EST 27
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Esthetician – All Trades

Specialized Pedicures

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Special thanks to Damaris Terleski, Laura-Lee Casemore, and Madison Froese.

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Specialized Pedicures

Rationale

Why is it important to learn this skill?

In a perfect world, all feet would be in great health. This is not the case. In order to retain clientele it is important to adapt a basic pedicure to suit clients who do not have 'perfect' feet.

Outcome

When you have completed this module, you will be able to:

Identify common foot conditions that require specialized treatment and perform the tasks needed to improve foot health.

Objectives

1. Describe safety concerns relative to pedicures.
2. Describe preventing and correcting ingrown toenails.
3. Describe reducing corns.
4. Describe exfoliants and masks.
5. Describe heated footwear.
6. Describe paraffin.
7. Describe aromatherapy.
8. Demonstrate advanced pedicure.

Introduction

A specialized pedicure follows the same outline as a regular pedicure; however, some clients have specialized needs, and a basic pedicure must be accentuated to accommodate these people. The procedures outlined in this ILM can be performed to adapt a general pedicure into one that is tailored to the client's needs, or counteract some condition that is discovered upon inspection of the feet.

Objective One

When you have completed this objective, you will be able to:
Describe safety concerns relative to pedicures.

Background

As outlined in EST 26, an esthetician must be aware of the safety concerns relative to pedicures. In addition to servicing geriatric and diabetic clients, the esthetician must be aware of conditions such as corns, neuropathy, ingrown toenails, plantar fasciitis, mycotic toenails, pincer nails, hammer toes, and tinea pedis. Most of these conditions are covered in EST 22.

Neuropathy

Neuropathy is a degenerative condition that affects the nervous system. It often occurs in people with diabetes and those who have received cancer treatment. It can be characterized by tingling, numbness, pain, and weakness in the hands, arms, feet, and legs, and wasting of the muscles.

Neuropathy can be caused by several factors such as neuro-vascular conditions that lead to damage of the blood vessels that carry oxygen and nutrients to the nerves. Auto-immune factors can also play a role, causing inflammation of the nerves; conditions such as carpal tunnel syndrome can cause mechanical injury to the nerves; and lifestyle factors such as smoking and alcohol consumption can contribute to developing neuropathy.

If a client has neuropathy, injuries may go unnoticed, leading to additional complications similar to those listed for diabetics. Treat a client with neuropathy very gently and be aware that the client may not be aware that they are being hurt. They are treated the same as a person with diabetes. See EST 22.

Diabetes

Estheticians can play an important role in mitigating the health hazards associated with diabetes. According to the Canadian Diabetes Association (CDA), *diabetes is the*

leading cause of non-traumatic lower limb amputation in Canadian adults, associated with approximately 70 per cent of amputations performed in hospital.

The CDA is also calling on people living with diabetes and their health-care providers to be vigilant and proactive about foot complications from diabetes. The CDA is urging people with the disease to check feet daily for cuts, cracks, bruises, blisters, sores, infection and unusual markings. The CDA is also calling for improved treatment and communication among all health-care professionals who work with people with diabetes. Estheticians can play a role in inspection, education, and cooperation with other health care professionals.

Objective One Self-Test

1) What is neuropathy, and why is neuropathy of the foot a concern?

_____

2) What is the leading cause of non-traumatic lower limb amputation in Canadian adults?

_____

Objective One Self-Test Answers

1) Neuropathy is a degenerative condition that affects the nervous system and can cause a loss of feeling in the feet. This is important, because clients with neuropathy can develop foot conditions and not notice.

2) Diabetes is the leading cause of non-traumatic lower limb amputation in Canadian adults.

Objective Two

When you have completed this objective, you will be able to:
Describe preventing and correcting ingrown toenails.

Description

The difference between a healthy toe and a potentially ingrown toenail resides in the curvature of the sidewalls of the nail plate. The free edge of a potentially ingrown toenail is shorter than the toe, especially along the sides. As the nail plate grows out, it exerts pressure on the sidewalls and pierces the skin, becoming an ingrown toenail. Infected areas are outside of the esthetician's scope. An infection caused by and ingrown toenail is called onychocryptosis. An ingrown toenail can also be caused when the nail fold is higher than the nail.

Anytime the nail plate is covered, the moisture content of the natural nail plate rises. An anti-mycotic spray should be applied, as per manufacturer's directions, to these nails. The spray is a proactive measure to prevent the growth of harmful bacteria. Some anti-mycotic sprays will also treat minor cases of onychomicosis.

