



INFORMED CONSENT FOR SLIMSPEC TREATMENT

Name: _____ Date: _____

Treatment Sites: _____

The SlimSpec device creates acoustic mechanical waves and MD Body & Med Spa uses it in place of manual massage to disperse the frozen cells after the CoolSculpting treatment. Radial Pulse Therapy is a non-invasive procedure with limited risks and side effects. Some patients reported minor redness and bruising from the treatment that normal resolves within a few days.

Off-Label Use: The SlimSpec has been cleared by the FDA for the temporary reduction in the appearance of cellulite. It is also being used in place of manual massage following selected aesthetic procedures. The use is not yet approved by the FDA and is termed "off-label use".

Potential Risks: I am aware of the fact that acoustic radial wave treatment has been used for a variety of applications such as orthopedic pathologies and has been accepted for years. Low energy acoustic radial wave treatment is easy to conduct and non-invasive, with no apparent adverse events.

Adverse Events: There are no known adverse reactions to this treatment. Nevertheless, should they occur they are expected to be mild, such as a local temporary "blue mark" lasting for several days. Should adverse events occur, please report them to your technician.

Pregnancy: I am not pregnant. _____ Initials

If I experience any pain or discomfort during the session, I will immediately communicate that to the technician so the treatment can be modified or halted.

Acknowledgement: *I understand the procedure and its purpose and consent to treatment with the SlimSpec.*

Patient Signature

Date

Technician Signature

Date