

The Naderi Center Skin Care Consent Form

This consent applies to all Aesthetic Treatments received at The Naderi Center.

(Chemical peels, Vi Peels, Microdermabrasion, Microneedling, PRP)

1. Prior to treatment, I have informed **Sandhya Naravulu, LME** of any conditions that may have a bearing on this procedure, such as: planned or current pregnancy, breast feeding, other aesthetic procedures, peels or injectables, allergies, cold sores, use of prescription &/or over-the-counter medications & topical such as *Retin-A, Accutane, Differin, Tazorac, Avage, retinol, or benzoyl peroxide, etc.*

***Recent or current Accutane use prevents medical skin care treatments for up to one year after discontinuation.**

2. I understand that there may be some degree of discomfort; such as stinging, heat or tightness.
3. I understand that **I may or may not peel** following the treatment; that each case varies. The amount of peeling does not correlate with the degree of improvement.
4. I understand that in order to achieve maximum results, I may need multiple treatments.
5. I understand that this is a cosmetic treatment and that no medical claims are expressed or implied.
6. I agree to refrain from direct sun exposure, tanning, or tanning beds for at least 14 days post-treatment. I agree to the daily use of a recommended sunscreen protection with a minimum of SPF 15.
7. Post-procedure, I agree to care for the skin using recommended post-procedure products. I agree not to pick, peel or scrub, peeling or flaking skin.
8. I understand that although complications are rare, sometimes they may occur. In the event of a complication or allergic reaction, I will immediately contact The Naderi Center staff. Complications or side effects may include but are not limited to hyperpigmentation, hypopigmentation, allergic reactions, infection, texture changes, acne breakout, cold sore or shingles outbreak, pain, numbness, bleeding, need for further procedures, etc.
9. I have been informed of the alternatives to these procedures and my questions have been answered.
10. I agree to discuss my concerns with The Naderi Center and **not** discuss my experience on the internet.

I hereby agree to all of the above and agree to have this treatment performed on me by The Naderi Center staff. I agree to inform my master aesthetician of any future changes to the above if they should arise.

Print Name of Patient: _____

Signature (Patient): _____

Signature (Guardian **if patient is a minor**): _____

DATE: 5/24/2017