



Client Medical History Consultation

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone(\_\_\_\_\_) \_\_\_\_\_ Phone(\_\_\_\_\_) \_\_\_\_\_

DOB: \_\_\_\_\_ Email: \_\_\_\_\_

Do you have now or have you had any of the following conditions or habits?

Medical Condition	YES	NO
Epilepsy/seizure disorder/photosensitivity		
Lymphatic Disorders (i.e. lymphoma or others)		
Cancer (i.e.leukemia or others, not including skin)		
Heart conditions, heart disease, ( <b>pacemaker</b> )		
Lymphatic Disorders (i.e. lymphoma or others)		
Cardio vascular conditions (thrombosis, phlebitis, hypotension)		
Any form of active infection, fever or disease		
Currently pregnant		
<b>If you have any of the above conditions, you may <u>NOT</u> receive ilipo treatments</b>		
Diabetes type 1 or 2		
Thyroid disorder (hypo/hyper) *may have erratic results		
Breastfeeding		
Any metal pins/plates/cosmetic implants		
Liver Problem		
Kidney problem		
Medical edema (swelling)		
Auto immune disorder		
Lyme disease		
Contraceptive (Pill/IUD/Patch/Other)		
Dermatitis or skin issues		
Muscular/skeletal problems (back aches/pain/stiff points/headaches)		
Gynecological problems (irregular periods/PMT/ Menopause)		
Nervous System (migraine/tension/stress/depression)		
Circulation problems (heart/blood pressure/fluid retention/varicose veins)		
Recent fractures/scars/localized swelling (last 3 months) or surgery (last year)		
Digestive problems (constipation/bloating/liver/gall bladder/stomach)		
Recent fractures/scars/localized swelling (last 3 months) or surgery (last year)		
HIV +		
Immune system (prone to infection/ sore throat/ colds/chest/sinuses)		
Daily use of Tylenol (acetaminophen) or alcohol		
Any condition being treated by a practitioner (list below)		
Please list all medications or supplements you are currently taking:		

Notes: \_\_\_\_\_

Iipo Client Treatment Consent Form

I duly authorize the practitioners of Liquid Facelift and Laser Center, PLLC to perform the iLipo Procedure on my body for the purpose of spot fat reduction. \_\_\_\_\_(initial)

I am aware that clinical results may vary depending on individual factors, including medical history, client compliance with pre/post treatment instructions and individual response to treatment. I have been made aware that my diet and the amount of exercise I do, will have a major effect on the results of my treatments. If I do not make an effort to address my diet and exercise, I am aware that the results achieved may not be retained. \_\_\_\_\_(initial)

Should I wish to purchase the full treatment package, I understand the treatment involves a minimum course of 8-10 treatments. The nonrefundable fee structure has been fully explained and I understand that I am required to pay for a course of treatments prior to any procedures taking place. I am fully aware that should I wish to cancel the course, the outstanding treatment value is non refundable. \_\_\_\_\_(initial)

I certify that I have been fully informed of the nature and purpose of the procedure, expected outcomes and possible complications, and I understand that no guarantee can be given as to the final result obtained. I am fully aware that my condition is of a cosmetic concern and that the decision to proceed is based solely on my expressed desire to do so. \_\_\_\_\_(initial)

I understand that it is my personal responsibility to inform the practitioner of the clinic named above of any changes to my medical history or condition during the course of iLipo treatment sessions and I confirm that I shall advise the practitioner of any changes. \_\_\_\_\_(initial)

I certify that I have been given the opportunity to ask questions, any questions have been answered to my satisfaction and that I have fully read and understood the contents of this consent form \_\_\_\_\_(initial)

I understand that no less than 24 hours notice by phone is required in the event that I need to cancel or reschedule my appointment. If I fail to give at least 24 hours notice, I agree that my credit card on file will be charged \$50. I also acknowledge that, in lieu of the \$50 charge, at the discretion of Liquid Facelift and Laser Center, one paid treatment may be forfeited from my treatment balance. \_\_\_\_\_(initial)

I understand that payment for services rendered is due at time of service. In the event of default, I promise to pay legal interest (18% annually) on the indebtedness, together with such collection costs and reasonable attorney fees as may be required to effect collection of this note.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Client Name (Printed) \_\_\_\_\_

Practitioner Signature \_\_\_\_\_

## Liquid Facelift and Laser Center, PLLC

Client Name \_\_\_\_\_

Please circle ONE area to be treated:

abs/stomach    flank/buttocks    thighs    arms    neck/chin    hips    other

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*(Below For Technician Use Only)*

		Measurement Pre (cm)			Measurement Post (cm)			Loss
Measurement site in inches (arms above head)		A	B	C	A	B	C	
Treatment #	Date							
1	/ /15							
2	/ /15							
3	/ /15							
4	/ /15							
5	/ /15							
6	/ /15							
7	/ /15							
8	/ /15							
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23	/ /15							
24	/ /15							

Notes:

Payment made on \_\_\_\_\_ for # \_\_\_\_\_ sessions. Payment type: \_\_\_\_\_

Voucher#: \_\_\_\_\_ redeemed? Yes/No

Discussed need to cut carbohydrates and starches. Emphasized water intake. Exercise within two hours of ilipo.  
Recommend diet protocol:

\_\_\_\_\_

\_\_\_\_\_



## **What is i Lipo?**

i Lipo is a revolutionary new system used for body-contouring. **The i Lipo system is the latest generation of FDA-cleared laser for circumferential reduction.**

## **How does it work:**

Photobiomodulation means the laser causes a change in the biochemistry of the fat cell. The laser energy serves as a catalyst setting off a chemical process that leads to fat breakdown. Then, the body's own metabolic system takes over and processes the fat, as it would naturally. The difference is that we are specifying which *area to target* specifically for spot reduction.

How it works: 36 lasers stimulate the fat cells and lower the pH just enough to stimulate the lipase enzyme to break down large triglyceride molecules into smaller fatty acid components. The small fatty acid molecules then slip out of the fat cells and are picked up by the lymphatic system. The lymphatic system is also stimulated by a diode laser to enhance the mobility and circulation of the released fat in the body. Every 20-minute i Lipo session releases approximately 400 calories of fatty acids into the body. Then, you must exercise to burn off 400-calories of energy for a permanent reduction of fat cells. The cells literally spill out their content and go from grape-size to raisin-size. A post-treatment exercise is required to burn off the released energy and to prevent it from getting restored. Drinking water helps in the lipolysis. Due to the caloric load that is released into the system, only one area will be treated per session. We don't want to overload the body with too many calories where you'd have to spend hours in the gym to work it off. You will need to burn off a total of 400 calories within a few hours of the i Lipo session.

The results are effective, permanent and non-invasive. The fat cells left behind are shrunken, collapsed, yet active and viable. i Lipo does not kill, freeze, destroy or vacuum out fat cells: they remain healthy and viable, albeit shrunken. This is appreciated during menopause since part of the endocrine function of fat cells is the production of estrogen which is decreased during menopause.

8-10 sessions of i Lipo are recommended for full effect. There is a cumulative additive effect of i Lipo where on average, 1% of your girth's circumference is lost per session. In 10 sessions, you lose about 10% of your girth. 3500 calories equal one pound of fat which is voluminous but not heavy. i Lipo is a body-contouring system, not a weight-loss system. Fat takes a lot of space, but does not weigh much. An analogy is a pound of feathers which takes a lot of space but does not weigh much. Body contouring is measured in *inches* lost and in *dress sizes* lost, rather than in *weight* lost.

It is recommended you do 1-2 sessions per week for 10 sessions total. Sessions must be at least 48-hours apart. How many sessions you do depends on the end-point look and results you desire. Drinking water is key to your success. We recommend a decrease in carbohydrates and starch intake to optimize results.

Areas that have subcutaneous fat can be treated. Female breasts are excluded. You can treat any of these areas: neck (not over thyroid), upper arms, trunk, abs, mid-section, hips, thighs, etc... We treat one area at a time.

## **Please come to your appointment prepared:**

1. Do not eat a heavy meal for at least 2 hours prior and 2 hours after the session
2. Drink half of your body weight in fluid ounces over 24-hours. (if you weigh 100 lbs, drink 50 oz of water or green tea daily)
3. Wear comfortable exercise clothes
4. We will be palpating your groin area to localize the lymph nodes – wear comfortable underwear or clothing
5. The i Lipo session takes 20 minutes. You will then need to exercise on your own and burn off 400 calories (with a trainer, ideally). Currently, the i Lipo is offered in McLean office (wed-sat 10-5 pm)
6. Iipo has been featured on The Doctors Show on February 3<sup>rd</sup>, 2012, and on The Dr Oz Show on February 6<sup>th</sup>, 2013.
7. i Lipo is safe. If you have any underlying medical problem, please discuss with your medical provider. You must be able to exercise post treatment. Individuals with thyroid problems can get erratic results (some of our best responders were hypo thyroid). Anyone with a history of cancer, anyone under 18, any individuals with HIV + must get clearance from their medical provider. Anyone with lymphoma or leukemia, epilepsy, photosensitivity disorder, pacemaker, pregnancy may not receive the i Lipo treatment.
8. Please abstain from drinking alcohol. The liver must process the released fatty acids. Drinking over burdens the liver
9. To optimize the results, we offer the hcg diet and B12 and MIC injections to increase your metabolism
10. Please fill out the consent and registration forms and bring with you to your appointment.

We hope to assist you in achieving your ideal body shape using modern medical technology at its finest.