

Post Procedure Instructions

Immediately Following Cosmetic Tattoo Procedure:

- Apply ice to treated area for 10 – 30 minutes. Ice helps reduce swelling and aids in healing

For 14 Days Following Cosmetic Tattoo Procedure:

- **Do not expose treated area to the sun or extreme heat, i.e. sauna, hot tubs, sun-bathing, tanning beds, hot yoga. Any activity causing excessive perspiration can result in loss of pigmentation.**
- Absolutely no cleansing creams or chemicals. **Gently** cleanse the intradermal cosmetic area with a mild antibacterial soap. You may rinse with water and lightly pat the area dry. Try to keep area as dry as possible. **Scrubbing treatment area will result in loss of pigmentation.**
- Do not pick at the epithelial crust, allow it to flake off on its own.
- Do not soak treated area in a bath, swimming pool or hot tub. Do not swim in fresh, salt or chlorinated pool water.
- Do not expose treated area to full pressure of the water in the shower.
- Apply antibiotic ointment daily. This is especially important after cleansing and before bedtime.
- **It is normal for peeling to occur** five to ten days during the healing process. Pigmentation will appear light after peeling but will return to the surface within five days.

Failure to follow post-treatment instructions may cause loss of pigment, discoloration or infection.

Remember, colors appear brighter and more sharply defined immediately following the procedure. As the healing progresses, color will soften. Makeup may be used to tone color down until this time.

If you have an infection, adverse reaction or allergic reaction to the procedure, you must notify Silvia, a doctor and the TEXAS Department of Health.

If necessary, an appointment for a touch up procedure may be made between four and six weeks following the initial procedure at no extra charge. **IF YOU HAVE ANY QUESTIONS CALL.**

I have read and understand the above instructions: _____
Signature

TO BE COMPLETED BY CLIENT

Driver's License Information

Name: _____

License Number: _____

State: _____

Date of Birth: _____