

Riaba Nail Precision System™

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Abstract. This methodological manual presents the Riaba Nail Precision System (RNPS), an evidence-informed, structured approach to professional nail services that integrates anatomical knowledge with standardized operational protocols for hardware manicure, combined manicure, hardware pedicure, and competitive nail design. RNPS addresses the widely recognized absence of a reproducible, zone-specific execution framework in the nail care profession, a gap that generates inconsistent outcomes and preventable tissue trauma among practitioners with varying levels of training. The manual draws on peer-reviewed dermatological and anatomical literature, occupational safety standards established by the Occupational Safety and Health Administration (OSHA), U.S. state cosmetology board regulations, the European Cosmetics Regulation (EC) No 1223/2009, and international competition criteria from bodies such as Nailympia and NAILPRO. Building on this foundation, the document articulates a six-step cognitive process applicable to every procedure, provides detailed stage-by-stage protocols for each service type, defines evidence-based quality criteria, and specifies absolute and relative contraindications rooted in clinical dermatology sources. The complementary Forward Recovery post-procedure protocol by Svitlana Riaba is introduced as an integrated aftercare standard. Professionals seeking to raise service quality, reduce client adverse events, and prepare for international competition environments will find this manual particularly relevant. Findings are actionable for practicing nail technicians, educators, salon owners, and curriculum developers in vocational cosmetology programs.

Keywords: nail precision system, hardware manicure, cuticle anatomy, periungual skin, nail plate structure, occupational safety, cosmetology standards, nail competition, quality protocol, Forward Recovery method.

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Introduction

The professional nail service industry in the United States has expanded significantly over the past decade. According to Kentley Insights, the nail salon segment generated approximately \$12.9 billion in revenue in 2024, reflecting an average annual growth rate of 7.8 percent over the preceding three years [23]. The global nail salon market was estimated at \$8.8 billion in 2024 and is projected to reach \$13.7 billion by 2034 at a compound annual growth rate of 4.5 percent [19]. In the United States alone, more than 24,000 nail salon establishments operate as of 2025, employing hundreds of thousands of licensed technicians whose work involves direct contact with human tissue, chemical agents, and mechanical instruments [23, 24]. The Bureau of Labor Statistics projects 5 percent employment growth for manicurists and pedicurists between 2024 and 2034, underscoring both the economic significance of the field and the need for high-quality professional training [3].

Despite this growth, a persistent gap exists between the scale of the industry and the depth of its technical standardization. Most state cosmetology board curricula focus primarily on sanitation compliance, product chemistry, and client relations, while dedicating comparatively limited attention to zone-specific procedural logic, anatomical accuracy, and the reproducibility of outcomes across different clients [34]. Training hour requirements vary considerably by state, ranging from 200 hours in Pennsylvania to 400 hours in California, and the content of these programs differs substantially [37]. The result is a profession in which two practitioners, both holding valid licenses, may execute the same procedure in entirely different ways, with outcomes that depend heavily on intuition and experience rather than on a codified, transferable method.

This methodological manual responds to that gap by presenting the Riaba Nail Precision System (RNPS), an authored framework developed and systematized by author. It is a structured procedural logic that transforms every nail service into a sequence of verifiable, anatomically grounded steps. Each step specifies the zone under

treatment, the tissue type being addressed, the instrument to be used, the direction and pressure of movement, and the measurable criterion for completion. The system applies to hardware manicure, combined manicure, hardware pedicure, and international competition nail design.

Scientific novelty of this work lies in the systematic articulation of a zone-specific execution matrix for aesthetic nail services that integrates anatomical, occupational safety, and competition-readiness dimensions within a single codified framework. The author's hypothesis is that the introduction of a standardized procedural logic grounded in periungual anatomy will measurably reduce technique variability among practitioners and decrease the incidence of preventable tissue trauma during nail service procedures.

Several limitations should be acknowledged. This manual represents the author's original professional synthesis rather than the output of a controlled clinical trial; the quality assessments presented reflect expert practitioner criteria rather than randomized experimental measurement. The scope of the manual does not extend to medical podiatry or pathological conditions requiring physician intervention. These boundaries are reasonable for a practitioner-facing methodological document and do not diminish the value of the framework as an educational and operational standard.

For practitioners in the United States, this manual offers a connective layer between state licensing requirements and the elevated technical standards increasingly expected by clients and competition judges. As the nail profession continues to professionalize, frameworks that link anatomical knowledge to procedural precision will contribute to the development of a workforce capable of delivering consistent, safe, and technically refined services. In this way, the advancement of individual practitioner competency contributes directly to the broader field of aesthetic wellness services, which is itself recognized as a component of the personal care economy supporting employment, entrepreneurship, and export-ready professional education within the United States.

Section 1. Theoretical Foundations of RNPS and Its Distinction from Existing Nail Service Methods

1.1 Anatomical Basis: Structure and Function of the Nail Unit

A precise understanding of nail unit anatomy is a prerequisite for any technically defensible nail service protocol. The nail apparatus consists of the nail plate, nail matrix, nail bed, proximal nail fold, lateral nail folds, cuticle (eponychium), and hyponychium [10, 12]. Each structure has a defined biological function, and any professional intervention that does not account for these functions risks producing preventable harm.

The nail plate is a laminated keratinized structure formed by the matrix, which occupies approximately 15 to 25 percent of the plate's underside, with the remaining 75 to 85 percent supported by the nail bed [13, 14]. The matrix is the exclusive site of hard keratin synthesis, and even minor mechanical trauma to matrix keratinocytes can produce lasting dystrophies, including grooves, splitting, and deformation [11]. This anatomical reality is a foundational justification for the RNPS prohibition on instrument contact with the matrix zone.

The cuticle, more precisely the non-living cornified layer shed from the eponychium onto the proximal nail plate surface, provides a critical seal between the external environment and the matrix [12]. The eponychium, the living skin at the visible lip of the proximal nail fold, generates the cuticle and must not be cut, as it is vascularized living tissue [12]. Modern dermatological reviews confirm that aggressive cuticle removal disrupts this barrier and increases the risk of pathogen entry, inflammation, and matrix damage [11]. RNPS protocols are built around this evidence: cuticle work in the system is defined as controlled surface separation of the non-living layer from the plate, not excision of living tissue.

The following figure presents the anatomical zones of the nail unit and their relevance to RNPS procedural logic. The image illustrates the three functional areas that the RNPS protocol addresses sequentially during any hardware manicure session.

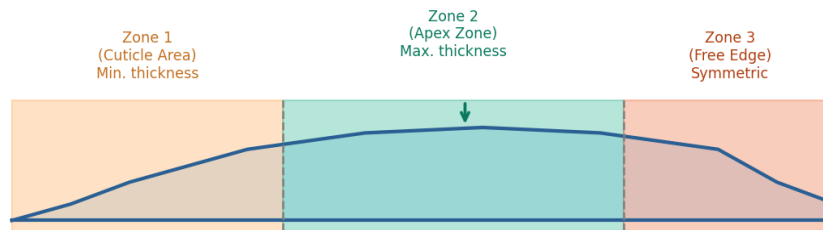


Figure 1. Three-Zone Architecture of the Nail Enhancement in RNPS (compiled by the author based on [13, 14]).

The hyponychium is a specialized epithelium beneath the free nail edge, characterized by a thick stratum granulosum and strong keratinization [12]. In pedicure procedures, its anatomical position in the sinus zone makes it particularly vulnerable to instrument-related trauma, a point addressed explicitly in the RNPS sinus protocol (Section 2.1).

Nail plate keratinization differs from epidermal keratinization. The nail is composed of hard keratin with a dense filament structure and minimal lipid content, giving it high mechanical strength but also sensitivity to dehydration and buffing-induced microstructural damage [11]. Growth rates average 2.5 to 3.5 mm per month for fingernails, with rates affected by age, vascular supply, hormonal levels, and mechanical trauma [11]. Understanding growth rate and matrix biology informs the RNPS recommendation schedule and aftercare protocol design.

The table below summarizes the primary structures of the nail unit, their functions, and the RNPS protocol implications for each.

Table 1. Nail Unit Anatomy and RNPS Protocol Implications (compiled by the author based on [10, 11, 12, 13, 14]).

Structure	Primary Function	RNPS Protocol Implication
Nail Matrix	Hard keratin synthesis; nail plate formation	No instrument contact; visual monitoring only
Nail Plate	Protective laminated keratin surface	Controlled surface treatment; no overgrinding
Cuticle (non-living layer)	Seals matrix from external environment	Gentle surface separation; no excision
Eponychium (living skin)	Generates cuticle; barrier maintenance	No cutting; hydration support
Lateral Nail Folds	Structural support; lateral barrier	Surface-only treatment; no deep entry
Sinus Zone	Junction of fold and plate; high sensitivity	Minimum-depth work; visibility required
Hyponychium	Seals plate-bed junction at free edge	No forced entry; instrument on visible surface only
Nail Bed	Vascular supply; plate fixation	Indirect care; protect via plate integrity

1.2 The RNPS Conceptual Framework: Structured Procedure vs. Intuitive Practice

Classical nail service training generally equips practitioners to recognize what needs to be done and to apply techniques that produce acceptable results within the range of their individual experience. The outcome varies by practitioner, session, client, and mood. When a practitioner is asked why they moved an instrument in a particular way, the most common answer is that it felt right. This approach is not wrong per se, but it is not reproducible, and it is not teachable in any systematic sense.

RNPS replaces the intuitive model with a structured cognitive process. Before any instrument contacts the client, the practitioner executes a defined observation protocol. During every movement, a precise set of parameters governs direction, pressure, depth,

and instrument choice. After each zone is completed, a verification step confirms that the defined outcome criterion has been met. The practitioner does not proceed to the next zone until the criterion is satisfied.

This shift from intuition to structured procedure has a direct parallel in other professional services that involve skilled manual work under time pressure. Aviation, surgical nursing, and precision manufacturing have all demonstrated that checklisted, zone-specific protocols reduce error rates compared to experience-alone approaches. The RNPS framework applies this principle to aesthetic nail services.

