MICROBLADING MANUAL

SPMU

WWW.SKIN-AESTHETICS.CO | INFO@SKIN-AESTHETICS.CO

MICROPIGMENTATION OVERVIEW

Within this Training Manual you will learn all of the techniques necessary to complete microblading eyebrow treatments. This manual covers safety, environment, legislation, practitioner guidance, client care, theory and practical knowledge.

MICROBLADING MANUAL CONTENTS

IDEAL CLINIC SET UP

- Wipeable Flooring
- Sink
- Hand Sanitiser
- Paper Towels
- Clinical Waste Contract
- Insurance
- Bed
- Light
- Stool
- Trolly's
- Sharps Bins
- Clinical Waste Bins
- Disinfectants
- Tools
- Couch Roll
- Gloves & PPE
- Air Conditioning or Ventilation
- Stress Balls

CLINICAL WASTE

Clinical waste, also known as healthcare or medical waste, is any waste generated during healthcare activities that may pose a risk of infection or other harm. This includes items contaminated with blood, bodily fluids, or other potentially infectious substances, as well as sharps like needles and syringes.

INFECTIOUS WASTE:

This includes items contaminated with blood, bodily fluids, and other potentially infectious substances. Examples include dressings, swabs, and personal protective equipment (PPE) that have been in contact with infectious materials or patients.

SHARPS:

This includes items that can puncture or cut, such as needles, syringes, scalpels, and lancets.

ANATOMICAL WASTE:

This includes human or animal tissues and body parts.

PHARMACEUTICAL WASTE:

This includes expired medications, medications in excess, and empty containers.

CONTAMINATED EQUIPMENT:

This includes items like bedpans, liners, stoma bags, and urine containers that have been contaminated.

Clinical waste needs to be handled and disposed of carefully to prevent the spread of infection and ensure safety, often requiring specialised disposal methods like incineration or autoclaving.

1. Set up a clinical waste contract with a local supplier
2. Organise regular clinical waste collections - monthly, weekly or adhoc
3. Ensure to use correct coloured sharps bins (aka Purple for Cytotoxic Waste - Botox)
4. Purchase sharps bins, clinical waste bins and clinical waste bags from supplier
5. Ensure to have a smooth clinical waste system throughout your clinic

COUNCIL LICENSING & COMPLIANCE

This section outlines the legal, health, and safety requirements relating to Council Licensing for Micropigmentation (SPMU) treatments. It is designed to ensure that all trainees understand their responsibilities when practicing SPMU, whether working from a clinic, salon, studio, or mobile setting.

SPMU is classed as a special treatment under UK local authority regulations and is therefore subject to council licensing and inspection.

BEFORE OFFERING SPMU TREATMENTS, PRACTITIONERS MUST:

- Hold a recognised SPMU or Micropigmentation Qualification
- Provide proof of adequate training, including:

  Infection control
  Blood-borne pathogens
  Health & safety
  Hold valid public liability and treatment insurance specifically covering SPMU
  Register with their local council if required
  Some councils require individual practitioner registration even when working within a licensed premises.

COUNCILS MAY INSPECT PREMISES TO ENSURE COMPLIANCE WITH:

- Clean, non-porous work surfaces
- Suitable hand-washing facilities
- Separate clean and contaminated zones
- Clinical waste disposal contracts
- Adequate lighting and ventilation
- Sharps disposal procedures

No treatments may be performed until the premises licence has been granted.

LICENSING REQUIREMENTS VARY BETWEEN COUNCILS. TRAINEES ARE RESPONSIBLE FOR:

- Contacting their local council directly
- Confirming whether SPMU is licensed under tattooing or micropigmentation
- Understanding renewal dates, fees, and inspection processes

FAILURE TO COMPLY WITH COUNCIL REGULATIONS MAY RESULT IN:

- Fines
- Enforcement notices
- Business closure
- Invalidation of insurance

CONSULTATION FORMS

Consultation forms are important because they ensure informed consent, gather essential client information, and help professionals understand client needs and preferences before a treatment. They also provide a record of discussions, agreed-upon treatments, and any allergies or conditions, acting as a paper trail for potential issues. Additionally, they can help with aftercare instructions and demonstrate a professional approach to treatment.

WHY MUST WE ENSURE THESE ARE DOCUMENTED?

INFORMED CONSENT AND LEGAL PROTECTION:

Consultation forms ensure clients understand the treatment, including risks, benefits, and aftercare instructions, demonstrating informed consent. They can act as a legal record, protecting professionals from potential disputes or misunderstandings.

GATHERING CLIENT INFORMATION:

- Forms allow professionals to collect crucial information like allergies, medical conditions, and previous treatments, helping them tailor the treatment plan.
- They enable professionals to understand client goals, expectations, and desired outcomes, ensuring a better experience.

