Profound Matrix®

Quick Reference Guide

BEFORE EACH OF THE TREATMENTS

- Complete or update the patient's medical history and physical.
- Exclude from treating patients presenting with any contraindications for treatment.
- Determine why the patient is seeking treatment and what their expectations are.
- Take standardized photographs before and after each treatment session.
- Inform the patient about the treatment protocol, typical treatment results, and anticipated skin responses and side effects.
- Instruct the patient about any possible adverse effects and ensure the contraindications have been reviewed and informed consent obtained.
- Advise the patient to discontinue topical skin irritants ~3 5 days prior to treatment, or longer as per provider discretion.
- Instruct the patient to avoid sun exposure or intentional skin tanning. A high-factor sunblock of at least 30 SPF should be used before and after treatment, and during the entire treatment course.

Combined Facial Treatment

If both dermal remodeling and textural improvement is desired, a "combined" facial treatment using the Sublime® and Sublative™ RF applicators can be considered, as per provider discretion and when indicated. During the same treatment session, perform treatment with the Sublime applicator first, clean and dry the skin, and then perform treatment with the Sublative RF applicator.

SUBLIME® APPLICATOR

Treatment Parameters¹

Select the treatment parameters according to the following table:

SUBLIME APPLICATOR					
Fitzpatrick Skin Type	RF Energy Density for Single or Double Sessions [J/cm³]	RF Energy Density for Multiple Sessions [J/cm³]			
Light (I-III)	1Hz: 140-160 2Hz: 80-90	1Hz: 100-120 2Hz: 70-80			
Dark (IV-VI)	1Hz: 90-100 2Hz: 70-80	1Hz: 80-100 2Hz: 60-70			

¹ Settings are only general guidelines and should be adjusted according to individual responses to test spots and subject tolerability. At higher energy levels greater than 100 J/cm³, the Sublime applicator is limited to Fitzpatrick Skin Types (FST) I-IV. If treating at higher energy levels greater than 100 J/cm³ for FST IV is indicated, increase gradually and based on skin response and patient tolerance. On bony or thin-skinned areas switch to Sensitive Mode. Can select Auto Repeat Mode for flat and fleshy areas such as the cheek/jowl.

Pre-Treatment

- Applicator cleaning: before and after each treatment session, clean the Sublime applicator and distal end (electrode tip) using 70% isopropyl alcohol.
- Shave (if required) and clean the treatment area. There should be no lotion, make-up, perfume, powder or bath/shower oil present on the skin in the area to be treated. Before treatment, thoroughly wash the treatment area with a skin-suitable cleanser and dry.
- Observe the patient when sitting up to assess areas of wrinkles to treat.
 Mark vector zones with a skin-suitable white pencil as shown in Figure 1.
- Apply a ~2mm layer of conductive gel to the treatment area and reapply when necessary.
- Fit the patient with appropriate protective eyewear.
- Areas of dental crowns, caps, braces, or other metal dental implants may be
 more sensitive to treatment and the clinician should use dental rolls, gauze or
 a tongue depressor to isolate the area and make the treatment more comfortable.



Figure 1: Sublime Treatment Vector Zones

Applicator Placement

Place the applicator perpendicular to the skin with slight pressure ensuring that both RF electrodes have and remain in complete contact with the skin.

Sublime Test Spot

A small test spot should be performed on an inconspicuous site of the treatment area prior to the first session. Wait several minutes and assess the skin's response. This will assist in determining if the patient can tolerate the treatment without developing adverse effects, although it is not conclusive. For this reason, ongoing skin assessment during treatment is recommended. In addition, it is advisable to perform a test spot whenever changes are present.

Sublime Treatment Procedure

- On bony or thin-skinned areas switch to Sensitive Mode.
- Select Auto Repeat Mode button (Auto 1 Hz or Auto 2 Hz) for flat and fleshy areas such as the cheek. For bony contours, thin-skinned, and/or sensitive areas such as around the eyes, select Auto Repeat button to OFF.
- Treat vector zones as necessary, always start with **Zone 1**, which is the most important zone for most people.
- Position the Sublime applicator tip perpendicular to the skin with slight pressure, keeping both
 RF electrodes in full contact with the skins surface during each pulse. Emit pulses keeping the RF
 electrodes parallel to the direction of treatment, so that the cooled electrodes are cooling the skin as
 you glide.
- Treat each vector zone separately, **overlapping 50%** between pulses, and continue treatment until the desired endpoint is achieved. On average and as based on skin assessment, patient tolerance, and/or patient report of a strong heat sensation, perform approximately 150 200 pulses for **vector zones 1** and **2**; and approximately 100-150 pulses for **vector zones 3** and **4**.

- Press the trigger to activate the applicator only when the applicator's tip is in full contact with the skin and keep the applicator in complete contact with the skin surface at all times when pulsing during treatment.
- **End-Point:** Redness (erythema), evaluation of pulse total per treatment area, and patient tolerance to treatment.
- In case of excessive discomfort or erythema, reduce the **RF energy level**. You may also move to another vector zone and return to the previous zone when the heat and discomfort subsides. Gauge this according to patient tolerance and skin assessment.
- Be attentive to treatment technique and keep the applicator tip in motion; do not stack pulses!
- Perform treatment with a similar number of pulses on the other side of the face.

Sublime Post-Treatment Care

- Clean off the gel once treatment in all areas is completed. If required, cool the treated area if there is excessive erythema, edema, and/or reported patient discomfort.
- Sunblock (at least 30 SPF) should be applied immediately after treatment.

Sublime Treatment Protocol

- The number of treatment sessions depends on the individual patient and the treatment parameters used. Typically, high energy treatments (1Hz > 120J/cm³) require 1 3 sessions every 5 7 weeks.
 Lower energy treatments (1Hz < 120 J/cm³) require 3 5 sessions (multiple sessions) every 4 6 weeks.
- One touch-up session may be needed every ~6 months, according to the individual's response, goals of treatment, and due to natural processes of aging.

SUBLATIVETM RF APPLICATOR

Treatment Parameters¹

Select the treatment parameters according to the following table:

SUBLATIVE RF APPLICATOR					
Low Impact [mJ/Pin]	Medium Impact [mJ/Pin]	High Impact [mJ/Pin]			
10-30	35-65	70-100			

¹ Set the treatment parameters and energy level (mJ/Pin) according to FST, severity of the baseline condition, treatment area, and bone proximity. At higher energy levels, greater than 62 mJ/pin, the Sublative RF applicator is limited to FST I-IV. RF energy levels should be reduced by 20% (by selecting Sensitive Mode) when treating on bony and thin-skin areas, and according to FST. When treating the neck, do not exceed 30 mJ/pin with the Standard 64 Sublative iD tip and 25 mJ/pin with the Focal 44 tip. When treating the periorbital area, do not exceed 40 mJ/pin.

Sublative RF Pre-Treatment

- Shave any hair in the treatment area, if required.
- Skin should be completely clean. There should be no lotion, make-up, perfume, powder or bath/shower oil present on the skin in the area to be treated.
- If applicable, apply a topical anesthetic on the entire treatment area. Use the anesthetic according to manufacturer guidelines. Post anesthesia wipe off the anesthetic with a dry gauze pad, and thoroughly wash the skin with cleanser and lukewarm water, and dry. Ensure that all the anesthetic has been removed and that the skin is completely dry before commencing treatment.
- No lotion, gel or coupling medium should be used during treatment. Thoroughly wash the treatment area with skin-suitable antiseptic cleanser and dry.
- Applicator cleaning and disinfection: Before and after each treatment session, the body of the
 applicator should be cleaned to remove any visible soil or debris with a soft, damp (not soaked),
 non-abrasive cloth can be used for cleaning. After cleaning, ensure the entire surface of the Sublative
 RF applicator is disinfected using 70% or higher isopropyl alcohol-based solution or equivalent, noncorrosive disinfectant solution. Ensure that the entire surface of the applicator is disinfected. Ensure
 that it is dry before beginning the treatment.
- Open the sealed, sterile, single-use Sublative iD tip packet; connect the tip to the distal port of the applicator with the "T" symbol on the tip aligned with the top of the applicator, and ensure that the tip is secured in place.
- Each tip is designated for the treatment of one patient treatment only to prevent cross-contamination.
- Check the integrity of the Sublative iD tip's electrode-pins; ensure that they are intact. Do not use the Sublative iD tip if the electrodes or the surrounding "frame" electrodes are missing.

Sublative RF Treatment Procedure and Tips

- Ensure skin is completely clean and dry during the entire treatment. If skin moistens during treatment (i.e., perspiration, etc.) re-wipe the skin with a gauze pad and continue treatment.
- Set treatment parameters and energy level (mJ/Pin) according to the FST, severity of the baseline condition, treatment area, bone proximity, etc.
- For the **64-pin tip, use 10-30 mJ/pin for mild impact** (minor ablation accompanied by some coagulation and mild-focal heating), **35-65 mJ/pin for moderate impact** (mild ablation accompanied by coagulation and moderate heating), and **70-100 mJ/pin for high impact** (moderate ablation accompanied by coagulation and increased-residual heating).
- For the 44-pin tip, use triple passes for low energy (10-30 mJ/pin) and 2 3 passes for moderate energy (35 65 mJ/pin). Each pass usually contains about 20 25 pulses when treating perioral and periorbital areas.
- Place the applicator on the skin with the tip perpendicular to the skin's surface and in full contact with it.
- Perform several low energy test pulses in an inconspicuous area; if skin response and patient's tolerance allow – consider gradually increasing treatment parameters.
- Emit a pulse by pressing the applicator's trigger. Move the applicator to an adjacent spot on the skin overlapping by ~50%, emit another pulse.
- Begin treatment with conservative parameters on a small area. Emit 5 7 pulses on soft tissue (e.g., preauricular) and assess the feedback: in case of low impedance ORANGE pulses wipe the skin with isopropyl alcohol or other skin-suitable degreasing agent and wait five minutes. In case of RED pulses clean the tip and re-pulse ensuring full contact of the tip with the skin.

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- During treatment, every 5 15 pulses (for high energies every 5 pulses) or when required (high frequency of red pulses), clean the tip with a wet gauze (with 70% isopropyl alcohol), then with a dry gauze pad and check that the electrode-pins are free of tissue debris (may appear as darkening of the electrodes).
- Ensure full contact of the tip with the skin with every pulse. If treating wrinkles stretch the skin for full contact. If treating contoured areas (e.g. the forehead), use gentle pinching for full contact.
- Never treat inside the vermilion border and the orbital rim.
- Examine the treated area. The immediate responses, indicative of the desired endpoint, are erythema and edema in the shape of the tip imprint. This usually appears 1 2 minutes after pulsing and reaches its peak within 30 minutes. It should be noted that erythema may not be easily noticeable in darker skin types, so the edema may be more prominent in these patients. Perform additional pulses on areas that do not show the desired endpoint response.
- If untreated patches of skin are apparent, re-treat those patches.
- Assess the skin response. Apply an additional pass over the entire face if the skin response allows, and in consideration of goals of care. In specific areas which require special attention, (e.g., deep acne scars), consider an additional one-to-two passes after the initial full-face pass.
 - Combined treatment using the 64- and 44-pin tips for enhanced treatment results: with one pass, treat the full face with the 64-pin tip. Then treat specific areas requiring special attention and subareas (e.g., deep acne scars and perioral area) with the 44-pin tip.
- When treating the periorbital area, always be certain to direct the applicator's tip away from the orbital cavity and ensure that it is placed outside of the orbital rim. Do not exceed 40 mJ/pin.

Sublative RF Post-Treatment Care

- Post-procedure topicals may be applied to the treatment area per practitioners' discretion.
- If post-treatment cooling is desired, you may cool the treated area with a clinical air-cooling device or cool compress (not frozen ice pack).
- Transient skin erythema, edema, heat or tingling sensations may last up to several hours after treatment.
- Tiny scabs (pinpoint crusts) of less than 1 mm diameter will usually form 1 3 days post-treatment and may remain for several days. Do not pick, scratch, or disturb the crusts as they heal. Crusts will typically slough off naturally as the treated area heals.
- Blistered or ulcerated skin can be treated with a prescribed antibiotic ointment or burn treatment protocol as per physician's discretion.
- Following treatment, care should be taken to prevent trauma to the treated areas. Avoid hot baths, massage, skin irritants, etc. The skin should be kept clean to avoid contamination or infection. Any mechanical or thermal damage to the area must be avoided.
- The patient should use a high-factor sunblock (at least 30 SPF) and protect the treated area from sunlight during the entire course of treatment and for at least one month after.
- Apply provider choice of healing topical to the treated areas as per standard medical procedure. The treated areas should be kept as hydrated as possible throughout the course of healing.
- Patients should be advised to contact their provider if they have any concerns about how their skin is responding to treatment or is healing.

Sublative RF Treatment Protocol

- The number of treatment sessions depends on the individual patient and treatment parameters. Typically, higher energy treatments (>=70 mJ/pin) require 1 2 sessions every 5 7 weeks. Lower energy treatments (<70 mJ/pin) require 3 5 sessions every 4 6 weeks.
- One maintenance session is recommended every ~6 months, according to individual response.

MATRIX PRO® APPLICATOR*

*The Treatment Procedure recommendations are based upon clinical experience, physician knowledge, and study data published in peer-reviewed literature. The recommendations are not intended to be a substitute for professional medical advice, diagnosis, or treatment. Treatment considerations are under the discretion of the qualified licensed healthcare professional. Templated facial avatar within the Matrix Pro Parameter Table is for treatment guidance only and does not appear on system GUI.

Treatment Parameters

Drag a Pin and place it on the intended treatment area on the Matrix Pro Body Avatar shown in Figure 2. Set the treatment parameters according to the FST, skin condition, skin thickness, treatment area, bone proximity and test-spot results:

- For each area define a number of pulse depths (1, 2 or 3), the depth of the pulse (0.8 3.5 mm) and energy (0.5 4 J). The recommended energy is 0.5 2 J; however, the user can adjust it according to tissue response and other patient-specific factors.
- Skin thickness varies with different patients and anatomical areas; always verify that the number of pulse depths and energies selected are compatible for the specific anatomical location.
 - Cartridge functionality may be significantly degraded if treatment depth reaches dense tissues and/or bony structures.
- On bony and thin skin areas, do not treat deeper than 1.0 1.8 mm.
- The maximum energy for depths 0.8 1.5 mm is 2.0 J.
 - For FST IV and above, and individuals with dermal pigment, to mitigate inflammation at DEJ, proceed with caution: maximum energy for depths 0.8 - 1.4 mm is 1.0 J.

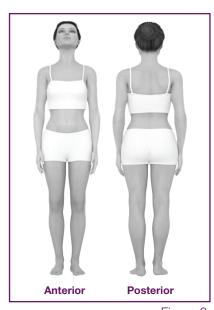


Figure 2: Matrix Pro Treatment Body Avatar

- **Depths >2.5 mm** are for treatment of skin that is **very thick** and when targeting subcutaneous tissues and may result in undesired fat loss or other adverse effects if not used appropriately.
- Treatment depth must not reach dense tissues, such as bone or cartilage, and **do not treat skin** that overlies vessels and nerves to avoid damage to critical structures (e.g., angular artery and nerves along the jawline) which could degrade the function of the device and result in adverse effects.
- Never treat inside the vermilion border and the orbital rim.

Select the treatment parameters according to the following table:

SKIN DEPTH TARGET		WRINKLES LOCATION	# OF DEPTHS	DEPTH (mm)	RF ENERGY (J)	GUI†	
	SUPERFICIAL Epdermis > Papillary Dermis		Upper & Lower Lid ^a Neck	1	1.0 – 1.6	0.5 - 1.5	Depth 1.0-1.8 0.8 0.8 0.8
			Forehead Lateral Canthal Lines Nose		1.0 – 1.8		
		000000	Glabella Upper Cheek Chin		1.2 – 1.8		
		Perioral Perioral Folds Mandible Lower Cheek ^b	1-2	1.2 – 2.4	1.0 - 2.0	Depth 13 A 1.2-1.7 0.8 III	
		Lower Lid + Excess Malar SubQ Tissue		1.2 – 2.5	0.5 - 2.0		
	DEEP Papillary >Reticular Dermis > SubQ	Jowls + Excess SubQ Tissue	2-3	1.2 - 3.0	1.0 – 3.0°	Depth 33 A 2.0-2.7 1.2-1.6 Y 33 A 4.3 A 4.	
		Submentum		1.2 – 3.5	1.0 – 4.0°		

a. Lid skin overlying orbital ridge and treated outside of orbital rim.

Tissue Impedance Feedback

During treatment, tissue impedance feedback is provided to guide users in performing treatment and to adjust technique when needed for the desired clinical effect. For each pulse delivered and at each depth selected, start and end impedance values (measured in ohms (Ω)), should be assessed in addition to the skin response.

b. Fleshy areas that lack stable structural support (e.g., lower cheek overlying buccal cavity), modify technique by ensuring firm backing and consider increasing depth by 0.1 – 0.2 mm to ensure intended depth is treated.

c. Higher energies (e.g., 3.0 – 4.0 J) recommended to be used only in deepest skin layers &/or SubQ tissues.

[†] Sample treatment parameter value ranges only. Parameter value ranges do not appear on system GUI.

Impedance Monitoring					
Impedance Feedback Type		Considerations	Treatment Guidance		
Standard Impedance (Ω) 130 100	Greater start impedance value followed by a LOWER END impedance value.	Changes between start and end impedance values may have dependence with energy delivered. > Heat produced by RF energy can impact impedance values observed at subsequent treatment depths (1,2,3).	Continue to assess impedance values and tissue responses during treatment. If new impedance value trend is observed, consider treatment related variances and adjust parameters and/or technique accordingly.		
Irregular Impedance (Ω) 1600	Lower start impedance value followed by a GREATER END impedance value.	End impedance value unusually high. May imply needles not properly inserted from start and with partial tissue contact. Can be observed during shallow insertions. Can be observed during deep insertions when needles are in SubQ tissue!	Ensure proper technique to avoid unanticipated side effects: > Applicator's cartridge tip has complete & level contact with stable tissue support using skin traction or sandwiching techniques. > Consider increasing needle penetration depth (dependent on treatment area and tissue		
Incomplete Impedance (Ω) 160 4000	No energy delivered to selected depth(s) when impedance values are outside of the allowable range and INADEQUATE COUPLING message is displayed.	Start or end impedance values outside of allowable range: > Start: <25-50 Ω / End: >2000-4000 Ω > May imply needles not properly inserted from start and with partial tissue contact. > Can be observed during shallow or partial insertions.	 quality)¹. Assess cartridge needle integrity. Consider decreasing energy until impedance readings normalize. 		

^{1.} When treatment of SubQ tissue is intended, a greater end impedance value may be observed requiring no corrective action (i.e., a superficial insertion can be ruled out given location/depth of needles and increasing needle penetration depth would not be required). Conversely, if treatment of SubQ tissue is not intended, and depth is >1.6 mm on bony or thin-skinned areas, first decrease the depth, then recheck impedance value trends.

Matrix Pro Pre-Treatment

- Shave any hair in the treatment area, if required.
- Skin should be completely clean. There should be no lotion, make-up, perfume, powder or bath/ shower oil present on the skin in the area to be treated. Thoroughly wash the treatment area with cleanser and lukewarm water and dry thoroughly.
- Apply a topical anesthetic on the entire treatment area. Use the anesthetic according to manufacturer guidelines. Post anesthesia, wipe off the anesthetic with a dry gauze pad, and thoroughly wash the skin with cleanser and lukewarm water, and dry. Ensure that all the anesthetic has been removed and that the skin is completely dry before commencing treatment.
- Cleanse skin with antiseptic skin cleanser (i.e. Chlorhexidine Gluconate 4.0% solution or equivalent skin-suitable antiseptic cleanser).
- No lotion, gel or coupling medium should be used during treatment.
- Applicator cleaning and disinfection: Before and after each treatment session, the body of the applicator should be cleaned to remove any visible soil or debris with a soft, damp (not soaked), non-abrasive cloth can be used for cleaning. After cleaning, disinfection should be performed using 70% or higher isopropyl alcohol-based solution or equivalent, non-corrosive cleaning solutions. Ensure that the entire surface of the applicator is disinfected. Ensure that it is dry before beginning the treatment.
- Open the sealed sterile, single-use, disposable Matrix Pro tip. Connect the tip to the distal port of the applicator and ensure that the tip is secured in place.

- Each tip is designated for the treatment of one patient and one treatment only to prevent infection and cross-contamination. Make sure the tip needles come in contact with the treated area only. The user should not touch the tip needles.
- Apply a pulse in the air and visually check the integrity of the Matrix Pro tip's needles: ensure that
 none are missing. Do not use if any needles or the surrounding "frame" electrodes are compromised
 or missing.
- In the event of an incomplete pulse the system will display the message: **Inadequate coupling**.

Matrix Pro Test Spot

- On each treated area perform test spots to verify that treatment settings are appropriate, and assess the patient's skin reaction and tolerance to treatment effects, as well as impedance values.
- Select a small sub-area within the intended treatment area. According to the planned treatment settings apply one single insertion. Do not apply multiple insertions to the same spot due to the risk of bulk heating.
- Assess the skin's response. For patients with FST I-III assess the response 15 30 minutes after
 applying the insertion. For patients with FST V-VI, and more prone to PIH, it is suggested to assess
 the skin response at least 2 3 days after applying the insertion.
- If the test spot result shows a uniform, moderate-to-extreme pink color reduce the energy and repeat the test spot assessment with the new treatment setting.
- Discontinue treatment if any of the following skin responses are observed: graying, whitening or darkening of the skin, significant change in skin condition (e.g., blister, crusting or scabbing) or significant swelling, bleeding or bruising.

Matrix Pro Treatment Procedure and Tips

- Select an area to be treated and set the treatment parameters.
 A Pin icon will appear in each new area selected for treatment.
 - Each Pin icon will be labeled with a corresponding letter.
 - Shown in Figure 3, the active treatment Pin icon (labeled c) is enlarged and highlighted in magenta. The smaller Pin icons highlighted in blue (labeled a and b) correspond to previous treatment areas selected.
- Select the number of needle depths and treatment parameters according to the anatomical area to be treated and the thickness of the skin in that area. Refer to the Matrix Pro treatment parameter table for additional guidance.
- Ensure that the skin is completely dry during the entire treatment. If skin moistens during treatment (i.e., perspiration, etc.) re-wipe the skin and continue treatment.

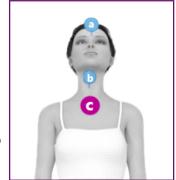


Figure 3: Matrix Pro Treatment Pin Icons

• During the treatment, the applicator should be held perpendicular to and in full contact with the skin. Apply the applicator with moderately firm pressure. The needles are designed to be smoothly inserted into the skin. Press and immediately release the trigger to deploy the needles.

