



THUZZLE SKIN RESURFACING & LIFTING JOURNEY BOOKLET

CLIENT NAME

CLINICIAN



INTRODUCTION TO

Skin Resurfacing & Lifting

Skin Resurfacing & Lifting mode uses the Fractional Radial handpiece to obtain superficial epidermal micro-ablation in combination with volumetric heating of the dermis for retraction and neocollagenesis. This combination makes it possible to treat coarse textures and elastosis in one treatment. Resulting in a more even skin texture with skin tightening benefits.

Indications

- Areas on the face, neck and décolletage where there is a loss of skin elasticity.
- Textural irregularities.
- Enlarged pores.
- Superficial Scarring.
- Pigmentation

Considerations

- A typical course involves 1-5 treatments spaced every 90 days.
- Touch-up treatments may be needed approximately every 6-12 months, according to individual needs and responses.
- The suggested number of treatments may vary between individuals and areas.



Goals & Expectations

What are your treatment expectations?

In what time frame do you expect to reach your goals?



CONTRAINDICATIONS

SKIN RESURFACING & LIFTING

Please tick any of the below that apply to you:

- Contagious Skin Disorders / Diseases (Impetigo, Chicken Pox, Mumps)
- Inflammatory skin conditions
- Active Infections/viruses (cold sores)
- Skin Irritation / Rash / Open Lesions /Allergic Skin Reaction
- Impaired healing/ Abnormal Healing/ Keloid Scars
- Cancer, Chemotherapy, Radiation (within two years)
- Diabetes
- Autoimmune pathologies
- Immunosuppressive pathologies such as HIV or using immunosuppressive drugs
- Arrhythmias and Cardiac Disease
- Pacemaker or internal defibrillator
- Tan (fake)
- Sun exposure (within the past four weeks)
- Waxing, plucking (three days)
- Laser or IPL hair Removal, Electrolysis (within seven days)
- IPL/Laser Skin Treatment (within four weeks)
- Prescription-strength exfoliants (within the past two weeks)
- Isotretinoin (within the past six months)
- Photosensitizing medications (within the past two weeks)
- Blood thinners and haemophilia
- Metal plates or pins
- High/Low Blood Pressure
- Laser Treatment/Cosmetic Surgery (within 3 -6 months)
- Scars (less than 6 months old)
- Pregnancy and Breastfeeding
- Cosmeceutical Vitamin A, AHA's & BHA's, or Vitamin C (within the past 3 days)
- Hypoesthesia
- Epilepsy
- Feeling Unwell, Flu, Common Cold etc
- Smoking, Drinking & Drugs
- Allergies to Latex
- Tattoos, permanent makeup, and piercings at the treatment site



CONTRAINDICATIONS

SKIN RESURFACING & LIFTING

Please tick any of the below that apply to you:

- Excess alcohol consumption
- Liver disease
- Dermabrasion, resurfacing and deep chemical peeling of the face three months before
- Botulinum toxin/collagen/fat transplant and other fillers in the treated area one month before treatment.
- High doses of cortisone.
- Children and adolescents.
- Active acne and nodular rosacea in the treatment area
- Hepatic disease
- Chronic disease
- Older / Inactive Client

Notes:

THUZZLE SKIN RESURFACING & LIFTING

Treatment Prep & What to Expect

Pre-treatment preparation and post-treatment care are vital steps in your Skin Resurfacing & Lifting treatments. To ensure a safe treatment and to get the best results, please follow all advice provided and reach out to your treatment provider if you have any questions. Failure to follow the below advice may increase the risk of undesirable effects.

TREATMENT PREPARATION

DAILY

- A sunscreen with SPF 30 or greater should be applied to protect against UV damage.
- Follow your prescribed homecare routine as advised by your treatment provider.

4 WEEKS PRE-TREATMENT

- Avoid the use of fake tan and gradual tanning creams in the area to be treated.
- Avoid tanning and incidental sun exposure, including tanning beds/booths (including between treatments).
- Avoid Botox & filler injections in the treatment area.
- Avoid IPL / Laser photo rejuvenation and pigmentation treatments within the treatment area.

2 WEEKS PRE-TREATMENT

- Prepare the skin with suitable skincare. This will include a tyrosinase inhibitor for Fitzpatrick Skin Types III+ and any skin prone to post-inflammatory hyperpigmentation (PIHP). Your treatment provider will advise you of your skincare recommendations.
- Avoid prescription-strength exfoliant creams on the treatment area.
- Avoid chemical peels, microdermabrasion, dermaplaning or any treatment that will compromise the skin barrier.

