

**BY ORDER OF THE  
SECRETARY OF THE AIR FORCE**

**DEPARTMENTAL AIR FORCE  
INSTRUCTION 48-117**



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***Aerospace Medicine***

***PUBLIC FACILITY SANITATION***

**COMPLIANCE WITH THIS PUBLICATION IS MANDATORY**

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This instruction implements Air Force Policy Directive (AFPD) 48-1, *Aerospace and Operational Medicine Enterprise (AOME)*. It prescribes the minimum sanitary standards for public facilities on Air Force Installations. This publication applies to the entire Department of the Air Force, including the United States Air Force, the United States Space Force, the Air Force Reserve, and the Air National Guard. Note that all references to United States Air Force-specific terminology should be interpreted to apply to the Department of the Air Force, including the United States Space Force, as appropriate. This instruction applies to employees working under government contract or private contractors performing work under government contracts, or State employees with traditional Guard positions, who are covered under their organizational standards. Contractors are solely responsible for compliance with Occupational Safety and Health Administration (OSHA) standards and the protection of their employees unless otherwise specified in their contract. This instruction does not apply to industrial or administrative workplaces or bodies of water such as swimming pools (see [paragraph 3.4](#) for shower areas in swimming pools). Ensure all records generated as a result of processes prescribed in this publication adhere to Air Force Instruction 33-322, *Records Management and Information Governance Program*, and are disposed in accordance with the Air Force Records Disposition Schedule, which is located in the Air Force Records Information Management System. Field activities must send implementing publications to the higher headquarters (HQ) functional office of primary responsibility (OPR) for review and coordination before publishing. Send comments and suggested improvements on DAF Form 847, *Recommendation for Change of Publication*, through appropriate functional chain of command, to the Air Force Medical Readiness Agency, Public Health Branch (AFMRA/SG3PM),

7700 Arlington Blvd, Falls Church, VA 22042-5151. The authorities to waive wing, unit, delta, or garrison level requirements in this publication are identified with a Tier (“T-0, T-1, T-2, T-3”) number following the compliance statement. See DAFMAN 90-161, *Publishing Processes and Procedures*, Table A10.1 for a description of the authorities associated with the Tier numbers. Submit requests for waivers through the chain of command to the appropriate Tier waiver approval authority, or alternately, to the publication OPR for non-tiered compliance items.

### ***SUMMARY OF CHANGES***

This interim change **hereby redesignates** AFI 48-117, *Public Facility Sanitation*, **as Department of the Force Instruction (DAFI) 48-117 and revises it by** adding guidance regarding tattoo studio operations on Department of Air Force installations **and applicability to the United States Space Force.**

## Chapter 1

### PROGRAM OVERVIEW

**1.1. Program Overview.** Sanitation standards outlined in this instruction apply to public facilities on Air Force installations. AFI 48-117 is a supplement to applicable federal, state, local and tribal regulations. Installations must ensure familiarity with and adherence to additional Department of Defense (DoD), United States Air Force (USAF), Federal, state, local/tribal regulations (such as, State/local guidelines for child daycare centers, swimming pools, and detention centers). (T-0).

## Chapter 2

### ROLES AND RESPONSIBILITIES

#### **2.1. The Air Force Surgeon General (HQ USAF/SG) will:**

- 2.1.1. Serve as the Office of Primary Responsibility for providing oversight and guidance for the Public Facility Sanitation Program.
- 2.1.2. Establish resources and implementation instructions for Public Facility Sanitation program to protect public health.

#### **2.2. The Air Force Medical Readiness Agency (HQ AFMRA) will:**

- 2.2.1. Develop and update Public Facility Sanitation instructions and guidance in coordination with Major Commands (MAJCOMs), the Army and Air Force Exchange Service (Exchange), HQ USAF, and Secretary of the Air Force staff.
- 2.2.2. Establish a planning, programming and budgeting mechanism to advocate for and distribute Defense Health Program funds to conduct Public Facility Sanitation surveillance.

#### **2.3. The United States Air Force School of Aerospace Medicine (USAFSAM) will:**

- 2.3.1. Provide technical consultation regarding Public Facility Sanitation surveillance, outbreaks, and events of public health concern.
- 2.3.2. Develop and teach curriculum on technical aspects of the Public Facility Sanitation Program.

#### **2.4. The Air Force Civil Engineer (HQ USAF/A7C) will** provide technical consultation on pest management and sanitation standards.

#### **2.5. Air Force Services Activity will** provide Air Force Services operational guidance to implement policy, including applicable health standards/guidelines to ensure installation public facilities meet sanitation standards as outlined in this instruction.

#### **2.6. Army and Air Force Exchange Services (Exchange) will** ensure installation public facilities meet sanitation standards as outlined in this instruction. The Exchange will ensure that contractor health certificates (when required) will be filed in the contracting office, readily available for inspection by installation medical authorities. Maintain a suspense file to ensure re-examinations are accomplished when installation medical authorities or MAJCOMs require periodic health re-examination of personal service workers. (T-1).

#### **2.7. Installation Commanders or Director will:**

- 2.7.1. Oversee the overall operation, maintenance and sanitary conditions of Air Force facilities.
- 2.7.2. Determine when unsatisfactory facility conditions warrant timely closure of the facility in order protect health and/or facilitate corrective action, based on advice from the Medical Treatment Facility Commander (or equivalent).

#### **2.8. Mission Support Group Commander or Director will :**

- 2.8.1. Ensure installation public facilities meet sanitation standards as outlined in this instruction. (T-1).

2.8.2. Ensure that contractor health certificates (when required) are filed in the contracting office, readily available for inspection by installation medical authorities. (T-1).

2.8.3. Maintain a suspense file to ensure re-examinations are accomplished when installation medical authorities or MAJCOMs require periodic health re-examination of personal service workers. (T-1).

