UBT446

Enhance appearance using scalp micropigmentation techniques

ASSIGNMENT 2

Hair and hair-loss assessment

Student name	
Tutor	
Date issued	
Date completed	

Aim

To demonstrate knowledge of hair characteristics, hair-loss patterns, classification systems, hairline terminology and assessment methods, and apply this knowledge to safe and realistic SMP planning.

Instructions

Complete all sections. Task 1: match each term with one numbered description. Task 2: answer all written questions in your own words. Task 3: select one answer for each of the 50 questions. No images are required. Use additional pages if needed and identify the question number.

Describe findings within your competence; do not diagnose or prescribe. Follow current centre protocols, product instructions, insurance and applicable requirements.

Student signature _____

Date _____

Task 1 - Match the terms with the descriptions

1. Hair characteristics

Write the correct description number beside each term. Use each number once.

Term	Answer
A. Hair type	____
B. Hair colour	____
C. Hair shaft thickness	____
D. Visible shaved-hair impression size	____
E. Existing hair density	____
F. Hair distribution	____
G. Growth pattern	____

Descriptions

1. The amount of remaining hair present within a measured or observed area.

2. The way remaining hair is positioned across the frontal, temporal, vertex, crown and occipital areas.

3. The natural angle, direction and arrangement in which the existing hair emerges.

4. The diameter of an individual hair shaft, considered when replicating the appearance of existing hair.

5. The apparent size of shaved hair ends or follicular shadows used as a visual reference for SMP impressions; this is not a measurement of the anatomical follicle.

6. The natural form of existing hair, such as straight, wavy or curly, considered when planning visual integration.

7. The visible shade and lightness or darkness of the natural or remaining hair.

Task 1 - Match the terms with the descriptions

2. Hair-loss assessment

Write the correct description number beside each term. Use each number once.

Term	Answer
A. Timescale	____
B. Pattern	____
C. Areas affected	____
D. Personal history	____
E. Family history	____
F. Shedding	____
G. Thinning	____
H. Normal hair-care routine	____

Descriptions

1. Identifies how the loss is arranged and whether it follows a recognisable distribution.
2. Records the client's own previous episodes, changes and experience of hair loss.
3. Identifies the specific scalp regions in which recession or reduced coverage is present.
4. Records when the change first became noticeable and how long it has been present.
5. Identifies increased release of hairs rather than only a reduction in strand diameter.
6. Describes a reduction in visible coverage caused by fewer or finer hairs.
7. Establishes whether similar loss has affected biologically related family members.
8. Establishes the client's usual washing, products, chemical procedures and styling practices.

Task 1 - Match the terms with the descriptions

3. Factors that may contribute to hair loss

Write the correct description number beside each term. Use each number once.

Term	Answer
A. Hereditary factors	____
B. Endocrine or hormonal factors	____
C. Autoimmune disorders	____
D. Inflammatory disorders	____
E. Medication-related factors	____
F. Dietary habits	____
G. Repeated traction	____
H. Postpartum changes	____

Descriptions

1. Repeated pulling from tight hairstyles, braids or extensions may progressively affect vulnerable areas.
2. Excessive dieting, fasting or nutritional imbalance may affect normal hair production.
3. A prescribed or non-prescribed product may initiate or worsen loss as an adverse effect.
4. Changes in internal chemical signalling may alter the normal growth and replacement of hair.
5. Genetic predisposition and family pattern may increase the likelihood of a recognisable form of loss.
6. The body's defence system mistakenly targets structures associated with hair growth.
7. Changes following childbirth may cause a temporary increase in diffuse shedding.
8. Ongoing inflammation around follicles may affect growth and, in some conditions, cause permanent damage.

Task 1 - Match the terms with the descriptions

4. Hair-loss conditions I

Write the correct description number beside each term. Use each number once.

Term	Answer
A. Androgenetic alopecia	____
B. Alopecia areata	____
C. Diffuse alopecia areata	____
D. Alopecia totalis	____
E. Alopecia universalis	____
F. Ophiasis alopecia	____

Descriptions

1. Complete loss affecting the scalp while hair elsewhere on the body may remain.

2. A band-like distribution affecting the temporal, occipital and peripheral margins of the scalp.

3. Widespread reduction across the scalp associated with alopecia areata but without the usual clearly defined patches.

4. Localised, usually well-defined areas of non-scarring loss caused by an autoimmune process.

5. A genetically influenced patterned reduction that commonly affects the frontal, temporal or vertex regions in men and the upper scalp in women.

