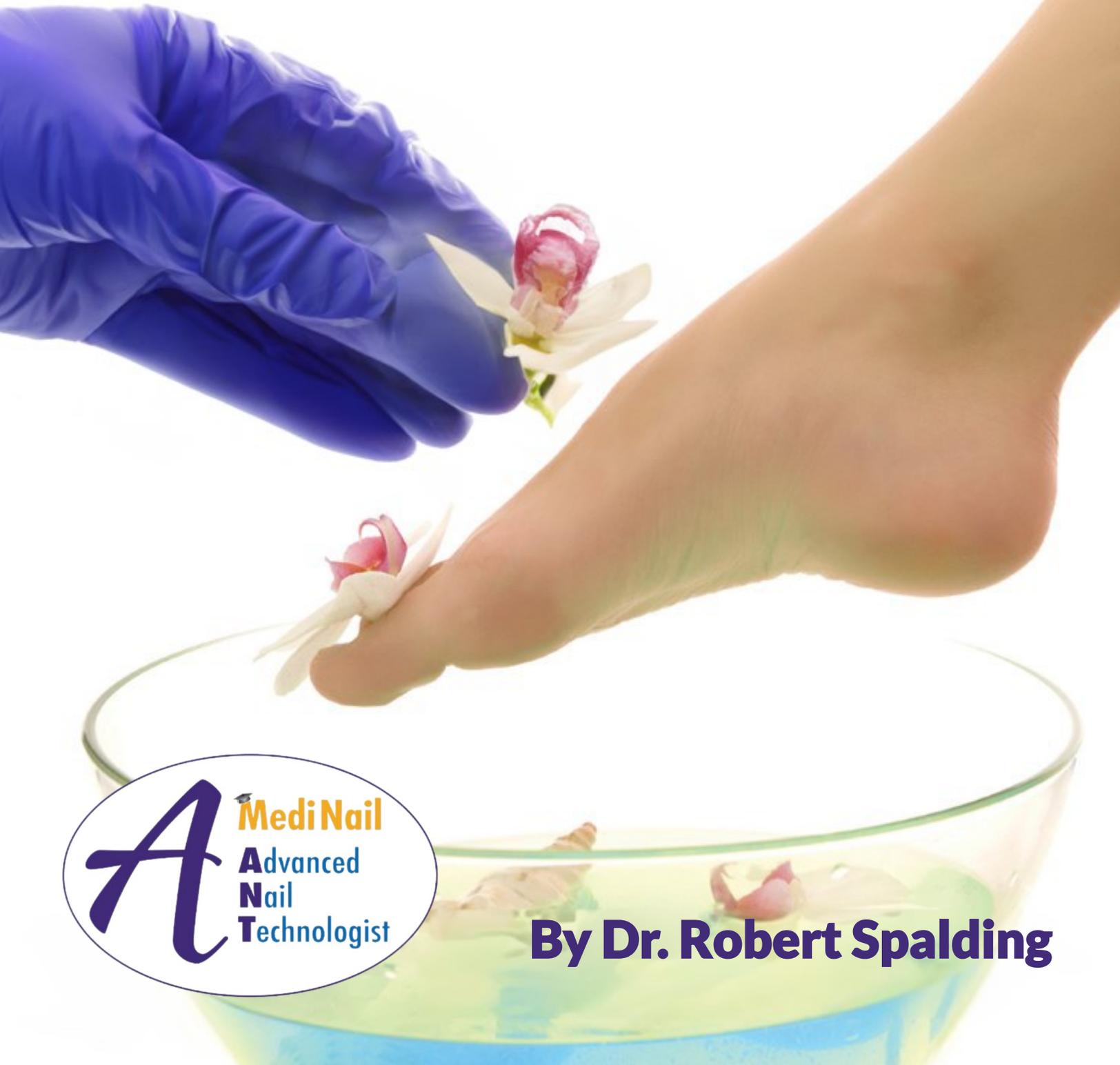


# PROTOCOLS FOR THE *A*DVANCED NAIL TECHNICIAN



**By Dr. Robert Spalding**

# INTRODUCTION

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Welcome to the additional information and protocol section of the MediNail Advanced Nail Technician and Medical Nail Technician™ Certification courses.

These downloaded materials are sections of information from the book, *Death By Pedicure*, and will be available on [medinail.com](http://medinail.com) and [Amazon.com](http://Amazon.com) and on other web sites.

These particular protocols have been chosen as they particularly fit the MNT and ANT programs. The more ‘spa’ treatments are in the book, examples would be theme manicures and pedicures. A more detailed description of the book is at the end of this download for those that are interested.

Other information is included in the download, such as Safe Salon Ratings Course Module on [MediNail.com](http://MediNail.com). If you feel more information needs to be included, or a topic should be addressed, please feel free to contact Sheryl through MediNail at 423-805-7966 or contact [support@MediNail.com](mailto:support@MediNail.com)

Your comments are always appreciated. Thank you for your interest.

*Dr. Robert Spalding*

# Purpose of ‘Protocols for Advanced Manicures and Pedicures’

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This content is written expressly to accompany the **MediNail Advanced Nail Technologist** course. Dr Spalding noticed during his medical school training from 1993-1997 a similarity in what podiatrists and nail techs perform. Both professionals cut nails. He also noticed during his clinical training, residency training and his first year in practice in 1998 that many infected nails were being caused by nail technicians.

Dr Spalding began to research why many nail salon visits were causing these infections and these nail salon patrons were going to podiatrists to be treated.

Early in school, Dr, Spalding was asking his professors why these infections were happening the professors replied, “nails salons bring us a lot of business and we tell our patients not to go there but they go there anyway”.

Dr Spalding discovered the principles and rationale why these micro injuries were occurring in salons. Dr. Spalding was the first to coin the term, Salon Micro Trauma or SMT in 1998 a term that he also used in the first online training program in the US. Dr Spalding’s book, Death By Pedicure was the genesis of the MediNail Advance Nail Technician and Medical Nail Technician online training certifications that helped nail tech prevent injuries leading to many infections as more and more nail tech stook his classes.



Dr Spalding also was the first physician in the US to give his patients information how to find a safe salon and avoid going to salons who performed services out of their scope of practice causing the majority of the injuries he consulted nationwide from other physicians who read his book on the subject.

# WHY STERILIZE?

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THE NAIL INDUSTRY IS IN CRISIS and many nail technicians feel helpless against being categorized as 'unsafe' by the media. NAIL SALONS ARE UNSAFE, they say, grossly generalizing. Is it true? Betty Davis, nail technician and Consumer Advocate/Crusader, did an exposé of sanitation habits in nail salons for a television station in Texas and found that only 25% performed proper infection control, and many other violations were obvious. ([www.nailsalonsexposed.com](http://www.nailsalonsexposed.com))

Davis' results were actually better than this author's when performing an undercover investigation in Columbus, OH, for a TV station. In checking out seven salons (with a hidden camera and mic), I found not one performed the disinfection process properly and, as with Davis' investigation, many other violations were obvious. Later, my curiosity aroused, I walked into a salon in St. Louis, MO, as a potential client and asked what kind of disinfection they performed. (They had blue stuff at all stations in glass containers—no implements in them, but they did have the containers. I suspect it was water with blue dye added.) While answering, they mispronounced 'tuberculocidal,' so I asked to see the container of the disinfectant. They showed me an unopened box with the disinfectant safely sealed inside. Then they showed me to the UV light disinfection unit... it still was closed tightly with the packing tape undisturbed!



We all know that negligent salons are everywhere and are the cause of the deaths, maiming, scarring and the damages of clients. Coupling their poor habits with newly emerging and strengthening microbes, their activities have directly lowered the income for the overall nail industry by causing harm to clients, and to the reputation of the



industry. Many potential clients are now hesitant to use our services and some current clients are ceasing services as they are fearful of the possibilities of infection transmission in our salons.

These poor habits and the damages allow the media to have a heyday, using these stories as their News at 6 headline story. The problem? They lump all salons into the danger zone. Those of us who legitimately meet the state requirements and work safely suffer and are not meeting our potential due to the frightened consumers. (Remember when pedicures services were growing faster than any other service in the industry?)

Worst of all, of course, is the damage the non-compliant salons continue to do on uninformed clients.

What do we do to re-establish confidence in the industry? Possibly nothing can be done about changing the habits of many technicians, leaving it almost impossible to fully reconstruct the industry's reputation, overall, without a serious influx of money for new inspectors working for the state boards. Truth is, however, that many state boards are ham-strung by state legislatures that take all the cosmetology licensing fees—a very lucrative income for the states—but give little back for hiring more inspectors or training the current ones. Nor do the legislatures and governors allow upgrades of the state requirements as 'it just costs too much.' They have no clue of the harm they are allowing.

What can be done? It's up to you, the individual nail technician, salon and spa to rescue your little corner of the industry. To do that, you must set yourself apart from the 'danger zone' market. Individual nail technicians, salons and spas can re-create trust between them and your current and potential clients, in the meantime becoming more successful than ever. The key is in supporting consumer beliefs that they are safe for services in your specific



salons/spas. You must address the problem and **be loud about it** so clients can hear your salon, spa or studio is a safe place to get their nails and pedicures performed and the safe place to be.

Legally, you can do this as you will be far surpassing the state rules, and the boards appreciate that. How do you address this as a single salon/spa or as an individual nail professional? You (or your technicians) get all the education you can on aseptic techniques, keep your salon immaculate, and purchase a sterilizer. You commit to safety practices in your salon that are obvious (the client sees them) and proven, then market your choices with all your might!

The first step you are already taking; you are enrolled in a course to learn about these techniques. After passing the course, you will have a Certificate to market, support materials to utilize, and a support group to answer your questions.

### **Twelve Reasons to Sterilize with an Autoclave**

1. Sterilization is the only means of disease prevention that can be verified and guaranteed at any time.
2. Sterilization is the only form of disease prevention that can kill all bacterial or fungal organisms and prevents recontamination through the use of sealed pouches as opposed to post-disinfection holding trays.
3. Sterilization is the only disease prevention method that readily kills bacterial spores.
4. Sterilization assures the clients that they receive sterilize implements through the use of sealed pouches that can only be opened once.
5. Sterilization pouches are to be opened only in the view of the client, providing him/her the confidence of safety.
6. Sterilization is guaranteed though a colored heat indicator that only shows change when the proper kill temperature has been achieved.
7. Sterilization is cheaper than liquid disinfection after the initial purchase of the autoclave sterilizer. Eventually, the cost of the Autoclave meets the costs of liquid disinfection, and the Autoclave is more economical than liquid disinfection methods.

