

clinical peel information

Clinical peels involve the application of a solution to the surface of the skin to speed up the exfoliation process and accelerate skin cell turnover.

Regular peel benefits include:

- Improved skin refinement and texture
- Improved skin hydration
- Unclogs and minimises pore appearance
- Helps to reduce the appearance of acne and skin breakouts
- Helps to reduce the appearance of fine lines and wrinkles
- Boosts the production of collagen and elastin
- Can improve superficial scarring and hyperpigmentation
- Brightens dull skin

Clinical peel treatments will not improve:

- Deep wrinkles
- Deep acne scarring
- Broken capillaries

Please answer the following questions regarding your skin

Yes No

1. Are you prone to cold sores or have you had a recent cold sore?
2. Are you allergic to aspirin (salicylic acid)?
3. Are you currently taking Roaccutane for acne?
4. Are you pregnant?
5. Are you Diabetic or do you have an immune disorder?
6. Do you have a tendency to Keloid scar?
7. Have you previously experienced a reaction to a peel treatment?
8. Do you use products containing Retinol/Vitamin A?
9. Do you experience eczema?
10. Would you describe your skin as very sensitive?
11. Have you had recent facial surgery or undergone a facial laser treatment?
12. Have you had recent sunburn?
13. Have you had facial waxing in the last 72 hours?

Reactions to a clinical peel are rare and typically mild, however can occasionally occur. To reduce the occurrence of a reaction and to optimise treatment results it is advised that asap radiance serum or asap clear complexion gel be used daily, for a period of 2 weeks prior to undergoing a clinical peel or peel boost treatment.

It is normal to experience a mild to strong tingling sensation on the application of a peel which can last up to 10 minutes and that immediately after a peel application, the skin may appear slightly pink and feel tight. Visible peeling or skin flaking, if it occurs, is usually complete in 5 to 7 days.

clinical peel consent

I have read the clinical peel information provided to me and understand the nature of undergoing a peel treatment including the contraindications and benefits.

I acknowledge that I have been advised that individual results may vary and cannot be guaranteed.

I understand that it is important to follow asap peel aftercare instructions for optimum results.

Please speak with your clinician if you have any questions or uncertainty regarding any aspect of undergoing a peel treatment.

Clinician Name: _____

Treatment: _____

Client's Name: _____

Client's Signature: _____

Date: _____