

6928 W. Linebaugh Ave. Suit 102, Tampa, FL 33625

(813) 749-7143

(813) 264-9262

www.westchasespa.com

# **Micro-needling Consent Form**

### INTRODUCTION TO MICRO-NEEDLING/COLLAGEN INDUCTION THERAPY

The concept of micro-needling is based on the skin's natural ability to repair itself when it suffers physical damage such as cuts, burns, abrasions or other injuries. Immediately after an injury to the skin, our body begins the healing process, triggering new collagen synthesis. We use a micro-needling device that intentionally creates very superficial "micro-injuries" to the outermost layer of the skin, inducing the healing process including new collagen production. Micro-needling has been shown to reduce the visibility of acne scars, fine lines, and wrinkles, diminish hyperpigmentation, and improve skin tone and texture, resulting in smoother, firmer, younger looking skin.

## **ABOUT THE PROCEDURE**

At Westchase MedSpa micro-needling is performed using a micro-needle roller. This procedure is performed by a fully trained & certified Master Aesthetician. The treatment session usually takes about 60-80 minutes, depending on the area(s) being treated. After the procedure, the skin will be red, with mild swelling and/or bruising, and your skin might feel tight and sensitive to the touch. Although these symptoms may take 2-3 days to resolve completely, they will diminish significantly within a few hours after treatment.

#### **ALTERNATIVE TREATMENTS**

Alternative treatments to micro-needling may include the use of routine skin care, oral and/or topical prescription and/or non- prescription medications, microdermabrasion, laser treatments, and chemical peels. Each of these alternatives carry their own inherent risks and benefits. However, since this treatment is elective and is done for cosmetic purpose only, no treatment at all should also be considered a viable alternative.

## **RISKS OF MICRO-NEEDLING**

Although the majority of patients do not experience any complications with micro-needling, it is important you understand that risks do exist. The micro-needling procedure is minimally invasive, utilizing a set of micro-needles to inflict multiple, tiny, puncture/lacerations to the outermost layer of the skin. Because micro-needling penetrates the skin, it inherently carries health risks, including but not limited to those listed below. You should discuss any and all health concerns with your esthetician or attending healthcare provider PRIOR to signing this consent form.

**INFECTION** - Infection is very unusual. However, viral, bacterial, and fungal infections can occur anytime the integrity of the skin is compromised. Should infection occur, you must contact or return to our office immediately, as additional treatment will likely be necessary

**PIGMENT/COLOR CHANGE** - Because dermal penetration is so superficial it doesn't extend into the layer of the skin containing melanocytes, hyperpigmentation is very rare with micro-needling; However, failure to follow post treatment instructions can put you at risk for hyperpigmentation. You MUST avoid sun exposure for a 1 to 2 weeks after a micro-needling treatment. You should also wear a daily SPF facial moisturizer, which your esthetician can recommend. Lastly, avoid picking and/or peeling the skin during healing period.

**SCARRING** - Although normal healing after the procedure is expected, abnormal scars may occur in both the skin and deeper tissues. In rare cases, thickened or keloid scars may result, especially if you are prone to keloid scarring anyway. Scars may be unattractive and of different color than surrounding skin. Additional treatments may be needed to treat scarring.

**PAIN** - There may be a very slight burning, scratchy, and irritated sensation to the skin. This is usually temporary and is gone within a few hours after treatment. A sudden reappearance of redness or pain is a sign of infection and you should notify our office immediately.

**PERSISTENT REDNESS, ITCHING, AND/OR SWELLING -** Itching, redness, and swelling are normal parts of the healing process. These symptoms rarely persists longer than 24 hours with micro-needling. However, treatments received less than 4 weeks apart may induce prolonged symptoms.



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**ALLERGIC REACTION** - Micro-needling is performed with a head containing sterile hypodermic needles, making an allergic reaction nearly impossible. However, a variety of products may be used on the face in conjunction with the micro-needling procedure, to which an allergy can occur. Additionally, since micro-needling increases the penetration of topical substances, it can cause you to be hypersensitive to products used on the face. If an allergic reaction were to occur, you must contact our office immediately, as it may require further treatment.

**LACK OF PERMANENT RESULT** - Micro-needling will not completely or permanently improve skin texture, tone, elasticity, hyperpigmentation, scars, or minimize fine lines and wrinkles. It is important that your expectations be realistic and understand the procedure has its limitations. Additional procedures may be necessary to achieve desired effect.

**UNSATISFACTORY RESULT** - Although rare from micro-needling, there is a possibility of a poor result from any cosmetic procedure. Microneedling may induce undesirable results, including but not limited to skin sloughing, scarring, permanent pigment, and/or other undesirable skin changes. You may be disappointed with the final results of micro-needling.

### CONTRAINDICATIONS TO MICRO-NEEDLING

Although it is impossible to list every potential risk and complication, the following are recognized as known contraindications to micro-needling. Furthermore, it is your responsibility to fully and accurately disclose all medical history prior to initial treatment, as well as provide any necessary updates at all future treatment sessions. If you have any of the conditions listed below, you should bring it to the attention of your esthetician PRIOR to signing this consent form.

- Active acne
- Active infection of any type (bacterial, viral, or fungal)
- Blood thinner medications
- Cardiac disease/abnormalities
- Chemotherapy or radiation
- CollagenVascular Disease
- Eczema, Psoriasis, or Dermatitis
- Hemophilia / bleeding disorders
- Hormone Replacement Therapy
- Keloid/hypertrophic scaring
- Pregnancy/Lactation Raised lesions (moles, warts, etc.)
- Recent chemical peel procedure
- Recent use of some topical RX.
- Rosacea
- Scleroderma
- Skin Cancer
- Sunburn
- Tattoos
- Telangiectasia/erythema
- Uncontrolled diabetes
- Vascular lesions (hemangiomas)



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# **ACKNOWLEDGEMENT of Micro-Needle information**

Initial	_ My signature below acknowledges that I have read and understand the content of this informed consent.		
Initial	_I have been given ample opportunity to ask questions, all of which have been answered in a satisfactory manner.		
Initialregarding my results.	_I understand that results can	vary and that no guarantee, neither expressed nor implied, ha	is been or will be, given to me
		benefits associated with the Micro-needling procedure, as tive procedure, performed solely for cosmetic purposes, and is no	
Initial Westchase MedSpa.	_On my own free will, I am ı	requesting and providing my informed consent, to undergo	Micro-Needling treatment(s) at
Initial member, affiliate, or ind		nd agree to hold harmless, Westchase MedSpa, their providers, a	estheticians, and any other staff
Initial	I hereby release them from any	liability, both seen and unforeseen, now and forever.	
Client Printed Name		-	Date
Client Signature			
Technician's Signature		-	