art students in practice on the clinic floor and 5 teacher trainees.

(k) In theory classes the teacher-student ratio may exceed the ratios established in this Rule.

(l) The teacher student ratios established in this Rule shall be adhered to when schools are in operation.

(m) A teacher shall not administer instruction to students enrolled in beginner and advanced departments at the same time.

(n) At no time can any one teacher be simultaneously responsible for students in a theory class and students in practice on the clinic floor.

(o) In cases of change in teaching staff, the school shall notify the Board of the change in writing prior to beginning instruction. A change in teaching staff includes any substitution for the regularly scheduled teacher and any change, scheduled or otherwise, in the list of teachers last given to the Board.

1. All courses in a cosmetic art school must be taught by a licensed cosmetology teacher, except that manicuring courses may be taught by either a licensed cosmetology teacher or a licensed manicurist teacher, natural hair care courses may be taught by either a licensed cosmetology teacher or a licensed natural hair care teacher, and esthetics courses may be taught by either a licensed cosmetology teacher or a licensed esthetician teacher.

2. A licensed cosmetologist not licensed as a cosmetology teacher may substitute for a cosmetology, esthetician, natural hair care or manicurist teacher; a licensed manicurist not licensed as a manicurist teacher may substitute for a manicurist teacher; a licensed natural hair care specialist not licensed as a
natural hair care teacher may substitute for a natural hair care teacher; and a licensed esthetician not licensed as an esthetician teacher may substitute for an esthetician teacher.

(p) In no event may any cosmetic art licensee substitution last for more than 15 consecutive working days per year per teacher. If any teacher substitution is 16 consecutive days or longer, the school must provide a new cosmetic art teacher.

(q) Enrolled students may earn a maximum of 10 hours per day per discipline of cosmetic art and a maximum of 48 hours per week per discipline. A student enrolled in more than one cosmetic art discipline may not earn hours or complete performances concurrently.

(r) A cosmetic art student must complete at least 1/3 of the minimum required hours in the cosmetic art school certifying his or her application for the state board examination.

(s) Upon written petition by the student and the school, the Board shall make an exception to the requirements set forth in Paragraph (r) of this Rule if the student shows that circumstances beyond the student's control prohibited him or her from completing a minimum of 1/3 hours at the school certifying his or her application.

(t) The Board shall certify student hours for any North Carolina cosmetic art school that is closed. The Board shall not certify student hours between any North Carolina open cosmetic art schools. The Board shall certify student hours earned at North Carolina cosmetic art schools to other state boards and schools open outside of the state of North Carolina as set forth in Rule .0502 of this Subchapter.

21 NCAC 14T .0702 TRANSFER OF CREDIT

(a) A student who transfers from one cosmetic art discipline to another cosmetic art discipline shall not receive credit for hours received in the initial curriculum.

(b) Up to 25 percent of all credit earned in an approved esthetician, manicurist or natural hair care teacher training program may be transferred to a cosmetology teacher training program.

(c) A maximum of 160 hours earned in either an esthetician, natural hair care or manicurist teacher training program may be transferred between programs once.

(d) Licensed estheticians, manicurists and natural hair care stylists may apply up to 25 percent of hours required for licensure by G.S. 88B earned toward the cosmetology curriculum.

21 NCAC 14T .0703 EXPIRATION OF STUDENT CREDIT

Students and graduates who fail to file an application for the examination within five years of the initial enrollment shall not be credited any hours or performances previously earned.

21 NCAC 14T .0705 SCHOOL PERFORMANCE REQUIREMENTS

(a) Each cosmetic art school shall meet or exceed a program completion rate of at least 50 percent during any five year period and shall meet or exceed a student pass rate on state licensure examinations of at least 70 percent during any three year period.

(b) The school shall allow the teachers to have the opportunity to prepare for class, evaluate students' progress in the course, counsel students individually, and participate in activities of continuing education.

(c) Cosmetic art schools must provide to substitutes copies of lesson plans and the performance evaluation plan for the successful grading of clinical performances.

(d) School attendance policies shall give appropriate performances attendance credit for all hours attended;

(e) If a graduate meets all the financial, hours, academic, and performance requirements, the school must provide the student with the examination application.

(f) Cosmetic Art schools shall maintain current bond according to G.S. 88B-17 and shall submit certification of renewal or new bond prior to expiration of the bond approved by the Board.

(g) Each school shall submit to the Board upon renewal financial records of prepaid tuition and a letter signed by an authorized representative of the school documenting the calculations made and the method of computing the amount of the bond for the preceding year. Each school shall maintain and submit to the Board proof of bond in an amount of ten thousand dollars ($10,000), or equivalent to prepaid tuition received during the previous year, whichever is greater.

21 NCAC 14T .0706 SCHOOL APPROVAL CHANGES AND SCHOOL CLOSING

(a) If the square footage, instructional layout or location of a cosmetic art school changes, or if there is a transfer of majority ownership of a cosmetic art school, whether by sale, lease or otherwise a new approval application is required.

(b) License and letters of approval issued to cosmetic art schools are not transferrable, and are valid only for the location, square footage and enrollment capacity for which issued, and to the owner to whom issued. The letter of approval shall contain the school name, school owner name, school location, date of approval, the signature of the Board members, the amount of approved square footage and the maximum number of enrollments for which the school has been approved.
(c) Schools intending to close must notify the Board not less than 30 days in advance.
(d) Schools must make provisions for the long term storage of school documents, and facilitate the retrieval of any school documents upon the request of a student or the Board. Schools shall notify the Board of the contact information for retrieval of any school information.
(e) Schools must facilitate and cooperate in the final inspection and processing of student hours.

SECTION .0800 – SCHOOL INSPECTIONS

21 NCAC 14T .0802 SCHOOL SANITATION GRADES
Schools shall follow all Board sanitation regulations. Schools shall be issued a grade at each inspection on a grade card provided by the Board.

21 NCAC 14T .0803 SCHOOL INSPECTIONS
(a) Schools must facilitate and cooperate during all school inspections
(b) Schools are subject to reevaluation and re-inspection at any time
(c) Failure to comply with the laws and rules of the Board is cause to revoke or suspend the school's license/letter of approval.
(d) In addition to such other reports as may be required by the Board, cosmetic art schools shall report to the Board or its authorized agent, upon inspection of the cosmetic art school and at other times upon specific request, the names of all students currently enrolled and the hours and performances completed by each.
(e) The owner or manager of the cosmetic art school shall read each inspection report made of the school by an authorized agent of the Board to determine that the information on the inspection report is correct, shall sign and retain a copy of all inspection reports.
(f) If any part of the information on the report is incorrect, it shall be corrected by the authorized agent of the Board
(g) A school may submit an exception to any inspection report. Such exceptions shall be prepared and signed by the owner or manager and submitted to the Board and shall be attached to the report.
(h) All present student equipment shall be made available to inspectors during school inspection.
(i) Cosmetic art schools must maintain copies of lesson plans and make such copies available to an agent of the Board upon request.

SECTION .0900 – DISCIPLINARY ACTIONS

21 NCAC 14T .0901 SCHOOL PROBATION
(a) After notice and opportunity for a hearing, the Board shall put the school on probation if the Board finds that the program fails to comply with General Statutes or these Rules. The decision shall identify all deficiencies required to be corrected for the program to come into compliance.
(b) No later than one calendar year after notification, the school shall either:
   (1) Correct the deficiencies identified above and come into compliance with Board requirements; or
   (2) Request an extension of time in which it shall:
       (A) Explain the basis for its failure to correct the deficiencies within the allotted time;
       (B) Provide a summary of the program's good faith efforts to come into compliance within the allotted time; and
       (C) Present a plan of action to come into compliance within the extension.
(c) The Board shall extend the time by a single six-month period if:
   (1) The explanation provided above is complete and contains all material facts;
   (2) The efforts made to come into compliance demonstrate good faith; and
   (3) The plan of action to come into compliance is realistic and complete.
(d) The Board shall make site visits or require the school to submit progress reports, syllabi, evaluative tools and student records when necessary to verify the accuracy of the report.
(e) When a program previously placed on probation fails to demonstrate compliance with General Statutes or these Rules as set forth in the Board's order, the Board shall order the school's official and the director to appear at a hearing at which time the school shall present evidence why the school's license and letter of approval should not be withdrawn.
Chapter 88B. Cosmetic Art.

§ 88B–1. Short title.
This chapter shall be known and may be cited as the North Carolina Cosmetic Art Act. (1998–230, s. 2.)

§ 88B–2. Definitions.
(1) Apprentice. – A person who is not a manager or operator and who is engaged in learning the practice of cosmetic art under the direction and supervision of a cosmetologist.

(2) Board. – The North Carolina Board of Cosmetic Art Examiners.

(3) Booth. – A workstation located within a licensed cosmetic art shop that is operated primarily by one individual in performing cosmetic art services for consumers.

(4) Booth renter. – A person who rents a booth in a cosmetic art shop.

(5) Cosmetic art. – All or any part or combination of cosmetology, esthetics, natural hair care, or manicuring, including the systematic manipulation with the hands or mechanical apparatus of the scalp, face, neck, shoulders, hands, and feet. Practices included within this subdivision shall not include the practice of massage or bodywork therapy as set forth in Article 36 of Chapter 90 of the General Statutes.

(6) Cosmetic art school. – Any building or part thereof where cosmetic art is taught.

(7) Cosmetic art shop. – Any building or part thereof where cosmetic art is practiced for pay or reward, whether direct or indirect.

(8) Cosmetologist. – Any individual who is licensed to practice all parts of cosmetic art.

(8a) Cosmetology. – The act of arranging, dressing, curling, waving, cleansing, cutting, singeing, bleaching, coloring, or similar work upon the hair of a person by any means, including the use of hands, mechanical or electrical apparatus, or appliances or by use of cosmetic or chemical preparations or antiseptics.

(9) Cosmetology teacher. – An individual licensed by the Board to teach all parts of cosmetic art.

(10) Esthetician. – An individual licensed by the Board to practice only that part of cosmetic art that constitutes skin care.
(11) **Esthetician teacher.** – An individual licensed by the Board to teach only that part of cosmetic art that constitutes skin care.

(11a) **Esthetics.** – Refers to any of the following practices: giving facials; applying makeup; performing skin care; removing superfluous hair from the body of a person by use of creams, tweezers, or waxing; applying eyelashes to a person, including the application of eyelash extensions, brow or lash color; beautifying the face, neck, arms, or upper part of the human body by use of cosmetic preparations, antiseptics, tonics, lotions, or creams; surface manipulation in relation to skin care; or cleaning or stimulating the face, neck, ears, arms, hands, bust, torso, legs, or feet of a person by means of hands, devices, apparatus, or appliances along with the use of cosmetic preparations, antiseptics, tonics, lotions, or creams.

(12) **Manicuring.** – The care and treatment of the fingernails, toenails, cuticles on fingernails and toenails, and the hands and feet, including the decoration of the fingernails and the application of nail extensions and artificial nails. The term "manicuring" shall not include the treatment of pathologic conditions.

(13) **Manicurist.** – An individual licensed by the Board to practice only that part of cosmetic art that constitutes manicuring.

(14) **Manicurist teacher.** – An individual licensed by the Board to teach manicuring.

(14a) **Natural hair care.** – A service that results in tension on hair strands or roots by twisting, wrapping, extending, or locking hair by hand or mechanical device. For purposes of this definition, the phrase "natural hair care" shall include the use of artificial or natural hair.

(14b) **Natural hair care specialist.** – An individual licensed by the Board to practice only that part of cosmetic art that constitutes natural hair care.

(14c) **Natural hair care teacher.** – An individual licensed by the Board to teach natural hair care.

(15) **Shampooing.** – The application and removal of commonly used, room temperature, liquid hair cleaning and hair conditioning products. Shampooing does not include the arranging, dressing, waving, coloring, or other treatment of the hair.

§ 88B– 3. Creation and membership of the Board; term of office; removal for cause; officers.

(a) The North Carolina Board of Cosmetic Art Examiners is established. The Board shall consist of six members who shall be appointed as follows:
(1) The General Assembly, upon the recommendation of the President Pro Tempore of the Senate, shall appoint a cosmetologist.

(2) The General Assembly, upon the recommendation of the Speaker of the House of Representatives, shall appoint a cosmetologist.

(3) The Governor shall appoint two cosmetologists, a cosmetology teacher, and a member of the public who is not licensed under this Chapter.

