

## PHOTO CONSENT FORM

All patients who are candidates for plastic surgery must have photographs taken before and after surgery.

I understand that photograph/video images will be taken before, during, and after my procedure(s) as a routine part of my medical care. I further understand that these photographs will be kept strictly confidential. I (please print name), \_\_\_\_\_ authorize *The Gill Center for Plastic Surgery & Dermatology* to take photographs/videos of me for medical purposes to be used for my care, insurance predeterminations, and examination strictly for medical office files only.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

\_\_\_\_\_

Additionally, I authorize the use of these images to be used for the purpose of:  
Communication, promotion, education, public relations, and marketing by Gill Plastic Surgery.

- |  |   |
|--|---|
| <input type="checkbox"/> YES <input type="checkbox"/> NO | In-office education including, but not limited to office <b>photo album</b> .   |
| <input type="checkbox"/> YES <input type="checkbox"/> NO | On practice <b>website</b> .  |
| <input type="checkbox"/> YES <input type="checkbox"/> NO | In print <b>advertisements</b> or <b>professional journals</b> .  |
| <input type="checkbox"/> YES <input type="checkbox"/> NO | On the <i>Gill Center for Plastic Surgery &amp; Dermatology</i> <b>social media</b> accounts including, but not limited to Facebook, Instagram, and Snapchat. |
| <input type="checkbox"/> YES <input type="checkbox"/> NO | <b>*VIDEO*</b> Video procedure in operating room for marketing purposes/social media posts.   |

**Strict Confidentiality Will Be Maintained.** Identifying features will be covered or hidden such as your face, clothing, jewelry, and tattoos. I understand that if surgery was performed above the shoulders (Facelift, Necklift, Eyelift, Ear Pinning, facials, injections, etc.) I may be recognizable to friends and family.

**This consent can be revoked at any time with a written request.**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

WITNESS: \_\_\_\_\_ DATE: \_\_\_\_\_