



P r o f e s s i o n a l T e e t h W h i t e n i n g

Training Manual

- ◆ ◆ Legislation
- ◆ ◆ Hygiene & Safety
- ◆ ◆ After Whitening Care
- ◆ ◆ Insurance
- ◆ ◆ What Causes Teeth Staining
- ◆ ◆ How Does Whitening Work
- ◆ ◆ How White Can You Go
- ◆ ◆ Risks & Sensitivities

Cosmetic Teeth Whitening

Contents

Legislation	3
Whitening V's Bleaching	3
What Causes Tooth Staining?	4
How Does Teeth Whitening Work?	5
How White Can You Go?	6
Teeth Whitening Risks & Sensitivities	6
Who Shouldn't Have Teeth Whitening?	7
Hygiene and Safety	7
Understanding The Teeth Shade Guide	7
No Touch Teeth Whitening Procedure	8 - 10
After Whitening Care	11
Client Consent Form	11
Insurance	11
Contact Us	12



Cosmetic Teeth Whitening

LEGISLATION

The regulations for teeth whitening products that allow the sale of products containing 6% or less hydrogen peroxide and / or 18% or less carbamide peroxide.

Current Regulatory Standards:

The regulatory standards for teeth whitening products are set out in the SUSMP (also commonly referred to as the Poisons Standard) that are given effect by the following state and territory government legislation:

- Medicines, Poisons and Therapeutic Goods Act (ACT) 2012
- Poisons and Therapeutic Goods Act (NSW) 1966
- Medicines, Poisons and Therapeutic Goods Act (NT) 2012
- Health Act (Qld) 1937
- Controlled Substances Act (SA) 1984
- Poisons Act (Tas) 1971
- Drugs, Poisons and Controlled Substances Act (Vic) 1981
- Poisons Act (WA) 1964



WHITENING VS. BLEACHING: WHAT'S THE DIFFERENCE?

The answer is simple. The term "whitening" refers to restoring a tooth's surface colour by removing stains. The term "bleaching" refers more to using products containing a bleaching agent like peroxide to achieve stain removal. Of course, the term whitening sounds better than bleaching, so it is more frequently used – even when describing products that contain bleach.

Cosmetic Teeth Whitening

WHAT CAUSES TOOTH STAINING?

Age:

There is a direct correlation between tooth colour and age. Over the years, teeth darken as a result of wear and tear and stain accumulation. Teenagers will likely experience immediate, dramatic results from whitening. In the twenties, as the teeth begin to show a yellow cast, teeth-whitening may require a little more effort. By the forties, the yellow gives way to brown and more maintenance may be called for. By the fifties, the teeth have absorbed a host of stubborn stains which can prove difficult (but not impossible) to remove.

Starting colour:

We are all equipped with an inborn tooth colour that ranges from yellow-brownish to greenish-grey, and intensifies over time. Yellow-brown is generally more responsive to whitening than green-grey.

Translucency and thinness:

These are also genetic traits that become more pronounced with age. While all teeth show some translucency, those that are opaque and thick have an advantage: they appear lighter in colour, show more sparkle and are generally more responsive to whitening. Teeth that are thinner and more transparent – most notably the front teeth – have less of the pigment that is necessary for whitening. According to cosmetic dentists, transparency is the only condition that cannot be corrected by any form of teeth whitening.

Eating habits:

The habitual consumption of red wine, coffee, tea, cola, carrots, oranges and other deeply-coloured beverages and foods cause considerable staining over the years. In addition, acidic foods such as citrus fruits and vinegar contribute to enamel erosion. As a result, the surface becomes more transparent and more of the yellow-coloured dentin shows through.

Smoking habits:

Nicotine leaves brownish deposits which slowly soak into the tooth structure and cause intrinsic discolouration.

Drugs / chemicals:

Tetracycline usage during tooth formation produces dark grey or brown ribbon stains which are very difficult to remove. Excessive consumption of fluoride causes fluorosis and associated areas of white mottling. Fluorosis will often be enhanced directly after teeth whitening, however, this will return to its previous state within 1-12 hours

Grinding:

Most frequently caused by stress, teeth grinding and gnashing can add to micro-cracking in the teeth and can cause the biting edges to darken.

Trauma: Falls and other injuries can produce sizable cracks in the teeth, which collect large amounts of staining and debris.

Cosmetic Teeth Whitening

HOW DOES TEETH WHITENING WORK?

Most of us start out with white teeth, thanks to their porcelain-like enamel surface which is composed of microscopic crystalline rods. Tooth enamel is designed to protect the teeth from the effects of chewing, gnashing, trauma and acid attacks caused by sugar. But over the years enamel is worn down, becoming more transparent and permitting the yellow colour of dentin – the tooth's core material – to show through.

During routine chewing, dentin remains intact while millions of micro-cracks occur in the enamel. It is these cracks, as well as the spaces between the crystalline enamel rods, that gradually fill up with stains and debris. As a result, the teeth eventually develop a dull, lacklustre appearance.

Tooth Discolouration:

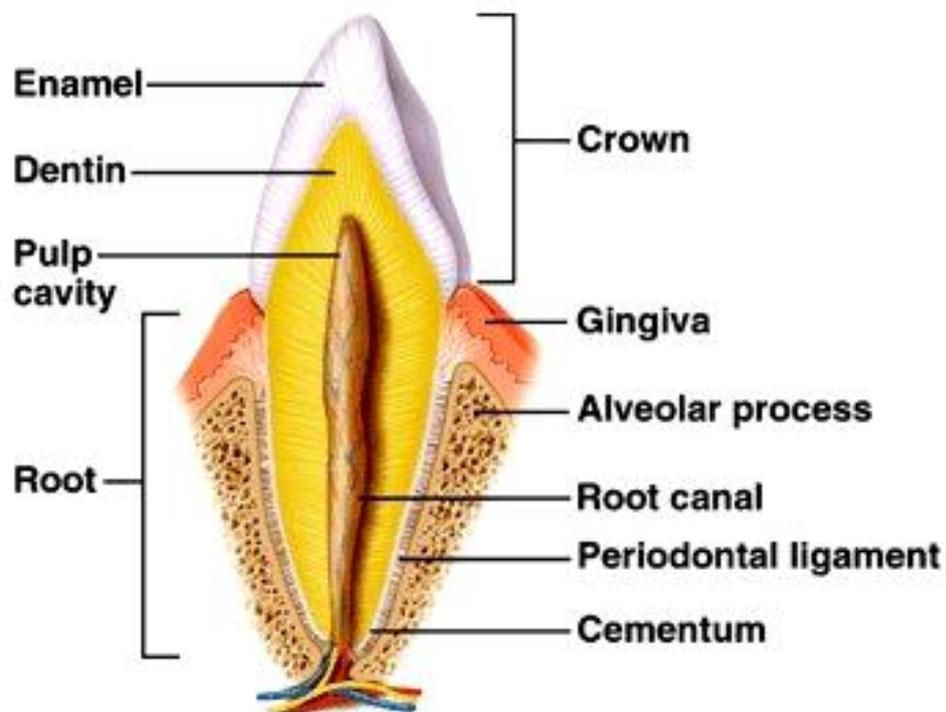
There are two types of tooth staining, extrinsic staining and intrinsic staining.

Extrinsic stains:

Are those that appear on the surface of the teeth as a result of exposure to dark-coloured beverages, foods and tobacco, and routine wear and tear. Superficial extrinsic stains are minor and can be removed with brushing and prophylactic dental cleaning. Stubborn extrinsic stains can be removed with more involved efforts, like teeth whitening. Persistent extrinsic stains can penetrate into the dentin and become ingrained if they are not dealt with early.

Intrinsic stains:

Are those that form on the interior of teeth. Intrinsic stains result from trauma, aging, exposure to minerals, chemicals and antibiotics like tetracycline during tooth formation and/or excessive ingestion of fluoride. These stains exist below the enamel and are unlikely to benefit from teeth whitening.



Cosmetic Teeth Whitening

HOW WHITE CAN YOU GO?