2.8.4. At stand-alone AFRC installations, ensure Air Force public facilities are inspected for sanitation and that recommendations for the sanitary operation and maintenance of installation public facilities are given to the installation commander or other responsible persons. (T-1).

## **2.9. Base Civil Engineering will:**

2.9.1. Provide pest management services for installation public facilities. (T-2).

2.9.2. Consult with Public Health and Bioenvironmental Engineering in the development, construction, modification, and maintenance of public facilities. (T-2).

## **2.10. Medical Treatment Facility Commander or Director will:**

2.10.1. Ensure public Air Force facilities are inspected for sanitation. (T-1).

2.10.2. Ensure that recommendations for the sanitary operation and maintenance of installation public facilities are given to the installation commander or other responsible persons. (T-1).

2.10.3. Coordinate with Army and/or Navy medical commanders at Joint Bases to delineate Service responsibilities for installation public facility sanitary inspections.

2.10.4. Coordinate with the Medical Commander of collocated ANG units to delineate responsibilities for installation public facility sanitary inspections. Reservist Public Health personnel at collocated Reserve units should be encouraged to participate in public facility sanitary inspections as available.

## **2.11. Aerospace Medicine Council will:**

2.11.1. Determine if personal service workers need medical examinations based on local circumstances, for example, locations outside the continental United States (OCONUS). Aerospace Medicine Council will ensure medical examinations are not provided at the expense of the government unless stipulated in the contract. (T-2).

2.11.2. Develop procedures to ensure workers (including contractors according to applicable contracts) can get examinations routinely if needed or when they develop a disease that can be transmitted through skin contact or respiratory route. (T-2).

2.11.3. Review and approve routine inspection frequencies recommended by Public Health. (T-2).

## **2.12. Public Health will:**

2.12.1. Provide an annual report on the status of the installation Public Facility Sanitation Program to the Medical Treatment Facility Commander (or equivalent), the Force Support Squadron (FSS) Commander (or equivalent), the Mission Support Group Commander (or equivalent), Exchange General Manager and the Installation Commander (or equivalent). (T-1).

2.12.2. Provide medical expertise on public facility sanitation in-garrison and at deployed locations. Public Health will review and provide specific recommendations regarding public facility site selection in deployed locations. (T-1).

2.12.3. Inspect permanent and temporary installation public facilities at any time during business hours to verify that all phases of facility operations comply with this DAFI; document inspections using local Aerospace Medicine Council-approved forms and provide findings to the facility manager or supervisor. Facilities will receive either satisfactory or unsatisfactory ratings. (T-1) Facilities that conduct tattoo operations will receive ratings per the Interim Body Art Standards and Inspection Guide for Army Installations. (T-1) Public Health shall maintain reports for at least three years in accordance with AFI 33-322. (T-1)

2.12.3.1. Inspect base tattoo operations to verify compliance with this DAFI and the Interim Body Art Standards and Inspection Guide for Army Installations during pre-operational and routine facility inspections and document inspections using the U.S. Army Tattoo Business Inspection Checklist. (T-1)

2.12.4. Send unsatisfactory or non-compliant inspection reports (as well as chronic or significant repeat discrepancies) to the Operational Medical Readiness Squadron Commander (or equivalent), Medical Treatment Facility (MTF) Commander (or equivalent), and Mission Support Group Commander (or equivalent). (T-2)

2.12.4.1. At stand-alone AFRC installations, unsatisfactory or non-compliant inspection reports are sent directly to the Mission Support Group Commander (or equivalent) with copies sent to the Operational Medical Readiness Squadron Commander (or equivalent) and to the Reserve Medical Unit Commander (or equivalent). (T-2)

2.12.5. Send copies of unsatisfactory or non-compliant inspection reports of Exchange facilities through the Operational Medical Readiness Squadron Commander (or equivalent) and MTF Commander (or equivalent), to the local Exchange manager, and to Exchange Headquarters. (T-1)

2.12.6. For collocated installations where Active Duty is the host installation and the Air Reserve Component (ARC) Wing (ANG, or both) is the tenant, the Active Duty Medical Treatment Facility's Public Health Flight is the OPR. For non-collocated ARC (ANG, or both) installations, the full-time Bioenvironmental Engineering /Public Health Office is the OPR. (T-2).

### **2.13. Bioenvironmental Engineering will:**

2.13.1. Provide health risk assessment consultation during design phase of military construction projects. (T-2).

2.13.2. Provide health risk assessment consultation on solid waste disposal, ventilation, and drinking water quality. (T-2).

2.13.3. Complete items in 2.12 at ANG and AFRC locations that do not have Public Health support.

### **2.14. Facility Supervisors/Managers will:**

2.14.1. Ensure their facilities adhere to sanitation standards and requirements in accordance with this instruction, that staff are familiar with this instruction and with applicable DoD,

USAF, Federal or national, state, and local/tribal regulations, and that a copy of this instruction is available in the facility. (T-1).

2.14.2. Use integrated pest management procedures to control pests and to minimize the use of chemical pesticides in accordance with the installation pest management plan. (T-1).

2.14.3. Ensure that current licenses or certificates issued by state or other regulatory authority are displayed in the facility. (T-1).

2.14.4. Cooperate with the Public Health inspector performing sanitary inspections.

**2.15. United States Army Veterinary Services will** in accordance with DoD Directive 6400.04E, DoD *Veterinary Public and Animal Health Services*, and Air Force Joint Inspection (AFJI) 48-131, *Veterinary Health Services*, the United States Army Veterinary Services representative will ensure the inspection and oversight of animal care areas for sanitary and humane practices. This includes inspections of kennels, runs, stables, corrals, and other animal facilities on Government installations.

