MATRIX FRACTIONAL CO2 LASER CLIENT INFORMED CONSENT

HOW DOES THE MATRIX FRACTIONAL CO2 LASER WORK?

The Matrix Fractional CO2 laser combines the effectiveness of traditional carbon dioxide laser with a new application technique, delivering powerful results without the traditionally harsh side effects. The natural aging process, combined with exposure to sun and pollution, destroys collagen, the main protein of connective tissue that keeps skin plump and line-free. The Matrix Fractional CO2 laser uses beamlets of energy light to bore tiny holes in the skin, which works to put the body's natural collagen production on fast-forward and the skin then tightens by "connecting the dots," where your collagen contracts between the tiny laser holes. The benefit of the Matrix Fractional CO2 Laser is that it is done in a way that prevents damage to the top layer of skin, offering maximum results with minimal recovery time. Treatments with the Matrix Fractional CO2 Laser will enhance the skins strength and elasticity, giving you a smoother, tighter appearance, and pigmentation problems will begin to diminish.

Laser resurfacing requires anesthesia. Depending on the laser treatment chosen and the area treated, local anesthesia may be adequate. For larger areas, sedation or general anesthesia may be recommended. Recovery will depend on the technique and depth of treatment you require.

WHAT RESULTS ARE GUARANTEED WITH MATRIX FRACTIONAL CO2 LASER TREATMENT?

No guarantee, warranty or assurance is made as to the results that may be obtained through use of Matrix Fractional CO2 Laser Treatment technology.

Like the other resurfacing methods, the laser is effective in treating wrinkles, blotchiness or age spots, and scars from acne or other causes. It can be used on the entire face or specific areas. Certain other characteristics of your skin, such as its thickness and texture, may influence whether you are a good candidate for laser resurfacing. Some patients may benefit from the laser's mild "tightening" effect on the skin, particularly in the lower eyelid area where the skin often becomes somewhat loose as a result of aging.

DOES MATRIX FRACTIONAL CO2 LASER TREATMENT HAVE ANY ADVERSE SIDE EFFECTS?

Even though laser technology is refined, with the deeper penetration of the skin, Matrix Fractional CO2 Laser treatment <u>may</u> cause certain adverse side effects. Since every individual is different, it is not possible to list or predict ever potential side effect one may encounter, however, Fractional CO2 Laser treatment has been known to cause the following adverse side effects in patients:

| Mild redness, blistering, blanching, scabbing or swelling following treatment; |
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| Infection or abnormal healing are infrequent but may occur with any of the treatments. |

| If you are prone to skin disorders, including allergic reactions or herpes (cold sores), skin resurfacing can cause eruptions of these conditions. |
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| Tiny whiteheads may develop on the skin following some procedures. These usually disappear with use of a mildly abrasive cleanser, but occasionally may require removal by your doctor or a staff member in your doctor's office. |
| Some individuals have a tendency to form raised or thickened scars, and this may be unpredictable. Medications are available to treat such complications, but in rare cases some degree of scarring may be permanent. |
| While the bleaching effect of a phenol peel is to be expected, laser skin resurfacing sometimes may produce unanticipated color changes or skin blotchiness. Hypopigmentation, excessive lightening of the skin, may occur. This can take up to six months to heal, but rarely is it permanent; |
| Rare possibility of scarring and permanent discoloration. |
| I ACKNOWLEDGE THAT EACH OF THE ABOVE POTENTIAL ADVERSE SIDE EFFECTS ASSOCIATED WITH MATRIX FRACTIONAL CO2 LASER HAVE BEEN EXPLAINED TO ME. MY INITIALS NEXT TO EACH POTENTIAL ADVERSE SIDE EFFECT SIGNIFY MY UNDERSTANDING OF THE POSSIBLE ADVERSE SIDE EFFECTS OF MATRIX |
| EDACTIONAL COLLASED TREATMENT |

PRE-PROCEDURE COMPLIANCE AND COMPLETION OF TREATMENT

Matrix Fractional CO2 Laser treatment pre-procedure guidelines include the following:

- Prior to treatment, purchase a tube or jar of Aquaphor healing ointment, 1 pint of White Vinegar, and obtain and fill a prescription for anti-viral medication and take the first pill three days before your scheduled procedure.
 - ➤ Valtrex 500 mg twice a day for 5 days, or
 - > Zovirax 400 mg twice a day for 5 days.
- Arrive at least 45 minutes before your scheduled treatment. You will need to apply a topical anesthetic cream to the treatment area for 30 minutes.
- Following treatment, you can apply ice or cold compresses to the treated area for no more than 20 minutes continuously, followed by 10 minutes off. Repeat this cycle as needed.
- If you are able to take Motrin, Ibuprofen, Aleve, or Benadryl, you may take them as needed. Follow the manufacturer's directions.

