

Exhibit E
Tattoo Removal Application and Consent

Forms on following pages



**Ventura County Sheriff's Office
Detention Services Division**

Tattoo Removal Program Application



**All areas must be filled in completely.
Please allow a minimum of 14 days from submission for approval.**

INMATE'S INFORMATION

Last Name

First Name

Middle Name

Booking Number _____

Date of Birth ____/____/____
Month Day Year

Reason for requesting Tattoo Removal: _____

How did you hear about the Tattoo Removal program: _____

TATTOO INFORMATION

Description and Location of Tattoos: _____

GANG INFORMATION

Name of Gang: _____

Moniker: _____

Age When First Joined: _____

Currently active in a gang? _____

Reason for Joining: _____

Why did you leave the gang? _____

MEDICAL CAPTAIN APPROVAL

Inmate Tattoo Removal Request:

☐ APPROVED

☐ DENIED

Captain's Signature: _____

Date: _____

Original to inmate's booking jacket

Copy to Inmate

Copy to Inmate Medical Record

(Rev.06/2023)



**Ventura County Sheriff's Office
Detention Services Division**

Tattoo Removal Program Informed Consent



Inmate's Name: _____

Booking #: _____

I, _____ consent to and authorize California Forensic Medical Group and members of their staff to perform multiple treatments, laser procedures and related services on me. The procedure planned uses laser technology for the removal of tattoos.

As a patient you have the right to be informed about your treatment so that you may make the decision whether to proceed for laser tattoo removal or decline after knowing the risks involved. This disclosure is to help to inform you prior to your consent for treatment about the risks, side effects and possible complications related to laser tattoo removal:

- Acceptance into the Tattoo Removal Program is voluntary, and participation is based on compliance with all the terms and conditions of the Program.
- The Ventura County Sheriff's Office in no way guarantees the effectiveness of any treatments provided by California Forensic Medical Group.
- The possible risks of the procedure include but are not limited to pain, purpura, swelling, redness, bruising, blistering, crusting/scab formation, ingrown hairs, infection, and unforeseen complications which can last up to many months, years, or permanently.
- There is a risk of scarring.
- Short term effects may include reddening, mild burning, temporary bruising, or blistering. A brownish/red darkening of the skin (known as hyperpigmentation) or lightening of the skin (known as hypopigmentation) may occur. This usually resolves in weeks, but it can take up to 6 months to heal. Permanent color change is a rare risk. Loss of freckles or pigmented lesions can occur.
- Textual and/or color changes in the skin can occur and can be permanent. Many of the cosmetic tattoos and body tattoos are made with iron oxide pigments. Iron oxide can turn red-brown or black. Titanium oxide and other pigments may also turn black. This black or dark color may be un-removable. Because of the immediate whitening of the exposed treated area by the laser, there can be a temporary obscuring of ink, which can make it difficult or impossible to notice a specific color change from the tattoo removal process.
- Infection: Although infection following treatment is unusual, bacterial, fungal, and viral infections can occur. Herpes simplex virus infections around the mouth can occur following a treatment. This applies to both individuals with a past history of herpes simplex virus infections and individuals with no known history of herpes simplex virus infections in the mouth area. Should any type of skin infection occur, additional treatments or medical antibiotics may be necessary.
- Bleeding: Pinpoint bleeding is rare but can occur following treatment procedures. Should bleeding occur, additional treatment may be necessary.
- Allergic Reactions: There have been reports of hypersensitivity to the various tattoo pigments during the tattoo removal process especially if the tattoo pigment contained Mercury, cobalt, or chromium. Upon dissemination, the pigments can induce a severe allergic reaction that can occur with each successive treatment. Noted in some patients are superficial erosions, bruising, blistering, milia, redness and swelling which can last up to many months, years or permanently.
- Compliance with the aftercare guidelines is crucial for healing, prevention of scarring, and hyper-pigmentation.

- I understand that multiple treatments will be necessary to achieve desired results. No guarantee, warranty or assurance has been made to me as to the results that may be obtained. Complete tattoo removal is not always possible as tattoos were meant to be permanent.

ACKNOWLEDGEMENT

My questions regarding the procedure have been answered satisfactorily. I understand the procedure and accept the risks.

I hereby release the Ventura County Sheriff's Office, California Forensic Medical Group, and their respective employees from all liabilities associated with the above indicated procedure.

Inmate Signature _____

Date _____

Laser Technician Signature _____

Date _____