



Body Art Establishment Inspection Report

Establishment Information	
Facility Name OASIS SPA, THE	Facility Type Tattoo Establishment (BTP)
Facility ID # ASTS-986JLG	Facility Telephone # 608 788-4400
Facility Address 4329 MORMON COULEE RD LA CROSSE , WI 54601	
Licensee Name KRISTINE MOON	Licensee Address 570 BRAUND ST #3 ONALASKA , WI 54650

Inspection Information		
Inspection Type Routine	Inspection Date 01/15/2015	Total Time Spent
Certified Tattooist		
Name KRISTINE M MOON	Certificate # DOGD-9JPAK6	Certificate Expiration 6/30/2015

OPERATOR - The violations in operating procedure or physical arrangement indicated below must be corrected by the next routine inspection or by a date specified in this report.

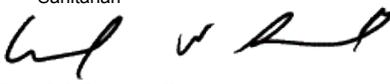
Observed Violations
Total # 0

Comments
Christine is using a antiseptic designed for facial areas that is less astringent, she is also using Sani-cloth to disinfect equipment. Instead of using sterile bandages to cover the procedure she is covering the areas with a coating of Bacitracin ointment.

Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in ch.227 statute, if state licensed, or a local ordinance if licensed by an agent health department.

Person in Charge

Kristine Moon

Sanitarian

David Sawvell
(608) 785-9726