## Chapter 3

### STANDARDS AND PROCEDURES

#### 3.1. Sanitary Requirements.

3.1.1. Existing sanitation standards established by Federal, tribal, state or local authorities or by other Air Force policy documents also apply (e.g. AFI 34-144, *Child and Youth Programs*). If more than one set of standards applies, use the more stringent standard.

3.1.1.1. In accordance with DoD 1342.6-M, *Administrative and Logistic Responsibilities for DoD Dependents Schools* and pending publication of DAFI 91-202, *The US Air Force Mishap Prevention Program*, before the start of the school year, an inspection by qualified facility, physical security, safety, public health, bioenvironmental, and fire protection specialists to identify all facilities deficiencies and requirements and their relative priority for repair or maintenance.

3.1.2. Field sanitation requirements not contained in this instruction are detailed in Field Manual 21-10, *Field Hygiene and Sanitation*. Field water supply requirements are specified in AFMAN 48-138\_IP, *Sanitary Control and Surveillance of Field Water Supplies*.

3.1.3. Consult Public Health and Bioenvironmental Engineering to review proposed contract services or new public facilities for compliance with sanitary requirements.

3.1.4. All sinks used for hand-washing must have a sign posted “for hand washing only” and are supplied with running water, liquid or powdered soap, single use paper towels or air dryers, and a waste receptacle. Common-use towels are prohibited. Hand-washing sinks for personal service workers include hot and cold running water and single-use paper towels.

3.1.5. Surfaces and equipment that the general public may come in contact with are maintained, cleaned and sanitized or disinfected in accordance with this AFI. Non-disposable instruments shall be cleaned and sanitized or disinfected in accordance with [paragraph 3.8](#). In case of blood or body fluid contact on any surface in a public facility, apply a FDA or EPA-registered disinfectant per the directions on the label. Porous items that contact blood or body fluid are immediately double-bagged in plastic bags, sealed, and discarded in a closed trash container or, when available, a biohazard container.

#### 3.1.6. Facility Supervisors/Managers will:

3.1.6.1. Ensure water for drinking, cooking, and lavatory purposes must be potable in accordance with AFI 48-144, *Drinking Water Surveillance Program*.

3.1.6.2. Ensure plumbing systems are installed, modified, repaired and maintained according to the International Plumbing Code or local plumbing codes and in accordance with AFI 32-1067, *Water and Fuel Systems* and Unified Facilities Criteria 3-420-0.

3.1.6.3. Ensure hose bibs at janitor’s sinks have a backflow prevention device. (T-2).

3.1.6.4. Ensure drinking fountains have safe and sanitary designs and are designed with an arc projection sufficient enough to prevent the runoff from expelling back down the sides of the nozzle. (T-2).



3.1.6.5. Ensure drinking water containers are sanitized and protected from contamination. Transfer water from a "hauling" tank in a sanitary manner. When supplying single-use cups, provide a sanitary container for clean cups and a garbage bin for the used cups. Shared drinking cups are prohibited.

3.1.6.6. Ensure ice is made from potable water and is stored in a sanitary condition

3.1.6.7. Restrict all eating and drinking to specified areas. (T-1). All food service facilities and operations must comply with AFI 48-116, *Food Safety Program*.

### **3.2. Facility Maintenance Sanitation Standards.**

3.2.1. Keep grounds and the inside and outside of facilities clean, in good condition, and free of trash that may attract pests. Provide suitable waste cans that prevent trash from overflowing.

3.2.2. Seal areas around pipes, ducts, joints of structural elements, cove bases, and conduits so pests cannot enter.

3.2.3. Provide required supplies and equipment for housekeeping. Properly label cleaning compounds and hazardous substances. Store cleaning compounds and hazardous substances separately in an enclosed section to prevent accidental or intentional contamination.

3.2.4. Keep walking routes (indoors and outside) clear of safety hazards and adequately lit for cleaning.

### **3.3. Restrooms and Toilet Facility Sanitary Standards.**

3.3.1. Entryways must be clean and in good repair with tight fitting, self-closing doors that remain closed except during cleaning or maintenance.

3.3.2. Each restroom must have conveniently located hand washing sinks with soap and running water. Supply liquid or powdered soap when possible, rather than bar soap. Supply single-use towel dispensers and trash cans or air dryers in a convenient location. Common-use towels are prohibited.

3.3.3. Clean and sanitize bathrooms and toilet fixtures in accordance with approved custodial standards for specified facility.

3.3.4. Restrooms must have adequate ventilation and lighting. Restrooms with windows must have screens in accordance with [paragraph 3.11.2](#) of this instruction.

3.3.5. Restrooms must have garbage cans. Women's restrooms must have a covered container for sanitary napkins. Empty receptacles often to prevent overflow.

3.3.6. Temporary use of portable toilet facilities is permitted. Ensure garbage cans and portable hand washing facilities are available. If hand washing facilities are not feasible, ensure that hand sanitizer is available.

### **3.4. Showers, Saunas, Steam Rooms, Fitness Centers, Locker Rooms, and Other Bathing Facilities Sanitation Standards.**

3.4.1. Showers must be maintained in a clean, sanitary condition without plumbing defects.

3.4.2. Dressing and Locker Rooms must have:

3.4.2.1. Showers, floors, benches and toilet facilities cleaned and disinfected daily.

3.4.2.2. Adequate ventilation and ventilated clothing lockers.

3.4.2.3. Nonskid, easy-to-clean, and durable floor coverings. Do not use porous floor coverings that support bacterial growth.

3.4.3. Saunas and steam rooms:

3.4.3.1. Be cleaned and disinfected according to manufacturers' recommendations. Whirlpool baths, steam cabinets and other therapy type equipment must be disinfected between users with an effective disinfecting solution.

3.4.3.2. Have signs informing people of potential health problems from heat stress and the wear of appropriate attire (robe or towel).

