

BOTOX/DYSPORE CONSENT

Patient: _____

_____ To our patients: You have the right to be informed about your skin condition and treatment so that you make the decision whether or not to undergo the procedure after knowing the risks and complications involved. This disclosure is not meant to scare or alarm you. It is simply an effort to better inform you so that you may give or withhold your consent for the treatment program.

_____ I authorize **Barbara L. Persons, MD/ Melissa Gorden, RN / Joyclyn Parker, RN** to administer Botox/Dysport treatment to improve the appearance of my wrinkles. Botox/Dysport is the trademark for botulinum toxin. These injections have been used for more than a decade in children and adults to improve the problems of muscle spasm of the facial muscles. This toxin has also been useful to correct double vision due to muscle imbalance. Injection of minute amounts weakens the muscle and prevents frowning and crow's feet. ****Please note**, if this is your first injection, the appearance of lines may still be present even though the muscle has no movement. It could take up to several treatments before expression lines soften or disappear. Even though one may have no muscle movement, there can still be lines present simply due to the fact that the skin has a memory of being creased and will take time to soften as the muscle continues to lay flat underneath. Although the results are usually dramatic, I have been informed that the practice of medicine is not an exact science and that no guarantees can be made concerning expected results in my case. The solution is injected with a small needle into the muscle. The benefits will develop over the next seven to fourteen days. Less frowning will be possible.

_____ Side effects and complications have been minimal. Occasionally, slight swelling and/or bruising may last for several days after the injections. Rarely, an adjacent muscle may be weakened for several weeks after an injection. Side effects include muscle soreness, headaches, inability to properly close mouth or an a-symmetric smile when Botox/Dysport is injected in mid to lower face and neck. Incomplete effect may require an additional treatment one month after initial treatment.

****Please note-** Administration of Botox/Dysport is not recommended during pregnancy or nursing. Although it is not known whether this drug is excreted in human milk, because many drugs are excreted in human milk, caution should always be exercised while nursing.

It has been reported that a small % of the population may be non-responsive to Botox/Dysport treatment. Duration of treatment is an average of 3-6 months.

_____ I have been advised of the risks involved in such treatment, the expected benefits of such treatment, alternative treatments including no treatment at all.

_____ I have been instructed in post care instructions and agree not to lie down or recline for 4 hours, exercise, or massage the treatment area.

_____ I understand that additional units or touch ups may be needed to achieve desired look. If you choose to spread out the units purchased instead of using the amounts recommended by the manufacturer and by the doctor, you may not get the full effect. Touch-ups and additional units cost \$4.80 for Dysport and \$16/unit for Botox.

Patient Signature

Date

Witness Signature

Time

Dr. Barbara L. Person

Time