

# ZEST<sup>®</sup> Standard Operating Procedure

## I. Background and Clinical Rationale

Maintaining healthy eyelids is critical for managing nearly every clinical eye condition. The eyelids play a central role in protecting the ocular surface, stabilising the tear film, and enabling proper healing. The lids and conjunctiva provide the only direct vascular supply to the anterior segment tissues — the ciliary vessels do not extend past the iris plane.

Inflammation, healing, and medication delivery all depend on either the conjunctival vessels (for drops and local immunity) or the eyelid vasculature (marginal and peripheral arcades). This explains why almost every intervention, from eye drops to warm compresses to devices like IPL or LLLT, targets the lids or the conjunctiva.

ZEST<sup>®</sup> (Zocular Eyelid System Technology) rapidly restores lid health within minutes by gently removing biofilm and debris, making it indispensable beyond just Dry Eye or eyelid inflammation care. Conditions such as blepharitis, Demodex infestation, styes, allergic conjunctivitis, recurrent corneal erosion, shingles eyelid dermatitis, and contact lens intolerance all benefit from improved lid health.

## II. Purpose

The purpose of this Standard Operating Procedure (SOP) is to establish a clear, repeatable, and evidence-based protocol for performing the ZEST<sup>®</sup> procedure using the ZEST<sup>®</sup> Procedure Pack in an in-practice clinical setting.

This SOP ensures that all practitioners, including doctors, clinicians, trainers, technicians, and office staff, apply the same high standards for eyelid margin cleansing using the ZEST<sup>®</sup> Procedure Pack and provide appropriate aftercare recommendations to support continued lid hygiene at home.

By following this SOP, practices can:

- Provide a consistent patient experience with predictable, safe outcomes.
- Optimise lid margin health quickly and effectively, removing biofilm and debris that contribute to a range of anterior segment symptoms.
- Support the success of other therapies such as topical medications, heat therapy, or gland expression by addressing the underlying inflammatory load at the lid margin.
- Reinforce the importance of ongoing lid hygiene and maintenance with clear, easy-to-understand aftercare instructions that help patients maintain the benefits of ZEST<sup>®</sup> between visits.

## III. Scope

This SOP applies to all clinical personnel involved in delivering, training, or supervising the ZEST<sup>®</sup> procedure in any practice location where it is offered.

It covers:

- Proper patient preparation, procedure technique, and rinsing.
- Consistent post-procedure aftercare recommendations, including verbal and written instructions to maintain lid hygiene at home and avoid behaviours that may interfere with healing.

Staff should ensure that each patient:

- Understands how to maintain clean lids between appointments.
- Knows what at-home products, if any, are appropriate.
- Has realistic expectations for follow-up visits, especially for chronic or recurrent conditions.

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## IV. Responsibilities

<b>Role</b>	<b>Responsibilities</b>
Clinicians	Evaluate patient suitability; obtain informed consent; oversee the procedure; manage any complications.
Trainers	Train staff to perform ZEST <sup>®</sup> correctly using the IFU and training video.
Office Staff	Perform ZEST <sup>®</sup> according to this SOP; maintain supplies; provide patient education; document the procedure.

## V. Materials & PPE

- ZEST<sup>®</sup> Pack
- Gloves and PPE as required.
- Cleaned surface and absorbent pads.

### Do not substitute:

- ZocuShield gel is NOT a replacement for ZEST<sup>®</sup> gel.
- Use only ZocuSwab; do not substitute look-alike swabs or cotton tips.

## VI. Patient Selection & Contraindications

### ✓ Good candidates:

- Chronic eyelid inflammation, such as blepharitis or meibomian gland dysfunction (MGD)
- Styes or Chalazion, particularly in recurrent or unresolved cases
- Ocular surface disease, including dry eye syndrome where lid hygiene can reduce inflammation and improve tear film stability
- Symptoms of redness, swelling, itching (pruritus), or discomfort around the eyelids
- Demodex blepharitis, evidenced by cylindrical dandruff at the lash base
- Contact lens intolerance linked to poor lid hygiene or debris accumulation
- Post-surgical patients (e.g., cataract or LASIK) who present with lid margin disease that may interfere with healing
- Pre- or post-initiation of thermal or light-based lid therapies to optimise treatment outcomes
- Cosmetic patients with complaints of lash thinning, lid puffiness, or irritation associated with makeup build-up
- Preparing for lash extensions, where clean lid margins improve extension adhesion and reduce the risk of irritation or infection.
- Subclinical signs of lid margin debris or meibomian dropout

### ✗ Contraindications:

- Known allergy or hypersensitivity to any ingredients in the ZEST<sup>®</sup> gel or swab components
- Severely compromised ocular surface or intraocular inflammation (e.g., non-healing epithelial defect, uveitis)

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- Glaucoma surgery with fragile blebs or exposed tube shunts
- Inability to cooperate with procedures involving instruments near the eye (e.g., severe blepharospasm, cognitive impairment, or paediatric patients)
- Recent ocular surgery or trauma, where mechanical lid manipulation may interfere with healing (e.g., penetrating keratoplasty, trabeculectomy, cataract surgery, within the past 1 month unless cleared by surgeon)

## VII. Procedure

### 1. Prepare

- Wash hands; wear gloves.
- Explain the procedure and obtain informed consent.
- Prior to initiating the ZEST<sup>®</sup> procedure, ensure the area is free of all topical products. This includes cosmetics, moisturisers, sunscreens, and other facial applications.
- Position the patient comfortably in a chair, whether reclined or more upright.

### 2. Open the ZEST<sup>®</sup> Pack

- Lay out all components on the included drape on a flat surface.
- Twist the tip of the ZEST<sup>®</sup> Gel pod in one direction until the tip breaks off. Dispense the ZEST<sup>®</sup> gel in equal measure into each of the two wells in the orange Zocular container.

### 3. Apply ZEST Gel as directed

## UPPER EYELIDS

- Do NOT apply any topical anaesthetic to perform the ZEST<sup>®</sup> procedure.
- Using the ZocuSwab, scoop approximately 60–70% of the ZEST<sup>®</sup> Gel from one container well with a smooth, upward motion, similar to lifting a viscous material like cake batter. This portion is used for the upper eyelid, while the remaining 30–40% is reserved for the lower eyelid, ensuring hygienic separation and efficient product use.
- Begin by gently moving the ZocuSwab laterally along the upper eyelid margin to activate the ZEST<sup>®</sup> gel - the clear gel should begin to foam. If foaming does not occur, it is likely due to residual surface contaminants such as makeup, moisturisers, or sunscreen, indicating the need for more thorough pre-cleansing.
- Once foaming begins, cleanse the upper eyelid margin for 30–45 seconds, focusing on the lash base. Use lateral, circular, vertical, or rolling motions to ensure thorough coverage. Avoid excessive pressure on the eyelid or globe and instruct the patient to blink periodically to relax the lid and enhance comfort. If ZEST<sup>®</sup> gel enters the eye, it is generally well-tolerated; rinse thoroughly with saline afterwards.
- In cases of significant lid margin debris or confirmed Demodex infestation, extend the cleaning duration to 60–90 seconds. To minimise patient discomfort and enhance ZEST<sup>®</sup> cleansing effectiveness, alternate between the two upper eyelids every 20–30 seconds. This staggered approach allows the ZEST<sup>®</sup> gel to remain in contact with each eyelid for a longer period, improving the breakdown of biofilm and enhancing overall clinical results.

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## LOWER EYELIDS

- Instruct the patient to gaze upward during application to the lower eyelid margins to better expose the lash line. Repeat the same technique used for the upper eyelids, applying the ZEST<sup>®</sup> gel and cleansing with gentle lateral, circular, vertical, or rolling motions along the lash base. The recommended duration for cleaning the lower eyelids is typically one-third to one-half of the time used for the upper eyelids.
4. Rinse Thoroughly
    - Have patient open eyes and look up.
    - Rinse the ocular surface thoroughly with sterile saline by applying quick, firm pressure to the saline pack to generate a steady stream across the eye. Instruct the patient to look upward during rinsing for optimal exposure. Repeat as needed to remove residual gel. After each rinse, have the patient gently close the eyelids, then use the included gauze to wipe excess saline and gel in a downward and outward motion, allowing the lids to close naturally.
  5. Post-Care
    - Confirm that the procedure was well tolerated and that the patient reports no significant discomfort. Mild redness for 10–15 minutes post-procedure is normal, but the eye typically becomes whiter and less inflamed than before as the lid margin is cleared of irritants and debris.
    - Provide home care instructions in between appointments. The Eye Doctor<sup>®</sup> Biodegradable Eyelid Wipes to remove debris, The Eye Doctor<sup>®</sup> Hypochlorous Eyelid Cleansing Spray to reduce bacteria and The Eye Doctor<sup>®</sup> Advanced Triple Action Eye Drops to lubricate and soothe the eyes are all part of the ZEST<sup>®</sup> Aftercare Kit.
    - Recommend repeating the ZEST<sup>®</sup> procedure twice annually, similar to routine dental cleanings, to maintain optimal eyelid hygiene and ocular surface health.