3.4.3.3. Have a thermostatic control device which prevents saunas and steam rooms from exceeding 200° F (93°C) and 120° F (49°C) respectively. Steam pipes and heaters are shielded to prevent burns. Thermostatic control devices operability need to be checked in accordance with applicable federal, state, or local regulations.

3.4.3.4. Have doors with a window(s) to allow observation of the entire room. If equipped with a door lock, the door cannot be locked from inside the room but if locked, can be easily opened from inside the room.

3.4.4. Fitness Centers must:

3.4.4.1. Provide convenient materials for patrons to clean and disinfect fitness center equipment surfaces that come into contact with patrons' bare skin.

3.4.4.2. Maintain equipment, floors and playing/running surfaces in a safe operating condition. Repair or dispose of equipment with damaged surfaces that do not allow effective cleaning and disinfection or increase the risk of injury.

3.4.4.3. Disinfect common use items and air-dry thoroughly between uses by different patrons. If issued to patrons, towels and issued athletic clothing must be laundered before being reissued. (T-2).

3.4.4.4. Clean and disinfect gym equipment at least daily according to manufacturer's recommendations. (T-2).

3.4.4.5. Provide potable drinking water to accommodate patrons, staff and spectators in the fitness center and at outdoor athletic fields. Drinking water is provided in accordance with [paragraph 3.1.2](#).

3.4.4.6. Provide adequate lighting for ingress, egress, and cleaning.

**3.5. Laundry Facilities Sanitation Standards (includes coin-operated laundries, dormitory laundry rooms, and field laundries).**

3.5.1. Keep facilities sanitary, lint-free, in good repair, and free of pests.

3.5.2. The flow of linens must ensure that dirty linen does not contaminate the facility or clean linen during handling, storage, and transportation.

3.5.3. Hand washing facilities must be available in soiled linen areas.

### **3.6. Nail Salons, Day Spas, Barber Shops, Beauty Shops, Tattoo Studios, and Other Personal Services Sanitation Standards.**

3.6.1. Shops are physically separated from food and beverage services and sleeping quarters. However, shops can be located in the same building as a food service or sleeping area provided they have separate entrances and ventilation systems.

3.6.2. Carpeting is permitted only in customer waiting areas.

3.6.3. Shops must have hot and cold potable running water, sinks, and convenient restroom facilities.

3.6.4. Each shop must have suitable outer garment storage facilities, supply storage cabinets, and covered containers for bulk waste and soiled materials.

3.6.5. Minimum equipment for each barber shop station or beauty shop station. Each station must have:

3.6.5.1. One or more covered containers for disinfecting solutions.

3.6.5.2. One container for garbage.

3.6.5.3. At fixed facilities, a minimum of one conveniently located hand wash or shampoo sink for each two chairs. Temporary facilities have at a minimum one sink located within the service area of the facility. An additional sink is provided for every seven patron chairs or work stations. For example, a facility with seven work stations must have two or more sinks. Sinks may include a combination of shampoo sinks and general purpose (hand wash) sinks located outside of the toilet room.

3.6.5.4. Minimum hand-washing facilities include hot and cold water, soap dispensers, single use paper towels, and waste containers.

3.6.5.5. In new construction, specify faucets that minimize contamination. Specify wrist blade or knee-operated faucets, or other hands-free activated faucets used for employee hand-washing sinks and employee/patron bathrooms. Wrist blade faucets are not required at shampoo stations because they may pose a safety hazard and interfere with proper hair care.

### **3.7. Health and Personal Hygiene of Personal Service Workers.**

3.7.1. Personal Service workers including, but not limited to, barber and beauty shop hairdressers, estheticians, cosmetologists, manicurists, pedicurists, massage therapists and tattoo artists must:

3.7.1.1. Keep their person and clothing clean when serving patrons. Personal Service workers will change their outer smock or uniform at least daily and it will not be worn outside the work area. (T-2).

3.7.1.2. Wash their hands thoroughly with soap and water after each patron, handling trash, performing custodial duties, eating or drinking, or smoking. (T-2).

3.7.1.3. Not eat, smoke, or use tobacco products in the work area. (T-2). Confine eating smoking and drinking to designated employee break areas only.

3.7.1.4. Not work when ill with communicable disease or other conditions that might be transferred to a patron. (T-2).

3.7.1.5. Be knowledgeable of the requirements in this instruction.

3.7.1.6. Be knowledgeable of the health issues that may be associated with services provided and be able to communicate them clearly to patrons seeking threading, waxing, or teasing services, or the use of topical Retinoids.

3.7.1.7. Massage therapists must advise customers when a massage is not recommended due to apparent health reasons, and recommend the customer consult a physician prior to receiving any massage services. Customers with health concerns provide their massage therapist a physician's approval letter indicating any limitations of the massage. (T-2).

3.7.1.8. Massage therapists must be certified by state or other regulatory authority in performing any massage technique service. (T-0).

3.7.1.9. Tattoo artists including guest artists are required to possess a current (unexpired) license by the governing health department in the state where the tattoo business is located. **(T-0)**

### 3.7.2. Medical exams and health certificates.

3.7.2.1. If required by the Aerospace Medicine Council (see [paragraph 2.11](#)), all personal service workers will undergo a pre-employment physical examination and submit to such tests as may be necessary to ensure that no communicable disease exists. (T-2). The examining medical provider will furnish a written notification indicating medical acceptance or non-acceptance. (T-2).

3.7.2.2. Examinations of personal service workers may be required before returning to work after an illness. Special examinations are made at the discretion of the base medical provider.

### 3.7.3. Personal service workers will comply with the following sanitary practices:

3.7.3.1. Keep shops clean, sanitary and free of trash, hair, spills, or dust. (T-2).

3.7.3.2. Use only barber and beauty supplies that are approved by the United States Department of Agriculture (USDA), FDA, or EPA. (T-0). Use of foreign brands overseas is permissible with Medical Treatment Facility commander approval. Products having expiration codes or dates are promptly removed from stock when outdated and are destroyed to preclude use and possible harm to clients.