(b) Each cosmetologist member shall have practiced all parts of cosmetic art in this State for at least five years immediately preceding appointment to the Board and shall not have any connection with any cosmetic art school while serving on the Board. The cosmetology teacher member shall be currently employed as a teacher by a North Carolina public school, community college, or other public or private cosmetic art school and shall have practiced or taught cosmetic art for at least five years immediately preceding appointment to the Board.

(c) Cosmetologist members of the Board shall serve staggered terms of three years. No Board member shall serve more than two consecutive terms, except that each member shall serve until a successor is appointed and qualified. All other board members shall serve three-year terms, but they shall not be staggered.

(d) The Governor may remove any member of the Board for cause.

(e) A vacancy shall be filled in the same manner as the original appointment, except that unexpired terms in seats appointed by the General Assembly shall be filled in accordance with G.S. 120-122. Appointees to fill vacancies shall serve the remainder of the unexpired term and until their successors have been duly appointed and qualified.

(f) The Board shall elect a chair, a vice-chair, and other officers as deemed necessary by the Board to carry out the purposes of this Chapter. All officers shall be elected annually by the Board for one-year terms and shall serve until their successors are elected and qualified.

(g) The Board shall not issue a teacher's license to any Board member during that member's term on the Board.

(h) No Board member may be employed by the Board for at least one year after that member's term expires

§ 88B–4. Powers and duties of the Board.

(a) The Board shall have the following powers and duties:

(1) To administer and interpret this Chapter.
(2) To adopt, amend, and repeal rules to carry out the provisions of this Chapter.

(3) To examine and determine the qualifications and fitness of applicants for licensure under this Chapter.

(4) To issue, renew, deny, restrict, suspend, or revoke licenses.

(5) To conduct investigations of alleged violations of this Chapter or the Board's rules.

(6) To collect fees required by G.S. 88B-20 and any other monies permitted by law to be paid to the Board.

(7) To approve new cosmetic art schools.

(7a) To adopt rules for cosmetic art schools.

(8) To inspect cosmetic art schools and shops.

(9) To adopt rules for the sanitary management and physical requirements of cosmetic art shops and cosmetic art schools.

(10) To establish a curriculum for each course of study required for the issuance of a license issued under this Chapter.

(11) To employ an executive director and any additional professional, clerical, or special personnel necessary to carry out the provisions of this Chapter, and to purchase or rent necessary office space, equipment, and supplies.

(12) To adopt a seal.

(13) To carry out any other actions authorized by this Chapter.

(b) A member of the Board shall have the authority to inspect cosmetic art shops and cosmetic art schools at any reasonable hour to determine compliance with the provisions of this Chapter if the inspection is made: (i) at the request of the Board, or with the approval of the chair or the executive director as the result of a complaint made to the Board or a problem reported by an inspector, or (ii) at the request of an inspector who deems it necessary to request the assistance of a Board member and who has the prior approval of the chair or executive director to do so. A Board member who makes an inspection pursuant to this subsection shall file a report with the Board before requesting reimbursement for expenses.

(c) The Board shall keep a record of its proceedings relating to the issuance, renewal, denial, restriction, suspension, and revocation of licenses. This record shall also contain
each licensee's name, business and home addresses, license number, and the date the license was issued

§ 88B–5. Meetings and compensation of the Board.

(a) Each member of the Board shall receive compensation for services and expenses as provided in G.S. 93B-5, but shall be limited to payment for services deemed official business of the Board when such business exceeds three continuous hours per day. Official business of the Board includes meetings called by the chair and time spent inspecting cosmetic art shops and schools as permitted by this Chapter. No payment for per diem or travel expenses shall be authorized or paid for Board meetings other than those called by the chair. The Board may annually select one member to attend a national state board of cosmetic arts meeting on official business of the Board. No other Board members shall be authorized to attend trade shows or to travel out of state at the Board's expense.

(b) The Board shall hold four regular meetings a year in the months of January, April, July, and October. The chair may call additional meetings whenever necessary.

§ 88B–6. Board office, employees, funds, budget requirements.

(a) The Board shall maintain its office in Raleigh, North Carolina.

(b) The Board shall employ an executive director who shall not be a member of the Board. The executive director shall keep all records of the Board, issue all necessary notices, and perform any other duties required by the Board.

(c) With the approval of the Director of the Budget and the Office of State Personnel, the Board may employ as many inspectors, investigators, and other staff as necessary to perform inspections and other duties prescribed by the Board. Inspectors and investigators shall be experienced in all parts of cosmetic art and shall have authority to examine cosmetic art shops and cosmetic art schools during business hours to determine compliance with this Chapter.

(d) The salaries of all employees of the Board, excluding the executive director, shall be subject to the State Personnel Act. The executive director shall serve at the pleasure of the Board.

(e) The executive director may collect in the Board's name and on its behalf the fees prescribed in this Chapter and shall turn these and any other monies paid to the Board over to the State Treasurer. These funds shall be credited to the Board and shall be held and expended under the supervision of the Director of the Budget only for the administration and enforcement of this Chapter. Nothing in this Chapter shall authorize any expenditure in excess of the amount credited to the Board and held by the State Treasurer as provided in this subsection.
(f) The Executive Budget Act and the State Personnel Act apply to the administration of this Chapter

§ 88B–7. Qualifications for licensing cosmetologists.

The Board shall issue a license to practice as a cosmetologist to any individual who meets all of the following requirements:

(1) Successful completion of at least 1,500 hours of a cosmetology curriculum in an approved cosmetic art school, or at least 1,200 hours of a cosmetology curriculum in an approved cosmetic art school and completion of an apprenticeship for a period of at least six months under the direct supervision of a cosmetologist, as certified by sworn affidavit of three licensed cosmetologists or by other evidence satisfactory to the Board.

(2) Passage of an examination conducted by the Board.

(3) Payment of the fees required by G.S. 88B-20.

§ 88B–8. Qualifications for licensing apprentices.

The Board shall issue a license to practice as an apprentice to any individual who meets all of the following requirements:

(1) Successful completion of at least 1,200 hours of a cosmetology curriculum in an approved cosmetic art school.

(2) Passage of an examination conducted by the Board.

(3) Payment of the fees required by G.S. 88B-20

§ 88B–9. Qualifications for licensing as an esthetician.

The Board shall issue a license to practice as an esthetician to any individual who meets all of the following requirements:

(1) Successful completion of at least 600 hours of an esthetics curriculum in an approved cosmetic art school.

(2) Passage of an examination conducted by the Board.

(3) Payment of the fees required by G.S. 88B-20.

The Board shall issue a license to practice as a manicurist to any individual who meets all of the following requirements:

(1) Successful completion of at least 300 hours of a manicurist curriculum in an approved cosmetic art school.

(2) Passage of an examination conducted by the Board.

(3) Payment of the fees required by G.S. 88B-20.

§ 88B–10.1. Qualifications for licensing natural hair care specialists.

The Board shall issue a license to practice as a natural hair care specialist to any individual who meets all of the following requirements:

(1) Successful completion of at least 300 hours of a natural hair care curriculum in an approved cosmetic art school.

(2) Passage of an examination conducted by the Board.

(3) Payment of the fees required by G.S. 88B-20.

§ 88B–11. Qualifications for licensing teachers.

(a) Applicants for any teacher's license issued by the Board shall meet all of the following requirements:

(1) Possession of a high school diploma or a high school graduation equivalency certificate.

(2) Payment of the fees required by G.S. 88B-20.

(b) The Board shall issue a license to practice as a cosmetology teacher to any individual who meets the requirements of subsection (a) of this section and who meets all of the following:

(1) Holds in good standing a cosmetologist license issued by the Board.

(2) Submits proof of either practice of cosmetic art in a cosmetic art shop, or any Board-approved employment capacity in the cosmetic arts industry, for a period equivalent to five years of full-time work immediately prior to application or successful completion of at least 800 hours of a cosmetology teacher curriculum in an approved cosmetic art school.
(3) Passes an examination for cosmetology teachers conducted by the Board.

(c) The Board shall issue a license to practice as an esthetician teacher to any individual who meets the requirements of subsection (a) of this section and who meets all of the following:

(1) Holds in good standing a cosmetologist or an esthetician license issued by the Board.

(2) Submits proof of either practice as an esthetician in a cosmetic art shop, or any Board–approved employment capacity in the cosmetic arts industry, for a period equivalent to three years of full-time work immediately prior to application or successful completion of at least 650 hours of an esthetician teacher curriculum in an approved cosmetic art school.

(3) Passes an examination for esthetician teachers conducted by the Board.

(d) The Board shall issue a license to practice as a manicurist teacher to any individual who meets the requirements of subsection (a) of this section and who meets all of the following:

(1) Holds in good standing a cosmetologist or manicurist license issued by the Board.

(2) Submits proof of either practice as a manicurist in a cosmetic art shop, or any Board–approved employment capacity in the cosmetic arts industry, for a period equivalent to two years of full-time work immediately prior to application or successful completion of at least 320 hours of a manicurist teacher curriculum in an approved cosmetic art school.

(3) Passes an examination for manicurist teachers conducted by the Board.

(e) The Board shall issue a license to practice as a natural hair care teacher to any individual who meets the requirements of subsection (a) of this section and who meets all of the following:

(1) Holds in good standing a natural hair care license issued by the Board.

(2) Submits proof of either practice as a natural hair care specialist in a cosmetic art shop or any Board–approved employment capacity in the cosmetic art industry for a period equivalent to two years of full-time work immediately prior to application or successful completion of at least 320 hours of a natural hair care teacher curriculum in an approved cosmetic art school.

§ 88B–12. Temporary employment permit; extensions; limits on practice.

(a) The Board shall issue a temporary employment permit to an applicant for licensure as an apprentice, cosmetologist, esthetician, natural hair care specialist, or manicurist who meets all of the following:
(1) Has completed the required hours of a cosmetic art school curriculum in the area in which the applicant wishes to be licensed.

(2) Has applied to take the examination within three months of completing the required hours.

(3) Is qualified to take the examination.

(b) A temporary employment permit shall expire six months from the date of graduation from a cosmetic art school and shall not be renewed.

(c) The holder of a temporary employment permit may practice cosmetic art only under the supervision of a licensed cosmetologist, manicurist, natural hair care specialist, or esthetician, as appropriate, and may not operate a cosmetic art shop.

§ 88B–13. Applicants licensed in other states.

(a) The Board shall issue a license to an applicant licensed as an apprentice, cosmetologist, esthetician, natural hair care specialist, or manicurist in another state if the applicant shows:

(1) The applicant is an active practitioner in good standing.

(2) The applicant has practiced at least one of the three years immediately preceding the application for a license.

(3) There is no disciplinary proceeding or unresolved complaint pending against the applicant at the time a license is to be issued by this State.

(4) The licensure requirements in the state in which the applicant is licensed are substantially equivalent to those required by this State.

(b) Instead of meeting the requirements in subsection (a) of this section, any applicant who is licensed as a cosmetologist, esthetician, natural hair care specialist, or manicurist in another state shall be admitted to practice in this State under the same reciprocity or comity provisions that the state in which the applicant is licensed grants to persons licensed in this State.

(c) The Board may establish standards for issuing a license to an applicant who is licensed as a teacher in another state. These standards shall include a requirement that the licensure requirements in the state in which the teacher is licensed shall be substantially equivalent to those required in this State and that the applicant shall be licensed by the Board to practice in the area in which the applicant is licensed to teach.
§ 88B–14. Licensing of cosmetic art shops.

(a) The Board shall issue a license to operate a cosmetic art shop to any applicant who submits a properly completed application, on a form approved by the Board, pays the required fee, and is determined, after inspection, to be in compliance with the provisions of this Chapter and the Board's rules.

(b) The applicant shall list all licensees who practice cosmetic art in the shop and shall identify each as an employee or a booth renter.

(c) A cosmetic art shop shall be allowed to operate for a period of 30 days while the Board inspects and determines the shop's compliance with this Chapter and the Board's rules. If the Board is unable to complete the inspection within 30 days, the shop will be authorized to operate until such an inspection can be completed.

(d) A license to operate a cosmetic art shop shall not be transferable from one location to another or from one owner to another.

§ 88B–15. Practice outside cosmetic art shops.

(a) Any individual licensed under this Chapter may visit the residences of individuals who are sick or disabled and confined to their places of residence in order to attend to their cosmetic needs. A licensed individual may also visit hospitals, nursing homes, rest homes, retirement homes, mental institutions, correctional facilities, funeral homes, and similar institutions to attend to the cosmetic needs of those in these institutions.

(b) An individual licensed under this Chapter may practice in a licensed barbershop as permitted by G.S. 86A-14.

§ 88B–16. Licensing cosmetic art schools.

(a) The Board shall issue a license to any cosmetic art school that submits a properly completed application, on a form approved by the Board, pays the required license fee, and is determined by the Board, after inspection, to be in compliance with the provisions of this Chapter and the Board's rules.

(b) No one may open or operate a cosmetic art school before the Board has approved a license for the school. The Board shall not issue a license before a cosmetic art school has been inspected and determined to be in compliance with the provisions of this Chapter and the Board's rules.

(c) Cosmetic art schools located in this State shall be licensed by the Board before any credit may be given for curriculum hours taken in the school. The Board may establish standards for approving hours from schools in other states that are licensed.
§ 88B–17. Bond required for private cosmetic art schools.

(a) Each private cosmetic art school shall provide a guaranty bond unless the school has already provided a bond or an alternative to a bond under G.S. 115D–95. The Board may restrict, suspend, revoke, or refuse to renew or reinstate the license of a school that fails to maintain a bond or an alternative to a bond pursuant to this section or G.S. 115D–95.

(b) (1) The applicant shall file the guaranty bond with the clerk of superior court in the county in which the school is located. The bond shall be in favor of the students. The bond shall be executed by the applicant as principal and by a bonding company authorized to do business in this State. The bond shall be conditioned to provide indemnification to any student or the student's parent or guardian who has suffered loss of tuition or any fees by reason of the failure of the school to offer or complete student instruction, academic services, or other goods and services as related to course enrollment for any reason, including suspension, revocation, or nonrenewal of a school's approval, bankruptcy, foreclosure, or the school's ceasing to operate.

(2) The bond amount shall be at least equal to the maximum amount of prepaid tuition held at any time by the school during the last fiscal year, but in no case shall be less than ten thousand dollars ($10,000). Each application for license or license renewal shall include a letter signed by an authorized representative of the school showing the calculations made and the method of computing the amount of the bond in accordance with rules prescribed by the Board. If the Board finds that the calculations made and the method of computing the amount of the bond are inaccurate or that the amount of the bond is otherwise inadequate to provide indemnification under the terms of the bond, the Board may require the applicant to provide an additional bond.

(3) The bond shall remain in force and effect until canceled by the guarantor. The guarantor may cancel the bond upon 30 days' notice to the Board. Cancellation of the bond shall not affect any liability incurred or accrued prior to the termination of the notice period.

(c) An applicant who is unable to secure a bond may seek from the Board a waiver of the guaranty bond requirement and approval of one of the guaranty bond alternatives set forth in this subsection. With the approval of the Board, an applicant may file one of the following instead of a bond with the clerk of court in the county in which the school is located:

(1) An assignment of a savings account in an amount equal to the bond required that is in a form acceptable to the Board, and is executed by the applicant and a state or federal savings and loan association, state bank, or national bank that is doing business in this State and whose accounts are insured by a federal depositor's corporation, and access to the account is subject to the same conditions as those for a bond in subsection (b) of this section.

(2) A certificate of deposit that is executed by a state or federal savings and loan association, state bank, or national bank that is doing business in this State and whose
accounts are insured by a federal depositor's corporation and access to the certificate of deposit is subject to the same conditions as those for a bond in subsection (b) of this section.

§ 88B–18. Examinations.

(a) Repealed by Session Laws 2006–212, s. 2, effective August 8, 2006.

(b) Each examination shall have both a practical and a written portion.

(c) Examinations for applicants for apprentice, cosmetologist, teacher, esthetician, natural hair care specialist, and manicurist licenses shall be given in at least three locations in the State that are geographically scattered. The examinations shall be administered in Board-approved facilities.

(d) An applicant for a cosmetologist, esthetician, manicurist, natural hair care specialist, or teacher’s license who fails to pass the examination three times may not reapply to take the examination again until after the applicant has successfully completed any additional requirements prescribed by the Board.

§ 88B–19. Expired school credits.

No credit shall be approved by the Board if five years or more have elapsed from the date a person enrolled in a cosmetic art school unless the person completed the required number of hours and filed an application to take an examination administered by the Board.

§ 88B–20. Fees required.

(a) The Board may charge the applicant the actual cost of preparation, administration, and grading of examinations for cosmetologists, apprentices, manicurists, estheticians, natural hair care specialist, or teachers, in addition to its other fees.

(b) The Board may charge application fees as follows:

(1) Inspection of a newly established cosmetic art shop............................ $ 25.00

(2) Reciprocity applicant under G.S. 88B-13........................................... $ 15.00.

(c) The Board may charge license fees as follows:

(1) Cosmetologist................................................................. $ 39.00 every 3 years
(2) Apprentice............................................................................... $ 10.00 per year
(3) Esthetician............................................................................... $ 10.00 per year
(4) Manicurist................................................................................ $ 10.00 per year
(4a) Natural hair care specialist....................................................... $ 10.00 per year
(5) Teacher............................................................................. $ 10.00 every 2 years
(6) Cosmetic art shop per active booth............................................. $ 3.00 per year
(7) Cosmetic art school................................................................... $ 50.00 per year
(8) Duplicate license........................................................................ $ 1.00

(d) The Board may require payment of late fees and reinstatement fees as follows:

(1) Apprentice, cosmetologist, esthetician, manicurist, natural hair care specialist, and
teacher late renewal............................................................... $ 10.00

(2) Cosmetic art schools and shops late renewal................................. $ 10.00

(3) Reinstatement – cosmetic art schools and shops.......................... $ 25.00

(e) The Board may prorate fees as appropriate.

§ 88B–21. Renewals; expired licenses; inactive status.

(a) Each license to operate a cosmetic art shop shall be renewed on or before the first day of February of each year. As provided in G.S. 88B-20, a late fee shall be charged for licenses renewed after February 1. Any license not renewed by March 1 of each year shall expire. A cosmetic art shop whose license has been expired for one year or less shall have the license reinstated immediately upon payment of the reinstatement fee, the late fee, and all unpaid license fees. The licensee shall submit to the Board, as a part of the renewal process, a list of all licensed cosmetologists who practice cosmetic art in the shop and shall identify each as an employee or a booth renter.

(b) Cosmetologist licenses shall be renewed on or before October 1 every three years beginning October 1, 1998. A late fee shall be charged for renewals after that date. Any license not renewed shall expire on October 1 of the year that renewal is required. The Board may develop and implement a plan for staggered license renewal and may prorate license fees to implement such a plan.
(c) Apprentice, esthetician, natural hair care specialist, and manicurist licenses shall be renewed annually on or before October 1 of each year. A late fee shall be charged for the renewal of licenses after that date. Any license not renewed shall expire on October 1 of that year.

(d) Teacher licenses shall be renewed every two years on or before October 1. A late fee shall be charged for the renewal of licenses after that date. Any license not renewed shall expire on October 1 of that year.

(e) Prior to renewal of a license, a teacher, cosmetologist, esthetician, natural hair care specialist, or manicurist shall annually complete eight hours of Board–approved continuing education for each year of the licensing cycle. A cosmetologist may complete up to 24 hours of required continuing education at any time within the cosmetologist's three–year licensing cycle. Licensees shall submit written documentation to the Board showing that they have satisfied the requirements of this subsection. A licensee who is in active practice as a cosmetologist, esthetician, natural hair care specialist, or manicurist, has practiced for at least 10 consecutive years in that profession, and is 60 years of age or older does not have to meet the continuing education requirements of this subsection. A licensee who is in active practice as a cosmetologist and has at least 20 consecutive years of experience as a cosmetologist, does not have to meet the continuing education requirements of this subsection, but shall report any continuing education classes completed to the Board, whether the continuing education classes are Board–approved or not. Promotion of products and systems shall be allowed at continuing education given in–house or at trade shows. Continuing education classes may also be offered in secondary languages as needed. No member of the Board may offer continuing education courses as required by this section.

(f) If an apprentice, cosmetologist, esthetician, manicurist, natural hair care specialist, or teacher fails to renew his or her license within five years following the expiration date, the licensee shall be required to pass an examination as prescribed by the Board before the license will be reinstated.

(g) Cosmetic art school licenses shall be renewed on or before October 1 of each year. A late fee shall be charged for licenses renewed after that date. Any license not renewed by November 1 of that year shall expire. A cosmetic art school whose license has been expired for one year or less shall have its license reinstated upon payment of the reinstatement fee, the late fee, and all unpaid license fees.

(h) Upon request by a licensee for inactive status, the Board may place the licensee's name on the inactive list so long as the licensee is in good standing with the Board. An inactive licensee is not required to complete continuing education requirements. An inactive licensee shall not practice cosmetic art for consideration. However, the inactive licensee may continue to purchase supplies as accorded an active licensee. When the inactive licensee desires to be removed from the inactive list and return to active practice, the inactive licensee shall notify the Board of his or her desire to return to active status and pay the required fee as determined by the Board. As a condition of returning to active status, the
Board may require the licensee to complete eight to 24 hours of continuing education pursuant to subsection (e) of this section.

§ 88B–22. Licenses required; criminal penalty.

(a) Except as provided in this Chapter, no person may practice or attempt to practice cosmetic art for pay or reward in any form, either directly or indirectly, without being licensed as an apprentice, cosmetologist, esthetician, natural hair care specialist, or manicurist by the Board.

(b) Except as provided in this Chapter, no person may practice cosmetic art or any part of cosmetic art, for pay or reward in any form, either directly or indirectly, outside of a licensed cosmetic art shop.

(c) No person may open or operate a cosmetic art shop in this State unless a license has been issued by the Board for that shop.

(d) An individual licensed as an esthetician, natural hair care specialist, or manicurist may practice only that part of cosmetic art for which the individual is licensed.

(d1) No person may teach cosmetic art in a Board approved cosmetic art school unless the person is a teacher licensed under this Chapter. A guest lecturer may be exempt from the requirements of this subsection upon approval by the Board.

(e) An apprentice licensed under the provisions of this Chapter shall apprentice under the direct supervision of a cosmetologist. An apprentice shall not operate a cosmetic art shop.

(f) A violation of this Chapter is a Class 3 misdemeanor.

§ 88B–23. Licenses to be posted.

(a) Every apprentice, cosmetologist, esthetician, manicurist, natural hair care specialist, and teacher licensed under this Chapter shall display the certificate of license issued by the Board within the shop in which the person works.

(b) Every certificate of license to operate a cosmetic art shop or school shall be conspicuously posted in the shop or school for which it is issued.

§ 88B–24. Revocation of licenses and other disciplinary measures.

The Board may restrict, suspend, revoke, or refuse to issue, renew, or reinstate any license for any of the following:
(1) Conviction of a felony shown by certified copy of the record of the court of conviction.

(2) Gross malpractice or gross incompetency as determined by the Board.

(3) Advertising by means of knowingly false or deceptive statements.

(4) Permitting any individual to practice cosmetic art without a license or temporary employment permit, with an expired license or temporary employment permit, or with an invalid license or temporary employment permit.

(5) Obtaining or attempting to obtain a license for money or other thing of value other than the required fee or by fraudulent misrepresentation.

(6) Practicing or attempting to practice by fraudulent misrepresentation.

(7) Willful failure to display a certificate of license as required by G.S. 88B-23.

(8) Willful violation of the rules adopted by the Board.

(9) Violation of G.S. 86A–15 by a cosmetologist, esthetician, natural hair care specialist, or manicurist licensed by the Board and practicing cosmetic art in a barbershop.

§ 88B–25. Exemptions.

The following persons are exempt from the provisions of this Chapter while engaged in the proper discharge of their professional duties:

(1) Undertakers and funeral establishments licensed under G.S. 90–210.25.

(2) Persons authorized to practice medicine or surgery under Chapter 90 of the General Statutes.

(3) Nurses licensed under Chapter 90 of the General Statutes.

(4) Commissioned medical or surgical officers of the United States Army, Air Force, Navy, Marine, or Coast Guard.

