ITEC Unit 13 Facial Electrical Treatments
Evidence of Treatments Guidance Form

Evidence of treating 5 clients using a minimum of 2 suitable facial electrical treatments per client. Learners should cover the full range of equipment throughout their treatments

To be completed by the lecturer and verified by the ITEC examiner
Please attach a copy of this sheet to the front of each learner's completed evidence of treatments.

Learner Name:

Learner Number:

Centre Name:

Date:

Please tick box	Yes	No
Consultation		
Medical History		
Treatment Details		
Client Feedback		
After and Home care advice		
Have all treatments been completed?		

Please note; each box must be ticked 'Yes' in order to gain a pass grade. If any area is answered 'No' the evidence of treatments will be referred until the omitted section is completed.

Signed by the ITEC Examiner ***Signed by the Lecturer***

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Signed by the Learner

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