- Needle tips can bend if they strike bone during needle insertion or if the skin is unstable at the insertion points. Avoid excessive downward pressure with the applicator in bony areas, such as along the mandibular edge and/or zygoma. Technique may be modified to limit downward dermal compression by bolstering or 'sandwiching' the tissue upward and away from bony structures.
- Always ensure to stabilize the skin at insertion points; make sure the skin is not moving and the
 applicator's cartridge tip has complete and level contact as the needles are introduced into the skin.
- If one or more needles exhibit a consistent lack of proper insertion in the skin, replace the cartridge.
- Press the trigger/footswitch to activate the applicator only when the applicator's tip is in full contact with the skin.
- Apply pulses uniformly without gaps at a 50 80% overlap from one pulse/insertion to the next ensuring complete coverage of the intended treatment area.
- After each insertion, wait for the needles to automatically retract before lifting the applicator off of the skin.
- If required to abort the pulse while pulse/insertion is active retrieve the applicator out manually. Continue the treatment in another area. Do not treat the same zone until the skin has cooled down.
- When indicated and for more structural support, pack the oral cavity (between molars and buccal
 tissue) with folded wet gauze or use a bolstering/sandwiching technique to isolate tissue away
 from the oral cavity. Ensure wet gauze or a dental roll is placed over any dental filling to assist with
 increasing comfort and reducing sensitivity.
- Examine the treated area. The expected immediate responses are erythema and/or focal edema in a tip-shaped imprint. This usually appears 1 2 minutes after pulsing. It should be noted that erythema is not easily noticeable in darker skin types so the focal edema will be more prominent in these patients. If there are gaps or untreated areas, perform additional insertions (pulses) on areas that do not show the desired endpoint response.
- The parameters can be modified during subsequent visits, as per the practitioner's discretion and after applying an additional test spot.

Matrix Pro Post-Treatment Care

- Apply provider choice of post-procedural healing topical, such as Aquaphor® or equivalent to the treated areas as per standard medical procedure.
- If post-treatment cooling is desired, you may cool the treated area with a clinical air-cooling device or cool compress (not frozen ice pack).
- Transient heat or tingling sensations may last several to 24 hours after treatment. The transient skin erythema and edema may last 1 2 days after treatment and may be extended beyond two days depending on patient specific variables and parameters used.
- Tiny crusts of less than 1 mm diameter will usually form 1 3 days post-treatment and may remain for a few days. Do not pick, scratch or disturb the crusts as they heal. Crusts will typically slough off naturally as the treated area heals.
- In the event of any blistering or ulceration of skin, treat with a prescribed antibiotic ointment or burn treatment protocol as per physician's discretion.

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- During the first two days following treatment, care should be taken to prevent trauma to the treated site. Avoid hot baths, massage, skin irritants, etc. The skin should be kept clean to avoid contamination or infection. Any mechanical or thermal damage to the area must be avoided.
- The treated area should be kept as hydrated as possible for 1 week post-treatment or until
 completely healed. Re-apply the topical regularly throughout the day such that the skin has a
 consistent, glazed-like appearance at all times.
- 12 hours after treatment patients may use a gentle non-comedogenic skin cleanser. Do not use scrubs or exfoliants.
- Patients should avoid sun exposure on the treatment area and use a high-factor sunblock (at least 30 SPF) for 4 6 weeks following the procedure and during the entire course of treatment.
- Tanning of any sort (sun exposure, tanning beds, and artificial sunless tanning lotions) is not allowed in the treated areas during the entire course of the treatment.

Matrix Pro Treatment Protocol

- The number of treatment sessions depends on the individual patient and treatment parameters.
 Typically, mild conditions may require 1 2 treatment sessions and moderate to severe conditions may require 2 3 sessions, every 4 8 weeks.
- Maintenance sessions may be needed every ~6 months, according to individual response, goals of treatment, and due to natural processes of aging.

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