(5) A person employed in a cosmetic art shop to shampoo hair


(a) The Board shall furnish a copy of its rules relating to sanitary management of cosmetic art shops and cosmetic art schools to each shop and school licensed by the Board. Each shop and school shall post the rules in a conspicuous place.
(b) The Board shall furnish a copy of its rules relating to curriculum and schools to each licensed cosmetic art school. Each cosmetic art school shall make these rules available to all teachers and students.

§ 88B–27. Inspections.

Any inspector or other authorized representative of the Board may enter any cosmetic art shop or school to inspect it for compliance with this Chapter and the Board's rules. All persons practicing cosmetic art in a shop or school shall, upon request, present satisfactory proof of identification. Satisfactory proof shall be in the form of a photographic driver's license or photographic identification card issued by any state, federal, or other government entity. The Board may require a cosmetic art shop or school to be inspected as a condition for license renewal.


The Board, the Department of Health and Human Services, or any county or district health director may apply to the superior court for an injunction to restrain any person from violating the provisions of this Chapter or the Board's rules. Actions under this section shall be brought in the county where the defendant resides or maintains his or her principal place of business or where the alleged acts occurred.

§ 88B–29. Civil penalties.

(a) Authority to Assess Civil Penalties. – In addition to taking any of the actions permitted under G.S. 88B-24, the Board may assess a civil penalty not in excess of one thousand dollars ($1,000) for the violation of any section of this Chapter or the violation of any rules adopted by the Board. The clear proceeds of any civil penalty assessed under this section shall be remitted to the Civil Penalty and Forfeiture Fund in accordance with G.S. 115C–457.2.

(b) Consideration Factors. – Before imposing and assessing a civil penalty and fixing the amount thereof, the Board shall, as a part of its deliberations, take into consideration the following factors:

(1) The nature, gravity, and persistence of the particular violation.

(2) The appropriateness of the imposition of a civil penalty when considered alone or in combination with other punishment.

(3) Whether the violation was willful and malicious.
(4) Any other factors that would tend to mitigate or aggravate the violations found to exist.

(c) **Schedule of Civil Penalties.** – The Board shall establish a schedule of civil penalties for violations of this Chapter. The schedule shall indicate for each type of violation whether the violation can be corrected. Penalties shall be assessed for the first, second, and third violations of specified sections of this Chapter and for specified rules.

(d) **Costs.** – The Board may in a disciplinary proceeding charge costs, including reasonable attorneys' fees, to the licensee against whom the proceedings were brought.

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POST COURSE LEARNING ASSESSMENT ANSWER SHEET

At the end of each of the courses section you can find a post course learning assessment. Answer the assessment questions at the end of each section using the answer grid below to record your answers. Carefully detach this sheet and select one answer per question by filling in the box next to the correct answer. After completing the post course learning assessments for each section click on the link in the bottom box to open the online quiz and enter you answers in the online quiz using the answers you entered on the answer sheet. You can also open the online quiz by returning to the web page where you opened this training booklet and click on the large yellow button labeled “Click Here To Open Online Quiz”. You can also call and give your answers over the phone, or you can mail in this completed answer grid, along with the completed licensee Information page and your course fee payment, check or money order. Mail to the address at the bottom of the licensee Information page.

1- HIV / AIDS AND OTHER DISEASES

1. TRUE ☐ FALSE ☐
2. TRUE ☐ FALSE ☐
3. TRUE ☐ FALSE ☐
4. TRUE ☐ FALSE ☐
5. TRUE ☐ FALSE ☐
6. TRUE ☐ FALSE ☐
7. TRUE ☐ FALSE ☐
8. TRUE ☐ FALSE ☐
9. TRUE ☐ FALSE ☐
10. TRUE ☐ FALSE ☐
11. TRUE ☐ FALSE ☐
12. TRUE ☐ FALSE ☐

2- SANITATION, STERILIZATION & NCAC SALON REQUIREMENTS

13. TRUE ☐ FALSE ☐
14. TRUE ☐ FALSE ☐
15. TRUE ☐ FALSE ☐
16. TRUE ☐ FALSE ☐
17. TRUE ☐ FALSE ☐
18. TRUE ☐ FALSE ☐
19. TRUE ☐ FALSE ☐
20. TRUE ☐ FALSE ☐
21. TRUE ☐ FALSE ☐
22. TRUE ☐ FALSE ☐
23. TRUE ☐ FALSE ☐
24. TRUE ☐ FALSE ☐

3- OSHA FOR THE NORTH CAROLINA SALON

25. TRUE ☐ FALSE ☐
26. TRUE ☐ FALSE ☐
27. TRUE ☐ FALSE ☐
28. TRUE ☐ FALSE ☐
29. TRUE ☐ FALSE ☐

4- North Carolina Cosmetic Arts Laws & Rules

30. TRUE ☐ FALSE ☐

CLICK HERE TO TAKE THE QUIZ ONLINE

If you need an additional answer sheet you can print one online at www.1StopCEUs.com/answersheet_crs1.pdf
HIV/AIDS AND OTHER COMMUNICABLE DISEASES

This is the learning assessment portion of the 1Stop 24 hour Continuing Education Course, in this section you will test your retention of the material that you have just read. Take your time when selecting the correct response. It sometimes helps to read the question over if you are not sure. Read each question carefully, decided if the statement is true or if it is false, circle the correct response directly below the statement. Circle only one response per questions, any questions that are unanswered, or if both responses are selected is counted as an incorrect answer.

1. Anonymous HIV testing is available through health departments and is not name based.
   True   False

2. A latex condom can help prevent the transfer of AIDS.
   True   False

3. People with HIV are easy to identify.
   True   False

4. You can get the AIDS virus while donating blood or plasma.
   True   False

5. HIV is spread from one person to another through sharing of needles, unprotected sexual contact, blood and body fluid.
   True   False
6. AIDS is a virus that causes HIV.
   True  False

7. Discriminating against people who are infected with HIV/AIDS violates their human rights.
   True  False

8. The first sign of syphilis is generally a sore that is painless and becomes visible at the site of initial contact.
   True  False

9. A female with untreated syphilis can transmit the disease to her unborn child.
   True  False

10. Tuberculosis is spread through the air.
    True  False

11. People with AIDS understand why others don’t want to be around them.
    True  False

12. There is now a vaccine to cure AIDS if it is detected early enough.
    True  False

POST COURSE LEARNING ASSESSMENT QUESTIONS SECTION – 2

SANITATION, STERILIZATION, AND NCAC SALON REQUIREMENTS

13. Sterilization is the process of destroying all bacteria.
    True  False

14. It is required by law to use a sanitary towel or neck strip around the client’s neck to avoid contact of the shampoo cape with a client’s skin.
    True  False
15. Some viruses are so small they will easily pass through filters.
   True   False

