

CONSENT FOR EYEBROW MICROBLADING PROCEDURE

NAME _____ DATE _____ DOB _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____ HOME PH. _____ WORK PH. _____

I, _____ am over the age of 18, am not under the influence of drugs or alcohol and desire to microblading of eyebrows performed. The general nature of cosmetic tattooing as well as the specific procedure to be performed has been explained to me. X _____

NO. OF VISITS REQUIRED: _____ COST OF PROCEDURE(S): _____

I have been informed of the nature, risks, and possible complications and consequences of permanent skin pigmentation. I understand the permanent skin pigmentation procedure carries with it known and unknown complications and consequences associated with this type of cosmetic procedure, including but not limited to: infection, allergic reaction, scarring, inconsistent color, and spreading, fanning or fading of pigments. I understand the actual color of the pigment may be modified slightly, due to the tone and color of my skin. I fully understand this is a tattoo process and therefore not an exact science, but an art. I request the microblading procedure and accept the permanence of the procedure as well as the possible complications and consequences of the said procedure. I understand that while this is sometimes referred to as semi-permanent in nature, due to each individual's reaction to pigment, the length of time pigment is present cannot be guaranteed. In some cases, pigment will be permanent. X _____

I understand that if I have any skin treatments, laser hair removal, plastic surgery or other skin altering procedures, it may result in adverse changes to my permanent cosmetics. I acknowledge some of these potential adverse changes may not be correctable. X _____

I have received pre- and post procedure instructions and I will strictly adhere to such instructions. I understand that my failure to do so may jeopardize my chances for a successful procedure. If I am on any medication for depression or any other mood altering prescription, I will advise my technician. X _____

I understand that the taking of before and after photographs of the said procedure are a condition of such procedure. I certify I have read and initialed the above paragraphs and have had explained to my understanding this consent and the procedure process. I accept full responsibility for the decision to have this cosmetic tattoo work done.

CLIENT: _____ DATE _____

TECHNICIAN _____ DATE _____

AFTERCARE

Following careful aftercare will give you the best possible results and promote good healing.

WHAT TO EXPECT DURING HEALING: Depending on the clients skin, please allow freshly microbladed brows to heal for 7-10 days . ***It is normal for eyebrows to look patchy during the healing process. Don't be worried if it looks like strokes have completely disappeared.*** It takes the pigment roughly 3-4 weeks to resurface to its final color. Any permanent gaps of color will be fixed at you touch up appointment (included in your initial fee).

AFTERCARE INSTRUCTIONS: For the rest of the day following your procedure, VERY LIGHTY dampen a cotton round or paper towel and dab your brows to remove any lymph. Apply Aquaphor to your eyebrows twice a day, once in the morning and once in the evening. If you have very oily skin I suggest only applying once a day. Continue to do so for 5 -7 days. You are trying to avoid scabs during this time, if scabbing occurs, it can create more patchy areas than normal. If you follow correct aftercare, you will not see any scabbing, just light flaking. Avoid sleeping on your brows for the first 3 nights, if you have trouble sleeping on your back, you can apply a piece of saran wrap across your brows (over the ointment) to keep the fresh microbladed eyebrows from rubbing on your pillow.

Do not let any water sit on your brows during the healing process. This means no swimming, and no saunas. You can shower during the first week, just make sure to pat your brows totally dry when you exit the shower with either gauze or paper towel, then reapply ointment if you have taken it off by doing so. It is safe to wash your brows with antibacterial soap once a day to keep the area clean, but as stated before, make sure to pat totally dry when you are done.

I AM NOT LIABLE FOR PROBLEMS CAUSED BY INCORRECT AFTERCARE

THINGS TO AVOID DURING HEALING:

- No make-up or products on eyebrows
- Do not pick or scratch the healing area
- No direct sun exposure
- Avoid working out to prevent sweating for at least 48 hours after treatment

*****REMEMBER** to schedule your touch up! Any touch-ups scheduled after 60 days following your initial appointment will not be included.