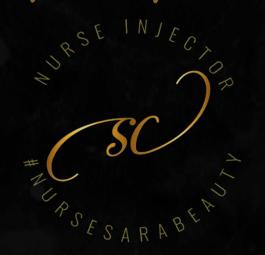
Treatment & Man 'Charlene's Story'



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Subjective: Patient presented to clinic for moderate facial volume loss and mild to moderate facial skin laxity s/p gastric sleeve 100 lb weight loss. Patient is getting married in 2026 and would like for "my face to look the way it did before loosing all the weight".



Objective: Patient is emotional about her facial volume loss within reason and without concern for BDD etc. Skin is dry with visible dyschromia and fine lines. Mild to moderate facial, submental, and neck skin laxiety appreciated. Moderate volume loss of deep and superficial fat pads noted as evident by NLF creasing and mid face hallowing.



Assessment & Plan:

1. Skin Laxity:

Sofwave non-invasive skintightening for collagen and elastin stimulation of dermis along jawline, submental and neck regions for mild to moderate skin laxity secondary to rapid weight loss. 55 pulses at 3.4 joule per side of mapped out treatment zones totalling 110 pulses at 3.4 joule. *Performed by Maggie Horn - Licensed Esthetician under the supervision of Sara Cole NP.

2. Dyschromia

Skincare: Hydrafacial for detoxification of pores and better medical-grade skincare penetration. Skinmedica Even and Correct home regimen for dyschromia and HA hydrator.

3. Hyperanimation & Rhytid Formation Botox Cosmetic For Skin Quality and Muscle Training: Treatment of all depressor muscles: 44 units (Glabella complex, Orbicularis Oculi, Platysma, Depressor Anguli Oris) Treatment of elevator muscles with caution: 16 units (Frontalis, Mentalis)

4. Age and Weight Related Volume Loss
Juvederm Collection of HA Fillers:
Treatment based on MD Codes
Juvederm Voluma XC - 5 Syringes:



Bilateral treatment supraperiosteally with needle of Ck1, Ck2, Ck3, Ck5 (with needle change), and C2. Sub-dermal/Subcutaneous with 23g 2 in. cannula of Ck4, Jw2, Jw4, Jw5, C1, C5, and C6. Juvederm Ultra XC - 1 Syringe over 2 treatments: Lp1 with needle, bilateral NL1 with 23g 2 in. cannula

Follow- Up appointment at 4 weeks post filler procedure for assessment and continuation of care and scheduling patient 'check-up'.