

Consent - Filler

Patient details

Patient name _____

Patient DOB _____ Patient postcode _____

Patient email address _____

Clinician Details

Injector _____

Prescribing doctor _____

Information

1. Dermal filler, also known as "filler", is a special medical gel made of a naturally occurring substance called "hyaluronic acid" (HA). There are several different brands, which are almost identical ("Juvaderm", "Restylane", "Princess"). The treatment is approved and safe when prescribed by a doctor.
2. The effects of the treatment will be noticeable immediately, but there is a limit to how much filler it is reasonable to do at one time, so it may take more than one treatment session to achieve the look you are after. The effect of the filler will usually last for 3-12 months depending on the area treated. After that time the product is naturally degraded by your body.
3. The aim of our therapy is to use subtle amounts of anti-wrinkle medication to create a natural, fresher, more youthfull look, without limiting your ability to express yourself. We will not eliminate all signs of aging, but instead aim to produce a soft, rested face. Ideally, no one will know we were there!
4. We will consult with you about where you feel treatment would benefit you most, and we will also offer our recommendation. Each treatment will be tailored to you individual needs. Prices are per millilitre of dermal filler, and the amount required may vary. We will confirm the plan with you before we proceed.
5. The procedure will involve several injections with a very fine needle in the areas discussed in your treatment plan. You may feel some slight discomfort but it is usually not painful. It will take about 30 minutes of sitting comfortably.
6. You should not apply make-up to the treated areas for 12 hours afterwards, and you should avoid massaging or otherwise putting pressure on the treated area for 48 hours afterwards (if possible, try to sleep on your back). You should also avoid prolonged exposure to extremes of heat, cold or UV light for 2 weeks (for example, a sauna).



Consent for procedure

When used by qualified staff for cosmetic therapy, dermal fillers are very safe, and are typically very well tolerated.

People who should not receive dermal filler treatments include-

- 1. People who have previously had a reaction to dermal filler or have an allergy to lignocaine.
- 2. People who are pregnant or breastfeeding.
- 3. People who form keloid scars.
- 4. People who have an infection at the proposed site of injection.
- 5. People who are taking anti-coagulation ("blood thinning") medication.

Initial

There are four major risks to be aware of-

- 1. The treatment may not work as well as you would like. For example, the volume achieved by the filler may not be as much as you were hoping for. We will follow-up with you two weeks after your treatment to see how you are feeling about the effects.
- 2. You may experience itching at the site of treatment, which usually resolves in a few days. Occasionally, you may notice some bumps underneath your skin, some redness, or some pimples. Again, these usually resolve after a few days.
- 3. Bleeding, bruising or infection, while unexpected, may develop at the injection site. Rarely, an infection may become complicated. If you suspect an infection has occurred please let your doctor know by contacting your clinic.
- 4. A rare but serious complication may occur if the filler blocks a blood vessel. This can cause a lack of blood flow to the areas "downstream" from the blockage. Consequences of this can include skin discolouration, skin death. In a few cases worldwide, the blood vessels affecting the eye have been affected, causing blindness. Our nurses have special training, medication and equipment to minimise the risk of blood vessel occlusion occurring.

Initial

Initial

Initial

Initial

By signing here I indicate that none of the at-risk categories detailed above apply to me, and that I have read, understand and accept the risks of the procedure outlined above. Any questions I have about the treatment have been encouraged and answered. I consent for the procedure to go ahead as discussed with my clinician.

Signature

Date

Consent for photographs

As a normal part of cosmetic therapy, photographs are taken to gauge the effects of the treatment over time. Images are stored securely and are not used for any other purpose.

I consent for my photograph to be taken for the purposes of clinical review-

Signature

Date