

CLIENT MEDICAL HISTORY

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Age)\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Emergency Contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you presently have, or have previously had any of the following: ( Circle YES or NO )

Yes No History of MRSA

Yes No Pregnant / Breastfeeding Now

Yes No Botox (Last treatment \_\_\_\_\_\_\_\_\_\_\_\_\_)

Yes No Abnormal Heart Condition

Yes No Diabetes

Yes No Autoimmune Disorder

Yes No Lip Fillers / Restylane / Juvederm

Yes No Take Meds before Dental work

Yes No Cold Sores / Fever Blisters

Yes No Cancer - What Year \_\_\_\_\_\_\_\_\_\_\_\_

Yes No Accutane or Acne Treatment

Yes No Hepatitis (A, B, C, D)

Yes No Chemotherapy / Radiation

Yes No Forehead / Brow Lift

Yes No Tanning by Booth or Sun

Yes No Easy Bleeding

Yes No Tumors / Growths / Cysts

Yes No Alcoholism

Yes No Difficulty Numbing w/ Dental

Yes No Brow / Lash Tinting

Yes No Oily Skin

Yes No Blepharoplasty (Eyelid Surgery)

Yes No Eye Surgery / Injury / Corneal Abrasion

Yes No Chemical Peel (Last Treatment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

Yes No Taking Blood Thinners - Aspirin, Ibuprofen, Alcohol, Coumadin, etc. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Yes No Allergic Reactions to any medications - Lidocaine, Tetracaine, Epinephrine, Dermacaine, Benzyl, Alcohol, Carbopol, Lecithin, Propylen Glycol, Vitamin E, Acetate, etc.? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Yes No Allergies to metals, latex, food, etc. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Yes No Any diseases or disorders not listed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Yes No Do you use skin care products containing Retin-a, glycolic acid or alpha hydroxyl?

Please list medications 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 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Covid-19 Precautionary Release form**

Precautionary Corona Virus Liability Release Form

Due to the 2019-2020 outbreak of the noval corona virus, COVID-19, we are taking extra precautions with the intake of each client, health history review, as well as sanitation and disinfecting practices. Please complete the following and sign below. Your PMU artist and all employees of this facility agree that they abide by these same standards and affirm the same. We also affirm that we have improved and expanded our sanitation protocols to more thoroughly fight the spread of COVID-19 and other communicable conditions.

I have read and agree to the terms above \* (required) Sign : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### PLEASE CIRCLE

**Do you have any symptoms of COVID-19?**

* Fever
* Fatigue
* Dry Cough
* Sore Throat
* Muscle Pain
* Headache
* Chills
* Difficulty Breathing
* New loss of taste and smell
* None of the above

**I understand the above symptoms and affirm that I, as well as all household members, do not currently have, nor have experienced the symptoms listed above within the last 14 days. \* (required).** yes/no

**I affirm that I, as well as all household members, have not been diagnosed with COVID-19 within the last 30 days. \* (required)**  yes/no

**I affirm that I, as well as all household members, have not knowingly been exposed to anyone diagnosed with COVID-19 within the last 30 days. \* (required).** yes/no

**I affirm that I, as well as all household members, have not traveled outside of the country, or to any city outside of our own that is or has been considered a “hot spot” for COVID-19 infections within the last 30 days. \* (required).** yes/no

**I understand that this business (wink by wink) and PMU artist cannot be held liable for any exposure to the virus or any other contagion caused by misinformation on this form or the health history provided by each client \* (required)** yes/no

**By circling yes below, I agree to each above statement and release wink by wink and PMU artists from any and all liability for the unintentional exposure or harm due to COVID-19. \* (required)**

yes/no



POSSIBLE RISKS, HAZARDS or COMPLICATIONS

(Please READ and INITIAL)

\_\_\_\_ PAIN: There can be pain even after the topical anesthetic has been used. Anesthetics work better on some people than on 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” Instructions.

\_\_\_\_ 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 within 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, Tetracain, and Epinephrine in a liquid, cream or gel forms are typically used. If you are allergic to any of these, please inform me immediately before procedure begins.

\_\_\_\_ 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: A) WAIVE patch test \_\_\_\_\_\_\_\_\_\_\_ B) TAKE Patch Test \_\_\_\_\_\_\_\_\_\_\_\_

The alternative to these possibilities is to use cosmetics and not undergo the 3-D eyebrow Microblading Procedure.

Consent and Release for procedures performed:

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



STATEMENT OF CONSENT

( Please READ and INITIAL )

\_\_\_\_\_ 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 TEXT 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 Glycol 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 scheduled for an MRI.

\_\_\_\_\_ I accept the responsibility for my explanation to you, my desire for specific colors, shape, and position for any procedure done today. If I don’t like something, I will speak up and tell you.

\_\_\_\_\_ I understand that implanted pigment color can slightly change color or fade over time due to circumstances beyond your control and I may need to maintain the color and shape with future applications and a touch-up session within 3 months.

\_\_\_\_\_ 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 does not include any additional touchups. There will be NO REFUNDS for this / these elective procedures.

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 Whitney Denham to perform on my body the 3D Eyebrow Microblading / Microshading procedure today.

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



CONSENT AND RELEASE AGREEMENT

(Please READ thoroughly)

This form is designed to give information needed to make an informed decision of whether or not to undergo a 3-D Eyebrow Microblading Semi-Permanent make-up application. If you have questions, please don’t hesitate to ask.

Although 3-D Eyebrow Microblading and MicroShading is effective 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 skin and is a form of tattooing.

All instruments that enter the skin or come in contact with the body fluids are disposable and disposed of after each use. Cross-contamination guidelines are strictly adhered to. Safety is of the utmost importance.

Generally, the results are excellent. However, a perfect result is not a realistic expectation. It is typical to expect a touch-up after the first session of healing is complete.

Initially the color will appear much more vibrant or darker compared to the end result. Usually within 5-7 days the color will fade 30%-40%, soften, and look more natural. The initial crisp lines “fuzz” as the pigment is absorbed into the skin. The pigment is semi-permanent and will fade over time and will likely need to be touched-up within 1-2 years. Please note that color may fade faster on oily skin - please refer to the Policy Section.

PHOTOGRAPHY

We would like your permission to use these photos for advertising. For example, in portfolios, online social media, print ads, etc. Your consent is necessary for us to do 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.

PRINTED NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about us? Who can we thank for the referral? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNED \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**POLICY**

**Booking Fee**

Upon booking your appointment a $50-$100.00 **non-refundable** fee will be required to hold your appointment.  The fee will be applied to your total service fees on the day of your appointment. Please note the fee only secures the time of your appointment.  If you cancel or reschedule before the 48 hour window, you will not lose your booking fee and it will apply to your future rescheduled appointment.

PLEASE NOTE: It is the client's responsibility to contact us for a touch up appointment.  Fees will go up if you get your first touch up done after recommended time (please check pricing for details).  So we highly recommend you book your appointment ASAP and not wait until the very last minute.  It is not our responsibility to remind you when to book.  Please refer to our prices for more information.  We recommend scheduling in advance as we can get booked quickly.

**Cancellation Policy**

Brow Cancellation Policy Please give a 48-hour notice for all appointments for rescheduling to avoid forfeit of your booking fee and FULL charge of service.

Promotional rates will not be guaranteed if the service is not done within 2 months of promotion for new services.  You may reschedule an appointment up to 2 times before you forfeit your booking fee.  Rescheduling an appointment in the time allowed will ensure your booking fee to transfer. If you however reschedule within 48 hours of your appointment, YOU WILL BE CONSIDERED A NO SHOW (please see NO SHOW POLICY), you may book another appointment but will require payment in full.  We do allow a 15-minute window from the time of your appointment.  Please be on time as our time is just as valuable as yours.

Please note: Rescheduling of the touchup cannot be guaranteed of the price at the available time the rescheduled appointment falls on, if a rescheduled appointment does not meet the time frame, higher touchup fees will apply (please see price list for more info).   If you miss your touch up appointment, prior to booking another appointment you will be required to pay the full amount of touch up cost of the missed day and future appointment.

Please understand that when you forget to cancel your appointment without giving enough notice, we miss the opportunity to fill that appointment time, and clients on our waiting list miss  the opportunity  to receive services.  Our appointments are confirmed 48 hours in advance because we know how easy it is to forget an appointment you booked weeks ago.  Keep in mind reminders are just a courtesy, it is the client's responsibility to remember your appointment dates and times to avoid late arrivals and no shows.  Since the services are reserved for you personally.

**No Show Policy**

**SAME DAY NO SHOWS and CANCELLATIONS** within 48 hours will be charged the **FULL PRICE**.  So don't make a commitment to us by booking an appointment unless you intend to show up.  Thank you for understanding

**Refunds**

THERE ARE NO REFUNDS

You are paying for our time, service, product, and expenses to provide you with a service. There will be no refunds on any services done.  If you are having any issues, please do not hesitate to contact us.



