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f needlenurseaesthetics

Botulinum Toxin

	Medical History	Treatment Record	d
Full Name:			
Age:	DOB:	Height:	Weight:
Address:			
		Postcode:	
Mobile:		Home Tel:	
Email:			
Allergies:			
Non Smoker:	Ex Smoker:	Smoker: Cigar	rettes per day:
Alcohol unit consumption pe	r week:	<u>I</u>	
Medical conditions past and	present;	Please tick any of the followir ever had in the past:	ng illnesses you have or have
		☐ Myasthenia Gravis ☐ Hep	oatitis 🗆 Eye diseases
		☐ Autoimmune diseases ☐	Vision Problems
		☐ Numbness to certain areas	☐ Muscle weakness
		☐ Amyotrophic Lateral Sc lero	sis (ALS)
		☐ Eaton Lambert Disorder	
What medications are you cu	rrently taking?		
Are you pregnant or lactating	currently?		
Any previous operations?			
Previous cosmetic procedure	s?		
Current skin care regime:			
Have you had the Covid19 vac	ccine?	1st dose date:	2nd dose date:
		ermine my medical and cosme	
		dical history/health, I will report	
as soon as possible. I have read	a and understand the above m	edical questionnaire. I acknow	leage that all answers have

been recorded truthfully and I will not hold any staff member responsible for any errors or omissions that I have made in the completion of this form.

Patient Signature:	Date:	

CONSENT TO BOTOX®/ BOTULINUM TOXIN A TREATMENT Botox® is a neurotoxin produced by the bacterium Clostridium A. Botox® can relax the muscles on areas of the face and neck which causes wrinkles associated with facial expressions Treatment with Botox can cause your facial expression lines or wrinkles to essentially disappear or diminish. Botox is diluted into a very controlled solution and when injected into the muscles with a very thin, small needle, it is almost painless. The procedure takes about 20-30 minutes and the results last 3-6 months.

RISKS & COMPLICATIONS – It has been explained to me that there are inherent and potential risks and side effects in any invasive procedure and in this specific instance, such risks include, but are not limited to:

- 1) Post-treatment: discomfort, swelling, redness and bruising
- 2) Post-treatment bacterial and/or fungal infections requiring further treatment
- 3) Allergic reactions
- 4) Minor temporary droop of eyelid(s) in approximately 2% of the injections given (this usually lasts 2-3 weeks);
- 5) occasional numbness of the forehead lasting up to 2-3 weeks;
- 6) transient headache;
- 7) flu-like symptoms

Initial:

PREGNANCY, Allergies and Neurological Disease - I am not aware that I am pregnant nor am I trying to get pregnant. I am not lactating (nursing) nor do I have any significant neurological diseases including, but not limited to: Myasthenia Gravis, Multiple Sclerosis, Lambert-Eaton Syndrome, Amyotrophic Lateral Sclerosis (ALS) or Parkinson's. I have no allergies to the toxin ingredients or to human albumin.

Initial:

PAYMENT

I understand that this procedure is cosmetic and that payment is my responsibility at the time of treatment.

Initial:

RESULTS

I am aware that when small amounts of purified botulinum (Botox®) are injected into a muscle, it causes weakness of that muscle. This appears in 5-10 days (with full effects at 2 weeks) and usually lasts 3-6 months but can be shorter or longer. In a very small number of individuals, the injection does not work as satisfactorily or for as long as usual. I understand that I will not be able to "frown" while the injection is effective but that this will reverse after a period of months at which time re-treatment is appropriate. I understand that I must stay in the erect posture and that I must not manipulate the area (bend over, have a massage etc) of the injection for the 2 hours post-injection period and should not wear makeup (if applicable) for up to 24 hours after the procedure. Botulinum based treatments are never guaranteed to eliminate wrinkles, particularly static wrinkles and the signs of ageing are also contributed by other factors like diet, lifestyle, and smoking status for which the client is responsible.

Initial:

PUBLICITY MATERIALS

I authorise the taking of clinical photographs and videos and their use for scientific and marketing purposes both in publications and presentations. During courses given Needle Nurse Aesthetics, I understand that photographs and video may be taken of me for educational and marketing purposes. I waive my rights to any royalties, fees and to inspect the finished production as well as advertising materials in conjunction with these photographs.

Initial:

I hereby consent to receive treatment with Botox® injections for the condition known as Facial Dynamic Wrinkles. The procedure has been explained to me. I have read the above and understand it.

Initial:

PRE-TREATMENT INSTRUCTIONS

It is prudent to follow some simple guidelines before treatment by reducing some possible side effects associated with the injections; this can make all the difference between a fair result and a great result. We realise that this is not always possible; however, minimizing these risks is always desirable.

AVOID alcoholic beverages at least 24 hours prior to treatment (alcohol may thin the blood increasing the risk of bruising).

AVOID anti-inflammatory/blood thinning medications ideally for a period of 2 weeks before treatment. Medications and supplements such as Aspirin, Vitamin E, Ginko Biloba, St. John's Wart, Ibuprofen, Motrin, Advil, Aleve, Vioxx, and other NSAIDS are all blood-thinning medications and can increase the risk of bruising/swelling after injections. Schedule the Botox® appointment at least 2 weeks prior to any special event which may be occurring: i.e., wedding, vacation, etc.

Initial:

POST-TREATMENT INSTRUCTIONS

The guidelines to follow post treatment have been used for years and are still employed today to prevent the possible side effects of ptosis (eyelid droop). These measures should minimize the possibility of ptosis in almost 98% of the cases. No straining, heavy lifting, or vigorous exercise for 2-3 hours following treatment because we don't want to increase circulation to that area (this washes away the Botox® from where it was injected). It is now known that it takes the toxin approximately 2 hours to bind itself to the nerve to start its work. This waiting period continues to be recommended by most practitioners. You must remain upright for four hours following treatment. AVOID manipulation of the area for 3 hours following a treatment (for the same reasons listed above). This includes not doing a facial, a peel, or a microdermabrasion after treatment with Botox®. Any of these procedures can be done in the same appointment only if they are done before the Botox®. Simple facial exercises in the injected areas are recommended or I hour following treatment (to stimulate the binding of the toxin only to this localized area). It can take 5-10 days to take full affect, and in some cases up to two weeks. It is recommended that the patient contacts Needle Nurse Aesthetics a follow up appointment 2 weeks after treatment if required. Makeup should not be applied before leaving the office. Retin-A, Glycolic Acid, Vitamin C, and Kinerase can be used; however, you must avoid the area treated with Botox® for 24 hours.

The Botox® treatment I am receiving is for: I certify that I have been counselled in post-treatment instructions and have been given written instructions as well. My questions have been answered satisfactorily. I accept the risks and complications of the procedure. I certify that if I have any changes occurring in my medical history, I will
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notify Needle Nurse Aesthetics immediately
Patient: Date: