

Dermaplane

What is Dermaplaning?

Dermaplaning is a form of manual exfoliation similar in theory to microdermabrasion but without the use of suction or abrasive crystals. An aesthetician grade, sterile blade is stroked along the skin at an angle to gently “shave off” dead skin cells from the epidermis. Dermaplaning also temporarily removes the fine vellus hair of the face, leaving a very smooth surface. As with any type of exfoliation, the removal of dead skin cells allows home care products to be more effective, reduces the appearance of fine lines, evens skin tone, allows for better product penetration and helps with minor breakouts associated with congested pores. Dermaplaning can be an effective exfoliation method for clients that have sensitive skin or allergies that prevent the use of microdermabrasion or chemical peels. Due to the contours of the face, certain areas of the face (such as the eyelids and nose) are not treatable using this method. _____ Client Initials

What should you expect during your treatment?

As your aesthetician, I will perform a thorough skin analysis prior to your first dermaplaning. If dermaplaning is not appropriate, you will be informed during this session and an alternative treatment may be recommended instead. If dermaplaning is not contraindicated, maximum results are obtained by participating in a series of treatments plus following a home care regimen. I will review your current daily regimen and skin care products, advise you on which products you should continue to use, and recommend any additional products or changes to your regimen to enhance your desired outcome. _____ Client Initials

As your aesthetician, I take every precaution to ensure that your skin is well hydrated and calm following each session. However, you may experience excessive dryness or even some peeling between sessions, which may or may not be normal. Always contact me if you have any concerns. More sensitive skin may experience some redness after the first couple of sessions. This normally goes away after 2 to 3 hours. Dermaplaning may cause minor superficial abrasions which may not appear until a day or two following your treatment. If this should occur, please contact me so that I can do a post-treatment follow up with you. After your treatment, SPF 30+ MUST be worn at all times. Tanning beds should **never** be used. You are making an investment in your skin: therefore, it is to your benefit to continue to protect it long after your series of treatments is completed.

_____ Client Initials

Is satisfaction guaranteed?

The majority of clients receive noticeable, satisfactory to above average results with a series of treatments and a commitment to a daily skin care regimen. However, this outcome cannot be guaranteed as maximum results are highly dependent on age, cumulative sun exposure, health, lifestyle, genetic traits, general skin condition, and willingness to follow recommended protocols. Be aware that many changes may occur deeper within the skin over time. To continue the maintenance of your skin after you complete your treatment(s), I may inform you of long-term age management programs.

_____ Client Initials



Contraindications:

Although it is impossible to list every potential risk and complication, the following conditions are recognized as contraindications for dermaplaning treatment and must be disclosed prior to treatment.

- Active acne
- Active infection of any type, such as herpes simplex or flat warts.
- Any raised lesions
- Any recent chemical peel procedure
- Chemotherapy or radiation
- Eczema or dermatitis
- Family history of hypertrophic scarring or keloid formation
- Hemophilia
- Hormonal therapy that produces thick pigmentation
- Moles
- Oral blood thinner medications
- Pregnancy
- Recent use of topical agents such as glycolic acids, alpha-hydroxy acids and Retin-A
- Rosacea
- Scleroderma
- Skin Cancer
- Sunburn
- Telangiectasia/erythema may be worsened or brought out by exfoliation
- Thick, dark facial hair
- Uncontrolled diabetes
- Use of Accutane within the last year

_____ Client Initials

Post-Treatment/Home Care Aerobic exercise or vigorous physical activity should be avoided until all redness has subsided. Direct sunlight exposure is to be completely avoided immediately following the treatment (including any strong UV light exposure or tanning beds). Although SPF 30+ should already be a part of your daily skin care, after dermaplaning, SPF 30+ must be applied daily to the treated area for a minimum of two weeks. Twice daily cleanse the treated area with a post treatment cleanser, followed by a serum or treatment cream and follow with SPF 30+ sunscreen. If you have additional questions or concerns regarding your treatment or suggested home regimen, you will consult your esthetician immediately. _____ Client Initials

Client Name (printed)

Client Name (signature)

_____ Date _____

Esthetician _____ Date _____



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I _____, have read the information given to me and initialed each section to indicate that I fully understand what to expect. I understand that Dermaplaning involves the use of surgical blade to remove fine vellus hair and dead layers of skin from the face. The nature and purpose of this treatment has been explained to me and any questions I have regarding the treatment have been answered to my satisfaction. I understand that the treatment may involve the risk of complication or injury and I freely assume those risks. Possible side effects of the treatment area can include mild redness of the skin, irritation and dryness. Additionally, nicks to the skin can occur due to the sharp surgical blade. Patient will be notified and the area will be treated if necessary. The hair is expected to grow back blunt-ended. New hair will not appear darker or denser. However, I do understand that any hormonal imbalance that may be present within my anatomical system can alter normal hair growth pattern if a chemical peel is part of this treatment I understand that the sensation and penetration of the peel will be enhanced. Which may cause skin irritation, mild discomfort, and tenderness, lightening or darkening of the skin, infection, scarring, peeling, and activation of cold sores. I certify that I have read this entire consent and that I understand and agree to the information provided in this form. I certify that I am competent adult of at least 18 years of age, or that, if I am a minor under the age of 18, I understand that the consent of my parent/guardian having legal custody will also be required before treatment. I agree and adhere to all safety precautions and regulations during the skin treatment. I have received and understand the post care recommendations as follows: no sun exposure for 48 hours, moisturize as needed, use gentle cleanser only, Use of sunscreen is highly recommended post-treatment for at least next 7 days.

Client Name (printed)

Client Name (signature)

_____ Date _____

Esthetician _____ Date _____

