MUTUAL INFORMED CONSENT LUMILIGHT PEEL - DYSCHROMIA



The decision to carry out an aesthetic peel procedure is made by mutual agreement between:

- The Patient LAST NAME: FIRST NAME:
- The Doctor:

All responsibility associated with its development and aftermath is shared.

The patient acknowledges having been informed by the Doctor of all the elements below:

 $\sqrt{}$ Indication of peel, the expected benefits, and therapeutic alternatives.

$\sqrt{\text{Contraindications}}$ for which the peel should not be used:

- Pregnancy or breastfeeding
- Irritated or impaired skin, open wounds, or acne in its active phase.
- Active bacterial, fungal, or viral infections such as herpes, warts, molluscum contagiosum, and so on. For patients who are subject to herpes, it is advisable to prevent herpes outbreaks by means of a prior antiviral treatment.
- Chronic skin conditions including rosacea, atopic dermatitis, seborrheic dermatitis, and others, or autoimmune conditions such as collagenosis, psoriasis, type 1 diabetes, and so forth.
- The occurrence of keloids and/or hypertrophic scars.
- Photosensitivity.
- Radiotherapy.

• Professional beauty procedures such as laser, dermabrasion, mesotherapy, injections, and tattooing performed within 1 month prior to the peel treatment, recent surgery on the treatment area, and any other therapy that may compromise the skin structure.

• Topical medication based on benzoyl peroxide or retinoids. Discontinue such treatment 15 days prior to the peel depending on the condition of the skin and up to 15 days after the final session.

• Retinoid-based medication . Stop the treatment 6 months prior to the peel depending on the condition of the skin and up to 2 months after the final session.

- Allergic reactions to any of the ingredients.
- Any other condition that may exclude the patient after medical examination.

 $\sqrt{1}$ The need to respect the skin preparation treatment 15 days before the peel, between each peel session and for 2 months after the last session to ensure good tolerance of the products and optimal results after the peel.

 $\sqrt{}$ The peel will be performed according to the LUMILIGHT PEEL protocol and depending on the size of the defect to be corrected, the area to be treated, the quality of the skin and the desired goal.

 \sqrt{A} A normal warm and/or tingling sensation may be experienced during application.

 $\sqrt{1}$ The need to comply with the post-peel treatment, which consists of the use of a repair cream and sun protection for 4 to 5 days after the peel.

√ <u>After-effects that may be inherent to the peel</u>: discomfort, tightness, tingling, mild erythema, irritation, mild to moderate flaking, and/or afeeling of heat.

 $\sqrt{}$ If these symptoms persist for more than 72 hours or if any other adverse reactions occcur, a consultation should be arranged as soon as possible and the treatment should be suspended.

 \sqrt{An} An <u>allergic reaction risk</u> is inherent in any product used topically.

 $\sqrt{1}$ In the event of an allergic reaction such as edema, erythema, eczema, rash, asthma, or anaphylaxis, the patient should consult their doctor as soon as possible and the treatment should be discontinued.

 $\sqrt{}$ The need to restrict the use of products forming part of the pre and post-peel treatment prescribed by the doctor during the entire treatment and to prohibit the use of potentially sensitising products such as alcohol-based lotions, abrasive scrubs, bleaching or purifying products, without the Doctor's agreement.

 $\sqrt{\frac{\text{Cosmetic procedures}}{\text{such as laser, dermabrasion, mesotherapy, injections, tattooing, electrolysis, and the like, or UV sessions on the areas to be treated <u>are not permitted</u> until 1 month after the peel, according to the Doctor's assessment. Laser hair removal sessions can be resumed after 15 fays following the peel.$



 $\sqrt{1}$ The prohibition of shaving or waxing the area to be treated for at least 24 hours before and up to 72 hours after the peel.

 $\sqrt{1}$ The prohibition to take medication without the authorization of the Doctor the treatment.

 $\sqrt{1}$ The prohibition of sun and/or UV exposure and the need to use a high SPF 50+ sun protection during the treatment and for 2 months after the last session.

 $\sqrt{}$ The prohibition of scratching, applying make-up, and wearing accessories that could potentially traumatize the skin, such as headbands, tight-fitting hats, or glasses, for 3 days after the peel.

 $\sqrt{}$ Medical and surgical procedures, even seemingly straightforward ones, may present exceptional or even unknown risks. The assessment, treatment, and monitoring of these risks is ensured by the Doctor.

 $\sqrt{}$ Although successful results are expected, the effectiveness of the protocol cannot be guaranteed.

With this knowledge, the patient undertakes to:

- Attend the consultations scheduled by the Doctor.
- Respect the prescribed skin preparation and post-peel treatments.
- Follow all the Doctor's recommendations.

PRE & POST PROCEDURE PROTOCOL IN 3 STEPS:



* Sunscreen 50+

DURATION OF THE PROTOCOL:

Approximately 4 sessions of superficial peels at 15 day intervals are recommended.

The Doctor undertakes to:

- Agree with the patient on a minimum number of days to be respected between the consultation and the possible procedure.
- Be at the disposal of the patient and their attending Doctor to answer any questions before and after the after the procedure.
- Implement all the means at their disposal to approach the desired result and to alleviate any undesirable effect adverse effects of the patient.
- Carry out a regular medical follow-up allowing the Doctor to provide the patient with all the technical resources at his disposal.

Signed in

, on /

Signature preceded by the words "Read and approved"

DOCTOR

PATIENT

