

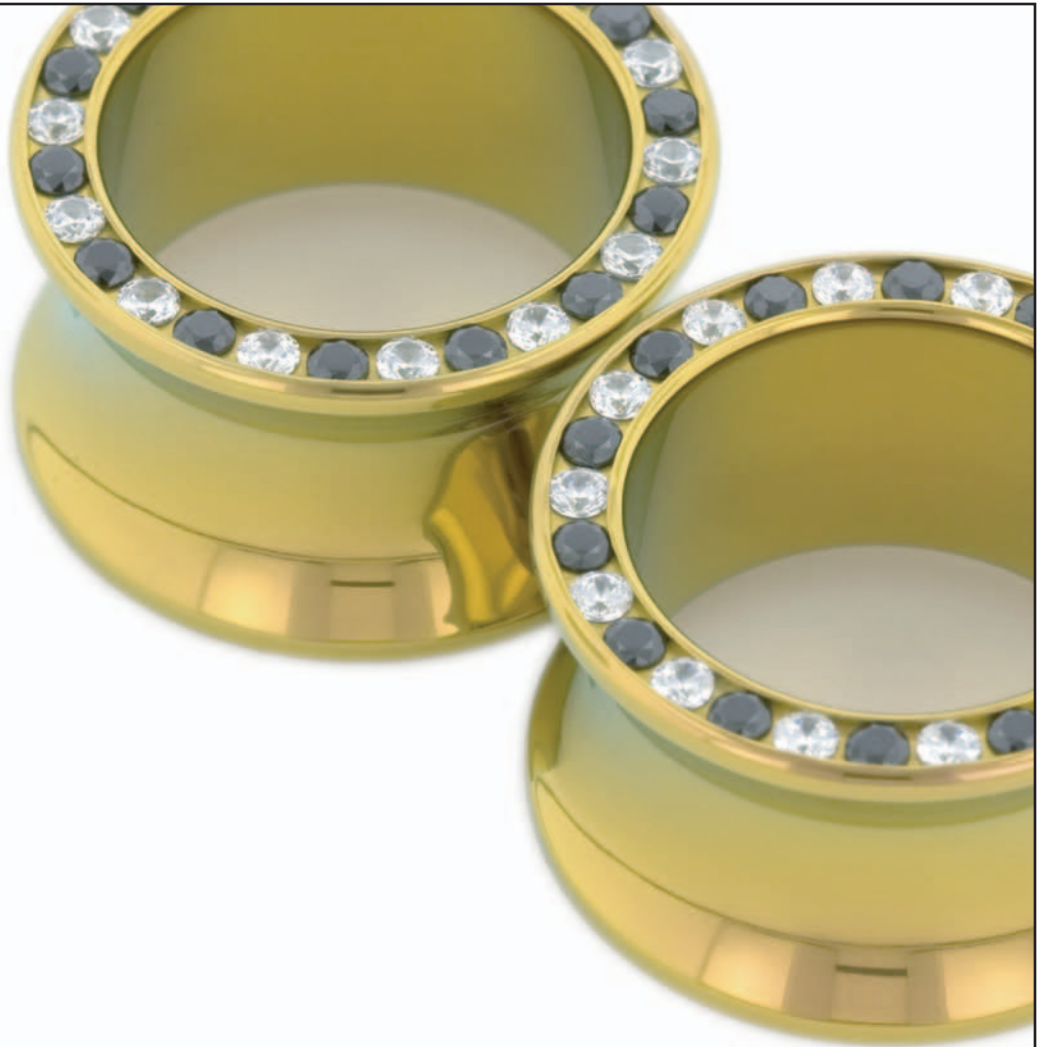
THE POINT

ISSUE 34
WINTER 05/06

The Quarterly Journal of the Association of Professional Piercers



QUESTIONING OUR IDENTITY:
AN OPEN LETTER TO NATIONAL GEOGRAPHIC BY MEGG MASS



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FROM THE EDITOR

Welcome to Issue 34 of The Point. The response to our new look was overwhelmingly positive, and I thank everyone that offered their compliments.

I'm especially excited by this issue because of the beautiful images from Carol Beckwith and Angela Fisher's new book, *Faces of Africa*. (See back cover for more information.) The APP would like to thank them and their publisher for giving us reprint permission, and for allowing Megg Mass (outgoing Outreach Coordinator) to use them for her talk at last year's annual APP conference in Las Vegas. Those that attended will remember that room as the forum for an amazing (and amazingly heated) discussion between Megg and several members of the audience. The accompanying article to that presentation begins on page.

Farewell messages from the previous Board were printed in Issue 33, and we now have one more. Paul King's position as Treasurer has ended, and his goodbye message is on page 22. We all thank him for his selflessness.

I would also like to thank all that contributed articles for this issue. I would especially like to thank Scott DeBoer for all that he has helped me (and Megg) with over the past several months. His support has been most helpful.

Remember, *The Point* is only as good as the submissions we receive, and this serves as the published journal for the entire membership. Articles are requested, and encouraged, from the entire readership. Content can be forwarded to me at medical@safepiercing.org.

Jim Weber
APP Medical Liaison

THE POINT

The Quarterly Journal of the
Association of Professional Piercers

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IN THE OFFICE OF THE APP



Caitlin McDiarmid
APP Administrator

Finally -- I am settled in quite nicely here in Lawrence, Kansas. The office space I have to work in is about three times the space I had in Albuquerque. I thank my lovely partner for offering me the biggest room for the office space, with lots of windows, and fuzzy carpeting beneath my feet. The APP has ample storage available here as well.

The transition to a new Board has been full of bumps and full of wonder. I believe the new Board comes to the table with a wealth of skills and knowledge -- lots of energy and dedication. In any business, however, having a huge transition of leadership all at once is bound to shake things up a bit - and it has taken awhile for us all to get back on track.

I am excited for the variety of plans the Board has set out for Conference this year, and I am certain that the many other outreach projects they have in the works will be fruitful and benefit the industry as a whole.

The APP office mailed out over 700 tubes and over 300 envelopes to attendees of the 2005 American College Health Association (ACHA) conference this fall. This mailing was to introduce the APP educational materials (posters and brochures) to hundreds of college health offices around the United States and Canada. I was lucky to have a few dedicated volunteers, Thaddeous Love, Zach Love, Ruby MacKinnon-Love, and Henry MacKinnon-Love (18, 10, and 7 respectively), who helped to roll posters, brochures and letters, and to stuff and cap the tubes.

I was reminded how a few helping hands make difficult work easy -- and fun.

I encourage all our members to get involved in a real way with the APP. It is quite obvious that -- no matter how dedicated and hard-working 7 people are -- they are only 7 people. Working together as a larger group we can accomplish so much more, and even enjoy it along the way. Committees are forming now in order to assist with the 2006 APP Conference. Please contact your Board Members or the APP office in order to volunteer!

What APP members are talking about: The new APP Manual, finding qualified piercers for their shops, extreme body modifications.

What piercees are talking about: Migration and rejection issues, why their state doesn't have any APP members, why we don't suggest young minors get pierced.

New members are listed at right:

NEW MEMBERS SINCE LAST LISTING

BUSINESS MEMBERS:

de Ment, Amanda
Krahnic Body Art
3703 Overland Rd.
Boise, ID 83705
208-424-1465
April 2005

Durfee, Sara
Berserk Body Art
42 East 400 North
Tooele, UT 84074
435-843-1076
March 2005

Garcia, Michael
The Zone
337 Eubank NE Ste. #101
Albuquerque, NM 87123
505-293-6039
September 2005

Hedgespeth, Brent
23rd Street Body Piercing
411 NW 23rd St.
Oklahoma City, OK 73103
405-524-6824
October 2005

Hendricks, Angela
Body Branding
1650 Airport Rd. S- Unit B
Naples, FL 34104
239-732-8868
March 2005

Jennell, Chris
Webb, Evan
HTC Body Piercing of Phoenix
12416 N. 28th Dr. #20
Phoenix, AZ 85029
602-942-8810
April 2005

Johnson, John
Glunt, Christopher
Outer Limits Tattoo & Body Piercing
3024 W. Ball Rd. #1
Anaheim, CA 92804
714-761-8288
April 2005 & October 2005

Kicinski, Daniel
The Shaman's Den
143 Washington St.
Binghamton, NY 13901
607-773-8650
March 2005

Legris, Amanda
Bear's Skin Art, Inc.
10522 - 124th Street
Edmundton, Alberta
Canada T5N1R9
780-482-3876
April 2005

Lolley, Corey
Southwood, Matt
Suarez, Didier
Enigma
2079 Garnet Ave.
San Diego, CA 92109
858-274-9950
September 2005

Mellinger, Andy
Staton, Jon
HTC Body Piercing of Tempe
808 S. Ash Ave.
Tempe, AZ 85281
480-784-4460
April 2005

Perkins, Brett
Anomaly Body Piercing
1039 E. Green St.
Pasadena, CA 91106
626-793-8930
April 2005

Pirelli, Nick
Apex Professional Body Piercing
650 Main St. Ste. #3
Grand Junction, CO 81501
970-244-8888
April 2005

Potter, David
Slave to the Needle
508 N 65th St NW
Seattle, WA 98117
206-789-2618
April 2005

Prentice, Joshua
Virtue & Vice
2261 Cheshire Bridge Rd.
Atlanta, GA USA 30324
404-315-6925
April 2005

Raimar, James
Old Town Tattoo
203 N. Hamilton
Saginaw, MI 48602
989-799-3972
March 2005

Ransdell, Clinton
Artistic Skin Designs
3429 S. East Street Suite A
Indianapolis, IN 46227
317-780-8282
July 2005

Vest, Cour
*Randy Adams Tattoo
& Body Piercing*
6467 E. Lancaster Ave.
Fort Worth, TX 76112
817-446-0272
April 2005

York, William
Nathan's Anthems
1348 Market St. Suite 204
Redding, CA 96001
530-241-8288
August 2005

ASSOCIATE MEMBERS:

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Anomaly Body Piercing
1039 E. Green St.
Pasadena, CA 91106
626-793-8930
March 2005

Cruz, Luis
Reed, Tania
Thelen, Anthony
High Priestess
675 Lincoln Rd.
Eugene, OR 97401
541-342-6585
April 2005

Pense, Quinn
Camden Chameleon
1146 N. State St.
Bellingham, WA 98225
360-676-7330
April 2005

Hilpert, Kirston
Haubrock, Chris
HTC Body Piercing of Tempe
808 S. Ash Ave.
Tempe, AZ 85281
480-784-4460
April 2005

Konijisky, Berry
Artistic Skin Designs
3429 S. East Street Suite A
Indianapolis, IN 46227
317-780-8282
July 2005

DeOlivera, Alejandra
Twisted Sol
1405 Ogden St.
Denver, CO 80218
303-832-1311
September 2005

CORPORATE MEMBERS:

Body Vision, Inc
1915 McKinley Ave. #D
Laverne, CA 91750
888-991-BODY
August 2005

Desert Palms Emu Ranch
8332 N. 99th Ave.
Peoria, AZ 85345
623-877-EMUS (3687)
March 2005

Global Exotics
PO Box 1816
Sebastopol, CA 95472
707-829-5758
August 2005

For most current listing of members, please see the website.



