

Cold Laser Therapy

What is Cold Laser Therapy?

Cold Laser is a Low Level Laser Therapy that uses healing laser light to stimulate biological processes below the skin's surface. Just as plants use sunlight to photosynthesize carbohydrates in their cells, cold laser light stimulates the formation and release of our body's own healing chemical compounds. In Low Level Laser Therapy, the infrared laser energy has a stimulation effect on tissues by increasing cellular energy.

Cold Laser stimulates the production of collagen, as well as stimulating lymphatic flow, which helps to eliminate toxins and excess fluids from the tissues. Studies have shown that the diameter of lymph vessels and lymph flow rates can be doubled with the use of Cold Laser Therapy. By increasing the activity of fibroblasts in the connective tissue collagen is produced, aiding the repair process and stimulating proper tissue granulation to heal inflamed tissue.

Cold Laser generates a "cold" laser energy which does not cause thermal change in the skin tissue. This approach stimulates the natural processes rather than resurfacing through skin cell destruction. Hot lasers are used primarily in the medical field because of their ability to cause thermal changes which poses a hazard and can destroy skin tissue. By contrast, Cold Laser is safe even if used for long periods of time. Cold Laser combines bio-stimulation, light energy and Phyto-Active Gels to deliver an effective, long lasting and soothing skin rejuvenation treatment.

"Low Level Laser Therapy" is an effective therapy that works in harmony with the body's own healing and pain mechanisms. There are NO harmful side effects from this type of laser therapy. _____ Client Initials

The Benefits of Cold Laser Therapy

Photo-therapy has many benefits:

- Increases circulation because new capillaries are formed replacing damaged ones
- Stimulates the production of collagen. Collagen is the essential protein used to repair damaged tissue and to replace old tissue
- Diminishes hyper-pigmentation (age spots).
- Stimulates fibroblastic activity. This aids in the tissue repair process, forms collagen fibers.
- Increases lymphatic system activity. A large number of lymphatic channels lie directly beneath the skin, and play a significant role in maintaining health and beauty of your complexion.
- The gels used in the Cold Laser chamber are classified as photoactive gels that are activated when they are ionized. These specially formulated gels act as conductors to transmit the laser energy also create galvanic ionization which creates deeper penetration of the active ingredients. _____ Client initials

Skin Conditions Treatable with Cold Laser

Anti- Aging ~ Fine lines and wrinkles

Hyperpigmentation – Age spots

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Acne
Acne Scarring
Oily Skin
Psoriasis
Rosacea
Hair Reduction (on all hair color)
Sun Damage
Dark Circle under eyes
Blotchiness
Lip Plumping
Bags under eyes
Eczema
Reducing Broken Capillaries
Destroying Bacteria
Hair Stimulation
Hair Loss _____ Clients Initials

Contraindications of Cold Laser

The Cold Laser uses a grounder to complete an electrical current – therefore, we **CANNOT** treat clients with the following conditions:

Epilepsy
A Pace Maker
Pregnant
Heart Problems
Diabetes
Immune Deficiency Diseases
Thyroid Problems
Hepatitis
Oral Blood Thinners/Circulatory Problems
Cancer
Varicose Veins/Phlebitis
Allergies to active ingredients in gel/products _____ Client Initials

Is satisfaction guaranteed?

The majority of clients receive satisfactory to above average results with a series of treatments. Maximum results are highly dependent on your age, cumulative sun exposure, health, menopause, lifestyle, genetic traits, general skin condition and your willingness to follow recommended protocol.

Be aware that many changes may occur deeper within the skin over time. By participating in a series of treatments, along with a commitment to your daily skin care regimen, noticeable differences may indeed be the outcome. You may see a reduction in fine lines and softening of deeper wrinkles, reduction in discoloration, reduction of hair growth, softening and a possible reduction in scars, and an overall improvement in your skin's tone and appearance. To continue the maintenance of your skin after you complete your treatment(s), we may inform you of a long – term management program (monthly or bimonthly) to maintain the results. Cold Lasers are very efficient in their healing,

stimulating and restoring ability for the skin at a cellular level. In addition, cold laser therapy may be used in all skin types and tones without risk of damaging the skin

_____ Client Initials

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Post-Treatment/Home Care

NO TANNING (including and strong UV light exposure and tanning beds) can be done so that we may achieve the best result. If some sun exposure cannot be avoided, you must apply sunscreen with and SPF of 30 or greater. Sunscreen should be a part of your daily skin care. Also, following a good skin care regimen with products that have high levels of active ingredients that work at the cellular level, will have significant penetration and will increase the efficiency following cold laser therapy. _____ Clients Initials

Client Consent – Cold Laser

I _____, have read the above information and initialed each section to indicate that I fully understand what to expect. If I have any concerns, I will address these with my skin therapist. I give permission to a therapist at Essentials Spa and Wellness to perform the Cold Laser procedure we have discussed and will hold her/him and her/his staff harmless for any liability that may result from this treatment. I understand she/he will take every precaution to minimize or eliminate any negative reactions should they occur. I have given an accurate account of any over-the-counter or prescription medications that I use regularly. I am not currently pregnant, or lactating and have read and understand all of contraindications to which would be harmful to me if I proceeded with this treatment. I am not ingesting or using topically any other over the-counter product or prescription medication/agent that has not been disclosed to my therapist. I have not had any recent radioactive or chemotherapy treatments, sunburn, windburn, or broken skin. I have not recently waxed, or used a depilatory (such a Nair) on the area to be treated. I do not have a history of keloidal scarring, excessive telangiectasia, bacterial skin infection, fungal infection, viral infection, open lesions or rashes, active acne, any auto immune disease, or any other existing condition that may interfere with the positive outcome of this treatment.

I consent to taking of photographs to monitor treatment effects, as desired or recommended by my therapist.

My expectations are realistic and I understand that results are not guaranteed.

I agree that I am willing to follow recommendations by my esthetician for home care. I will be responsible for following home regimens that can minimize or eliminate negative reactions, including recognizing the importance of adhering to a sunscreen and avoiding the sun/tanning booths and extreme weather conditions. I agree to use moisturizer specifically recommended by my esthetician and I acknowledge that I have been informed that in any event after the treatment if I have additional question or concerns

regarding my treatment or suggested home products/post treatment care, I will consult my therapist immediately.

I understand all that I have read and choose to proceed with the treatment after careful consideration of the possibility of both the known and unknown risks, complications and limitations. I agree that this constitutes full disclosure, and this it supercedes any previous verbal or written disclosures. I once again certify that I have read, and fully understand the above paragraphs and that I have had sufficient opportunity for discussion to have any questions answered.

Client Name (printed) _____

Client Name (signature) _____ Date _____

Esthetician _____ Date _____