



TREATMENT AREAS

TempSure™ *Envi*

Patient Name: _____

Gender: _____ Date: _____

DAY 1

DAY 2

DAY 3

1

Handpiece Size:

mm

mm

Time:

Generator Setting:

Skin Temperature:

FRONT

BACK

FRONT

BACK

FRONT

BACK

2

Handpiece Size:

mm

mm

Time:

Generator Setting:

Skin Temperature:

FRONT

BACK

FRONT

BACK

FRONT

BACK

3

Handpiece Size:

mm

mm

Time:

Generator Setting:

Skin Temperature:

FRONT

BACK

FRONT

BACK

FRONT

BACK

Notes: _____
