

Midlands Laser Clinic

General Medical Form for Laser Treatments

Name Age Occupation.....

Address

..... Post Code

Tel Mobile

E-Mail.....

Doctor Surgery..... Tel

GENERAL MEDICAL HISTORY (Last 3 Years)

Recent operations No Yes Metal Pins/Plates/Wires No Yes

Heart Condition No Yes Pace Maker No Yes

Epilepsy No Yes Allergic Reactions/Allergies No Yes

Diabetes No Yes Arthritis / Joint Pain No Yes

Asthma No Yes Migraines No Yes

Varicose Veins No Yes Back / Neck problems No Yes

Eczema/Psoriasis/Other No Yes Immune/Lymphatic Disorders No Yes

Alcohol **Present Now** No Yes Muscular Pain/Raised Temp **Present** No
Yes

Stroke No Yes Mental Health condition No Yes

Blood pressure: HIGH LOW NORMAL

If You answered Yes to any of the above:

.....

Other Medical Conditions:.....

Medication: GP Prescription / Herbal / Supplements:.....

.....

I confirm that the information given above is correct and I have disclosed all medication and medical conditions before embarking on Laser Tattoo Removal/affirm that I am not breast feeding, pregnant or trying to become pregnant.

Client SignatureDate.....

CONTRA-INDICATIONS TO LASER TATTOO REMOVAL

IMPORTANT NOTICE

RED – TOTAL CONTRAINDICATION

AMBER – GP LETTER

GREEN – RECTIFYOR PROCEDE WITH CAUTION

The contra-indications listed below are applied to all laser treatments including **Tattoo Removal**, Please check **BEFORE** booking your appointment to avoid disappointment. You will not be able to have treatment if you are contra-indicated however in some **cases a GP's letter may be acceptable**. Some of the contra-indication can be rectified Please call and ask for further advice if you are unsure.

Contra-indications ? YES or NO

- Pregnancy, or patient trying to become pregnant.
- Breast Feeding.
- Deep Suntan - either from natural sun, sun beds or fake tan with lotions or spray (book your laser appointment at least 2 wks **AFTER** your holiday as the laser is attracted to the melanin in suntanned skin).
- Photosensitive conditions.
- Cancer- especially skin cancer or if undergoing chemotherapy treatment.
- The recent or regular use of certain drugs- such as photosensitive antibiotics, antibiotic creams or gels, Roaccutane, herbal St John's Wort, anti-coagulants, Gold medications or Retin A prescribed by a GP.
- Recent injections eg immunisation in the area (1 month apart from Laser treatment).
- Recent surgery in the area.
- Healing Disorders- such as **Diabetes Mellitus, lupus or radiation therapy or chemotherapy.**
- History of keloid scarring (thick dark scarring).**
- Open wounds or lesions near the area.
- Herpes Simplex - cold sores (**we can treat as long as not in the area and not active**).
- Epilepsy.
- Hepatitis/HIV.
- Lymphatic/Immune System disorders.
- Psoriasis/Eczema in the area or the area to be treated.
- Skin diseases or disorders (other than the above).
- Thyroid condition (**The use of Thyroxine is not normally a problem**).
- Steroid Therapy.
- Hormone Replacement Therapy (**we can treat but we need to know**).
- Raised moles and Birthmarks.
- Patients with Skin Type VI or above (because of hypo or hyperpigmentation and scarring).

Other things you should consider

- Chronic Disease (e.g Diabetes) because of slower healing prose you may need longer between treatments to heal fully.
- Older patients may also take longer to heal.
- Immune-compromised or immune-suppressant patients may take longer to heal or not flush the ink out as well other patients.
- Patients who are unlikely to follow the post treatment guidelines or those with unrealistic expectations from the treatment would be considered contra-indicated during treatment programme.