

## ELECTROLYSIS: IMPORTANT TIPS & AFTER CARE

### **BEFORE YOUR TREATMENT**

Avoid caffeine 6 - 10 hours before treatment.

Hydrate, hydrate, hydrate! The more hydrated you are the better treatment you'll get!

Don't smoke 2-4 hours prior to treatment.

You may take such OTC pain management such as Tylenol, Advil, or aspirin, 30 minutes before your treatment.

Try taking an antacid (Tums, Rolaids etc.) a hour to 1.5 hours before your treatment; it helps reduce redness more quickly!

It's okay to shave between treatments, but never, EVER tweeze or wax!

Remove your makeup before your appointment, so the hair follicles are clean and accessible.

Clean skin releases unwanted hair more easily.

Gently exfoliate your skin with a gentle scrub before your treatment. It opens up the follicles and lets the unwanted hair slide out more easily.

### **AFTER YOUR TREATMENT**

Keep your skin clean by gently applying an antiseptic, such as Witch Hazel, 2-3 times per day; more frequently if dirt or perspiration are an issue.

An antibiotic cream (such as Neosporin) or aloe gel may be helpful, especially prior to working out or other vigorous activity.

Applying ice to the area immediately after treatment can increase comfort.

Avoid tanning, tanning beds and direct sun exposure for 48 hours after treatment.

Make sure the treatment area is covered with an SPF 30+ daily.

If you use makeup, reserve a fresh hypo-allergenic formula for use after treatment so you do not cross contaminate the treatment area.

Avoid touching the treated area with your hands. Wash hands frequently.

Avoid rubbing the treated area vigorously. Avoid manual exfoliation (scrubs, loofahs) for 48 hours post treatment.

Avoid using heavy creams or any type of topical acid (fruit acids, glycolic, salicylic, etc.) or similar product for 48 hours after treatment and use caution prior to treatment.

Avoid submerging the treated area in hot tubs or river or lake swimming for 48 hours post treatment.

Report any skin reactions immediately to your clinician and make a note to discuss at your next visit.

**I acknowledge that I have read and understand each of these important instructions for my Electrolysis BEFORE & AFTER Care.**

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

