

**Eastside Primary Care & Wellness**  
**1601 116<sup>th</sup> Ave NE Suite 111**  
**Bellevue, WA 98004**  
**(p) 425.467.1314**  
**(f) 425.458.3102**

*Informed Consent Form*

**Laser Surgical Treatment  
for  
Vascular and Pigmented Lesions of the Skin**

This form is designed to give you the information you need to make an informed choice on whether or not to undergo vascular lesion laser surgery. If you have any questions, please do not hesitate to ask us.

Although laser surgery is effective in most cases, no guarantees can be made that a specific patient will benefit from treatment. Many conditions treated with this laser require a series of treatments to reach the desired level of improvement. These treatments may range from one treatment to as many as six or more, depending on the type of lesion being treated. Some conditions will not completely clear but will become lighter. Some vascular lesions may not respond at all to this treatment.

**WHAT IS LASER SURGERY?**

The laser has been used for the treatment of various skin conditions and vascular lesions for many years. The Long Pulse ND:Yag laser emits an intense beam of light that penetrates the skin and heats the target area almost instantaneously and so precisely that normal surrounding tissue is hardly affected. This laser is used to lighten or remove facial telangiectasia, spider veins, leg veins, periocular veins and other vascular growths of the skin and pigmented lesions.

**WHAT ARE THE SIDE EFFECTS AND POSSIBLE COMPLICATIONS OF LASER SURGERY?**

The most common side effects and complications of laser surgery are:

1. Pain. Without a topical anesthetic there would be some pain during the treatment similar to snapping the skin with a rubber band. Some areas are more sensitive than others.
2. Healing wound. Laser surgery may cause a superficial burn to the surface of the skin, which takes several days to heal. This may result in swelling, weeping, crusting or flaking of the treated area. This usually takes 5 to 10 days to heal.
3. Pigment changes. In most patients the treated area loses pigmentation (hypopigmentation) and becomes a lighter color than the surrounding skin temporarily. This type of reaction tends to gradually fade away and return to normal over a period of two to four weeks. With repeated treatment, this pigment loss may become more persistent and require longer to heal, such as 6 to 8 months or longer. There is some risk of permanent pigment loss in the area of treatment, leaving a white shape similar to the original pigment being treated, but this is rare and usually avoidable by allowing adequate healing time between treatments. There is some risk of increased pigmentation (hyperpigmentation) as a healing reaction. However, this type of change is very rare with this particular laser. If this should occur, the increased pigment usually fades away over 2 to 6-month period.

4. Scarring. There is a very small chance of scarring, including hypertrophic scars, which are enlarged scars, and rarely, keloid scars, which are abnormal, heavy, raised scarring is a very rare occurrence but is a possibility because of the disruption of the skin's surface. To minimize the chances of scarring it is important that you follow all postoperative instructions carefully.

5. Eye exposure. There is also a risk of harmful eye exposure to the laser energy. Safeguards have been provided including the use of safety eyewear during laser treatment. It is important for you to keep these protective glasses on at all times during treatment to protect your eyes from accidental laser exposure.

I have been informed of: (1) the potential benefits of the laser surgery; (2) the alternative, (3) the prospects of success, (4) the reasonably anticipated consequences if the procedure is not performed; and (5) the major risks involved in the proposed procedures. I have been given the opportunity to ask questions and have received satisfactory answers. I understand the necessity for the administration of a topical or local anesthetic as appropriate.

NAME \_\_\_\_\_ DATE \_\_\_\_\_

Summary of the risk involved when using the Long Pulse ND:Yag laser:

1. Scarring of the skin is unlikely but possible.
2. Pigmentary changes in treated skin
3. Incomplete removal of the lesion, which may necessitate more than one treatment.
4. Damage to the eyes if protective goggles are not used.
5. Skin infection is a possibility any time a skin procedure is done.

I know that the practice of medicine and surgery is not an exact science and that therefore reputable practitioners cannot properly guarantee results. I acknowledge that no guarantee or assurance has been made by anyone regarding the operation which I have herein requested and authorized.

I hereby authorize Dr. \_\_\_\_\_ and his delegated associates to perform and or assist in the proposed procedure(s) described above.

I hereby authorize the taking of photographs or films before, during and after the procedure for documentation in teaching and research purposes. **I certify that I have read and fully understand the contents of this form and the disclosures referred to above that were made to me.**

\_\_\_\_\_  
WITNESS SIGNATURE  
GUARDIAN

\_\_\_\_\_  
PATIENT OR PATIENT/

I certify that I have made the disclosures referred to the above named patient and have given the patient the opportunity to ask questions.

\_\_\_\_\_  
PHYSICIAN SIGNATURE

\_\_\_\_\_  
DATE