



Ultherapy: Patient Consent for Treatment

A. Purpose and Background

- Ultherapy is a nonsurgical treatment that uses ultrasound and the body's own natural healing process to lift, tone, and tighten loose skin on the brow, neck, and under the chin. Ultherapy is intended for men and women with mild to moderate skin laxity.

B. Procedure

- Ultherapy treatment uses ultrasound that consists of treating the area with a smooth applicator placed on top of your skin to heat the tissue below the surface that naturally and gradually creates new collagen. This improves your skin from the inside out without disrupting the surface of your skin. Based on just one treatment, good clinical results have been achieved. However, some people who have a fair amount of laxity may benefit from more than one treatment.

C. Risks/Discomfort

- There can be some discomfort during treatment when the energy is being delivered, but measures will be taken to keep you comfortable. Immediately following Ultherapy treatment, the skin may appear red for a few hours. It is not uncommon to experience slight swelling for a few days following the procedure or tingling/tenderness to the touch for days to weeks following the procedure, but these are mild and temporary in nature. Occasional temporary effects may include bruising or welts, which resolve in hours to days, or numbness in a select area, which resolves in days to weeks. I understand that while adverse reactions to Ultherapy treatments are rare, there are possible risks associated with treatment such as a remote risk of a burn that may or may not lead to scarring, or temporary nerve inflammation, which will resolve in a matter of days to weeks. Temporary local muscle weakness may result after treatment due to inflammation of a motor nerve.

D. Benefits

- Ultherapy results can be achieved after 1 treatment, and with no downtime. Patients are likely to be able to return to normal activities right away, and no special measures are required post treatment. The results vary from patient to patient, and, occasionally, the collagen building on the inside that helps counter the effects of gravity does not have a visible effect on the outside. I understand that results will take place over the course of 3 months (initial notice of change) to a year (clinical endpoint of appearance improvement change) and that some patients may benefit from more than one treatment. I also understand that a non-invasive Ultherapy treatment is not intended to produce the same results as an invasive surgical procedure.

E. Alternatives

- Ultherapy is strictly a voluntary cosmetic procedure; no treatment is necessary or required.

F. Photography

- I understand that clinical photographs are an essential component of my medical record and is required by VanderVeer Center, before, during, and after treatments.

G. Consent Procedure

- I understand Ultherapy uses ultrasound designed to lift, tighten, and tone the skin, and clinical results may vary depending on individual factors. Although good results are expected, I understand that multiple treatments may be required and that no guarantee has been made, either explicit or implied, as to treatment outcome. I understand that to achieve maximum results the protocol prescribed by VanderVeer Center should be adhered to. The number of treatments and results of treatment vary per patient and may be affected by the following individual factors, including but not limited to: medical history and medications, skin type, skin conditions, degree of skin irregularity, amount of past sun damage, skin laxity, patient age, patient compliance with pre and post treatment instructions, and lifestyle choices such as smoking, diet and sun exposure.
- I have provided my complete medical history and medications.
- I understand that contraindications for Ultherapy include pregnancy and nursing, impaired immune system, any active condition in treatment area, open facial wounds or lesions, severe or cystic acne on the face and/or neck, bleeding disorder, current skin cancer, active oral Herpes Simplex (cold sores), autoimmune disease, diabetes, epilepsy, and bell's palsy.
- I understand it is important to follow aftercare instructions to maximize treatment results and minimize the chance of an adverse reaction. I understand VanderVeer Center recommends Volante® or Epionce skincare products (available at VVC) to enhance the results of my Ultherapy treatment.
- I release all VanderVeer Center staff from liability associated with this procedure except for any liability that may be imposed by the laws of the state of Oregon.
- I have read and understand this consent to be treated and all my questions have been addressed and answered to my satisfaction. I consent to the terms of this agreement.
- I agree if I have any concerns regarding my Ultherapy treatment, I will contact VanderVeer Center promptly to make arrangements to be evaluated by a VanderVeer Center medical provider within 24 hours.

I elect to proceed with Ultherapy treatment.

Patient Name: _____ **Date:** _____

Patient Signature: _____