

## Omnilux blue light therapy

### Precautions due to drug induced photosensitivity for Blue light treatment

Optimum results will be seen between 4-12 weeks after the course of treatments is complete, with a majority of people seeing their best response 8 weeks after the treatment conclusion. Some of our study subjects have experienced increased acne lesions during their treatment, due to the detoxification process of the treatment, however this settles down once the treatment is complete. The light stimulates natural processes that continue after the treatment has stopped.

You will have to remove any make-up or sun block before the treatment and cease to use any topical retinoids. You will be asked to wear some eye safety goggles which MUST be worn.

It is not advisable to have sun bed treatments in conjunction with your course of Blue light therapy. You can continue with your antibiotic treatment if it is not excluded on our treatment contra-indication list.

Please indicate if you are taking or have taken any of the following medication:

**Drug: Codarone X or Aratac**

**Use: Anti-Arrhythmic**

Yes  If yes, it is at your discretion whether you commence with the treatment.

No  If no, enjoy Omnilux blue!

**Drug: Ridaura or Gold 50**

**Use: Anti-Arthritis**

Yes  If yes, the treatment cannot be administered.

No  If no, enjoy Omnilux blue!

**Drug: Azathioprine**

**Use: Anti-Arthritis**

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux blue!

**Drug: Grisovin**

**Use: Anti-Fungal Antibiotic**

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux blue!

**Drug: Tetracycline group**

**Use: Antibiotic**

including Minomycin, Tetracycline, Oxytetracycline, Lymecycline, Demeclocycline, Vibramycin

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux blue!

**Drug: Roaccutane**

**Use: Anti-Acne**

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux blue!

**Drug: Ledertrexate/Methotrexate**

**Use: Anti-Cancer**

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 3 days.

No  If no, enjoy Omnilux blue!

**Drug: Quinolone group**

**Use: Antibiotic**

including Nalidixic acid, Norfloxacin, Ciprofloxacin, Ofloxacin

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux blue!

**Drug: Chlorpromazine**

**Use: Anti-Arrhythmic**

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux blue!

## Client Consent for Omnilux treatments

I have read and understood the information provided and I am fully aware of the nature of the treatment, why and how it is to be performed and any possible side effects. I have been given the opportunity to ask questions.

My signature below indicates my informed decision to have the treatment.

**Warning:** If during your course of treatments you develop persistent headaches or some puffiness/itching or prolonged redness of the skin, you may be showing signs of light sensitivity. In this case, please notify your treatment consultant immediately and discontinue your treatment.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

D.O.B: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Postcode: \_\_\_\_\_

Date: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Witnessed by treatment consultant: \_\_\_\_\_

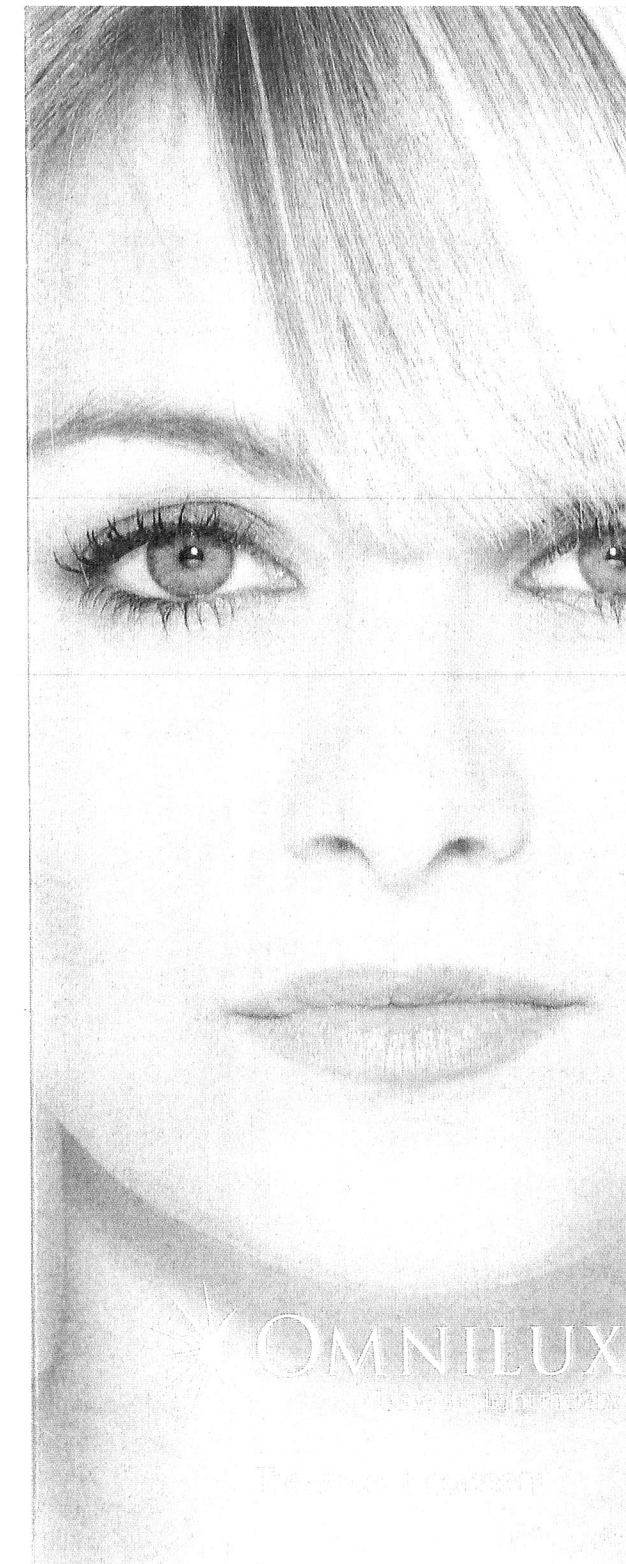
Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Salon name: \_\_\_\_\_

Date: \_\_\_\_\_

Position: \_\_\_\_\_



Before commencing an Omnilux treatment you must complete this form. These forms are designed to help assess your skin type and to explain the short and long-term benefits and effects of Omnilux.