1 WEEK PRE-TREATMENT

- Avoid Benzyl Peroxide application in the treatment area.
- Avoid IPL / Laser hair reduction in the treatment area.
- If prone to cold sores, please speak to your pharmacist about a prophylactic course of antiviral medication.

3 DAYS PRE-TREATMENT

- Avoid cosmeceutical Vitamin A, AHA's & BHA's, and Vitamin C application.
- Avoid waxing, shaving, or epilating within the treatment area.

WHAT TO EXPECT

DURING THE TREATMENT

- **Moderate warmth:** Some clients can feel mild warmth during this treatment.
- **Mild to moderate discomfort.** This sensation is more evident in certain areas, such as the forehead and nose. A flicking sensation is normal.

IMMEDIATELY AFTER THE TREATMENT & UP TO 5 DAYS POST-TREATMENT

- The skin will feel warm and appear pink in colour, similar to a mild sunburn post-treatment due to the normal inflammation process. This warm sensation can increase over the following 4 hours.
- On days 3-5 post-treatment, you may experience mild edema, persistent redness and crusts will be observed, which are part of the tissue regeneration process.

NOTE: Transient breakouts may occur in some clients 1-3 weeks post-treatment. Do not pop or pick the skin.

IMPORTANT



Throughout your treatment course, it is important to advise your treatment provider of any of the following:

- Sun exposure or fake tan application on the treatment area within the past 4 weeks
- Any new health conditions, or if you have been unwell
- Commencing any new medication (including short term doses)
- Changes to current medications or supplements
- If you are trying to become, or become pregnant

THUZZLE SKIN RESURFACING & LIFTING

Aftercare

DAILY:

1. Cover the treated part completely with SPF30 or higher sunblock.
2. Avoid sun exposure to treated areas.
3. Follow your prescribed homecare routine as advised by your treatment provider.
4. Avoid picking at or peeling the skin.
5. Avoid unnecessarily touching the skin. When essential, wash hands first.

FOR THE FIRST 24 HOURS POST-TREATMENT:

1. The treated area must not be exposed to UVR for 24 hours, even in enclosed places.
2. Do not apply a cold compress or ice to the skin, as this will affect the normal wound-healing process.
3. Avoid using pools, spas, saunas, and extremely hot showers.
4. Avoid makeup application.
5. If possible, avoid taking ibuprofen or other anti-inflammatories for 24-48 hours post-treatment.

UP TO 5 DAYS POST-TREATMENT:

1. Avoid the use of scented lotions or soaps.
2. Avoid the use of cosmeceutical Vitamin A and Vitamin C.
3. A gentle skincare routine is recommended during this time. Your treatment provider will recommend suitable skincare to protect and hydrate the skin.
4. Avoid exercise and activities that increase perspiration and body temperature.

UP TO 1-WEEK POST-TREATMENT:

- Avoid antiwrinkle injections and filler injections in the treatment area.
- Avoid picking or peeling the skin. Any scabs or crust that develop will gradually fall off after 5-7 days.

UP TO 1-MONTH POST-TREATMENT:

- Avoid exfoliating the skin, including AHA's, BHA's and granular scrubs.
- Avoid in-clinic exfoliating and rejuvenating treatments. Check with your treatment provider before proceeding with your next treatment.
- Avoid the use of prescription-strength exfoliant creams (prescriptive vitamin A).



IMPORTANT

- **Contact your treatment provider if you notice any unusual reactions**
- **Your treatment provider will advise your treatment schedule. It is important to adhere to this regime for best results.**
- **Maintenance treatments will be required and will be ongoing**

THUZZLE SKIN RESURFACING & LIFTING



Client Consent

POTENTIAL (RARE) SIDE EFFECTS

The Thuzzle Skin Resurfacing & Lifting treatments are generally considered safe, effective treatments. However, in rare cases, unexpected results can arise, including:

- Extreme redness
- Extreme swelling
- Extreme heat
- Extreme sensitivity
- Blisters
- Burns
- Scarring, which may be permanent
- Pigmentation changes
- Cold sores and acne outbreaks
- Temporary tingling and/or itchiness of the skin
- Infection

Please contact your treatment provider immediately if you experience any of these responses.

PLEASE SIGN

I, _____ certify that the information contained within this document is true and correct and that I have been advised and fully informed of the procedure and the nature of the process discussed, along with all risks, responses and pre and post-care instructions. I hereby authorize and direct my treatment provider to perform such services as prescribed.