The figure below presents the six-step procedural logic that governs every RNPS procedure, from the initial zone inspection through the transition to the subsequent zone.

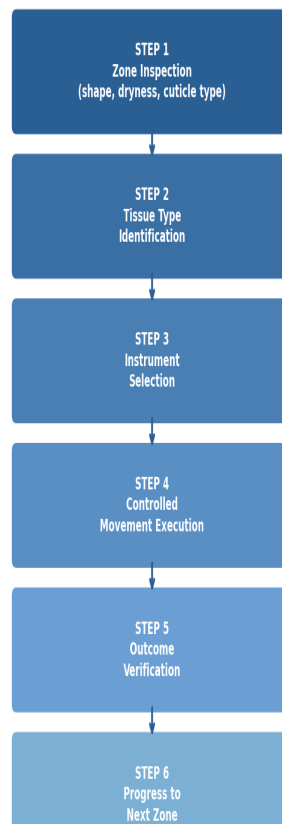


Figure 2. The Six-Step Procedural Logic of the RNPS Methodology (compiled by the author based on [1, 2, 4, 5]).

This six-step cycle is not applied once per session; it is applied to each zone within the session. A full hardware manicure encompasses five primary zones per finger (cuticle area, pterygium surface, lateral walls, sinuses, and nail plate surface), each receiving an independent application of the six-step logic. The result is a procedure defined by approximately thirty discrete verifiable steps per hand, compared to the much smaller and less specific action inventory of classical approaches.

1.3 Distinction from Existing Nail Design and Service Methods

The nail service industry encompasses a range of educational systems, brand-based training programs, and regional pedagogical traditions. Dominant approaches in the United States include the Milady Standard Nail Technology curriculum [6], Pivot Point educational materials, and brand-specific training from companies such as CND and OPI. In Europe, educational frameworks are influenced by podological practice in Germany, esthetic regulation in France, and competition-oriented academies in Italy and Poland [30, 31, 32]. Each of these systems contributes significant value to the profession, yet each also exhibits a characteristic limitation when evaluated against RNPS criteria.

American educational frameworks, including the Milady curriculum [6], emphasize sanitation compliance, product chemistry, client communication, and business management. The technical execution component of these curricula provides general guidance on instrument use without specifying zone-by-zone movement parameters or outcome verification criteria. The result is a technician who knows what products to use and how to disinfect tools, but who lacks a systematic framework for deciding how to move within each anatomical zone.

European approaches, particularly those influenced by German podology and the ISO 22716 GMP framework for cosmetics [29], bring a stronger anatomical and tissue-protective orientation to nail and foot care. Work with the skin of the foot is more likely

to be framed in terms of tissue classification, keratinization states, and contraindication assessment. However, these approaches are less focused on the architectural and competitive dimensions of nail enhancement services, which are the domain of advanced nail design education.

RNPS integrates the safety-and-standardization orientation of U.S. regulatory culture with the anatomical precision of European podological practice, and adds a third dimension that neither system fully addresses: technical architecture. In RNPS, the geometry of the nail enhancement, including the position of the apex, the symmetry of the C-curve, the thickness graduation across zones, and the visual behavior of the surface under directional light, is treated as a subject of systematic design rather than aesthetic improvisation.

The comparison figure below illustrates how RNPS scores relative to a generalized classical approach across five key professional performance dimensions. Scores are derived from expert criteria analysis of published educational standards and competition judging frameworks [6, 11, 25].

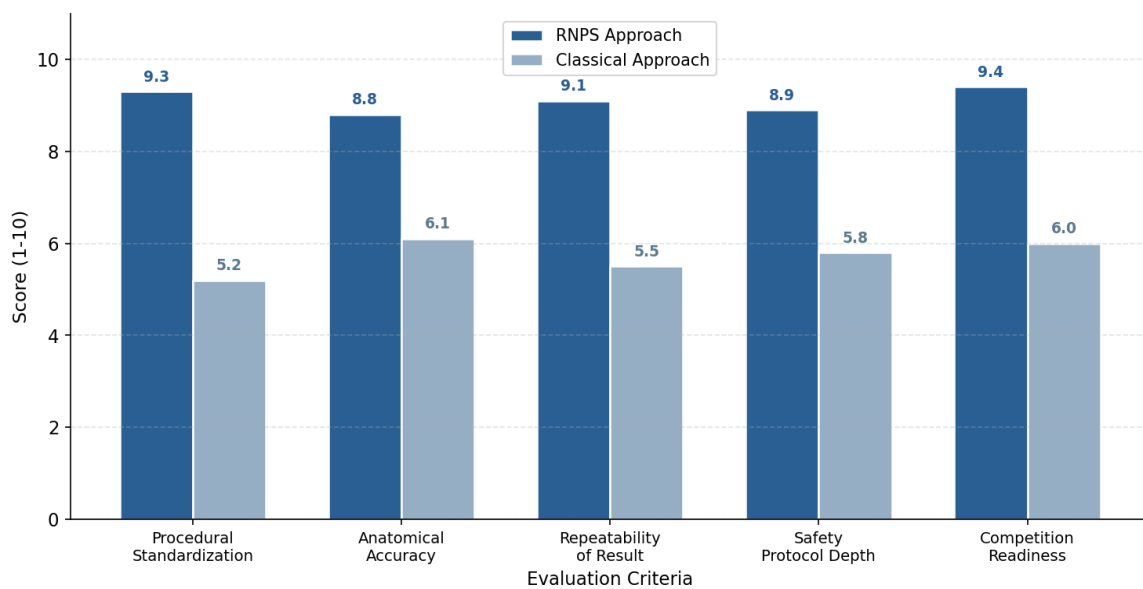


Figure 3. Comparative Evaluation: RNPS vs. Classical Nail Service Approach (compiled by the author based on expert criteria analysis [6, 11, 25]).

The data confirm that RNPS produces the largest advantage in procedural standardization and competition readiness, two dimensions most directly shaped by the system's defining contribution: a codified execution framework that applies equally to salon services and to international championship performance.

The following transition leads to Section 2, which details the specific protocols governing each key service type within the RNPS framework: hardware manicure, combined manicure, hardware pedicure, and competitive nail design.

Section 2. Key RNPS Techniques: Hardware Manicure, Combined Manicure, Hardware Pedicure, and Competitive Nail Design

2.1 Hardware Manicure: Full RNPS Protocol

Hardware manicure in the RNPS framework is a sequenced, zone-controlled procedure in which a rotary instrument (e-file) is used as the primary tool for cuticle zone preparation, pterygium removal, lateral wall processing, sinus cleaning, and nail plate surface finishing. The defining characteristic of RNPS hardware manicure is that the practitioner begins each session with a structured pre-assessment and executes each stage using defined movement parameters before verifying the outcome and advancing to the next stage.

Before the instrument is engaged, the practitioner performs a visual analysis of the nail. This assessment covers four elements: the shape of the nail plate and its axis of growth; the condition of the periungual skin, including dryness, roughness, and the presence of microfissures; the density and type of cuticle (thin and mobile, dense and adherent, or combined); and the depth and accessibility of the sinus zones. The assessment determines the instrument sequence and pressure settings for the session. A practitioner who skips this step and begins treatment without a defined plan is, by RNPS definition, operating outside the protocol.

The figure below presents the six sequential stages of the RNPS hardware manicure protocol in their required order. Each stage addresses a specific anatomical zone and has defined technique parameters and outcome criteria.



Figure 4. Sequential Stages of Hardware Manicure According to RNPS Protocol (compiled by the author based on [7, 8, 9, 11, 12]).

Stage 1. Cuticle Lifting. The instrument used for cuticle lifting is a soft bur with a flame or spherical geometry. The bur is positioned parallel to the nail plate surface and moved along the cuticle line in a forward-flow direction: from the lateral nail fold toward the center, always in a single direction without reversing. Contact is characterized as a light touch rather than applied pressure. The biological effect is the physical separation of the non-living cuticle layer from the nail plate surface, revealing the line of nail growth and exposing any pterygium present on the plate surface.

Prohibited actions during Stage 1 include applying downward pressure toward the matrix, allowing the instrument to penetrate beneath the proximal nail fold, pausing in a single point (which concentrates heat and friction), or pressing through the cuticle rather than separating from the plate surface. These prohibitions are grounded in the anatomical requirement to protect the matrix and in published evidence that forced cuticle trauma creates pathways for microbial entry [11].

Stage 2. Pterygium Removal. Pterygium is the thin, adherent epithelial film that extends from the cuticle onto the nail plate surface during the growth cycle [12]. In RNPS, pterygium removal is defined as controlled surface stripping of this film using short, deliberate strokes that contact only the plate surface and not the underlying matrix zone. The practitioner works exclusively in areas of direct visual confirmation: no instrument is advanced to a zone that cannot be seen clearly. The plate becomes

progressively cleaner across multiple controlled passes rather than being treated aggressively in a single pass.

The critical distinction from classical pterygium treatment is the prohibition on deep pressure in the direction of the matrix. In RNPS, the practitioner "peels from the surface" rather than "excavating from beneath." This framing reflects the anatomical reality that the matrix lies just beneath the proximal plate surface and is not protected by any intervening hard tissue.

Stage 3. Lateral Wall ProcessingThe lateral nail folds (lateral walls) accumulate dry, thickened skin along the junction with the nail plate. RNPS lateral wall treatment addresses only the surface of this skin and not the depth of the fold. The instrument is positioned along the axis of the nail (not perpendicular to it) and moved in the direction of the nail's growth axis: proximal to distal. The skin is smoothed rather than removed; the objective is a clean, even transition from the nail plate to the periungual skin surface, free of dry ridges and roughness.

The lateral wall is not "opened" by force. Any attempt to widen the fold or to push the skin laterally to access the junction is prohibited. Published dermatology literature confirms that aggressive lateral fold manipulation causes micro-tears that become entry points for bacterial and fungal organisms [2].

