

## CONSENT AND RELEASE FORM CHEMICAL PEEL

A chemical peel is not a cure for all skin conditions. However, for certain skin conditions, chemical peels can provide marked improvement in the appearance of one's skin. The superficial peels can improve the skin's texture; help with sun damage, and pigmentary changes. Deeper chemical peels may help with fine lines and superficial wrinkles. Therefore, it is very important that you have a thorough understanding of what a chemical peel can and cannot do for your particular skin condition. In addition, it is imperative that you acknowledge the potential risks associated with the administration of chemical peels.

The foregoing list is not intended to be a complete or exhaustive list of all possible problems or complications, which may arise as a result of the chemical peel. Should one or more of the foregoing complications arise, please notify the physician's office immediately.

Discomfort is generally minimal and subsides after a short duration.

**Swelling** is unusual. If it occurs, it is minimal. Swelling subsides in a few hours to a few days.

**Reddening** or a red discoloration may persist anywhere from a few minutes to several days.

**Demarcation** is a difference in color, texture, or pigmentation that may occur at the junction between the treated and non-treated skin areas. This is unusual with these procedures.

**Existing blemishes** or moles, blood vessels (telangiectasias), freckles and sunspots may become more obvious and darker since layers of dead skin have been removed.

**Eye injury** caused by chemicals getting into the eye, scarring and vision disturbances may occur.

**Scarring** is very unusual, but may occur.

**Pigmentation** is rare and usually temporary. Possible permanent changes in the color of the skin could occur.

**Milia** may occur, but will usually disappear quickly.

**Infection** is extremely unlikely, but may happen. An outbreak of herpes may occur in effected individuals (if you are prone to cold sores, ask your physician for medication).

Before subjecting yourself to any chemical peel, read carefully the following statements. After you have read each statement, please initial each respective statement in the space that has been provided.

\_\_\_\_\_

The chemical peel has been explained to me in detail by the physician and/or members of the physician's staff and that for optimum results, the recommended home care instructions or program is needed to enhance the results of the chemical peel.

\_\_\_\_\_

I understand that a chemical peel is a skin rejuvenation treatment. I understand I may need several administrations of the chemical peel in order to achieve optimal results.

\_\_\_\_\_

I understand that chemical peels need not be administered by a physician. It is also my understanding that, in addition to receiving formal training, any non-physician medical assistant (i.e., RN, CMA, Surgical Technician or Aesthetician) who administers chemical peels has had their skills reviewed and endorsed by the supervising or attending physician.

\_\_\_\_\_

I understand that it is extremely important to strictly follow all home care instructions when striving for optimal results.

\_\_\_\_\_

I understand that if I experience any adverse side effects that appear to be attributed to my use of home care products, I will discontinue use of the products and notify the clinic

I certify that I have read and understand **ALL** of the above.

**Patient Signature:** Date: \_\_\_\_\_/\_\_\_\_\_/20\_\_\_\_\_