

## JEFFREY B. WISE, M.D., F.A.C.S. Facial Plastic and Reconstructive Surgery Hair Restoration Surgery



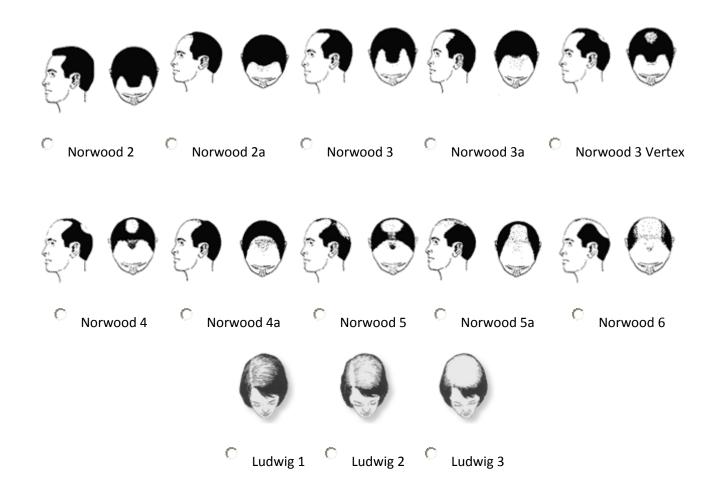
## WELCOME TO YOUR HAIR RESTORATION CONSULTATION

Wh	at is your current hair loss concern?			
	Starting to thin		Increased shedding	
	Advanced stage of thinning		Missing, damaged or sparse eyebrows	
	Overall thinning		Weak or sparse eyelashes	
	Receding hairline		Damaged or traumatized eyelashes	
	Bald spot forming in crown		Post-Plastic Surgery Hair Loss	
	Little or no hair on top of the scalp		Visible Scar	
	Itching or flaking scalp			
\ <b>A/b</b> .	ere are you in the hair restoration process?			
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	I've started researching my hair restoration options			
	I'm interested in starting non-invasive treatment ( PRP, Propecia, Minoxidil /Rogaine, Laser Therapy)			
	I've had a hair transplant before			
	I've had a consultation with another doctor			
	I'm interested in scheduling a surgical procedure within the next ninety days			
	I'm interested in scheduling a surgical procedure within th	e nex	t year	
Hair restoration solutions of interest:				
	NeoGraft FUE Surgical hair restoration (Follicular-unit extra	actio	n: FUE/FOX)	
	Medical therapy (PRP, Propecia, Minoxidil/Rogaine)			
	Laser hair therapy			
	Post-Plastic Surgery hair transplantation (describe below)			
	Eyebrow transplantation			
	Beard/moustache transplantation			
	Scar coverage			



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What is your family's history of hair loss?				
	Mother			
	Father			
	Maternal grandparents			
	Paternal grandparents			
	Brother/sister			
	Don't know			
Your personal hair restoration objectives (check all that apply):				
	Hairline restoration			
	Increase in frontal density			
	Crown coverage			
	Stop hair loss / decrease shedding			
	Touch-up, refinement or correction of previous procedure			
	Scar Coverage			
	Other (please explain):			
Patient Comments				
Do you have any concerns with the hair transplant procedure? Yes No				
If yes, what are they?				