



HALO® HYBRID FRACTIONAL LASER TREATMENT INFORMED CONSENT, PRE-TREATMENT & POST-TREATMENT INSTRUCTIONS

HALO® HYBRID FRACTIONAL RESURFACING LASER Informed Consent, Pre-Treatment & Post-Treatment Instructions

Provider: _____

Patient Name: _____

DOB: _____ Date: _____

Treatment Area(s): _____

Please read this document carefully and initial each section. Ask any questions before you sign.

1. PROCEDURAL DESCRIPTION – WHAT HALO® IS & HOW IT WORKS

HALO® is a **hybrid fractional** laser that combines **two wavelengths in one treatment** to renew the skin at multiple levels:

- **2940 nm – Surface Resurfacing & Smoothing (Erbium:YAG, ablative)**
Precisely removes microscopic channels of the outermost layers of skin to:
 - Smooth rough texture
 - Soften fine lines
 - Refine enlarged pores
 - “Polish” the surface for luminous skin
- **1470 nm – Deep Dermal Renewal (non-ablative)**
Delivers heat into the dermis to:
 - Stimulate collagen and elastin remodeling
 - Improve firmness and overall skin quality

These wavelengths can be used **individually or in combination**. Your provider will adjust **depth, intensity, and coverage** based on your skin type and tone, pre-treatment regimen/skin health, history of procedures, and goals.

The handpiece glides in a controlled scanning pattern, creating precise microscopic treatment zones while leaving surrounding tissue intact, which supports faster healing. **Protective eyewear** is required for everyone in the room.

Honest expectations: Fractional laser resurfacing remains a **gold-standard** option for rejuvenation (tightening, wrinkle improvement, pigment and acne scars). It can deliver **dramatic** results—and it requires a diligent recovery. Your daily care directly impacts your final outcome.

2. TREATMENT GOALS & INDICATIONS

HALO® can improve the appearance of:

- Fine lines and wrinkles
- Sun damage, brown spots, and uneven pigment
- Acne scars and textural irregularities
- Enlarged pores
- Dull or “tired” skin
- Early signs of laxity

Many patients see meaningful results after one treatment; others may need a series. Outcomes vary based on skin condition, settings, pre-treatment skin health, and adherence to post-care.

3. PRE-TREATMENT REQUIREMENTS (“BEFORE YOUR TREATMENT”)

3.1 Pre-Treated Skin Requirement (Minimum 8 Weeks)

Because HALO® is a **Corrective Level 2** laser with capacity for deeper resurfacing, your skin must be **pre-treated for at least 8 weeks** before higher-level sessions at Honey Skincare Studio.

“Pre-treated” means you have consistently used a medical-grade regimen that supports:

- **Healthy cell turnover** – Retinol or prescription retinoid (as tolerated and supervised by your provider) several nights per week.
- **Antioxidant protection** – High-potency **Vitamin C serum** (or similar antioxidant) each morning for free-radical defense, collagen support, and deep nourishment.
- **Barrier support & hydration** – Daily hydrating serum and/or moisturizer to keep the barrier resilient and comfortable.
- **Targeted pigment balancing (when needed)** – For pigment-related concerns or **Fitzpatrick IV–VI**, add **Honey Skincare Lab “Ready Set Glow” Brightening Serum** to gently even tone and support balanced melanin activity.
- **Daily physical SPF** – Broad-spectrum **mineral** sunscreen **SPF 30–50+** every day.

Why we insist: Proper pre-conditioning **reduces complications, shortens downtime, and improves results** (more even pigment, smoother texture, better collagen response). *Patients who are best prepared have the best outcomes.* If you are not adequately pre-treated, your provider may postpone or use gentler settings until skin health is optimized.

Patient Initials: _____ I understand my skin must be pre-treated for at least 8 weeks with medical-grade skincare as directed.

3.2 Medication & Medical History Considerations

Please inform your provider of all medical conditions, medications, supplements, and prior procedures.

- **Accutane / Isotretinoin:** I have **not** taken isotretinoin within the last **12 months**. Initial: _____
- **Anticoagulants / Blood Thinners:** I understand these may increase bruising/bleeding risk and can limit treatment options.
- **Cold Sores / Herpes Simplex:** I understand laser treatment can trigger an outbreak and may require an antiviral (e.g., valacyclovir).
- **Pregnancy & Breastfeeding:** HALO® is generally **not performed during pregnancy**.
- **Other Skin Conditions:** I will disclose any history of keloids/abnormal scarring, vitiligo, melasma, autoimmune disease, photosensitivity, or previous complications.

Patient Initials: _____ I have disclosed my full medical history and medication list.