6. Complete or near-complete loss affecting both scalp and body hair.

Task 1 - Match the terms with the descriptions

5. Hair-loss conditions II

Write the correct description number beside each term. Use each number once.

Term	Answer
A. Telogen effluvium	____
B. Traction alopecia	____
C. Postpartum alopecia	____
D. Alopecia barbae	____
E. Lichen planopilaris	____

Descriptions

1. Increased shedding after childbirth, commonly a postpartum form of telogen effluvium following a change in the hair-growth cycle.

2. Loss associated with repeated tension, commonly affecting areas exposed to pulling from hairstyles.

3. An inflammatory scarring condition that may show perifollicular redness, scale, symptoms and loss of follicular openings.

4. Diffuse shedding following a shift of increased numbers of hairs into the telogen phase, usually becoming noticeable after a delay following a trigger.

5. Localised alopecia areata affecting the beard area.

Task 1 - Match the terms with the descriptions

6. Hair-loss classification systems

Write the correct description number beside each term. Use each number once.

Term	Answer
A. Hamilton-Norwood scale	____
B. Ludwig scale	____
C. Savin scale	____
D. Sinclair scale	____

Descriptions

1. A three-stage system used for progressive female thinning across the upper scalp, usually with relative preservation of the frontal border.

2. A detailed photographic female-density system containing progressive crown-density images and a separate representation of frontal recession.

3. A five-grade photographic system based mainly on widening of the central part and increasing reduction across the upper scalp.

4. A seven-stage system used to record progressive male frontal, temporal and vertex pattern loss.

Task 1 - Match the terms with the descriptions

7. Hairline position and shape

Write the correct description number beside each term. Use each number once.

Term	Answer
A. High hairline	____
B. Middle hairline	____
C. Low hairline	____
D. Widow's peak	____
E. Triangular hairline	____
F. Bell-shaped hairline	____
G. Straight-lined hairline	____
H. Receding or M-shaped hairline	____

Descriptions

1. A comparatively horizontal frontal boundary with only limited curvature.
2. A frontal position further from the eyebrows, increasing the visible height of the forehead.
3. A rounded central contour transitions through curved sides towards the temporal regions.
4. A balanced position that is neither notably close to nor distant from the eyebrows.
5. A broad triangular frontal projection produces a more geometric central contour.
6. A frontal position closer to the eyebrows, reducing the visible height of the forehead.
7. A narrow and distinct central point extends beyond the surrounding frontal border.
8. Frontotemporal recession leaves the central frontal section positioned further forwards.

Task 1 - Match the terms with the descriptions

8. Hairline edge characteristics

Write the correct description number beside each term. Use each number once.

Term	Answer
A. Broken or jagged	____
B. Lightweight	____
C. Edge-up	____
D. Defined	____
E. Uneven	____
F. Cowlick	____

Descriptions

1. A soft transition begins with low coverage and progressively increases behind the frontal zone.
2. Deliberate variations interrupt the frontal boundary to reproduce natural irregularity.
3. A clearly visible and controlled boundary separates the frontal edge from the forehead.
4. A sharply finished, frequently angular border produces a highly structured appearance.
5. The two sides show noticeable differences in height, contour or recession.
6. A localised directional change or small swirl interrupts the surrounding growth pattern.

Task 1 - Match the terms with the descriptions

9. Hair and scalp assessment methods

Write the correct description number beside each term. Use each number once.

Term	Answer
A. Visual assessment	____
B. Magnifying lamp or glasses	____
C. Dermatoscope	____
D. Densitometer	____
E. Scalp scanner / imaging equipment	____
F. Clinical photography	____
G. Photographs taken before hair loss	____
H. Colour swatches or colour wheel	____

Descriptions

1. Helps establish the previous position, shape and appearance of the client's natural hairline.

2. Supports close examination of scalp surface features, hairs and follicular openings within competence; it does not establish a diagnosis by itself.

3. May provide additional magnified or recorded hair and scalp information; interpretation is limited by the device and the practitioner's competence.