AFTERCARE INSTRUCTIONS

I aim for perfection, but everyone’s skin is different, and will react differently to the procedure of semi-permanent Microblading / Microshading. Some skin will heal faster than others, and some skin will retain the pigment longer.

I want you to be THRILLED with the results for the months ahead, so please follow instructions! Failure to follow after-care instructions may result in infections, pigment loss or discoloration. We recommend yearly touch-ups to fill in any holes where pigment has faded and to maintain the shape. All skin is aging, and some of us will be harder on our skin than others; swimming, tanning, weather and chemicals all have negative affects on our skin.

* For the FIRST DAY after procedure, blot very gently with a warm damp paper towel or cloth to remove residue from procedure. Blot every few hours to make sure there's no build-up.
* DRINK LOTS OF WATER!!
* DO NOT sleep on your face or side of your face for the first 2 weeks. This creates lines where the skin wrinkles, and it pushes out the pigment.
* NEVER rush the healing process. DO NOT scrub, rub, or pick at the scabs that form. Allow it to flake off by itself. If it is removed before it is ready, the pigment underneath can be pulled out. The pigment is in the scabs, so try to keep the scabs on as long as possible! If they start to itch, just tap them gently to relieve the itching, or apply a small amount of balm.
* DO NOT get the brows wet during the healing process until all scabs have fallen off. (except day one when you blot gently.)
* DO NOT put anything (water, make-up, lotions, potions or oils of any kind) on the brows for 14 days or until healed.
* DO NOT sweat for 14 Days - this is a hard one, but body heat expands the pores. Sweat has salt and will prematurely fade, blur, or reject the pigment altogether, and can cause them to turn grey. No steam showers as it also opens the pores.
* DO NOT use any Retin-A or Glycolic Acids on the brow area during or after healing. It will cause pigment to fade quicker.
* Stay out of the sun for 2 weeks. Then be sure to use sunblock on the healed brows to prevent fading.
* DO NOT use a tanning bed for a month. Preferably NEVER. Sun exposure will fade and discolor the brows faster, just like regular tattoos.
* Only touch the microbladed / microshaded brows with squeaky-clean hands during the healing process to prevent infection.

Brows are a 2-part process!

The 1st session is the foundation and the structure of the brows.

The 2nd session is to perfect the color, shape, and details after the initial session has healed.

It’s highly recommended for you to come back for the second session so that your brows will look the best they can! If you like your brows after the first session, you will love them after the second session.

We recommend that you come in for a touch up once a year to keep your brows looking their best. If you wait too long, and a full re-do is necessary, it will be at the current full price.

A $50 non-refundable deposit is required for all services.

All skin is different and will accept dyes differently. My goal is to make them match as closely as possible, but nature does play a role in the contour of our brows. Hair patterns, and bone structure are never identical from brow to brow. Oily skin is especially difficult as it tends to “push” the color out or blur the lines more than normal, and will most likely need an additional or more frequent touch-ups. Microblading/Microshading is at LEAST a 2-part process, sometimes it might take a third time to get them perfect.

* Additional Touch-ups 3-6 months after initial session will be $150.
* Yearly Touch-ups / Color Boosts are $300.
* If a full re-do is required, the fee will be at the current price. $400.

**I always welcome and appreciate your feedback.**

**If something is bugging you, PLEASE LET ME KNOW - sadly I’m not a mind-reader. If you think something is off, i.e. one tail is shorter, one looks thicker, the color isn’t dark enough, etc., DON’T PANIC! The touchup appointment is to ﬁx those imperfections and to perfect the little details.**

**MICROBLADING and MICROSHADING IS A 2-PART PROCESS.**

**Please try to be patient and wait at LEAST 6 weeks to see the ﬁnal results. If you have questions or concerns or if you’d like a copy of your pics, PLEASE TEXT ME (512) 803-0123**

**Forms of Payments accepted: Cash and Credit Cards, a 3% fee will apply to all credit card transactions.**

The client shall consult a health care practitioner at the first sign of infection or an allergic reaction, and report any diagnosed infection, allergic reaction, or adverse reaction resulting from the tattoo to the artist and to the Texas Department of State Health Services, Drugs and Medical Devices Group, at 1-888-839-6676.