

**Injectable Neurotoxin Administration Consent Form**

What is an Injectable Neurotoxin?

Injectable neurotoxins are created using purified Botulinum Toxin Type A from the bacteria that causes Botulism (*Clostridium botulinum*). The injections have been approved for over a decade to treat muscle spasms, the appearance of facial lines, bladder muscle spasms, hyperhidrosis (excessive sweating), migraines, and other neuromuscular problems. Neurotoxins block the release of neurotransmitter (acetylcholine) from the nerves that control muscle activity, thereby causing the target muscle to relax for a temporary duration.

Risks and Side Effects:

There are no known permanent side effects with the cosmetic use of Botulinum Type A. Common risks and temporary side effects may include but are not limited to: headache, ptosis (temporary eye droop), bleeding, bruising, redness at the site, swelling, rash, infection, asymmetry of the muscles, spocking of the eye brow. Please tell your Clinician about any medications that you are taking, especially those that thin your blood or cause increased bleeding (such as aspirin, warfarin or fish oil).

Longevity:

The manufacturer suggests that the outcomes are intended for a 3-4 month duration with therapeutic dosing. However, each face is unique; individualized dosing is recommended to achieve the desired results, and longevity of results will vary from person to person.

Outcomes are subjective and unique. Additional units may be required to optimize results to meet your treatment goals. Results are temporary, and several treatment sessions may be necessary to achieve optimal results.

Post-Treatment Care:

Please refrain from any forward-bending activities such as yoga or strenuous exercise for a minimum of 4 hours and remain upright if possible. Avoid any facial prone positions (lying face forward). It is advised to refrain from any sort of facial treatment or massage within the first 24 hours after neurotoxin injection. You may ice the injection sites following treatment to help prevent possible bruising.

Pregnancy and Breastfeeding:

There is no research done to support the safety of Injectable Neurotoxin during pregnancy and/or breastfeeding, and therefore it is NOT recommended. Please let your Clinician know if you are or think you may be pregnant or are breastfeeding.

Consent:

By signing below, I acknowledge that I have read the preceding material and give my informed consent for the date below and all subsequent Injectable Neurotoxin treatments with the above understood. I will notify my Clinician if there are changes in my health or medication history. I hereby release the Nurse and/or Physician performing the injections and the facility in which I am treated from liability associated with this procedure.

I further understand and agree that all services rendered are charged directly to me, and I am personally responsible for payment. I agree in the event of non-payment to bear the cost of collection, and/or court costs and reasonable legal fees, should they be required for my payment to be obtained.

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

Patient Signature \_\_\_\_\_ Date \_\_\_\_\_