

Laser (IPL) Hair Removal Informed Consent

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This Informed Consent gives you general information about laser hair removal (LHR) using intense pulsed light (IPL) cosmetic procedure, explains other treatment options, and identifies the benefits, risks, side effects, and possible complications associated with LHR 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 coarse 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 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 10 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.

Generally you are not a good candidate for LHR procedure on blond or gray hair, 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. Sun exposure 2-4 weeks prior to treatment may reduce effectiveness of the laser.

All medical and cosmetic procedures are associated with certain risks and may result in complications. Possible risks and complications associated with LH 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, hyperpigmentation (darkening of the skin) or hypopigmentation (lightening of the skin), which rarely may take several months to fully resolve. Burns that cause crusting or blistering of the area exposed to laser may occur and may take several days to heal. As with all LHR procedures, some re-growth of hair may occur after treatment sessions are completed.

Post Procedure Instructions. It is important that you limit sun exposure after the LHR procedure and use protective sunscreen lotion. Please call your doctor promptly if complications develop after the procedure. Laser-treated areas should not be exposed to sun or tanning beds for 6 months after treatment. Not adhering to the post treatment skin care instructions may increase the risk of complications.

By signing this informed consent, I understand and agree that this informed consent was explained to me using terms I could understand, and all my questions and concerns have been answered. I understand that LHR is an elective procedure and hereby freely accept all possible risks, complications, and side effects that may result from this procedure. I acknowledge that the LHR procedure will be performed by an employee of Dr M. Kathryn Schaefer, who is properly trained in its usage. I understand that no guarantees have been made to me regarding the outcome of the LHR procedure. This consent form is valid for all future laser hair removal treatments performed, and if I will alert the staff if there are any future changes to my medical history, or if I become pregnant.

Patient Name (Print)

Patient Signature

Date

Doctor Signature

Date

Witness Signature

Date