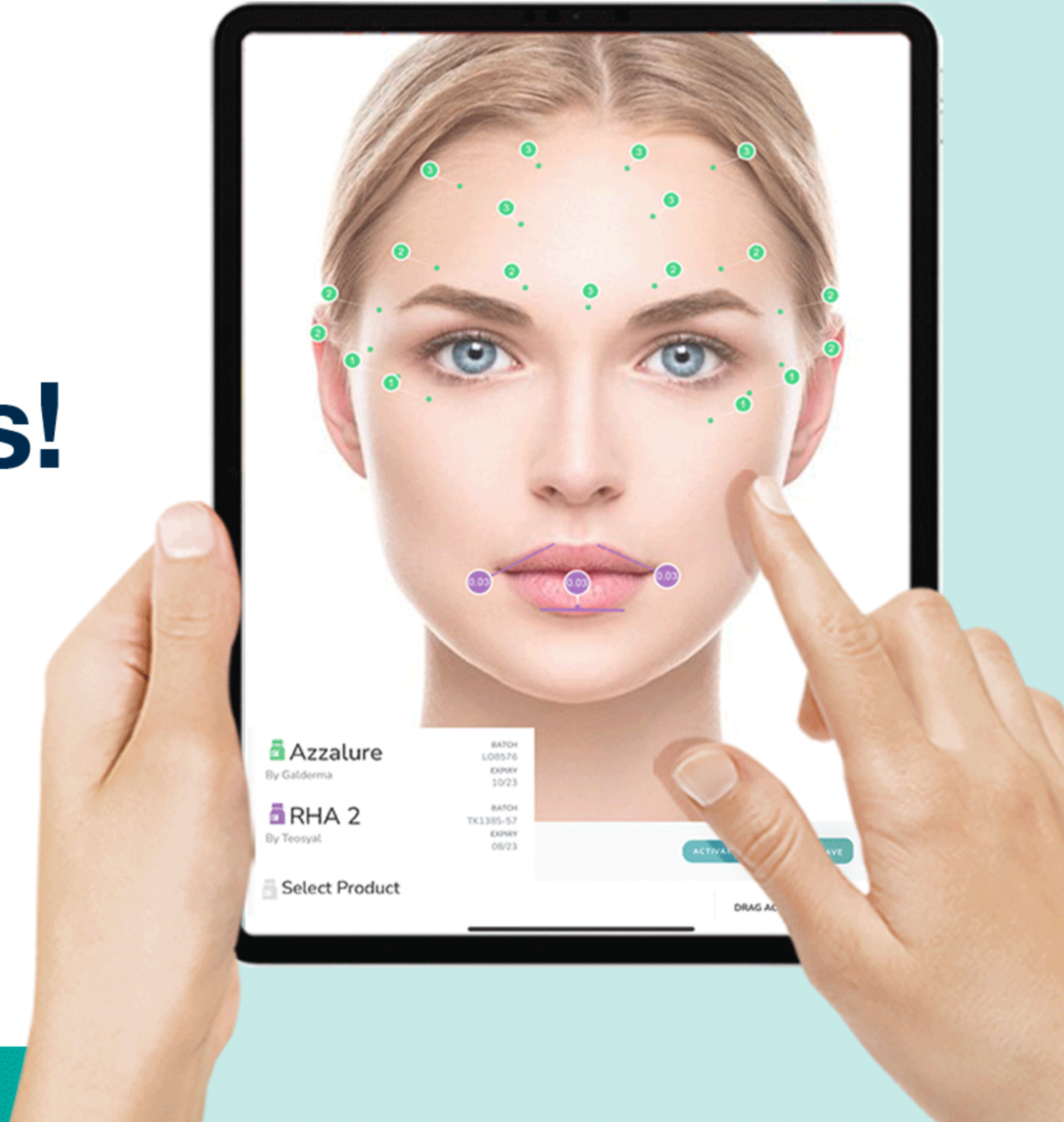




Phorest

The simple way to manage your aesthetic business!

Easy to use, affordable software. Designed for aesthetic practitioners!



Everything you need, in one place!

