

SYSTEM 75: OPERATING INSTRUCTIONS

PREPARATION FOR PIERCING:

- Preparing the customer
 1. Have the customer select the style of the piercing stud they would like from the ear piercing stud sample board.
 2. Have the customer complete and sign the Release Form.
 3. Have the customer sit in the designated piercing area.
- Preparing Yourself

First, familiarise yourself with the system 75™ piercing instrument and the packaged studs. It is very important that you present yourself as a confident, expert piercing technician to the customer. The more comfortable you are, the more at ease your customer will be. This will help the customer relax and relieve any anxiety they might be experiencing.

1. Wash both hands with soap and warm water, dry thoroughly with a disposable towel, and put latex gloves on both hands BEFORE proceeding with the ear piercing.
 2. Check the customer's earlobes for cysts. Cysts are embedded skin tissue surrounding foreign debris. When you pinch the earlobe and feel a small, hard lump that can be moved, it is probably a cyst. If you see and feel a small lump that does not move, it is most likely scar tissue. Cysts are not visible and can be moved, whereas scar tissue is visible and does not move. You may pierce through scar tissue, but never through a cyst, as it may rupture, releasing debris into the surrounding tissue which can cause an infection.
- Marking Ears:
 1. The customer should remove any earrings they are wearing.
 2. Ask the customer where they would like the new stud(s).
 3. Cleanse the customer's ears with the Studex Sterile Prep or Studex® Ear care Solution and a cotton ball. If neither is available, alcohol may be used.
 4. Mark the ears appropriately with the non-toxic Marking Pen (Fig.1).
 5. Have the customer check and approve the marks BEFORE proceeding with the piercing. The customer should not touch the ear after cleansing.



Figure 1

A NOTE ABOUT CARTILAGE PIERCING-

If you are piercing in the cartilage area of the ear (see Fig. 2), special care must be taken during both the piercing and the after-piercing care.

CARTILAGE AREA-

Special care must be taken when piercing through this cartilage (dark area on right).

Do not pierce through the curled "edge" of the ear. With customers who have very thick or heavily curled cartilage, you must pull the cartilage slightly to "unroll" it when piercing the cartilage around the edge of the ear. This is to ensure that the piercing can be properly positioned. Whenever piercing through any cartilage area of the ear, you must take care to ensure the instrument is held perpendicular to the surface of the ear. Alert your client that the healing of the cartilage area will take somewhat longer than the lobe area.



Figure 2

- Loading the Cartridge

For safety's sake, wash both hands thoroughly, dry with a disposable towel and put latex gloves on both hands before opening the sterile blisters or touching the customer's ear.

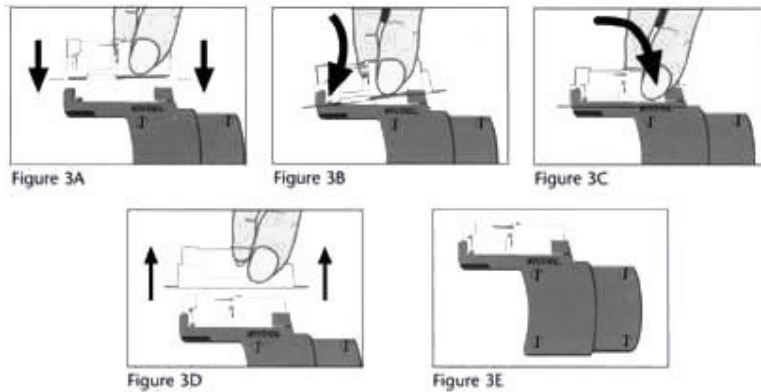
1. Make sure the instrument is cleansed before and after each use.
2. Remove the twin blister from the package and separate the twin blister by tearing along the perforation between the cartridges. For your convenience, Sterile Prep Pads are packaged with the studs for cleaning the customer's ears.
3. Peel off the paper backing from one blister, exposing the piercing cartridge.

DO NOT REMOVE THE CARTRIDGE FROM THE BLISTER.

1. Holding the sides of the plastic blister firmly with the opening on the bottom, slide the clasp end of the cartridge down and forward into the channel in the instrument until it is seated fully forward (figures 3A & 3B).
2. Rotate the back of the cartridge down into the channel until it is firmly seated as shown in Figure 3C.
3. Lift off the plastic blister (Fig. 3D). Do not discard the plastic blister, as you will need it later.
4. You are ready to pierce (Fig. 3E).

DO NOT TOUCH THE CARTRIDGE AT ANYTIME.

Always use the blister as a holder when installing, removing or transporting the cartridge. In this way, sterility of the piercing studs and clasps is maintained, and accidental worldwide contact with the customer's body fluids is avoided.



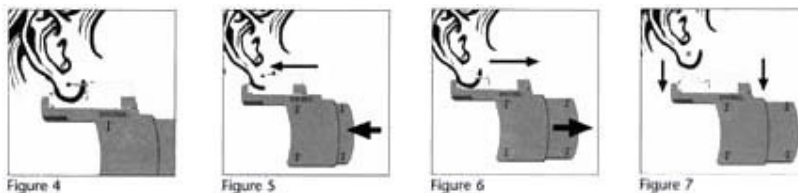
- Piercing the Ear

Be sure the ears have been cleansed with the Sterile Prep Pad provided. You may also use a cotton ball saturated with Studex Ear Care Solution or alcohol.

1. Place the ear between the end of the stud and the clasp, carefully aligning the point of the stud with the marked ear as shown in Figure 4. While maintaining proper alignment, slowly squeeze the handle. This will slide the stud forward for more accurate positioning.
2. Keeping the proper alignment, squeeze the handle firmly to pierce the ear. The clasp will be automatically installed on the stud with the proper spacing (Fig 5).
3. Release pressure on the handle (Fig.6) and carefully pull the handle straight away from the ear (towards the bottom of the handle) - See figure 7. This will release the stud from the clear plastic carrier and the clasp from the cartridge.
4. Remove the used cartridge from the handle (see removal instructions) and discard the cartridge and the blister.
5. Repeat this procedure for additional ear piercings.

After piercing is complete, wipe the pierced area of the ear (front and back) with a cotton ball saturated with STUDEX Ear Care Solution. Apply MediSept Ear Care Gel to the front and back of each piercing. Give the customer after-piercing care instructions to take home with them.

NOTE: When the piercing is complete, ask the customer if they are able to stand up, or if they need a few minutes. If the customer stands up and feels dizzy, help them sit down, and have them wait 3 to 5 minutes before leaving.



- Removing the Cartridge

1. After piercing, place the plastic blister (the one that the cartridge came in) down on top of the used cartridge as shown in Fig. 8.
2. Firmly holding the sides of the blister as shown in Figure 9, slide the blister and cartridge slightly forward to release the cartridge from the channel.

3. Lift the entire cartridge assembly straight up and out of the channel (Fig.10).
4. Dispose of the used cartridge and blister in the appropriate manner.

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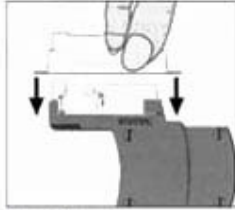


Figure 8

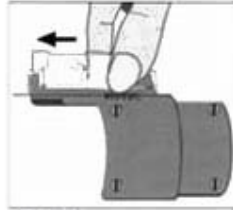


Figure 9

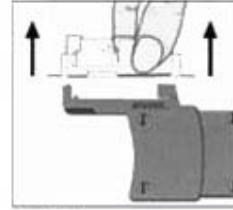


Figure 10