Alicia Cardenas
APP President

Taking Precedence

The last year brought a great amount of world change in the form of natural disasters. While watching the news as Hurricane Katrina ravaged New Orleans, I felt my heart fall to my stomach. I imagined the emotion that must have been felt by Elayne Angel (two term APP Board Member), and her staff at Rings Of Desire, as they watched the city and Elayne's business fall victim to the massive flood. All of this change in the world, and some are just lucky to be alive.

These really put into perspective that, although our businesses are very important, the lives of our friends and families, their safety and well being, should take precedence over more idle concerns. I realized that we must take every day as if it is our last and not take one single moment for granted. My heart goes out to those people and business owners who lost their livelihood due to these natural disasters.

I say this because we, as a piercing community, must realize that we are all on the same team and come together to support one another in times of need. My point is this: if we really are a community, then we need to shed our minor differences and come together to make everyone stronger and better. In other words, start seeing the big picture, and start being more active in our immediate communities and relationships.

What does that mean as it relates to the APP? This is a call to action for all active APP members to recruit one member this year for the APP — even if it means working with a local studio. Personally, I will make the commitment to add one more member in Colorado to the membership within one year. By making more and more members, even in our own areas, we are literally forcing others to step up and take some responsibility for themselves, or fall out of the race. I don't know about you, but I would rather there be five good shops in my city than twenty bad ones. What the big picture says to me is that body art is still going strong and evolving everyday, that no matter how much the politics and economics fluctuate in this country, the need for professional piercing studios is still great and is here to stay.

But what does the APP mean to you? Is it really about what the APP can do for you, or what you can do to support the mission of the APP?

The APP is an international non-profit organization that is committed to the dissemination of vital health and safety information to the piercing community, health care professionals, and the general public.

INTERVIEW WITH DIDIER SUAREZ FROM ENIGMA IN SAN DIEGO, CALIFORNIA



Alicia Cardenas
APP President

This past summer, I had the pleasure of seeing and hanging out at Enigma, the San Diego studio owned and operated by Didier Suarez. I was overwhelmed by the shop's sense of love and attention to detail. Housed in a beautiful, freestanding building that looks like a bamboo shack with all the amenities, this studio is all family and loaded with experience. I felt honored to get to know each and every one of the staff and to have the opportunity to watch them work.

A: Thanks for talking to me, Didier. First, I would like to know how long Enigma has been open.

D: Three years, but the shop started in 2000 in a different location. We have been creating a market for large tribal jewelry in San Diego for quite a while.

A: What is the vision or mission statement of Enigma?

D: The vision of Enigma is to provide a place for people to go and receive service at a confident, reliable, safe, professional piercing shop offering all the information, knowledge, experience and jewelry available from the professional piercing industry.

A: Who brought you into the industry?

D: I feel really lucky to have been started off on the right foot, brought into the industry by Gahdi Elias (former APP Board Member) in 1993.

A: I have been seeing you at Conference for quite a few years, but until this year, you never became a member. What is the reason you finally joined up?

D: After I left Mastodon [Gahdi's shop], it was an uphill battle to bring a studio up to standard. While I was able to control my environment, it was difficult because of the high volume and the fact that the business owners didn't grasp the concepts of progressive piercing. I had similar problems with an old business partner, but soon all the elements were there. But I was being entirely too hard on myself before sending in the info...

A: Tell me a little bit about the crew that works with you.

D: It is like a family. It has its typical headstrong young confident male piercer, Matt, a quiet workhorse who is very trustworthy and I feel lucky to have him. Then there is the extremely experienced and confident female piercer, Corey, who has an amazing ability to bring people together and is still humble and remembers she wants to learn and wants to move forward. And then there is Fernando...





THE CREW: COREY LOLLEY, DIDER SUAREZ, FERNANDO AND MATT SOUTHWOOD

A: Who is Fernando?

D: Fernando came through a friend who was tattooing in Tijuana. He asked if his friend, Fernando, could sit in on a few piercings. Fernando has a thirst for knowledge about piercing, but he doesn't speak much English. He now comes to the studio and helps twice a week and absorbs everything around him. He travels two hours up to San Diego just to learn and takes it all back to Mexico with him. He has the fire to make changes where he is in Mexico. He inspires all around him as well. He doesn't say much but when he does he says a thousand times more than most. We have a helping-each-other-out mentality about it.

A: If you had to give some advice to a new shop owner, what would it be?

D: Plan ahead, and as soon as you get the keys, open and continue to give all your money back to the business. It will only make it a better place and become more lucrative. Buy the most jewelry you can so you can give the widest variety of options that are on the market.

A: In having visited the shop, I'd say it has a very family feel to it. What would you attribute that feeling to? How do you maintain it?

D: I keep a small staff and spent years struggling together for a happy median between owner, boss, friend and mentor. There is lots of heartache, but also good friends working together, putting clients over everything (money). Blood, sweat and tears.

A: Who are you inspired by?

D: In the piercing world, Elayne Angel. She was who I received my nipple piercings from when I was nineteen, and after seeing it that good early on, that was it. This experience set the standard very high. And my family, specifically my parents. Even though they are older, they never stop self-improving and continue to be great people.

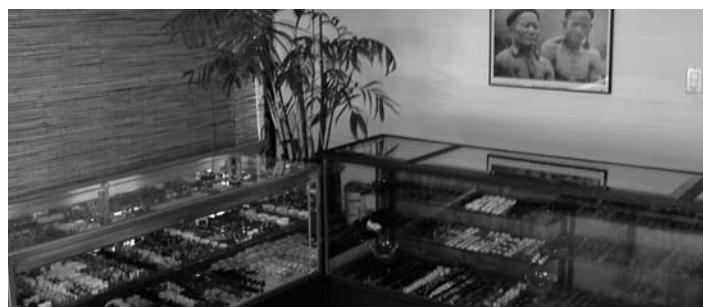
A: Beside the studio what are some of your personal goals for the future?

D: I would like to keep raising the kids and eventually start another family, and while doing all that try to get some traveling in there and see more cultures and history of the decorations that I emulate and add that to who I am. Educate the public about the standards that they should have about body piercings, giving them the option of a higher standard.

A: I know you travel quite a bit. What is that about?

D: I go and help promote for Industrial Strength. They go to one or two conventions a month, outreaching to the industry and giving them APP brochures. Steering them away from bad jewelry and toward the industry standard, trying to spread the philosophy that I carry a higher standard of jewelry to all the areas of this nation. I am happy to see a great turnaround, especially in the East, while watching the industry grow. Even though it took me many years to join the APP, I have always been a strong supporter of the conference and the standards. I tell everyone- don't make excuses to not be a part of an organization that promotes health and safety. I wish I had joined earlier. I thought I was doing enough by doing the work, but I feel there is strength in numbers and you should join.

A: Thank you so much for your time and energy. I can hardly wait to visit your studio again. We appreciate your help and support, and look forward to seeing you again at Conference.



LIFE AFTER PIERCING: UNSEEN FORCES AFFECTING OUR WORK



Fakir Musafar

Any one who has been piercing professionally for a number of years has experienced those odd moments when a client has had a profound psychological, emotional or even psychic reaction at the moment of the piercing or thereafter. It may express itself as an intense verbal or physical reaction: a scream, a growl, forceful exhale, a physical twinge or jerk, a trance-like state and even fits of laughter. As a piercer you may have felt a rush of energy, an electric tingle or similar sensation. What is happening at these moments?

If you believe body piercing is only pushing steel through flesh and hanging something in the opening you've made, I think you should carefully examine your motives and understanding of the role of a body piercer. Body piercing is more than technique, more than aesthetics, more than just medical health and safety issues, more than a psychological mind game. Sure, these things are extremely important. But the unseen effects of our work may be just as important or even more significant if you realize the unseen effects of a piercing may result in permanent changes in your client's personal life. How is this possible?

The cultures from which the practice of body piercing was borrowed almost always see the act of piercing as a form of "magic," something that affects the unseen part of an individual's world. It is part of their traditional understanding that when you make an opening in the physical body, you are also making an opening in the psychic body. And when that happens, psychic energy can flow in and out of the opening just like physical matter can pass in and out of a flesh wound. At the moment a body piercing is made, you also open up various non-material centers (called chakras) and energy can squirt out, enter or be rerouted. This is the basis of Eastern medicine like acupuncture.

For example, if a person has had difficulties and disappointments in life and thus holds grief, pain and sorrow in the heart chakra (has a broken heart), piercing nipples in the Fourth Chakra can open it up and stuck energy gushes out. As a sensitive piercer, you can feel this energy shift. Likewise if a client has a closed heart chakra and finds it difficult to accept love or be loved, piercing a nipple can open the heart center and you can feel this too. The after effects of opening, closing or locking these energy centers can have a profound influence on your client's life after they leave your studio. And this unseen activity happens even if you are unaware of it or do not believe in an "unseen world."

Over my forty some years as a body piercer, I've run into some interesting cases where a person's life was totally turned around and changed post piercing. One man came to me and told me a bizarre

story about his sex life. He had a long-time relationship with a powerful woman whom he claimed had placed a charm on his sex center. He could only have sex with her – no other. When she died, her influence continued and for ten years he had not been able to have an erection. He had seen all kind of medical specialists and tried all kinds of treatments. Nothing relieved his dysfunction. So he came to me and asked if I would do an Ampallang. Some inner voice told him a voluntary piercing in his penis might erase the charm. So I did it. At the moment of the pierce, I heard a loud woman's scream and my client went into a trance state for some fifteen minutes. Several days later I got an email from him. He was overjoyed. He was getting repeated erections with the Ampallang bar in place. For him, the spell had been broken. Was this really the case of a dead woman having a grip on her lover's genitals? Or had it just been a case of canceling a post-hypnotic suggestion? The man didn't care. He had his dick back.

Another example was the puzzle we body piercers faced in the 80's. Why each spring, when the weather changed, did young woman flock to

our studios to have their navels pierced? What prompted them to want this third chakra piercing and especially in the spring? I asked a lot of questions, researched the contemporary psychological situation of young women in our culture and consulted with other body piercers. After a few years, an explanation began to appear. Seems young woman in our culture are under a great deal of pressure to behave a certain way, appear a certain way and conform to a peculiar set of societal mores. They are bombarded by advertising, peer pressure, parental pressure and their rising sexuality. All of these pressures impact the "Third Chakra" which operates on self-image, personal power and gut level emotions. It is felt especially strong in spring, the "mating" season for mammals. So for some reason unknown to either the young woman and often her body piercer, she simply must have her "belly pierced" and some pretty piece of jewelry inserted. So what does this do? Taking a cue from piercing mythology of older cultures, it puts a "lock on the door" and limits or modifies pressure on her Third Chakra.

PSYCHIC
ENERGY CAN
FLOW IN AND
OUT OF THE
OPENING JUST
LIKE PHYSICAL
MATTER CAN
PASS IN AND
OUT OF A
FLESH WOUND.

CONTINUED ON PAGE 8

THE POINT ISSUE 34

GEMSTONES AND CHAKRAS: A PRIMER FOR PIERCERS



April Johnson
APP Vice-President

Throughout history, people have treasured gemstones not only for their beauty, but for their reported ability to protect, purify, and magnify healing powers. Many traditions use stones to balance and realign chakra energies on the body, and others, like Chinese Feng Shui, use stones to move energy through spaces as well. Even Western science recognizes multiple and sometimes surprising properties of crystalline structure, particularly when coupled with light, electricity, or other energy sources.

Whether or not you personally believe in crystal work, our larger society is becoming more engaged with alternative and complementary medical treatments, and many of our clients would like to know more. Our industry has already incorporated many cultures' rituals into our practice. Why not educate ourselves on the healing properties of the gemstones in our shops, so that we can aid our clients to place them in the proper realms of their bodies? In order to do so, we need to understand some of the basic principles of what chakras are and name some of the more common stones used to enhance these areas.

The living body is essentially an electrically charged organic machine. In order for all its systems, organs and cells to function optimally, they must all be in balance and receive their share of nutrients, energy and cleaning. Long before modern neurology came along, traditional physicians recognized the importance of the energy flow that nourishes the organs and cells of the body, supporting them in their vital functions. When the flow of this force is disrupted, it causes diminished functions in the body, including prolonged healing. So, obviously anything we can do to help balance and maintain this energy flow can only benefit us.

The major and minor energy pathways that flow through the body intersect in thousands of places, all of which are called chakras. There are seven primary confluence points or hubs through which all the channels pass. These seven all lie along the spinal cord, and are what most people mean when they use the word chakra. Although this word comes from the Indian tradition, many other medical systems, from Chinese acupuncture to Native American healing, make use of these energy hubs.

The seven major chakras are each associated with particular colors and gemstones which, in their purest form, are said to exemplify the energy pitch of each position. Much as a violin string can be tuned by striking a tuning fork and adjusting the string until it vibrates at the same frequency, chakras can be balanced by placing gemstones on or near them. When they are all in perfect balance and moving with optimum energy (not sluggish, frantic or erratic), all aspects of the body get the nutrients, circulation, energy and attention needed for optimum health and healing.

Interestingly, the jewelry commonly worn in all cultures corresponds either to one of these major seven chakra points, or to a minor chakra particularly valued in that culture. Whether this is a conscious decision to enhance energy and healing, because current styles reference these old ways, or simply because people seem more attracted to decorations placed in these areas depends on the time and culture. Think for a moment of types of jewelry – navel jewels, belt buckles, necklaces, bracelets, rings, earrings, diadems, tiaras and crowns. All of these draw light (energy) and attention to either one of the seven primary chakras, or to the secondary chakras at the wrists and hands,

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Editor's note:

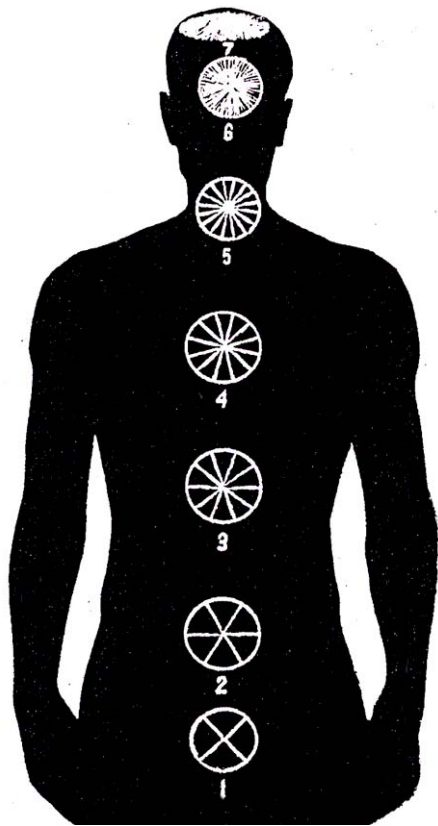
You may notice that, while both April and Fakir have connected chakra theory and body piercing, there are some differences in their interpretations. Neither is incorrect. Although jewelry and gemstones have been worn over certain chakras in many cultures for thousands of years, no culture has ever practiced all the forms of body piercing now common to us.

The question of exactly which piercing went with which chakra was never able to be asked in this way before, so there is no right interpretation.

When considering chakra theory and choosing piercings for yourself or your clients, remember that intentionality is everything. What your client means a certain piercing to be working on will be more important than exactly where the spot is on the

charts. If a client is repeatedly drawn to a particular stone or piercing, there is a reason; respect it.

Discuss possible meanings of the piercings, chakras and stones, and then let the client be guided by his/her intuition and what "feels right." Let him/her hold a few stones one at a time to see which is the one. Part of the impact of body work is that the body knows what it needs, often before the mind does. Regardless of its location, from the moment of deciding on, this piercing and stone will be a physical reminder to the client of what he/she has decided to focus on or heal. That constant reminding of intention brings additional energy to the chakra and stone, and increases the power and success of the experience. - MM



If a piercing is done with conscious understanding and strong intent it becomes extremely effective in creating a “Guardian of the Gate.” It moderates the opening, closing and release of energy in a chakra center. It filters the piercee from negative energy and allows only positive energy to flow into the charka. When a piercing is done this way, I call it a shamanic body piercing. If you are aware of this reality you can be a party to amazing transformations in the mental, physical and psychic world of your client.

Fakir

7th Chakra, “Crown”
Opening to Higher Self, Divine Within, Cosmic Energy
Inner Ear, Conch, Bridge, Septum Piercings

(Most shut down chakra in Western Culture)
Nipple Piercings

6th Chakra, “Third Eye”
Opening to Inner Sight, Psychic Abilities, Intuition
Eyebrow & Bridge Piercings

3rd Chakra, “Solar Plexus”
Opening to Personal Power, Will, Selfish Self, Gut Level Feeling
Navel Piercings

5th Chakra, “Throat”
Opening to Communication, Breath, Purification
Tongue, Lip & Labret Piercings

2nd Chakra, “Genital”
Opening to Sexual/Erotic Energies, Animal Passions, The Tribe
All male and female genital piercings

4th Chakra, “Heart”
Opening to Love, Selflessness, Compassion, Empathy

1st Chakra, “Root”
Opening to System Base, Grounding & Survival Center
Guiche & Forchette Piercings

Chakras, Orifices & Related Body Piercings
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REAL LIFE CRIME DRAMA : THE JIMMY BUDDHA STORY



Alicia Cardenas
APP President

Many of you have already heard the first episode of this story: Last year, one of our long time vendors, Jimmy Buddha (Diablo Rojo), had his entire trailer stolen out of the parking lot behind the host hotel while the annual APP Conference Expo was being set up. Not only was this a huge setback to Jimmy’s business, but for the entire conference as well. Never before had any such atrocity happened to one of our vendors. (We will have extra security this year!). In an amazing show of community support, a collection was started during Conference week to soften the blow to Jimmy and his business, and the response was overwhelming. In addition, over the next few months, hundreds of flyers and internet postings were sent out through jewelry distributors and other invested parties to make the industry aware of the contents of the trailer, and to offer of a hefty reward for its recovery. The whole community quickly rallied in support, and we were all deeply affected by this tragedy. As small business owners, most of us understand how acts like this can cripple our livelihoods.

A few weeks back I contacted Jimmy to see about his fight to his retrieve possessions and collect insurance monies. Much to my surprise, Jimmy had a story for me. As the story was revealed I began to realize this: in a day and age where you are taught that trust-

ing the police and allowing them to do their jobs will ensure justice, the power of community and the strength of individuals can actually make more of a difference.

The next episode of The Jimmy Buddha Story goes something like this:

A small-time criminal was on the outs with his “partner” and contacted Jimmy, claiming to have information about his lost jewelry. Taking the information with a grain of salt – but not discounting that stranger things have happened – Jimmy followed up on the tip and took a trip out to Las Vegas. He contacted the local police, but was told that, without any solid proof, they didn’t have enough cause to enter this guy’s house. As a result, Jimmy went “undercover,” starting with a sting operation to confirm the jewelry was in the house where it was reported to be. He was told that the “suspect” often approaches people with tattoos and piercings in an attempt to sell the stolen jewelry. Naturally, Jimmy carefully put himself into situations where he would be approached. The guy took the bait, approached Jimmy, and offered to sell him some jewelry. Jimmy was then invited back to the guy’s house to look through jewelry, and left after having bought

CONTINUED ON PAGE 21

which are centers for interacting with and taking action in the world. As professional body workers and decorators, this is part of our history, and we should know it.

The first chakra is the Base, or Root Chakra, located at the bottom of the spine. It is the meridian associated with genital piercings such as the guiche and fourchette. The second, or Sacral Chakra, is just below the navel and could be enhanced by all other genital piercings. The third, Solar Plexus Chakra, which is about a hand's width above the waist, could connect with the ever-popular navel piercing. The fourth is the Heart Chakra, which is over the physical heart and may be energized by nipple piercings. The fifth chakra is the Throat Chakra, which could be the most commonly accessed through body piercing. It is located behind the voice box, but because our ears, nose and throat are all passages for the air and energy that moves in the throat, this chakra can be associated with any oral, ear or nose piercing. The brow, or Third Eye Chakra is the sixth chakra, which is above and between the eyebrows. This could encompass eyebrow and bridge piercings. The seventh, the Crown Chakra, is at the top of the head and does not have traditional body piercings to coincide with it, but is traditionally decorated with tiaras and crowns.

This is only a brief description of chakra and stone theory, but it should do for the purpose of helping our clients. Let's move on to some examples of specific stones that might be useful in our daily practice. Each chakra has a traditional color corresponding to its level of vibration (think of light wavelengths), and any translucent stone of that color may be used to good effect. When guiding a client to choose gemstones, keep in mind that more pure colors are more forceful stones; softer shades are gentler. Above all, a client should go with a stone he or she is drawn to, because the body often knows what it needs before the mind does.

Many gemstones and crystals are multi-purpose healers, but we can start with a list of three for each chakra and give a brief description of the most predominately utilized within our industry.

Base – Red: Hematite, ruby, garnet. Hematite has been used to keep the body cool; to decrease blood disorders, nervous problems and insomnia, as well as align the spine. It is good at grounding energy and acting as a stabilizing force. It decreases negativity, stress and money concerns, and can help balance the body/mind/spirit.

Sacral – Orange: Carnelian, amber, tiger eye. Carnelian has been used to heal open sores and to rejuvenate tissues and cells. This gemstone promotes harmony, creativity and self-worth. It also protects against anger and soothes grief and sorrow.

Solar Plexus – Yellow: Citrine, gold, topaz. Citrine treats digestive problems, thyroid imbalance and circulation of blood. Known as “stone of prosperity,” it is an energizer that aids in emotional healing, increasing motivation and physical energy.

Heart – Green: Rose quartz, jade, emerald, peridot. Rose Quartz aids the physical heart, circulatory system, and is

said to increase fertility and aid weight loss. It is a stone of unconditional love; opens the Heart Chakra; soothes wounded hearts and internalized pain.

Throat – Deep blue: Turquoise, aquamarine, lapis lazuli. Turquoise enhances physical and psychic immune systems, alleviates pollution on all levels and strengthens the meridians of the body and subtle energy fields. It has been called a “stone of communication,” and protects against negativity while attracting love.

Third Eye – Indigo: Amethyst, sapphire, opal. Amethyst is said to assist with healing, alcoholism and addictions of all kinds, strengthens and cleanses organs and circulatory system, calms the nervous system, and protects travelers. It aids insomnia and nightmares, hearing, the digestive tract and the heart. Brings clear vision and energies of stability, peace, calm, balance, courage and inner strength.

Crown – Violet: Diamond, pearl, moonstone. Diamond amplifies energy, aids in glaucoma and includes qualities of fearlessness, invincibility and fortitude. It has been called the “stone of invulnerability” as well as the “king of crystals.” In addition to being a symbol of power and wealth, diamond is also an emblem of love, trust, clarity of purpose and commitment.

The connections between crystals and the physical body have been known about for thousands of years, from the Native peoples of North America to the alchemists of medieval Europe and beyond. I believe it is time for us to adopt that concept to be used in the piercing industry. Even if you do not turn to stones yourself, the more knowledge we have of the products we offer, the better salespeople we become. So, even if you have no interest in healing and balancing chakras with crystals, you may still benefit by sharing this information with those customers who do

Recommended readings:
Hall, Judy. *The Illustrated Guide to Crystals* (Sterling, 2000).
Kynes, Sandra. *Gemstone Feng Shui: Creating Harmony in Home & Office* (Llewellyn, 2002).

When the flow of this force is disrupted, it causes diminished functions in the body, including prolonged healing. So, obviously anything we can do to help balance and maintain this energy flow can only benefit us.

RELEASE FORMS



Christina Shull
APP Secretary

Asking the right questions can give the piercer valuable insight into how the client will tolerate the procedure, complications that may arise during and after the procedure, and if the client is not well suited for the procedure at that point in time.

With the leaps and bounds that the piercing industry has made in the last ten years, it appears that post-procedure complications are on the decline. Unfortunately, as body piercing has become more mainstream, lawsuits are becoming more frequent. We live in a litigation culture where both piercers and piercees can make small mistakes that could cost your studio thousands of dollars in the end.

Client release forms are your first and most important line of defense against lawsuits. They are a way to educate your potential clients and to screen out complications before they occur. In a worst-case scenario, the information the client provides on the release could make the difference between an unhappy settlement and winning a case.

Asking the right questions can give the piercer valuable insight into how the client will tolerate the procedure, complications that may arise during and after the procedure, and if the client is not well suited for the procedure at that point in time. By knowing what questions to ask and what answers should be “red flagged,” many potential problems can be avoided altogether. Some essential questions are discussed below.

Are you pregnant or nursing?

Most professional piercers refuse to pierce someone who is pregnant. During pregnancy, a client's nutrients, defenses and energies are needed for the more important task at hand, so the body should not be stressed with additional details like healing a piercing. For the client's peace of mind (and that of her midwife or doctor), potential entry sites for infection should be avoided, so creating an open wound is not the best idea at this time. Some women are also more prone to fainting or vomiting during pregnancy, especially in the first trimester. Piercees who are nursing are strongly urged not to receive nipple piercings until they have finished breastfeeding and are no longer lactating.

Do you have Mitral Valve Prolapse or any other heart condition?

Clients with Mitral Valve Prolapse or other conditions that require prophylactic antibiotics before medical or dental procedures should not be pierced until they have consulted their physician. Some body art-related deaths have been attributed to complications arising from Mitral Valve Prolapse.

Do you have any bleeding disorders or other medical conditions that may affect the healing of your piercing?

Open-ended verbiage about communicable diseases is generally the easiest way to address HIV and Hepatitis without treading on dangerous legal ground. When asking for disclosure about specific conditions, you should always consult with an attorney to ensure that your release form is in accordance with local laws. Remember, your goal is not to know exactly what the client's health concerns are, but that they are aware of any risks they may face and have taken proper precautions.

Other conditions such as anemia, hemophilia, or epilepsy may require further information and/or a doctor's advice to ensure the client's safety and comfort. If you do not know much about the client's condition and how it may affect their piercing or healing, do not be afraid to consult with a piercing-friendly physician before performing their procedure, or to require the client to bring in a doctor's note stating they can be pierced safely. It can only benefit the client and protect you from any unexpected complications.

Are you prone to fainting?

One of the most frequent risks piercers face is that of a client fainting and injuring himself or herself or someone else. Since many clients may never have fainted before their first piercing, this question won't screen out all fainters.

But asking can at least clue you in to clients who have fainted from similar procedures in the past. If a client is prone to fainting, extra care can be taken to give juice beforehand, lay the client down for the procedure, keep him/her lying down for a few minutes after getting pierced, or invite him/her to hang out in the lobby for a little while afterwards before driving home.

Have you eaten in the last 4-6 hours?

Clients who have not eaten in the last four to six hours are often more prone to fainting. Therefore it is appropriate to request that all clients, especially those prone to fainting, eat something before the procedure to reduce this risk.

Do you have any allergies such as latex or iodine?

Studios still using latex gloves or rubber bands should ask if the client has a latex allergy/sensitivity and should have non-latex gloves avail-

Unfortunately, as body piercing has become more mainstream, lawsuits are becoming more frequent.

CONTINUED ON PAGE 12

SAMPLE PIERCING RELEASE FORM

Name _____ Phone _____

Address _____

City, State, Zip _____ Age _____

I, _____ request (studio) to pierce my _____ and in doing so, hereby release (studio) and its employees and agents from all manner of liabilities, claims, actions or demands, in law or in equity, which I or my heirs might have now or hereafter, by complying with my request to be pierced.

I understand that I will be pierced using appropriate instruments and techniques. To ensure proper healing of my piercing, I agree to follow the aftercare guidelines that have been provided in the Aftercare pamphlet until healing is complete. I understand that this type of piercing/procedure usually takes _____ or longer to heal.

I have made the decision to have this procedure done with a full understanding of possible complications such as, but not limited to, infection, allergic reaction or rejection of the piercing. I understand that by having this piercing performed, I am making a permanent change to my body and no claims have been made regarding the ability to undo any changes made.

Please answer the following questions, so we can ensure you the best possible experience.

- Yes No Have you eaten in the last 4 hours?
- Yes No Are you anemic?
- Yes No Are you prone to fainting?
- Yes No Are you prone to heavy bleeding?
- Yes No Have you taken aspirin, ibuprofen or anticoagulants in the last 24 hours?
- Yes No Are you allergic to latex or iodine?
- Yes No Do you have any other allergies? _____
- Yes No Do you have Mitral Valve Prolapse or any other heart condition that requires antibiotics before dental work or other medical procedures?

- Yes No Are you pregnant or nursing?
- Yes No Do you have any other conditions that may affect the procedure or healing of your piercing? _____
- Yes No Have you consumed any drugs or alcohol in the last 24 hours?

Signature _____ Date _____

By my signature above, I certify under penalty of perjury that the above information is true and correct. I further understand that, if I give false information or produce false documents stating my name and age to be other than what is correct, then I am liable for prosecution.

Date of Birth _____ Checked and Copied By _____

Piercer Signature _____ Jewelry Used _____

Post Procedure Comments _____

The sterilization procedures used for my piercing procedure were explained to my full satisfaction and that I had the opportunity to ask any questions regarding these procedures and/or my piercing. All equipment used during the procedure was opened in front of me and I witnessed the disposal of the piercing needle in the medical Sharps container. Both verbal and written aftercare instructions were provided to me. I acknowledge the above comments by the piercer regarding my procedure.

Client Initials _____ Piercer Initials _____ Time In _____ Time Out _____

able if needed. Special care should be taken for those who have acute allergies, because just breathing airborne latex powder or being near surfaces in the piercing room that have been touched with latex previously could cause an allergic reaction. Other products that clients may have allergies to, such as iodine and some lubricants, should also be included in the questionnaire and a backup product should be available if possible.

Have you taken aspirin or other anticoagulants in the last 24 hours?

This question can help you assess the potential for the client to bleed more than expected. By knowing that your client may be more prone to bleeding, you can be better prepared to handle the situation. This is especially beneficial with piercings that can be prone to bleeding, such as cartilage piercings that have been pierced with an oversized needle, or male genital piercings like Prince Alberts and apdravyas.

Have you consumed alcohol or any other drugs in the last 24 hours?

As with some medications, alcohol consumption can make your client more prone to bleeding. Also, this question could help prevent performing a piercing on a client who may be under the influence, although it is advisable to be careful with how this question is worded and answered. Some studios may perform piercings on clients who have consumed a drink or two to calm their nerves, which might lead to problems later if the client does file suit and the release form indicates that the client had been drinking prior to the procedure. In some states, those under the influence cannot give full legal consent. Please consult with your attorney before including this on your release form.

CLIENT IDENTIFICATION

Identifying your client is one of the most important things you can do to minimize your chances of unknowingly piercing a minor or piercing a minor who does not have their true parent or legal guardian signing for them. You should always ask for a state- or federally-issued photo ID, such as a driver's license, state issued identification card, passport. Some studios will allow for a minor to have a school ID that includes a birth date or a school ID accompanied by a birth certificate. The driver's license ID is the strongest since a client even possessing a fake license is a prosecutable offense and shows intent to defraud. Check into what your local laws are for identification requirements, but in all cases maintain a copy of a photo ID on file.

Proof that the client was identified should be included on the release form, after the employee has looked at the picture ID and verified that it appears to be the person who is filling out the release form. The release can include a space for the client's birth date and the number of the driver's license and the issuing state, as well as the name of the employee who verified the ID. For optimal proof that

ID was verified, it is strongly suggested to photocopy the client's ID onto the release form. A photocopy of the identification presented will prove beyond a doubt that the client presented an ID and in the case of a fraudulent ID, could prove that the client had misrepresented him/herself and is at fault. Including a space for the employee's name also allows the shop manager to follow up with the responsible employee if a concern arises.

For those who pierce minors in their studio, the safest bet is to require ID for both the minor and their parent, as well as a birth certificate. This allows less room for error – although with the number of teens who have legal guardians, foster parents, and

step parents who might sign for their piercing, caution is still advisable. One good policy is to require that the last names and addresses of the adult and minor match to prove custody. In cases where they do not match, marriage licenses, change of name forms, adoption papers or other proof of legal responsibility can be required. Again, this is something that your studio needs to decide with an attorney based on local laws.

CLIENT INFORMATION

The release form should also include a release of claims (see both samples of release forms), the client's age, signature, date the form was signed, and a penalty of perjury statement. When it comes to release forms, the more information the better. This information can only better serve the client and their piercer. Additional information that may also be beneficial to include on your release form could include:

Time In and Time Out.

This information could be helpful in the event of a client fainting hours after their piercing procedure, although you should consult your attorney about the benefits and drawbacks of including this on your release form. Also, this information can be helpful for management for monitoring a piercer's progress, and could be an indication of either complications during the piercing procedure, or of insufficient piercer-client interaction.

POST-PROCEDURE COMMENTS.

Here any procedure complications and how they were handled can be recorded, including light-headedness, excessive bleeding, problems with the jewelry transfer, placement problems, anatomy considerations, etc. This information could help the piercer remember the client and issues that arose during the procedure in case of a lawsuit. This is also information that can help management oversee a piercer's progress and evaluate recurring complications.

POST-PROCEDURE DISCLAIMER.

It is a good idea to have a place at the bottom of the release form for the client to sign after the procedure that includes witnessing the disposal of the needle, opening of sterile pouches, explanation of the sterilization procedures, verbal and written aftercare, etc. In the event that a client does file suit, you have documentation verifying that the client felt comfortable with the studio's sterilization procedures and

Check into what your local laws are for identification requirements, but in all cases maintain a copy of a photo ID on file.

AT THE 2006 APHA CONFERENCE



Jim Weber
APP Medical Liaison

The annual conference for the American Public Health Association took place December 11th through 14th. Originally scheduled in New Orleans, APHA was forced by Katrina to relocate to Philadelphia, making it all the more convenient for us East Coasters to attend.

The APP has manned a booth at the APHA conference for the last 6 years, but this was the first year for Luis, April, and myself. While our presence prompted a handful of quizzical remarks (“Why is body piercing a public health issue?”), our supporters far outnumbered the detractors. Many attendees were old friends from years past and glad to have us back. They understood that we are all working toward the same goal – public health – but in and from many different communities.

The Expo Floor clearly reflected this diversity. The range of organizations addressing a vast number of issues was truly exciting. There were universities promoting their health care curricula, pharmaceutical and equipment companies showing products, homebirth advocates, anti-landmine lobbyists, reproductive health educators, pro-choice Catholics, condom companies, and everything else public health-related. The whole array was organized around a huge booth manned by the US Centers for Disease Control (CDC).

Being at the Expo is really a wonderful opportunity for the APP to communicate with other people in the field, from health educators to nurses, medical professionals to legislators, university faculty to government employees, and everyone in between. Rather than work-

ing only from the top-down and outside-in, the APHA Conference allows us to reach people at that are in a position to really make a difference in local, state, and national policy, and on the ground.

We handed out hundreds of pamphlets, stickers, posters, and dozens of procedural manuals (new on CD!). We answered questions about what the APP does, about membership, and about all things piercing-related. We even presented a talk in the Exhibitor Theater entitled *Body Piercing: A Primer For The Medical Professional*.

The high point by far was an impromptu political demonstration in the Conference Hall, calling for an end to the war in Iraq as a public health issue. Dozens of attendees and exhibitors marched through the hall loudly condemning the human cost of the continuing war, calling for its end and the return of US troops. The demonstration culminated with the circling of the US Air Force Surgeons’ booth, with many protesters holding up signs questioning the inclusion of what they saw as military recruiting at a conference devoted to public health. The demonstration, while peaceful, was nonetheless emotionally heated and left a charge that reverberated for the rest of that day.

The conference closed on Wednesday the 14th, and left me both encouraged and optimistic. After years of watching the APP work behind the scenes, it was really affirming to be told repeatedly and consistently that people were glad we were there. Health educators really did accept us as their peers – as in many ways we are.



PROTESTORS AT THE 2006 APHA CONFERENCE

MODS & MRI'S... CAPTIVE BEADS & CT'S... MEDICAL MYTHS VS. RESEARCH REALITIES



Scott DeBoer

In the emergency department, diagnostic imaging (X-rays/CT scans/MRI's) has become an integral part of many diagnostic processes. This fact is coupled with the recent findings of an undergraduate college student study in which 23% of students had tattoos & 51% had something pierced beyond their ears! (Mayers 2002) As body piercing & tattooing are certainly on the rise, the medical implications of these body modifications are becoming more & more evident. However, when it comes to diagnostic imaging and body jewelry, the motto of "when in doubt... just take it out" is not always practical, reasonable, or even possible. This brief overview hopes to illustrate some of the controversies & medical realities of body modifications & emergency imaging.

Review of the literature:

Body piercing & diagnostic imaging

What really happens when patients with piercings undergo diagnostic imaging? Urban legend says that jewelry will "fly across the room" during a magnetic resonance (MR) scan & the artifact from jewelry or tattoos will make CT/MR studies unreadable. However, a review of the medical journals, along with discussions with radiologists and surgeons, found that in many cases, this is indeed, urban legend. The majority of published articles that address MR & piercings, focus not on the potential artifact, but on the safety of performing the procedure. (Editor's note: In this article, "artifact" refers to the image of jewelry or other material that obstructs the scan's view of underlying tissue.) If quality body jewelry is used (316L Stainless Steel, Titanium, Niobium), the research shows that performing MR examinations is safe. Testing the jewelry prior to entering the MR suite with a handheld magnet, though not failsafe, has been suggested as a "quick & easy" screen to determine ferromagnetism (i.e. will the jewelry rip out of the patient & fly into the magnet?) Interestingly, the vast majority of the medical literature focuses not on piercings & imaging, but on what happens with tattoos & MRI's (i.e. potential heating of the ink & subsequent burns). Though not the focus of this particular review for *The Point*, this complication is very rare, but indeed has happened, and those with tattoos, as well as the technicians performing the MRI, should be aware of this fact.

From a trauma perspective, the goal of our research was to review the published literature and detail what "does & doesn't happen" with heavily pierced/tattooed persons & diagnostic imaging. To accom-

plish this, a volunteer professional body piercer underwent CT & MRI imaging. As he was pierced & tattooed "from head to toe," he was the ideal "model" for our research.

Summary of our model's piercings/tattoos

SS (316 stainless steel) & T (titanium)

- Tattoos "everywhere"
- Eyebrow: SS & T
- Nose: SS, T, & Tygon
- Tongue: SS
- Ears: SS, bone, amber, & niobium
- Neck: SS barbells taped to back of neck to simulate surface bars
- Abdomen: (3) pieces of jewelry (cubic zirconia & "piercing retainers") taped to abdomen
- Genitals: SS

Note: No hand-held or MRI magnet attraction to the retainers, SS, titanium, niobium, gold, bone, or amber jewelry was found.

when it comes to
diagnostic imaging and
body jewelry, the motto of
"when in doubt... just take
it out" is not always
practical, reasonable, or
even possible

MRI Studies:

Prior to entering the MRI suite, a handheld magnet was used to quickly determine the ferromagnetic status of his jewelry & he was cautioned to inform the technician immediately if there were any warm areas or noticeable pulling on the jewelry during the procedure. The "patient" experienced no adverse effects during the procedures & the results were quite surprising. The brain and spinal cord was, from a trauma perspective, able to be visualized throughout. Interestingly, the main source of the artifacts was the earrings. Of note, the mouth/nose/eyes were also significantly distorted due to artifact from the jewelry, but the "trauma areas," i.e. brain & spinal cord were able to be seen with acceptable quality. The pictures of the abdomen showed minimal artifact as well, and from a trauma perspective, the key organs able to be seen throughout.

CT:

In the medical journals, the concerns with CT scanning & tattoos/jewelry are primarily focused around artifact. The ear jewelry was



Mike "Koz"
Kozlowski
pre-MRI scan

again the biggest source of artifact, but as with the MRI images, despite over 15 pieces of jewelry in and around his head, the brain & spinal cord were able to adequately visualized. There was some definite artifact on CT scan across the uppermost cervical spine and the floor of the mouth. Also, the orbits were poorly seen and are possibly the biggest artifact overall (imagine that with 6 pieces of jewelry in the eyebrow). CT examinations of the chest & abdomen were similar to the MRI findings with the key internal organs that are commonly of concern in trauma able to be visualized adequately.

In summary, though adverse events such as burns from tattoos/MRI's & artifact from body jewelry have been described, they are, in comparison with the amounts of imaging studies that are done, incredibly rare. As with any procedure, screening & patient safety are paramount, but with a knowledge of the research, as well as an "open mind" many diagnostic imaging procedures can be very safely done "without taking it out!"

The authors wish to thank Dr. Chris Strauss from the University of Chicago Department of Radiology for his invaluable assistance with this project.

Note: A complete version of this subject including the medical review of tattoos & imaging as well as piercings and "regular x-rays"/ultrasound is currently being reviewed for publication in an upcoming emergency and trauma medical journal.

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MARK YOUR CALENDARS!

Don't miss the 11th Annual
APP Conference and Exposition
Sunday April 30 - Friday May 5, 2006
at the Riviera Hotel and Casino in Las Vegas Nevada.

There are classes offered in everything from piercing technique to marketing, current industry legislation to accounting, studio setup to aftercare. There is something for everyone, from the first time attendee to the long term shop owner, with classes geared specifically for health care professionals.

The exposition includes vendors from all segments of the body piercing industry from the United State and abroad. Thousands of items are available at the year's largest gathering of manufacturers and distributors directly targeting the body piercing market.

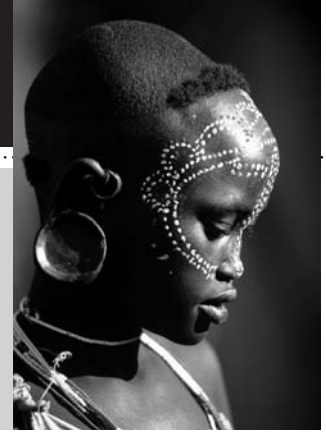


For updates about the conference please visit:
www.safepiercing.org
or call (888) 888-1APP

QUESTIONING OUR IDENTITY: AN OPEN LETTER TO NATIONAL GEOGRAPHIC



Megg Mass
Former Board Member



Just before Halloween two years ago, I received a call from a *National Geographic* researcher who wanted to talk about the “Modern Primitive Movement.” At first I was thrilled to talk to her. Like so many of us, my earliest exposure to body art was through *National Geographic*. I remember leafing eagerly through its pages, flipping impatiently past artful photos of domestic geysers and Siberian pipelines, looking for the Good Stuff. You know what I mean – the up-close shots of beautiful dark-haired people with little clothing and lots of body decoration. I knew I could never be one of those lovely indigenous people I saw there, but I wanted to know who wrote these articles, and I wanted to know how I could get a job doing that. *National Geographic* not only fostered my love of body art, but also had a lot to do with why I became an anthropologist.

National Geographic not only fostered my love of body art, but also had a lot to do with why I became an anthropologist.

But that was the late 70s – before cable TV, and before *National Geographic* diversified its presentation to include a televised news “magazine” which competes for ratings with the Entertainment Tonight set. Despite its decreasing intellectualism, though, *National Geographic* still has a reputation for being well researched, accurate and trustworthy. “Educational,” as my parents said.

That’s what bothered me about this reporter’s phone call. The young woman with whom I spoke – and she did sound young – had no clue. The questions she asked showed a lack of insight, a lack of research and, moreover, a lack of anthropological education. She first wanted to write about Black Americans who were getting branded “to get in touch with their slavery roots” – Did I have any clients she could talk to? After I convinced her that this story was both baseless and offensive, she switched to the Modern Primitive Movement. She wanted to do the usual sensationalistic drivel about the bodmod crowd, the same sort of thing *Newsweek* and MTV have been writing about us for the better part of a decade. I was disappointed in her and in the entire magazine that had shaped part of my life’s ambition and aesthetic. After much thought and several more frustrating phone conversations, I sent the reporter a pointed letter scolding her for betraying the reputation of *National Geographic* with shoddy research and an immature story concept. I told her that when Real Sex did such a spot, people knew to take it with a grain of

We can reference another culture, but our work always comes from our own culture because we come from our own culture.

salt (usually). But people trust *National Geographic* to present verifiable and balanced information and accord it more weight in their decision-making. She had an obligation to do better if she was going to work there.

That said, I felt I too had an obligation to consider our culture more carefully than she had. In a class called “Global Aesthetics/Local Bodies” at Conference this year, I talked about identity and the spirit of what we are doing when we borrow ideas and body art from other cultures. The class started with some recorded music – tribal drumming (“imitation” African music by Americans), hip-hop and soul (“imitation” American music from Ghana and Senegal) – and the question of who has the “right” to cultural aesthetics. I made the point that, because the meaning of any type of body art is tied up not

only in what the wearer means, but in all aspects of the wearer’s background and how the art is read by those around us, when we imitate forms we see elsewhere we are really not getting the same pieces as people in the original culture. We can reference another culture, but our work always comes from our own culture because we come from our own culture. It is always acquired from the standpoint of our own identity, whatever that may be.

So if I am a White middle-class woman from Ohio stretching my ears, I don’t understand my holes in the same way as a Masaai woman would. My thoughts about them are mixed with the knowledge of what they mean in South America, among the Zulu, and in Philadelphia. My motivation for them has more to do with beautiful images I saw in photographs and on friends than on marriageability and how many cows they are worth. My daily interactions with others include explaining how to stretch, telling people not to touch, and smiling politely while they try not to use the word “gross.” These are not the daily experiences of the Masaai woman. Because we come from different cultural and geographical locations, because we start with different identities, the same piece of body art means different things for each of us. Neither is more valid or more authentic.

Each of us gets what we do for a reason, and it has all the meaning and power we invest it with.

Our body art may give us some insight into what others may be thinking or feeling, but even the way in which we notice physical



sensations is shaped by who we are and where we came from. We all know that modified folks think and feel differently about pain than do non-modified people. But even the way in which we feel differently is shaped by the identity we each started with. When trying to understand another culture, I think it is important to put my own body in the same types of sensory situations as people of that culture, but I am still myself, experiencing my own version of what they are feeling. I cannot “get,” “do,” or even “borrow” another culture’s art or ritual. I can only reference it as I create my own experience around it. I am no more than my identity allows – and no less.

That brings me to a second point: By trying to call us a “movement,” the *National Geographic* reporter implied that what we are doing is a passing phenomenon, something not destined to last and not part of society as a whole. Body modification in the US may have been a movement in the mid-90s, but it is now an established and existing part of American culture. It is present in every state, social class and age group. It cuts across race, educational background and style. While the term “movement” implies growing strength and political leanings, both of which we have, it also implies temporariness and tacitly disowns us from the mainstream. But we are bigger than that, and we are here to stay. We are a part of modern culture, and there is political strength in that as well. We are no longer America’s illegitimate children, but adults with legitimate points of view, and we need to claim that status. We are not modern people who also happen to be pierced. We are pierced modern people — as are the indigenous folks who have similar styles to our own. Our modifications are not an “extra” part of our identities, and we are not an “extra” part of modern culture. Identity and culture are indivisible.

After the talk at Conference, several people asked to read the *National Geographic* letter again. Here is a portion of that letter, written in November 2003.

Body art may have been a “Primitive Movement” 10 yrs ago, but it has now been so comprehensively mainstreamed that it hardly qualifies as either “primitive” or as a counter- or sub-cul-

tural “movement.” I mean this not only in terms of the physical appearance of decorated folks, but also in the attributed motivation – what people think they mean when they’re doing it. Furthermore, the “movement” is so diverse in participants and their own meanings, that it really has to be considered not as a movement, but as an institutionalized option. In most places being pierced or tattooed is not a radical statement anymore. It has become just one more aesthetic and identity option, like jock, Goth, crunchy, etc. But body art can also cut across all these categories, because folks in all of these sets are also pierced and tattooed, as are middle-aged soccer moms, medical residents and grandparents.

Some folks are getting pierced, tattooed, branded or scarred, or engaging in ritual suspensions to get in touch with their own ethnic traditions, some to align themselves with a tradition that seems to jive with them. But we cannot overlook fact that these folks are still American, and mostly White and middle class. They may be referencing a ritual or belief they saw or heard or read about from another culture, but they are not of that culture; they never will be. They were not socialized or brought up in that belief system, and their life circumstances are radically different from those of the tribe from which they are borrowing. Therefore their actions will necessarily have different meanings than those of the origin culture.

For example, if a certain scarification pattern is indicative of having attained manhood in one tribal group, all those who live there see it and know it for what it is. They have a common understanding of what the bearer has gone through and how he should now be treated. Perhaps he is now allowed to sit in a specific area during council, marry, wear certain colors and vote. If an American gets the same pattern after leafing through an issue of *National Geographic*, the scars may mean to him that he is a man (if indeed the picture’s caption included this infor-



mation), but it only means that to him, not to those around him, and this makes a huge difference. Identity is not actualized until it is verified by the outside group with which a person interacts. Since the larger American group doesn't register this young man as having passed through certain rituals, but only as someone who has a really intricate and beautiful tribal piece, his identity is that of American kid who is interested in and likes aesthetics of tribal bodywork. It is not that of an initiated male of a certain tribe who now has certain rights and responsibilities. Those who borrow or appropriate identities or aesthetics – or ritual actions or body art – from another culture will never be doing it for same reasons as folks in that culture. Religious ritual minus religion is mere performance, as moving and meaningful as that may be. Taking any of the original ingredients out of the recipe changes what comes out.

This does not mean that the art or the actions of folks in this country are any less meaningful. They are imbued with all the meaning that American participants invest in them. They can still be transformative for those who desire and expect them to be so, but they are not the same experiences and transformations as in the original culture. And that is okay. They do what they need to do for this place.

With the onset of globalization, TV and Internet, there are many more visible choices for one's identity. The artistic palette has widened. People try on ways of acting, looking and believing that they may never have seen in person, but that are

Body art may have been a "Primitive Movement" 10 yrs ago, but it has now been so comprehensively mainstreamed that it hardly qualifies as either "primitive" or as a counter- or sub-cultural "movement."

presented by these media as valid options for identity. They choose identities that are meaningful to them, at least at this moment in their life, because people's understanding, place and motivations in the world continually change. That is not shameful. Instead, it is human. Emerging and evolving as an artist and a person is not necessarily a sign of lack of commitment, but of growth and adjustment. But no matter what other culture these identities reference, the "modern primitive" of your article is still a white American kid who goes home to a comfortable house with a computer and Protestant parents and neighbors who do not understand the meaning that he/she ascribes to body art they wear. He is not a primitive or tribal person. He is a White middle class American in 2004 who is borrowing actions from another place and giving them new meanings. He is attracted to and inspired by the aesthetics and intensities of other nations, but he approaches them from this nation.

What is most interesting is not that people are doing this cultural contact, or exactly what type of modification they are doing (except in the sense that it shows how globalization and the Internet have opened up possibilities to choose from). What is really interesting is what it means to them. Modern body modification is hardly primitive in that information is gleaned from sources such as TV and the Internet, and the cultures we reference are drinking Coke and coping with international pharmaceutical companies and the building of hydroelectric dams. Also, "primitive" offensively implies an earlier evolutionary era, which again is hardly the case if America's

“modern primitives” are setting out from houses with electricity to engage in a quasi-primitive practice that derives its meanings from post modern life and discontentments, rather than from the need to bring in the herd so the people can eat. The so-called “Modern Primitive Movement” is not a movement. It is too diverse in members, meanings and intentions. It is also not primitive. It is a thoroughly modern phenomenon, although with historical precursors – like the European obsession with African art in the 1920s, and 1960s attempts to “live in the Indian Way.” In times of change there are often attempts to cast about for a simpler and more essential way of viewing and being in the world, and this aspect of body art is one of them. In that, it is more a sign of change and modern progress than of anything primitive.

That said, the actions and artwork of those who engage in body art are far from meaningless and should not be discounted. Neither should they be packaged and marketed, as is happening now. Although the term “Modern Primitive” was intentionally coined by a marketing expert with a financial stake in the spread of this “movement,” the intentions behind individuals’ actions are usually pure. They are usually a search for meaning, a search for identity and place in the multi-faceted and expanding global society in which we now live – a search so important that seekers are willing to undergo pain and sometimes alienation in order to become more attuned to their bodies and to whom they want to be. That search should never be denigrated, regardless of the forms it may take. If nothing else, that search is as old as humanity.

Incidentally, the *National Geographic* story was pulled. I got a very nice email informing me that they had decided that perhaps the story wasn’t such a good idea after all, and they were going to work on other things.



All images courtesy Carol Beckwith and Angela Fisher, from their book Faces Of Africa, published by National Geographic (2004).

CONTINUED FROM PAGE 3 : PRESIDENT’S CORNER

I feel over time many people have lost perspective of what the APP is and why they are participating in supporting us. I can’t tell you how many times I have been approached with requests that the APP “step up and do something” about a problem in the industry. Unfortunately, we are not the piercing police, nor do we have the manpower to fight “piercing crime” across the nation. Our biggest weapon against unethical practices is EDUCATION, creating awareness in the industry and among the general public. The APP has been on the forefront, encouraging responsible piercing, for the past ten years. It gained that position through the work of individuals. The individuals who were able to show up and speak on behalf of the community in regards to regulations and health care concerns, writing articles, distributing accurate and up to date information personally and through their studios. Individuals who did what they felt had to be done, regardless of what was in it for them. The APP is only as strong as its most outspoken and active members. The job is quite

honestly much too big for any Board of Directors.

I have grown tired of talking with piercers that have ten or more years experience in the industry but who do nothing but complain about what the APP is or is not doing – instead of getting involved and teaching, helping to make changes and getting things moving in the best direction for all of us. After all the years of this industry giving to each of us, providing us with, jobs, homes, shops, and great abundance, what have you done for it lately?

If you have anything you would like Alicia to address or questions that you feel would make a great Presidents Corner, please email : president@safepiercing.org.

NEEDLE SAFETY IN FREEHAND PIERCING



Luis Garcia
International Liaison

In the last five years many of us, myself included, have moved over to freehand piercing, and many people are being trained as freehand piercers from the start. In the last two years, warnings have started coming from those involved with the Occupational Safety and Health Administration (OSHA) that they are concerned by the way many of us perform freehand piercing. They have rightly commented that, because of the proximity of our fingers to the needle tip, we are at increased risk of a needle stick. This could lead OSHA to recommend that Boards of Health consider outlawing freehand piercing (at least in areas where there are laws in place that cover piercing). Even though they have yet to do so, this does not mean that OSHA will not issue such a recommendation in the near future. To maintain the highest standards of safety for ourselves as piercers, those of us who are committed to freehand piercing need to improve our methods and reduce our chance of needle stick.

Over the past few months I have been experimenting with using receiving tubes for all freehand piercings, trying to devise comfortable ways to hold the tissue and the tube, while keeping all my fingers away from the evil needle tip without getting too befuddled during the procedure. I know that many piercers are not comfortable with receiving tubes and may be worried about not being able to see the exit mark, leading to decreased accuracy.

If this is a concern, you can use either transparent Pyrex™ glass tubes or disposable polypropylene tubes. I prefer the polypropylene myself, for several reasons, which I will hit upon later in this article. With these tubes you can still see your exit mark, and therefore don't have to worry about compromising your accuracy.

There are three distinct ways that I've become comfortable with holding the tube and the tissue. The first is to hold the tube in the

non-piercing hand with the beveled end resting against the tissue, and the flat end resting on the palm, thumb and middle finger providing support for the tube, and the non-piercing index finger and piercing ring finger holding the tissue in place on the entrance side of the piercing (fig. A and B). Piercing into the beveled side of the tube allows you to still see your exit mark if using a steel or polypropylene tube, while the palm, middle finger, and thumb keep the tube in place. (With sufficient light pressure there should be no slipping of tissue.) I use this method for eyebrows, lip/labrets, scrotums, frenums, labia, tongues (with the aid of gauze), and surface piercings.

The second method is similar to the first, except fingers aren't used to support the tissue. Instead, pressure is put on the tube and the piercing needle to keep the tissue in place. While this sounds a little

shaky, using the polypropylene tubes I have had no problem with tissue slipping out of place, especially when matching pressure is used on both the tube and the needle (fig. C). I use this method solely for navels.

The third method is almost identical to the first, though the placement of the non-piercing hand index finger and the piercing hand ring finger is different. Instead of using these fingers to put downward pressure on the entrance side of the piercing, this pressure is placed on each side of where the piercing channel will follow (fig. D). This holds the tissue in place, but is easier than method one

on small "nubbins-like" nipples.

Another important issue is securing the needles after the piercing. Most of the piercers I know no longer use anything to secure their needles (myself included). This is something that needs to be addressed, because it's a large concern for OSHA. Corks do not sit well with some due to their questionable sterility and their tendency to break apart after attempted sterilization. Fortunately, there is an



Figure A



Figure B

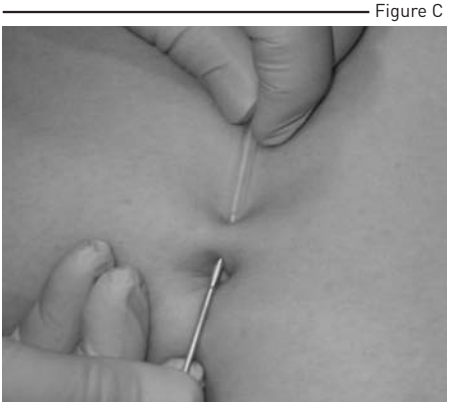


Figure C

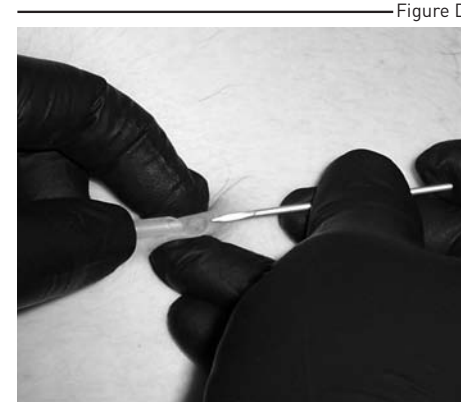
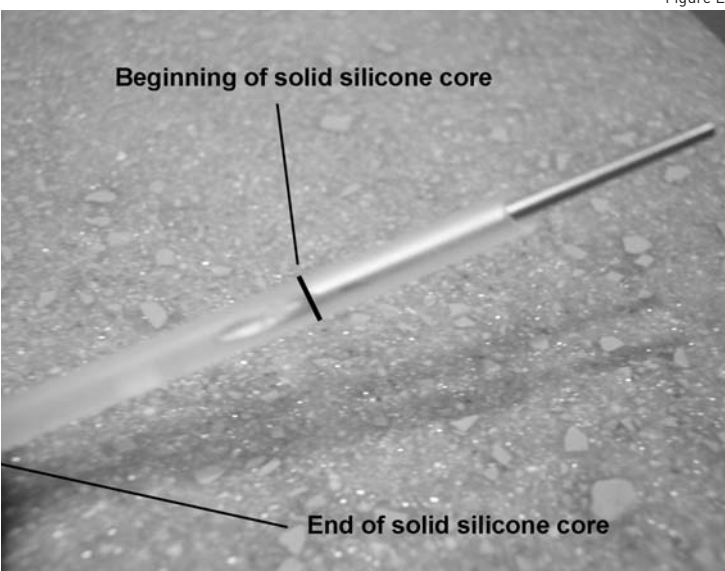


Figure D

easy solution for those that choose to employ receiving tubes. Industrial Strength Needles' polypropylene receiving tubes come with a solid surgical grade silicon core, so when the tube is pierced into, the needle is firmly secured in the silicone (fig E). The silicone is soft enough to give to the needle's sharp tip, but firm enough to hold the needle securely while you transfer the jewelry. Then the whole thing can be dumped in the Sharps container, and you're done.

I urge freehand piercers out there to try these methods. If you don't like them, come up with some of your own, and then share them with the community. I can't stress how important this is going to become in the next several years, as more and more cities and states have laws put into place concerning body piercing. If OSHA sees that we are addressing their concerns, then we will have a good ally in the battle for decent regulations. We can be proactive, and possibly avoid having to fight to change regulations that make freehand piercing unacceptable, if not unlawful.

To maintain the highest standards of safety for ourselves as piercers, those of us who are committed to freehand piercing need to improve our methods and reduce our chance of needle stick



**Note: These images are used solely to demonstrate hand positioning described in the accompanying article. They are not procedural pictures. The skin is not visibly prepped and marked, and make-up has not been removed on the models because no piercing will take place.*

OSHA UPDATE

As this article went to press, OSHA handed down its ruling on the issue of acceptable freehand piercing techniques. According to this statement, freehand piercing procedures can no longer be performed without the use of a needle-receiving device that minimizes potential contact with the needle. More information on this important interpretation will be provided in the next issue.

The APP neither trains piercers nor endorses any particular procedure, and Luis' article should not be construed as instructional. Rather, this article is presented as one piercer's experience with freehand techniques.

All piercers working without forceps should research alternate tools and techniques, OSHA and local laws, and shop policies before determining their own course of action. – MM

CONTINUED FROM PAGE 8 - JIMMY BUDDHA

a pair of his own plugs for twenty dollars (a great deal!). Now that it was confirmed that his stolen jewelry was indeed in the house, the cops agreed to take action. The next thing the thief knew, the door was busted down by the police, and the majority of Jimmy's jewelry was recovered.

Jimmy definitely wins the "Industry Hero and Master of Taking Matters into his Own Hands" award. Truly the stuff of a movie – or at least a late night TV cop show.

For further details you will have to contact Jimmy. I imagine the story must get better with each retelling. A big congratulations goes out to Jimmy for his heroics and for the opening of his new shop. Jimmy also asked me to extend a heartfelt thank you to all who offered their support during this ordeal. – Chalk one up for the good guys!



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THE AL D. SCHOLARSHIP



Christina Shull
APP Secretary

With the annual APP Conference in Las Vegas approaching in early May, some piercers are already making arrangements to attend. Many others are waiting until Spring to see if their financial situation will accommodate the trip. Unfortunately, even with the draw of invaluable information, the variety of classes, and the money saved through jewelry discounts at the vendor exposition, in our oversaturated industry it is not always cost-effective to take a week away from your studio. There are many piercers who would benefit greatly from attending Conference, but whose financial limitations keep them away. As an organization dedicated to spreading health and safety information, we are proud to continue offering scholarship opportunities for those who have the desire and motivation to participate in Conference, but need some help getting there.

The Al D. Scholarship is named after the former APP International Liaison, Al D. Sowers, who passed away in early 2001 shortly after being diagnosed with cancer. When talking to people who knew Al D., he is always remembered as a passionate piercer whose heart was dedicated to the industry. Former co-workers and previous Board Members who served with him speak highly of his love for sharing information and stories about his personal experiences with anybody who wanted to learn more about their trade. In addition to serving as the International Liaison, Al D. was an educator who continued as an active piercer until his illness made him unable to continue working. He was a well respected contributor to the piercing industry and is greatly missed by those who knew him. In light of his desire to educate those who have the drive to learn and give back to their peers, the Al D. Scholarship was named in his memory and continues to give back to the community which owes him so much respect.

Al D. scholarships are awarded based on the applicant's need for financial help combined with his/her desire to attend Conference. The award includes shared hotel accommodations and a full conference package in exchange for 25-30 hours of volunteer service during the week. This mutually beneficial opportunity allows the recipient to have an educational experience while providing the APP with the extra help needed to run a successful conference. With only seven Board Members and one wonderful Administrator, there is a great deal of work involved with the smooth execution of Conference. Among other duties, scholarship recipients give us the additional ability to help run the APP booth, check badges for the Expo

floor and classes, videotape proceedings for the archives, and set up for the banquet dinner – all jobs necessary to ensure that attendees get the most out of Conference.

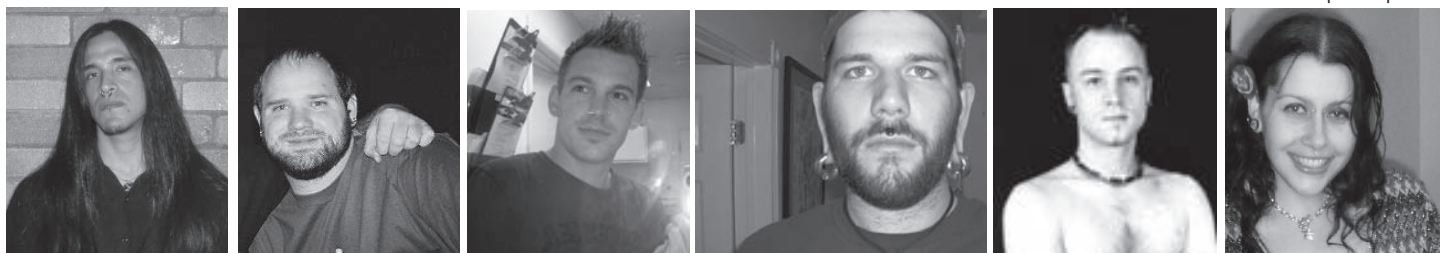
Speaking personally, when I use the word “opportunity” to describe the Al D. Scholarship, I do so as a past scholarship recipient. When I was awarded the scholarship, I was working as the only piercer in a studio which did not give me the ability to share ideas and receive feedback from more experienced piercers on any sort of regular basis. I could not afford to attend Conference, but applied for the scholarship hoping for the chance to attend classes and potentially find employment in a studio where I could better myself. Receiving the scholarship not only allowed for me to attend the classes that I needed, but also gave me the ability to work with the past Board, leading to my future employment. I had hoped to become more involved with the piercing community, and it was through this interaction with the Board of Directors that I began to realize the opportunities I would have in the future.

The Al D. Scholarship has also helped other recipients find employment in APP members' studios. Many past recipients have found new employment or been offered guest spots at various APP studios around the country, as working at Conference gave the membership and the Board a chance to become more acquainted with the recipient and their work ethic.

If you feel that you are qualified for the Al D. Scholarship, applications can be found on the APP website www.safepiercing.org with the 2006 conference information. We will be accepting applications from January 1st to March 10th. Upon review of the application, contact of personal and professional references, and personal telephone interviews, six applicants will be notified of their acceptance on March 15th, leaving two months to make travel arrangements. If you have any questions about the Al D. Scholarship, feel free to contact me at secretary@safepiercing.org for more information.

For information about how you can donate to the Al D. Scholarship fund, please contact the APP Administrator, Caitlin McDiarmid at 1-888-888-1APP or info@safepiercing.org. On behalf of the Al D. Scholarship recipients past and present, I would like to say thank you to those to have contributed and will continue to contribute to the scholarship fund. Without your generosity and support, many of us would not be where we are today.

2005 Al D. Scholarship Recipients



had all questions answered to their full satisfaction.

What procedures require release forms and how long should they be kept?

While all studios should require release forms to be filled out for piercing procedures, the need for release forms for insertions, removals, or stretching will vary by location and insurance requirements. Some studios require insertion release forms as a way to further protect themselves from potential liability. According to Susan Preston of Professional Program Insurance Brokerage, stretching a piercing too soon after the initial piercing is one of the most common reasons suits have been filed. Also, by not performing insertions on minors without parental consent, the studio can avoid any situations that could potentially result in sexual misconduct charges (e.g. a male piercer inserting a piece of jewelry into a female minor's navel).

How long a studio keeps their release forms on file will vary by the statute of limitations in your state. Some states require as little as two years while others can require four years or more. Something that is also important to keep in mind when dealing with minors is that while the parent can file suit up until the minor's eighteenth birthday, the statute of limitations for the minor piercee starts once they turn eighteen. Any release forms for minors should be kept until the minor is eighteen plus the length of time for the statute of limitations in your state.

Also keep in mind that definitions of informed consent vary form state to state. In many states a copy of the release form must

also be given to the client to fully comply.

If all this leaves you confused or worried, either your lawyer or a company like Health Educators can help your studio to write a release form that complies with all local guidelines. (For more information about Health Educators service, visit www.hlthedu.com.) Whether you choose to hire some help, or do it yourself from industry examples, do not ignore this essential piece of studio paperwork. While release forms alone will not protect you in a case of malpractice, they can go a long way towards educating and expanding communication with your client – which may keep most complications from ever happening.



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Goodbye



To the APP membership: I want to thank you for the trust you showed me by electing me Treasurer. I hope my hard work, commitment and loyalty repaid that honor. I count my time served as one of my greatest acts of service, though I have been rewarded far beyond my endeavors. I sleep well at night knowing that I have done my part to better the Piercing Community, my community that I depend upon for my financial and social sustenance.

To the Outgoing Board and Caitlin: The last three years you have been my peers, my mentors, my cat-chumens ;) friends and confidants. We have laughed, cried, butted heads and always presented our voices as one unified entity. I have never been more proud of

belonging to this group and the work we have done. I love you and will miss you all.

To the Incoming Board: I congratulate you on the privilege the membership has bestowed upon you. It is an awesome responsibility to help define, lead and protect the entire Piercing Industry. No one knows as well as a past board member the incredible demand for personal and career sacrifice you are now undertaking. Often times you will not receive outside praise or even a "thank you." Remember to appreciate each other. Remember to appreciate yourselves...and if you ever want to reach out to a past board member, we will be here to listen, appreciate and respect you. Thank you.

With Love and Respect,
Paul King

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LIFE IN THE PHISHBOWL



Phish Goldblatt
APP Outreach Coordinator

“I used to be with it, but then they changed what ‘it’ was. Now what I’m with isn’t ‘it’ and what’s ‘it’ is scary and different.” – Grampa Abe Simpson

As I look back over my last 13 years as a body piercer, I often wonder where I fit within the culture in which our industry has been assimilated. Although it was only a little over a decade ago that I started in the business, it’s easy to feel like a dinosaur when I look back at the evolution of body piercing during that time. So much has changed. There are far more advanced techniques, tools have become more advanced, with many piercers phasing out tools altogether. Jewelry is much more readily available now than it was then, and aftercare has come full circle to less invasive and natural methods over the “medicinal” model we used to emulate. Even the lingo we use has changed dramatically.

In an effort to really understand this change, one must look for the source. You can ask yourself “What was the catalyst that brought about such a complete change, and in many cases a complete reversal to our general way of thinking?” The first answer that comes to mind is information. Sharing information has always been the way to learn and evolve. However, to truly understand the changes that have taken place, one has to go even further. How was this information spread? What came about that enabled 1000’s of piercers across the country (and the world) to communicate and share information?

There is one clear answer; the internet. Who would have dreamed, at the infancy of modern piercing, that in 20 years you be hard pressed to find a shop without a website, or a piercer without an email address? When I first got an internet connection (with a lightning fast 5600bps connection!) I remember doing a search for body piercing and coming up with only a few dozen results. Most of them were uninformative and insignificant and had very little to do with what I was looking for.

After a few tries I succeeded in finding

www.bmezine.com. At the time it wasn’t a huge site, but had a good amount of pictures and a lot more information than any others. I also came across the rec.arts.bodyart newsgroup in which people shared information with one another online. I started making regular trips back to these sites and even started contributing pictures to BME in an effort to help build the site and get exposure for my own work. I watched the internet grow very quickly and for the first time I was able to readily share information with piercers from around the world.

In just a few short years I watched an industry that for years had seemed to progress very little to one that The Wall Street Journal categorized as one of the nation’s fastest growing. A decade ago it would have taken a bit of research to find any piercer, much less one decent, clean and local. Now there are dozens of shops in every big city and small town. You can buy body jewelry at nearly any store that caters to teenagers and a good amount of those that don’t. There are entire television shows related to piercing, as well as countless books and articles in some of the world’s most respected periodicals.

Unfortunately, there is also a dark side to this rapid progress. It’s said a little knowledge is a dangerous thing, and in this case there are little bits of knowledge spread out everywhere and nothing to tie them together, nothing to give it context. Young piercers are seeing pictures and hearing explanations of things that they had never seen or heard of before. This results in a lot of experimentation, which can lead to advancements in technique, but also brings about a lot of dangerous work without a good understanding of the repercussions.

The internet did wonders for the careers of a lot of veteran piercers, and helped a lot of savvy newcomers make names for themselves very quickly. For these reasons the industry can credit its success in no small part to the popularity of the online community. It would seem that the good has outweighed the bad, and for that I am eternally grateful. I am also proud for having a hand in kick-starting the

industry that has given me so much.

I can almost hear some of you laughing at the irony in my writing this article. In truth, I was one of those young experimenters back then and, admittedly, I learned a lot through trial and error. However, now there is so much more knowledge available, and more access to opportunity. I look at this a lot like being a parent: I hope the next generation of piercers can learn from my mistakes (and learn to look before you leap, or at least walk before you run). I was very lucky to have had some great mentoring as my career progressed. I was able to look to them to help me first filter, and then disseminate the incredible amount of information that I collected early in my career.

One of the things that drew me to the APP was the mission statement, which reads:

The APP is an international non-profit organization that is committed to the dissemination of vital health and safety information to the piercing community, health care professionals, and the general public.

I can’t think of what I would have done if I hadn’t had people around me to help me wade through and understand all of that information.

My point is this: information alone is not adequate education, especially in a hands-on industry like ours. We need a means of distilling all the information that technology throws our way. Its important as a young piercer to find a mentor that can help put everything in perspective. Its important for veteran piercers to make themselves available as mentors, to help the next generation to progress.

The internet is, at the same time, the best and worst thing to happen to body piercing. Using this knowledge wisely can encourage a very rewarding career. Using this information hastily and without regard to consequence can make for a very dangerous and short career.



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Since I first saw Africa Adorned and Maasai years ago, Angela Fisher and Carol Beckwith have been idols of mine. When I emailed them last year before Conference, asking to use images, I did not expect them to agree. Instead, I was thrilled to find them not only friendly, but encouraging about our work. Since then, Angela, Carol and their office manager, Anne-Marie, have been extremely generous with their images and time. They have a deep love of African cultures, body art and the beauty of individuals that is very much at home in our industry. Those of you who saw my presentation may already have recognized that we share a project, though we are in different fields. Please check out their books and support them as they support us.

Megg Mass

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Carol Beckwith and Tepilit Ole Saitoti
(Abradale) 1980

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Angela Fisher
(Harry N. Abrams Inc.) 1984

NOMADS OF NIGER

Carol Beckwith and Marion Van Offelen
(Abradale) 1983

AFRICAN ARK

Carol Beckwith, Angela Fisher, Graham
Hancock
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AFRICAN CEREMONIES

Carol Beckwith and Angela Fisher
(Harry N. Abrams Inc.) 1999

PASSAGES

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