- ✓ Medical History
- ✓ Consent Forms
- ✓ Treatment Notes
- ✓ Before & After Photos
- ✓ Treatment Mapping

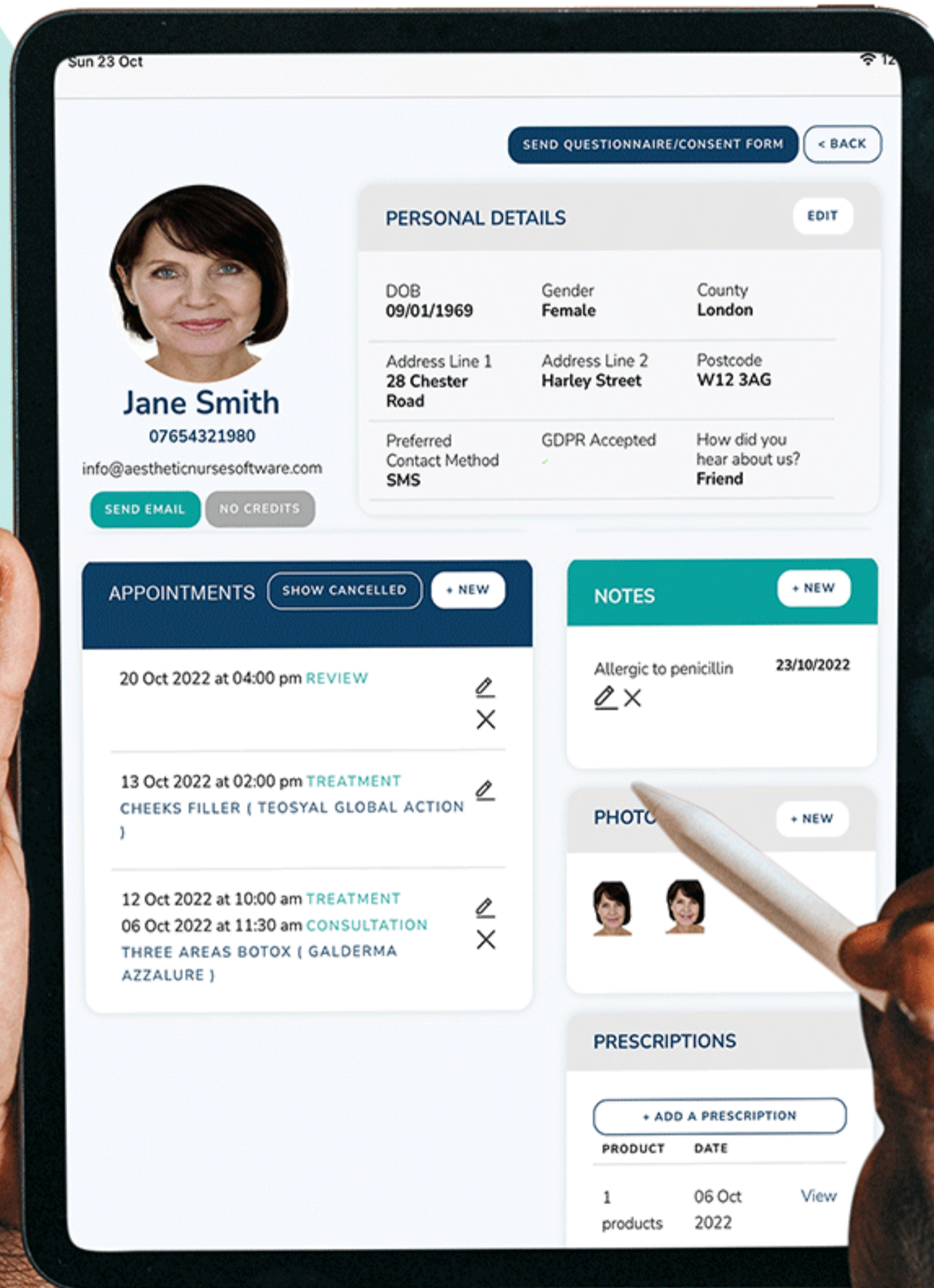
Trusted by over 1,500
aesthetic practitioners



Patient Records

Everything you need to know about a patient.

Accessible in one place.



All the forms you need.

- ✓ Medical History
- ✓ Consultation
- ✓ Consent
- ✓ Aftercare

Send to patients before appointment or complete in clinic.



If any symptoms last for more than 1 week or you are concerned about any symptoms you should report them to your practitioner as soon as possible. Seek urgent medical help if you have difficulties breathing, swallowing, speaking or if your face swells up.

Azzalure® may cause temporary blurred vision or muscle weakness. If affected, you should not drive or use machinery.

Azzalure® contains a very small amount of albumin, which comes from human blood. It is very unlikely that this could pass on an infection, but it cannot be entirely ruled out.

