

VT TATTOOING CONSENT FORM

Client
Initials

- _____ 1. Tattooing is a form of body modification made by inserting ink, dyes, and/or pigments into the dermis layer of the skin to form an indelible design. [3.2(F)(1)(a)(1)]
- _____ 2. I acknowledge that a tattoo is a permanent change to my appearance and that no representations have been made to me as to the ability to later change or remove my tattoo. [3.2(F)(1)(a)(2)]
- _____ 3. I acknowledge that removal of tattooing at a later date may not be complete and may leave scarring. [3.2(F)(1)(a)(3)]
- _____ 4. I acknowledge that complications of tattooing may include bruising, scarring, bleeding, skin and/or blood infection, allergic reactions to inks, and nerve and tissue damage. [3.2(F)(1)(a)(4)]
- _____ 5. I have not used alcohol in the last eight hours. [3.2(F)(2)(a)]
(Clients who have used alcohol within the last 8 hours should consider having their procedure some other day as they are at increased risk for loss of consciousness, and they might regret their decision later.)
- _____ 6. I have not used drugs in the last eight hours. [3.2(F)(2)(a)]
(Clients who have used drugs within the last 8 hours should consider having their procedure some other day as they are at increased risk for loss of consciousness, and they might regret their decision later.)
- _____ 7. I have eaten within the last two hours. [3.2(F)(2)(b)]
(Clients should have eaten within the last 2 hours before the procedure to avoid increased risk of fainting.)
- _____ 8. I will inform my tattooist if I have any of the following medical conditions:
- Mitral valve prolapse [3.2(F)(2)(c)(1)]
Persons with this condition are usually advised to receive antibiotics during dental procedures. Antibiotics might also be recommended by the client's health care provider prior to having the procedure.
- Herpes [3.2(F)(2)(c)(2)]
Persons with a history of herpes in the procedure area are at increased risk of a reoccurrence of herpes in that area. Antiviral medication taken before and after the procedure can reduce the likelihood of a reoccurrence.
- Allergy to latex [3.2(F)(2)(c)(3)]
Persons with allergies to latex can react to latex gloves used by the practitioner. Allergic reactions vary in severity but can be severe and life-threatening. Vinyl gloves should be used for clients with latex allergies.

Allergy to antibiotics [3.2(F)(2)(c)(4)]

Persons with allergies to antibiotics can react to antibiotic ointment applied to the skin. Allergic reactions vary in severity but can be severe and life-threatening. Non-medicated ointments should be used for clients with allergies to antibiotics.

Diabetes [3.2(F)(2)(c)(5)]

Persons with diabetes, especially those who must take insulin, have impaired healing. They should be cleared by a physician before having the procedure.

Hemophilia/bleeding disorders and use of anticoagulant medications [3.2(F)(2)(c)(6)]
Persons with these conditions can bleed excessively during and after the procedure.

Medications [3.2(F)(2)(c)(7)]

Blood thinners (Coumadin, Warfarin, and aspirin) affect bleeding.

Autoimmune disorders [3.2(F)(2)(c)(8)]

Persons with these disorders might have impaired healing. They should be cleared by a physician before receiving a tattoo.

_____ 9. I acknowledge I am over the age of eighteen and that I have truthfully represented to my tattooist that obtaining a tattoo is by my choice alone. [3.6]

_____ 10. I have been provided with the shop's Disclosure of Information prior to treatment. [4.1]

Printed Name of Shop

Printed Name of Tattooist

Tattooist Signature

Printed Name of Client

Client Signature

Date of Client Signature