Microblading Consent and Release Agreement

This form is designed to give information needed to make an informed choice of whether or not to undergo a Microblading semi-permanent make up application. If you have questions, please don’t hesitate to ask. Although Microblading is affective in most cases, no guarantee can be made that a specific client will benefit from the procedure.

This is the process of inserting pigment into the dermal layer of the skin and is a form of tattooing. All instruments that enter the skin or come in contact with body fluids are disposable and disposed of after use. Cross contamination guidelines are stickily adhered to. Generally, the results are excellent. However, a perfect result is not a realistic expectation. It is usual to expect a touch-up after the healing is completed. Initially the color will appear much more vibrant or darker compared to the end result. Usually within 7 days the color will fade 40-50%, soften and look more natural. The pigment is semi-permanent and will fade over time and will likely need to be touched-up within 6 months to 2 years.

Photography Release Consent

We would like your permission to use these photos for advertising. For example, in portfolios, online and in print ads, etc. Your consent is necessary regarding this. Please circle and indicate with your signature if you would like your photos used or not used in advertising.

YES, feel free to use them  NO please do not use them

Signed_____________________________________ Date___________________

Email: ______________________________________ Phone: ____________________________

Special requests, concerns or remarks for technician:

________________________________________________________________________________

Possible Risks, Hazards, or Complications

• Pain: There can be pain even after the topical anesthetic has been used. Anesthetics work better on some people than others.
• Infection: Infection is very unusual. The areas treated must be kept clean and only freshly cleaned hands should touch the areas. See “After Care” sheet for instructions on care.
• Uneven Pigmentation: This can result from poor healing, infection, bleeding or many other causes. Your follow up appointment will likely correct any uneven appearance.
• Asymmetry: Every effort will be made to avoid asymmetry but our faces are not symmetrical so adjustments may be needed during the follow up session to correct any unevenness.
• Excessive Swelling or Bruising: Some people bruise and swell more than others. Ice packs may help and the bruising and swelling typically disappears with 1-5 days. Some people don’t bruise or swell at all.
• Anesthesia: Topical anesthetics are used to numb the area to be tattooed. Lidocaine, Prilocaine, Benzocaine, Tetracaine and Epinephrine in a cream or gel form are typically used. If you are allergic to any of these please inform me now.
• MRI: Because pigments used in permanent cosmetic procedures contain inert oxides, a low level magnet may be required if you need to be scanned by an MRI machine. You must inform your technician of any tattoos or permanent cosmetics.
• Allergic Reaction: There is a small possibility of an allergic reaction. You may take a 5-7 day patch test to determine this. Please initial to: Waive_______ or Take_______.

The alternative to these possibilities is to use cosmetics and not undergo the Microblading procedure.

Consent and release for procedures performed:

Signed_____________________________________ Date___________________
STATEMENT OF CONSENT AND RECITALS:

*Please read and initial all lines:

___ Aftercare instructions have been explained to me and a written copy will be given to me to retain in my possession, which I will follow to the best of my ability. If I have questions I will call or email you.

___ I understand that a certain amount of discomfort is associated with this procedure and that swelling, redness and bruising may occur.

___ I understand that Retin A, Renova, Alpha Hydroxy, and Glycolic Acids must not be used on the treated areas. They will alter the color.

___ I understand that sun, tanning beds, pools, some skin care products and medications can affect my permanent makeup.

___ I will tell all skin care professionals or medical personnel about my permanent makeup procedures, especially if I'm schedule for an MRI.

___ I accept the responsibility for explaining to you my desire for specific colors, shape, and position for any procedure done today.

___ I understand that implanted pigment color can slightly change or fade over time due to circumstances beyond your control and I will need to maintain the color with future applications and a touch up session within 6-8 weeks of initial procedure.

___ I acknowledge that the proposed procedure(s) involve risks inherent in the procedure and have possibilities of complications during and/or following the procedures such as: infection, misplaced pigment, poor color retention and hyper-pigmentation.

___ I have been quoted the cost of today's appointment which includes one (1) Follow up/touch up after 45 days and within 60 days. After 60 days a fee will apply.

___ There will be no refunds for this elective procedure(s).

I certify that I have read or have had read to me the contents of this form. I understand the risks and alternatives involved in this procedure(s) and I have had the opportunity to ask questions and all of my questions have been answered. I acknowledge that I have reviewed and approved the material given to me and I authorize Jamie Nguyen, as my technician to perform on my body the Microblading procedure desired today.

Signed____________________________________________________Date_______________

Client Medical History Form

Date____________________________ Birth Date____________________________

Name:_________________________________________

Address:_________________________City_________________State_______ Zip______________

Phone #_______________________ Email________________________________________

Emergency contact ___________________________________ Phone#____________________

Do you presently have or previously had any of the following: (Circle yes or no)

Yes No History of MRSA

Yes No Botox (last treatment_______)

Yes No Keloid scare

Yes No Diabetes
Yes No  Hepatitis (A,B,C,D)  
Yes No  Easy bleeding  
Yes No  Easy hyperpigmentation  
Yes No  Abnormal Heart Condition  
Yes No  Chemical Peel (last treatment__________________)  
Yes No  Brow or Lash tinting  
Yes No  Oily Skin  
Yes No  Accutane or acne treatment  
Yes No  Tan by booth or sun  
Yes No  Difficulty numbing with dental work.  
Yes No  Any diseases or disorders not Listed__________________________  
Yes No  Do you use skin care products containing Retin-A, glycol acid or alpha hydroxyl?  
Yes No  Forehead/Brow lift  
Yes No  Face lift  
Yes No  Alcoholism  
Yes No  Take meds before Dental work  
Yes No  Pregnant now / Breast feeding now  
Yes No  Autoimmune Disorder  
Yes No  Cancer year__________  
Yes No  Chemotherapy/Radiation  
Yes No  Tumors/Growths/Cysts  
Yes No  Taking blood thinners such as: Aspirin, Ibuprofen, alcohol, Coumadin, ect. ____________________________  
Yes No  Allergic reaction to any medications such as Lidocaine Tetracaine, Epinephrine, Dermacaine, Denzyle alcohol, Carbopol, Lecithin, glycol, Vitamin E Acetate, etc.  
List:__________________________  

*Please list medication or vitamins you’re currently taking:________________________________________________________

I agree that all the above information is true and accurate to the best of my knowledge.

Signed:___________________________________________ Date_____________________

What is normal?
Mild swelling, itching, light scabbing, light bruising and dry tightness. Ice packs are nice relief for swelling and bruising.
Too dark and slightly uneven appearance. After 2-7 days the darkness will fade, and once any swelling dissipates unevenness usually disappears. If it is too dark or still a bit uneven after 4 weeks, then we will make adjustments during the follow up/touch up appointment. If you decide to go darker, this may require repeating the entire procedure and a fee will apply.
Color change or color loss. As the procedure area heals, the color will lighten and sometimes seem to disappear in places. This can all be addressed during the follow up/touch up appointment which is why this appointment is necessary. The procedure area has to heal completely before we can address any concerns. Healing takes about 4-6 weeks.
Need a touch up months later. A touch up may be needed 6 months to 1 year after the first touch up procedure depending on your skin, medications, and sun exposure. We recommend the first follow up/touch up 6 weeks after the first session; which is included in today’s price. Then every 6 months to 1 year to keep them looking fresh and beautiful. Future touch up sessions will cost the current touch up rate at the time you have it done. If most of the hair strokes have faded (about 70% - TBD by your technician), the entire procedure will need to be repeated. An email photo consultation may be necessary to determine if you need a touch up or a repeat of the entire procedure.
I have read, understand, and agree to the above instructions.

Signed___________________________________________ Date_____________________

Signed___________________________________________ Date_____________________
The Prep:

Do not pick/tweeze/wax/perform electrolysis one week before procedure
Do not tan two weeks prior or have sunburned face
Do not have any type of facial/peel 2 weeks prior to treatment
Discontinue Vitamin A/Retinol products one month prior to treatment
Do not work out the day of the procedure.
Do not have botox 3 weeks prior
Do not take Fish Oil or Vitamin E one week prior (natural blood thinners)
Do not wax or tint your eyebrows 3 days before the procedure.

*In order to avoid excessive bleeding and poor color deposit:
Do not drink alcohol 24 - 48 hours before your tattoo
Do not consume coffee before your procedure
Do not take aspirin or ibuprofen for pain relief (this thins the blood)

Aftercare

After Your Appointment
• 4-5 hours after the procedure
  — Clean the area with sterile/distilled water and a clean cotton pad to remove the numbing cream. Allow the area to air dry.
• First 10 days after the procedure:
  — Dry skin - After 4 days of dry healing, apply Grape seed oil sparingly.
  — Oily skin - Pat the area with a cotton pad moistened with sterile/distilled water every night.
  — Do not use tap(unsterile)water, cleansers, creams, makeup or any other products on the treated area.
• First 10 days after the procedure, cont’d.
  — Avoid strenuous physical activity to prevent sweating(which will impact the pigment retention).
  — Avoid sleeping on your face; try sleeping on your back or side instead.
  — As part of the normal healing process, the treated area will begin to scab 5–7 days after the treatment. Do not rub, pick or scratch the treated area. Let any scabbing or dry skin naturally exfoliate off to avoid scarring.
  — If heavy scabbing and/or itchiness occur, use a small amount of Grape Seed Oil on the area with a clean cotton swab.
  — As the scabs flake off, the pigment may disappear. Do not be alarmed. The color will return within 3 – 5 weeks.
• Three - four weeks after the procedure:
  — Avoid direct sun exposure or tanning.
  — No facials, Botox, chemical treatments or microdermabrasion.
  — Once the scabbing process ends (approx.14–21 days after the procedure), begin using sunscreen to protect your eyebrows.
  — Do not judge the way your brows look until you have reached six full weeks of healing.
• Six weeks after procedure:
  — Fully healed brows. Now you’re ready for your follow up appointment.
  — Continue to use sunscreen on your brows everyday to prevent premature fading.
  — Do not use Retin-A or any acids(glycolic, AHA, etc)on your brows.

Important Reminders

Use a fresh pillowcase
Let any scabbing or dry skin naturally exfoliate away. Picking can cause scarring or loss of color
No facials, botox, chemical treatments or microdermabrasion for 4 weeks
Avoid hot, sweaty exercise for one week
Avoid direct sun exposure or tanning for 4 weeks after procedure. Wear a hat when outdoors.
Avoid heavy sweating and long hot showers for the first 10 days.
Avoid sleeping on your face for the first 10 days
Avoid swimming, lakes, hot tubs for the first 10 days
Avoid topical makeup including sunscreen on the area
DO NOT rub, pick or scratch the treated area.

Important note about showering:
Limit your showers to 5 minutes so you do not create too much steam. Keep your face/procedure out of the water while you wash your body, then, at the end of your shower, wash your hair. Your face should only be getting wet at the very last end of the shower. Avoid excessive rinsing and hot water on the treated area.

**Remember, with the proper prep and aftercare routine you will have much better results with your microblading procedure.
MICROBLADING EMOTIONS

DAY 1:
OMG! I'm in love with my new brows. Thank you!

DAY 2-4:
I don't like this color, it's too dark.

DAY 5-7:
Oh no! My brows are scabbing and falling off!

DAY 8-10:
Ummmm... My brows are gone!

DAY 14-28:
Sweet! My brows are coming back! Still looking a little patchy and uneven.

DAY 42: (after touch-up)
Awww, they are beautiful! I love them!