8. Daily change of liquids is no longer necessary.
9. The inconsistencies in the recommendations of proper soaking times are no longer a concern.
- 10.State inspectors love salons that go beyond the basics in safety procedures.
- 11.Marketing of your sterilization policy brings concerned consumers into your salon.
- 12.Sterilization allows the salon to offer a valuable customer service: the sterilization of personal home nail care implements. The service can be free or for a nominal fee and is welcomed by clients..

Of course, working safe has more elements than just purchasing a sterilizer and using it, such as the mentioned aseptic techniques and environmental cleanliness; those will be covered in the course thoroughly.

### **Another Benefit to Working Safe**

An added benefit to working safely is gaining the respect of the medical community. Physicians have always placed all nail technicians into the same group as those that cause the damage on the patients they must deal with in their offices. Using the techniques learned in this course, and adhering to them closely can change that opinion. If you commit to the processes you learn in this course, you will be able to gain an entirely new resource for clients— physicians who know about you will refer their patients to you if you market your salon or spa to them.

Another reason for adhering to safe techniques is profits. The ANTs and MNTs that graduated before you are enjoying packed books and higher incomes. They will tell you that is because they have taken these courses, committed to these premises of safety, and marketed their safety practices. Potential clients want to this standard of care, and your books fill quickly.

The Advanced Nail Technician (ANT) course you are enrolled in, gives the technician who wants to work in a physician's office the training that will get her there. Podiatrists and medispas are welcoming these graduates into their offices and spas as they know they work safe and are properly trained to work along side physicians.

We hope this has answered your questions on why you must sterilize, but if not, take heart. The course will give you many more reasons. Also, the information in Dr. Bob's book is very convincing! ***Commit to safety. It's the professional, profitable, and wise thing to do!***

## Using PPE's or Not



What are PPEs? **Personal Protective Equipment** is equipment that is designed to protect workers from harm in their work environment. The official definition from OSHA is “barriers between the employee and potential contaminants or damage.” Employees were being harmed, and OSHA, The Occupational Safety and Health Administration, developed rules (‘standards’) that required the use of PPEs if there is any potential for harm in any work situation that PPEs could prevent. Essentially, owners were not providing protection for their workers, and the workers were not taking ownership of their potentials for damage (‘that

won't happen to me...’) so standards were set. These standards do apply to nail salons also and state that owners must require the workers to use PPEs and even pay for them. (Yes, it's true.) But in the nail industry, few owners require them, and few employees bother.

The PPEs of note in the nail industry are gloves, masks, and eyewear and are required to be used when working as a nail technician when appropriate. The requirements were further clarified through an addition to the original OSHA standards in 1993. This ruling, the Bloodborne Pathogens (BBP) Standard, more directly addresses exposure to blood and other potentially infectious materials. (The original standards were more focused on direct dangers, as when a nail flies into a technician's eye and she is not wearing eye protection.)

The standard describes Occupational Exposure as “Any reasonably anticipated skin,

eye, mucous membrane or parenteral contact with blood or OPIM (“Other Potentially Infectious Materials’) that may result from the performance of an employee’s duties.” Do nail technicians ever get anything in their eyes during their execution of their jobs? Do they ever come in contact with blood? The answer to these questions is “yes, we do.” We accidentally cut clients while filing or using nippers...slice a side wall while filing...or slip with the e-file; there are many accidents that happen during our work and blood is present.

The standard inside the BBP that applies to PPEs is called ‘Universal Precautions’ (UP). This ruling is interpreted as saying that when personal care employees (nurses, physicians, occupational therapists, nail technicians and many others that may be potentially exposed) have contact with their patients/clients “the client must be considered ill or contaminated and the employee must be protected.” To make it even more explicit, the Engineering and Work Practice Controls Standard was added in 2001 stating ‘Employers must put into place controls that isolate or remove the bloodborne pathogens hazard from the workplace.’ The controls in our work place would be our eyewear, gloves and masks. Even a sterilizer can be interpreted as a control as it kills microbes on implements that we use.

So, why haven’t the state boards made rules about using PPEs? We could say that, generally, legislatures do not pass regulations that are already in place by federal agencies as, in reality, the sterilization standard is already in place through the standards of OSHA. Though true, in actuality, it is because the usual board member is not informed about OSHA requirements, nor are members of the legislatures. No state board rulings that require the wearing of PPEs by nail technicians are known by author. And since our owners and state boards are not informed of what they should be requiring, the decision of whether to wear PPEs or not becomes the individual technician’s, and sadly, they usually opt out. For that reason, most technicians are not being protected against the many contaminants surrounding them in their workplaces and activities. The reasons given? “I don’t like to wear them.” “They’re too much trouble.” “The discount salon down the street wears them and I refuse to be associated with ‘discount.’” “I can’t breath when I have a mask on.” “Masks fog my glasses.” “Gloves make me sweat and I hate that.” “I forget.” “They cost too much.” They give many reasons.

## Gloves

Gloves are worn to protect the technician, actually, not the client—though in fact they do that also if a technician is ill or contaminated, as do masks. They are specifically designed to protect the technician from the transfer of microbes from the client to the technician during any service. The tech must throw away her gloves and place new ones between every client, however, to protect the clients from transfer of infection from the last client.



Gloves should be latex or nitrile as microbes cannot pass through these materials. They should be the correct size, tight but long enough. (Gloves with too short fingers tear quickly.)

Those of us who do not feel comfortable in gloves (“they make me sweat”) can wear glove liners, inexpensive, thin and stretchy, cotton gloves worn inside the protective gloves. They are purchased in packages of 12, and can be washed in a lingerie bag with the towels. They absorb the perspiration and, at the same time, can protect the gloves from puncture by longer nails. They also allow the latex or nitrile gloves to be put on or removed more easily and quickly.

**Do remember to ask your clients on your health sheet if they are allergic to latex gloves.** This is rare, but happening at an increasing rate. If they are, you must go to nitrile gloves or they may have a severe reaction.

## Masks

Masks are protection from flying debris and microbes in the breathing space of the technician. Let’s face it—e-files direct nail dust (and in the case of toe nail debridement, fungus) right into our breathing space. This is unhealthy and can cause numerous



illnesses for the technicians.

One problem with getting technicians to wear masks is that the techs in the below market salons wear them. Traditional technicians do not want their salons mistaken in any way with below market salons, so many times refuse to wear them for that reason.

Technicians who say masks fog their glasses are not pressing the little metal piece across the nose tight to prevent this. Those who can't breathe will get over that quickly by fitting the

mask correctly to their face. Overall, most technicians will recommend the 'accordion style' mask over the bubble style as they are much more easily fit to the needs of the wearer.

Many techs wear masks to protect their clients when they feel they may be coming down with a respiratory infection. That is considerate and correct. So why can't they wear them every time they use the e-file? "It's just too much bother," they say.

## **Eyewear**

Eye wear ("safety goggles") is designed to protect the eyes from flying debris and airborne microbes. Debris can cause damage to the eye and airborne microbes can cause serious eye infections for nail technicians. E-filing often disbursts debris into the eyes of nail technicians, causing scratched corneas, and worse. Safety glasses should be worn during prep and during use of e-files.

New very fashionable styles of eyewear goggles have eliminated the "they are oh so ugly" excuse for not wearing them. Look around; there is a style for everyone.



No debate exists about whether PPEs are required of nail technicians. They are. The only hurdle now is for nail technicians to realize that

they and their health are protected while they are doing what they love when wearing PPEs. Why take the chance? If you do not, you may be the one to be harmed.

# NOT THE SAME MANICURE AND PEDICURE

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In the 1980's, nail technicians purposely pushed aside manicures and only performed acrylics, the new favorite for fashion-conscious clients. Pedicures were not popular at all. Then, in the early 90's calls began to come into salons requesting manicures. "All I want is a manicure. Can't you just do a simple manicure?" the caller would ask. In 1994, the first pedicure whirlpool chair hit the market and pedicures surged to the "fastest growing service in the industry," according to the Gold Book, Creative Age Publishing, 1998. By the late 1990's, natural was back and if a nail technician could not perform at least a basic and spa manicure and pedicure, she would lose many income possibilities.

In the early 1990's, the definition of a spa by The Spa Association did not include a nail department—it was "an option," and spas were open with their opinion that "nails smell and we can't have that in our spa." By late 90's, however, spas were incorporating nail departments that performed natural manicures and pedicures (though some actually did acrylics) and were especially enjoying the surging profits from pedicures. However, they were still performing only the "Basic" and "Spa" forms of these services, pure relaxation

protocols that make no changes in the skin. Understand, however, that most spas were relaxation philosophy at that time so that was fine.

However, times were again changing. Skin-changing facial departments were developing as a result of products hitting the market with new results-oriented ingredients that actually worked. Clients began enjoying the anti-aging improvements on their face and became addicted to the changes. Then, in 2000, Milady Publishing, showed that a full menu of improvement services was available in nail care, services similar to those in the facial departments. At the same time, clients began wanting their nail services to move way past beautification of their nail plates; they wanted the skin on their hands to be improved just like the skin on their faces. This client attitude is fully developed now, along with their demand for clean services. Are you ready to do this? If you are going to charge higher prices for your safety procedures, you need to upgrade your menu also.

### **Updated Protocol**

In the days before they came into favor, manicures and pedicures were easy to learn. After all, how hard is it to learn two manicures and two pedicures? Those days are over, however. Now manicures require actual decisions by the technician and the client and may vary from the norm in protocol. The service that is most appropriate for the skin and natural nails must now be offered according to the goals of the clients.

The following manicure and pedicure protocols have a basic method in common, but the different goals require professional products unique to the process of their being met. Some variations in the home care are necessary to move the client continually toward them.

1. Entrance procedures. New client sheet, if a new client, hand washing and seating.
2. Client analysis. Hand and foot evaluation/exam, followed by recommendations for treatment.
3. Remove the polish, shorten and shape the nails and carefully nip the loose, obviously dry cuticle.
4. In a pedicure, the feet are soaked or moisturized and placed in electric mitts.
5. Prep of the skin.

