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Park Avenue Plastic Surgery

Cosmetic Interest Questionnaire

Dr. Monasebian and Park Avenue Plastic Surgery would like to respond to our patient's needs and provide the highest quality of care. In order to provide more information and services you are interested in or desire, we invite you to complete the following questionnaire.

Please check all that interest you and would like to receive more information:

- | | |
|---|--|
| <input type="checkbox"/> Facial Cosmetic Surgery and Implants
<i>Forehead; Eyes; Face; Nose and Neck</i> | <input type="checkbox"/> Botox |
| <input type="checkbox"/> Breast Augmentation (Silicone & Saline) | <input type="checkbox"/> Collagen, Juvederm, Radiesse skin fillers |
| <input type="checkbox"/> Breast Lift and Reduction | <input type="checkbox"/> Skin care advice and products |
| <input type="checkbox"/> Male Breast Reduction (Gynecomastia) | <input type="checkbox"/> Chemical Peeling and Dermabrasion |
| <input type="checkbox"/> Abdominoplasty (Tummy-Tuck) | <input type="checkbox"/> Birthmark and Tattoo removal |
| <input type="checkbox"/> Liposuction & Liposculpturing | <input type="checkbox"/> Microdermabrasion |
| <input type="checkbox"/> Arm and Thigh Recontouring | <input type="checkbox"/> Laser Hair Removal |
| <input type="checkbox"/> Vaginal rejuvenation & Labiaplasty | <input type="checkbox"/> Leg vein and spider vein removal |
| <input type="checkbox"/> Scar revision and Mole removal | <input type="checkbox"/> Lip augmentation or reduction |
| <input type="checkbox"/> Torn earlobes & prominent ear correction | <input type="checkbox"/> Laser skin treatment and rejuvenation |
| | <input type="checkbox"/> Other, please specify: _____ |

Please answer the following questions on a scale of 1 to 5 by circling the appropriate number:

- When looking at my face in the mirror, I believe I look younger, the same as, or older than my true age.

Younger Than		True Age		Older Than
1	2	3	4	5

- When looking in the mirror, I am not concerned, somewhat concerned, or very concerned about the appearance of my wrinkles.

Not Concerned		Somewhat Concerned		Very Concerned
1	2	3	4	5

Name

Date