## Carboxy Therapy Release Form

Carboxy therapy is an FDA approved procedure to improve the appearance of stretch marks and reduce cellulite.

Carboxy therapy is a non surgical method in which Carbon dioxide (CO2) is injected into tissue through a needle. From the injection point the carbon dioxide diffuses easily into adjacent tissues.

Carbon dioxide is used to mechanically kill fat cells. It also causes dilation of blood vessels on the capillaries in the area. Wider vessels mean bigger and stronger blood flow to the area, which means more oxygen. The increase in oxygen helps to eliminates the built up fluid from between the cells. The end result is fewer fat cells and firmer subcutaneous tissue.

Side effects include mild pain and or bruising at the injection site. Individuals having this treatment must avoid emerging themselves in water (ie: baths, swimming pools) for 4 hours following the treatment.

I understand that to achieve optimal results multiple treatments are necessary.

I am not pregnant or trying to become pregnant nor am I nursing at this time.

The nature and purpose of the treatment have been explained to me. I have read and understand the attached agreement(s). All of my questions have been answered to my satisfaction and I consent to the terms of this agreement. Alternative methods of treatment and their risks and benefits have been explained to me and I understand that I have the right to refuse treatment.

associated with the procedure. This consent form is freely an	, medical staff, and specific technicians from liability I certify that I am a competent adult of at least 18 years of age. In a competent adult of at least 18 years of age. In the specific technicians from liability I certify that I am a competent adult of at least 18 years of age. In the specific technicians from liability I certify that I am a competent adult of at least 18 years of age. In the specific technicians from liability I certify that I am a competent adult of at least 18 years of age. In the specific technicians from liability I certify that I am a competent adult of at least 18 years of age. In the specific technicians from liability I certify that I am a competent adult of at least 18 years of age. In the specific technicians from liability I certify that I am a competent adult of at least 18 years of age. In the specific technicians from liability I certify that I am a competent adult of at least 18 years of age. In the specific technicians from liability I certified the specified the specified technicians from liability I certified the specified technicians from liability I certified the specified technicians from liability I certified the specified the spec
Note: All prices are subject to	change without prior notice
Client's Name (Please Print):_	
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