

**Rex Moulton-Barrett, MD
5-2016**

**STANDARDIZED PROCEDURES FOR REGISTERED NURSES PERFORMING THE
PERFECT SKIN PEEL: FACE & BODY**

I. POLICY

A. Circumstances under which the clinically trained RN may perform a Perfect Peel

1. Setting:
 - a. Brentwood: Doctor's Office, Suite J-5, 1280 Central Blvd,
 - b. Alameda: Alameda Hospital, 4th Floor Doctor's Offices
2. Supervision:
 - a. The Physician or Nurse Practitioner who is trained and qualified will assess the patient prior to treatment to ensure the patient is a candidate for a Perfect Peel. The patient's Medical History Questionnaire will be discussed in-depth with patient. (Questionnaire attached).
 - b. The RN will then treat the patient with A Perftec Peel, providing that the patient meets patient criteria, and Medical History Questionnaire has been completed.
 - c. The physician will review the treatment rendered and sign the chart upon review.
3. Patient Conditions:
 - a. Consultation regarding patient's chief complaint completed.
 - b. Patient must be at least 18 years of age, or parent/legal guardian may authorize treatment.
 - c. Informed consent given and consent form completed.
 - d. Patient informed for best result 2-3 peels with either booster mix or acne booster during second and or third peel.
4. Contraindications:
 - a. Pregnancy or breast feeding
 - b. For patients with severe allergies manifested by a history of anaphylaxis or history or presence of multiple severe allergies, including listed ingredients and aspirin
 - c. use of accutane in last 4 months
 - d. No NSA's, no anticoagulation, bleeding disorders
 - e. No recalcitrant herpes zoster
 - f. open wounds, sunburn, infected skin, active cold sores
 - g. active chemo / radiotherapy
 - h. recent waxing, electrolysis or chemical electrolysis
5. Precautions:
 - a. do not treat more than 2 area or use more than 2 vials in one treatment session
 - b. treatment intervals should be at least 4 weeks apart, maximum of 4 times in a year
 - c. hyper or hypo pigmentation may occur for several weeks
 - d. avoid sweating, heavy exercise & sauna for 3 days after the peel

- e. may be some discomfort including itching, redness, burning, tightness for one week
- f. picking or pulling on the skin post peel should not occur
- g. SPF 30 should be used post peel avoiding excessive sun exposure
- h. Fitzpatrick 6 apply 1ml to less exposed area to see reaction
- i. bearded area male patient apply less

II. PROTOCOL

A. Definition:

The administration of the Perfect Peel is for hyperpigmentation of the face including melasma and mild to moderate facial wrinkles.

B. Assessment:

- 1. Subjective: The above patient conditions have been met.
- 2. Objective: The patient presents with skin deficits as described in A. definition above

C. Plan:

- 1. Storage:
 - a. Store Perfect Peel at room temperature up to 77° F. Refrigeration is not needed. Do not freeze and protect from sunlight. Perfect Peel to be used prior to expiration date on the package. Perfect Peels are packaged sterile in bottles and sold by the box. Order Perfect Peel per patients scheduled requirements.
- 2. Test Implant:
 - a. Perfect Peel does not require a test topical application.
- 3. Treatment:
 - a. Patient will remove all make-up from treatment area.
 - b. Define areas to be treated.
 - c. thoroughly degrease with 100% acetone pre-packaged towelette
 - d. carefully pour 5ml peel vial into applicator cup, avoid spray
 - e. using enclosed gauze wipe evenly to the entire area, repeat evenly in layers, applying more vigorously to damaged areas
 - f. damaged area may show a light frost
 - g. eyelids with caution 1-2 light passes with caution
 - h. Second peel may add Perfect Derma Booster or Perfect Derma Clear Booster for Acne to the Perfect Peel Vial
- 3. Post treatment – patient receives a take home kit
- 4. Patient Education:
 - a. See Post-Peel Instruction Sheet/Kit and give copy to patient.
 - b. 'Day 1'/Day of Peel - do not wash/rub/make-up face for 6 hours or greater
 - c. if skin irritated, melasma, Fitz 4-6 or booster used after 6 hours Day 1 then apply Perfect Derma Moisturizer with 1% HC, included in kit, up to 3 x daily
 - d. if none of 'c.' then leave until following morning 'Day 2'
 - e. Day 2 am: gently wash and dry
 - f. then use post peel towelette and let dry for 30 minutes

- g. apply mineral Perfection /Tinted SPF30 or an SPF30
 - h. make-up may be applied
 - e. Inform patient that swelling, pain and bruising could last for 12, 10, 21 days: respectively.
 - f. Inform patient redness and slight swelling may occur at the injection site.
 - g. Patient to notify office should any concerns or questions arise.
 - h. Day 2 pm: before bed wash and dry gently
 - i. then vigorously apply 2nd post peel towelette overnight
 - j. Day 3 pm: Apply Perfect Derma Moisturizer 2-3 times daily for 1-2 weeks caucasians and 2-3 weeks all others, may substitute for 1% HC
 - k. apply Mineral Perfection/Tinted SPF30 every 2 hours during sun exposure, until peeling complete
 - l. if treating melasma/hyperpigmentation apply Perfect Bleaching Cream BID and sunscreen
 - m. Day 10: resume other skin care products
5. Follow-up:
- a. Subsequent treatment scheduled upon patient's desire for further additional correction.
6. Documentation:
- The following information must be recorded with each treatment.
- a. Number of vials used
 - b. location of application
 - c. Patient response to treatment.
 - f. Procure physician review and sign-off of all patient charts within 7 days post procedure.

III. REQUIREMENTS FOR RN

A. Education:

- 1. Graduate of RN program with current California RN license.

B. Training:

- 1. Training by R. Moulton-Barrett, MD, and qualified Registered Nurse specifically trained in Perfect Peel product knowledge and proper technique.
- 2. Formal education from product company to gain knowledge, experience and proficiency in the proper administration of product.
- 3. Initial Evaluation: Successful completion of in-service education, training and demonstration of competency to MD, including proctoring of (at least) 1 treatment.
- 4. On-going evaluation:
 - a. Random MD visits during treatment sessions. MD will observe 1 treatment quarterly.
 - b. Annual performance evaluation by R. Moulton-Barrett, MD.
- 5. Previous Experience:
 - a. No previous Peel experience necessary prior to training

- b. Initial Evaluation: Successful completion of Perfect Peel education, training and demonstration of competency to MD.
 4. Physician will review and sign-off all patient charts within 7 working days post procedure.
 5. On-going evaluation:
 - a. MD will observe random and or quarterly injection technique including but not limited to BoTox, Xeomin and fillers which are currently being used in the Alameda and or Brentwood offices of R. Moulton-Barrett,MD.
 - b. Injection technique includes evaluation of patient safety including sterile technique, needle management, patient tolerance / comfort, location and amount of injection relative to the degree of the rhytid and post injection management of the patient.
 - c. All evaluation will be documented in the RN evaluation book which is kept in the adminstraive office at all times.

IV. DEVELOPMENT OF PLAN

The Medical Director and Administrator have developed this Standardized Procedure and Protocol Policy (standing order) for the administration of Rasdiesse as a comprehensive working model.

This model will be reviewed annually and documented in the minutes of the meeting and will be kept in the Administrative office of Rex Moulton-Barrett,MD

This Standardized Procedure and Protocol (standing orders) have been approved by:

Rex Moulton-Barrett,MD
Medical Director

Date: 5-17-2016

Administrative Signature

Date: