



The Informed Client's Consent to LASER/ NON LASER TATTOO REMOVAL PROCEDURE

(Pages 1-8)

1 GENERAL INFORMATION ABOUT LASER TATTOO REMOVAL PROCEDURE

Laser tattoo removal is simple, safe, and produces significant removing results. The advanced technology works by allowing the light produced by the laser to pass through the skin and break up the tattoo ink into tiny particles. The body then disposes of these fragments via its immune system. It usually takes several treatment sessions to ensure success, with minimum 8 week intervals between sessions.

The colours used in the tattoo, as well as its size and density, can all affect the suitability of a laser removal treatment, how long it will take, which laser to use, and how effective it will be. The fading of the pigments occurs each day following the procedure and continues for up to 12 months.

The effectiveness of laser tattoo removal depends on the colour of the pigment and pigment vibrancy. The higher tattooing vibrancy the higher effectiveness of laser tattoo removal, thus the effectiveness of laser tattoo removal gradually decreases with the increase of the number of procedures. Very pale tattooing could be removed with additional non-laser tattoo removal sessions. The technician uses Q-switch ND-YAG Laser with waves of 1064 nanometers and 532 nanometers. Some colors of artificial pigments reflect the most part of laser radiation from waves of 1064 nm and 532 nm and it is very complex or sometimes impossible to destroy these pigments by using this laser removal. These colors are following: white, yellow, beige, orange, light-blue, green and the mixes of pigments containing white color. In such cases the client and technician can try the laser tattoo removal with both diapasons, however the result can't be guaranteed and the non-laser tattoo removal can be selected as a next step of the tattoo removal plan. The colours which can be successfully removed by ND-YAG laser are grey, black, dark blue, brown, red and dark-orange colors.

Non-laser tattoo removal is a unique chemical extraction process. This technique uses tattooing equipment and special remover liquid which destroys connective tissue capsule around the pigment and sometimes break the molecule of the colorant creating a chemical reaction with the pigment. As the result the pigment partially is washed away by lymph, partially disintegrates and partially removed with scab. Compared with laser methods and other removal methods, chemical removal is less color selective, less painful. Usually one treatment can't completely and safely remove permanent makeup such as tattooed eyebrows and lip liners. It usually takes several treatments to completely diminish permanent make-up, paramedical tattoos and body tattoos with minimal scarring or other undesirable effects. Depending on remover type, it can create more or less visible scab and minimal down-time.

2 CLIENT PERSONAL RECORD & MEDICAL HISTORY

Name	_____
Address	_____
Email	_____ Phone (H) _____
Occupation	_____
Date of Birth	_____ Sex : _____

Are you currently under the care of a physician? _____ If yes, for what? _____
Do you have any of the following medical conditions/problems?
Allergies _____ If yes, do you have allergy on Hair dye? _____ Latex? _____ Lidocaine? _____
Prilocaine _____ Benzocaine _____ Tetracaine _____ Adrenaline (Epinephrine) _____
Tattoo pigments or some metals such as Iron, Titanium, Nickel _____ something other _____
Keloid Scars _____ Diabetes _____ Cold Sores/Shingles _____ Aids (Hiv) _____ Cancer _____
Hepatitis /Jaundice _____ Iron Deficiency Anemia _____ Hemophilia _____ Hypoglycemia _____
Asthma _____ Heart Problem _____ Frequent cold _____ High/low blood pressure _____
Epilepsy _____ Fainting Spells/Dizziness _____ Mental diseases _____ Constipation _____
Skin Disorder/s _____ Skin Peel _____ Any active infection _____ Pregnancy _____
Breast feeding _____ Regular Period _____ Menopause _____ Thyroid imbalance _____
Hormone imbalance, abnormality _____ Eye or Eyelid Surgery or Injury _____ Contact Lenses _____
Cataracts _____ Glaucoma _____ Laser Treatment _____ Are you planning an MRI? _____
Botox _____ If yes, when did you make last Botox? _____ Are you planning more Botox? _____
Fillers _____ Do you plan to continue with Fillers? _____ Are you planning a surgical face lift? _____
Current Medication _____ Blood Thinner _____ Antibiotics _____ Hormonal therapy _____
Oral contraception _____ Other medication _____
Do you feel well enough to have permanent make-up procedure? _____
Do you have old permanent makeup? _____ Area _____ When was it done _____
 I understand that in case of contraindications the result may be not satisfactory and additional perfecting sessions (touch-ups) may be required which will involve additional fees.

_____ / _____ / _____
Name Signature Date

3 MEDICAL ASPECTS OF LASER AND NON-LASER TATTOO REMOVAL

a) The tattoo removal procedure has medical contraindications:

- any virus and bacterial diseases in an active stage, immune system disorders: autoimmune diseases, immunodeficiency, including HIV, herpes in exacerbation stages, virus/allergic conjunctivitis, psoriasis, neurodermatitis, allergic diseases, cancer diseases,
- dermal diseases, atypical changes of integuments, including benign and malignant tumors, pigmentation abnormalities, including erratic ones,
- diabetes mellitus, any serious illness of internals a renal, liver failure,
- predilection of a skin to form keloids,
- hemophilia and other abnormalities of coagulability of a blood, high blood pressure,
- alcoholic or drug intoxication, epilepsy or mental disorders,
- hormonal diseases, pregnancy and breastfeeding period,
- therapy period of antibiotics, hormonal drugs, drugs influencing change of coagulability of a blood.

If the client is under one of these states it is recommended to cancel the procedure. If in doubt the procedure will only proceed with the written consent of the doctor.

b) Anesthesia

Anesthesia is not required for laser tattoo removal procedures. However, if the client has low threshold for pain and has no allergy to topical anesthesia components such as Lidocaine, Prilocaine, Benzocaine, Tetracaine and Adrenaline (Epinephrine) and no other contra indications such as high pressure, diabetes etc. it can be applied with consultation between technician and client.

c) Healing process and recommended aftercare

The laser tattoo removal usually doesn't affect the skin integrity. However in cases when the skin has extremely high concentration of pigments the procedure can cause external trauma and subsequent skin reactions such as skin redness (often), swelling (often), bruising (rarely) around treated areas, lymph release (rarely), scabs forming and flaking (rarely). External recovery of the skin occurs within 4-14 days. Internal recovery of the skin lasts within 1-2 months.

Non-laser tattoo removal is performed with skin penetration and can cause skin redness (often), swelling (often), bruising (rarely) around treated areas, lymph release (rarely), scabs forming and flaking (rarely). The same as in case of laser removal External recovery of the skin occurs within 4-14 days. Internal recovery of the skin lasts within 1-2 months.

The recommended aftercare and hygiene assist in preventing complications during healing process.

In the case of complications in healing, it is highly recommended you contact your technician and/or see your

GP for medical advice.

The healing process consists of several steps, below are some guidelines:

- Skin redness, which can last between 20 minutes through to several hours. This is normal and no action required.
- Swelling around treated areas, this usually passes after first day but in some cases can take as long as 2-3 days. This is normal and no action required.
- Lymph release, which lasts between 2-3 hours after procedure. It is **recommended** to wash the treated area with regular soap and dry it with cotton pads several hours after procedure in order to remove discharge from the surface of skin and avoid thick scabs forming.
- Scabs formation, which occurs only in the places with extremely high concentration of the pigment which being heated by laser beam can affect skin integrity. In such cases the scab can appear in traumatized area after the first day of procedure and lasts up to 10 days. The client **must** direct sunlight. It is **not permitted** to touch the effected scab area, nor scratch and remove in any form including soaking. If the scabs are removed by force it affects the normal regeneration process and can be a reason of a scars formation. It is **not recommended** to apply your own post-procedural care. For clients suffering from oral herpes it is recommended to take regular medical treatment, prescribed by GP, after laser tattoo removal applied on lips.
- Flaking of scabs. The light skin flaking is possible during the skin regeneration and can last up to 10 days. Within this period, no special treatment is required. But in order to avoid post-traumatic hyperpigmentation the client **must** avoid direct sunlight for a month after procedure.
- Full skin regeneration, will occur between 4-9 weeks from day of procedure. This depends on the age of client and skin conditions. At this stage the client is **recommended** to use Bepanthen skin cream or even scar care cream for the better skin regeneration. Any interference in the regeneration process (such as early cosmetic tattooing re-touch procedures or some cosmetology procedure associated with violating the integrity of the skin) is strictly prohibited because it can provoke the formation of scars. The client **must** avoid direct sunlight for a month after procedure in order to avoid post-traumatic hyperpigmentation. If the client is exposed to direct sunlight for prolonged periods of time, she/he must use maximum sunscreen protection on treated areas.

