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for Cosmetologists, Nail Technicians, Facial Specialists, and Full Specialists

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Lesson 1: HIV/AIDS and Other Communicable Diseases (2 hours)

Outline

- What is HIV?
- Modes of transmission
- Infection control procedures and Prevention of HIV and AIDS
- Attitudes towards HIV and AIDS and appropriate behavior
- Other communicable diseases: opportunistic infections

Learning objectives

After completing this lesson you will be able to

- define HIV
- list the 2 strains of HIV
- describe the origins of HIV
- identify the date in which the first diagnosis was made
- identify the 3 stages of HIV
- list the ways of transmission
- list methods of infection prevention
- identify types of testing
- describe attitudes and behaviors of the infected and the uninfected
- identify the most common opportunistic infections

Introduction

In this chapter we will define HIV and AIDS, how it is transmitted, infection control and prevention, how the disease is managed in the healthcare system, and attitudes and behaviors toward persons with HIV and AIDS.

What is HIV?

Definition of HIV

HIV is the acronym for human immunodeficiency virus. It weakens a person’s immune system by destroying important cells that fight disease and infection. No effective cure exists for HIV but with proper medical care HIV can be controlled. Some groups of people in the United States are more likely to get HIV than others because of many factors, including their sex partners, their risk behaviors, and where they live.

Two strains have been identified: HIV-1 and HIV-2

HIV is a virus spread through certain body fluids that attacks the body’s immune system, specifically the CD4 cells, often called T cells. Over time, HIV can destroy so many of these cells that the body can’t fight off infections and disease. These special cells help the immune system fight off infections. Untreated, HIV reduces the number of CD4 cells (T cells) in the body. This damage to the immune system makes it harder and harder for the body to fight off infections and some other diseases. Opportunistic infections or cancers take advantage of a very weak immune system and signal that the person has AIDS.
Where HIV Originated
Scientists identified a type of chimpanzee in Central Africa as the source of HIV infection in humans. They believe that the chimpanzee version of the immunodeficiency virus (called simian immunodeficiency virus, or SIV) most likely was transmitted to humans and mutated into HIV when humans hunted these chimpanzees for meat and came into contact with their infected blood. Studies show that HIV may have jumped from apes to humans as far back as the late 1800s. Over decades, the virus slowly spread across Africa and later into other parts of the world. We know that the virus has existed in the United States since at least the mid to late 1970s.

The first diagnosis of AIDS was June 5, 1981 and was a man from Los Angeles, California. In 1983 the Centers for Disease Control established the National AIDS Hotline to respond to public inquiries about the disease. January 7, 1983 was the first report of AIDS in female sexual partners of males with AIDS. September 9, 1983 the CDC identified all major routes of transmission saying that HIV is not transmitted through casual contact, food, water, air, or environmental surfaces.

Stages of HIV

Stage 1: Acute HIV infection
Within 2 to 4 weeks after infection with HIV, people may experience a flu-like illness, which may last for a few weeks. This is the body’s natural response to infection. When people have acute HIV infection, they have a large amount of virus in their blood and are very contagious. But people with acute infection are often unaware that they’re infected because they may not feel sick right away or at all. To know whether someone has acute infection, either a fourth-generation antibody/antigen test or a nucleic acid (NAT) test is necessary. If you think you have been exposed to HIV through sex or drug use and you have flu-like symptoms, seek medical care and ask for a test to diagnose acute infection.

Stage 2: Clinical latency (HIV inactivity or dormancy)
This period is sometimes called asymptomatic HIV infection or chronic HIV infection. During this phase, HIV is still active but reproduces at very low levels. People may not have any symptoms or get sick during this time. For people who aren’t taking medicine to treat HIV, this period can last a decade or longer, but some may progress through this phase faster. People who are taking medicine to treat HIV (ART) the right way, every day may be in this stage for several decades. It’s important to remember that people can still transmit HIV to others during this phase, although people who are on ART and stay virally suppressed (having a very low level of virus in their blood) are much less likely to transmit HIV than those who are not virally suppressed. At the end of this phase, a person’s viral load starts to go up and the CD4 cell count begins to go down. As this happens, the person may begin to have symptoms as the virus levels increase in the body, and the person moves into Stage 3.

Stage 3: Acquired immunodeficiency syndrome (AIDS)
AIDS is the most severe phase of HIV infection. People with AIDS have such badly damaged immune systems that they get an increasing number of severe illnesses, called opportunistic illnesses. Without treatment, people with AIDS typically survive about 3 years. Common symptoms of AIDS include chills, fever, sweats, swollen lymph glands, weakness, and weight loss. People are diagnosed with AIDS when their CD4 cell count drops below 200 cells/mm or if they develop certain opportunistic illnesses. People with AIDS can have a high viral load and be very infectious.
How To Know
The only way to know for sure whether you have HIV is to get tested. Knowing your status is important because it helps you make healthy decisions to prevent getting or transmitting HIV.

Some people may experience a flu-like illness within 2 to 4 weeks after infection (Stage 1 HIV infection). But some people may not feel sick during this stage. Flu-like symptoms include fever, chills, rash, night sweats, muscle aches, sore throat, fatigue, swollen lymph nodes, or mouth ulcers. These symptoms can last anywhere from a few days to several weeks. During this time, HIV infection may not show up on an HIV test, but people who have it are highly infectious and can spread the infection to others.

If you have these symptoms, that doesn’t mean you have HIV. Each of these symptoms can be caused by other illnesses. But if you have these symptoms after a potential exposure to HIV, see a health care provider and tell them about your risk. The only way to determine whether you are infected is to be tested for HIV infection.

A Cure
No effective cure currently exists for HIV.

Modes of Transmission
You can get or transmit HIV only through specific activities. Most commonly, people get or transmit HIV through sexual behaviors and needle or syringe use.

Only certain body fluids—blood, semen, pre-semenal fluid, rectal fluids, vaginal fluids, and breast milk—from a person who has HIV can transmit HIV. These fluids must come in contact with a mucous membrane or damaged tissue or be directly injected into the bloodstream (from a needle or syringe) for transmission to occur. Mucous membranes are found inside the rectum, vagina, penis, and mouth.

In the United States, HIV is spread mainly by

- Having anal or vaginal sex with someone who has HIV without using a condom
  - For the HIV-negative partner, receptive anal sex is the highest-risk sexual behavior, but you can also get HIV from insertive anal sex
  - Either partner can get HIV through vaginal sex, though it is less risky for getting HIV than receptive anal sex.
- Sharing needles or syringes, rinse water, or other equipment (works) used to prepare drugs for injection with someone who has HIV. HIV can live in a used needle up to 42 days depending on temperature and other factors.

Less commonly, HIV may be spread

- From mother to child during pregnancy, birth, or breastfeeding. Although the risk can be high if a mother is living with HIV
- By being stuck with an HIV-contaminated needle or other sharp object. This is a risk mainly for health care workers.
In extremely rare cases, HIV has been transmitted by

- Oral sex—putting the mouth on the penis, vagina, or anus. In general, there’s little to no risk of getting HIV from oral sex. But transmission of HIV, though extremely rare, is theoretically possible if an HIV-positive man ejaculates in his partner’s mouth during oral sex.
- Receiving blood transfusions, blood products, or organ/tissue transplants that are contaminated with HIV. This was more common in the early years of HIV, but now the risk is extremely small because of rigorous testing of the US blood supply and donated organs and tissues.
- Eating food that has been pre-chewed by an HIV-infected person. The contamination occurs when infected blood from a caregiver’s mouth mixes with food while chewing. The only known cases are among infants.
- Being bitten by a person with HIV. Each of the very small number of documented cases has involved severe trauma with extensive tissue damage and the presence of blood. There is no risk of transmission if the skin is not broken.
- Contact between broken skin, wounds, or mucous membranes and HIV-infected blood or blood-contaminated body fluids.
- Deep, open-mouth kissing if both partners have sores or bleeding gums and blood from the HIV-positive partner gets into the bloodstream of the HIV-negative partner. HIV is not spread through saliva.

HIV does not survive long outside the human body (such as on surfaces), and it cannot reproduce outside a human host. It is not spread by

- Mosquitoes, ticks, or other insects.
- Saliva, tears, or sweat that is not mixed with the blood of an HIV-positive person.
- Hugging, shaking hands, sharing toilets, sharing dishes, or closed-mouth or “social” kissing with someone who is HIV-positive.
- Other sexual activities that don’t involve the exchange of body fluids (for example, touching).

**Anal Sex**

Anal sex is the riskiest type of sex for getting or transmitting HIV. HIV can be found in certain body fluids—blood, semen, pre-seminal fluid, or rectal fluids—of a person who has HIV. Although receptive anal sex is much riskier for getting HIV than insertive anal sex, it’s possible for either partner—the top or the bottom—to get HIV. The lining of the rectum is thin and may allow HIV to enter the body during anal sex. HIV can enter the body through the opening at the tip of the penis (or urethra); the foreskin if the penis isn’t circumcised; or small cuts, scratches, or open sores anywhere on the penis.

**Vagina Sex**

Either partner can get HIV through vaginal sex, though it is less risky for getting HIV than receptive anal sex. When a woman has vaginal sex with a partner who’s HIV-positive, HIV can enter her body through the mucous membranes that line the vagina and cervix. Most women who get HIV get it from vaginal sex. Men can also get HIV from having vaginal sex with a woman who’s HIV-positive. This is because vaginal fluid and blood can carry HIV. Men get HIV through the opening at the tip of the penis (or urethra); the foreskin if they’re not circumcised; or small cuts, scratches, or open sores anywhere on the penis.
Oral Sex
The chance that an HIV-negative person will get HIV from oral sex with an HIV-positive partner is extremely low. Oral sex involves putting the mouth on the penis, vagina, or anus. In general, there’s little to no risk of getting or transmitting HIV through oral sex.

Factors that may increase the risk of transmitting HIV through oral sex are ejaculation in the mouth with oral ulcers, bleeding gums, genital sores, and the presence of other sexually transmitted diseases (STDs), which may or may not be visible.

You can get other STDs from oral sex. And, if you get feces in your mouth during anilingus, you can get hepatitis A and B, parasites like Giardia, and bacteria like Shigella, Salmonella, Campylobacter, and E. coli.

Is there a connection between HIV and other sexually transmitted diseases?
Yes. Having another sexually transmitted disease (STD) can increase the risk of getting or transmitting HIV.

If you have another STD, you’re more likely to get or transmit HIV to others. Some of the most common STDs include gonorrhea, chlamydia, syphilis, trichomoniasis, human papillomavirus (HPV), genital herpes, and hepatitis. The only way to know for sure if you have an STD is to get tested. If you’re sexually active, you and your partners should get tested for STDs (including HIV if you’re HIV-negative) regularly, even if you don’t have symptoms.

If you are HIV-negative but have an STD, you are about 3 times as likely to get HIV if you have unprotected sex with someone who has HIV. There are two ways that having an STD can increase the likelihood of getting HIV. If the STD causes irritation of the skin (for example, from syphilis, herpes, or human papillomavirus), breaks or sores may make it easier for HIV to enter the body during sexual contact. Even STDs that cause no breaks or open sores (for example, chlamydia, gonorrhea, trichomoniasis) can increase your risk by causing inflammation that increases the number of cells that can serve as targets for HIV.

If you are HIV-positive and also infected with another STD, you are about 3 times as likely as other HIV-infected people to spread HIV through sexual contact. This appears to happen because there is an increased concentration of HIV in the semen and genital fluids of HIV-positive people who also are infected with another STD.

Can a person already infected with one kind of HIV become infected with a different kind?
Yes. This is called HIV superinfection.

HIV superinfection is when a person with HIV gets infected with another strain of the virus. The new strain of HIV can replace the original strain or remain along with the original strain.

The effects of superinfection differ from person to person. Superinfection may cause some people to get sicker faster because they become infected with a new strain of the virus that is resistant to medicine they’re taking to treat their original infection. Research suggests that a hard-to-treat superinfection is rare.

What does the Center for Disease Control say about people groups?
Some groups of people in the United States are more likely to get HIV than others because of many factors, including the status of their sex partners, their risk behaviors, and where they live.
When you live in a community where many people have HIV infection, the chances of having sex or sharing needles or other injection equipment with someone who has HIV are higher. Within any community, the prevalence of HIV can vary among different populations.

**Injecting Drugs**

Your risk for getting HIV is very high if you use needles or works (such as cookers, cotton, or water) after someone with HIV has used them.

People who inject drugs, hormones, steroids, or silicone can get HIV by sharing needles or syringes and other injection equipment. The needles and equipment may have someone else’s blood in them, and blood can transmit HIV. Likewise, you’re at risk for getting hepatitis B and C if you share needles and works because these infections are also transmitted through blood.

Another reason people who inject drugs can get HIV (and other sexually transmitted diseases) is that when people are high, they’re more likely to have risky sex.

Stopping injection and other drug use can lower your chances of getting HIV a lot. You may need help to stop or cut down using drugs, but many resources are available.

**Alcohol and Drugs**

When you’re drunk or high, you’re more likely to make decisions that put you at risk for HIV, such as having sex without a condom.

Drinking alcohol, particularly binge drinking, and using “club drugs” like Ecstasy, ketamine, GHB, and poppers can alter your judgment, lower your inhibitions, and impair your decisions about sex or other drug use.

You may be more likely to have unplanned and unprotected sex, have a harder time using a condom the right way every time you have sex, have more sexual partners, or use other drugs, including injection drugs or meth. Those behaviors can increase your risk of exposure to HIV.

If you have HIV, they can also increase your risk of spreading HIV to others. Being drunk or high affects your ability to make safe choices.

If you’re going to a party or another place where you know you’ll be drinking or using drugs, you can bring a condom so that you can reduce your risk if you have vaginal or anal sex.

Methods are available to help you stop or cut down on drinking or using drugs. Talk with a counselor, doctor, or other health care provider about options that might be right for you.

**Tattoos and Body Piercing**

There are no known cases in the United States of anyone getting HIV this way. However, it is possible to get HIV from a reused or not properly sterilized tattoo or piercing needle or other equipment, or from contaminated ink.

It’s possible to get HIV from tattooing or body piercing if the equipment used for these procedures has someone else’s blood in it or if the ink is shared. The risk of getting HIV this way is very low, but the risk increases when the person doing the procedure is unlicensed, because of the potential for unsanitary practices such as sharing needles or ink. If you get a tattoo or a body piercing, be sure that the person doing the procedure is properly licensed and that they use only new or sterilized needles, ink, and other supplies.
Prevention

Today, more tools than ever are available to prevent HIV. In addition to abstinence, limiting your number of sexual partners, never sharing needles, and using condoms the right way every time you have sex.

Is abstinence the only 100% effective way to prevent HIV transmission? **Yes.** Abstinence means not having oral, vaginal, or anal sex. An abstinent person is someone who’s never had sex or someone who’s had sex but has decided not to continue having sex for some period of time. Abstinence is the only 100% effective way to prevent HIV, other sexually transmitted diseases (STDs), and pregnancy. The longer you wait to start having oral, vaginal, or anal sex, the fewer sexual partners you are likely to have in your lifetime. Having fewer partners lowers your chances of having sex with someone who has HIV or another STD.

Condoms

If you use them the right way every time you have sex, condoms are highly effective in preventing HIV infection. But it’s important to educate yourself about how to use them the right way. Condoms can also help prevent other sexually transmitted diseases (STDs) you can get through body fluids, like gonorrhea and chlamydia. However, they provide less protection against STDs spread through skin-to-skin contact, like human papillomavirus or HPV (genital warts), genital herpes, and syphilis.

There are two main types of condoms: male and female.

**Male Condoms**

- A male condom is a thin layer of latex, polyurethane, polyisoprene, or natural membrane worn over the penis during sex.
- Latex condoms provide the best protection against HIV. Polyurethane (plastic) or polyisoprene (synthetic rubber) condoms are good options for people with latex allergies, but plastic ones break more often than latex ones. Natural membrane (such as lambskin) condoms have small holes in them, so they don’t block HIV and other STDs.
- Use water- or silicone-based lubricants to lower the chances that a condom will break or slip during sex. Don’t use oil-based lubricants (for example, Vaseline, shortening, mineral oil, massage oils, body lotions, and cooking oil) with latex condoms because they can weaken the condom and cause it to break. Don’t use lubricants containing nonoxynol-9. It irritates the lining of the vagina and anus and increases the risk of getting HIV.

**Female Condoms**

- A female condom is a thin pouch made of a synthetic latex product called nitrile. It’s designed to be worn by a woman in her vagina during sex.
- When worn in the vagina, female condoms are comparable to male condoms at preventing HIV, other STDs, and pregnancy. Some people use female condoms for anal sex. We don’t currently know how well female condoms prevent HIV and other STDs when used by men or women for anal sex. But we do know that HIV can’t travel through the nitrile barrier.
- It is safe to use any kind of lubricant with nitrile female condoms.

Even if you use condoms the right way every time you have sex, there’s still a chance of getting HIV.
Testing
The only way to know for sure whether you have HIV is to get tested. CDC recommends that everyone between the ages of 13 and 64 get tested for HIV at least once as part of routine health care. Knowing your HIV status gives you powerful information to help you take steps to keep you and your partner healthy. This section answers some of the most common questions related to HIV testing, including the types of tests available, where to get one, and what to expect when you get tested. CDC recommends that everyone between the ages of 13 and 64 get tested for HIV at least once as part of routine health care. About 1 in 7 people in the United States who have HIV don’t know they have it.

People at higher risk should get tested more often. If you were HIV-negative the last time you were tested, and that test was more than one year ago, and you answer yes to any of the following questions, you should get an HIV test as soon as possible because these things increase your chances of getting the virus:

• Are you a man who has had sex with another man?
• Have you had sex—anal or vaginal—with an HIV-positive partner?
• Have you had more than one sex partner since your last HIV test?
• Have you injected drugs and shared needles or works (for example, water or cotton) with others?
• Have you exchanged sex for drugs or money?
• Have you been diagnosed with or sought treatment for another sexually transmitted disease?
• Have you been diagnosed with or treated for hepatitis or tuberculosis (TB)?
• Have you had sex with someone who could answer yes to any of the above questions or someone whose sexual history you don’t know?

You should be tested at least once a year if you keep doing any of these things. Sexually active gay and bisexual men may benefit from more frequent testing (for example, every 3 to 6 months). If you’re pregnant, talk to your health care provider about getting tested for HIV and other ways to protect you and your child from getting HIV. Before having sex for the first time with a new partner, you and your partner should talk about your sexual and drug-use history, disclose your HIV status, and consider getting tested for HIV and learning the results.

The only way to know for sure whether you have HIV is to get tested.
Knowing your HIV status gives you powerful information to help you take steps to keep you and your partner healthy.

• If you test positive, consult a physician.
• If you test negative, you have more prevention tools available today to prevent HIV than ever before.
• If you are pregnant, you should be tested for HIV.

Even if you are in a monogamous relationship (both you and your partner are having sex only with each other), you should find out for sure whether you or your partner has HIV.
There are three types of tests available: nucleic acid tests (NAT), antigen/antibody tests, and antibody tests. HIV tests are typically performed on blood or oral fluid.

1. A **NAT** looks for the actual virus in the blood. The test can give either a positive/negative result or an amount of virus present in the blood (known as an HIV viral load test). This test is very expensive and not routinely used for screening individuals unless they recently had a high-risk exposure or a possible exposure and they have early symptoms of HIV infection. Nucleic acid testing is usually considered accurate during the early stages of infection. However, it is best to get an antibody or antigen/antibody test at the same time to help the health care provider understand what a negative NAT means. Taking pre-exposure prophylaxis (PrEP) or post-exposure prophylaxis (PEP) may also reduce the accuracy of NAT if you have HIV.

2. An **antigen/antibody test** looks for both HIV antibodies and antigens. Antibodies are produced by your immune system when you’re exposed to bacteria or viruses like HIV. Antigens are foreign substances that cause your immune system to activate. If you’re infected with HIV, an antigen called p24 is produced even before antibodies develop. Antigen/antibody tests are recommended for testing done in labs and are now common in the United States. There is also a rapid antigen/antibody test available.

3. Most rapid tests and home tests are **antibody tests**. HIV antibody tests look for antibodies to HIV in your blood or oral fluid. In general, antibody tests that use blood from a vein can detect HIV sooner after infection than tests done with blood from a finger prick or with oral fluid.

   - While most laboratories are now using antigen/antibody tests, **laboratory-based antibody screening tests** are still available. These tests require blood to be drawn from your vein into a tube and then that blood is sent to a laboratory for testing. The results may take several days to be available.

   - With a **rapid antibody screening test**, results are ready in 30 minutes or less. These tests are used in clinical and nonclinical settings, usually with blood from a finger prick or with oral fluid.

   - The **oral fluid antibody self-test** provides fast results. You have to swab your own mouth to collect an oral fluid sample and use a kit to test it. Results are available in 20 minutes. The manufacturer provides confidential counseling and referral to follow-up testing sites. These tests are available for purchase in stores and online. They may be used at home, or they may be used for testing in some community and clinic testing programs.

   - The **home collection kit** involves pricking your finger to collect a blood sample, sending the sample by mail to a licensed laboratory, and then calling in for results as early as the next business day. This antibody test is anonymous. The manufacturer provides confidential counseling and referral to treatment.

If you use any type of antibody test and have a positive result, you will need to take a follow-up test to confirm your results. If your first test is a rapid home test and it’s positive, you will be sent to a health care provider to get follow-up testing.
If your first test is done in a testing lab and it’s positive, the lab will conduct the follow-up testing, usually on the same blood sample as the first test. Talk to your health care provider to see what type of HIV test is right for you.

**Attitudes Towards HIV and AIDS and Appropriate Behavior**

**Attitudes of the Infected and Uninfected**

Today, an estimated 1.1 million people are living with HIV in the United States. Thanks to better treatments, people with HIV are now living longer—and with a better quality of life—than ever before. If you are living with HIV, it’s important to make choices that keep you healthy and protect others. Stay healthy.

It’s important to disclose your HIV status to your sex and needle-sharing partners even if you are uncomfortable doing it. Communicating with each other about your HIV status allows you and your partner to take steps to keep both of you healthy.

Many resources can help you learn ways to disclose your status to your partners. For tips on how to start the conversation with your partner, check out CDC campaigns.

Also, ask your health department about free partner notification services. Health department staff can help find your sex or needle-sharing partners to let them know they may have been exposed to HIV and provide them with testing, counseling, and referrals for other services. These partner notification services will not reveal your name unless you want to work with them to tell your partners.

Many states have laws that require you to tell your sexual partners if you’re HIV-positive before you have sex (anal, vaginal, or oral) or tell your needle-sharing partners before you share drugs or needles to inject drugs. In some states, you can be charged with a crime if you don’t tell your partner your HIV status, even if your partner doesn’t become infected.

**Get Support**

Receiving a diagnosis of HIV can be a life-changing event. People can feel many emotions—sadness, hopelessness, and even anger. Allied health care providers and social service providers, often available at your health care provider’s office, will have the tools to help you work through the early stages of your diagnosis and begin to manage your HIV. Talking to others who have HIV may also be helpful. Find a local HIV support group. Learn about how other people living with HIV have handled their diagnosis.

**Other Communicable Diseases: Opportunistic Infections**

**Opportunistic Infections**

Opportunistic infections (OIs) are infections that occur more frequently and are more severe in individuals with weakened immune systems, including people with HIV. It is important for individuals with HIV to be familiar with the most common OIs so that they can work with their healthcare provider to prevent them as early as possible.

**Most Common Opportunistic Infections**

CDC has developed a list of OIs that indicate a person has AIDS. Receiving a diagnosis with any of these OIs means HIV infection has progressed to AIDS.
Candidiasis of bronchi, trachea, esophagus, or lungs
This illness is caused by infection with a common (and usually harmless) type of fungus called Candida. Candidiasis, or infection with Candida, can affect the skin, nails, and mucous membranes throughout the body. Persons with HIV infection often have trouble with Candida, especially in the mouth and vagina. However, candidiasis is only considered an OI when it infects the esophagus (swallowing tube) or lower respiratory tract, such as the trachea and bronchi (breathing tube), or deeper lung tissue.

Invasive cervical cancer
This is a cancer that starts within the cervix, which is the lower part of the uterus at the top of the vagina, and then spreads (becomes invasive) to other parts of the body. This cancer can be prevented by having your care provider perform regular examinations of the cervix.

Coccidioidomycosis
This illness is caused by the fungus Coccidioides immitis. It most commonly acquired by inhaling fungal spores, which can lead to a pneumonia that is sometimes called desert fever, San Joaquin Valley fever, or valley fever. The disease is especially common in hot, dry regions of the southwestern United States, Central America, and South America.

Cryptococcosis
This illness is caused by infection with the fungus Cryptococcus neoformans. The fungus typically enters the body through the lungs and can cause pneumonia. It can also spread to the brain, causing swelling of the brain. It can infect any part of the body, but (after the brain and lungs) infections of skin, bones, or urinary tract are most common.

Cryptosporidiosis, chronic intestinal (greater than one month's duration)
This diarrheal disease is caused by the protozoan parasite Cryptosporidium. Symptoms include abdominal cramps and severe, chronic, watery diarrhea.

Cytomegalovirus diseases (particularly retinitis) (CMV)
This virus can infect multiple parts of the body and cause pneumonia, gastroenteritis (especially abdominal pain caused by infection of the colon), encephalitis (infection) of the brain, and sight-threatening retinitis (infection of the retina at the back of eye). People with CMV retinitis have difficulty with vision that worsens ever time. CMV retinitis is a medical emergency because it can cause blindness if not treated promptly.

Encephalopathy, HIV-related
This brain disorder is a result of HIV infection. It can occur as part of acute HIV infection or can result from chronic HIV infection. Its exact cause is unknown but it is thought to be related to infection of the brain with HIV and the resulting inflammation.
Herpes simplex (HSV): chronic ulcer(s) (greater than one month's duration); or bronchitis, pneumonitis, or esophagitis

Herpes simplex virus (HSV) is a very common virus that for most people never causes any major problems. HSV is usually acquired sexually or from an infected mother during birth. In most people with healthy immune systems, HSV is usually latent (inactive). However, stress, trauma, other infections, or suppression of the immune system, (such as by HIV), can reactivate the latent virus and symptoms can return. HSV can cause painful cold sores (sometime called fever blisters) in or around the mouth, or painful ulcers on or around the genitals or anus. In people with severely damaged immune systems, HSV can also cause infection of the bronchus (breathing tube), pneumonia (infection of the lungs) and esophagitis (infection of the esophagus, or swallowing tube).

Histoplasmosis

This illness is caused by the fungus *Histoplasma capsulatum*. *Histoplasma* most often infects the lungs and produces symptoms that are similar to those of influenza or pneumonia. People with severely damaged immune systems can get a very serious form of the disease called progressive disseminated histoplasmosis. This form of histoplasmosis can last a long time and involves organs other than the lungs.

Isosporiasis, chronic intestinal (greater than one month's duration)

This infection is caused by the parasite *Isospora belli*, which can enter the body through contaminated food or water. Symptoms include diarrhea, fever, headache, abdominal pain, vomiting, and weight loss.

Kaposi’s sarcoma (KS)

This cancer, also known as KS, is caused by a virus called Kaposi's sarcoma herpesvirus (KSHV) or human herpesvirus 8 (HHV-8). KS causes small blood vessels, called capillaries, to grow abnormally. Because capillaries are located throughout the body, KS can occur anywhere. KS appears as firm pink or purple spots on the skin that can be raised or flat.

Lymphoma, multiple forms

Lymphoma refers to cancer of the lymph nodes and other lymphoid tissues in the body. There are many different kinds of lymphomas. Some types, such as non-Hodgkin lymphoma and Hodgkin lymphoma, are associated with HIV infection.

Tuberculosis (TB)

Tuberculosis (TB) infection is caused by the bacteria *Mycobacterium tuberculosis*. **TB can be spread through the air when a person with active TB coughs, sneezes, or speaks. Breathing in the bacteria can lead to infection in the lungs.** Symptoms of TB in the lungs include cough, tiredness, weight loss, fever, and night sweats. Although the disease usually occurs in the lungs, it may also affect other parts of the body, most often the larynx, lymph nodes, brain, kidneys, or bones.
Mycobacterium avium complex (MAC) or Mycobacterium kansasii, disseminated or extrapulmonary. Other Mycobacterium, disseminated or extrapulmonary.

MAC is caused by infection with different types of mycobacterium: Mycobacterium avium, Mycobacterium intracellulare, or Mycobacterium kansasii. These mycobacteria live in our environment, including in soil and dust particles. They rarely cause problems for persons with healthy immune systems. In people with severely damaged immune systems, infections with these bacteria spread throughout the body and can be life-threatening.

Pneumocystis carinii pneumonia (PCP)

This lung infection, also called PCP, is caused by a fungus, which used to be called Pneumocystis carinii, but now is named Pneumocystis jirovecii. PCP occurs in people with weakened immune systems, including people with HIV. The first signs of infection are difficulty breathing, high fever, and dry cough.

Pneumonia, recurrent

Pneumonia is an infection in one or both of the lungs. Many germs, including bacteria, viruses, and fungi can cause pneumonia, with symptoms such as a cough (with mucous), fever, chills, and trouble breathing. In people with immune systems severely damaged by HIV, one of the most common and life-threatening causes of pneumonia is infection with the bacteria Streptococcus pneumoniae, also called Pneumococcus.

Progressive multifocal leukoencephalopathy

This rare brain and spinal cord disease is caused by the JC virus. It is seen almost exclusively in persons whose immune systems have been severely damaged by HIV. Symptoms may include loss of muscle control, paralysis, blindness, speech problems, and an altered mental state. This disease often progresses rapidly and may be fatal.

Salmonella septicemia, recurrent

Salmonella are a kind of bacteria that typically enter the body through ingestion of contaminated food or water. Infection with salmonella (called salmonellosis) can affect anyone and usually causes a self-limited illness with nausea, vomiting, and diarrhea. Salmonella septicemia is a severe form of infection in which the bacteria circulate through the whole body and exceeds the immune system’s ability to control it.

Toxoplasmosis of brain

This infection, often called toxo, is caused by the parasite Toxoplasma gondii. The parasite is carried by warm-blooded animals including cats, rodents, and birds and is excreted by these animals in their feces. Humans can become infected with it by inhaling dust or eating food contaminated with the parasite. Toxoplasma can also occur in commercial meats, especially red meats and pork, but rarely poultry. Infection with toxo can occur in the lungs, retina of the eye, heart, pancreas, liver, colon, testes, and brain. Although cats can
transmit toxoplasmosis, litter boxes can be changed safely by wearing gloves and washing hands thoroughly with soap and water afterwards. All raw red meats that have not been frozen for at least 24 hours should be cooked through to an internal temperature of at least 150°F.

**Wasting syndrome due to HIV** Wasting is defined as the involuntary loss of more than 10% of one’s body weight while having experienced diarrhea or weakness and fever for more than 30 days. Wasting refers to the loss of muscle mass, although part of the weight loss may also be due to loss of fat.

**Hepatitis B Virus and Hepatitis C Virus Infection**

*Hepatitis is a disease characterized by inflammation of the liver.* People with HIV infection in the United States are often affected by chronic viral hepatitis; about one-third are coinfected with either hepatitis B virus (HBV) or hepatitis C virus (HCV). More people living with HIV are infected with HCV than with HBV. About 1 in 10 people living with HIV are coinfected with HBV, and about 1 in 4 people are coinfected with HCV.

Like HIV, HBV and HCV are spread by sharing needles, syringes, and other injection equipment. Both viruses can also be transmitted sexually, but HBV is much more likely than HCV to be transmitted sexually. Sexual transmission of HCV is most likely to happen among gay and bisexual men who are living with HIV. Pregnant women can pass these infections to their infants.

Viral hepatitis progresses faster and causes more liver-related health problems among people with HIV than among those who do not have HIV. Liver disease, much of which is related to HBV or HCV, is a major cause of non-AIDS related deaths among people living with HIV. Everyone living with HIV should be tested for HBV and HCV.

Those who are at risk for HBV should be vaccinated against it. Vaccination is the best way to protect against all of the ways that HBV is transmitted. No vaccine exists for HCV.

The best way to **prevent** HCV infection is to never inject drugs or to stop injecting drugs by getting into and staying in drug treatment. If you continue injecting drugs, always use new, sterile needles or syringes, and never reuse or share needles or syringes, water, or other drug preparation equipment.

HIV-HBV and HIV-HCV coinfections can be effectively treated in most people, but treatment can be complex, and people with coinfection should look for health care providers with expertise in the management of both HIV infection and viral hepatitis.

For HBV, treatment can delay or limit liver damage by suppressing the virus. Treatment for HCV infection cures more than 90% of people, including those living with HIV, in 12-24 weeks.

Given the risks of HBV or HCV coinfection to the health of people living with HIV, it is important to understand these risk, take steps to prevent infection, know your status, and if necessary, get medical care from someone who is experienced in treating people who are coinfected with HIV, HBV, and HCV.
Preventing Opportunistic Infections

The best ways to prevent getting an OI are to get into and stay on medical care. It is especially important that you get regular check-ups.

There are steps you can take to prevent getting an OI.

- Use condoms consistently and correctly to prevent exposure to sexually transmitted infections.
- Don’t share drug injection equipment. Blood with hepatitis C in it can remain in syringes and needles after use and the infection can be transmitted to the next user.
- Get vaccinated – your doctor can tell you what vaccines you need. If he or she doesn’t, you should ask.
- Understand what germs you are exposed to (such as tuberculosis or germs found in the stools, saliva, or on the skin of animals) and limit your exposure to them.
- Don’t consume certain foods, including under cooked eggs, unpasteurized (raw) milk and cheeses, unpasteurized fruit juices, or raw seed sprouts.
- Don’t drink untreated water such as water directly from lakes or rivers. Tap water in foreign countries is also often not safe. Use bottled water or water filters.
- Ask your doctor to review with you the other things you do at work, at home, and on vacation to make sure you aren't exposed to an OI.

Lesson 1 Summary

In this lesson we have thoroughly discussed the most important aspects of HIV and AIDS and other communicable diseases. We have identified the types of HIV, it's origin, the date in which the first diagnosis was made, and the 3 stages of HIV. We can now list the ways in which HIV is transmitted, ways to prevent infection, and how to be tested. We have discussed attitudes and behaviors of those infected with HIV and those who are not. And lastly we reviewed the types of opportunistic infections that often accompany those who are HIV positive.

It is recommended that service workers, such as salon professionals, stay up to date on all types of communicable diseases and to learn all key measures of prevention. Our next subject in this course is Sanitation and Sterilization.
Lesson 2: Sanitation and Sterilization (3 hours)

Outline
- Standard cleaning and disinfecting precautions
- How to distinguish between disinfectants and antiseptics
- How to sanitize hands and disinfect tools used in the practice of cosmetology
- Bacterial, viral, and fungal control
- Bloodborne pathogens control
- Parasite infection and infestation control

Learning objectives
After completing this lesson you will be able to
- identify cleaning precautions
- describe cleaning routines
- describe the importance of reading labels
- define the term clean
- describe the properties of ideal disinfectants
- identify sterilization
- describe wet disinfection
- define the purpose of infection control
- list safety and sanitation requirements
- describe cleaning and disinfecting procedures
- identify salon environment requirements
- identify CDC infection control guidelines
- describe chlorine based disinfectants
- describe phenol based disinfectants
- describe QAC based disinfectants
- list types of sterilization techniques
- identify lice and infestation

Introduction
In this chapter we will identify standard cleaning and disinfecting precautions, disinfectants and antiseptics, hand sanitation, tool disinfection, bacterial, viral, and fungal control, bloodborne pathogens control, and parasite infection and infestation control.

Standard Cleaning and Disinfecting Precautions

Protect Yourself
We must take precautions and heed the warnings of all labels regarding the handling, use and storage of cleaning chemicals. We will go more into an in-depth study of specific safety issues when we study OSHA regulations later in this course. Just bear in mind that we must observe all safety rules and regulations at all times when preparing, mixing, and applying chemicals. Follow all label instructions without alteration. Only use chemicals designed for the specific material you are cleaning, otherwise damage may occur.

Protect Your Clients
There are Federal and State Guidelines that the personal service worker must adhere to in order to protect each and every client as well as the salon worker.
How should cleaners and disinfectants be used?
Read the label first. Each cleaner and disinfectant has instructions on the label that tell you important facts:

- How to apply the product to a surface.
- How long you need to leave it on the surface to be effective (contact time).
- If the surface needs to be cleaned first and rinsed after using.
- If the disinfectant is safe for the surface.
- Whether the product requires dilution with water before use.
- Precautions you should take when applying the product, such as wearing gloves or aprons or making sure you have **good ventilation** during application.

Facility Cleaning & Disinfection
Cleaning and disinfection should be performed on surfaces that are likely to contact your patron.

- **Cleaning surfaces with detergent-based cleaners or Environmental Protection Agency (EPA)-registered disinfectants is effective at removing germs, viruses and fungi from the environment.**
  
- It is important to read the instruction labels on all cleaners to make sure they are used safely and appropriately.
- Environmental cleaners and disinfectants should not be used to treat the skin.
- The EPA provides a list of EPA-registered products.

Surfaces to Clean
Focus on surfaces that touch people’s bare skin each day and any surfaces that could come into contact with people. Clean large surfaces such as floors and walls when they become visibly soiled or on a regular schedule. There is no evidence that spraying or fogging rooms or surfaces with disinfectants will prevent infections more effectively than the targeted approach of cleaning frequently touched surfaces and any surfaces that have been exposed to infections.

Shared Equipment
Shared equipment that comes into direct skin contact should be cleaned after each use and allowed to dry. Salon equipment, and protective gear, should also be cleaned according to the equipment manufacturers’ instructions to make sure the cleaner will not harm the item.

Cleaning Keyboards and other Difficult Surfaces
Many items such as computer keyboards or handheld electronic devices may be difficult to clean or disinfect or they could be damaged if they became wet. If these items are touched by many people during the course of the day, a cleanable cover/skin could be used on the item to allow for cleaning while protecting the item. Always check to see if the manufacturer has instructions for cleaning.

Laundry
Routine laundry procedures, detergents, and laundry additives will all help to make clothes, towels, and linens safe to wear or touch. If items have been contaminated by infectious material, these may be laundered separately, but this is not absolutely necessary.
Proper Water Temperature for Laundry
Read and follow the clothing and soap or detergent label instructions. Water temperatures for laundry depend on the type of fiber or fabric. In general, wash and dry in the warmest temperatures recommended on the fabric label. Also, some laundry detergents are made to clean best at certain temperatures. Not following instructions could damage the item or decrease the effectiveness of the detergent.

Using Bleach for Laundry
Use of bleach as a disinfectant in laundering is optional, and not all fabrics are suitable for bleach. Read the label instructions.

Routines
• Facilities should always be kept clean.
• Review cleaning procedures and schedules with the staff.
  ☑ Cleaning procedures should focus on commonly touched surfaces and surfaces that come into direct contact with people’s bare skin each day.
  ☑ Cleaning with detergent-based cleaners or Environmental Protection Agency (EPA)-registered detergents/disinfectants will remove bacteria from surfaces.
  ☑ Cleaners and disinfectants, including household chlorine bleach, can be irritating and exposure to these chemicals has been associated with health problems such as asthma and skin and eye irritation.
    ☐ Take appropriate precautions described on the product’s label instructions to reduce exposure. Wearing personal protective equipment such as gloves and eye protection may be indicated.
  ☑ Follow the instruction labels on all cleaners and disinfectants, including household chlorine bleach, to make sure they are used safely and correctly.
    ☐ Some key questions that should be answered by reading the label include:
      ☐ How should the cleaner or disinfectant be applied?
      ☐ Do you need to clean the surface first before using the disinfectant (e.g., precleaned surfaces)?
      ☐ Is it safe for the surface? Some cleaners and disinfectants, including household chlorine bleach, might damage some surfaces (e.g., metals, some plastics).
      ☐ How long do you need to leave it on the surface to be effective (i.e., contact time)?
      ☐ Do you need to rinse the surface with water after using the cleaner or disinfectant?
  ☑ If you are using household chlorine bleach, check the label to see if the product has specific instructions for disinfection.
  ☑ Environmental cleaners and disinfectants should not be put onto skin or wounds and should never be used to treat infections.

• Repair or dispose of equipment and furniture with damaged surfaces that do not allow surfaces to be adequately cleaned.
The following information identifies and describes what Florida State Board regulations require for cleaning, sanitation and sterilization.

**61G5-20.002 Salon Requirements.**

(1) Definitions: For the purposes of this rule, the following definitions apply:

(a) “Clean” means the removal of visible debris from a surface such as washing with soap/water.

(b) “Disinfect” means the use of a chemical to destroy potential pathogens.

(c) “Sterilize” means the complete destruction of all microbial life, commonly achieved through the use of heat and/or pressure.

(d) “Wet disinfection container” means a tub or jar with a lid, filled with disinfectant and large enough for all items to be completely immersed.

(e) “Infection control” means the process for reducing the risk of spreading disease causing pathogens.

(2) Prior to opening a salon, the owner shall:

(a) Submit an application on forms prescribed by the Department of Business and Professional Regulation; and,

(b) Pay the required registration fee as outlined in the fee schedule in Rule 61G5-24.005, F.A.C.; and,

(c) Meet the safety and sanitary requirements as listed below and these requirements shall continue in full force and effect for the life of the salon:

1. Ventilation and Cleanliness: Each salon shall be kept well ventilated. The walls, ceilings, furniture and equipment shall be kept clean and free from dust. Hair must not be allowed to accumulate on the floor of the salon. Hair must be deposited in a covered waste receptacle. Each salon which provides services for the extending or sculpturing of nails shall provide such services in a separate area which is adequately ventilated for the safe dispersion of all fumes resulting from the services.

2. Toilet and Lavatory Facilities: Each salon shall provide – on the premises or in the same building as, and within 300 feet of, the salon – adequate toilet and lavatory facilities. To be adequate, such facilities shall have at least one toilet and one sink with running water. Such facilities shall be equipped with toilet tissue, soap dispenser with soap or other hand cleaning material, sanitary towels or other hand-drying device such as a wall-mounted electric blow dryer, and waste receptacle. Such facilities and all of the foregoing fixtures and components shall be kept clean, in good repair, well-lighted, and adequately ventilated to remove objectionable odors.

3. A salon, or specialty salon may be located at a place of residence. Salon facilities must be separated from the living quarters by a permanent wall construction. A separate entrance shall be provided to allow entry to the salon other than from the living quarters. Toilet and lavatory facilities shall comply with subparagraph (c)2. above and shall have an entrance from the salon other than the living quarters.

4. Animals: No animals or pets shall be allowed in a salon, with the exception of service animals and fish kept in closed aquariums.

5. Shampoo Bowls: Each salon shall have shampoo bowls equipped with hot and cold running water. The shampoo bowls shall be located in the area where cosmetology services are being performed. A specialty salon that exclusively provides specialty services, as defined in Section 477.013(6), F.S., need not have a shampoo bowl, but must have a sink or lavatory equipped with hot and cold running water on the premises of the salon.

(d) Comply with all local building and fire codes. These requirements shall continue in full force and effect for the life of the salon.

(3) Each salon shall comply with the following:

(a) Linens: Each salon shall keep clean linens in a closed, dustproof cabinet. All soiled linens must be kept in a closed receptacle. Soiled linens may be kept in open containers if entirely separated from
the area in which cosmetology services are rendered to the public. A sanitary towel or neck strip shall be placed around the patron’s neck to avoid direct contact of the shampoo cape with a patron’s skin.

(b) Containers: Salons must use containers for waving lotions and other preparations of such type as will prevent contamination of the unused portion. All creams shall be removed from containers by spatulas.

(c) Disinfection: The use of a brush, comb or other article on more than one patron without being disinfected is prohibited. Each salon is required to have sufficient combs, brushes, and implements to allow for adequate disinfecting practices. Combs or other instruments shall not be carried in pockets.

(d) Disinfectants: All salons shall be equipped with and utilize disinfecting solutions with hospital level disinfectant or EPA approved disinfectant, sufficient to allow for disinfecting practices.

1. A wet disinfection container is any receptacle containing a disinfectant solution and large enough to allow for a complete immersion of the articles. A cover shall be provided.

2. Disinfecting methods which are effective and approved for salons: First, clean articles with soap and water, completely immerse in a chemical solution that is hospital level or EPA approved disinfectant as follows:
   a. Combs and brushes, remove hair first and immerse in hospital level or EPA approved disinfectant;
   b. Metallic instrument, immerse in hospital level for EPA approved disinfectant;
   c. Instruments with cutting edge, wipe with a hospital level or EPA approved disinfectant; or
   d. Implements may be disinfected in a hospital level or EPA approved disinfectant solution.
   e. Shampoo bowls, facial beds, and neck rests, clean and disinfect between each use.

3. For purposes of this rule, a “hospital level disinfectant or EPA approved disinfectant” shall mean the following:
   a. For all combs, brushes, metallic instruments, instruments with a cutting edge, and implements that have not come into contact with blood or body fluids, a disinfectant that indicates on its label that it has been registered with the EPA as a hospital grade bacterial, virucidal and fungicidal disinfectant;
   b. For all combs, brushes, metallic instruments with a cutting edge, and implements that have come into contact with blood or body fluids, a disinfectant that indicates on its label that it has been registered with the EPA as a disinfectant, in accordance with 29 C.F.R. 1910.1030.

4. All disinfectants shall be mixed and used according to the manufacturer’s directions.

(e) After cleaning and disinfecting, articles shall be stored in a clean, closed cabinet or container until used. Undisinfected articles such as pens, pencils, money, paper, mail, etc., shall not be kept in the same container or cabinet. For the purpose of recharging, rechargeable clippers may be stored in an area other than in a closed cabinet or container, provided such area is clean and provided the cutting edges of such clippers have been disinfected.

(f) Ultra Violet Irradiation may be used to store articles and instruments after they have been cleansed and disinfected.

(g) Pedicure Equipment Disinfection:

The following cleaning and disinfection procedures must be used for any pedicure equipment that holds water, including sinks, bowls, basins, pipe-less spas, and whirlpool spas:

1. After each client, all pedicure units must be cleaned with a low-foaming soap or detergent with water to remove all visible debris, then disinfected with an EPA registered hospital grade bactericidal, fungicidal, virucidal, and pseudomonacidal disinfectant used according to manufacturers’ instructions for at least ten (10) minutes. If the pipe-free foot spa has a foot plate, it should be removed and the area beneath it cleaned, rinsed, and wiped dry.

2. At the end of each day of use, the following procedures shall be used:
   a. All filter screens in whirlpool pedicure spas or basins for all types of foot spas must be disinfected. All visible debris in the screen and the inlet must be removed and cleaned with a low-foaming soap or detergent and water. For pipe-free systems, the jet components or foot plate must be
removed and cleaned and any debris removed. The screen, jet, or foot plate must be completely immersed in an EPA registered, hospital grade bactericidal, fungicidal, virucidal, and pseudomonacidal disinfectant that is used according to manufacturer’s instructions. The screen, jet, or foot plate must be replaced after disinfection is completed and the system is flushed with warm water and low-foaming soap for 5 minutes, rinsed, and drained.

b. After the above procedures are completed, the basin should be filled with clean water and the correct amount of EPA registered disinfectant. The solution must be circulated through foot spa system for 10 minutes and the unit then turned off. The solution should remain in the basin for at least 6 to 10 hours. Before using the equipment again, the basin system must be drained and flushed with clean water.

3. Once each week, subsequent to completing the required end-of-day cleaning procedures, the basin must be filled with a solution containing one teaspoon of 5.25% bleach for each gallon of water. The solution must be circulated through the spa system for 5 to 10 minutes and then the solution must sit in the basin for at least 6 hours. Before use, the system must be drained and flushed.

4. A record or log book containing the dates and times of all pedicure cleaning and disinfection procedures must be documented and kept in the pedicure area by the salon and made available for review upon request by a consumer or a Department inspector.

(4) No cosmetology or specialty salon shall be operated in the same licensed space allocation with any other business which adversely affects the sanitation of the salon, or in the same licensed space allocation with a school teaching cosmetology or a specialty licensed under Chapter 477, F.S., or in any other location, space, or environment which adversely affects the sanitation of the salon. In order to control the required space and maintain proper sanitation, where a salon adjoins such other business or school, or such other location, space or environment, there must be permanent walls separating the salon from the other business, school, location, space, or environment and there must be separate and distinctly marked entrances for each.

(5) Evidence that the full or specialty salon contains a minimum of 100 square feet of floor space. No more than one (1) cosmetologist or specialist may be employed in a salon which has only the minimum floor space. An additional 50 square feet will be required for each additional specialist or cosmetologist employed.

(6) Full and specialty salons, regardless of size and number of operators, shall meet all the sanitation requirements stated in this section.

(7) For purposes of this rule, “permanent wall” means a vertical continuous structure of wood, plaster, masonry, or other similar building material, which is physically connected to a salon’s floor and ceiling, and which serves to delineate and protect the salon.

Rulemaking Authority 477.016, 477.025(2) FS. Law Implemented 477.025 FS. History–New 4-22-81, Amended 9-11-81, 1-17-83, 8-10-83, 6-28-84, 10-6-85, Formerly 21F-20.02, Amended 6-18-86, 10-18-87, 8-20-90, 5-19-91, 1-30-92, 5-11-92, 4-15-93, 5-31-93, Formerly 21F-20.002, Amended 1-9-95, 4-5-95, 8-8-95, 2-28-96, 6-16-97, 8-27-98, 4-13-99, 8-1-05, 9-6-06, 2-25-07, 3-10-08, 4-3-13, 6-10-13, 11-9-17.
How to distinguish between disinfectants and antiseptics, How to sanitize hands and disinfect tools used in the practice of cosmetology, Bacterial, viral, and fungal control, Bloodborne pathogens control, and Parasite infection and infestation control

First, let's review disinfectants

What’s the difference between cleaners, sanitizers, and disinfectants?

- **Cleaners or detergents** are products that are used to remove soil, dirt, dust, organic matter, and germs (like bacteria, viruses, and fungi). Cleaners or detergents work by washing the surface to lift dirt and germs off surfaces so they can be rinsed away with water. The same thing happens when you wash your hands with soap and water or when you wash dishes. Rinsing is an important part of the cleaning process. Use these products for routine cleaning of surfaces.
- **Sanitizers** are used to reduce **germs** from surfaces but not totally get rid of them. Sanitizers reduce the germs from surfaces to levels that are considered safe.
- **Disinfectants** are chemical products that **destroy or inactivate germs** and prevent them from growing. Disinfectants have no effect on dirt, soil, or dust. Disinfectants are regulated by the U.S. Environmental Protection Agency (EPA).

CDC – Infection Control Guidelines

The Centers for Disease Control and Prevention (CDC) have developed Guidelines for Disinfection and Sterilization.

They provide the following information:

**Cleaning** is the removal of foreign material (e.g., soil, and organic material) from objects and is normally accomplished using water with detergents or enzymatic products. Thorough cleaning is required before high-level disinfection and sterilization because inorganic and organic materials that remain on the surfaces of salon implements and equipment interfere with the effectiveness of disinfection and sterilization.

Also, if soiled materials dry, the removal process becomes more difficult and the disinfection or sterilization process less effective or ineffective.

With manual cleaning, the two essential components are friction and soap/detergents and water.

Fruiction (e.g., rubbing/scrubbing the soiled area with a brush) is an old and dependable method. Soap/detergents and water is used to remove soil and debris.

**Disinfection**

Many chemical disinfectants are used alone or in combinations. These include chlorine and chlorine compounds, phenolics, and quaternary ammonium compounds. Commercial formulations based on these chemicals are considered unique products and must be registered with EPA or cleared by FDA. In most instances, a given product is designed for a specific purpose and is to be used in a certain manner. Therefore, users should read labels carefully to ensure the correct product is selected for the intended use and applied efficiently.
Disinfectants are not interchangeable, and incorrect concentrations and inappropriate disinfectants can result in excessive costs. Because occupational diseases have been associated with use of several disinfectants such as chlorine, precautions (e.g., gloves and proper ventilation) should be used to minimize exposure.

Asthma and reactive airway disease can occur in sensitized persons exposed to any airborne chemical, including germicides.

Clinically important asthma can occur at levels below ceiling levels regulated by OSHA (Occupational Safety and Health Administration) or recommended by NIOSH (the National Institute for Occupational Safety and Health).

The following is information that can be used to select an appropriate disinfectant for any item and use it in the most efficient way.

**Properties of an ideal disinfectant**

- **Broad spectrum:** should have a wide antimicrobial spectrum
- **Fast acting:** should produce a rapid kill
- **Not affected by environmental factors:** should be active in the presence of organic matter (e.g., blood, sputum, feces) and compatible with soaps, detergents, and other chemicals encountered in use
- **Nontoxic:** should not be harmful to the user or patron
- **Surface compatibility:** should not corrode instruments and metallic surfaces and should not cause the deterioration of cloth, rubber, plastics, and other materials
- **Residual effect on treated surfaces:** should leave an antimicrobial film on the treated surface
- **Easy to use with clear label directions**
- **Odorless:** should have a pleasant odor or no odor to facilitate its routine use
- **Economical:** should not be prohibitively high in cost
- **Solubility:** should be soluble in water
- **Stability:** should be stable in concentrate and use-dilution
- **Cleaner:** should have good cleaning properties
- **Environmentally friendly:** should not damage the environment on disposal

**Barbicide**

Barbicide is a disinfectant solution used by barbers and cosmetologists for sterilizing grooming tools such as combs and hair-cutting shears. Manufactured by King Research, it was invented in 1947 by Maurice King and marketed heavily around the United States by his brother James.

Barbicide is a United States Environmental Protection Agency approved combination germicide, pseudomonacide, fungicide, and a viricide effective against the HIV-1 virus (AIDS virus), Hepatitis B, and Hepatitis C. Its active ingredient is Alkyl dimethyl benzyl ammonium chloride (5.12% by volume); sodium nitrite and blue dye are also present. Contact can cause irritation to the skin and eyes, and consumption of 50 mL can cause shock and may lead to death if not treated quickly.

**Barbicide is sold as a concentrate** diluted for use in a 1:32 ratio with water, with each stylist having a container for treating their own tools. At one time, several US states legally required barber shops to use Barbicide; according to the maker two still did in 1997. A jar of Barbicide sits on display in the Smithsonian Institution's National Museum of American History.

Illustration 3: Barbicide jar
Chlorine and Chlorine Compounds

Hypochlorites, the most widely used of the chlorine disinfectants, are available as liquid (e.g., sodium hypochlorite) or solid (e.g., calcium hypochlorite). The most prevalent chlorine products in the United States are aqueous solutions of 5.25%–6.15% sodium hypochlorite, usually called household bleach. They have a broad spectrum of antimicrobial activity, do not leave toxic residues, are unaffected by water hardness, are inexpensive and fast acting, remove dried or fixed organisms and biofilms from surfaces, and have a low incidence of serious toxicity. Sodium hypochlorite at the concentration used in household bleach (5.25-6.15%) can produce ocular irritation or oropharyngeal, esophageal, and gastric burns. Other disadvantages of hypochlorites include corrosiveness to metals in high concentrations (>500 ppm), inactivation by organic matter, discoloring or “bleaching” of fabrics, and the release of toxic chlorine gas when mixed with ammonia or other household cleaning agents. EPA has determined the currently registered uses of hypochlorites will not result in unreasonable adverse effects to the environment.

Illustration 4: Bleach

Quaternary Ammonium Compounds

Quaternary Ammonium Compounds (QACs) are a type of chemical that is used to kill bacteria, viruses, and mold. QACs are widely used as disinfectants. The quaternaries are good cleaning agents, but high water hardness and materials such as cotton and gauze pads can make them less microbicidal because of insoluble precipitates or cotton and gauze pads absorb the active ingredients, respectively.

Examples of QAC products are Lysol Spray and Clorox Disinfectant Spray.

Illustration 6: Quaternary disinfectant
Microbicidal Activity of QACs
Results from manufacturers’ data sheets and from published scientific literature indicate that the quaternaries sold as hospital grade disinfectants are generally fungicidal, bactericidal, and virucidal against most viruses.

Salon Computer Keyboards
Quaternary ammonium compounds (as well as 70% isopropyl alcohol, phenolic, and a chlorine-containing wipes effectively (>95%) remove and/or inactivate contaminants from computer keyboards with a 5-second application time. No functional damage or cosmetic changes occurred to the computer keyboards after 300 applications of the disinfectants.

EPA and FDA
In the United States, chemical germicides formulated as sanitizers, disinfectants, or sterilants are regulated in interstate commerce by the Antimicrobials Division, Office of Pesticides Program, EPA, under the authority of the Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA) of 1947, as amended. Under FIFRA, any substance or mixture of substances intended to prevent, destroy, repel, or mitigate any pest (including microorganisms but excluding those in or on living humans or animals) must be registered before sale or distribution.
To obtain a registration, a manufacturer must submit specific data about the safety and effectiveness of each product. For example, EPA requires manufacturers of sanitizers, disinfectants, or chemical sterilants to test formulations by using accepted methods for microbiocidal activity, stability, and toxicity to animals and humans.
The manufacturers submit these data to EPA along with proposed labeling. If EPA concludes the product can be used without causing “unreasonable adverse effects,” then the product and its labeling are registered, and the manufacturer can sell and distribute the product in the United States.

Sterilization
Sterilization destroys all microorganisms on the surface of an article or in a fluid to prevent disease transmission associated with the use of that item. The use of inadequately sterilized items represents a high risk of transmitting pathogens. The concept of what constitutes “sterile” is measured as a probability of sterility for each item to be sterilized.
This probability is commonly referred to as the sterility assurance level (SAL) of the product and is defined as the probability of a single viable microorganism occurring on a product after sterilization. SAL is normally expressed a 10.
For example, if the probability of a spore surviving were one in one million, the SAL would be $10^{-6}$. In short, a SAL is an estimate of lethality of the entire sterilization process and is a conservative calculation.

Liquid Chemicals
Several FDA-cleared liquid chemical sterilants include indications for sterilization of implements. The indicated contact times range from 3 hours to 12 hours. These solutions are commonly used as high-level disinfectants when a shorter processing time is required.
Ultraviolet Radiation (UV)
UV radiation has been used in the disinfection of drinking water, air, and contact lenses. Bacteria and viruses are more easily killed by UV light than are bacterial spores. The wavelength of UV radiation ranges from 328 nm to 210 nm (3280 A to 2100 A). Its maximum bactericidal effect occurs at 240–280 nm. Mercury vapor lamps emit more than 90% of their radiation at 253.7 nm, which is near the maximum microbicidal activity. Inactivation of microorganisms results from destruction of nucleic acid through induction of thymine dimers.

Hand-hygiene

Washing hands at key times with soap and water is one of the most important steps you can take to get rid of germs and avoid spreading germs to those around you.

How can washing your hands keep you healthy?
Germs can get into the body through our eyes, nose, and mouth and make us sick.

Handwashing with soap removes germs from hands and helps prevent sickness. Studies have shown that handwashing can prevent 1 in 3 diarrhea-related sicknesses and 1 in 5 respiratory infections, such as a cold or the flu.

Handwashing helps prevent infections for these reasons:
People often touch their eyes, nose, and mouth without realizing it, introducing germs into their bodies. Germs from unwashed hands may get into foods and drinks when people prepare or consume them. Germs can grow in some types of foods or drinks and make people sick. Germs from unwashed hands can be transferred to other objects, such as door knobs, tables, or toys, and then transferred to another person’s hands.

What is the correct way to wash your hands?
1. Wet your hands with clean running water (warm or cold) and apply soap.
2. Lather your hands by rubbing them together with the soap.
3. Scrub all surfaces of your hands, including the palms, backs, fingers, between your fingers, and under your nails. Keep scrubbing for at least 20 seconds. Need a timer? Hum the “Happy Birthday” song twice.
4. Rinse your hands under clean, running water.
5. Dry your hands using a clean towel or air dry them.
When should you wash your hands?
• Before, during, and after preparing food
• Before eating food
• Before and after caring for someone who is sick
• Before and after treating a cut or wound
• After using the bathroom, changing diapers, or cleaning up a child who has used the bathroom
• After blowing your nose, coughing, or sneezing
• After touching an animal, animal food or treats, animal cages, or animal feces (poop)
• After touching garbage
• If your hands are visibly dirty or greasy

What type of soap should you use?
You can use bar soap or liquid soap to wash your hands. Many public places provide liquid soap because it’s easier and cleaner to share with others. Studies have not found any added health benefit from using soaps containing antibacterial ingredients when compared with plain soap. Both are equally effective in getting rid of germs. If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol.

Hand Sanitizers
Washing hands with soap and water is the best way to reduce the number of germs on them in most situations. If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol. Alcohol-based hand sanitizers can quickly reduce the number of germs on hands in some situations, but sanitizers do not eliminate all types of germs and might not remove harmful chemicals.

Hand sanitizers are not as effective when hands are visibly dirty or greasy.

How do you use hand sanitizers?
• Apply the product to the palm of one hand (read the label to learn the correct amount).
• Rub your hands together.
• Rub the product over all surfaces of your hands and fingers until your hands are dry.

Nail Hygiene
Appropriate hand hygiene includes diligently cleaning fingernails, which may harbor dirt and germs and can contribute to the spread of some infections. Before clipping or grooming nails, all equipment should be properly cleaned. Sterilizing equipment before use is especially important. Infections of the fingernails are often characterized by swelling of the surrounding skin, pain in the surrounding area, or thickening of the nail. In some cases, these infections may be serious and need to be treated by a physician.

To help prevent the spread of germs and nail infections:
• Scrub the underside of nails with soap and water (or a nail brush) every time you wash your hands.
• Clean any nail grooming tools before use.
• Sterilize nail grooming tools before use.
• Avoid biting or chewing nails.
• Avoid cutting cuticles, as they act as barriers to prevent infection.
• Never rip or bite a hangnail. Instead, clip it with a clean, sanitized nail trimmer.

Global Handwashing Day
Celebrate Global Handwashing Day to promote handwashing with soap throughout the world. Global Handwashing Day is a way to support a global and local culture of handwashing with soap, shine a spotlight on the act of handwashing in each country, and raise awareness about the benefits of handwashing with soap. Since 2008, Global Handwashing Day has been celebrated annually on October 15 worldwide. The Global Public-Private Partnership for Handwashing with Soap founded Global Handwashing Day and encourages school children, teachers, and families to get involved.

People and communities around the world will celebrate Global Handwashing day in many ways, including:

• Learning how to wash hands the right way through an online video produced by the Centers for Disease Control
• Watching a Facebook Live talk on why handwashing with soap is so important.
• Sharing handwashing lessons, events, and materials for thousands of students across the state of Georgia, where CDC is based.

How does handwashing help fight antibiotic resistance?
Antibiotic resistance occurs when bacteria resist the effects of an antibiotic – that is, germs are not killed and they continue to grow. Sicknesses caused by antibiotic-resistant bacteria can be harder to treat. Simply using antibiotics creates resistance, so avoiding infections in the first place reduces the amount of antibiotics that have to be used and reduces the likelihood that resistance will develop during treatment. Handwashing helps prevent many sicknesses, meaning less use of antibiotics.

Antiseptics
Dictionary.com defines antiseptics as: A substance that inhibits the proliferation of infectious microorganisms. Proliferation is the growth or production of cells by multiplication of parts.

Google explains them this way: antiseptic (anti-sep-tik) n. a chemical, such as chlorhexidine or cetrimide, that destroys or inhibits the growth of disease-causing bacteria and other microorganisms. Antiseptics are used externally to cleanse wounds and internally to treat infections of the intestine and bladder.

Encyclopedia.com explains antiseptics as:
An antiseptic is a substance that inhibits the growth and development of microorganisms. For practical purposes, antiseptics are routinely thought of as topical agents, for application to skin, mucous membranes, and inanimate objects, although a formal definition includes agents that are used internally, such as the urinary tract antiseptics.

Purpose
Antiseptics are a diverse class of drugs that are applied to skin surfaces or mucous membranes for their anti-infective effects.
This may be either bacteriocidal (kills bacteria) or bacteriostatic (stops the growth of bacteria). Their uses include cleansing of skin and wound surfaces after injury, preparation of skin surfaces prior to injections or surgical procedures, and routine disinfection of the oral cavity as part of a program of oral hygiene. Antiseptics are also used for disinfection of inanimate objects, including instruments and furniture surfaces.

**Commonly used antiseptics for skin cleaning include benzalkonium chloride, chlorhexidine, hexachlorophine, alcohol, and hydrogen peroxide.**

Other agents that have been used for this purpose, but have largely been supplanted by more effective or safer agents, include boric acid and volatile oils such as methyl salicylate (oil of wintergreen).

**Chlorhexidine** shows a high margin of safety when applied to mucous membranes, and has been used in oral rinses and preoperative total body washes.

**Benzalkonium chloride and hexachlorophine** are used primarily as hand scrubs or face washes. Benzalkonium may also find application as a disinfecting agent for instruments, and in low concentration as a preservative for drugs including ophthalmic solutions. Benzalkonium chloride is inactivated by organic compounds, including soap, and must not be applied to areas that have not been fully rinsed.

**Hydrogen peroxide** acts through the liberation of oxygen gas. Although the antibacterial activity of hydrogen peroxide is relatively weak, the liberation of oxygen bubbles produces an effervescent action, which may be useful for wound cleansing through removal of tissue debris. The activity of hydrogen peroxide may be reduced by the presence of blood and pus. The appropriate concentration of hydrogen peroxide for antiseptic use is 3%, although higher concentrations are available.

**Precautions**

Precautions vary with individual product and use. Hypersensitivity reactions should be considered with organic compounds such as chlorhexidine, benzalkonium and hexachlorophine. Skin dryness and irritation should be considered with all products, but particularly with those containing alcohol.

Most antiseptics have not been rated according to pregnancy category under the pregnancy risk factor system.

Hexachlorophene is schedule C during pregnancy, and should not be used on newborns due to risk of systemic absorption with potential central nervous system (CNS) effects, including convulsions.

Application of hexachlorophene to open wounds, mucous membranes, or areas of thin skin, such as the genitalia, should be avoided, since this may promote systemic absorption.

Chlorhexidine should not be instilled into the ear. There is one anecdotal report of deafness following use of chlorhexidine in a patient with a perforated eardrum. Safety in pregnancy and breastfeeding have not been reported; however there is one anecdotal report of an infant developing slowed heartbeat apparently related to maternal use of chlorhexidine.

**Interactions**

Antiseptics are not known to interact with any other skin products. However, they should not be used together with any other topical cream, solution, or ointment.
Parasite infection

Lice infestation
A lice infestation, or pediculosis, is caused by parasites living on human skin. Lice are tiny, wingless insects with sucking mouthparts that feed on human blood and lay eggs on body hair or in clothing. Lice bites can cause intense itching.

There are three related species of human lice:
• head lice, Pediculus humanus capitis
• body lice, Pediculus humanus corpus
• pubic lice, Phthirus pubis, commonly called crab lice

Pediculosis capitis is an infestation of head lice. A body lice infestation is called pediculosis corporis. Pediculosis palpebrarum or phthiriasis palpebrarum, caused by crab lice, is an infestation of the pubic hair.

Head lice live and crawl on the scalp, sucking blood every three to six hours. Their claws are adapted for clinging to hair or clothing. Adult head lice can be silvery-white to reddish-brown. They are about the size of a sesame seed. Female lice lay their eggs in sacs called nits that are about 0.04 in (1 mm) long and are glued to shafts of hair close to the scalp. During her one-month lifespan a female louse may lay more than 100 eggs. The nymphs hatch in three to 14 days and must feed on blood within one day. Nymphs are smaller and lighter in color than adults and become sexually mature after nine to 12 days.

Body lice lay their nits in clothing or bedding. Occasionally the nits are attached to body hair. Body lice nits are oval and yellow to white in color. They may not hatch for up to 30 days. Nymphs mature in about seven days.

Pubic lice have large front legs and look like tiny crabs. Females are larger than males. Nits hatch in about one week and the nymphs mature in about seven days.

Transmission
Lice are endemic in human populations, spreading through personal contact or contact with infested clothing or other personal items. They can be transmitted when unaffected clothing is stored with infested items. Among children head lice can be commonly transmitted by the sharing of hats, combs, brushes, hair accessories, headphones, pillows, and stuffed toys. Pubic lice are sexually transmitted, although occasionally they can be transmitted through infested bedding, towels, or clothing. Lice do not jump, hop, or fly and they do not live on pets. Head lice cannot survive without a human host for more than a few days at most. Body lice can live without human contact for up to 10 days. Pubic lice can survive for one to two weeks without human contact.

Head lice infestations are extremely common among children in schools, childcare facilities, camps, and playgrounds. They are the second most common communicable health problem in children, after the common cold, and appear to be on the increase. Some 6 to 12 million American children get head lice every year. In developing countries more than 50 percent of the general population may be infested. Although anyone can get head lice, children aged three to ten and their families are most affected.
Lice infestations are characterized by intense itching caused by an allergic reaction to a toxin in lice saliva. The itching can interfere with sleep and concentration. Repeated bites can lead to generalized skin eruptions or inflammation. Swelling or inflammation of the neck glands are common complications of head lice.

**Prevention**

Prevention of lice infestation depends on adequate personal hygiene and consistently not sharing combs, brushes, hair accessories, hats, towels, or bedding. Hair should be checked weekly for lice and nits. Prevention includes sanitation and sterilization of salon equipment and implements as directed using an EPA approved product.

**Lesson 2 Summary**

In this lesson we have thoroughly discussed the most important aspects of standard cleaning and disinfecting precautions, how to distinguish between disinfectants and antiseptics, and how to sanitize hands and disinfect tools used in the practice of cosmetology. We now understand how to control the spread of bacterial, viral, and fungal infections. We have also reviewed practices in bloodborne pathogens control as well as parasite infection and infestation control. Personal care service workers must consistently strive to maintain professional sanitation and sterilization methods in order to protect themselves and others in the salon environment.

Let us now turn our attention to the next subject: Occupational Safety and Health Administration Regulations.
Lesson 3: Occupational Safety and Health Administration Regulations (1 hour)

Outline
• Hazard Communication Standard
• Safety Data Sheets
• Manufacturer's SDS
• Safety In The Workplace
• Employer's Best Practices

Learning objectives
After completing this lesson you will be able to
• list the 16 sections of Safety Data Sheets
• identify the purpose of the Hazard Communication Standard
• list the required sections and it's contents of a Safety Data Sheet
• recognize a manufacturer's SDS
• describe the ways employers are required to provide a safe workplace
• identify aspects of filing a complaint
• explain employer responsibilities in maintaining a safe workplace
• list the action steps in pre-assessment of hazards
• describe aspects of personal protective equipment

Introduction
With the Occupational Safety and Health Act of 1970, Congress created the Occupational Safety and Health Administration (OSHA) to assure safe and healthful working conditions for working men and women by setting and enforcing standards and by providing training, outreach, education and assistance. OSHA is part of the United States Department of Labor. The administrator for OSHA is the Assistant Secretary of Labor for Occupational Safety and Health. OSHA's administrator answers to the Secretary of Labor, who is a member of the cabinet of the President of the United States.

Hazard Communication Standard

What is Hazard Classification?
Hazard classification is the process of evaluating the full range of available scientific evidence to determine if a chemical is hazardous, as well as to identify the level of severity of the hazardous effect. When complete, the evaluation identifies the hazard class(es) and associated hazard category of the chemical. The HCS defines hazard class as the nature of a physical or health hazard, e.g., flammable solid, carcinogen, and acute toxicity.

Hazard Communication Standard

OSHA's Hazard Communication Standard (HCS) is designed to protect against chemical injuries and illnesses by ensuring that employers and workers are provided with sufficient information to anticipate, recognize, evaluate, and control chemical hazards and take appropriate protective measures. This information is provided through safety data sheets (SDSs), labels, and employee training. In order for SDSs, labels, and training to be effective, the hazard information they convey must be complete and accurate. Thus, it is critically important to obtain comprehensive and correct information about the hazards associated with particular chemicals.
SAFETY DATA SHEETS (SDS)

Sections 1 through 8 contain general information about the chemical, identification, hazards, composition, safe handling practices, and emergency control measures (e.g., fire fighting). This information should be helpful to those that need to get the information quickly.

Sections 9 through 11 and 16 contain other technical and scientific information, such as physical and chemical properties, stability and reactivity information, toxicological information, exposure control information, and other information including the date of preparation or last revision. The SDS must also state that no applicable information was found when the preparer does not find relevant information for any required element.

Sections 12 through 15, is required to be consistent with the UN Globally Harmonized System of Classification and Labeling of Chemicals (GHS), but OSHA will not enforce the content of these sections because they concern matters handled by other agencies.

A description of all 16 sections of the SDS, along with their contents, is presented below:

Section 1: Identification
This section identifies the chemical on the SDS as well as the recommended uses. It also provides the essential contact information of the supplier. The required information consists of:

- Product identifier used on the label and any other common names or synonyms by which the substance is known.
- Name, address, phone number of the manufacturer, importer, or other responsible party, and emergency phone number.
- Recommended use of the chemical (e.g., a brief description of what it actually does, such as flame retardant) and any restrictions on use (including recommendations given by the supplier).

Section 2: Hazard(s) Identification
This section identifies the hazards of the chemical presented on the SDS and the appropriate warning information associated with those hazards. The required information consists of:

- The hazard classification of the chemical (e.g., flammable liquid, category 1).
- Signal word.
- Hazard statement(s).
- Pictograms (the pictograms or hazard symbols may be presented as graphical reproductions of the symbols in black and white or be a description of the name of the symbol (e.g., skull and crossbones, flame).
- Precautionary statement(s).
- Description of any hazards not otherwise classified.
- For a mixture that contains an ingredient(s) with unknown toxicity, a statement describing how much (percentage) of the mixture consists of ingredient(s) with unknown acute toxicity. Please note that this is a total percentage of the mixture and not tied to the individual ingredient(s).

Section 3: Composition/Information on Ingredients
This section identifies the ingredient(s) contained in the product indicated on the SDS, including impurities and stabilizing additives. This section includes information on substances, mixtures, and all chemicals where a trade secret is claimed. The required information consists of:
Substances

• Chemical name.
• Common name and synonyms.
• Chemical Abstracts Service (CAS) number and other unique identifiers.
• Impurities and stabilizing additives, which are themselves classified and which contribute to the classification of the chemical.

Mixtures

• Same information required for substances.
• The chemical name and concentration (i.e., exact percentage) of all ingredients which are classified as health hazards and are:
  • Present above their cut-off/concentration limits or
  • Present a health risk below the cut-off/concentration limits.
• The concentration (exact percentages) of each ingredient must be specified except concentration ranges may be used in the following situations:
  • A trade secret claim is made,
  • There is batch-to-batch variation, or
  • The SDS is used for a group of substantially similar mixtures.

Chemicals where a trade secret is claimed

• A statement that the specific chemical identity and/or exact percentage (concentration) of composition has been withheld as a trade secret is required.

Section 4: First-Aid Measures

This section describes the initial care that should be given by untrained responders to an individual who has been exposed to the chemical. The required information consists of:

• Necessary first-aid instructions by relevant routes of exposure (inhalation, skin and eye contact, and ingestion).
• Description of the most important symptoms or effects, and any symptoms that are acute or delayed.
• Recommendations for immediate medical care and special treatment needed, when necessary.

Section 5: Fire-Fighting Measures

This section provides recommendations for fighting a fire caused by the chemical. The required information consists of:

• Recommendations of suitable extinguishing equipment, and information about extinguishing equipment that is not appropriate for a particular situation.
• Advice on specific hazards that develop from the chemical during the fire, such as any hazardous combustion products created when the chemical burns.
• Recommendations on special protective equipment or precautions for firefighters.

Section 6: Accidental Release Measures

This section provides recommendations on the appropriate response to spills, leaks, or releases, including containment and cleanup practices to prevent or minimize exposure to people, properties, or
the environment. It may also include recommendations distinguishing between responses for large and small spills where the spill volume has a significant impact on the hazard. The required information may consist of recommendations for:

- Use of personal precautions (such as removal of ignition sources or providing sufficient ventilation) and protective equipment to prevent the contamination of skin, eyes, and clothing.
- Emergency procedures, including instructions for evacuations, consulting experts when needed, and appropriate protective clothing.
- Methods and materials used for containment (e.g., covering the drains and capping procedures).
- Cleanup procedures (e.g., appropriate techniques for neutralization, decontamination, cleaning or vacuuming; adsorbent materials; and/or equipment required for containment/clean up)

Section 7: Handling and Storage

This section provides guidance on the safe handling practices and conditions for safe storage of chemicals. The required information consists of:

- Precautions for safe handling, including recommendations for handling incompatible chemicals, minimizing the release of the chemical into the environment, and providing advice on general hygiene practices (e.g., eating, drinking, and smoking in work areas is prohibited).
- Recommendations on the conditions for safe storage, including any incompatibilities. Provide advice on specific storage requirements (e.g., ventilation requirements)

Section 8: Exposure Controls/Personal Protection

This section indicates the exposure limits, engineering controls, and personal protective measures that can be used to minimize worker exposure. The required information consists of:

- OSHA Permissible Exposure Limits (PELs), American Conference of Governmental Industrial Hygienists (ACGIH) Threshold Limit Values (TLVs), and any other exposure limit used or recommended by the chemical manufacturer, importer, or employer preparing the safety data sheet, where available.
- Appropriate engineering controls (e.g., use local exhaust ventilation, or use only in an enclosed system).
- Recommendations for personal protective measures to prevent illness or injury from exposure to chemicals, such as personal protective equipment (PPE) (e.g., appropriate types of eye, face, skin or respiratory protection needed based on hazards and potential exposure).
- Any special requirements for PPE, protective clothing or respirators

Section 9: Physical and Chemical Properties

This section identifies physical and chemical properties associated with the substance or mixture. The minimum required information consists of:

- Appearance (physical state, color, etc.);
- Upper/lower flammability or explosive limits;
- Odor;
- Vapor pressure;
- Odor threshold;
- Vapor density;
- pH;
- Relative density;
- Melting point/freezing point;
- Solubility(ies);
- Initial boiling point and boiling range;
- Flash point;
- Evaporation rate;
- Flammability (solid, gas);
- Partition coefficient: n-octanol/water;
- Auto-ignition temperature;
- Decomposition temperature; and
- Viscosity.

The SDS may not contain every item on the above list because information may not be relevant or is not available. When this occurs, a notation to that effect must be made for that chemical property. Manufacturers may also add other relevant properties, such as the dust deflagration index (Kst) for combustible dust, used to evaluate a dust's explosive potential

**Section 10: Stability and Reactivity**

This section describes the reactivity hazards of the chemical and the chemical stability information. This section is broken into three parts: reactivity, chemical stability, and other. The required information consists of:

**Reactivity**

- Description of the specific test data for the chemical(s). This data can be for a class or family of the chemical if such data adequately represent the anticipated hazard of the chemical(s), where available.

**Chemical stability**

- Indication of whether the chemical is stable or unstable under normal ambient temperature and conditions while in storage and being handled.
- Description of any stabilizers that may be needed to maintain chemical stability.
- Indication of any safety issues that may arise should the product change in physical appearance.

**Other**

- Indication of the possibility of hazardous reactions, including a statement whether the chemical will react or polymerize, which could release excess pressure or heat, or create other hazardous conditions. Also, a description of the conditions under which hazardous reactions may occur.
- List of all conditions that should be avoided (e.g., static discharge, shock, vibrations, or environmental conditions that may lead to hazardous conditions).
- List of all classes of incompatible materials (e.g., classes of chemicals or specific substances) with which the chemical could react to produce a hazardous situation.
- List of any known or anticipated hazardous decomposition products that could be produced because of use, storage, or heating. (Hazardous combustion products should also be included in Section 5 (Fire-Fighting Measures) of the SDS.)
Section 11: Toxicological Information

This section identifies toxicological and health effects information or indicates that such data are not available. The required information consists of:

- Information on the likely routes of exposure (inhalation, ingestion, skin and eye contact). The SDS should indicate if the information is unknown.
- Description of the delayed, immediate, or chronic effects from short- and long-term exposure.
- The numerical measures of toxicity (e.g., acute toxicity estimates such as the LD50 (median lethal dose)) - the estimated amount [of a substance] expected to kill 50% of test animals in a single dose.
- Description of the symptoms. This description includes the symptoms associated with exposure to the chemical including symptoms from the lowest to the most severe exposure.
- Indication of whether the chemical is listed in the National Toxicology Program (NTP) Report on Carcinogens (latest edition) or has been found to be a potential carcinogen in the International Agency for Research on Cancer (IARC) Monographs (latest editions) or found to be a potential carcinogen by OSHA.

Section 12: Ecological Information (non-mandatory)

This section provides information to evaluate the environmental impact of the chemical(s) if it were released to the environment. The information may include:

- Data from toxicity tests performed on aquatic and/or terrestrial organisms, where available (e.g., acute or chronic aquatic toxicity data for fish, algae, crustaceans, and other plants; toxicity data on birds, bees, plants).
- Whether there is a potential for the chemical to persist and degrade in the environment either through biodegradation or other processes, such as oxidation or hydrolysis.
- Results of tests of bioaccumulation potential, making reference to the octanol-water partition coefficient (Kow) and the bioconcentration factor (BCF), where available.
- The potential for a substance to move from the soil to the groundwater (indicate results from adsorption studies or leaching studies).
- Other adverse effects (e.g., environmental fate, ozone layer depletion potential, photochemical ozone creation potential, endocrine disrupting potential, and/or global warming potential).

Section 13: Disposal Considerations (non-mandatory)

This section provides guidance on proper disposal practices, recycling or reclamation of the chemical(s) or its container, and safe handling practices. To minimize exposure, this section should also refer the reader to Section 8 (Exposure Controls/Personal Protection) of the SDS. The information may include:

- Description of appropriate disposal containers to use.
- Recommendations of appropriate disposal methods to employ.
- Description of the physical and chemical properties that may affect disposal activities.
- Language discouraging sewage disposal.
- Any special precautions for landfills or incineration activities.
Section 14: Transport Information (non-mandatory)
This section provides guidance on classification information for shipping and transporting of hazarous chemical(s) by road, air, rail, or sea. The information may include:

- UN number (i.e., four-figure identification number of the substance)\(^1\).
- UN proper shipping name\(^1\).
- Transport hazard class(es)\(^1\).
- Packing group number, if applicable, based on the degree of hazard\(^2\).
- Environmental hazards (e.g., identify if it is a marine pollutant according to the International Maritime Dangerous Goods Code (IMDG Code)).
- Guidance on transport in bulk (according to Annex II of MARPOL 73/78\(^3\) and the International Code for the Construction and Equipment of Ships Carrying Dangerous Chemicals in Bulk (International Bulk Chemical Code (IBC Code))).
- Any special precautions which an employee should be aware of or needs to comply with, in connection with transport or conveyance either within or outside their premises (indicate when information is not available).

Section 15: Regulatory Information (non-mandatory)
This section identifies the safety, health, and environmental regulations specific for the product that is not indicated anywhere else on the SDS. The information may include:

- Any national and/or regional regulatory information of the chemical or mixtures (including any OSHA, Department of Transportation, Environmental Protection Agency, or Consumer Product Safety Commission regulations)

Section 16: Other Information
This section indicates when the SDS was prepared or when the last known revision was made. The SDS may also state where the changes have been made to the previous version. You may wish to contact the supplier for an explanation of the changes. Other useful information also may be included here.

Who Must Conduct Hazard Classifications?
*Only chemical manufacturers and importers are required to perform hazard classifications on the chemicals they produce or import.* Under the HCS, an employer that manufactures, processes, formulates, blends, mixes, repackages, or otherwise changes the composition of a hazardous chemical is considered a "chemical manufacturer."

The following 16 page document is the official manufacturer's Safety Data Sheet for Lysol Brand Disinfectant Concentrate
SAFETY DATA SHEET

Lysol Brand Disinfectant Concentrate

1. Product and company identification

Product name: Lysol Brand Disinfectant Concentrate
Distributed by: Reckitt Benckiser LLC.
   Morris Corporate Center IV
   399 Interpace Parkway (P.O. Box 225)
   Parsippany, New Jersey 07054-0225
   +1 973 404 2600

Emergency telephone number (Medical): 1-800-338-6167
Emergency telephone number (Transport): 1-800-424-9300 (U.S. & Canada) CHEMTREC
   Outside U.S. and Canada (North America), call Chemtrec: 703-527-3887
Website: http://www.rbnainfo.com

Product use: Disinfectant.

This SDS is designed for workplace employees, emergency personnel and for other conditions and situations where there is greater potential for large-scale or prolonged exposure, in accordance with the requirements of USDOL Occupational Safety and Health Administration.

This SDS is not applicable for consumer use of our products. For consumer use, all precautionary and first aid language is provided on the product label in accordance with the applicable government regulations, and shown in Section 15 of this SDS.

SDS #: 353773PSDS v3.0
Formulation #: 269-005 (353773 v10.0)
EPA ID No.: 777-94
UPC Code / Sizes: 19200-02201-10; 19200-77500-10 (12 fl. oz. PET Amber Pour Bottle with CRC cap)

2. Hazards identification

Classification of the substance or mixture:
- FLAMMABLE LIQUIDS - Category 4
- SKIN CORROSION/IRRITATION - Category 1C
- SERIOUS EYE DAMAGE/ EYE IRRITATION - Category 1

GHS label elements
- Signal word: Danger
- Hazard statements: Combustible liquid. Causes severe skin burns and eye damage.

Precautionary statements

COURSE: FL 16 Hour CE Course (16 hours)
for Cosmetologists, Nail Technicians, Facial Specialists, and Full Specialists

ContinuingCosmetology.com

Date of issue: 01/04/2015

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2. Hazards identification

General : Read label before use. Keep out of reach of children. If medical advice is needed, have product container or label at hand.

Prevention : Wear protective gloves. Wear eye or face protection. Wear protective clothing. Keep away from flames and hot surfaces. - No smoking. Wash hands thoroughly after handling.

Response : IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing. Immediately call a POISON CENTER or physician. IF SWALLOWED: Immediately call a POISON CENTER or physician. Rinse mouth. Do NOT induce vomiting. IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water or shower. Wash contaminated clothing before reuse. Immediately call a POISON CENTER or physician. IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. Immediately call a POISON CENTER or physician.

Storage : Store locked up. Store in a well-ventilated place. Keep cool.

Disposal : Dispose of contents and container in accordance with all local, regional, national and international regulations.

Supplemental label elements : None known.

Hazards not otherwise classified : None known.

3. Composition/information on ingredients

| Substance/mixture | Mixture |

<table>
<thead>
<tr>
<th>Ingredient name</th>
<th>%</th>
<th>CAS number</th>
</tr>
</thead>
<tbody>
<tr>
<td>clorofene</td>
<td>5 - 10</td>
<td>120-32-1</td>
</tr>
<tr>
<td>potassium hydroxide</td>
<td>2.5 - 5</td>
<td>1310-58-3</td>
</tr>
<tr>
<td>Ethyl alcohol</td>
<td>1 - 2.5</td>
<td>64-17-5</td>
</tr>
<tr>
<td>Isopropyl alcohol</td>
<td>1 - 2.5</td>
<td>67-63-0</td>
</tr>
</tbody>
</table>

Any concentration shown as a range is to protect confidentiality or is due to batch variation.

There are no additional ingredients present which, within the current knowledge of the supplier and in the concentrations applicable, are classified as hazardous to health or the environment and hence require reporting in this section.

4. First aid measures

Description of necessary first aid measures

Eye contact : Get medical attention immediately. Call a poison center or physician. Immediately flush eyes with plenty of water, occasionally lifting the upper and lower eyelids. Check for and remove any contact lenses. Continue to rinse for at least 10 minutes. Chemical burns must be treated promptly by a physician.

Inhalation : Get medical attention immediately. Call a poison center or physician. Remove victim to fresh air and keep at rest in a position comfortable for breathing. If it is suspected that fumes are still present, the rescuer should wear an appropriate mask or self-contained breathing apparatus. If not breathing, if breathing is irregular or if respiratory arrest occurs, provide artificial respiration or oxygen by trained personnel. It may be dangerous to the person providing aid to give mouth-to-mouth resuscitation. If unconscious, place in recovery position and get medical attention immediately. Maintain an open airway. Loosen tight clothing such as a collar, tie, belt or waistband.
4. First aid measures

Skin contact: Get medical attention immediately. Call a poison center or physician. Flush contaminated skin with plenty of water. Remove contaminated clothing and shoes. Wash contaminated clothing thoroughly with water before removing it, or wear gloves. Continue to rinse for at least 10 minutes. Chemical burns must be treated promptly by a physician. Wash clothing before reuse. Clean shoes thoroughly before reuse.

Ingestion: Get medical attention immediately. Call a poison center or physician. Wash out mouth with water. Remove dentures if any. Remove victim to fresh air and keep at rest in a position comfortable for breathing. If material has been swallowed and the exposed person is conscious, give small quantities of water to drink. Stop if the exposed person feels sick as vomiting may be dangerous. Do not induce vomiting unless directed to do so by medical personnel. If vomiting occurs, the head should be kept low so that vomit does not enter the lungs. Chemical burns must be treated promptly by a physician. Never give anything by mouth to an unconscious person. If unconscious, place in recovery position and get medical attention immediately. Maintain an open airway. Loosen tight clothing such as a collar, tie, belt or waistband.

Most important symptoms/effects, acute and delayed

Potential acute health effects

Eye contact: Causes serious eye damage.

Inhalation: May give off gas, vapor or dust that is very irritating or corrosive to the respiratory system.

Skin contact: Causes severe burns.

Ingestion: May cause burns to mouth, throat and stomach.

Over-exposure signs/symptoms

Eye contact: Adverse symptoms may include the following:
- pain
- watering
- redness

Inhalation: No specific data.

Skin contact: Adverse symptoms may include the following:
- pain or irritation
- redness
- blistering may occur

Ingestion: Adverse symptoms may include the following:
- stomach pains

Indication of immediate medical attention and special treatment needed, if necessary

Notes to physician: Treat symptomatically. Contact poison treatment specialist immediately if large quantities have been ingested or inhaled.

Specific treatments: No specific treatment.

Protection of first-aiders: No action shall be taken involving any personal risk or without suitable training. If it is suspected that fumes are still present, the rescuer should wear an appropriate mask or self-contained breathing apparatus. It may be dangerous to the person providing aid to give mouth-to-mouth resuscitation. Wash contaminated clothing thoroughly with water before removing it, or wear gloves.

See toxicological information (Section 11)
5. Fire-fighting measures

**Extinguishing media**

<table>
<thead>
<tr>
<th>Suitable extinguishing media</th>
<th>Use dry chemical, CO₂, water spray (fog) or foam.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unsuitable extinguishing media</td>
<td>Do not use water jet.</td>
</tr>
</tbody>
</table>

**Specific hazards arising from the chemical**

- Combustible liquid. In a fire or if heated, a pressure increase will occur and the container may burst, with the risk of a subsequent explosion. Runoff to sewer may create fire or explosion hazard.

**Hazardous thermal decomposition products**

- Decomposition products may include the following materials:
  - carbon dioxide
  - carbon monoxide
  - halogenated compounds
  - metal oxide/oxides

**Special protective actions for fire-fighters**

- Promptly isolate the scene by removing all persons from the vicinity of the incident if there is a fire. No action shall be taken involving any personal risk or without suitable training. Move containers from fire area if this can be done without risk. Use water spray to keep fire-exposed containers cool.

**Special protective equipment for fire-fighters**

- Fire-fighters should wear appropriate protective equipment and self-contained breathing apparatus (SCBA) with a full face-piece operated in positive pressure mode.

6. Accidental release measures

**Personal precautions, protective equipment and emergency procedures**

**For non-emergency personnel**

- No action shall be taken involving any personal risk or without suitable training. Evacuate surrounding areas. Keep unnecessary and unprotected personnel from entering. Do not touch or walk through spilled material. Shut off all ignition sources. No flares, smoking or flames in hazard area. Do not breathe vapor or mist. Provide adequate ventilation. Wear appropriate respirator when ventilation is inadequate. Put on appropriate personal protective equipment.

**For emergency responders**

- If specialised clothing is required to deal with the spillage, take note of any information in Section 8 on suitable and unsuitable materials. See also the information in "For non-emergency personnel".

**Environmental precautions**

- Avoid dispersal of spilled material and runoff and contact with soil, waterways, drains and sewers. Inform the relevant authorities if the product has caused environmental pollution (sewers, waterways, soil or air).

**Methods and materials for containment and cleaning up**

**Small spill**

- Stop leak if without risk. Move containers from spill area. Use spark-proof tools and explosion-proof equipment. Dilute with water and mop up if water-soluble. Alternatively, or if water-insoluble, absorb with an inert dry material and place in an appropriate waste disposal container. Dispose of via a licensed waste disposal contractor.
6. Accidental release measures

Large spill: Stop leak if without risk. Move containers from spill area. Use spark-proof tools and explosion-proof equipment. Approach release from upwind. Prevent entry into sewers, water courses, basements or confined areas. Wash spillages into an effluent treatment plant or proceed as follows. Contain and collect spillage with non-combustible, absorbent material e.g. sand, earth, vermiculite or diatomaceous earth and place in container for disposal according to local regulations (see Section 13). Dispose of via a licensed waste disposal contractor. Contaminated absorbent material may pose the same hazard as the spilled product. Note: see Section 1 for emergency contact information and Section 13 for waste disposal.

7. Handling and storage

Precautions for safe handling

Protective measures: Put on appropriate personal protective equipment (see Section 8). Do not get in eyes or on skin or clothing. Do not breathe vapor or mist. Do not ingest. Use only with adequate ventilation. Wear appropriate respirator when ventilation is inadequate. Do not enter storage areas and confined spaces unless adequately ventilated. Keep in the original container or an approved alternative made from a compatible material, kept tightly closed when not in use. Store and use away from heat, sparks, open flame or any other ignition source. Use explosion-proof electrical (ventilating, lighting and material handling) equipment. Use only non-sparking tools. Empty containers retain product residue and can be hazardous. Do not reuse container.

Conditions for safe storage, including any incompatibilities: Store in accordance with local regulations. Store in a segregated and approved area. Store in original container protected from direct sunlight in a dry, cool and well-ventilated area, away from incompatible materials (see Section 10) and food and drink. Store locked up. Eliminate all ignition sources. Separate from oxidizing materials. Keep container tightly closed and sealed until ready for use. Containers that have been opened must be carefully resealed and kept upright to prevent leakage. Do not store in unlabeled containers. Use appropriate containment to avoid environmental contamination.

8. Exposure controls/personal protection

Control

Occupational exposure limits

<table>
<thead>
<tr>
<th>Ingredient name</th>
<th>Exposure limits</th>
</tr>
</thead>
<tbody>
<tr>
<td>potassium hydroxide</td>
<td>ACGIH TLV (United States, 6/2013). C: 2 mg/m³</td>
</tr>
<tr>
<td></td>
<td>OSHA PEL 1989 (United States, 3/1989). CEIL: 2 mg/m³</td>
</tr>
<tr>
<td></td>
<td>NIOSH REL (United States, 10/2013). TWA: 2 mg/m³ 10 hours.</td>
</tr>
<tr>
<td>Ethyl alcohol</td>
<td>ACGIH TLV (United States, 6/2013). STEL: 1000 ppm 15 minutes.</td>
</tr>
<tr>
<td></td>
<td>OSHA PEL 1989 (United States, 3/1989). TWA: 1000 ppm 8 hours. TWA: 1900 mg/m³ 8 hours.</td>
</tr>
<tr>
<td></td>
<td>NIOSH REL (United States, 10/2013). TWA: 1000 ppm 10 hours. TWA: 1900 mg/m³ 10 hours.</td>
</tr>
<tr>
<td></td>
<td>OSHA PEL (United States, 2/2013).</td>
</tr>
</tbody>
</table>

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8. Exposure controls/personal protection

<table>
<thead>
<tr>
<th>Isopropyl alcohol</th>
</tr>
</thead>
<tbody>
<tr>
<td>TWA: 1000 ppm 8 hours.</td>
</tr>
<tr>
<td>TWA: 1900 mg/m³ 8 hours.</td>
</tr>
<tr>
<td>ACGIH TLV (United States, 6/2013).</td>
</tr>
<tr>
<td>TWA: 200 ppm 8 hours.</td>
</tr>
<tr>
<td>STEL: 400 ppm 15 minutes.</td>
</tr>
<tr>
<td>TWA: 400 ppm 8 hours.</td>
</tr>
<tr>
<td>TWA: 980 mg/m³ 8 hours.</td>
</tr>
<tr>
<td>STEL: 500 ppm 15 minutes.</td>
</tr>
<tr>
<td>STEL: 1225 mg/m³ 15 minutes.</td>
</tr>
<tr>
<td>NIOSH REL (United States, 10/2013).</td>
</tr>
<tr>
<td>TWA: 400 ppm 10 hours.</td>
</tr>
<tr>
<td>TWA: 980 mg/m³ 10 hours.</td>
</tr>
<tr>
<td>STEL: 500 ppm 15 minutes.</td>
</tr>
<tr>
<td>STEL: 1225 mg/m³ 15 minutes.</td>
</tr>
<tr>
<td>OSHA PEL (United States, 2/2013).</td>
</tr>
<tr>
<td>TWA: 400 ppm 8 hours.</td>
</tr>
<tr>
<td>TWA: 980 mg/m³ 8 hours.</td>
</tr>
</tbody>
</table>

**Appropriate engineering controls**: Use only with adequate ventilation. Use process enclosures, local exhaust ventilation or other engineering controls to keep worker exposure to airborne contaminants below any recommended or statutory limits. The engineering controls also need to keep gas, vapor or dust concentrations below any lower explosive limits. Use explosion-proof ventilation equipment.

**Environmental exposure controls**: Emissions from ventilation or work process equipment should be checked to ensure they comply with the requirements of environmental protection legislation. In some cases, fume scrubbers, filters or engineering modifications to the process equipment will be necessary to reduce emissions to acceptable levels.

**Individual protection measures**

**Hygiene measures**: Wash hands, forearms and face thoroughly after handling chemical products, before eating, smoking and using the lavatory and at the end of the working period. Appropriate techniques should be used to remove potentially contaminated clothing. Wash contaminated clothing before reusing. Ensure that eyewash stations and safety showers are close to the workstation location.

**Eye/face protection**: Safety eyewear complying with an approved standard should be used when a risk assessment indicates this is necessary to avoid exposure to liquid splashes, mists, gases or dusts. If contact is possible, the following protection should be worn, unless the assessment indicates a higher degree of protection: chemical splash goggles and/or face shield. If inhalation hazards exist, a full-face respirator may be required instead.

**Skin protection**

**Hand protection**: Chemical-resistant, impervious gloves complying with an approved standard should be worn at all times when handling chemical products if a risk assessment indicates this is necessary. Considering the parameters specified by the glove manufacturer, check during use that the gloves are still retaining their protective properties. It should be noted that the time to breakthrough for any glove material may be different for different glove manufacturers. In the case of mixtures, consisting of several substances, the protection time of the gloves cannot be accurately estimated.

**Body protection**: Personal protective equipment for the body should be selected based on the task being performed and the risks involved and should be approved by a specialist before handling this product.
8. Exposure controls/personal protection

**Other skin protection**
- Appropriate footwear and any additional skin protection measures should be selected based on the task being performed and the risks involved and should be approved by a specialist before handling this product.

**Respiratory protection**
- Use a properly fitted, air-purifying or air-fed respirator complying with an approved standard if a risk assessment indicates this is necessary. Respirator selection must be based on known or anticipated exposure levels, the hazards of the product and the safe working limits of the selected respirator.

9. Physical and chemical properties

**Appearance**
- **Physical state**: Liquid. [Clear.]
- **Color**: Red.
- **Odor**: soap
- **Odor threshold**: Not available.
- **pH**: 10.3 to 11.1 [Conc. (% w/w): 100%]
- **Melting point**: Not available.
- **Boiling point**: Not available.
- **Flash point**: Closed cup: 62.8°C (145°F)
- **Evaporation rate**: Not available.
- **Flammability (solid, gas)**: Not available.
- **Lower and upper explosive (flammable) limits**: Not available.
- **Vapor pressure**: Not available.
- **Vapor density**: Not available.
- **Relative density**: 1.024 to 1.034
- **Solubility**: Easily soluble in the following materials: cold water and hot water.
- **Partition coefficient: n-octanol/water**: Not available.
- **Auto-ignition temperature**: Not available.
- **Decomposition temperature**: Not available.
- **Viscosity**: Not available.

10. Stability and reactivity

**Reactivity**: No specific test data related to reactivity available for this product or its ingredients.

**Chemical stability**: The product is stable.

**Possibility of hazardous reactions**: Under normal conditions of storage and use, hazardous reactions will not occur.

**Conditions to avoid**: Avoid all possible sources of ignition (spark or flame). Do not pressurize, cut, weld, braze, solder, drill, grind or expose containers to heat or sources of ignition.

**Incompatible materials**: Reactive or incompatible with the following materials: oxidizing materials

**Hazardous decomposition products**: Under normal conditions of storage and use, hazardous decomposition products should not be produced.
## 11. Toxicological information

### Information on toxicological effects

#### Acute toxicity

<table>
<thead>
<tr>
<th>Product/ingredient name</th>
<th>Result</th>
<th>Species</th>
<th>Dose</th>
<th>Exposure</th>
<th>Observation</th>
</tr>
</thead>
<tbody>
<tr>
<td>clorofene</td>
<td>LD50 Oral</td>
<td>Rat</td>
<td>1700 mg/kg</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Ethyl alcohol</td>
<td>LC50 Inhalation Vapor</td>
<td>Rat</td>
<td>124700 mg/m³</td>
<td>4 hours</td>
<td></td>
</tr>
<tr>
<td>Isopropyl alcohol</td>
<td>LD50 Oral</td>
<td>Rat</td>
<td>7 g/kg</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>*Lysol Brand Disinfectant Concentrate, Original Scent</td>
<td>LD50 Dermal</td>
<td>Rabbit</td>
<td>12800 mg/kg</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td></td>
<td>LD50 Oral</td>
<td>Rat</td>
<td>5000 mg/kg</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td></td>
<td>LC50 Inhalation Vapor</td>
<td>Rat</td>
<td>&gt;2.07 mg/l</td>
<td>4 hours</td>
<td></td>
</tr>
<tr>
<td></td>
<td>LD50 Dermal</td>
<td>Rabbit</td>
<td>&gt;5000 mg/kg</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td></td>
<td>LD50 Oral</td>
<td>Rat</td>
<td>5000 mg/kg</td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>

**Conclusion/Summary**: Not classified Harmful. *Information is based on toxicity test result of a similar product.

#### Irritation/Corrosion

<table>
<thead>
<tr>
<th>Product/ingredient name</th>
<th>Result</th>
<th>Species</th>
<th>Score</th>
<th>Exposure</th>
<th>Observation</th>
</tr>
</thead>
<tbody>
<tr>
<td>clorofene</td>
<td>Skin - Mild irritant</td>
<td>Human</td>
<td>-</td>
<td>48 hours 1 Percent</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Eyes - Moderate irritant</td>
<td>Rabbit</td>
<td>-</td>
<td>24 hours 1 milligrams</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Skin - Severe irritant</td>
<td>Guinea pig</td>
<td>-</td>
<td>24 hours 50 milligrams</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Skin - Severe irritant</td>
<td>Human</td>
<td>-</td>
<td>24 hours 50 milligrams</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Skin - Severe irritant</td>
<td>Rabbit</td>
<td>-</td>
<td>24 hours 50 milligrams</td>
<td></td>
</tr>
<tr>
<td>Ethyl alcohol</td>
<td>Eyes - Moderate irritant</td>
<td>Rabbit</td>
<td>-</td>
<td>0.066666667 minutes 100 milligrams</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Eyes - Mild irritant</td>
<td>Rabbit</td>
<td>-</td>
<td>24 hours 500 milligrams</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Eyes - Moderate irritant</td>
<td>Rabbit</td>
<td>-</td>
<td>100 microliters</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Eyes - Severe irritant</td>
<td>Rabbit</td>
<td>-</td>
<td>500 milligrams</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Skin - Mild irritant</td>
<td>Rabbit</td>
<td>-</td>
<td>400 milligrams</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Skin - Moderate irritant</td>
<td>Rabbit</td>
<td>-</td>
<td>24 hours 20 milligrams</td>
<td></td>
</tr>
<tr>
<td>Isopropyl alcohol</td>
<td>Eyes - Moderate irritant</td>
<td>Rabbit</td>
<td>-</td>
<td>24 hours 100 milligrams</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Eyes - Moderate irritant</td>
<td>Rabbit</td>
<td>-</td>
<td>10 milligrams</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Eyes - Severe irritant</td>
<td>Rabbit</td>
<td>-</td>
<td>100 milligrams</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Skin - Mild irritant</td>
<td>Rabbit</td>
<td>-</td>
<td>500 milligrams</td>
<td></td>
</tr>
<tr>
<td>*Lysol Brand Disinfectant Concentrate, Original Scent</td>
<td>Eyes - Cornea opacity</td>
<td>Rabbit</td>
<td>&gt;3</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Skin - Visible necrosis</td>
<td>Rabbit</td>
<td>-</td>
<td>240 minutes 14 days</td>
<td></td>
</tr>
</tbody>
</table>

**Conclusion/Summary**: Causes burns. *Information is based on toxicity test result of a similar product.

**Sensitization**

**Skin**: Causes irreversible eye damage *Information is based on toxicity test result of a similar product.
11. Toxicological information

<table>
<thead>
<tr>
<th>Product/ingredient name</th>
<th>Route of exposure</th>
<th>Species</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>*Lysol Brand Disinfectant Concentrate, Original Scent</td>
<td>skin</td>
<td>Guinea pig</td>
<td>Not sensitizing</td>
</tr>
</tbody>
</table>

**Conclusion/Summary**

**Skin**: Non-sensitizer to skin. *Information is based on toxicity test result of a similar product.

**Mutagenicity**

Not available.

**Carcinogenicity**

Not available.

**Classification**

<table>
<thead>
<tr>
<th>Product/ingredient name</th>
<th>OSHA</th>
<th>IARC</th>
<th>NTP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethyl alcohol</td>
<td>-</td>
<td>1</td>
<td>-</td>
</tr>
<tr>
<td>Isopropyl alcohol</td>
<td>-</td>
<td>3</td>
<td>-</td>
</tr>
</tbody>
</table>

**Reproductive toxicity**

Not available.

**Teratogenicity**

Not available.

**Specific target organ toxicity (single exposure)**

<table>
<thead>
<tr>
<th>Name</th>
<th>Category</th>
<th>Route of exposure</th>
<th>Target organs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Isopropyl alcohol</td>
<td>Category 3</td>
<td>Not applicable.</td>
<td>Narcotic effects</td>
</tr>
</tbody>
</table>

**Specific target organ toxicity (repeated exposure)**

Not available.

**Aspiration hazard**

Not available.

**Information on the likely routes of exposure**

Not available.

**Potential acute health effects**

**Eye contact**: Causes serious eye damage.

**Inhalation**: May give off gas, vapor or dust that is very irritating or corrosive to the respiratory system.

**Skin contact**: Causes severe burns.

**Ingestion**: May cause burns to mouth, throat and stomach.

**Symptoms related to the physical, chemical and toxicological characteristics**

**Eye contact**: Adverse symptoms may include the following:
- pain
- watering
- redness
11. Toxicological information

Inhalation : No specific data.

Skin contact : Adverse symptoms may include the following:
  pain or irritation
  redness
  blistering may occur

Ingestion : Adverse symptoms may include the following:
  stomach pains

Delayed and immediate effects and also chronic effects from short and long term exposure

Short term exposure
  Potential immediate effects : Not available.
  Potential delayed effects : Not available.

Long term exposure
  Potential immediate effects : Not available.
  Potential delayed effects : Not available.

Potential chronic health effects
Not available.

  General : No known significant effects or critical hazards.
  Carcinogenicity : No known significant effects or critical hazards.
  Mutagenicity : No known significant effects or critical hazards.
  Teratogenicity : No known significant effects or critical hazards.
  Developmental effects : No known significant effects or critical hazards.
  Fertility effects : No known significant effects or critical hazards.

Numerical measures of toxicity

Acute toxicity estimates
Not available.

12. Ecological information

Toxicity

<table>
<thead>
<tr>
<th>Product/ingredient name</th>
<th>Result</th>
<th>Species</th>
<th>Exposure</th>
</tr>
</thead>
<tbody>
<tr>
<td>chlorofene</td>
<td>Acute EC50 0.59 ppm Fresh water</td>
<td>Daphnia - Daphnia magna</td>
<td>48 hours</td>
</tr>
<tr>
<td></td>
<td>Acute LC50 0.33 ppm Fresh water</td>
<td>Fish - Lepomis macrochirus</td>
<td>96 hours</td>
</tr>
<tr>
<td></td>
<td>Acute LC50 80 ppm Fresh water</td>
<td>Fish - Gambusia affinis - Adult</td>
<td>96 hours</td>
</tr>
<tr>
<td></td>
<td>Acute EC50 17.921 mg/l Marine water</td>
<td>Algae - Ulva pertusa</td>
<td>96 hours</td>
</tr>
<tr>
<td></td>
<td>Acute LC50 2000 µg/l Fresh water</td>
<td>Daphnia - Daphnia magna</td>
<td>48 hours</td>
</tr>
<tr>
<td></td>
<td>Acute EC50 25500 µg/l Marine water</td>
<td>Crustaceans - Artemia</td>
<td>48 hours</td>
</tr>
<tr>
<td></td>
<td>Acute LC50 42000 µg/l Fresh water</td>
<td>franciscana - Larvae</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Chronic NOEC 4.995 mg/l Marine water</td>
<td>Fish - Oncorhynchus mykiss</td>
<td>4 days</td>
</tr>
<tr>
<td></td>
<td>Chronic NOEC 0.375 µl/L Fresh water</td>
<td>Algae - Ulva pertusa</td>
<td>96 hours</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Fish - Gambusia holbrooki -</td>
<td>12 weeks</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Code #</th>
<th>SDS #</th>
<th>Date of issue</th>
</tr>
</thead>
<tbody>
<tr>
<td>EF353773</td>
<td>353773PSDS v3.0</td>
<td>01/04/2015</td>
</tr>
</tbody>
</table>
12. Ecological information

<table>
<thead>
<tr>
<th>Product/ingredient name</th>
<th>LogP&lt;sub&gt;ow&lt;/sub&gt;</th>
<th>BCF</th>
<th>Potential</th>
</tr>
</thead>
<tbody>
<tr>
<td>clorofene</td>
<td>3.6</td>
<td>-</td>
<td>low</td>
</tr>
<tr>
<td>Ethyl alcohol</td>
<td>-0.35</td>
<td>-</td>
<td>low</td>
</tr>
<tr>
<td>Isopropyl alcohol</td>
<td>0.05</td>
<td>-</td>
<td>low</td>
</tr>
</tbody>
</table>

Persistence and degradability
Not available.

Bioaccumulative potential

<table>
<thead>
<tr>
<th>Product/ingredient name</th>
<th>LogP&lt;sub&gt;ow&lt;/sub&gt;</th>
<th>BCF</th>
<th>Potential</th>
</tr>
</thead>
<tbody>
<tr>
<td>clorofene</td>
<td>3.6</td>
<td>-</td>
<td>low</td>
</tr>
<tr>
<td>Ethyl alcohol</td>
<td>-0.35</td>
<td>-</td>
<td>low</td>
</tr>
<tr>
<td>Isopropyl alcohol</td>
<td>0.05</td>
<td>-</td>
<td>low</td>
</tr>
</tbody>
</table>

Mobility in soil

Soil/water partition coefficient (K<sub>oc</sub>) : Not available.

Other adverse effects : No known significant effects or critical hazards.

13. Disposal considerations

Disposal methods
The generation of waste should be avoided or minimized wherever possible. Disposal of this product, solutions and any by-products should at all times comply with the requirements of environmental protection and waste disposal legislation and any regional local authority requirements. Dispose of surplus and non-recyclable products via a licensed waste disposal contractor. Waste should not be disposed of untreated to the sewer unless fully compliant with the requirements of all authorities with jurisdiction. Waste packaging should be recycled. Incineration or landfill should only be considered when recycling is not feasible. This material and its container must be disposed of in a safe way. Care should be taken when handling emptied containers that have not been cleaned or rinsed out. Empty containers or liners may retain some product residues. Vapor from product residues may create a highly flammable or explosive atmosphere inside the container. Do not cut, weld or grind used containers unless they have been cleaned thoroughly internally. Avoid dispersal of spilled material and runoff and contact with soil, waterways, drains and sewers.

