



**Medical Photograph Consent**

I consent for medical photographs to be taken of me by the staff or representatives of MOD Dermatology, PC. I understand that the images will be placed in my medical record and will be used for medical purposes only.

Patient Name \_\_\_\_\_

Patient/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

Melanie Ortleb, MD, FAAD  
Board Certified in Dermatology and  
Micrographic Dermatologic Surgery  
Gage Rensch, MD, FAAD  
Board Certified in Dermatology and  
Micrographic Dermatologic Surgery

Amy K. Price, PA-C  
Mary Otteman, PA-C  
Amanda Strudthoff, PA-C  
Jennifer Keenan, PA-C

16910 Frances Street  
Omaha, Nebraska 68130  
Phone: 402-505-8777  
Fax: 402-933-7767  
[www.moddermatology.com](http://www.moddermatology.com)