

## BOTOX (Botulinum A Toxin) INFORMED CONSENT

I, \_\_\_\_\_, understand that I will be injected with Botulinum A Toxin (Botox) in the facial muscles to paralyze these muscles temporarily. The areas injected may include a combination of the space in between the eyebrows, the forehead, and the crow's feet area near the outer eyes.

Botulinum A Toxin (Botox) injection has been FDA approved for use in the cosmetic treatment for glabellar frown lines only – the wrinkles between the eyebrows.

Injection of Botox into the small muscles between the brows causes those specific muscles to halt their function (be paralyzed), thereby improving the appearance of the wrinkles. I understand the goal is to decrease the wrinkles in the treated area. This paralysis is temporary, and re-injection is necessary within three to four months. It has been explained to me that other temporary and more permanent treatments are available.

***The possible risks and side effects of Botox include but are not limited to:***

1. Swelling, rash, headache, local numbness, pain at the injection site, bruising, respiratory problems, and allergic reactions are some of the potential risks.
2. Infections may occur following any type of injections. These are typically treatable. In rare cases, permanent scarring in the area can occur.
3. Most people note lightly swollen pinkish bumps where the injections went in for a couple of hours or even several days following botox injections.
4. Although many people with chronic headaches or migraines often get relief from Botox, a small percent of patients get headaches following treatment with Botox, for the first day. In a very small percentage of patients these headaches can persist for several days or weeks.
5. Flu like symptoms with mild fever and back pain are sometimes noted following injections.
6. Respiratory problems such as bronchitis or sinusitis, nausea, dizziness, and tightness or irritation of the skin.
7. Bruising is a possibility with any skin injections. This bruising can last for several hours, days, weeks, months and in rare cases the effect of bruising could be permanent.
8. While local weakness of the injected muscles is representative of the expected pharmacological action of Botox, weakness of adjacent muscles may occur as a result of the spread of the toxin.
9. More than one injection may be needed to achieve a satisfactory result.
10. Another risk when injecting Botox includes corneal exposure. Following injection, some people may not be able to blink their eyelids as often as they should to protect the eye. This reduced blinking has been associated with corneal ulcerations.
11. Occasionally the eyelid may droop due to migration of the chemical. There are medications that can help lift the eyelid; however, if the drooping is too great the eye drops are not that effective. These side effects can last for several weeks or longer. This occurs in 2-5 percent of patients.
12. Temporary double vision may also result from, injections around the eye.
13. I will follow all aftercare instructions as it is crucial I do so for healing.

14. The number of units injected is an estimate of the amount of Botox required to paralyze the muscles. I understand there is no guarantee of results of any treatment. I understand the regular charge applies to all subsequent treatments.
15. As Botox is not an exact science, there might be an uneven appearance of the face with some muscles more affected by the Botox than others. In most cases this uneven appearance can be corrected by injecting Botox in the same or nearby muscles. However in some cases this uneven appearance can persist for several weeks or months.

This list is not meant to be inclusive of all possible risks associated with Botox as there are both known and unknown side effects associated with any medication or procedure. Botox should not be administered to a pregnant or nursing woman.

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

By signing below, I acknowledge that I have read the foregoing informed consent and agree to the treatment with its associated risks.

I hereby give consent to perform this and all subsequent Botox treatments with the above understood. I hereby release the doctor, the person injecting the Botox and the facility from liability associated with this procedure.

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