

## **HALO® TRIBRID™ Laser Treatment**

HALO TRIBRID is a fractionated laser that uses an ablative 2940 nm, a non-ablative 1927 nm, and a non-ablative 1470 nm wavelength. All three synergistic wavelengths work together to deliver impressive results. The 1927 nm and 1470 nm wavelengths create controlled zones of coagulation in the dermis, while the 2940 nm wavelength fractionally vaporizes (ablates) micro laser channels in the epidermis. (For non-ablative laser only, it does not vaporize the skin). The combination of these wavelengths addresses a wide-variety of skin concerns, including dyspigmentation, wrinkles and fine lines, acne scars, the appearance of enlarged pores, sun damage, and more.

The HALO TRIBRID treatment is highly customizable and creates outcomes based on the intensity of the treatment and taking into account your skin concerns, the health of your skin, and your individual healing ability. Due to this, patient response can vary after a HALO TRIBRID treatment. Erythema (redness) and possibly edema (swelling) are the desired responses within a few minutes after the completion of the procedure. The degree of redness and length of healing time will increase with the depth and coverage of the procedure.

### **Post Treatment**

- Redness is normal and expected. Redness generally increases in intensity the first few days after treatment with day 3 being most intense. Redness can persist for up to 7 days depending on the aggressiveness of the treatment.
- Pinpoint bleeding may occur. This can last for a few hours - 12 hours depending on the treatment depth and may be isolated to certain treated areas.
- Immediately after treatment, swelling is common and expected. Use of a cold compress or ice packs will help to relieve the swelling. To avoid further swelling, you may choose to sleep in an upright position the first night after the treatment. The first morning post treatment is when swelling is more prevalent, especially under the eyes. Swelling may last 2-4 days depending on the aggressiveness of the treatment.
- The treated area may be extremely warm for 12-24 hours after the treatment. Cold compresses or ice packs may provide comfort during this time.
- On the 2<sup>nd</sup> or 3<sup>rd</sup> day after treatment, you will increasingly notice tiny dark spots and bronzed appearance to the treated skin. This is called the MENDS (microscopic epidermal necrotic debris). In individuals with heavily pigmented skin, or in areas where sun damage has produced pigmented lesions, the microscopic wounds, known as MENDS, contain large amounts of melanin. Because there are so many MENDS, they can make the skin look bronzed and small areas appear crusted (do not try to scratch them off). This is part of the healing process where treated tissue is working its way out of your body as new fresh skin is regenerated. During this time, your skin will be very dry and have a sandpaper texture and will begin to flake and peel. If the face is treated, it could take 5-7 days for the peeling process to be completed. If the neck, chest or anywhere on the body was treated, this process could take up to 2 weeks.
- After the peeling process is complete, your skin will have a rosy, pink glow that will gradually resolve. Your clinician will inform you and advise you of when make-up can be used and which kind.
- If an antiviral was prescribed for you, continue to take as directed.
- Post treatment discomfort may be relieved by over the counter oral pain relievers; i.e. Extra Strength Tylenol or prescribed pain medication if ordered by the doctor.
- Itching may be experienced during the healing phase and is completely normal. Oral Benadryl may help itching but can cause drowsiness. DO NOT scratch the treated area as scarring and pigmentation complications can occur.

### **Post Care**

- Immediately after treatment, your clinician may apply a moisturizer to the treated area and should be reapplied as needed to keep the skin moist. The use of a moisturizer with petroleum may be suited for individuals who receive more graduated coverage while the cream may be sufficient on less aggressive treatments.

- Cleanse the skin two times a day with plain, lukewarm water and a gentle cleanser; e.g. Cetaphil, beginning the morning after the treatment. Use your hands to gently apply the cleanser and water and finish by patting dry with a soft cloth. DO NOT rub, scrub, use an exfoliant or a skin care brush in the treated area. Doing so could result in scarring and pigmentation complications.
- Moisturizer should be applied generously over treated area and reapplied whenever your skin feels dry. For severe dryness, a more occlusive moisturizer.
- Peeling and flaking generally occur within 24 hours post treatment and should be allowed to come off naturally. DO NOT PICK, RUB, OR FORCE OFF ANY SKIN DURING THE HEALING PROCESS, THIS COULD RESULT IN SCARRING, PIGMENTATION COMPLICATIONS AND INFECTION! Gently washing the skin more frequently will help to promote the peeling process.
- Sunscreen should be used daily beginning the day after treatment and used vigilantly for up to 3 months post procedure. Use recommended sunscreen with broadband protection (UVA and UVB) and a sun protection factor (SPF) of 30. Apply sunscreen 20 minutes before sun exposure. Reapply sunscreen every 2 hours. If direct sun exposure is necessary, wear a hat and clothing that covers the treated area. If treated area is exposed to sun (direct or indirect) blistering, scarring, hyperpigmentation or hypo-pigmentation can / will occur. Sun exposure should be avoided for 2 months post treatment.
- Typically, after the peeling process is complete, make up can be worn. A tinted moisturizer may be worn earlier.

Additional instructions: \_\_\_\_\_

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Warning

There may be some degree of swelling immediately post treatment; however, if you have excessive swelling or any of the following signs of infection, you should contact the office immediately. Signs of infection include:

- Drainage – looks like pus
- Increased warmth at or around the treated area
- Fever of 101.5 or greater
- Extreme itching

Patient signature \_\_\_\_\_

Date \_\_\_\_\_

Patient ID# \_\_\_\_\_

Witness \_\_\_\_\_