AMiKO
Advanced professional line
CMCA PEEL

AMiKO CMCA Chemical Peel – Patient/Client Consent Form

INFORMATION FOR THE PATIENT/CLIENT

Treatment Information

AMiKO CMCA is a professional-use chemical peel consisting of a blend of acids, amino acids, and vitamins. It is applied to the skin by a trained professional to achieve specific results. The treatment works through controlled chemical action on the skin to:

- Exfoliate and renew the epidermis
- Improve pigmentation and skin tone
- Accelerate cell turnover
- Regulate sebum production and reduce enlarged pores
- Smooth the skin's surface
- Stimulate fibroblast activity and collagen/elastin production
- Restore vitality, radiance, and freshness to the skin

AMiKO treatment can be used for **the prevention and reduction of skin aging**, **wrinkle improvement**, and **overall enhancement of skin condition**.
It is suitable for **all phases of acne treatment** and **all Fitzpatrick skin types**.
All applications must be performed **in accordance with the manufacturer's training and protocols**.

Contraindications and Precautions

A thorough consultation must be performed before the AMiKO procedure to identify any contraindications, including:

- Allergies (especially to aspirin/salicylates, azelaic acid, or milk proteins)
- Pregnancy or breastfeeding
- Cancer
- Blood disorders (e.g., Hepatitis, HIV)
- Autoimmune diseases
- Diabetes

Precautions:
Use caution or delay treatment if any of the following apply:

- Active cold sores (herpes simplex)
- Eczema, dermatitis, or burns
- Current medications such as:
  - Antibiotics
  - Herbal remedies (e.g., St John's Wort)
  - Hormonal contraception
  - Roaccutane (isotretinoin) – must be stopped for at least **6 months prior**
  - Topical steroids
  - Retinol – stop **7 days before** and resume **14 days after** treatment
  - AHA/BHA exfoliants

Pre-Treatment Guidelines

Avoid the following **before your peel**:

- Exfoliating agents – 48 hours prior
- AHA/BHA products, Retinol, or Self-tanning products – 7 days prior
- Waxing, hair removal, or bleaching – 7 days prior
- Treatment if you have had a cold sore within the last 14 days

Post-Treatment Guidelines

Avoid the following **after your peel**:

- Non-mineral make-up – for 12 hours
- AHA/BHA products or Retinol – for 14 days
- Intense exercise, saunas, or heat treatments – for 48 hours
- Waxing, hair removal, or bleaching – for 14 days
- Sunbeds, saunas, or self-tanning products – for 14 days

Only the AMiKO AURIC post-care range should be used after treatment to ensure safety and optimal results.

Do **not** peel, pick, scratch, or rub the skin, even if peeling occurs. Let any flaking or shedding occur naturally to avoid scarring.

Possible side effects (though rare) include: peeling, redness, scabbing, infection, cold sore recurrence, and temporary skin sensitivity.

Consent and Acknowledgement

Please read each statement carefully and initial or tick to confirm:

□ I have completed the client information form accurately.
□ I consent to using the correct post-care products for at least **7 days** following my AMiKO procedure.
□ I have disclosed any conditions that could contraindicate treatment (e.g., pregnancy, hormone use, surgery, recent Retin-A or Roaccutane use).

□ I understand that **results are not guaranteed**. Outcomes may vary due to age, sun exposure, smoking, alcohol use, climate, diet, hydration, skin thickness, and sensitivity.
□ I understand that peeling may or may not occur, and this varies between individuals.
□ I acknowledge the possibility of an adverse reaction despite all precautions and accept full responsibility for seeking any required medical care.
□ I will contact my treatment provider if I experience an unexpected reaction.
□ I will not scratch, pick, or abrade the treated area.
□ I understand that **sun exposure and tanning beds are strictly prohibited** during treatment and healing. A clinic-recommended sunscreen must be used daily, even in winter.
□ I understand that following the **recommended homecare routine** is essential for best results. Using non-recommended products may reduce effectiveness.
□ I understand that multiple sessions may be necessary to achieve optimal results.
□ I acknowledge that the following side effects may occur:

1. Discomfort
2. Redness and inflammation
3. Hypopigmentation
4. Hyperpigmentation
5. Skin peeling or flaking (up to 14 days)
6. Infection
7. Scarring
8. Acne breakouts

□ I agree to allow the treatment provider to take **before and after photographs** for documentation purposes.
□ The treatment provider has explained the **goals, limitations, and possible complications** of this procedure.
□ I have received and understood **pre- and post-treatment instructions**.
□ My questions have been answered to my satisfaction.
□ I understand that the practice of aesthetics is not an exact science, and results cannot be guaranteed. The goal is **improvement, not perfection**.

Signatures

Date: _____
Patient/Client Name: _____
Patient/Client Signature: _____

Treatment Provider Name: _____
Treatment Provider Signature: _____

Traceability of Product Used

Peel Name: AMiKO CMCA Peel
Batch Number: _____
Shelf Life: _____