

Consent form for cryotherapy

Dear Mrs. / Mr

The histological/ clinical examination showed _____.

Appropriate treatment for such lesion is cryosurgery. This therapeutic method uses liquid nitrogen, which cools the skin at very low temperatures and thus destroys the lesion.

This procedure takes very little time (a total of 7 minutes) and has excellent results. But you must know that at the point where the damage will form a small wound and swelling will occur. May also remain a little colorless spot or scar.

Signature of patient

Signature of physician
