

## Informed Consent for Botulinum Toxin Injections

Botox®/Dysport®/Xeomin®/Jeuveau® therapy for wrinkles is an injection treatment designed to reduce facial expression lines. Botox®, Dysport®, Xeomin® and Jeuveau® are the "brand" names for Botulinum purified protein complex. This therapy works best for "dynamic" lines and wrinkles.

Botulinum Toxin (BT) therapy is temporary. It will have to be repeated on a regular basis (every 3-4 months on average) to remain effective. The effect gradually begins to take effect over several days and is not complete for at least two weeks.

BT treats the muscle to stop the movement that cause the wrinkles. BT does not directly treat the skin. Etched in lines may not go away with your first treatment. Lines that are deeply etched may require fillers in addition to BT.

Elite by Omni BT treatment fees are priced per unit of product used. The three most common areas are the forehead, crows' feet, and the gabellar frown lines ("The elevens".) Each area typically requires about 45 units of Dysport or 15units of Botox. Some people will require less and some may require more.

Dysport is our preferred BT due to the longevity and reliability. In our experience, Xeomin® and Jeuveau® last about 10 weeks, Botox® typically lasts about 12 weeks and Dysport can last about 16 weeks and onset of action is quicker. Because of the large volume of Dysport® that we purchase every month, we are able to get the best pricing on Dysport® and are able to pass the savings onto you. We do carry Botox® for the people who prefer this brand. We currently do not carry Jeuveau® or Xeomin®.

Some people are considered to be "non-responders." You may develop an immunity to the product and stop responding or you may be one of the rare people who just do not respond. Our injector reserves the right to not treat any patient that is determined to be a non-responder. Some people are partial non-responders and may require more than the usual amount of BT. All prices are subject to change.

Results will take at least 7 days to see the full effects of the treatment. If you received the amount of product recommended by our injector, and you still have significant muscle movement, you must wait at least 10 days and no more than 30 days after treatment for a touch up treatment. We will not charge you for the touch up, but we will recommend more units for your next treatment. If you want less product than is recommended by your injector, you will need to pay for any touch up treatments.

Following your treatment, you should make exaggerated facial expressions to help distribute product into the treated muscles. Due to your unique skin composition, you acknowledge that there are no guarantees that you will be satisfied with your results.

In order to minimize bruising and or swelling:

- No alcoholic beverages 24 hours prior to treatment
- Unless medically necessary, stop aspirin, ibuprofen vitamin E, and ginko biloba 1 week prior to treatment. You can take Arnica Montana 3 tabs under the tongue 3x a day starting one day before treatment and continue for 3 days after treatment. You can also use Arnica cream or gel or eat fresh pineapple.

To minimize the risk of the product migrating outside of the treated area follow these recommendations:

- Do not attempt to massage the treated area.
- Do not lie down for 4 hour after the treatment.
- Do not engage in any activities that involve rapid up and down head movements such as working out for 24hrs. after treatment.

Contraindications For This Treatment Include:

1. Pregnant or lactating women
2. Clients with allergies to human albumin (small risk of viral transmission from human albumin used in Type A to provide a larger particle)
3. Infection, inflammation, or dermatitis of areas to be injected
4. Fever, flu, or cold symptoms
5. Facial asymmetry such as Bell's Palsy
6. Clients with neurologic disorders including:
  - Amyotrophic Lateral Sclerosis (Lou Gherig's Disease)
  - Myasthenia Gravis
  - Lambert Eaton Disorder
  - Multiple Sclerosis
  - Parkinson's disease

PRECAUTIONS:

- Antibiotics may potentiate the effects of Botox/Dysport
- Clients taking aminoglycosides or medications that interfere with neuromuscular transmission may have a potentiated effect
- Thick, sebaceous skin may have very deep wrinkles making them a poor candidate
- A natural eyelid ptosis may be more susceptible to drooping of the eyelid.
- BT does not diffuse over scar tissue (the appearance of scar tissue may diminish following injection of BT into neighboring wrinkles).
- Due to the possibility of bruising, you should schedule BT injections at least 2 weeks prior to an important event, 3-4 weeks prior is recommended.

I am aware of the following risks:

- Mild to moderate discomfort or pain (pin-prick sensation).
- Slight redness or swelling of the skin, usually lasting only a few hours.
- Bruising in the treated area that may last for several days after the injections.

Though rare, I am aware the following may also be considered a risk:

- Temporary eyebrow, lip, or eyelid drooping and/or double vision..
- Transient muscle twitching.
- Transient headache, swallowing, or breathing difficulties.
- Infection. Whenever the skin barrier is penetrated infection is possible. Should any type of skin infection occur additional treatment, including antibiotics, may be necessary.

I understand that this treatment may involve risks of complication from both known and unknown causes, and I freely assume those risks. Prior to receiving treatment, I have been candid in revealing any condition that may have a bearing on this procedure.

I consent and authorize a staff member of Omni Health Professionals, LLC, who has been trained, to perform Botox/Dysport injections on me. I also understand that results vary from person to person, that results are not guaranteed, and that no refunds will be given.

I understand that complications can result from any treatment and I will be responsible for costs that may be associated with treatment of any complications.

I certify that I have read this entire informed consent, understand and agree to the information provided. I agree to have my photograph taken to document my condition. A member of the Omni Health Professionals, LLC staff has explained the nature of my condition, the nature of the procedure, alternative treatments, and the benefits to be reasonably expected compared with alternative approaches. This document is a written confirmation of this discussion.

My questions have all been answered to my satisfaction, and I understand that there is a fee for this procedure.

-I agree to adhere to all safety precautions during the Botox/Dysport injection and to follow post-BT injection instructions.

-I agree that this consent supersedes any previous verbal or written disclosures. This consent is valid for all of my BT injections in the future as well.

-I understand that the RESULTS ARE NOT PERMANENT and I will need repeat treatments about every 3 to 4 months to maintain.

I understand that results are not guaranteed and I will be responsible for payment regardless of outcome.

Full Name: \_\_\_\_\_

Signature: \_\_\_\_\_