My signature below acknowledges that:

- I have read, understand, and fully agree to the treatment and product prescription.
- I understand the risks and contraindications for the treatments that have been prescribed.
- I give consent to the prescribed treatments that has been satisfactorily explained to me and my questions have been addressed.
- I hereby give my consent and authorization for my treatment provide to carry out the prescribed services. I release this organisation and its therapists of any claims that I have or may have in the future in connection with the described application or service.

THUZZLE SKIN RESURFACING & LIFTING

CLINICIAN USE ONLY:
Use the skin condition code to tag conditions in the various zones of the face, neck & decolletage.

Baseline Skin Analysis

Skin Type:

- D: Dry
- O: Oily
- COM: Combination
- N: Normal

Ageing:

- LE: Loss Of Elasticity
- DW: Dynamic Wrinkles
- SW: Static Wrinkles

Pigmentation:

- SL: Solar Lentigo
- SK: Solar Keratosis
- F: Freckles
- PHI: Post Inflammatory
- HPO: Hypopigmentation
- M: Melasma

Vascular:

- T: Telangiectasia
- R: Redness
- BC: Broken Capillaries
- RC: Rosacea
- CA: Cherry Angioma

Acne:

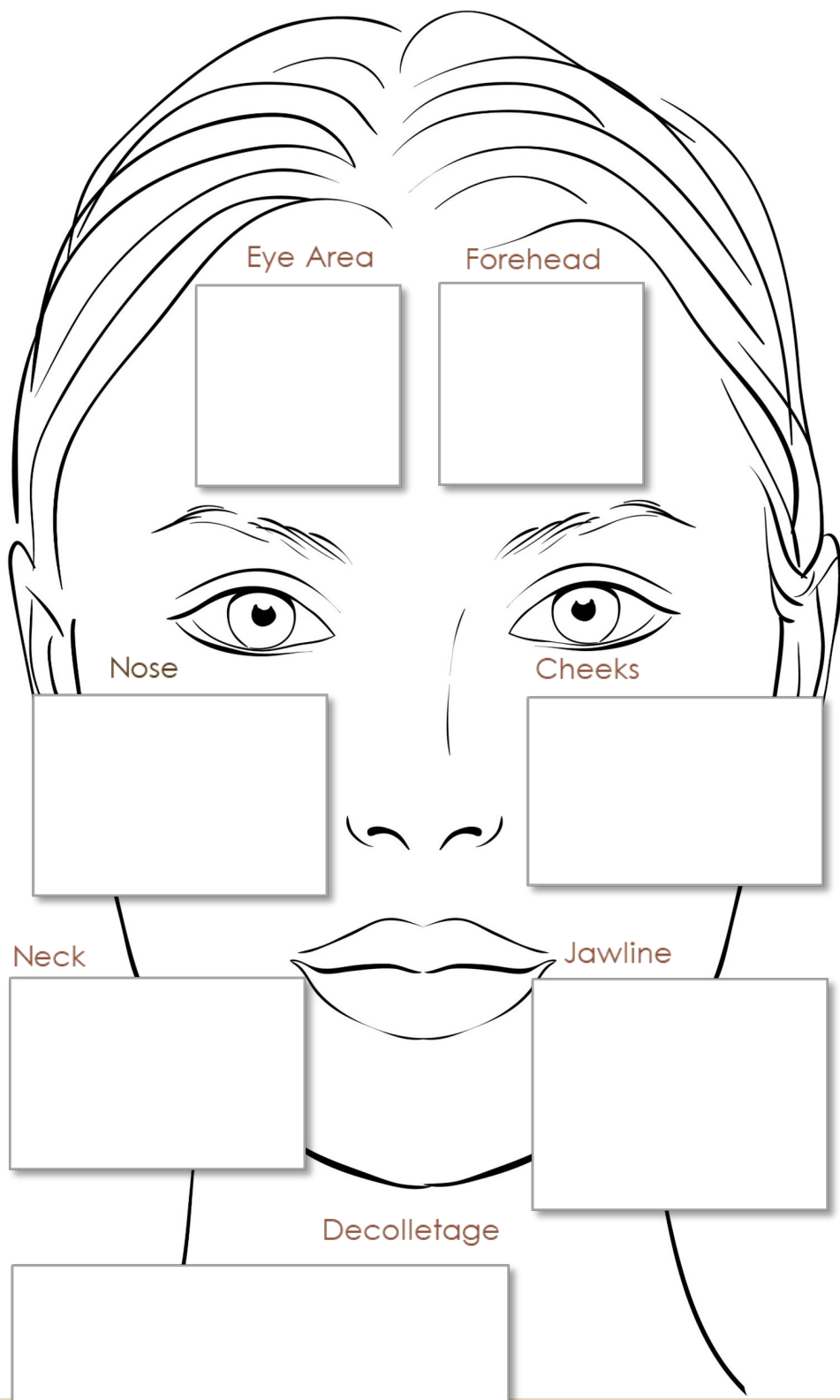
- P: Papules
- PU: Pustules
- C: Cysts
- CO: Congestion
- IA: Inflamed Acne
- EP: Enlarged Pores