- I have been fully informed about the risks and benefits of treatment with Azzalure®.
- The practitioner has provided me with sufficient information about the treatment in order to make an informed decision.
- I have been given the opportunity to ask all remaining questions I may have about the treatment, and am happy with the answers provided.
- I have been given the time to consider the treatment and have been informed of alternative treatment options, which includes no treatment.

Patient's Signature

Practitioner's Signature

SAVE ANSWERS

SAVE DETAILS

Are you currently receiving any medical treatment? YES NO

Are you prone to bruising? YES NO

Do you suffer from keloid or hypertrophic scarring? YES NO

Are you prone to fainting? YES NO

Do you suffer from any bleeding disorders? YES NO

The knowledge I have given is to the best of my knowledge correct. I have not knowingly withheld any relevant medical information. YES NO

Sign below

SAVE ANSWERS

The knowledge I have given is to the best of my knowledge correct. I have not knowingly withheld any relevant medical information.

Sign below

SAVE ANSWERS

Very rarely, botulinum toxin may... Other side effects are listed in the... been given this).

If any symptoms last for more than... should report them to your practi... have difficulties breathing, swallow...

Azzalure® may cause temporary bl... not drive or use machinery.

Azzalure® contains a very small am... very unlikely that this could pass on...

- I have been fully informed abo...
- The practitioner has provided s... order to make an informed dec...
- I have been given the opportu... treatment, and am happy with...
- I have been given the time to c... alternative treatment options.

Patient's Signature

Practitioner's Signature

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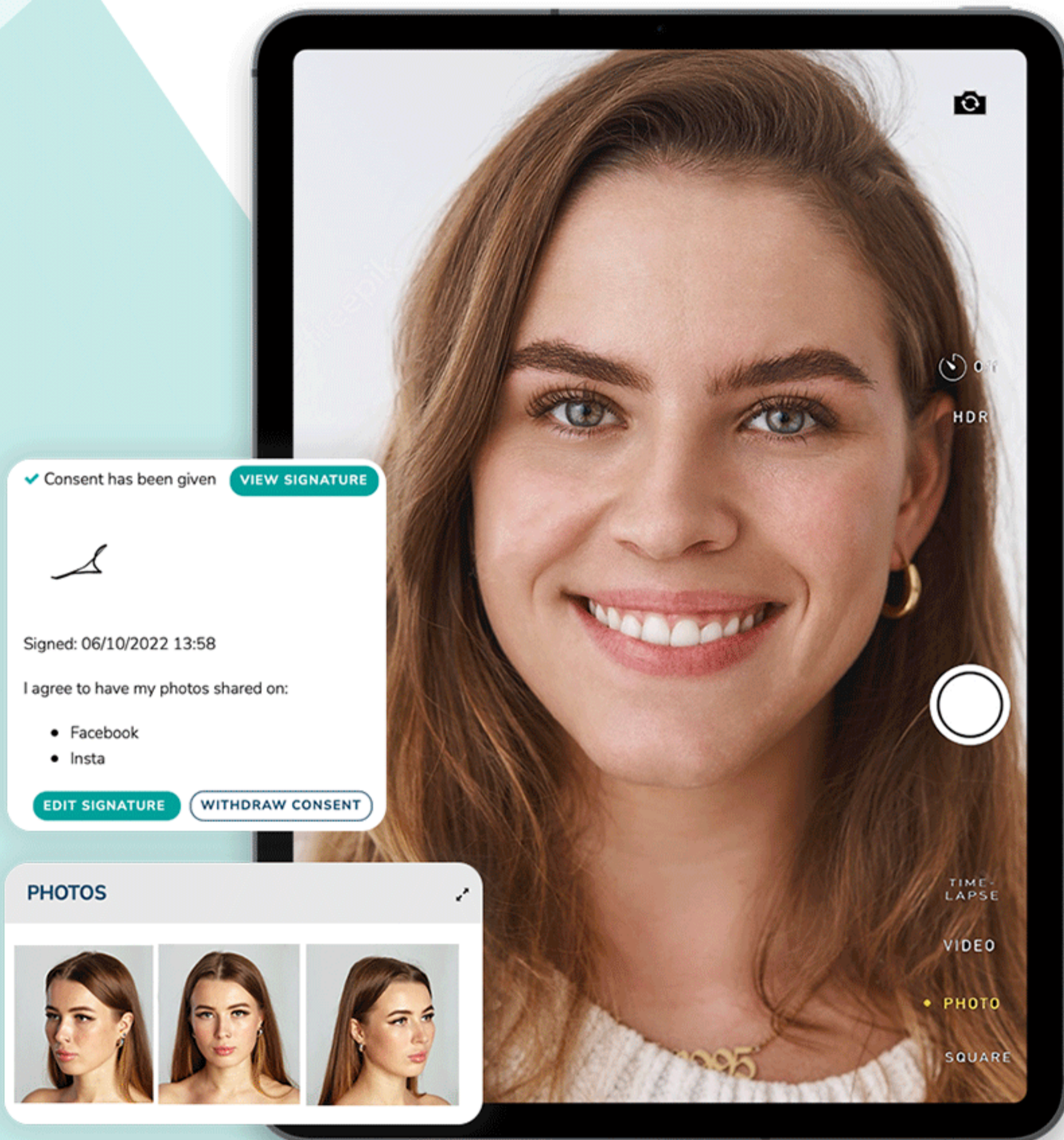
- I have been fully informed

Before & After Photos

Safe & secure.

Take photos on any device.

Create comparisons.



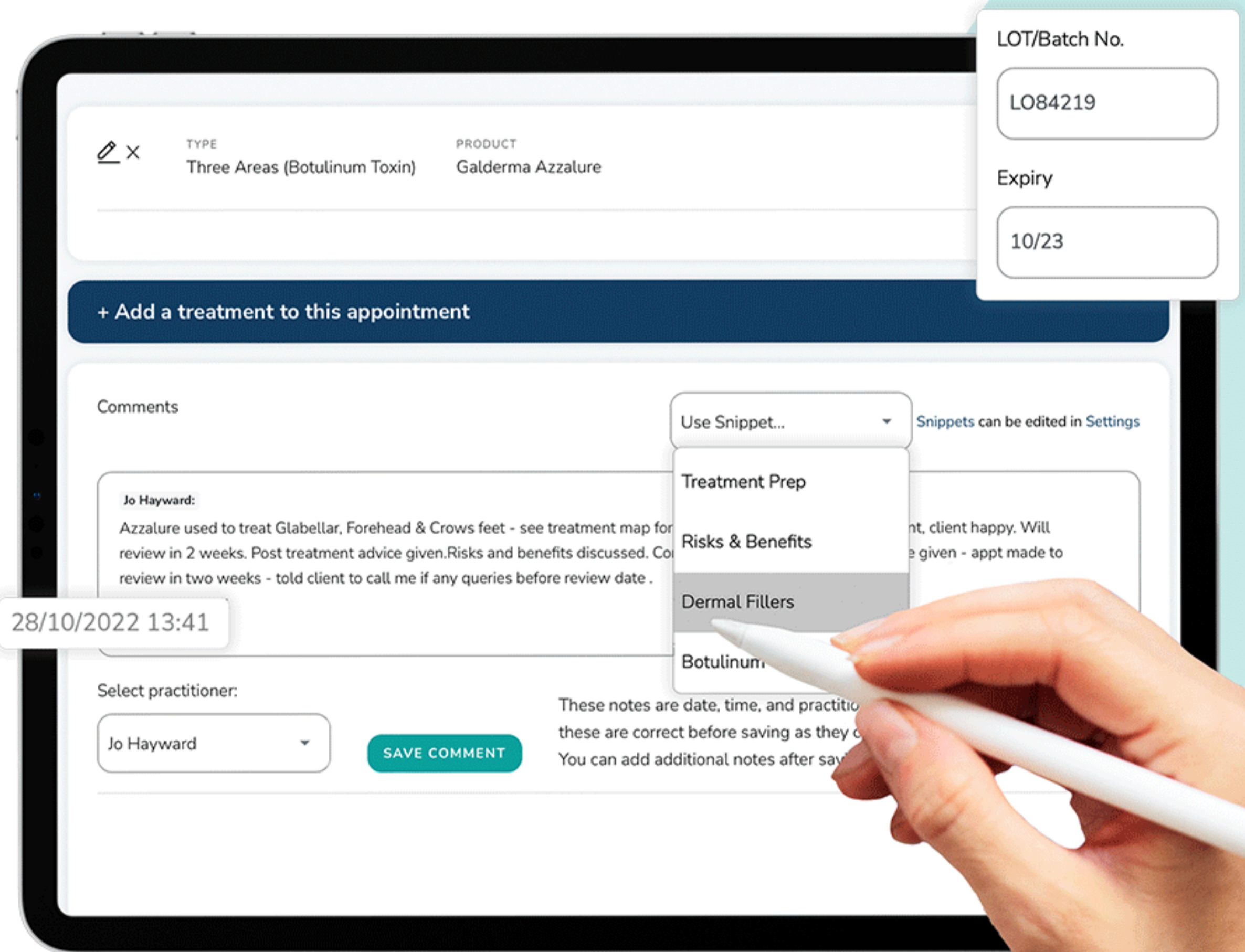
CREATE COMPARISON



Treatment Notes

Date, time and practitioner stamped.