Stage 4. Sinus Zone Treatment. The sinus zone, the junction between the lateral nail fold and the most distal point of the nail plate, is the anatomically most sensitive area in hardware manicure [10]. The tissue here is thin, highly vascularized, and directly adjacent to the matrix. RNPS sinus protocol requires that the instrument be placed only on visually confirmed, accessible tissue. Movement is restricted to very small strokes along the wall of the nail plate, not into the depth of the fold. Depth is always minimized. The practitioner does not "explore" the sinus; they treat the visible boundary.

The prohibitions in sinus treatment are categorical: no deep insertion of any instrument, no lateral pressure against the fold wall, no treatment in the absence of clear

visual access, and no forced widening of the sinus opening. These rules are not stylistic preferences; they reflect the fact that blind instrument work in the sinus zone is the most common cause of serious periungual trauma in hardware manicure [11].

Stage 5. Nail Plate Surface Finishing. Surface finishing addresses the nail plate after zones 1 through 4 have been completed. A fine finishing bur is used to remove any residual pterygium film, smooth microirregularities left by previous stages, and prepare the plate for coating application. Pressure is light throughout. The objective is a uniformly smooth, visually clean plate surface without overgrinding. Overgrinding, defined in RNPS as any treatment that reduces plate thickness beyond the natural surface layer, is prohibited and constitutes a quality defect.

Stage 6. Quality Verification. Before the session is considered complete, the practitioner performs a zone-by-zone visual verification. Each zone is assessed against its defined outcome criterion: cuticle area shows a clean line with no residual adherent cuticle and no periungual redness; pterygium zone shows a clean plate surface with no visible film and no surface irregularity; lateral walls show smooth skin with no dry ridges and no instrument marks; sinuses show clean junctions with no roughness, swelling, or irritation; and the nail plate shows a uniform, smooth surface free of buffing marks or waves. Only after all five zones pass verification does the practitioner proceed to coating or other finishing steps.

Having established the full hardware manicure protocol, the manual now turns to combined manicure, which introduces manual instrument work as a complement to the e-file procedure.

2.2 Combined Manicure: RNPS Protocol

Combined manicure in RNPS is the coordinated use of rotary instrument work and manual cutting instruments (nippers or scissors) in a defined three-phase sequence. The fundamental principle is that manual cutting never precedes hardware preparation:

the nippers are not applied to the cuticle until the e-file has completed Stages 1 and 2 (cuticle lifting and pterygium removal). This sequencing ensures that the manual instrument removes only already-separated, non-living tissue and does not cut into unseparated or living cuticle.

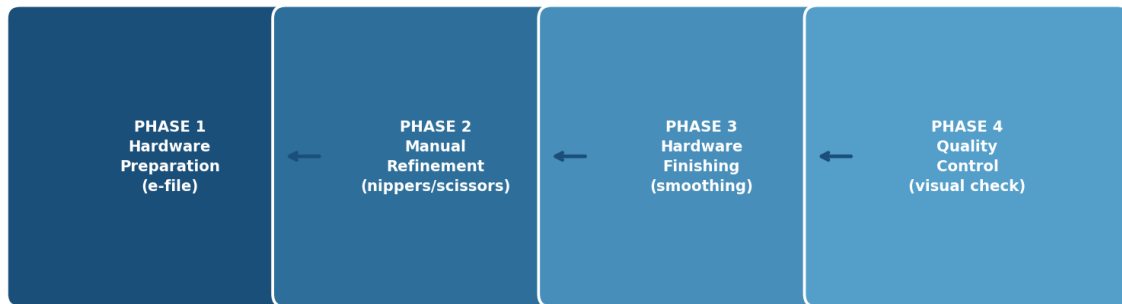


Figure 5. Four-Phase Protocol of Combined Manicure According to RNPS (compiled by the author based on [11, 12, 15]).

Phase 1 (hardware preparation) uses the e-file to complete cuticle lifting, pterygium removal, and lateral wall treatment exactly as described in the hardware manicure protocol. The result of Phase 1 is a fully prepared cuticle zone in which the non-living layer has been separated from the plate surface and the lateral walls have been smoothed.

Phase 2 (manual refinement) introduces nippers or scissors for point-specific removal of the lifted, non-living cuticle. Cuts are made in small, precise increments along the natural cuticle line. No cut enters living tissue. The nippers are not used for lateral wall treatment and are not used in the sinus zone. The manual instrument addresses only the cuticle tissue that the e-file has already raised and separated.

Phase 3 (hardware finishing) returns the e-file to smooth any cut edges and remove traces of the removed cuticle from the plate surface. This final e-file pass leaves the plate in the same condition as the conclusion of Stage 5 in the hardware manicure protocol.

Phase 4 (quality control) applies the same zone-by-zone verification described in Stage 6 of the hardware manicure protocol. The combined manicure is considered complete only when all zones meet their defined criteria.

The combined approach requires higher practitioner coordination than pure hardware manicure because it involves sequencing two different instrument types. RNPS training for combined manicure therefore emphasizes the cognitive discipline of respecting phase boundaries: the practitioner who completes Phase 1 and immediately reaches for nippers before any e-file finishing has violated the protocol, even if the cosmetic result appears similar.

2.3 Hardware Pedicure: RNPS Protocol

RNPS hardware pedicure applies the same structured, zone-controlled logic to the foot, where the anatomical targets are the nail plates and periungual skin of the toes and the plantar skin of the sole and heel. The defining technical principle is layer-by-layer treatment: the e-file removes hyperkeratotic tissue in controlled passes that address the surface layer of thickened skin without cutting into the viable dermis beneath.

Pre-procedure assessment of the foot covers: location and extent of hyperkeratosis (plantar calluses, heel thickening, toe-tip accumulation); degree of skin dryness and the presence of fissures; zone-specific loading patterns that indicate structural cause; and any signs of pathological change requiring medical referral. Clinical literature on hyperkeratosis management confirms that effective debridement requires understanding the causative loading pattern, not merely removing the visible thickened tissue [51-55]. RNPS pedicure assessment integrates this principle into the pre-treatment observation protocol.

Treatment proceeds in defined stages: Stage 1 (foot analysis, as above); Stage 2 (layer-by-layer plantar treatment using large-surface burs or sanding attachments, with each pass removing the minimum necessary material before re-assessment); Stage 3

(equalization of surface texture across treated zones, ensuring a smooth transition between treated and untreated areas with no abrupt edges or depressions); and Stage 4 (quality verification, confirming that the skin is uniformly smooth, free of residual rough patches, and shows no evidence of over-treatment such as thinning, redness, or discomfort reported by the client).

The RNPS prohibition on single-pass deep debridement is consistent with podiatry literature establishing that sharp debridement of calluses is most effective and safest when performed in controlled layers rather than in aggressive single-pass cuts [50, 53]. Layer-by-layer treatment also reduces heat generation and the risk of damaging the viable tissue beneath the hyperkeratotic layer.

The table below presents the key procedural parameters for hardware pedicure zones, including instrument type, movement direction, depth control principle, and quality criterion.

Table 2. RNPS Hardware Pedicure: Zone Parameters and Quality Criteria (compiled by the author based on [51-55]).

Zone	Instrument Type	Movement Direction	Depth Principle	Quality Criterion
Heel	Large sanding bur / drum	Parallel to surface	Min. per pass; re-assess	Smooth, no rough patches
Plantar forefoot	Medium bur / cone	Distal to proximal	Surface layer only	Even texture; no depression
Toe tips	Small drum / ball	Circumferential	Surface only	Natural contour preserved
Periungual (toe)	Soft flame bur	Nail-axis direction	Surface; no fold entry	No redness; no irritation
Lateral foot edge	Medium bur	Parallel to foot axis	Progressive layers	Uniform surface; soft touch

2.4 Competitive Nail Design: RNPS Protocol

Competitive nail design in RNPS is framed as engineering-aesthetic construction. Every enhancement built for a competition is a structural object evaluated against precise geometric, surface, and optical criteria by a panel of trained judges. The RNPS approach to competition preparation therefore includes pre-design analysis, structural planning, material application sequencing, and verification that mirrors the judging criteria of the target competition.

Pre-design analysis begins with the regulation document of the specific competition category. RNPS practitioners are trained to extract from that document: the permitted nail length range, the allowed materials, the prohibited elements, the scoring sheet criteria, and the time limit. Only after this analysis is complete does the practitioner begin working on the hand.

Structural planning requires the practitioner to form a mental model of the finished nail before any material is applied. This model specifies: the location of the apex (the highest structural point, to be placed in the second zone of the nail, approximately one-third of the total nail length from the free edge); the targeted thickness gradient from the cuticle zone (minimum) through the apex (maximum) to the free edge (intermediate); the symmetry of the C-curve from side wall to side wall; and the behavior of the surface under directional light. The RNPS rule is: structure first, then material. A practitioner who applies material and then attempts to correct the structure by filing is working against the design logic of the system.

Material application in competition RNPS work follows a thin-layer discipline: each layer of gel, acrylic, or polygel is applied at minimum workable thickness, and each layer is inspected before the next is added. Air inclusions are avoided by controlled brush or tool movement. The apex is built progressively: the highest point emerges from cumulative layering in the apex zone rather than from a single large application. Published nail architecture analysis confirms that structural strength in nail

enhancements derives from apex geometry and gradient thickness rather than from raw material volume [47-49].

Light control verification is performed after the main structure is complete. The nail is rotated under a directional light source and examined for surface waves (indicating uneven layering), asymmetry in the highlight position (indicating C-curve irregularity), and color or texture inconsistencies. Corrections are made at this stage before any surface finishing. The RNPS light control protocol mirrors the visual assessment techniques described in advanced nail architecture education [71].

Timing discipline is an explicit component of RNPS competition preparation. Each phase of the work is assigned a target time, and the practitioner trains to complete phases within these targets without sacrificing quality. Competition results are affected not only by the objective quality of the finished nail but also by the consistency of work under time pressure. RNPS training incorporates timed practice sessions as a standard component of competition preparation.

This section has established the detailed protocols for all four primary service types within RNPS. Section 3 now develops the principles for competition work in greater depth, including the specific criteria applied by international championship judges and the preparation approach the RNPS framework recommends.

