



Institute Epidermal Cell Therapy Signature Facial

Basic Esthetics Treatment Notes

Lesson - Practical Performance State Board Requirements- Manual Facial Skin Consultation
Skin Consultation /Characteristics/Composition/ First Skin Analysis

Patient: _____ Date: _____
 Esthetician: _____

Pre-Treatment Notes

(Information collected from Confidential Patient Information and Patient At Home Protocol).

Analysis:

Magnifying Lamp

Analyze client's skin to determine skin type

Skin Type: Sebum level activity Scale

☐ Sebaceous Activity Present? No/Yes
 Low Medium High
 Location

Skin Type Classification (For Retail)

Normal Skin:
1. Appears to be functioning normally, is neither too dry nor oily.
2. Has some enlarged pores on the T-Zone, some blocked pores and very few comedones.
3. On the cheeks the pores are normal, no blocked pores and no comedones.
4. Usually free of blemishes that require extensive treatment.
5. Skin metabolism can be improved by stimulation through massage.
6. Regular care will assure that normal skin continues to function in a normal way.
7. The main objectives of the esthetician are to cleanse the skin of dead cells and remove impurities from the follicles.

Skin Consultation Composition with Magnifying Lamp

Week 3A - #204 Structure and Function of the Human Integumentary System - Skin Composition and Characteristics
 Week 3B - #212 First Analysis & Consultation - Skin Type & Characteristics



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Oily:

1. Oily skin is a hereditary condition that develops due to overactive sebaceous glands.
2. This activity is controlled by the androgen hormone.
3. Oily skin can be recognized by its shiny, thick appearance.
4. Pores are enlarged, with many blocked pores and comedones.
5. Skin is sallow in appearance and is more prone to pimples and blemishes because of its over-lubrication with excessive oil, but less prone to wrinkles and fine lines.
6. The oil also helps keep moisture in the skin from evaporating.

Dry:

1. Skin appears tight, dull in color.
2. Dry skin develops as a result of sebaceous gland under activity.
3. Skin dryness though hereditary like the skin oiliness, also results from the aging process.
4. As all body activities slow down, oil gland activity slows as well. Dry skin tends to be dehydrated.
5. Dry skin is characterized as very fine, overly delicate and thin.
6. Pores are almost invisible.
7. The skin tends to wrinkle easily and is often filled with tiny superficial lines.
8. As the person advances in years, the body's cell renewal process slows down and the cells are not replaced as quickly as before.
9. Massage can be very effective in stimulating skin metabolism.

Combination:

1. This skin is characterized by two or more different conditions.
2. The T-zone, which consists of the frontalis, nasalis, and mentalis, is oily, but the rest of the face is normal or even dry.
3. The condition must be treated separately or with products especially formulated for combination skin.
4. Skin types are hereditary and are the result of the oil glands functioning.
5. Skin types can be classified into four categories: Normal, oily, dry, and in most cases a combination of skin types, such as an oily T-Zone and normal zygomatic arches.
6. The notion that one person's skin can be oily and dry is more confusing in concept than reality. For example, when people describe the skin as being oily and suddenly being dry, they are referring to an oily skin type that is losing moisture.
7. Moisture can be lost because of excessive use of astringents, soaps and scrubs in an attempt to reduce the amount of oil secretion.
8. While the skin is an oily type, this dryness should be considered a skin condition and is properly referred to as dehydration, or lack of moisture, rather than oil.

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Skin Characteristic: Function

Visual/Elasticity Move the skin; touch it to see how it moves back. Good – 1 Poor – 2 Fair – 3 Bad - 4	Elasticity permits the body to move freely without danger of tearing or rupturing when we stretch or bend. This is due mainly to the network of elastin and collagen fibers found in the dermis. Elasticity gives the skin the flexibility to withstand any physical pressure that could puncture it or leave a portion of the body unprotected. Skin bounces back when lightly pinched; moisture level. Loss of elasticity.
Visual/Texture Rub Skin Is the skin slick? Thin/Medium/Thick	Skin has different degrees of thickness on different parts of the body. It is thin around the eyes and thick on the palms of the hands and soles of the feet. In general, a man's skin is thicker than a woman's. The skin has structural folds formed by movement and muscular contraction (i.e. wrinkles). The skin feels smooth because of hair growing on its surface. Is there new scarring? This allows determination of absorption of product or penetration. Signs of acne lesions or scars.
Temperature Control Extremes Use back of hand to determine differences in temperatures. Hot-Dilated Cold-Constrict	The skin controls the body's temperature by opening or closing its pores and regulating the secretion of sweat from its glands. Hot flashes cause bacteria to be more present; Antiseptic cleansers. If always cold: harder absorption; slower healing; products should lay on skin i.e. heavier. Pores are either dilated or constrict. When the pore or follicle openings are dilated this creates a pathway for bacteria and free radicals to get into the skin. This can cause different skin conditions.
Visual/Sensations Determining touch and facial movement of treatment Ask if sensitive to hot or cold.	The skin is the sensory organ with which we touch and feel the world. The nerves in the skin enable us to gather vital information about the environment for our survival in it. (Questions to ask); Is the client sensitive to hot or cold. What is the client's pain tolerance on a level of 1 – 10? Does the client experience sensitivity to smells?
Visual/Permeability Stretch skin to check for dehydration Ask is the skin slick?	The stratum corneum is a waterproof and water resistant barrier that does not allow harmful foreign bodies to penetrate. Keratin in the outer cells makes the skin impermeable. Texture of the stratum corneum; Thin, Medium, or Thick? Thicker, break it down (light exfoliation) smooth out to allow penetration. Ideal: medium texture. Thin: Only use hydration cream no exfoliation. If thin, build it up before treating using products formulated for sensitive skin. Laser or chemical scarring

Vocabulary/Language

- Actinic** - Damage or condition caused by sun exposure.

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2. Alipidic - Lack of oil or "lack of lipids." Describes skin that does not produce enough sebum, indicated by absence of visible pores.
3. Contraindications - Factors that prohibit a treatment due to a condition; treatments could cause harmful or negative side effects to those who have specific medical or skin conditions
4. Couperose skin - Redness; distended capillaries from weakening of the capillary walls.
5. Dehydration - Lack of water
6. Fitzpatrick Scale - Scale used to measure the skin type's ability to tolerate sun exposure.
7. Occlusive - Occlusive products are thick and lay on top of the skin to reduce transepidermal water loss (TEWL); helps hold in moisture, and protect the skin's top barrier layer
8. Skin Types Classification that describes a person's genetic skin type.
9. T-Zone Center area of the face; corresponds to the "T" shape formed by the forehead, nose, and chin
10. Visual/Elasticity - Elasticity permits the body to move freely without danger of tearing or rupturing when we stretch or bend. This is due mainly to the network of elastin and collagen fibers found in the dermis. Elasticity gives the skin the flexibility to withstand any physical pressure that could puncture it or leave a portion of the body unprotected. Skin bounces back when lightly pinched; moisture level. Loss of elasticity.
11. Visual/Texture - Skin has different degrees of thickness on different parts of the body. It is thin around the eyes and thick on the palms of the hands and soles of the feet. In general, a man's skin is thicker than a woman's. The skin has structural folds formed by movement and muscular contraction (i.e. wrinkles). The skin feels smooth because of hair growing on its surface. Is there new scarring? This allows determination of absorption of product or penetration. Signs of acne lesions or scars.
12. Temperature Control - The skin controls the body's temperature by opening or closing its pores and regulating the secretion of sweat from its glands. Hot flashes cause bacteria to be more present; Antiseptic cleansers. If always cold: harder absorption; slower healing; products should lay on skin i.e. heavier. Pores are either dilated or constrict. When the pore or follicle openings are dilated this creates a pathway for bacteria and free radicals to get into the skin. This can cause different skin conditions.
13. Visual/Sensations - The skin is the sensory organ with which we touch and feel the world. The nerves in the skin enable us to gather vital information about the environment for our survival in it. (Questions to ask); Is the client sensitive to hot or cold. What is the client's pain tolerance on a level of 1 – 10? Does the client experience sensitivity to smells?
14. Visual/Permeability - The stratum corneum is a waterproof and water resistant barrier that does not allow harmful foreign bodies to penetrate. Keratin in the outer cells makes the skin impermeable. Texture of the stratum corneum; Thin, Medium, or Thick? Thicker, break it down (light exfoliation) smooth out to allow penetration. Ideal: medium texture. Thin: Only use hydration cream no exfoliation. If thin, build it up before treating using products formulated for sensitive skin.
15. Laser or chemical scarring

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