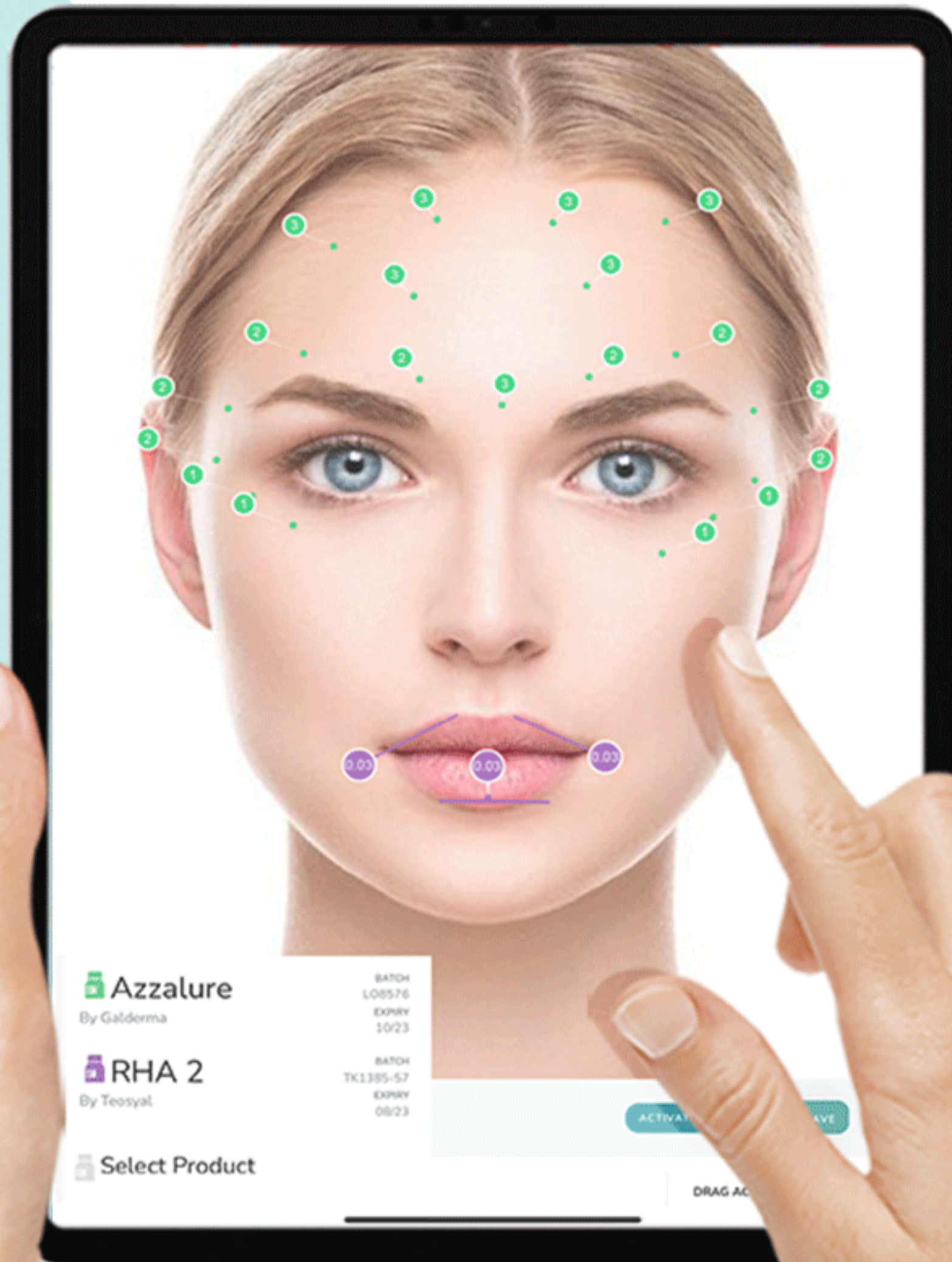
Ensuring accurate, compliant note-taking.



Treatment Mapping

Accurately plot injection points and dosages.

Draw directly onto a patients photo.



Everything you need to manage your medical aesthetic records!

Find out more today!