6. Hand and arm or foot and leg massage.
7. Callus treatment and cuticle treatments
8. Nail bed cleansing and polish prep
9. Apply polish
10. Post procedure sanitation procedures

This protocol is not the shortcut dry manicure method of old. Instead, it is a treatment-based method with a new order of steps designed to enhance the results.

## Differences

The major differences from the manicures and pedicures you learned in school are the following:

**Client analysis.** Checking out the hands and feet for good health and condition is necessary for making good treatment recommendations.

**No soaking of the nail tips.** Soaking in a manicure can be more damaging than dish washing so the soak has been removed from the manicure but not from the pedicure.

**Skin preparation.** Some services require the skin to be exfoliated of dead cells to allow maximum results of the treatment.

**Massage earlier in the protocol.** The client is more relaxed, and the skin more prepared for the treatment.

## Manicures

**Basic Manicure** – this service is the old standby for salons. The nails are shortened, the cuticles pushed back, a short rub massage is performed, the nails are polished and the client is out the door in one half hour. It is strictly a utilitarian manicure and many salons and spas have taken it off their menu. It's very difficult to get it finished in a half hour and be ready for the next client. Most have upgraded the Basic (and raised the price by half or more) to allow some actual treatment for the client's hands as well as more massage.

**Scrub Manicure** – This manicure is the Basic with a scrub added to usually treat environmentally hardened skin. It works great for clients who work outside, such as with horses or in the garden, or perform activities that consistently apply light friction to the skin. It is also great for dry or dehydrated skin. It takes no longer than the Basic, but allows more time for the massage and produces improvement to the skin through physical exfoliation of the dead cells and, therefore, the softening of the skin. The elbows are included in the scrub to exfoliate scaly cells.

**Moisturizing (or Hydrating) Manicure** – This manicure is for severely dry or dehydrated skin and is the Scrub Manicure with the addition of a hydrating mask and a possible upgrade to include paraffin over the mask during the mask set-time.

**Aromatherapy or Theme Manicure** – This manicure can be the Scrub or Moisturizing Manicure with products that have the same aroma or theme. For example, a Lavender Moisturizing Manicure (maybe with a fancier name), is a scrub or hydrating manicure with relaxation enhanced through lavender-based Aromatherapy products, such as a lavender scrub, lavender moisturizing mask, and lavender lotions.

An example of a theme manicure might be the use of pumpkin aroma products for a Thanksgiving time theme. It's the same protocol as the moisturizing manicure, and possibly includes the paraffin in the treatment to justify a higher price than the moisturizing treatment manicure.

**Anti-Aging Manicure** – This manicure includes two treatments, an enzyme mask to exfoliate dead cells (no scrub in this treatment), and an acid treatment to increase the turn over of cells. No massage is performed on the top of the hands where the treatment is performed, but is enjoyed on the palms and arms. A great upgrade is the



use of an LED light, post acid treatment, to ramp up the action of the acids. Another upgrade would be extending this treatment to the client's elbows to soften the surface and release dead cells.

**Lightening Manicure** – This manicure is the same as the anti-aging treatment but the acid is a low percentage peel (such as a 7% TCA—no higher) followed by an LED treatment, bringing the price to an even higher level. This peel is performed as a series of three treatments, one month apart. Again, no massage of the top of the hands is included, though the palms of the hands and the arms can be generously massaged. This treatment works well to lighten age spots, and can be upgraded to include the arm. This peel does not cause the burning effect of high percentage peels, and is repeated monthly to achieve results. A commitment to pre-series home care is absolutely essential for good results, as is the in-series and maintenance home care.

## Pedicures

**Scrub Pedicure** – This pedicure addresses feet that are constantly abused and develop scaly, rough surfaces, and calluses. Clients love the results of this pedicure and many menus have removed the Basic Pedicure and made this their lowest cost pedicure service. (It includes more time, more massage and is more expensive than the previous Basic Pedicure previously on the menu.)

**Softening/Relaxation Pedicure** – This is the Scrub Pedi- cure, plus a softening mask, similar to the Moisturizing Manicure. Paraffin and and/ or warm foot mitts are great upgrades for this pedicure.

**Aromatherapy Pedicure** – This is the Softening/ Relaxation Pedicure with theme or Aromatherapy products. It is more expensive than the Softening/Relaxation pedicure and usually includes paraffin.

**Callus Control Pedicure/Series** – This pedicure includes an enzyme mask to prepare the skin and calluses for the treatment. It includes a



callus treatment product of choice. It addresses recurrent calluses through a weekly exfoliation series (NOT with the blade) and successfully reduces non-pathogenic calluses. The skin becomes soft and callus-free, and the series is usually repeated every six months or yearly. This pedicure is this client's monthly treatment.

**Soakless Pedicure** – Developed as a response to concerns over infection control in traditional pedicure methods, this technique offers an alternative where water use is either impractical or impossible. Initially designed for estheticians who double as manicurists to perform in an esthetic chair, it adapts well to a lounge setting. This innovation gained traction particularly after reports of infection risks associated with standard pedicure chairs. Pedicure services often spark debates, primarily due to issues with inadequate infection control. High-profile cases of infection, such as the incident at Fancy Nails in Watsonville, CA, where 100 clients were infected, leading to three fatalities and numerous cases of scarring and damage, have significantly impacted the pedicure industry. These events have heightened client fears and drawn intense media scrutiny, prompting a shift towards soakless pedicures.

