

JOHNSON D DERMATOLOGY

Specializing In Skin Cancer • Providing Comprehensive Skin Care

Brad Russell Johnson MD, FAAD • Sandra Marchese Johnson MD, FAAD

Phone: (479) 649-3376 (DERM) • Fax: (479)646-0133

www.johnsondermatology.com • 9207 Highway 71 South Suite 9 • Fort Smith, AR 72916

COSMETIC INTEREST QUESTIONNAIRE

Patient Name: _____ Date: _____

Health issues and procedures or products of interest to you (please check all that apply).

- | | |
|--|---|
| <input type="checkbox"/> BOTOX [®] Cosmetic | <input type="checkbox"/> Skin Care Advice |
| <input type="checkbox"/> Chemical Peels | <input type="checkbox"/> Skin Care Products |
| <input type="checkbox"/> Lines Around Mouth | <input type="checkbox"/> Birthmarks |
| <input type="checkbox"/> Enhanced Lip Appearance | <input type="checkbox"/> Large Pores |
| <input type="checkbox"/> Skin Rejuvenation | <input type="checkbox"/> Liver Spots/Age Spots |
| <input type="checkbox"/> Redness/Red spots | <input type="checkbox"/> Loose Sagging Skin |
| <input type="checkbox"/> Hand Treatments | <input type="checkbox"/> Removing Leg Veins |
| <input type="checkbox"/> Acne | <input type="checkbox"/> Removing Facial Veins |
| <input type="checkbox"/> Hair Removal | <input type="checkbox"/> Spider Vein Treatments |
| <input type="checkbox"/> Laser Treatments | <input type="checkbox"/> Eye Treatments |
| <input type="checkbox"/> Skin Tag Removal | <input type="checkbox"/> Mole Removal |
| <input type="checkbox"/> Other, please specify | |

How did you hear about us?

- My physician (full name) _____
- A friend or family member (name) _____
- Internet
- Other

Is there anything else you would like to tell us?

May we please have your email address to send you information about our clinic?

Thank You!

