Secret DUO sample consent form

Doctor/Practice Name

Address

Phone

CLIENT INFORMATION

DATE:

NAME: D.O.B. \_\_\_\_\_\_\_\_\_\_

Pre-Treatment Photos Taken: YesNo

ABOUT SECRET RF

SecretRF is one of the most technologically advanced forms of skin rejuvenation therapy available. Its powerful combination of fractional radiofrequency energy and minimally invasive micro-needles is ideal for non-surgical skin tightening, wrinkle and pore size reduction, acne and acne scar treatment, as well as axillary hyperhidrosis (excessive sweating) treatment.

* SecretRF uses bipolar radiofrequency energy, delivered precisely and directly into the deeper layers of the dermis via minimally invasive micro-needles. This creates microscopic wounds (fractionated denaturing) in the dermal tissue. These in turn stimulate fibroblast activity, causing a significant increase in collagen production as well as tightening of elastin fibres and an increase in lymphatic flow.
* SECRET DUO offers DUAL Non-ablative Fractional Technologies of Micro-needle RF and 1540nm Erbium glass laser in a SINGLE device as a Total Solution of aesthetic treatment. These Two Technologies can work Individually or in Combination treatment to give the Optimal Treatment Flexibility to all patients.
* Non-ablative Skin Resurfacing - The 1540nm erbium glass laser in infrared spectrum creates the dermal heating without any damage on the skin surface and micro-needle fractional RF provides deeper heat diffusion with minimally invasive micro-needles.

WHAT TO EXPECT DURING AND AFTER SECRETRF TREATMENT

* Radiofrequency may cause some discomfort as it is delivered. A topical anaesthetic cream will be applied before treatment to minimise discomfort.
* Immediately after treatment, your skin will be red and will feel warm and tingling, as if you have been sunburned. This will subside over the next 24-72 hours.

POSSIBLE SIDE EFFECTS FROM SECRETRF TREATMENT

* You could experience some minor pin-point bleeding where the micro-needles have pierced the surface of the skin. Very rarely there may be some minor bruising.
* Some mild swelling might occur immediately after treatment, but this will resolve within 24-72 hours.
* Very occasionally, a fine crust or scab might develop in parts of the treated area. This is quite normal. However, it is very important that you do not pick or rub this, but allow it to disappear naturally.
* You could see some temporary patterning of the treated skin.
* There is a very slight risk of infection, so it is important to keep the treated area clean. Your practitioner will advise regarding a cleansing routine, and any creams or lotions you may use.

Before you undergo 1540nm laser treatment, make sure you have read and fully understood the background information on the procedure. To get the most out of it, you need to understand the nature of the procedure, the associated benefits and risks, as well as the available treatment options.

For best results, it is necessary to have the full series of pre-determined treatment sessions. In a minority of patients, the procedure may not work satisfactorily or may not last for the expected period of time. As it’s not possible to predict a sub-optimal response, we are unable to guarantee expected outcomes, nor the number of treatment sessions needed for satisfactory outcomes.

The nature of the Laser treatment has been explained to me. I understand that just as there may be benefits from the procedure, all procedures involve risk to some degree. I am aware that other unexpected risks or complications may occur and that no guarantees or promises have been made to me concerning the results of the procedure. It has also been explained that during the course of the proposed procedure, unforeseen conditions may be revealed requiring performance of additional procedures. My questions regarding this treatment, its alternatives, its complications and risks have been answered by my practitioner and/or his or her staff.

The main advantage of 1540nm is reduced healing time, as opposed to traditional full resurfacing. Because it’s applied in micro-columns, the untreated areas are able to help the recovery of the new skin, making it a much gentler process, with significantly reduced downtime. Non-ablative factional resurfacing technique makes it a much gentler process with significantly reduced downtime and recovery time comparing to the conventional ablative fractional laser.

Secret DUO uses a principle of non-ablative (minimally invasive) laser light with a rapid recovery time. The non-ablative laser beams are delivered as individual columns. The advantage is the reduced downtime as adjacent normal tissue can assist with more rapid healing. These multiple columns of laser beam can be varied in width, depth and density for a treatment program that is specifically suitable for you.

To get the best out of the procedure, up to 3 treatments sessions are recommended. These can be carried out every 1 to 3 months. To keep your complexion looking its best, maintenance treatments can be performed yearly. 1540nm produces outstanding results for, Complexion and skin tone, Fine lines and large pores, Acne Scarring, Active Acne, Skin Remodelling and Rejuvenation and Wrinkle Reduction. Patients can expect clearer, smoother, healthier and more vibrant skin.

The procedure is very well tolerated with numbing anaesthetic cream and cold air. A topical anaesthetic cream applied 30 to 60 minutes before the procedure works very well. Cold air can be applied to the treatment area, to further reduce any associated discomfort. After the procedure, there will be a warm sensation for several hours. This is usually very well tolerated.

Immediately following the procedure you’ll feel as if you’ve been sunburnt. Mild swelling and redness will persist for 2 to 3 days, but there’s usually no bleeding or oozing. The healing process varies from patient to patient as well as the depth and density of the treatment – generally around 5 to 7 days. Some patients are even able to return to work immediately after treatment with some make-up (Derma Corrective).

Over the next few days, you’ll experience minor flaking of the skin. By day two, redness will begin to fade, and the skin might take on a bronzed appearance and start to flake. Most redness and flaking will settle in one week’s time. For some people who are prone to redness, the skin may look red for a little longer but will eventually settle.  For best results, patients should avoid the sun thereafter and use regular sun protection.

By signing the informed consent, you acknowledge that all the above issues relating to the procedure have been addressed. Additionally, you have been given ample opportunity to ask questions and raise any concerns relating to the procedure.

CONSENT FOR 1540nm TREATMENT

patient’s declaration

I have read and understood all the information provided and I have had the opportunity to ask any questions concerning the nature of the treatment, its expected results, and its possible risks and complications.

It has been explained to me that the results of SecretRF DUO treatment can vary from patient to patient. I understand that while there will be an immediate tightening of the collagen tissues in the dermis, the results will become visible gradually over a period of one to six months, and that most patients will benefit from more than one treatment.

I am not pregnant & lactating, no implanted devices, such as a pacemaker, not on Roacutane decimate, no skin infections, not on blood thinners and no vascularity problems and I have disclosed any other medical conditions to my practitioner. I have also disclosed all medications, both prescription and non-prescription, that I am taking to my practitioner.

I consent to the taking of photographs of the area to be treated before each treatment, and also at any follow-up consultations. I give my consent for these photographs to be used for the purposes of education and research, and for information about the procedure on this clinic’s website, on the understanding that my identity will not be disclosed and that I will not be identifiable from the photographs.

PATIENT’S NAME:

PATIENT’S SIGNATURE: DATE:

nurse / therapist’s declaration

I have fully explained to the patient the nature and purpose of the SecretRF treatment and the potential risks associated with the treatment. I have asked the patient if he/she has any questions regarding this treatment or the risks associated with it, and have answered all questions to the best of my ability.

THERAPIST’S NAME: DATE:

THERAPIST’S SIGNATURE: DATE:

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