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Witness

## Photo Consent

1. Clinical photographs are part of your evaluation and are a critical component of the planning of appropriate and beneficial treatments. Photos are routinely taken as a baseline and frequently throughout your treatment to help assess your results and are **required** as part of your treatment plan. Photographs are a private and confidential part of your medical record and are protected as such by law. By your signature below, you acknowledge that you understand and consent for clinical photographs to be taken as part of your medical record for in office use only.

2. Great outcomes are worth sharing! From time to time, with your express

written consent only, we share before and after photos of patient treatment and outcomes for marketing and educational purposes. Please indicate below if you would be agreeable to sharing your photo: To prospective patients in Dr. Van Dvke's office Initials Yes No To prospective patients during educational seminars held at VDA or elsewhere Yes No Initials To medical professionals in medical publications/meetings or webinars Yes No Initials To the public in advertisements/media No Initials • To the public on website or elsewhere on internet Yes No Initials Patient Signature Date

**Print Name**