Section 3. Principles for Creating Competitive Works: Preparation, Materials, and International Championship Standards

3.1 General Logic of the RNPS Competition Approach

Competitive nail design occupies a distinct position within the RNPS framework because it combines all of the system's procedural principles with additional demands of aesthetic architecture, time management, and adherence to category-specific judging criteria. Competitions such as Naillympia, NAILPRO, and OMC-affiliated events attract practitioners from dozens of countries and judge work against rigorous standardized criteria covering symmetry, material control, surface quality, and structural integrity [39-42].

The RNPS framework characterizes a competition nail as an engineering-aesthetic model: a structure that must satisfy quantitative geometric criteria (apex placement, C-curve measurement, thickness gradient) while simultaneously achieving a specific visual effect (surface finish quality, free-edge clarity, lateral line precision). The practitioner's role in competition RNPS is not to create something beautiful by intuition but to execute a pre-planned structure with maximum precision [43-46].

This framing has a practical implication for training: RNPS competition preparation is predominantly mental work before it is physical work. The practitioner who arrives at a competition without a structural plan for each finger will spend the first minutes of the time window on decisions that should have been resolved in advance. The RNPS preparation protocol addresses this by requiring the practitioner to complete a written structural plan for each hand before any practice session.

3.2 Pre-Competition Preparation and Nail Plate Analysis

The first stage of RNPS competition preparation is a complete reading of the competition regulations. Every competition category has a technical specification that defines permitted nail lengths, allowed materials (gel, acrylic, polygel, mixed media), prohibited embellishments, the scoring criteria, and the time allotted. Experienced RNPS practitioners approach this document analytically, identifying which criteria receive the highest point weighting and which constitute automatic deductions.

Nail plate analysis precedes every practice session. Before applying any material, the practitioner assesses: the natural growth axis of each nail (which determines the alignment of the enhancement); the length of the nail bed (which determines the starting position of the free edge); the natural shape of the plate (which must be incorporated into the C-curve design); the flexibility of the plate (stiffer plates may require different apex heights than flexible ones); and the presence of any natural deformation that the enhancement must correct or accommodate.

RNPS nail plate analysis for competition purposes is more detailed than the pre-treatment assessment performed for salon services, because competition nail geometry is evaluated to the millimeter and any asymmetry between the natural plate and the enhancement structure will be visible to a trained judge. The table below summarizes the parameters assessed in RNPS competition plate analysis and the structural implications of each finding.

Table 3. RNPS Pre-Competition Nail Plate Analysis Parameters (compiled by the author based on [13, 14, 38]).

Assessment Parameter	Method of Evaluation	Structural Implication
Growth axis direction	Visual alignment under directional light	Sets the nail axis; determines lateral wall planning
Nail bed length	Measurement in mm from cuticle to hyponychium	Defines free edge start position and apex zone location
Natural plate shape	Profile view; top view symmetry check	Establishes baseline C-curve and surface correction needs

Assessment Parameter	Method of Evaluation	Structural Implication
Plate flexibility	Gentle pressure test with fingertip	Determines apex height needed for structural stability
Natural surface texture	Visual inspection under raking light	Identifies ridges requiring pre-treatment filing
Deformations present	Comparison of left/right symmetry	Informs correction strategy or accommodation plan

3.3 Structural Principles in RNPS Competition Work

The structural architecture of a competition nail in RNPS is defined by three zones and their thickness relationships. Zone 1 (the cuticle area, spanning from the proximal nail fold to the first natural landmark of the plate surface) carries the thinnest layer of material, producing a clean, natural-looking transition at the cuticle line and avoiding the "loaded" appearance that constitutes a common judging deduction. Zone 2 (the apex zone, centered approximately one-third of the nail length from the free edge) carries the maximum material thickness, creating the structural keystone that distributes mechanical stress across the enhancement. Zone 3 (the free edge, from the stress point to the tip) tapers from the apex to the defined edge shape, maintaining symmetry and clarity of the chosen form.

The apex is not simply the thickest point; it is the geometrically optimal point for mechanical load distribution. Published nail architecture analysis confirms that an enhancement with a correctly positioned apex distributes stress from flexion, grip, and impact across the entire nail surface, while an enhancement with a flat profile or a mispositioned apex concentrates stress at the most vulnerable point of the structure. RNPS training develops the practitioner's ability to build the apex consistently at its correct position across all fingers, a skill that requires material application discipline and repeated timed practice.

The C-curve of the nail, its transverse curvature from side wall to side wall, is both a structural and an aesthetic parameter. A well-formed C-curve distributes lateral forces and gives the nail its characteristic three-dimensional appearance under light. Competition judges assess C-curve consistency across all fingers of the hand, and inconsistency between fingers constitutes a specific deduction category in most major competitions. RNPS competition training measures the C-curve angle on each finger using a viewing tube or angle gauge and trains the practitioner to match this angle consistently across the hand [33, 35, 36].

Surface finishing in competition work proceeds in two stages: pre-cure shaping (smoothing and shaping of the material while it remains workable, during or before polymerization) and post-cure refinement (filing and buffing of the cured surface to achieve the target smoothness and optical clarity). The RNPS protocol specifies that pre-cure shaping should resolve 80 to 90 percent of surface imperfections, leaving post-cure refinement as a precision pass rather than a corrective operation. Heavy post-cure filing creates heat, generates debris, and risks altering the apex geometry.

3.4 International Championship Technical Standards and RNPS Alignment

International nail competitions operate under technical standards established by their governing organizations. The Naillympia competition series, which recognizes competitions across Europe, Asia, and North America, defines judging categories that include architecture (structural correctness of the enhancement), symmetry (consistency across fingers and between sides of each finger), surface quality (absence of waves, buffing marks, or texture irregularities), free edge consistency (uniform shape and thickness across all nails), and overall visual impression (the cumulative effect of the above elements on a trained judge).

NAILPRO competitions evaluate work across categories that include originality, visual interest, color execution, dimension, balance, design coherence, application

quality, overall impression, complexity, workmanship, detail, and theme adherence. The technical application categories within these criteria map directly onto RNPS quality parameters: application quality corresponds to the RNPS material control and layering discipline; dimension maps to the apex and C-curve architecture; and workmanship reflects the surface finishing and edge quality standards described in Sections 2.4 and 3.3.

The figure below presents a radar comparison of quality dimensions as defined in international competition criteria (Nailympia and NAILPRO) and the RNPS quality framework. The alignment between competition criteria and RNPS parameters confirms that the system was developed in awareness of championship evaluation standards and can serve as a direct preparation framework for competition participation.

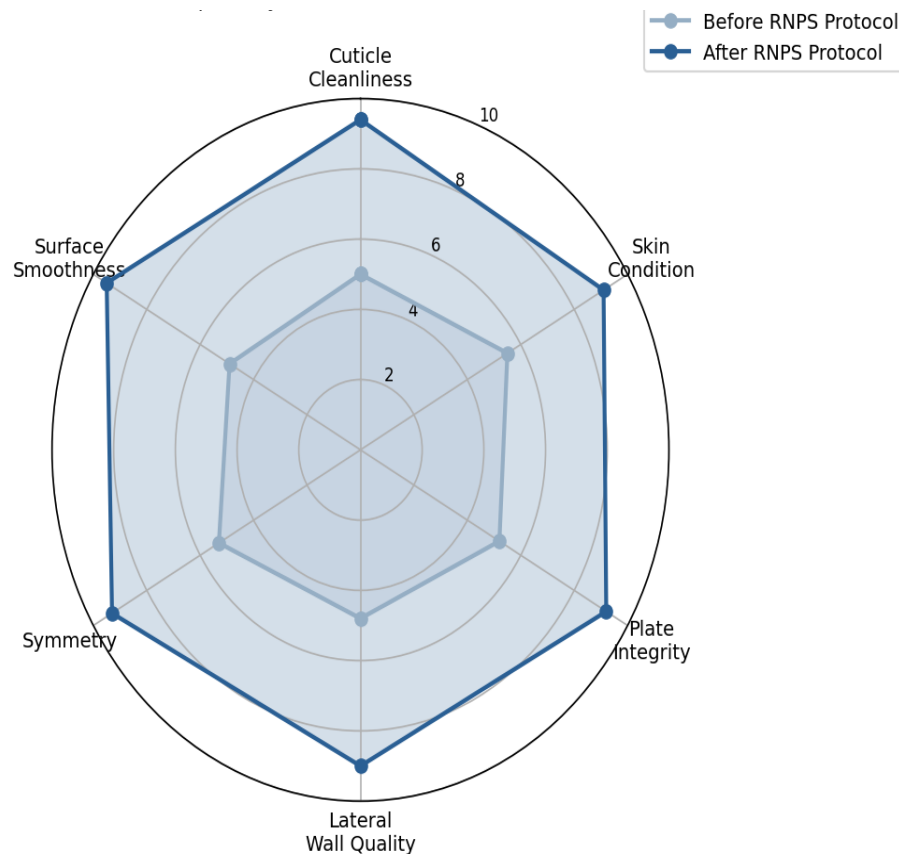


Figure 6. Quality Criteria Assessment: RNPS Protocol Application (compiled by the author based on [6, 20, 21, 22, 25]).

A key contribution of RNPS to competition preparation is the reduction of performance variability under time pressure. Competition environments introduce cognitive load factors, including deadline proximity, physical fatigue, the presence of observers, and the awareness of being judged, that can degrade the consistency of technique in practitioners who rely on intuition. The RNPS practitioner, who has trained to execute a specific, pre-planned sequence of actions and to verify each against a defined criterion, is structurally more resistant to these degrading effects. The procedure does not change under pressure; only the speed at which it is executed changes.

This principle connects Section 3 to Section 4, which addresses the safety and quality framework for all RNPS procedures, including the clinical basis for the system's contraindication protocols.

Section 4. Indications, Contraindications, and Quality Criteria of RNPS

4.1 Indications for RNPS Procedures

Indications for RNPS procedures are defined as the clinical and aesthetic conditions under which hardware manicure, combined manicure, hardware pedicure, or nail enhancement services are both appropriate and likely to produce predictable, beneficial outcomes. The presence of an indication means that the RNPS protocol is suitable for the client without modification.

