Spectra Laser Treatment Consent Form – Strimling Dermatology Laser & Vein Institute v1/12

This form is designed to provide you with the information you need to make an informed decision on whether or not to have a Spectra Laser Treatment procedure performed.
If you have any questions or do not understand any part of this consent, please do not hesitate to ask us.

I authorize Dr. Strimling & / or associates / assistants to perform Spectra laser treatment.
I understand that the procedure is purely elective and I have chosen to receive treatment for:

☐ Spectra Laser Peel  Spectra Laser Peel is a Spectra mode (long pulsed 1064) laser face peel using Spectra lotion; followed by a Soft Peel and then, finally, a Spectra mode or q-switched mode pass without Spectra lotion, if indicated or tolerated. Spectra Peel is Indicated: skin rejuvenation / photoaging / wrinkles (fine lines), dyschromias (undesirable red and brown discolorations associated with aging or other conditions), textural improvement; acne, including erythema (redness) and dyspigmentation (abnormal brown discoloration from acne); acne scars; enlarged pores and temporary removal or lightening of unwanted vellus (small, fine lightly colored) hairs. Generally, 3-5 treatments at 2-4 week intervals and maintenance treatments at 3-6 months intervals are recommended.

☐ Spectra Laser Soft Peel & Laser Toning  Laser toning is a q-switched 1064 mode only peel without Spectra lotion; while a Soft Peel is laser toning plus Spectra lotion. Spectralotion acts as a superficial target for the laser energy and aids in surface or superficial pigment removal, while laser toning without Spectra lotion targets deeper (dermal) pigment common in melasma and post-inflammatory hyperpigmentation. Laser Toning with or without Soft Peel is indicated for melasma and post-inflammatory hyperpigmentation (i.e. PIH). 6-12 treatments at 1-2 week intervals and periodic preventive maintenance treatments at 3-6 months intervals, especially for melasma is generally recommended.

☐ 532 Epidermal Peel [Indicated for skin types 1 or 2 only with Rosacea &/or undesired surface (epidermal) pigment].

☐ Tattoo Removal  ☐ Pigmented Lesions  ☐ Other__________________________

Relative (& Absolute) Contraindications to treatments include: isotretinoin (i.e. Accutane) use in the 6 months, pregnancy / breastfeeding, active skin disease or infection or untreated skin cancer in the treatment area, compromised immune system, AIDS / HIV or hepatitis, impaired healing (e.g. keloid scar formers), vitiligo (for Spectra peel only)

I understand the nature of my condition, the nature of the procedure, the alternative treatments available, and the benefits to be expected compared with alternative approaches.

This document is a written confirmation of my discussion about Spectra VRM Nd:Yag laser treatment.

I understand that optimal results are achieved with a series of treatments and that I will not see optimal results after one treatment, nor can the doctor guarantee my satisfaction with the level of improvement or % improvement even after multiple treatments. The need to complete a treatment plan has been fully explained to me. Also, I understand that clinical results may vary depending on my response to laser and my compliance with pre- and post-treatment instructions. I have followed all pre-laser requirements previously provided to me and I understand and will follow the recommendations provided here for post treatment care of my skin, which have been discussed with me.

Just as there are benefits to the procedure proposed, I understand that this procedure also involves risks and possible healing "down time", excluding laser toning / soft peel which is typically a no downtime procedure. I understand that serious complications are rare but possible. Common Spectra Peel side effects include temporary redness and mild “sunburn” like effects that may last a few hours to a day or more. Pigment changes (light or dark spots on the skin) or prolonged redness lasting 1-3 months or longer may occur. Other potential risks include itching, pain, bruising, infection, scarring and swelling. Laser light can cause eye damage and provided protective eyewear must be worn during treatment. Also, I will keep my eyes closed during treatment. I consent to topical and / or local anesthesia as needed, which involves risks of anesthetic drug reactions and complications.

I consent to photographs being taken and authorize their anonymous use for public or staff education, marketing, medical study or research and to evaluate treatment effectiveness or for medical record documentation. ____________________ (Pt. initials)

The procedure, as well as potential benefits and risks, have all been explained to my satisfaction. I have had all my questions answered to my satisfaction. I freely consent to the proposed treatment.

__________________________  ____________________________  ____________________________  ____________________________
Patient or Legal Guardian Signature  Date  ____________________________  ____________________________
Physician or other Provider Signature  Date
Spectra Laser Peel / Laser Toning / Soft Peel / 532 Epidermal Peel

Treatment Instructions for the Patient

The following instructions will help you prepare for your treatment day.

· Avoid excessive sun exposure for approximately one to two weeks prior to your treatment. Wear a broad-spectrum sunscreen of at least SPF 30 to protect your skin. If you are spray-tanned, please exfoliate to help remove the tanning product in the treatment area.

· If you have a history of cold sores, be sure that the doctor is notified in advance of scheduling your treatment. The doctor will prescribe an oral anti-viral medication (i.e. Famvir or Valtrex) for you prior to your treatment.

· Stop applying any “irritating” skin products at least one day prior to treatment.

· If the doctor has written any prescriptions for medications to be used after your laser treatment, have these filled by your pharmacist and available the day of your treatment.

· Arrive on time for your laser treatment with clean skin. Female patients should not wear any makeup/mascara, lotions, powders or perfumes on or around the areas being treated. Male patients can shave the morning of their treatment but should not apply lotions or aftershave on or around the areas being treated.

· Wear comfortable loose fitting clothes and shoes.

Post Treatment Instructions for the Spectra Laser Peel Patient

After your laser treatment your skin may be cooled in order to calm down the sunburn sensation and any redness. Some patients might experience some edema (swelling) for up to a couple of hours, if they have had an aggressive treatment.

If the sunburned sensation continues after two hours, apply a cold pack and / or hydrocortisone 1% cream (or similar low potency cortisone) 2x / day for up to several days, as needed.

After calming the skin a moisturizing sunscreen should be applied to the skin.

Continue using a moisturizing sunscreen as directed by your doctor after the treatment.

Female patients can wear makeup immediately after their treatments and male patients may shave.