# IVita Wellness, LLC

## Medical Clearance Form For PRP (Platelet-Rich Plasma) Therapies

Name:	Phone number:	
Email:		
Address:		
DOB:		
Primary Care Physician:		
Primary Care Physician phone number:		
Allergies Drug & Non-drug (vitamins) or foo	d or environmental:	
Past Medical History:		
Past Surgical History:		
Family Medical History:		
Medications taking or prescribed:		
Vitamins taking or over the counter:		

I hereby authorize IVita Wellness, LLC or any delegated associates to perform PRP Therapy. I understand that this procedure is elective.

Please answer each question, if yes to any please explain:

Are you sick or have hay fever?

Do you have hemophilia (a blood disorder when blood does not clot normally)?

Do you have any open wounds, cuts, skin infection, herpes simplex, or active acne?

Do you have scleroderma (a chronic hardening or tightening of skin and connective tissue)?

Do you have eczema, psoriasis, rosacea, or other chronic skin conditions?

Have you taken Accutane in the last 6 months?

Are you pregnant or breastfeeding?

Have you had radiation treatment on your skin within the last year?

Platelet Rich Plasma, also known as "PRP", is an injection treatment in which a person's own blood is used for/to

The blood will be drawn using the same technique as having it drawn for routine lab testing. It is spun in a special centrifuge to separate its components, and to extract the most concentrated "platelet rich" portion of the plasma. Platelets are very small cells in your blood that are involved in the clotting and healing process. When PRP is injected into the damaged area it causes a mild inflammation that triggers a healing cascade. As the platelets organize in the treatment area, they release a number of enzymes to promote healing and tissue responses, including attracting stem cells and releasing growth factors to repair damaged tissue. As a result, new collagen and elastic fibers begin to develop. As the collagen matures, it begins to shrink, causing a tightening and strengthening of the tissue in the damaged area. When treating injured or sun and time damaged tissue, a remodeling of the tissue to a healthier and younger more elastic state occurs. This process can also help stimulate hair regrowth.

Treatment results are generally visible at 4 weeks and continue to improve gradually over 4 months when PRP is used alone or synergistically with fillers, lasers and skin pen (aka micro-needling). Most treatments require 60-90 minutes including the drawing and processing of your blood. Generally, 2-3 treatments are advised at intervals suited to the patient's clinical skin and tissue health. Touchup treatments may be done once a year after the initial series of treatments to boost and maintain the results. Significant results can last as long as two years. End results depend on many factors, including the aggressiveness of the treatment, adherence to post treatment care regimen, proper nutrition and good general health. The most important being the degree of cumulative sun and environmental damage to your skin and tissues.

Treatments are designed to maximize the results of the treatment within safe and predictable parameters. The number of treatments needed cannot always be accurately predicted, even under the best of circumstances. Appropriate intervals between treatments are needed to allow the healing process to complete the cycle. The next treatment is then decided upon, given the results of the previous one.

Good general health is the key to excellent and predictable outcomes by supporting your cells to work well and promote healing.

Any successful skin rejuvenation treatment is cumulative in the overall improvement of skin health, and therefore the skin's appearance.

PRPs safety has been established for over 20 years for its wound healing properties. Its proven effectiveness has extended across multiple medical specialties including cardiovascular surgery, orthopedics, sports medicine, podiatry, neurosurgery, dermatology, urology, dental and maxillofacial surgery as well as aesthetic applications. PRPs use in wound healing, aesthetics and skin rejuvenation began in approximately 2004 in Europe and Asia. Areas typically treated for aesthetic purposes, volume restoration, and skin rejuvenation include the face, neck, lips and back of the hands. PRP is also used to stimulate hair growth in various forms of alopecia in both men and women. Because it is enriched plasma derived from one's own blood, it is considered safe and effective for almost all skin tones and is virtually allergy free.

