



## Microblading and Permanent Makeup Consent and Release Agreement

This form is designed to provide the information needed to make an informed choice of whether or not to undergo a Microblading or Permanent Makeup procedure. If you have any questions, please don't hesitate to ask.

Although 3D Eyebrow Microblading or Permanent Makeup procedure is effective in most cases, no guarantee can be made that a specific client will benefit from the procedure. This treatment is the process of inserting pigment into the basal layer of the epidermis. It is a form of tattooing.

All instruments that enter the skin or come in contact with body fluids are disposable and disposed of after each use. Cross contamination guidelines are strictly adhered to by technicians at Face Glow.

Generally, the results are excellent. However, a perfect result is not a realistic expectation. It is usual and advised to expect a Touch-Up after healing is completed. Initially, the color will appear more vibrant or darker compared to the end result. Usually within 5-7 days, the color will fade 40-50 %, soften, and look more natural. The pigment is semi-permanent and will fade over time. Additional Touch Ups are likely needed within 6 months to 2 years.

Please initial below:

- \_\_\_\_\_ Aftercare instructions have been explained to me. A written copy has been 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 text my Microblading Specialist.
- \_\_\_\_\_ 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 and cause premature exfoliation of the pigment.
- \_\_\_\_\_ I understand that tanning beds, pools, some skincare products, and medications can affect my permanent makeup.
- \_\_\_\_\_ I understand that successful color saturation can NOT be guaranteed due to hidden scar tissue.
- \_\_\_\_\_ I accept the responsibility to explain 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 circumstances beyond your control. I will need to maintain the color with future applications, and a touch session within 60 days.
- \_\_\_\_\_ I acknowledge that the proposed procedure(s) involve risks inherent in the procedure and have possibilities of complications during and/or following the procedures. If I have questions, I will call or text my Microblading Specialist.
- \_\_\_\_\_ I have been advised that a touch up session is highly recommended to make any adjustments to shape, color, and to fill in any pigment that may have had poor retention. Touch Ups must be completed within 60 days of the initial procedure.
- \_\_\_\_\_ I have been told that allergic reactions to pigment are very rare. However, they can and do occur. When they occur, they can be serious and especially difficult and very troublesome to treat.
- \_\_\_\_\_ I understand that the markings are permanent and there is a possibility of hyperpigmentation resulting from a procedure, especially in individuals that are prone to hyperpigmentation from a scar or other injury.
- \_\_\_\_\_ I have been given an opportunity to ask questions about these procedures and understand the risks and hazards involved. I believe that I have sufficient information to give my informed consent.

Signed \_\_\_\_\_ Date \_\_\_\_\_