3.7.3.3. Use freshly laundered or single-use towels for each patron. (T-2). Towels used in the making of hot compresses may at no time come in direct contact with the washbasin. When electric or gas steam equipment is not utilized for preparing hot towels, a shallow tray is used in which the towels are heated with hot running water.

3.7.3.4. Cover headrests with a freshly laundered towel or a fresh single-use cover for each patron. (T-2).

3.7.3.5. Ensure cape will be used on each customer and must be kept clean. (T-2). To prevent the customer's neck from coming in contact with the cape use individual paper

neck strips or a freshly laundered towel for each patron. (T-2). Capes will be cleaned in accordance with applicable federal, state, or local regulations.

3.7.3.6. Vacuum cleaning devices may be used for hair removal.

3.7.3.7. Ensure styptic pencils, lump alum, and common use items (brushes, brush roller, shaving brushes and mugs, neck dusters, sponges, and powder puffs) will not be used. (T-2). Plastic hairbrushes, of the types that have plastic projections in lieu of bristles, may be used provided they are disinfected in accordance with [paragraph 3.8](#).

3.7.3.8. Ensure when applying liquid or powdered styptics, sterile single use applicators are used. (T-2).

3.7.3.9. Ensure single use razors used on skin are used once then discarded in a container of disinfectant with a tight fitting cap. (T-2). The container of accumulated blades must be filled with disinfectant, resealed and disposed of when full but not less than weekly.

3.7.3.10. Ensure razors with properly fitted guards are used for haircuts, provided they do not contact the skin are sanitized after each patron. (T-2). Sanitation for these razors are the same as for other hair cutting, hand instruments in [paragraph 3.8](#).

3.7.3.11. Ensure waste materials and soiled linens are deposited in closed sanitary receptacles. (T-2).

3.7.4. Personal service worker prohibited practices and services:

3.7.4.1. Do not serve patrons who have open sores or inflammation on the face, neck, or scalp. (T-2). In the event skin lesions are discovered, Personal service workers will discontinue treatment and disinfect the instruments immediately after use. (T-2).

3.7.4.2. Do not serve patrons infested with lice or other parasites. (T-2).

3.7.4.3. Ensure that reusable razors including straight razors, credo blades, rasps or similar blades are not authorized for use on skin. (T-2).

3.7.4.4. Do not use professional medical remedies or minor surgical procedures, such as wart or mole removal. (T-2).

3.7.4.5. Do not allow pet grooming in public facilities. (T-2).

3.7.4.6. Do not perform: permanent cosmetic artistry on the head, neck, face, tongue, lips, eyes, or scalp; henna tattoos; body piercing (other than the fleshy portion of the ear lobe); and body mutilation (to include tongue bifurcation, ear gauging >1.6mm, unnatural shaping of the teeth, ear pointing, scarification, body etching or subdermal and transdermal implants). (T-0)

### **3.8. Cleaning, Sanitizing and Disinfecting of Instruments.**

3.8.1. Clean, sanitize, and disinfect instruments in accordance with manufacturer's instructions, this AFI and applicable DoD, federal or national, state, and local/tribal regulations. (T-0).

3.8.1.1. Cleaning Instruments. Personal service workers must clean and sanitize instruments, including hair clippers, between patrons. (T-2).

3.8.2. Disinfecting Instruments. Clean and disinfect specific instruments or any instruments that come in contact with inflamed skin lesions or blood/body fluids between patrons. Clean and disinfect all instruments at the close of each business day as follows:

3.8.2.1. Wash non-electrical instruments with soap and hot water.

3.8.2.2. Rinse in potable running water then dry.

3.8.2.3. Soak in an appropriate disinfectant according to the manufacturer's label. Prepare fresh disinfectant frequently, at least daily, following the directions on the label.

3.8.2.4. Disinfectants are used according to label instructions, including the contact time. Disinfection solutions are prepared and changed according to label instructions to ensure bactericidal effectiveness when used or at least once daily.

3.8.2.4.1. Clean and disinfect foot basins, manicure and pedicure instruments to include other applicable instrument pieces after each patron.

3.8.2.4.2. Drain, clean and disinfect footbaths after each patron, following blood and body fluid exposure, and nightly (to include the filter screens), as directed by the manufacturer and by state/regulatory agencies. Disinfect with an EPA-registered hospital disinfectant.

3.8.2.5. Rinse non-electrical instruments in potable water to remove disinfectant before patron use.

3.8.2.6. Dry with a clean cloth or paper towel.

3.8.3. Ultraviolet light for sanitizing or disinfecting is not authorized in public facilities.

### **3.9. Hair Removal Sanitation Standards, Including Threading, Waxing or Tweezing.**

3.9.1. Threading is permitted to remove eyebrow hair. Waxing and tweezing hair are permitted in barber, and beauty shops, and day spas provided customers are screened for and advised of potential health risks, the facilities and equipment are in place, and employees are licensed in accordance with state or host nation requirements, trained and comply with the following sanitary requirements:

3.9.1.1. Signs are posted informing each patron requesting threading, waxing, or tweezing of the potential health risk for those who have the following medical conditions: diabetes, circulatory problems, high susceptibility to infections, or unusual sensitivity to threading, waxing or tweezing.

3.9.1.2. Patrons are also advised of health risks if they are users of topical or oral Retinoids as identified by the FDA.

3.9.1.3. Patrons are advised that they are more susceptible to irritation or infection for up to 48 hours after a waxing procedure. Patrons will be advised that they should not swim, have a spa or whirlpool bath, wear tight clothing that could cause excessive sweating, sunbathe (either naturally or artificially), or use a deodorant on the waxed areas.

3.9.1.4. Inform patrons to seek medical attention, if there is any excessive reddening of the skin or other signs of skin sensitivity or infection.