### Pre-treatment consultation

Client skin type (1-6):

| SKIN TYPE | COMPLEXION TYPE                                       |
|-----------|---|
| Type 1    | Very pale, always burns, never tans                   |
| Type 2    | Fair skin and hair, burns easily, tans minimally      |
| Type 3    | Slightly darker skin, burns sometimes, tans gradually |
| Type 4    | Mediterranean; burns rarely, tans easily              |
| Type 5    | Asian/Arabic; burns rarely, always tans               |
| Type 6    | Afro-Caribbean; never burns, always tans              |

Which skincare products do you use for the:

Eyes \_\_\_\_\_

Face and Neck \_\_\_\_\_

Do you regularly use a cream with an SPF? Yes  No

If yes, please specify which cream for which area and the SPF factor:

Eyes \_\_\_\_\_

Face and Neck \_\_\_\_\_

Have you had any of the following treatments in the last 24 hours?

Microdermabrasion  Oxygen facials e.g. Oxyjet

Microcurrent facial  Facial Peels

e.g. Cacl, Biotherapeutic etc.  Injectables

48 hours should be left between the above treatments and Omnilux.

### Precautions and Contra-indications for Omnilux treatments

There are a number of conditions/instances in which light therapy may prove to be unsuitable for an individual i.e. if you are taking certain forms of medication or you suffer from a photosensitive disorder. Photosensitivity means a reaction to normal amounts of sunlight.

Are you Pregnant? Yes  No

Do you suffer from Epilepsy? Yes  No

Do you suffer from Porphyria? Yes  No

Do you suffer from Lupus Erythematosus? Yes  No

If you have answered yes to any of these questions, you are not suitable for Omnilux.

Do you take St. Johns Wort? Yes  No

If yes, you may be more light sensitive. It is at your discretion whether you commence with the treatment.

### Omnilux revive light therapy

#### Precautions due to drug induced photosensitivity for Red light treatment

The effectiveness of light therapy will vary between individuals. All our 'study subjects' have experienced signs of skin rejuvenation. Some subjects have also experienced noticeable smoothing of their fine lines and wrinkles. Although the light from Omnilux is safe, it is very bright. For your comfort during treatment we recommend you wear the eye protectors provided.

Please indicate if you are taking or have taken any of the following medication:

**Drug: Codarone X or Aratac**

**Use: Anti-Arrhythmic**

Yes  If yes, it is at your discretion whether you commence with the treatment.

No  If no, enjoy Omnilux revive!

**Drug: Ridaura or Gold 50**

**Use: Anti-Arthritis**

Yes  If yes, the treatment cannot be administered.

No  If no, enjoy Omnilux revive!

**Drug: Azathioprine**

**Use: Anti-Arthritis**

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux revive!

**Drug: Grisovin**

**Use: Anti-Fungal Antibiotic**

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux revive!

**Drug: Tetracycline group**

**Use: Antibiotic**

including Minomycin, Tetracycline, Oxytetracycline, Lymecycline, Demeclocycline, Vibramycin

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux revive!

**Drug: Roaccutane**

**Use: Anti-Acne**

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux revive!

**Drug: Ledertrexate/Methotrexate**

**Use: Anti-Cancer**

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 3 days.

No  If no, enjoy Omnilux revive!

**Drug: Quinolone group**

**Use: Antibiotic**

including Nalidixic acid, Norfloxacin, Ciprofloxacin, Ofloxacin

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux revive!

**Drug: Chlorpromazine**

**Use: Anti-Arrhythmic**

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux revive!

### Omnilux plus light therapy

#### Precautions due to drug induced photosensitivity for Omnilux plus treatment

You will have to remove any make-up or sun block before the treatment.

You will be asked to wear eye safety goggles which MUST be worn.

Please indicate if you are taking or have taken any of the following medication:

**Drug: Codarone X or Aratac**

**Use: Anti-Arrhythmic**

Yes  If yes, it is at your discretion whether you commence with the treatment.

No  If no, enjoy Omnilux plus!

**Drug: Ridaura or Gold 50**

**Use: Anti-Arthritis**

Yes  If yes, the treatment cannot be administered.

No  If no, enjoy Omnilux plus!

**Drug: Azathioprine**

**Use: Anti-Arthritis**

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux plus!

**Drug: Grisovin**

**Use: Anti-Fungal Antibiotic**

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux plus!

**Drug: Tetracycline group**

**Use: Antibiotic**

including Minomycin, Tetracycline, Oxytetracycline, Lymecycline, Demeclocycline, Vibramycin

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux plus!

**Drug: Roaccutane**

**Use: Anti-Acne**

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux plus!

**Drug: Ledertrexate/Methotrexate**

**Use: Anti-Cancer**

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 3 days.

No  If no, enjoy Omnilux plus!

**Drug: Quinolone group**

**Use: Antibiotic**

including Nalidixic acid, Norfloxacin, Ciprofloxacin, Ofloxacin

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux plus!

**Drug: Chlorpromazine**

**Use: Anti-Arrhythmic**

Yes  If yes, the treatment can be administered as long as the medication has not been taken within the last 5 days.

No  If no, enjoy Omnilux plus!