4 INFORMATION ABOUT STUDIO AND TECHNICIAN

Your technician is Anna Ocko, sole trader, trading as "Beaushade"

Ph.: 0401744987

Address: 7 Gunns Lane, Magpie VIC 3352

E-mail: ocko.anna@gmail.com

ABN: 81440818275

Anna Ocko is a qualified and accredited permanent make-up artist specializing in all areas of face and body, including: eyelids, eyebrows, lips, chucks, scars, areolas, scalp and any skin areas, requiring the camouflage procedures. Anna will undertake to comply with all the requirements of the rules and regulations governing the implementation of skin pigmentation procedures for the performance of permanent make-up.

Anna will undertake to document all aspects of your procedures, including taking photos of before and after to monitor effectiveness of procedures, all personal information is securely managed in the strictness of confidentiality.

5 TECHNICIAN'S POLICIES

Booking fee – A \$55 (inc.GST) booking fee is required. It is a time reserving and supplying fee.

In case of late cancellation (less than 7 days) this amount can't be refunded as this fee is covering our studio expenses (apportioned to each time slot) such as a rent, professional insurances, studio license, site service & hosting, education of the artist, studio equipment, consumables and time which are used to prepare the booked session.

Please make sure you cancel your booking 7 days prior to the booked date and please insure that the reason of your cancellation is important as due to sensitive character of our services it's unlikely that your time slot can be filled by another client and causes a loss to our business.

Cancellation – The time of appointment is reserved exclusively for the client. The cancellation should be done not less than 7 days prior to the procedure. Booking fee will not be refunded for: Cancellations made less than 7 days in advance including no-shows, day before and the same day cancellations. An additional \$55 booking fee will be required for re-scheduling of the appointment.

Late Arrival – Arriving late will deprive the client of valuable service time. As a courtesy to the next guest, the treatment will end at the time originally scheduled. Late arrivals may be rescheduled, or the remainder of the service time may be used at full price.

Children Under 18 – Due to liability reasons no children under the age of 18 will be permitted to undertake make-up procedures by Anna Ocko.

Cell Phones – Out of consideration for guests and technicians performing procedures, please mute or turn off cellphones.

Pricing of first procedure and Touch-up/Refresh fees – Touch-up/Refresh procedures are not included in the original procedure fee. The cost of "touch-up" procedure is about 30% of original procedure of current pricing

schedule on condition that the time interval between original procedure and touch-up procedure is no more than 12 weeks. The cost of "annual refresh" procedure is also discounted in comparison with the initial session price and varies depending on the time interval between last touch-up session and annual refresh procedure. In case if this interval is longer than 2 years the full fee will be applied for the refresh session.

For the latest prices please check out price list on beaushade.com. All prices quoted are subject to change without notice. All purchases and services are final, and any refunds are not applied.

Permanent Makeup Done by Another Technician – Touch-up/Refresh fees are applied only for returned clients. Re-colouring of permanent makeup done previously by any other technician is not a "touch-up" or "refresh" procedure since it is not original work by Anna Ocko. Such works are called "cover-up" procedures. The fees for "cover-up" procedures are referred to as a new procedure and charged accordingly. Additional charges will apply if extensive reshaping and symmetry correction is required or pigment removal is required. Two or more appointments may be necessary to achieve and complete the procedures depending on each individual situation.


























































Number of procedures - Number of procedures averages between 2 to 3 sessions, followed by annual refresh will be required. Multiple sessions (3 or more procedures) are usually required to achieve satisfactory results in following procedures: spots camouflage, scars tattooing including camouflage, artificial cheeks blush, large eye shadows, complex cover-up procedures, regular procedures for clients with relative contraindications, also on a case by case circumstance some clients may require more than one "refresh" per year to achieve a satisfactory result. In cases if additional perfecting sessions (touch-ups) are required additional fees will apply.

Non-compliance of aftercare instructions – If the client does not follow the instruction of correct healing and aftercare (according paragraph 3-c of given Consent) no claims will be accepted by technician. If the loss of pigment is a result of picking or forcibly removing scabs, causing loss of pigment, any repeat procedure resulting will be at the cost of the client.

Right to refusal – In case if client does not meet the criteria of the procedure the technician reserves the right to decline undertaking any procedure.