### **Soakless Pedicure Protocol**

This client can be sitting anywhere, a skin care chair, a lounge chair, wherever. But they must be comfortable. Cover the chair or facial with linens or a sheet towel. Have all pedicure implements still in the sterilization pouch on a towel-covered professional stand along with other supplies. Cover the chair foot area with a plastic bag and a large towel. Cover the client with a clean comfortable blanket, sheet, or whatever is the salon policy:



1. The client health information should be filled out in the waiting room. Seat the client according to policies. The client should be seated with their head higher than their toes and their legs well supported under the knees in a way that you can see their toes. Put on gloves.
2. Examine the feet and legs, according to the health responses on the health information sheet, and discuss any conditions with the client. Adjust your techniques according to the health responses (tell the client). Remove polish, shorten and shape

the nails while discussing the procedure. Suggest/prepare service suggestions (upgrades) at this time.

3. Cleanse. Wet the legs, feet and toes with a warm, wet towel and then apply a waterless cleanser. (Remember the toe nails-use a nail brush with more cleanser.) Rub in the cleanser with a comfortable, gentle massage technique, and then remove well with a warm, wet (never hot) towel. Move to/perform on the second foot/leg. Cover the leg and foot not being treated with a towel or the cover sheet.
4. Exfoliation. Apply a scrubbing product to the first leg and foot and rub into the skin, especially into the calluses. Use effleurage movements and spend no more than 1-2 minutes on the manual exfoliation. Remove with a wet towel and cover the foot and leg with the towel. (Always re-cover the foot and leg whenever the treatment is not being performed.) Perform the same procedure on the second leg, then cover.
5. Massage. Apply an oil or lotion and perform massage on the first leg and foot. For a paraffin application, apply the cuticle treatment, the callus treatment, apply more lotion away from the treatments, an appropriate mask on the feet, and apply the paraffin prior to putting on the plastic bag and terry mitts. Move to the second foot. If you are using a mask or a heavy lotion and no paraffin, now apply the cuticle treatment, the callus treatment and mask or lotion, place in a bag and in terry mitts or a towel, possibly a warmed one. Move to the second foot, repeat.
6. Callus Treatment. Remove the bag, etc., from the first foot, remove the callus treatment with a wet towel, dry the skin and perform the callus exfoliation. After, wrap the foot in a dry towel, leaving the toes exposed. Do not go to the second foot until you have performed Step 7.
7. Cuticle Treatment. Perform the cuticle treatment, lay aside. Now move to the second foot and perform Steps 6-7.
8. Polish Prep/Polish. Return to the first foot and put on her sandals. Cleanse the nails with alcohol, allow to dry, and then polish. Move to the other foot and perform #8.
9. Allow the client to sit and dry, then release her. While drying, clean and reset the work, prepare and place implements in the sterilizer, and disinfect the tub.

## Secret to Great Results

Achieving lasting results in manicuring and pedicuring includes two important concepts: Home care and a series of treatments.



**Home care sales.** Improving the skin is not difficult if you have great products. But it won't happen if a partnership is not developed between the nail professional and clients, both with the same goal, the improvement of the skin. It's important to have good professional products but that will still not ensure lasting results unless the technician is selling results-oriented home care that supports the professional treatments and targets the client's goals. You can perform a wonderful service, but without home care products and their committed use, it is not going to last more than 48 hours. This is especially important with anti-aging treatments. A technician who does not sell home care is inserting her skills into a circle of discontent: the results of the service do not last, so the client soon doubts the value of the service. With no improvement or results that last, the client will begin to doubt the expertise of the technician and will go elsewhere. Or become merely a relaxation-polish change client who comes in much less often.

**Series.** Hand and foot care is now expanded past the nail plate and into treatment of the skin. Just the same as in skin care, to reach the goal, treatments are in a series. One treatment does very little, but professional treatments teamed with home care can achieve phenomenal results for your clients.

# MARKETING SAFE PRACTICES

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Successful marketing of safe practices goes beyond owning an autoclave. It involves integrating safety into every aspect of the business, from pedicure chairs to handwashing policies, and maintaining an immaculate salon environment. Effective internal marketing also plays a crucial role, with strategically placed signage reinforcing the salon's commitment to safety.

All marketing collateral, from brochures to websites, should highlight the salon's safety philosophy. Engaging in print marketing with messages emphasizing cleanliness and safety can attract clients who prioritize these values. Additionally, proactive outreach to medical professionals can generate valuable referrals.

Salons and spas must adopt a holistic approach to safety, encompassing both physical cleanliness and the marketing of these practices. Missteps in marketing or failing to live up to safety claims can damage a salon's reputation. Therefore, it's crucial for salons to fully embrace and consistently execute their safety philosophy.

The nail industry is at a crossroads, with recent incidents highlighting the need for improved safety practices. Salon professionals must seize this opportunity to elevate their standards, not just for compliance but out of genuine concern for client safety. Those who embrace this change and effectively communicate it will set themselves apart in the industry.

## Setting Your Service Charges

When launching a salon, spa, studio, or lease station, or when introducing new services, determining the right pricing is a major challenge. Avoid simply matching competitors' rates or basing them solely on what clients are willing to pay. With your specialized training and unique offerings in your area, your prices should reflect that value.

Specialty service providers with extensive training often command higher prices. This is especially true for nail technicians who have invested in training, certification, equipment upgrades, and client education about safety. Considering these investments, a price increase is justified and clients should understand the value they are receiving.

Before raising prices, inform clients about your training and investments in their safety. Use brochures and signage to educate them. Announce your new pricing at least 30 days in advance, both at the payment desk and through direct communication. Emphasize the benefits they receive from your enhanced skills and equipment.

## Understanding Market Dynamics

The popularity and profitability of manicures and pedicures have grown significantly. Analyze the average service times and rates to understand their profitability. Upscale clients, who value natural treatments, are often willing to pay more for quality manicures and pedicures.

Technicians often fear client resistance to price hikes more than the clients themselves. Draw parallels with other professional services like dental cleanings where clients accept the quoted price. A small increase, like \$5 on pedicures, is generally acceptable and can filter out difficult clients.

Just a short while ago, no one was doing manicures, and pedicures were considered yuck by most technicians. Manicures were \$10-\$12 and pedicures were not being given. Times have changed, though. Natural is in. Manicures and pedicures are very important and profitable services in salons and spas now. Do the math if you aren't convinced – the average time for a fill is one hour. The average time for a pedicure is 45 minutes. The average cost of a fill is

\$28; the average cost of a pedicure is up to \$32. In less time than for a fill, more money can be made.

The average cost of a half hour basic manicure is \$18. You can do two in the same time a fill is performed, one hour. That means a \$28 fill is trumped by two \$18 manicures - \$36. Techs who understand the math of manicures and pedicures understand their profitability.

“Natural” is now the new mantra of the upscale clients. For that reason, they will pay more for their manicures.

### **Pedicures never were inexpensive.**

Then, the incidents happened in pedicuring and the growth slowed. Now, with the new safety methods, clients who were thinking twice about getting pedicures will want them again. They will pay more, also. Keep that in mind.

# MANICURE AND PEDICURE MASSAGE

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In nail school, we learned a basic massage that covered five movements, but after graduation, many of us focused on artificial nails and neglected our massage skills. This was a mistake as manicures and pedicures have become vital and profitable services in salons and spas. A good massage can be a key reason for clients to return.

Massage is more than just relaxation. Research, including studies by the National Institutes of Health, shows it has numerous health benefits like reducing heart rate, lowering blood pressure, and improving blood circulation. It's often the most enjoyed part of spa services, according to the International Spa Association.

For manicurists and pedicurists, it's crucial to master massage techniques. Tips include maintaining constant contact with the client's arm or leg, addressing tight areas with repeated massage, using the palms and bases of your hands instead of fingertips, moving smoothly and consistently, and focusing on effleurage (light, stroking movement) instead of more intense techniques.

## When to Massage in a Service

Clients should be asked about their preferences, and any areas they don't want massaged should be respected. Collaborating with massage therapists can improve skills, though their techniques are often more intense than what is needed for a relaxation massage.

Massage is usually done towards the end of manicure and pedicure services. However, it's beneficial to perform it earlier to relax the client and prepare their skin for treatment.

## When to NOT Massage

It's important to recognize that massage isn't suitable for everyone. Certain health conditions might be worsened by massage, and manicurists should be aware of these contraindications to ensure client safety.

- Fever or Infections like COVID 19 or the FLU
- Broken bones
- Inflamed areas
- Skin problems – rashes, warts, discolorations
- High Blood Pressure
- Uncontrolled Diabetes
- Infectious diseases
- Cancer
- Severe Osteoporosis
- Varicose veins
- Unstable hypertension
- Neuropathy
- Peripheral Artery Disease
- Deep Vein Thrombosis
- Gout
- Ingrown nails

# ATTRACTING REFERRALS FROM PHYSICIANS

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If you wish to receive referrals from physicians, you must ‘get your house in order’ before approaching them. That means you have to bring your work techniques to their standards. They do not compromise when it comes to the safety of their clients.

Until now, few physicians have felt comfortable referring clients to nail salons and many times discuss their mistrust with their clients. How do you cancel this mistrust and encourage them to send their clients to your salon or to you? You are taking the first step towards gaining their trust by taking this course. It will teach you the basics that physicians insist on when providing services for their clients.

Those basics are:

- Sterilization
- Aseptic Techniques
- Clean and neat salon/work area
- Strict hand washing policy
- Require a New Client Health Sheet and keep it up to date
- Perform a basic hand or foot exam every appointment
- Recognize a need for referral and do so
- Attend ongoing continuing Education

When you are ready, with all this now part of your service philosophy, you can market successfully to local physicians for referral relationships.

## **Sterilization and UPs (Universal Precautions)**

Carolyn Siegal, DPM, states what most physicians will say, if asked. She is astonished that cosmetology regulations are not as strong as the OSHA’s regulations in the medical arena. She notes that office physicians, though most times they are not performing invasive treatments, are required to sterilize their instruments with an autoclave, but salons are not. Universal Precautions are also one of the concerns physicians have about salons. “It would decrease everyone’s risk of contracting infections and diseases if cosmetologists would practice Universal Precautions; however, most are unaware of what this would entail,” says Siegal. Most physicians agree with her.

