

## **Morpheus8 Informed Consent**

## I DULY AUTHORIZE BEAUTOX BAR LLC TO PERFORM Morpheus8 TREATMENT(s)

I understand that the device being used for Subdermal and dermal remodeling of facial and body areas through fractional coagulation and sub-necrotic bulk heating of which I am consenting to be a patient receiving Morpheus8 treatment.

I understand that clinical results may vary depending on individual factors, including but not limited to medical history, skin type, patient compliance with pre- and post-treatment instructions, and individual response to treatment. I understand that there is a possibility of short-term effects such as reddening, mild burning, temporary bruising and temporary discoloration of the skin, as well as the possibility of rare side effects such as scarring and permanent discoloration. These effects have been fully explained to me

I understand that treatment with this system involves a series of treatments and the fee structure has been fully explained to me.

I certify that I have been fully informed of the nature and purpose of the procedure, expected outcomes and possible complications, and I understand that no guarantee can be given as to the final result obtained.

I am fully aware that my condition is of cosmetic concern and that the decision to proceed is based solely on my expressed desire to do so. I confirm that I have informed the staff regarding any current or past medical condition, disease or medication taken.

I consent to the taking of photographs and authorize their anonymous use for the purposes of medical audit, education and promotion.

I have received the following information about the technology:

- MORPHEUS8 technology utilizes fractional radiofrequency (RF) indicated for facial/neck/ chest and back of hands, as well as small body areas.
- The MORPHEUS8 treatment induces ablation, thus improving the appearance of rough texture, fine lines, wrinkles, and depressed scars, such as acne scars along with superficial pigments that will be ablated. The treatment also induces skin rejuvenation by heating of the dermis which stimulates collagen generation and replenishment, as well as closure of superficial fine blood capillaries.
- The treatment requires anesthesia that involves topical cream, injections, or sedation according to the treatment parameters and the physician discretion.
  - O I was told about the possible side effects of the treatment including: local pain, skin redness (erythema), swelling (edema), damage to the natural skin texture (crust, blister, burn), change of skin pigmentation (hyper- or hypo-pigmentation), and scarring. Although these effects are rare and expected to be temporary, redness and swelling may last up to a

few weeks, and are part of a normal reaction to the treatment. Burns and resulting pigmentation change and scarring are rare and may happen in dark skin that is not taken care according to instructions. Tiny scabs appear on the face for a few days as part of a normal healing, however make-up may be applied as soon as 1-2 days after the session to mask them and residual redness. Any adverse reaction should be reported immediately.

o I understand that the treatment involves a few sessions (1-5), a few weeks apart (3-6 weeks), according to treatment parameters and individual response.

I certify that I have been given the opportunity to ask questions and that I have read and fully understand the contents of this consent form.