4. Supports comparison of visible hair, skin tone and undertone when planning treatment.

5. Helps estimate the quantity of hair present within a defined area.

6. Provides general observation of colour, density, distribution, hairline and visible scalp condition.

7. Provides a closer illuminated view of selected surface and hair characteristics.

8. Supports standardised documentation and comparison over time, with appropriate permission and secure storage.

Task 2 - Answer the questions

Hair and hair-loss assessment

1. Which hair characteristics should be assessed during an SMP consultation?

2. What is the difference between hair thinning and hair shedding?

3. Why should the practitioner establish the timescale and pattern of the client's hair loss?

Task 2 - Answer the questions

Hair and hair-loss assessment

4. Which areas of the scalp should be assessed, and why is it important to record where the hair loss first became noticeable?

5. Why should the practitioner ask about the client's normal hair-care routine, hair products, styling practices and dietary habits?

6. Why should the client's original, previous and desired hairline be assessed before planning SMP?

Task 2 - Answer the questions

Hair and hair-loss assessment

7. How can hair colour, hair shaft thickness and the visible size of shaved-hair impressions influence an appropriate SMP approach? Explain why visible impression size is different from the anatomical size of a follicle.

8. How should existing hair density, pattern, distribution and direction of growth influence SMP placement?

9. Which classification system is primarily used for male pattern hair loss, and which three systems in this assignment may be used for female pattern hair loss?

Task 2 - Answer the questions

Hair and hair-loss assessment

10. What action should the practitioner take if assessment identifies an abnormal finding or contraindication requiring medical advice?

11. Why should the practitioner ask about personal and family history, medical disorders, hormonal or endocrine factors, autoimmune or inflammatory disorders, medicines and supplements? Explain the limits of the SMP practitioner's role.

12. Why should SMP planning consider natural ageing, possible future hair loss and what is realistically achievable?

Task 3 - Multiple-choice knowledge test

Select one answer for each question.

1. What is the main purpose of assessing existing hair before SMP?

A. To decide whether transplantation is required
B. To diagnose the cause of hair loss
C. To support safe and realistic treatment planning
D. To determine the exact fading time

Answer: _____

2. Which group of visible hair characteristics most directly guides SMP impression size and placement?

A. Length, shampoo and washing frequency
B. Colour, shaft thickness, visible shaved-hair impression size, density and growth pattern
C. Temperature, pain threshold and occupation
D. Style, age and facial expression

Answer: _____

3. Why is the timescale of hair loss important?

A. It shows how the loss developed and whether it may still be changing
B. It establishes Fitzpatrick type
C. It determines the exact number of sessions
D. It confirms a medical diagnosis

Answer: _____

4. Why should family history be discussed?

A. To calculate density
B. To determine undertone
C. To identify camouflage use
D. To recognise possible hereditary influence

Answer: _____

5. Which statement best describes thinning?

A. Reduced visible coverage caused by fewer or finer hairs
B. Complete loss of scalp and body hair
C. Temporary follicular redness
D. Increased scalp oil

Answer: _____

Task 3 - Multiple-choice knowledge test

Select one answer for each question.

6. Why should the normal hair-care routine be discussed?

A. To establish Fitzpatrick type
B. To identify practices or products affecting hair and scalp
C. To establish the medical cause without referral
D. To determine implantation depth

Answer: _____

7. Which history finding may contribute to increased shedding?

A. Use of a wide-toothed comb
B. A short haircut
C. Excessive dieting or fasting
D. A naturally high hairline

Answer: _____

8. Why should medication use be recorded?

A. Medication always prevents SMP
B. Some medicines may cause or worsen hair loss and affect suitability
C. Medication determines growth direction
D. Every medicine requires a patch test

Answer: _____

9. Which factor relates most directly to internal hormone regulation?

A. Hair colouring
B. Endocrine factors
C. Cowlick formation
D. Mechanical friction

Answer: _____

10. Which statement best describes an autoimmune cause of hair loss?

A. Hair becomes lighter with age
B. Hair appears sparse because it is cut short
C. Repeated heat damages the shaft
D. The immune system targets structures associated with hair growth

Answer: _____

Task 3 - Multiple-choice knowledge test

Select one answer for each question.