Beaushade Beauty

Kirby-Desai Tattoo Removal Scale

<h3 style="margin: 0;">SKIN TYPE</h3> <table style="width: 100%; text-align: center;"> <tr> <td style="width: 16.6%;">I</td> <td style="width: 16.6%;">II</td> <td style="width: 16.6%;">III</td> <td style="width: 16.6%;">IV</td> <td style="width: 16.6%;">V</td> <td style="width: 16.6%;">VI</td> </tr> <tr> <td>Always Burns & Never Tans</td> <td>Burns Easily & Tans Minimally</td> <td>Sometimes Burns & Slowly Tans</td> <td>Burns Minimally & Usually Tans</td> <td>Rarely Burns & Tans Well</td> <td>Never Burns & Always Tans</td> </tr> <tr> <td><input type="checkbox"/> 1 point</td> <td><input type="checkbox"/> 2 points</td> <td><input type="checkbox"/> 3 points</td> <td><input type="checkbox"/> 4 points</td> <td><input type="checkbox"/> 5 points</td> <td><input type="checkbox"/> 6 points</td> </tr> </table>	I	II	III	IV	V	VI	Always Burns & Never Tans	Burns Easily & Tans Minimally	Sometimes Burns & Slowly Tans	Burns Minimally & Usually Tans	Rarely Burns & Tans Well	Never Burns & Always Tans	<input type="checkbox"/> 1 point	<input type="checkbox"/> 2 points	<input type="checkbox"/> 3 points	<input type="checkbox"/> 4 points	<input type="checkbox"/> 5 points	<input type="checkbox"/> 6 points	
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Estimated Number of Treatments Required to Achieve Goal:

6 DISCLOSURE & RELEASE FORM FOR IMPLANTATION OF PIGMENT FOR: EYELINER, EYEBROWS, LIPS, RECOLOURATION AND CAMOUFLAGE

Anna Ocko appreciates your patronage and interest in new and improved techniques of Laser tattoo removal.

You have the right to be informed so that you may make the decision whether or not to undergo this procedure, after knowing the risks and hazards involved. This disclosure is not meant to frighten you. It is simply an effort to make you better informed so you may give, or withhold, your consent to the procedure.

a) CLIENT DISCLOSURE

Please read the statements below and confirm with your signature below:

I certify that I am over the age of 18. I give permission to perform laser tattoo removal procedure.

I understand the following completely that no warranty or guarantee has been made to me as a result of this laser tattoo removal procedure, and that the final result cannot be guaranteed.

I realize that there is potential for discomfort and pain during the procedure and during the healing process as well as a possibility of swelling, bruising, scab forming,

I understand that healing process and pigment fading is different for every person. The fading of the pigments will not appear at once, it occurs each day following the procedure and continues for up to 12 months. I have to stay patient and return for next laser tattoo removal session no earlier than in 2 month after initial session (when skin is completely healed).

I understand that allergic reactions to the anesthesia may occur.

I understand that there is a possibility of hyperpigmentation resulting from the procedure, especially in individuals prone to hyper pigmentation from a scar or other injury.

I understand that a laser tattoo removal can affect the skin structure and the more effective the removal the more trauma to the skin.

I was warned that I must avoid the direct sun exposure, and should be very careful with the skin in laser tattoo removal areas during healing period. I remember that I should not be at direct sun exposure during first month after procedure.

I know and agree that the number of removal procedures depends on many factors and can be approximately calculated according Kirby- Desai Tattoo removal scale.

I was explained that the less vibrancy of tattooing the less effectiveness of laser tattoo removal and very pale tattooing could be removed with additional non-laser tattoo removal sessions.

I understand that some colours such as white, yellow, beige, orange, light-blue, green and the mixes of pigments containing white color are very complex for ND-YAG laser tattoo removal. In such cases the technician can't guarantee a result and the non-laser tattoo removal should be selected as a next step of my tattoo removal plan.

I was recommended to plan my affairs after the procedure, taking into account the possible complications (redness of the skin, edema after procedures on the eyelids and lips, crusting).

I comprehend that the laser tattoo removal procedure on the lips can provoke the herpetic reaction and in order to prevent this reaction I have to use appropriate antiviral medicine, prescribed by your GP, straight after procedure.

I confirm that I received in writing instructions about "The correct healing process and recommended aftercare" (outlined in paragraph 2-c of given Consent)

I certify that I do not have medical contra-indications for performing laser tattoo removal procedure.

I hereby authorize Anna Ocko to take photographs of my procedure (treated area only) performed both before and after treatment, and I further authorize the use of photographs for the purpose of advertising.

I acknowledge that the information provided by me is to the best of my knowledge and treatment is based on this information.

I fully understand that Anna Ocko only provides beauty services; there is no medical treatment involved.

I realize that with any beauty service there may be certain risks which must be understood. I will be fully responsible for any and all results which may arise from these beauty services. I do hereby agree Anna Ocko is free from any and all claims or suits for damage, for injuries or complications resulting from any beauty service provided.

