



THE THREE LEVELS

CLEAN removes dirt. Soap, water, detergent. **Always first.** Never enough on its own. **DISINFECT** kills most germs. Must stay **WET** for the full time on the label. Spray-and-wipe does nothing.

STERILISE kills all germs. For anything that cuts, pushes, nips, or could draw blood.

Only two things sterilise: an autoclave, and a genuine dry heat cabinet run on its stated cycle. A UV cabinet is a storage box. It does not sterilise anything. Light does not reach a hinge, a jaw or a box joint, and it does not go through dirt.

ITEM	WHAT IT NEEDS
Nippers, pushers, scissors, tweezers	CLEAN then STERILISE
E-file bits (carbide, diamond, ceramic)	CLEAN then STERILISE
Sanding bands and abrasive caps	THROW AWAY. One client only.
Paper and foam files, buffers, wooden sticks, toe separators	THROW AWAY. One client only.
Glass files, metal-core file bases	Non-porous. CLEAN then DISINFECT
Pedicure bowl, filter and removable parts	CLEAN, rinse, DISINFECT for the full label time
Table, arm rest, foot rest, chair, lamp handle	DISINFECT between clients
Your hands	Wash if dirty or after gloves. Otherwise alcohol rub. Before and after every client

IF THERE IS BLOOD

1. **Stop that nail.** Say what happened.
2. **Gloves on before you touch it.** Pressure with single-use gauze.
3. **Single-use product only.** Never a shared styptic pencil or alum block on broken skin.
4. **Cover it. Do not go back to that nail today.**
5. **The implement:** set aside, clean, sterilise. Cannot sterilise it? Sharps container.
6. **The surface:** clean, then disinfect for the full contact time.
7. **Gloves off last. Wash your hands with soap and water.**
8. **Write it down today.**

If you cut yourself: run it under water, do not scrub, do not put it in your mouth, cover it, fresh gloves. **If client blood got into your**

cut, eye or mouth, get medical advice the same day.

Ask your doctor about Hepatitis B vaccination. It is the cheapest thing you can do for yourself.

SEND THE CLIENT TO BE SEEN TODAY IF YOU SEE

Warmth, swelling or tightness **spreading outwards** · A line or streak running up the arm or leg · A hot, swollen, very painful finger or toe, or fever with it · **Any break in the skin on the foot of a client with diabetes** · A nail gone dark after a knock and throbbing · A dark streak in a nail that is new, widening or changing (**this week, without fail**)

ON DARKER SKIN, REDNESS OFTEN DOES NOT SHOW. DO NOT WAIT TO SEE IT.

Look for **warmth, swelling, tightness, shine and tenderness.** Compare with the same finger on the other hand.

STOP AND REFER IF YOU SEE

Nothing at all on this client today, it travels on your tools: thick, crumbling or discoloured nail · scaling cracked skin between the toes · raised rough growths

Not this area today: nail lifting off the bed · swelling, warmth or tightness · pus or discharge · broken or weeping skin · pain on light pressure

Anything you do not recognise. Treat it as the most cautious option.

WHAT NORMAL LOOKS LIKE

Smooth, even thickness, attached along its whole length, the same colour through its substance. Skin flat against the nail, same colour and temperature as the finger, not swollen, shiny, tight or tender. **Compare with the other hand.** Most of what you see is normal.

WORDS THAT WORK

"I can see something I am not qualified to assess. I would rather not work on this nail today. See a doctor about it and I will book you in as soon as it is cleared."

"If it is only this one nail and the skin is not swollen or sore, I can work on the others today. If it is the kind of thing that spreads, I will not work on you at all until it is cleared, because my tools would carry it."

"I am going to stop here. What I can see needs a doctor **today**, not next week. It may well be nothing, but it is not one to leave."

You do not need to know what it is in order to say no.



EVERY CLIENT

Hands washed or rubbed · Surface disinfected · Fresh towel · Consultation recorded · Skin and nails checked in good light · Sterilised implements from the CLEAN container · New file, buffer and sanding band · Gloves if the service needs them, **changed the moment product gets on them** · Used tools straight into the USED container · Aftercare explained

EVERY DAY

All implements cleaned then sterilised, **nothing relying on a UV box** · Pedicure unit: filter out and cleaned, disinfectant **circulated through the pipes** for the full time · Bins emptied, lids on · Linen washed, stored covered · Extraction working · Every lid closed · Gel waste cured before binning · Nothing eaten at the station

EVERY WEEK

Deep clean · Stock checked · Lamp bulbs assessed · **Spore test or steriliser check** · Sharps container level · First aid kit and extinguisher

FOUR THINGS THAT WILL COST YOU YOUR CAREER

1. **Sensitisation.** Keep uncured gel off your skin. Cure fully. Change your bulbs. It is permanent once you have it.
2. **Dust and vapour.** Extract at the table. Keep every lid on. **A dust mask does nothing against vapour.**

3. **Gloves you trusted.** Monomer goes through a glove in minutes and is then held against your skin. **Change it the moment product touches it.**

4. **Cracked hands.** Wash, dry properly, moisturise through the day. Cracked skin is the way in.

REFERRAL NOTE

Photocopy this. Fill in two: one for the client, one for your records.

Nail technician's note

Date: _____ Client: _____

I am a nail technician.

I am not qualified to assess this and I have not tried to.

I declined to carry out a service today and asked the client to have this looked at.

What I could see, in plain words: _____

Which nail or area: _____ How long, as reported: _____

What I declined to do: _____

Technician: _____ Contact: _____

A refusal the client can hand to a doctor is far more likely to end in the client actually going.