

Lumicell Body Contouring and Cellulite Consent

During the Cellulite Reduction and Body Contouring treatment, the Lumicell wave 4 combines Infrared light energy with the deep sub-dermal vacuum-massage. The infrared light will stimulate blood and lymphatic circulation, warm up the deeper skin layers and increases lipolysis while the deep sub-dermal vacuum massage breaks down the fibrous adhesions that cause cellulite. The meso application then follows to increase fat release and working on the dimpling aspect of the skin. The treatment finally concludes with the application of non-invasive Ultrasound to induce collagen remodeling and restore the skin's elasticity. However efficient these technologies are, the results of a cellulite treatment is largely dependent on individual metabolic rates. It is thus important to understand that the speed at which results are achieved as well as the final outcome can never be predicted with exactitude.

1. The number of treatments required is always approximate and may be subject to revision.
2. Healthy eating habits must be adopted. They will not necessarily serve weight loss purposes but will lead to a nutritional equilibrium that will help in the elimination of several factors causing cellulite.
3. A daily massage using a loofah or friction glove will help stimulate blood and lymphatic circulation between treatments.
4. An exercise program adapted to personal needs is strongly recommended. It will increase your treatment's success rate while being beneficial to your health and well-being.
5. It is very important that you attend your scheduled appointments regularly to obtain the best possible results. Two treatments per week are ideal.
6. There is no guaranty that results will match your expectations.
7. Cellulite is a chronic condition that may return with unhealthy habits and poor lifestyle. It is therefore strongly recommended to follow a maintenance program in order to maintain results.

I have read all the above explanations and recommendations regarding cellulite treatments and I understand the advantages and limitations of the treatment. I agree to follow the recommendations given to me by my therapist or esthetician.

Signature

Date: / /