

PRE-APPOINTMENT QUESTIONNAIRE

In order for us to determine if you are a good candidate for this procedure we will need some information. Please answer the following questions below and attach a photo of your brow area in your return message.

Do you have any scars in or around the brow area?

Are you prone to Keloid scarring?

Have you had a forehead lift?

Botox? If so, when?

Do you hae alopecia or trichotillomania (compulsive pulling of body hair)?

Do you have eczema or dermatitis in or around the brow area?

How would you rate your skin? (Normal, Combination, Oily, or Severely Oily)

Do you have large pores?

Do you have any moles/raised areas in or around the brow area?

Do you have or have had a piercing in the brow area?

Have you had a hair transplant for your eyebrows?

Do you tan or excercise frequently?

- If so, please refer to the before & after care page for more information.

Please list any prescribed medication you are currently taking.

Now please attached a photo of your brow area. Make sure you are makeup-free and the photo is taken ina well-lit area. We will inform you if you need to send another photo. Tank your for your patience and cooperation. We will notify you shortly if you are a candidate for this procedure.