

**Patch Testing Protocol For The Use Of Topically Applied Anaesthetic In Aesthetic Treatments**

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| **WHY PATCH TEST?**The CPSA has published the standards for best practice and patch testing for the use of topically applied anaesthetic in aesthetic treatments is recommended. This is because topical anaesthetics work on nerve fibres in the dermis and are only effective if penetration into the skin is achieved. Formulations are designed to achieve this quick penetration and for a very small number of people toxicity and allergic responses can be initiated at low percentage levels.  |
| **PATCH TESTING** |
| Patch testing should ideally be carried out 24-48 hours prior to the first treatment or as close to the treatment as possible. In addition, if there has been a gap of 6 months or more between treatments this test should be repeated. It is also important to remember that it is possible for allergies to develop over time.  |
| It is important to patch test for all anaesthetic formulations that might potentially be used.  |
| The person carrying out the patch test must have been trained to carry this procedure out and be fully conversant with the application and recording procedures.  |
| The patch test must be carried out in a professional environment  |
| The patch test must be carried out systematically and sequentially following a documented protocol that all designated personnel will follow.  |
| In establishments where multiple brand formulations are used, there must be an ‘example log chart’ that clearly details which numbered areas relate to which formulation, with a space for the result / feedback. Anaesthetic formulations must be listed and always be applied in the same order and to the same part of the body. Each patch test area will need to be numbered in ball point pen in line with the centre ‘example log chart’ |
|  Establishments must have a patch test protocol consent form that should be signed by the client. It needs to stipulate that the client is agreeing to notify the centre/ practitioner immediately if an allergy occurs.   |
| The consent to treatment document should also be designed to include written confirmation that no adverse reactions to the patch test have occurred. The client must sign this confirmation when attending for their subsequent treatment. |
| **PROTOCOL** |
| * Carry out the patch testing on the inside of the elbow crease or if you are testing multiple anaesthetics, apply to the inside of the lower forearm.
* Cleanse and disinfect the skin with the proprietary products to be used during the treatment.
* Each test patch area must be numbered in ball point pen in line with the ‘example log chart’
* Take a pre-test photo to document the skin prior to the test and the numbered patches.
* Using a cotton bud or spatula apply the anaesthetic formulations to the skin in the order required. It should be applied thickly enough to be visible and evident to see.
* Where multiple formulations are being tested, each one should be applied quickly to allow for all formulations to have been on the skin for as close to the same time as possible.
* Leave the formulations on the skin for 10 minutes. It is not necessary to leave for longer. Use a timing device to ensure accuracy.
* At the end of the time remove the anaesthetic by wiping off the skin with clean gauze dampened with clean water or sterile saline solution.
* Finish with application of a small amount of the SPF to be used post treatment and ask clients to out keep their arm out of direct sun light.
* Take a post-test photograph for your records and detail all the results in writing. All visible changes to the skin and all tactile sensations felt by the client, must be recorded in as much written detail as possible.
* It is imperative to record systematically. There should be a written record of all responses for all formulations in the order of the documented protocol.
* Allergic reactions to anaesthetic applied topically are rare but an allergic reaction will usually show quickly and be very evident.
* A more severe allergic reaction could show as blurred vision, dizziness or drowsiness, difficulty breathing, trembling, chest pain, or irregular heartbeat. **Note - If any of these occur seek emergency medical help immediately.**
* It is also possible for clients to have accompanied sensory changes such as itching, stinging, burning or feelings like insects are crawling over the skin that would indicate that they are allergic to the formulation.
* Please note- a small amount of transient local skin blanching followed by transient local erythema and/or a slight sensory awareness are not a sign of an allergy but a normal vascular and sensory reaction to the formulation.
* After the patch test results have been recorded It isimperative to ask all clients to sign to say the test has been completed and to verify the results being recorded.
* All clients must be asked and instructed in writing that they must notify of any delayed reactions. Instructions must detail an email address and telephone number for this contact to be made. Centre personnel must ensure any information received via email or telephone is recorded in accordance with the centre protocol.
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| **WHAT TO DO IN THE CASE OF AN ALLERGIC REACTION OCCURRING**  |
| * All centres must have a written protocol for what needs to happen if an allergic reaction does take place. All centre personnel will need to be trained and follow this protocol and document accordingly in line with organisational procedures.
* If any client was to get an allergic response to a patch test for anaesthetic, it will be important to respond professionally and appropriately to the situation.

**If the allergic reaction happens at the time of the patch test*** Assess the situation quickly.
* If the client needs medical intervention it is imperative to ascertain this quickly and make contact with a supervising medic or emergency services immediately. If you are working alone ask the client to contact their GP or in more serious instances call emergency services.
* It is imperative to remove the anaesthetic immediately and thoroughly with clean damp gauze pads and continue to rinse the area with cool water.
* If the reaction is a sensory one but not too extreme, rinsing the skin should be continued for as long as is required to bring the reaction under control. The client should be advised not to apply any other products for 12-24 hours unless specifically advised to do so by a supervising medic. The client can continue with cool water bathing at home if required. If the reaction is more severe then they should be advised to seek medical advice as soon as possible.
* If the client is feeling dizzy, light headed or feeling the onset of headaches or blurred vision, but you have ascertained that a supervising doctor or emergency services are not required, it is advisable to escort and remove the client to a quiet private area if possible, until fully recovered. Offer water to drink and ensure that someone can stay with the client at all times until fully recovered.
* It may be appropriate to take photos of the client’s skin to document the reaction, however do not do this at the expense of their health & safety. Prioritise responses appropriately.
* Once the client is fully recovered, the person responsible for the care of the client will need to complete the centre documentation to fully record the nature of the allergic reaction and all actions taken to resolve the issue.
* The client must witness and sign the completed documentation.

**If the allergic reaction is delayed and happens after the client has left the treatment centre*** All clients must be given verbal and written advice as to the protocol to follow in the case of a delayed reaction to the patch test.
* If the reaction is severe they should be advised to seek medical guidance as soon as possible. This might be contact with their GP or contact with a hospital.
* If the reaction is not severe but concerning, the client should take appropriate action. This might be rinsing of the skin with clean cool water until the skin is back to normal or taking time out to lie down somewhere quiet and cool until they feel recovered.
* Clients must be asked to contact the treatment centre in line with recommended protocol to report their reaction as soon as is possible to do so.
* Centre personnel must record all information in accordance with organisational procedures.
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