11. Why are inflammatory scalp disorders relevant to SMP?

A. They affect only hair colour
B. They always cause male pattern loss
C. They permanently prevent every scalp treatment
D. They may affect follicles, healing and treatment suitability

Answer: _____

12. What is the safest action for sudden unexplained loss with abnormal scalp findings?

A. Proceed with lighter pigment
B. Treat only unaffected areas
C. Obtain extra consent and proceed
D. Postpone and recommend appropriate medical assessment

Answer: _____

13. Which condition commonly produces a recognisable patterned reduction?

A. Androgenetic alopecia
B. Alopecia universalis
C. Alopecia totalis
D. Pediculosis capitis

Answer: _____

14. Which condition commonly presents as well-defined non-scarring patches?

A. Lichen planopilaris
B. Androgenetic alopecia
C. Alopecia areata
D. Telogen effluvium

Answer: _____

15. Which description is most consistent with diffuse alopecia areata?

A. Complete scalp and body loss
B. Loss caused only by pulling
C. Widespread reduction without the usual defined patches
D. A linear transplant scar

Answer: _____

Task 3 - Multiple-choice knowledge test

Select one answer for each question.

16. What does alopecia totalis describe?

A. Complete loss of scalp hair
B. A peripheral band of loss
C. Loss limited to the beard
D. Patterned crown thinning

Answer: _____

17. What does alopecia universalis describe?

A. Central-part thinning
B. Complete scalp loss only
C. Loss caused by tight styles
D. Complete or near-complete scalp and body hair loss

Answer: _____

18. Which pattern is characteristic of ophiasis alopecia?

A. Central-part widening
B. Frontotemporal and vertex thinning
C. Band-like temporal and occipital loss
D. Beard-only loss

Answer: _____

19. Which condition affects the beard area?

A. Postpartum alopecia
B. Alopecia barbae
C. Alopecia totalis
D. Telogen effluvium

Answer: _____

20. Which description best matches telogen effluvium?

A. Permanent frontal follicle destruction
B. Androgen-related recession
C. Complete scalp loss caused by alopecia areata
D. Diffuse shedding after increased numbers of hairs have shifted into the telogen phase

Answer: _____

Task 3 - Multiple-choice knowledge test

Select one answer for each question.

21. Which factor is most associated with traction alopecia?

A. Repeated tension from tight styles, braids or extensions
B. A widow's peak
C. A short haircut
D. Normal washing

Answer: _____

22. Which description best matches postpartum alopecia?

A. Male pattern recession after medication
B. A peripheral band of loss
C. Increased shedding after childbirth, commonly postpartum telogen effluvium
D. Permanent scalp and body loss

Answer: _____

23. Which finding is most consistent with lichen planopilaris?

A. Inflammation, perifollicular scale and loss of follicular openings
B. Temporary heat-related breakage
C. Healthy scalp with a high hairline
D. Diffuse shedding without symptoms

Answer: _____

24. What is the main difference between scarring and non-scarring alopecia?

A. Non-scarring loss is always complete
B. Scarring alopecia destroys follicles and replaces them with scar tissue
C. Scarring alopecia affects only men
D. Non-scarring alopecia never needs referral

Answer: _____

25. Which scale is used primarily for male pattern hair loss?

A. Savin
B. Sinclair
C. Ludwig
D. Hamilton-Norwood

Answer: _____

Task 3 - Multiple-choice knowledge test

Select one answer for each question.

26. Which scale divides female pattern hair loss into three principal stages?

A. Ludwig
B. Sinclair
C. Hamilton-Norwood
D. Fitzpatrick

Answer: _____

27. Which system provides detailed female crown-density images and a separate frontal image?

A. Glogau
B. Savin
C. Sinclair
D. Hamilton-Norwood

Answer: _____

28. Which system uses five grades based mainly on central-part widening?

A. Sinclair
B. Ludwig
C. Fitzpatrick
D. Hamilton-Norwood

Answer: _____

29. What is the main purpose of a hair-loss classification system?

A. To confirm the medical cause
B. To record visible pattern and severity consistently
C. To determine undertone
D. To select an exact pigment formula

Answer: _____

30. A man has progressive frontotemporal recession and vertex loss. Which scale applies?

A. Savin
B. Hamilton-Norwood
C. Ludwig
D. Sinclair

Answer: _____

Task 3 - Multiple-choice knowledge test

Select one answer for each question.

31. Which five-grade scale may be used for progressive central-part widening in women?

A. Hamilton-Norwood
B. Sinclair
C. Fitzpatrick
D. Glogau

Answer: _____

32. Why should a classification scale be combined with a full consultation?

A. It determines the result
B. It replaces scalp examination
C. It records visible severity but not every cause or suitability factor
D. It provides a complete diagnosis

Answer: _____

33. Which description best matches a high hairline?

A. Greater density at the frontal edge
B. A narrow central point
C. A sharp angular border
D. Positioned further from the eyebrows with a larger visible forehead

Answer: _____

34. Which feature identifies a widow's peak?

A. A horizontal border
B. A rounded contour
C. Bilateral temporal recession
D. A distinct narrow central point extending forwards

Answer: _____

35. Which description best matches a bell-shaped hairline?

A. A rounded central contour with curved temporal transitions
B. A strongly angular border
C. An irregular broken edge
D. A broad triangular projection

Answer: _____

Task 3 - Multiple-choice knowledge test

Select one answer for each question.

36. Which description best matches a straight-lined hairline?

A. A soft low-density transition
B. A relatively horizontal frontal border with limited curvature
C. A central point
D. A localised swirl

Answer: _____

37. Which feature is most characteristic of an M-shaped hairline?

A. A low central and temporal border
B. A rounded central contour
C. Frontotemporal recession with a more preserved central section
D. A completely even edge

Answer: _____

38. Why is controlled irregularity used in a broken or jagged hairline?

A. To create perfect symmetry
B. To disguise undertone
C. To reproduce believable variation at the frontal edge
D. To lower the hairline

Answer: _____

39. Which description best matches a lightweight hairline?

A. Asymmetry caused by recession
B. A soft edge that gradually increases in density behind the transition
C. A sharp angular border
D. A triangular projection

Answer: _____

40. Which description best matches an edge-up hairline?

A. A rounded contour
B. A low-density irregular transition
C. A sharp, highly defined and often angular border
D. A naturally receding pattern

Answer: _____

Task 3 - Multiple-choice knowledge test

Select one answer for each question.

41. What does an uneven hairline show?

A. Visible asymmetry between the sides
B. Uniform reduction in density
C. Complete temporal loss
D. A central point

Answer: _____

42. What is a cowlick?

A. A localised change of direction or swirl
B. A female classification
C. A scarring alopecia
D. A sharply defined SMP edge

Answer: _____

43. What is meant by the client's original hairline?

A. The template drawn before SMP
B. The result after session one
C. The lowest position requested
D. Its position and shape before significant loss

Answer: _____

44. Why may photographs taken before hair loss be useful?

A. They replace a consultation
B. They prove medical stability
C. They determine needle configuration
D. They help assess the previous natural hairline and pattern

Answer: _____

45. A client requests the very low hairline they had when younger. Which combination should guide planning?

A. A standard practitioner template
B. The lowest acceptable position
C. Age, facial proportions, existing hair and likely progression
D. The old photograph alone

Answer: _____

Task 3 - Multiple-choice knowledge test

Select one answer for each question.

46. Why should hair colour, shaft thickness and visible shaved-hair impression size be considered together?

A. They establish pain threshold
B. They confirm scarring alopecia
C. They guide how simulated shaved-hair impressions integrate with existing hair
D. They establish diagnosis

Answer: _____

47. How should density, distribution and growth direction influence SMP?

A. Placement should adapt to them for a realistic integrated result
B. They should be ignored for full coverage
C. The same uniform pattern should be used
D. They determine Fitzpatrick type

Answer: _____

48. Why should SMP impressions avoid a perfectly repetitive grid?

A. Uniform placement prevents retention
B. Irregular placement removes the need for more sessions
C. A grid always causes allergy
D. Natural follicular distribution contains variation

Answer: _____

49. What may SMP achieve in an area of partial hair loss?

A. Reduce scalp contrast and enhance the appearance of density
B. Replace assessment of remaining hair
C. Prevent future androgenetic loss
D. Restore biological growth

Answer: _____

50. Why must possible future loss be considered during planning?

A. It confirms skin type
B. A current design may become isolated if surrounding hair disappears
C. It guarantees no further treatment
D. It determines healed pigment colour

Answer: _____