



## PRE TREATMENT CHECKLIST

### REJUVEN8 FACIAL & BODY INFUSIONS

The following checklist is essential to ensure your safety if you are going on to have a treatment at Rejuven8 Cosmetix. Please review the checklist to ensure you have followed all the points enclosed before having your treatment. This pre-treatment checklist will be available in the form of a questionnaire to be filled out and signed prior to your treatment.

#### **THIS TREATMENT:**

**SHOULD NOT BE DONE IF YOU ARE UNDER 18YRS AGE UNLESS YOU HAVE A PARENT OR GUARDIAN WITH YOU ON THE DAY OF THE TREATMENT**

**MAY INCLUDE A MICRODERMABRASION WHICH MUST NOT BE DONE OVER SCARS FROM INJURIES OR SURGERY < 3 MONTHS OLD - YOU MUST INFORM YOUR COSMETIC PRACTITIONER IF THERE ARE ANY SCARS FROM INJURIES OR SURGERIES IN THE AREA TO BE TREATED**

**MAY INCLUDE SERVICES OR TOPICAL PREPARATIONS THAT MUST NOT BE DONE IF YOU ARE PREGNANT**

**MAY INCLUDE A FULL FACE MASK WHICH SHOULD NOT BE DONE IF YOU SUFFER WITH CLAUSTROPHOBIA**

**MAY INVOLVE THE USE OF SOME TOPICAL PREPARATIONS THAT SHOULD NOT BE USED IN BREAST FEEDING**

**MAY INVOLVE THE USE OF SOME TOPICAL PREPARATIONS THAT MUST NOT BE USED IF YOU ARE ALLERGIC TO ASPIRIN OR SALICYLATES**

#### **SHOULD NOT BE DONE IF YOU SUFFER WITH THE FOLLOWING MEDICAL CONDITIONS:**

SKIN CANCERS OR RECURRENT SUN SPOTS IN THE AREA TO BE TREATED

COLD SORES IN THE AREA TO BE TREATED – treatment will be rescheduled if active cold sore virus is present.

TYPE 2 DIABETES OR ANY POORLY CONTROLLED DIABETES - if the treatment includes extractions, facial peels or Microdermabrasion

ABNORMAL SKIN HEALING OR SCARRING e.g. Keloid scarring - if the treatment includes extractions, facial peels or Microdermabrasion

CURRENT ACTIVE SKIN INFECTION (OTHER THAN ACNE) AT SITE OF TREATMENT

HEART DISEASE WITH IRREGULAR HEART RATE - Iontophoresis (micro electrical current) will not be used in the treatment

CARDIAC PACEMAKERS OR INTERNAL DEFIBRILLATORS - Iontophoresis (micro electrical current) will not be used in the treatment

#### **MAY INCLUDE SERVICES THAT SHOULD NOT BE DONE OVER OR NEAR TO THE FOLLOWING AREAS**

IMPLANTED DEVICES, INCLUDING METALLIC IMPLANTS, ELECTRONIC IMPLANTS, TIME-RELEASED MEDICAL IMPLANTS, AND SUPERFICIALLY PLACED BODY CONTOURING IMPLANTS

#### **IF SERVICE INCLUDES EXTRACTIONS YOU MUST NOT HAVE TAKEN ROACCUTANE IN THE LAST 6 MONTHS**

#### **IF SERVICE INCLUDES MICRODERMABRASION AND/OR CHEMICAL PEEL, IN THE LAST 2 MONTHS YOU SHOULD NOT HAVE HAD ANY OF THE FOLLOWING COSMETIC TREATMENTS DONE IN THE SAME AREA YOU ARE ABOUT TO HAVE TREATED?**

FULL ABLATIVE LASER RESURFACING e.g. CO2 laser

FRACTIONAL ABLATIVE LASER RESURFACING e.g. Pearl, Pearl Fractional

MEDICAL STRENGTH CHEMICAL PEELS PERFORMED BY NURSE/DOCTOR e.g. TCA, Obagi

LIQUID NITROGEN / CRYOTHERAPY SPRAY TO SUN SPOTS

LASER TATTOO REMOVAL

PDT (PHOTODYNAMIC THERAPY) for recurrent abnormal skin lesions such as sun spots

#### **IF SERVICE INCLUDES MICRODERMABRASION AND/OR CHEMICAL PEEL, IN THE LAST 4 WEEKS YOU SHOULD NOT HAVE HAD ANY OF THE FOLLOWING COSMETIC TREATMENTS DONE IN THE SAME AREA YOU ARE ABOUT TO HAVE TREATED?**

FRACTIONAL NON ABLATIVE LASER RESURFACING e.g. Fraxel

LASER PIGMENTATION TREATMENT e.g. Copper Bromide

#### **IF SERVICE INCLUDES MICRODERMABRASION AND/OR CHEMICAL PEEL, IN THE LAST 1 WEEK YOU SHOULD NOT HAVE HAD ANY OF THE FOLLOWING COSMETIC TREATMENTS DONE IN THE SAME AREA YOU ARE ABOUT TO HAVE TREATED?**

DERMAL FILLER e.g. Restylane, Juvederm  
HYDRATING SKIN BOOSTERS e.g. Vital, Mesolis, Belotero Hydro  
CONTOURING FILLER e.g. Voluma, Sub Q, Modelis  
SEMI-PERMANENT / DUAL ACTION FILLER e.g. Radiesse, Ellanse  
PERMANENT FILLER INJECTIONS e.g. Aquamid  
COLLAGEN STIMULATING INJECTIONS e.g. Sculptra  
PLATELET RICH PLASMA INJECTIONS  
SKIN NEEDLING OR DERMAPEN  
LASER HAIR REDUCTION  
IPL (INTENSE PULSED LIGHT) HAIR REDUCTION  
LASER VEIN TREATMENT  
IPL (INTENSE PULSED LIGHT) SKIN REJUVENATION  
CRYSTAL LIMELIGHT REJUVENATION TREATMENT  
RESPECT YOUR SKIN TREATMENT

**IF SERVICE INCLUDES MICRODERMABRASION AND/OR CHEMICAL PEEL, IN THE LAST 2 WEEKS YOU SHOULD NOT HAVE APPLIED ANTI SKIN CANCER CREAMS PRESCRIBED BY A DOCTOR TO THE SKIN AREA TO BE TREATED e.g. Aldara, Efudix, Solase**

**IF SERVICE INCLUDES MICRODERMABRASION AND/OR CHEMICAL PEEL, IN THE LAST 48 HRS YOU SHOULD NOT HAVE HAD ANY OF THE FOLLOWING COSMETIC TREATMENTS DONE IN THE SAME AREA YOU ARE ABOUT TO HAVE TREATED?**

GENERAL CHEMICAL PEELS PERFORMED BY DERMAL / BEAUTY THERAPIST e.g. Glycolic, Jessners

**IF SERVICE INCLUDES MICRODERMABRASION AND/OR CHEMICAL PEEL, IN THE LAST 7 DAYS YOU SHOULD NOT HAVE APPLIED A STEROID CREAM PRESCRIBED BY A DOCTOR e.g. Diprosone, Elocon TO THE SKIN AREA TO BE TREATED**

**IF SERVICE INCLUDES MICRODERMABRASION AND/OR CHEMICAL PEEL, IN THE LAST 7 DAYS YOU SHOULD NOT HAVE APPLIED VITAMIN A CREAM PRESCRIBED BY A DOCTOR e.g. Retin A, Stieva A, Zorac TO THE SKIN AREA TO BE TREATED**

**IF SERVICE INCLUDES MICRODERMABRASION AND/OR CHEMICAL PEEL, IN THE LAST 7 DAYS YOU MUST NOT HAVE EXPOSED YOUR SKIN TO EXCESS UNPROTECTED SUNLIGHT**

**IN THE LAST 24 HOURS YOU MUST NOT HAVE HAD ANY OF THE FOLLOWING TREATMENTS DONE IN THE SAME AREA YOU ARE ABOUT TO HAVE TREATED**

BOTULINUM TOXIN INJECTIONS

**IF SERVICE INCLUDES MICRODERMABRASION AND/OR CHEMICAL PEEL, IN THE LAST 24 HOURS YOU SHOULD NOT HAVE APPLIED THE FOLLOWING TO THE SKIN IN THE SAME AREA YOU ARE ABOUT TO HAVE TREATED:**

HOME PEELING CREAMS

**FOR 7 DAYS AFTER YOUR TREATMENT, YOU SHOULD NOT DO ANY OF THE FOLLOWING TO THE AREA/S TREATED**

EXPOSE THE SKIN TO EXCESS SUNLIGHT OR SOLARIUMS (must apply daily sunblock for 4 weeks)

EXPOSE THE SKIN TO SAUNAS OR HOT WATER

**IF SERVICE INCLUDES MICRODERMABRASION AND/OR CHEMICAL PEEL, FOR 48 HOURS AFTER YOUR TREATMENT YOU SHOULD NOT**

APPLY AHA/BHA OR OTHER ACIDIC SKIN CARE e.g. Vitamin C, Salicylic Acid, Glycolic Acid, Lactic Acid

APPLY OVER THE COUNTER OR PRESCRIPTION VITAMIN A CREAMS/GELS e.g. Zorac, Retin A, Retinol