

Palmerston Fotofinder Medical Questionnaire/Consent Form

| Name | Date of Birth (M/D/Y) | | | | | | |
|---|------------------------------|--|----------------------------------|----------------------------------|--|------------------------------|--|
| Any personal history of skin cancer? (If so, please specify the type: BCC, SCC, or melanoma) | | | | | | | |
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| | | | | | | | |
| Any family history of skin cancer? (If so, please specify the | e type: BC | C, SCC, or i | melanoma) | | | | |
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| Which part of the world were you raised? | | | | | | | |
| | | | | | | | |
| (Some countries have higher rates of Melanoma of the skin such as; Australia, South Africa, New Zealand, Norway, Denmark, Netherlands, Sweden, Germany, Switzerland, Belgium, Ireland, France, UK, USA, Italy | | | | | | | |
| What is your skin type? | | | | | | | |
| (Please use the Fitzpatrick Skin Type Chart as a guide) | | | | | | | |
| | | | | | | | |
| Do you or have you used a tanning bed? | TYPE 1 Light, | TYPE 2 White, | TYPE 3 Medium, | TYPE 4 Olive, | TYPE 5 Brown, | TYPE 6 Black, Very Dark | |
| be you of mare you used a talliming seal. | Pale White | Fair | White to Olive | Moderate Brown | Dark Brown | Brown to Black Never burns, | |
| List all past surgeries | Always burns, never tans. | Usually burns, tans with difficulty. | Burns mildly, tans gradually. | Rarely burns, tans with ease. | Very rarely burns, tans very easily. | tans very easily. | |
| List all past surgeries. | | | | | | | |
| | | | | | | | |
| List all medical issues you have been diagnosed with. | | | | | | | |
| | | | | | | | |
| List all assument modifications | | | | | | | |
| List all current medications. | | | | | | | |
| | | | | | | | |
| Are you allergic to any medication(s)? | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Allergies: No Yes Please describe reaction. | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| What is your occupation? | | | | | | | |
| Have you ever had any skin problems? | | | | | | | |

Any history of fainting during procedures.(blood tests – etc.)

Are you concerned about any lesion(s) today? If so, please indicate where they are on the pictogram.

For patients being assessed for a single lesion only, please answer the following:

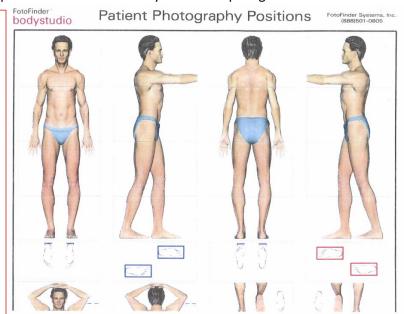
Where on the body is the lesion located?

How long has the lesion been present for?

How has the lesion changed?

Does the lesion bleed or scab? If so, when did this start?

Is there any additional information you would like to inform us about regarding this lesion?



First and last name of your dermatologist.

First and last name of General Practitioner.

I consent to sending the Fotofinder report to my doctor/dermatologist.

Did you ever have a skin biopsy? If so, please attach results and specify on the pictogram the exact anatomic location where the biopsy was done. (Please note if this information is not provided it may result in your appointment being rescheduled to another date.)

What is your preferred method of contact?

----Let us know if you have any questions regarding the foregoing.--------

This Fotofinder scan does not preclude the need for a full skin examination by your primary physician and /or dermatologist on a yearly basis (or a more frequent basis based on risk factors)

Fotofinder has been designed to screen for skin cancer of the melanoma type. Other skin cancer types (basal cell carcinoma, squamous cell carcinoma), are not part of Fotofinder screening.

Mole Mapping can sometimes diagnose melanoma on a baseline assessment, but a very early melanoma in evolution may not be picked up on a baseline scan. It is important to understand that the real value of Mole Mapping is in detecting changes to existing lesions, or detection of new lesions on follow-up scans. Mole Mapping technology is focused on the diagnosis of Melanoma, not actinic keratoses and non-melanoma skin cancers, which should be screened for by your dermatologist. Follow-up and repeat assessments are crucial since melanoma will change over

time. We recommend yearly scans for most individuals, but high-risk persons (or a high-risk lesion identified by Mole Mapping) may need more frequent evaluation. If you notice any changes, it is recommended that you request a repeat scan earlier. Mole mapping does not replace the need for a complete physical exam by your dermatologist. The average person has too many moles to catalogue effectively. Because of this, Mole Mapping is a valuable tool in helping your physician to identify Melanoma.

Fotofinder takes specialized pictures of your skin. Covered areas cannot be visualized. You are encouraged to wear the special undergarments provided to you for the purposes of this examination. YOU ARE ALSO ENCOURAGED TO SHAVE EXCESSIVE BODY HAIR, SO IT DOES NOT HIDE ANY MOLES.

I understand that Palmerston Mole Scan Clinic and its staff will not be held responsible for any skin lesion that I have chosen to cover up under my undergarments.

Tattoos make it more difficult to evaluate skin lesions. Please let us know if there is a lesion you are concerned about, which is within a tattoo.

We are not responsible for any moles/lesions covered or hidden by tattoos, that were not specifically brought to our attention

| l, | , consent to having pictures taken of my skin by the Fotofinder | | | |
|---|---|--|--|--|
| ATBM master, and consent to having the pictures stored on the secure server of Palmerston Mole Scan Clinic. | | | | |

We strive to operate on time. Our appointment times an average of 30 minutes long. In the rare instance where more time is needed, and to respect the time of other patients booked, those who require longer appointment times may be asked to rebook for follow-up images on another day.

The standard appointment covers 10 baseline views and up to 2 additional segments.

The number of dermatoscopic images taken for each visit is based on the overall review of your scan by the dermatologist.

In the rare instance where more views are requested by the patient, each additional view will be charged at \$50 per image.

I confirm that Palmerston Mole scan clinic and its doctors and technicians, are not my treating health care professionals, and any abnormality identified shall be investigated and biopsied (if necessary) by my treating physician, my family physician, or my dermatologist.

IF REQUIRED, I consent to assessment by Dr. Robert Solomon -dermatologist - which will be billed to OHIP.

You must be a resident of Canada to proceed with our services. A Canadian photo identification must be presented at your appointment.

I acknowledge that I have read and understood the information presented above.

| Health Card Number | Version Code | Expiry Date |
|--------------------|--------------|-------------|
| Signed | Date | |

We do everything we can to ensure that the prices on our WEBSITE, and THOSE ADVERTISED ON OUR PARTNER WEBSITES other companies websites are ACCURATE. **Prices may be changed at any time without NOTICE.**

However, if you have booked an appointment but have not yet paid for the service, we guarantee the price for one week from when the appointment was placed.

Prices listed in any other websites may not be accepted. We offer our services through different online channels and we cannot always control when they are updated. IN CASE OF DISCREPANCY, THE PRICE LISTED ON OUR WEBSITE SHALL PREVAIL.

| []TTC ad, ()bus, ()billboard |
|---------------------------------|
| [] Other social media |
| [] Word of mouth |
| [] Other, please specify. |
| If referred, who referred you? |
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