

Dauphyne Jewellery - Requirements

1 Add time field near the date field in the create consent form:

extbooks.com/Dauphyne/public/CreateConsent

DAUPHYNE JEWELLERY TRADING LLC

Dashboard

Items

CRM

Consents

Consents List

Create Consent

Appointment

Sales

Purchases

Coupon List

Reports

Staff

Company

POS Setting

Logout

POS

6. I understand that there is a possibility of complications if I do not follow the instructions.

7. I am not under the influence of drugs or alcohol.

8. I understand that the procedure may cause a permanent change to my skin and body image.

9. I do not have any mental disability that may affect my decision making and well-being as a result of having a piercing procedure.

10. I do not have any allergies to latex, metals, and betadine.

If yes, please indicate below:

11. I release the Dauphyne Jewellery and Piercing, its administrators, practitioners, owners and staff from any liabilities and damages.

12. I am of legal age, if not, I have my legal guardian present with me.

I confirm that the information I have given in this consent is complete and accurate.

I voluntarily give my full consent to:

1. Ear and body piercings

2. Jewellery removal or installation

3. Piercing repair

4. Follow-up care

Date: 2025-09-01

Patient Name and Signature: --Select Patient--

Parent/Guardian's Name and Signature: Enter Parent/Guardians Name

Save

Add Signature

Add Signature

2 Add a new field called “Nurse / Piercer”

It will be a dropdown with users on the system, similar to the patients.

Each Nurse will have its saved signature in the system.

The selected nurse will be shown in the print of the consent along with the signature.

6. I understand that there is a possibility of complications if I do not follow the instructions. _____

7. I am not under the influence of drugs or alcohol.

8. I understand that the procedure may cause a permanent change to my skin and body image.

9. I do not have any mental disability that may affect my decision making and well-being as a result of having a piercing procedure.

10. I do not have any allergies to latex, metals, and betadine.

If yes, please indicate below:

11. I release the Dauphine Jewellery and Piercing, its administrators, practitioners, owners and staff from any liabilities and damages.

12. I am of legal age, if not, I have my legal guardian present with _____

I confirm that the information I have given in this consent is complete

I voluntarily give my full consent to:

1. Ear and body piercings
2. Jewellery removal or installation
3. Piercing repair
4. Follow-up care

Date: _____

Patient Name and Signature: _____

Parent/Guardian's Name and Signature: _____

Nurse / Piercer

3 Add a new field called "Witness"

It will be a dropdown with users on the system, similar to the nurse.

Each user will have its saved signature in the system.

The name of the selected witness user will be shown in the print of the consent along with the signature.

4 Full Name + File Number (must be showing in search box and Consent Form)

5 Add the field for Age in the Create and Edit Party pages

The field labels marked with * are required input fields.

Location --Select Location--	File Number File Number 1
First Name* First Name	Last Name Last Name
Email example@example.com	Phone Number * Mobile Number
Residency --Select One--	Marital Status --Select One--
Gender <input type="radio"/> Male <input type="radio"/> Female	Date of Birth dd/mm/yyyy
Active <input checked="" type="radio"/> Yes <input type="radio"/> No	Emirates Id Number Emirates Id Number
Nationality/Country --Select One--	Address
Passport Number Passport Number	

ADD NEW FIELD FOR AGE

Keep the Emirates ID field.

The Age should be calculated automatically, like the File Number.

6 Update the consent PDF file with the given updated PDF file