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Guidelines For Patch Testing

Currently, the industry does not require a sensitivity test for possible allergic reactions. However, our manufacturer strongly advocates conducting a thorough patch test procedure prior to performing any Permanent Makeup/Micro-pigmentation procedure with their pigments or any other pigments. Check with your liability insurance carrier for additional guidelines and the suggested amount of time between patch testing and performing the procedure.

Patch testing serves a dual purpose: to test for adverse reaction and color outcome.

- **Skin Patch test:** tests for sensitivities and may indicate a possible allergic response or adverse reaction to the pigment/dye color. A medical history will help determine possible pigment/dye allergic reactions. This is performed either behind the ears or between the toes.
 - **Inorganics:** (Iron oxides, Chromiums & Ultramarines) this is normally a 2-7 day test.
 - **Organics:** (D&C and FD&C dyes & Carbon Based) this is normally a 30-day test. Sensitivities to eye shadows, lipsticks, and blush containing D&C dyes may indicate a potential allergic response.
- **Color Patch Test:** tests for color outcomes assuring the client and technician that the best pigment color was chosen. This is normally a 30-day test and performed on procedure site area. For uniformity, patch test laterally on both eyes and lip corners.
- **Anesthetic Patch Test:** Conducted at the time as the skin patch or color patch test by depositing several drops of anesthetic using a triple needle with a dotting method in an area *other* than the one that the color has been placed.
- **Antibiotic Ointment Patch Test:** (opposite the ear a skin patch or color patch test was performed). Perform another pigment skin test, and then place a small amount of the antibiotic ointment over the area where a pigment skin test was performed (i.e. back of ear).

Note: It is recommended to perform ALL patch tests prior to any procedure. Clients feel more assured when administered a patch test for adverse reaction and color outcome. It is also advised to test for topical anesthetic and antibacterial ointment sensitivity.

Positive Reaction: Usually a reaction is pruritic, (intense itching of the skin without eruption) associated with erythema nodosum (abnormal redness of the skin with nodule-like characteristics). If this or any other abnormal reaction appears, it is advised to consult with a Physician.

WARNING: Do not perform a color patch test if a skin patch test proves positive.

Negative Reaction: Without itching, abnormal redness or eruption. A negative sensitivity test result to organics does not guarantee that the client will not develop dye sensitivities months or years later.

HOW TO PERFORM A PATCH TEST

Using a new sterile triple prong needle, perform a patch test by depositing a series of (4-6) dots of color into the dermal layer of the skin.

- If mixing two or more pigments/dyes, skin patch test with all the pigment colors blended together.
- It is necessary to perform a separate skin patch test for each organic pigment, as their ingredients differ between pigments.
- It is advised to always perform a skin patch test when using inorganic pigments containing Chromium Hydroxide Green or Ultramarine Blue.

Recommended test areas are:

- **Back of the Ear:** The back of the ear is sensitive tissue and any adverse reactions likely appear here.
- **Between the Toes:** This area is usually enwrapped, warm and moist. This tissue is also sensitive and any adverse reactions will likely appear here.
- **Procedure site:** This will show if the particular site has susceptibility to an adverse reaction.

For questions or comments about performing patch testing, contact Face and Body Professionals, Inc. at 800-613-5920, (M-F) 8 a.m. to 4 p.m. Pacific time.