



LASER HAIR REMOVAL SUPPLEMENT
 Forming part of the Professional Liability Application

 Name of Applicant

Do you follow Health Canada Guidelines for Laser Hair Removal, Safety Guidelines for Facility Owners and Operators, 2015? Yes No

Have all laser hair removal technicians completed a training course on laser hair removal from a registered beauty college or equivalent? Yes No

Did all laser hair removal technicians' training courses include the following? (Check) (✓) those that apply):

- Fundamentals of laser operation
- Overall responsibility for laser safety
- Laser classification
- Emergency procedures
- Potential laser hazards associated with operating a laser, including the significance of reflections
- Control measures
- Cleaning and maintenance of protective equipment
- Medical Surveillance
- Medical care (pre- and post-treatment)

Are all employees undergoing at least annual training on the Health Canada guidelines? Yes No

Are customers supplied with comprehensive information on treatment procedures and possible risks and side effects? Yes No

Is every new patient required to complete and sign a consent form? Yes No

Does the consent form include a statement that the patient understands and accepts the risk? Yes No

How long do you keep your patient's information/documentation on file? _____
 Years

 Print Name and Title

 Signature of Applicant or Authorized Representative

DATE: | D | D | M | M | Y | Y |