



EN Signature Brows & Beauty Studio Vela Shape Consent Form

Benefits: Non-Invasive treatment to reduce the appearance of cellulite and different fat storages in the body. Improves skin tone and the look of cellulite. It is also known as a major compliment to other body contouring procedures.

Expectations: The more treatment that is done, the better the treatment area will look. We recommend 8-10 sessions, 1 to 2 times per week for 4 to 6 weeks.

Treatment: a hand piece with a combination of laser, radiofrequency, suction, and rolling will be applied to the skin of the treatment area and with each pulse, you will feel a "hot sensation." Please let your esthetician know if you are feeling pain instead of tolerable discomfort. Treatment oil will be applied to your skin before treatment.

In conjunction: *We recommend you complement your treatments with Laser Lipolysis, Ultrasonic Fat Cavitation, Thermal Radio Frequency, and exercises, a healthy diet, and lifestyle changes.*

Risks, side effects, and complications: pain, bruising, discoloration, infection, burn, scar, and ineffective treatment. To prevent injury, the treatment setting will be set at a lower and safer setting, if your skin is dark or if you are tanned. This will likely decrease the efficacy of the treatment. As such, it is important to avoid sun exposure and to wear sun block every day to reduce risk of complications. If you are tanned or have excessive sun exposure, please reschedule your appointment at least 6-8 weeks later for a safe and comfortable treatment. Also, avoid caffeinated products or NSAIDs to minimize risk of bruising. Do not stop NSAIDs if it is prescribed to you by your doctor for medical reasons.

Post treatment precautions: Avoid sun exposure, tanning booths, spray tan, and wear sun screen daily. Apply ice, Aloe Vera, and topical OTC cortisone if you feel heat or swelling in the treated area. Reschedule if you are tanned either from sun/tanning booths or sprayed tan or had sun exposure.

Post treatment expectation: For the first few days, there might be some redness or swelling over the treated area. If bruising occurs, it will generally have resolved within a couple of weeks. You will feel some degree of tightness and smoothness after each treatment. Please call or text our office at **(808)797- 5757** if you have any questions or concerns following treatment.

I, _____, consent to the treatment known as the Vela Shape treatment. This treatment has been explained to me and I have had the opportunity to ask questions regarding the procedure. I understand that these treatments are not an exact science and the degree of my improvement is variable.

By my signature below, I acknowledge that I have read the information and consent and that I have been given the opportunity to ask questions and that my questions have been answered to my satisfaction. I have been adequately informed of the risks and benefits of this treatment and I wish to proceed with the Vela Shape treatment.

This treatment is fat loss, not weight-loss. For optimal results, compliment this treatment with a proper exercise regimen, and a healthy diet.

Client Name: _____ **Date of Birth:** _____

Client Signature: _____ **Date:** _____

Licensed Esthetician: _____ **Date:** _____