

CONSENT TO ILLUMINIZE PEEL[™] TREATMENT

The instructions provided in this informed consent should be followed by all patients receiving an Illuminize Peel treatment. You will be asked to sign this form acknowledging that you have read and understood all of the information presented.

ILLUMINIZE PEEL TREATMENT PURPOSE:

The Illuminize Peel is a very superficial peel designed to improve the texture and appearance of your skin.

PATIENTS WHO SHOULD NOT BE TREATED:

The Illuminize Peel treatment SHOULD NOT be used on patients with active cold sores or warts, skin with open wounds, sunburn, excessively sensitive skin, dermatitis or inflammatory rosacea in the area to be treated. Inform your medical professional if you have any history of herpes simplex. You should also not have an Illuminize Peel treatment if you have a history of allergies, rashes, or other skin reactions, or may be sensitive to any of the components of this treatment. Illuminize Peel should not be performed on patients with an allergy to salicylates (i.e., aspirin). This peel is also not recommended if you have taken Accutane within the past year, or received chemotherapy or radiation therapy. Illuminize Peel should not be administered to pregnant or breastfeeding (lactating) women.

ONE WEEK BEFORE YOUR ILLUMINIZE PEEL:

Avoid these products and/or procedures in area(s) treated:

- Electrolysis
- Waxing
- Depilatory Creams
- Laser Hair Removal
- Patients who have had medical cosmetic facial treatments or procedures (e.g. laser therapy, surgical procedures, cosmetic filler, microdermabrasion, etc) should wait until skin sensitivity completely resolves before having Illuminize Peel
- Patients who have had BOTOX® injections should wait until full effect of their treatment is seen before receiving Illuminize Peel

THREE DAYS BEFORE YOUR ILLUMINIZE PEEL:

Avoid these products and/or procedures:

- Retin-A[®], Renova[®], Differin[®], Tazorac[®]
- Any products containing retinol, AHA or BHA, or benzyl peroxide
- Any exfoliating products that may be drying or irritating

Note: the use of these products/treatments prior to your peel may increase skin sensitivity and cause stronger reactions.

AFTER YOUR ILLUMINIZE PEEL:

It is crucial to the health of your skin and the success of your peel that these guidelines be followed:

- 1. It is imperative that you use a sunscreen with an SPF of at least 20 and avoid direct sunlight for at least 1 week.
- 2. Patients with hypersensitivity to the sun should take extra precautions to guard against exposure immediately following the procedure as they may be more sensitive following the peel.
- 3. Because of the superficial nature of this peel, patients may see some minor visible peeling. Occasionally, some patients may have very minor flaking 3-4 days after the procedure.



- 4. Skin should look normal the next day. When washing your face, do not scrub, do not use wash cloth. Use a gentle cleanser such as SkinMedica Sensitive Skin Cleanser or any other cleanser that does not contain soap.
- 5. Apply SkinMedica TNS Ceramide Treatment Cream, or light moisturizer recommended by your medical professional, as often as needed to relieve dryness and tightness.
- 6. You may resume the regular use of Retin-A, alpha-hydroxy acid (AHA) products or bleaching creams ONLY after the peeling process is complete or after 4-5 days.
- 7. Wait until the peeling is complete before having ANY OTHER FACIAL PROCEDURES, including:
 - Facials
 - Microdermabrasion
 - Laser treatments
 - Laser hair removal
 - BOTOX injections
 - Injectable fillers

Sunburn Alert

This product contains an alpha hydroxyl acid (AHA) that may increase your skin's sensitivity to the sun and particularly the possibility of sunburn. Use a sunscreen, wear protective clothing, and limit sun exposure while using this product and for a week afterwards.

ADVERSE EXPERIENCES THAT MAY OCCUR AFTER YOUR ILLUMINIZE PEEL:

It is common and expected that your skin will be red and possibly itchy and/or irritated. It is also possible that other adverse experiences (side effects) may occur. Although rare, the following adverse experiences have been reported by patients after having an Illuminize Peel: edema, stinging and burning, dryness and erythema.

*Call the office immediately if you have any unexpected problems after the procedure.

Please read and initial the following:

_____I understand that the Illuminize Peel treatment is not an exact science and the degree of improvement is variable.

_____I understand that occasionally there is no visible improvement and another form of treatment may be required.

_____I do not have any of the conditions described in the "Patients Who Should Not Be Treated" section.

By my signature below, I acknowledge that I have read this Illuminize Peel Informed Consent form and understand it. I have been given the opportunity to ask questions and my questions have been answered to my satisfaction. I have been adequately informed of the risks and benefits of this treatment and wish to proceed with the Illuminize Peel.

Patient Signature	Print Name	Date
Witness Signature	Print Name	Date
For Office Staff: Please make a copy of comp and give one	leted and signed consent form. Place copy to patient to take home.	e one copy in patient's file