BUILDING RAPPORT AND TRUST:

- Consultations provide an opportunity for professionals to establish a relationship with clients, fostering trust and understanding.
- Open communication and personalised attention, documented in the form, can lead to greater client satisfaction and loyalty.

STREAMLINING THE PROCESS:

- Forms can save time during the appointment by gathering information beforehand and streamlining the discussion.
- They can be accessed quickly, allowing for efficient review of client history and treatment plans.

WHO WE RECOMMEND?

We use Faces Consent App, however any reputable consent company will be sufficient.

Scan the QR code to sign up to Faces Consent

www.facesconsent.com

CONTRAINDICATIONS

A contraindication in medicine is a factor that makes a particular treatment or procedure inadvisable for a specific individual because it could cause harm or be ineffective. It's essentially a reason not to use a certain treatment due to potential risks or adverse reactions.

SPMU MUST NOT BE CARRIED OUT ON CLIENTS WITH THE FOLLOWING CONDITIONS:

ABSOLUTE CONTRAINDICATIONS (DO NOT TREAT)

- Blood-borne infectious diseases (e.g. HIV, Hepatitis B or C)
- Active cancer or clients currently undergoing chemotherapy or radiotherapy
- Severe haemophilia or uncontrolled bleeding disorders
- Epilepsy that is uncontrolled or without medical clearance
- Known allergy to pigments, metals, or topical anaesthetics used in treatment
- Severe immune system disorders or immunosuppression
- Active scalp infections, including bacterial, viral, or fungal infections
- Open wounds, unhealed scars, or broken skin in the treatment area
- Contagious skin conditions
- Clients under the legal age of consent

SPMU MAY ONLY BE CARRIED OUT ONCE THE CONDITION HAS RESOLVED, STABILISED, OR WITH WRITTEN MEDICAL CONSENT:

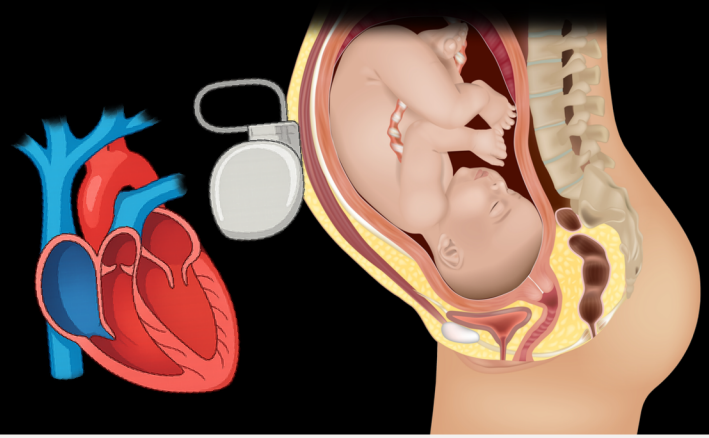
- Diabetes (especially if poorly controlled)
- Pregnancy or breastfeeding
- Autoimmune conditions
- Psoriasis, eczema, dermatitis, or seborrhoeic dermatitis on or near the scalp
- Keloid or hypertrophic scarring tendency
- Recent hair transplant or scalp surgery (minimum healing time required)
- Recent sunburn, irritation, or inflammation of the scalp
- Use of blood-thinning medication (e.g. warfarin, aspirin, clopidogrel)
- Use of isotretinoin (Roaccutane) within the last 6–12 months
- High blood pressure that is uncontrolled
- Skin cancer history in the treatment zone

CONTRA-ACTION

- Excessive redness or swelling
- Bleeding or pinpoint bleeding during treatment
- Bruising around the treatment area
- Tenderness or soreness of the scalp
- Itching during the healing process
- Scabbing or flaking of the skin
- Temporary colour darkening or lightening
- Uneven pigment retention during healing
- Mild headaches or light-headedness

RARE BUT SERIOUS CONTRA-ACTIONS:

- Infection due to poor aftercare or hygiene
- Allergic reaction to pigment or products used



FIRST AID

WE HIGHLY ADVISE ENSURING YOU ARE FIRST AID AND ANAPHYLAXIS TRAINED.

First aid training is important because it empowers individuals to confidently respond to emergencies, potentially saving lives, preventing injuries from worsening, and promoting recovery. It also boosts confidence, increases awareness of risks, and encourages teamwork, both in personal and professional settings.

Anaphylaxis training is crucial because anaphylaxis is a severe, life-threatening allergic reaction that can develop rapidly.

Training equips individuals with the knowledge and skills to recognise the signs and symptoms of anaphylaxis, understand the appropriate treatment (including adrenaline auto-injectors), and deliver first aid until professional help arrives. This knowledge is vital for protecting individuals with allergies and ensuring workplace safety.

HERE'S WHY IT'S SO IMPORTANT:

RAPID ONSET:

Anaphylaxis can develop quickly, often within minutes of exposure to an allergen.
Prompt recognition and treatment are essential to prevent serious complications or death.

LIFE-THREATENING NATURE:

Anaphylaxis can cause airway obstruction, breathing difficulties, and circulatory collapse, making it a life-threatening emergency.

IMPORTANCE OF RECOGNITION:

Recognising the signs and symptoms of anaphylaxis (such as difficulty breathing, throat swelling, dizziness, and skin reactions) is the first critical step in providing timely treatment.

ADRENALINE AUTO-INJECTOR (AAI) USE:

Training includes learning how to correctly use an AAI (like an EpiPen) to administer adrenaline, which is the primary treatment for anaphylaxis.

CPR AND AED:

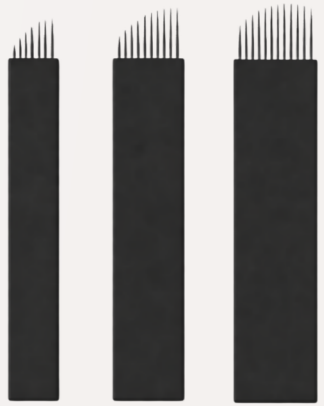
Some anaphylaxis training courses also cover basic life support (CPR) and the use of an Automated External Defibrillator (AED), which may be needed if the individual loses consciousness.

Ensure to have a First Aid kit and Bodily Fluids spill kit accessible within your work space.

WHAT IS SPMU MICROBLADING?

SPMU Microblading (Semi-Permanent Makeup - Microblading) is a specialised cosmetic tattoo technique designed to enhance, reshape, and define the eyebrows by implanting pigment into the upper layers of the skin. Unlike traditional tattooing, SPMU uses refined tools and pigments that are formulated specifically for the face, creating soft, natural-looking hair strokes that mimic real eyebrow hairs.

The result is fuller, well-balanced brows that complement the client's facial features while maintaining a realistic appearance.



Microblading is considered semi-permanent because the pigment is implanted more superficially than body tattoos. Over time, the pigment gradually fades due to natural skin regeneration and environmental exposure. This allows adjustments to be made as trends, skin tone, or client preferences evolve. When performed correctly, SPMU Microblading enhances symmetry, restores sparse or over-plucked brows, and creates structure for clients with little to no natural hair.

HOW SPMU WORKS?

SPMU Microblading works by using a handheld manual tool fitted with ultra-fine, sterile needles arranged in a blade formation. These needles create precise, hair-like incisions in the epidermal layer of the skin. Pigment is then carefully deposited into these tiny strokes, replicating the natural direction, flow, and pattern of eyebrow hair growth.

TOPS UPS & REMOVALS?

SPMU results typically last 1-3 years, with top-up sessions recommended 6-12 weeks after the initial treatment and then annually or as needed; removal or correction can be achieved using pigment lightening techniques such as laser removal, saline tattoo removal, or specialised fading solutions performed by a trained professional.

Clients should be informed that SPMU pigments can naturally change over time due to factors such as sun exposure, skin type, lifestyle, and the body's natural pigment absorption. Colours may fade, lighten, or shift slightly, which can alter the original appearance of eyebrows or lip blush. For this reason, it is normal for clients to require touch-ups or, in some cases, removal in the future to maintain or adjust their desired look. Setting this expectation during the consultation ensures clients understand the longevity of their treatment and the potential need for corrective procedures.

OVERVIEW OF THE SKIN

The skin is the body's largest organ, serving as the first line of defence against environmental damage, pathogens, and dehydration. Understanding its structure and function is essential for performing safe and effective Semi Permanent Makeup treatments.

THE SKIN HAS THREE MAIN LAYERS, EACH WITH DISTINCT ROLES:

1 EPIDERMIS

- Outermost layer of the skin.
- Provides a protective barrier and is responsible for skin renewal through cellular turnover.

COMPOSED PRIMARILY OF KERATINOCYTES, ARRANGED IN SEVERAL SUB-LAYERS:

STRATUM CORNEUM	→	Outermost layer of dead cells (corneocytes) that protect against pathogens and moisture loss.
STRATUM LUCIDUM	→	Found only in thick skin (palms, soles).
STRATUM GRANULOSUM	→	Cells begin keratinization (hardening process).
STRATUM SPINOSUM	→	Provides strength and flexibility.
STRATUM BASALE (GERMINATIVUM)	→	Deepest layer where new cells are produced.