#### **BENEFITS**

PRP has been shown to have overall rejuvenating effects on the skin including: • Improving skin texture to a more youthful appearance

- Decreasing the appearance of fine lines and wrinkles
- Increasing tissue volume via production of collagen and elastin
- Diminishing and improving the appearance of scars
- Improved texture and thickness to skin damaged by radiation therapy Minimal down time and short recovery period
- Very low risk
- No general anesthesia required

#### CONTRAINDICATIONS

There are very few contraindications to receiving PRP for aesthetic procedures. Parental consent is required for those under 18 years of age. Persons with the following conditions are not considered candidates:

- Cancer, chemotherapy treatments
- Acute or chronic infections, sepsis
- Abnormal platelet function or blood disorders
- Skin diseases or allergies
- Any severe metabolic or systemic disease
- The use of blood thinners or systemic corticosteroids

#### **RISKS AND COMPLICATIONS**

Potential side effects include:

- Pain, bleeding, and/or bruising at the injection site
- Flushing of the skin, swelling, itching
- Allergy to the anticoagulant solution used to process the blood Injury to a nerve and/or muscle

- Infection as with any type of injection
- Dizziness or fainting
- Nausea or vomiting
- · Minimal effect from the treatment

Remember, your own tissue will rarely if ever, do you harm.

### **ALTERNATIVES to PRP**

- Do nothing
- Injections with neurotoxins (ex. Botox)
- Injections with dermal filling agents (ex. Juvederm) Laser and light based treatments
- Chemical peels
- Surgical intervention
- PRP injections in combination with any of the modalities listed above

#### RESULTS

Each person has a unique response to PRP treatments. The outcome is generally very positive, but patience is necessary. The regeneration process can take months and multiple treatments may be required to achieve optimal results. Initial results are usually visible at 4 weeks, and texture and tone continue to improve gradually over the ensuing 3-6 months.

Areas that respond well to skin rejuvenation include: • Crinkling skin around the eyes

- · Cheeks and mid face
- Neck
- Jaw line
- Décolletage and chest
- · Back of hands, arms
- Lips
- To stimulate hair growth in scalp

Advanced wrinkling cannot be reversed and only minimal improvement is predicted in persons with drug, alcohol, or tobacco usage. Severe scarring may not respond. Current data shows results may last 18-24 months. Of course, all individuals are different, so there will be variations from one person to the next.

# Consent for Platelet Rich Plasma (PRP) Injection GENERAL CONSENT

My consent and authorization for this elective procedure is strictly voluntary. By signing this informed consent form, I hereby grant authority to the physician to perform Platelet Rich Plasma (aka PRP) injections to the area(s) discussed during our consultation, for the purpose of aesthetic enhancement and skin rejuvenation. I have read this informed consent and certify I understand its content in full. All of my questions have been answered to my satisfaction and I consent to the terms of this agreement. I agree to adhere to all safety precautions and instructions after the treatment. I have been instructed in, and understand post treatment instructions and have been given a copy of them. I understand that medicine is not an exact science and acknowledge that no guarantee has been given or implied by anyone as to the results that may be obtained by this treatment. I also understand this procedure is "elective" and not covered by insurance and that payment is my responsibility. Any expenses which may be incurred for medical care I elect to receive outside of this office, such as, but not limited to

dissatisfaction of my treatment outcome, will be my sole financial responsibility. Payment in full for all treatments is required at the time of service and is non-refundable.

I hereby give my voluntary consent to this PRP procedure and release IVita Wellness, LLC its medical staff, and specific technicians from liability associated with the procedure. I certify that I am a competent adult of at least 18 years of age and am not under the influence of alcohol or drugs. This consent form shall be binding upon spouse, relatives, legal representatives, heirs, administrators, successors, and assigns. I agree that if I should have any questions or concerns regarding my treatment results, I will notify IVita Wellness, LLC and/or the provider immediately so that timely follow-up and intervention can be provided.

CONSENT TO PHOTOGRAPHS	
I authorize the taking of clinical photographs and the	ir use for scientific and educational
publications and presentations. I understand that my	identity will be protected.
	Patient or
Parent/Guardian Date	
PHYSICIAN/NURSE PRACTITIONER ATTESTATION	)N
I have explained the procedure(s), alternative(s), and	d risks to the person or persons whose
signature is affixed above. The patient has verbally of	communicated to me that they understand
the contents of this form.	
	Physician/NP or
Designee obtaining consent Date	