

Sciton Laser

Patient Name:
Date:
Treatment #:
Fitzpatrick Skin Type: I, II, III, IV, V, V
Consent Signed:

Description/condition	Wavelength (nm)	Fluence (J/cm2)	Pulse Width (ms)	Temperature	Spot Size
Lentigines					
Melasma					
Full Face Rejuvenation					
Acne					
Vascular Lesions					
Pigmented Lesions					
Unwanted Hair					
Lax Skin					