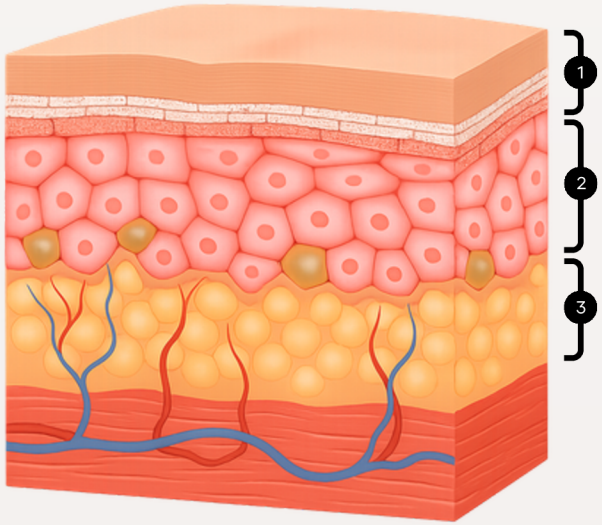
- Melanocytes within the basal layer produce melanin, which determines skin colour and provides UV protection.

2 DERMIS

- Lies beneath the epidermis and is composed of connective tissue.
- Provides strength, elasticity, and nourishment to the skin.

CONTAINS

COLLAGEN AND ELASTIN FIBERS	→	Responsible for firmness and elasticity.
BLOOD VESSELS	→	Deliver oxygen and nutrients, assist in thermoregulation.
NERVE ENDINGS	→	Allow sensations such as touch, temperature, and pain.
SEBACEOUS AND SWEAT GLANDS	→	Regulate moisture and temperature.
HAIR FOLLICLES	→	Anchor hair and play a role in oil distribution.



3 SUBCUTANEOUS LAYER (HYPODERMIS)

- Made up of fat cells (adipose tissue) and connective tissue.
- Acts as insulation and cushioning, protecting underlying organs and bones.
- Provides a reserve of energy and helps anchor the skin to deeper structures.

ANATOMICAL AREAS - THE BROWS

Eyebrows are composed of hair follicles embedded in the dermis, overlying a thin layer of skin and underlying muscles such as the frontalis, corrugator, and orbicularis oculi, which influence brow movement and expression.

Understanding the natural brow shape, hair direction, density, and the bony structure beneath is essential for designing symmetrical, realistic results.
Proper knowledge of eyebrow anatomy helps ensure precise pigment placement, creates natural-looking strokes, and reduces the risk of trauma or uneven fading.

MUSCLE MOVEMENT

SEVERAL FACIAL MUSCLES INFLUENCE BROW MOVEMENT AND POSITIONING:

- Frontalis – elevates the brows.
- Orbicularis oculi – surrounds the eye and affects brow compression.
- Corrugator supercilii – draws the brows inward and downward (frowning motion).

Artists must account for muscle movement when mapping to ensure symmetry both at rest and during expression.

BONE STRUCTURE

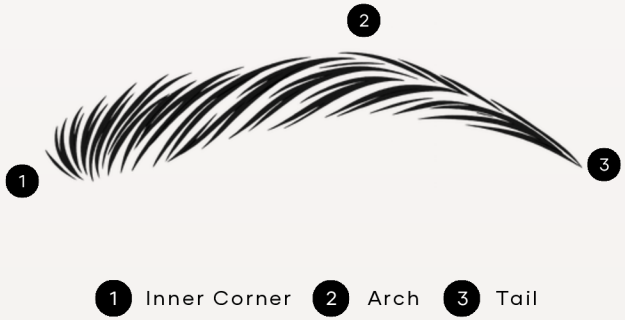
The supraorbital ridge (brow bone) provides structural support and influences brow projection.
Brow shape should complement the client's bone structure rather than conflict with it.

HAIR GROWTH PATTERNS

NATURAL BROW HAIR DOES NOT GROW IN ONE UNIFORM DIRECTION.
UNDERSTANDING FLOW PATTERNS IS ESSENTIAL FOR REALISTIC STROKE PLACEMENT.

- Head: Mostly vertical or slightly angled upward.
- Upper Body: Diagonal and outward.
- Lower Body: More horizontal.
- Tail: Horizontal to downward.

Correct stroke direction creates dimension and realism. Incorrect placement results in an artificial appearance.



WHY BROW ANATOMY MATTERS?

A strong understanding of brow anatomy allows the artist to:

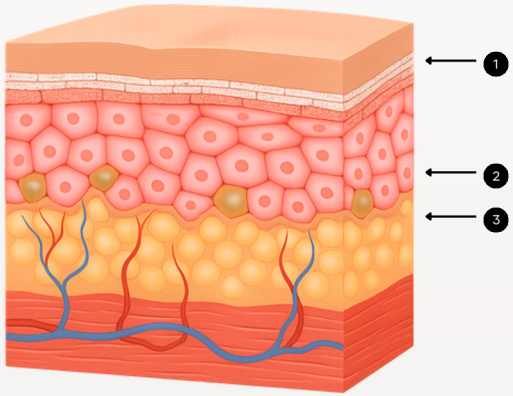
- Create balanced, symmetrical brows
- Respect natural hair flow
- Avoid overworking delicate skin
- Improve pigment retention
- Minimise trauma and complications
- Customise shape to each client's unique facial structure

An SPMU artist is not simply drawing brows - they are enhancing facial architecture.
Brow anatomy knowledge transforms technique into artistry and ensures consistently safe, professional results.

SKIN DEPTH

Correct skin depth is one of the most important technical foundations in SPMU Microblading. Because this treatment is performed manually using a handheld blade (rather than a machine), the artist has full control over pressure, angle, and implantation depth. This means results rely entirely on the technician's understanding of skin anatomy and precision. Implanting pigment at the correct depth ensures crisp healed strokes, strong retention, and healthy skin recovery. Incorrect depth can result in poor retention, blurred strokes, scarring, or pigment migration.

THE SKIN HAS THREE PRIMARY LAYERS RELEVANT TO MICROPIGMENTATION:



1 EPIDERMIS

The outermost layer of the skin. It acts as a protective barrier and sheds continuously through natural cell turnover. If pigment is implanted only in the epidermis, it will fade quickly - often within a few weeks.

2 BASAL LAYER

The dermis lies beneath the epidermis and contains collagen, elastin, blood vessels, and nerve endings. This layer is stable and does not shed like the epidermis. Proper pigment retention occurs here.

3 UPPER DERMIS

The deepest layer, composed mainly of fat and connective tissue. Microblading should never reach this layer. Implanting pigment too deeply increases the risk of scarring and migration.

CORRECT DEPTH IN MICROBLADING?

In microblading, pigment should be placed in the upper papillary dermis, just beneath the epidermis. This depth allows for:

- Crisp, defined healed strokes
- Balanced pigment retention
- Minimal trauma to the skin
- Gradual, natural fading over time

Microblading is a superficial cosmetic tattoo - not a deep implantation procedure.

DEPTH IS CONTROLLED BY:

- Pressure consistency
- Blade angle
- Stroke speed
- Skin tension

FACTORS THAT INFLUENCE DEPTH?

SKIN TYPE

- Thin or mature skin: Requires lighter pressure and extra caution
- Thick skin: May need slightly firmer control
- Oily or sebaceous skin: Can be more resistant; overworking must be avoided

BLADE ANGLE

The blade should generally be held around a 45-degree angle to the skin to ensure consistent, shallow implantation.

STRETCH & HAND CONTROL

Proper three-point skin stretching is essential. Without adequate stretch, strokes may appear uneven or too deep.

NEEDLES AND HANDLES

In SPMU Microblading, the needle and handle are extensions of the artist's hand. Unlike machine-based cosmetic tattooing, microblading relies entirely on manual precision. The configuration of the blade, its sharpness, flexibility, and how it is held all directly affect stroke quality, pigment implantation, and healed results. Understanding your tools is essential for safe, controlled, and professional work.

MICROBLADING NEEDLES

U-SHAPE BLADE

- Curved formation
- Ideal for creating soft, natural hair strokes
- Follows the curve of the brow more easily
- Beginner-friendly for flow and movement

CURFLAT (STRAIGHT) BLADE

- Straight alignment of needles
- Creates crisp, defined strokes
- Often used for sharper detailing

NANO BLADES (ULTRA-FINE)

- Very thin needles
- Designed for fine, delicate strokes
- Ideal for thin or mature skin
- Require advanced precision

NEEDLE COUNT?

Blades are available in various needle counts (e.g., 9, 12, 14, 18 pins).

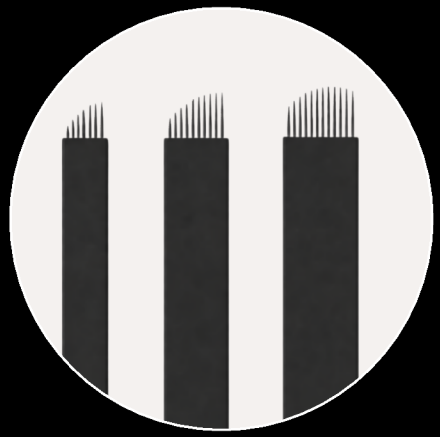
Lower pin count → Thinner, more precise strokes
Higher pin count → Slightly bolder strokes

NEEDLE DIAMETER & QUALITY

Professional SPMU Microblading blades are manufactured in different diameters, commonly:

- 0.16 mm
- 0.18 mm
- 0.20 mm

Smaller diameters create finer strokes and less trauma. Larger diameters may deposit more pigment but require greater control.



MICROBLADING HANDLES:

The handle (also known as a manual pen) holds the blade securely and allows controlled movement.