Prevention and Correction

The role of the esthetician is to prevent and correct ingrown toenails. Prevention can be achieved through client education. Clients can be advised regarding proper homecare, including correct trimming and filing of the free edge (as described in EST 26). Ingrown toenails come from three main causes. Shoes that have a tight toe box often cause ingrown toenails; toes and nails can be naturally shaped to encourage ingrown toenails; and incorrect cutting / filing can cause ingrown toenails.

If the area shows no sign of infection, it is important to use an ingrown toenail file to smooth the sidewalls of the nail plate. Often, these sidewalls can crack, split, or chip, embedding themselves into the skin. The nail should be softened. Lay the ingrown toenail file on the nail plate beside the sidewall. Starting near the eponychium, gently pull the file towards the free edge while rotating the file under the side of the nail plate. Where the sidewall is fused with the nail plate (by the perionychium), the file will not penetrate. At the point where the sidewall is free from the plate, and the

perionychium ends, the file will rotate under. Withdraw the file. Repeat until the file comes out clean and does not catch any jagged edges. Do not push the file towards the eponychium.

The pressure and pain caused by a slightly ingrown toenail can be temporarily reduced by inserting a few strands of cotton under the corner of the toenail. After the toenail is cleaned and the ingrown toenail file has been used, gently pack the cotton strands under the contact area. Cotton must be replaced daily to avoid a build-up of bacteria.

Thinning

Toenails that are curved, even to the point of pincer, can be corrected with thinning. Thin the centre of the nail plate (from base to free edge) with an electric file. Ensure that the nail is not reduced too much. A thinner nail plate is more flexible and weaker. The altered nail will exert less pressure on the sidewall.

Damming

Anti-mycotic gel is suitable for use on toes. This gel is acceptable because it contains anti-bacterial properties, it is flexible and non-porous, and should be used in conjunction with an anti-mycotic spray. The spray is applied daily. This technique is sometimes referred to as 'damming.' Prepare the natural nail for a gel application. Apply a base layer of the anti-mycotic gel to the entire nail, and then cure. For the second layer, pull the sidewall away from the nail plate. Apply the anti-mycotic gel to the nail bed and sidewall where the nail should grow. Cure while holding the sidewall away. The anti-mycotic gel holds the skin down as the nail grows forward. Common nail enhancement products cannot be used on toenails. These products may be porous and do not match the flexibility of the toenail. Their lack of antibacterial properties may allow for bacterial growth.

Braces

An ingrown toenail brace is a fiberglass-enhanced, flat plastic apparatus that is glued to the nail plate. It is important to position the brace across the nail, near the base of the plate. If it is glued too close to the free edge, it will lift the nail plate from the nail

bed. Once the nail brace is removed from the package, it is cut to fit the nail plate. It is extremely important to work with a clean brace and nail plate. Any oil or debris will prevent the glue from adhering the two together. Apply a thin strip of glue to one side of the brace. Line the brace near the sidewall and slowly 'rock' it across the plate. The 'rocking' occurs in stages. Ensure that the glue has spread across the entire brace as it contacts the plate, and apply constant pressure until the glue has cured. Once the glue has cured, rock the brace further and repeat. The number of stages depends on the curvature of the nail plate. After the brace has been adhered, blend the edges of the brace with an electric file. Make sure to not unnecessarily thin the brace. Prepare the nail for enhancement (this may have been done earlier). Apply a layer of anti-mycotic gel and cure. The anti-mycotic gel will prevent water from reaching the water soluble glue.

Every six weeks, perform a fill of anti-mycotic gel, ensuring not to thin the brace. When the braced has passed the stress area of the nail plate, add another brace close to the base of the nail. Leave the first brace intact.

V-Cut

This technique was performed in the past, but is now considered ineffective. A notch was cut into the centre of the free edge. It was believed to reduce the pressure of the nail plate into the nail fold.

Objective Two Self-Test

1) How does an ingrown toenail appear, and how does it grow?

_____

2) What are the three main causes of ingrown toenails?

_____

3) How can the pressure and pain caused by a slightly ingrown toenail be temporarily reduced?

_____

4) What can be done to extend the life of a nail brace?

_____

Objective Two Self-Test Answers

1) An ingrown toenail can be identified because the free edge is shorter than the toe, especially along the sides. When the nail plate grows out, it exerts pressure on the sidewalls and pierces the skin, becoming an ingrown toenail.

2) Ingrown toenails are caused by shoes that have a tight toe box, naturally occurring toe and nail shapes, and incorrect cutting / filing.

3) The pressure and pain caused by a slightly ingrown toenail can be temporarily reduced by inserting a few strands of cotton under the corner of the toenail.

4) The life of a nail brace can be extended by covering it with a layer of anti-mycotic gel. This prevents water from reaching the water soluble glue.

Objective Three

When you have completed this objective, you will be able to:
Describe reducing corns.

Types of Corns

Corns are growths located on the feet. Corns are a body's defense mechanism against friction and / or pressure. Simply described, pressure and / or friction causes callus to develop, usually over a bone. Under the callus, a point of hardened skin develops. The inward tip of the corn presses into the foot and can create pressure on the underlying nerves. The callus on top of a corn appears as an elevated, rounded pad above the surrounding skin. When wet, the skin becomes transparent, revealing the yellowish core on the corn.

Typical corn. Image courtesy of the Toronto Dermatology Centre

Corns range from the size of a pin to about 3 mm across and are usually caused by ill-fitting shoes. In other cases, misalignment of the body can cause corns. These corns are often extreme, growing as large as the diameter of a pencil. In all cases, the root cause of the problem must be solved before the corn can be permanently eliminated. Medical professionals such as chiropractors may be required.

There are three types of corns: soft, seed, and hard. Each type is reduced in its own way. Soft corns appear as a white bump, but the skin is intact (not flaking off). They are mostly located between the toes. These are often the most painful because they are surrounded by nerves. They are often moist from perspiration, thereby keeping them soft. Seed corns mostly appear in groups on the metatarsal pads on the bottom of the foot. Hard corns appear as circumscribed, cone-shaped

Image of seed corns courtesy of footache.co.uk

thickening of skin with a core underneath. There are no nerves or blood vessels in a corn, and skin lines run through the callus of a corn. Hard and seed corns are found on pressure points.

Removal

Soft corns can be reduced by applying corn pads / cushions. These pads often contain one or several of the following acids: methylsalicylate, citric, and / or salicylic acid to break down the corn. These corns are sometimes caused by toes naturally rubbing or shoes forcing the toes to rub. Ultimately, for the corns to be permanently eliminated, the root cause must be eliminated.

The first step to removing seed corns is to soften the callus with a callus softener. Once softened, insert a corn chisel into the perimeter of the core, work the chisel around the circumference and pop the core out.

Hard corns may be more complicated to remove. The core of a hard corn can grow into the foot and then veer off in another direction. In extreme cases, the core may end 2.5 cm away from the initial excavation point. A hard core may require multiple extractions. Digging around the core can create discomfort in the surrounding tissue. Blood should never be drawn. The process is the same as for seed corns, but due to the larger size of a hard corn, callus softener will need to be added many times during the procedure to soften layers before excavation, or the foot may be soaked prior to the service. Because corns develop in layers, an extraction may be a slow process of removing the layers. Sometimes a corn plane or a metal foot paddle will be the first tool employed to reduce the top-most layer of callus. At times, small pieces will be removed, at other times, a larger piece will come out.

Caution should be exercised when using callus softener on diabetics and geriatrics.

Corns can be discovered during a pedicure, or clients may book in solely to reduce a corn as an emergency. It is not advisable to make a client wait 6 weeks between pedicures to perform a reduction. Sometimes corns are painful and need immediate attention.

Homecare

The homecare regimen is largely devoted to the client paying attention to the triggers of a corn and eliminating the triggers.

Objective Three Self-Test

1) What is a corn?

_____

2) Where are soft corns mostly located?

_____

3) What is the general procedure for removing corns?

_____

4) How is softening performed on a large corn?

_____

5) What is the homecare regimen for a client who has corns?

_____

Objective Three Self-Test Answers

1) A corn is a growth on the foot that usually develops over a bone. It has an outer layer of callus and an inner core of hardened skin that points inward to the foot.

2) Soft corns mostly located between the toes.

3) The general procedure for removing corns is to soften the callus and then dig the corn out with a corn chisel.

4) A large corn can be softened by a foot soak or callus softener can be added as layers are removed.

5) The homecare regimen for a client who has corns revolves around the client identifying and eliminating the triggers.

Objective four

When you have completed this objective, you will be able to:
Describe exfoliants and masks.

