

## York Region Infection Prevention and Control Lapse Report

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Initial Report					
Premises/Facility under investigation (name	and ac	dress)	)		
Tang Tang Nail					
A8 – 4300 Steeles Avenue East					
Markham, ON					
L3R 0N8					
Type of Premises/Facility	D' '	D	D:	Paralana and	
Personal Service Setting – Ear Piercing, Body Piercing					
Date Board of Health became aware of IPAC lapse (yyyy/mm/dd)			Date of Initial Report posting (yyyy/mm/dd)		
2025/08/15			2025/08/21		
Date of Initial Report update(s) (if applicable	e)	How the IPAC lapse was identified			
(yyyy/mm/dd)					
		Complaint			
Summary Description of the IPAC Lapse					
<ul> <li>Reusable equipment/instrument(s) used in piercing replacement services were not cle "Public Health Ontario: Guide to Infection F Edition, July 2019".</li> </ul>	aned, aı	nd disir	fected	d or sterilized in accordance with the	
<ul> <li>The ear piercing device was not used as per</li> <li>Jewelry for body piercing was not maintained</li> </ul>				` ,	
<ul> <li>Needles for body piercing were not pre-ste</li> </ul>		orno ur		point of inconsorn	
IPAC Lapse Investigation	Yes	No	N/A	Please provide further details/steps	
Did the IPAC lapse involve a member of a regulatory college?		$\boxtimes$			
If yes, was the issue referred to the regulatory college?			$\boxtimes$		
Were any corrective measures recommended and/or implemented?	$\boxtimes$				
Please provide further details/steps	• Cle eq pie in s	ean, an uipmen ercing, laccorda ection lattings, see the estruction	d disir ody p ance v rever 3rd Ed ar pier	res for Premises/Facility: Infect or sterilize reusable Infect or steriliz	

Date any order(s) or directive(s) were issued to the owner/operator (if applicable) (yyyy/mm/dd) HPPA Section 13 Order issued on 2025/08/14.

sterilized.

sterile until the point of insertion.

Use only needles for body piercing that are pre-

## **Initial Report Comments:**



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HPPA Section 13 Order was issued on 2025/08/14. The operator was ordered to cease the improper use of ear piercing cartridges, discontinue providing personal services that require the use of sterile equipment, and discontinue use of all equipment used for body piercing replacements.

Any additional Comments: (Please do not include any personal information or personal health information)					
If you have any further questions	, please contact:				
Health Connection					
Telephone Number	Email Address				
1-800-361-5653	Health.inspectors@york.ca				
Final Report	·				
Date of Final Report posting (y	yyy/mm/dd)				
Brief description of corrective					
Final Report Comments and Co	were confirmed to have been completed (yyyy/mm/dd) ontact Information				
Any Additional Comments: (Pleinformation)	ease do not include any personal information or personal health				
If you have any further questions,	, please contact:				
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