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| **Ultherapy Skin Tightening Pre and Post Instructions** |

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| **Patients with any of the following medical conditions are not candidates for Ultherapy:*** Psoriasis on face or head
* Epilepsy
* Bells Palsy
* Pregnancy
* Cystic acne in treatment area
* Open lesions in treatment area
* Metal implants or stents in treatment area (this does not include dental work)

**Patients with the following medical conditions should take additional precautions. Please discuss with your Ultherapist:*** Blood disorders
* History of cold sores
* Auto-immune diseases

**Prepare for your treatment:*** Bring an iPad, iPod, mp3 player with headphones.
* You may experience mild, momentary discomfort.
* Skin must be fully healed from any prior laser treatment or chemical peel before receiving Ultherapy.

**Avoid these products and/or procedures before your treatment:*** Patients should not receive Botox one week before an Ultherapy treatment.
* Please advise your Ultherapist if you have recieved a Dermal Filler within the past month. Please postpone any upcoming Dermal Filler treatments until after your Ultherapy treatment.

**After treatment:*** You may resume your regular activities.
* A skin care regimen containing anti-oxidants, growth factors, retinols, and broad spectrum SPF is recommended.
* Protect your treatment and investment by avoiding excessive sun exposure and smoking as these cause additional aging in the skin and the need for additional treatments may be required
* You may experience bruising, swelling and/or tenderness; these symptoms are normal. You may or may not experience these symptoms. If so, they can last anywhere from a few days to a few weeks.

Please call us if you have any questions. |

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| BY SIGNING BELOW, I ACKNOWLEDGE AND CERTIFY THAT I, ***Client Name*** HAVE READ AND UNDERSTAND THE "CONSENT, RELEASE AND INDEMNITY AGREEMENT" FOR THIS PROCEDURE, AND THAT I AM SIGNING IT VOLUNTARILY. |
| **PLEASE SIGN YOUR FULL NAME BELOW IF YOU AGREE** |
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