3.3 Skin & Product Guidelines Before Treatment

Unless otherwise instructed:

- **7 days before:** Stop retinol/tretinoin, AHAs/BHAs (glycolic, lactic, salicylic), benzoyl peroxide, strong scrubs/exfoliating devices.
- **14 days before:** Avoid direct sun/tanning beds; avoid self-tanner; no waxing/threading/depilatory creams on the area.
- **5–7 days before:** Avoid aspirin, high-dose NSAIDs, fish oil, high-dose vitamin E unless medically necessary and cleared.
- **Day of treatment:** Arrive with **clean, product-free skin**. Bring a wide-brimmed hat for leaving the studio.

Patient Initials: _____ I understand and agree to follow all pre-treatment instructions.

4. WHAT TO EXPECT DURING YOUR HALO® TREATMENT

- **Numbing:** Topical and/or local anesthetic may be used. Tell us about any anesthetic allergies.
- **Sensation:** Heat/warmth or sunburn-like feeling, tingling/prickling “hot spots,” mild pressure as the handpiece glides.
- **Pattern:** A temporary grid/pattern may be visible during healing.
- **Duration:** After numbing, treatment typically takes **20–45 minutes** depending on the area/settings.
- **Eye Protection:** You'll wear protective goggles/shields throughout.

Patient Initials: _____ I understand what to expect during the procedure.

5. TYPICAL HEALING & DOWNTIME

Healing varies by settings, skin type, and individual response.

First 24 hours

- Warmth/heat • Redness like a moderate sunburn • Possible pinpoint bleeding
- Swelling (often around the eyes or thinner skin)

To reduce swelling in the first 24 hours:

- Short-interval **cool compresses/wrapped ice packs** (never ice directly on bare skin)
- **Sleep elevated** for **24–48 hours** (extra pillows or recliner)

Days 2–3

- Redness and swelling may **peak** (often worse in the morning)
- Skin feels **tight, dry, warm**
- A bronzed, **sandpaper-like texture** with tiny dark specks (**MENDs**) appears as treated tissue lifts out

Days 3–7 (face)

- Peeling/flaking/shedding; **texture becomes smoother**, but **pinkness/rosiness may persist**
- Around **days 4–5**, if skin is no longer extremely tender/hypersensitive, you may **restart an approved**

medical-grade Vitamin C serum in the morning to support collagen, brightness, and gradual redness reduction (only if cleared by your provider).

Neck/chest/body may take **7–14 days** to fully peel and settle.

Makeup is typically avoided **5–7 days** unless your provider approves (tinted **post-procedure mineral SPF** preferred instead).

Patient Initials: _____ I understand the usual course of healing and downtime.

6. REQUIRED & RECOMMENDED POST-TREATMENT CARE

How you care for your skin after HALO® is **critical** to safety and results. Follow Honey Skincare Studio instructions exactly.

6.1 Cleansing

- Do **not** cleanse for the first **24 hours** unless instructed.
- After 24 hours, cleanse **twice daily** with cool/lukewarm water and a gentle cleanser such as:
 - **Honey Skincare Lab Soothe + Lather** (non-foaming)
 - **Cetaphil-type cleanser, CeraVe Hydrating Cleanser, La Roche-Posay Toleriane Hydrating Cleanser, Vanicream Gentle Cleanser, Avène XeraCalm A.D Lipid-Replenishing Cleansing Oil**
- Use **clean hands only**; no washcloths/scrubs/cleansing brushes. Pat dry—do not rub.

6.2 Infection Prevention (Required)

Keeping the treated skin **clean, calm, and protected** is essential while the barrier closes. We use two time-tested options: **hypochlorous acid (HylaCyn™)** and, when directed, **diluted white vinegar soaks**. Use **only** as instructed by your provider.

A) Hydrinity HylaCyn™ (Hypochlorous Acid) — Required

What it is: Hypochlorous acid (HOCl) is a **skin-safe antimicrobial** your own immune system naturally produces to defend against microbes and calm inflammation. In spray form it **cleans without stinging**, supports the skin's natural pH, and keeps the healing surface comfortable.

Why we use it: Helps **reduce surface bacteria, soothe redness/irritation**, and maintain a **balanced environment** while the skin closes.

How to use:

- **After cleansing**, mist HylaCyn™ generously **morning and night**, and as needed during the day.
- For extra support, saturate a clean cotton round/sterile 4×4 and **gently lay/press** as a compress for **10–15 minutes, 2–4× daily**.
- Let air-dry; use clean hands and fresh cotton each time.

You may repeat HylaCyn™ applications **every few hours** during Days 0–3.

B) Vinegar (Acetic Acid) Soaks — Old-School Dermatology Option (Only if Directed)

What it is/why it's used: A very **dilute white vinegar + water** solution used for decades to help keep skin **clean, calm warmth/irritation**, support the skin's **slightly acidic pH**, and reduce the chance of **bacterial** irritation. It can feel **soothing** when skin is warm or tight.

When to use: Only if your provider instructs you to use or alternate with HylaCyn™. Choose **one** method per application—don't layer them at the same time.

How to mix:

- Standard: **1 teaspoon** plain **white vinegar** (not apple cider) in **1 cup (8 oz)** distilled or boiled-then-cooled water

- Sensitive: ½ **teaspoon** per **1 cup** (if full strength tingles)

How to apply: Soak clean gauze/cotton, **press/lay** on the area for **10–15 minutes** (do not rub), pat dry, then continue your routine.

Safety: Avoid eyes/mucous membranes; mix fresh for each use; do not begin vinegar soaks without direct guidance.

Both methods help keep treated skin **as clean, calm, and as free from infection as possible**—our post-laser **“insurance policy.”**

6.3 Barrier Repair & Moisturizing (Required) — First 72 Hours Only

For the **first 72 hours** after treatment, keep your routine **very simple** to protect new skin and support even recovery. After **6.1** cleansing and **6.2** HylaCyn:

- **Alastin Regenerating Skin Nectar** – thin, even layer **2–4×/day** (or as directed).
- **Honey Skincare Lab Post-Procedure Ointment** – apply as your **final occlusive seal**; **reapply whenever** skin feels dry/tight so it remains comfortably dewy.

Do **not** add other serums, hydrators, vitamin C, growth factors, or actives during this **72-hour** window unless your provider instructs otherwise.

6.4 Hydration & Recovery Serums — Begin at ≥72 Hours (If Skin Is Comfortable)

When skin is more intact and no longer very tender (**typically at/after 72 hours** for face; neck/chest/body may be later), you may **introduce advanced options**. Add **one** product at a time every **24–48 hours**. Continue **Alastin Regenerating Skin Nectar** and **Post-Procedure Ointment** as final layers.

Advanced options (introduce as directed):

- **Hydrinity Restorative HA Serum** (or **Hydrinity HA Recovery/Post-Procedure**) – generous hydration **2–4×/day** (more often at home if needed).
- **(plated)™ CALM Serum** – platelet-derived cosmetic serum to support visible recovery and overall skin quality in the early, sensitive phase.
- **SkinMedica® TNS Recovery Complex** – growth factor + peptide serum formulated for post-procedure skin; start **1–2×/day** and increase as tolerated.

Layering order at ≥72 hours (typical):

Cleanse → HylaCyn™ → (plated)™ CALM or TNS Recovery Complex → Hydrinity HA → Alastin Regenerating Skin Nectar → Post-Procedure Ointment (as needed to seal)

Optional comfort moisturizers (≥72 hours, as needed):

Avène **Cicalfate+** (Cream or Hydrating Skin Recovery Emulsion), Avène **XeraCalm A.D** Lipid-Replenishing Cream, **Vanicream** Cream/Lotion for sensitive skin, La Roche-Posay **Lipikar Balm AP+M**.

6.5 Sun Protection (Mandatory Once Skin Is Closed)

Once skin is more intact (no open areas/oozing), **daily sun protection is non-negotiable:**

- Use a **broad-spectrum, physical (mineral) SPF 40+** on treated areas once cleared by your provider.
- Choose **zinc oxide and/or titanium dioxide** as the **only active** UV filters (gentler for sensitized skin).
- We highly recommend **Alastin SilkSHIELD®** for post-procedure mineral protection and **blue-light** defense.
- **Avoid chemical (non-mineral) sunscreens** on treated areas while healing.

- Apply **20 minutes before** sun exposure; **reapply every 2 hours** outdoors and after sweating/swimming.
- Avoid **direct sun/tanning beds for at least 8 weeks**; wear a wide-brimmed hat and sun-protective clothing.

Patient Initials: _____ I understand and agree to follow all post-care sun-protection instructions.

7. REMODELING PHASE — GROWTH FACTORS, PEPTIDES & EXOSOMES (After Initial Healing)

Once visible healing is complete (no active flaking; no sting on application—often **day 7–10** for face; longer for neck/chest/body), consider a focused **8–12+ week** plan to support collagen/elastin remodeling and long-term results. Your provider will tailor choices/timing.

Examples your provider may recommend:

- **SkinMedica® TNS Recovery Complex** — growth factor + peptide support for ongoing repair and collagen remodeling.
- **(plated)™ INTENSE Serum** — platelet-derived cosmetic serum designed to support visible redness resolution and overall skin quality during the remodeling window.
- **Alastin Restorative Skin Complex with TriHex+™** — peptide technology that helps clear aged collagen/elastin fragments and supports healthy new matrix formation.
- **Clinic add-ons to the laser treatment itself (optional): Omni Bioceuticals Core Recovery Complex**, or **topical Ariessence** as in-office add-ons and/or short home protocol during first hours post laser to enhance the “build” phase.

General use (typical, AM/PM):

Cleanse → (optional HylaCyn™) → Growth factor or exosome serum → Peptide remodeler (e.g., Alastin Restorative Skin Complex) → Hydrinity HA (if needed) → Moisturizer / mineral SPF (AM)

8. “SOS” CARE – WHEN SKIN FEELS OVER-TREATED OR AT RISK

Contact Honey Skincare Studio **immediately** at **(703) 589-9665** (or your on-call provider) if you notice: increasing redness after initial improvement; yellow crusting/pus/foul odor; skin very hot after 24–48 hours; severe or one-sided swelling; new blisters/open areas/significant pain; fever or feeling unwell. These can indicate **infection or over-treatment** and may require prompt medical care.

8.1 HylaCyn™ Soaks (if instructed)

Cleanse gently → saturate sterile gauze/cotton with **Hydrinity HylaCyn™** → **lay/press 10–15 minutes, 2–4×/day** → pat off excess → continue serums/ointment.

8.2 Vinegar (Acetic Acid) Soaks (if instructed)

Mix **1 tsp** white vinegar in **1 cup (8 oz)** distilled/boiled-then-cooled water (or $\frac{1}{2}$ **tsp** per cup if sensitive) → soak gauze/cotton → **apply 10–15 minutes** → do not rub → pat dry → follow with post-care. **Do not** start vinegar soaks without direct guidance.

Patient Initials: _____ I understand when and how to seek help for abnormal healing.

9. POST-LASER MEDICATIONS (Provider-Directed Only)

Medications are not automatic and will be prescribed only if clinically indicated for your safety. Do not start, stop, or substitute any medication without your provider's direction.

9.1 Pain Control

- **Acetaminophen** as directed if needed for discomfort.
- **Avoid NSAIDs** (ibuprofen/naproxen) unless your provider approves.

9.2 Swelling/Itching Support

- **Diphenhydramine (Benadryl®)** and **famotidine (Pepcid®)** may be used together for a few days if approved—can cause drowsiness and may interact with other meds/conditions. Follow exact dosing from your provider.

9.3 Antiviral Prophylaxis (If History of Cold Sores)

- Your provider may prescribe an oral antiviral (e.g., valacyclovir) if you have a history of HSV or if lip/perioral areas are treated.

9.4 Acne/Eruption Management

- Temporary post-laser pustules or “purging” can occur. Your provider may add a topical regimen and, when appropriate, a short course of an oral antibiotic such as doxycycline. Use only as prescribed; report any side effects promptly.

9.5 Anti-inflammatory Medications (If Indicated)

- In select cases of significant inflammation, your provider may prescribe a short oral steroid course. This is not routine and is used only when clinically appropriate.

9.6 Optional Natural/Homeopathic

- If approved, Arnica tablets and belladonna-based homeopathic options may be considered for swelling; evidence varies and these are optional.

Patient Initials: _____ I understand medications are provider-directed and must not be self-started.

10. POTENTIAL RISKS, SIDE EFFECTS & COMPLICATIONS

No procedure is without risk. Complications can occur even when all instructions are followed.

10.1 Common / Expected (Temporary)

These are the normal healing experiences after HALO®. For the first 4–6 weeks, treat your healing skin like brand-new “baby skin.” Gentle cleansing, frequent hydration/occlusion, and sun protection are key. A “secondary peel” (extra flaking) often means the skin is under-moisturized—increase hydrating layers and keep a light occlusive seal on (reapply approved ointment/creams every several hours so skin never feels dry or tight).

- **Discomfort/pain** – heat-related during and after treatment; usually short-lived.
- **Redness & swelling** – can be moderate to significant; typically improves over several days.
- **Post-laser pinkness (erythema)** – Pink/rosy skin is expected and may last **weeks (and sometimes longer)** without indicating a problem; duration varies by settings and your healing. If pinkness **intensifies** rather than gradually settling, return to gentle care and let us know—your provider may add a short, soothing measure if appropriate.
- **Pinpoint bleeding** – may occur early and usually resolves within hours.
- **Dryness, itching, peeling & MENDs** – bronzing/sandpapery texture and flaking as part of normal healing.
- **Acne or breakouts** – temporary flare-ups or “purging” for up to several weeks often mild/manageable. If significant/persistent, your provider may add topical therapy or a short course of **oral antibiotic (e.g., doxycycline)**.