REUSABLE HANDLES

- Made from stainless steel or aluminium
- Must be fully sterilised in an autoclave after each use
- Used with disposable sterile blades

DISPOSABLE HANDLES

- Pre-sterilised and single-use
- Eliminates cross-contamination risk
- Convenient and hygienic

INORGANIC VS ORGANIC PIGMENTS IN SPMU

Pigment selection is one of the most important factors in achieving natural, long-lasting SPMU results. Pigments are broadly classified into inorganic and organic types. Understanding the differences is essential for colour stability, skin safety, and overall treatment outcome. Both inorganic and organic pigments have distinct advantages and considerations. Understanding their properties allows SPMU practitioners to select the most appropriate pigment for each treatment area, ensuring safe, natural, and long-lasting results.

INORGANIC PIGMENTS

DESCRIPTION

- Mineral-based pigments, often containing iron oxides or titanium dioxide.
- Commonly used in eyebrows and eyeliner due to stability.

CHARACTERISTICS

- Long-lasting: Very stable; less prone to fading or colour changes.
- Colour stability: Maintain natural tones over time; minimal risk of undertone shifts.
- Opacity: Typically more opaque, providing stronger coverage.
- Safety: Generally safe, low allergenic potential, suitable for sensitive skin.

CONSIDERATIONS

- May appear slightly darker during healing and lighten over time.
- Less vibrant for lip blush; sometimes requires blending with organic pigments for softer tones.

ORGANIC PIGMENTS

DESCRIPTION

- Carbon-based pigments, often derived from plant extracts or synthetic compounds.
- Commonly used in lip blush and some soft shading techniques.

CHARACTERISTICS

- Vibrant colour: Provides bright, soft, and natural-looking tones.
- Fades faster: More prone to fading or undertone shifts over time.
- Transparency: Softer coverage; ideal for blending and gradual effects.
- Allergenic potential: Slightly higher risk of reactions in sensitive clients; patch testing recommended.

CONSIDERATIONS

- May change colour over Choosing the Right Pigment
- Eyebrows: Inorganic pigments preferred for hair strokes and longevity.
- Lips: Organic pigments are often chosen for their soft, natural blush and vibrant colour.
- Eyeliner: Inorganic pigments preferred for precision, stability, and longevity.

OTHER FACTORS

- Skin type and Fitzpatrick scale
- Desired effect (natural vs bold)
- Healing response

PRODUCTS NEEDED

- Pigments
- Blades
- Handles
- Clinisept
- Numbing Cream
- Cotton Pads
- Clingfilm
- Powder
- Concealer
- Mapping Brushes
- Mapping String
- Lip Brushes
- Cottons Buds
- Mirrors
- Marker Pencils
- Balms or Glosses for Lips
- Pigment mixing cups
- Measuring Tools
- PPE

PRE/POST ADVICE

PRE-TREATMENT ADVICE

CLIENTS SHOULD FOLLOW THESE GUIDELINES TO ENSURE OPTIMAL RESULTS AND REDUCE RISKS:

- Avoid alcohol, caffeine, and blood-thinning medications (e.g., aspirin) 24 hours before treatment, unless medically advised.
- Do not take new skincare treatments (chemical peels, retinol, or laser treatments) on the treatment area within 2 weeks.
- Avoid sunburn or tanning prior to treatment.
- Do not pluck, wax, or tint brows at least 3-5 days before the appointment.
- Patch test if prone to allergies or using new pigments.
- Ensure the skin is clean and free of makeup or lotions.
- Inform the practitioner of any medical conditions, medications, or pregnancy.

POST-TREATMENT ADVICE

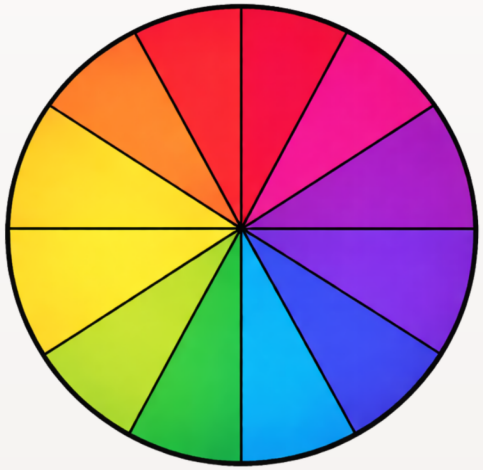
PROPER AFTERCARE IS CRUCIAL FOR HEALING, PIGMENT RETENTION, AND AVOIDING INFECTIONS:

- Do not touch or pick at scabs; allow natural healing.
- Keep the area clean and dry for the first few days; use only recommended aftercare products.
- Avoid swimming, saunas, and excessive sweating for at least 7-10 days.
- Avoid direct sun exposure and tanning beds; use SPF once healed.
- Do not use exfoliating products or harsh chemicals on the area until fully healed.
- Expect some fading during the healing process; a top-up session may be required 6-12 weeks later.
- Follow aftercare instructions closely and contact the practitioner if signs of infection or unusual reactions occur.

COLOUR THEORY

Colour theory is a fundamental part of SPMU, as it ensures that pigments are selected and applied to create natural, flattering results. Proper understanding of undertones, skin tones, and pigment behaviour is essential for microblading treatments.

