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Consent to Intense Pulse Light (IPL/ Photo-facial) Laser Treatment

In signing this document, I give permission to the clinic staff of KP Aesthetics to perform intense pulse light IPL.

The Alma Harmony Dye-VL is an IPL device used for the treatment of benign pigmented and vascular skin lesions. IPL treatments should be done in series of approximately 3 treatments performed at approximately 4-week intervals. Results may vary.

Contraindications of this procedure are as follows: pregnancy, epilepsy, the use of antibiotics, the use of anticoagulants (blood thinners), history of blood disorders, sun exposure three 3 weeks prior or planned sun exposure 1 week post treatment.

Although uncommon, I understand that complications may occur. These risks include side effects such as, skin burning, scarring, and permanent skin discoloration as well as short-term effects such as redness, burning, bruising, and temporary skin discoloration.

If I should have complications appear as listed above, I will notify the staff of Kp Aesthetics for further instruction.

To achieve optimal results from the IPL treatments, we strongly encourage maintenance treatments. Usually this consists of 1 treatment every 4-6 weeks.

I consent to the taking of photographs during the course of this laser therapy for the purpose of monitoring the progress of treatment. Initial _____.

I certify that I have been given the opportunity to ask questions and that I have read and fully understand the contents of this consent form.

Patient Signature: _____ Date: _____

Provider Signature: _____ Date: _____