Teeth whitening results are subjective, varying considerably from person to person. Most are immediately delighted with their outcome. Before you embark on any whitening treatment, ask your client whether they have had teeth whitening in the past 2 years or have been using any home whitening products as this may reduce the results. Expectations play a major role in teeth whitening.

While whitening can occasionally lighten tooth colour by nine or more shades, most of those who whiten their teeth are likely to see a change of two to seven shades.

TEETH WHITENING RISKS

Teeth whitening treatments are considered to be safe when procedures are followed as directed. However, there are certain risks associated with whitening that you should be aware of:

Sensitivity:

Although rare with our gentle gel, teeth whitening can cause a temporary increase in sensitivity to temperature, pressure and touch. In extreme cases some individuals may experience spontaneous shooting pains. Individuals at greatest risk for whitening sensitivity are those with gum recession, significant cracks in their teeth or leakage resulting from faulty restorations. If this occurs discontinue immediately and ask your client to rinse and make an appointment with their dentist.

Whitening sensitivity usually lasts no longer than a day or two, but in some cases may persist a little longer. We recommend toothpaste for sensitive teeth to reduce sensitivity.

Gum Irritation:

Clients occasionally experience some degree of gum irritation usually from applying the gel onto the gum tissue. Such irritation typically lasts from a few minutes after treatment up to several days. The use of the vitamin e swab is very successful in eliminating gum sensitivity.

Technicolour Teeth:

Restorations such as bonding, dental crowns or porcelain veneers are not affected by bleach and therefore maintain their default colour while the surrounding teeth are whitened. This results in what is frequently called "technicolour teeth". If the default colour of these restorations is lighter than the natural teeth, the whitening treatment can still be used. We recommend that the client's teeth be colour checked after the first 20 minute session in these cases, as it may be all that is required to match the restorations.

Cosmetic Teeth Whitening

WHO SHOULDN'T HAVE TEETH WHITENING

Pregnant or lactating women are advised to avoid teeth whitening. The potential impact of swallowed bleach on the foetus or baby is not yet known. We also recommend the treatment for persons over the age of 16.

Individuals with highly sensitive teeth, or those who are in need of dental work should consult their dentist before having a whitening procedure.

HYGIENE AND SAFETY

The Celebrity Whitening teeth whitening procedure is completely hygienic and you never touch your client or their mouth. The procedure is effectively a DIY teeth whitening kit with an LED light accelerator to give the client maximum results in less than one hour. With the kit alone and no accelerator these results would take weeks of continuous treatment. This accelerated treatment is gentler on teeth and gums as there is less time with tissue exposed to the chemicals.

For hygiene ensure the client handles their own kit and make sure they have a paper towel or disposable hygienic place to lay the cheek retractor when not in use.

UNDERSTANDING THE TEETH SHADE GUIDE

When selecting the teeth shade with your client always gauge from the darkest tooth. The tooth shade chart is used to compare the colour of the teeth before and after a teeth whitening treatment. The R-20 is the easiest design for your clients to understand as it is arranged from lightest to darkest and numbered from 2 to 40, each model representing 2 shades. Your client will easily see how many shades lighter their teeth have become. Some other teeth shade guides are designed for creating veneers and are not suitable for teeth whitening as they are not from lightest to darkest.



Cosmetic Teeth Whitening

NO TOUCH TEETH WHITENING PROCEDURE

Prior to Appointment:

Ask your client to brush their teeth before their appointment. You may like to confirm the appointment at least one hour prior. Make sure you have everything you need for the appointment:

- Chair (if applicable)
- LED light and Power Cable
- Teeth Shade Guide
- Protective Glasses
- Consent Form
- Professional Teeth Whitening Kit
 - Cheek Retractor
 - 2 x Bibs
 - 1 x Pen
 - 1 x Vitamin E swab
 - 2 x Finger Wipes



During Appointment:

1. Either in the waiting area or in the treatment chair ask your client to read through the disclaimer and sign it when satisfied.

2. Open your teeth shade set; decide with the client the current shade of their darkest teeth. You may like to write this down.

3. Offer the client their teeth whitening kit and ask them to put on the bib paper side up.

4. Show client how to use the cheek retractor using your demonstration retractor. Now ask the client to remove their cheek retractor from their bag and for them to insert it. The cheek retractor is held like a smile with the arch up and goes in to the mouth with the larger flanges sitting inside the mouth behind the cheeks. (see image)



Cosmetic Teeth Whitening

NO TOUCH TEETH WHITENING PROCEDURE (cont'd)

IMPORTANT: At no point should you touch your client's teeth or mouth or offer to insert the cheek retractor or apply the gel for them.

5. Ask your client to open a finger wipe sachet and ask them to rub the front of their teeth by placing their finger into the wipe and using the blue side on the teeth, they may then discard into the rubbish.

6. Ask your client to open the gel pen and twist until gel covers the brush head. Pass the client a hand held mirror and ask them to start with the top teeth making sure each tooth is thoroughly covered including in between the teeth going as close to the gum line as possible without covering the gum. The applicator will probably need twisting and reloading every two to three teeth. After they have applied the gel to the accessible outer side of the top teeth, do the same for the bottom set.

The gel should be spread evenly in a thin layer over all visible teeth. Ensure the area in between teeth is also coated. The gel should be up to the gum line with as little gel as possible touching the gum. Using excess gel will not increase the results; it is just more likely to irritate the gum.

7. Have a quick look and make sure the client has even cover and has not missed any areas.



IMPORTANT:- Keep gel refrigerated and remove at least 1 hour prior to treatment

Cosmetic Teeth Whitening

NO TOUCH TEETH WHITENING PROCEDURE (cont'd)

8. Recline your client (where practicable) and position the light head so it is pointing directly onto the exposed teeth roughly 2-3cm away from the cheek retractor.

9. Explain to your client that if they feel any sharp pain in their teeth they should let you know (cease the treatment and ask your client to rinse thoroughly and then brush their teeth. They should also book into see a dentist as this may be a sign of a cavity).

10. Pass the client the protective glasses to put on. Ask your client to recline. It is important your client is in a reclined position to ensure the gel stays in place on their teeth and does not mix with their saliva. If your client is seating upright they will drool and their saliva will dilute the gel and the result will be less effective and may come in contact with their tissue. If a reclined position is not possible a mouthguard should be used. Turn on your accelerator and ask your client to relax and stay still for 20-25 minutes. Check on your client occasionally to ensure they have not moved their head and the lamp is still centred over their teeth.

11. Turn off the light and sit your client up. Ask them to rinse their mouth and brush lightly with a tooth brush but NO toothpaste or use the finger wipe. (Gel will only remain active for around 20-25 minutes so you will need a fresh application for the next session).

12. Repeat from step 3 offering the client a fresh bib. If your client is experiencing slight gum sensitivity use the vitamin E swab.

13. Ask your client to decide the new shade of their teeth.



Cosmetic Teeth Whitening

AFTER TEETH WHITENING CARE

Recommend that your client NOT consume tea, coffee, red wine, curry or anything that would stain a white shirt for 12 hours if possible, as their teeth are more susceptible to re-staining during this period. If they must consume dark liquids do so through a straw. Finally, tell your client to enjoy their new smile!

CLIENT CONSENT FORM

Most insurance companies will require a waiver in the form of a client consent form. The consent form will also ensure the client is aware of any risks and precautions. It is important all technicians providing teeth whitening study and understand the client consent form so they can confidentially answer any questions clients may have.

It is your responsibility to ensure the client consent form covers all the requirements of your insurance company before offering this procedure.

INSURANCE

Celebrity Whitening packages do not include insurance; however we can provide you with details of an insurance broker who understands the industry and has tailored packages to suit your needs. Insurance is part of some beauty and hair policies however please seek consultation with your insurer before offering this product.

Please note: Celebrity Whitening offers recommendations only for teeth whitening practices. Our training methods are recognized and insured for cosmetic teeth whitening. We suggest you seek individual advice from your insurance provider, as this will be your responsibility.

If you are requiring an insurance policy and don't know where to start, Oxley Insurance Brokers have experience in writing policies for salons and mobile teeth whitening technicians:

Oxley Insurance Brokers

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