SKIN UNDERTONES AND PIGMENT SELECTION



1 SKIN UNDERTONES

- Cool: Pink, red, or bluish undertones.
- Warm: Yellow, golden, or peachy undertones.
- Neutral: A balanced mix of warm and cool tones.

2 PIGMENT SELECTION

- Pigments should complement the client's natural undertone to avoid unnatural results.
- Eyebrows: Avoid pigments that are too warm for cool undertones (may appear orange) or too cool for warm undertones (may appear grey).

PRIMARY AND SECONDARY COLOURS

- Primary colours: Red, yellow, and blue – used as a base for mixing pigments.
- Secondary colours: Green, orange, and purple – created by mixing primary colours.
- Understanding colour mixing allows practitioners to correct unwanted undertones, such as neutralising overly warm or cool pigments during treatment.

PRACTICAL CONSIDERATIONS

- Natural appearance: Always match pigments with natural hair and skin tones.
- Lighting: Always assess colours in natural light to avoid misjudging tone.
- Healing changes: Pigments often heal 30-50% lighter than applied; adjust initial colour choice accordingly.
- Mixing and storage: Use high-quality, compatible pigments; mix carefully to avoid contamination.

FITZPATRICK SKIN TYPE SCALE

The Fitzpatrick Scale is a globally recognised classification system that identifies skin types based on their natural pigmentation and response to UV exposure. In SPMU, understanding a client's Fitzpatrick skin type is essential for pigment selection, machine settings, needle depth, and predicting healing and pigment retention.

PRACTICAL APPLICATION IN SPMU

PIGMENT SELECTION

- Fair skin may require softer, cooler pigments to avoid overly warm results.
- Darker skin may need richer pigments to maintain visibility and vibrancy.

BLADE & PRESSURE SETTINGS

- Lighter skin may require shallower blade depth.
- Darker, thicker skin may require slightly deeper pigment placement.

HEALING AND RETENTION

- Fairer skin tends to show fading faster; may require earlier top-ups.
- Darker skin retains pigment longer but can show undertone shifts (e.g., ashy or blue tones) if pigment selection is incorrect.

CONSULTATION

- Always assess the client's Fitzpatrick skin type before treatment.
- Consider medical history, skin sensitivity, and lifestyle factors in combination with skin type for optimal results.

The Fitzpatrick Scale is a critical tool for professional SPMU practitioners. Correct assessment ensures safe, effective, and natural-looking treatments, reduces the risk of pigment complications, and helps predict healing outcomes and long-term retention.

TYPE I

DESCRIPTION
Very fair, often with freckles
REACTION TO SUN
Always burns, never tans

TYPE II

DESCRIPTION
Fair
REACTION TO SUN
Usually burns, minimal tan

TYPE IV

DESCRIPTION
Olive
REACTION TO SUN
Rarely burns, tans easily

TYPE III

DESCRIPTION
Medium
REACTION TO SUN
Sometimes burns, tans gradually

TYPE V

DESCRIPTION
Brown
REACTION TO SUN
Very rarely burns, tans deeply

TYPE VI

DESCRIPTION
Dark brown/black
REACTION TO SUN
Never burns, deeply pigmented

MICROBLADING MAPPING

THREE KEY MAPPING POINTS:

1 START POINT (HEAD OF THE BROW)

- Align vertically from the outer edge of the nostril (ala) upward.
- This determines where the brow should begin.
- Starting too close narrows the nose.
- Starting too wide creates imbalance.

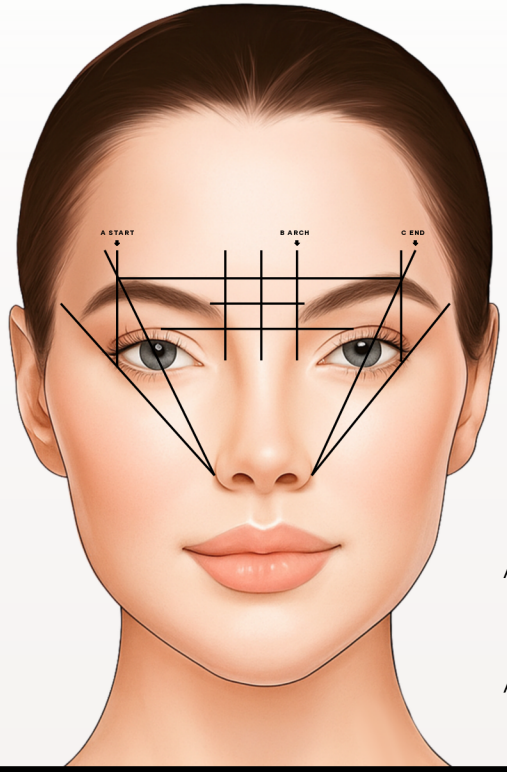
2 ARCH POINT (HIGHEST PEAK)

- Measure from the outer edge of the nostril through the centre of the pupil.
- This determines the ideal lift point.
- Arch placement influences facial expression (lifted, soft, dramatic, etc.).