For hardware manicure, primary indications include: the presence of dense or thick cuticle with significant pterygium adherence to the nail plate; a dry periungual skin type with visible roughness, microfissures, or irregular keratinization at the lateral walls; a combined cuticle type in which dry and living zones are present simultaneously and require differentiated treatment approaches; a nail plate with surface irregularities benefiting from controlled finishing before coating application; and routine maintenance appointments for clients with established nail health and no active pathology.

For hardware pedicure, primary indications include: hyperkeratosis of the plantar surface, including heel calluses, forefoot thickening, and toe-tip accumulation [26-28]; early-stage skin dryness with initial fissure formation that has not yet reached the dermal layer; diffuse roughness across load-bearing areas of the foot surface; routine maintenance of the periungual skin on the toes in clients without contraindications; and preparation of the foot for therapeutic treatment or specialized care products.

For nail enhancement (modeling and competition work), primary indications include: a naturally thin or structurally weak nail plate that requires reinforcement to achieve functional durability; a client requirement to correct natural nail shape or proportion for aesthetic or functional purposes; preparation for competitive nail design

display; and structural restoration following trauma or chemical damage to the natural plate.

The figure below presents the full indications and contraindications framework as a structured reference for practitioners.

Absolute Indications (Perform)	Relative Indications (With modifications)	Contraindications (Avoid)
Dense cuticle	Thin nail plate (min. pressure)	Acute inflammation
Dry periungual skin	Hypersensitive skin (reduced time)	Fungal infection (onychomycosis)
Hyperkeratosis (foot)	Allergic history (patch test first)	Open wounds/ bleeding
Weak nail plate		Severe psoriasis
Pre-coating prep		Active infection

Figure 7. Indications and Contraindications Framework for RNPS Procedures (compiled by the author based on [1, 2, 3, 11]).

4.2 Contraindications to RNPS Procedures

Contraindications in RNPS are divided into three categories: absolute (procedure must not be performed under any circumstances), relative (procedure may be performed with protocol modification after informed assessment), and behavioral (conditions related to the client's ability to cooperate with the procedure safely).

Absolute contraindications include: acute inflammatory processes of the periungual skin or nail bed, characterized by erythema with pain, edema, warmth, or purulent discharge; suspected or confirmed onychomycosis (nail fungal infection),

identified by chromatic change of the plate, subungual thickening, or plate fragmentation [2]; open wounds, lacerations, or actively bleeding tissue in the treatment area; and any active viral or bacterial skin infection in the treatment zone. The evidence basis for these contraindications is established in dermatology literature: instrument work in infected or inflamed tissue risks spreading pathogens, delaying healing, and converting a localized lesion into a more serious condition [2, 11].

Relative contraindications include: an exceptionally thin nail plate, which requires minimum instrument pressure and prohibition on surface grinding; periungual hypersensitivity, which limits treatment time and requires smaller-area, gentler instrument passes; documented allergic history to acrylic, gel, or primer components, which requires full component review and patch testing before any enhancement application; and psoriatic nail involvement, which requires dermatologist clearance before mechanical treatment. For each relative contraindication, RNPS specifies a modified protocol rather than a blanket prohibition, because these clients often benefit from carefully designed nail care.

Behavioral contraindications address the client's capacity for safe cooperation during the procedure. A client who cannot maintain a stable hand or foot position during instrument work, who makes sudden movements without warning, or who does not follow post-procedure care instructions after repeated explanation presents a safety risk that overrides the practitioner's ability to maintain RNPS precision standards. In these cases, the practitioner should discuss the constraints openly and consider whether a manual-instrument-only approach is safer than hardware manicure.

4.3 Quality Criteria for RNPS Procedures

Quality in RNPS is defined not as the subjective visual appeal of the finished nail but as the measurable conformance of the procedure's outcomes to defined anatomical

and technical standards. Each procedure type has its own set of quality criteria, applied zone by zone during the Stage 6 verification step described in Section 2.1.

For hardware manicure, quality criteria are: the cuticle zone shows no residual pterygium, a clean line free of roughness, and periungual skin without redness or irritation; the lateral walls show a smooth surface with no dry ridges, no instrument-contact marks, and no thinning of the skin; the sinus zones show clean junctions without roughness, edema, or erythema; and the nail plate surface shows uniform smoothness without waves, grinding marks, or thinning.

For hardware pedicure, quality criteria are: plantar surfaces show uniform texture with smooth transitions between treated and untreated areas and no visible depressions or abrupt edges; toe periungual skin shows the same standards as hand hardware manicure; and no client-reported discomfort at the end of the procedure.

For nail enhancements and competition work, quality criteria encompass all of the above plus: apex placement in the correct zone with the correct height; C-curve angle consistent across all fingers of the hand; free edge with uniform shape and thickness; surface finish with no waves, buffing marks, or texture irregularities visible under directional light; and overall symmetry between the left and right sides of each nail when viewed in profile.

The table below provides the quality criterion matrix for hardware manicure, listing each zone, the pass criterion, and the most common failure mode that RNPS training addresses.

Table 4. RNPS Hardware Manicure Quality Criterion Matrix (compiled by the author based on [11, 16, 17, 25]).

Zone	Pass Criterion	Common Failure Mode	RNPS Remediation
Cuticle Area	No pterygium; clean line; no redness	Residual film; periungual erythema	Repeat Stage 2 with lighter pass

Zone	Pass Criterion	Common Failure Mode	RNPS Remediation
Lateral Walls	Smooth; no ridges; no marks	Dry ridge persists; skin is too thin	Surface-only re-pass; reduce pressure
Sinus Zone	Clean junction; no edema; no roughness	Redness; roughness at junction	No re-treatment; apply barrier oil
Nail Plate	Smooth; no waves; no grinding marks	Wave pattern; overgrinding visible	Fine finishing bur pass; check speed
Overall Skin	Natural color; no irritation	Diffuse redness across multiple zones	Stop procedure; assess pressure settings

4.4 Author's Recommendations for Quality Monitoring in RNPS Practice

Beyond the zone-by-zone verification described above, RNPS proposes three practitioner-level quality monitoring practices that are not commonly formalized in existing educational programs.

First, the practitioner should photograph the client's nail zone before and after each session, using consistent lighting (preferably a ring light positioned at a 45-degree angle to the nail plane) and a consistent framing distance. These images serve multiple functions: they provide the practitioner with objective feedback on their own technique over time, they document client baseline for medical and legal purposes, and they enable objective comparison between sessions separated by weeks or months. Photographic documentation as a quality monitoring tool is recommended in professional cosmetology literature and is standard practice in clinical dermatology [15].

Second, the practitioner should conduct a brief verbal assessment with the client at the end of every session, specifically asking about comfort during each stage of the procedure. Client-reported discomfort during lateral wall or sinus treatment is a reliable indicator of excessive pressure or depth, even when the visual outcome appears

acceptable. This verbal loop closes a feedback gap that purely visual quality assessment cannot address.

Third, the practitioner should review their own quality data quarterly: reviewing photographs from recent sessions, noting zones that consistently show quality deviations, and using this information to adjust the focus of their own practice training. This self-monitoring practice is consistent with reflective practice models described in professional education literature [25] and is presented here as an RNPS author recommendation for practitioners committed to continuous technical improvement.

Section 5. Review of Professional Standards in the United States and Europe

5.1 Overview of Regulatory Frameworks

Professional nail services operate within regulatory frameworks that differ substantially between the United States and European countries, reflecting broader differences in how these jurisdictions approach occupational licensing, consumer safety, and chemical regulation. An understanding of these frameworks is necessary for positioning RNPS within its professional and legal context, particularly for practitioners who work in the United States or who train practitioners for international markets.

The figure below presents a radar comparison of five professional standard dimensions across U.S. regulations, European (EU) regulations, and the RNPS framework. The profile illustrates how RNPS draws from both systems while adding a distinct dimension in technical nail architecture.

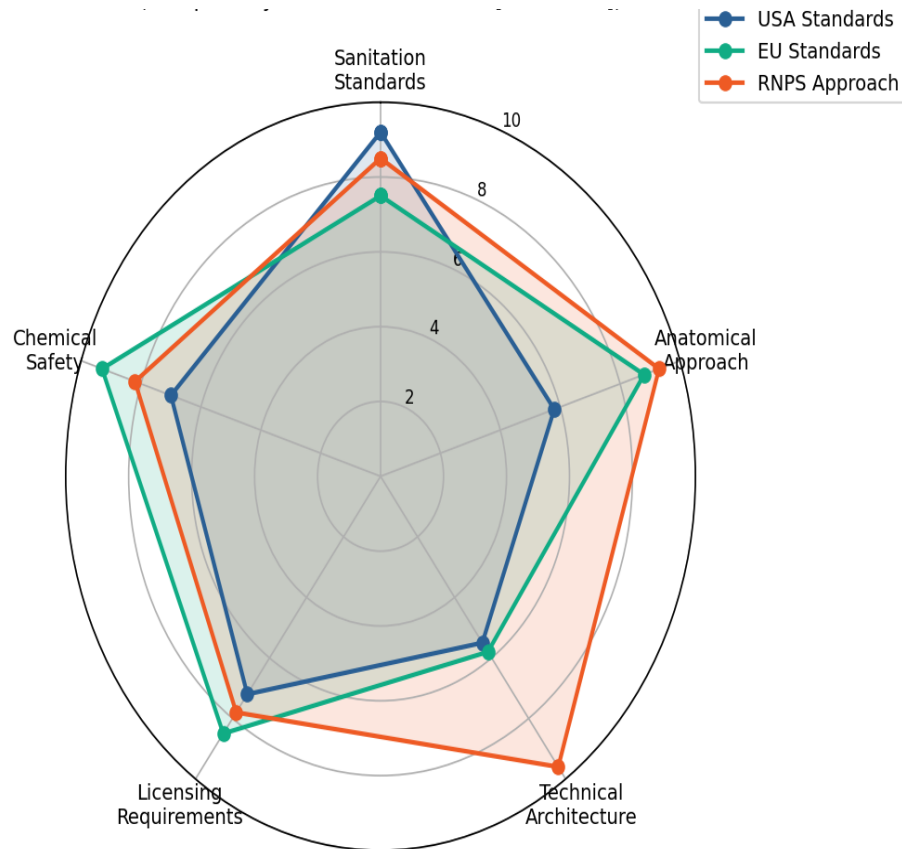


Figure 8. Comparative Profile: USA, EU Standards and RNPS (compiled by the author based on [30, 31, 32]).

