

Couture Brows♥

Microblading Academy

422 West 900 South #109

Salt Lake City, UT 84010

Couturebrowsbeverlyhills.com

Microblading (Permanent Make-Up) **Informed Consent**

Name: _____ Date Of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Home Phone: _____

Email Address: _____

How did you hear about Couture Brows? _____

The nature and method of the proposed permanent makeup (cosmetic tattoo) procedure has been explained to me as having the usual risks inherent in the procedure and the possibility of complications during and following its performance. I understand that there may be a certain amount of discomfort or pain associated with the procedure and that other possible adverse side effects may include: minor and temporary bleeding, bruising, redness or other discoloration and/or swelling. Fading or loss of pigment may occur. Secondary infection in the area of the procedure is rare if properly cared for, but may occasionally occur.

By signing below, I specifically acknowledge that I have been advised of the facts and matters set below, and I agree as follows:

(Please initial the line next to the number after you clearly understand each statement)

1. _____ I have informed the practitioner of any and all of my known allergies. I acknowledge that it is not always reasonably possible to determine in advance whether I might have an allergic reaction to any of the pigments, dyes, topical preparations, or processes used in the procedure; and I agree to accept the risk that such reaction is possible.

2. _____ I acknowledge that complications as a result of permanent makeup procedures may occur, particularly in the event that the post-procedural instructions are not followed, and accept full responsibility for such complications.

3. _____ I realize that my body is unique and neither Couture Brows nor its employees or contractors can predict how my skin may react as a result of the procedure.

4a. _____ I have previously had microblading performed by someone other than Couture Brows on the same area (brows, eyeliner, etc) that I am asking Couture Brows to work on today
____ YES ____ NO

4b. _____ IF YES, I understand that correcting or touching up microblading that was performed by others involves additional risks because of the existence of permanent pigments of unknown composition, brand, color, age, shape and other factors over which Couture Brows has no control. I understand that additional appointments after the initial and follow-up appointments may be required, and will be billed at Couture Brows standard rates. I understand that Couture Brows cannot predict the results in advance and **cannot guarantee and has not represented** that the results will be as I desire. I understand and fully accept the risks associated with this procedure and hold Couture Brows harmless from same.

5. _____ I acknowledge that the procedure may result in a long-lasting (many years) change to my appearance and that no representations have been made to me as to the ability to later change or remove the results.

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6. _____ I understand that future skin altering procedures such as laser treatments, plastic surgery, implants, and/or injections may alter and degrade my permanent makeup, and that I must inform any future service provider that I have had microblading applied. I understand and accept that such changes are not the fault of Couture Brows or its employees or contractors. I further understand that such changes or degradation in my appearance may not be correctable through further permanent makeup procedures.

7. _____ I consent to the admittance of authorized observers to the procedure(s) for the purpose of education or assistance.

8. _____ I acknowledge that obtaining the permanent makeup is my choice alone, and I consent to the procedure and to its attendant risks, and to any actions or conduct of Couture Brows and its employees and contractors reasonably necessary to perform the procedure.

9. _____ I understand that I will have the opportunity to approve the design and color of the permanent makeup to be applied, and I accept responsibility for same.

10. _____ I consent to any relevant photographs being taken before, during, and after the procedure, to document the results of the procedure and/or for educational purposes for use of Couture Brows.

11. _____ I consent to Couture Brows using "before & after" photos of me for marketing purposes to display its capabilities and results.

12. _____ I have been given the full opportunity to ask any and all questions which I have, about obtaining permanent cosmetic procedures from a microblade specialist at Couture Brows and that all of my questions have been answered to my full and total satisfaction.

13. _____ I understand that Couture Brows and its employees are not aestheticians but may need to tweeze a few hairs on my eyebrows to perfect the shape. I authorize Couture Brows and its employees to do so.

If you have previously had microblading performed by Couture Brows has your medical history changed since you last filled out Couture Brows Medical Profile form?

____ YES ____ NO

If YES, please specify. _____

I have read and understand the contents of each statement above. I acknowledge that this is a contract and that I have received no warranties or guarantees with respect to the benefits to be realized from, or consequences of, the aforementioned procedure(s). I further acknowledge that at the time of signing this consent I am of sound mind and capable of making independent decisions for myself.

Name (Please print legibly) Date

Client Signature Date

Parent Or Legal Guardian (If Client Is Under 18) Date

Practitioner statement:

I have personally reviewed the above information with my client or the client's representative.

Practitioner Signature Date

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By signing below, I acknowledge, understand and agree that:

- the staff at **R. Angelica Rios/Couture Brows** do not practice medicine, does not accept health insurance, and have made no representation to the contrary;
- the information provided on this form is accurate and complete to the best of my knowledge, and that **R. Angelica Rios/Couture Brows** its staff and students are not responsible for complications or problems arising from any incorrect or omitted information;
- some individuals will have complications related to permanent makeup application. These complications are usually mild and last only a few days. However, extreme complications are always a possibility. I accept these risks and agree to hold **R. Angelica Rios/Couture Brows** and its employees, contractors and students harmless for same;
- the staff at **R. Angelica Rios/Couture Brows** will use the information provided above to assess my suitability for the proposed microblading services.
- I am completely satisfied with my shape, color and overall work when I leave.

Client signature (or guardian if under 18 years of age)

Date

I HAVE READ AND UNDERSTAND THE AFTERCARE INSTRUCTIONS. I ACCEPT THAT FAILURE TO FOLLOW THE POST-PROCEDURE INSTRUCTIONS MAY RESULT IN A LOSS OR DISCOLORATION OF PIGMENT RESULTING IN A NEED FOR MORE FREQUENT TOUCHUPS. **NO GUARANTEES, NO REFUNDS.**

Name (Please print legibly) Date

Client Signature Date

Parent Or Legal Guardian (If Client Is Under 18) Date

Practitioner statement:

I have personally reviewed the above information with my client or the client's representative.

Practitioner Signature

Date

LOT #:

EXPIRATION DATE:

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Eyebrow Micropigmentation Post Procedure Care

Microblading (semi-permanent makeup) procedures are affected by the “canvas” (your skin) that they are performed on. Lifestyle, medications, smoking, metabolism, facial surgery and other procedures, and age of skin all contribute to fading. The initial application is always applied conservatively because every person's skin is different and the final color can only be precisely determined and adjusted during a follow-up appointment after the initial application has fully healed. Because of this, the micropigmentation process is not complete after the initial procedure. In all cases, a follow-up appointment is required approximately 30 days after your initial application to fine tune and ensure the best result.

Though rare, infection is possible. If you see signs of infection such as persistent increased redness or swelling, fever, drainage, or oozing, contact your doctor immediately.

- When the area starts to flake, leave it. Do not pick, peel or pull on the skin.
- Apply a thin coat of Aquaphor® or Ink Oil to the area twice a day for 3-4 days. Wipe brows three times daily with an unscented baby wipe. Avoid soap or cleansing products.
- Avoid sweating such as from vigorous exercise for 24 hours.
- For at least one week post-procedure or until healing is complete (whichever is longer):
 - Keep your hands clean and avoid touching the affected area(s).
 - Do not scrub or pick treated areas.
 - Do not use peroxide or Neosporin on treated areas.
 - Do not expose area to direct sun or to tanning beds.
 - Avoid exposing the area excessive moisture or humidity, such as: facials, swimming, whirlpools (hot tubs), saunas, steam rooms, and steamy showers.
- Avoid Retin-A, moisturizers, glycolic acids, exfoliants and anti-aging products **at all times** (not just during healing) on all micropigmented areas. These can cause pigments to fade and lighten prematurely.
- Avoid tanning beds, sun, chlorine spas and pools, soap and chemicals (including skin cleansers, makeup removers, alpha hydroxyl creams, and tooth whitening toothpaste) near the treated area until healed.
- Pigments will slowly fade over time. Schedule maintenance visits as needed to keep it looking fresh. Client is aware that the pigment applied may migrate.
- Do not resume any method of eyebrow hair removal or coloration for at least two weeks.
- Avoid eyebrow tinting within 48 hours before or two weeks after the procedure.
- Periodic touch ups will ensure longer lasting results.

Eyebrow Microblading Healing Schedule

If you've never had microblading before, there are a lot of unknowns. One of the most common questions we're asked is what to expect during the healing process. While every person is different, and some heal more quickly or slowly than others, here's generally what to expect.

Temporary side effects from microblading include but are not limited to: redness, swelling, puffiness, bruising, dry patches and tenderness.

You should expect to lose approximately 1/3 of the initial color during the healing process. We have selected the optimal pigments for you with this in mind. In approximately six days it may appear too light. After about 10 days, the color will show more. It will appear softer when completely healed.

Day Effect

1	The eyebrows are approximately 20-25% bolder and darker in width than they will be when healed. Expect light to moderate swelling and redness. The skin's redness causes the color of the pigment to appear darker. There is some swelling, although difficult to actually see due to the thickness of the skin in the eyebrow area. This will subside. Exfoliation, which begins in a few days, will cause the excess pigment surrounding the eyebrow to flake away and a more narrow appearance will result. New skin will heal over the pigmented area and result in a softer appearance of your eyebrows. Don't be concerned that your eyebrows initially appear darker and heavier in size than you desire. This is all part of the process.
2	Conditions remain the same.
3	Eyebrows start to itch and will appear a bit thicker in texture. TRY NOT TO ITCH OR PEEL
4	The skin begins to flake, peeling from the outside edges first. TRY NOT TO ITCH OR PEEL
5	Color finishes flaking off and appears softer and grayer for a few days until color clarifies.
6	The color has lightened from its initial overly-dark appearance. For the next few days, the color may now be lighter than what the final color will be.
10	The final color begins to stabilize and show through. The color will continue to soften as the healing process completes.