

**Pellevé –NON-ABLATIVE radio frequency
Patient Advisory and Consent**

I hereby authorize and direct Adam J. Scheiner, MD and/or a Designated Practitioner, to perform **Pellevé** nonablative skin contouring and tightening procedure.

Pellevé is a nonsurgical device aimed at producing softer nasolabial folds, less visible jowls, sharper jawline and submental tissue. It will not change superficial rhytids or sun-damaged skin.

I understand that there can be no warranty, either expressed or implied, as to final results. There is a chance that the results will not be as dramatic as you or your physician expected. Remember, we are modifying not erasing.

While a good result is expected, the following list of complications which may occur. This is not an exhaustive list.

Complications with **Pellevé** may include:

- (1) **PAIN & DISCOMFORT** - The level of pain and discomfort varies with any individual's tolerance and both may be experienced during treatment when no anesthetic is used. Therefore, I consent to the administration of anesthesia as needed and appropriate.
- (2) **REDDENING** – Most patients have some redness after treatment. It will usually go away in 1 to 2 hours after treatment. Very rarely, the redness may persist longer.
- (3) **SWELLING** - Immediately following Pellevé there may be swelling or bruising noted. This is temporary and usually subsides in three to seven days. Bruising is extremely uncommon.
- (4) **SKIN COLOR CHANGE** - The treated area may heal either lighter or darker in color than the surrounding skin. Any changes in pigmentation are usually temporary but occasionally may be permanent. Wearing **SUNBLOCK** for 2-3 weeks following the procedure will help prevent this very rare complication.
- (5) **SKIN DIMPLING** – The treatment may cause dimpling of the skin in certain areas. This will usually resolve over time, but there is a slight chance (1/1000) that this will be permanent and will require fillers.
- (6) **SKIN WOUND** – It is very, very rare for a blister or skin wound to occur. If it does occur, it may take 5-10 days to heal. The chance of a scar is even less.
- (7) **SKIN INFECTION** – Treatment may activate latent Herpes Simplex Viruses (Cold Sores). If you have a history of cold sores, we recommend pretreatment with anti-virals.
- (8) **I UNDERSTAND THAT T MORE THAN ONE TREATMENT IS REQUIRED ALSO, BENEFITS VARY FROM PERSON TO PERSON.**

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The details of the operation or procedure, including anesthesia and its possible complications, have been explained to me in terms that I understand. Alternative methods of treatment have been explained to me, as have the advantages and disadvantages of each.

Pictures may be taken of the treatment site for record purposes. I understand that these photographs/videos will be the property of the attending physician. I do _____ do not _____ agree to allow these pictures to be used for publication or teaching purposes. If I agree, I understand that my name and identity will be kept confidential and protected.

The essential information necessary to make an informed decision has been given to me. All questions have been answered to my satisfaction.

Patient _____ **Date** _____

Witness: _____ **Date** _____

I hereby certify that I have discussed all of the above with the patient. I have offered to answer any questions regarding the procedure and believe the patient fully understands what I have explained and answered.

Physician and/or Designated Practitioner: _____

Date _____

Does patient have a history of cold sores or fever blisters? Yes or No