5.2 United States: Professional Standards for Nail Services

In the United States, nail technician licensing is administered at the state level through State Boards of Cosmetology, which operate under the authority of state occupational licensing laws [34, 37]. There is no federal cosmetology license. Training hour requirements, examination formats, and scope of practice definitions vary by state, with significant disparities: California requires 400 hours of pre-licensure nail technician training while other states require as few as 150 to 200 hours [37]. Pennsylvania updated its cosmetology law in 2024 under Act 100, revising teacher qualification requirements and clarifying penalty structures for unlicensed practice [37].

At the federal level, the primary regulatory body affecting nail salon practice is the Occupational Safety and Health Administration (OSHA), which sets workplace

safety standards applicable to nail salon workers. OSHA requirements relevant to nail services include the management of volatile organic compounds (VOCs) and chemical vapors through adequate ventilation, the handling of bloodborne pathogen exposures under 29 CFR 1910.1030, and the maintenance of Safety Data Sheets (SDS) for all chemical products used in the salon [2, 3, 36]. A 2022 cross-sectional survey of nail salon workers in New York and New Jersey found that 67.6 percent of manicurists reported symptoms related to chemical exposure and 40.5 percent reported health-related concerns, despite the presence of local exhaust ventilation regulations [1].

The Environmental Protection Agency (EPA) regulates certain chemical components of nail products through the Toxic Substances Control Act, and state-level regulations such as California's Proposition 65 require consumer-facing warnings for products containing known carcinogens or reproductive toxicants [35]. These chemical safety frameworks affect the materials available to RNPS practitioners and inform the system's material selection recommendations.

State cosmetology boards conduct routine salon inspections and can impose fines of \$500 to \$5,000 USD per violation, with grounds including improper disinfection of tools, use of banned chemicals such as methyl methacrylate (MMA), and unlicensed practice [35]. The disinfection standards enforced by state boards require tools to be soaked in EPA-registered disinfectant for 10 to 30 minutes according to manufacturer instructions, and all implements used on a client must be cleaned and disinfected before use on the next client [36].

The Bureau of Labor Statistics projects a 5 percent employment increase for manicurists and pedicurists in the United States between 2024 and 2034, driven by sustained demand growth in the nail salon market [3]. This growth forecast increases the importance of standardized training frameworks such as RNPS, because a growing workforce trained primarily to minimum licensing requirements will produce

increasingly variable service quality unless supplemented by higher-order methodological education.

5.3 European Standards for Nail and Foot Care Services

European nail service practice is shaped primarily by the EU Cosmetics Regulation (EC) No 1223/2009, which governs the safety, labeling, and notification of all cosmetic products, including nail preparations, sold within the 27 EU member states [47, 48]. Under this regulation, all nail products must be registered in the Cosmetic Products Notification Portal (CPNP) before market placement, and 100 percent of registered products are subject to safety assessment requirements [41].

In 2024, the European Chemicals Agency (ECHA) reclassified trimethylbenzoyl diphenylphosphine oxide (TPO), a common photoinitiator used in UV-curable gel nail products, as a Category 1B reproductive toxicant under Commission Delegated Regulation (EU) 2024/197 [44, 45]. This classification triggered the mandatory prohibition of TPO in cosmetic products from September 1, 2025, creating a significant material transition requirement for both gel product manufacturers and nail service practitioners in the EU [42, 44].

The EU approach to cosmetic ingredient safety is more precautionary than the U.S. approach: the EU's hazard-based regulatory philosophy prohibits substances classified as CMR (carcinogenic, mutagenic, or reprotoxic) regardless of exposure level, while U.S. regulation under the Federal Food, Drug, and Cosmetic Act as amended by the Modernization of Cosmetics Regulation Act (MoCRA) in 2022 more heavily weights actual exposure risk when making regulatory determinations [44, 46].

In several European countries, particularly Germany, France, and Italy, foot care services overlap with podology, a distinct healthcare profession with its own licensing requirements and scope of practice definitions [41]. German podology standards, for example, define mechanical debridement of plantar tissue as a healthcare procedure

requiring specific qualifications, and place strict limitations on the depth and method of callus treatment permissible for esthetic practitioners versus medical podologists. This medical framing of foot care tissue work is consistent with RNPS pedicure principles, which emphasize surface-layer debridement and avoid deep tissue removal.

ISO 22716:2007 (Good Manufacturing Practices for Cosmetics) provides the manufacturing quality framework for professional cosmetic products used in European nail salons, setting requirements for production, control, storage, and distribution that indirectly affect the quality and consistency of the materials available to practitioners [29].

5.4 RNPS Synthesis: Positioning Between U.S. and European Frameworks

The RNPS framework occupies a defined position in relation to existing U.S. and EU regulatory and educational standards. It is not intended to replace these standards: RNPS practitioners must comply with their applicable licensing requirements, chemical safety regulations, and sanitation standards as a baseline. RNPS is a procedural methodology that operates above this baseline, adding the structured execution logic, anatomical precision, and outcome verification framework that existing standards do not provide.

From U.S. professional culture, RNPS adopts the emphasis on standardization, reproducibility, and safety compliance, translating these values into a zone-specific procedural matrix rather than leaving them at the level of general sanitation requirements. From European podological and esthetic practice, RNPS adopts the anatomical framing of tissue work, the differentiation between living and non-living periungual structures, and the contraindication protocols grounded in clinical dermatology [18].

The third dimension that RNPS adds, technical nail architecture, is not fully addressed by either the U.S. or European regulatory frameworks, which concern

themselves primarily with safety and product compliance rather than with the geometric and structural quality of the nail enhancement itself. This dimension is most explicitly evaluated in the international competition environment, and RNPS has been designed to prepare practitioners for that environment while simultaneously improving the quality and safety of every salon service they provide.

The following table presents a direct comparison of key regulatory and educational characteristics across U.S., EU, and RNPS frameworks, illustrating where alignment exists and where RNPS extends beyond existing standards.

Table 5. Comparative Analysis: U.S. Standards, EU Standards, and RNPS Framework (compiled by the author based on [29, 30, 31, 32, 35, 36, 41, 47]).

Dimension	U.S. Standards	EU Standards	RNPS Framework
Sanitation protocol	Strong (OSHA, EPA, State Board)	Strong (ISO 22716, EN standards)	Integrated as baseline requirement
Anatomical procedure logic	Limited in curricula	Moderate (podology influence)	Core system feature; zone-specific
Chemical safety	Risk-based (MoCRA, EPA)	Hazard-based (EC 1223/2009)	Material selection guidance provided
Licensing requirement	State-level; highly variable	Country-specific; often medical	Complementary to existing license
Technical nail architecture	Not systematically addressed	Not systematically addressed	Full apex/zone/geometry protocol
Competition alignment	Limited formal preparation frameworks	Variable by country	Explicit competition design module
Post-procedure care	Client-advised; not standardized	Varies; product-based	Forward Recovery protocol (RNPS)

5.5 The U.S. Market as a Strategic Context for RNPS

The United States nail service market, valued at approximately \$12.9 billion in 2024 with a projected 10.8 percent compound annual growth rate through 2030 [21], represents the primary professional context for RNPS deployment. The fragmentation of this market, with over 24,000 establishments and no dominant national training standard [23], creates both a challenge and an opportunity for methodological frameworks like RNPS.

The challenge is that a fragmented, licensing-minimum training environment is inherently resistant to the adoption of any higher-order framework, because the immediate economic incentive for practitioners is speed and volume rather than precision and depth. The opportunity is that a growing segment of the U.S. client base actively seeks premium, technically differentiated nail services and is willing to pay for them. Technicians who operate at the RNPS technical level offer a service that is objectively distinguishable from the market standard and that can command a corresponding price differential.

The figure below illustrates the growth trajectory of the U.S. nail salon market from 2021 through 2025, providing the economic context within which RNPS positions its educational and professional standard-setting function.

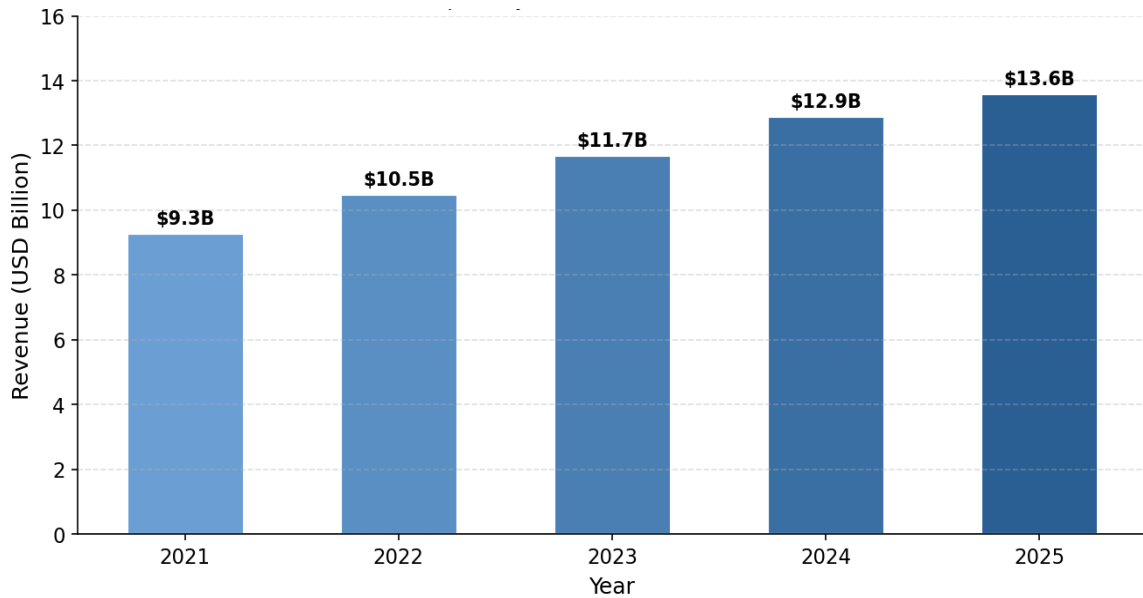


Figure 9. U.S. Nail Salon Industry Revenue, 2021-2025 (compiled by the author based on [23, 24]).

