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Cosmetic Skin Lesion Removal Agreement

I, _____ (print name), understand that the lesion(s) I am requesting to remove today are benign and considered to be cosmetic by insurance carriers. Therefore, we will not be submitting to any insurance company. I am aware that this will be an out-of-pocket expense. Cosmetic surgery can be described as “surgery which can be expected primarily to improve physical appearance and/or which is performed primarily for psychological purposes, and/or which restores form, but does not correct or materially improve a bodily function.”

These benign skin lesions include: acquired moles, cysts, seborrheic keratoses, skin tags, hyperkeratoses, molluscum contagiosum, milia, viral warts, benign neoplasms, hemangiomas, lipomas, and pyogenic granulomas.

Additionally, the treatment and estimated costs have been discussed with me. **If excision of benign moles or cysts is done during a medical visit**, a nominal fee of _____ will be charged.

For non-excision removals, a nominal fee of \$20 per lesion is charged, with a \$100 minimum. I am aware that one treatment may not be sufficient for complete removal of a cosmetic lesion, and if further treatment is desired the policy above would apply.

Signature: _____

Date: _____