



CONSENT-DIAMOND GLOW™ FACIAL AND HYDRAFACIAL®

Consent- Diamond Glow Facial and HydraFacial®:

Consent Aesthetics

INFORMED CONSENT INTRODUCTION

Thank you for choosing Advanced Dermatology for your cosmetic skincare treatments. We value the opportunity to consult you on your aesthetic concerns and desires in the effort to promote healthy youthful skin.

Cosmetic treatments (injectable and laser, light or other energy-based therapy) are procedures that have both benefits and risks that need to be considered. A series of documents called Informed Consents have been prepared for you by Advanced Dermatology, LLC to help you make an informed decision. Informed Consent documents are used to communicate information about treatments, along with disclosure of risk and alternative treatment(s). It is important that you read these documents carefully and completely.

Only when you have no questions or concerns do you initial each page, indicating that you have read and fully understand all the items it discusses. When you arrive at the end of the document, please sign the consent for the procedure. If you have any remaining questions or concerns, do not sign the consent until getting these questions answered by Dr. Taub, one of her staff members or Advanced Dermatology's Cosmetic Coordinator at 847-459-6400.

FINANCIAL RESPONSIBILITY: All cosmetic, injectable and laser, light or other energy-based treatments are considered a cosmetic procedure and therefore not covered by insurance. We will not submit these treatments to your insurance and require that you pay at the time of service (unless otherwise discussed with your provider). You will receive Financial Protocols for each treatment that is recommended for you that are valid for 90 days from the date of our recommendation. Should the price change after 90 days you would be responsible for any increase in cost.

WHO WILL PERFORM MY TREATMENTS: We have a variety of highly skilled providers for each of our services. Amy Taub, MD, Anne Marie Leger, MD, Monika Kaniszewska, MD, Emily Oehler, PA-C, Steven Prus, PA-C, Ann Cameron Schieber, PA-C, Jessica Dooley, PA-C, Elana Block MSN, RN, Alla Molchanov, Lic. Cosm., Emily Jamieson, Lic. Esth. (LE), Rachel Walker, LE, Nicole McNellis, LE, Alyssa Conner, LE, and Brittany Hartnett, Lisc. Cosm. all perform cosmetic treatments at Advanced Dermatology. All providers at Advanced Dermatology have been specifically trained by Dr. Taub and are all licensed professionals in the state of Illinois. Dr. Taub reviews and approves every treatment performed at Advanced Dermatology. Dr. Taub is a board-certified dermatologist with over 20 years in practice and is Medical Director and Founder of Advanced Dermatology. We have taken great measures to ensure that your treatment is performed safely and effectively. We attend national meetings frequently to keep updated on the latest, best and safest techniques and remain at the forefront of cosmetic dermatology.

DISCLAIMER: What your Physician, Physician Assistant, Laser Provider, Registered Nurse, Esthetician, Cosmetologist, and/or Cosmetic Coordinator have discussed with you and included again in these documents are the material risks, both common and uncommon, that they feel a reasonable person would want to know, understand, and consider in deciding if this treatment is something they would like to proceed with. Some risks cannot be foreseen. It is important that you read the information contained in each consent document and have all your questions answered before signing the consent. Questions and concerns can be answered in the office through a consultation appointment or by calling 847-459-6400.

Diamond Glow and HydraFacial: INFORMED CONSENT BOOKLET

INTRODUCTION: Diamond Glow™ (formally known as SilkPeel Dermalinfusion®) uses 3 in 1 technology to exfoliate, extract, and infuse special formulated conditioning serums into the skin. As a form of hydradermabrasion, Diamond Glow™ uses serum in conjunction with a diamond tip to gently exfoliate the skin. Each serum addresses specific skin concerns and can be used to rejuvenate, hydrate, cleanse, balance and decongest the skin.

HydraFacial® is a medical grade, non-invasive, and gentle resurfacing procedure that provides deep cleaning, exfoliation, and hydration. HydraFacial® uses a patented Vortex-Fusion® delivery system within its multiple-edged HydroPeel® tips. When applied with the proprietary vacuum technology and serums, it creates a vortex effect that easily dislodges and removes impurities while introducing active serums containing antioxidants, peptides, and hyaluronic acid into the skin. HydraFacial's may also include treatment enhancements, such as lymphatic therapy, LED red and blue light therapy, and anti-aging serum boosters.

Diamond Glow™ and HydraFacial® are both unique because there is simultaneous exfoliation and infusion, which allows deep cleansing and enhanced serum absorption. As each treatment is customizable, your treatment provider will help you determine which treatment will best benefit your specific skin condition(s).

After a Diamond Glow™ or HydraFacial®, you can expect the skin to be light pink from the light resurfacing and suction technology. Additionally, skin usually feels plump, volumized, and hydrated. Results may vary with each individual. Each treatment takes

approximately 30 minutes and you can usually apply makeup, return to work, or activities of daily living immediately, without "down-time." These are designed to produce clinical results with all of the pampering aspects of a traditional spa facial.

ALTERNATIVE TREATMENT: Alternatives include Dermaplaning, Chemical Peels, Energy-based light therapy, and other medical facials.

WHO IS A GOOD CANDIDATE: Diamond Glow™ and HydraFacial® are both non-invasive and safe for all skin types. Individuals who desire improvement in acne, textural irregularities, sun-damage, dull skin, dry or oily skin, enlarged pores and hyper-pigmentation are good candidates for these procedures.

WHO IS NOT A GOOD CANDIDATE: Patients who are at greater risk of adverse reactions include those with a history of herpes simplex (cold sores), those with collagen disease, Isotretinoin (Accutane®) users, very sensitive skin, and who have recently had plastic surgery or radiation treatment. Other medical conditions and atopic skin reactions may require special care instructions from our medical providers.

PRE TREATMENT CARE: Follow the instructions given to you by your aesthetic or medical provider. You might be recommended to discontinue your usage of retinols or prescription topicals in the days immediately before or after your treatment. Failure to do so may cause undesired side effects.

RISKS: It is important that you understand the risks involved with Diamond Glow™ and HydraFacial®.

SKIN WOUND, INFECTION, AND SCARRING: An open or closed skin wound may occur. Any unexpected wound, pain, redness or pus should be reported to your treatment provider promptly and may need additional treatment. Skin wounds may lead to permanent scarring, even if treated. Infection is possible with inflammation, heating or opening of the skin. Infections may lead to permanent scarring, even if treated.

REDNESS, FLAKING, AND SENSITIVITY: Slight redness and skin sensitivity, as well as peeling or flaking can occur for a period of a few days to weeks. Some patients experience slight stinging, burning, or itching during this time. As with many facials, purging of the skin may occur in areas that are more prone to breakouts for each individual.

DISCOMFORT: During a Diamond Glow™ or HydraFacial®, you might feel the rough texture of the diamond-exfoliating tip where certain areas of the skin are more sensitive. After the treatment, your skin may feel warm or tingly.

HYPOPIGMENTATION AND HYPERPIGMENTATION: Changes in the pigmentation (too little or too much) of the skin may occur after treatment. Any change in color of the skin that is not expected should be reported to your treatment provider and may need additional treatment. Pigmentation changes may become permanent, even with additional treatment.

MULTIPLE TREATMENTS AND MAINTENANCE TREATMENTS: The number of treatments and treatment schedule can vary depending on your skin condition and topical regimen. Some individuals require more treatments to obtain the desired facial rejuvenation. Improvements you achieve after your initial recommended series of treatments will not be permanent and maintenance sessions may be required every two to six weeks. For optimal results, follow the recommended treatment schedule given to you by your provider.

PATIENT SATISFACTION: Most of our patients/clients have been happy with their results, although results are variable and we cannot provide you with any guarantee of your results.

POST TREATMENT CARE: Follow the instructions given to you by your provider and on the post-op sheet or Skin Wizard. Failure to do so may result in sub-optimal results or side effects such as listed above.

Do not touch the equipment while in the room. Laser equipment is dangerous and a misfire could cause skin or eye damage that is permanent.

CONSENT FOR PROCEDURE

I have read all pages contained in this document and hereby authorize the following provider(s): Amy Taub, MD, Anne Marie Leger, MD, Monika Kaniszevska, MD, Emily Oehler, PA-C, Steven Prus, PA-C, Ann Cameron Schieber, PA-C, Jessica Dooley, PA-C, Elana Block MSN, RN, Alla Molchanov, Lic. Cosm., Emily Jamieson, Lic. Esth. (LE), Rachel Walker, LE, Nicole McNellis, LE, Alyssa Conner, LE, and Brittany Hartnett, Lisc. Cosm. to perform the following procedure: **Diamond Glow™ or HydraFacial®**

I recognize that during the course of the procedure unforeseen conditions may necessitate different procedures than those described above. I therefore authorize the provider(s) to perform such other procedures that are in the exercise of his or her professional judgment necessary and desirable.

I acknowledge that no guarantee has been given by anyone as to the results that may be obtained.

I consent to photographic use for medical, scientific, and/or educational purposes for the appropriate portions of the face and/or body.

For purposes of advancing medical education, I consent to the admittance of observers to the procedure.

IT HAS BEEN EXPLAINED TO ME IN A WAY THAT I UNDERSTAND:
THE ABOVE PROCEDURE TO BE UNDERTAKEN
THERE MAY BE ALTERNATIVE PROCEDURES OR METHODS OF TREATMENT

THERE ARE RISKS TO THE PROCEDURE PROPOSED
ANY QUESTIONS I MAY HAVE ASKED HAVE BEEN ANSWERED TO MY SATISFACTION

I consent to the procedure and the above listed items. I am satisfied with the explanation.

My Physician discussed my procedure, I understand the risks and benefits of the procedure have read the consent form
I understand and I received a copy. I agree.