Hair Growth:

- THG: Terminal Hair Growth
- VHG: Vellus Hair Growth
- DC: Dark Color
- BC: Blonde Colour
- RC: Red Colour
- GC: Grey Colour

Other:

- UT: Uneven Texture
- ST: Scar Tissue
- F: Filler
- B: Botox
- CT: Cosmetic Tattoo
- S: Sensitised
- DH: Dehydrated
- IB: Impaired Barrier



THUZZLE SKIN RESURFACING & LIFTING

CLINICIAN USE ONLY:
Use the skin condition code to tag conditions in the various zones of the body.

Baseline Skin Analysis

Aging:

- LE: Loss Of Elasticity
- DW: Dynamic Wrinkles
- SW: Static Wrinkles

Pigmentation:

- SL: Solar Lentigo
- SK: Solar Keratosis
- F: Freckles
- PHI: Post Inflammatory
- HPO: Hypopigmentation

Vascular:

- T: Telangiectasia
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Acne:

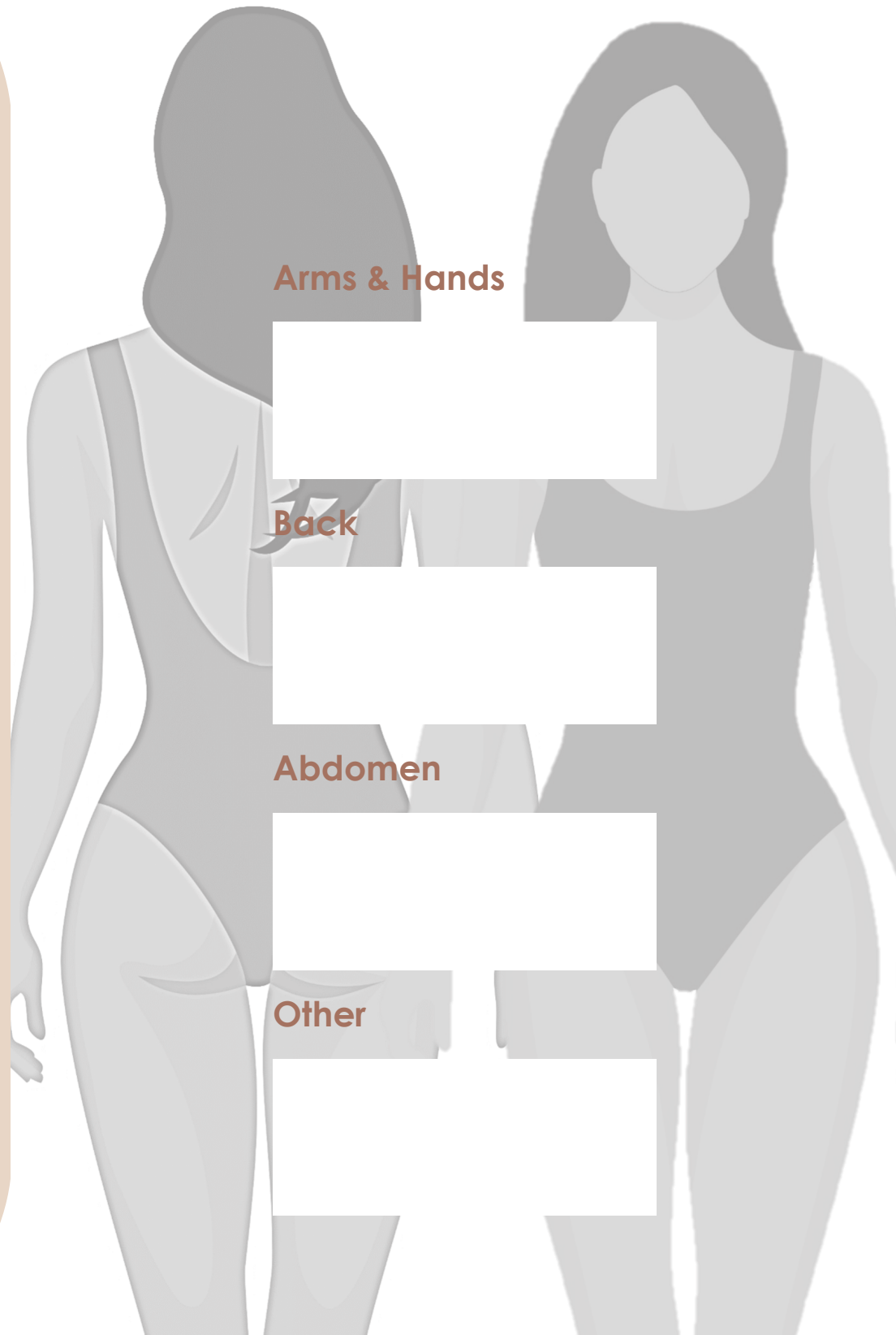
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Other:

- UT: Uneven Texture
- ST: Scar Tissue
- S: Sensitised
- DH: Dehydrated
- IB: Impaired Barrier
- KP: Keratosis Pilaris
- IH: Ingrown Hairs
- C: Cellulite
- SM: Stretch Marks
- FR: Fluid Retention
- T: Tattoo



THUZZLE SKIN RESURFACING & LIFTING

Treatment Record & Client Consent

CLIENT CONSENT

TEST PATCH

Client Full Name

Client Signature Date

Witness Signature Date

PHOTOS TAKEN & FILED

TEST PATCH PARAMETERS

CLINICIAN USE ONLY

Output Level:

Fractional Radial Handpiece Tip:

- 64-pin tip
- 40-pin

Areas Treated:

Number of shots used:

SKIN RESURFACING & LIFTING

SKIN & BODY CARE PRESCRIPTION

LIFESTYLE PRESCRIPTION

NOTES



THUZZLE SKIN RESURFACING & LIFTING

Treatment Record & Client Consent

CLIENT CONSENT

TREATMENT 1

Client Full Name

Client Signature Date

Witness Signature Date

PHOTOS TAKEN & FILED

TREATMENT PARAMETERS

CLINICIAN USE ONLY

Output Level:

Fractional Radial
Handpiece Tip:

- 64-pin tip
- 40-pin

Areas Treated:

Number of shots
used:

SKIN RESURFACING & LIFTING

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THUZZLE SKIN RESURFACING & LIFTING

Treatment Record & Client Consent

CLIENT CONSENT

TREATMENT 2

Client Full Name

Client Signature Date

Witness Signature Date

PHOTOS TAKEN & FILED

TREATMENT PARAMETERS

CLINICIAN USE ONLY

Output Level:

Fractional Radial
Handpiece Tip:

- 64-pin tip
- 40-pin

Areas Treated:

Number of shots
used:

SKIN RESURFACING & LIFTING

SKIN & BODY CARE PRESCRIPTION

LIFESTYLE PRESCRIPTION

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THUZZLE SKIN RESURFACING & LIFTING

Treatment Record & Client Consent

CLIENT CONSENT

TREATMENT 3

Client Full Name

Client Signature Date

Witness Signature Date

PHOTOS TAKEN & FILED

TREATMENT PARAMETERS

CLINICIAN USE ONLY

Output Level:

Fractional Radial
Handpiece Tip:

- 64-pin tip
- 40-pin

Areas Treated:

Number of shots
used:

SKIN RESURFACING & LIFTING

SKIN & BODY CARE PRESCRIPTION

LIFESTYLE PRESCRIPTION

NOTES



THUZZLE SKIN RESURFACING & LIFTING

Treatment Record & Client Consent

CLIENT CONSENT

TREATMENT 4

Client Full Name

Client Signature Date

Witness Signature Date

PHOTOS TAKEN & FILED

TREATMENT PARAMETERS

CLINICIAN USE ONLY

Output Level:

Fractional Radial
Handpiece Tip:

- 64-pin tip
- 40-pin

Areas Treated:

Number of shots
used:

SKIN RESURFACING & LIFTING

SKIN & BODY CARE PRESCRIPTION

LIFESTYLE PRESCRIPTION

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THUZZLE SKIN RESURFACING & LIFTING

Treatment Record & Client Consent

CLIENT CONSENT

TREATMENT 5

Client Full Name

Client Signature Date

Witness Signature Date

PHOTOS TAKEN & FILED

TREATMENT PARAMETERS

CLINICIAN USE ONLY

Output Level:

Fractional Radial
Handpiece Tip:

- 64-pin tip
- 40-pin

Areas Treated:

Number of shots
used:

SKIN RESURFACING & LIFTING

SKIN & BODY CARE PRESCRIPTION

LIFESTYLE PRESCRIPTION

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THUZZLE SKIN RESURFACING & LIFTING

Treatment Record & Client Consent

CLIENT CONSENT

TREATMENT 6

Client Full Name

Client Signature Date

Witness Signature Date

PHOTOS TAKEN & FILED

TREATMENT PARAMETERS

CLINICIAN USE ONLY

Output Level:

Fractional Radial
Handpiece Tip:

- 64-pin tip
- 40-pin

Areas Treated:

Number of shots
used:

SKIN RESURFACING & LIFTING

SKIN & BODY CARE PRESCRIPTION

LIFESTYLE PRESCRIPTION

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THUZZLE SKIN RESURFACING & LIFTING

Treatment Record & Client Consent

CLIENT CONSENT

TREATMENT 7

Client Full Name

Client Signature Date

Witness Signature Date

PHOTOS TAKEN & FILED

TREATMENT PARAMETERS

CLINICIAN USE ONLY

Output Level:

Fractional Radial
Handpiece Tip:

- 64-pin tip
- 40-pin

Areas Treated:

Number of shots
used:

SKIN RESURFACING & LIFTING

SKIN & BODY CARE PRESCRIPTION

LIFESTYLE PRESCRIPTION

NOTES



THUZZLE SKIN RESURFACING & LIFTING

Treatment Record & Client Consent

CLIENT CONSENT

TREATMENT 8

Client Full Name

Client Signature Date

Witness Signature Date

PHOTOS TAKEN & FILED

TREATMENT PARAMETERS

CLINICIAN USE ONLY

Output Level:

Fractional Radial Handpiece Tip:

- 64-pin tip
- 40-pin

Areas Treated:

Number of shots used:

SKIN RESURFACING & LIFTING

SKIN & BODY CARE PRESCRIPTION

LIFESTYLE PRESCRIPTION

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THUZZLE SKIN RESURFACING & LIFTING

Treatment Record & Client Consent

CLIENT CONSENT

TREATMENT 9

Client Full Name

Client Signature Date

Witness Signature Date

PHOTOS TAKEN & FILED

TREATMENT PARAMETERS

CLINICIAN USE ONLY

Output Level:

Fractional Radial
Handpiece Tip:

- 64-pin tip
- 40-pin

Areas Treated:

Number of shots
used:

SKIN RESURFACING & LIFTING

SKIN & BODY CARE PRESCRIPTION

LIFESTYLE PRESCRIPTION

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THUZZLE SKIN RESURFACING & LIFTING

Treatment Record & Client Consent

CLIENT CONSENT

TREATMENT 10

Client Full Name

Client Signature Date

Witness Signature Date

PHOTOS TAKEN & FILED

TREATMENT PARAMETERS

CLINICIAN USE ONLY

Output Level:

Fractional Radial
Handpiece Tip:

- 64-pin tip
- 40-pin

Areas Treated:

Number of shots
used:

SKIN RESURFACING & LIFTING

SKIN & BODY CARE PRESCRIPTION

LIFESTYLE PRESCRIPTION

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THUZZLE SKIN RESURFACING & LIFTING

Treatment Record & Client Consent

CLIENT CONSENT

TREATMENT 11

Client Full Name

Client Signature Date

Witness Signature Date

PHOTOS TAKEN & FILED

TREATMENT PARAMETERS

CLINICIAN USE ONLY

Output Level:

Fractional Radial
Handpiece Tip:

- 64-pin tip
- 40-pin

Areas Treated:

Number of shots
used:

SKIN RESURFACING & LIFTING

SKIN & BODY CARE PRESCRIPTION

LIFESTYLE PRESCRIPTION

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THUZZLE SKIN RESURFACING & LIFTING

Treatment Record & Client Consent

CLIENT CONSENT

TREATMENT 12

Client Full Name

Client Signature Date

Witness Signature Date

PHOTOS TAKEN & FILED

TREATMENT PARAMETERS

CLINICIAN USE ONLY

Output Level:

Fractional Radial
Handpiece Tip:

- 64-pin tip
- 40-pin

Areas Treated:

Number of shots
used:

SKIN RESURFACING & LIFTING

SKIN & BODY CARE PRESCRIPTION

LIFESTYLE PRESCRIPTION

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