

**PATIENT CONSENT FORM**

CLIENT INFORMATION DATE:

NAME: D.O.B.

Pre-Treatment Photos Taken: ❑ Yes ❑ No

# ABOUT ULTRAFORMER

Ultraformer treatment promotes non-surgical face lifting and skin tightening to a number of problem areas, including the difficult-to-treat sub-mental zone, i.e., the area under the chin. It can also be used for skin tightening on small problem areas of the body and limbs.

During Ultraformer treatment, low amounts of Micro-Focused Ultrasound energy are delivered into precise skin depths, without damaging the surface of the skin. The MFU energy creates heat, which stimulates tissue remodeling. The result, over time, is a natural skin lifting, tightening and rejuvenation.

# WHAT TO EXPECT DURING AND AFTER YOUR ULTRAFORMER TREATMENT

* You can expect to experience some discomfort as the ultrasound energy is delivered. Your practitioner will agree a plan to optimise your comfort during the procedure.
* Ultraformer treatment is efficient. For example, a treatment for the full face and neck will last approximately 30-45 minutes.

# POSSIBLE SIDE EFFECTS FROM ULTRAFORMER TREATMENT

* Your skin may appear red for a few hours after Ultraformer treatment.
* You may experience slight swelling, tingling or tenderness for a few days after treatment. Rarely, some patients may experience temporary bruising welts or numbness.
* As with any heat-based treatment, there is a slight risk of burning the skin.
* Temporary nerve inflammation will resolve in a few days or weeks.
* If a motor nerve has become inflamed, you might experience some temporary local muscle weakness. There could be some temporary numbness if a sensory nerve has become inflamed.

CONSENT FOR ULTRAFORMER 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 Ultraformer treatment can vary from patient to patient. I am aware that occasionally the collagen that builds in the deep layers of the skin, providing support for the skin structure and helping to counter the effects of gravity, might not have a visible effect on the surface of the skin. I also understand that the results will be seen gradually over a period of 3 to 6 months, and that some patients will benefit from more than one treatment.

The nature of 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 including underlying medical conditions and medications may limit the body’s ability to respond to treatment. My questions regarding this treatment, its alternatives, its complications, risks and expected results have been explained by my practitioner and/or his or her staff including non-responders to treatment. Less than 10% of patients may only observe small noticeable improvement from treatment or no response to treatment, a second treatment may be required to see a visual improvement following review.

I understand that Ultraformer treatment is a non-invasive treatment. It is not designed to produce the same results as an invasive surgical procedure.

PATIENT’S NAME:

PATIENT’S SIGNATURE: DATE:

THERAPIST’S NAME: DATE:

THERAPIST’S SIGNATURE: DATE:

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