The educational infrastructure supporting this market, including the Cosmetology & Beauty Schools industry in the United States, is a \$2.4 billion sector as of 2026 [25], with over 1,300 operating institutions. RNPS is positioned as a supplementary educational framework compatible with and additive to existing cosmetology programs, rather than as a replacement. Its zone-specific protocols, quality criteria, and anatomical foundation can be integrated into advanced nail technician training, continuing education, and specialty certification programs at the institutional level.

Section 5 has established the regulatory and market context for RNPS. The Conclusion integrates the key findings of the manual and presents the author's forward-looking recommendations.

Section 6. Forward Recovery: Author's Post-Procedure Protocol and Recommendations for Tissue Restoration

6.1 Scientific Rationale for Post-Procedure Care in the RNPS System

Every nail service procedure, regardless of how precisely it is executed, creates a temporary perturbation in the physiological state of the periungual tissues. Hardware manicure with an e-file reduces the surface lipid layer of the cuticle zone, increases transepidermal water loss (TEWL) from the treated area, and creates microfriction on the nail plate surface that alters keratin layer organization [4, 5]. Combined manicure introduces additional micro-injury at cut edges that must complete their natural healing cycle. Hardware pedicure removes plantar hyperkeratotic tissue and temporarily reduces the protective physical barrier of the treated zones. Even meticulous execution of all RNPS protocols does not eliminate these physiological consequences; it minimizes them.

Post-procedure care, when applied as a structured protocol rather than as an adjunct afterthought, can support the natural repair processes and reduce the duration and degree of the perturbation. The clinical basis for this claim rests on well-established skin physiology: the lipid barrier of the stratum corneum, composed primarily of ceramides, cholesterol, and free fatty acids in a lamellar organization, begins to restore itself within hours of a barrier disruption event, and the rate of restoration is significantly accelerated by the topical application of barrier-mimicking lipid formulations [5, 28]. Similarly, the keratin structure of the nail plate, while not biologically active in the same sense as the epidermis, benefits from amino acid and protein supplementation that supports the mechanical integrity of the surface keratin layers.

The Forward Recovery method, developed by Svitlana Riaba, formalizes these principles into a three-stage sequential protocol applicable to both hand and foot procedures. The protocol is described in this section as the RNPS author's original contribution to post-procedure care standardization.



Figure 10. Post-Procedure Recovery Chain: Forward Recovery Method (compiled by the author based on [1, 4, 5]).

6.2 Forward Recovery Protocol Structure

The Forward Recovery protocol is built on the principle of directed hierarchical repair: each stage addresses a specific biological target in the sequence that matches the natural order of tissue recovery, and each stage prepares the treated tissue for the next stage's action. The sequence is: Stage 1 (nail plate keratin structure restoration), followed by Stage 2 (lipid barrier reconstruction of the cuticle and periungual skin), followed by Stage 3 (deep nocturnal regeneration of the hand or foot skin).

Stage 1 targets the nail plate surface following any procedure that involves e-file contact or gel removal. The biological objective is to deliver low-molecular-weight hydrolyzed keratin fragments and structural proteins to the surface keratin layers, supporting their mechanical integrity and reducing the tendency toward brittleness and delamination. The formulation approach uses hydrolyzed keratin, hydrolyzed silk protein, hydrolyzed collagen, and niacinamide in a water-based carrier, with a defined

application sequence of one drop per nail plate, allowed to absorb fully before Stage 2 is initiated.

Stage 2 targets the lipid barrier of the cuticle zone and periungual skin. The biological objective is to reconstruct the lamellar lipid structure disrupted by mechanical treatment and to reduce the elevated TEWL that follows instrument contact with the periungual skin surface [26, 27]. The formulation uses a biologically mimetic lipid system: squalane as the primary vehicle, ceramide NP and phytosterols as barrier-reconstructing lipids, and bisabolol as an anti-inflammatory supportive agent. Application is by gentle circular massage over the cuticle and periungual skin for one to two minutes, extending to full absorption.

Stage 3 targets the full skin of the hand or foot during the natural nocturnal regenerative cycle. Published research confirms that skin cell proliferation and barrier lipid synthesis are elevated during sleep hours, driven by the circadian rhythm of epidermal biology [4, 5]. A formulation applied immediately before sleep can synchronize with this natural cycle and amplify its barrier-restoring effect. The Forward Recovery Stage 3 formulation uses a multiphase occlusive system: shea butter and mango butter as primary occlusives, ceramide NP and cholesterol to mimic the stratum corneum lipid composition, controlled-release urea at 10 percent for keratolytic and moisturizing action, and encapsulated panthenol for sustained barrier support during the approximately eight-hour sleep period.

6.3 Author's Recommendations for Forward Recovery Integration in RNPS Practice

The Forward Recovery protocol is presented as an integral component of the RNPS service standard rather than an optional add-on. The following practitioner-level recommendations represent the author's position on how Forward Recovery should be implemented in professional RNPS practice.

Recommendation 1: Forward Recovery Stage 1 should be applied in-salon immediately after every hardware or combined manicure procedure, before any gel or polish coating is applied. The nail plate surface after e-file treatment benefits from protein supplementation before the additional chemical exposure of gel application. The two-to-three-minute absorption time for Stage 1 fits naturally into the workflow of a professional service.

Recommendation 2: Forward Recovery Stages 2 and 3 should be taught to the client as a home care protocol at the conclusion of every appointment. The practitioner who explains the biological rationale for the post-procedure protocol, specifically why Stage 1 targets the nail plate, why Stage 2 targets the cuticle barrier, and why Stage 3 is most effective when applied immediately before sleep, creates a client who understands and follows the protocol rather than simply being told to "use cuticle oil."

Recommendation 3: The full three-stage Forward Recovery protocol should be recommended for daily use during the first week following procedures that involve significant barrier perturbation: gel removal with acetone, heavy e-file work, or hardware pedicure on heavily keratinized foot skin. After the first week, Stages 2 and 3 at a maintenance frequency of three to four times per week are sufficient for most clients.

Recommendation 4: Practitioners who observe persistent periungual irritation, dryness, or roughness despite correct RNPS hardware technique should first assess their clients' adherence to the Forward Recovery home care protocol before concluding that the technique requires adjustment. In the author's professional experience, the majority of cases in which clients report rapid return of dryness or roughness between appointments are attributable to absence of consistent post-procedure home care rather than to procedural errors.

Recommendation 5: Educators who incorporate RNPS into their curriculum should assess students' knowledge of the Forward Recovery protocol as part of the

service standard evaluation, not as a separate cosmetic product knowledge module. The protocol is part of the procedure, not an appendage to it.

Conclusion

This manual has presented the Riaba Nail Precision System (RNPS) as a comprehensive methodological framework for professional nail services that integrates anatomical science, standardized procedural logic, safety protocols, and competition-readiness criteria within a single codified system. The following conclusions emerge from the analysis developed across all sections.

The RNPS six-step procedural logic (zone inspection, tissue type identification, instrument selection, controlled movement, outcome verification, and zone transition) provides a cognitive framework that transforms every nail service from an experience-dependent intuitive practice into a structured, verifiable sequence. This transformation is directly relevant to the gap identified in the introduction: the absence of a reproducible execution framework in standard U.S. cosmetology education, which produces inconsistent outcomes across practitioners with nominally equivalent licensing credentials.

The zone-specific protocols developed for hardware manicure, combined manicure, hardware pedicure, and competitive nail design represent the first published codification of these service types within a unified anatomically grounded framework. Each protocol specifies instrument parameters, movement directions, prohibited actions, and quality verification criteria that are grounded in peer-reviewed dermatological and anatomical literature and in the evaluated technical standards of international competition organizations.

The contraindication framework presented in Section 4 integrates clinical dermatology evidence on periungual tissue vulnerability with practical protocols for contraindication assessment in the salon setting. The three-category structure (absolute, relative, and behavioral contraindications) provides practitioners with a decision logic applicable to every new client encounter.

The review of U.S. and European professional standards in Section 5 establishes that RNPS does not duplicate existing regulatory or educational frameworks but extends them. The system is designed to be compatible with and supplementary to state cosmetology board requirements, OSHA workplace safety standards, and the EU Cosmetics Regulation, while adding a procedural precision layer that none of these frameworks provides.

The Forward Recovery post-procedure protocol, presented in Section 6 as the author's original contribution to post-procedure care standardization, offers practitioners a biologically grounded three-stage home care sequence that supports the natural recovery of nail plate keratin structure, periungual lipid barrier integrity, and hand and foot skin regeneration following professional nail services.

The hypothesis stated in the introduction, that a standardized procedural logic grounded in periungual anatomy will measurably reduce technique variability among practitioners and decrease the incidence of preventable tissue trauma during nail service procedures, is supported by the theoretical and empirical evidence reviewed in this manual. The next phase of RNPS development will involve structured training program delivery, practitioner outcome assessment, and the collection of longitudinal quality data from certified RNPS practitioners to generate the evidence base for a controlled outcome study.

The author invites nail service educators, salon owners, competition practitioners, and curriculum developers to engage with the RNPS framework as a foundation for advancing professional standards in nail services, contributing to the development of a technically and scientifically credible field of aesthetic nail care in the United States and internationally.

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Applications

Appendix A



FORWARD RECOVERY SYSTEM™

Three-Stage Post-Procedure Care Protocol

1 STAGE 1 NAIL PLATE RECONSTRUCTION

Biological target: damaged keratin structure of the nail plate



APPLICATION STEPS

- 1 Thoroughly cleanse the nail plate.
- 2 Apply 1 drop to the damaged area once daily.
- 3 Spread 1 drop evenly over the entire nail plate.
- 4 Allow to absorb for 2-3 minutes.
- 5 Use daily throughout the recommended course.

KEY COMPONENTS

Hydrolyzed keratin

Panthenol

Niacinamide (B3)

Zinc PCA

Supports restoration of the nail's keratin structure, strengthening, and protection.

2 STAGE 2 CUTICLE LIPID BARRIER RECOVERY

Biological target: cuticle and periungual skin



APPLICATION STEPS

- 1 Apply a few drops to the cuticle and periungual skin.
- 2 Gently massage for 1-2 minutes until fully absorbed.
- 3 For home care, use twice daily.

KEY COMPONENTS

Squalane

Jojoba oil

Vitamin E

Ceramides

Phytosterols

Reconstructs the lipid barrier, protects the skin, and reduces dryness and flaking.

3 STAGE 3 DEEP OVERNIGHT REGENERATION

Night Recovery Balm

Biological target: skin of hands or feet with dryness or damage



APPLICATION STEPS

- 1 First cleanse the skin.
- 2 Apply a sufficient amount of balm.
- 3 Massage until fully absorbed.
- 4 For enhanced effect, use cotton gloves or socks.
- 5 Leave on the skin overnight.
- 6 Use daily or as needed.

KEY COMPONENTS

Shea butter

Mango butter

Squalane

Ceramides

Panthenol

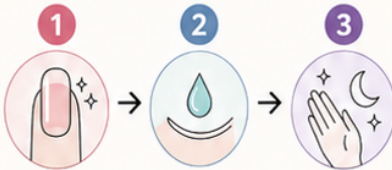
Calendula

Provides deep restoration, barrier support, and intensive skin regeneration.

SUMMARY PROTOCOL

Stage	Biological target		Time of use
1	Nail plate reconstruction	Nail plate	After Stage 1
2	Cuticle lipid barrier recovery	Cuticle and periungual skin	After cuticle treatment or daily
3	Deep overnight regeneration	Skin of hands or feet	Before bedtime

SEQUENCE OF USE

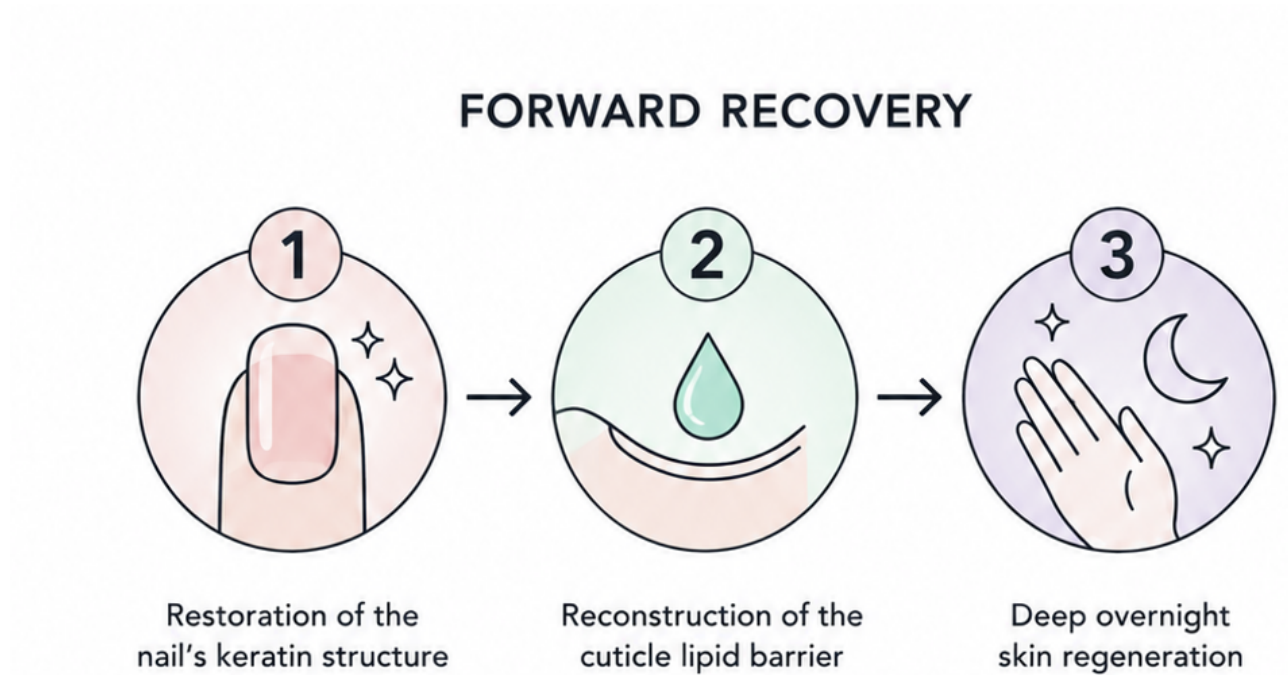




Systematic care is the key to healthy nails and beautiful skin.



Appendix B



Appendix C. 1. Sequence of stages of the Forward Recovery method

Appendix C. 2. Application technique. Stage 1

APPLICATION TECHNIQUE. STAGE 1 NAIL PLATE RECONSTRUCTION

Serum for Nail Plate Recovery



1 CLEAN THE NAIL PLATE



Clean the nail plate of dust, natural oils, and residual material using a lint-free wipe or dehydrator.

2 APPLY 1 DROP OF SERUM



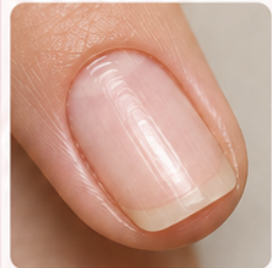
Apply 1 drop of serum to the nail plate near the cuticle.

3 SPREAD EVENLY OVER THE NAIL PLATE



Using light motions, spread the product over the entire nail plate. Do not massage it into the cuticle at this stage.

4 ABSORPTION TIME: 2-3 MINUTES



Allow the product to absorb for 2-3 minutes. Do not rinse.



IMPORTANT

- Use on a clean, dry nail plate.
- Do not use too much product.
- Do not proceed to the next stage until the serum is fully absorbed.

BIOLOGICAL TARGET OF STAGE 1



The nail plate — restoration of keratin structure, strengthening of damaged and flexible nails.

KEY COMPONENTS



Hydrolyzed
keratin



Panthenol



Niacinamide
(B3)



Sodium
hyaluronate

FORWARD RECOVERY SYSTEM™ • 3-stage post-procedure care protocol

Appendix C. 3. Application technique. Stage 2



APPLICATION TECHNIQUE. STAGE 2

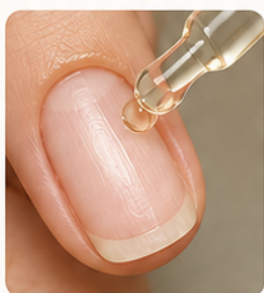
CUTICLE AND LIPID BARRIER RECOVERY

Nourishing Oil for the Cuticle and Periungual Skin

STAGE 2



1 APPLY THE OIL



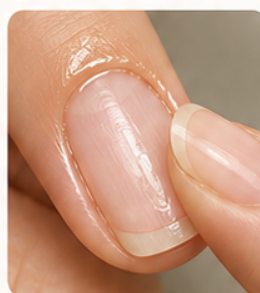
Apply 1–2 drops of oil to the cuticle and periungual skin.

2 LIGHT MASSAGE



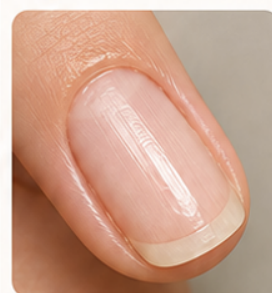
Perform a light massage using circular motions for 30–60 seconds.

3 SPREAD OVER THE SURFACE



Distribute the oil over the entire cuticle and the lateral sidewalls.

4 FULL ABSORPTION



Allow the product to absorb completely. Do not rinse. Proceed to Stage 3.

IMPORTANT

- ✓ Use daily.
- ✓ Do not use too much oil.
- ✓ Do not rinse after application.
- ✓ Recommended for home care and after cuticle procedures.

BIOLOGICAL TARGET OF STAGE 2



The cuticle and lipid barrier — restoration of the hydrolipid layer, nourishment, strengthening of elasticity, and protection against moisture loss.

KEY COMPONENTS



Squalane



Jojoba oil



Vitamin E



Ceramides



Phytosterols



FORWARD RECOVERY SYSTEM™

• gradual recovery • targeted action • visible result

Appendix C.4. Application technique. Stage 3



APPLICATION TECHNIQUE. STAGE 3

DEEP OVERNIGHT RECOVERY AND PROTECTION

Overnight Balm for Hands and Feet



1 APPLY THE BALM



Apply a small amount of balm to clean, dry skin of the hands or feet. A pea-sized amount is sufficient for each hand or foot.

2 SPREAD OVER THE SKIN



Distribute the balm evenly with massage movements over the entire surface of the hands or feet, paying special attention to dry areas.

3 ADDITIONAL PROTECTION



For enhanced effect, put on cotton gloves or socks. This creates an occlusive barrier and improves penetration of active ingredients.

4 LEAVE OVERNIGHT



Leave the balm on overnight. Do not rinse. If necessary, blot any excess with a tissue.

IMPORTANT

- ✓ Use in the evening for the best result.
- ✓ Do not apply to open wounds or irritated skin.
- ✓ Do not rinse after application.
- ✓ Suitable for daily home care.

BIOLOGICAL TARGET OF STAGE 3



The skin of the hands and feet — deep nourishment, protection, restoration of the lipid barrier, increased elasticity, and reduction of dryness and flaking. The optimal effect occurs during overnight regeneration.

KEY COMPONENTS


 Shea butter


 Mango butter


 Squalane


 Ceramides


 Panthenol


 Calendula



RECOMMENDATION

Stage 3 completes the Forward Recovery protocol and provides maximum recovery and protection overnight. Regular use supports a healthy appearance of the nails, cuticles, and skin.

FORWARD RECOVERY SYSTEM™ • 3-STAGE POST-PROCEDURE CARE PROTOCOL