

Renown Artistry

PMU Post-Care Instructions



1. Date: *

PLEASE FOLLOW THESE INSTRUCTIONS FOR 7-10 DAYS AFTER THE PROCEDURE TO IMPROVE AND PROLONG THE RESULTS OF **PMU! NOT FOLLOWING THESE INSTRUCTIONS CAN GREATLY AFFECT YOUR PMU RESULTS!**

By selecting "I Agree/Understand" you have read, understand and are agreeing to follow the aftercare instructions.

2. Apply a very thin layer of your aftercare product (provided to you) 3-4 time a day. This will keep the treated area hydrated during the healing process (7-10 days) *

I Agree/ Understand

3. You may blot for the first few hours with a clean and damp paper towel to remove any excess fluids, if necessary. *

I Agree/ Understand

4. Brows will be darker 24 hours following the procedure. This color will fade 30-40% during the next 7-10 days. *

I Agree/ Understand

Cleansing:

5. DO NOT let any water, lotion, soap, or makeup touch your eyebrow area during the first 48 hrs following the procedure. *

A face shield will be provided to prevent this

I Agree/ Understand

6. A damp paper towel may be used to blot the area to remove excess fluids *

I Agree/ Understand

7. 24-48 hours, You may shower and wash your face avoiding direct water pressure on the treated area, or take a bath. *

I Agree/ Understand

8. Soaps and lotions may be used on the face, but avoid any of these products on or near the treated area for 7-10 days. *

I Agree/ Understand

9. Continue to apply the ointment given to you for 7 days following the procedure *

I agree/ Understand

10. Wear protective wear (large glasses, hat, visors) that can cover and shade the treated area in direct sunlight for 7-10 days. *

I Agree/ Understand

The following must be avoided during 7-14 days post procedure

11. * Increased sweating *

I Agree/ Understand

12. *Practicing Sports- Increased Sweating *

I Agree/ Understand

13. *Swimming *

I Agree/ Understand

14. *Hot sauna, hot yoga, hot bath, jacuzzi, and refrain from swimming in saltwater or chlorinated pools for 14 dsays *

I Agree/ Understand

15. *UV/UVA Rays or chemicals as the have been known to cause a shift in color and premature fading *

I Agree/ Understand

16. *Any laser or Chemical treatments or peelings, and/or any creams contain Retin-A or Glycolic acid on the face or neck *

I Agree/ Understand

17. *Picking, peeling, or scratching of the PMU area in order to avoid scarring or removal of the pigments *

I Agree/ Undserstand

18. *Performing tasks related to heavy household cleaning, such as garage/basement cleaning where there is a lot of airborne debris *

I Agree/ Understand

19. *No makeup should be applied directly on the brow during the healing process *

I Agree/ Understand

20. *Drinking alcohol in excess, as it may lead to slow healing of wounds *

I Agree/ Understand

21. *Driving in open air vehicles such as convertibles, boats, bicycles, or motorcycles *

I Agree/ Understand

22. *Touching of the eyebrow area except for when rinsing and applying the post-care cream with a cotton swab *

I Agree/ Understand

23. *Give at least 14 days after PMU for any facial treatment; including peels *

I Agree/ Understand

24. *If you are due to give blood after the procedure, inform your nurse about the PMU treatment you have had as this might alter results *

I Agree/ Understand

Itching and flaking may appear during the first 7 days post PMU procedure. However, experience has shown that by following these after-care instructions, these symptoms may quickly disappear.

If you have any unexpected problems with the healing of the skin, please contact RENOWN ARTISTRY immediately to discuss further instructions .

Contact a physician if any signs or symptoms develop such as the following:

* Fever * Redness at the site * Swelling * Tenderness of the procedure site * Elevated body temperature or any colored discharge from the treated area

Contact the Health Authority with any complaints, questions or concerns regarding safety, sanitation, or sterilization procedures:

Environmental Health Specialist Habersham County Health Department 130 Jacob's Way STE 102 Clarkesville, GA 30523 Office: 706-776-7659 Ext. 257 | Fax: 706-754-7127

I have read, agreed, understand, and will follow the PMU post care instructions: *

I agree to use electronic records and signatures.

	Clear
Customer Signature	Jul 25 2024 - 6:12 PM

Submit