

## **EFFLEURAGE STUDIO**

Facial | Wax | Lash

## INFORMED CONSENT FOR CHEMICAL PEEL & MICRODERMABRASION

A skin pool is not a "cure-all" treatment, but for appropriate conditions, it can improve the skin. It is very important that

	erstanding of what a peel can and cannot do for y Please complete and sign this form.	
1	give my consent to	to perform
a skin peel and/or microdermabrasi	ion treatment on my face or body part in order to	treat the following conditions:
The peel treatment was explain	ined to me	
I understand that the degree of	of improvement I can expect to see is dependen onally, I understand that good home care and ac	
I understand that this is a progresults.	gram of treatment and that I may need several p	eels in order to achieve my best
I understand that I can expect has been applied – or longer v	to have 1-2 minutes of stinging or burning sens with certain peels.	sation immediately after the peel
I have ceased use of Hydroqu	inone/Salicylic/Azelaic acid products several da	ys prior to this service.
I have not received chemical I several days prior to this servio	hair treatments (permanent wave, straightening, ce.	relaxers, coloring, or bleaching)
I do not at this time suffer from	n HIV, Hepatitis, herpes simplex (cold sore) infe	ctions or facial warts.
I have informed my estheticial	n if I suffer from diabetes.	
I am not currently undergoing	chemotherapy, radiation treatments, or using ar	nti-cancer drugs at this time.
I am not pregnant or breast fe	eding at this time.	
I am not sunburned at this tim	e.	
	o not have permanent tattooed makeup (eyeline my tattoo will be covered with Aquafor as not to	
	an SPF of at least 30 for the next 2 weeks follow quarter-size amount must be applied <u>every</u> more hat when I am outside.	
I understand that use of tannir can cause severe burns.	ng beds in between peel treatments will nullify th	ne results achieved, and worse,
I have been given PRE-PEEL	and AFT ER-PEEL care instructions (handouts)	).
is necessary. It is extremely importa	ey can occur nevertheless. Prompt recognition a ant that you follow instructions exactly and that y nged sensitivity for more than 10 days. There are	ou notify your esthetician as soon
(Date Signed)	(Signature of Client)	