

Blue Peel Radiance

It has been explained to me that Blue Peel RADIANCE effectively exfoliates the uppermost damaged skin layers, leaving my skin fresh, renewed, and radiant.

While Blue Peel RADIANCE TM is formulated to be gentle, I understand I may experience a mild burning sensation during the treatment and mild peeling and redness on my journey to revealing fresh, glowing skin.

I certify that all information that I have provided has been accurate and truthful, and I have received and understand post treatment instructions.

INSTRUCTIONS FOR THE PATIENT

Patients should avoid use of the following products and procedures on the area to be peeled for 5 to 7 days prior to the peel:

- Laser hair removal
- Waxing
- Depilatory creams
- Electrolysis

There are certain products that may increase skin sensitivity and/or cause a stronger reaction to the peel if used up to the day of the peel. Patients should avoid use of the following products for the 3 days prior to the peel:

- Topical retinoids and tretinoin (such as Retin-A®, Renova®, Differin®, Tazorac®, and Refissa®)
- Other topical acids or exfoliants that may be drying or irritating to the skin (such as alpha hydroxy acids [AHAs], beta hydroxy acids [BHAs], exfoliating masks, retinols, hydroquinone, & benzoyl peroxide acne products)

CAUTION: Patients who have recently had any medical aesthetic facial treatments or procedures (laser treatment, microdermabrasion, etc) should wait to have any acid-based peel until all lingering skin sensitivity has subsided. Avoid using BHA-containing products on infants and children.



CONTRAINDICATIONS

- Active cold sores, herpes simplex, or warts in the area to be treated
- Wounded, sunburned, or excessively sensitive skin within the application area
- Currently pregnant
- Dermatitis or inflammatory rosacea within the peel application area
- Accutane® use within 12 months prior to the peel application
- History of radiation therapy in the application area
- Allergies to salicylates

POST- PEEL CARE

SUN ALERT: Following use of this product, the patient must use adequate sunscreen protection for at least a week after the peel. Sun exposure can cause the skin to not heal properly and may cause post-inflammatory hyperpigmentation.

Following the peel, the patient's skin may be slightly dry and red for 1-2 days. Mild peeling should start to occur within 48 hours and can last 2-5 days. The patient should not speed the peeling process with any sort of physical exfoliation, but should treat the skin very gently during this time. A mild moisturizer, such as the Obagi Therapeutic Moisturizer or Hydrating Complexion Corrector, may be used to minimize dryness and redness.

A sun protection product with an SPF of at least 30 should be worn at all times. Obagi recommends Rosaclear Skin Balancing Sun Protection SPF 30, Nu-Derm Physical UV Block SPF 32, or N u-Derm Sun Shield SPF 50.

Facial products containing fragrance should be avoided for 3-5 days after the procedure, as they may irritate the skin. The patient should avoid direct sun exposure and use of all exfoliating agents such as AHAs, BHAs, retinoids, retinols, and exfoliating scrubs for 5-7 days after the procedure. The patient can return to their normal skin care regimen 7 days after receiving Blue Peel Radiance.

It is important to continue to protect the patient's smoother, brighter skin with an Obagi sun protection product, even after the 7-day window following the peel.



Clinic Terms of Business

I understand that though complications are uncommon, they do sometimes occur. It is possible that side effects not described may occur and indeed that a complication not previously reported may occur for the first time. I understand if I suffer any adverse reactions that are not expected, or concern me, I must contact my practitioner, and book a review appointment. MD Medical Aesthetics Ltd cannot take responsibility for complications or results that have not been reported, assessed, documented and managed in a timely manner. Whilst I have been advised of the probable result, this cannot be interpreted as a guarantee. Results vary from one individual to another.

I confirm that the medical health history form has been completed truthfully and I am fully aware that withholding medical information, including history of previous treatment, may be detrimental to the safe and optimal outcome of any treatment administered. If there are any changes in my medical history, I must inform the practitioner.

I confirm that I have been provided with verbal and written information about this treatment which includes aftercare and follow up advice and I agree to follow the aftercare advice and understand this reduces risk of adverse reactions and helps ensure optimum results.

I understand information about me will be treated as confidential and access to it restricted in accordance with the Data Protection Act, unless specific permissions given.

By consenting to treatment you accept the clinic terms and conditions as outlined:

- You are satisfied that the treatment has been explained comprehensively
- That the possible risks and side effects associated with the treatment have been fully discussed and understood
- That you have taken sufficient time to process and consider the information provided and any questions have been answered to your satisfaction, before making a decision to proceed with the agreed treatment plan.
- You consent to my medical records being shared with appropriate professional staff
- You accept emergency intervention treatment if required