

Patient Contact Information

Name_____

Home Phone_____

Work Phone_____

Cell Phone_____

Home Address_____

City_____State____Zip_____

E-Mail_____

Date of Birth_____

Emergency Contact Name and Phone

Who Referred You To This Clinic?

Would you like to receive informational updates, specials
and newsletters? Yes_____No_____

Health History for Cancer Patients

Name _____ Date _____

Type of cancer _____ Date Diagnosed _____

Type of Surgeries and Treatments _____

Names of Physicians:

General _____

Oncologist _____

Surgeon _____

Plastic Surgeon _____

List All Medications _____

List Allergies including medications:

How long since your last surgery? _____

Did you have any severe complications from any of your surgeries, treatments or medications, such as allergic reactions to medications or tapes from adhesives or creams, infections, radiation burns, or severe scarring? If yes, explain:

Comments or concerns

I may need to provide photos or medical information to one or a number of your past physicians. Please sign below to acknowledge you are aware I will share this information only with the physicians listed above. Photos taken may be used in portfolio, but with no recognizable features.

Signature _____

Large Area Dermal Pigmentation Consent

TODAY'S DATE _____
NAME _____ Date of Birth _____

I AM AWARE THAT THE PROCEDURE OF SCAR CAMOUFLAGE AND AREOLA PIGMENTATION IS MEANT TO GIVE THE APPEARANCE OF NATURAL COLORED SKIN. THIS PROCEDURE WILL NOT NECESSARILY MATCH MY NATURAL SKIN COLORING OR TONE PERFECTLY.

I AM AWARE THAT MORE THAN ONE SESSION MAY BE NEEDED TO ACHIEVE THE DESIRED RESULT AND THAT FEES MAY BE CHARGED FOR THESE ADDITIONAL SESSIONS.

I UNDERSTAND SCAR CAMOUFLAGE IS A PROCESS, NOT A ONE TIME PROCEDURE.

I UNDERSTAND I MAY NEED TOUCH UPS IN THE FUTURE TO MAINTAIN COLOR.

I GIVE MY CONSENT TO HAVE COSMETIC TATTOOING.

I UNDERSTAND IT IS MY DECISION AND MY RESULTS MAY NOT BE WHAT IS ANTICIPATED. I UNDERSTAND UNREALISTIC EXPECTATIONS MY CAUSE MY DISAPPOINTMENT.

I UNDERSTAND THIS IS AN ELECTIVE COSMETIC PROCEDURE.

I WILL NOT HOLD EARLEEN BENNETT OR THE ASHEVILLE PERMANENT MAKEUP CLINIC LIABLE IN THE CASE I AM NOT HAPPY WITH MY RESULTS.

I UNDERSTAND PHOTOS MUST BE TAKEN BEFORE AND AFTER AND MAY BE USED IN PRINTED INFORMATION OR ON WEBSITE. NO IDENTIFYING PHOTOS WILL BE USED.(FACIAL PHOTOS).

I UNDERSTAND IT MAY BE NECESSARY TO CONTACT MY DOCTOR OR SURGEON TO CONSULT BEFORE PROCEDURES ARE PERFORMED.

SIGNATURE _____

Asheville Permanent Makeup Clinic
131 McDowell St Suite 202 Asheville NC 28801 (828) 255-5554

Please list any questions or concerns you have so we can discuss at your appointment time discuss them at your appointment time:

Are you allergic to latex? _____

Have you ever had a negative reaction to anesthetic (numbing) creams? _____

I ACCEPT FULL RESPONSIBILITY FOR THE DECISION TO HAVE COSMETIC TATTOO PROCEDURES PERFORMED:

CLIENT SIGNATURE _____ Date _____

PRINT NAME _____

Technician Signature _____ Date _____

Areola Tattoo Aftercare

What you do at home is as important as what we do!

Please take the time to follow these instructions to make sure you have long lasting results.

Infections and negative reactions are rare but possible...how you take care of your pigmentation when you go home is important.

Please make sure you have plenty of bandages and cream as advised by your tattoo artist to take care of your areola pigmentation as it heals.

If for any reason you have a reaction that is unexpected do not hesitate to call our office.

Your pigmentation will generally be done in 1 appointment but some individuals may need a second application. Please make sure you schedule a follow up appointment if you believe you need more color or to let us determine if more color placement is necessary. Please wait a minimum of 4 weeks for healing between appointments. Don't forget to follow up with your plastic surgeon after healing so they may see the finished result.

What to expect!

You may experience slight discomfort after your pigmentation much like a scrape or "rug burn".

This discomfort should diminish over the first 24 hours and you may be tender to the touch for 24-48 hours. The more feeling you have in the skin of your reconstructed breast, the more discomfort you may feel. Every person is different and I cannot predict exactly how you will feel, or how you will heal.

You will need the following after care products:

- 3x4 nonstick pads
- Aquaphor Ointment (available at most drug stores)
- Paper tape

These products are available at your local drug store.

It is no necessary to buy "name brand" products...

Remember NOT to buy gauze. The NON STICK pads will prevent the pad from sticking to the wound as it heals.

Apply a small amount of ointment to the pad and apply to area twice daily, morning and night, for at least 7 days. Use Q-Tips to apply cream to pad, or wear gloves. Make sure to wash your hands thoroughly before changing bandage.

The area can be lightly washed in the shower with mild soap. Do not use abrasive cloth to wash, let water gently run over it to rinse, pat dry and apply bandage.

DO NOT:

- Soak in a tub.
- Swim in chlorinated water, hot tubs, and ocean or lake water.
- Exercise excessively.
- Pick at wound as it heals.
- Try to speed healing by removing crust. Your body will naturally exfoliate the top layers of your skin as you heal.

The tattooed area may feel dry and tight as it heals. This is why it is important to keep ointment on it during the healing phase, to prevent flaking. Keeping the area covered with nonstick pads and ointment protects your clothing and helps you heal faster.

A comfortable bra, camisole, or sports bra will help hold the pads in place so they don't move around. Paper tape is less irritating to your skin.

Over the first week or ten days you will see color come off of the tattooed area when you change bandages, this is normal, it is just the top layers of skin coming off as it heals.

You may experience itching as it heals but do not scratch as it could open the area to infection and make the color heal unevenly.

It usually takes from 5 – 10 days for your areola to heal completely. Very sensitive skin could take a little longer.

Your areola will appear very dark when first applied. This is normal and the color will soften as it heals and exfoliates.

A second appointment may be necessary in order to get appropriate color and coverage.

Return Appointments

If in the future your areola fades and you need the color refreshed, please feel free to call us. We understand this is not a one-time application and we are dedicated to making sure you feel comfortable with your areola pigmentation now as well as in the future.

Please Call us at 828-255-5554 with any questions or email us at ashevillepmc@bellsouth.net