The nature and purpose of the beauty services, the risks involved and the possibility of complications have been fully explained to me. I understand that no guarantee or assurance has been given by anyone as to the results that may be obtained.

I have been given the opportunity to ask questions about the procedure, the risks, and the hazards involved.

I believe that I have sufficient information to give this informed consent.

By signing below I acknowledge that I have read and understand the above and all of my questions have been answered and that I consent to have the above beauty services.

b) CLIENT ACKNOWLEDGMENT AND RESPONSIBILITY TO INFORM THE TECHNICIAN

I further agree to indemnify and hold harmless Anna Ocko from any claim of liability, losses, damages, or any expenses whatsoever as a result of any claims, demands, damages, costs or judgments including, but not limited to,

claims based on negligence against Anna Ocko, that may arise in connection with the services performed.

This Agreement is intended to be an addendum to any previous conditions, releases, or hold harmless agreements, in written form, verbal, or manually communicated between Anna Ocko and her client in connection with laser tattoo removal procedures.

I have been given the opportunity to attain reasonable understanding of this Agreement, including the opportunity to ask questions, either by written, verbal or manual communication prior to the signing of this document.

As a client, I have a responsibility to inform the technician of all possible concerns. I understand that I must inform my technician of all medications being taken by me, even though I have written it on the I Medical History. For example, pain control medication such as aspirin may cause the blood to thin, and excessive bleeding may occur.

I understand that it is my responsibility to advise the technician of any concerns I may have before they begin the procedure, even though I may have written it on the form.

I am free from drug and alcohol use or any other substances.

I am not pregnant.

I have no known allergies to any topical anesthetics.

I understand that taking Before and After pictures is a condition of such procedures. I hereby forever release and discharge Anna Ocko from any and all claims, action and demands arising out of use of photographs for promotions.

I have also read and understand Aftercare Treatment Instructions and recommendations, and I understand my responsibility to follow them to ensure proper healing of the treated area.

I release Anna Ocko of all claims for injury, seen or unseen that may occur as a result of this procedure.

I fully understand the questions, terms, and conditions of this Disclosure and Release Agreement, and all have been explained to me in my native language. I accept to waive all my rights for any claim against Anna Ocko for any reasons may involve whatsoever.

I certify that this Disclosure and Release Agreement was completed by me and that all entries in it and information are true and complete to the best of my knowledge.

Client's Printed Name ✓ _____

Signature: ✓ _____ Date: ✓ _____

Beaushade Boutique

7 INFORMATION ABOUT PERFORMED PROCEDURES

1	Procedure	Date	Cost		Signature of technician	Anesthesia (name)
	Colour of tattooing	Lens (nm)	Needle	Remover	Notes*	Map of treated area
2	Procedure	Date	Cost		Signature of technician	Anesthesia (name)
	Colour of tattooing	Lens (nm)	Needle	Remover	Notes*	Map of treated area
3	Procedure	Date	Cost		Signature of technician	Anesthesia (name)
	Colour of tattooing	Lens (nm)	Needle	Remover	Notes*	Map of treated area
4	Procedure	Date	Cost		Signature of technician	Anesthesia (name)
	Colour of tattooing	Lens (nm)	Needle	Remover	Notes*	Map of treated area
5	Procedure	Date	Cost		Signature of technician	Anesthesia (name)
	Colour of tattooing	Lens (nm)	Needle	Remover	Notes*	Map of treated area

* Additional information about client and procedure (free form): technician's observations such as effectiveness of anesthesia, particularities of client, the level of the trust to technician, the level of anxiety of client, particularities of skin, procedure process, chosen technique, additional recommendations. Analysis of healed procedures.

6	Procedure	Date	Cost		Signature of technician	Anesthesia (name)
	Colour of tattooing	Lens (nm)	Needle	Remover	Notes*	Map of treated area
7	Procedure	Date	Cost		Signature of technician	Anesthesia (name)
	Colour of tattooing	Lens (nm)	Needle	Remover	Notes*	Map of treated area
8	Procedure	Date	Cost		Signature of technician	Anesthesia (name)
	Colour of tattooing	Lens (nm)	Needle	Remover	Notes*	Map of treated area
9	Procedure	Date	Cost		Signature of technician	Anesthesia (name)
	Colour of tattooing	Lens (nm)	Needle	Remover	Notes*	Map of treated area
10	Procedure	Date	Cost		Signature of technician	Anesthesia (name)
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