

NEW PATIENT INFORMATION/MEDICAL QUESTIONNAIRE

Today's Date ____/____/____ (General questionnaire for all procedures some questions may not be relevant)

Last Name _____ First _____ MI _____

Address _____

_____ Zip Code _____

Phone #1: _____ Phone #2: _____

E-mail Address _____

Occupation _____

Approximate Weight: _____ Height: _____ Date of Birth ____/____/____

Please list the prescriptions you are currently taking: _____

Drug Allergies: _____

Please list previous surgeries: _____

Goal or Reason for Visit:

- | | |
|--|--|
| <input type="checkbox"/> Laser Liposuction | <input type="checkbox"/> Zeltiq CoolSculpting |
| <input type="checkbox"/> Medical Supervised Diet | <input type="checkbox"/> Fraxel & Fractional CO2 |
| <input type="checkbox"/> Thermage / Ultherapy | <input type="checkbox"/> Botox |
| <input type="checkbox"/> Restylane / Juvederm / Radiesse | <input type="checkbox"/> Laser Hair Removal |
| <input type="checkbox"/> IPL - Photofacial | <input type="checkbox"/> Laser Tattoo Removal |
| <input type="checkbox"/> Chemical Peel | <input type="checkbox"/> Microdermabrasion |

Have you ever had a cold sore on your lip? No Yes Last time:

Do you have a history of easy bruising or bleeding problems? No Yes

Do you have a history of darkening of the skin after injury? No Yes

Are you pregnant or breastfeeding? No Yes

Have you used or are you currently using Retin-A or Renova? No Yes Last time:

Have you used or are you currently using Accutane? No Yes Last time:

I have been given the opportunity to review the HIPAA notice either online or in-office.

Signature: _____

LASER HAIR REMOVAL INFORMED CONSENT

1. **Informed Consent.** The purpose of this Informed Consent is to help you decide whether a laser hair removal (“LHR”) cosmetic procedure is right for you and to help you make an informed decision to undergo this procedure. This Informed Consent gives you general information about LHR cosmetic procedures, explains other treatment options, and identifies the benefits, risks, side effects and possible complications associated with LHR procedure

2. **Laser Hair Removal Procedure.** LHR is a non-invasive laser treatment designed to remove unwanted hair from all parts of the body. The laser device works by emitting pulses of light energy that penetrate the skin and destroy hair follicles while the device’s handpiece cools the surrounding skin. Because the laser needs to fill the hair follicle to work effectively, it is important not to wax, tweeze, have electrolysis procedures or pluck hair for 2-4 weeks prior to the procedure. You will be required to wear protective eye glasses during the procedure to protect your eyes from the laser light. You may feel a slight burning, stinging or pinching sensation during the procedure,. **It generally takes 10 to 21 days after the procedure for the treated hair to fall out.** Treatment of dark course hair generally achieves the best results while removal of light fine hair generally requires additional treatments which may or may not be successful. Clinical results of LHR may also vary depending on individual skin type, hormonal levels and hereditary influences. Therefore, some patients may experience partial results and some may notice no improvement at all. Future hormonal changes may cause additional hair growth. LHR procedure generally involves a series of treatments. Ideal (light skin/dark hair) candidates can usually achieve 65%-90% reduction with a series of 6 treatments. Thicker skinned areas such as mens backs, faces or neck usually require more than 6 sessions and usually achieve only partial reduction or hair thinning

3. **Alternative Procedures.** LHR is a voluntary cosmetic procedure which is not necessary or required. .

4. **Not Good Candidates.** Generally you are not a good candidate for LHR procedure if you are pregnant, nursing or plan to become pregnant while undergoing LHR treatments. Individuals who have used Accutane within the past six months or who used any medications requiring limited exposure to sunlight are not good candidates for LHR procedure. Individuals with recently tanned skin are advised to delay undergoing the LHR procedure. The laser may not be effective on blond or gray hair. Sun exposure 2-4 weeks prior to treatment may reduce effectiveness of the laser. It is important to shave the area prior to treatment session. (we do not provide shaving services as you must do this yourself prior to the treatment). Please inform us if you have an allergy to Aloe

5. **Risks and Complications.** All medical and cosmetic procedures are associated with certain risks and may result in complications. Possible risks and complications associated with LHR procedure include:

- Temporary reddening, burning, swelling, bruising or discoloration of the skin over the treated area.
- Blistering, scarring, activation of cold sores, infection or permanent discoloration, which may occur in rare cases. Please inform us if you have ever had a problem with cold sores.
- Folliculitis, which is an infection of the hair follicle, which may take several days to resolve