

Informed Consent - Thread Lift

This consent form will apply to all thread lift treatments performed by Dr Aaron Stanes.

Thread lifting is a procedure whereby absorbable threads are placed under the skin with the aim of lifting or thickening tissue and promoting collagen production.

The risks include:

- Bruising; swelling; pain/tenderness; transient lumps/dimpling; nodules; infection; thread breakage; prolonged discomfort; granuloma; local inflammation; cone visibility; thread protrusion; nerve injury with sensory or movement deficit.

Other important considerations:

- Results are temporary and the longevity will vary with each treatment.
- Multiple treatments may be required, and the desired outcome may not be achieved.
- If complications occur, subsequent treatment may be required at your own expense. Treatment may include, but is not limited to: antibiotics, antivirals, hospitalisation and surgery. Treatment may not successfully resolve complications that occur.

I consent to undergo treatment and agree to/understand the following: (please initial)

- The details and risks of the procedure have been discussed, and I fully understand them. _____
- I have had the opportunity to ask questions, and am satisfied with the information provided. _____
- I may not obtain my expected results, and may require additional treatments at my own expense. _____
- I may require treatment for eventuated risks, and these will be at my own expense. _____
- I have disclosed my complete and accurate medical history to Dr Aaron Stanes. _____
- I understand the signs and symptoms, and when to seek urgent medical care. _____
- I have been informed of the aftercare and will adhere to all instructions where applicable. _____
- I understand that I will not be eligible for a refund under any circumstance, unless required by law. _____
- I have read and understood the above information, and that explained to me by Dr Aaron Stanes. _____

Name:

Practitioner:

DOB:

Signature:

Signature:

Date: