



VISAGE SURGERY CENTER

Oral & Maxillofacial Surgery
Facial Cosmetic Surgery

FAISAL A. QUERESHY, MD, DDS, FACS, INC.
BOARD CERTIFIED - MEDICAL DIRECTOR

Radiesse Treatment Form

Patient: _____

Treatment Date: _____

Treated By: _____

Areas: _____ Marionette Lines _____ N-L Folds _____ Other _____

Charge: _____

Notes:

Patient: _____

Treatment Date: _____

Treated By: _____

Areas: _____ Marionette Lines _____ N-L Folds _____ Other _____

Charge: _____

Notes:

Patient: _____

Treatment Date: _____

Treated By: _____

Areas: _____ Marionette Lines _____ N-L Folds _____ Other _____

Charge: _____

Notes:

Envision. Entrust. Embark.™

*Fellow American College of Surgeons • Diplomate American Board of Oral and Maxillofacial Surgery
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