

Laser Lightening/Pigmentation Consent Form

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|--------------|---|------------------|---------------|---|--------------------|
| Patient Name | : | Reshma S Fathima | Emirates ID | : | 111-1111-1111111-1 |
| File No | : | 16 | DOB | : | 1999-03-17 |
| Nationality | : | Panamanian | | | |
| Gender | : | Female | Doctor's Name | : | Doctor Vision |
| Date | : | 2023-12-20 | | | |


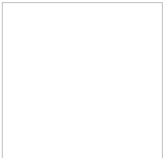
Skin Conditions Treated:

- Freckles
- Sun Spots
- Pigmentation and Hyperpigmentation
- Melasma
- Age spots (solar lentigines)
- Sebborheic Keratosis
- Nevus of Ota

I have been informed and well explained about the following details of the treatment:

- A laser lightening/pigmentation treatment is performed with an extraordinary nanosecond laser (Q-switched/Quasi long).
- It is not a painful treatment but anesthetizing the area can be done as requested with the use of topical cosmetic cream.
- Each sitting requires merely 10 to 20 minutes.
- After the treatment, you might observe swelling and a bit of dryness. Do not be concerned because in a week; you will begin to see the changes. You shall need to wait for some weeks for complete results.
- Number of sessions will depend on each case. You may need to have it done for more sessions as per the advice of the Doctor/Therapist.

I am consenting the Therapist Doctor Vision to do my LASER LIGHTENING TREATMENT at VISION MEDICAL & DENTAL CENTER (Abu Dhabi). I am fully aware that the main priority of VISION MEDICAL & DENTAL CENTER (Abu Dhabi) is to ensure my safety, make me feel at ease and maintain my privacy and comfort at all times.

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|---|---|
| Sign here, only if all of your questions have been answered to your satisfaction | |
| PATIENT | DOCTOR |
|  |  |
| Patient Name Reshma S Fathima | Doctor - Laser (DHA101) 2023-12-20 |