Exfoliants

Exfoliation is the process of removing dead skin cells from the top layer of the epidermis. Exfoliation removes the barrier formed by dead skin cells. Once this barrier is removed, fresh skin cells can move easier to the surface of the epidermis, and moisturizing lotions can easier penetrate the skin. Exfoliation can be done in many ways. Manual exfoliation is achieved by mixing an abrasive inside of a carrier. Carriers can be lotions, oils, or gels. The feet are then rubbed with the mixture. Abrasives can be grains of rice, pieces of almonds, pumice, and synthetic materials.

Chemicals can also be used to exfoliate. Alpha hydroxy acid (AHA), benzoyl peroxide, and salicylic acid are three common chemical exfoliants.

Manual exfoliation is usually performed during the foot soak. While the feet are soaking, rub the feet and ankles, paying special attention to areas where the bone is close to the skin and heel. Optional: a nail brush may be used to clean under the toenails and around cuticles. Rinse the feet, remove them from the soak, and wrap them in a towel.

Exfoliation is only used on the 'average' healthy foot; never on diabetics and geriatrics. Even on healthy clients, exfoliant can irritate the skin, so a thorough inspection before the service is essential. Look for thin skin, redness and swelling, cuts, and abrasions.

Masks

Masks are applied in a manner that is similar to applying paraffin. A mask is a thick cream applied to the feet using a brush. Masks are applied after the massage. Plastic liners are then placed over the feet, and specialized heated footwear is put on. Masks provide hydration for feet that are very dry and / or cracked. After the feet have been inside the footwear for 10 minutes, remove them and the plastic bags. If excess mask

remains on the feet, it can be removed with a towel. If only a small amount of mask remains on the feet, it can be massaged into the skin.

Objective Four Self-Test

1) Identify three types of carriers:

_____

2) What can be done to increase the moisture level of feet that are very dry and cracked?

_____

Objective Four Self-Test Answers

1) Carriers can be lotions, oils, or gels.

2) A mask can be applied to increase the moisture level of feet that are very dry and cracked.

Objective Five

When you have completed this objective, you will be able to:
Describe heated footwear.

Footwear

Heated footwear is also called 'booties', and are warmed by electricity. They contain a 'high' and a 'low' setting. The low setting is commonly used. The high setting is often too hot for clients. Inspect heated footwear before each use for worn or defective components. Always test the temperature of the footwear before applying them to a client.

A second type of heated footwear looks like an oversized sock or a slipper. They come with a pack of rice or other grains. This type of footwear is placed in a microwave with a cup of water, and then placed into a pocket located on the footwear.

Objective Five Self-Test

1) Which two safety precautions should be undertaken before using heated footwear on a client?

_____

2) How are non-electric heated footwear brought up to temperature?

_____

Objective five Self-Test Answers

1) Before using heated footwear on a client, inspect the footwear for wear or deficiencies and test the temperature.

2) Non-electric footwear are heated in a microwave.

Objective Six

When you have completed this objective, you will be able to:
Describe paraffin.

Paraffin


Paraffin wax blocks

The paraffin wax itself has no moisturizing benefits. Benefits come from the lotions that are applied during massage, before the feet are immersed in the wax. When the feet are immersed, the paraffin pushes the lotion the skin into a deeper level than without the wax and is not allowed to evaporate. The temperature of the wax helps penetration by opening pores, helps relieve arthritic pain, and promotes blood circulation and relaxation. Perspiration generated during the soak cannot escape and is forced into the skin's outer layer. The outer layer fills with the perspiration; as a result, the skin cells are expanded, superficial lines are diminished, and colour is improved. Additional benefits include stimulating the lymphatic system and relief of arthritis and joint pain.

Paraffin Wax Procedure


Paraffin station, with wax warmer and disposable cups

If performed during a pedicure, the paraffin wax procedure happens after the massage. A typical paraffin wax warmer requires 30-60 minutes to bring the wax to useable temperature. Warmers are typically turned on at the beginning of each day. If not, make sure to turn the warmer on before the procedure, and allow for sufficient time to heat up.

Test the temperature of the wax. Using a small disposable cup, remove a small amount of wax

from the heater and pour it onto the underside of the wrist. The skin on the underside of the wrist is very sensitive. If it does not hurt in this location, it should be safe to use on the client.

Plastic bags prepared for filling with wax. Photo courtesy of Gallery Esthetics Source & Education Training Centre

Open a plastic liner by rolling the cuff. Dispense the hot paraffin from the warmer into the bags. Disposable cups can be used, or a reusable cup can be used; however, regardless of the transfer method, the cups cannot touch anything other than the wax to avoid cross contamination. If a cup contacts a surface or a person, it must be disposed of immediately or cleaned to the level appropriate as noted in EST 1.
For feet, about 100 mL is needed for each foot.

Open the bag wide, then cinch it at the top to trap air inside it. Shake the bag to distribute the wax onto all of its surfaces. Put the client's foot into the bag, form the wax around the foot to ensure complete coverage and remove excess air. Seal the bag around the leg. Wrap the foot in something warm, such as heated towels or footwear. Heated towels and footwear extend the warmth, thereby improving the effectiveness of the treatment. Leave the client for approximately 10 minutes. During this time, the apprentice can clean their tools and perform other tasks.

Melted wax, ready to be used. Photo courtesy of Gallery Esthetics Source & Education Training Centre

After the time has expired, gently take the foot while still in the towel or footwear and loosely massage to separate the wax from the skin. Remove the towel or footwear and pull the bag and its contents off of the foot. If any wax is left on the skin, remove it with a towel. Clients prefer the apprentice to massage the residue into their skin.

If polish is included in the service, it is commonly done before the paraffin wax treatment. Refer to EST 23 for polish procedures.

Objective Six Self-Test

1) What are the positive effects of the paraffin wax's high temperature?

_____

2) On which part of the body is wax temperature tested?

_____

3) Approximately how much wax is needed for one foot?

_____

4) How is wax removed after the exposure time is over?

_____

Objective Six Self-Test Answers

1) The high temperature of the paraffin wax helps opens pores, relieves arthritic pain, and promotes blood circulation and relaxation.

2) Wax temperature tested on the underside of the wrist.

3) About 100 mL of wax is needed for one foot.

4) Gently take the foot while still in the towel or footwear and loosely massage to separate the wax from the skin. Remove the towel or footwear and pull the bag and its contents off of the foot. If any wax is left on the skin, remove it with a towel or massage it into the skin.

Objective Seven

When you have completed this objective, you will be able to:
Describe aromatherapy.

What is Aromatherapy?

Aromatherapy is the practice of using the natural oils extracted from plants to enhance psychological and physical well-being. Some people feel that the inhaled aroma from these essential oils may stimulate brain function. Each oil bears the name of the plant from which it is derived. These oils were called 'essential' because they were thought to represent the very essence of odour and flavor of that plant. The term 'aromatherapy' covers a wide range of topics and material. This ILM will only focus on some basic oils and their applications.

Essential oils must be used with caution; some oils can cause negative health effects such as miscarriages. Always research each oil in a respected and scientific document before use.

Tea Tree Oil

Tea tree oil comes from Australia. There are several varieties of plants from which tea tree oil is extracted. The most common plant is Melaleuca alternifolia, also known as melaleuca. Tea tree oil has antiseptic properties and can be used to treat wounds. Tea tree oil is applied directly to the skin for minor skin irritations and infections.

Myrrh

Myrrh is a resin extracted from trees commonly found in countries such as Somalia and Yemen. Myrrh is used as a skin conditioner. It can be added to a hot oil soak, or it can be applied directly on chapped or cracked skin.

Frankincense

The trees that provide myrrh and frankincense are closely related. The trees that produce frankincense can be found in Somalia, Oman, and Yemen. Frankincense is

believed to have a positive impact on the immune and nervous systems, as well as infection and inflammation of the skin.

Eucalyptus

Several different types of eucalyptus oils are available. They are extracted from trees and shrubs growing in countries such as Australia, Ecuador, China, and Brazil. The most commonly used oil comes from the Eucalyptus globulus tree. This oil can soothe aching and tired muscles, ease conditions that affect the airways, and reduce inflammation.

Objective Seven Self-Test

1) Which oil is believed to have a positive impact on the immune and nervous systems?

_____

2) Which is applied directly to the skin for minor skin irritations and infections?

_____

3) Which oil can ease conditions that affect the airways?

_____

Objective Seven Self-Test Answers

1) Frankincense is believed to have a positive impact on the immune and nervous systems.

2) Tea tree oil is applied directly to the skin for minor skin irritations and infections.

3) Eucalyptus oil can ease conditions that affect the airways.

Objective Eight

When you have completed this objective, you will be able to:
Demonstrate advanced pedicure.

Use the chart below to analyze your model's feet. If they show no signs of contraindications, move to the next portion of the practical exercise.

Feet	Recommendations
L / R	
❑ ❑ Callus	
❑ ❑ Fissures	
❑ ❑ Corns	
❑ ❑ Bunions	
❑ ❑ Verucca	
❑ ❑ Mycotic Nails	
❑ ❑ Athletes Foot	
❑ ❑ Edema	
❑ ❑ Varicose Vein	
❑ ❑ Ingrown Nail	
❑ ❑ Hammer Toe	
❑ ❑ Neuropathy	
❑ ❑ Other	
Skin	
❑ Open lesion/broken skin	
❑ Mole, Wart, Skin Tag	
❑ Cyst, Boil, Pustule	
❑ Rash, Eczema, Psoriasis	
❑ Water Retention (Edema)	
❑ Cellulite (Stored Toxins)	
❑ Lack of Tone	
❑ Other	

With the assistance of the instructor, perform a specialized pedicure.

Instructor verification: _____

The following is a list of tools, products, and equipment that you may need.

Pedicure Products	
Product	**Function**
Liquid Soap	Fights off harmful surface bacterial from the skin
Antiseptic Sanitizer	Reduces bacteria on the surface of the skin; aids in the prevention of cross-contamination
Antiseptic Foot Spray	Sanitizes feet before placing them into pedicure basin
Foot Soak	Softens the feet allowing for deeper penetration of skin and nail products
Polish Remover	Dissolves existing polish
Cuticle Remover	Softens dead cuticle tissue to allow gentle pushing back and to aid in its removal
Callus Softener	Helps soften dead skin cells for easier reduction
Cuticle Conditioner	Softens and moisturizes cuticles and surrounding skin
Moisturizing Lotion or Cream	Helps skin retain moisture and prevents or protects it from dryness
Massage Oil	Moisturizes and hydrates the skin
Polishes	*Base coat*: evens out nail plate and prevents polish from staining the nail plate *Nail strengthener*: prevents nails from chipping or breaking *Coloured polish*: creates a coloured effect on the nail *Top coat*: seals coloured polish and helps prevent chipping
Speed Dry (optional)	Decrease polish drying time
Corn Chisel	Used for excavating corns
Corn Plane	Used to reduce callus
Essential Oils	Used for aromatherapy

Carrier Products	Used to dilute essential oils and exfoliants
Exfoliant	Used to remove dead skin cells
Masks	Used to recondition skin
Heated Footwear	Used to increase absorption of products
Ph Neutral Soak	A gentle foot soak used on clients with special needs
Fibreglass-Enhanced Toenail Brace	For correcting ingrown toenails
Ingrown Toenail File	For smoothing sidewall edges of the nail plate
Anti-Mycotic Gel	A gel resin infused with silver or other anti-mycotic properties. Used in conjunction with corrective procedures to reduce bacteria growth. Can also be used as the base layer for an enhancement.
Anti-Mycotic Spray	A spray with anti-mycotic properties used to reduce bacteria growth

Module Summary Self-Test

1) How should a client with neuropathy be treated in relation to a client with diabetes?

_____

2) What should be looked for when inspecting a diabetic's feet?

_____

3) What can be used to treat a minor case of onychomicosis?

_____

4) What is the process to correct an ingrown toenail with thinning?

_____

5) How is a corn permanently eliminated?

_____

6) Where do seed corns mostly appear?

_____

7) How does exfoliation help the skin to regenerate?

_____

8) What must be done about one hour prior to a paraffin wax treatment?

_____

9) Which essential oil can be used as a skin conditioner in a hot oil soak, or can be applied directly on chapped or cracked skin?

_____

Module Summary Self-Test Answers

1) Clients with neuropathy and diabetes should be treated with the same caution.

2) A diabetic's feet should be checked for cuts, cracks, bruises, blisters, sores, infection and unusual markings.

3) A minor case of onychomicosis can be treated with some anti-mycotic sprays.

4) Use an electric file to thin the centre of the nail plate from base to free edge.

5) A corn can only be permanently eliminated by eliminating the root cause of the problem.

6) Seed corns mostly appear on the metatarsal pads.

7) Exfoliation helps the skin to regenerate by removing the barrier formed by dead skin cells, allowing fresh skin cells to move easier to the surface of the epidermis.

8) The paraffin wax warmer must be turned on about one hour prior to a paraffin wax treatment.

9) Myrrh can be used as a skin conditioner in a hot oil soak, or can be applied directly on chapped or cracked skin?