14. Transport information

<table>
<thead>
<tr>
<th>Regulatory information</th>
<th>UN number</th>
<th>Proper shipping name</th>
<th>Classes</th>
<th>PG*</th>
<th>Label</th>
<th>Additional information</th>
</tr>
</thead>
</table>

COURSE: FL 16 Hour CE Course (16 hours) for Cosmetologists, Nail Technicians, Facial Specialists, and Full Specialists

ContinuingCosmetology.com
## 14. Transport information

| DOT Classification | UN1760 | Corrosive liquids, n.o. s. (potassium hydroxide, 2,4-xylenol) RQ (potassium hydroxide, 2,4-xylenol) | 8 | II | Reportable quantity 25990.9 lbs / 11799.9 kg [3029.3 gal / 11467.3 L] Package sizes shipped in quantities less than the product reportable quantity are not subject to the RQ (reportable quantity) transportation requirements. |
| TDG Classification | UN1760 | CORROSIVE LIQUID, N.O.S. (potassium hydroxide, 2,4-xylenol) | 8 | II | Explosive Limit and Limited Quantity Index 1 Passenger Carrying Road or Rail Index 1 Special provisions 274 |
| Mexico Classification | UN1760 | LIQUIDO CORROSIVO, N.E.P. (potassium hydroxide, 2,4-xylenol) | 8 | II | Special provisions 274 |
| IMDG Class | UN1760 | CORROSIVE LIQUID, N.O.S. (potassium hydroxide, 2,4-xylenol) | 8 | II | Emergency schedules (EmS) F-A, S-B Special provisions 274 |
## 14. Transport information

| IATA-DGR Class | UN1760 | Corrosive liquid, n.o.s. (potassium hydroxide, 2,4-xylenol) | 8 | II | Passenger and Cargo Aircraft
|---|---|---|---|---|---
|  |  |  |  |  | Quantity limitation: 1 L
|  |  |  |  |  | Packaging instructions: 851
|  |  |  |  |  | Cargo Aircraft Only
|  |  |  |  |  | Quantity limitation: 30 L
|  |  |  |  |  | Packaging instructions: 855
|  |  |  |  |  | Limited Quantities - Passenger Aircraft
|  |  |  |  |  | Quantity limitation: 0.5 L
|  |  |  |  |  | Packaging instructions: Y840
|  |  |  |  |  | Special provisions
|  |  |  |  |  | A3, A803

PG*: Packing group

## 15. Regulatory information

### U.S. Federal regulations
- **TSCA 8(a) PAIR**: 2-methylpropan-2-ol
- **TSCA 8(a) CDR Exempt/Partial exemption**: Not determined
- **United States inventory (TSCA 8b)**: Not determined.
- **Clean Water Act (CWA) 307**: chlorofene; 2,4-xylenol
- **Clean Water Act (CWA) 311**: potassium hydroxide; sodium hydroxide; ammonia, anhydrous; xylenol; m-cresol; p-cresol

### Clean Air Act Section 112 (b) Hazardous Air Pollutants (HAPs)
- Not listed

### Clean Air Act Section 602 Class I Substances
- Not listed

### Clean Air Act Section 602 Class II Substances
- Not listed

### DEA List I Chemicals (Precursor Chemicals)
- Not listed

### DEA List II Chemicals (Essential Chemicals)
- Not listed

### SARA 302/304

#### Composition/information on ingredients

<table>
<thead>
<tr>
<th>Name</th>
<th>%</th>
<th>EHS</th>
<th>SARA 302 TPQ (lbs)</th>
<th>SARA 302 TPQ (gallons)</th>
<th>SARA 304 RQ (lbs)</th>
<th>SARA 304 RQ (gallons)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ammonia</td>
<td>&lt; 0.01</td>
<td>Yes.</td>
<td>500</td>
<td>-</td>
<td>100</td>
<td>-</td>
</tr>
</tbody>
</table>

**SARA 304 RQ**: 100000000 lbs / 45400000 kg [11655404.4 gal / 44120505.3 L]
15. Regulatory information

**SARA 311/312**

**Classification**
- Fire hazard
- Immediate (acute) health hazard

**Composition/information on ingredients**

<table>
<thead>
<tr>
<th>Name</th>
<th>%</th>
<th>Fire hazard</th>
<th>Sudden release of pressure</th>
<th>Reactive</th>
<th>Immediate (acute) health hazard</th>
<th>Delayed (chronic) health hazard</th>
</tr>
</thead>
<tbody>
<tr>
<td>chlorofene</td>
<td>5 - 10</td>
<td>No.</td>
<td>No.</td>
<td>No.</td>
<td>Yes.</td>
<td>No.</td>
</tr>
<tr>
<td>potassium hydroxide</td>
<td>2.5 - 5</td>
<td>No.</td>
<td>No.</td>
<td>No.</td>
<td>Yes.</td>
<td>No.</td>
</tr>
<tr>
<td>Ethyl alcohol</td>
<td>1 - 2.5</td>
<td>Yes.</td>
<td>No.</td>
<td>No.</td>
<td>Yes.</td>
<td>No.</td>
</tr>
<tr>
<td>Isopropyl alcohol</td>
<td>1 - 2.5</td>
<td>Yes.</td>
<td>No.</td>
<td>No.</td>
<td>Yes.</td>
<td>No.</td>
</tr>
</tbody>
</table>

**SARA 313**

<table>
<thead>
<tr>
<th>Product name</th>
<th>CAS number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>chlorofene</td>
<td>120-32-1</td>
<td>5.4998</td>
</tr>
<tr>
<td>Isopropyl alcohol</td>
<td>67-63-0</td>
<td>1.8333</td>
</tr>
</tbody>
</table>

**Form R - Reporting requirements**

<table>
<thead>
<tr>
<th>Supplier notification</th>
<th>Product name</th>
<th>CAS number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>chlorofene</td>
<td>120-32-1</td>
<td>5.4998</td>
<td></td>
</tr>
<tr>
<td>Isopropyl alcohol</td>
<td>67-63-0</td>
<td>1.8333</td>
<td></td>
</tr>
</tbody>
</table>

SARA 313 notifications must not be detached from the SDS and any copying and redistribution of the SDS shall include copying and redistribution of the notice attached to copies of the SDS subsequently redistributed.

**State regulations**

**Massachusetts**
- The following components are listed: POTASSIUM HYDROXIDE; ISOPROPYL ALCOHOL; ETHYL ALCOHOL

**New York**
- The following components are listed: Potassium hydroxide

**New Jersey**
- The following components are listed: POTASSIUM HYDROXIDE; CAUSTIC POTASH; ISOPROPYL ALCOHOL; 2-PROpanol; ETHYL ALCOHOL; ALCOHOL

**Pennsylvania**
- The following components are listed: POTASSIUM HYDROXIDE (K(OH)); CHLORINATED PHENOLS; 2-PROpanol; DENATURED ALCOHOL

**Label elements**

**Signal word:** DANGER

**Hazard statements**
- Harmful if swallowed.
- Corrosive Causes irreversible eye damage
- Corrosive CAUSES SKIN BURNS.

**Precautionary measures**
- Keep out of reach of children.
- Do not get in eyes, on skin, or on clothing.
- Avoid breathing vapor or mist.
- Wear protective gloves/protective clothing/eye protection/face protection.
- Wash thoroughly with soap and water after handling and before eating, drinking, chewing gum, using tobacco or using the toilet.
- Remove contaminated clothing and wash it before reuse.
- Avoid breathing dust/fume/gas/mist/vapors/spray.
16. Other information

Hazardous Material Information System (U.S.A.)

Caution: HMIS® ratings are based on a 0-4 rating scale, with 0 representing minimal hazards or risks, and 4 representing significant hazards or risks. Although HMIS® ratings are not required on MSDSs under 29 CFR 1910.1200, the preparer may choose to provide them. HMIS® ratings are to be used with a fully implemented HMIS® program. HMIS® is a registered mark of the National Paint & Coatings Association (NPCA). HMIS® materials may be purchased exclusively from J. J. Keller (800) 327-6868.

The customer is responsible for determining the PPE code for this material.

National Fire Protection Association (U.S.A.)

Reprinted with permission from NFPA 704-2001, Identification of the Hazards of Materials for Emergency Response Copyright ©1997, National Fire Protection Association, Quincy, MA 02269. This reprinted material is not the complete and official position of the National Fire Protection Association, on the referenced subject which is represented only by the standard in its entirety.

Copyright ©2001, National Fire Protection Association, Quincy, MA 02269. This warning system is intended to be interpreted and applied only by properly trained individuals to identify fire, health and reactivity hazards of chemicals. The user is referred to certain limited number of chemicals with recommended classifications in NFPA 49 and NFPA 325, which would be used as a guideline only. Whether the chemicals are classified by NFPA or not, anyone using the 704 systems to classify chemicals does so at their own risk.

Key to abbreviations:
- ATE = Acute Toxicity Estimate
- BCF = Bioconcentration Factor
- GHS = Globally Harmonized System of Classification and Labelling of Chemicals
- IATA = International Air Transport Association
- IBC = Intermediate Bulk Container
- IMDG = International Maritime Dangerous Goods
- LogPow = logarithm of the octanol/water partition coefficient
- UN = United Nations

Date of issue: 01/04/2015.
Date of previous issue: 09/04/2010.
Version: 3
16. Other information

Prepared by: Reckitt Benckiser LLC.
Product Safety Department
1 Philips Parkway
Montvale, New Jersey 07646-1810 USA.
FAX: 201-476-7770

Revision comments: Update as per US GHS.

Notice to reader
To the best of our knowledge, the information contained herein is accurate. However, neither the above-named supplier, nor any of its subsidiaries, assumes any liability whatsoever for the accuracy or completeness of the information contained herein.
Final determination of suitability of any material is the sole responsibility of the user. All materials may present unknown hazards and should be used with caution. Although certain hazards are described herein, we cannot guarantee that these are the only hazards that exist.

RB is a member of the CSPA Product Care Product Stewardship Program.
Safety In The Workplace

Know Your Rights

Under federal law, you are entitled to a safe workplace. Your employer must provide a workplace free of known health and safety hazards. If you have concerns, you have the right to speak up about them without fear of retaliation. You also have the right to:

- Be trained in a language you understand
- Work on machines that are safe
- Be provided required safety gear, such as gloves or a harness and lifeline for falls
- Be protected from toxic chemicals
- Request an OSHA inspection, and speak to the inspector
- Report an injury or illness, and get copies of your medical records
- See copies of the workplace injury and illness log
- Review records of work-related injuries and illnesses
- Get copies of test results done to find hazards in the workplace

When to File a Complaint

- Safety and Health Complaint
  If you believe working conditions are unsafe or unhealthful, you may file a confidential complaint with OSHA and ask for an inspection. If possible, bring the conditions to your employer's attention.

How to File a Safety and Health Complaint

The Occupational Safety and Health Act of 1970 gives employees and their representatives the right to file a complaint and request an OSHA inspection of their workplace if they believe there is a serious hazard or their employer is not following OSHA standards. Workers do not have to know whether a specific OSHA standard has been violated in order to file a complaint. The complaint should be filed as soon as possible after noticing the hazard or lack of compliance because OSHA citations may only be issued for violations that currently exist or existed in the past 6 months.

Complaints from workers or their representatives are taken seriously by OSHA. OSHA will keep your information confidential. Complaint Filing Options are: Online – Fax/Mail – or Telephone – your local OSHA Regional or Area Office.

Protection from Retaliation

It is illegal for an employer to fire, demote, transfer or otherwise retaliate against a worker for using their rights under the law. If you believe you have been retaliated against in any way, file a whistleblower complaint within 30 days of the alleged retaliation.

What should I do if there is a dangerous situation at work?

If you believe working conditions are unsafe or unhealthful, you may file a complaint with OSHA concerning a hazardous working condition at any time. If possible, bring the conditions to your employer's attention.
What if I am injured on the job?

If you are injured, call a supervisor for help. If the supervisor is not available, get medical assistance or call 911. All employers must notify OSHA within 8 hours of a workplace fatality or within 24 hours of any work-related inpatient hospitalization, amputation or loss of an eye. [Employers under federal OSHA's jurisdiction were required to begin reporting by Jan. 1, 2015. Establishments in a state with a state-run OSHA program may have a different implementation date].

Can someone file a complaint on my behalf?

Yes, a compliant can be filed on your behalf by; an authorized representative of a labor organization or other employee bargaining unit; an attorney; any person acting as a bona fide representative, including members of the clergy, social workers, spouses and other family members; government officials or nonprofit groups; and organizations acting upon specific complaints and injuries from you or your coworkers. In addition, anyone who knows about a workplace safety or health hazard may report unsafe conditions to OSHA, and OSHA will investigate the concerns reported.

What happens after I file a complaint?

Each complaint is evaluated by OSHA to determine whether it should be handled as an off-site investigation or an on-site inspection. Written complaints (or filed online) that are signed by workers or their representative and submitted to an OSHA area or regional office are more likely to result in on-site OSHA inspections.

What are my Employer's responsibilities?

Employer Responsibilities

Under the OSH law, employers have a responsibility to provide a safe workplace. This is a short summary of key employer responsibilities:

- Provide a workplace free from serious recognized hazards and comply with standards, rules and regulations issued under the OSH Act.
- Examine workplace conditions to make sure they conform to applicable OSHA standards.
- Make sure employees have and use safe tools and equipment and properly maintain this equipment.
- Use color codes, posters, labels or signs to warn employees of potential hazards.
- Establish or update operating procedures and communicate them so that employees follow safety and health requirements.
- Employers must provide safety training in a language and vocabulary workers can understand.
- Employers with hazardous chemicals in the workplace must develop and implement a written hazard communication program and train employees on the hazards they are exposed to and proper precautions (and a copy of safety data sheets must be readily available).
- Provide medical examinations and training when required by OSHA standards.
- Post, at a prominent location within the workplace, the OSHA poster (or the state-plan equivalent) informing employees of their rights and responsibilities.
- Report to the nearest OSHA office all work-related fatalities within 8 hours, and all work-related inpatient hospitalizations, all amputations and all losses of an eye within 24 hours.
- Keep records of work-related injuries and illnesses. (Note: Employers with 10 or fewer employees and employers in certain low-hazard industries are exempt from this requirement.)
• Provide employees, former employees and their representatives access to the Log of Work-Related Injuries and Illnesses (OSHA Form 300). On February 1, and for three months, covered employers must post the summary of the OSHA log of injuries and illnesses (OSHA Form 300A).
• Provide access to employee medical records and exposure records to employees or their authorized representatives.
• Provide to the OSHA compliance officer the names of authorized employee representatives who may be asked to accompany the compliance officer during an inspection.
• Not discriminate against employees who exercise their rights under the Act. See our "Whistleblower Protection" webpage.
• Post OSHA citations at or near the work area involved. Each citation must remain posted until the violation has been corrected, or for three working days, whichever is longer. Post abatement verification documents or tags.
• Correct cited violations by the deadline set in the OSHA citation and submit required abatement verification documentation.
• OSHA encourages all employers to adopt an Injury and Illness Prevention Program. Injury and Illness Prevention Programs, known by a variety of names, are universal interventions that can substantially reduce the number and severity of workplace injuries and alleviate the associated financial burdens on U.S. workplaces.

What are my rights during an inspection?
When the OSHA inspector arrives, workers and their representatives have the right to talk privately with the OSHA inspector before and after the inspection. A worker representative may also go along on the inspection. Where there is no union or employee representative, the OSHA inspector must talk confidentially with a reasonable number of workers during the course of the investigation.

Does my employer have to provide Personal Protective Equipment (PPE) and who pays for it?
Many OSHA standards require employers to provide personal protective equipment, when it is necessary to protect employees from job-related injuries, illnesses, and fatalities. With few exceptions, OSHA requires employers to pay for personal protective equipment when it is used to comply with OSHA standards. These typically include: hard hats, gloves, goggles, safety glasses, welding helmets and goggles, face shields, chemical protective equipment and fall protection equipment.

Employer's Best Practices
OSHA has recently updated the Guidelines for Safety and Health Programs it first released 30 years ago, to reflect changes in the economy, workplaces, and evolving safety and health issues. The new Recommended Practices have been well received by a wide variety of stakeholders and are designed to be used in a wide variety of small and medium-sized business settings. The Recommended Practices present a step-by-step approach to implementing a safety and health program, built around six core elements that make up a successful program.

The main goal of safety and health programs is to prevent workplace injuries, illnesses, and deaths, as well as the suffering and financial hardship these events can cause for workers, their families, and employers. The recommended practices use a proactive approach to managing workplace safety and health.
Traditional approaches are often reactive—that is, problems are addressed only after a worker is injured or becomes sick, a new standard or regulation is published, or an outside inspection finds a problem that must be fixed. These recommended practices recognize that finding and fixing hazards before they cause injury or illness is a far more effective approach. The idea is to begin with a basic program and simple goals and grow from there. If you focus on achieving goals, monitoring performance, and evaluating outcomes, your workplace can progress along the path to higher levels of safety and health achievement. Employers will find that implementing these recommended practices also brings other benefits. Safety and health programs help businesses:

- Prevent workplace injuries and illnesses
- Improve compliance with laws and regulations
- Reduce costs, including significant reductions in workers' compensation premiums
- Engage workers
- Enhance their social responsibility goals
- Increase productivity and enhance overall business operations

**Hazard Identification and Assessment**

One of the "root causes" of workplace injuries, illnesses, and incidents is the failure to identify or recognize hazards that are present, or that could have been anticipated. A critical element of any effective safety and health program is a proactive, ongoing process to identify and assess such hazards.

To identify and assess hazards, employers and workers:

- Collect and review information about the hazards present or likely to be present in the workplace.
- Conduct initial and periodic workplace inspections of the workplace to identify new or recurring hazards.
- Investigate injuries, illnesses, incidents, and close calls/near misses to determine the underlying hazards, their causes, and safety and health program shortcomings.
- Group similar incidents and identify trends in injuries, illnesses, and hazards reported.
- Consider hazards associated with emergency or nonroutine situations.
- Determine the severity and likelihood of incidents that could result for each hazard identified, and use this information to prioritize corrective actions.

**Action item 1**: Collect existing information about workplace hazards. Information on workplace hazards may already be available to employers and workers, from both internal and external sources.

**How to accomplish it**

Collect, organize, and review information with workers to determine what types of hazards may be present and which workers may be exposed or potentially exposed. Information available in the workplace may include:

- Equipment and machinery operating manuals.
- Safety Data Sheets (SDS) provided by chemical manufacturers.
- Self-inspection reports and inspection reports from insurance carriers, government agencies, and consultants.
- Records of previous injuries and illnesses, such as OSHA 300 and 301 logs and reports of incident investigations.
• Workers' compensation records and reports.
• Patterns of frequently-occurring injuries and illnesses.
• Exposure monitoring results, industrial hygiene assessments, and medical records (appropriately redacted to ensure patient/worker privacy).
• Existing safety and health programs (lockout/tagout, confined spaces, process safety management, personal protective equipment, etc.).
• Input from workers, including surveys or minutes from safety and health committee meetings.
• Results of job hazard analyses, also known as job safety analyses.

Information about hazards may be available from outside sources, such as:

• OSHA, National Institute for Occupational Safety and Health (NIOSH), and Centers for Disease Control and Prevention (CDC) websites, publications, and alerts.
• Trade associations.
• Labor unions, state and local occupational safety and health committees/coalitions ("COSH groups"), and worker advocacy groups.
• Safety and health consultants.

Action item 2: Inspect the workplace for safety hazards

Hazards can be introduced over time as workstations and processes change, equipment or tools become worn, maintenance is neglected, or housekeeping practices decline. Setting aside time to regularly inspect the workplace for hazards can help identify shortcomings so that they can be addressed before an incident occurs.

How to accomplish it

• Conduct regular inspections of all operations, equipment, work areas and facilities. Have workers participate on the inspection team and talk to them about hazards that they see or report.
• Be sure to document inspections so you can later verify that hazardous conditions are corrected. Take photos or video of problem areas to facilitate later discussion and brainstorming about how to control them, and for use as learning aids.
• Include all areas and activities in these inspections, such as storage and warehousing, facility and equipment maintenance, purchasing and office functions, and the activities of on-site contractors, subcontractors, and temporary employees.
• Regularly inspect both plant vehicles (e.g., forklifts, powered industrial trucks) and transportation vehicles (e.g., cars, trucks).
• Use checklists that highlight things to look for. Typical hazards fall into several major categories, such as those listed below; each workplace will have its own list:
  • General housekeeping
  • Slip, trip, and fall hazards
  • Electrical hazards
  • Equipment operation
  • Equipment maintenance
  • Fire protection
  • Work organization and process flow (including staffing and scheduling)
  • Work practices
  • Workplace violence
- Ergonomic problems
- Lack of emergency procedures
- Before changing operations, workstations, or workflow; making major organizational changes; or introducing new equipment, materials, or processes, seek the input of workers and evaluate the planned changes for potential hazards and related risks.

Note: Many hazards can be identified using common knowledge and available tools. For example, you can easily identify and correct hazards associated with broken stair rails and frayed electrical cords. Workers can be a very useful internal resource, especially if they are trained in how to identify and assess risks.

**Action item 3: Identify health hazards**

Identifying workers' exposure to health hazards is typically more complex than identifying physical safety hazards. For example, gases and vapors may be invisible, often have no odor, and may not have an immediately noticeable harmful health effect. Health hazards include chemical hazards (solvents, adhesives, paints, toxic dusts, etc.), physical hazards (noise, radiation, heat, etc.), biological hazards (infectious diseases), and ergonomic risk factors (heavy lifting, repetitive motions, vibration).

Reviewing workers' medical records (appropriately redacted to ensure patient/worker privacy) can be useful in identifying health hazards associated with workplace exposures.

**How to accomplish it**

- Identify chemical hazards –review SDS and product labels to identify chemicals in your workplace that have low exposure limits, are highly volatile, or are used in large quantities or in unventilated spaces. Identify activities that may result in skin exposure to chemicals.
- Identify physical hazards –identify any exposures to excessive noise (areas where you must raise your voice to be heard by others), elevated heat (indoor and outdoor), or sources of radiation (radioactive materials, X-rays, or radiofrequency radiation).
- Identify biological hazards –determine whether workers may be exposed to sources of infectious diseases, molds, toxic or poisonous plants, or animal materials (fur or scat) capable of causing allergic reactions or occupational asthma.
- Identify ergonomic risk factors –examine work activities that require heavy lifting, work above shoulder height, repetitive motions, or tasks with significant vibration.
- Conduct quantitative exposure assessments –when possible, using air sampling or direct reading instruments.
- Review medical records –to identify cases of musculoskeletal injuries, skin irritation or dermatitis, hearing loss, or lung disease that may be related to workplace exposures.

Note: Identifying and assessing health hazards may require specialized knowledge. Small businesses can obtain free and confidential occupational safety and health advice services, including help identifying and assessing workplace hazards, through OSHA's On-site Consultation Program.

**Action item 4: Conduct incident investigations**

Workplace incidents –including injuries, illnesses, close calls/near misses, and reports of other concerns– provide a clear indication of where hazards exist. By thoroughly investigating incidents and reports, you will identify hazards that are likely to cause future harm.

The purpose of an investigation must always be to identify the root causes (and there is often more than one) of the incident or concern, in order to prevent future occurrences.
How to accomplish it

- Develop a clear plan and procedure for conducting incident investigations, so that an investigation can begin immediately when an incident occurs. The plan should cover items such as:
  - Who will be involved
  - Lines of communication
  - Materials, equipment, and supplies needed
  - Reporting forms and templates
- Train investigative teams on incident investigation techniques, emphasizing objectivity and open-mindedness throughout the investigation process.
- Conduct investigations with a trained team that includes representatives of both management and workers.
- Investigate close calls/near misses.
- Identify and analyze root causes to address underlying program shortcomings that allowed the incidents to happen.
- Communicate the results of the investigation to managers, supervisors, and workers to prevent recurrence.

Effective incident investigations do not stop at identifying a single factor that triggered an incident. They ask the questions "Why?" and "What led to the failure?" For example, if a piece of equipment fails, a good investigation asks: "Why did it fail?" "Was it maintained properly?" "Was it beyond its service life?" and "How could this failure have been prevented?" Similarly, a good incident investigation does not stop when it concludes that a worker made an error. It asks such questions as: "Was the worker provided with appropriate tools and time to do the work?" "Was the worker adequately trained?" and "Was the worker properly supervised?"

Note: OSHA has special reporting requirements for work-related incidents that lead to serious injury or a fatality (29 CFR 1904.39). OSHA must be notified within 8 hours of a work-related fatality, and within 24 hours of an amputation, loss of an eye, or inpatient hospitalization.

Action item 5: Identify hazards associated with emergency and nonroutine situations

Emergencies present hazards that need to be recognized and understood. Nonroutine or infrequent tasks, including maintenance and startup/shutdown activities, also present potential hazards. Plans and procedures need to be developed for responding appropriately and safely to hazards associated with foreseeable emergency scenarios and nonroutine situations.

How to accomplish it

- Identify foreseeable emergency scenarios and nonroutine tasks, taking into account the types of material and equipment in use and the location within the facility. Scenarios such as the following may be foreseeable:
  - Fires and explosions
  - Chemical releases
  - Hazardous material spills
  - Startups after planned or unplanned equipment shutdowns
  - Nonroutine tasks, such as infrequently performed maintenance activities
  - Structural collapse
  - Disease outbreaks
  - Weather emergencies and natural disasters
• Medical emergencies
• Workplace violence

**Action item 6**: Characterize the nature of identified hazards, identify interim control measures, and prioritize the hazards for control. The next step is to assess and understand the hazards identified and the types of incidents that could result from worker exposure to those hazards. This information can be used to develop interim controls and to prioritize hazards for permanent control.

**How to accomplish it**

- Evaluate each hazard by considering the severity of potential outcomes, the likelihood that an event or exposure will occur, and the number of workers who might be exposed.
- Use interim control measures to protect workers until more permanent solutions can be implemented.
- Prioritize the hazards so that those presenting the greatest risk are addressed first. Note, however, that employers have an ongoing obligation to control all serious recognized hazards and to protect workers.

Note: "Risk" is the product of hazard and exposure. Thus, risk can be reduced by controlling or eliminating the hazard or by reducing workers' exposure to hazards.

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**Personal Protective Equipment**

**What is personal protective equipment?**

Personal protective equipment, commonly referred to as "PPE", is equipment worn to minimize exposure to hazards that cause serious workplace injuries and illnesses. These injuries and illnesses may result from contact with chemical, radiological, physical, electrical, mechanical, or other workplace hazards. Personal protective equipment may include items such as **gloves**, **safety glasses** and shoes, earplugs or muffs, hard hats, respirators, or coveralls, vests and full body suits.

**What can be done to ensure proper use of personal protective equipment?**

All personal protective equipment should be safely designed and constructed, and should be maintained in a clean and reliable fashion. It should fit comfortably, encouraging worker use. If the personal protective equipment does not fit properly, it can make the difference between being safely covered or dangerously exposed.

Employers must provide personal protective equipment to their workers and ensure its proper use. Employers are also required to train each worker required to use personal protective equipment to know:

- When it is necessary
- What kind is necessary
- How to properly put it on, adjust, wear and take it off
- The limitations of the equipment
- Proper care, maintenance, useful life, and disposal of the equipment
HCS Pictograms, Signal Words, and Hazards
As of June 1, 2015, the Hazard Communication Standard (HCS) will require pictograms on labels to alert users of the chemical hazards to which they may be exposed. Each pictogram consists of a symbol on a white background framed within a red border and represents a distinct hazard(s). The pictogram on the label is determined by the chemical hazard classification. The “Signal Word” further describes and labels the classification.

Health Hazard
- Carcinogen
- Mutagenicity
- Reproductive Toxicity
- Respiratory Sensitizer
- Target Organ Toxicity
- Aspiration Toxicity

Flame
- Flammables
- Pyrophorics
- Self-Heating
- Emits Flammable Gas
- Self-Reactives
- Organic Peroxides

Exclamation Mark
- Irritant (skin and eye)
- Skin Sensitizer
- Acute Toxicity (harmful)
- Narcotic Effects
- Respiratory Tract Irritant
- Hazardous to Ozone Layer (Non-Mandatory)

Gas Cylinder
- Gases Under Pressure

Corrosion
- Skin Corrosion/Burns
- Eye Damage
- Corrosive to Metals
Exploding Bomb
- Explosives
- Self-Reactives
- Organic Peroxides

Flame Over Circle
- Oxidizers

Environment (Non-Mandatory)
- Aquatic Toxicity

Skull and Crossbones
- Acute Toxicity (fatal or toxic)

Sample Label
Lesson 3 Summary

In this lesson we have thoroughly discussed important facts about the Occupational Safety and Health Administration's Hazard Communication Standard. We have identified all key elements of Safety Data Sheets and how they apply to businesses. We can now list the ways in which safety in the workplace applies to each employee and employer as well as how employers can use best practices techniques to help insure a trouble free environment. And lastly we reviewed an official manufacturer's Safety Data Sheet and.

It is recommended that personal service workers, such as salon professionals, stay up to date on any changes or improvements made by OSHA or any other government entities regarding the topic of Federal workplace regulations. The next topic of study in this course is Worker's Compensation; Statutes and Rules.
Lesson 4: **Workers’ Compensation Statutes and Rules** (1 hour)

**Outline**
- Florida Division of Workers' Compensation Employment Assistance Office
- Injured Worker Duties
- Employer Duties
- Healthcare Provider Duties
- Insurance Company Duties
- Claims
- Carrier Responsibilities

**Learning objectives**
After completing this lesson you will be able to
- explain when to see the doctor
- describe benefits you may receive
- identify employee Workers' Compensation criminal violations
- identify where to locate information regarding compensation claims
- identify the statute of limitations law
- describe the Anti-Fraud Reward Program
- describe entitlements after a work-related accident
- identify wage replacement benefits
- explain death benefits
- explain communicating with the insurance carrier
- explain communicating with your physician
- list insurance carrier responsibilities

**Introduction**
The following information is an overview of the function of the Florida Division of Workers’ Compensation, and the Employee Assistance Office (EAO). They help prevent and resolve disputes between injured workers, employers and carriers. EAO specialists are knowledgeable about the workers’ compensation system and can address concerns and prevent or resolve disputes. EAO has offices throughout the state of Florida.

Services provided by the FL Division of Workers' Compensation Employee Assistance Office include:
- Educating and providing information to you about your claim.
- Assisting you in resolving disagreements regarding your claim, at no cost to you.
- Assisting you with understanding the procedures for filing a Petition for Benefits with a Judge

**Injured Worker Duties**
If you have an accident or are injured on the job you must:
- Tell your employer you have been injured, as soon as possible. The law requires that you report the accident or your knowledge of a job-related injury within 30 days of your knowledge of the accident or injury, or within 30 days of a doctor determining you are suffering from a work-related injury.
- When you do so, you must ask your employer what doctor you can see. You must see a doctor authorized by your employer or the insurance company.
• Your employer may tell you to call the insurance company handling your claim; the name and phone number should be on the “Broken Arm” poster that should be posted at your workplace.
• If it is an emergency and your employer is not available to tell you where to go for treatment, go to the nearest emergency room and let your employer know as soon as possible what has happened.
• After you or your employer report the injury to the insurance company, many companies will have an insurance claim adjuster call you within 24 hours to explain your rights and obligations.

If you receive a message and a number to call, you should call as soon as possible to find out what you need to do to get medical treatment.
• Within 3-5 business days after you or your employer report the accident, you should receive an informational brochure explaining your rights and obligations, and a Notification Letter explaining the services provided by the Employee Assistance Office of the Division of Workers’ Compensation.

These forms may be part of a packet which may include some or all of the following:
A copy of your accident report or “First Report of Injury or Illness,” which you should read to make sure it is correct; A fraud statement, which you must read, sign and return as soon as possible, or benefits may be temporarily withheld until you do so; A release of medical records for you to sign and return; and
Medical mileage reimbursement forms that you should fill out, after seeking medical treatment, and send to your claims adjuster for reimbursement. If you do not receive a call or the information packet from the insurance company, you can call the WC hotline for assistance at 1-800-342-1741.

**When you see the doctor**
• Give the doctor a full description of the accident or how you were injured.
• Answer all questions the doctor might have about any past or current medical conditions or injuries.
• Discuss with the doctor if the injury is related to work or not.
• If related to work, find out if you can work or not.

If you are released to work but can’t return to your same job, you should get instructions from the doctor on what work you can and cannot do.
Keep and attend all appointments with your doctor, or benefits may be suspended.

**After seeing the doctor**
• Speak with your employer as soon as you leave the doctor. Tell your employer how much your job means to you, and explain to them what work the doctor said you can and cannot do.
• If you are admitted to a hospital, call or have someone call your employer for you to explain what happened and where you are.
• Give your employer the doctor’s note as soon as possible.
• Ask your employer if they have work for you to return to that does not require you to do things the doctor said you cannot do yet.
• If yes, ask when you should report for work.
• If not, make sure your employer has a way to contact you if appropriate work becomes available.
• Contact the insurance company and let them know what the doctor said about your injuries work status, and whether your employer has work available within your physical restrictions.
• You should continue to stay in contact with your employer and the insurance company throughout your treatment and recovery.
Benefits you may receive

Money you may be entitled to:

• **Indemnity Benefits:** If you are unable to work for more than 7 days, you should receive money to partly replace what you were not able to earn after your accident.
  Note: Your weekly benefit can never exceed the maximum compensation rate for the year in which your accident or illness occurred. For a table of the maximum compensation rates visit www.myfloridacfo.com/Division/WC/Insurer/bma_rates.htm

• **Temporary total disability:** If your doctor says you cannot work at all:
  You should receive money equaling about 66 2/3% of your regular wages at the time you were hurt. Your benefit is paid to you beginning with the 8th day you lose time from work.
  The first 7 days lost from work is only paid if you lose more than 21 days from work.
  If your injury is critical, you may receive 80% of your regular wages for up to 6 months after the accident. You can receive up to a total of 104 weeks of temporary total disability and/or temporary partial disability benefits.

• **Temporary partial disability:** If you can return to work, but you cannot earn the same wages you earned at the time you were hurt: (FIGURES are accurate to date as of November 2017)
  You will receive money equaling 80% of the difference between 80% of what you earned before your injury and what you are able to earn after your injury. Example:
  Your average weekly wage: $320 (Earnings before injury) x .80
  Your weekly earning after injury: - $150
  Your actual lost wage: $106
  $106 x .80 = $84.80

Reemployment Services assistance you may receive:
If you are unable to return to your job because of permanent work restrictions resulting from your on-the-job injury, you may obtain information or assistance from the Bureau of Employee Assistance and Ombudsman Office/Reemployment Services section at the following website, by phone or by e-mail:
  • http://www.myfloridacfo.com/Division/WC/Employee/reemployment.htm
  • Telephone: (800) 342-1741 - option 4
  • Email: wcres@myfloridacfo.com
  For assistance on how any of the above benefits are calculated, call the WC hotline at 1-800-342-1741.

If you have a dispute with your insurance company
• First, try to talk about the problem with your adjuster or their supervisor.
• If you still need assistance, contact the WC hotline at 1-800-342-1741.
• If the insurance company still will not agree to pay the benefits that you believe you are entitled to, you can file a Petition for Benefits with the Office of the Judges of Compensation Claims.

You may wish to hire an attorney to represent you in this action.
For assistance on how to fill out and file a Petition for Benefits, call the WC hotline at 1-800-342-1741.

Employee workers’ compensation criminal violations
The following are criminal violations of s. 440.105, F.S., that constitute a felony of the first, second or third degree depending on the monetary value of the fraud as provided in s. 775.082, s. 775.083, or s. 775.084, F.S.:
• Filing a false claim of on-the-job injuries or exaggerating injuries.
• An injured worker or any party making a claim of an on-the-job injury will be required to provide his or her personal signature attesting that he or she has reviewed, understands, and acknowledges the following statement: "Any person who, knowingly and with intent to injure, defraud, or deceive any employer or employee, insurance company, or self-insured program, files a statement of claim containing any false or misleading information commits insurance fraud, punishable as provided in s. 817.234."
• If the injured worker or party refuses to sign the document, benefits or payments shall be suspended until such signature is obtained.

How to get more information and help with your claim
Division of Workers’ Compensation Employee Assistance and Ombudsman Office:
• The Employee Assistance and Ombudsman Office (EAO) will assist you at no cost with questions or concerns you may have about your workers’ compensation claim.
• EAO works on your behalf to resolve issues with your workers’ compensation claim. Issues that cannot be resolved informally may require the filing of a Petition for Benefits.
• EAO offices are located around the state to assist you.

Employer Duties

If you see an accident on the job or someone reports one:
• Contact your insurance company right away.
• Stay in contact with your employee and the adjuster until the injured worker is back on the job.

If the employee is released to work with restrictions:
• Get the doctor’s list of restrictions from the injured worker or directly from the doctor’s office, and
• Meet with the injured worker to see if work is available that he/she can do.
• If restricted work is available:

Discuss with the injured worker:
• Starting time and date,
• What you can pay him/her based on new job duties, and

Report the restricted work to the adjuster.
• Inform the adjuster:
• When the injured worker is scheduled to return to restricted work.
• If the injured worker will not be earning what he/she earned before:

Send the adjuster wage information on a weekly or bi-weekly basis to determine if temporary partial benefits are due.
• If the injured worker is unable to, due to restrictions, continue working, or
• If you can’t give him/her restricted work any longer, or
• If the doctor releases him/her to regular work

Employer Requirements
Posting Requirement:
The “Broken Arm Poster” and the “Anti-Fraud Notice” should be posted in a conspicuous place and
should identify the name of the insurance company providing coverage and where to call to report an accident or injury. Contact your insurance company to obtain the poster and the notice.

**Record Requirement:**
Record all workplace injuries and retain the records for at least 2.5 years.

**Reporting Requirement:**
- Report all job-related injuries to the insurance company within 7 days of discovery.
- Provide a copy of the injury report to the injured worker (Form DFS-F2-DWC-1).
- Report required wage information to the insurance company within 14 days of learning of an injury that will require the employee to miss work for more than 7 days or that results in a permanent impairment.
- If requesting the employee's authorization for release of social security benefit information, give the Form DFS-F2-DWC-14 to the employee, submit the Request for Social Security Disability Benefit Information to the Social Security Administration office nearest to the employee's address, and send a copy of the completed form to the Division within 14 days of the request (Form DFS-F2-DWC-14).

Penalties for late filing of a claim that was due to the employers failure to timely notify the insurer
If the First Report of Injury (DFS-F2-DWC-1) is filed late with the Division, due to the late reporting of the accident by the employer to the insurance company, the employer may be penalized for the late filing, according to the following schedule:
- $100 for 1 through 7 days of untimely filing.
- $200 for 8 through 14 days of untimely filing.
- $300 for 15 through 21 days of untimely filing.
- $400 for 22 through 28 days of untimely filing.
- $500 for over 28 days of untimely filing.

In addition to the above administrative penalty paid to the Division, the employer may be liable for penalties and interest on the late payment of compensation, due to the late filing.

Penalties and interest for late payment of compensation paid directly to the injured worker along with indemnity payment that was late
1. If any installment of compensation for death or dependency benefits, or compensation for disability benefits payable without an award is not paid within 7 days after it becomes due, there shall be added to such unpaid installment a penalty of an amount equal to 20 percent of the unpaid installment, which shall be paid at the same time as, and in addition to, such installment of compensation.
2. If any installment of compensation is not paid when it becomes due, the employer, insurance company or servicing agent shall pay interest at the rate of 12 percent per year from the date the installment becomes due until it is paid, whether such installment is payable without an order or under the terms of an order. The interest payment shall be the greater of the amount of interest due or $5.

If you as an employer receive a notice from the Division about a late filing with a filing penalty due to the Division and penalties and interest due to the injured worker, you send the filing penalty payment to the Division and the penalty & interest payment, on the late indemnity payments, directly to the injured worker.

**Workers’ Compensation Coverage / Compliance Requirements For the Employer**
Chapter 440, F.S., establishes workers’ compensation coverage requirements for employers.

1. Construction Industry: An employer in the construction industry who employs one or more part- or full-time employees must obtain workers’ compensation coverage. Sole proprietors, partners, and
corporate officers are considered employees. Members of a limited liability company are considered corporate officers. Corporate officers may elect to exempt themselves from the coverage requirements of Chapter 440. A construction industry contractor, who sub-contracts all or part of their work, must obtain proof of workers’ compensation coverage or a Certificate of Election to be Exempt from all sub-contractors, prior to work being done. If the sub-contractor is not covered or exempt, for purposes of workers’ compensation coverage, the sub-contractor’s employees shall become the statutory employees of the contractor. The contractor will be responsible to pay any workers’ compensation benefits to the sub-contractor and its employees.

2. Non-Construction Industry: An employer in the non-construction industry, who employs four or more part- or full-time employees, must obtain workers’ compensation coverage. Corporate officers are considered employees, unless they elect to exempt themselves from the coverage requirements of Chapter 440. Sole proprietors and partners in the non-construction industry are not considered to be employees unless they elect to be employees. Members of a limited liability company will be considered as corporate officers and employees, unless they elect to exempt themselves from the coverage requirements of Chapter 440.

3. Agricultural Industry: Agricultural employers with six or more regular employees and/or 12 or more seasonal employees, who work for more than 30 days, must obtain workers’ compensation liability coverage for those employees.

4. Out-of-State Employers: An out-of-state employer engaged in work in Florida must immediately notify their insurance carrier that it has employees working in Florida. A company that has employees working in Florida must have a Florida workers’ compensation insurance policy or an endorsement must be added to the out-of-state policy that lists Florida in Section 3.A. of the policy. A contractor working in Florida who contracts with an out-of-state subcontractor must obtain proof of a Florida workers’ compensation policy or an endorsement to the out-of-state employer’s policy that lists Florida in Section 3.A. of the policy, on the declaration page. Otherwise, the Florida contractor’s policy must include the out-of-state subcontractor and their employees per Chapter 440.10 (1) (g), Florida Statutes.

Extraterritorial Reciprocity: Out-of-state employers whose home jurisdiction has in its statute an “extraterritorial reciprocity” clause allowing temporary employees from another jurisdiction (including Florida) to work under the “home state’s” workers’ compensation policy is permitted to work in Florida using the workers’ compensation policy from their “home state”, as long as the work is temporary in nature. Temporary is defined as no more than 10 consecutive days with a maximum of 25 total days in a calendar year. [For a list of the current jurisdictions who have an extraterritorial reciprocity statute, contact the Division of Workers’ Compensation at 850.413.1609].

Obtaining Required Coverage
1. Coverage Options: Contact a Florida-licensed insurance agent to obtain a workers’ compensation policy. If the employer has applied for and been rejected by two non-affiliated workers’ compensation insurers in the voluntary market, within the last sixty (60) days, they may contact the Florida Workers’ Compensation Joint Underwriting Association (FWCJUA) at (941) 378-7400 or go to their website at www.fwcju.com. The employer may also consider leasing employees from a Professional Employer Organization or PEO. In this circumstance, the PEO becomes the employer and provides workers’ compensation coverage to each employee who is paid by the leasing PEO.

2. Accurate Employer Job Classification and Payroll: Since workers’ compensation premiums are based on the information provided by the employer, it is important that accurate information such as what
type of work is being performed (i.e. interior trim carpentry, roofing, restaurant, clerical, etc.) and estimated payroll for each job classification code is reported to the insurance company. If any changes occur in the job duties or services performed or the employer’s payroll amount during the policy term, the employer must notify its insurance company.

3. Professional Employer Organization or Employee Leasing Company: If an employer enters into an employee leasing agreement with a licensed employee leasing company, the agreement entails workers’ compensation coverage only for employees listed with the employee leasing company. The client company is responsible for workers’ compensation coverage for all non-leased employees. The payroll for all employees must be paid through the leasing company. Any changes in job duties or status of an employee must be reported to the leasing company promptly.

4. Individual Self Insurers: Pursuant to Chapter 440.38, F.S., an employer may become individually self insured and secure the payment of workers’ compensation by providing proof of financial strength necessary to ensure timely payments of current and future claims. Authorization and regulation of individual self insurers is through the Division.

5. Commercial Self-Insurance Funds: Pursuant to Chapter 624.462, F.S., a group of persons may form a commercial self-insurance fund for purposes of pooling and spreading liabilities for any commercial and/or casualty insurance. Authorization and regulation of commercial self-insurance funds is through the Office of Insurance Regulation.

Workers’ Compensation Exemption Eligibility Requirements and Information

General Information
An individual who meets the eligibility requirements to obtain an exemption pursuant to s. 440.05, F.S., may elect an exemption from the coverage requirements of Chapter 440, F.S. Once an exemption is obtained, the exempted individual may not receive workers’ compensation benefits when he/she sustains a work-related injury. Certificates of Election to be Exempt shall apply only to the corporate officer named on the Notice of Election to be Exempt and apply only within the scope of the business or trade listed on the Notice of Election to be Exempt.

Exemption Eligibility Information
A. Non-Construction Industry: Corporation: • The corporation must be registered and listed as active with the Florida Department of State, Division of Corporations.
• The applicant must be listed as an officer of the corporation in the records of the Florida Department of State.
• Applicant cannot be affiliated with an ACTIVE Stop Work Order (SWO), Order of Penalty Assessment (OPA) or Working in Violation (WIV).

Limited Liability Company (LLC):
• The LLC must be registered and listed as active with the Florida Department of State, Division of Corporations.
• The applicant must attest to a minimum 10 percent ownership of the LLC.
• No more than 10 members of an LLC may elect to be exempt.
• Applicant cannot be affiliated with an ACTIVE Stop Work Order (SWO), Order of Penalty Assessment (OPA) or Working in Violation (WIV). B. Construction Industry: Corporation: • The
corporation must be registered and listed as active with the Florida Department of State, Division of Corporations.
• The applicant must be listed as an officer of the corporation in the records of the Florida Department of State.
• The applicant must attest to a minimum 10 percent ownership of the corporation.
• No more than three officers of a corporation or of any group of affiliated corporations (including LLCs) may elect to be exempt.
• A $50.00 application fee is required.
• Applicant cannot be affiliated with an ACTIVE Stop Work Order (SWO), Order of Penalty Assessment (OPA) or Working in Violation (WIV).
• An applicant associated with a payment that is insufficient is not eligible for an exemption.

Out-of-state contractors that are corporations or limited liability companies can qualify as foreign corporations or foreign limited liability companies by filing specific forms and documentation with the Florida Division of Corporations. For more information, please call (850) 245-6051 or log on to www.sunbiz.org.

How to Obtain an Exemption:
The Division of Workers' Compensation offers an online system for applicants to apply for or renew a Certificate of Election to be Exempt from Florida's Workers' Compensation Law. To access the DWC Notice of Election to be Exempt online application system, visit www.myfloridacfo.com/Division/WC/
The exemption applicant must personally sign the application and attest that he or she has reviewed, understands, and acknowledges the information as stated on the application. Furthermore, any person other than the applicant signing the application may be guilty of a felony of the third degree. For additional information concerning workers’ compensation exemptions, please contact the Division’s Customer Service Unit at 850-413-1609 or email wc_exemption@myfloridacfo.com.

Healthcare Provider Duties

Provider Duties
1. A health care provider must comply with the workers’ compensation statutes, rules and reimbursement manuals. Section 440.13, F.S., addresses the statutory guidelines for providing medical treatment and care under the workers’ compensation health care delivery system. Chapter 69L-7, Florida Administrative Code (F.A.C.), addresses the health care provider’s responsibilities for successfully participating and providing medical treatment under the workers’ compensation system.

2. A health care provider must get authorization from the self-insured employer or insurance company before providing medical care to an injured worker, or payment may be denied. The DFS-F5-DWC-25 form is the required document that health care providers must use to request authorization for treatment. The request for authorization must be submitted to the insurance company if the employer is not self-insured.
   • Prior authorization is not required when emergency treatment and care, as defined in s. 395.002, F.S., is needed to treat the injured worker’s medical condition(s). When an injured worker is being given emergency treatment, the provider may verify the name of the employer and/or insurance company in the Division’s Proof of Coverage Database.
   • The self-insured employer or insurance company must respond to authorization requests for treatment by the end of the third business day after receiving a request, or within 10 days for bills exceeding $1,000 pursuant to Section 440.13(3)(i), F.S. A self-insured employer or insurance company’s failure to
respond to a written request for authorization within 3 or 10 business days, as required by statute, will constitute authorization. Payment for authorized treatments must be made within 45 days.

• The billing and medical treatment report forms that must be used are identified in Section 69L-7.720, F.A.C. (See appendix for forms and links).

3. Chapter 69L-7: Workers’ Compensation Medical Reimbursement and Utilization Review specifically addresses the health care provider responsibility for:

• Providing only care authorized by the insurance company and medically necessary to treat the compensable medical condition;

• Providing medical documentation, records and reports to support the medical necessity of the treatment rendered and to communicate to the insurance company, the medical condition of the injured worker;

• Identifying work limitations and restrictions to facilitate return to work;

• Properly completing and filing DFS-F5-DWC-25 forms within three business days of the initial treatment and, thereafter, within 24 hours of each subsequent or follow-up visit, upon occurrence of an actionable event or change in the injured worker’s medical condition or the treatment plan, or at a maximum once every 30 days;

• Cooperating with efforts by the insurance company and the Division to resolve disputes arising from medical treatment and care rendered;

• Completing and filing medical claim bills consistent with established billing and reporting policies.

4. Only physicians licensed by the Florida Department of Health under Chapters 458, 459, 460, 461, 463, or 466, F.S., can determine permanent impairment. The impairment rating guide to be used for calculation of impairment rating is specific to the date of accident as follows: Materials incorporated by reference in Rule 69L-7.604, F.A.C., Permanent Impairment: • The American Medical Association’s Guide to the Evaluation of Permanent Impairment, 3rd Edition for dates of injury on or prior to 06/30/1990.

• The Minnesota Department of Labor and Industry Disability Schedule for dates of injury on 07/01/1990 through 06/20/1993.

• The 1993 Florida Impairment Rating Guide (FIRG) for dates of injury on 06/21/1993 through 01/07/1997.

• The 1996 Florida Uniform Permanent Impairment Rating Schedule for dates of injury on 01/08/1997 or thereafter.

For further information, please refer to paragraph 440.15(3)(b), Florida Statutes.

5. The Three-Member Panel annually adopts schedules of maximum reimbursement established by the Division for health care providers and facilities. These schedules are incorporated in three distinct manuals as follows and also contain reimbursement policy.

• The Florida Workers’ Compensation Health Care Provider Reimbursement Manual

• The Florida Workers’ Compensation Reimbursement Manual for Ambulatory Surgical Centers

• The Florida Workers’ Compensation Reimbursement Manual for Hospitals

6. When bill has not been adjudicated within 45 days of receipt by the carrier, a provider may file a non-payment complaint with the Medical Services Section via: Email: WCMedBillNonpay@myfloridacfo.com; or Fax: 850-413-1982; or USPS: DWC-Medical Services Section, 200 East Gaines Street, Tallahassee, FL 32399-4232
7. A health care provider must provide each carrier that has authorized them to provide workers’ compensation medical services for reimbursement with a signed fraud statement, pursuant to Section 440.105(7), Florida Statutes. A carrier cannot require the signed fraud statement more than once per year.

**Insurance Company Duties**

The **Insurance Company has the responsibility to:**

- Adjust claims without harassment, coercion, or intimidation.
- Investigate any knowledge or notice of a claim to assure prompt delivery of disability and medical benefits to an injured worker and ensure an efficient and self-executing system.

This knowledge includes, but is not limited to, receipt of any information, written or verbal, from any source reporting an accident or injury or requesting authorization to treat an injury.
- Electronically file policy, claims, and medical information with the Division.
- File a First Report of Injury or Illness and mail copies to the injured worker and the employer.
- Respond to requests for medical treatment by authorized doctors within 3 business days after receipt of a written request.
- Send to the injured worker, within 3 days of knowledge of the injury, a brochure explaining the injured worker’s rights and benefits under the law and the Employee Notification Letter.
- Obtain a signed fraud statement from the injured worker.
- Pay the first installment of compensation for total disability or death benefits within 14 days after the employer receives notification of the injury or death. This applies where the injured worker can’t return to work and begins losing time from work immediately following the accident and continues to lose time past 7 days. If the injured worker loses days from work that are not continuous, then the first installment of compensation is due on the 6th day after the first 8 calendar days of disability.
- Investigate and, if denying the claim, do so within 14 days of obtaining knowledge of the accident or injury. If more than 14 days are needed to investigate the claim: • Timely initiate benefits;
- Send the 120-day letter to the injured worker;
- If denied, file a denial of the claim within 120 days of the initial provision of benefits.
- Pay, disallow, or deny all medical bills properly submitted to the insurance company within 45 days after receipt of a completed bill on the proper form.
- Obtain the DWC-25 form to document the work status and treatment plan of the injured worker.
- Authorize or deny medical referrals in writing, from authorized health care provider, within 3 business days of receipt of the request.

If the referral for testing, examination or treatment is more than $1,000, the authorization or denial must be made within 10 business days of receipt of the written request.

**Claims**

**Compensation Claims.**


You may also submit specific questions relating to your claim to us at wceao@MyFloridaCFO.com and receive answers directly by e-mail.
Statute of Limitations
Once you are injured at work or become aware of a workers’ compensation injury or illness, you have 30 days in which to report your injury or illness to your employer. Failure to report your injury within 30 days may jeopardize your claim.
Generally, you have two years from the date of your injury or illness to file a claim for workers’ compensation benefits. Failure to report your injury or illness within 30 days may be used as a defense against your claim regardless of the two-year statute of limitations for filing a claim. Your eligibility for benefits may also be eliminated one year from the date you last received a wage replacement check or approved medical treatment.

Denial of Benefits
If the insurance carrier does not provide benefits to which you believe you are entitled, or has denied your claim, contact the Employee Assistance Office (EAO). Although the EAO does not provide legal advice, our specialists will answer questions about your rights and responsibilities and may be able to resolve problems you’re having with your workers’ compensation claim.

Petition for Benefits
To begin the judicial procedure for obtaining benefits that you believe are due and owing under the law and have not been provided by the employer or insurance carrier, a Petition for Benefits form must be filed with the Office of Judges of Compensation Claims. The form can be accessed at www.jcc.state.fl.us/jcc/forms.asp.

Reemployment Services
If you are unable to perform the duties required for your former job as a result of your work-related injury or illness, you can contact the Employee Assistance Office (EAO).

Legal Representation
You are not required to have an attorney. If you do hire an attorney to represent you with your workers’ compensation claim, the fees and costs may come out of your benefits, unless your employer or workers’ compensation carrier is held responsible for paying your attorney fees. Although the Division does not provide legal advice, the Division will answer questions about your rights and responsibilities and may be able to resolve problems you may have with your workers’ compensation claim.

Anti-Fraud Reward Program
Workers’ compensation fraud occurs when any person knowingly and with intent to injure, defraud or deceive any employer or employee, insurance carrier or self-insured program files false or misleading information. Workers’ compensation fraud is a third-degree felony that can result in fines, civil liability and jail time. Rewards of up to $25,000 may be paid to individuals who provide information that lead to the arrest and conviction of persons committing insurance fraud. To report suspected workers’ compensation fraud, call 1-800-378-0445.

Entitlements After a Work-related Accident
If you are injured as a result of a work-related accident, your employer’s workers’ compensation coverage may entitle you to medical and partial wage replacement benefits.

Medical Benefits
As soon as your employer’s workers’ compensation insurance company has knowledge of your work-related injury and has determined that your injury or illness is covered under Florida law, the company will:
Provide an authorized physician
Pay for all authorized medically necessary care and treatment related to your injury or illness.
Provide a one-time change of physician within five business days of receipt of your written request:

- Doctor visits
- Hospitalization
- Prostheses
- Travel expenses to and from authorized medical treatment or a pharmacy.

Once you reach maximum medical improvement (MMI), you are required to pay a $10 co-payment per visit for medical treatment. MMI occurs when the physician treating you determines that your injury or illness has healed to the extent that further improvement is not likely.

**Wage Replacement Benefits**

If you are unable to work or your earnings are lower because of a work-related injury or illness, you may be able to receive some wage replacement benefits. You may be eligible for these benefits if you have been disabled for more than seven calendar days and are not able to perform your normal job duties as advised by your authorized doctor.

If you qualify, wage replacement benefits will begin on the eighth day of partial or total disability. You will not receive wage replacement benefits for the first seven days of disability, unless you are disabled for more than 21 days due to your work-related injury or illness.

In most cases, the wage replacement benefits will equal two-thirds of your pre-injury regular weekly wage, but the benefit will not be higher than Florida’s average weekly wage. You can generally expect to receive your first benefit check within 21 days after the carrier becomes aware of your injury or illness and bi-weekly thereafter.

- **Temporary Total Benefits:** These benefits are provided as a result of an injury or illness that temporarily prevents you from returning to work, and you have not reached MMI.
- **Temporary Partial Benefits:** These benefits are provided when the doctor releases you to return to work with restrictions and you have not reached MMI and earn less than 80 percent of your pre-injury wage. Note: The maximum length of time you can receive temporary total or partial benefits is 104 weeks or until the date of MMI is determined, whichever is earlier.
- **Permanent Impairment Benefits:** These benefits are provided when the injury or illness causes any physical, psychological or functional loss and the impairment exists after the date of MMI. A doctor will assign a permanent impairment rating, expressed as a percentage of disability to the body as a whole.
- **Permanent Total Benefits:** These benefits are provided when the injury causes you to be permanently and totally disabled according to the conditions stated in the law.

**Death Benefits:**

Compensation for deaths resulting from workplace accidents include payment of funeral expenses and dependency benefits (subject to limits defined by law). A dependent spouse may also be eligible for job training benefits.

The rate, amount and duration of compensation for all wage replacement benefits are detailed in the workers’ compensation law.

**Communicate with the Employer:**

- Contact your employer immediately to notify them of your on-the-job injury or illness.
- Provide your employer a copy of the Medical Treatment/Status Reporting form (DWC25) after each medical appointment.
• Return to work when you are released by your physician and when your employer offers a position within your physical limitations to avoid suspension of your lost wage benefits.

**Communicate with the Carrier:**
• Review the First Report of Injury or Illness (DWC1) form upon receipt and verify the accuracy of your address, phone number, social security number and the description of the accident. If there is information you do not agree with, or if information has been omitted, immediately notify your adjuster in writing.
  • Review, sign and return the mandatory fraud statement to the insurance carrier. By signing this document, you are confirming your understanding of this important information. Your benefits shall be suspended if you refuse to sign this document.
  • Report wages from all sources of employment to the carrier if you had more than one employer in the 13 weeks immediately preceding your date of accident. This will assist the carrier in determining the proper wage replacement amount.
  • Keep your adjuster regularly informed on the status of your claim, medical authorization needs and any wages you have earned. (Note: If you are represented by an attorney, the adjuster may not be able to speak with you directly.)
• Notify the carrier of any change of address or telephone number.
• Complete and return forms to the carrier when asked.

**Communicate with the Authorized Treating Physician:**
• Identify all body parts that are, or potentially may, be injured, and be specific when identifying areas of pain.
  • Keep your appointments.
  • Clarify your work status during appointments before leaving the physician’s office.
  • Follow your doctor’s treatment plan.
  • Ask your physician for the patient copy of the Medical Treatment/Status Reporting form (DWC25).
• Notify your physician of any change of address or telephone number.
• Call the authorized treating physician’s office if you need to see the doctor before your next appointment date. The doctor’s staff may be able to place your name on a cancellation list and you may be scheduled for an earlier appointment should one become available. If an appointment is not available and you need to see a doctor immediately, please contact your adjuster or the EAO.

**Carrier Responsibilities**
The insurance carrier must:
• Timely provision of medical treatment
• Timely payment of wage replacement benefits
• Timely payment of medical bills
• Timely reporting of your claim information to the Division of Workers’ Compensation
• Timely notification of any changes in the status of your claim. This information will be provided to you by mail on either a Notice of Action / Change form (DWC4) or a Notice of Denial form (DWC12).
Coverage Requirements
• Non-construction industry employers with four or more full-time or part-time employees must provide coverage for all employees.

Tips to Assure Proper Coverage Is in Place
• Any change in employees’ job duties or an increase in payroll must be reported to the insurance carrier.
• An employer who secures coverage through an employee leasing company must secure coverage for each employee; promptly advise the employee leasing company of any change in job duties; and promptly advise the employee leasing company of any personnel not included in the employee leasing arrangement.

Requirements for Out-of-State Employers
• An out-of-state employer engaged in work in Florida must immediately notify his or her insurance carrier that it has employees working in Florida.
• An out-of-state employer who has employees working in Florida must have a Florida workers’ compensation insurance policy or an endorsement must be added to the out-of-state policy that lists Florida in section 3.A. of the policy.
• A Florida contractor working in this state who contracts with an out-of-state subcontractor must require proof of a Florida workers’ compensation policy or an endorsement to the out-of-state employer’s policy that lists Florida in section 3.A. of the policy. Otherwise, the Florida contractor’s policy must include the out-of state subcontractor and their employees per Chapter 440.10(1)(g), Florida Statutes.

Extraterritorial Reciprocity: Out-of-state employers whose home jurisdiction has in its statute an “extraterritorial reciprocity” clause allowing temporary employees from another jurisdiction (including Florida) to work under the “home state’s” workers’ compensation policy is permitted to work in Florida using the workers’ compensation policy from their “home state”, as long as the work is temporary in nature. Temporary is defined as no more than 10 consecutive days with a maximum of 25 total days in a calendar year.

How to Apply for an Exemption
Please use the Notice of Election to Be Exempt system to electronically submit an exemption application and payment, if required, to the Division of Workers' Compensation.

Enforcement Provisions (Chapter 440.107, Florida Statutes)
The Florida Department of Financial Services, Division of Workers’ Compensation is responsible for enforcing employer compliance with the coverage requirements of the workers’ compensation law. Compliance investigators conduct on-site inspections.

A Stop-Work Order, requiring the employer to cease all business operations, will be issued to any employer that is required to secure Florida Workers’ Compensation coverage but fails to do so. In addition, a statutory penalty equal to 2 times the amount the employer would have paid in premium within the preceding 2 year period shall be assessed. A Stop-Work Order may also be issued if an employer understates or conceals payroll, misrepresents or conceals employee duties, or otherwise attempts to avoid paying workers’ compensation premiums. Such actions could also result in criminal charges and penalties.
In order for the Division to release a Stop-Work Order, employers are required to provide evidence of compliance and make a minimum down payment of $1000 on the penalty and agree to enter into a Periodic Payment Plan.

**It is against the law to:**
- Work in violation of a Stop-Work Order.
- Make a false statement for the purpose of obtaining coverage or to reduce workers’ compensation premiums.
- Fail to report an injury to your insurance carrier.
- Discharge or threaten to discharge an employee for filing or attempting to file a workers’ compensation claim.
- Deduct workers’ compensation premiums from employees’ pay.
- Misclassify an employee as an independent contractor.

Rewards of up to $25,000 may be paid to persons providing information to the Department of Financial services leading to the arrest and conviction of persons committing insurance fraud, including employers who illegally fail to obtain workers’ compensation coverage. Persons may report suspected fraud to the department at 800-378-0445 or online at http://www.myfloridacfo.com/division/Fraud/default.htm. A person is not subject to civil liability for furnishing such information, if such person acts without malice, fraud, or bad faith.

**Where to Find Coverage**
Contact a Florida-licensed insurance agent. You can also contact the following insurance agent associations:
- Florida Association of Insurance Agents at www.faia.com
- Latin American Association of Insurance Agents at www.laaia.com/

If you cannot obtain coverage through the standard workers’ compensation market and have been denied coverage by two carriers, your insurance agent may make application to the Florida Workers’ Compensation Joint Underwriting Association (FWCJUA). The FWCJUA can be reached at 941-378-7400 or www.fwcjua.com.

You may also consider entering into an employee leasing arrangement with a professional employer organization (PEO) that has secured Florida workers’ compensation coverage on behalf of its clients.

**Lesson 4 Summary**
In this lesson we have thoroughly discussed the most important aspects of the Florida Division of Workers' Compensation. We have identified the duties of the injured worker, the employer, the healthcare provider and the insurance company. We can now list the proper way to implement claims and have identified important aspects of insurance carrier responsibilities.

We now turn our attention to the next topic, State and Federal Laws and Rules.
Lesson 5: State and Federal Laws and Rules (2 hours)

Outline

• CHAPTER 477, Florida Statutes
• CHAPTER 61G5, Florida Administrative Code
• Sections of CHAPTER 455, Florida Statutes CHAPTER 61, Florida Administrative Code

Updated on November 13, 2017

CHAPTER 477 FLORIDA COSMETOLOGY ACT

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477.012 Purpose. 477.0213 Cosmetology graduates of Florida School for
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477.014 Qualifications for practice. 477.025 Cosmetology salons; specialty salons;
registered; licensure; inspection; mobile
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licensed salon; exception.
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477.019 Cosmetologists; qualifications; licensure;
supervised practice; license renewal; endorsement;
477.0201 Specialty registration; qualifications; registration
continuing education. renewal; endorsement.

Introduction

In this lesson, we will review CHAPTER 477, Florida Statutes, CHAPTER 61G5, Florida Administrative Code, Sections of CHAPTER 455, Florida Statutes CHAPTER 61, and Florida Administrative Code that was last updated as of this publication: November 13, 2017

If you have any questions regarding this information, you can contact the Florida State Board for further clarification. You can also find these regulations and any further updates, throughout the year, by going to www.myfloridalicense.com.

Read the following information. This segment contains the Short title; Purpose and Definitions.

Short title.--This act shall be known and may be cited as the "Florida Cosmetology Act." History.--s. 1, ch. 78-253; s. 2, ch. 81-318; ss. 35, 36, ch. 85-297; s. 4, ch. 91-429.

Purpose.--The Legislature deems it necessary in the interest of public health to regulate the practice of cosmetology in this state. However, restrictions shall be imposed only to the extent necessary to protect the public from significant and discernible danger to health and not in a manner which will unreasonably affect the competitive market. Further, consumer protection for both health and economic matters shall be afforded the public through legal remedies provided for in this act. History.--s. 1, ch. 78-253; s. 2, ch. 81-318; ss. 35, 36, ch. 85-297; s. 4, ch. 91-429; s. 16, ch. 2000-332.

Definitions.--As used in this chapter:
"Board" means the Board of Cosmetology.
"Department" means the Department of Business and Professional Regulation.
"Cosmetologist" means a person who is licensed to engage in the practice of cosmetology in this state under the authority of this chapter.

"Cosmetology" means the mechanical or chemical treatment of the head, face, and scalp for aesthetic rather than medical purposes, including, but not limited to, hair shampooing, hair cutting, hair arranging, hair coloring, permanent waving, and hair relaxing for compensation. This term also includes performing hair removal, including wax treatments, manicures, pedicures, and skin care services.

"Specialist" means any person holding a specialty registration in one or more of the specialties registered under this chapter.

"Specialty" means the practice of one or more of the following:
- Manicuring, or the cutting, polishing, tinting, coloring, cleansing, adding, or extending of the nails, and massaging of the hands. This term includes any procedure or process for the affixing of artificial nails, except those nails which may be applied solely by use of a simple adhesive.
- Pedicuring, or the shaping, polishing, tinting, or cleansing of the nails of the feet, and massaging or beautifying of the feet.
- Facials, or the massaging or treating of the face or scalp with oils, creams, lotions, or other preparations, and skin care services.
- "Shampooing" means the washing of the hair with soap and water or with a special preparation, or applying hair tonics.
- "Specialty salon" means any place of business wherein the practice of one or all of the specialties as defined in subsection (6) are engaged in or carried on.
- "Hair braiding" means the weaving or interweaving of natural human hair for compensation without cutting, coloring, permanent waving, relaxing, removing, or chemical treatment and does not include the use of hair extensions or wefts.
- "Hair wrapping" means the wrapping of manufactured materials around a strand or strands of human hair, for compensation, without cutting, coloring, permanent waving, relaxing, removing, weaving, chemically treating, braiding, using hair extensions, or performing any other service defined as cosmetology.
- "Photography studio salon" means an establishment where the hair-arranging services and the application of cosmetic products are performed solely for the purpose of preparing the model or client for the photographic session without shampooing, cutting, coloring, permanent waving, relaxing, or removing of hair or performing any other service defined as cosmetology.
- "Body wrapping" means a treatment program that uses herbal wraps for the purposes of cleansing and beautifying the skin of the body, but does not include:
  - The application of oils, lotions, or other fluids to the body, except fluids contained in presoaked materials used in the wraps; or
  - Manipulation of the body's superficial tissue, other than that arising from compression emanating from the wrap materials.
- "Skin care services" means the treatment of the skin of the body, other than the head, face, and scalp, by the use of a sponge, brush, cloth, or similar device to apply or remove a chemical preparation or other substance, except that chemical peels may be removed by peeling an applied preparation from the skin by hand. Skin care services must be performed by a licensed cosmetologist or facial specialist within a licensed cosmetology or specialty salon, and such services may not involve massage, as defined in s. 480.033(3), through manipulation of the superficial tissue. History.--s. 1, ch. 78-253; ss. 13, 15, 25, 30, 34, 38, 62, ch. 80-406; s. 2, ch. 81-318; ss. 21, 35, 36, ch. 85-297; s. 1, ch. 87-69; s. 35, ch. 89-344; s. 4, ch. 91-429; s. 150, ch. 94-119; s. 166, ch. 94-218; s. 66, ch. 95-144; s. 7, ch. 98-323; s. 146, ch. 99-251; s. 68, ch. 2000-356.
Read further the following information. This section contains topics including Hair braiding, hair wrapping, and body wrapping registration, Exemptions, and Qualifications for practice.

477.0132 Hair braiding, hair wrapping, and body wrapping registration.--
(1)(a) Persons whose occupation or practice is confined solely to hair braiding must register with the department, pay the applicable registration fee, and take a two-day 16-hour course. The course shall be board approved and consist of 5 hours of HIV/AIDS and other communicable diseases, 5 hours of sanitation and sterilization, 4 hours of disorders and diseases of the scalp, and 2 hours of studies regarding laws affecting hair braiding.

Persons whose occupation or practice is confined solely to hair wrapping must register with the department, pay the applicable registration fee, and take a one-day 6-hour course. The course shall be board approved and consist of education in HIV/AIDS and other communicable diseases, sanitation and sterilization, disorders and diseases of the scalp, and studies regarding laws affecting hair wrapping.

Unless otherwise licensed or exempted from licensure under this chapter, any person whose occupation or practice is body wrapping must register with the department, pay the applicable registration fee, and take a two-day 12-hour course. The course shall be board approved and consist of education in HIV/AIDS and other communicable diseases, sanitation and sterilization, disorders and diseases of the skin, and studies regarding laws affecting body wrapping.

Only the board may review, evaluate, and approve a course required of an applicant for registration under this subsection in the occupation or practice of hair braiding, hair wrapping, or body wrapping. A provider of such a course is not required to hold a license under chapter 1005.

Hair braiding, hair wrapping, and body wrapping are not required to be practiced in a cosmetology salon or specialty salon. When hair braiding, hair wrapping, or body wrapping is practiced outside a cosmetology salon or specialty salon, disposable implements must be used or all implements must be sanitized in a disinfectant approved for hospital use or approved by the federal Environmental Protection Agency.

Pending issuance of registration, a person is eligible to practice hair braiding, hair wrapping, or body wrapping upon submission of a registration application that includes proof of successful completion of the education requirements and payment of the applicable fees required by this chapter. History.--s. 151, ch. 94-119; s. 8, ch. 98-323; s. 147, ch. 99-251; s. 53, ch. 2000-356; s. 1021, ch. 2002-387.

477.0135 Exemptions.--
This chapter does not apply to the following persons when practicing pursuant to their professional or occupational responsibilities and duties:
Persons authorized under the laws of this state to practice medicine, surgery, osteopathic medicine, chiropractic medicine, massage, naturopathy, or podiatric medicine.
Commissioned medical or surgical officers of the United States Armed Forces hospital services.
Registered nurses under the laws of this state.
Persons practicing barbering under the laws of this state.
Persons employed in federal, state, or local institutions, hospitals, or military bases as cosmetologists whose practices are limited to the inmates, patients, or authorized military personnel of such institutions, hospitals, or bases.
Persons whose practice is limited to the application of cosmetic products to another person in connection with the sale, or attempted sale, of such products at retail without compensation from such other person other than the regular retail price of such merchandise.
A license is not required of any person whose occupation or practice is confined solely to shampooing.
A license or registration is not required of any person whose occupation or practice is confined solely to cutting, trimming, polishing, or cleansing the fingernails of any person when said cutting, trimming,
polishing, or cleansing is done in a barbershop licensed pursuant to chapter 476 which is carrying on a regular and customary business of barbering, and such individual has been practicing the activities set forth in this subsection prior to October 1, 1985.

A photography studio salon is exempt from the licensure provisions of this chapter. However, the hair-arranging services of such salon must be performed under the supervision of a licensed cosmetologist employed by the salon. The salon must use disposable hair-arranging implements or use a wet or dry sanitizing system approved by the federal Environmental Protection Agency.

A license is not required of any individual providing makeup, special effects, or cosmetology services to an actor, stunt person, musician, extra, or other talent during a production recognized by the Office of Film and Entertainment as a qualified production as defined in s. 288.1254(1). Such services are not required to be performed in a licensed salon. Individuals exempt under this subsection may not provide such services to the general public.

A license is not required of any individual providing makeup or special effects services in a theme park or entertainment complex to an actor, stunt person, musician, extra, or other talent, or providing makeup or special effects services to the general public. The term "theme park or entertainment complex" has the same meaning as in s. 509.013(9). History.--ss. 68, 117, ch. 83-329; ss. 22, 35, 36, ch. 85-297; s. 2, ch. 87-69; s. 28, ch. 88-392; s. 4, ch. 91-429; s. 401, ch. 97-103; s. 54, ch. 97-264; ss. 217, 285, ch. 98-166; s. 9, ch. 98-323; s. 1, ch. 2004-284; s. 126, ch. 2008-4.

Qualifications for practice.--On and after January 1, 1979, no person other than a duly licensed cosmetologist shall practice cosmetology or use the name or title of cosmetologist. History.--s. 1, ch. 78-253; s. 2, ch. 81-318; ss. 35, 36, ch. 85-297; s. 36, ch. 89-344; s. 4, ch. 91-429.

Read the following information. Topics include Board of Cosmetology, Rulemaking, Legal Services, investigative Services.

Board of Cosmetology.--
There is created within the department the Board of Cosmetology consisting of seven members, who shall be appointed by the Governor, subject to confirmation by the Senate, and whose function it shall be to carry out the provisions of this act.

Five members of the board shall be licensed cosmetologists and shall have been engaged in the practice of cosmetology in this state for not less than 5 years. Two members of the board shall be laypersons. Each board member shall be a resident of this state and shall have been a resident of this state for not less than 5 continuous years.

The Governor may at any time fill vacancies on the board for the remainder of unexpired terms. Each member of the board shall hold over after the expiration of his or her term until a successor is duly appointed and qualified. No board member shall serve more than two consecutive terms, whether full or partial.

Before assuming his or her duties as a board member, each appointee shall take the constitutional oath of office and shall file it with the Department of State, which shall then issue to such member a certificate of his or her appointment.

The board shall, in the month of January, elect from its number a chair and a vice chair.

The board shall hold such meetings during the year as it may determine to be necessary, one of which shall be the annual meeting. The chair of the board shall have the authority to call other meetings at his or her discretion. A quorum of the board shall consist of not less than four members.

Each member of the board shall receive $50 for each day spent in the performance of official board business, with the total annual compensation per member not to exceed $2,000. Additionally, board members shall receive per diem and mileage as provided in s. 112.061, from place of residence to place of meeting and return.
Each board member shall be held accountable to the Governor for the proper performance of all his or her duties and obligations. The Governor shall investigate any complaints or unfavorable reports received concerning the actions of the board, or its members, and shall take appropriate action thereon, which action may include removal of any board member. The Governor may remove from office any board member for neglect of duty, incompetence, or unprofessional or dishonorable conduct. History.--s. 1, ch. 78-253; ss. 13, 15, 25, 30, 34, 39, 62, ch. 80-406; s. 2, ch. 81-318; ss. 23, 35, 36, ch. 85-297; s. 4, ch. 91-429; s. 167, ch. 94-218; s. 402, ch. 97-103.

Rulemaking.--
The board may adopt rules pursuant to ss. 120.536(1) and 120.54 to implement the provisions of this chapter conferring duties upon it. The board may by rule adopt any restriction established by a regulation of the United States Food and Drug Administration related to the use of a cosmetic product or any substance used in the practice of cosmetology if the board finds that the product or substance poses a risk to the health, safety, and welfare of clients or persons providing cosmetology services. History.--s. 1, ch. 78-253; ss. 13, 15, 25, 30, 34, 40, 62, ch. 80-406; s. 2, ch. 81-318; ss. 35, 36, ch. 85-297; s. 4, ch. 91-429; s. 149, ch. 98-200; s. 2, ch. 2004-284.

Legal services.--The department shall provide all legal services needed to carry out the provisions of this act. History.--s. 1, ch. 78-253; s. 2, ch. 81-318; ss. 35, 36, ch. 85-297; s. 4, ch. 91-429.

Investigative services.--The department shall provide all investigative services required by the board or the department in carrying out the provisions of this act. History.--s. 1, ch. 78-253; ss. 13, 15, 25, 30, 34, 41, 62, ch. 80-406; s. 2, ch. 81-318; ss. 35, 36, ch. 85-297; s. 4, ch. 91-429.

Read the following information. Topics include Cosmetologists; qualifications; licensure; supervised practice; license renewal; endorsement; continuing education.

Cosmetologists; qualifications; licensure; supervised practice; license renewal; endorsement; continuing education.

A person desiring to be licensed as a cosmetologist shall apply to the department for licensure. An applicant shall be eligible for licensure by examination to practice cosmetology if the applicant:
Is at least 16 years of age or has received a high school diploma;
Pays the required application fee, which is not refundable, and the required examination fee, which is refundable if the applicant is determined to not be eligible for licensure for any reason other than failure to successfully complete the licensure examination; and
1. Is authorized to practice cosmetology in another state or country, has been so authorized for at least 1 year, and does not qualify for licensure by endorsement as provided for in subsection (5); or
Has received a minimum of 1,200 hours of training as established by the board, which shall include, but shall not be limited to, the equivalent of completion of services directly related to the practice of cosmetology at one of the following:
A school of cosmetology licensed pursuant to chapter 1005.
A cosmetology program within the public school system.
The Cosmetology Division of the Florida School for the Deaf and the Blind, provided the division meets the standards of this chapter.
A government-operated cosmetology program in this state.
The board shall establish by rule procedures whereby the school or program may certify that a person is qualified to take the required examination after the completion of a minimum of 1,000 actual school hours. If the person then passes the examination, he or she shall have satisfied this requirement; but if the person fails the examination, he or she shall not be qualified to take the examination again until the completion of the full requirements provided by this section.

Upon an applicant receiving a passing grade, as established by board rule, on the examination and paying the initial licensing fee, the department shall issue a license to practice cosmetology. If an applicant passes all parts of the examination for licensure as a cosmetologist, he or she may practice in the time between passing the examination and receiving a physical copy of his or her license if he or she practices under the supervision of a licensed cosmetologist in a licensed salon. An applicant who fails any part of the examination may not practice as a cosmetologist and may immediately apply for reexamination.

Renewal of license registration shall be accomplished pursuant to rules adopted by the board. The board shall certify as qualified for licensure by endorsement as a cosmetologist in this state an applicant who holds a current active license to practice cosmetology in another state. The board may not require proof of educational hours if the license was issued in a state that requires 1,200 or more hours of prelicensure education and passage of a written examination. This subsection does not apply to applicants who received their license in another state through an apprenticeship program.

(7)(a) The board shall prescribe by rule continuing education requirements intended to ensure protection of the public through updated training of licensees and registered specialists, not to exceed 16 hours biennially, as a condition for renewal of a license or registration as a specialist under this chapter. Continuing education courses shall include, but not be limited to, the following subjects as they relate to the practice of cosmetology: human immunodeficiency virus and acquired immune deficiency syndrome; Occupational Safety and Health Administration regulations; workers’ compensation issues; state and federal laws and rules as they pertain to cosmetologists, cosmetology, salons, specialists, specialty salons, and booth renters; chemical makeup as it pertains to hair, skin, and nails; and environmental issues. Courses given at cosmetology conferences may be counted toward the number of continuing education hours required if approved by the board.

Any person whose occupation or practice is confined solely to hair braiding, hair wrapping, or body wrapping is exempt from the continuing education requirements of this subsection. The board may, by rule, require any licensee in violation of a continuing education requirement to take a refresher course or refresher course and examination in addition to any other penalty. The number of hours for the refresher course may not exceed 48 hours. History.—s. 1, ch. 78-253; s. 1, ch. 80-132; ss. 13, 15, 25, 30, 34, 42, 62, ch. 80-406; s. 355, ch. 81-259; s. 2, ch. 81-318; ss. 69, 116, ch. 83-329; ss. 24, 35, 36, ch. 85-297; s. 3, ch. 87-69; s. 37, ch. 89-344; s. 1, ch. 90-4; s. 4, ch. 91-429; s. 403, ch. 97-103; s. 10, ch. 98-323; s. 163, ch. 99-251; s. 54, ch. 2000-356; s. 1022, ch. 2002-387; s. 29, ch. 2008-240; s. 38, ch. 2010-106; s. 13, ch. 2012-72.

Continue this study by reviewing the following information about Specialty registration; qualifications; registration renewal; endorsement; Inactive status. Cosmetology graduates of Florida School for the Deaf and the Blind; licenses; and Examinations.

477.0201 Specialty registration; qualifications; registration renewal; endorsement.— Any person is qualified for registration as a specialist in any one or more of the specialty practices within the practice of cosmetology under this chapter who:

Is at least 16 years of age or has received a high school diploma.
Has received a certificate of completion in a specialty pursuant to s. 477.013(6) from one of the following:
A school licensed pursuant to s. 477.023.
A school licensed pursuant to chapter 1005 or the equivalent licensing authority of another state.
A specialty program within the public school system.
A specialty division within the Cosmetology Division of the Florida School for the Deaf and the Blind, provided the training programs comply with minimum curriculum requirements established by the board.
A person desiring to be registered as a specialist shall apply to the department in writing upon forms prepared and furnished by the department.
Upon paying the initial registration fee, the department shall register the applicant to practice one or more of the specialty practices within the practice of cosmetology.
Renewal of registration shall be accomplished pursuant to rules adopted by the board.
The board shall adopt rules specifying procedures for the registration of specialty practitioners desiring to be registered in this state who have been registered or licensed and are practicing in states which have registering or licensing standards substantially similar to, equivalent to, or more stringent than the standards of this state.
Pending issuance of registration, a person is eligible to practice as a specialist upon submission of a registration application that includes proof of successful completion of the education requirements and payment of the applicable fees required by this chapter, provided such practice is under the supervision of a registered specialist in a licensed specialty or cosmetology salon. History.--ss. 25, 36, ch. 85-297; s. 4, ch. 87-69; s. 4, ch. 91-429; s. 39, ch. 95-144; s. 11, ch. 98-323; s. 1023, ch. 2002-387.

477.0212 Inactive status.--
A cosmetologist's license that has become inactive may be reactivated under s. 477.019 upon application to the department.
The board shall promulgate rules relating to licenses which have become inactive and for the renewal of inactive licenses. The board shall prescribe by rule a fee not to exceed $50 for the reactivation of an inactive license and a fee not to exceed $50 for the renewal of an inactive license. History.--ss. 110, 117, ch. 83-329; ss. 27, 35, 36, ch. 85-297; s. 39, ch. 89-344; s. 4, ch. 91-429; s. 228, ch. 94-119.

477.0213 Cosmetology graduates of Florida School for the Deaf and the Blind; licenses.--The department shall license candidates upon graduation from the Cosmetology Division of the Florida School for the Deaf and the Blind. The department shall, by rule, provide fees for licenses issued to candidates from the Cosmetology Division of the Florida School for the Deaf and the Blind and shall also provide, by rule, for the type of licenses to be issued and for any required applications. History.--s. 3, ch. 80-132; s. 2, ch. 81-318; ss. 35, 36, ch. 85-297; s. 4, ch. 91-429.

Examinations.--
The board shall ensure that examinations adequately measure both an applicant’s competency and her or his knowledge of related statutory requirements. Professional testing services may be utilized to formulate the examinations. The board may offer a written clinical examination or a performance examination, or both, in addition to a written theory examination.
The board shall ensure that examinations comply with state and federal equal employment opportunity guidelines.
The examination shall be given at least once a year.
All licensing examinations shall be conducted in such manner that the applicant shall be known by number only until her or his examination is completed and the proper grade determined. An accurate record of each examination shall be made; and that record shall be filed with the secretary of the
department and shall be kept for reference and inspection for a period of not less than 2 years immediately following the examination. History.--s. 1, ch. 78-253; ss. 13, 15, 25, 30, 34, 44, 62, ch. 80-406; s. 2, ch. 81-318; ss. 34, 46, ch. 82-179; s. 96, ch. 83-218; s. 71, ch. 83-329; ss. 35, 36, ch. 85-297; s. 40, ch. 89-344; s. 4, ch. 91-429; s. 404, ch. 97-103; s. 12, ch. 98-323; s. 49, ch. 2015-4.

Continue this study by reviewing the following segment. It contains information about Schools of cosmetology; licensure; Cosmetology salons; specialty salons requisites; licensure; inspections and mobile cosmetology salons; and fees.

Schools of cosmetology; licensure.--No private school of cosmetology shall be permitted to operate without a license issued by the Commission for Independent Education pursuant to chapter 1005. However, nothing herein shall be construed to prevent certification by the Department of Education of cosmetology training programs within the public school system or to prevent government operation of any other program of cosmetology in this state. History.--s. 1, ch. 78-253; ss. 13, 15, 25, 30, 34, 45, 62, ch. 80-406; s. 2, ch. 81-318; ss. 35, 36, ch. 85-297; s. 41, ch. 89-344; s. 4, ch. 91-429; s. 38, ch. 98-421; s. 1024, ch. 2002-387.

Cosmetology salons; specialty salons; requisites; licensure; inspection; mobile cosmetology salons.--
No cosmetology salon or specialty salon shall be permitted to operate without a license issued by the department except as provided in subsection (11).
The board shall adopt rules governing the licensure and operation of salons and specialty salons and their facilities, personnel, safety and sanitary requirements, and the license application and granting process.
Any person, firm, or corporation desiring to operate a cosmetology salon or specialty salon in the state shall submit to the department an application upon forms provided by the department and accompanied by any relevant information requested by the department and by an application fee.
Upon receiving the application, the department may cause an investigation to be made of the proposed cosmetology salon or specialty salon.
When an applicant fails to meet all the requirements provided herein, the department shall deny the application in writing and shall list the specific requirements not met. No applicant denied licensure because of failure to meet the requirements herein shall be precluded from reapplying for licensure.
When the department determines that the proposed cosmetology salon or specialty salon may reasonably be expected to meet the requirements set forth herein, the department shall grant the license upon such conditions as it shall deem proper under the circumstances and upon payment of the original licensing fee.
No license for operation of a cosmetology salon or specialty salon may be transferred from the name of the original licensee to another. It may be transferred from one location to another only upon approval by the department, which approval shall not be unreasonably withheld.
Renewal of license registration for cosmetology salons or specialty salons shall be accomplished pursuant to rules adopted by the board. The board is further authorized to adopt rules governing delinquent renewal of licenses and may impose penalty fees for delinquent renewal.
The board is authorized to adopt rules governing the periodic inspection of cosmetology salons and specialty salons licensed under this chapter.

(10)(a) The board shall adopt rules governing the licensure, operation, and inspection of mobile cosmetology salons, including their facilities, personnel, and safety and sanitary requirements.
Each mobile salon must comply with all licensure and operating requirements specified in this chapter or chapter 455 or rules of the board or department that apply to cosmetology salons at fixed locations,
except to the extent that such requirements conflict with this subsection or rules adopted pursuant to this subsection.

A mobile cosmetology salon must maintain a permanent business address, located in the inspection area of the local department office, at which records of appointments, itineraries, license numbers of employees, and vehicle identification numbers of the licenseholder's mobile salon shall be kept and made available for verification purposes by department personnel, and at which correspondence from the department can be received.

To facilitate periodic inspections of mobile cosmetology salons, prior to the beginning of each month each mobile salon licenseholder must file with the board a written monthly itinerary listing the locations where and the dates and hours when the mobile salon will be operating.

The board shall establish fees for mobile cosmetology salons, not to exceed the fees for cosmetology salons at fixed locations.

The operation of mobile cosmetology salons must be in compliance with all local laws and ordinances regulating business establishments, with all applicable requirements of the Americans with Disabilities Act relating to accommodations for persons with disabilities, and with all applicable OSHA requirements.

(11) Facilities licensed under part II of chapter 400 or under part I of chapter 429 are exempt from this section, and a cosmetologist licensed pursuant to s. 477.019 may provide salon services exclusively for facility residents. History.--s. 1, ch. 78-253; ss. 13, 15, 25, 30, 34, 46, 62, ch. 80-406; s. 2, ch. 81-318; ss. 29, 35, 36, ch. 85-297; s. 4, ch. 91-429; s. 13, ch. 98-323; s. 31, ch. 2002-223; s. 95, ch. 2006-197.

Fees; disposition.--
The board shall set fees according to the following schedule:

For cosmetologists, fees for original licensing, license renewal, and delinquent renewal shall not exceed $50.

For cosmetologists, fees for endorsement application, examination, and reexamination shall not exceed $50.

For cosmetology and specialty salons, fees for license application, original licensing, license renewal, and delinquent renewal shall not exceed $50.

For specialists, fees for application and endorsement registration shall not exceed $30.

For specialists, fees for initial registration, registration renewal, and delinquent renewal shall not exceed $50.

For hair braiders, hair wrappers, and body wrappers, fees for registration shall not exceed $25.

All moneys collected by the department from fees authorized by this chapter shall be paid into the Professional Regulation Trust Fund, which fund is created in the department, and shall be applied in accordance with ss. 215.37 and 455.219. The Legislature may appropriate any excess moneys from this fund to the General Revenue Fund.

The department, with the advice of the board, shall prepare and submit a proposed budget in accordance with law. History.--s. 1, ch. 78-253; ss. 13, 15, 25, 30, 34, 47, 62, ch. 80-406; s. 2, ch. 81-318; ss. 24, 46, ch. 82-179; ss. 30, 35, 36, ch. 85-297; s. 5, ch. 87-69; s. 43, ch. 89-344; s. 4, ch. 91-429; s. 152, ch. 94-119; s. 14, ch. 98-323; s. 148, ch. 99-251, ch. 2009-195.

Please read the following regulations regarding Cosmetology services to be performed in licensed salon; exception; Prohibited acts; Disciplinary proceeding; Penalty; and Civil proceedings.

477.0263 Cosmetology services to be performed in licensed salon; exception.--
Cosmetology services shall be performed only by licensed cosmetologists in licensed salons, except as otherwise provided in this section.
Pursuant to rules established by the board, cosmetology services may be performed by a licensed cosmetologist in a location other than a licensed salon, including, but not limited to, a nursing home, hospital, or residence, when a client for reasons of ill health is unable to go to a licensed salon. Arrangements for the performance of such cosmetology services in a location other than a licensed salon shall be made only through a licensed salon.

Any person who holds a valid cosmetology license in any state or who is authorized to practice cosmetology in any country, territory, or jurisdiction of the United States may perform cosmetology services in a location other than a licensed salon when such services are performed in connection with the motion picture, fashion photography, theatrical, or television industry; a photography studio salon; a manufacturer trade show demonstration; or an educational seminar. Pursuant to rules adopted by the board, any cosmetology or specialty service may be performed in a location other than a licensed salon when the service is performed in connection with a special event and is performed by a person who is employed by a licensed salon and who holds the proper license or specialty registration. An appointment for the performance of any such service in a location other than a licensed salon must be made through a licensed salon. History.—ss. 75, 117, ch. 83-329; ss. 35, 36, ch. 85-297; s. 48, ch. 89-374; s. 4, ch. 91-429; s. 15, ch. 98-323; s. 14, ch. 2012-72.

477.0265 Prohibited acts.--
It is unlawful for any person to:
Engage in the practice of cosmetology or a specialty without an active license as a cosmetologist or registration as a specialist issued by the department pursuant to the provisions of this chapter.
Own, operate, maintain, open, establish, conduct, or have charge of, either alone or with another person or persons, a cosmetology salon or specialty salon:
Which is not licensed under the provisions of this chapter; or
In which a person not licensed or registered as a cosmetologist or a specialist is permitted to perform cosmetology services or any specialty.
Permit an employed person to engage in the practice of cosmetology or of a specialty unless such person holds a valid, active license as a cosmetologist or registration as a specialist.
Obtain or attempt to obtain a license or registration for money, other than the required fee, or any other thing of value or by fraudulent misrepresentations.
Use or attempt to use a license to practice cosmetology or a registration to practice a specialty, which license or registration is suspended or revoked.
Advertise or imply that skin care services or body wrapping, as performed under this chapter, have any relationship to the practice of massage therapy as defined in s. 480.033(3), except those practices or activities defined in s. 477.013.
In the practice of cosmetology, use or possess a cosmetic product containing a liquid nail monomer containing any trace of methyl methacrylate (MMA).
Any person who violates any provision of this section commits a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083. History.—ss. 72, 117, ch. 83-329; ss. 31, 35, 36, ch. 85-297; s. 6, ch. 87-69; s. 110, ch. 91-224; s. 4, ch. 91-429; s. 149, ch. 99-251; s. 3, ch. 2004-284; s. 25, ch. 2012-61.

Disciplinary proceedings.--
The board shall have the power to revoke or suspend the license of a cosmetologist licensed under this chapter, or the registration of a specialist registered under this chapter, and to reprimand, censure, deny
subsequent licensure or registration of, or otherwise discipline a cosmetologist or a specialist licensed or registered under this chapter in any of the following cases:
Upon proof that a license or registration has been obtained by fraud or misrepresentation.
Upon proof that the holder of a license or registration is guilty of fraud or deceit or of gross negligence, incompetency, or misconduct in the practice or instruction of cosmetology or a specialty.
Upon proof that the holder of a license or registration is guilty of aiding, assisting, procuring, or advising any unlicensed person to practice as a cosmetologist.
The board shall have the power to revoke or suspend the license of a cosmetology salon or a specialty salon licensed under this chapter, to deny subsequent licensure of such salon, or to reprimand, censure, or otherwise discipline the owner of such salon in either of the following cases:
Upon proof that a license has been obtained by fraud or misrepresentation.
Upon proof that the holder of a license is guilty of fraud or deceit or of gross negligence, incompetency, or misconduct in the operation of the salon so licensed.
Disciplinary proceedings shall be conducted pursuant to the provisions of chapter 120.
The department shall not issue or renew a license or certificate of registration under this chapter to any person against whom or salon against which the board has assessed a fine, interest, or costs associated with investigation and prosecution until the person or salon has paid in full such fine, interest, or costs associated with investigation and prosecution or until the person or salon complies with or satisfies all terms and conditions of the final order. History.--s. 1, ch. 78-253; s. 2, ch. 81-318; s. 73, ch. 83-329; ss. 32, 35, 36, ch. 85-297; s. 7, ch. 87-69; s. 44, ch. 89-344; s. 4, ch. 91-429; s. 16, ch. 98-323.

**Penalty.**
It is unlawful for any person to:
Hold himself or herself out as a cosmetologist, specialist, hair wrapper, hair braider, or body wrapper unless duly licensed or registered, or otherwise authorized, as provided in this chapter.
Operate any cosmetology salon unless it has been duly licensed as provided in this chapter.
Permit an employed person to practice cosmetology or a specialty unless duly licensed or registered, or otherwise authorized, as provided in this chapter.
Present as his or her own the license of another.
Give false or forged evidence to the department in obtaining any license provided for in this chapter.
Impersonate any other licenseholder of like or different name.
Use or attempt to use a license that has been revoked.

(h) Violate any provision of s. 455.227(1), s. 477.0265, or s. 477.028.

Violate or refuse to comply with any provision of this chapter or chapter 455 or a rule or final order of the board or the department.
Any person who violates the provisions of this section shall be subject to one or more of the following penalties, as determined by the board:
Revocation or suspension of any license or registration issued pursuant to this chapter.
Issuance of a reprimand or censure.
Imposition of an administrative fine not to exceed $500 for each count or separate offense.
Placement on probation for a period of time and subject to such reasonable conditions as the board may specify.
Refusal to certify to the department an applicant for licensure. History.--s. 1, ch. 78-253; s. 2, ch. 81-318; s. 74, ch. 83-329; ss. 33, 35, 36, ch. 85-297; s. 8, ch. 87-69; s. 45, ch. 89-344; s. 4, ch. 91-429; s. 10, ch. 94-119; s. 405, ch. 97-103; s. 126, ch. 98-166; s. 17, ch. 98-323; s. 150, ch. 99-251; s. 186, ch. 2000-160; s. 4, ch. 2004-284.

**477.031 Civil proceedings.**--As cumulative of any other remedy or criminal prosecution, the department may file a proceeding in the name of the state seeking issuance of a restraining order,
injunction, or writ of mandamus against any person who is or has been violating any of the provisions of this chapter or the lawful rules or orders of the department. History.--s. 1, ch. 78-253; s. 2, ch. 81-318; ss. 35, 36, ch. 85-297; s. 4, ch. 91-429.

We will now read and review the FL Administrative Code. The first topics of review are; Probable Cause Determination.; Unexcused Absences.; Time for Payment of Administrative Fines.; Board Member Compensation; and Public Comment.

CHAPTER 61G5, FLORIDA ADMINISTRATIVE CODE ORGANIZATION, PURPOSE, MEETINGS, PROBABLE CAUSE DETERMINATION, PROCEDURES

61G5-17.008 Probable Cause Determination.
61G5-17.0095 Unexcused Absences.
61G5-17.016 Time for Payment of Administrative Fines.
61G5-17.017 Board Member Compensation.
61G5-17.019 Public Comment.

61G5-17.008 Probable Cause Determination.
The determination as to whether probable cause exists to believe that a violation of the provisions of Chapter 455 or 477, F.S., or of the rules promulgated thereunder has occurred, shall be made by the Department of Business and Professional Regulation. Specific Authority 120.53(1)(c), 455.225(3) FS. Law Implemented 455.225(3) FS. History–New 11-2-80, Formerly 21F-17.08, 21F-17.008.

61G5-17.0095 Unexcused Absences.
Unexcused absences shall include any absence other than: one caused by serious illness of a member preventing attendance; death or serious illness of a family member; unavoidable travel delays or cancellations preventing attendance; or any conflict, extraordinary circumstances or event approved by the chairperson of the board. Members shall communicate the reason for any absence to the Executive Director prior to the meeting and the reason for the absence shall be made part of the minutes of that meeting. Specific Authority 120.53(1), 477.016 FS. Law Implemented 120.53(1), 455.207 FS. History–New 1-9-95.

61G5-17.016 Time for Payment of Administrative Fines.
In cases where the Board imposes an administrative fine for violation of Chapter 455 or 477, F.S., or the rules promulgated thereunder, the penalty shall be paid to the Department of Business and Professional Regulation within thirty (30) days of its imposition by order of the Board unless otherwise stated by the Board. Specific Authority 455.227(2), 477.016 FS. Law Implemented 455.227(2), 477.028, 477.029 FS. History–New 11-2-80, Amended 1-17-83, Formerly 21F-17.16, Amended 4-15-93, Formerly 21F-17.016.

61G5-17.017 Board Member Compensation.
In addition to receiving fifty dollars ($50.00) compensation per day for attending official meetings of the board, a board member shall also be eligible to receive compensation for the following “other business involving the board”:
All joint Board or committee meetings required by statute, Board rule or Board action;
Official meetings or workshops called by the chairman at which either a committee composed of two (2) or more board members or a quorum of the board is present pursuant to Chapters 120 and 477, F.S.;
Meetings of Board members with Department staff or contractors of the Department at the Department’s or the Board’s request. Any participation or meeting of members noticed or unnoticed will be on file in the Board Office;
Meetings or conferences which the board member attends at the request of the Secretary or the Secretary’s designee;
Administrative hearings or legal proceedings at which the board member appears as witness or representative of the board at the request of counsel to the board;
All activity of Board members, if authorized by the Board, when grading, proctoring or reviewing examinations given by the Department;
All participation in Board authorized meetings with professional associations of which the Board is a member or invitee. This would include all meetings of national associations or registration boards of which the Board is a member as well as Board authorized participation in meetings of national or professional associations or organizations involved in educating, regulating or reviewing the profession over which the Board has statutory authority;
Any and all other activities which are Board approved and which are necessary for Board members to attend in order to further protect the public health, safety and welfare, through the regulation of which the Board has statutory authority;
In the event that a board member is present for a meeting or hearing defined above, and the meeting is cancelled without prior notice, the attending board member will be eligible for compensation provided the member was present at the scheduled time. Specific Authority 455.207(4) FS. Law Implemented 455.207(4) FS. History–New 11-15-81, Formerly 21F-17.17, 21F-17.017, Amended 9-8-94.

61G5-17.019 Public Comment.
The Board of Cosmetology invites and encourages all members of the public to provide comment on matters or propositions before the Board or a committee of the Board. The opportunity to provide comment shall be subject to the following:
Members of the public will be given an opportunity to provide comment on subject matters before the Board after an agenda item is introduced at a properly noticed board meeting.
Members of the public shall be limited to 3 minutes to provide comment. This time shall not include time spent by the presenter responding to questions posed by Board members, staff or board counsel.
The chair of the Board may extend the time to provide comment if time permits.
A member of the public shall notify board staff in writing of his or her interest to be heard on a proposition or matter before the Board. The notification shall identify the person or entity, indicate support, opposition, or neutrality, and identify who will speak on behalf of a group or faction of persons consisting of three or more persons. Any person or entity appearing before the Board may use a pseudonym if he or she does not wish to be identified. Rulemaking Authority 286.0114 FS. Law Implemented 286.0114 FS. History‒New 6-18-14.

We will now read and review information regarding the Cosmetologist.; including; Cosmetologist and Compensation Defined; Who May Apply; Cosmetology Examination; Re-examination; Endorsement of Cosmetologists.; and Cosmetologist License Renewal.

COSMETOLOGIST
61G5-18.00015 Cosmetologist and Compensation Defined.
61G5-18.001 Who May Apply.
61G5-18.003 Cosmetology Examination.
61G5-18.004 Re-examination.
61G5-18.007 Endorsement of Cosmetologists.
61G5-18.008 Cosmetologist License Renewal.
61G5-18.011 Initial Licensure or Registration Requirement for Instruction on Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome; Course Content and Approval Requirements.

61G5-18.00015 Cosmetologist and Compensation Defined.
A cosmetologist is a person who is licensed to perform the mechanical or chemical treatment of the head, face, and scalp for aesthetic rather than medical purposes, including, but not limited to, hair shampooing, hair cutting, hair arranging, hair braiding, hair coloring, permanent waving, and hair relaxing, for compensation. A cosmetologist may also perform non-invasive hair removals, including wax treatments but not including electrolysis as that term is defined in Chapter 478, F.S., manicures, pedicures, and skin care services. For the purposes of this act “compensation” is defined as the payment of money or its equivalent, the receipt or delivery of property, or the performance of a service, or the receipt or delivery of anything of value in exchange for cosmetology services. For the purposes of this act “medical purposes” is defined as any form of bodily intrusion into the orifices, skin, muscles, or any other tissues of the body. Specific Authority 477.016, 477.025(2) FS. Law Implemented 477.013, 477.025(2) FS. History–New 10-10-82, Amended 6-28-84, Formerly 21F-18.001, Amended 7-4-90, Formerly 21F-18.00015, Amended 11-11-96, 3-8-00.

61G5-18.001 Who May Apply.
Individuals desiring to be licensed as a cosmetologist shall meet all required qualifications as specified in Section 477.019, F.S.
If an applicant for licensure by examination meets all required qualifications except the required minimum hours of training, he or she shall be entitled to take the licensure examination to practice cosmetology if the applicant has received a minimum of 1,000 hours of training established by the Board, and has been certified by the Director of the school or program in which he or she is currently enrolled to have achieved the minimum competency standards of performance as prescribed in Chapter 61G5-22, F.A.C., for the hours completed. Specific Authority 477.016, 477.019(2) FS. Law Implemented 477.019(2) FS. History–New 11-3-80, Amended 12-18-83, Formerly 21F-18.01, Amended 10-18-87, 1-10-90, 12-17-90, Formerly 21F-18.001, Amended 2-1-98.

61G5-18.003 Cosmetology Examination.
(1) The Cosmetology examination shall consist of two parts, a written theory examination and a written clinical examination, both parts must be successfully completed prior to licensure.
(2)(a) The written theory examination shall be administered by the Department. The following subjects will be tested on the examination and will be weighted approximately as designated:

<table>
<thead>
<tr>
<th>Category</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. General Safety and Sanitation Procedures</td>
<td>34%</td>
</tr>
<tr>
<td>2. Client Services</td>
<td>24%</td>
</tr>
<tr>
<td>3. Facial, Make-up, and Hair Removal</td>
<td>16%</td>
</tr>
<tr>
<td>4. Manicuring and Pedicuring</td>
<td>16%</td>
</tr>
<tr>
<td>5. Professional/Legal and Ethical Laws and Rules</td>
<td>10%</td>
</tr>
</tbody>
</table>

(b) Passing Grade. Candidates’ scores will be converted to a scale of 0 to 100; the minimum passing score as determined by the Board shall be set at 75 on that scale. All forms of the examination are statistically equated so that the relative passing scores remain equivalent. The second part of the examination shall be a written clinical examination administered by the Department. The following subjects will be tested on the examination and will be weighted approximately as follows:
<table>
<thead>
<tr>
<th>Category</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Hair Coloring and Lightening</td>
<td>39%</td>
</tr>
<tr>
<td>(b) Permanent Waving and Chemical Relaxing</td>
<td>34%</td>
</tr>
<tr>
<td>(c) Scalp and Hair Care</td>
<td>5%</td>
</tr>
<tr>
<td>(d) Hair Cutting/Shaping</td>
<td>10%</td>
</tr>
<tr>
<td>(e) Hair Styling</td>
<td>12%</td>
</tr>
</tbody>
</table>

Passing Grade. Candidates’ scores will be converted to a scale of 0 to 100; the minimum passing score as determined by the Board shall be set at 75 on that scale. All forms of the examination are statistically equated so that the relative passing scores remain equivalent.

In rounding percentages, any percentage which is point five (.5) or above shall be rounded up to the next number. Percentages less than point five (.5) shall be rounded down to the next whole number.

An accurate record of each examination shall be made and the record, together with all examination papers, shall be filed with the Secretary of the Department and shall be kept for reference and inspection for a period of not less than two (2) years immediately following the examination.

An applicant shall be permitted to use a strict translation dictionary in taking the examination. Such a dictionary shall give only the translation of words from one language to another without giving any definition or explanation of any word. Specific Authority 120.53, 455.217(1), 477.016 FS. Law Implemented 455.217(3), 477.022 FS. History–New 1-1-81, Amended 4-7-81, 6-17-81, 6-3-82, 10-10-82, 1-17-83, 8-10-83, 6-28-84, 8-8-84, 4-18-85, 5-19-85, Formerly 21F-18.03, Amended 3-10-86, 8-10-86, 10-18-87, 8-29-88, Formerly 21F-18.003, Amended 4-16-96, 8-20-96.

61G5-18.004 Re-examination.

Any applicant who fails the examination shall be entitled to re-examination pursuant to the terms and conditions set forth in this rule. Those applicants not achieving a passing grade on each part will have failed that part of the examination and shall be required to retake and pass only that part failed in order to be licensed as a cosmetologist, provided however that the applicant must pass both parts of the examination within a two-year period. If any applicant fails to achieve a passing grade on all parts within the 2 years as provided in this rule, the applicant shall be required to retake and successfully complete the full examination. In rounding percentages, any percentage which is point five (.5) or above shall be rounded up to the next whole number. Percentages less than point five (.5) shall be rounded down to the next whole number.

Any person desiring to be reexamined for licensure as a cosmetologist shall apply to the Department in writing upon forms prepared and furnished by the department and shall pay a reexamination fee as required by Rule 61G5-24.006, F.A.C.

Those applicants who qualified to take the examination after completion of only 1,000 hours of training pursuant to Section 477.019(1)(b), F.S., and failed, shall be entitled to reexamination only upon completion of the full requirements provided for in Section 477.019, F.S.

An applicant who has twice failed the examination or any part thereof, shall return to an approved school of cosmetology for a minimum of 40 hours of remedial instruction prior to taking any part of the examination for the third time. An applicant who fails any portion for the third time shall return to an approved school of cosmetology for 80 hours of remedial instruction. Specific Authority 120.53, 455.217(1), 477.016 FS. Law Implemented 455.217(2), 477.022 FS. History–New 11-3-80, Amended 8-10-83, 6-28-84, Formerly 21F-18.04, Amended 6-18-86, Formerly 21F-18.004, Amended 8-20-96.

61G5-18.007 Endorsement of Cosmetologists.
The Department of Business and Professional Regulation shall issue a license to an applicant without examination who:

- Makes application and pays to the Department the fee specified in Rule 61G5-24.002, F.A.C.;
- Demonstrates the applicant has completed a board approved HIV/AIDS course; and
Demonstrates the applicant is currently licensed to practice cosmetology under the law of another state having completed at least 1200 cosmetology school or program hours substantially similar to, equivalent to, or greater than the qualifications required of applicants from this state; Demonstrates that the applicant has passed a written licensure examination to obtain a license substantially similar to, equivalent to, or greater than the qualifications required of applicants from this state; and passage of a written examination. Rulemaking Authority 477.016 FS. Law Implemented 477.019(6) FS. History–New 11-3-80, Formerly 21F-18.07, Amended 6-22-87, 10-18-87, 12-17-90, Formerly 21F-18.007, Amended 7-1-02, 5-8-13.

61G5-18.008 Cosmetologist License Renewal.
A cosmetologist shall renew his or her license on or before October 31 each biennial year, according to the fee schedule as outlined in Rule 61G5-24.008, F.A.C.
Spouses of members of the Armed Forces of the United States are exempted from all licensure renewal provisions, but only in cases of absence from the state because of their spouses' duties with the Armed Forces.
Specific Authority 455.02(2), 477.016, 477.019(4) FS. Law Implemented 455.02(2), 477.019(4) FS. History–New 11-3-80, Amended 6-28-84, 10-6-85, Formerly 21F-18.08, 21F-18.008, Amended 8-8-95.

Continue reading the following regulations. Topics are: Initial Licensure or Registration Requirement for Instruction on Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome; Course Content and Approval Requirements.

61G5-18.011 Initial Licensure or Registration Requirement for Instruction on Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome; Course Content and Approval Requirements.
Each applicant for initial licensure or registration under Chapter 477, F.S., shall complete a board-approved educational course on Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS), and shall submit proof thereof in the form of a certificate of completion from the provider of such course with the application. A copy of the certificate will satisfy this requirement. Completion of such course shall be a condition of licensure or registration. Except as provided in subsection (2) below, no person shall be granted an initial license or registration unless he or she complies with this rule.
If an applicant for initial licensure or registration under Chapter 477, F.S., has not completed a board-approved educational course on HIV and AIDS at the time of application, but has completed all other requirements for licensure or registration, he or she may request an additional 6 month period in which to complete this requirement. Such request shall be submitted at the time of filing the application for licensure or registration; and, will be made by filing a written affidavit showing good cause to grant the request. Upon the filing of such affidavit, the applicant shall be granted one, 6 month period in which to complete a board-approved educational course on HIV and AIDS. The applicant shall be required to submit proof of the completion of this course in the form of a certificate of completion from the provider of such course to the department within the 6 month period. A copy of the certificate will satisfy this requirement. Failure to submit such proof during the 6 month period shall cause any previously issued license or registration to become null and void without further action by the Board.
All educational courses on HIV and AIDS which are taught to fulfill the requirements for initial licensure or registration under Chapter 477, F.S., shall be approved by the Board. To be considered for the Board’s approval, courses on HIV and AIDS shall consist of 4 hours combined education of: Education on the modes of transmission, infection control procedures, clinical management, and prevention of HIV and AIDS;
Discussion of attitudes towards HIV and AIDS as well as appropriate behavior in dealing with persons who may have the virus or syndrome.

All proposed HIV and AIDS educational courses shall be submitted for presentation to the Board at least 30 days prior to the next scheduled board meeting at which the course is to be considered for approval. No course may be taught for credit until it has received the Board’s approval.

The Board approves the following courses for purposes of fulfilling the requirements for initial licensure or registration under Chapter 477, F.S.:

Courses approved by any other board in accordance with Section 381.0034, 381.0035, 455.2226, or 455.2228, F.S.;

Basic AIDS educational courses presented by the Florida Department of Health or other state health departments, provided they meet the requirements set forth in subsection (3).

Home study or video courses shall be approved by the Board, provided they meet the requirements set forth in subsection (3). Home study courses must require a 75% passing score on a post course test to be graded by the course provider.

At any time, the Board shall deny or rescind its approval of a course offered for initial licensure if it finds that: such approval was the result of fraud; the course which is being provided fails to cover the information required by statute or subsection (3) or fails to meet other requirements specified in this rule; or the course significantly varies from the course proposal that was approved by the Board. Before rescinding approval of a course, the Board shall give the course provider notice and an opportunity to be heard. If the Board denies or rescinds its approval of a course because of the course provider’s fraud in obtaining such approval, then the course provider shall thereafter be barred from presenting any other course to licensees for credit unless the course provider demonstrates to the Board that he or she has been sufficiently rehabilitated to be trusted to provide such courses to licensees in the future.

Specific Authority 455.2228(5), 477.016 FS. Law Implemented 455.2228 FS. History–New 9-2-90, Amended 4-9-91, 10-27-91, 6-14-93, Formerly 21F-18.011, Amended 2-1-95, 12-21-97, 1-31-99, 3-8-00, 5-10-01, 8-1-05.

Proceed to review the following topics: COSMETOLOGY SALONS; Salon Defined; Performance of Cosmetology or Specialty Services Outside a Licensed Salon.; Fashion Photography; Salon Requirements; Inspections; and Display of Documents.

COSMETOLOGY SALONS

61G5-20.001 Salon Defined.
61G5-20.0015 Performance of Cosmetology or Specialty Services Outside a Licensed Salon.
61G5-20.00175 Fashion Photography.
61G5-20.002 Salon Requirements.
61G5-20.003 Inspections.
61G5-20.004 Display of Documents.
61G5-20.005 Salon License Renewal.
61G5-20.007 Communicable Disease.
61G5-20.008 Employment of Applicants for Licensure as a Cosmetologist Prior to Licensure;
Employment of Applicants for Registration as a Specialist Prior to Registration.
61G5-20.010 Mobile Salons.

61G5-20.001 Salon Defined.

Salon means any establishment or place of business wherein cosmetology as defined in Section 477.013(4), F.S., or any specialty as defined in Section 477.013(6), F.S., is practiced for compensation,
however this does not prevent the practice of cosmetology in a licensed barbershop, or the practice of barbering in a licensed cosmetology salon, provided the salon employs a licensed cosmetologist. Except as provided in Rule 61G5-20.010, F.A.C., a salon must be at a fixed location. Specific Authority 477.016 FS. Law Implemented 477.025 FS. History–New 11-2-80, Amended 10-10-82, 10-6-85, Formerly 21F-20.01, Amended 10-18-87, Formerly 21F-20.001, Amended 2-10-94, 2-25-07.

61G5-20.0015 Performance of Cosmetology or Specialty Services Outside a Licensed Salon.

“Special events” is defined as weddings, fashion shows, and other events as approved by the board. Cosmetology or specialty services may be performed by a licensed cosmetologist or specialist in a location other than a licensed salon, including a hospital, nursing home, residence, or similar facility, when a client for reasons of ill health is unable to go to a licensed salon. Such services are not to be performed upon employees or person who do not reside in the facility, or any other non-qualified persons.

Cosmetology services may only be performed in a photography studio salon subject to the following requirements:

Only hair-arranging services and the application of cosmetic products may be performed in a photography studio salon; and, may only be performed for the purpose of preparing a model or client of the photography studio for a photographic session. Shampooing the hair, hair cutting, hair coloring, permanent waving of the hair, hair relaxing, removing of hair, manicuring, pedicuring, and the performance of any other service defined as cosmetology may not be performed in a photography studio salon.

All hair-arranging services and applications of cosmetic products to be performed in the photography studio salon shall be performed by a licensed Florida cosmetologist or under the supervision of a licensed cosmetologist employed by the salon. “Under the supervision of a licensed cosmetologist” shall mean that an individual who then holds a current, active Florida license as a cosmetologist shall be physically present at the photography studio salon at all times when hair-arranging services or applications of cosmetic products are being performed.

When performing hair-arranging services, the photography studio salon shall use either disposable hair-arranging implements or shall use a wet or dry sanitizing system approved by the federal Environmental Protection Agency.

The following procedures shall be followed when performing cosmetology services outside of a licensed salon:

Information as to the name of the client and the address at which the services are to be performed shall be recorded in the appointment book.


61G5-20.00175 Fashion Photography.

For purposes of Section 477.0263(3), F.S., fashion photography is hereby defined to mean the photographing of one or more human subjects or professional models for commercial purposes where the subject or model receives remuneration, compensation or wages for being photographed. Fashion photography shall not include instances in which the subject pays a photographer a fee to be photographed or instances in which the photographs are made for the personal use and enjoyment of the subject rather than for commercial purposes. Specific Authority 477.016 FS. Law Implemented 477.0263(3) FS. History–New 1-9-95.
61G5-20.002 Salon Requirements.
Definitions: For the purposes of this rule, the following definitions apply:
“Clean” means the removal of visible debris from a surface such as washing with soap/water.
“Disinfect” means the use of a chemical to destroy potential pathogens.
“Sterilize” means the complete destruction of all microbial life, commonly achieved through the use of
heat and/or pressure.
“Wet disinfection container” means a tub or jar with a lid, filled with disinfectant and large enough for
all items to be completely immersed.
“Infection control” means the process for reducing the risk of spreading disease causing pathogens.
Prior to opening a salon, the owner shall:
Submit an application on forms prescribed by the Department of Business and Professional Regulation; and
Pay the required registration fee as outlined in the fee schedule in Rule 61G5-24.005, F.A.C.; and
Meet the safety and sanitary requirements as listed below and these requirements shall continue in full
force and effect for the life of the salon:
Ventilation and Cleanliness: Each salon shall be kept well ventilated. The walls, ceilings, furniture and
equipment shall be kept clean and free from dust. Hair must not be allowed to accumulate on the floor
of the salon. Hair must be deposited in a covered waste receptacle. Each salon which provides services
for the extending or sculpturing of nails shall provide such services in a separate area which is
adequately ventilated for the safe dispersion of all fumes resulting from the services.
Toilet and Lavatory Facilities: Each salon shall provide – on the premises or in the same building as,
and within 300 feet of, the salon – adequate toilet and lavatory facilities. To be adequate, such facilities
shall have at least one toilet and one sink with running water. Such facilities shall be equipped with
toilet tissue, soap dispenser with soap or other hand cleaning material, sanitary towels or other hand-
drying device such as a wall-mounted electric blow dryer, and waste receptacle. Such facilities and all
of the foregoing fixtures and components shall be kept clean, in good repair, well-lighted, and
adequately ventilated to remove objectionable odors.
A salon, or specialty salon may be located at a place of residence. Salon facilities must be separated
from the living quarters by a permanent wall construction. A separate entrance shall be provided to
allow entry to the salon other than from the living quarters. Toilet and lavatory facilities shall comply
with subparagraph (c)2. above and shall have an entrance from the salon other than the living quarters.
Animals: No animals or pets shall be allowed in a salon, with the exception of service animals and fish
kept in closed aquariums.
Shampoo Bowls: Each salon shall have shampoo bowls equipped with hot and cold running water. The
shampoo bowls shall be located in the area where cosmetology services are being performed. A
specialty salon that exclusively provides specialty services, as defined in Section 477.013(6), F.S., need
not have a shampoo bowl, but must have a sink or lavatory equipped with hot and cold running water
on the premises of the salon.
Comply with all local building and fire codes. These requirements shall continue in full force and effect
for the life of the salon.
Each salon shall comply with the following:
Linens: Each salon shall keep clean linens in a closed, dustproof cabinet. All soiled linens must be kept
in a closed receptacle. Soiled linens may be kept in open containers if entirely separated from the area
in which cosmetology services are rendered to the public. A sanitary towel or neck strip shall be placed
around the patron’s neck to avoid direct contact of the shampoo cape with a patron’s skin.
Containers: Salons must use containers for waving lotions and other preparations of such type as will
prevent contamination of the unused portion. All creams shall be removed from containers by spatulas.
Disinfection: The use of a brush, comb or other article on more than one patron without being disinfected is prohibited. Each salon is required to have sufficient combs, brushes, and implements to allow for adequate disinfecting practices. Combs or other instruments shall not be carried in pockets. Disinfectants: All salons shall be equipped with and utilize disinfecting solutions with hospital level disinfectant or EPA approved disinfectant, sufficient to allow for disinfecting practices. A wet disinfection container is any receptacle containing a disinfectant solution and large enough to allow for a complete immersion of the articles. A cover shall be provided. Disinfecting methods which are effective and approved for salons: First, clean articles with soap and water, completely immerse in a chemical solution that is hospital level or EPA approved disinfectant as follows:

Combs and brushes, remove hair first and immerse in hospital level or EPA approved disinfectant;
Metallic instrument, immerse in hospital level for EPA approved disinfectant;
Instruments with cutting edge, wipe with a hospital level or EPA approved disinfectant; or
Implements may be immersed in a hospital level or EPA approved disinfectant solution.
Shampoo bowls, facial beds, and neck rests, clean and disinfect between each use.

For purposes of this rule, a “hospital level disinfectant or EPA approved disinfectant” shall mean the following:

For all combs, brushes, metallic instruments, instruments with a cutting edge, and implements that have not come into contact with blood or body fluids, a disinfectant that indicates on its label that it has been registered with the EPA as a hospital grade bacterial, virucidal and fungicidal disinfectant;
For all combs, brushes, metallic instruments with a cutting edge, and implements that have come into contact with blood or body fluids, a disinfectant that indicates on its label that it has been registered with the EPA as a disinfectant, in accordance with 29 C.F.R. 1910.1030.

All disinfectants shall be mixed and used according to the manufacturer’s directions. After cleaning and disinfecting, articles shall be stored in a clean, closed cabinet or container until used. Undisinfected articles such as pens, pencils, money, paper, mail, etc., shall not be kept in the same container or cabinet. For the purpose of recharging, rechargeable clippers may be stored in an area other than in a closed cabinet or container, provided such area is clean and provided the cutting edges of such clippers have been disinfected.

Ultra Violet Irradiation may be used to store articles and instruments after they have been cleansed and disinfected.

Pedicure Equipment Disinfection:
The following cleaning and disinfection procedures must be used for any pedicure equipment that holds water, including sinks, bowls, basins, pipe-less spas, and whirlpool spas:

After each client, all pedicure units must be cleaned with a low-foaming soap or detergent with water to remove all visible debris, then disinfected with an EPA registered hospital grade bactericidal, fungicidal, virucidal, and pseudomonacidal disinfectant used according to manufacturers instructions for at least ten (10) minutes. If the pipe-free foot spa has a foot plate, it should be removed and the area beneath it cleaned, rinsed, and wiped dry.

At the end of each day of use, the following procedures shall be used:
All filter screens in whirlpool pedicure spas or basins for all types of foot spas must be disinfected. All visible debris in the screen and the inlet must be removed and cleaned with a low-foaming soap or detergent and water. For pipe-free systems, the jet components or foot plate must be removed and cleaned and any debris removed. The screen, jet, or foot plate must be completely immersed in an EPA registered, hospital grade bactericidal, fungicidal, virucidal, and pseudomonacidal disinfectant that is used according to manufacturer’s instructions. The screen, jet, or foot plate must be replaced after disinfection is completed and the system is flushed with warm water and low-foaming soap for 5 minutes, rinsed, and drained.
After the above procedures are completed, the basin should be filled with clean water and the correct amount of EPA registered disinfectant. The solution must be circulated through foot spa system for 10 minutes and the unit then turned off. The solution should remain in the basin for at least 6 to 10 hours. Before using the equipment again, the basin system must be drained and flushed with clean water. Once each week, subsequent to completing the required end-of-day cleaning procedures, the basin must be filled with a solution of water containing one teaspoon of 5.25% bleach for each gallon of water. The solution must be circulated through the spa system for 5 to 10 minutes and then the solution must sit in the basin for at least 6 hours. Before use, the system must be drained and flushed. A record or log book containing the dates and times of all pedicure cleaning and disinfection procedures must be documented and kept in the pedicure area by the salon and made available for review upon request by a consumer or a Department inspector.

No cosmetology or specialty salon shall be operated in the same licensed space allocation with any other business which adversely affects the sanitation of the salon, or in the same licensed space allocation with a school teaching cosmetology or a specialty licensed under Chapter 477, F.S., or in any other location, space, or environment which adversely affects the sanitation of the salon. In order to control the required space and maintain proper sanitation, where a salon adjoins such other business or school, or such other location, space or environment, there must be permanent walls separating the salon from the other business, school, location, space, or environment and there must be separate and distinctly marked entrances for each.

Evidence that the full or specialty salon contains a minimum of 100 square feet of floor space. No more than one (1) cosmetologist or specialist may be employed in a salon which has only the minimum floor space. An additional 50 square feet will be required for each additional specialist or cosmetologist employed.

Full and specialty salons, regardless of size and number of operators, shall meet all the sanitation requirements stated in this section.

For purposes of this rule, “permanent wall” means a vertical continuous structure of wood, plaster, masonry, or other similar building material, which is physically connected to a salon’s floor and ceiling, and which serves to delineate and protect the salon. Rulemaking Authority 477.016, 477.025(2) FS. Law Implemented 477.025 FS. History–New 4-22-81, Amended 9-11-81, 1-17-83, 8- 10-83, 6-28-84, 10-6-85, Formerly 21F-20.02, Amended 6-18-86, 10-18-87, 8-20-90, 5-19-91, 1-30-92, 5-11-92, 4- 15-93, 5-31-93, Formerly 21F-20.002, Amended 1-9-95, 4-5-95, 8-8-95, 2-28-96, 6-16-97, 8-27-98, 4- 13-99, 8-1-05, 9-6-06, 2-25-07, 3-10-08, 4-3-13, 6-10-13, 11-9-17.

**61G5-20.003 Inspections.**
The Department of Business and Professional Regulation shall cause an inspection of all proposed salons to determine if all the requirements have been met. Each licensed salon shall be inspected at least biennially by the Department. No person shall, for any reason intentionally, or directly inhibit an authorized representative of the Department from performing said inspections. Specific Authority 477.016 FS. Law Implemented 477.025(4),(9) FS. History–New 4-22-81, Amended 9-11-81, 5-3-82, 10-6-85, Formerly 21F-20.03, Amended 10-18-87, Formerly 21F-20.003, Amended 9-27-07.

**61G5-20.004 Display of Documents.**
All holders of a cosmetology or specialty salon license shall display within their salons in a conspicuous place which is clearly visible to the general public upon entering the salon the following documents:
The current salon license,
A legible copy of the most recent inspection sheet for the salon.
All holders of a cosmetology or specialty salon license shall require and ensure that all individuals engaged in the practice of cosmetology, any specialty, hair braiding, hair wrapping, or body wrapping
display at the individual’s work station their current license or registration at all times when the
individual is performing cosmetology, specialty, hair braiding, hair wrapping, or body wrapping
services. The license or registration on display shall be the original certificate or a duplicate issued by
the Department and shall have attached a 2" by 2" photograph taken within the previous two years of
the individual whose name appears on the certificate. The certificate with photograph attached shall be
permanently laminated as of July 1, 2007.
By July 1, 2008, all holders of a cosmetology or specialty salon license shall display at each footbath a
copy of the Consumer Protection Notice regarding footbaths, sanitation, and safety. Copies of this
notice (revised 10/15/07, and incorporated herein by reference) may be obtained from the Department
of Business and Professional Regulation at 1940 North Monroe St., Tallahassee, FL 32399-0783, and
the Call Center by calling (850)487-1395.
Specific Authority 477.016, 477.025(2) FS. Law Implemented 477.025 FS. History–New 11-2-80,
Amended 10-10-82, 6-28-84, 10-6-85, Formerly 21F-20.04, 21F-20.004, Amended 3-22-00, 12-6-06, 3-10-08.

Let's now turn our attention to, and read, the topics of: Salon License Renewal; Communicable
Disease.; Employment of Applicants for Licensure as a Cosmetologist Prior to Licensure;
Employment of Applicants for Registration as a Specialist Prior to Registration.; and Mobile
Salons..

61G5-20.005 Salon License Renewal.
All salon licenses shall be renewed on or before November 30 of each biennial (even-numbered) year,
by meeting all the current requirements for salon licensure as expressed in Rule Chapter 61G5-20,
F.A.C., and by paying the renewal fee specified in Rule 61G5-24.009, F.A.C. A salon license is
delinquent if not renewed by the November 30 renewal date. To renew a delinquent license, a licensee
shall pay delinquent fee as outlined in Rule 61G5-24.009, F.A.C. (in addition to the biennial renewal
fee). A delinquent salon license shall expire at the end of the biennium in which it becomes delinquent.
After a salon license has expired at the end of the biennium, a new salon license application, the
delinquent fee as outlined in Rule 61G5-24.009, F.A.C., and all fees as outlined in Rule 61G5-24.005,
F.A.C., must be filed with the Board. Until such new license is issued for and received by the salon, all
cosmetology and specialty services shall cease. Specific Authority 477.016, 477.025, 477.026 FS. Law
Implemented 477.025(8), 477.026(1)(c) FS. History–New 11-2-80, Amended 5-3-82, 6-28-84, 10-6-85,
Formerly 21F-20.05, Amended 1-28-91, Formerly 21F-20.005, Amended 2-28-96, 8-20-96, 10-1-97.

61G5-20.007 Communicable Disease.
No person engaged in the practice of cosmetology or a specialty in a salon shall proceed with any
service to a person having a visible disease, pediculosis, or open sores suggesting a communicable
disease, until such person furnishes a statement signed by a physician licensed to practice in the State
of Florida stating that the disease or condition is not in an infectious, contagious or communicable
stage.
No cosmetologist or person registered to practice any specialty in Florida, who has a visible disease,
pediculosis, or open sores suggesting a communicable disease, shall engage in the practice of
cosmetology or any specialty, until such cosmetologist or registrant obtains a statement signed by a
physician licensed to practice in the State of Florida stating that the disease or condition is not in an
infectious, contagious, or communicable stage. Specific Authority 477.016 FS. Law Implemented
477.025(2) FS. History–New 5-12-81, Amended 10-6-85, Formerly 21F-20.07, Amended 5-11-92,
Formerly 21F-20.007.
61G5-20.008 Employment of Applicants for Licensure as a Cosmetologist Prior to Licensure; Employment of Applicants for Registration as a Specialist Prior to Registration.

Holders of a cosmetology salon license who wish to permit an applicant for licensure as a cosmetologist by examination to perform cosmetology services in their salon shall:
Prior to permitting an applicant to perform cosmetology services in their salon, obtain from the applicant proof that they have passed all parts of the examination for licensure as a cosmetologist within the two years as provided by Rule 61G5-18.004, F.A.C.;
Display in a conspicuous place at the cosmetology salon in which the applicant performs cosmetology services a copy of the cosmetology examination passing certificate(s).

Holders of a cosmetology or specialty salon license who wish to permit an applicant for registration as a specialist to perform specialty services in their salon pursuant to Rule 61G5-29.004, F.A.C., or who wish to permit applicants for registration as a hair braider, hair wrapper, or body wrapper to perform hair braiding, hair wrapping, or body wrapping services in their salon pursuant to Rule 61G5-31.006, F.A.C., shall:
Prior to permitting an applicant to perform any specialty services or hair braiding, hair wrapping, or body wrapping services in their salon, obtain from the applicant a copy of the completed application for registration that includes proof of successful completion of the education requirements and payment of the applicable fees submitted to the Department by the applicant;
Upon learning or in any way becoming aware that an applicant who is performing specialty services in their salon pursuant to Rule 61G5-29.004, F.A.C., or performing hair braiding, hair wrapping, or body wrapping services in their salon pursuant to Rule 61G5-31.006, F.A.C., has been notified that his or her application is incomplete, or has been determined by the Board to be not qualified for registration as a specialist, shall immediately cease to permit the applicant to further perform specialty services;
Display in a conspicuous place at the cosmetology or specialty salon in which the applicant performs specialty services pursuant to Rule 61G5-29.004, F.A.C., or hair braiding, hair wrapping, or body wrapping services pursuant to Rule 61G5-31.006, F.A.C., a copy of the completed application for registration as a specialist or application for registration as a hair braider, hair wrapper, or body wrapper submitted to the Department by the applicant. Rulemaking Authority 477.016, 477.025(2) FS. Law Implemented 477.0132(2), 477.019(4), 477.0201(6) FS. History–New 10-18-87, Amended 5-2-91, Formerly 21F-20.008, Amended 11-11-96, 12-21-97, 11-25-98, 4-3-17.

61G5-20.010 Mobile Salons.
The operation of all mobile cosmetology salons shall meet and at all times remain in compliance with all local laws and ordinances regulating business establishments in all areas in which the mobile salon operates, with all applicable requirements of the Americans with Disabilities Act relating to accommodations for persons with disabilities, and with all applicable OSHA requirements.

Each mobile salon shall meet and at all times remain in compliance with the requirements of this rule, all licensure and operating requirements specified in Chapters 455 and 477, F.S., and all other rules of the Board and the Department which apply to cosmetology salons at fixed locations except to the extent those rules of the Board conflict with this rule.
To facilitate inspections by the Department:
Prior to the beginning of each month, each mobile salon license holder shall file with the Board a written monthly itinerary which lists the locations where and the dates and hours when the mobile salon will be operating.
The salon name and salon license number shall be in lettering at least five inches in height and shall be visibly displayed and clearly legible on at least two exteriors sides of each mobile salon.
If a mobile salon is in a motor vehicle, the vehicle’s identifications number shall be included on the mobile salon’s application for licensure and shall also be listed on the mobile salon’s monthly itinerary required in paragraph (a) of this subsection.

Each mobile salon shall have a telephone or other means of telecommunication by which it can be contacted by the Department personnel. The salon’s telephone number shall be included on the mobile salon’s application for licensure and shall also be listed on the mobile salon’s monthly itinerary required in paragraph (a) of this subsection.

Each salon shall be operated only at the times and places specified in its monthly itinerary.

Each mobile salon license holder shall maintain a permanent business address in the inspection area of the local district office at which records of appointments, itineraries, license numbers of employees, and vehicle identification numbers of the license holder’s mobile salon shall be kept and made available for verification purposes by Department personnel, and at which correspondence from the Department can be received. Post Office box or private mail box addresses may not be used for these purposes.

Due to the inherent problems of providing water and sewage service to mobile salons, the following requirements shall apply:

Each mobile salon shall be equipped with a functional restroom which includes a self-contained, flush chemical toilet with a holding tank. The restroom shall also be in substantial compliance with the toilet and lavatory requirements specified in Rule 61G5-20.002, F.A.C.

Each mobile salon shall have storage capacity for at least 35 gallons of clean water for each cosmetologist working in the mobile salon and a total storage capacity for waste water equal to or greater than the mobile salon’s total capacity for clean water.

Operation of a mobile salon shall promptly cease:

When the mobile salon’s clean water supply is depleted or so diminished that further cosmetology service cannot be completed;

When the mobile salon’s waste water storage capacity is reached;

When the mobile salon’s restroom is in need of servicing.

No mobile salon shall operate or resume operation unless it has a sufficient amount of clean water as well as waste water capacity necessary for completing all cosmetology services undertaken and its restroom is functional.

In disposing of sewage and waste water, each mobile salon shall comply with applicable state and local environmental and sanitation regulations.

No cosmetology services shall be performed and no patrons shall remain within a mobile salon while it is in motion.

Applicants for licensure of a mobile salon shall be subject to and shall pay the same fees which licensed salons at fixed locations are subject to. Specific Authority 477.016, 477.025(2) FS. Law Implemented 477.025, 477.025(10) FS. History–New 2-10-94, Amended 12-27-95, 11-25-98.
61G5-22.003 Level of Acceptability.
61G5-22.004 Florida Law.
61G5-22.005 Sanitation and Sterilization.
61G5-22.006 Facials (Including Skin Care and Hair Removal).
61G5-22.007 Hair Shaping.
61G5-22.008 Scalp Treatments and Hair Care Rinses.
61G5-22.009 Shampoos and Rinses.
61G5-22.010 Hair Arranging (Styling).
61G5-22.011 Hair Coloring.
61G5-22.012 Chemical Waving and Relaxing/Straightening.
61G5-22.0125 Manicuring/Pedicuring/Nail Extension.
61G5-22.014 Optional Curricula.
61G5-22.015 Specialty Certification.
61G5-22.017 Minimum Curriculum for Facial Specialty Training.

61G5-22.002 Definitions.
Level of Acceptability – Minimum passing grade. The level of acceptability for each of the cosmetology/specialty subjects, theoretical and practical, shall be a minimum score of seventy-five percent (75%) or better on an examination on each of the objectives for each subject area. Learning Objective. Statements of the basic subject matter content arranged in an effective learning sequence – what the classroom teacher or manager will do in the learning/teaching situation. Performance Objective. A statement of exactly what the learner must do in observable and measurable terms. A terminal objective – the final action or performance of the individual or group. A minimum student performance standard is a statement specifying competencies that all students are expected to attain at a particular point in time. Mastery of a standard will be demonstrated by the mastery of a predetermined number of skills related to the standard. Services. Minimal number of performances in applicable subject categories required for certification for examination. Specific Authority 477.016 FS. Law Implemented 477.023(2) FS. History–New 11-2-80, Amended 10-29-85, Formerly 21F-22.02, 21F-22.002.

61G5-22.003 Level of Acceptability.
Every school shall evaluate each individual for competency on each objective for each subject area. Specific Authority 477.016 FS. Law Implemented 477.023(2), 477.020 FS. History–New 11-2-80, Amended 10-29-85, Formerly 21F-22.02, 21F-22.003.

61G5-22.004 Florida Law.
Objective: To present an overview of cosmetology law and rules and regulations in relation to consumer protection for both health and economic matters. Learning Objectives:
To define the limitations of the authority of the Board of Cosmetology;
To define the rulemaking authority of the Board of Cosmetology;
To understand the qualifications for licensure;
To understand the procedures and context of examinations;
To comprehend the requirements for cosmetology salons and inspections;
To be aware of the disciplinary proceedings and penalties for violations of Chapter 477, F.S.;
To understand the complaint procedures for violations of Chapter 477, F.S., or the rules promulgated pursuant thereto;
To understand the definitions as used in Chapter 477, F.S.;
To understand the requirements through rules and regulations for license renewal; and
To know the fees and their disposition.
Specific Authority 477.016 FS. Law Implemented 477.023(2) FS. History–New 11-2-80, Amended 10-29-85, Formerly 21F-22.04, 21F-22.004.

61G5-22.005 Sanitation and Disinfection.
Objective: To use chemical agents to disinfect implements and equipment in the salon and promote and protect good health in the community.
Learning Objectives:
To define terms and to describe and clarify bacteria in relationships to the spread of disease;
To describe four (4) methods of sanitation;
To describe the various agents used to prevent the spread of disease; and
To describe measures used to disinfect service areas.
Performance Objectives:
To effectively disinfect the cosmetologist’s implements to prevent the spread of disease; and
To disinfect necessary equipment in the salon to prevent the spread of disease. Rulemaking Authority 477.016, 477.025(2) FS. Law Implemented 477.025(2) FS. History–New 11-2-80, Formerly 21F-22.05, 21F-22.005, Amended 11-28-13.

61G5-22.006 Facials (Including Skin Care and Hair Removal).
Objective: To gain information and knowledge to give a facial massage treatment using oils, creams, lotions, or other preparations to properly protect the client from significant damage and to describe chemicals, implements and techniques used in hair removal.
Learning Objectives:
To explain the structure and function of skin;
To describe diseases of the glands;
To recognize lesions;
To describe basic facial massage movements;
To recognize and define the various types of corrective facials;
To describe products used and the purpose of each;
To understand the purpose and effects of muscle toning;
To describe the benefits and nature of light therapy;
To analyze and correct improper brow shapings;
To describe the proper steps in removing hair through tweezing or waxing; and
To understand the safety precautions to follow in the use of electrical apparatus in hair removal;
To apply make-up.
Performance Objectives:
To use the materials and equipment required in giving facials;
To perfect procedures and manipulations;
To use the proper steps and safety precautions in giving facial treatments for varied types of skin;
To analyze and correct improper brow shapings; and
To remove superfluous hair on the head, face or neck through epilation and/or depilation, excluding electrolysis.
Services required: ten (10).
Definition of Services: Services shall be a facial, a client consultation/skin analysis; exfoliation, either manual, mechanical or chemical; cleansing; toning; manipulations; and packs, masks, or other treatments as needed.
At a minimum, the curriculum of schools and programs specified in Section 477.0201, F.S., shall include the following hours of instruction in the indicated theory items:

<table>
<thead>
<tr>
<th>TOPIC</th>
<th>HOURS</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Florida Laws and Rules</td>
<td>5</td>
</tr>
<tr>
<td>(b) HIV and AIDS</td>
<td>4</td>
</tr>
<tr>
<td>(c) Sanitation</td>
<td>10</td>
</tr>
<tr>
<td>(d) Ethics</td>
<td>2</td>
</tr>
<tr>
<td>(e) Basics of Electricity</td>
<td>8</td>
</tr>
<tr>
<td>(f) Facial Techniques and Contraindications</td>
<td>66</td>
</tr>
<tr>
<td>(g) Product Chemistry</td>
<td>8</td>
</tr>
<tr>
<td>(h) Hair Removal</td>
<td>2.5</td>
</tr>
<tr>
<td>(i) Makeup</td>
<td>2</td>
</tr>
<tr>
<td>(j) Skin Theory, Disease and Disorders of the Skin</td>
<td>85</td>
</tr>
</tbody>
</table>

Rulemaking Authority 477.016 FS. Law Implemented 477.0201, 477.023(2) FS. History—New 11-2-80, Amended 10-29-85, Formerly 21F-22.06, Amended 4-8-86, Formerly 21F-22.006, Amended 7-13-09 (8), 1-2-10 (6) and (7), 3-26-12.

Read and review information about Hair Shaping; Scalp Treatments and Hair Care Rinses. Shampoos and Rinses.; Hair Arranging (Styling); Hair Coloring.; Chemical Waving and Relaxing/Straightening.; Manicuring/Pedicuring/Nail Extension.; and Optional Curricula.

61G5-22.007 Hair Shaping.

Objective: To use hair shaping implements and supplies in cutting the client's hair in a requested style(s) in specific times between 15 to 30 minutes.

Learning Objectives:
- To be able to describe hair shaping implements, their uses and cutting movements;
- To explain the differences between razor and scissor shaping; and
- To take growth patterns, facial features, various hair textures, finished style and other factors into account before cutting.

Performance Objectives:
- To give blended basic, low, medium, and high elevation wet razor and scissor shaping;
- To give a tailored neckline on dry hair;
- To perform tapered cutting;
- To perform slither (effilating) cutting;
- To blunt, cut wet hair (razor and scissors); and
- To section hair and analyze head form in preparation of a finished, professional style.

Services required: seventy-five (75).

Specific Authority 477.016 FS. Law Implemented 477.023(2) FS. History—New 11-2-80, Formerly 21F-22.07, 21F-22.007.

61G5-22.008 Scalp Treatments and Hair Care Rinses.

Objective: To provide a beneficial service of stimulation to contribute to a healthy scalp and to select a specific treatment that will improve the appearance of a client's hair following proper safety precautions in the application procedure.

Learning Objectives:
- To describe the benefits of scalp manipulations;
- To explain when scalp manipulations can and cannot be given;
- To describe the application of electricity in high frequency scalp treatments;
To become aware of the physical and chemical actions that damage hair;  
To describe the use of proteins in treating the hair;  
To clarify and describe different types of conditioners;  
To define temporary hair coloring; and  
To describe the advantages and disadvantages of temporary colors.

Performance Objectives:  
To give a scalp treatment using physical manipulations of stimulation;  
To provide high frequency scalp treatments using proper safety precautions to protect the client;  
To assess hair damage and choose the appropriate conditioners; and  
To select and apply temporary color rinses according to the client's desire and need.

Services required: forty-five (45).

Specific Authority 477.016 FS. Law Implemented 477.023(2) FS. History–New 11-2-80, Formerly 21F-22.08, 21F-22.008.

61G5-22.009 Shampoos and Rinses.
Objective: To use shampoo supplies and chemicals in cleansing the scalp and hair in preparation for additional salon services.

Learning Objectives:  
To describe the physical and chemical actions of shampooing;  
To describe the effects of various types of shampoos and rinses and their purposes;  
To describe the contents and characteristics of specific kinds of shampoos;  
To identify appropriate products for conditioning the client's hair and scalp; and  
To recognize scalp and hair disorders and diseases and suggest corrective measures.

Performance Objectives:  
To cleanse the scalp and hair using various methods;  
To perform scalp manipulations in shampooing;  
To analyze scalp and hair to determine proper shampoo;  
To identify types of rinses and the purposes of each; and  
To use proper rinsing techniques.

Services required: fifty (50).

Specific Authority 477.016 FS. Law Implemented 477.023(2) FS. History–New 11-2-80, Formerly 21F-22.09, 21F-22.009.

61G5-22.010 Hair Arranging (Styling).
Objective: To arrange a client's hair into a style of the client's choice through the development of dexterity, coordination and strength in creating designs and patterns in the hair.

Learning Objectives:  
To describe the parts of a fingerwave and identify waves, shapings, sculpture (pin) curls and base directed hair;  
To identify the setting and combing implements used to style hair;  
To identify hairstyling terms and define parts of sculpture (pin) curls, their shapes, variations and strengths;  
To describe the basic principles used to decide correct roller diameter in relationship to hair length and define inside and outside movement of hair;  
To explain the purpose of stem roller placement;  
To understand and identify the facial and head features in creating an illusion of an oval facial shape;  
To characterize the common profiles in relation to styling a client's hair;  
To understand other distinctive physical characteristics in determining the hair style;
To describe the various techniques used to silk (press) the hair with pressing combs and to produce thermal curls;
To describe the history of and kinds of thermal implements and supplies used today; and
To understand the variety of hairpieces and their uses.
Performance Objectives:
To part off styling sections of the head;
To set and comb alternating rows of horizontal and vertical finger waves;
To set and comb sculpture (pin) curls in varied movements in various sections of the head;
To set and comb roller curls in different patterns in various sections of the head;
To silk (press) the hair using a soft, medium and hard press;
To curl hair with thermal irons using varied techniques and implements; and
To clean, condition, shape, color and style various types of wigs and hairpieces.
Sets, styles, wigs, hairpieces, thermal-work shall be credited individually to services required.
Services required: three hundred (300).
Specific Authority 477.016 FS. Law Implemented 477.023(2) FS. History–New 11-2-80, Formerly 21F-22.10, 21F-22.010.

61G5-22.011 Hair Coloring.
Objective: To change the client's hair color through the use of semi-permanent, permanent, and lightening products following proper steps to safeguard the client in giving the desired service.
Learning Objectives:
To discriminate between primary, secondary, tertiary and competing colors;
To understand the nature of light in relation to color services;
To define the hair coloring terms and chemicals to be used;
To describe the chemical effects on the hair;
To identify the seven stages of hair lightening;
To identify the toning colors;
To describe the special techniques and procedures used in achieving the color or lightening service for the client following acceptable safety precautions;
To understand the mixing of chemicals, their advantages and disadvantages;
To evenly apply a semi-permanent color using proper safety precautions;
To follow label directions using proper safety precautions in applying a permanent hair color to the client's hair;
To use safety precautions and follow label directions in applying virgin bleach and a bleach retouch; and
To describe the steps in achieving special lightening effects.
Performance Objectives:
To select and apply semi-permanent colors;
To test hair for metallic salts;
To select and apply a virgin tint to lighten or darken hair;
To select and apply a tint retouch;
To select and apply a virgin bleach;
To select and apply a bleach retouch;
To streak, frame, frost, paint the hair using lightening techniques; and
To properly select and tint hair back to its original color, either lighter or darker.
Services required: forty-five (45).
Specific Authority 477.016 FS. Law Implemented 477.019(2)(c)2. FS. History–New 11-2-80, Formerly 21F-22.11, Amended 12-17-90, Formerly 21F-22.011.
61G5-22.012 Chemical Waving and Relaxing/Straightening.
Objective: To use professional chemicals and implements in waving and relaxing the hair to make it more manageable and durable for the client from one styling to another.
Learning Objectives:
To use safety precautions and follow manufacturer's directions in curling the hair with chemicals;
To describe the effects of chemical waving, the basic chemicals, the comparison of pH, the cost factors, the methods of giving thio, acid, and neutral waves;
To properly analyze hair prior to giving a chemical service;
To understand the physical and chemical effects on the hair;
To describe the difference between a base and no-base relaxer; and
To identify safety precautions and chemicals used in chemical relaxing and straightening services.
Performance Objectives:
To analyze the hair and select lotion/rods;
To section (block) and subsection the hair and wrap it on wave rods;
To process and neutralize chemical waves;
To subsection, wrap, process, and neutralize for both long and short hair styles;
To apply a base and no-base chemical relaxer to virgin hair;
To apply a base and no-base chemical relaxer for a retouch (retrace); and
To apply a semi-relaxer for a chemical blowout service.
Service required: sixty-five (65).
Specific Authority 477.016 FS. Law Implemented 477.023(2) FS. History–New 11-2-80, Formerly 21F-22.12, 21F-22.012.

61G5-22.0125 Manicuring/Pedicuring/Nail Extension.
Objective: To use professional manicuring implements, supplies, procedures, in shaping and polishing the nails.
Learning Objectives:
To describe nail structures;
To describe nail irregularities;
To identify nail diseases;
To identify the basic types or artificial and sculptured nails and nail extensions and their uses;
To use safety precautions and sanitation methods in manicuring, pedicuring, and extending the nails;
To describe chemicals and products.
Performance Objectives:
To give a manicure;
To give a pedicure;
To give a massage of the hands and feet;
To extend nails.
Services required: a minimum of twenty (20). The Board recommends that in meeting this requirement students perform a combination of these services; a service constitutes one complete set of nails per client for either manicure, pedicure, or nail extension.

61G5-22.014 Optional Curricula.
The optional curricula is provided for those students who have completed certification for examination. This curricula is not mandatory for the certification examination.
Beauty Salon Management
Objective: To describe the basic principles needed to plan and operate a salon as a successful business.
Learning Objectives:
To describe considerations for a salon site and building;
To examine all factors involved in purchasing an existing salon;
To study lease terms and negotiations;
To describe the legal forms of ownership;
To become aware of salon insurance needs;
To understand factors involved in purchasing beauty salon equipment and supplies;
To identify considerations involved in determining salon operating policies and techniques for interviewing prospective employees;
To understand basic accounting principles and the basic costs involved in planning and operating a beauty salon.

Specific Authority 477.016 FS. Law Implemented 477.023(2) FS. History–New 11-2-80, Amended 5-12-81, 10-29-85, Formerly 21F-22.14, 21F-22.014.


61G5-22.015 Specialty Certification.
(1)(a) A student at a school specified in Section 477.0201, F.S., shall successfully complete the hours of instruction and the performance of services specified in subsections 61G5-22.016(1) and (2), F.A.C., which instruction and services shall be designed to meet the learning objectives set forth in subsections 61G5-22.004(2), 61G5-22.005(2) and 61G5-22.0125(2), F.A.C.
(b) The school shall issue the student a certificate of completion in the specialty area of manicuring/pedicuring/nail extensions upon the student's completion of paragraph (1)(a) and achievement of a passing score of 75% or better on a comprehensive final examination administered and graded by the school.
Upon successful academic completion of 260 hours of instruction designed to meet the learning objectives set forth in subsections 61G5-22.004(2), 61G5-22.005(2) and 61G5-22.006(2), F.A.C., and completion of forty (40) services, a school shall issue a certificate of completion in the specialty area of facials.
A student who starts a specialty program before March 1, 1994, shall be qualified to receive a certificate of completion upon his or her successful completion of 120 hours of instruction designed to meet the learning objectives set forth in subsections 61G5-22.004(2), 61G5-22.005(2) and 61G5-22.0125(2), F.A.C., and completion of 50 services as required by subsection 61G5-22.0125(4), F.A.C.

At a minimum, the curriculum of schools and programs specified in Section 477.0201, F.S., shall include the following hours of instruction in the indicated topics:

<table>
<thead>
<tr>
<th>Topic</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Florida Cosmetology laws and rules</td>
<td>5</td>
</tr>
<tr>
<td>(b) HIV/AIDS</td>
<td>4</td>
</tr>
<tr>
<td>(c) Sanitation</td>
<td>4</td>
</tr>
<tr>
<td>(d) Ethics</td>
<td>2</td>
</tr>
<tr>
<td>(e) Nail Theory, Practice, and Related</td>
<td>85</td>
</tr>
</tbody>
</table>
Subjects including nail disorders and diseases
The curriculum shall also include the performance of the following specified services as indicated (the estimated total number of hours needed for performing the specified services is also indicated):

<table>
<thead>
<tr>
<th>Type of Service</th>
<th>No. of Svcs.</th>
<th>Hours Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Manicures</td>
<td>20</td>
<td>20</td>
</tr>
<tr>
<td>(b) Pedicures</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>(c) Tips with Overlay</td>
<td>15</td>
<td>37.5</td>
</tr>
<tr>
<td>(d) Sculpting Using A Form</td>
<td>15</td>
<td>37.5</td>
</tr>
<tr>
<td>(e) Nail Wraps and/or Mending</td>
<td>10</td>
<td>15</td>
</tr>
<tr>
<td>(f) Nail Fill-Ins</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>(g) Artificial Nail Removal</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>(h) Polishing and Nail Art</td>
<td>10</td>
<td>5</td>
</tr>
</tbody>
</table>

Specific Authority 477.016 FS. Law Implemented 477.0201 FS. History–New 1-24-94, Amended 9-12-94.

61G5-22.017 Minimum Curriculum for Facial Specialty Training.
At a minimum, the curriculum of schools and programs specified in Section 477.0201, F.S., shall include the following hours of instruction in the indicated theory items:

<table>
<thead>
<tr>
<th>Topic</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Florida Laws and Rules</td>
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<td>10</td>
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<tr>
<td>(d) Ethics</td>
<td>2</td>
</tr>
<tr>
<td>(e) Basics of Electricity</td>
<td>8</td>
</tr>
<tr>
<td>(f) Facial Techniques and Contraindications</td>
<td>66</td>
</tr>
<tr>
<td>(g) Product Chemistry</td>
<td>8</td>
</tr>
<tr>
<td>(h) Hair Removal</td>
<td>2.5</td>
</tr>
<tr>
<td>(i) Makeup</td>
<td>2</td>
</tr>
<tr>
<td>(j) Skin Theory, Disease and Disorders of the Skin</td>
<td>85</td>
</tr>
</tbody>
</table>

The curriculum shall also include the performance of the following specified services, as indicated, as well as the estimated total number of hours needed to complete the required number of services:

<table>
<thead>
<tr>
<th>Type of Service</th>
<th>Number of Services</th>
<th>Hours required</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Facials, manual and mechanical, including masks, packs or treatments which must be performed on a variety of skin types, including normal, oily, dry, combination, problem and mature</td>
<td>40</td>
<td>40</td>
</tr>
<tr>
<td>(b) Set up, use, and maintenance of electrical devices</td>
<td>5</td>
<td>1.25</td>
</tr>
<tr>
<td>(c) Hair removal, including tweezing, waxing, threading, and sugaring</td>
<td>20</td>
<td>5</td>
</tr>
<tr>
<td>(d) Makeup application for both daytime and nighttime looks</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>(e) Lash and brow tinting</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>(f) Eyelash application, including strip lashes, individual lashes, and semi-permanent lashes</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>(g) Manual extractions</td>
<td>5</td>
<td>1.25</td>
</tr>
</tbody>
</table>

Definition of Services: Services shall be a facial client, a client consultation/skin analysis; exfoliation, either manual, mechanical, or chemical; cleansing, toning; manipulations; and packs, masks, or other treatments as needed. Rulemaking Authority 477.016, 477.019(2) FS. Law Implemented 477.0201, 477.019(2) FS. History–New 3-26-12.
Read the following information about FEE SCHEDULE.

FEE SCHEDULE

61G5-24.002 Original Cosmetologist Licensure Fee, Cosmetologist Examination and Endorsement Fees, Initial Specialist Registration; Application and Endorsement Fees.
61G5-24.005 Salon License Fee.
61G5-24.006 Cosmetologist Reexamination Fee.
61G5-24.007 Duplicate License Fee.
61G5-24.008 Biennial Renewal Fee for Cosmetologists and Specialists.
61G5-24.009 Biennial Renewal Fee and Delinquent Fee for Salon License.
61G5-24.010 Delinquent License and Specialty Registration Fee.
61G5-24.011 Processing Fee; Change of Status.
61G5-24.016 Reactivation Fee for Cosmetologists and Specialists.
61G5-24.017 Inactive Status License and Specialty Registration Fees.
61G5-24.019 Hair Braiding, Hair Wrapping, and Body Wrapping Fees.
61G5-24.020 Special Assessment Fee.

The following fees are adopted by the Board:
The fee for original licensure as a cosmetologist shall be forty dollars ($40.00) and shall be paid by all applicants for licensure.
The examination fee for licensure as a cosmetologist by examination shall be fifty dollars ($50.00). When the examination is not conducted by a professional testing service pursuant to Section 455.2171, F.S., the entire examination fee shall be payable to the Department. When the examination is conducted by a professional testing service pursuant to Section 455.2171, F.S., eighteen dollars and fifty cents ($18.50) of the examination fee shall be payable to the Department; and, thirty one dollars and fifty cents ($31.50) shall be payable to the professional testing service.
The application fee for licensure as a cosmetologist by endorsement shall be fifty dollars ($50.00). The fee for initial registration as a specialist shall be forty dollars ($40.00), and shall be paid by all applicants for registration.
The application fee for registration as a specialist shall be thirty dollars ($30.00). The fee for registration as a specialist by endorsement shall be twenty-four dollars ($24.00).
Applicants for licensure as a cosmetologist by examination shall pay both the original licensure fee and that part of the examination fee which is payable to the Department at the time of their application. Any part of the examination fee which is payable to a professional testing service shall be paid to that service upon notification by the Department that the applicant’s application for licensure by examination has been approved. Applicants for licensure as a cosmetologist by endorsement shall pay both the original licensure fee and the application fee at the time of their application. Applicants for registration as a specialist shall pay both the initial registration fee and the application fee at the time of their application. Applicants for registration as a specialist by endorsement shall pay both the initial registration fee and the fee for registration as a specialist by endorsement at the time of their application. Rulemaking Authority 455.2171, 455.213, 477.016, 477.026 FS. Law Implemented 455.2171, 455.213, 477.026 FS. History–New 11-2-80, Amended 5-18-82, 10-1-85, Formerly 21F-24.02, Amended 9-6-87, Formerly 21F-24.002, Amended 4-13-99, 3-29-04, 5-8-07, 5-13-10, 3-17-15, 8-24-16.
61G5-24.005 Salon License Fee.
The salon license fee shall be forty dollars ($40.00). In addition, a non-refundable application fee of fifty dollars ($50.00) shall be submitted with the salon license application. Specific Authority 477.016, 477.026 FS. Law Implemented 477.026(1)(c) FS. History–New 11-2-80, Amended 5-3-82, 10-1-85, Formerly 21F-24.05, 21F-24.005, Amended 12-27-95, 5-8-07, 3-17-15.

61G5-24.006 Cosmetologist Reexamination Fee.
When the examination for licensure as a cosmetologist is not conducted by a professional testing service pursuant to Section 455.2171, F.S., the reexamination fee shall be fifty dollars ($50.00), and shall be payable to the Department. When the examination for licensure as a cosmetologist is conducted by a professional testing service pursuant to Section 455.2171, F.S., the reexamination fee shall be eighteen dollars and fifty cents ($18.50) which shall be payable to the Department; and, fifteen dollars and seventy five cents and fifty cents ($15.75) per part of the licensure examination to be retaken by the applicant, which shall be payable to the professional testing service. Rulemaking Authority 477.016, 477.026, 455.217(2) FS. Law Implemented 455.2171, 477.026(1)(b), 455.217(2) FS. History–New 11-2-80, Amended 6-20-83, 10-1-85, Formerly 21F-24.06, Amended 9-6-87, 1-10-90, Formerly 21F-24.006, Amended 4-13-99, 9-5-04, 8-22-16.

61G5-24.007 Duplicate License Fee.
The fee for a duplicate license of any kind shall be twenty-five dollars ($25.00). Specific Authority 455.219(1), 477.016 FS. Law Implemented 455.219(6) FS. History–New 11-2-80, Formerly 21F-24.07, Amended 12-17-90, Formerly 21F-24.007, Amended 1-4-98.

61G5-24.008 Biennial Renewal Fee for Cosmetologists and Specialists.
The fee for biennial renewal of a cosmetologist’s license shall be forty dollars ($40.00). The fee for biennial renewal of a specialist’s registration shall be forty dollars ($40.00). Specific Authority 477.016, 477.026 FS. Law Implemented 477.026(1)(a),(e) FS. History–New 11-2-80, Amended 6-3-82, 10-1-85, Formerly 21F-24.08, Amended 10-18-87, 1-10-90, Formerly 21F-24.008, Amended 8-26-96, 5-8-07, 5-13-10, 3-17-15.

61G5-24.009 Biennial Renewal Fee and Delinquent Fee for Salon License.
The fee for a biennial renewal of a salon license shall be forty dollars ($40.00). A salon license which is renewed within twenty-four months of the expiration of the license shall be renewed upon payment of a delinquent fee of twenty-five dollars ($25.00) (in addition to the biennial renewal fee). Specific Authority 477.016, 477.025, 477.026 FS. Law Implemented 477.025, 477.026(1)(d) FS. History–New 11-2-80, Amended 5-3-82, 10-1-85, Formerly 21F-24.09, 21F-24.009, Amended 10-1-97, 3-17-15, 11-6-17.

61G5-24.010 Delinquent License and Specialty Registration Fee.
A licensee who is delinquent in applying for renewal shall pay a delinquent fee of twenty-five dollars ($25.00). A registrant who is delinquent in applying for renewal shall pay a delinquent fee of twenty-five dollars ($25.00). Such fee shall be in addition to the renewal. Specific Authority 477.016 FS. Law Implemented 455.271(7), 477.026(1) FS. History–New 9-12-94, Amended 12-27-95, 8-26-96, 11-11-96, 5-8-07, 5-13-10, 11-13-17.
61G5-24.011 Processing Fee; Change of Status.
A licensee or registrant who is applying for a change in licensure or registration at any time other than during the licensure or registration renewal period, shall pay a processing fee of five dollars ($5.00). Specific Authority 477.016 FS. Law Implemented 455.271(8) FS. History–New 9-12-94.

61G5-24.016 Reactivation Fee for Cosmetologists and Specialists.
The fee for reactivation of an inactive license or specialty registration shall be fifty dollars ($50.00). Such fee shall be in addition to the biennial renewal fee prescribed in Rule 61G5-24.008, F.A.C. Specific Authority 477.0212(2) FS. Law Implemented 477.0212(2) FS. History–New 3-29-84, Formerly 21F-24.16, Amended 10-18-87, 1-10-90, Formerly 21F-24.016.

61G5-24.017 Inactive Status License and Specialty Registration Fees.
The fee for renewal of an inactive license shall be forty dollars ($40.00).
The fee for renewal of an inactive registration shall be forty dollars ($40.00). Specific Authority 477.016, 477.0212(2) FS. Law Implemented 477.0212(2), 477.026, 455.271(3) FS. History–New 3-29-84, Formerly 21F-24.17, Amended 10-18-87, Formerly 21F-24.017, Amended 9-12-94, 8-27-98, 5-8-07, 2-4-16.

61G5-24.019 Hair Braiding and Hair Wrapping Fees.
The initial fee for registration as a hair braider, hair wrapper, or body wrapper shall be twenty dollars ($20.00).
The fee for biennial renewal of a hair braiding, hair wrapping, or body wrapping registration in an active or inactive status shall be twenty dollars ($20.00). The delinquency fee to be paid by a delinquent status hair braider registrant, hair wrapper registrant, or body wrapper registrant when applying for either active or inactive status shall be twenty dollars ($20.00). The delinquency fee shall be paid in addition to the normal renewal fee for the status for which the registrant has applied.
The fee for the reactivation of an inactive hair braider, hair wrapper, or body wrapper registration to active status shall be fifty dollars ($50.00). The reactivation fee shall be paid in addition to any difference between the normal inactive renewal fee and the active renewal fee.
The fee for a change in the status of a hair braider, hair wrapper, or body wrapper registration if requested at a time other than the normal renewal period shall be five dollars ($5.00). Specific Authority 455.2281, 455.271(3),(4),(7),(8), 477.016, 477.026(1)(f) FS., Ch. 99-251, Laws of Florida. Law Implemented 455.2281, 455.271(3),(4),(7),(8), 477.026(1)(f) FS., Ch. 99-251, Laws of Florida. History–New 2-1-95, Amended 11-9-98, 12-20-99, 3-17-15.

Read the following information about LICENSURE STATUS AND NOTICE OF ADDRESS CHANGE.

LICENSURE STATUS AND NOTICE OF ADDRESS CHANGE

61G5-25.001 Active Status.
61G5-25.002 Inactive Status; Reactivation.
61G5-25.005 Notice to the Department of Mailing Address and Place of Practice of Licensee.
61G5-25.001 Active Status.
The department shall renew an active cosmetology license or specialty registration upon timely receipt of the completed application for status, the biennial renewal fee, and certification that the licensee or
registrant has demonstrated participation in the continuing education required by Rule 61G5-32.001, F.A.C.
The term “completed application” for purposes of active status or inactive status shall mean either a completed renewal notice or a written request from the licensee or registrant accompanied by a statement affirming compliance with the applicable requirements for renewal. Specific Authority 477.016 FS. Law Implemented 455.271, 477.0212 FS. History–New 2-1-95, Amended 7-2-00.

61G5-25.002 Inactive Status; Reactivation.
Any licensee or registrant may elect at the time of license renewal to place the license or registration into inactive status by filing with the Board a completed application for inactive status as defined by Rule 61G5-25.001(2), F.A.C., and by paying the inactive status fee.
An inactive status licensee or registrant may change to active status at any time provided the licensee or registrant meets the continuing education requirements of Rule 61G5-32.001, F.A.C., pays the reactivation fee, and if the request to change licensure status is made at any time other than at the beginning of a licensure cycle, pays the additional processing fee. However, a licensee or registrant whose license or registration has been in inactive status for more than two consecutive biennial licensure cycles shall be required to submit a statement affirming that the licensee or registrant has read within the last thirty (30) days and is familiar with the laws and rules for the practice of cosmetology in the State of Florida before the license or registration can be placed into active status.
Any inactive licensee or registrant who elects active status is not eligible to elect to return to inactive status until the next licensure renewal period.
A cosmetologist or specialist may not work with an inactive or delinquent license or registration. Specific Authority 477.016, 477.012 FS. Law Implemented 477.0212, 455.271 FS. History–New 2-1-95, Amended 4-5-95, 7-2-00.

61G5-25.005 Notice to the Department of Mailing Address and Place of Practice of Licensee.
It shall be the duty of each licensee or registrant to provide written notification to the Department of the licensee’s or registrant’s current mailing address and place of practice. For purposes of this rule, “place of practice” means the address of the physical location where the licensee or registrant practices cosmetology or a specialty.
Any time that the current mailing address or place of practice of any licensee or registrant changes, written notification of the change shall be provided to the Department within ninety (90) days of the change. Written notice shall be sent to the following address: Florida Board of Cosmetology, Department of Business and Professional Regulation, Northwood Centre, 1940 North Monroe Street, Tallahassee, Florida 32399-0790.
It shall be a violation of this rule for a licensee or registrant to fail to advise the Department within ninety (90) days of a change of mailing address. It shall not be a violation of this rule to fail to advise the Department of a change of one’s place of practice within ninety (90) days. Specific Authority 477.016, 455.275 FS. Law Implemented 455.275 FS. History–New 2-1-95.

Read the following information about SPECIALTY LICENSING.

SPECIALTY LICENSING

61G5-29.001 Definitions.
61G5-29.004 Supervised Specialty Practice Exception.
61G5-29.011 Endorsement of Specialty Registration.
61G5-29.013 Registration Renewal Procedures.
**61G5-29.001 Definitions.**

“Specialty Registration” means a registration to practice one or more of the following specialties: manicuring/pedicuring/nail extension, facials (skin care and hair removal).

“Certificate of Completion” means a certificate from one of the following:
A school licensed pursuant to Chapter 1005, F.S., or the equivalent licensing authority of another state.
A specialty program within the public school system.
A specialty division within the Cosmetology Division of the Florida School for the Deaf and the Blind, provided the training programs comply with minimum curriculum requirements established by the board.

“Facials” means:
The massaging or treating of the face, neck or scalp with or without the use of mechanical devices using oils, creams, lotions or other cosmetic products which are used to cleanse and condition the skin, to prevent or correct problems or conditions of the face, neck, and scalp and to color and beautify the face, neck and scalp or enhance their features; and,
Skin care services for the body as defined in Section 477.013(13), F.S.

  Facials shall be performed only by individuals licensed pursuant to Sections 477.019 and 477.0201, F.S., and performed in schools licensed pursuant to Chapter 1005, F.S., or salons licensed pursuant to Section 477.025, F.S.

“Cosmetic Demonstration” means the application or removal of cosmetic products for the purposes of demonstration of the cosmetic products as part of a sales or promotion program rendered without compensation for the service from the individual or individuals who are the recipients or audience of the demonstration.

“Cosmetic products” means any external preparation which is intended to cleanse, tone, color or beautify the face or neck, including but not limited to skin cleansers, astringents, skin fresheners, lipstick, eyeliner, eye shadow, foundation, rouge or cheek color, mascara, face powder or corrective stick.

“Simple Adhesive” as used in Section 477.013(6)(a), F.S., means a substance by which artificial nails (such as “press on nails”) can be attached to and then easily detached from a patron with slight pressure only, without the application of any nail primer or solvents of any kind, and without removing the natural oils from or roughing of such patron’s nails. Specific Authority 477.016 FS. Law Implemented 477.013, 477.0135, 477.0201 FS. History–New 11-7-85, Amended 1-5-86, 6-18-86, 10-26-87, 1-10-90, 8-20-90, 5-11-92, Formerly 21F-29.001, Amended 9-15-98, 4-2-00, 6-5-12.

**61G5-29.004 Supervised Specialty Practice Exception.**
Following the submission of a complete application for registration as a specialist which included proof of the successful completion of all educational requirements for the specialty applied for and the payment of all applicable application and registration fees, and pending the issuance by the Department of a registration as a specialist under Chapter 477, F.S., an applicant for registration as a specialist shall be eligible to perform specialty services in the specialty for which the applicant has applied for registration subject to the following conditions:

All specialty services to be performed by the applicant under this exception shall be performed under the supervision of a registered specialist. “Under the supervision of a registered specialist” shall mean that an individual who then holds a current, active Florida registration as a specialist in the same specialty for which the applicant has applied, or an individual who then holds a current, active Florida license as a cosmetologist shall be physically present at all times when the applicant is performing specialty services.
All specialty services performed by the applicant under this exception shall be performed in a licensed cosmetology or specialty salon. All times during which the applicant is performing specialty services in the salon, the license for the cosmetology or specialty salon shall be in a current and active status. Prior to beginning the performance of specialty services under this exception, all applicants shall provide to the cosmetology or specialty salon license holder or his or her representative a copy of the completed application for registration as a specialist submitted to the Department by the applicant. Upon being notified by the Department that his or her application is incomplete, or that he or she has been determined to be not qualified for registration as a specialist, an applicant shall immediately inform the cosmetology or specialty salon license holder or his or her representative of the notification; and shall immediately cease performing specialty services under this exception until the applicant shall have corrected any deficiencies in their earlier application as noted by the Department, or shall have submitted a new application which demonstrates that the applicant is qualified for registration as a specialist, and shall have paid all applicable application and registration fees. Specific Authority 477.016, 477.0201(6) FS. Law Implemented 477.0201(6) FS. History–New 11-25-98.

61G5-29.011 Endorsement of Specialty Registration.
The Department of Business and Professional Regulation shall issue a registration to a person who:
Makes application and pays to the Department the fee specified in Rule 61G5-24.002, F.A.C.;
Is currently registered or licensed to practice and is currently practicing one of the specialties as defined in Section 477.013(6) and (7), F.S., under the law of another state;
Demonstrates that the other state’s qualifications and requirements are comparable to or more stringent than those required by Florida Law (Chapter 477, F.S.) and Rule 61G5-22.015, F.A.C. Specific Authority 477.016 FS. Law Implemented 477.0201 FS. History–New 11-7-85, Amended 10-26-87, Formerly 21F-29.011.

61G5-29.013 Registration Renewal Procedures.
All specialty registrations shall be valid for a period of two years or until the end of the biennial licensure renewal cycle in which they are first issued, whichever occurs first. The biennial licensure renewal cycle for all specialty registrations shall coincide with the biennial licensure renewal cycle used for the renewal of cosmetology licenses. At the time of registration renewal, all specialty registrants shall pay all applicable renewal fees and charges as provided in Chapter 61G5-24, F.A.C. Prior to the expiration of their specialty registration, all specialty registrants shall complete all continuing education requirements as set forth in Rule 61G5-32.001, F.A.C., including a Board approved HIV/AIDS training course as provided in Section 455.2228, F.S. All HIV/AIDS training courses shall comply with the requirements as set forth in Rule 61G5-18.011, F.A.C. Spouses of members of the Armed Forces of the United States are exempted from all registration renewal provisions, but only in cases of absence from the state because of their spouses’ duties with the Armed Forces. Specific Authority 455.02(2), 455.2228(5), 477.016, 477.0201(4), 477.019(7) FS. Law Implemented 455.02, 455.2228, 477.0201(4), 477.019(7) FS. History–New 11-25-98.

Read the following information about DISCIPLINARY GUIDELINES

DISCIPLINARY GUIDELINES
61G5-30.001 Disciplinary Guidelines.
61G5-30.004 Citations.
61G5-30.001 Disciplinary Guidelines.

(1) The Board shall act in accordance with the following guidelines when it finds the enumerated violations in disciplinary cases. The Board shall impose a penalty within the range of each applicable disciplinary violation set forth below unless the Board finds an aggravating or mitigating circumstance, in which case the Board may deviate from the guideline penalty.

