

Information and Consent for Obagi Blue Peel

Important Background to the Consent Process

Your clinician wishes to help you make an informed decision about your treatment options and any relevant alternative options. You may at any time decline treatment even after giving your consent.

Whilst your clinician will make every effort to understand what significance you would attach to any particular risk it is important to us that you feel comfortable enough to question the clinician on any point of concern during this process. Please feel you have as much time as you wish to reflect on the information given before agreeing to proceed with the treatment.

Purpose of Treatment

You have presented with concerns which have formed the basis of a clinical discussion and examination. The purpose of the proposed treatment is to address your concerns either individually or in combination with other modalities of treatment.

Outcomes

Your clinician will endeavour in good faith to employ the principles of best practice in delivering your treatment. Each patient is individual and response to treatment will vary from patient to patient and treatment to treatment. As such it is difficult to guarantee outcomes will always meet your expectations.

Background Information

The Obagi Blue Peel is an intense, customisable peel using Trichloroacetic Acid (TCA) to treat the skin at a level appropriate to your skin type, personal needs, and concerns. TCA is mixed with a special blue base to peel the skin to a carefully controlled level. The treatment works by breaking down the bonds connecting the layers of skin cells, resulting in peeling over a period of 5 to 10 days after application. It is important to follow the directions given to you by your clinician as the skin is often prepared in advance of the treatment.

Please advise your clinician if you have any forthcoming social engagements so a personal evaluation can be made as to any possible downtime associated with the treatment that could impact your enjoyment of the event.

Commonly Experienced Adverse Events

Redness
Swelling
Peeling
Tightness
Soreness
Cracking

Scabbing
Bleeding
Itching

Less Common Risks

Outbreak of Herpes Simplex Virus in susceptible individuals
In rare cases, scarring and/or bacterial infection can result
Changes in skin pigmentation may be permanent- especially in individuals with darker skin types
Allergic reaction

Important Considerations

Every care is taken to deliver the products in a manner which will minimise risk, however you should be aware of the risks, as one may exist upon which you place particular significance.
Patients are advised to take in to account all these potential risks before consenting to treatment.
Please make your clinician fully aware of your expectations prior to giving consent.

Safety Profile

The ingredients in the Obagi Blue Peel system have been thoroughly tested for safety and efficacy over time. When administered under controlled conditions, by a trained professional, treatment is considered safe. But, as with any treatment there are risks.

Contraindications and Relative Contraindications to Treatment

Recent sunburn, sun tan, or sun exposure prior to treatment
If you are pregnant, or breastfeeding
Hypopigmentation
History of keloid scarring
Severe dermatitis, active inflammatory acne, or eczema (in treated area)
Active infections
Accutane use within the last 6 months without physician approval
Uncontrolled diabetes
Currently taking photosensitising medications
Use of topical Vitamin A derivative medications within the last 3 days
History of Herpes Simplex Virus infection (cold sores)

Limited or no clinical data exists regarding the efficacy and tolerance of this treatment in patients having a history of, or currently suffering from, auto-immune disease, auto-immune deficiency, or being under immunosuppressive therapy. The clinician shall therefore decide on the indication on a case by case basis according to the nature of the disease and its treatment and the need for monitoring post-treatment. Your clinician will discuss the need for a preliminary skin testing for hypersensitivity if necessary, or in the case of patients with severe or multiple allergies.

Your clinician will also discuss the suitability of treatment having considered your medical history and any medications you currently take, as appropriate. As such, it is imperative you disclose such medications at the time of your treatment.

Additional Information

The procedure is uncomfortable so analgesia and mild sedation can be administered prior to peeling. As the acid is applied to the skin it will become hot for 2 to 3 minutes until it is neutralised. Cold air can be used on the skin during this time for cooling and comfort. The clinician will proceed to apply several layers of blue peel solution to the area of skin being treated. Once the desired depth of peel is achieved the skin is washed with a special cleaning lotion.

It can take a number of months to notice improvements after treatment. The frequency of treatments and necessity of follow up appointments can be discussed with your clinician.

Post Treatment

The skin is left with a blue tinge immediately after treatment, which you will be removed within 12 to 24 hours by using a gentle cleanser supplied by the clinic. Patients with dry/sun damaged skin may find the colour remains in certain areas for up to 3 days, fading with continued washing. Once the treatment is complete you will be able to leave and resume normal activity, although most patients prefer to stay at home during the peeling process.

The skin will likely be swollen after treatment and will look red. Infection is rare during healing, but the new exposed skin has to be cared for to avoid complications. As the skin peels it may become weepy in areas, and if the skin becomes tight and cracked there may be soreness and mild bleeding. This can be minimised by using specific recovery creams.

Although normal activity can be resumed immediately, the skin treated needs to be protected. Sunbathing, visits to the sauna, pronounced facial gestures, sporting activities and irritation caused by strong jets of water or rubbing must be avoided. Please do not peel or pick at the skin, as this can lead to scarring. After the treatment you will need to sleep on your back during the healing phase, elevated with two to three pillows to help reduce swelling. Make up should not be applied before the dead skin cells have peeled off. Please ask your clinician for an after-care sheet which will give important contact details and a summary of our advice. Please do not hesitate to contact us should you have any concerns post treatment.

Should you feel unwell following your procedure it is important to seek specialist medical advice immediately. In the first, instance call our Clinical Team on one of the following numbers. Occasionally, the phone will be directed to our emergency out of hours service who will contact Dr Curran or another member of the clinical team. Dr. John Curran can also be contacted directly in the event of an emergency or difficulty getting in contact with the clinic.

Jersey 01534 625090 Guernsey 01481 736699 Belfast 02890 319060 (Mon-Fri 08.00 to 17.30)
Dr Curran's Mobile 07781 165797

Consent Statement for Obagi Blue Peel

Consent Confirmation:

To help us assess that we have listened to, and responded to, your concerns and preferences and have given you sufficient information in the way that you want and can understand it would be helpful to confirm the following statements:

1. I can confirm that I understand the treatment proposed and any relevant alternatives and I am willing to proceed.
2. I have had sufficient time to appreciate the risks involved and in particular I can confirm the clinical team/clinician has worked with me to understand and discuss those risks to which I would attach particular significance.
3. I am of the opinion that my request for treatment is for medical reasons and/or the personal psychological features that are associated with my request. I have expressed my thoughts and feelings to the treating doctor and consent to the treatment for the purpose of restoring and maintaining the health and my psychological wellbeing.
4. I have read this in conjunction with the information provided and I have had the potential risks and side effects associated with my treatment fully explained to me.
5. I acknowledge and understand that no guarantee or assurance can be made on the results I will get from the treatment.
6. I consent to the taking of photographs in the course of this procedure for the purpose of assessing my progress.
7. I am satisfied that I have sufficient knowledge of the treatment to give informed consent.

Patient has confirmed via E-Signature:

I confirm that I have discussed the treatment plan with the above patient and undertake treatment with the purpose of restoring or maintaining health, including the psychological wellbeing of my patient. I also confirm that I accept duty of care for my patient and the standard of care as set out by the GMC in Good Medical Practice/NMC Guidelines. In doing so, I recognise my primary purpose and undertaking is to place the health and wellness of my patient as my first concern.

Clinician has confirmed via E-Signature: