It is estimated that 30% of Americans have at least one tattoo.\(^1\) As skin specialists, dermatologists can play a vital role in helping patients obtain, maintain, and remove tattoos. Herein, I will review several practical tips for the general dermatologist.

**Tattoos are a form of personal expression.**
While tattoos have historically had a negative association in our society, this is changing. Tattoos are a form of self-expression, and they allow individuals to modify their appearance. These motivations may not be dissimilar from patients who undergo dermatologic cosmetic procedures. Although we may not want tattoos others have chosen, we can objectively appreciate the meaning they may have to that individual.

**Do not be afraid to ask patients about their tattoos.**
Tattoos can have tremendous emotional and personal meaning. Patients with tattoos are often excited to talk about the motivation, significance, and the process of acquiring their tattoo. Asking patients about their tattoos can provide small talk during a skin check. It is also a way to develop rapport with patients. Individuals may be afraid to discuss tattoos lest their physician judge them. Acknowledging and complementing a tattoo can create an open dialogue.

**Ask where their tattoos were placed.**
Not all tattoos have been placed in a tattoo parlor. In one study, 17.6% of individuals admitted to having a tattoo placed somewhere other than a parlor, such as at party or an individual’s home.\(^2\) In these settings, proper technique may not have been followed and needles may have been reused. For these individuals, a discussion focused on whether testing for blood borne infections such as HIV and hepatitis C may be needed.

**Ask patients if they plan to get more tattoos.**
When discussing tattoos with patients, inquiring about plans for additional tattoos may be clinically relevant. If additional tattoos are expected in the future, encourage patients to avoid new tattoos over nevi, confirm that their tattoo is placed in a licensed parlor, and recommend they avoid future tattoos if they have a history of a koebnerizing inflammatory disease. Finally, remind patients that as skin specialists, we are trained to manage acute and chronic tattoo complications.
**Ask patients if their tattoo is symptomatic.**
When it comes to tattoo complications, dermatologists may think of acutely infected tattoos, contact dermatitis to pigments, granulomatous reactions, and reactive keratoacanthomas. However, it is important to recognize it is not uncommon for tattoos to chronically hurt or itch months to years after placement. When a pathological cause cannot be identified, it is helpful to reassure patients that dysesthesia of tattooed skin is a known and not uncommon sequela.

**Remember to discuss sunscreen.**
Patients may not be aware that sun exposure can cause tattoo pigments to fade. Among tattooed patients, remind them that diligent photoprotection may not only help protect against skin cancer, it may also help maintain the vibrancy of their tattoos.

**If you remove tattoos, let your patients know.**
Patients do not always tell us what they are thinking. Much as we cannot expect all patients to tell us if they want fillers or toxins, we cannot assume a patient who wants a tattoo removed will ask us about the procedure. When discussing tattoos with a patient, it is okay to let them know if you or a colleague performs tattoo removal.
References
