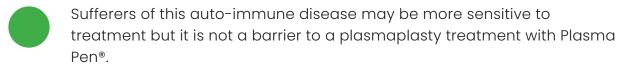
Contraindication – a condition which makes a particular treatment or procedure potentially inadvisable, to be performed with caution or not performed at all. A contraindication may be classed as relative or absolute.



* Or must proceed with extreme caution and/or Doctor's consent

ALOPECIA



ASPIRIN USAGE

The daily use of low-dose aspirin as a blood thinning medicine to help prevent heart attacks and strokes in people at high risk is relatively common. Since "aspirin therapy" can reduce the clumping action of platelets then the client may be more prone to bleeding and may bruise more easily. Please be aware of this.

ASTHMA

Regular use of an inhaler can cause thinning of the skin and increased vascularity. These clients bleed more easily and sometimes bruise. Clients with asthma often have more sensitive skin and they will take longer to heal.

CONTACT LENSES

Contact lenses must be removed before any treatment close to the eye. Clients must not use contact lenses until all the carbon crusts have fallen off. The primary reason for this is due to the swelling many clients will experience which can make it difficult to remove or add their contact lenses. They will also want to avoid the potential of a tiny carbon crust coming between the lens and their eye which could be painful and possibly cause a corneal abrasion. The client should bring glasses with them to their appointment and plan to use them for the next few days.

DRY EYE

This is a condition where the tear duct does not function ordinarily, requiring the client to use drops for lubrication. Clients should have their drops on hand to use if needed during a Plasma Pen® treatment.

GLAUCOMA

Clients may feel slightly more discomfort during an eye procedure than others.

HAY FEVER

If the client's eyes are red, watering, puffy and/or if their skin is inflamed or red, they should wait until these symptoms have passed (if performing an eye procedure). Consider pollen counts and the time of day when making the appointment as pollen counts are often lower in the afternoon.

THYROID PROBLEMS

Clients with an under-active thyroid may experience slightly longer healing time after treatment but should otherwise present no problem. Thyroxin is often taken for thyroid disorders which can make the skin more sensitive.

VISUAL IMPAIRMENT

Client must bring an advocate to their appointment who can give consent on their behalf and who can sign the necessary forms.

ACNE & STEROID CREAM (USE OF)

Active outbreaks must be worked around. Acne scarring can be addressed and treated as necessary. Be aware that using steroid cream for acne (such as Roaccutane and Accutane) can thin the skin considerably and plasma treatment should not be carried out on anyone using such creams until the client is 6 months clear of the last tablet taken. The client should not resume such medication until 6 weeks post-treatment.

ANEMIA

Anemia is a condition characterized by a deficiency of the hemoglobin content of red blood cells. These clients will bleed and bruise more easily and will take longer to heal. Clients with anemia should understand that delayed/extended healing is a possibility.

BLEPHAROPLASTY - SURGICAL

If a client has had surgical blepharoplasty (eyelid surgery) or any kind of surgery in the infraorbital/periorbital area then they must wait 3 months before treating them with Plasma Pen® fibroblasting (and longer if there is still pronounced redness in the area).

BOTOX

It is recommended to wait at least 21 days after Botox (or other neurotoxins) have been injected before commencing with a Plasma Pen® treatment. It's preferable to perform a Plasma Pen® treatment prior to Botox being administered, or when Botox is due for a touchup, as this allows a clearer view of how client's skin is when it is naturally positioned.

BROW/ FACELIFT/ FOREHEAD PROCEDURE

3 months should pass before a client is treated with a Plasma Pen® fibroblasting treatment if the client has had a surgical brow/forehead/facelift procedure.

BRUISE/ BLEED EASILY

This could indicate an underlying health problem. This client may be treated with Plasma Pen® fibroblasting, but client should understand that if they bruise/bleed easily then they may take longer to heal. If bruising occurs it should pass within 4 to 7 days.

CANCER

Cancer arises from the abnormal and uncontrollable division of cells that invade and destroy the surrounding tissue. If a client is undergoing radiation or chemotherapy then the client must wait 6 months before treatment with Plasma Pen®. They should check with their oncologist to find out if their blood count is suitable for them to receive treatment.

CATARACTS

Cataracts are cloudy areas of the lens inside the eye causing visual impairment. Please bring a written doctor's/optician's consent if treating the eye area.

CORNEAL ABRASION

Usually caused by a trauma to the eye's surface. If a client has an existing corneal abrasion they should delay treatment in this area until they are fully recovered.

DIABETICS

Diabetics have a tendency to both bleed and bruise easily depending on the severity of their diabetes. They may find treatment more uncomfortable than usual and the healing process may be delayed. Clients with severe diabetics and those who are insulin dependent will have a higher risk of prolonged bleeding and bruising. Clients may also need to wait longer then 12 weeks between Plasma Pen® treatments.

EPILEPSY

Epilepsy is a disorder characterized by seizures in which the patient suffers muscular spasms and may lose consciousness. If a client has not had an episode in 2 years then they may have a Plasma Pen® appointment. Client should know that there is a possibility of the treatment triggering a seizure, since all seizure triggers are unknown. Client must also sign a consent form. The client must supply written medical consent from their doctor and bring an adult with them to their appointment.

EYE SURGERY - LASER

If the client has had a laser procedure (Lasik) performed on the eye to correct or improve vision, they should wait 8-12 weeks post-surgery before having a Plasma Pen® treatment (unless medical consent has been given from their doctor/optometrist/surgeon).

FEVER/COMMON VIRAL INFECTION (cold or flu)

Plasma Pen® treatment should be delayed if the client is experiencing fever and/or a common viral infection until they have fully recovered.

HERPES SIMPLEX

Herpes Simplex is a viral infection commonly referred to as a cold sore, sun blister, or fever blister – usually around the mouth. If a client has ever had a cold sore then they are more likely to have an outbreak after a Plasma Pen® treatment in that area. Client must ask their doctor for a prescription for Zovirax (acyclovir). They should take medication 5 days before a Plasma Pen® treatment and 5 days after treatment. None of this offers a guarantee that they will not subsequently have an outbreak.

HIGH BLOOD PRESSURE

A condition in which the force of the blood against the arterial walls is too high. Treatment could potentially cause clients to be anxious which could, feasibly, result in higher blood pressure. If client has severe high blood pressure issues then they should first obtain medical consent from their doctor or specialist.

HYSTERECTOMIES & IMBALANCED HORMONE LEVELS

A hysterectomy is an operation to remove the uterus. Due to the subsequent hormonal changes; the risk of post-inflammatory hyperpigmentation (PIH) and conditions such as melasma and periorbital hyperpigmentation (POH) are much higher for at least 6 - 9 months after a hysterectomy. In fact, any clients whose progesterone, estrogen, and testosterone levels are out of balance are at greater risk of pigmentation, especially those who have changed contraception recently; who are pre or post menopausal; who have miscarried or had a child recently; and/or have had a hysterectomy. These clients will need to have their hormones stabilized via medication for at least 6-9 months before a Plasma Pen® treatment should be considered and only then with consent from their doctor. Hyperpigmentation can be treated after-the-fact with very effective fading products.

INJECTABLE FILLERS

It is recommended to wait at least 21 days after the filler has been administered before delivering a plasma procedure in the same treatment area. Injectable fillers typically take this long to "settle".

INSULIN (USE OF)

Use of insulin indicates that the client has diabetes which means that they should be treated with caution, as severe diabetics and those who are insulin dependent will have a higher risk of prolonged bleeding and bruising. You may also need to wait longer then 12 weeks between plasma treatments.

KIDNEY & LIVER DISEASE

Disease of the liver and kidneys can affect healing after a Plasma Pen® treatment. Client should get consent from their doctor or specialist if they have kidney or liver disease before receiving a Plasma Pen® treatment.

MELASMA

Melasma can be safely (and very successfully) treated with a Plasma Pen® treatment with a spray-shading Plasma Pen® technique as well as the usual tightening and lifting Plasma Pen® treatment.

MENTAL WELLBEING

What are the client's motivation for receiving a Plasma Pen® treatment? Clients with conditions like body dysmorphic disorder (BDD) - a mental health condition where a person spends a lot of time worrying about flaws in their appearance - should not be treated. A client presenting as drunk or under the influence of other substances is an absolute contraindication and will not be treated and will forfeit their deposit.

MITRAL VALVE PROLAPSE

The mitral valve in the heart occasionally malfunctions and require prophylactic antibiotics to prevent an infection. If a client needs to take antibiotics when they visit their dentist then they will need to do the same prior to any Plasma Pen® treatment.

ORGAN TRANSPLANT

If a client has had an organ transplant, especially in the recent past, they will likely be on (or have been on) a significant battery of medications such as corticosteroids and immunosuppressive medication. They will also be more prone to vascular conditions. In order to proceed with a Plasma Pen® treatment, doctor's approval is required.

SEXUALLY TRANSMITTED DISEASES

Client should reveal that they have an STD so that the technician can take extra care to avoid the spread of infection.

SKIN DISORDERS (E.G. PSORIASIS, ECZEMA, DERMATITIS)

Skin disorders can make the skin dry and a Plasma Pen® treatment more uncomfortable since the skin is usually thinner and more sensitive.

The client should not be treated in a area with any of these conditions.

SCARS - ATROPHIC AND HYPERTROPHIC

Atrophic scars are indented or depressed scars that look like valleys or holes in the skin. Clients may have a Plasma Pen® treatment around these areas only if the scar is at least 6 months old. Hypertrophic scars are raised above the surface but do not extend beyond the margins of the tissue damage. The damage remains within the perimeter of the original wound and flattens over time. In order for hypertrophic scars to be treated, they must be at least 6 months old and not be purple/pink but instead pink/white.

SHINGLES

This is an immune system virus that is part of the herpes family. Client should leave a 6 month gap between the end of their last outbreak of the virus and a Plasma Pen® procedure.

STYES/ CONJUNCTIVITIS OR FREQUENT EYE INFECTIONS

If a client suffers regularly from styes, conjunctivitis and/or frequent eye infections then it is imperative that the eye has had at least 6 weeks to heal from last infection. Client must confirm that they've had the appropriate treatment and should be aware that a Plasma Pen® treatment in that area may be aggravating and cause the condition to reoccur. If concerned, the client should seek consent from their doctor.

ACCUTANE/ROACCUTANE (USE OF)

As covered in acne; these steroid creams can thin the skin considerably and a Plasma Pen® treatment **may not** be carried out until the client is 6 months clear of their last tablet. They may resume medication 6 weeks after their Plasma Pen® treatment.

ANESTHETIC ALLERGY

A reaction to an anesthetic can be due to the base or preparation that the anesthetic is mixed with such as the cream or gel. Patch testing several different types of anesthetic could therefore determine whether this is the case. If the client is allergic to the "caine" used in anesthetics, then it will almost certainly be the case that they will also be allergic to the topical anesthetic used for a Plasma Pen® treatment and will not be able to have treatment with a topical anesthetic. The client can opt to have a Plasma Pen® treatment without the use of any anesthetic and use ice instead. However, it is highly suggested that the client is "patch tested for pain" with just the use of ice, and the client's tolerance level established. Only small areas at a time will be treated with a Plasma Pen® and this method.

ANTABUSE MEDICATION (USE OF)

Antabuse is generally used with people who suffer from chronic alcoholism. Antabuse (disulfiram) blocks an enzyme that's involved in processing alcohol. A Plasma Pen® treatment **should not** be carried out under any circumstance until the client is 6 months clear of the last tablet taken, and resuming medication should not then happen until 6 weeks after a Plasma Pen® treatment. The use of antabuse medication in itself potentially points to an underlying psychological condition, and anxiety, depression, and other mental health problems could all be at play. A Plasma Pen® treatment may not be suitable.

ANTI-COAGULANT MEDICATIONS (USE OF)

Anti-coagulants, aka "blood-thinners", interrupt blood clotting formation and are given to those at high-risk of developing serious conditions such as strokes and heart attacks. Anti-coagulant drugs (Warfarin, Ivaroxaban/Xarelto, Dabigatran/Pradaxa, Apixaban/Eliquis, Edoxaban/ Lixiana, and others) are all major contraindications for a Plasma Pen® treatment. Anyone on anti-coagulant medication cannot be treated with a Plasma Pen®, because the healing of surgical and traumatic wounds, (which includes the micro-trauma we cause with a Plasma Pen® treatment) specifically and intentionally, involves the clotting process, inflammation, cell proliferation, and tissue remodeling. Anticoagulants slow and delay this process, and the delayed healing of traumatic wounds can cause persistent bleeding, increased wound seepage, and in some cases, failed wound closure which can lead to infection and additional complications. Other drugs which can slow wound healing are cytotoxic antineoplastic and immunosuppressive agents, corticosteroids, nonsteroidal anti-inflammatory drugs (NSAIDs), and anti-coagulants as stated. If the client lists any of these drugs on their consultation form, then the client must not have a Plasma Pen® treatment.

BIRTH MARKS & PORT WINE STAINS

These areas must **never** be treated with a Plasma Pen®. No exceptions.

BREAST FEEDING

Clients who are breast feeding may not have a Plasma Pen® treatment. Anyone who is breast-feeding will likely be experiencing a hormonal imbalance and this could cause hyperpigmentation issues. After childbirth a client may only have a Plasma Pen® treatment after their hormones have stabilized.

HEMOPHILIA

Hemophilia is a genetic disorder which causes a lack of clotting in the blood. While hemophiliacs may not necessarily bleed more intensely, they will bleed for longer than those without the disorder, they will bruise more easily, and there will be an increased risk of bleeding inside joints which could result in permanent damage. A person with hemophilia must never be treated with a Plasma Pen®. No exceptions.

HEPATITIS B and HEPATITIS C

This is inflammation of the liver. A person with either hepatitis B or hepatitis C must never have a Plasma Pen® treatment. No exceptions.

HIV/AIDS

A person with AIDS **must never** have a Plasma Pen® treatment due to their highly weakened immune system.

HYPERPIGMENTATION

This is an over-production of melanin which has permanently damaged the surface of the skin. It presents as darker patches of skin. Prior to a Plasma Pen® treatment, the client and plasmologist should discuss the pretreatment of the hyperpigmented for a few months with specific products to fade the area first. After the Plasma Pen® treatment, additional procedures and precautions will be necessary to address any post-inflammatory hyperpigmentation (PIH) resulting after the Plasma Pen® treatment. The client **must commit** to specific, and possibly extensive, aftercare in order for the best healing results. More than one treatment may be necessary.

LUPUS

Lupus is an auto-immune disease where the body's immune system becomes hyperactive and attacks normal, healthy tissue. This results in symptoms such as inflammation, swelling, and damage to joints, skin, and internal organs. A person with lupus **must never** have a Plasma Pen® treatment.

PACEMAKERS, PROSTHETIC IMPLANTS, PLATES & PINS

A person with a pacemaker **must never** have a Plasma Pen® treatment. A prosthetic implant, plate, or pin cannot be anywhere near the area that is desired to be treated with a Plasma Pen®.

PREGNANCY

A pregnant client **cannot** have a Plasma Pen® treatment. Even after childbirth, the client may not have a treatment until her hormones have stabilized (and when she is no longer nursing), which is typically 6 to 9 months post childbirth.

RETINAL DETACHMENT

This is where the retina peels away from the underlying layer of support tissue. If a client has had retinal detachment then they **may not** proceed with a Plasma Pen® treatment in this area without consent from their ophthalmic surgeon. If client is recovering from retinal detachment surgery then they should wait until 3 months after their surgery before a Plasma Pen® treatment in the eye area, and of course, only with the consent of their surgeon or optometrist.

SCAR - KELOID

A keloid scar **cannot** be treated with a Plasma Pen®. A keloid scar is generally purple/dark pink, extends beyond the margins of tissue damage, is raised, and continues to grow.

TRICHOTILLOMANIA

This is a condition where a person feels compelled to pull out their hair. A person diagnosed with trichotillomania is generally more prone to picking during healing which could compromise their results and cause infection. A person with this diagnosis **should not** have a Plasma Pen® treatment.