

PRP (Platelet Rich Plasma) Informed Consent

Purpose and Background: Platelet Rich Plasma Therapy (PRP) has been used for a number of years in orthopedics and sports medicine, to treat muscle and ligament injuries, pain problems, and skin lesions. Due to the success of PRP in medicine, the procedure was then developed into an anti-aging treatment designed to induce new collagen production, reduce wrinkles, and diminish the visible signs of aging by growing new healthy tissue. PRP is considered to be a safe, natural treatment because, rather than using a synthetic substance, it uses cells and growth factors from your own blood to slow and even reverse the aging process for a more youthful and radiant appearance. Collagen is what gives skin a firm, youthful appearance. As we age, less collagen is produced, causing sagging, wrinkles and soft tissue depressions in the skin. Once injected under the skin or applied topically onto the surface of the skin, PRP therapy counteracts aging by stimulating new collagen production in the exact areas of concern where we want the skin to repair and rejuvenate itself. PRP can be used on the face, neck, décolletage, and hands. The number of treatments needed varies per patient. We recommend 1-3 treatments administered at four-week intervals until the desired result is achieved, followed by 1-2 maintenance treatments per year. While some result is visible immediately at the time of treatment, there is usually a return to baseline in 3-5 days as the PRP is absorbed back into the body prior to the complete action of the cellular regenerative process. Most patients see improvement for up to 12 weeks with results lasting up to 2 years. If this procedure involves the use of other materials like HA Filler or Micro Needling, a separate and additional consent form may be used.

Procedure: Approximately 10 cc of blood are drawn from the patient in the same way blood samples are taken for routine lab tests. The tubes of blood are put into a centrifuge, where the blood is spun in order to separate the red blood cells from the PRP. Once injected under the skin or applied topically onto the skin, the PRP releases growth factors and activates multi-potent stem cells to generate new, younger tissue. This new tissue synthesis includes new collagen for firmness and elasticity, new fatty tissue for plumpness and smoothness, and new blood vessels for a healthy rosy glow.

Discomfort & Risks: The injection and/or topical application of PRP is very safe because cells from the patient's 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. Smokers have less positive response to this treatment than non-smokers, since the toxins in cigarette smoke block the response of the stem cells. I understand that additional treatment side effects are generally temporary, related to PRP injections, and can include but are not limited to:

- *Needle Marks*- Visible needle marks occur normally and resolve in a few days.
- *Swelling* – An ice pack may be placed over the area until swelling subsides.
- *Itching* - Temporary and generally intermittent.
- *Bruising* – Bruising is always a possibility with any skin injection and may develop immediately or up to 24 hours following treatment. To reduce the risk of bruising, avoid aspirin, anti-inflammatory medications, and herbal supplements, including vitamins, for one week prior to and after your treatment. If you experience bruising, it will generally heal within 7-14 days and may be covered with makeup if desired.
- *Pain/Tenderness* – May last up to 2 weeks. Tylenol may be taken to reduce discomfort if desired.
- *Lumps/Bumps* – Will generally subside/diffuse within approximately 2 weeks after treatment.
- *Migration of PRP* – PRP may migrate from its original injection site and produce fullness in adjacent areas.
- *Asymmetry* - The human face is normally asymmetrical in its appearance and anatomy. There can be variation from one side of the face to the other in terms of the response to PRP and it may not be possible to achieve or maintain exact symmetry with PRP injections.
- *Infection* – Infections are extremely rare but may require treatment including antibiotics if necessary.
- *Skin Necrosis*- It is very unusual to experience death of skin and deeper soft tissues after injections.
- *Unsatisfactory Result* – Some patients may have an unsatisfactory result that includes: temporary visible irregularities, prolonged bruising, swelling, tenderness, and/or disappointment in the result.

Alternatives: PRP Therapy is strictly a voluntary cosmetic procedure; no treatment is necessary or required. Alternative treatments may include, but are not limited to: facial creams, Botox, dermal fillers, chemical peels, laser resurfacing, cosmetic surgery, or no treatment.

Clinical Photography: I understand that clinical photographs may be taken at each appointment and are considered a confidential and essential component of my medical record. The photographs will not be used for or disclosed for any media purposes without my signed permission on a separate media consent form.

Results Not Guaranteed: I understand that although good results are expected, there cannot be any guarantee or warranty, expressed or implied, that I will be completely satisfied by the outcome or that I will not require additional treatment and/or ongoing treatment to achieve the result I seek. I understand that PRP treatments will not cure any medical conditions nor provide immunity against re-occurrence of such conditions. The effects of PRP are temporary and vary per patient with some patients experiencing shorter or longer effects. The number of treatments needed vary per patient and may be affected by the following factors including but not limited to: degree of skin irregularity; severity of volume loss; patient age; personal medical profile; basic metabolic rate; previous cosmetic procedures; history of trauma to the treated area; individual lifestyle choices; and individual patient preference. I understand and acknowledge that payment for the above procedure is non-refundable and that if more correction is desired, I will be responsible for purchasing additional PRP procedures to achieve the outcome I desire.

Complete Medical History: I have truthfully and accurately disclosed all personal medical history information including but not limited to: all previous aesthetic procedures; invasive medical procedures; my use of all medications, drugs, herbs, vitamins, or other supplements of any kind; and all known allergic reactions. I understand that failure to do so may negatively affect my treatment outcome. I agree to keep Infinite Skin Aesthetic Medical Spa updated as to any changes in my medical profile and understand that there shall be no liability on Infinite Skin Aesthetic Medical Spa's part should I fail to do so.

Pre & Post Care Compliance: I acknowledge that New Life New Image Medical Spa has provided me with a copy of the "Pre and Post Care" instructions for this procedure. I understand it is important to follow these instructions to maximize treatment results and to minimize the chance of an adverse reaction. I accept all responsibilities of adverse reactions due to noncompliance with pre- and post-treatment care guidelines.

Questions & Concerns: I agree if I have any questions, prospective adverse reactions, or concerns regarding my treatment, I will contact Infinite Skin Aesthetic Medical Spa within 2 weeks from the time of treatment to make arrangements to be evaluated. I understand that if I do not contact Infinite Skin Aesthetic Medical Spa within 2 weeks from the time of treatment then Infinite Skin Aesthetic Medical Spa may not be able to accurately determine whether my question or concern is directly related to the procedure. If I choose to consult my own physician or seek any other medical attention it is at my own expense.

Pregnancy (female patients only): Even though there is no evidence of complications, we will not perform this treatment if you are pregnant. I certify that I am not currently pregnant. I agree that if I become pregnant at any time during the course of my treatment(s), I will inform Infinite Skin Aesthetic Medical Spa.

Certification of Consent to Proceed with Treatment: I understand that this treatment may involve risks of complication or injury from both known and unknown causes, and I freely assume those risks. I understand that if I am not willing to accept all risks associated with this procedure then I should not have PRP treatment. I certify that all my questions have been addressed and answered to my satisfaction, that I have read this entire consent, and that I understand and agree to the information herein. I understand that to receive PRP treatment at Infinite Skin Aesthetic Medical Spa, I must comply with all stipulations outlined in this consent form; if I do not agree then I will not be able to proceed with treatment. I freely and voluntarily accept all risks associated with PRP and elect to proceed with treatment today as well as future and ongoing treatments.

Patient Signature

Date

Printed Name