

**MCA CUSTOMER DISCLAIMER**

NAME.....  
ADDRESS.....  
.....  
TEL; HOME.....  
WORK TEL NO: .....  
TEL;  
MOBILE.....  
D.O.B.....

Do you wear contact lenses?.....  
Do you or have you ever suffered with lack of skin sensitivity?.....  
Do you smoke .....

**Do you suffer or had any of the following conditions:**

- Eczema
- Dermatitis
- Do you suffer with high or low blood pressure?
- Psoriasis
- Any skin allergies
- Hepatitis
- Hemophiliac
- Medication that causes sensitivity or slow healing in the skin
- Any allergies to ant thing at all
- Any kind of blood related disorder
- hypertrophic or Keloid scars
- Severe bruising problems
- Severe scarring problem skin
- Loss of hair any where on your body - Alopecia
- Epilepsy
- Diabetes
- Any blood disorders
- HIV Positive

**Have you had any of the following?**

- Any major illness in the past five years
- Any cancerous lesions including skin cancer
- Any operations in the past five years
- Any cosmetic surgery in the past ten years

Give details

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I am having my wrinkles / Scar Tissue Treated (Tick) sign, Date.

If scar tissue how old and where is it located

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\_\_\_\_\_  
\_\_\_\_\_

Location of the wrinkles

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What has caused the scar tissue or wrinkle

\_\_\_\_\_  
\_\_\_\_\_

Has the scar tissue or wrinkles been treated before with any other method of treatment

\_\_\_\_\_  
\_\_\_\_\_

- Client has seen Photographs of how the areas will look after and has understood this is classed as a pain treatment and more than one treatment id needed. YES / NO (tick and client to sign)
- Photograph taken with client consent (Tick) YES / NO date of photographs
- Client understands that although the treatment is very effective we cannot fully guarantee results, this is due to each individual's skin healing capacity.

YES / NO (Tick) client to sign and Date

\_\_\_\_\_

Do you have good healing skin?.....

Are you taking any form of prescribed or herbal medicines and remedies at the moment including multi vitamins? .....

For your safety is there any other medical details you feel we should know about as all medical details must be declared to ensure you are fit and well enough to have this treatment preformed?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have been given the following:

- Client must clean the area with a mild salt water and apply Vaseline
- Silicone dressing allow quicker healing and can be used
- Sun bed cannot be used for one week after the treatment
- Do not allow scabs to form, if they do, do not pick them off
- Treatments can only be carried out approximately every 4 – 6 weeks, or when the therapists feels the skin has healed sufficiently
- Treatment results cannot be guaranteed
- Lasting results of treatment cannot be guaranteed

- Sometimes more than three treatments are needed; extra treatments have to be paid for at the going rate.
- Sun block must be worn for 6 weeks after the treatment
- I have been given a full consultation and understand the treatment fully, I am happy with my consultation.
- I have been given home care advise and literature

Client Signature \_\_\_\_\_

Date \_\_\_\_\_

Therapist Signature \_\_\_\_\_

**MCA Home care Advice Disclaimer**

- Light or severe bruising and blood is normal with this treatment
- This treatment will look unsightly for a few days,
- No make up must be worn on the treated area for 72 hours after treatment
- No saunas steam rooms, sun beds, sun exposure or Jacuzzis for the duration of this treatment
- It is advisable to take Zinc because it speeds up healing and reduces the chance of infection
- Keep the area clean with mild alcohol free cleansers or tattoo cleanser can be used
- Medicated cream must be used under the Vaseline to promote healing. Tinted medicated cream is available.
- You will need to buy some pure Vaseline to use on the treated area.
- Sun block factor 50 upwards, none perfumed must be used
- The area must NOT be allow to scab over
- Wipe the area with tattoo cleanser / warm water to remove blood as this will cause a scab if it is not removed, and apply Vaseline regularly through out the day every day until the area as healed, as this will also stop scabbing and enhance the treatment results
- Sun block must be worn on the top of the treated area and on top of your home care products but under make up, sun block must with this treatment
- I declare I have read the home care advice; I have also had my therapist fully explain the treatment and the home care. I agree I fully understand the treatment, and that results cannot be guaranteed. I cannot hold profiles or the employees responsible for any lack of care or Attention on my part

Signed (Therapist)

Date

**MCA Risk Disclaimer for Wrinkles & Scar Tissue Reduction**

By ticking each box and signing the bottom of this disclaimer I am taking responsibility and cannot hold Profiles or any of its employs responsible for the following.

- 1) I understand I may not get a result, as this treatment varies from client to client
- 2) How long results last are inconclusive
- 3) I understand the above is why I have a test patch which I pay for.
- 4) Scarring may occur
- 5) The area may take between one month and 18 months to heal
- 6) The area may lead to hypertrophic healing

I am acknowledging and taking the risk and responsibility for all of the above and mentioned.

Signed \_\_\_\_\_

Photographed \_\_\_\_\_

Dated \_\_\_\_\_

Therapist who performed the treatment signature:

\_\_\_\_\_

Notes

### Emla Disclaimer

Emla cream contains two medicines called Lidocaine and Prilocaine. These belong to medicines called local anaesthetics. Emla cream works by numbing the surface of the skin for a short time. It is put on the skin before certain procedures which can feel uncomfortable; this helps to stop or relieves the pain on the skin. You cannot have Emla cream allied if you are allergic or hypersensitive to Lidocaine or procaine or any of the ingredients listed below.

Emla cannot be used on babies aged 0-12 months who are being treated with medicines called 'sulphonamides' such as sulfamethoxazole

- Are you anaemic
- Do you have any blood condition where you have reduced red blood cells
- A rare blood disease called glucose 6 phosphate dehydrogenase deficiency
- Blood pigment level changes called ' methamoglobinaemia
- Atrophic dermatitis(this condition means the skin does not need as much time to anesthetise )

Have you used medicines called?

- Sulphonamides
- Sulfamthoxazole
- Other local anaesthetics
- Medicines to treat uneven heart beats such as mexiletine or amiodarone

If you are pregnant or breast feeding you must consult your doctor before having Emla cream applied, as the cream can pass into the breast milk. Emla can have side effects, these include:

- Rash
- Feeling short of breath
- Low blood pressure, which may make you feel faint or dizzy
- Swelling on the face, lips tongue or other parts of the body
- Bluish gray skin in children, which is a very rare effect – due to lack of oxygen – if this happens the cream must be removed and seek your doctors advise
- Pale skin where the cream has been used
- Mild itching or burning
- Small red dots where the cream is applied

Emla cream 5% contains the following:

- Active substances Lidocaine and Prilocaine, each gram contains 25mg Lidocaine and 25mg Prilocaine
- Polyoxyethylene hydrogenated castor oil
- Carbomer 974P
- Sodium Hydroxide

Purified water sign to state I have read and fully understood all of the above. I state I have no known allergies or any of the listed above health problems or using any of the above medications, or any such medications of the same type. I understand that I may have a reaction and that I am not holding Profiles responsible, as they have taken all precautions for my safety, any creams administered are at my own risk.

Signed \_\_\_\_\_

Date \_\_\_\_\_

Name (block) \_\_\_\_\_

Address \_\_\_\_\_

Tel Numbers \_\_\_\_\_

