

# pelle — spa

## Informed Consent for Venus Viva

Full Name \_\_\_\_\_ Age \_\_\_\_\_ Date \_\_\_\_\_

Venus Viva is a non-surgical radio frequency (RF) nano-fractional device designed to resurface the skin. The device delivers columns of RF energy targeted at the tissue, designed to damage the existing collagen, and stimulating the healing process in the body. The RF also stimulates the body to produce new fibroblasts, the "houses" that create collagen thus increasing the amount of collagen in the tissue. This wound healing response creates a smoother appearance of skin, plumps up fine lines and wrinkles as well as treats acne scars, reduces pigmented lesions and textural irregularities of the skin.

The foregoing list is not intended to be a complete or exhaustive list of all possible problems or complications, which may arise as a result of the Venus Viva treatment. You may or may not experience one or all of the following:

- Discomfort is generally mild to moderate and subsides after a short duration.
- Swelling is common and will resolve in a few days. Swelling may occur as early as immediately after treatment and as late as a few days after treatment.
- Redness, burning, and itching may persist for a few minutes to several days.
- Blisters or burns are rare but may occur as a result of treatment.
- Demarcation is a difference in color, texture, or pigmentation that may occur at the junction between the treated and non-treated skin areas.
- Hyper or Hypo pigmentation may occur as a result of treatment and/or not following post-care instructions. This may or may not be permanent.
- Infection is rare but may occur. Following post-care instructions will reduce this risk. An outbreak of herpes simplex may occur in affected individuals.
- Scarring is very unusual, but can occur.
- Damage to hair follicles and subsequent hair loss is possible. This is more common in men where treatment occurs in hair-bearing areas such as the beard.

My questions have been fully answered and I have read or have had read to me this document, have not taken any medications which may impair my mental ability, do not feel rushed or under pressure and understand its contents. I hereby give my unrestricted informed consent for the procedure.

I understand that cancellations must be made prior to appointments. I understand I must cancel 24 hours prior to my scheduled appointment or I will be charged \$25.00 for every missed appointment.

I give permission for photographs taken of all treated sites to be used for the medical record, and anonymously for teaching, illustration in scientific papers or for marketing and/or literature.

I agree to follow up at recommended intervals to assess my status and to inform Pelle Spa, LLC of any problems that I may be having and allow examination at that time.

I have been given and have read and understand the pre- and post-care instructions

I am aware that it is my responsibility to inform Pelle Spa providers of my current medical conditions. I agree to abide by the above policy statements. I understand that, as with any cosmetic procedure, individual results may vary and that NO refunds will be given. I understand that if I am dissatisfied with the results of the services rendered that I am not entitled to a refund. I understand that as a valued customer of Pelle Spa, that I may contact them to determine if there is a remedy for my dissatisfaction. If I choose not to allow Pelle Spa to remedy the issue, or if i choose to allow Pelle Spa to remedy and I am still dissatisfied, that I am not entitled to a refund. I hereby release the technician performing the procedure, Pelle Laser Spa, LLC and Annette Randlemon, CNP from all liabilities associated with any and all of the above indicated procedures.

**Signature**

----- Date -----

**Signature of Parent/Guardian (if patient is under 18)**

----- Date -----

**Provider Name and Signature**

----- Date -----

\*This consent is good for one year.