LIGHTWAVE PATIENT TREATMENT NOTES

CLIENT'S NAME: Jane Doe

DATE OF BIRTH: 12/12/1973

TREATMENT PLAN: Target wrinkles/fine lines around the eyes and lips_

INITIAL CONSULTANT: July 3, 2010 with Jan K.

DATE: 07/13/10 TECHNICIAN'S INITIALS: _JMK___ Treatment # __1__

LIGHTWAVE SYSTEM: Unit serial # D10030165_____

(RED/IR) RED/BLUE __2_ PANEL __0_ PAD SET(S) S/N: AP0903125__

Program Name:	Program No:	Duration:	Cleanse Face:	Pictures Taken:
Max Power	15	20 min. session of light therapy	Yes- with ABI Exfoliating Enzyme wash	12 before photos taken-3 of each target area. Photos taken inside with normal lighting before treatment session began.

Treatment notes: Face was cleansed prior to light therapy session. No other exfoliation was done. ABI firming Peptide cream and ABI Moisturizing Antioxidant was applied at the end of light therapy session. Gave client take home sizes of ABI product to use between sessions.

DATE: __07/15/10_ TECHNICIAN'S INITIALS: _KMP___ Treatment # __2__

LIGHTWAVE SYSTEM: Unit serial # _D10030165_____

(RED/IR) RED/BLUE __2_PANEL __0_ PAD SET(S) S/N: AP0903125__

Program Name:	Program No:	Duration:	Cleanse Face:	Pictures Taken:
Max Power	15	20 min.	Yes--ABI Exfoliating wash	No photos taken during this session.

Treatment notes: Cleansed face with ABI Wash. Then a Microderm treatment with a one time pass over was done using a diamond tip wand. ABI's Intense Recovery Gel was infused into face using ultrasound. Gel was left on client's face for about 10 min to allow for full penetration of dermis. Face was cleansed again prior to light therapy session. ABI firming Peptide cream and ABI Moisturizing Antioxidant was applied at the end of light therapy session. Customer reported using the take home ABI sizes according to protocol from last visit.

SAMPLE