

PRE-TREATMENT CARE

PRE-CARE INSTRUCTIONS: TO PREPARE FOR THE BLOOD DRAW ASSOCIATED WITH PRP THERAPY

- PRP Therapy is very safe because cells from your own blood are used, which means there are no preservatives and no chance of the body rejecting the cells.
- The primary risks and discomforts are related to the blood draw where there is a slight pinch to insert the needle for collection and there is a potential for bruising at the site.
- For optimal results and to decrease the chance of bruising at the draw site, please avoid all blood thinning medications and herbal supplements for 1 week prior to your appointment. It is recommended to discontinue the use of Aspirin, Motrin, Ginkgo Biloba, Garlic, Flax Oil, Cod Liver Oil, Vitamin A, Vitamin E or any other essential fatty acids at least 3 days to 1 week before and after treatment to minimise bruising or bleeding. Please consult with your GP prior to discontinuing any medications. Please also notify your GP if you are taking Coumadin, Plavix, or any other blood thinners for a medical condition.

During the course of your treatments, notify our staff of any changes to your medical history, health status, or personal activities that may be relevant to your treatment.

PRP VAMPIRE FACIAL CONSENT FORM

I confirm that I consent to receiving treatment using the cosmetic products that my practitioner has recommended to me.

Platelet Rich Plasma, also known as "PRP" is an injection or mesotherapy treatment whereby a person's own blood is used. A fraction of blood (20cc) is drawn up from the individual patient into a syringe. This is a relatively small amount compared to blood donation which can remove 500cc. The blood is spun in a special centrifuge to separate its components (Red Blood Cells, Platelet Rich Plasma, Platelet Poor Plasma and Buffy Coat). Platelets are very small cells in your blood that are involved in the clotting and healing process. When PRP is injected into the damaged area it causes a mild inflammation that triggers the healing cascade. As the platelets organise in the treatment area they release a number of enzymes to promote healing and tissue responses including attracting stem cells and growth factors to repair the damaged area. As a result new collagen begins to develop. As the collagen matures it begins to shrink causing the tightening and strengthening of the damaged area. When treating injured or sun and time damaged tissue, they can induce a remodelling of the tissue to a healthier and younger state. The full procedure takes approximately 45 minutes to an hour. Generally 3-6 treatments are advised, however, more may be necessary for some individuals. Touch up treatments may be done 3-6 months after the initial group of treatments to boost and maintain the results.

PRP'S SAFETY has been established for over 20 years for its wound healing properties and its proven effectiveness has extended across multiple medical specialties. Areas typically treated for aesthetic purposes and skin rejuvenation include: Crinkling skin around the eyes, cheeks and mid face, neck, jaw-line, chest and décolletage and to stimulate hair growth on scalp. Almost all skin tones show that PRP is safe and effective because your own enriched plasma is used.

BENEFITS OF PRP: Along with the benefit of using your own tissue therefore virtually eliminating allergies, there is the added intrigue of mobilising your own stem cells for your benefit. PRP has been shown to have overall rejuvenating effects on the skin including: improving skin texture, thickness, fine lines and wrinkles, increasing volume via the increased production of collagen and Elastin, and by diminishing and improving the appearance of scars. The most dramatic results to date have been the crepey skin problems in areas such as under the eyes, neck, and décolletage. It is not designed to replace cosmetic surgery as there are some cases where those procedures would be more appropriate. Other benefits include: minimal down time, safe with minimal risk, short recovery time,

natural looking results; no general anaesthesia is required.

CONTRAINDICATIONS: PRP used for aesthetic procedures is safe for most individuals between the ages of 18-80. There are very few contraindications, however, patients with the following conditions are not candidates:

- 1) Acute and Chronic Infections
- 2) Skin diseases (i.e. SLE, porphyria, allergies)
- 3) Cancer
- 4) Chemotherapy treatments
- 5) Severe metabolic and systemic disorders
- 6) Abnormal platelet function (blood disorders, i.e. Haemodynamic Instability, Hypofibrinogenemia, Critical Thrombocytopenia)
- 7) Chronic Liver Pathology
- 8) Anti-coagulation therapy
- 9) Underlying Sepsis
- 10) Systemic use of corticosteroids within two weeks of the procedure.

RISKS & COMPLICATIONS: Some of the Potential Side Effects of Platelet Rich Plasma include:

- 1) Pain at the injection site
- 2) Bleeding, Bruising and/or Infection as with any type of injection
- 3) Short lasting pinkness/redness (flushing) of the skin
- 4) Allergic reaction to the solution
- 5) Injury to a nerve and/or muscle as with any type of injection
- 6) Itching at the injection site(s)
- 7) Nausea /vomiting; (The following are possible with any simple injection and not specific to PRP Therapy)
- 8) Dizziness or fainting
- 9) Temporary blood sugar increase
- 10) Swelling
- 11) Minimal effect from the treatment.

ALTERNATIVES to PRP: Alternatives to PRP are: 1) Do Nothing; 2) Surgical intervention may be a possibility; 3) Injections with neurotoxins; 4) Injections of dermal filling agents; 5) Laser & light based treatments like Pulsed Light; 6) chemical peels.

RESULTS: Results are generally visible at 4 weeks and continue to improve gradually over ensuing months (3-6) with improvement in texture and tone. Advanced wrinkling cannot be reversed and only a minimal improvement is predictable in persons with drug, alcohol, and tobacco usage. Severe scarring may not respond. Current data shows results may last 18-24 months. Of course all individuals are different so there will be variations from one person to the next.

CONSENT: My consent and authorisation for this elective procedure is strictly voluntary. By signing this informed consent form, I hereby grant authority to the practitioner to perform Platelet Rich Plasma "aka" PRP injections to area(s) discussed during our consultation, for the purpose of aesthetic enhancement and skin rejuvenation.

I have read this informed consent and certify I understand its contents in full. All of my questions have been answered to my satisfaction and I consent to the terms of this agreement. I agree to adhere to all safety precautions and instructions after the treatment. I have been instructed in and understand post treatment instructions and have been given a written copy of them. I understand that medicine is not an exact science and acknowledge that no guarantee has been given or implied by anyone as to the results that may be obtained by this treatment. I also understand this procedure is "elective" and not covered by insurance and that payment is my responsibility. Any expenses which may be incurred for medical care I elect to receive outside of this clinic, such as, but not limited to dissatisfaction of my treatment outcome will be my sole financial responsibility. Payment in full for all treatments is required at the time of service and is non-refundable. I understand and agree that all services rendered to me are charged directly to me and that I am personally responsible for payment. I further agree in the event of non-payment, to bear the cost of collection, and/or Court cost and reasonable legal fees, should this be required. PHOTOGRAPHS: I authorise the taking of clinical photographs and their use for scientific and educational publications and presentations. I understand my identity will be protected. I understand photos are mandatory for insurance purposes.

Pre and Post treatment care

I confirm I have read and understood the pre treatment care recommendations provided and I am happy to proceed with the treatment. I confirm I have read and understood the post treatment care provided and will follow these instructions.

By accepting, I acknowledge that I have read the foregoing informed consent and agree to the treatment with its associated risks. I hereby give consent to perform this and all subsequent treatments with the above understood. I hereby release the doctor, the person injecting the dermal filler and the facility from liability associated with this procedure.

aesthetics



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