<table>
<thead>
<tr>
<th>VIOLATION</th>
<th>PENALTY RANGE</th>
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<tbody>
<tr>
<td>(a) Unlicensed cosmetology or specialty practice. (Section 477.0265(1)(a) or 477.029(1)(a), F.S.)</td>
<td>For an individual who was never licensed, a fine of $500. For a licensee or registrant who fails to properly renew, a fine of $50 for every month or partial month during which the individual was unlicensed or unregistered, up to a maximum of $500.</td>
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<td>(b) Unlicensed Salon and Delinquent Salon License. (Section 477.0265(1)(b)1. or 477.029(1)(b), F.S.)</td>
<td>For a salon which has never been licensed, or for which the salon license has expired, a fine of $500. For a salon license which has become delinquent, a fine of $50 for every month or partial month of delinquency during which the salon has operated, up to a total of $500.</td>
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<td>(c) Permitting a person without a license or registration, unless exempt, to perform cosmetology services or any specialty in a salon. (Section 477.0265(1)(b)2., F.S.)</td>
<td>For a violation involving a person who was never licensed or registered in Florida, a fine of $250 to $500. For a violation involving a person who failed to properly renew or whose exemption has terminated, a fine of $50 for every month or partial month during which the violation took place, up to $500.</td>
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<td>(d) Permitting an employee to practice cosmetology or a specialty without being duly licensed, registered, or otherwise authorized. (Section 477.0265(1)(d) or 477.029(1)(c), F.S.)</td>
<td>For employing a person who was never licensed or registered in Florida, or who is not exempt, a fine of $250 to $500. For employing a person who failed to properly renew or whose exemption has terminated, a fine of $50 for every month or partial month during which the person was employed, up to $500.</td>
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<tr>
<td>(e) Obtain or attempt to obtain a license or registration for money, other than the required fee, or any other thing of value or by fraudulent misrepresentations. (Section 477.0265(1)(d), F.S.)</td>
<td>A fine of $500 and denial or revocation of the license or registration.</td>
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<td>(f) Using or attempting to use a suspended or revoked cosmetology license or specialty registration to practice cosmetology or a specialty. (Section 477.0265(1)(c) or 477.029(1)(g), F.S.)</td>
<td>A fine of $500 and suspension for one year of any license or registration issued pursuant to Chapter 477, F.S., or denial or revocation of license or registration.</td>
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<td>(g) Advertising or implying that skin care services or body wrapping are related to massage therapy, except as allowed by statute. (Section 477.0265(1)(f), F.S.)</td>
<td>A fine of $100 to $200 for the first offense; a fine of $500 for subsequent offenses.</td>
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<td>(h) Use or possess a product containing a liquid nail monomer containing any trace of methyl methacrylate (MMA). (Section 477.0265(1)(g), F.S.)</td>
<td>A fine of $500 for the first offense; a fine of $500 and suspension with a reinspection of the premises prior to reinstatement of the license, or revocation for a subsequent offense.</td>
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<tr>
<td>(i) License or registration obtained by fraud or false or forged evidence. (Section 477.028(1)(a), 477.028(2)(a) or 477.029(e), F.S.)</td>
<td>A fine of $500 and revocation of the salon license, cosmetology license, or specialty registration.</td>
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<tr>
<td>Guilty of fraud, deceit, gross negligence, incompetency, or misconduct in practice or instruction of cosmetology or specialty, or in operation of the salon. (Section 477.028(1)(b) or 477.028(2)(b), F.S.)</td>
<td>A fine of $200 to $500 and suspension or revocation of the salon license, cosmetology license, or specialty registration.</td>
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<td>License or registration holder is guilty of aiding, assisting, procuring, or advising any unlicensed person to practice as a cosmetologist. (Section 477.028(1)(c), F.S.)</td>
<td>A fine of $250 for the first offense. A fine of $500 and revocation or suspension of salon license, cosmetology license, or specialty registration for a subsequent offense.</td>
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<td>Present license of another as his or her own license. (Section 477.029(1)(d), F.S.)</td>
<td>A fine of $500 and a reprimand for the first offense. A fine of $500 and refusal to certify for licensure for a subsequent offense.</td>
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<td>Impersonate any other licenseholder of like or different name. (Section 477.029(1)(f), F.S.)</td>
<td>A fine of $500 and a 6 month suspension of any other license or registration held pursuant to Chapter 477, F.S.</td>
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<td>Violate or refuse to comply with:</td>
<td></td>
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<tr>
<td>1. Any provision of Chapter 455, F.S., or final order of the Board or the Department;</td>
<td>A fine of $500 and suspension, revocation, or refusal to certify to the department for licensure.</td>
</tr>
<tr>
<td>2. Any provision of Chapter 477, F.S., or a rule of the Board or the Department except as otherwise provided;</td>
<td>A fine of $100 to $200 for the first violation. A fine of $300 to $500 for a subsequent violation. A fine of $500 and suspension or revocation of license or registration for a refusal to comply.</td>
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<td>3. Salon requirements subsections 61G5-20.002(3)-(7), F.A.C., relating to sanitation and safety; or</td>
<td>A fine of $50 per violation for less than three violations. A fine of $250 for three to four violations. A fine of $500 for five or more violations, and suspension of the license with a reinspection prior to reinstatement of the license. A fine of $250 for a salon operating without proper disinfection practices.</td>
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<tr>
<td>4. Display of documents Rule 61G5-20.004, F.A.C., relating to display of licenses and inspection sheets. (Section 477.029(1)(h)-(i), F.S.)</td>
<td>A fine of $100 for each violation for the first offense. A fine of $200 to $300 for each subsequent offense.</td>
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Based upon consideration of the following factors, the Board may impose disciplinary action other than the penalties recommended above:

The danger to the public;
The length of time since date of violation;
The number of complaints filed against the licensee;
The length of time licensee or registrant has practiced;
The actual damage, physical or otherwise, caused by the violation;
The deterrent effect of the penalty imposed;
The effect of the penalty upon the licensee’s or registrant’s livelihood;
Any efforts for rehabilitation;
The actual knowledge of the licensee or registrant pertaining to the violation;
Attempts by licensee or registrant to correct or stop violations or refusal by licensee or registrant to correct or stop violations;
Related violations against a licensee or registrant in another state including findings of guilt or innocence, penalties imposed and penalties served;
Actual negligence of the licensee or registrant pertaining to any violations;
Penalties imposed for related offenses under subsection (1) above;
Any other mitigating or aggravating circumstances.
Penalties imposed by the Board pursuant to Rule 61G5-30.001, F.A.C., may be imposed in combination or individually but may not exceed the limitations enumerated below:
Issuance of a reprimand or censure.
Imposition of an administrative fine not to exceed $500 for each count or separate offense.
Placement on probation for a period of time and subject to such reasonable conditions as the Board may specify.
Revocation or suspension of any license or registration issued pursuant to Chapter 477, F.S.
Refusal to certify to the Department an applicant for licensure or registration.
The provisions of subsections (1) through (5) above shall not be construed so as to prohibit civil action or criminal prosecution as provided for in Section 477.0265(2) or Section 477.031, F.S., and the provisions of subsections (1) through above shall not be construed so as to limit the ability of the Board to enter into binding stipulations with accused parties as per Section 120.57(3), F.S.
In every case the Board imposes a monetary fine, it shall also suspend the Respondent’s license(s). However, to enable the Respondent to pay the fine, the suspension shall be stayed for the period specified in the Board’s final order in accordance with Rule 61G5-17.016, F.A.C. If the fine is paid within that time period, the suspension shall not take effect; if the fine is not paid within that time period, then the stay shall expire and the suspension shall take effect. Thereafter, upon payment of the fine, the suspension shall be lifted. Rulemaking Authority 455.2273, 477.016 FS. Law Implemented 455.2273, 477.029(2) FS. History—New 10-20-86, Amended 10-18-87, 1-10-90, 1-30-92, 4-15-93, Formerly 21F-30.001, Amended 4-23-02, 5-29-06, 7-18-13.

61G5-30.004 Citations.
Definitions. As used in this rule;
“Citation” means an instrument which meets the requirements set forth in Section 455.224, F.S., and which is served upon a subject for the purpose of assessing a penalty in an amount established by this rule;
“Subject” means the licensee, applicant, person, partnership, corporation, or other entity alleged to have committed a violation designated in this rule.
In lieu of the disciplinary procedures contained in Section 455.225, F.S., the Department is hereby authorized to dispose of any violation designated herein by issuing a citation to the subject within six months after the filing of the complaint which is the basis for the citation.
Citations shall be issued for the first offense violations only.
The Board hereby designates the following as citation violations, which shall result in a penalty of fifty dollars ($50.00):
Except as otherwise provided herein, any violation of the safety, sanitary, or other salon requirements specified in Rule 61G5-20.002, F.A.C. – however, if it is an initial offense and there are no other violations, then the subject shall be given a Notice of Noncompliance;
Practicing cosmetology or a specialty with an inactive or expired license for one month or part of a month;
Operating a salon with a delinquent license for one month or part of a month;
Employing a person to practice cosmetology or a specialty with an inactive or expired license for one month or part of a month;
Unless otherwise permitted in Chapter 477, F.S., performing cosmetology services in a salon which does not have a license in violation of Section 477.0263(1), F.S.
The Board hereby designates the following as citation violations, which shall result in a penalty of one hundred dollars ($100.00):
Transferring ownership or changing location of a salon without the approval of the Department pursuant to Rule 61G5-20.006, F.A.C., provided the transfer of ownership or change of location has not exceeded 90 days and the salon owner can provide proof that a completed application has been filed with the Department;
Practicing cosmetology or a specialty with an inactive or expired license for more than one month but not more than two months;
Operating a salon with a delinquent license for more than one month but not more than two months;
Employing a person to practice cosmetology or a specialty with an inactive or expired license for more than one month but not more than two months;
Two violations of the safety, sanitary, or other salon requirements specified in Rule 61G5-20.002, F.A.C.
The Board hereby designates the following as citation violations, which shall result in a penalty of one hundred and fifty dollars ($150.00):
Practicing cosmetology or a specialty with an inactive or expired license for more than two months but not more than three months;
Operating a salon with a delinquent license for more than two months but not more than three months;
Employing a person to practice cosmetology or a specialty with an inactive or expired license for more than two months but not more than three months.
The Board hereby designates the following as citation violations, which shall result in a penalty of two hundred dollars ($200.00):
Practicing cosmetology or a specialty with an inactive or expired license for more than three months but not more than four months;
Operating a salon with a delinquent license for more than three months but not more than four months;
Employing a person to practice cosmetology or a specialty with an inactive or expired license for more than three months but not more than four months.
The Board hereby designates the following as citation violations, which shall result in a penalty of two hundred and fifty dollars ($250.00):
Operating a salon without disinfecting solutions as required by paragraph 61G5-20.002(3)(d), F.A.C.;
Three violations of the safety, sanitary, or other salon requirements specified in Rule 61G5-20.002, F.A.C.;
Practicing cosmetology or a specialty with an inactive or expired license for more than four months but not more than five months;
Operating a salon with a delinquent license for more than four months but not more than five months; and
Employing a person to practice cosmetology or a specialty with an inactive or expired license for more than four months but not more than five months.
The Board hereby designates the following as citation violations, which shall result in a penalty of three hundred dollars ($300.00):
Practicing cosmetology or a specialty with an inactive or expired license for more than five months but not more than six months;
Operating a salon with a delinquent license for more than five months but not more than six months;
Employing a person to practice cosmetology or a specialty with an inactive or expired license for more than five months but not more than six months; and
Four violations of the safety, sanitary, or other salon requirements specified in Rule 61G5-20.002, F.A.C.
The Board hereby designates the following as citation violations, which shall result in a penalty of three hundred and fifty dollars ($350.00):
Practicing cosmetology or a specialty with an inactive or expired license for more than six months but not more than seven months;
Operating a salon with a delinquent license for more than six months but not more than seven months; and
Employing a person to practice cosmetology or a specialty with an inactive or expired license for more than six months but not more than seven months.
The Board hereby designates the following as citation violations, which shall result in a penalty of four hundred dollars ($400.00):
Practicing cosmetology or a specialty with an inactive or expired license for more than seven months but not more than eight months;
Operating a salon with a delinquent license for more than seven months but not more than eight months; and
Employing a person to practice cosmetology or a specialty with an inactive or expired license for more than seven months but not more than eight months.

The Board hereby designates the following as citation violations, which shall result in a penalty of four hundred and fifty dollars ($450.00):
Practicing cosmetology or a specialty with an inactive or expired license for more than eight months but not more than nine months;
Operating a salon with a delinquent license for more than eight months but not more than nine months; and
Employing a person to practice cosmetology or a specialty with an inactive or expired license for more than eight months but not more than nine months.

The Board hereby designates the following as citation violations, which shall result in a penalty of five hundred dollars ($500.00):
Practicing cosmetology or a specialty without a license;
Operating a salon without a license;
Employing a person to practice cosmetology or a specialty without a license;
Practicing cosmetology or a specialty with an inactive or expired license for more than nine months but not more than twelve months;
Operating a salon with a delinquent license for more than nine months but not more than twelve months; and
Employing a person to practice cosmetology or a specialty with an inactive or expired license for more than nine months but not more than twelve months. Rulemaking Authority 455.224, 477.016 FS. Law Implemented 455.224 FS. History–New 11-17-91, Amended 4-15-93, Formerly 21F-30.004, Amended 8-8-95, 2-28-96, 10-1-97, 5-10-01, 3-29-04, 10-20-13.

61G5-30.005 Mediation.
“Mediation” means a process whereby a mediator appointed by the department acts to encourage and facilitate resolution of a legally sufficient complaint. It is an informal and nonadversarial process with the objective of assisting the parties to reach a mutually acceptable agreement.
The Board finds that mediation is an acceptable method of dispute resolution for the following violations as they are economic in nature or can be remedied by the licensee:
Failure of the licensee to timely pay any assessed administrative fines or costs;
Failure of the licensee to timely respond to a continuing education audit;
Failure to submit change of address for a salon; and
Failure to timely notify the department of the licensee’s or registrant’s change of mailing address or place of practice.
A “mediator” means a person who is certified in mediation by the Florida Bar, the Florida Supreme Court, or the Division of Administrative Hearings. Specific Authority 455.2235(5), 477.016 FS. Law Implemented 455.2235 FS. History–New 12-27-94.

61G5-30.006 Notice of Non Compliance.
In accordance with Section 455.225(3), F.S., when a complaint is received, the agency may provide a licensee with a notice of non compliance for an initial offense of a minor violation. Failure of a licensee to take action in correcting the violation within 15 days after notice may result in the institution of
regular disciplinary proceedings. “Minor violations” as used in Section 455.225(3), F.S., are defined as follows:
Violations of Rule 61G5-20.004, F.A.C.
Violations of subsection 61G5-18.011(1), F.A.C., in failing to maintain a copy of his or her certificate of course completion
in instruction on Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome.
Violations of paragraph 61G5-20.008(2)(a), F.A.C., in failing to retain copies of an employee’s high school diploma or
G.E.D. equivalency certificate and cosmetology school diploma or certificate of completion.
An initial offense and no other violations of Rule 61G5-20.002, F.A.C.
In accordance with Section 120.695, F.S., the agency shall issue a notice of non compliance as first enforcement action against a licensee for a minor violation of a rule. Pursuant to Section 120.695(2)(b), F.S., the Board designates the following rules for which a violation would be a minor violation of a rule for which a notice of non compliance is issued:
Violations of Rule 61G5-20.004, F.A.C.
Violations of subsection 61G5-18.011(1), F.A.C., in failing to maintain a copy of his or her certificate of course completion in instruction on Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome.
Violations of paragraph 61G5-20.008(2)(a), F.A.C., in failing to retain copies of an employees high school diploma or GED equivalency certificate and cosmetology school diploma or certificate of completion.
An initial offense and no other violations of Rule 61G5-20.002, F.A.C. Rulemaking Authority 120.695, 455.225(3), 477.016 FS. Law Implemented 120.695, 455.225(3) FS. History–New 1-1-96, Amended 10-1-97, 8-4-13.

Read the following information about HAIR BRAIDING, HAIR WRAPPING AND BODY WRAPPING.

HAIR BRAIDING, HAIR WRAPPING AND BODY WRAPPING

61G5-31.0011 Definitions.
61G5-31.004 Hair Braiding, Hair Wrapping, and Body Wrapping Course Requirements.
61G5-31.005 Hair Braiding and Hair Wrapping Term of Registration, Registration Renewal.
61G5-31.006 Practice of Hair Braiding and Hair Wrapping Pending Approval of Registration.

61G5-31.0011 Definitions.
Manufactured materials for use in hair wrapping means multi-strand cotton or polyester blend, twisted, not braided, into a single embroidery or yarn thread. Rulemaking Authority 477.016 FS. Law Implemented 477.013(10) FS. History–New 5-13-10.

61G5-31.004 Hair Braiding, Hair Wrapping and Body Wrapping Course Requirements, Source Reference Dates, Ability to Offer on the Internet or by Home Study.
All hair braiding courses taught for purposes of qualifying an individual for initial registration as a hair braider shall be a two-day, 16-hour course; and, shall be approved by the Board prior to the course being taught for registration qualification purposes. To be considered for approval by the Board, the course shall consist of the following:
5 hours of instruction regarding HIV/AIDS and other communicable diseases. At the conclusion of this instruction a student shall be able to understand:
The causes of HIV/AIDS, hepatitis, tuberculosis, and other communicable diseases and how these diseases are spread;
The dangers associated with these diseases; and
How to avoid contamination from the diseases in the practice of hair braiding.

5 hours of instruction regarding sanitation and sterilization. At the conclusion of this instruction a student shall be able to understand:
Universal sanitation and sterilization precautions;
How to distinguish between disinfectants and antiseptics; and
How to sanitize hands and disinfect tools used in the practice of hair braiding.

4 hours of instruction regarding disorders and diseases of the scalp. At the conclusion of this instruction a student shall be able to understand:
Disorders and diseases of the scalp and how to distinguish between them; and
When hair braiding services can be performed on a client with disorders or diseases of the scalp.

2 hours of instruction regarding the laws and rules of the Board which affect and govern the practice of hair braiding. At the conclusion of this instruction a student shall be able to understand:
The laws and rules of the Board that protect the health, safety, and welfare of the consumer;
The laws and rules of the Board that determine where and when an individual may legally practice hair braiding;
The function of the Board of Cosmetology, how its members are appointed, and their duties;
The laws and rules of the Board which specify prohibited conduct, and the penalties for failure to follow the laws and rules; and
The dates, fees, and requirements for renewal of a hair braiding registration.

All hair wrapping courses taught for purposes of qualifying an individual for initial registration as a hair wrapper shall be a one-day, 6-hour course; and, shall be approved by the Board prior to the course being taught for registration qualification purposes. To be considered for approval by the Board, the course shall consist of the following:
Two (2) hours of instruction regarding HIV/AIDS and other communicable diseases. At the conclusion of this instruction, a student shall be able to understand:
The causes of HIV/AIDS, hepatitis, tuberculosis, and other communicable diseases and how these diseases are spread;
The dangers associated with these diseases; and
How to avoid contamination from the diseases in the practice of hair wrapping.

Two (2) hours of instruction regarding sanitation and sterilization. At the conclusion of this instruction, a student shall be able to understand:
Universal sanitation and sterilization precautions;
How to distinguish between disinfectants and antiseptics; and
How to sanitize hands and disinfect tools used in the practice of hair wrapping.

One (1) hour of instruction regarding disorders and diseases of the scalp. At the conclusion of this instruction, a student shall be able to understand:
disorders and diseases of the scalp and how to distinguish between them; and
when hair wrapping services can be performed on a patron with disorders or diseases of the scalp.
One (1) hour of instruction regarding the laws and rules of the Board which affect and govern the practice of hair wrapping. At the conclusion of this instruction, a student shall be able to understand:
The laws and rules of the Board that protect the health, safety, and welfare of the consumer;
The laws and rules of the Board that determine where and when an individual may legally practice hair wrapping;
The function of the Board of Cosmetology, how its members are appointed, and their duties;
The laws and rules of the Board which specify prohibited conduct, and the penalties for failure to follow the laws and rules;
The dates, fees, and requirements for renewal of a hair wrapping registration.

All body wrapping courses taught for purposes of qualifying an individual for initial registration as a body wrapper shall be a two-day, 12-hour course; and, shall be approved by the Board prior to the course being taught for registration qualification purposes. To be considered for approval by the Board, the course shall consist of the following:

Three (3) hours of instruction regarding HIV/AIDS and other communicable diseases. At the conclusion of this instruction, a student shall be able to understand:

The causes of HIV/AIDS, hepatitis, tuberculosis, and other communicable diseases and how these diseases are spread;

The dangers associated with these diseases; and,

How to avoid contamination from the diseases in the practice of body wrapping.

Four (4) hours of instruction regarding sanitation and sterilization. At the conclusion of this instruction, a student shall be able to understand:

Universal sanitation and sterilization precautions;

How to distinguish between disinfectants and antiseptics; and,

How to sanitize hands and disinfect tools used in the practice of body wrapping.

Four (4) hour of instruction regarding disorders and diseases of the skin. At the conclusion of this instruction, a student shall be able to understand:

Disorders and diseases of the skin and how to distinguish between them; and,

When skin wrapping services can be performed on a patron with disorders or diseases of the skin.

One (1) hour of instruction regarding laws and rules of the Board which affecting and govern the practice of body wrapping. At the conclusion of this instruction, a student shall be able to understand:

The laws and rules of the Board that protect the health, safety, and welfare of the consumer;

The laws and rules of the Board that determine where and when an individual may legally practice body wrapping;

The function of the Board of Cosmetology, how its members are appointed, and their duties;

The laws and rules of the Board which specify prohibited conduct, and the penalties for failure to follow the laws and rules;

The dates, fees, and requirements for renewal of a body wrapping registration.

All proposed hair braiding, hair wrapping, or body wrapping courses, including source materials and the publication date(s) of the materials, must be submitted for presentation to the Board no later than 30 days prior to the next regularly scheduled meeting of the Board at which the proposed course is to be considered for approval. No hair braiding, hair wrapping, or body wrapping course may be taught for credit towards the initial hair braiding, hair wrapping, or body wrapping registration requirements until it has been reviewed and approved by the Board.

At least one (1) complete copy of the course in its final form, as it will be provided to the licensee if approved, shall be submitted with the course application for presentation to the board for all proposed hair braiding, hair wrapping, or body wrapping courses.

All providers of hair braiding, hair wrapping, and body wrapping courses shall provide to all individuals who successfully complete the course a certificate of completion which shall indicate the title of the course completed, the provider’s name, the student name, the date of the course, and the total number of hours successfully completed.

Completion of hair braiding, hair wrapping, and body wrapping courses may be offered by providers and completed by students for course credit by way of online learning.

61G5-31.005 Hair Braiding, Hair Wrapping, and Body Wrapping Term of Registration, Registration Renewal.
All hair braiding, hair wrapping, and body wrapping registrations shall be valid for a period of two years or until the end of the biennial licensure renewal cycle in which they are first issued, whichever occurs first. The biennial licensure renewal cycle for all hair braiding, hair wrapping, and body wrapping registrations shall coincide with the biennial licensure renewal cycle used for the renewal of cosmetology licenses and specialty registrations.
At the time of registration renewal, all hair braiding, hair wrapping, and body wrapping registrants shall pay all applicable renewal fees and charges as provided in Chapter 61G5-24, F.A.C. Prior to the expiration of their hair braider, hair wrapper, or body wrapper registration, all hair braiding, hair wrapping, and body wrapping registrants shall complete a Board approved HIV/AIDS training course as provided in Section 455.2228, F.S. All HIV/AIDS training courses shall comply with the requirements as set forth in Rule 61G5-18.011, F.A.C. Specific Authority 455.203(1), 455.2228, 477.016 FS. Law Implemented 455.203(1), 455.2228, 477.029 FS. History–New 11-25-98, Amended 9-6-00.

61G5-31.006 Practice of Hair Braiding, Hair Wrapping, and Body Wrapping Pending Approval of Registration.
An applicant for registration as a hair braider shall be eligible to practice hair braiding, and an applicant for registration as a hair wrapper shall be eligible to practice hair wrapping, and an applicant for registration as a body wrapper shall be eligible to practice body wrapping, pending the approval of his or her application for registration provided the individual has previously submitted the following to the Department:
A properly completed registration application;
Payment of all applicable fees for initial registration as set forth in Chapter 61G5-24, F.A.C.; and
Proof of successful completion of a Board approved hair braiding, hair wrapping, or body wrapping course as defined in Rule 61G5-31.004, F.A.C.
Upon notification that his or her application is complete, an applicant for registration as a hair braider, hair wrapper or body wrapper is eligible to practice hair braiding, hair wrapping and body wrapping pending the approval of his or her application for registration.
Applicants wishing to perform hair braiding, hair wrapping, or body wrapping services under this exception in a licensed cosmetology or specialty salon shall, prior to beginning the performance of hair braiding, hair wrapping, or body wrapping services in the salon, provide to the cosmetology or specialty salon license holder or his or her representative a copy of the completed application for registration as a hair braider, hair wrapper, or body wrapper submitted to the Department by the applicant. Specific Authority 477.0132, 477.016 FS. Law Implemented 477.0132, 477.029 FS. History–New 11-25-98, Amended 9-6-00.

Read the following information about CONTINUING EDUCATION.

CONTINUING EDUCATION
61G5-32.001 Continuing Education.
Prior to the expiration of each biennial licensure period, and as a condition for renewal of their cosmetology license or specialty registration, all licensed cosmetologists and registered specialists shall complete a minimum of sixteen (16) hours of continuing education which shall include, at a minimum, all of the following subjects as they relate to the practice of cosmetology:
A minimum of two (2) hours of instruction regarding HIV/AIDS and other communicable diseases which shall consist of:
Education on the modes of transmission, infection control procedures, clinical management, and prevention of HIV and AIDS; and Discussion of attitudes towards HIV and AIDS as well as appropriate behavior in dealing with persons who may have the virus or syndrome.

A minimum of three (3) hours of instruction regarding sanitation and sterilization which shall consist of instruction regarding:

Standard cleaning and disinfecting precautions, including;
How to distinguish between disinfectants and antiseptics,
How to sanitize hands and disinfect tools used in the practice of cosmetology; and
Bacterial, viral, and fungal, bloodborne pathogens and parasites, and infection and infestation control.

A minimum of one (1) hour of instruction regarding Occupational Safety and Health Administration regulations.

A minimum of one (1) hour of instruction regarding issues of workers’ compensation as they pertain to Florida law.

A minimum of two (2) hours of instruction regarding state and federal laws and rules as they pertain to cosmetologists, cosmetology, salons, specialists, specialty salons, and booth renters; specifically including but not limited to Chapter 477, F.S., and the Rules of the Board. At a minimum this instruction shall include the following:

The laws and rules of the Board that protect the health, safety, and welfare of the consumer;
The laws and rules of the Board that determine where and when individuals may legally practice cosmetology and specialties;
The functions of the Board of Cosmetology, how its members are appointed, and their duties;
The laws and rules of the Board which specify prohibited conduct, and the penalties for failure to follow the laws and rules;
Salon requirements and inspections; and
The dates, fees, and requirements for renewal of cosmetology licenses, salon licenses, and specialty registrations.

A minimum of two (2) hours of instruction regarding chemical makeup as it pertains to hair, skin, and nails.

A minimum of one (1) hour of instruction regarding environmental issues.

A minimum of four (4) hours of continuing education to be composed of additional instruction in any of the subjects set forth above or such other subject or subjects as the licensee may choose provided that the subject or subjects chosen relate to the practice of cosmetology and serve to ensure the protection of the public; and, provided that the course in which such subjects are taught has been approved by the Board prior to its being taught for continuing education purposes, and provided the licensee or registrant has not previously taken the course during the current licensure period.

Home study courses, video courses, and courses which are given at cosmetology conferences may be counted toward the required hours of continuing education provided that, prior to their being taught, they have been approved by the Board as including instruction in subjects as set forth by this rule and as complying with all other requirements as set forth in this rule.

All continuing education home study courses shall include a written post-course examination which must be graded by the course provider. Post-course examinations may be open-book examinations. In order to receive continuing education credit for the course, licensees or registrants must achieve a 75% passing score on all post-course examinations.

All licensees and registrants who successfully complete a continuing education course shall be provided with a certificate of completion by the provider of the continuing education course which shall indicate the provider’s name and provider number, the course title and course number, the licensee’s or registrant’s name and license or registration number, the date the course was completed, and the total number of hours successfully completed in each subject covered by the continuing
education course. All licensees and registrants shall retain the certificate of completion for all continuing education courses successfully completed by the licensee or registrant for a period of not less than three (3) years following the first license or registration renewal following the completion of the course.

Licensees holding two or more licenses subject to the HIV/AIDS education course requirement shall present all license numbers to the provider of such course.

PROVIDER APPROVAL AND REQUIREMENTS.

All providers of continuing education courses must be approved by the Board prior to offering continuing education courses. All individuals or organizations seeking to be approved as a continuing education provider shall submit to the Department, or if the Department shall contract with a private entity to administer the continuing education program then to such private entity, no later than 60 days prior to the next scheduled Board meeting at which the application is to be considered for approval. A complete application for continuing education provider status shall consist of the following items and information:

A completed application on a form prescribed by the department copies of which may be obtained from the Board office.

A fee of $250; and

A sample copy of the certificate of completion which the provider shall supply to all licensees or registrants who successfully complete courses given by the provider. The certificate of completion shall indicate on its face areas for the inclusion of the information as required by paragraph (6)(d) of this rule.

Upon approval by the Board of the individual or organization as a continuing education provider, a continuing education provider number will be assigned to the provider; and, shall be included in all future correspondence or submissions by the provider to the Board, the Department, or any private entity contracted with by the Department to administer the continuing education program.

Once the Department shall contract with a private entity to administer the continuing education program, then for each continuing education course taught, all continuing education providers shall submit to such private entity, a list of all attendees successfully completing the continuing education course within 21 days of the completion of the course. The list shall include the provider’s name and provider number, the course title and course number, the licensee’s or registrant’s name and license or registration number, the date the course was completed, and the total number of hours successfully completed in each subject covered during the continuing education course. For home study courses offered by a continuing education provider, the provider shall supply the name and license or registration number for each individual successfully completing the course within 21 days following the determination by the provider that the individual has successfully completed the home study course together with the provider’s name and provider number, the home study course title and course number, and the date the course was completed. All lists and information shall be provided to the private entity in such form as determined by private entity.

Continuing education providers shall provide a certificate of completion to all licensees and registrants who successfully complete a continuing education course which shall indicate on the certificate’s face the provider’s name and provider number, the course title and course number, the licensee’s or registrant’s name and license or registration number, the date the course was completed, and the total number of hours successfully completed in each subject covered by the continuing education course.

Continuing education providers shall electronically provide to the Department the list of attendees at each of its offered courses within 30 business days of the completion of the course. However, the continuing education provider shall electronically report to the Department completion of a licensee’s course within 10 business days beginning on the 30th day before the renewal deadline or prior to the renewal date, whichever occurs sooner. For home study courses, the provider shall electronically
supply the list of those individuals successfully completing the course by the 5th of the month following
the calendar month in which the provider received documentation and was able to determine the successful completion of the course by the individual. This list shall include the provider’s name and provider number, the name and license or registration number of the attendee, the date the course was completed, and the course number. All documents from the provider shall be submitted electronically to the Department and must be in a form as agreed to by the Department with the provider. Failure to comply with the time and form requirements will result in disciplinary action taken against the provider and the course approval. Each continuing education provider shall maintain records of attendance or completion for all continuing education courses offered or taught by the provider for a period of not less than four years following the offering of each course or the receipt of documentation of completion of a home study course. Upon request, these records shall be made available for inspection by the Department or its agent, or the private entity contracted with by the Department to administer the continuing education program at such reasonable time and location as determined by the Department or its agent, or the private entity. The list of attendees submitted electronically to the Department shall not include the names of applicants taking the course for initial licensure pursuant to Rule 61G5-18.011, F.A.C.

If the Department contracts with a private entity to administer the continuing education program, all continuing education providers shall submit all required forms and information, and shall pay all required fees directly to the private entity.

Approval as a continuing education provider shall be valid through May 31 of odd numbered years for all providers. After the expiration of a continuing education provider’s approval, the provider shall not offer or teach any continuing education courses for credit toward the required hours of continuing education until the provider has renewed its approval as a continuing education provider.

Any substantive changes regarding the information contained in the provider’s application for approval, or previously submitted by the provider to the Department or to a private entity contracted with by the Department to administer the continuing education program, shall be filed with the Department, or if the Department shall contract with a private entity to administer the continuing education program then with such private entity, within 30 days of the change occurring.

At any time, the Board shall recommend to the Department to revoke its approval of a continuing education provider if it finds that such approval is sought or was received by fraud or misrepresentation by the provider, the provider has failed to adhere to the standards and other requirements as set forth in this rule or Section 455.2178, Florida Statutes, or that the provider has engaged in fraudulent behavior relating to the provision of continuing education. Before requesting that the Department revoke a provider’s continuing education approval, the Board shall give the provider notice and an opportunity to be heard. If the approval of a provider is revoked, the continuing education provider shall thereafter be barred from presenting any continuing education courses to licensees or registrants for credit unless the provider demonstrates to the Board that the provider has been sufficiently rehabilitated to be trusted to provide such courses to licensees or registrants in the future. Revocation of a continuing education provider’s approval shall also operate as a revocation of all previously approved continuing education courses for all future offerings by the provider.

For purposes of Section 455.2178, F.S., Chapter 477, F.S., and the rules adopted by the Board, the term “continuing education provider” shall mean any individual, organization, or other entity who offers or teaches: (1) courses for purposes of fulfilling the requirements of license renewal which has been submitted to and approved by the board for such purposes; or (2) an HIV/AIDS education course for purposes of fulfilling the requirements of initial licensure or license renewal which has been submitted to and approved by the Board for such purposes, or which has been approved for these purposes by rule of the Board. All continuing education providers shall comply with all provisions and requirements of this rule, and Section 455.2178 F.S., for the purpose of monitoring continuing education compliance.
Failure to comply with such provisions and requirements by any continuing education provider shall be grounds for the suspension or revocation of the continuing education course approval.

COURSE APPROVAL AND REQUIREMENTS.

Except as noted below, all proposed continuing education courses, including those courses which are to be taught at cosmetology conferences, home study, and video courses, must be approved by the Board prior to their being offered or taught for continuing education credit; and, may only be offered or taught by the continuing education provider submitting the course for approval.

All continuing education courses shall comply with the requirements as set forth in this rule, including but not limited to those regarding the required subjects and topics to be included in the proposed course.

Continuing education providers seeking approval of a continuing education course shall submit a complete application for continuing education course approval to the Department, or if the Department shall contract with a private entity to administer the continuing education program then to such private entity, no later than 60 days prior to the next scheduled Board meeting at which the course is to be considered for approval. A complete application for continuing education course approval shall consist of the following:

A completed application on a form prescribed by the department, copies of which may be obtained from the Board office.

If the Department shall contract with a private entity to administer the continuing education program, a fee in the amount of $100;

A complete copy of the course as it will be provided to licensee which includes the subjects, topics, and subtopics to be presented in the course and a narrative summary of all areas to be covered in each subject, topic and subtopic, and a list of all reference and source materials including the publication date for each;

If the proposed continuing education course consist of a home study course, a copy of the written post-course examination which will be used to test licensees and registrants comprehension and understanding of the subjects, topics, and subtopics presented in the course;

Evidence of the method to be used by the attendees of the course for evaluation of the learning experience and instructional methods used in the course; and

Instructor resumes, if applicable, listing the instructor’s educational qualifications or evidence of appropriate skills or knowledge in the subject matter of the course. Instructors must possess sufficient skills and knowledge in the subject areas being taught.

Upon approval by the Board of a continuing education course, a continuing education course number will be assigned to the course; and, shall be included in all future correspondence or submissions by the continuing education provider to the Board, the Department, or any private entity contracted with by the Department to administer the continuing education program.

The continuing education course number and continuing education provider number shall be included in all advertisements, promotions, or other announcements concerning an approved course.

No course shall be advertised as an approved course until the course has been approved by the Board and received a course number.

A course shall not be offered or credit given for hours other than what was approved by the Board.

A course shall not be offered other than in the manner the Board initially approved the course material.

All continuing education home study courses shall include a written post-course examination which must be graded by the course provider. Post-course examinations may be open-book examinations. In order to receive continuing education credit for the course, licensees or registrants must achieve a 75% passing score on all post-course examinations.

All continuing education courses shall include a method to be used by the attendees of the course for evaluation of the learning experience and instructional methods used in the course.
Upon the successful completion of a continuing education course all licensees and registrants shall receive a certificate of completion for the course which shall indicate on its face all information as required by paragraph (6)(d) of this rule. One hour of credit will be awarded for each 50 minute classroom hour or for each 50 minutes of home study material.

Approval of a continuing education course shall be valid for a period of two years from the date of approval by the Board. After the expiration of a continuing education course approval, the course may not be offered or taught for credit toward the required hours of continuing education; and, must be again approved by the Board prior to its being offered or taught for continuing education credit.

Applications for approval of a continuing education course shall be submitted to the Department, or if the Department shall contract with a private entity to administer the continuing education program then to such private entity; and, shall contain all of the items and information required for initial approval as a continuing education course as set forth in paragraph (7)(c) of this rule.

Any substantive changes regarding the information contained in the provider’s application for course approval, or previously submitted by the provider to the Department or to a private entity contracted with by the Department to administer the continuing education program, shall require that the course be resubmitted for approval in accordance with this rule.

At any time, the Board shall request the Department revoke the provider’s approval if it finds that such approval is sought or was received by fraud or misrepresentation by the provider, that the course which is being provided fails to cover the information required by statute or this rule or Rule 61-6.015, F.A.C., or otherwise fails to meet the requirements specified in this rule, that the course significantly varies from the course proposal that was approved by the Board, or that the course provider has engaged in fraudulent behavior related to the provision of the course. Before the Board recommends that the Department revoke a continuing education provider, the Board shall give the course provider notice and an opportunity to be heard. If the Board denies or the Department revokes the approval of a continuing education provider because of the course provider’s fraud or misrepresentation, then the continuing education provider shall thereafter be barred from presenting any continuing education courses to licensees or registrants for credit unless the provider demonstrates to the Board that the provider has been sufficiently rehabilitated to be trusted to provide such courses to licensees or registrants in the future.

A course which constitutes a sales presentation or promotion will not be approved for continuing education credit. Rulemaking Authority 455.2178, 455.2179, 455.219(3), 455.2228, 477.016, 477.019(7) FS. Law Implemented 455.2178, 455.2179, 455.219(3), 455.2228, 477.019(7) FS. History–New 3-25-99, Amended 2-28-00, 7-27-00, 7-29-01, 7-1-02, 12-6-06, 3-10-08, 3-2-10, 8-12-13.

Read the following information about CHAPTER 455, PART I, FLORIDA STATUTES.

CHAPTER 455, PART I, FLORIDA STATUTES
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION GENERAL PROVISIONS

The following are selected excerpts from Chapter 455, Part I, Florida Statutes, that directly affect the practice of licensees regulated by the laws and rules in this booklet. These are being provided for your convenience; however, the exclusion of the remaining sections of Chapter 455, Part I, cannot be construed to mean that they do not affect a license directly or indirectly. Chapter 455, F.S., is the governing law of the Department of Business and Professional Regulation. A complete copy of Chapter 455, F.S., is available on the Internet under www.leg.state.fl.us.
455.02 Licensure of members of the Armed Forces in good standing and their spouses with administrative boards.

Any member of the Armed Forces of the United States now or hereafter on active duty who, at the time of becoming such a member, was in good standing with any administrative board of the state and was entitled to practice or engage in his or her profession or vocation in the state shall be kept in good standing by such administrative board, without registering, paying dues or fees, or performing any other act on his or her part to be performed, as long as he or she is a member of the Armed Forces of the United States on active duty and for a period of 6 months after discharge from active duty as a member of the Armed Forces of the United States, if he or she is not engaged in his or her licensed profession or vocation in the private sector for profit.

The boards listed in s. 20.165 shall adopt rules that exempt the spouse of a member of the Armed Forces of the United States from licensure renewal provisions, but only in cases of his or her absence from the state because of his or her spouse’s duties with the Armed Forces.

(3)(a) The department may issue a temporary professional license to the spouse of an active duty member of the Armed Forces of the United States if the spouse applies to the department in the format prescribed by the department. An application must include proof that:

The applicant is married to a member of the Armed Forces of the United States who is on active duty. The applicant holds a valid license for the profession issued by another state, the District of Columbia, any possession or territory of the United States, or any foreign jurisdiction. The applicant’s spouse is assigned to a duty station in this state and that the applicant is also assigned to a duty station in this state pursuant to the member’s official active duty military orders.

a. A complete set of the applicant’s fingerprints is submitted to the Department of Law Enforcement for a statewide criminal history check.

b. The Department of Law Enforcement shall forward the fingerprints submitted pursuant to subparagraph a. to the Federal Bureau of Investigation for a national criminal history check. The department shall, and the board may, review the results of the criminal history checks according to the level 2 screening standards in s. 435.04 and determine whether the applicant meets the licensure requirements. The costs of fingerprint processing shall be borne by the applicant. If the applicant’s fingerprints are submitted through an authorized agency or vendor, the agency or vendor shall collect the required processing fees and remit the fees to the Department of Law Enforcement.

An application must be accompanied by an application fee prescribed by the department that is sufficient to cover the cost of issuance of the temporary license. A temporary license expires 6 months after the date of issuance and is not renewable. History. — s. 2, ch. 21885, 1943; s. 5, ch. 79-36; s. 95, ch. 83-329; s. 1, ch. 84-15; s. 71, ch. 85-81; s. 6, ch. 93-220; s. 186, ch. 97-103; s. 5, ch. 2010-106; s. 4, ch. 2010-182.

455.2228 Barbers and cosmetologists; instruction on HIV and AIDS.—

The board, or the department where there is no board, shall require each person licensed or certified under chapter 476 or chapter 477 to complete a continuing educational course approved by the board, or the department where there is no board, on human immunodeficiency virus and acquired immune deficiency syndrome as part of biennial relicensure or recertification. The course shall consist of education on modes of transmission, infection control procedures, clinical management, and prevention of human immunodeficiency virus and acquired immune deficiency syndrome, with an emphasis on appropriate behavior and attitude change. When filing fees for each biennial renewal, each licensee shall submit confirmation of having completed said course, on a form provided by the board or by the department if there is no board. At the time of the subsequent biennial renewal when coursework is to be completed, if the licensee has
not submitted confirmation which has been received and recorded by the board, or department if there is no board, the department shall not renew the license.
The board, or the department where there is no board, shall have the authority to approve additional equivalent courses that may be used to satisfy the requirements in subsection (1).
As of December 31, 1992, the board, or the department where there is no board, shall require, as a condition of granting a license under any of the chapters or parts thereof specified in subsection (1), that an applicant making initial application for licensure complete an educational course acceptable to the board, or the department where there is no board, on human immunodeficiency virus and acquired immune deficiency syndrome. An applicant who has not taken a course at the time of licensure shall, upon an affidavit showing good cause, be allowed 6 months to complete this requirement.
The board, or the department where there is no board, shall have the authority to adopt rules to carry out the provisions of this section.
Any professional holding two or more licenses subject to the provisions of this section shall be permitted to show proof of having taken one board-approved course, or one department-approved course where there is no board, on human immunodeficiency virus and acquired immune deficiency syndrome, for purposes of relicensure or recertification for additional licenses. History.—s. 11, ch. 89-350; ss. 73, 74, ch. 91-297; s. 16, ch. 95-388; s. 18, ch. 97-261; s. 147, ch. 2010-102.

Grounds for discipline; penalties; enforcement.--
The following acts shall constitute grounds for which the disciplinary actions specified in subsection (2) may be taken:
Making misleading, deceptive, or fraudulent representations in or related to the practice of the licensee’s profession.
Intentionally violating any rule adopted by the board or the department, as appropriate.
Being convicted or found guilty of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime in any jurisdiction which relates to the practice of, or the ability to practice, a licensee’s profession.
Using a Class III or a Class IV laser device or product, as defined by federal regulations, without having complied with the rules adopted pursuant to s. 501.122(2) governing the registration of such devices.
Failing to comply with the educational course requirements for human immunodeficiency virus and acquired immune deficiency syndrome.
Having a license or the authority to practice the regulated profession revoked, suspended, or otherwise acted against, including the denial of licensure, by the licensing authority of any jurisdiction, including its agencies or subdivisions, for a violation that would constitute a violation under Florida law. The licensing authority’s acceptance of a relinquishment of licensure, stipulation, consent order, or other settlement, offered in response to or in anticipation of the filing of charges against the license, shall be construed as action against the license.
Having been found liable in a civil proceeding for knowingly filing a false report or complaint with the department against another licensee.
Attempting to obtain, obtaining, or renewing a license to practice a profession by bribery, by fraudulent misrepresentation, or through an error of the department or the board.
Failing to report to the department any person who the licensee knows is in violation of this chapter, the chapter regulating the alleged violator, or the rules of the department or the board.
Aiding, assisting, procuring, employing, or advising any unlicensed person or entity to practice a profession contrary to this chapter; the chapter regulating the profession, or the rules of the department or the board.
Failing to perform any statutory or legal obligation placed upon a licensee.
Making or filing a report which the licensee knows to be false, intentionally or negligently failing to file a report or record required by state or federal law, or willfully impeding or obstructing another person to do so. Such reports or records shall include only those that are signed in the capacity of a licensee.

Making deceptive, untrue, or fraudulent representations in or related to the practice of a profession or employing a trick or scheme in or related to the practice of a profession.

Exercising influence on the patient or client for the purpose of financial gain of the licensee or a third party.

Practicing or offering to practice beyond the scope permitted by law or accepting and performing professional responsibilities the licensee knows, or has reason to know, the licensee is not competent to perform.

Delegating or contracting for the performance of professional responsibilities by a person when the licensee delegating or contracting for performance of such responsibilities knows, or has reason to know, such person is not qualified by training, experience, and authorization when required to perform them.

Violating any provision of this chapter, the applicable professional practice act, a rule of the department or the board, or a lawful order of the department or the board, or failing to comply with a lawfully issued subpoena of the department.

Improperly interfering with an investigation or inspection authorized by statute, or with any disciplinary proceeding.

Failing to comply with the educational course requirements for domestic violence.

Failing to report in writing to the board or, if there is no board, to the department within 30 days after the licensee is convicted or found guilty of, or entered a plea of nolo contendere or guilty to, regardless of adjudication, a crime in any jurisdiction. A licensee must report a conviction, finding of guilt, plea, or adjudication entered before the effective date of this paragraph within 30 days after the effective date of this paragraph.

Termination from a treatment program for impaired practitioners as described in s. 456.076 for failure to comply, without good cause, with the terms of the monitoring or treatment contract entered into by the licensee or failing to successfully complete a drug or alcohol treatment program.

When the board, or the department when there is no board, finds any person guilty of the grounds set forth in subsection (1) or of any grounds set forth in the applicable practice act, including conduct constituting a substantial violation of subsection (1) or a violation of the applicable practice act which occurred prior to obtaining a license, it may enter an order imposing one or more of the following penalties:

- Refusal to certify, or to certify with restrictions, an application for a license.
- Suspension or permanent revocation of a license.
- Restriction of practice.
- Imposition of an administrative fine not to exceed $5,000 for each count or separate offense.
- Issuance of a reprimand.
- Placement of the licensee on probation for a period of time and subject to such conditions as the board, or the department when there is no board, may specify. Those conditions may include, but are not limited to, requiring the licensee to undergo treatment, attend continuing education courses, submit to be reexamined, work under the supervision of another licensee, or satisfy any terms which are reasonably tailored to the violations found.

Corrective action.

(3)(a) In addition to any other discipline imposed pursuant to this section or discipline imposed for a violation of any practice act, the board, or the department when there is no board, may assess costs related to the investigation and prosecution of the case excluding costs associated with an attorney’s time.
In any case where the board or the department imposes a fine or assessment and the fine or assessment is not paid within a reasonable time, such reasonable time to be prescribed in the rules of the board, or the department when there is no board, or in the order assessing such fines or costs, the department or the Department of Legal Affairs may contract for the collection of, or bring a civil action to recover, the fine or assessment.

The department shall not issue or renew a license to any person against whom or business against which the board has assessed a fine, interest, or costs associated with investigation and prosecution until the person or business has paid in full such fine, interest, or costs associated with investigation and prosecution or until the person or business complies with or satisfies all terms and conditions of the final order.

In addition to, or in lieu of, any other remedy or criminal prosecution, the department may file a proceeding in the name of the state seeking issuance of an injunction or a writ of mandamus against any person who violates any of the provisions of this chapter, or any provision of law with respect to professions regulated by the department, or any board therein, or the rules adopted pursuant thereto. In the event the board, or the department when there is no board, determines that revocation of a license is the appropriate penalty, the revocation shall be permanent. However, the board may establish, by rule, requirements for reapplication by applicants whose licenses have been permanently revoked. Such requirements may include, but shall not be limited to, satisfying current requirements for an initial license. History. — s. 5, ch. 79-36; s. 13, ch. 83-329; s. 5, ch. 88-380; s. 8, ch. 91-137; s. 55, ch. 92-33; s. 22, ch. 92-149; s. 23, ch. 93-129; s. 9, ch. 94-119; s. 80, ch. 94-218; s. 5, ch. 95-187; s. 22, ch. 97-261; s. 144, ch. 99-251; s. 32, ch. 2000-160; s. 2, ch. 2009-195; s. 12, ch. 2010-106.

455.2275 Penalty for giving false information.—
In addition to, or in lieu of, any other discipline imposed pursuant to s. 455.227, the act of knowingly giving false information in the course of applying for or obtaining a license from the department, or any board thereunder, with intent to mislead a public servant in the performance of his or her official duties, or the act of attempting to obtain or obtaining a license from either the department, or any board thereunder, to practice a profession by knowingly misleading statements or knowing misrepresentations constitutes a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. History.—s. 31, ch. 85-175; s. 12, ch. 89-124; s. 9, ch. 91-137; s. 57, ch. 92-33; s. 24, ch. 92-149; s. 23, ch. 93-129; s. 82, ch. 94-218; s. 190, ch. 97-103; s. 24, ch. 97-261.

Unlicensed practice of a profession; cease and desist notice; civil penalty; enforcement; citations; allocation of moneys collected.—
When the department has probable cause to believe that any person not licensed by the department, or the appropriate regulatory board within the department, has violated any provision of this chapter or any statute that relates to the practice of a profession regulated by the department, or any rule adopted pursuant thereto, the department may issue and deliver to such person a notice to cease and desist from such violation. In addition, the department may issue and deliver a notice to cease and desist to any person who aids and abets the unlicensed practice of a profession by employing such unlicensed person. The issuance of a notice to cease and desist shall not constitute agency action for which a hearing under ss. 120.569 and 120.57 may be sought. For the purpose of enforcing a cease and desist notice, the department may file a proceeding in the name of the state seeking issuance of an injunction or a writ of mandamus against any person who violates any provisions of such notice. In addition to the foregoing remedies, the department may impose an administrative penalty not to exceed $5,000 per incident pursuant to the provisions of chapter 120 or may issue a citation pursuant to the provisions of subsection (3). If the department is required to seek enforcement of the notice for a penalty pursuant to
s. 120.569, it shall be entitled to collect its attorney’s fees and costs, together with any cost of collection.

In addition to or in lieu of any remedy provided in subsection (1), the department may seek the imposition of a civil penalty through the circuit court for any violation for which the department may issue a notice to cease and desist under subsection (1). The civil penalty shall be no less than $500 and no more than $5,000 for each offense. The court may also award to the prevailing party court costs and reasonable attorney fees and, in the event the department prevails, may also award reasonable costs of investigation.

(3)(a) Notwithstanding the provisions of s. 455.225, the department shall adopt rules to permit the issuance of citations for unlicensed practice of a profession. The citation shall be issued to the subject and shall contain the subject’s name and any other information the department determines to be necessary to identify the subject, a brief factual statement, the sections of the law allegedly violated, and the penalty imposed. The citation must clearly state that the subject may choose, in lieu of accepting the citation, to follow the procedure under s. 455.225. If the subject disputes the matter in the citation, the procedures set forth in s. 455.225 must be followed. However, if the subject does not dispute the matter in the citation with the department within 30 days after the citation is served, the citation shall become a final order of the department. The penalty shall be a fine of not less than $500 or more than $5,000 or other conditions as established by rule.

Each day that the unlicensed practice continues after issuance of a citation constitutes a separate violation.

The department shall be entitled to recover the costs of investigation, in addition to any penalty provided according to department rule as part of the penalty levied pursuant to the citation. Service of a citation may be made by personal service or certified mail, restricted delivery, to the subject at the subject’s last known address.

All fines, fees, and costs collected through the procedures set forth in this section shall be allocated to the professions in the manner provided for in s. 455.2281 for the allocation of the fees assessed and collected to combat unlicensed practice of a profession.

The provisions of this section apply only to the provisions of s. 455.217 and the professional practice acts administered by the department. History.—s. 3, ch. 84-271; s. 6, ch. 90-228; s. 58, ch. 92-33; s. 26, ch. 92-149; s. 23, ch. 93-129; s. 11, ch. 94-119; ss. 83, 84, ch. 94-218; s. 213, ch. 96-410; s. 25, ch. 97-261; s. 34, ch. 2000-160; s. 13, ch. 2010-106.

455.2281 Unlicensed activities; fees; disposition.—

In order to protect the public and to ensure a consumer-oriented department, it is the intent of the Legislature that vigorous enforcement of regulation for all professional activities is a state priority. All enforcement costs should be covered by professions regulated by the department. Therefore, the department shall impose, upon initial licensure and each renewal thereof, a special fee of $5 per licensee. Such fee shall be in addition to all other fees collected from each licensee and shall fund efforts to combat unlicensed activity. Any profession regulated by the department which offers services that are not subject to regulation when provided by an unlicensed person may use funds in its unlicensed activity account to inform the public of such situation. The board with concurrence of the department, or the department when there is no board, may earmark $5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash balance. A board or profession regulated by the department may authorize the transfer of funds from the operating fund account to the unlicensed activity account of that profession if the operating fund account is not in a deficit and has a reasonable cash balance. The department shall make direct charges to this fund by profession and shall not allocate indirect overhead. The department shall seek board advice regarding enforcement methods and strategies prior to expenditure of funds;
however, the department may, without board advice, allocate funds to cover the costs of continuing education compliance monitoring under s. 455.2177. The department shall directly credit, by profession, revenues received from the department's efforts to enforce licensure provisions. The department shall include all financial and statistical data resulting from unlicensed activity enforcement and from continuing education compliance monitoring as separate categories in the quarterly management report provided for in s. 455.219. The department shall not charge the account of any profession for the costs incurred on behalf of any other profession. For an unlicensed activity account, a balance which remains at the end of a renewal cycle may, with concurrence of the applicable board and the department, be transferred to the operating fund account of that profession. History.—s. 27, ch. 92-149; s. 12, ch. 94-119; s. 160, ch. 99-251; s. 2, ch. 2001-269; s. 5, ch. 2004-292.

455.273 Renewal and cancellation notices.—
At least 90 days before the end of a licensure cycle, the department shall:
Forward a licensure renewal notification to an active or inactive licensee at the licensee’s last known address of record or e-mail address provided to the department.
Forward a notice of pending cancellation of licensure to a delinquent status licensee at the licensee’s last known address of record or e-mail address provided to the department. History.—s. 15, ch. 94-119; s. 6, ch. 2012-72.

455.275 Address of record.—
Each licensee of the department is solely responsible for notifying the department in writing of the licensee’s current mailing address, e-mail address, and place of practice, as defined by rule of the board or the department when there is no board. A licensee’s failure to notify the department of a change of address constitutes a violation of this section, and the licensee may be disciplined by the board or the department when there is no board. Notwithstanding any other provision of law, service by regular mail or e-mail to a licensee’s last known mailing address or e-mail address of record with the department constitutes adequate and sufficient notice to the licensee for any official communication to the licensee by the board or the department except when other service is required pursuant to s. 455.225.
(3)(a)Notwithstanding any provision of law, when an administrative complaint is served on a licensee of the department, the department shall provide service by regular mail to the licensee’s last known address of record, by certified mail to the last known address of record, and, if possible, by e-mail.
(b)If service, as provided in paragraph (a), does not provide the department with proof of service, the department shall call the last known telephone number of record and cause a short, plain notice to the licensee to be posted on the front page of the department’s website and shall send notice via e-mail to all newspapers of general circulation and all news departments of broadcast network affiliates in the county of the licensee’s last known address of record. History.—s. 16, ch. 94-119; s. 14, ch. 2010-106; s. 7, ch. 2012-72; s. 15, ch. 2012-212.

Read the following: FLORIDA ADMINISTRATIVE CODE CHAPTER 61.

FLORIDA ADMINISTRATIVE CODE CHAPTER 61 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
The following are selected excerpts of rules of the Department of Business and Professional Regulation (DBPR) that directly affect the practice of licensees regulated by the laws and rules in this booklet. These are being provided for your convenience; however, the exclusion of the remaining sections of
Chapter 61, Florida Administrative Code cannot be construed to mean that they do not affect a license directly or indirectly. Chapter 61, F.A.C., is the governing rules of DBPR. A complete copy of Chapter 61, F.A.C., is available on the Internet under www.MyFlorida.com>Find an Agency>State>Elections>Florida Administrative Code>FAC Online.

61-6.010 Random Audit of License Renewal Requirements.
No later than six (6) months after the beginning of a licensure period, each board shall initiate a random audit of licensees to determine their compliance with license renewal requirements. This audit shall be conducted by the appropriate office of the Department of Business and Professional Regulation. Each licensee randomly selected for audit shall be so notified by regular mail, and each selected licensee shall ensure that the Department receives all documentation specified by the Department no later than twenty-one (21) days from the licensee’s receipt of notice.

If a letter of notification is returned to the Department because of an incorrect mailing address, the Department shall attempt again to notify the licensee after making a reasonable effort to determine the licensee’s correct address. The licensee so notified shall ensure that the Department receives all documentation specified by the Department no later than twenty-one (21) days from the licensee’s receipt of notice.

If a letter of notification is returned to the Department unclaimed or refused, the Department shall by certified mail attempt to notify the licensee of the information contained in the original mailing. The licensee so notified shall ensure that the Department receives all documentation specified by the Department no later than twenty-one (21) days from the licensee’s receipt of notice.

If a licensee’s documentation of compliance with the requirements for license renewal is not sufficient, the Department shall notify the licensee of the deficiencies, and the licensee shall ensure that the Department receives all documentation specified by the Department no later than twenty-one (21) days from the licensee’s receipt of notice.

Commencing on the twenty-second (22) day after a licensee selected for audit receives notice, the board may grant the licensee up to thirty (30) additional days in which to obtain appropriate documentation and supply that documentation to the Department if: (1) the licensee’s written request was received by the board within twenty-one (21) days of the licensee’s receipt of notice of audit or receipt of documentation deficiency, (2) the licensee’s written request stated with particularity the reasons an extension should be granted, and (3) the board’s written notification as to the length of the extension granted was received by the Department office conducting the audit no more than ten (10) days after the twenty-one (21) day compliance period had lapsed.

The Department may take whatever action is appropriate against any licensee selected for audit who: Has not kept the Department informed of an accurate mailing address, Does not cooperate in the audit, or The audit reveals has not met the requirements for license renewal. Specific Authority 455.203(5) FS. Law Implemented 455.203 FS. History–New 2-10-93, Formerly 21-6.020.

61-6.002 Delinquent Status.
Any license renewal application except for a license described in Rule 61-6.006, Florida Administrative Code, which for any reason is not submitted in a timely and complete manner shall revert to delinquent status.

Each application for renewal shall be considered timely filed if the application has been postmarked by the post officer prior to midnight on the date of expiration of the license or has been delivered by the close of business on the date of expiration of the license. If that date falls on a Saturday, Sunday, or legal holiday, the day of expiration shall be the first working day after the expiration date on the license. In order to be complete, the application must have all appropriate spaces filled, be signed by the licensee and include a money order or a sufficiently funded check in the correct amount. Any
renewal which does not comply with the above conditions shall become delinquent. Specific Authority 455.203(5) FS. (1979) Law Implemented 455.271, 458.319, 459.008, 461.007, 463.007, 464.013, 465.008, 466.013, 468.1715, 470.015, 471.017, 472.017, 473.311, 474.211, 475.182, 481.215, 481.313, 484.008 FS. (1979) History–New 10-29-80, Formerly 21-6.09, 21-6.009, Amended 4-3-95.

61-6.021 Licensee Name Change.
Licensees shall direct their requests for name changes on the master file of the Department to the board office of their profession or to the Bureau of Licensure, 1940 North Monroe Street, Tallahassee, Florida 32399-2205.
Name change requests shall be in writing and shall be documented. An original, a certified copy, a duplicate copy of an original or a duplicate of a certified copy of an original document which shows the legal name change shall be accepted unless the Department has a question about the authenticity of the document raised on its face, or because the genuineness of the document is uncertain, or because of another matter related to the application.
Documents acceptable by the Department for request of a license name change include a marriage license, a court order (e.g., adoption, divorce decree, name change, or federal identity change), a certificate of status, or a certificate of authorization.
Documents unacceptable for a request of a license name change include all documentation other than those listed above. Specific Authority 455.203(5) FS. Law Implemented 455.203 FS. History–New 8-26-93, Amended 4-3-95, 12-24-97.

Lesson 5 Summary
We have now reviewed a complete study of CHAPTER 477, Florida Statutes, CHAPTER 61G5, Florida Administrative Code, Sections of CHAPTER 455, Florida Statutes and CHAPTER 61, Florida Administrative Code. You may visit www.myfloridalicense.com throughout the year to view any posted updates.
Lesson 6: Chemical Makeup as It Pertains to Hair, Skin, and Nails (2 hours)

Outline

• Composition of Hair
• Composition of Skin
• Composition of Nails

Learning objectives
After completing this lesson you will be able to

• identify the chemical elements of the hair
• list the amino acids of the hair
• define the types of bonds of the hair
• describe the growth phases of the hair
• list and define various types of conditions of the hair
• identify types of hair testing
• list the layers of the skin
• identify sebaceous glands
• define sebum
• describe sweat glands
• identify the aspects of the pigment of skin
• describe the self-healing qualities of the skin
• describe aging skin
• define keratin of the nail
• list the parts of the nail
• describe aspects of nail growth

Introduction
The following information is a review of the biological composition of human hair, skin and nails.

Composition of Hair
Human hair is an appendage which grows from follicles, tube-like sacs in the scalp or skin containing the hair root. The hair that we cut, relax, color and style is a non-living fiber comprised of keratinized protein. Within the hair follicle cells are produced. These cells mature in an upward moving process through the follicle. This maturing process is known as keratinization. During keratinization cells absorb keratin, a fibrous protein. As the cells continue to move upward they lose their nucleus and die off, producing the non-living keratinized cells (appendage) that emerge from the scalp. Hair is comprised of many contributing factors. Proteins, raw elements, amino acids and bonds work together in forming hair fiber. The dominant contributor in the composition of hair is protein, accounting for 91 percent of hair fiber. Amino acids, the building blocks of protein, are made up of COHNS elements, (Carbon, Oxygen, Hydrogen, Nitrogen and Sulfur).

The percentage of COHNS elements in hair is as follows:

<table>
<thead>
<tr>
<th>ELEMENT</th>
<th>PERCENTAGE IN NORMAL HAIR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carbon</td>
<td>51%</td>
</tr>
<tr>
<td>Oxygen</td>
<td>21%</td>
</tr>
</tbody>
</table>

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Nitrogen 17%
Hydrogen 6%
Sulfur 5%

These elements form bonds called side bonds which link together the long chain of amino acids known as the polypeptide chain. This chain forms a helix by creating spiral movement that intertwines.

The following are the amino acids and the percentage found in hair fiber:

<table>
<thead>
<tr>
<th>AMINO ACID</th>
<th>PERCENTAGE IN NORMAL HAIR FIBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cysteine</td>
<td>17.5%</td>
</tr>
<tr>
<td>Serine</td>
<td>11.7%</td>
</tr>
<tr>
<td>Glutamic Acid</td>
<td>11.1%</td>
</tr>
<tr>
<td>Threonine</td>
<td>6.9%</td>
</tr>
<tr>
<td>Glycine</td>
<td>6.5%</td>
</tr>
<tr>
<td>Leucine</td>
<td>6.1%</td>
</tr>
<tr>
<td>Valine</td>
<td>5.9%</td>
</tr>
<tr>
<td>Arginine</td>
<td>5.6%</td>
</tr>
<tr>
<td>Aspartic Acid</td>
<td>5.0%</td>
</tr>
<tr>
<td>Alanine</td>
<td>4.8%</td>
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<tr>
<td>Proline</td>
<td>3.6%</td>
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<tr>
<td>Isoleucine</td>
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<tr>
<td>Tyrosine</td>
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<tr>
<td>Phenylalanine</td>
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<tr>
<td>Histidine</td>
<td>0.8%</td>
</tr>
<tr>
<td>Methionine</td>
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Millions of polypeptide chains reside in the cortex layer. Side bonds such as hydrogen bonds, salt bonds and disulfide bonds link together these polypeptide chains. Hair fibers are held in place by the side bonds which attribute to the elasticity and strength of hair.

A hydrogen bond can easily be broken by water or heat, and is a physical side bond. Collectively, hydrogen bonds account for one-third of hair’s strength.

Salt bonds are also physical side bonds. Strong acidic or alkaline solutions break salt bonds because they are affected by changes in pH. Like hydrogen bonds, salt bonds also account for approximately one-third of hair’s strength.

Disulfide bonds differ from hydrogen and salt bonds because they are not physical side bonds. Disulfide bonds are chemical side bonds. Disulfide bonds link together two sulfur atoms attached to cysteine amino acids within the polypeptide chains. Chemical hair relaxers and permanent waves chemically alter the hair’s disulfide bond. Disulfide bonds cannot be broken by water or heat.
Hair is simple in structure, but has important functions in social functioning. Hair is made of a tough protein called keratin. A hair follicle anchors each hair into the skin. The hair bulb forms the base of the hair follicle. In the hair bulb, living cells divide and grow to build the hair shaft. Blood vessels nourish the cells in the hair bulb, and deliver hormones that modify hair growth and structure at different times of life.

Hair growth occurs in cycles consisting of three phases:

- **Anagen (growth phase):** Most hair is growing at any given time. Each hair spends several years in this phase.
- **Catagen (transitional phase):** Over a few weeks, hair growth slows and the hair follicle shrinks.
- **Telogen (resting phase):** Over months, hair growth stops and the old hair detaches from the hair follicle. A new hair begins the growth phase, pushing the old hair out.

**Hair grows at different rates in different people; the average rate is around one-half inch per month.** Hair color is created by pigment cells producing melanin in the hair follicle. With aging, pigment cells die, and hair turns gray.

**Hair Conditions**

- **Alopecia areata:** Round patches of total hair loss, usually from the scalp. The cause of alopecia is unknown; the hair usually grows back.
- **Male pattern baldness:** The most common type of hair loss in men. Male pattern baldness usually includes either a receding hairline, hair loss at the crown, or both.
- **Female pattern baldness:** In women, hair loss usually includes uniform thinning across the scalp, with a preserved hairline. The crown may be affected, but hair loss rarely proceeds to baldness as in men. See a picture of female pattern baldness.
- **Dandruff (seborrheic dermatitis):** Ongoing mild inflammation of the scalp, resulting in scaly skin that may be itchy and flake off. Seborrheic dermatitis may also affect the ears and face.
- **Tinea capitis (ringworm):** A fungal infection of the scalp, creating round patches of hair loss. Although the patches can appear in a ring shape, no worm is involved in tinea capitis.
- **Trichotillomania:** A mental disorder that includes the irresistible urge to pull out one's hair. The hair pulling results in patches of noticeable hair loss; its cause is unknown.
- **Head lice:** Tiny insects that live on the scalp and feed on blood. Preschool and elementary school-aged children and adults who live with children are most susceptible to catching head lice, which are only spread through close contact.
- **Telogen effluvium:** A month or two after a personal shock (such as surgery, childbirth, severe stress), hair can abruptly fall out in large patches. Typically, new hair starts regrowing right away.
- **Postpartum alopecia-** hair loss after delivering a baby- is a form of telogen effluvium and usually resolves without treatment.
- **Folliculitis:** Inflammation of hair follicles, usually due to an infection. Staphylococcus aureus is a bacteria that frequently causes folliculitis. Acne is a form of folliculitis that is caused by inflammation. This inflammation can sometimes be worsened by the bacteria Propionibacterium acnes.
- **Piedra (trichomycosis nodularis):** Fungal infection of the hair shaft. Hard nodules made of fungus cling to hair fibers, sometimes causing hair loss.
• **Hirsutism:** A condition in which women develop male-pattern hair (such as facial hair). An excess of testosterone due to a medical condition is usually responsible.

**Ingrown Hair**
Strange bumps have sprung up on your face. They're not exactly pimples. They're not hives, either. Could they be ingrown hairs? Ingrown hairs are hairs that have curled around and grown back into your skin instead of rising up from it.

Sometimes, dead skin can clog up a hair follicle. That forces the hair inside it to grow sideways under the skin, rather than upward and outward. Sometimes, cutting naturally curly hair too closely will result in the sharpened end of the hair piercing the skin, causing an ingrown hair.

An ingrown hair irritates the skin. It produces a raised, red bump (or group of bumps) that looks like a little pimple. Sometimes an ingrown hair can form a painful, boil-like sore. Ingrown hairs can be itchy and uncomfortable, especially if you've got a lot of them. You may notice pus inside the bumps. Or you may see the hair that's causing the problem. In men, ingrown hairs often pop up as a bunch of little bumps on the chin, cheeks, or neck after shaving. In women, ingrown hairs are common on the legs, as well as in the pubic area and armpits. You can also get ingrown hairs on your buttocks.

**Ingrown Hair Causes**
Anyone can get an ingrown hair. But the problem is more common in people who have very curly or coarse hair. Curly hair is more likely to bend back and re-enter the skin, especially after it's been shaved or cut.

Also, people with high levels of certain sex hormones can have excessive hair growth, which makes it more likely to get ingrown hairs, especially after shaving.

A common problem is "razor bumps". This patch of little bumps is common on the beard area after you've shaved, waxed, or tweezed to remove unwanted hair. The hair that grows back has a sharper edge, so it can more easily poke back through the skin and get trapped under the surface.

**Ingrown Hair Prevention**
To prevent ingrown hairs, try these tips every time you shave:

- Every day, rub your face in a circular motion using a wet washcloth or an exfoliating scrub to tease out any stubborn ingrown hairs.
- Shave with a sharp, single-bladed razor.
- Wet your skin with warm water before shaving and apply a lubricating gel.
- Shave in the same direction your hair is growing.
- Use as few strokes of the razor as possible. That lessens the chance of a hair slipping back into your skin.
- Rinse the blade with water after every stroke.
- Don't shave too closely to your skin. Leave a little bit of stubble if you can.
- If you're using an electric razor, hold it slightly above the surface of your skin.
- Apply a cool washcloth to your skin after you shave to reduce irritation.
You can also try other hair removal methods that are less likely to produce ingrown hairs. Those methods include depilatory creams that dissolve the hair, and a laser or electric current (electrolysis) to permanently remove the hair follicle.

**Hair Tests**

- Hair DNA testing: Hair follicles contain DNA; hair can be tested to establish paternity or as evidence in a crime investigation.
- Hair drug testing: Many street drugs (or their breakdown products in the body) are absorbed into the hair. A sample of hair can be tested for recent drug use.
- Hair analysis: Testing of hair for toxic exposures, such as lead or mercury poisoning. These tests are limited by inconsistency and difficulty interpreting their results.

**Composition of Skin**

*The skin is the largest organ of the body, with a total area of about 20 square feet.* The skin protects us from microbes and the elements, helps regulate body temperature, and permits the sensations of touch, heat, and cold.

Your skin is the largest organ of your body, made up of several different components, including water, protein, lipids, and different minerals and chemicals. Its job is crucial: to protect you from infections and other environmental assaults. The skin also contains nerves that sense cold, heat, pain, pressure, and touch.

Throughout your life, your skin will change constantly, for better or worse. In fact, your skin will renew itself approximately once a month. Proper skin care is essential to maintaining the health and vitality of this protective organ.

**Skin Layers**

The skin is made up of layers. It consists of a thin outer layer (epidermis), a thicker middle layer (dermis), and the inner layer (subcutaneous tissue or hypodermis).

**Epidermis: The Outer Layer of Skin**

The outer layer of skin, the epidermis, is a translucent layer made of cells that function to protect us from the environment. The most superficial portion contains dead skin cells that are continually shed. The deepest portion contains basal cells that are responsible for skin renewal.

Keratin, a protein made within the cells of the epidermis, protects the skin from harmful substances, such as chemical products and bacteria. The epidermis also contains cells that produce melanin, which gives skin its color.

The epidermis is responsible for the look and health of the skin and it holds a large amount of water. The younger the body, the more water there is in the skin. The capacity of the skin to retain water decreases with age, making the skin more vulnerable to dehydration. Keratin is the strongest protein in your skin. It also gives hair and nails their strength.
Dermis: The Middle Layer
The dermis contains two types of fibers that lessen in supply with age: elastin, which gives skin its elasticity, and collagen, which provides strength. The dermis also contains blood and lymph vessels, hair follicles, sweat glands, and the sebaceous glands, which produce oil. Nerves in the dermis sense touch and pain.

Collagen is the most abundant protein in the skin. It makes up 75% of your skin. This is also your "fountain of youth," responsible for warding off wrinkles and fine lines. Over time, environmental factors and aging diminish your body's ability to produce collagen.

Elastin is found together with collagen and is responsible for giving structure to your skin and organs. As with collagen, elastin is affected by time and the elements. Diminished levels of this protein cause your skin to wrinkle and sag.

Hypodermis: The Fatty Layer
The subcutaneous tissue, or hypodermis, is mostly made up of fat. It lies between the dermis and muscles or bones and contains blood vessels that expand and contract to help keep your body at a constant temperature. The hypodermis also protects your vital inner organs. Reduction of tissue in this layer causes your skin to sag.

Sebaceous Glands and Sweat Glands
The sebaceous glands secrete sebum, an oily substance that helps keep skin from drying out. Sebum reduces water loss from the skin surface, protects the skin from infection by bacteria and fungi, and contributes to body odor. These glands are attached to hair follicles.

When your body gets hot or is under stress, sweat glands produce sweat, which evaporates to cool you. Sweat glands are located all over the body but are especially abundant in your palms, soles, forehead, and underarms. The apocrine glands are specialized sweat glands that emit an odor.

Pores, and Sebum
We have pores all over our bodies, tiny holes that contain hair follicles and act as outlets for sweat and sebum to leave the body. Sebum is an oily substance that covers much of our body in a thin protective layer that both regulates body heat and makes it hard for bacteria to settle on the body's surface.

Sebum is made by your body's sebaceous glands, which can be found everywhere on your body except the bottoms of your feet and the palms of your hands. These glands are most prevalent on our faces, backs, chests and groin areas.

Pore size varies, but your genes and your age are two big determinants for how large they'll be. People with large pores tend to have oily skin, and as skin ages, sun damage and the loss of collagen leads to bigger-looking pores. When your pores are clogged with dead skin cells and other debris, they can appear larger, too.

Like the size of our pores, whether our skin is dry or oily is often determined by genetics. Hormones also play an important role. Since our hormones activate sebum production, changes to our hormones can affect the level of oil our skin produces.

In addition to puberty, menstruation and pregnancy also affect women's hormone levels and consequently the production of extra sebum.
Why does that level of oil matter? Because excess oil, combined with dead skin cells and bacteria, can lead to acne.

When oil is unable to exit through the hair follicles because they're clogged with accumulated dead skin cells and sebum, you end up with a breakout. The extra skin cells and sebum form a small blockage beneath the surface of the skin that pushes outward, often in the form of small, upraised red bulges with white centers or what we refer to as pimples.

Our body's other main secretion, sweat, exits the body through two different types of glands. Eccrine glands are the most prevalent and are located all over the body.

The sweat produced by them exits through the skin's pores, and is of the non-stinky variety. Apocrine glands are located in our armpits and groin-anal area. They begin producing sweat during puberty, which exits the body through hair follicles.

Skin Color

**Melanin is a pigment** that is produced by specialized skin cells called keratinocytes. How much you have and how it's distributed determines your skin's tone. *The more melanin you have, the darker your skin will be.*

Hormones and genetics determine how much of the pigment our bodies will produce, which explains the wide variety of skin tones that are present. Even two siblings who share the same parents can have different skin tones.

Melanin performs the important function of absorbing harmful ultraviolet rays from the sun. Our bodies produce extra melanin when we're exposed to sunlight, which is why people tan under the sun (or get burned).

Light-skinned people have a greater tendency to get sunburned than dark-skinned people, as they don't have as much of the ray-absorbing melanin.

Because melanin is sometimes unevenly dispersed throughout the body, freckles can develop, most often in light-skinned people. Freckles are small, flat groupings of melanin-filled cells called melanocytes. Freckles develop through exposure to the sun and can be a range of colors.

Several attempts have been made to classify people's skin tones throughout the years. While other systems have fallen out of use, the Fitzpatrick Skin Type classification system is widely in use today. The system breaks people into six skin types according to hair and eye color, skin tone and propensity to burning under the sun.

How Skin Heals

When your skin gets cut, your body springs into action to heal the wound. First, the body works to limit blood loss by reducing the amount of blood flowing to the wounded area. Proteins in blood, such as fibrin, work with the blood platelets already in place and plasma to form a protective covering called a scab.

While your skin regenerates underneath the protective layer, the scab protects the wound from outside infection.

The wound is gradually healed as new granular skin tissue begins to generate. Starting at the edges of the wound, the new tissue forms and works its way toward the center until it has covered the entirety of the lesion.
Once the wound underneath has sealed itself with another skin layer, the scab will slough off on its own. If the cut or scrape was a shallow one that only affected the outer epidermis layer, then there shouldn't be a scar when your skin heals itself. If the cut went deeper, into the dermis of the skin, then cicatrisation begins as your body moves to create fibrous scar tissue from the granular tissue. In general, the worse the wound, the greater chance that it will result in a scar.

Your body needs three to six weeks to bridge a deep cut, producing a protein called collagen at the site of the wound to repair it. Even after the wound is healed, it can take up to two years for a scar to settle into its permanent appearance.

Scar skin tissue isn't like normal skin tissue. It doesn't have sweat glands or hair growing from it. It's also more vulnerable to ultraviolet rays. Most scars are whitish and lay flat on the surface of your skin. But some scars, such as hypertrophic scars and keloids, take on an odd appearance. Hypertrophic scars are raised at the site of the original wound, reddish and sometimes itchy.

Over time, they can subside. Keloid scars are also raised and red, but they grow past the site of the wound, overtaking normal healthy tissue. Researchers haven't yet been able to determine what causes these abnormal scars to form, but one theory is that they may be caused by changes to the signals sent by cells at the wound site. It seems these cells continue to direct the body to produce more fibrous tissue even after the wound has closed. Laser treatments and cortisone injections are two methods used to treat keloids.

Aging Skin
We've all marveled at the softness of babies' skin, which is so much smoother than our own. There are several structural differences that give babies their soft skin. For one thing, their dermis layer is about 20 to 30 percent thinner than adult skin, which makes it less adaptable and more in need of sheltering [source: Johnson & Johnson].

Babies take in and lose water much more quickly than adults and, because they don't sweat as much, they aren't able to regulate their body's temperature like adults, either. Their skin is also very tender and prone to rashes when irritated. All of that softness comes with a price.

As children grow older, their skin becomes less sensitive. Adolescence is the next step, bringing with it a rush of hormones. Acne is often quick to follow, and may persist into adulthood. The next stop on the timeline of your skin is adulthood.

As we grow older, our skin ages in two ways: intrinsic and extrinsic. Intrinsic aging is what naturally happens to us due to our genes. The epidermis produces new skin cells more and more slowly as our skin cell layer decreases from a wall 20 cells deep to one that's only two skin cells deep [source: Roizen].

The proteins in our skin that give it firmness and elasticity ease up -- our bodies make less collagen, and elastin loses some of its strength. This is why our skin gets thinner and looser.

Intrinsic aging can be affected by external factors, such as smoking. This is known as extrinsic aging. The nicotine in cigarettes, for example, constricts the blood vessels to your skin, which results in less oxygen and fewer vitamins getting where they need to be. Other chemicals in cigarettes break down the collagen and elastin we mentioned earlier.

Another big part of extrinsic aging is sun exposure. Everyone gets wrinkles, little patchworks of lines that crisscross all over our skin. Genetics partly determines just how wrinkly you'll be, but you can help keep lines to a minimum by taking care of your skin. If you're a smoker or a tanning bed enthusiast, it's likely you'll have more wrinkles than someone who isn't.
Photoaging is what dermatologists call the effects of too much skin on your skin. Wrinkles, pigmentation and changes in skin texture are a natural part of intrinsic aging, but they can be made worse by all the UV rays you've soaked up.

Two people may be exactly the same age as far as birth date and yet have skin that makes them look a decade apart. Age spots, for example, also known as liver spots, are a common sight on the skin of older people. These brown, gray or black flat spots are found on the parts of your body that have seen the most sun. Less sun equals less of a chance of age spots.

And just because your skin looks great and healthy in your 20s and bounces back quickly from a summer burn doesn't mean you've seen the last of that willful decision to go without sunblock at the beach. Damage to the skin happens long before you can actually see it.

**Skin Conditions**

- **Rash**: Nearly any change in the skin’s appearance can be called a rash. Most rashes are from simple skin irritation; others result from medical conditions.
- **Dermatitis**: A general term for inflammation of the skin. Atopic dermatitis (a type of eczema) is the most common form.
- **Eczema**: Skin inflammation (dermatitis) causing an itchy rash. Most often, it’s due to an overactive immune system.
- **Psoriasis**: An autoimmune condition that can cause a variety of skin rashes. Silver, scaly plaques on the skin are the most common form.
- **Dandruff**: A scaly condition of the scalp may be caused by seborrheic dermatitis, psoriasis, or eczema.
- **Acne**: The most common skin condition, acne affects over 85% of people at some time in life.
- **Cellulitis**: Inflammation of the dermis and subcutaneous tissues, usually due to an infection. A red, warm, often painful skin rash generally results.
- **Skin abscess (boil or furuncle)**: A localized skin infection creates a collection of pus under the skin. Some abscesses must be opened and drained by a doctor in order to be cured.
- **Rosacea**: A chronic skin condition causing a red rash on the face. Rosacea may look like acne, and is poorly understood.
- **Warts**: A virus infects the skin and causes the skin to grow excessively, creating a wart. Warts may be treated at home with chemicals, duct tape, or freezing, or removed by a physician.
- **Melanoma**: The most dangerous type of skin cancer, melanoma results from sun damage and other causes. A skin biopsy can identify melanoma.
- **Basal cell carcinoma**: The most common type of skin cancer. Basal cell carcinoma is less dangerous than melanoma because it grows and spreads more slowly.
- **Seborrheic keratosis**: A benign, often itchy growth that appears like a “stuck-on” wart. Seborrheic keratoses may be removed by a physician, if bothersome.
- **Actinic keratosis**: A crusty or scaly bump that forms on sun-exposed skin. Actinic keratoses can sometimes progress to cancer.
- **Squamous cell carcinoma**: A common form of skin cancer, squamous cell carcinoma may begin as an ulcer that won’t heal, or an abnormal growth. It usually develops in sun-exposed areas.
- **Herpes**: The herpes viruses HSV-1 and HSV-2 can cause periodic blisters or skin irritation around the lips or the genitals.
- **Hives**: Raised, red, itchy patches on the skin that arise suddenly. Hives usually result from an allergic reaction.
- **Tinea versicolor**: A benign fungal skin infection creates pale areas of low pigmentation on the skin.
- **Viral exanthem**: Many viral infections can cause a red rash affecting large areas of the skin. This is especially common in children.
- **Shingles (herpes zoster)**: Caused by the chickenpox virus, shingles is a painful rash on one side of the body. A new adult vaccine can prevent shingles in most people.
- **Scabies**: Tiny mites that burrow into the skin cause scabies. An intensely itchy rash in the webs of fingers, wrists, elbows, and buttocks is typical of scabies.
- **Ringworm**: A fungal skin infection (also called tinea). The characteristic rings it creates are not due to worms.

**Epidermis**

The epidermis is composed of the outermost layers of the skin. It forms a protective barrier over the body's surface, responsible for keeping water in the body and preventing pathogens from entering, and is a stratified squamous epithelium, composed of proliferating basal and differentiated suprabasal keratinocytes.

Keratinocytes are the major cells, constituting 95% of the epidermis, while Merkel cells, melanocytes and Langerhans cells are also present. The epidermis can be further subdivided into the following strata or layers (beginning with the outermost layer):

- Stratum corneum
- Stratum lucidum (only in palms and soles)
- Stratum granulosum
- Stratum spinosum
- Stratum germinativum (also called the stratum basale)

Keratinocytes in the stratum basale proliferate through mitosis and the daughter cells move up the strata changing shape and composition as they undergo multiple stages of cell differentiation to eventually become anucleated.

During that process, keratinocytes will become highly organized, forming cellular junctions (desmosomes) between each other and secreting keratin proteins and lipids which contribute to the formation of an extracellular matrix and provide mechanical strength to the skin. Keratinocytes from the stratum corneum are eventually shed from the surface (desquamation).

The epidermis contains no blood vessels, and cells in the deepest layers are nourished by diffusion from blood capillaries extending to the upper layers of the dermis.

**Basement membrane**

The epidermis and dermis are separated by a thin sheet of fibers called the basement membrane, and is made through the action of both tissues.

The basement membrane controls the traffic of the cells and molecules between the dermis and epidermis but also serves, through the binding of a variety of cytokines and growth factors, as a reservoir for their controlled release during physiological remodeling or repair processes.
Dermis

The dermis is the layer of skin beneath the epidermis that consists of connective tissue and cushions the body from stress and strain. The dermis provides tensile strength and elasticity to the skin through an extracellular matrix composed of collagen fibrils, microfibrils, and elastic fibers, embedded in hyaluronan and proteoglycans.

Skin proteoglycans are varied and have very specific locations. For example, hyaluronan, versican and decorin are present throughout the dermis and epidermis extracellular matrix, whereas biglycan and perlecan are only found in the epidermis.

It harbors many mechanoreceptors (nerve endings) that provide the sense of touch and heat through nociceptors and thermoreceptors. It also contains the hair follicles, sweat glands, sebaceous glands, apocrine glands, lymphatic vessels and blood vessels.

The blood vessels in the dermis provide nourishment and waste removal from its own cells as well as for the epidermis. The dermis is tightly connected to the epidermis through a basement membrane and is structurally divided into two areas: a superficial area adjacent to the epidermis, called the papillary region, and a deep thicker area known as the reticular region.

Papillary region

The papillary region is composed of loose areolar connective tissue. This is named for its fingerlike projections called papillae that extend toward the epidermis. The papillae provide the dermis with a "bumpy" surface that interdigitates with the epidermis, strengthening the connection between the two layers of skin.

Reticular region

The reticular region lies deep in the papillary region and is usually much thicker. It is composed of dense irregular connective tissue, and receives its name from the dense concentration of collagenous, elastic, and reticular fibers that weave throughout it. These protein fibers give the dermis its properties of strength, extensibility, and elasticity. Also located within the reticular region are the roots of the hair, sebaceous glands, sweat glands, receptors, nails, and blood vessels.

Subcutaneous tissue

The subcutaneous tissue (also hypodermis) is not part of the skin, and lies below the dermis. Its purpose is to attach the skin to underlying bone and muscle as well as supplying it with blood vessels and nerves. It consists of loose connective tissue and elastin.

The main cell types are fibroblasts, macrophages and adipocytes (the subcutaneous tissue contains 50% of body fat). Fat serves as padding and insulation for the body.

Microorganisms like Staphylococcus epidermidis colonize the skin surface. The density of skin flora depends on region of the skin. The disinfected skin surface gets recolonized from bacteria residing in the deeper areas of the hair follicle, gut and urogenital openings.

Composition of Nails

The nails are composed largely of keratin, a hardened protein (that is also in skin and hair). As new cells grow in the matrix, the older cells are pushed out, compacted and take on the familiar flattened, hardened form of the fingernail. Fingernails grow faster than toenails.
A fingernail is produced by living skin cells in the finger. A fingernail consists of several parts including the nail plate (the visible part of the nail), the nail bed (the skin beneath the nail plate), the cuticle (the tissue that overlaps the plate and rims the base of the nail), the nail folds (the skin folds that frame and support the nail on three sides), the lunula (the whitish half-moon at the base of the nail) and the matrix (the hidden part of the nail unit under the cuticle).

**Fingernails grow from the matrix.** The nails are composed largely of keratin, a hardened protein (that is also in skin and hair). As new cells grow in the matrix, the older cells are pushed out, compacted and take on the familiar flattened, hardened form of the fingernail.

The average growth rate for nails is 0.1 mm each day (or 1 centimeter in 100 days). The exact rate of nail growth depends on numerous factors including the age and sex of the individual and the time of year. Fingernails generally grow faster in young people, in males, and in the summer.

Fingernails grow faster than toenails. The fingernails on the right hand of a righthanded person grow faster than those on their left hand, and vice versa.

In order to understand both how to keep your nails healthy and how they can act as an indicator of health problems, first you have to know that fingernails are made of layers of a protein called keratin.

This protein is also found in your skin and hair.

- The nail plate is the part of the nail that you can see.
- The skin around your nails is referred to as nail folds.
- The skin that is covered by your nail is known as a nail bed.
- A cuticle is the tissue that covers the bottom of your nail to protect newly formed keratin as your nail grows.
- The white half-moon seen at the base of your nail is called a lunula.

Changes and discoloration to any parts of your fingernails can indicate that something is wrong with your nail health, or even your overall body health. For example, slow or halted nail growth could indicate a health concern that involves more than just your fingertips.

On average, fingernails grow at a rate of about 0.08 to 0.12 inches (2 to 3 millimeters) a month. Therefore, it takes about four to six months for a fingernail to fully regenerate. Interestingly, the nails of the hand you use most often grow slightly faster than the nails of your non-dominant hand.

**Fingernail Problems**

If you are regularly exposed to water, soap or harsh chemicals, you may notice that your nails have become soft or brittle, and are prone to easy breakage. This kind of damage can be prevented by wearing protective gloves while working with water, soap and harsh chemicals.

Another innocuous condition is the development of vertical ridges, which typically appear as you grow older. Your nails may also develop color changes due to injuries. Little white marks are common following minor injuries, and your nails might turn black or purplish if they are injured more seriously. These discolorations usually go away as the injury heals and the nail grows out.

Other conditions may require intervention on your part. Hangnails, for example, can be painful, as can ingrown nails which are when the nail grows into the surrounding skin. Improper care of these types of problems may lead to infections.
Some injuries may cause the nail to detach from the nail bed. In such cases, there is nothing to be done other than keeping the area clean and protected -- about the nail until the new nail starts to grow back, which typically takes several months.

Although the damage is self-inflicted and only you can prevent it, habitual nail biting is definitely a problem for your nails. Nail biting can lead to serious nail health concerns, such as bacterial infections particularly when you bite your nails down to the point that they bleed. While most fingernail problems are minor and can be taken care of with a little care and attention, others can be a telltale sign of more serious issues.

Nail discoloration, such as yellow nails, may indicate a respiratory problem, such as chronic bronchitis. Yellow nails can also indicate systemic issues, such as lymphedema of limbs, which is a buildup of lymph fluid that causes your limbs to swell, or pleural effusion, which is when fluid builds up around your lungs and chest cavity.

Nails that are half white and half pink may indicate renal failure. Nails that turn black, brown or purple without being injured may point to melanoma. And if your nail beds are pale, it can indicate that you are suffering from anemia.

For those with diabetes, the disease can affect many parts of the body, including the nails. Untreated or unchecked diabetes can reveal nails that are yellowish, with a slight blush at the base.

Tumors and warts can form under fingernails. As the tumor or wart grows, it can affect the growth of the nail and the surrounding skin.

Although unusual, nails can detach from the nail bed without apparent cause. This could be due to a condition called psoriatic nails. About 50 percent of people with psoriasis (a skin disease that develops when skin cells grow too quickly and form scaly patches on the skin) have exhibited psoriatic nails.

Symptoms of psoriatic nails include pitted nails, white pockets under the nail plate that indicate air bubbles, crumbling of the nail plate, or complete nail plate detachment or loss. Psoriatic nails are often associated with psoriatic arthritis.

**Parts of the nail**

**The matrix**, sometimes called the matrix unguis, keratogenous membrane, nail matrix, or onychostroma, is the tissue (or germinal matrix) which the nail protects. It is the part of the nail bed that is beneath the nail and contains nerves, lymph and blood vessels.

**The matrix is responsible for producing cells that become the nail plate.** The width and thickness of the nail plate is determined by the size, length, and thickness of the matrix, while the shape of the fingertip itself shows if the nail plate is flat, arched, or hooked.

The matrix will continue to grow as long as it receives nutrition and remains in a healthy condition. As new nail plate cells are made, they push older nail plate cells forward; and in this way older cells become compressed, flat, and translucent. This makes the capillaries in the nail bed below visible, resulting in a pink color.

**The lunula ("small moon")** is the visible part of the matrix, the whitish crescent-shaped base of the visible nail. The lunula can best be seen in the thumb and may not be visible in the little finger.
The nail bed is the skin beneath the nail plate. Like all skin, it is made of two types of tissues: the deeper dermis, the living tissue which includes capillaries and glands, and the epidermis, the layer just beneath the nail plate, which moves toward the finger tip with the plate. The epidermis is attached to the dermis by tiny longitudinal "grooves" called matrix crests (cristae matricis unguis). In old age, the nail plate becomes thinner, and these grooves become more visible.

The nail sinus (sinus unguis) is where the nail root is; i.e. the base of the nail underneath the skin. It originates from the actively growing tissue below, the matrix.

The nail plate (corpus unguis) is the hard part of the nail, made of translucent keratin protein. Several layers of dead, compacted cells cause the nail to be strong but flexible. Its (transverse) shape is determined by the form of the underlying bone. In common usage, the word nail often refers to this part only.

The free edge (margo liber) or distal edge is the anterior margin of the nail plate corresponding to the abrasive or cutting edge of the nail.

The hyponychium (informally known as the "quick") is the epithelium located beneath the nail plate at the junction between the free edge and the skin of the fingertip. It forms a seal that protects the nail bed.

The onychodermal band is the seal between the nail plate and the hyponychium. It is just under the free edge, in that portion of the nail where the nail bed ends and can be recognized in fair-skinned people by its glassy, grayish color. It is not visible in some individuals while it is highly prominent on others.

Together, the eponychium and the cuticle form a protective seal.

The cuticle is the semi-circular layer of non-living, almost invisible dead skin cells that "ride out on" and cover the back of the visible nail plate while the eponychium is the fold of skin cells that produces the cuticle.

The eponychium is a small band of living cells (epithelium) that extends from the posterior nail wall onto the base of the nail. The eponychium is the end of the proximal fold that folds back upon itself to shed an epidermal layer of skin onto the newly formed nail plate.

The perionyx is the projecting edge of the eponychium covering the proximal strip of the lunula.

The nail wall (vallum unguis) is the cutaneous fold overlapping the sides and proximal end of the nail.

The lateral margin (margo lateralis) lies beneath the nail wall on the sides of the nail, and the nail groove or fold (sulcus matricis unguis) are the cutaneous slits into which the lateral margins are embedded.

The paronychia is the soft tissue border around the nail, and paronychia is an infection in this area.

Function

A healthy fingernail has the function of protecting the distal phalanx, the fingertip, and the surrounding soft tissues from injuries.
It also serves to enhance precise delicate movements of the distal digits through counter-pressure exerted on the pulp of the finger.

The nail then acts as a counter-force when the end of the finger touches an object, thereby enhancing the sensitivity of the fingertip, though the nail itself has no nerve endings.

Finally, the nail functions as a tool, enabling for instance a so-called "extended precision grip" (e.g. pulling out a splinter in one's finger), and certain cutting or scraping actions.

**Growth**

The growing part of the nail is under the skin at the nail's proximal end under the epidermis, which is the only living part of a nail. In mammals, the growth rate of nails is related to the length of the terminal phalanges (outermost finger bones). Thus, in humans, the nail of the index finger grows faster than that of the little finger; and fingernails **grow up to four times faster than toenails**.

Nails grow at an average rate of 3mm (0.12in) a month. Fingernails require three to six months to regrow completely, and toenails require twelve to eighteen months. Actual growth rate is dependent upon age, sex, season, exercise level, diet, and hereditary factors. Contrary to popular belief, nails do not continue to grow after death; the skin dehydrates and tightens, making the nails (and hair) appear to grow.

**Permeability**

The nail is often considered an impermeable barrier, but this is not true. In fact, it is much more permeable than the skin, and **the composition of the nail includes 7–12% water**.

This permeability has implications for penetration by harmful and medicinal substances; in particular cosmetics applied to the nails can pose a risk.

Water can penetrate the nail as can many other substances including paraquat, a fast acting herbicide that is harmful to humans, urea which is often an ingredient in creams and lotions meant for use on hands and fingers, and several fungicidal agents such as salicylic acid, miconazole branded Monistat, natamycin; and sodium hypochlorite which is the active ingredient in common household bleach (but usually only in 2–3% concentration).

**Clinical significance**

Deep transverse grooves known as Beau's lines may form across the nails (not along the nail from cuticle to tip) and are usually a natural consequence of aging, though they may result from disease.

Discoloration, thinning, thickening, brittleness, splitting, grooves, Mees' lines, small white spots, receded lunula, clubbing (convex), flatness, and spooning (concave) can indicate illness in other areas of the body, nutrient deficiencies, drug reaction or poisoning, or merely local injury.

Nails can also become **thickened (onychogryphosis)**, **loosened (onycholysis)**, infected with **fungus (onychomycosis)**, or **degenerate (onychodystrophy)**.

A common nail disorder is an **ingrowing toenail (onychocryptosis)**.

**Health**

Nail disease must be evaluated by a dermatologist.
Fun Facts - Length records
Guinness World Records began tracking record fingernail lengths in 1955, when a Chinese priest was listed as having fingernails 1 foot 10.75 inches long. The current record-holder for men, according to Guinness, is Shridhar Chillal from India who set the record in 1998 with a total of 20 feet 2.25 inches of nails on his left hand. His longest nail, on his thumb, was 4 feet 9.6 inches long. The record-holder for women is Lee Redmond of the U.S., who set the record in 2001 and as of 2008 had nails with a total length on both hands of 28 feet, with the longest nail on her right thumb at 2 feet 11 inches.

Lesson 6 Summary
In this study, we have reviewed many facts about the chemical makeup of hair, skin, and nails. We have identified specific chemical elements, growth phases, conditions, skin layers, glands, and facts about pigmentation. We have also reviewed self healing qualities of the skin and aspects of aging. We have also reviewed all the parts of the nail, nail health and nail growth. For our next topic of study, we will review Environmental issues.
Lesson 7: Environmental Issues (1 hour)

Outline
• Health Hazards In Nail Salons
• Chemical Exposure
• Posture
• Injury Prevention
• Environmental Safety and Health Practices
• EPA's Safer Choice Program

Learning objectives:
After completing this lesson you will be able to:
• list hazardous chemicals found in nail salon products
• describe packaging information regarding chemicals
• describe ways to prevent chemical exposure
• identify safe work practices
• list self protection techniques
• identify protective gear
• describe awkward positions
• define repetitive movements
• describe ways to improve body ergonomics
• list ways to prevent lifting and motion injury
• identify additional environmental safety and health practices
• list chemical ingredients of skin conditioners that have been deemed “safer” by the EPA

Introduction
In this important lesson, we will review Health Hazards In Nail Salons, Chemical Exposure, Posture, Injury Prevention and Environmental Safety and Health Practices. To stay updated on the latest news regarding these issues, contact the Environmental Protection Agency and the Occupational Safety and Health Administration.

Health Hazards In Nail Salons
Nail salons are mostly small businesses that employ or contract with trained professionals to provide clients with nail services including, but not limited to, nail filing and polishing, artificial nail application, and other hand- and foot-care treatments. More than 375,000 nail technicians working in salons across the United States face possible health hazards every day. Workers exposed to chemicals found in glues, polishes, removers, emollients and other salon products may experience negative health effects such as asthma and other respiratory illnesses, skin disorders (e.g. allergic contact dermatitis), liver disease, reproductive loss, and cancer. Additionally, workers often endure muscle strains from awkward positions or repetitive motions; and have a high risk for infection from contact with client skin, nails, or blood.

Products used in nail salons may contain chemicals that can affect worker health. Using these products can expose nail salon workers to chemicals. Workers may breathe in the harmful vapors, dusts, or mists; get the product on their skin or in their eyes; or swallow the product if it is accidentally transferred onto food or cigarettes.
Working in a nail salon exposes workers to many different chemicals each day. These exposures can "add up," especially when many products are being used at the same time, the products are used day after day, or when there is poor ventilation in the salon. When this happens, workers can get sick. Many nail salon workers also work long hours, which adds to the amount of time they may be exposed to chemicals. These types of exposures may make workers sick immediately or cause effects over time.

Chemical exposures can be controlled. The information below will help you find out what chemicals are in your salon’s products and what steps you can take to reduce exposures and protect worker health. You can find more specific information about the chemicals in your workplace from the safety data sheets (SDS) that manufacturers are required to provide for potentially hazardous salon products.

Hazardous Chemicals Found in Nail Salon Products

Products used in nail salons can contain many chemicals that can have serious health effects.

Some potentially hazardous chemicals, the types of products they can be found in, and how they can affect a worker include:

- **Acetone** (nail polish remover): headaches; dizziness; and irritated eyes, skin, and throat.
- **Acetonitrile** (fingernail glue remover): irritated nose and throat; breathing problems; nausea; vomiting; weakness; and exhaustion.
- **Butyl acetate** (nail polish, nail polish remover): headaches and irritated eyes, skin, nose, mouth, and throat.
- **Dibutyl phthalate (DBP)**, (nail polish): nausea and irritated eyes, skin, nose, mouth, and throat. Long-term exposures to high concentrations may cause other serious effects.
- **Ethyl acetate** (nail polish, nail polish remover, fingernail glue): irritated eyes, stomach, skin, nose, mouth, and throat; high levels can cause fainting.
- **Ethyl methacrylate (EMA)**, (artificial nail liquid): asthma; irritated eyes, skin, nose, and mouth; difficulty concentrating. Exposures while pregnant may affect your child.
- **Formaldehyde** (nail polish, nail hardener): difficulty breathing, including coughing, asthma-like attacks, and wheezing; allergic reactions; irritated eyes, skin, and throat. Formaldehyde can cause cancer.
- **Isopropyl acetate** (nail polish, nail polish remover): sleepiness, and irritated eyes, nose, and throat.
- **Methacrylic acid** (nail primer): skin burns and irritated eyes, skin, nose, mouth, and throat. At higher concentrations, this chemical can cause difficulty breathing.
- **Methyl methacrylate (MMA)**, (artificial nail products, though banned for use in many states): asthma; irritated eyes, skin, nose, and mouth; difficulty concentrating; loss of smell.
- **Quaternary ammonium compounds** (disinfectants): irritated skin and nose and may cause asthma.
- Toluene, formaldehyde, and dibutyl phthalate are sometimes referred to in the industry as the "toxic trio".
- **Toluene** (nail polish, fingernail glue): dry or cracked skin; headaches, dizziness, and numbness; irritated eyes, nose, throat, and lungs; damage to liver and kidneys; and harm to unborn children during pregnancy.
Steps to Prevent Exposures and Protect Worker Health

In a study run by the California Department of Toxic Substances Control, a limited number of nail salon products claiming to be free of one or more of the toxic trio tested positive for the chemicals of which they claimed to be free.

Employers and workers can take steps to protect health when working with products that contain potentially hazardous chemicals.

Choose Safer Products and Read about the Products Being Used

• Whenever possible, use products with the least hazardous chemicals in them.
  • 3-free: Some products now claim to be made without the "toxic trio" (toluene, formaldehyde, and dibutyl phthalate). These products are called "3-free" products.
  • Acid free: Some primers claim to be made without chemicals like methacrylic acid. These are labeled "acid free."
• For any product used in your salon, be aware of the health effects it may cause and how to prevent overexposure.
• Always read product labels and SDSs and follow manufacturers' instructions when using all nail salon products, including those labeled as "free" of hazardous chemicals. SDSs may not contain all of the information needed to adequately protect yourself, e.g., the manufacturer may state "wear impervious gloves" without specifying the type of glove material needed.

Ventilate the Room to Remove Chemicals in the Air

Ventilation is the best way to lower the level of chemicals in a salon.

NIOSH laboratory tests indicate that exhaust ventilation systems may reduce worker chemical exposure in nail salons by at least 50%.

These steps really help improve worker health:

• Let in fresh air, when possible, by opening doors and windows. If the salon has a ceiling vent, it should be turned on and working.
• Always keep the nail salon's exhaust system on.
• If your salon does not have an exhaust system, always keep the heating, ventilation, and air conditioning (HVAC) system on during work hours. The HVAC thermostat fan switch should always be in the "on" position (not "auto") so that it runs even when the heat or air conditioner is off. The salon owner should have a HVAC contractor clean the HVAC system and replace the filters at least once a year.
• Install exhaust fans wherever possible. Place fans near open doors or windows. Fans should pull air in one end of the salon and push it out of the other end.
• If the salon has ventilated tables, make sure they are turned on. Also, change the charcoal filters at least once a month and clean out the catch basin at least once a week.
• Consider using portable ventilation machines to remove dust and chemicals directly from the work area.
Use Safe Work Practices to Avoid Regular and Accidental Exposures

- Label chemicals moved from large bottles to smaller bottles with the information from the manufacturer's label.
- Close bottles tightly when they are not being used so the product does not spill or get into the air.
- Use metal trash cans with tight, self-closing lids to keep the nail products soaked on cotton balls and other trash from evaporating and getting into the salon's air.
  - Put cotton balls and other soaked materials into the trash cans immediately.
  - If you do not have metal trash cans with self-closing lids, put cotton balls and soaked materials in a sealed bag before putting them in the trash can and keep the trash covered.
  - Empty trash cans often and remove from the work area to the outside garbage at the end of each day.
- Use only the amount of product you need to perform services. When possible, do not keep extra product at workstations.
- Follow instructions for safely disposing of used chemicals. **DO NOT** pour them down the sink or toilet, throw them on the ground or down outside drains, or pour them onto cotton balls.
  - Some chemicals have specific disposal requirements. For example, used liquid acetone must be saved in a fire department-approved metal container and disposed of as hazardous waste.
- Wash your hands before eating, drinking, applying cosmetics, and smoking.
- Keep food and drink covered at all times, and do not store or eat food in work areas.

Keep Products Off of Skin and Out of Eyes

- Wear long-sleeved shirts to protect your arms and pants or skirts that are at least knee-length to protect your lap from acrylic nail and other dusts.
- Wash your hands before and after working on clients; before eating, drinking, applying cosmetics, or smoking; and after handling or transferring products.
- Wear goggles and the appropriate type of disposable gloves when handling and transferring products. For example, nitrile gloves protect against many chemicals used in nail salon products, but latex or vinyl gloves are appropriate when handling acetone.
- Replace gloves immediately if there are cuts, tears, or holes in them.
- Cover and protect cuts or cracks in your skin. Damaged skin can increase chemical absorption and exposure.
- Do not continue to use a product if there are visible signs of skin irritation immediately after exposure to the product or from previous exposure to the product.
  - Note that if your hands display signs of irritation, you should examine your gloves to make sure they are intact and properly protecting your skin.

Determine if Respiratory Protection if Needed

*Do not* use surgical masks. These types of masks, even when stuffed with tissues, do not protect workers from breathing in gases, vapors, or particulates.
Respirators protect against breathing in hazardous gases and vapors (such as formaldehyde) and particulates (such as dusts, germs, and viruses). Employers must evaluate worker exposure to dust and/or chemical vapors, determine if the levels in the work place are a risk to workers, and decide if respirators are required to protect workers. Small employers can get help with this process from OSHA's free On-site Consultation Program.

Other groups that can help include an employer's private insurance carrier, professional associations, and private industrial hygiene consulting firms.

Most work in a nail salon will not require respiratory protection; good ventilation and good work practices should keep exposure to gases, vapors, and particulates to a minimum. However, when respiratory protection is required, employers must implement a respiratory protection program that meets the requirements in OSHA's Respiratory Protection Standard, 29 CFR 1910.134.

This program must include proper respirator selection, fit testing, medical evaluations, and training.

Workers may also decide that they want to wear a respirator while transferring chemicals or buffing and filing nails, in which case the employer may also have responsibilities under OSHA's Respiratory Protection standard.

Types of Respirators that May Be Used in Nail Salons

- **Filtering facepiece respirators (often called "N95s" or dust masks)**: Only use N95s that are NIOSH-approved. N95s protect workers from particulates, such as dust, viruses, and other germs, and are helpful when buffing or filing nails or using acrylic power. They do not protect workers from vapors or gases, such as hazardous chemicals. Employers who allow their employees to wear this type of respirator voluntarily must give their employees Appendix D of the OSHA Respiratory Protection Standard. This appendix has certain requirements that include training and medical evaluation.

- **Half-facepiece elastomeric respirators with cartridges**: These respirators can protect workers from hazardous gases and vapors (such as formaldehyde) when performing tasks such as moving chemicals from large bottles to smaller bottles and cleaning up large spills. Using this type of mask requires that the employer implement a respiratory protection program under OSHA's Respiratory Protection Standard, 29 CFR 1910.134. This standard has certain requirements that include training and fit testing. In addition, employers must evaluate the appropriate cartridge for the job, provide the cartridge to workers, and inform workers of how and when to change cartridges.

Muscle and Joint Problems from Awkward Postures and Repetitive Motions

Leaning over a work table for a long time; repetitive movements like filing and buffing nails; and resting hands, wrists, and forearms and/or elbows against hard surfaces or sharp edges of work tables are common causes of injury to workers' muscles, bones, joints, ligaments, tendons, and nerves.

These common causes are often called ergonomic hazards and can lead to aches and pains that workers may feel while at work or at home. Ergonomics is the study of the work environment to make work more comfortable and efficient. Good ergonomic practices can reduce stress to the body and avoid hazards that may cause aches and pains.
Steps to Reduce Ergonomic Hazards

• Use an adjustable chair that gives proper back support and can be raised and lowered. Position the body so that feet stay flat on the floor and use a footrest if needed.
• Make sure that there is enough space between the back of the knees and the front edge of the seat to help ensure proper blood flow to the legs.
• Adjust the lighting to see without bending over a work table.
• Raise and position the client's hand or foot to avoid bending over.
• Avoid resting hands, wrists, forearms, and elbows against hard and/or sharp edges of work tables.
• Put a towel or foam pad on the work table edge for a softer surface for the arms.
• Put soft pads on tool handles to make them larger and easier to hold.
• Take frequent breaks if possible. Changing positions and doing a different task is also helpful.
• Pace the work. When working too fast, the body can become tense, which could cause muscle pain.
• Do gentle stretching exercises in between sessions with clients to relax and give muscles and joints a chance to move.

Nail professionals can use these basic tips to prevent and/or eliminate injuries, pain, or discomfort associated with salon work. Working ergonomically will create an optimal environment by eliminating muscle strain that will benefit both your physical and psychological health.

Improving Body Ergonomics

Posture and position are important, whether you are sitting at the nail table or in front of your client giving a pedicure. Paying attention to how you perform these tasks can prevent many injuries, e.g. lower back, neck, wrist and shoulder pain.

1. Keep both the task and tools directly in front, do not favor or lean to one side.
2. Avoid reaching more than 12 inches and keep forearms parallel with the floor (neutral position) at the side.
3. Choose a high quality, swivel chair with a seat at least one inch wider on each side than hips/thighs and properly padded so that it doesn’t create a pressure points, e.g. behind the knees.
4. When sitting always keep the spine (back) in a neutral position e.g. a 90 degree angle, not leaning forward or backward. The head, neck, and body should face forward without twisting or hunching. The back rest should provide support for lower back.
5. Avoid twisting the neck, e.g. holding cell phone with the head. The head should be kept upright and shoulders relaxed.
6. Avoid leaning too far forward while performing manicures or pedicures. Do not bend the back forward more than 30 degrees or the neck more than 45 degrees.
7. Raise and position the client’s hands or legs/feet to prevent bending/stretching forward or supporting feet with your own body. A recliner chair works well and supports the client’s legs in the best position for servicing.
8. Adjust chair height so your thighs are parallel to the floor with your feet flat. If necessary, use a footrest to keep the feet flat and don’t cross the legs or sit sideways in the chair.
9. Wrist and hands should be kept straight, not bent or twisted sideways.
10. When holding a client hand or finger, position it so that the pressure from grasping is minimized; a relaxed, minimal hold will lessen the strain.
11. Gently move your client’s hand rather than tilting your head. In order to prevent neck strain, consider placing a client’s hand on a rest that elevates the hand to prevent forward tilt of the head and neck.

12. Minimize pressure points, avoid placing arms on the edge of the table and use a foam tube/padding on the sharp edge of the nail table or as an arm/elbow rest.

**Preventing Lifting and Motion Injury**

Understanding how to lift and move correctly are important keys to preventing injury. Repetitive motion or cumulative trauma disorders can be caused by using the same motions over and over, placing strain on the body, joint, muscles, nerves, tendons, ligaments, or soft tissue. Problems can also result from incorrect twisting.

1. To prevent back injury, salon professionals should avoid lifting anything heavy, e.g. more than 15 lbs (7 kg)
2. When lifting, tuck in the stomach and use abdominal muscles and legs, instead of the back muscles.
3. Avoid overextending arms, e.g. reaching over your head to put something on a shelf. Use a step stool or ladder.
4. Sit with the client’s foot directly in front of you and keep it close to the body when lifting.
5. Use an adjustable pedi-chair or place the client’s foot on a pillow raised to just above elbow level.
6. While performing a manicure or pedicure, minimal force should be used. If more force is needed, it should only be done for short time periods, and then rest.
7. When using tools, minimize strong gripping or pinching and take rest breaks. Use padded files and tools to decrease the need to use a hard pinch or grip.
8. Equipment should properly fit the hand and kept in optimal condition, e.g., sharpen nippers.
9. Keep repetitive motions to a minimum, e.g. filing, and take short rest breaks to prevent a repetitive motion disorder.
10. Avoid repetitive flexing of the wrist by holding it straight. Bend elbows and shoulders rather than your wrist.
11. Avoid using electric files for extended periods without rest breaks since even this minimum vibration can contribute to injury.

**Other Environmental Safety and Health Practices**

1. Using lighting bright enough for the task, but avoiding too much glare will reduce eyestrain.
2. Blink frequently or use eye drops to keep eyes moist and occasionally look away from subject to prevent eye fatigue.
3. Take frequent breaks, change positions frequently and don’t hold any posture or position for long periods.
4. Use continual flowing movements when performing massage techniques to keep your muscles from tightening and becoming sore.
5. When massaging, use the heel of your hand and pad of your thumb since they are stronger than your fingers and be ambidextrous; use both hands equally.
6. Slow down, if necessary, to avoid injury, pain, discomfort and eliminate unnecessary steps.
7. Don’t over apply artificial nail products; the more you apply, the more you have to file.
8. Using a new file on each client will reduce your muscle strain and save time.
9. If taking a break isn’t possible, do gentle stretching motion in between clients; stretch the neck, raise arms and stretch, open hands and stretch fingers, stretch back and rotate wrists.
10. Hand washing between clients is considered a necessary break and a great time to stretch. Always pay attention to discomfort.

11. Don’t ignore pain; take steps to alleviate it and develop a regular routine for stretching. Try stretching between clients, or change position between clients.

12. If pain or discomfort continues, seek the advice of a medical professional.

13. A regular exercise program that includes core stability exercises may reduce the risk of workplace injuries. Consult your physician before beginning an exercise program.

**EPA's Safer Choice Program** was developed to give information about alternatives to hazardous chemicals.

**Environmentally Safe Products**
When using products such as skin conditioners on yourself or clients, it is good to choose products from the list that the EPA has posted as being “Safer Chemical Ingredients”.

**Safer Chemical Ingredients List**
- The listed chemicals are safer alternatives, grouped by their functional-use class.
- Chemicals are marked as a green circle, green half-circle, yellow triangle, or gray square.
- This list includes many of the chemicals evaluated through the Safer Choice Program. It does not include confidential chemicals. There may be chemicals not included in this list that are also safer.

