LASER HAIR REMOVAL SUPPLEMENT

Forming part of the Professional Liability Application swgspecialty.com · quotes@swgspecialty.com · +1 888-302-9215 · Fax: 905-428-3977





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?	1	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?		L_I_I_I Years	
Print Name and Title			
Signature of Applicant or Authorized Reprsentative			
DATE: D D M M Y Y			