

CLIENT REF _____
DATE _____

**Client Name** .....**Date of Patch Test** .....

**Practitioner Name**.....

**Tutor Name** ..... **Centre** .....

**Why do you need a patch test?**

The practice of Patch Testing for allergies to chemical skin peeling formulations prior to receiving a treatment is a legal requirement under the COSHH Regulations of 2002. It is also and part of the Cosmetic Practice Standards issued by the CPSA. Patch testing safeguards you against any allergic Histamine skin reactions that could be caused by any of the formulations that we may use on your skin as part of a chemical peeling treatment programme .

**How Often Do You Need To Have A Patch Test?**

This depends on the manufacturer's guidelines and on the insurance cover of your practitioner – your practitioner will advise you but it is usually required every 3 to 6 months

**Procedural information**

The procedure involves the application of each of the solutions that may be used by your practitioner as part of your treatment programme. The test will be carried out in the crease of your elbow for single agent tests or on the inside of your forearm for multiple formulation testing.

Each individual patch test will require to be numbered so that we can ensure that the recording of results is accurate – this means that we will temporarily need to mark your skin with a roller ball pen. If you have an allergy to ink please let your practitioner know before the test commences.

The solutions will be left on your skin for 2 – 3 minutes only during which time you may experience minor discomfort, prickling sensations or heat. Your practitioner will monitor this closely throughout the process but if you feel any pain please notify them immediately.

Once the development time for test is over your practitioner will neutralise and remove all the solutions from your skin.

**How will your skin look after the test?**

As a result of the application of the chemical peel formulations you may see some immediate pinking or reddening of the skin in some or all of the numbered patches. This is a normal reaction to acidic peel formulations.

**What will an allergic skin reaction look like?**

The allergy may show itself immediately while you are still in the clinic but we will ask you to monitor your skin for 24 – 48 hours and report back to us should your skin show the signs of an allergic reaction.

If you have an allergy to any of the solutions applied, your skin will develop a topical Histamine reaction. This shows itself as:

- Redness and swelling
- Itching
- Stinging
- An urticarial rash ( nettle rash)
- 

This reaction will quickly subside (within a few hours) and an anti-histamine cream can be applied to calm your skin down.

**Can you still have a chemical peel treatment following a positive patch test?**

If you do show an allergic reaction to any of the peel solutions it will not be possible to treat you with those particular products.

**Severe Or Systemic Allergic Reactions**

In very few cases a severe or systemic allergy can occur. This can be a precursor to an anaphylactic reaction shock or can be a full anaphylactic shock. It is therefore vital that you notify your practitioner if you have ever experienced any of the following:

- Tingling or numbing of the lips, tongue or within the mouth
- Tightening of your windpipe or difficulty breathing
- Dizziness, nausea or vomiting in reaction to exposure to any substance, food or beverage
- Have ever been prescribed or used an Epipen / Adrenaline Injector

**PATCH TEST AFTERCARE ADVICE**

- If you experience redness, swelling, itching, stinging or the appearance of an urticarial rash (like nettle stings) bathe the skin in cold water, dry and apply an antihistamine cream. This should negate the allergic reaction within a few hours.
- If you can take a photograph of the skin reaction while it is still active this will help your practitioner assess the test results
- If you experience tingling or numbing of the lips, tongue or within the mouth, tightening of your windpipe, nausea or vomiting in reaction to any substance SEEK URGENT MEDICAL ATTENTION
- Notify us immediately of any skin reactions or adverse effects:

**Email us at [INSERT EMAIL ADDRESS](#) or call [INSERT TEL NO](#)**

**CLIENT CONSENT TO, AND REQUEST FOR ,A CHEMICAL PEEL PATCH TEST**

I confirm that the procedure for the completion of chemical skin peel patch test has been fully explained to me and that I understand the allergic or adverse skin reactions that may occur.

I confirm that I have never used an Epipen / Adrenaline injector for anaphylaxis and I have never experienced any of the following :

- Tingling or numbing of the lips, tongue or within the mouth
- Tightening of your windpipe
- Dizziness, nausea or vomiting in reaction to exposure to any substance, food or beverage

I agree to follow the instructions given to me today to monitor the skin areas tested and notify Sally Durant Training and Consultancy should any skin change or adverse event occur in the next 24 to 48 hours.

I confirm that I have been given a copy of these instructions and the contact details of Sally Durant Training and Consultancy.

I therefore consent to receive, and request, a chemical peel patch test .

**Signed .....** **Date .....**

**Print Name .....**



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