10.2 Less Common but Possible

- **Blistering & crusting** – do not pick/open; contact your provider for evaluation.
- **Infection** – Bacterial, viral (including **herpes simplex**), or fungal infections can occur even with good care. Warning signs include **increasing redness/warmth/swelling after initial improvement, yellow crusts, new blisters/pus, fever, or worsening pain**. Notify us **immediately**; prescription therapy may be required.
- **Allergic reactions** – to topical products or anesthetics (localized or, rarely, systemic).
- **Eye injury** – rare; strict eye protection is used.

10.3 Pigment / Color Changes

- **Hyperpigmentation (PIH – darkening)**: Temporary darkening can develop as part of healing—often appearing **a few weeks into recovery (commonly around weeks 3–4)**. Risk is higher in **medium-to-deeper skin tones**, with **sun/heat exposure**, or when the new skin is **irritated** by friction, harsh products, or picking. This happens because the skin’s pigment-producing cells (**melanocytes**) are more easily triggered by inflammation and irritation; people with lighter phototypes (e.g., many blondes/redheads) have less baseline melanin, while naturally deeper complexions have more—so the same irritation can create a more noticeable “**blotchy tan**” in darker skin tones. **This is not permanent**. Don’t be alarmed, 40% of patients with darker skin type can experience this and it will resolve.

Why we require pre-treatment: Consistent **pre-conditioning** improves skin health and resilience and **reduces PIH risk**, which is why Honey requires **a minimum of 8 weeks** of medical-grade prep before corrective-level laser. Even with ideal care, **temporary darkening may last weeks to months** before fading. What helps: strict **mineral SPF** and sun/heat avoidance; a gentle, non-irritating routine; and, when cleared by your provider, **nightly retinol/retinoid (as tolerated)** plus a clinic-approved brightener such as **Honey Skincare Lab “Ready Set Glow” Brightening Serum**. Please tell us if you notice new or spreading brown areas so we can fine-tune your regimen.

- **Hypopigmentation:** Rare, but possible; may be permanent—risk higher with history of pigment disorders (e.g., vitiligo).

10.4 Scarring

Scarring is **rare**, but can occur whenever the skin surface is disrupted. Risk increases with **picking/forcing off peeling skin, infection, non-compliance** with aftercare, **sun exposure**, or an individual tendency to abnormal

scarring. If **early thickening** develops, **prompt evaluation** helps; treatment may include **prescription anti-inflammatory medication** and/or **in-office therapies**. Permanent scarring is **extremely rare**.

10.5 Unsatisfactory Results / Need for Additional Treatments

Outcomes vary and **cannot be guaranteed**. Improvement may be subtle or less than expected; multiple treatments may be needed.

Patient Initials: _____

11. ALTERNATIVES TO HALO TRIBRID

Alternatives include: no treatment; topical skincare alone; chemical peels; microneedling or RF microneedling; other lasers/light-based therapies (e.g., BBL, non-ablative laser, MOXI); more/less aggressive resurfacing options. I have had the chance to ask questions.

Patient Initials: _____ I understand my alternatives.

12. PHOTOGRAPHY & MARKETING CONSENT

Photos/video may be taken before, during, and after treatment for medical documentation and—**only if I consent**—for educational/marketing use. My name/identifiers will not be used without my explicit permission.

I: ☐ **DO** ☐ **DO NOT** consent to educational/marketing use by Honey Skincare Studio.

Initial: _____

13. FINANCIAL RESPONSIBILITY

I understand HALO® is an **elective cosmetic procedure** not covered by insurance. I am responsible for all charges, including required/recommended pre- and post-care products. There are **no refunds** once treatment is performed. Additional medical care/prescriptions/revision procedures may incur additional costs.

Patient Initials: _____ I understand the financial terms.

14. PATIENT ACKNOWLEDGEMENT & CONSENT

By signing below, I acknowledge: I have read (or had read to me) and understand this form; my questions were answered; I understand HALO®'s nature, benefits, and risks; I will follow all pre-/post-care instructions; outcomes are not guaranteed and more treatments may be needed. I **voluntarily consent** to undergo HALO® laser treatment at Honey Skincare Studio and authorize my provider/staff to perform this procedure and any necessary follow-up care.

Patient Name (Printed): _____

Patient Signature: _____ **Date:** _____

Provider Name (Printed): _____

Provider Signature: _____ **Date:** _____