3 TAIL END POINT

- Measure from the outer edge of the nostril to the outer corner of the eye.
- This sets the correct length of the brow.
- Overextending the tail can drag the face downward.

These points provide structural guidance, but adjustments must always be made based on the client's natural brow growth and bone structure.



A START

Vertical line from the outer corner of the eye to the arch.

B ARCH

Angled line from the side of the nostril to the start of the brow

C END

Angled line from the side of the nostril to the arch of the brow

MAPPING TECHNIQUES:

STRING MAPPING (PRE-INKED THREAD)

A highly accurate technique using pigment-coated thread to create straight reference lines across the face. This method improves symmetry and helps align both brows evenly.

CALLIPERS/MEASURING TOOLS

Used to measure equal distances on both sides of the face to ensure proportional balance.

FREEHAND REFINEMENT

After structural lines are placed, the brow is refined manually to complement the client's natural hair growth and facial anatomy.

CLIENT APPROVAL PROCESS:

BEFORE BEGINNING MICROBLADING

- Sit the client upright.
- Show them the mapped outline in natural lighting.
- Make any necessary adjustments.
- Ensure full approval before proceeding.

This step prevents misunderstandings and builds client trust.

CREATING HAIR-STROKES

THE FOUR KEY ELEMENTS OF PERFECT HAIR-STROKES:

1 STRETCH

Proper three-point skin stretching is essential. Without firm tension:

- Strokes may skip
- Depth becomes inconsistent
- Lines appear shaky or blurred

2 ANGLE

- The blade should typically be held at approximately 45 degrees.
- Incorrect angle can cause shallow implantation or excessive trauma.

3 PRESSURE

- Use controlled, even pressure.
- Do not push - guide the blade gently through the skin.

4 SPEED

- Work slowly and deliberately.
- Rushed strokes often become uneven or too deep.

STROKE PATTERNS:

FRONT (HEAD) STROKES

- Light, airy, and slightly spaced
- Follow upward or soft diagonal direction
- Avoid heavy “boxy” beginnings

BODY STROKES

- Begin creating density
- Follow natural outward flow
- Maintain consistent curvature

ARCH STROKES

- Slightly more defined
- Blend upper and lower flow patterns
- Avoid crossing strokes excessively

TAIL STROKES

- Finer and more compact
- Follow a tapered direction
- Keep strokes narrow and controlled

SPACING & LAYERING:

Microblading is not about filling every gap. Negative space creates realism.

- Leave small gaps between strokes.
- Avoid overlapping excessively.
- Build density gradually.
- Step back frequently to assess balance.

Overcrowded strokes heal blurred and heavy.

HEALING PROCESS

The healing process in SPMU occurs as the skin repairs itself after pigment has been implanted into the upper dermis. Immediately after treatment, the area may appear darker, slightly swollen, and red due to mild trauma to the skin. Over the first few days, the skin begins to regenerate, and light scabbing or flaking may occur as the epidermis sheds excess pigment.

During healing, pigments can appear 30-50% darker initially, then lighten as the skin renews itself. Some colour loss is normal, as only pigment correctly placed in the upper dermis will remain. Over the following weeks, the colour softens and stabilises as the skin fully heals, typically within 4-6 weeks. This is why a top-up session is recommended—to reinforce pigment, correct any uneven retention, and perfect the final result. Proper aftercare and correct implantation depth are essential to ensure even healing, good colour retention, and long-lasting results.

DAY 1 - FRESH TREATMENT (IMMEDIATELY AFTER)

- Area appears darker, bolder, and more defined
- Mild redness and swelling is normal
- Pigment sits sharply in the skin due to open channels

DAYS 2-3 - INITIAL HEALING

- Colour remains dark and may look intense
- Tightness, tenderness, and dryness may occur
- Light scabbing or flaking can begin

DAYS 4-7 - FLAKING & SHEDDING

- Skin begins to flake or lightly scab
- Pigment may appear to fade significantly as flakes shed
- Itching is common (must not be scratched)

DAYS 8-14 - GHOSTING PHASE

- Pigment may appear very light or almost invisible
- This is due to new skin forming over the pigment
- Clients often worry at this stage — reassurance is important

WEEKS 3-4 - COLOUR RE-EMERGENCE

- Pigment gradually resurfaces as skin settles
- Colour becomes more even and natural
- Shape and tone are now clearer

WEEKS 4-6 - FULLY HEALED

- Final colour is visible (usually 30-50% lighter than day one)
- Ready for top-up session if required

SKIN
EST 2019

AESTHETICS
& ACADEMY