3.9.1.5. Personal service workers must wash their hands both before and after treating each patron who receives threading, waxing, or tweezing treatment. (T-2). After washing and drying their hands, barbers and beauticians are to don a clean pair of single-use gloves. Gloves are worn at all times when employees perform threading, waxing, or tweezing procedures and disposed of after serving each patron. (T-2). Gloves are to be disposed of as general solid waste.

3.9.1.6. All areas of the body being treated are cleaned using an FDA - approved broad-spectrum antibacterial agent before and after the procedure (threading, waxing, tweezing and similar procedures may leave the skin open to infection). Use a clean dry towel to avoid getting the antibacterial agent into the patron's eyes.

3.9.1.7. A clean single-use paper towel is used to blot any blood resulting from threading, waxing or tweezing. Dispose of these towels as general solid waste. A patron with bleeding that cannot be stopped by direct pressure is referred to the appropriate medical facility.

3.9.1.8. Tweezers are cleaned and disinfected between patrons using an approved chemical disinfectant.

3.9.1.9. Each thread is for single use and is discarded.

3.9.2. Sanitary procedures specific to use of wax, as paraffin wax treatment during manicures or pedicures and waxing for hair removal include the following:

3.9.2.1. Use of glucose (water-soluble) wax, including water-based strip wax, is prohibited. This type of wax is more liable to permit the growth of harmful microorganisms.

3.9.2.2. Hot waxes removed from the pot or applied to the skin cannot be reused.

3.9.2.3. All areas of the body being treated in a wax service are cleaned with an antibacterial agent.

3.9.2.4. Apply wax according to instructions on the label and according to the applicable cosmetology regulation for the state or other jurisdiction where waxing is being conducted.

3.9.2.5. Paraffin wax treatments performed on hands and feet should conform to the following requirements:

3.9.2.5.1. A paraffin wax treatment is provided before, and not after a manicure or pedicure. The client is free of broken skin, burns, or any skin disorder. Ensure all jewelry is removed from hands and feet before a wax treatment.

3.9.2.5.2. The client's hands and feet shall be washed and sanitized before being dipped into the paraffin wax. Wash the client's hands and feet with warm soapy water to remove surface debris and residues. After rinsing and drying, apply a sanitizing gel and allow the hands and feet to air dry before dipping into the paraffin wax. (T-2).

3.9.2.5.3. A separate basin is used for the hands and the feet. Wax used for hand and foot treatments are not be used for other applications.

3.9.2.5.4. Paraffin wax is heated using a paraffin wax heater and is not be heated using a microwave oven or other type of heater element.

- 3.9.2.5.5. Paraffin wax is kept free of any debris and in a sanitary manner. Bulk wax is stored protected. Paraffin wax that has been in contact with a patron's skin or removed from the containers is disposed of as solid waste after each use. Paraffin wax pots are emptied, cleaned and disinfected weekly or whenever they become visibly contaminated with dust or other debris.
- 3.9.2.6. Use of oil-based strip (soft) wax is permitted for hair removal. Oil-based strip waxes are not to be reused.
- 3.9.2.7. Single-use applicator sticks are used to apply hot wax to the skin so that no wax is returned to the pot (extract wax from the pot with each applicator only once). Application sticks are not to be left standing in the wax at any time.
- 3.9.2.8. Beauticians check for sensitivity to waxing prior to beginning a waxing procedure. Apply a small amount of wax to the skin (cover one-half inch or less). If there is any excessive redness or irritation, discontinue treatment.
- 3.9.2.9. Waxes are not be used over varicose veins, moles, or warts. They are not be used on eyelashes, inside the nose or ears, on the nipples or genital areas, or on irritated, chapped, sunburned, or cut skin.
- 3.9.2.10. Single use gloves must be worn when removing wax. When wax is removed, tweezing a few remaining hairs is permitted. Clean the skin with an FDA-approved disinfectant solution.
- 3.9.2.11. Dispose of the single-use gloves, single-use wax application sticks, and any products used to remove the wax as solid waste.
- 3.9.2.12. All wax pots are cleaned and disinfected with a hospital-grade, EPA-registered disinfectant solution as directed by the manufacturer and by state/regulatory agencies. Application sticks are not be left standing in the wax at any time. (T-0).
- 3.9.2.12.1. Oil-based strip wax pots are emptied, cleaned and disinfected weekly or before refilling, whichever comes first.
- 3.9.2.12.2. Hot wax pots do not have to be cleaned and disinfected until they are empty or become visibly soiled or contaminated, provided the required heating of the wax is accomplished between patrons. Do not add new wax to wax remaining in wax pots. Dispose of all wax removed from the pot.
- 3.9.2.13. All depilatories and paraffin wax that have been in contact with a client's skin or been removed from the container are disposed of after each use. Used wax is not to be re-used under any circumstances.

### **3.10. Sanitation Standards for Day Spas, Massage Services, Nail Salons and Footbaths.**

- 3.10.1. Freshly laundered cloth towels and sheets are used for each client when massage, nails and pedicure services are performed. Single use paper towels may be used for facials and manicures. Clean towels and sheets will be kept in closed storage cabinets.
- 3.10.2. Freshly laundered white cloth towels are used for each customer.
- 3.10.3. Manicure and pedicure tools and other instruments are washed and disinfected in accordance with [paragraph 3.8](#).



3.10.4. Any equipment that comes in direct contact with client's skin is wiped down with an appropriate sanitizing solution or disinfectant spray.

3.10.5. All client contact surfaces of pedicure footbath/spas, and other equipment shall be cleaned between clients according to [paragraph 3.8](#). (T-2).

3.10.6. Spray Tanning Requirements:

3.10.6.1. Customers are required to wear protective clothing or appliqués on areolae and genitalia during the spray tanning process. (T-2).

3.10.6.2. Customer is provided single use nose filters, undergarments, protective eyewear, lip balm, and appliqués.

3.10.6.3. Spray Technicians wear protective mask and eyewear if minimum ventilation (noted below) is unavailable. (T-2).

3.10.6.4. Spraying areas meet or exceed the following minimum ventilation requirements: 150 cubic feet per minute ported separately from the facility/building heating, ventilation and air-conditioning system or 108 Clean Air Delivery Rate if using a filtered ventilation system.

### 3.11. Tattoo Studios.

3.11.1. The intent to operate a tattoo studio is coordinated with the installation Public Health office. There are two parts of the approval process: notification and operational assessment. (T-1)

3.11.1.1. Written notification of intent to establish a tattoo studio is submitted by the Exchange or FSS through the installation commander to the Public Health office at least 120 days prior to the operation's target start date. (T-1)

3.11.1.2. The operational assessment includes a plan review of the proposed tattoo facility layout and the preoperational inspection. (T-1)

3.11.2. A tattoo operation facility may not begin operating until a preoperational inspection has been conducted by installation Public Health within 14 calendar days prior to the scheduled opening day and the facility receives a Fully Compliant rating. (T-1)

3.11.3. Tattoo and ear-piercing operations will comply with "Interim Body Art Standards and Inspection Guide for Army Installations" until DAF guidance is finalized or the Department of Defense standardizes guidance. (T-1)

3.11.4. Tattoo operations on DAF installations will comply with tattooing restrictions listed in the most current version of DAFI 36-2903, *Dress and Personal Appearance of United States Air Force and United States Space Force Personnel*, the most current tattoo operations contract, and as needed, joint service dress and personal appearance standards for all patrons. (T-0)

3.11.5. Do not allow tattoo operations on installations in states (or foreign localities) where the state (or national), county, or city health department does not issue a license to practice body art. Tattoo businesses are currently not authorized outside of the U.S. and its territories. (T-0)

3.11.6. Tattoo artists, to include guest artists, are restricted from providing services until bloodborne pathogens (BBP) training IAW 29 CFR 1910.1030 is current (upon initial employment and annually thereafter). All training requirements are provided by the studio manager or a commercial resource and is not the responsibility of the installation Public Health to develop or administer. **(T-0)**

3.11.7. Tattoo artists will ensure clients sign an informed consent and release form before performing a body art procedure. **(T-0)**

3.11.8. The tattoo artists must report to installation Public Health any injury, complaint of injury, infections that require treatment by a licensed medical practitioner, and any notifiable diseases resulting from the body art procedure. **(T-1)**

3.11.9. Ensure all razors and tattoo needles used in tattoo studios are single-use. **(T-1)**

3.11.10. Ensure inks/dyes/pigments in bulk containers used in tattoo studios are extracted and placed in single-use cups/caps. Dispensed portions are never returned to the original container. **(T-1)**

3.11.11. Ensure materials applied onto the skin, including antimicrobials, are Food and Drug Administration (FDA) approved within tattoo studios. **(T-0)**

3.11.12. Tattoo inks will not be modified using other chemicals; only distilled or sterile water shall be used for mixing ink/dyes/pigments. **(T-1)**

3.11.13. The body art business owner will investigate and follow-up on DoD and FDA recall messages and any other vendor recalls in accordance with DHA-MSR 6025.01, *DoD Hazardous Food and Nonprescription Drug Recall System*, to ensure products used or procured are not recalled by the FDA. Recalled or expired items are not to be used. Notify Public Health when items of interest are identified. **(T-0)**

3.11.14. Follow state/local regulated medical waste (RMW) storage and management requirements in addition to requirements listed in the Interim Body Art Standards and Inspection Guide for Army Installations. Where conflicting requirements exist between applicable regulatory requirements, personnel must follow the more stringent regulation. **(T-0)**

3.11.15. The Exchange or FSS tattoo concessionaire is responsible for establishing a RMW contract with a local agency/company for pick-up and disposal of the RMW. The MTF is not responsible for any RMW generated by the tattoo studio.

3.11.16. For newly established tattoo businesses, installation Public Health will conduct monthly periodic (routine) inspections during the first twelve months (one year) of operation. A facility risk assessment may be applied thereafter to determine if a reduced inspection frequency is appropriate. **(T-1)**

### **3.12. Insect and Rodent Control Standards.**

3.12.1. Facility managers shall prevent and correct any conditions allowing insects, rodents, or other pests. They shall implement appropriate procedures for integrated pest management; structural management and repair, pest exclusion, outside grounds maintenance, general sanitation, and pest control (consult with Civil Engineering Pest Management Section). **(T-2)**

3.12.2. Screen all outside doors, windows, and other openings to keep insects and other pests out. Use screens in good condition with at least 16 meshes per inch. All screen doors open outward and have self-closing devices.

3.12.3. Ensure pesticides used in public facilities are applied by DoD-certified personnel (or uncertified but trained personnel under the direct supervision of a DoD-certified applicator). State pesticide certification is mandatory for all contract personnel applying pesticides on Air Force installations. The application of pesticide and other integrated pest management activities are coordinated with Public Health and the facility manager.

3.12.3.1. Launder blankets and bedspreads whenever visibly soiled and at least weekly and between occupant changeover.

3.12.4. All pest management contracts will be prepared by Civil Engineering, coordinated with Public Health and Bioenvironmental Engineering, approved by the MAJCOM Pest Management Professional, and monitored by Civil Engineering's quality assurance evaluator. (T-2)

### **3.13. Living Quarters Sanitation (Temporary Living Facilities, Lodging, and Contract Quarters, does not to include family housing or dormitories).**

3.13.1. Keep all living quarters clean and free of garbage, litter, insects, and rodents.

3.13.2. Living quarters shall be maintained at a minimum temperature of 68 degrees Fahrenheit. Fireplaces, stoves, furnaces, and space heaters shall be vented to the outside and provided fresh air for proper combustion.

3.13.3. Wash bed linens at least once a week and between occupants. Wash mattress covers at least monthly and between occupants. Mattress covers are not required for plastic covered mattresses.

3.13.4. Launder blankets and bedspreads whenever visibly soiled and at least weekly and between occupant changeover.

3.13.5. Bunks and beds should have at least 30 inches of space above and between them.

3.13.6. Supply enough metal or durable plastic garbage cans and empty them often enough to prevent overflowing and to deter pests. Outdoor garbage cans are covered to minimize attracting insects and feral animals.

3.13.7. Outdoor recreation areas, stables, and corral sites must have good drainage to prevent pooling of surface water, objectionable odors, or breeding/harboring areas for rodents, flies or mosquitoes.

3.13.8. Animal use areas, including paddocks and corrals, are cleaned as necessary to prevent objectionable odors and breeding areas for pests and disease vectors. Manure is removed from stable stalls daily and disposed of in a manner to prevent breeding areas for flies or mosquitoes.

### **3.14. Outdoor Recreation Areas, Stables and Equipment Sanitation Requirements.**

3.14.1. Keep recreational areas free of foliage overgrowth, pests, ash and food debris in barbecues/grills, litter and garbage.

3.14.2. Civil Engineering pest management personnel shall assist facility managers with pest control.

3.14.3. Sewage from recreational areas empties into a sewage disposal system. Area managers will coordinate disposal plans with the Civil Engineering and Bioenvironmental Engineering at campgrounds and at the common sanitary dumping station. Individual hookups at each camp site are permissible.

3.14.4. Permanent comfort stations must meet restroom sanitation standards at [paragraph 3.3](#). Chemical toilets may be used in remote areas. Comfort stations and restrooms are cleaned daily when open for public use, disinfected and maintained to avoid pests and objectionable odors and conditions.

3.14.5. Empty sink water into a sewage system, soakage pit, or another approved disposal system.

3.14.6. Supply enough metal or durable plastic garbage cans and empty them often enough to prevent overflowing and to deter pests. Outdoor garbage cans are covered to minimize attracting insects and feral animals.

3.14.7. Outdoor recreation areas, stables, and corral sites must have good drainage to prevent pooling of surface water, objectionable odors, or breeding/harboring areas for rodents, flies or mosquitoes.

3.14.8. Animal use areas, including paddocks and corrals, are cleaned as necessary to prevent objectionable odors and breeding areas for pests and disease vectors. Manure is removed from stable stalls daily and disposed of in a manner to prevent breeding areas for flies or mosquitoes.

ROBERT I. MILLER  
Lieutenant General, USAF, MC, SFS  
Surgeon General

**Attachment 1****GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION*****References***

- AFI 33-322, *Records Management and Information Governance Program*, 28 July 2021
- (D) AFI 91-202, *The US Air Force Mishap Prevention Program*, 12 April 2022
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- AFMAN 32-1053, *Integrated Pest Management*, 6 August 2019
- AFMAN 32-1067, *Water and Fuel Systems*, 4 August 2020
- AFI 34-144, *Child and Youth Programs*, 2 July 2019
- AFI 48-116, *Food Safety Program*, 11 September 2018
- AFI 48-144, *Drinking Water Surveillance Program*, 21 October 2014
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- DAFMAN 90-161, *Publishing Processes and Procedures*, 15 April 2022
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- DoD Directive 6400.04E, *DoD Veterinary Public and Animal Health Services*, 27 June 2013
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- Control of Communicable Diseases Manual*, 21st Edition (American Public Health Association), 1 February 2020
- Field Manual 21-10, *Field Hygiene and Sanitation*, June 21, 2000
- UFC 3-420-1, *Plumbing Systems*, October 25, 2004

***Adopted Forms***

DAF Form 847, *Recommendation for Change in of Publication*

***Abbreviations and Acronyms***

**AFPD**—Air Force Policy Directive

**ANG**—Air National Guard

**CONUS**—Continental United States

**DoD**—Department of Defense

**DoDI**—Department of Defense Instruction

**Exchange**—Army and Air Force Exchange

**GMU**—Guard Medical Unit

**MAJCOM**—Major Command

**MTF**—Medical Treatment Facility

**OCONUS**—Outside Continental United States

**RMW**—Regulated Medical Waste

### *Terms*

**Footbath**—A basin, tub, footbath, sink or bowl that can be plumbed or unplumbed, and contains circulating (whirlpool) or non-circulating water. Footbaths that contain circulating water also called whirlpool foot spas. Footbaths that contain non circulating (non-whirlpool) water also called foot basins.

**Hose Bib**—Water faucet connection for attaching a hose.

**Personal Service Workers**—individuals employed in job tasks which may involve contact with skin or hair of clients, including, but not limited to barbers, beauty shop hairdressers, estheticians, cosmetologists, manicurists, pedicurists and massage therapists.

**Potable Water**—Water declared fit for drinking by responsible authorities. (See AFI 48-144)

**Public Facility**—Areas such as recreational facilities, food service establishments, rest areas, and similar places with water or sewage disposal systems available to the general community. These areas may be permanent (fixed) or temporary (mobile, used seasonally or in association with an event, e.g. repairs to a permanent facility).

**Restroom**—A room containing a toilet and sink, with or without a urinal.

**Sewage**—Fecal material, urine, food waste, shower or bathtub water, and laundry waste water originating in dwellings or office buildings, institutions, food service establishments, and similar facilities.

**Attachment 2**

**INTERIM BODY ART STANDARDS AND INSPECTION GUIDE FOR ARMY  
INSTALLATIONS**

Interim Body Art Standards and Inspection Guide for Army Installations (send document/do not see on Army Pubs yet)