16. Bacteria are responsible for a large degree of illness and suffering.
   True   False

17. Pathogenic organisms are harmful because they produce disease.
   True   False

18. The “active stage” is when bacteria grow and reproduce.
   True   False

19. “General infection” is the least dangerous stage of an infection.
   True   False

20. Formalin and Phenol are not poisonous.
    True   False

21. A human carrier is a person who may be immune to a disease, but carries germs that can infect others.
    True   False

22. Clients with an infectious disease can be served in a salon if they are kept in a separate room from all the other clients while the service is being performed.
    True   False

23. Skin infections can be caused by the transfer of infectious material from one individual to another.
    True   False

24. When using chemicals it is okay to deviate from the manufacturer’s directions if you have used them before and nothing bad happened.
    True   False
25. The FDA makes sure that the chemicals used in a salon are safe if used properly.  
   True   False

26. Acetone is not a hazardous chemical.  
   True   False

27. Cosmetologists are exposed to possible toxic chemicals everyday.  
   True   False

28. Material Safety Data Sheets (MSDS) must to be supplied to you by all manufacturers.  
   True   False

29. The Precautions for the “Safe Handling and Use” section of the MSDS sheet does not tell you what to do if you spill the product.  
   True   False

30. Following sanitation rules and regulations play a critical role in the protection of the health and welfare of the public.  
   True   False
Information Sheet

Please mark all of your answers clearly on the answer sheet. Mark only one answer for each question. Include your check or money order, the answer sheet, and this information sheet. Please fill out the information on the form below. **Make sure you print clearly!**

Name________________________________________________________________________
   LAST       FIRST

North Carolina License Number___________________________________________________

Name as seen on your license _____________________________________________________

Address_______________________________________________________________________

City________________________________________ State _____ Zip ______________

Day Phone____(_____)____________________ Evening Phone____(______)______________

Signature ________________________________ Date ______________________

* E-mail address

(E-mail address is required, confirmation that your report was sent, a link for you to print your certificate of course completion, and notification email if any processing issues were found such as not passing or incorrect course selected are emailed to you at the email address that you provide on this form, invalid or incorrectly typed email address, or if you do not return to your email address that you give to check for our follow-up email prevent you from successfully completing the processing of the course completion records for this course).  

On a scale of 1 to 10, 1 to disagree and 10 to completely agree, please rate this course. Circle one only.

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Send:

1. The Answer Sheet
2. The Information Sheet
3. And a Check for $43.95 payable to: FLCEO (online quiz saves you $20.00)

Mail to:
FLCEO/ Eva Price
5041 BASIN AVE
MILTON FL 32583

* By completing the the online quiz and making your payment online you can save time and money over mailing your answers and payment. This is because it requires less time and staffing to process your records and we pass the savings on to you. If you want to complete this course online [Click Here] then enter the answers that you entered on your completed answer sheet into the online quiz.
Look Before You Mail!

One Last Reminder! Please check your envelope to be sure that you have included the answer sheet, the information sheet and, that your check is signed and is made out for $43.95. Also check the envelope for a full address and a return address.

IMPORTANT NOTE ABOUT YOUR CERTIFICATE AND ELECTRONIC COURSE REPORTING

Remember to write clearly on the information sheet and to give an email address that you will return to so you can find open and read the follow-up email that we will send you at the time that we process your assessment and send a report to the state for you. If we cannot understand what has been entered on the information sheet we can not contact you to let you know if the reporting was successful and send you the link you need to print your certificate, or to notify you if there is an issue.

North Carolina no longer required CE providers to send Electronic reports. We receive and process your course learning assessment and course fee payment, and maintain those records for you. If you complete this course by US mail we will email you a link for you to use so you can go online to print your certificate of completion for this course. Our email will also let you know if the processing of your CE course completion records was successful. If you used the online quiz and paid your course fees online you are able to print your certificate at the time you pay and we do not send you an email with the link to your certificate. You will receive two receipts by email for the same transaction. These receipts are sent automatically by the system from the company that processes card payment transactions for us.

Alternatively if we run into an issue with the processing of your assessment or any other item regarding this course completion, we will send you an email notifying you that we ran into an issue along with the instructions on the action you need to take to correct the issue. It is your responsibility to return to the email inbox for the email address that you give us on the information page that you are required to mail us at the time you mail your answer sheet to retrieve the link and print your course certificate or to check for any issues we may have ran into. If you do not return to your email inbox and there was an issue with your processing you will not know about it and it could cost you valuable time and money. Please take the time to follow through by checking for the email that we will send you. The email will be sent at the time we receive your test questions answer sheet. Also your information will be kept in our records database permanently for purposes of providing verification that you completed your CE credits when you are audited.

A link to print your certificates online is the method used to provide you with your course completion certificate for this course. We do not send hard copies of certificates of course completion, we are an Internet based company and we provide certificates of course completion in the same manner that the course training document used to complete the course was made available, that being electronically from our website. You are able to print the certificate online at our web site after successfully completing the online quiz or after we receive your assessment that you printed online and mailed to us, then you can print your certificate on our web site by using the link that we provide in the email we send. If you have problems with your printer you can move to another computer that has an Internet connection and a working printer to print your certificate. The public library, or the local office supply location provides computers and printing resources that you can use to print your certificate of completion, using the link that we will email to you in the follow-up email. The course is accessed on the Internet and the certificate is provided to you to a course in the same manner that you accessed the course and is the way that our company meets the legally requirement to provide a certificate and/or copies of the certificate to participants of our courses.

You can call your answers and your course fee payment in over the phone for faster service if you cannot complete and pay for the course using the online quiz by contacting our office at: 321-217-0554.

Thank you again for your patronage! If you have any questions regarding the course material or the testing process, please feel at liberty to contact our office at: 321-217-0554 or for urgent issues 407-796-3472
You can E-mail us at: info@cosmetologyceo.com or you can write to:

FLCEO/Eva Price
5041 BASIN AVE
MILTON, FL 32583

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