## **Antiseptic Techniques**

The definition of aseptic technique is “performing with- out the presence of bacteria.” It means working within a clean and safe environment and performing services with perfectly clean tools that cannot transfer disease. (That means sterilizing your implements and never using one on a client that has not been through the autoclave.) It also means performing services with personal protective equipment (PPEs) and preparing working skin surfaces (cuticles and nails) with 70% alcohol before services to re- duce potentials for infection and wiping them again with 70% alcohol after the service is finished.

## **Neat and Clean Environment/Work Area**

We all know that if we walk into a salon and it is cluttered and the nail stations are full of bottles and dust that the services are not going to be aseptic. But many of us work that way, oblivious to the obvious. Are you willing to clean up you environment (and keep it that way) in order to keep your clients safe and to do what it takes to develop an ongoing referral relationship with physicians? If not, forget even trying to develop that resource for clients.

They will check your salon out and your work habits on an ongoing basis. All they have to do is send in an employee or ask their clients.

## **Strict Hand Washing Policy**

This means that every client must wash her hands/nails well with antimicrobial soap before sitting down at a nail table, and the technician must wash her hands between clients. Do you believe this is not possible to do? It is possible and salons are doing it successfully. Some salons are having an inexpensive sink built into the nail room so they can be certain clients are scrubbing. It is just a matter of policy-and habit-and it works.

Every new client is trained how to wash with a nail brush her first appointment (the first appointments are longer than the future ones.) You’d be amazed how many clients believe a quick rinse is actually sufficient, so you must train them.

A side benefit of a hand washing policy is that absentee- ism for illness is dramatically less than before the policy is in effect. In one salon, after hand washing became mandatory, absenteeism from illness went to 25% of what it had been before.

## Require a New Client Health Sheet and Keep It Up To Date

Every new client should be told to come in 15 minutes before her appointment to fill out the new client information. Most finish in just a few minutes and then the receptionist takes the client to the sink and teaches her how to wash her hands. (Most salons have the technician do this, but this is an option.)

This Sheet is an important piece of prevention and a business builder. Never forget it nor discount its importance in the safety of the client. The technician must look at it for health issues, then discuss any circled with the clients.

## Perform a Basic Hand or Foot Exam Every Appointment

Some ANT's do not even fill the pedicure basin until the exam has been completed and the Client Health Sheet has been reviewed. Returning clients are asked, "Has anything changed with your feet since your last appointment?" Visually examine the top and bottom of the feet, and between the toes, and ask, "Do we have any cuts or blisters to be concerned about today? Any new problems with your feet I should know about?"

The foot exam is fully discussed in The Science of Pedicures and in the ANT course and the importance of the technique is stressed. Always examine a client's hands and nails before a manicure for any possibilities of pathologies and do the same with the feet for pedicures.

## Recognize a Need for a Referral and Do So

Many times, technicians can see changes or abnormalities in the hands or feet of their clients earlier than their physician. If so, she can refer the clients to their physician or to one of her referral physicians before the condition is serious. Realize your importance in this area of your care and check out every client before beginning the service. The clients will be glad you did if you catch something early, and the physician will be amazed and pleased.



No, **we are not diagnosing**, but we can, with this training, recognize abnormalities and refer our clients to physicians to be checked out. It's the professional thing to do.

## **Participate in Ongoing Continuing Education, Including Online Options!**

Physicians and clients alike value professionals who demonstrate a commitment to staying current with the latest developments in their field. Your choice to engage with MediNail's online courses is a testament to your dedication to excellence. By embracing these learning opportunities, you're not just meeting the minimum requirements for continuing education; you're elevating your expertise and service quality to a level revered by both the medical community and discerning clients.



### **Preparation to Approach Physicians**

If the physician is interested, he or she will most likely send an employee (or wife, if it is a man) with a specific list of qualifications to check out. Know that the representative may come incognito so you must keep the salon in optimum condition at all times. Infection control must be obvious and verifiable (packets), an autoclave sterilizer must be in place, the hand washing policy must be intact, and the salon and equipment must be immaculate.

When the client checking you out confesses who she is (she will before time to pay), you will be able to tell if she is positively impressed. If so, call immediately to set up an appointment with the office manager or the physician to finish developing the parameters of the relationship. (The referral forms, etc.)

Most technicians, once they have one referral situation, will fall easily into others either because the physician tells his friends, or the technician can name-drop when approaching another office. Many physicians will be in a group setting, and the technician can approach them all or have the office manager take care of it. On rare occasions, the physician(s) will want to interview the technician and will have questions. If so, be prepared with answers (you will get them in this course), and you are ready to take their referred clients!

### **Referral Protocol**

When referring clients to a physician or receiving referrals from them, specific protocols or communication methods are followed. This involves exchanging forms: the physician sends a form to the technician detailing the client's medical conditions and any specific

precautions the technician should take. Similarly, the nail technician sends a form to the physician when referring a client. For insight into the physician's viewpoint and examples of referral forms, refer to "Science of Pedicures" by Robert Spalding, DPM.

Are you prepared to access this abundant client resource? To do so, you must enhance your techniques with enthusiasm and strictly follow the necessary procedures. Once you do this, you can start building profitable collaborations with physicians.