### Skin Conditioning Agents

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<th>Code</th>
<th>Common Name</th>
<th>CAS Registry Number</th>
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<td>Fats and Glyceridic oils, avocado</td>
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<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Fats and Glyceridic oils, rice bran</td>
<td>68553-81-1</td>
<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Fats and Glyceridic oils, sesame</td>
<td>8008-74-0</td>
<td>Emollients; Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Glucoheptanoic acid</td>
<td>23351-51-1</td>
<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Glycerides, C8-18 and C18-unsatd.</td>
<td>67701-28-4</td>
<td>Emollients; Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Grape seed oil</td>
<td>85594-37-2</td>
<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>L-Methionine</td>
<td>63-68-3</td>
<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Limnanthes alba (meadowfoam) seed oil</td>
<td>153065-40-8</td>
<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Linseed oil</td>
<td>8001-26-1</td>
<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Macadamia integrifolia seed oil</td>
<td>129811-19-4</td>
<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Methyl laurate</td>
<td>111-82-0</td>
<td>Emollients; Skin Conditioning Agents; Solvents</td>
<td></td>
</tr>
<tr>
<td>Oenothera biennis (evening primrose) oil</td>
<td>90028-66-3</td>
<td>Emollients; Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Oils, oat</td>
<td>106457-91-4</td>
<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Oils, wheat</td>
<td>68917-73-7</td>
<td>Emollients; Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Panthothenic acid</td>
<td>79-83-4</td>
<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Peanut oil</td>
<td>8002-03-7</td>
<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Pistacia vera seed oil</td>
<td>90082-81-8</td>
<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Polyglycerol</td>
<td>25618-55-7</td>
<td>Processing Aids and Additives; Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Potassium gluconate</td>
<td>299-27-4</td>
<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Prunus amerniaca (apricot) kernel oil</td>
<td>72869-69-3</td>
<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Prunus amygdalus dulcis (sweet almond) oil</td>
<td>8007-69-0</td>
<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Prunus armeniaca (apricot) kernel oil</td>
<td>68650-44-2</td>
<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Safflower oil</td>
<td>8001-23-8</td>
<td>Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Squalane</td>
<td>111-01-3</td>
<td>Emollients; Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Sunflower oil</td>
<td>8001-21-6</td>
<td>Emollients; Skin Conditioning Agents</td>
<td></td>
</tr>
<tr>
<td>Code</td>
<td>Common Name</td>
<td>CAS Registry Number</td>
<td>Functional Use</td>
</tr>
<tr>
<td>------</td>
<td>--------------------------------------------------</td>
<td>---------------------</td>
<td>----------------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>Theobroma grandiflorum seed butter</td>
<td>394236-97-6</td>
<td>Skin Conditioning Agents</td>
</tr>
<tr>
<td></td>
<td>Triglycerol</td>
<td>56090-54-1</td>
<td>Processing Aids and Additives; Skin Conditioning Agents</td>
</tr>
<tr>
<td></td>
<td>Waxes and Waxy substances, jojoba</td>
<td>61789-91-1</td>
<td>Processing Aids and Additives; Skin Conditioning Agents</td>
</tr>
</tbody>
</table>

**Lesson 7 Summary**

In this lesson we have reviewed some of the most important aspects of issues as it pertains to the personal care service worker's environment. We have discussed Health Hazards In Nail Salons, the risk of Chemical Exposure, importance elements of Posture, Injury Prevention, and lastly Environmental Safety and Health Practices and the EPA's Safer Choice Program. Please continue to stay updated on current information provided by the Environmental Protection Agency regarding these and other important topics regarding our environment and personal safety.
Lesson 8: Employment as a Salon Professional (2 hours)

Outline

Keys to Successful Employment
a. Self-evaluation
b. The resume
c. Establishment evaluation
d. Job interview
e. Prospering in the salon

Learning objectives
After completing this lesson you will be able to:
• Identify basic elements in the practice of self-evaluation
• Define the fundamental components of a well planned resume and portfolio
• Explain how to evaluate prospective establishments
• List inclusions of a successful job interview
• List key principles of possessing a team mentality

Introduction
The purpose of this study module is to review the principles, practices and theories of employment as a salon professional. We will study evaluation techniques regarding yourself, your goals and your future employer. We will put into action, a plan of how to gain employment, as well as analyze your ability to grow and prosper as a new employee. Using the module activities you will practice these principles as we learn the steps to becoming successfully employed and being prosperous for many years to come.

Keys to Successful Employment
Whether a veteran as a salon professional or a beginner, it is a good idea to routinely evaluate yourself through personal inventory of your characteristics and behaviors as a salon employee. We all have our own personal strengths as well as weaknesses. We must perform a self-evaluation for ourselves by making a checklist to see how we measure up.

Through honest evaluation, we can determine those areas in which we can improve upon to become a better employee. It is a good idea to give consideration to the things we expect of ourselves as well as the things that others expect of us. Not only should we consider our skills and abilities as it pertains to quality of service but also our abilities as it pertains to employment.

a. Self-evaluation
We must consider personal characteristics such as our willingness to be committed to excellence, our willingness to get along well with fellow employees and to be dependable team players. All of these things and more lead to successful employment as a salon professional. A few questions you might ask yourself are:
• Do I have a professional appearance?
• Do I have a willingness to serve?
• Do I have a willingness to help others?
• Do I have strong and appropriate interpersonal skills?
- Am I a good team player?
- Do I have excellent technical skills?

In order to acquire a **stable permanent job** in the service industry, you must either currently have professional traits or be willing to practice for perfecting professional traits.

The following is an example checklist you can use for self-evaluation. When developing your own evaluation **checklist**, use characteristics that a successful salon professional possesses and rate them as they apply to you personally.

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Mastered</th>
<th>Above Average</th>
<th>Average</th>
<th>Needs Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well groomed</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Confident in technical skills</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Positive attitude</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Courteous</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Excellent communicator</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Motivated</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Responsible</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Honest</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

When conducting a self-evaluation, there are a few questions we must ask ourselves in order to pursue a job that will be a good fit for what we are suited for.

**Let's look at motivation.**
There can be many motivating factors when seeking employment but the number one factor is the desire to **make money**. On the average, most people need a job. We have to earn a living. This can be a very strong motivation when seeking employment.

**What is motivating you to seek employment?**
According to Dictionary.com the word **motivation** is defined as: desire to do; interest or drive; **incentive**. This definition refers overall to the intrinsic or internal drive one has.

There can also be extrinsic or external motivations such as those that come from family, friends or varied life situations. Intrinsic positive motivation is the most sustaining when it comes to a happy employment experience. Other types of motivation that involve extrinsic or negative will not usually sustain happy employment, not to be confused with successful employment. External or negative motivation can sustain successful employment but under negative conditions does not normally make for a happy employment experience.

**What level of technical skills do you possess?**
This is where you must be painfully honest with yourself. Do you, without question, have a complete understanding of all technical aspects of all services that as a license holder in your field requires? Can you, with full confidence, perform all technical aspects of those services?
As a personal service worker you are expected to know all technical applications of services that fall within your category of licensing.

If you are unsure of procedures, you must continue to practice and study until you are confident that you can perform all services with confidence. You must be an asset to an employer. Although most salons emphasize further training during employment, you must not rely on future training for the services you will be required to perform immediately, but possess it now.

**Do you have a strong work ethic?**
Dictionary.com defines the term work ethic as: a belief in the moral benefit and importance of work and its inherent ability to strengthen character. Consistently giving it your best at every level is the best way to express a strong work ethic. Be on time. Perform services to the best of your ability and treat people and things with respect.

**Do you have enthusiasm?**
Dictionary.com identifies the term enthusiasm to be synonymous to: eagerness, warmth, fervor, zeal, ardor, passion, devotion.

**Do you have integrity?**
Dictionary.com describes integrity as: adherence to moral principles; honesty. Integrity can be applied to your work at many levels. You can have integrity in performing techniques. You can show integrity toward others through your attitude and actions. Integrity never involves embellishing the truth. Integrity means never using short cuts or doing less than what is proper.

**b. The Resume**
The beginning of job hunting is the resume. A resume should represent a basic summation of your education and previous work experience.

Employers will view your resume for a quick overview or your achievements and work history.

**Guidelines for preparing your resume:**

<table>
<thead>
<tr>
<th>Simplify resume information so it will fit onto one page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use high quality paper to print it on</td>
</tr>
<tr>
<td>Include your Name, Address, Telephone Number and Email Address</td>
</tr>
<tr>
<td>List recent work experience</td>
</tr>
<tr>
<td>List education including school names and courses</td>
</tr>
<tr>
<td>Include a section for abilities and accomplishments</td>
</tr>
<tr>
<td>When adding information keep it relevant to the job you are pursuing</td>
</tr>
</tbody>
</table>
For example: your written accomplishments can show

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>The number of regular clients that you serve.</td>
<td></td>
</tr>
<tr>
<td>The number of weekly clients that you serve.</td>
<td></td>
</tr>
<tr>
<td>Your client retention rate.</td>
<td></td>
</tr>
<tr>
<td>Your average revenue per client.</td>
<td></td>
</tr>
<tr>
<td>Your average percentage of total revenue that comes from retail sales.</td>
<td></td>
</tr>
<tr>
<td>Your average percentage of total revenue from chemical services.</td>
<td></td>
</tr>
</tbody>
</table>

Guidelines: Do

| Do make it easy to read. Use accurate and clear communication when writing. Avoid run-on sentences and overpowering descriptive words. |
| Do be familiar with the type of reader. Knowing your reader can help you cater the resume to the style of your potential employer. |
| Do keep it brief. One page is best. |
| Do emphasize accomplishments. Indicate the accomplishment and the skill that it took to achieve it. |
| Do define career goals when possible. Indicate that the position you are seeking is your goal. |
| Do mention skills that are transferable. List skills that you now have that will be of benefit to the new position. |
| Do use verbs that show positive action such as; maintained, coordinated, developed, increased, etc. |

Guidelines: Do Not

| Do not state your salary history (that will be asked on the job application) |
| Do not lie about anything |
| Do not put personal references on a resume (that will be asked on the job application) |
The following is an example of a successfully written resume.

<table>
<thead>
<tr>
<th>Victoria Vale</th>
</tr>
</thead>
<tbody>
<tr>
<td>123 Wisteria Lane</td>
</tr>
<tr>
<td>City, State 12345</td>
</tr>
<tr>
<td>(123) 123-1234</td>
</tr>
</tbody>
</table>

A Licensed Cosmetic Art Professional who trained in advanced techniques in Europe and has been featured in “Beauty Focus” magazine.

Accomplishments and Abilities

Sales
Named “Retail Leader of the Year” for highest monthly revenue.
Increased and sustained retail sales an average of 32%. Increased chemical services by 43%.

Client Retention
Developed and maintained a client base of 220 customers for more than 3 years.

Special Projects
Developed a gifting program that helps cancer survivors acquire high-quality wigs.
Supervised the collection of hair for wigs. Guest speaker for various Cosmetic Art Schools

Additional Training
Advanced techniques in hair-cutting
Advanced techniques in hair-coloring
Updated sanitation and health training

Awards
“Retail Leader of the Year” award “Expert Colorist” award
“Superior Stylist” award Competition Grand Prize Winner

Experience

The Place Salon & Spa 2004-2007 Cosmetologist / performed all services
Mattie's Beauty Boutique 2007-2011 Cosmetologist / performed all services

Education
Graduate, Tangleze National Academy of Cosmetology, New York, 2004
Licensed as Cosmetologist, 2002
Whether you are fresh out of Cosmetic Art school or have been working for years, it is a good idea to have a
portfolio to show off your talents. A portfolio should include a good quality ring binder that can hold photos and documents within clear individual sleeves. It's a great opportunity to give true visuals of what you have accomplished throughout your career. This is the time to put your best foot forward into a collection of awards, certificates, recognitions and even business reports. Keep in mind a portfolio has no limits in how you can represent yourself as a professional. As long as your portfolio contains nothing that can be construed as offensive to the viewer, all is well.

Here are a few ideas.

**Portfolio Content**

<table>
<thead>
<tr>
<th>Cosmetology school diploma</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certificates of Awards</td>
</tr>
<tr>
<td>Resume</td>
</tr>
<tr>
<td>Letters of reference from former employers</td>
</tr>
<tr>
<td>Continuing Education Certificates</td>
</tr>
<tr>
<td>Industry / Organization / Affiliation / Membership documentation</td>
</tr>
<tr>
<td>Photos of “before and after” models</td>
</tr>
<tr>
<td>Professional Statement / brief paragraph of “why you choose to be in your field”</td>
</tr>
<tr>
<td>Other relevant documentation such as newspaper articles, business reports, etc</td>
</tr>
</tbody>
</table>

Before assembling your portfolio consider whether your gathered material is a good representation of you and your skills. Remove anything in question and get advice from someone who is familiar with you and your work. Keep in mind that all documentation including your resume and professional statement should be typed and never hand written. You can use tabs to mark each section it you wish.

**Professional Statement**

**Your professional statement should include:**

- A description of what you love about your profession
- Your philosophy of teamwork and how you can contribute
- Your acknowledgment of the importance of service and retail revenue and a method or two of how you increase it
c. Establishment Evaluation

Which salon /employer is a good fit?
To ensure the best chance of successful employment, it is best to find a salon that is a good fit for what you are looking for. There are many things to consider. You should visit several establishments in order to get a good idea of what is available in your area. The environments and images of salons can vary drastically so it's important to research ahead of time in order to get a good grasp of your choices. So you should visit several salons in order to get a good idea of your opportunities. In order to keep track of what you observe, you should keep a checklist for each Salon that you visit. Only complete your checklist in private after your experience. Later, if you make good notes, you will be able to better recall your adventure.

This following sample checklist is a good way to keep up with your visits and good examples of how to grade your would-be employer.

Example of a “Good Fit” Checklist

| The Salon's Image: Does the salon have an image that fits into your comfort zone? Does it reflect an image that goes against your ethics in some way or seem uncomfortable to you? How about the way your work area is arranged? Is the volume of the music excessive and unprofessional? Does the salon use handmade signs? If you see anything alarming, go ahead and check that salon off your list. Use your own values for what is acceptable in order to decide if the salon is a possible place for you to be employed. |
| (___X___) above average | (___) average | (___) poor |
| comments: Clean back-bar. high-end appliances, lighting is excellent at stations |

| Employee Image: Observe the manager and her employees. Are they leaning on counter-tops? Are they giving proper attention for those clients who just walked up to the counter for an appointment? Are they properly monitoring chemical services for any discomfort a client might be having? This is the time to monitor the behavior and appearance of both the manager and her employees. If it doesn't seem acceptable today, it is unlikely things would improve after you are employed there. |
| (___X___) above average | (___) average | (___) poor |
| comments: Employees are all ages - all had incredible hair /wardrobe /makeup |

| Management: Is the telephone being answered quickly and walk-in clients attended to promptly? Are the floors clean and the retail area orderly? What about team work? Is there an air of negativity? All of these things can indicate poor management. |
| (___X___) above average | (___) average | (___) poor |
| comments: They have a full-time receptionist |
### Clients
Are the clients being properly attended to from beginning to end? Are they properly welcomed and monitored throughout their visit? Does the salon have customary smocks, changing rooms and beverages for their patrons?

(____) above average  (____) average  (____) poor  

Comments: They have individually wrapped chocolates in the dressing rooms for the patron

### Services and Pricing
Compare one salon's pricing to another. Compare the add-on services within the pricing to see which salon has the better value for the customer. Consider if you yourself would come there as a client under those circumstances.

(____) above average  (____) average  (____) poor  

Comments: They include a free pedicure with every service

### Retail
Again, Does the salon use professional marketing for their retail? Are the prices over- inflated? Are the bottles covered in dust? Are the employees selling?

(____) above average  (____) average  (____) poor  

Comments: Very clean. The usual brands. No specials or sale bundles that I noticed

### Professional Marketing
Does the salon use professional posters to promote their product lines? Does the salon use wall hangings and framed photos that reflect updated styles?

(____) above average  (____) average  (____) poor  

Comments: Framed photos are not as up to date as they could be

Once you have determined which salon is the perfect fit, it is time to prepare for the job interview. Remember, there doesn't have to be a job opening to get an interview. And, there doesn't have to be a formal “job opening” per say to be hired. Many a salon professional has been hired when the manager hasn't even herself advertised a job opening. There may be a position available that is part-time or temporary that can lead to a full-time position. Often times a manager will create a position if she really wants you on her team.

### d. Job Interview

### Preparing for the Interview Resume Review:
Preparing for the face to face interview includes reviewing your resume.
- Does your resume represent your abilities and accomplishments in your job and training?
- Does it make your reader inquisitive and want to learn more?
- Is the format neat and easy to read with content that emphasizes your skills?
- Is all information relevant to the job you are seeking?
- Is it a relatively complete and well-rounded overview?
Portfolio Review:
Preparing for the face to face interview includes reviewing your portfolio. Did you include:

- diploma
- awards and Certificates of Achievement
- resume
- letters of reference from former employer(s)
- continuing education certificates
- memberships of Cosmetology organizations
- before and after photos
- other relevant documentation

Now would be the time to remove anything from your resume or portfolio that doesn't fit in with your overall purpose.

Now let's focus on wardrobe.
Since you have previewed the potential establishment, you now have an idea of what they consider the image appropriate for their salon. You should try to mirror this as closely as possible. You want to look like you could begin work the day you are interviewed with no changes needed. You might be asked to return for a second interview so have ready a second outfit for that purpose.

Consider these points:

- Is your outfit appropriate for that position?
- Is it an up-to-date fashion and does it fit well?
- Are your accessories appropriately sized and not noisy?
- Are your fingernails clean and manicured?
- Is your hair style up to date and flattering?
- Ladies, is your make-up up-to-date and appropriate?
- Men, are you clean shaven and/or your facial hair appropriately trimmed?
- Is your cologne or perfume lightly applied?
- Are you carrying a handbag or briefcase but not both?

In addition to your resume and portfolio, you will need to have a list of names and dates of former employment, education and references.

Be ready for the questions!
You may not be a professional “interviewee” but there is a good chance that your future employer is a professional “interviewer”. She will be ready to ask the hard questions whether or not you are ready to answer them, so be ready.

There are certain questions that are often asked by employers. You can be ready and even rehearse your answers. If you prepare ahead of time, you will be more relaxed and will give better answers. If you were told to be prepared to perform a service as part of the interview, you will need to prepare your model to ensure that she will meet interview standards.
Discuss with her what to expect, what to wear, what not to wear and the need to arrive early. Gather all necessary gear to perform the service. Be careful to observe all modes of sanitation, storage and customary behaviors you normally would.

The Interview

Tips for the “face-to-face”:

- Be early.
- Smile.
- Use good posture at all times.
- Be courteous and polite at all times.
- Remain standing until asked to be seated or whenever you are aware that it is expected.
- Never chew gum or smoke even if offered to do so.
- Do not bring food or drink.
- Do not lean. Do not touch the interviewer except for a hand shake. Do not touch his desk or other items.
- Make a good first impression, be relaxed and confident.
- Speak clearly.
- Answer questions truthfully and do not speak longer than a couple of minutes about any given subject.
- Never criticize former employers.
- Thank the interviewer at the end of the interview.

You will be asked by the interviewer if you have any questions. Never say no! It shows interest and enthusiasm to be inquisitive about your new job.

Here are a few questions that you can ask.

<table>
<thead>
<tr>
<th>May I review the job description?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is there a salon manual?</td>
</tr>
<tr>
<td>How long do your employees usually work here?</td>
</tr>
<tr>
<td>Does your company offer continuing education?</td>
</tr>
<tr>
<td>Does your company offer benefits, medical insurance or paid vacations?</td>
</tr>
<tr>
<td>What is your compensation plan?</td>
</tr>
<tr>
<td>When will the position be filled?</td>
</tr>
<tr>
<td>Should I follow up with you about your decision or will you be contacting me?</td>
</tr>
</tbody>
</table>
Employment Application
Here is where you will use your prepared notes: dates of employment, addresses of former employers. The
application is always a mandatory addition to your resume. Employment applications will vary from company
to company however there is a standard in which certain information is customary.

Read the following Sample Application:

<table>
<thead>
<tr>
<th>Personal Information</th>
<th>Date</th>
<th>Telephone</th>
<th>Social Security Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last Name</td>
<td>First Name</td>
<td>Middle Name</td>
<td></td>
</tr>
<tr>
<td>Physical Address</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have relatives that are employed with X Company? Name:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Were you referred to this salon? Name:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Desired Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date you can start</td>
</tr>
<tr>
<td>Current Employer</td>
</tr>
<tr>
<td>May we contact them?</td>
</tr>
<tr>
<td>Have you ever applied for a position with our company before? Where? When?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name/ location of school</td>
</tr>
</tbody>
</table>
**Additional subjects studied:**

What languages do you: Speak fluently?  
Read fluently  
Write fluently

**List any US Military Service**  
Rank  
presently serving?

**Do you serve in the National Guard Reserve?**

**Employment History**  
List below the last three employers, beginning last one first.

<table>
<thead>
<tr>
<th>Date: month/year</th>
<th>Name and Address of Employer</th>
<th>Position</th>
<th>Reason for leaving</th>
<th>Salary</th>
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</table>

**References:**  
List names of 3 people not related to you that you have known for one year or longer.

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Business</th>
<th>Years known</th>
</tr>
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</table>

**Physical Record**  
Do you have any physical disability that might affect your job performance?

**Emergency Contact Person:**
Name  
Address  
Telephone

I authorize all my statements in this application to be investigated. I understand that I can be dismissed from employment if any misrepresentation or omission of facts are present.

Signature  
Date
Prospering in the Salon

There are many ways to prosper.

You prosper in your relationship with other professionals.
You prosper in your relationship with clients and management. You prosper financially. One of the basic tools to measure prosperity as a salon professional is your finances and income.

Financial prosperity comes with successful business practices. It's our reward for excellence. The personal service industry can be very challenging, especially if you are ever mistreated or disrespected by the people that you serve. Prosperity in the knowledge that you have lasting integrity and honesty with those that you serve and those that you work with is immeasurable.

Thriving or Surviving?

There are solid approaches to increase prosperity in the salon. Putting these approaches into action will help the salon professional to thrive.

- Put others first. This sometimes means putting your own feelings aside while putting the client or the salon first.
- Fulfill your word. Do what you say you will do. Be truthful and do not exaggerate.
- Be on time. Your time is carefully scheduled and if you are late it will impact the client and your team. Arrive to work early enough to prepare your station and to prepare for your first client before she gets there.
- Be grateful for your job. It is a privilege to have a job. Behave with a positive attitude and appreciation for it.
- Be a problem solver. All places of employment has its share of difficulties. You can assist in solving any problem that may arise. Think constructively and be the problem solver.
- Respect all. No matter what is said or done, respect all at all times.
- Learning for a lifetime. All of your professional life, there will be new things to learn. A mature professional always finds new things to learn.

The Team

It's a give and take world no matter what the job. You can't always be a taker, you must contribute. Whether you contribute much or little, no kind deed goes unnoticed. A salon is the kind of team environment that provides the opportunity to exercise great artistic freedom.

Many people are not so fortunate as to have a professional license and would love to take your place. No matter what the challenge, it is indeed a privilege to be on the team.

Key Principles of The Team Mentality To be a good team player you should:
• Pitch in. Join in to do tasks. Be self motivated. Do things because they need to be done. Don't wait to be instructed.
• **Share your knowledge.** We are all in this together and if you can mention something that can enhance the knowledge of others it is always a good thing.
• **Be positive.** Don't join in with those that have negative attitudes. Speak positive and think positive.
• **Build relationships.** Get along with others. Have conversations and build a relationship between you and other team members.
• **Resolve conflicts willingly.** Find solutions and be quick to forgive. Quickly resolve unpleasant issues so they do not grow into bigger problems
• **Be willing to be subordinate to your manager.** All employees must be able to be instructed by their manager. You must make an effort to show you are willing to be instructed.
• **Loyalty.** Be loyal to your manager and to your salon.

**Study the following definitions.**

- **enthusiasm** en·thu·si·asm [en-thoo-zee-az-uh m]
  Origin: c.1600, from M.Fr. enthouisme, from Gk. enthouismos, "be inspired," *ardent and lively interest or eagerness

- **motivation** mo·ti·va·tion [moh-tuh-vey-shuh n]
  Origin: 1873, from motivate. Psychological use, "inner or social stimulus for an action," is from 1904 *desire to do; interest or drive

- **portfolio** port·fo·li·o [pawrt-foh-lee-oh, pohrt-]
  Origin: 1722, from It. portafoglio "a case for carrying loose papers," from porta, imperative of portare "to carry" + foglio "sheet, leaf," from L. folium. *a flat, portable case for carrying loose papers, drawings, etc.

- **posture** pos·ture [pos-cher]
  Origin: 1595–1605; < French < Italian postura < Latin positūra. *A position of the body or of body parts.

- **prosper** pros·per [pros-per]
  Origin: mid-15c., from O.Fr. prosperer (14c.), from L. prosperare "to flourish, succeed." *to be successful or fortunate, especially in financial respects; thrive; flourish.

- **relevant** rel·e·vant [rel-uh-vuh nt]
  Origin: 1560, from M.L. Relevantem *bearing upon or connected with the matter in hand; pertinent:

- **role-play** role-play [rohl-pley]
  Origin: 1945–50 *to assume the attitudes, actions, and discourse of another, especially in a make-believe situation in an effort to understand a differing point of view or social interaction
subordinate  sub·or·di·nate [adj., n. suh-bawr-dn-it; v. suh-bawr-dn-eyt]  
Origin: 1425–75; late Middle English (adj.) < Medieval Latin subördinätus  
past participle of subördinäre to subordinate, equivalent to Latin sub- sub- + ödö-  
(stem of ödö) rank, order + -ätus -ate1 *placed in or belonging to a lower order or rank  

work ethic  work ethic Origin: 1950–55  
*a belief in the moral benefit and importance of work and its inherent ability to  
strengthen character.  

The Client and the Service  
Precautions: Cosmetic Art Science has developed precise practices for every service available. These  
procedures are followed in all modern salons and are compliant with State and Federal Laws. By  
following prescribed procedures, the salon professional can expect text book results with very little  
variance. Before performing any service, read and follow manufacturer's instructions for the products to  
be used in the procedure. Be cautious while performing applications and services and never  
underestimate the necessity of observing every level of safety. During this study, take special note of  
which prescribed procedures are specifically designed to protect the salon professional and which  
procedures are designed to protect the client.  

The Consultation  
The first procedure for any service is the initial client consultation. Prior to any format of analysis, we  
must find out what the client wants in order to know what direction to go in. Find out what the client  
wants in a service or a combination of services. Conclude if the goal is realistic and achievable. The  
consultation should be done facing the client. Look at her for any signs of conditions. When booking  
the client for the consultation, pencil-in the estimated time for completing the service. If she is a new  
client introduce yourself and tell her a little bit about your services and your salon. Make her feel  
welcome and at ease. There should be an understanding of etiquette to all employees in your salon that  
interruptions or intrusions are forbidden when stylists are with their clients. Give the client an  
information card and pencil so she can give you information about herself and any services she has  
had. Ask her leading questions to get her talking about what she wants so you can be fully informed of  
her ideas. Allow her to speak with no interruptions. She might remember additional information about  
past services that may have importance when applying her next service. Getting a full and complete  
history is irreplaceable in the consultation.  

If you are consulting at your work station, remember to face the client and do not look at her  
through the mirror to communicate. It is impersonal to communicate in that manner. Look directly at  
er and not her reflection to see all things and to communicate all things. It is however acceptable to do  
that later while servicing the client, but not during the consultation stage. When speaking with the  
client, ask her questions that give you precise knowledge about what she has in mind. Show her your  
portfolio. Nothing personalizes your relationship more with your client than to show her photos of your  
work. It's also the most accurate way to show her your level of ability. Upon reaching an  
understanding of what the client wants, it is now time to explain to her what processes need to happen  
to achieve it. Explain to her whether it will be one or two steps (or more) and the reality of how close  
you can come to exactly what she has described. If several steps are involved and there is not sufficient  
time to perform them in one day, let the client know that it will take several visits to complete.  
Also, different services are going to be different prices.
You must be complete and accurate in quoting the exact cost for the services. If there are any problems with affordability for the client to get what she wants, you can suggest alternative services that will still give her a desirable service but will fit better for her budget. So get creative not only with your service applications but with alternative budget solutions. The client will appreciate your thoughtfulness and it will prevent the client from feeling embarrassed about her monetary limitations. You could gain a customer for a life-time by making sure that she never feels humiliated. Remember to discuss her personal care service maintenance. Give her true ideas of how often she will need to come back for to maintain her personal care.

The following is a sample of a Client Intake Form. This form is to be presented to the client just before you begin the formal consultation.

Client Intake Form

Dearest Client,

We want today’s visit to be the most outstanding salon experience you have ever had! To achieve excellent service for you in a personal way, we would like to know about your preferences regarding your service. You personal care is as important to us as it is to you! Please complete the following questionnaire so we may better serve you. All information will be kept private and will only be used as a reference in order to give you excellent personal service. Thank you for your time.

Name: __________________________________________

Address: __________________________________________

Telephone number: __________________________________________

Email address: __________________________________________

Were you referred to us by a friend? Who? __________________________________________

In the past 6 months, have you had any of the following services?

Manicure Service __________________________________________

type of manicure __________________________________________

Pedicure Service __________________________________________

type of pedicure __________________________________________

What service would you like to discuss today? __________________________________________

Are you allergic to any salon chemicals?

Please list allergies in the space provided. __________________________________________

For your protection, please list any medication that you are currently taking or have taken for the past year. __________________________________________

What personal care products do you use on a regular basis?

Additional information? __________________________________________

DATE: __________________ Consulting Salon Professional __________________
There are key points to every basic consultation. They are:

1. **Review the Client Intake Form:** Please do not interrupt the client when she is completing the Client Intake Form. Wait to begin your conversation after she is done and you have thoroughly read all of her answers. Do not ask her the same questions that she has just answered on her form. Ask questions that relate or give your further information about specifics that she has listed.

2. **Assess your client's condition that relates to the service and make sure she can receive the service.**

3. **Client preferences:** Ask the client what are her preferences when it comes to self care at home. Does she mind spending 20 minutes instead of 10? Does she incorporate salon products? Find out what she likes about her self care and what she doesn't like.

4. **Analysis in more detail:** Make notes especially if you observe any problems that will need attention in the upcoming service.

5. **Lifestyle of the client:** A client's lifestyle often dictates the amount of time and effort she is willing to give to her self care on a daily basis.

6. **If applicable: Show her visuals:** See if she has unrealistic expectations. Be open to what the client tells you.

7. **Service suggestions:** After gathering this vast array of knowledge, use your best judgment and lay out the possibilities.

8. **Maintenance:** Inform the client as to how often she will need to visit the salon to maintain her new service. Inform her about home haircare, products that she will need to use and products or environmental elements to avoid.

9. **Re-cap the plan:** Repeat the plan to the client and confirm with her each step – and that all is understood.

You are ready to begin the next step.
Book the date in which your client can make her service appointment.

**Day of Service - The Release Form**
Most every salon, spa or school requires a Release Form. To further familiarize yourself with this part of the client-side procedure, please review the following form.
RELEASE FORM

I, ________________________________, have been fully advised of the risks that are involved with services that I am about to receive. I do hereby release all employees, owners, affiliates, agents and representatives of any claims or damages arising in any way connected with receiving these services.

Client signature: __________________________ Date: __________ Salon representative: __________________________

Is the client under age 18? __________________________ Date: __________

If so, guardian signature required: __________________________

Salon representative: __________________________

Throughout the consultation and service stages it is necessary to keep the client's service record nearby. It contains all pertinent information regarding the condition of the client before services are rendered as well as other details. It should also include facts such as the complete service plan, and the end results. As you will see, there are other important topics that will be recorded as well.

Below is an example of a well written Client Service Record.

(Beauty establishment records vary.)

Client Service Record

Date: __________________________

Client's Name: __________________________ Client's Address: __________________________

Telephone: __________________________ Email address: __________________________

Service planned: __________________________ List products to be used: __________________________

Any previous products used before service: __________________________ Other services or treatments: __________________________

Condition of nails and skin: __________________________ normal ____ abnormal ____ explain: __________________________

Today's Service: __________________________ Describe the desired results requested by the client: __________________________

Describe service process to be performed: __________________________ Formula used: __________________________

Describe application technique: __________________________

Completed Service Results: above average ____ average ____ below average ____

Comments:

What home maintenance advice did you give to client?: __________________________

What retail products did you sell the client?: __________________________

Did you book the client's next appointment? Yes No

If not, did you give the client a dated window of time that she needs to call you to schedule her next appointment? Yes No

Date: __________________________ Stylist: __________________________
Lesson 8 Summary

We have now reviewed key aspects of successful salon employment. We can identify the basic elements in the practice of self-evaluation as well as the fundamental components of a well planned resume and portfolio. We also see how evaluating a prospective establishment plays a big part in successful employment and how important it is to review and practice job interview skills before going to the actual interview. And we now know that being a team player will be an everlasting value throughout your entire career.
Lesson 9: Marketing Your Business, Services and Products (2 hours)

Outline

• Conducting Market Research
• Creating a Marketing Strategy
• Target Marketing
• Happy Customers
• Product or service development
• Education
• Pricing and Payment
• Marketing Communications and Media Relations
• Customer Relations and Networking
• Advertising and Special Events
• Sales Ideas and Marketing Performance
• Advertising and Promotions
• Email and Internet Marketing

Learning objectives

After completing this lesson you will be able to:
• list ways to successfully grow your business
• define the term marketing strategy
• list the four key components to a marketing program
• describe the advantages of marketing
• identify the main objectives of marketing
• describe marketing activities
• list ways to incorporate marketing into your business
• list ways to target your market
• identify ways to ways to create or improve your product or service
• describe networking and the advantages of education and resources
• define key elements that you should consider when planning pricing and payments
• list media resources that can be used to help market your product
• describe ways of using media to successfully promote your business or service
• identify ideas of customer service and relations
• list strategies of successful networking
• list ways to advertise
• describe how you can include special events into a marketing plan
• list ways to promote sales
• identify the importance of evaluating successes and failures of your business
• identify the truths and virtues of advertising
• define elements of a complete advertising plan
• describe key elements of E-mail marketing and websites
Introduction
In this study we will review principles, practices and theories of marketing your professional services, your business and/or your products. By following these practices, many businessmen and women have properly developed and sustained successful businesses. Following proven techniques and principles can improve your chances of successful promotions and marketing.

Marketing Basics
In order to successfully grow your business, you’ll need to attract and then work to retain a large base of satisfied customers.

Marketing emphasizes the value of the customer to the business, and has two guiding principles:
1. All company policies and activities should be directed toward satisfying customer needs.
2. Profitable sales volume is more important than maximum sales volume.

To best use these principles, a small business should:
- Determine the needs of their customers through market research
- Analyze their competitive advantages to develop a market strategy
- Select specific markets to serve by target marketing
- Determine how to satisfy customer needs by identifying a market mix

Marketing programs, though widely varied, are all aimed at convincing people to try out or keep using particular products or services. Business owners should carefully plan their marketing strategies and performance to keep their market presence strong.

Conducting Market Research
Successful marketing requires timely and relevant market information. An inexpensive research program, based on questionnaires given to current or prospective customers, can often uncover dissatisfaction or possible new products or services.
Market research will also identify trends that affect sales and profitability. Population shifts, legal developments, and the local economic situation should be monitored to quickly identify problems and opportunities. It is also important to keep up with competitors' market strategies.

Creating a Marketing Strategy
A marketing strategy identifies customer groups which a particular business can better serve than its target competitors, and tailors product offerings, prices, distribution, promotional efforts and services toward those segments. Ideally, the strategy should address unmet customer needs that offer adequate potential profitability. A good strategy helps a business focus on the target markets it can serve best.

Target Marketing
Most small businesses don’t have unlimited resources to devote to marketing; however, you can still see excellent returns while sticking to your budget if you focus on target marketing. By concentrating your efforts on one or a few key market segments, you’ll reap the most from small investments.
On the other hand, location is less of a concern for products or services that customers are willing to go out of their way to find. The Internet makes it easy for people to obtain goods from anywhere in the world, so if you’re worried about reaching a certain market, selling your product online may do wonders for your business.

Marketing is the process that companies use to get consumers interested in the items they’re selling. Marketing is advantageous to your business for many reasons. Here are just two of the benefits.

- You alert customers to a product that suits their wants and/or needs.
- Marketing will net your company profits, which will allow you to continue to do business in order to meet future customers' needs.

Marketing efforts are the most successful when they focus on what the consumer wants, not on what you THINK the consumer wants.

How Can I Make My Customer Happy While Still Staying True to My Business?
The American Marketing Association (AMA) defines marketing as "the process of planning and executing the conception, pricing, promotion, and distribution of ideas, goods, and services to create exchanges that satisfy individual and organizational objectives."

Sounds complicated, but in order to be a successful marketer and businessperson, you'll need to follow a few simple steps:

1. Define a target market.
2. Discover what products customers in your target market want to buy.
3. Set a price for these products.
4. Advertise your product to your customers.
5. Make your product available to your customers.

What Activities Are Included in Marketing?
Marketing activities are numerous and varied. They include everything necessary to get a product off of a sketch pad and into the hands of consumers. Marketing includes activities such as:

- Designing a product to appear desirable to consumers
- Performing market research and pricing
- Promoting the product through public relations, advertising, marketing communications, and sales and distribution

Marketing requires the orchestration of everyone who plays a role in the common goal of pleasing the customer.

How Can I Incorporate Marketing Into My Company?
The following represents a comprehensive list of marketing ideas to help you understand customer needs and ways to satisfy those needs.

General Ideas

- Engage in at least one marketing activity every day.
- Pre-determine a percentage of gross income to spend annually on marketing.
- Set specific marketing goals every year; review and adjust quarterly.
- Carry business cards with you at all times. You never know who you’ll run into!
Target Market
• **Stay alert to trends** that might impact your target market, product or promotion strategy.
• Read market research studies about your profession, industry, product, target market groups, etc.
• Collect competitors’ ads and literature; study them for information about strategy, product features, benefits, etc.
• Ask clients why they hired you and solicit suggestions for improvement.
• Identify a new market.
• Join a list-serve (email list) related to your profession.
• Subscribe to a LinkedIn group or a list-serve that serves your target market.

Product Development
• **Create a new service, technique or product.**
  • Offer a simpler/cheaper/smaller version of your (or existing) product or service.
  • Offer a fancier/more expensive/faster/bigger version of your (or existing) product or service.
  • Update your services.

Education, Resources, and Information
• Establish a marketing and public relations advisory and referral team composed of your colleagues and/or neighboring business owners; share ideas and referrals and discuss community issues.
• Create a forum or environment for employees to offer their suggestions.
• Attend a marketing seminar.
• Read a marketing book.
• Subscribe to a marketing newsletter or other publication.
• Subscribe to a marketing list-serve.
• Train your staff, clients and colleagues to promote referrals.
• Hold a monthly marketing meeting with employees or associates to discuss strategy and status and solicit marketing ideas.
• Join an association or organization related to your profession.
• Get a marketing intern to take you on as a client; it will give the intern experience and provide you with some free marketing help.
• Maintain a consultant card file for finding designers, writers, and other marketing professionals. Hire a marketing consultant and conduct several brainstorming sessions.
• Visit another city or county to observe and learn from marketing techniques used there.

Pricing and Payment
• Analyze your fee structure and look for areas requiring modifications or adjustments. Establish a credit card payment option for clients.
• Offer a discount to regular clients.
• Learn to barter. Offer discounts to members of certain clubs/professional groups/organizations in exchange for promotions in their publications.
• Provide cash discounts.
• Offer financing or installment plans.
Marketing Communications

- Publish a newsletter for customers and prospects (it doesn't have to be fancy or expensive).
- Develop an online brochure of services.
- Produce separate business cards/sales literature for each of your target market segments (for example, government and commercial and/or business and consumer).
- Create a poster or calendar to give away to customers and prospects.
- Print a slogan and/or one-sentence description of your business on letterhead, fax cover sheets and invoices. Get your business out on the Internet.
- Create a signature file to be used for all your email messages. It should contain contact details, including your website address and key information about your company that will make the reader want to contact you.
- Include testimonials from customers in your literature.
- Test a new mailing list. If it produces results, add it to your current direct mail lists or consider replacing a list that's not performing up to expectations.
- Announce free or special offers in your direct response pieces. (Direct responses may be direct mail, broadcast faxes, or email messages.) Include the offer in the beginning of the message as well as on the outside of the envelope for direct mail.

Media Relations

- Update your media list often so that press releases are sent to the right media outlet and person.
- Send timely and newsworthy press releases as often as needed.
- Write a column for the local newspaper, local business journal or a trade publication.
- Circulate reprints of published articles.
- Publicize your 500th client of the year (or other notable milestone).
- Create an annual award and publicize it.
- Get public relations and media training or read up on it.
- Appear on a radio or TV talk show
- Create your own TV program on your industry or your specialty. Market the show to your local cable station or public broadcasting station as a regular program, or see if you can air your show on an open access cable channel.
- Write a letter to the editor of your local newspaper or trade magazine.
- Take an editor to lunch to see what they're writing out and explain how your business might fit in.
- Get a publicity photo taken and enclose with press releases.
- Consistently review newspapers and magazines for possible PR opportunities.
- Submit tip articles to newsletters and newspapers.
- Conduct industry research and develop a press release or article to announce an important discovery in your field.
- Create a press kit and keep its contents current.

Customer Service and Customer Relations

- Ask your clients to come back again.
- Return phone calls promptly.
• Set up an email or fax-on-demand system to easily respond to customer inquiries.
• Use an answering machine or voice mail system to catch after-hours phone calls. Include basic information in your outgoing messages such as business hours, location, etc.
• Ask clients what you can do to help them.
• Take clients out to a ball game, show, or another special event - just send them two tickets with a note. Hold a seminar at your office for clients and prospects.
• Send handwritten thank you notes.
• Send birthday cards and appropriate seasonal greetings.
• Photocopy interesting articles and send them to clients and prospects with a hand-written FYI (for your information) note and your business card.
• Send a book of interest or other appropriate business gift to a client with a handwritten note.
• Create an area on your website specifically for your customers.
• Redecorate your office or location where you meet with your clients.

Networking and Word of Mouth
• Join a Chamber of Commerce or other organization.
• Join or organize a breakfast or lunch club with other professionals (not in your field) to discuss business and network referrals.
• Serve on a city board or commission.
• Host a holiday party.
• Hold an open house.
• Send letters to attendees after you attend a conference.
• Join a community list-serve (email list) on the Internet.

Advertising
• Advertise during peak seasons for your business.
• Get a memorable phone number, such as 1-800-WIDGETS.
• Obtain a memorable URL and email address and include them on all marketing materials.
• Provide Rolodex cards or phone stickers preprinted with your business contact information.
• Promote your business jointly with other professionals via cooperative direct mail.
• Advertise in a specialty directory or in the Yellow Pages.
• Write an ad in another language to reach the non-English-speaking market. Place the ad in a publication that the market reads, such as a Hispanic newspaper.
• Distribute advertising specialty products such as pens, mouse pads, or mugs.
• Mail bumps - photos, samples and other innovative items to your prospect list. (A bump is simply anything that makes the mailing envelope bulge and makes the recipient curious about what's in the envelope!)
• Create a direct mail list of hot prospects.
• Consider non-traditional tactics such as bus backs, billboards, and popular Web sites.
• Project a message on the sidewalk in front of your place of business using a light directed through words etched in a glass window.
• Consider placing ads in your newspaper's classified section.
• Consider a vanity automobile tag with your company name.
• Code your ads and keep records of results.
• Improve your building signage and directional signs inside and out.
• Invest in a neon sign to make your office or storefront window visible at night.
• Create a new or improved company logo or recolor the traditional logo.
• Sponsor and promote a contest or sweepstakes.

Special Events and Outreach
• Get a booth at a fair/trade show attended by your target market.
• Sponsor or host a special event or open house at your business location in cooperation with a local non-profit organization, such as a women's business center. Describe how the organization helped you.
• Give a speech or volunteer for a career day at a high school.
• Teach a class or seminar at a local college or adult education center.
• Sponsor an Adopt-a-Road area in your community to keep roads litter-free. People that pass by the area will see your name on the sign announcing your sponsorship.
• Volunteer your time to a charity or nonprofit organization.
• Donate your product or service to a charity auction.
• Appear on a panel at a professional seminar.
• Write a How To pamphlet or article for publishing.
• Publish a book.

Sales Ideas
• Start every day with two cold calls.
• Read newspapers, business journal, and trade publications for new business openings, personnel appointments, and promotion announcements made by companies. Send your business literature to appropriate individuals and firms.
• Give your sales literature to your lawyer, accountant, printer, banker, temp agency, office supply salesperson, advertising agency, etc. (expand your sales force for free)
• Put your fax number on order forms for easy submission.
• Set up a fax-on-demand or e-mail system to easily distribute responses to company or product inquiries.
• Follow up on your direct mailings, email messages and broadcast faxes with a friendly telephone call.
• Try using the broadcast fax or email delivery methods instead of direct mail (broadcast fax and email allows you to send the same message to many locations at once).
• Use broadcast faxes or email messages to notify your customers of product service updates.
• Extend your hours of operation.
• Reduce response/turnaround time. Make reordering easy - use reminders. Provide pre-addressed envelopes.
• Display product and service samples at your office.
• Remind clients of the products and services you provide that they aren't currently buying.
• Call and/or send mail to former clients to try and reactivate them.
• Take sales orders over the Internet.

Marketing Performance
After implementing a marketing program, entrepreneurs must evaluate its performance. Every program should have performance standards to compare with actual results.
Researching industry norms and past performances will help to develop appropriate standards. Entrepreneurs should audit their company's performance at least quarterly. The key questions are:

- Is the company doing all it can to be customer-oriented?
- Do employees ensure the customers are satisfied and leave wanting to come back?
- Is it easy for the customer to find what he or she wants at a competitive price?

**Advertising: The Basics**

Think you have a great product? Unfortunately, no one's going to know about it unless you advertise. Advertising, if done correctly, can do wonders for your product sales, and you know what that means: more revenue and more success for your business.

Below you will find a list of what advertising can and can't do for your business, along with the steps you can take to start using advertising to your business's advantage.

**What Advertising Can Do For Your Business**

- Remind customers and inform prospective customers about the benefits of your product or service
- Establish and maintain your distinct identity
- Enhance your reputation
- Encourage existing customers to buy more of your product/service
- Attract new customers and replace lost ones
- Slowly build sales to boost your bottom line
- Promote your business to customers, investors, and others

**What Advertising Cannot Do For Your Business**

- Create an instant customer base
- Cause an immediate, sharp increase in sales
- Solve cash flow or profit problems
- Substitute for poor or indifferent customer service
- Sell useless or unwanted products or services

**Two Important Virtues of Advertising**

- You have complete control. Unlike public-relations efforts, you determine exactly where, when and how often your message will appear, how it will look and what it will say. You can target your audience more readily and aim at very specific geographic areas.
- You can be consistent. Presenting your company's image and sales message repeatedly to build awareness and trust. A distinctive identity will eventually become clearly associated with your company. Customers will recognize your brand and product quickly and easily if you're consistent in presentation.

**Two Drawbacks of Advertising**

- It takes planning. Advertising works best and costs the least when the planning and preparation are done in advance. For example, you'll pay less per ad in newspapers and magazines by agreeing to run several ads over time rather than deciding on an issue-by-issue basis. Likewise, you can save money by preparing a number of ads at once.
- It takes time and persistence. The effectiveness of your advertising improves gradually over time because it's impossible for every customer to see every ad. You must repeatedly remind
prospects and customers about the benefits of doing business with you. The long-term effort triggers recognition and helps special offers or direct marketing payoff.

**Getting Ready to Advertise**
Use the following steps to help draw a blueprint for your business's advertising plan:

1. **Design the Framework**
   - What is the purpose of your advertising program? Start by defining your company's long-range goals, then map out how marketing can help attain them. Focus on advertising routes complementary to your marketing efforts.

   Set measurable goals so you can evaluate the success of your advertising campaign. For example, do you want to increase overall sales by 20 percent this year? Boost sales to existing customers by 10 percent during each of the next three years? Appeal to younger or older buyers? Sell off old products to free resources for new ones?

   - How much can you afford to invest? Keep in mind that whatever amount you allocate will never seem like enough. Even giants such as Proctor & Gamble and Pepsi always feel they could augment their advertising budgets. Given your income, expenses, and sales projections, simple addition and subtraction can help you determine how much you can afford to invest. Some companies spend a full 10 percent of their gross income on advertising, others just 1 percent. Research and experiment to see what works best for your business.

2. **Fill in the Details**
   - What are the features and benefits of your product or service? When determining features, think of automobile brochures that list engine, body and performance specifications. Next, and more difficult, determine the benefits those features provide to your customers. How does your product or service actually help them? For example, a powerful engine helps a driver accelerate quickly to get onto busy freeways.

   - Who is your audience? Create a profile of your best customer. Be as specific as possible, as this will be the focus of your ads and media choices. A restaurant may target adults who dine out frequently in the nearby city or suburban area. A computer software manufacturer may aim at information managers in companies with 10-100 employees. A bottled water company may try to appeal to athletes or people over 25 who are concerned about their health.

   - Who is your competition? It's important to identify your competitors and their strengths and weaknesses. Knowing what your competition offers that you lack - and vice versa - helps you show prospects how your product or service is special and why they should do business with you instead of someone else. Knowing your competition will also help you find a niche in the marketplace.

3. **Arm Yourself with Information**
   - What do you know about your industry, market and audience? There are many sources of information to help you keep in touch with industry, market and buying trends without conducting expensive market research. Examples include U.S. Government materials from the Census Bureau and Department of Commerce. Public, business or university libraries are also a good option, as are industry associations, trade publications, and professional organizations. You can quickly and easily learn more about your customers by simply asking them about themselves, their buying preferences, and media habits. Another (more expensive) alternative is to hire a professional market research firm to conduct your research.

- Your next step is to select the advertising vehicles you will use to carry your message and establish an advertising schedule. In most cases, knowing your audience will help you choose the media that will deliver your sales message most effectively. Use as many of the above tools as are appropriate and affordable. You can stretch your media budget by taking advantage of co-op advertising programs offered by manufacturers. Although programs vary, generally the manufacturer will pay for a portion of media space, time costs or mailer production charges up to a fixed amount per year. The total amount contributed is usually based on the quantity of merchandise you purchase. When developing your advertising schedule, be sure to take advantage of any special editorial or promotional coverage planned in the media you select. Newspapers, for example, often run special sections featuring real estate, investing, home and garden improvement, and tax advice. Magazines also often focus on specific themes in each issue.

5. Using Other Promotional Avenues

- Advertising extends beyond the media described above. Other options include imprinting your company name and graphic identity on pens, paper, clocks, calendars and other giveaway items for your customers. Put your message on billboards, inside buses and subways, on vehicle and building signs, on point-of-sale displays and on shopping bags.
- You might co-sponsor events with nonprofit organizations and advertise your participation, attend or display at consumer or business trade shows, create tie-in promotions with allied businesses, distribute newsletters, conduct seminars, undertake contests or sweepstakes, send advertising flyers along with billing statements, use telemarketing to generate leads for salespeople, or develop sales kits with brochures, product samples, and application ideas.
- The number of promotional tools used to deliver your message and repeat your name is limited only by your imagination and your budget.

The Advertising Campaign

You are ready for action when armed with knowledge of your industry, market and audience, have a media plan and schedule, know your product or service's most important benefits, and have measurable goals in terms of sales volume, revenue generated and other criteria.

The first step is to establish the theme that identifies your product or service in all of your advertising. The theme of your advertising reflects your special identity or personality and the particular benefits of your product or service. For example, cosmetics ads almost always rely on a glamorous theme. Many food products opt for healthy, all-American family campaigns. Automobile advertising frequently concentrates on how the car makes you feel about owning or driving it rather than performance attributes. Tag lines reinforce the single most important reason for buying your product or service.

"Nothing Runs Like a Deere" (John Deere farm vehicles) conveys performance and endurance with a nice twist on the word deer.
"Ideas at Work" (Black & Decker tools and appliances) again signifies performance, but also shows reliability and imagination.
"How the Smart Money Gets that Way" (Barron's financial publication) clearly connotes prosperity, intelligence and success.
Comparing Advertising and Public Relations

**Advertising**
Space or time in the mass media must be purchased.
You determine the message.
You control timing.
Two-way communication - the company
One-way communication - using the mass media does not allow feedback.

Message sponsor is not overtly identified.
Message sponsor is identified.

The intention of most messages is to inform, persuade, or remind about a product - usually with the intention of making a sale.

The public may view the message negatively, recognizing advertising as an attempt to persuade or manipulate them.

Very powerful at creating image.
Writing style is usually persuasive and can be very creative, often taking a conversational tone; it may even be grammatically incorrect.

**Public Relations**
Mass media coverage (if any) is not paid for.
The media controls the interpretation of the message.
The media controls the timing.

should be listening as well as talking, and the various PR venues often provide immediate feedback.

The intention of public relations efforts is often to create goodwill, to keep the company and/or product in front of the public, or to humanize a company so the public relates to its people or reputation, rather than viewing the company as a non-personal entity.

The public often sees public relations messages that have been covered by the media as more neutral or believable.

Can also create image, but can sometimes stray from how it was originally intended.

Writing style is generally more formal and less colloquial.

**Email Marketing**
Email marketing is one of the most effective ways to keep in touch with customers. It’s cost effective and, if done properly, can help build brand awareness and loyalty. At a typical cost of only a few cents per message, email marketing is quite a bargain in terms of price and time when compared to direct mail.

In addition, response rates on email marketing are strong, ranging from five to 35 percent, depending on the industry and format. Response rates for traditional mail average much lower, barely cracking the three percent mark. Another benefit of email marketing is the demographic information that customers provide when signing up for your email newsletter. Discovering exactly who your customers are—how old they are, what their interests are, what region of the country they reside in—can help you tailor your products and services to best suit their needs.
When you're ready to create your email newsletter, ask yourself the following questions before you begin:

• Should I use HTML or Plain Text?
Response rates for HTML newsletters are generally far higher than plain text, and graphics and colors tend to make the publications look far more professional. The downside is that HTML email is slower to download, and some email providers may screen out HTML email.

• What incentive, if any, am I providing consumers?
To get customers to sign up for your newsletter, advertise the benefits of receiving your newsletter, such as helpful tips, informative content or early notification of special offers or campaigns.

• Am I going the extra mile?
Many studies suggest that email newsletters are read far more carefully when they offer information that is useful to the customers' lives rather than merely selling products and services. Helpful tips, engaging content and humor are often expected to accompany email newsletters.

• Did I ask too many questions?
Each demographic question you ask may reduce the number of customers signing up; therefore, it's best to limit the amount of information you solicit or give customers the option of skipping the questionnaire.

Why You Should Establish a Web Presence
Today's business emphasis is on eCommerce. Rapid business transactions and unparalleled access to information has changed consumer behavior as well as expectations.

If selling your product online isn’t salient to you, there are benefits to establishing a Web presence for your business. A business website can be as simple as a virtual marketing brochure that you can update on demand with little or no cost. Just having your company’s information available to current and prospective customers can greatly impact your marketing efforts by offering customers everything from pre-sale information to post-sale support and service.

E-marketing has lessened the disadvantage that small businesses have faced for years when competing with larger businesses.

Best Practices in Advertising and Marketing on the Internet
The Internet continues to connect advertisers and marketers to customers from Boston to Berlin with text, interactive graphics, video and audio. If you're thinking about joining the thousands of businesses who already advertise on the Internet, remember that many of the same rules that apply to other forms of advertising apply to electronic marketing. These rules and guidelines not only protect businesses and consumers, but they help the Internet maintain its credibility as an advertising medium.

Major points include:
• Advertising must tell the truth and not mislead consumers.
• All claims must be substantiated.
General Offers and Claims for Products and Services
The Federal Trade Commission Act allows the FTC to act in the interest of all consumers to prevent deceptive and unfair acts or practices. In interpreting Section 5 of the Act, the FTC has determined that a representation, omission, or practice is deceptive if it is likely to mislead consumers or affect consumers' behavior or decisions about the product or service. In addition, an act or practice is considered unfair if the injury it causes, or is likely to cause, is:
- Substantial
- Not outweighed by other benefits or
- Not reasonably avoidable.

Lesson 9 Summary
We have reviewed key aspects of marketing to include conducting research, creating a marketing strategy and target marketing. We now understand the importance of happy customers, product and service development and education regarding marketing and the customer. We can now describe planning for pricing and payment, marketing communications, media relations, customer relations and successful networking. By identifying the key aspects of advertising, marketing and promotions we now better understand the value of email and internet marketing. Utilizing this knowledge is irreplaceable when marketing any business, service or product.

Course Summary
We have now completed the Florida 16 Hour Continuing Education Course. In this review, we focused on many topics of the principles, practices and theories pertinent to being licensed in the State of Florida. We have discussed HIV/AIDS and Other Communicable Diseases, Sanitation and Sterilization, OSHA Regulations, Workers’ Compensation Statutes and Rules, State and Federal Laws and Rules, Chemical Makeup as It Pertains to Hair, Skin, and Nails, Environmental Issues, Employment as a Salon Professional, and Marketing Your Business, Services and Products. This knowledge is a necessary base for a solid foundation in the success of a professional career in the beauty industry. We applaud your continued interest in learning and your motivation to keep your professional license in good standing with the State Board. We invite you to participate in our course next renewal cycle. Thank you and congratulations on completing the Florida 16 Hour Continuing Education Course.
REFERENCES AND RESOURCES

Florida 16 Hour CE Course (16 hours) ©2017 ContinuingCosmetology.com; Illustrations and images ©2017 ContinuingCosmetology.com

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