

BOTOX | DYSPORT CONSENT



Date: _____

Patient Name: _____

Botulinum Toxin, a neurotoxin, produced by the bacterium *Clostridium botulism*, is used in the correction of moderate to severe facial wrinkles and folds. Botox | Dysport works by blocking impulses from the nerve to the muscles in the face. Successful treatment includes frown lines, crow's feet and expression lines. This injection relaxes the muscle so they no longer contract with strength, however the nerve endings grow new connections to the muscles at the Botox | Dysport injection sites allowing the muscles to grow back in strength over time.

RESULTS. *Please initial in the box:*

The results of Botox | Dysport can take 14 days to become visible, and usually lasts between 3-5 months, although it can be shorter or longer. For best results, Botox | Dysport treatments should become a repeat appointment 4 times a year. There are no guarantees or promises that Botox | Dysport will improve the particular concern to be corrected. Botox | Dysport follow-up visits are advised and should be scheduled 14 days after each treatment.

I acknowledge I have been informed of the Botox | Dysport Results and my questions have been answered satisfactorily.

RISKS AND COMPLICATIONS. *Please initial in the box:*

The injections might feel like a small bug bite. There may be some redness at the injection sites, if so you may apply an ice pack. There may be slight, temporary bruising or mild swelling at the injection sites. There may be numbness or a rash at the injection sites. Slight headaches may occur after a Botox | Dysport treatment. In rare cases, a temporary weakness may occur in nearby muscles (ex. Drooping eyelid).

I acknowledge I have been informed of the Botox | Dysport Risks and Complications, and my questions have been answered satisfactorily.

CONTRAINDICATIONS. *Please initial in the box:*

I confirm that I am not pregnant or breastfeeding at this time. I confirm that I am not allergic to *Clostridium botulism*, the neurotoxin used. I confirm that I have not used Accutane in the past 6 months. I confirm that I do not have any significant neurological disease. I confirm that I am in good health and not under the care of any physician for a medical complication.

I acknowledge I have been informed of the Botox | Dysport Contraindications, and my questions have been answered satisfactorily.

PRE & POST-TREATMENT INSTRUCTIONS. *Please initial in the box:*

I acknowledge I have received the Botox | Dysport Pre & Post Treatment Instruction Sheet and confirm that all my questions have been answered satisfactorily.

PAYMENT. *Please initial in the box:*

Botox | Dysport treatments are a cosmetic procedure, not covered under insurance, and I acknowledge that the payment due for the treatment is entirely my responsibility. I understand that Botox | Dysport treatment purchases cannot be refunded or returned.

I acknowledge I have been informed of the Botox | Dysport Payment Policy, and my questions have been answered satisfactorily.

PHOTOGRAPHS. *Please initial in the box:*

I hereby authorize pre-treatment, post-treatment and during treatment photographs to be taken of my treatment(s) at River Oaks MedSpa and understand they may be used for purposes of documenting treatments, training purposes, advertising and or marketing. I understand that there will not be compensation for the use of said images now or in the future.

I understand the Photograph Policy.

By signing below, I acknowledge the results, risks and complications, contraindications, post-treatment instructions, payment policy and photography consent of Botox | Dysport Treatments now and in the future. I acknowledge that all my questions have been answered to my satisfaction by the medical staff of Dr. Derek C. Lou and River Oaks MedSpa. I hereby give my consent to Botox | Dysport Treatments and agree to proceed with the treatments.

Client Signature: _____

Date: _____

Nurse Signature: _____

Date: _____

BOTOX | DYSPORT

PRE & POST TREATMENT



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PRE-TREATMENT INSTRUCTIONS.

Inform your Registered Nurse Injector if you have a history of Perioral Herpes to receive advice on antiviral therapy prior to Botox | Dysport Treatments

3 DAYS PRIOR TO TREATMENT:

- AVOID the use of Advil, Motrin, Ibuprofen, Aspirin, Excedrin, Aleve, Fish Oils and Vitamin E Supplements (to help prevent bruising)
- AVOID the use of topical products containing Tretinoin, Retin-A, Retinols, Retinoids, Glycolic Acids, Alpha Hydroxy-Acid or other "Anti-aging" products.
- AVOID waxing, bleaching, tweezing, or the use of hair removal cream on the area to be treated.
- AVOID excessive alcoholic beverages 24 hours before your treatment to avoid extra bruising

DAY OF TREATMENT:

- Arrive with a clean face (please do not wear makeup). You may apply makeup after your treatment as advised by your Registered Nurse Injector.

POST-TREATMENT INSTRUCTIONS.

- Do not lie down flat for 2-4 hours
- No activities that require you to be bent over at a 90 degree angle for 24 hours
- No cardio exercise or excessive sweating for 24 hours.
- AVOID the use of Advil, Motrin, Ibuprofen, Aspirin, Excedrin, Aleve, Fish Oils and Vitamin E Supplements for 2-3 days after treatment (Contact your doctor with questions about prescription drugs and the administering of Botox | Dysport).
- If a bruise should occur following the treatment, **apply River Oaks MedSpa's Arnicare Gel or Crème** daily to hasten the recovery of the bruised area (*available for purchase*).
- Schedule your 14 day follow up visit with a front desk associate to insure that you are pleased with your results.
- Call our facility if you have concerns at any time related to the treatment

RESULTS:

The results of Botox | Dysport can take 14 days to become visible, and usually lasts between 3-5 months, although it can be shorter or longer. For best results, Botox | Dysport treatments should become a repeat appointment 4 times a year. There are no guarantees or promises that Botox | Dysport will improve the particular concern to be corrected. Botox | Dysport follow-up visits are advised and should be scheduled 14 days after each treatment.