AFTERCARE COMPLIANCE AND COMPLETION OF TREATMENT

Matrix Fractional CO2 Laser treatment aftercare guidelines include the following:

- You will have Aquaphor applied to the treatment area after your procedure. Reapply 2 hours after treatment. You should continue to apply Aquaphor to the treated area approximately 4 times a day or as needed to keep treated areas moist at all times. Continue use until the skin stops peeling or exfoliating.
- Continue and finish your Valtrex/Zovirax prescription twice/day for 5 days.
- Avoid sun exposure for 7 10 days. You should use a sunscreen containing zinc oxide beginning the third day after your treatment.
- Following treatment, you can apply ice or cold compresses to the treated area for no more than 20 minutes continuously, followed by 10 minutes off. Repeat this cycle as needed. If you are able to take Motrin, Ibuprofen, Aleve, or Benadryl, you may take them as needed. Follow the manufacturer's directions.
- You may also use vinegar and water soaks at a ratio of 1 tablespoon of white vinegar to 1 quart of water. Soak gauze or very soft wascloth in water/vinegar mixture and apply to treated areas. This will help darkened areas to exfoliate. Do not cause bleeding during this process. If you begin to bleed, you are rubbing too hard. Apply Aquaphor and try again later.
- Avoid any irritating medications or chemicals, particularly on the face. Examples of these are: Retin-A, Benzoyl peroxide, glycolic acids, or astringents. 6 weeks from your treatment date you may begin using these glycolic agents.
- Do not undergo any waxing, microdermabrasion, or light peel procedures for three months following treatment.
- You may shower using tepid water. Keep the area clean by washing gently with mild soap, but DO NOT SCRUB the area for 72 hours. Continue to use tepid water for at least 72 hours when washing. DO NOT CAUSE BLEEDING. IF BLEEDING OCCURS, STOP CLEANSING; Apply Aquaphor and try again tomorrow.
- DO NOT APPLY MAKE UP TO THE TREATED AREA, or put any other creams or lotions on the skin, unless given to you by Dr. Eric Tabor or Northshore Dermatology staff, until you are re-evaluated in the office. This includes sunscreen, moisturizers and perfume.
- Do not shave the treated area for at 10 days after the treatment or if the area in inflamed or irritated.
- After the first week you may resume most activity other than SUN EXPOSURE. You may apply make up and sunscreens as needed. 6 weeks from treatment you can begin to apply Retin-A and other Glycolic agents as before.
- No exercise or physical activity for one week following treatment.
- You will have a follow up appointment with the office in 5-7 days.

Continued on the next page.

| MY INITIALS BELOW SIGNIFY MY UNDERSTANDING THAT IN ORDER TO OBTAIN THE BEST RESULTS FROM MATRIX FRACTIONAL CO2 LASER TREATMENT, I MUST COMPLY WITH THE AFTERCARE GUIDELINES: |
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| I will assure my compliance with the above pre-procedure and aftercare guidelines as they are crucial for healing, prevention of scarring and prevention of hypo-pigmentation |
| STOP HERE; BEFORE SIGNING BELOW, ASK ALL QUESTIONS YOU MAY HAVE REGARDING THE MATRIX FRACTIONAL CO2 LASER PROCEDURE, AFTERCARE AND ANTICIPATED RESULTS. |
| CONSENT |
| I, |
| I,, consent to the taking of photographs and authorize their anonymous use for the purposes of medical audit, education and promotion. |
| day of |
| PATIENTS SIGNATURE WITNESS |

PRINT WITNESS'S NAME

PRINT PATIENT'S NAME