

Table 4: Detailed Infection Prevention and Control Procedures for Electrolysis

Adapted from *Infection Prevention and Control Practices for Personal Services: Tattooing, Ear/Body piercing, and Electrolysis*. Health Canada, July 1999.

		Equipment/Supplies	Use During Electrolysis	Procedures for Infection Prevention
1.	Client preparation	<ul style="list-style-type: none"> ➤ Single-use paper or laundered towel ➤ Eye shield ➤ Wet sponge pad with holder ➤ Dental lip rolls 	<p>Drape the towel around electrolysis treatment area of the client.</p> <p>Protect client's eyes from injury and lamp glare during electrolysis involving the face.</p> <p>Hold in clients hand to complete the electrical circuit in the galvanic/blend (not thermolysis) method.</p> <p>Lip rolls may be used to create a taut skin surface for electrolysis, e.g. the upper lip.</p>	<p>The towel offers added protection for supplies and equipment that may touch surfaces near the treatment area, e.g. the client's clothes.</p> <p>After each client service, detergent and water must be used to clean the eye shields, followed by low-level disinfection.</p> <p>The sponge pad should be cleaned in detergent and water after client use. The single-use conductive gel pad must be discarded after client service.</p> <p>Dental lip rolls shall be discarded after each client service.</p>
2.	Skin Preparation	<ul style="list-style-type: none"> ➤ Topical anesthetic (optional) ➤ Skin antiseptic ➤ Clean swabs e.g. cotton balls, gauze or single-use cotton applicators ➤ Pump pack containing the antiseptic 	<p>A topical anesthetic may be used to decrease client discomfort during electrolysis.</p> <p>A non-irritating antiseptic is used to cleanse the skin before electrolysis.</p>	<p>Whenever a topical anesthetic is used on a client site, it must be applied with a clean, single-use, disposable swab. The anesthetic should be applied on the site before the skin is cleansed with an antiseptic.</p> <p>Antiseptic should be applied to the clean swab using a pump pack. Pre-packaged antiseptic swabs may be used.</p> <p>Care should be taken to avoid the antiseptic coming into contact with the eyes and mouth during electrolysis. Cotton applicators moistened with water may be used to clean the treatment area near the eyes.</p>
3.	Epilator	<ul style="list-style-type: none"> ➤ Client sponge holder cord ➤ Needle holder and cord ➤ Button/knob controls 	<p>Conducts the electric current for electrolysis. Button/knobs are to control current intensity and times.</p>	<p>The epilator button/knob controls shall be cleaned then wiped with a low-level disinfectant after each client service or covered with single-use plastic or cleaned then disinfected with an intermediate to high-level disinfectant.</p>

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6.	Additional supplies	<ul style="list-style-type: none"> ➤ Tray, e.g. metal or glass ➤ Magnifying lamp and the arm holding it/ glasses or microscope and light source, e.g. lamp <p>“Dirty instrument” container with lid (containing water or detergent and water)</p> <ul style="list-style-type: none"> ➤ Ultrasonic cleaner/manual cleaning <p>➤ Sharps container</p>	<p>Rest instruments/supplies on the tray during the procedure. Permits visualization of the treatment area.</p> <p>Used instruments are stored in water or a detergent and water solution to prevent drying of body proteins onto instrument prior to manual or ultrasonic cleaning.</p> <p>An ultrasonic that contains detergent and water may be used to clean instruments.</p> <p>Electrolysis needles or lancets must be discarded into an approved sharps container immediately after use.</p>	<p>Trays shall be cleaned then low-level disinfected after each client service. Equipment surfaces touched by the practitioner shall be cleaned then disinfected with a low-level disinfectant after each client. Alternatively, surfaces may be covered with single-use plastic that is discarded and changed between each client.</p> <p>The dirty instrument container must be cleaned daily and then subjected to low-level disinfection. The solution in the container must be changed daily.</p> <p>The ultrasonic cleaner must be cleaned daily with detergent and water. A fresh solution of detergent and water shall be placed in the device each day. If solution becomes visibly dirty ultrasonic cleaner should be emptied, cleaned and filled with fresh solution. The ultrasonic cleaner does not sterilize the instruments. If manual cleaning is done, follow the instructions outlined in 5.2.2. Puncture-resistant sharps containers must be used to help prevent needle injuries.</p>
7.	Client aftercare	<ul style="list-style-type: none"> ➤ Skin antiseptic swabs ➤ Ointment or mild astringent 	<p>An antiseptic that cleanses the skin.</p> <p>Ointment/astringent may be used to soothe the skin and promote skin healing.</p>	<p>Antiseptic should be applied with a clean swab dispensed from a pump pack containing the antiseptic or prepackaged single-use antiseptic swabs should be used. A single-use wooden tongue depressor or spatula should be used to remove ointment from a bulk container to apply to the skin. If removing a large amount of ointment, use a single-use spatula/tongue depressor and dispense into a smaller single-use container. The spatula must be discarded into a waste bin after single-use. Do not double dip. Apply astringent or ointment with a clean swab or clean gloved hands. Clients shall be instructed to avoid touching skin that has undergone electrolysis or to touch only with washed hands. The client should avoid using make-up or any cosmetic products in the area that has been worked on according to the practitioner’s advice. Clients shall be given written aftercare instructions.</p>

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8.	Practitioner supplies	<ul style="list-style-type: none"> ➤ Hand washing soap ➤ Alcohol-based hand rubs ➤ Hand Lotion ➤ Single-use gloves (e.g. latex, neoprene, nitrile, or vinyl) 	<p>Soap is used to remove dirt and some microorganisms from the practitioner's hands.</p> <p>Alcohol-based hand rubs containing between 60-90% alcohol can be used to perform hand hygiene when hands are not visibly soiled.</p> <p>Lotions are used to prevent skin from drying and cracking and to keep the skin in good condition.</p> <p>Single-use gloves must be worn when hands are expected to come in contact with blood or body fluids. Gloves shall also be worn when working on an infected hair follicle, or if the practitioner has cuts or other breaks in the skin.</p>	<p>Refer to general recommendations.</p> <p>Single-use gloves must be worn for all procedures involving:</p> <ul style="list-style-type: none"> • Breaking through skin • Expected contact with mucous membranes • Expected contact with blood or body fluids <p>Single-use gloves act as a barrier and reduce the potential transfer of microorganisms between the client and the electrologist. Hand hygiene must be performed before gloves are applied and after glove removal. Gloves are not a substitute for hand hygiene. Cuts/breaks in the skin shall be covered with a waterproof dressing before the gloves are applied.</p>

For more information, call

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