

Please be aware permanent makeup is a 2 step procedure. Follow up procedure is booked between 5 weeks to 3 months from your initial. Failure to return before the 3 months mark will result in additional charge depending on expansion. Color and shape can be adjusted on your touch up appointment. To book your follow up or make any changes, please give us a call or text at (336)212-0188

<u>Lip Blushing is NOT recommended for any clients who have the following:</u>

- · Pregnant or nursing
- Chronic dry or chapped lips
- Sunburnt and damaged lips
- Active skin diseases such as cancer, psoriasis, eczema, and undiagnosed rashes or blisters
- Clients who experience hypertrophic scarring, keloids, or easily hyperpigmentation
- Currently taking blood thinning medications (client must consult with their physician/doctor before

stopping)

- Currently using or have taken Accutane and other steroids within the past year
- History of herpes, fever blisters, and cold sores may experience an outbreak after lip procedures.

Antiviral prescription such as Acyclovir, Zovirax, or Valtrex should be taken 4 days prior and 4 days

after procedure. Procedure will be postponed without doctor's prescriptions/approval

- Diabetic: Must have doctor's note for approval
- Sick (cold,flue, etc)
- Has cancer and undergoing chemotherapy/radiation
- Has present open wound
- Has bacterial or viral infection
- Aged skin that is extremely thin or severely wrinkled
- · Has transmittable blood conditions such as AIDS, HIV, or Hepatitis
- · Allergic to anesthetics, tattoo inks, needles, pigments, makeup, or colors
- Suffer from bleeding disorders such as hemophilia and/or healing disorders

Before Care-1 Month Preparation

- No Botox and filler in lip area
- No chemical peels
- No laser facials
- No Fraser, Co2, and IPL laser treatments Avoid tanning (sun and tanning beds)

Before Care-24 Hours Preparation

- Avoid alcohol and caffeine 24 hours prior to appointment
- Do not work out on the day of the procedure
- Do not tan or have sunburned face
- Do not take any medication that can cause blood thinning such as Aspirin, Vitamin E, Fish Oil, or Ibuprofen 24 hours before the procedure (Continue On Back)



Please Note:To get your lips in great shape. Please exfoliate your lips ONE WEEK prior to your appointment using brands I recommend such as: Elf, LUSH, & Bite Beauty. Home remedy: Honey and sugar to create lip scrub. You may also moisturize using lip conditioner, mask, or lip balm every day leading up to the appointment.

After Care

- Day 1 (Day of Procedure) Before bedtime, wash lips gently using cotton pad/ball with sterile water (cooled to lukewarm temperature boiled water). Pat, dry, and apply healing ointment
- Day 2-7 Apply healing ointment every morning and night until lips heal (approx. 1-2 weeks). Do not allow lips to become dry!
- No lip makeup for 1 week (except healing ointment)
- No scratching, picking, licking of dry or flaking skin
- Avoid spicy, hot, messy foods for 3 days. Drink out of straws and eat with fork
- No kissing, smoking, rubbing, causing irritation for 7 days
- No extreme sweating for 5 days
- No swimming pools, hot tubs, sauna, other bodies of water, direct contact with animals or gardening for 5 days
- No UV exposure (sun/tanning beds) for 10 days -

Process: Lip will become darker as they heal. You will see minimal peeling, but it is important to not pick! You will see the pigment soften and the true color blossom within 2 weeks. Wear SPF once healed and continue to keep lips moisturized. Healing process/schedule my not fit all as everyone's skin is different therefore may heal differently. Long Term Aftercare

- If client wishes to do Botox or lip fillers, they must wait 4 weeks post-procedure
- If client is undergoing MRI or laser treatments, they must inform the technician of cosmetic tattoo procedures. Laser procedures may darken/lighten or distort pigment of lip color
- No exfoliants, retinol acids, glycolic acids, and alpha hydroxy acids on the area for a minimum of 30 days as it may cause premature fading. Always wear SPF. Sun exposure also causes premature fading

I ACKNOWLEDGE BY SIGNING THIS FORM THAT I HAVE READ AND UNDERSTAND THIS BEFORE AND AFTER CARE GIVEN TO ME. I AM RESPONSIBLE FOR THE EFFECT OF MY HEALED RESULTS IF BEFORE AND AFTER CARE IS NOT BEING FOLLOWED OR MET WRITTEN IN THESE INSTRUCTIONS. I ACCEPT AND AGREE TO ALL OF ITS TERMS AND CONDITIONS AND ENTER INTO THIS AGREEMENT VOLUNTARILY WITH FULL KNOWLEDGE OF ITS EFFECT.

Client Signature:	Date: