



Consent for HYDRAFACIAL

Thank you for choosing Alazzo Med Spa, LLC. This form is exclusively related to Hydradermabrasion for skin rejuvenation. Please read this form thoroughly and ask any questions that you may have prior to treatment. This consent will serve for all Hydradermabrasion treatments performed and does not need to be renewed. Sign only after you feel comfortable enough to get started.

Procedure: I consent to have the HydraFacial machine used for hydradermabrasion. My procedure will be performed by a state licenses practitioner under the supervision of a nurse practitioner. HydraFacial is the only hydradermabrasion procedure that combines cleansing, exfoliation, extraction, hydration and antioxidant protection simultaneously, resulting in clearer, more beautiful skin with little-to-no downtime. The treatment is smoothing, moisturizing, non-invasive and generally non-irritating. As with most procedures, visible results from HydraFacial will vary person to person. Multiple treatments are recommended to obtain maximus results.

What to expect:

- *Your skin may experience temporary irritation, tightness, or redness. These are all normal reactions that typically resolve within 72 hours depending on skin sensitivity.
- *You may experience tingling and stinging in the treatment area. These sensations generally subside within a few hours.
- *Client experiences may vary. Some clients may experience a delayed onset of these symptoms.
- *The skin is more susceptible to sunburn / sun damage. Avoid excessive sun exposure and use a minimum of SPF 30 or greater.
- *You will likely see results immediately after treatment and your skin may feel smooth and hydrated for one to four weeks with appropriate home care to maintain treatments results.

Restrictions: I understand that most everyone will benefit from some rejuvenation but complete rejuvenation may not occur. Severely pigmented areas, deep pores and deep wrinkles may not resolve with Hydradermabrasion but may benefit from other therapies. Areas of vascular concerns may worsen with Hydradermabrasion. Some medical conditions may need a note from your doctor or preclude you from having Hydradermabrasion. Your medical history will be reviewed at the time of treatment and discussed with you. Results cannot be guaranteed.

Cautions: Some pigmented lesions are pre-cancerous or cancerous. If you are concerned that a lesion may be cancerous please consult a dermatologist prior to treatment. Alazzo Med Spa does not assume any responsibility or liability regarding a targeted tissue that turns out to be cancerous.

Do you have any of the following?

- Active acne or infection.....Y / N
- Open lesion or cold sore.....Y / N
- An active infection in the treatment area.....Y / N
- Active sunburn.....Y / N
- Skin conditions such as eczema, dermatitis, or rash.....Y / N
- An autoimmune disease such as HIV or hepatitis.....Y / N
- Anticoagulants Therapy.....Y / N

If you have any questions after reading these guidelines, please do not hesitate to call us for clarification.



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- Melanoma or lesions suspected of malignancy.....Y / N
- Pregnancy or lactation.....Y / N
- Neurological disorders such as epilepsy (LED Lights)....Y / N
- Infection in the urinary system i.e. kidneys, bladder and urethra (Lymphatic Drainage).....Y / N
- Crohn's Disease (Lymphatic Drainage).....Y / N
- Hyperthyroidism (Lymphatic Drainage).....Y / N
- Deep Venous Thrombosis (Lymphatic Drainage).....Y / N
- Lymphedema (Lymphatic Drainage).....Y / N
- Recent use of Accutane, Topical Medications, or Antibiotics..Y / N
- Recent aesthetic fillers, injectables, or laser treatments.....Y / N

I acknowledge the following:

I will avoid the use of aggressive exfoliation, waxing and products containing glycolic acids or retinols that are not part of the recommended take-home regimen in the treated areas for a minimum of two weeks pre and post treatment.

Photos may be taken before, during and after the Hydrafacial treatment. Photos will only be used with my written approval for education, promotion or advertising purposes,

By signing below, i acknowledge that i am at least 18 years of age, i have read the above information and given my consent to be treated with the Hydrafacial system. This consent form is valid for all future Hydrafacial treatments and i will alert the staff if there are any future changes to my medical history.

If you have any questions after reading these guidelines, please do not hesitate to call us for clarification.