

Esthetics Skillbook

PROTOCOL Design

Protocol: ☐ CONSULTATION ☐ WRINKLES ☐ CELLULITE ☐ SUN DAMAGE

Protocol: ACNE PRE- AND POST-OP DERMATITIS OILY OR DRY SKIN

Name: _____ Date: _____

Problem/Complaint: _____

Patient is interested in: _____

Pre Op: _____ Post Op: _____

Please evaluate for the following:

Patient Skin	TREATMENTS:	SKIN CARE:	MAKEUP:
Type:	☐ Dermis Stimulation	☐ Acne Treatment	☐ Camouflage
Virgin:	☐ Firming/Hydrating	☐ Anti-Inflammatory	NUTRITION:
Health Ideal	☐ Anti-Oxidant/Vitamin Rich	☐ Facial Maintenance	☐ Weight Issues
	☐ Epidermal Renewal	☐ Acne	☐ Hormonal Imbalances
Abnormal:	☐ Lymphatic Drainage	☐ Acne Scars	☐ High Stress Levels
Injured	☐ Eye Treatment	☐ Sun Protection	☐ Hair Loss
Damaged	☐ Scar Revision	☐ Anti-Aging Products	☐ Aching Joints/Muscles
	☐ Body Treatment for Liposuction	☐ Oily Skin	☐ Food Allergies
		OTHER:	
		☐ _____	

TREATMENT RECOMMENDATION:

Homeopathic Physician's Signature

Nutritionist's Signature

Master Esthetician's Signature

Massage Therapist's Signature

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Patient Skin Wellness Type

Patient Skin Wellness Type: ☐ Virgin Skin ☐ Healthy Skin: Ideal ☐ Abnormal Skin: Damaged

☐ Abnormal Skin: Injured

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Please evaluate for the following:

TREATMENTS:

- ☐ Dermis Stimulation
- ☐ Firming/Hydrating
- ☐ Anti-Oxidant/Vitamin Rich
- ☐ Epidermal Renewal
- ☐ Lymphatic Drainage
- ☐ Eye Treatment
- ☐ Scar Revision
- ☐ Body Treatment for Liposuction

SKIN CARE:

- ☐ Acne Treatment
- ☐ Anti-Inflammatory
- ☐ Facial Maintenance
- ☐ Acne
- ☐ Acne Scars
- ☐ Sun Protection
- ☐ Anti-Aging Products
- ☐ Oily Skin

NUTRITION:

- ☐ Weight Issues
- ☐ Hormonal Imbalances
- ☐ High Stress Levels
- ☐ Hair Loss
- ☐ Aching Joints/Muscles
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OTHER:

☐ _____

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Needs image

Functions

The integumentary system has multiple roles in homeostasis (stable equilibrium).

All body systems work in an interconnected manner to maintain the internal conditions essential to the function of the body. The skin has an important job of protecting the body and acts as the body's first line of defense against infection, temperature change and other challenges to homeostasis.

Functions include:

- Protect the body's internal living tissues and organs.
- Protect against invasion by infectious organisms. Maintain Skin barrier
- Protect the body from dehydration.
- Protect the body against abrupt changes in temperature.
- Help excrete waste materials through perspiration.
- Act as a receptor for touch, pressure, pain, heat, and cold.
- Protect the body against sunburns by secreting melanin.
- Generate vitamin D through exposure to ultraviolet light.
- Store water, fat, glucose, and vitamin D.
- Maintenance of the body form.
- Formation of new cells to repair minor injuries.
- Aid in physical examination as color of the skin may indicate many conditions: e.g. it becomes yellowish in jaundice.

Epidermal Cell Therapy

- Sensitive:
- During after care treatment
 - Pre-Post Op
 - Wound Healing
 - Recovery

Men

Age Maintenance

Cosmetic Labels

- Lost muscle tone
- Firmness texture
- Fine Lines
- Loss of Elasticity
- Menopause
- Radiance
- Adjusting Volume
- Suppleness and Hydration
- Pigmentation/Discoloration
- Cell Renewal
- Sign of Aging
- Look Younger
- Sun Damage
- Sagging
- Crows Feet
- Eye Lift
- Cell Repair
- Free Radical
- Damage



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- Acne Management
- Brightening
 - Lightening
 - Dullness
 - Oil Control Production
 - Breakout
 - Blackhead
 - Hydrating Skin without Build Up
 - Reduce Appearance of Scarring
 - Enlarge Pores

Cosmetic Labels

How to read cosmetic labels

- If product comes in a box ingredients will be on box not the product container
 - Front – explain what the classification of product is; drug, cosmetic or cosmeceutical
- Purpose of the product; intended use and effectiveness
- May highlight a special ingredient

Back of Product

All warning labels

Active ingredients (maximum concentration start first then to least concentration of the ingredients)

SECOND SKIN ANALYSIS: FITZPATRICK SCALE

Skin Type	Skin Color	Hair/Eye Color	Reaction to Sunlight	Ethnic Considerations
Skin Type I	White	Blond/Green	Always burns, freckles	English, Scottish
Skin Type II	White	Blond/Green or Blue	Burns, freckles, seldom tans	Northern European
Skin Type III	White	Blond or Brown/Blue or Brown	Tans after burns, may freckle	German
Skin Type IV	Brown	Brown/Brown	Tans, rarely burns or freckles	Mediterranean, Hispanic
Skin Type V	Dark Brown	Brown or Black/Brown	Tans easily, no burns or freckles	Asian, Indian
Skin Type VI	Black	Black/Brown or Black	Tans, never burns or freckles	Africans

Score	0	1	2	3	4
Eye color	Light blue, gray or green	Blue, gray or green	Blue	Dark brown	Brownish black
Natural hair color	Sandy red	Blond	Chestnut or dark blond	Dark brown	Black
Unexposed skin color	Reddish	Very pale	Pale with beige tint	Light brown	Dark Brown
Freckles (unexposed)	Many	Several	few	Incidental	None

GLOGAU CLASSIFICATION: Lines & Wrinkles • Deep Wrinkles • Superficial Lines • Crow's Feet • Expression Lines

Damage	Description	Characteristics	Treatment Protocol
Level one (mild)	No wrinkles.	Patients are young adults who may exhibit little to moderate sun-damage and discoloration. Wrinkles are non-existent.	Vitamin C 1x per week (chemical) Lactic Acid 2x per week Scrub 1x per week (manual)
Level two (moderate)	Wrinkles in motion.	Patients are adults who exhibit moderate sun-damage and increased discoloration. Mild lentigines usually found on face, hands and arms. Wrinkles around the mouth and eyes.	Retinol 20 - Vitamin A 1x per week (Allows deeper penetration)
Level three (advanced)	Wrinkles at rest.	Patients are senior adults who exhibit defined sun-damage and increasing discoloration. Capillary dilation appears as small red or purple clusters, often spiderly in appearance. Advanced wrinkling of eyes, forehead and mouth.	Retinol 50 or higher 1x per week
Level three (advanced)	Only wrinkles.	Patients are elderly adults, exhibiting critical sun-damage and discoloration, often with an unhealthy pale appearance. Skin malignancies are common, as are more pronounced lentigines. Wrinkling everywhere.	Retinol 100 1x per week (Need something to affect dermis)

SUN PROTECTION

Benefits:

- Sunscreens are crucial for sun protection.
- Sun damage to the skin from exposure to ultraviolet rays is a risk factor for skin cancer such as melanoma.

Precautions and Contraindications:

- As a general rule, babies 6 months of age or younger should not have sunscreen applied to their skin because their bodies may not be capable of tolerating the chemicals in sunscreens. Instead, they should be kept away from sun exposure.
- Everyone over 6 months of age should use a sunscreen regularly unless they and their doctors decide it would be better to protect the skin in other ways.

Pre-Procedure:

- To avoid sunburn, people should limit sun exposure during the peak hours of 10 AM to 3 PM, wear protective clothing, and use a sunscreen.
- The sunscreen should be applied at least a half hour before going outside to allow time for the sunscreen to soak in and take effect.
- Be sure to choose a sunscreen that is considered to be “Broad Spectrum,” as this will ensure protection against both UVA and UVB rays.

Procedure:

- As a general rule, sunscreen should be applied very liberally to clean skin. Anyone who skimps won't receive full protection.
- Sunscreen should be reapplied every 2–3 hours. Some research has shown that the best protection is achieved by application 15–30 minutes before exposure, followed by one reapplication 15–30 minutes after the sun exposure begins. Further reapplication is only necessary after activities such as swimming, sweating, and rubbing.

Post-Procedure:

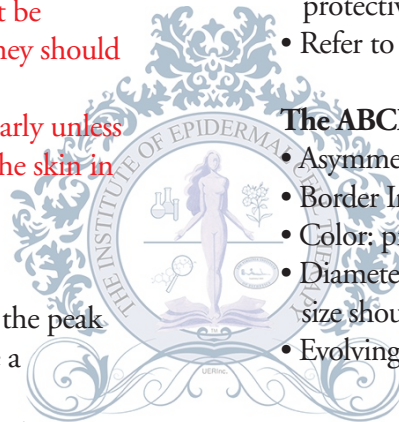
- Sunscreen should be reapplied at least every 2 hours when staying outdoors for a prolonged period, and after swimming, bathing, perspiring heavily, or drying off with a towel or handkerchief.
- Water- and perspiration-resistant sunscreens are available; however, even their protection will not last indefinitely.

Maintenance and Infection Control:

- An effective program also includes limiting sun exposure and wearing protective clothing.
- Refer to OSHA and your state board.

The ABCDE Rule for Early Detection of Skin Cancer:

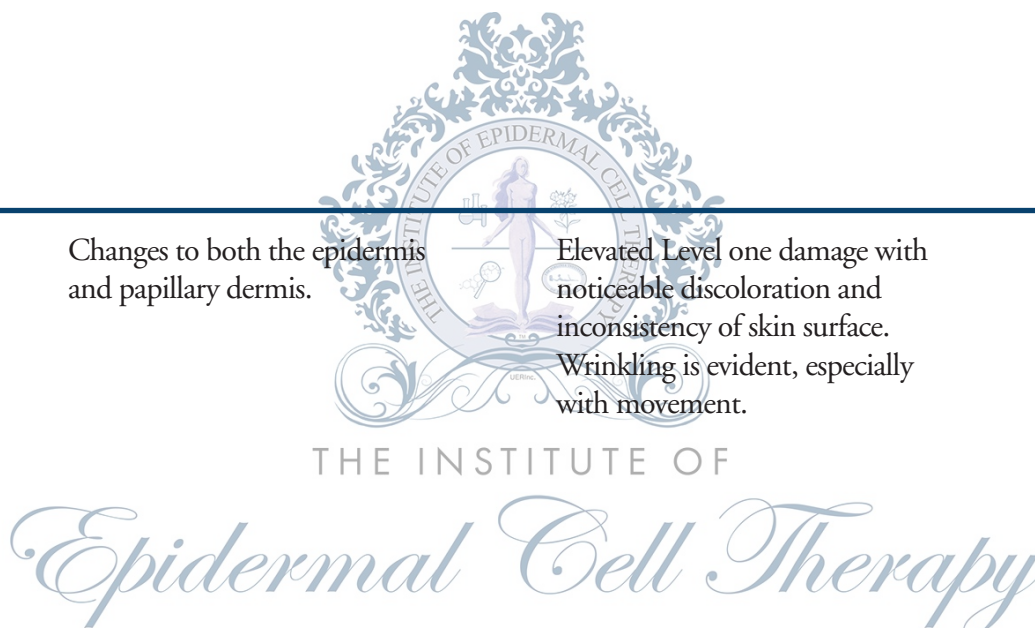
- Asymmetry: one side does not match the other side.
- Border Irregularity: edges are ragged, notched, or blurred.
- Color: pigmentation is not uniform.
- Diameter: Greater than 6.0 mm. Any sudden or continuing increase in size should be of specific concern.
- Evolving: any mole that is new or changing.



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RUBIN METHOD OF PHOTODAMAGE CLASSIFICATION: Pigmentation • Hyperpigmentation • Hypopigmentation

Level	Clinical Signs	Abnormalities	Explanation
Level one (least severe) Treatment Protocol 1x to 2x per week Kojic Acid (serum or cream)	Changes to the epidermis.	The increased thickness of the stratum corneum creates a drab and uneven skin surface with mild discoloration.	Depending upon the amount of sunlight exposure, the appearance of either freckles or small brown patches (commonly called “age spots” or lentigines, as they are typically seen in elderly people). Wrinkles, if any, are few.
Level two (more severe) Treatment Protocol 1x to 2x per week Kojilac Acid Vitamin C- For Exfoliation Lactic Acid – For Hydration Hydroquinone (2%) – Goes a little deeper for pigmentation because of Vitamin C	Changes to both the epidermis and papillary dermis.	Elevated Level one damage with noticeable discoloration and inconsistency of skin surface. Wrinkling is evident, especially with movement.	Pronounced wrinkles around the mouth and eyes. Increased freckling and lentigines. As the stratum corneum thickens and slowly becomes more nonuniform, skin texture begins to resemble crepe paper in texture.
Level three (most severe) Treatment Protocol 1x per week Hydroquinone (2%) Vitamin A pads (Exfoliation turns skin over) Retinols (Convert themselves to Retin-A in the skin), Retinoids	Changes to the epidermis, papillary dermis, and reticular dermis.	Sun-damaged, the pigmentation assumes a grey or yellow hue. Skin surface has a thickened, rough texture usually sprinkled with open comedones, especially in the cheek nose and forehead areas of the face.	Critical photodamage. Wrinkling is evident with or without movement. Skin surface is irregular and pitted, with intermittent peaks and valleys highlighting deep furrows. Hyperpigmentation and/or hypopigmentation is very common.



PROTOCOL DESIGN

Autumn: Prepare

Winter: Stimulate

Spring: Strengthen and Repair

Summer: Protect and Condition

Benefits:

- Determines what type of chemical to use.
- Determines length of treatment and amount of sessions needed.

Indications:

- When a chemical is needed.

Precautions:

- Accurate determination of chemical assessment to choose proper protocol.
- Never leave patient unattended.
- Make sure health history intake is accurate.

Pre-Procedure:

- Clean and glove hands according to Handwashing and Gloving skills.
- Determine the distribution of lesions. Where are they? All over?
- Determine the type of lesions. Primary or secondary?
- Determine the texture of lesions.
- Determine the shape of lesions.
- Determine the arrangement of lesions. Are they in a line? Clusters?
- Determine the history of the lesions. How long have they been there?

Procedure:

- Determine the category of the skin.

Virgin Skin

- Usually dull/Any skin type
- No active products/no procedures/no closed comedones
- Hypersensitive

- No lesions/new skin

Protocol: Come in 1x/month for deep cleansing.

Healthy Skin: Ideal

Protocol: One facial every four to six weeks.

- Basic issues; i.e. acne
- Maintenance plan relative to individual
- Could have had an aggressive procedure in the past like Retin-A.
- Basic Esthetics Skin Care: Focus on conditioning epidermis and treating stratum corneum.
- Goal: Maintain health of the skin

Abnormal Skin: Damaged

- Focusing on epidermis; hyper- and hypopigmentation, acne levels 1-3.
- Treating Epidermis and conditioning stratum corneum.
- Basic Esthetics Skin Care with some correction
- Goals:
 - Treat secondary lesions i.e. acne levels 1-3 and other skin disorders.
 - To soften texture resurfacing with peels
 - Treating conditions above Basic
 - Treating low levels of disorders (Levels 1-3)

Abnormal Skin: Injured

- Primary lesions (scar tissue)
- The skin is "Maxed out" i.e. lasers, skin that has had an overuse of products, sunburned.
- Corrective Skin Care - This skin can tolerate intense therapy like Idebenone because the skin is thicker.
- Goals:
 - Work with a physician to create results.
 - Master esthetics with a health care professional.
 - Use of LED to stimulate collagen and elastin. This will toughen the epidermis. Red light helps with broken capillaries and blue light also kills bacteria.
 - Treat secondary lesions (actinic keratosis) and degrees of burns.



- To take the skin back to virgin first, then to healthy. Protocol for this process is as follows:
 - Virgin – Deep Cleanse
 - Healthy – Add anti-aging ingredients
- Exceptions to protocol would be: diabetes, auto immune disorder, chemotherapy. You want to keep their skin virgin because they are not healthy individuals and they take longer to heal.

Post-Procedure:

- After you determine the skin category, design protocol per season.
- Determine what chemical to use for the treatment.
- Remove gloves according to Degloving skill.



NOTES:



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