

Consent to Receive Restylane® and/or Perlane® and/or Juvederm®

Print Patient Name \_\_\_\_\_

What is Restylane® Perlane® Juvederm®?

Restylane® Perlane® and Juvederm® are non-animal, stabilized hyaluronic acids approved by the FDA. They are indicated for use as augmenting and contouring agents and as dermal fillers for correction of moderate to severe facial wrinkles and folds. The primary difference between them is that the hyaluronic acid gel particles in them vary in size.

What to Expect?

Local or injection anesthesia/numbing medications may be used to maximize your comfort during the procedure. Most patients report a mild discomfort typically associated with the needle injection. Temporary redness, swelling, tenderness, firmness at the injection site are normal and typical and dissipate within hours to a few days post treatment. Bruising at the site of the injection is a commonly reported site effect. In the lips, bruising can appear in the form of a lump. The injector will minimize bruising as much as possible by applying pressure. If a bruise does occur, it will typically take 7 to 10 days to fade, just as any other bruise would.

Apply an icepack or cold compress to the site after treatment to reduce swelling. Make up can be applied gently shortly after treatment. Repetitive rubbing and pushing of the area should be avoided unless directed otherwise. The area may be gently washed a few hours after treatment. Immediately report any worsening or persistent symptoms or side effects to the injector.

Possible risk and complications include but are not exclusive of:

Bleeding-It is possible though unusual to have a bleeding episode from the dermal filler.

Asymmetry-The human face and eyelid region is normally asymmetrical with respect to structural anatomy and function. There can be a variation from one side to the other in terms of the response to the dermal fillers.

Infection-Infection is extremely rare after dermal filler injections. Should an infection occur, additional treatment including antibiotics may be necessary.

As with any injection procedure, there exists the risk of side effects. These risks have been explained to me in detail. I have read the above information and had the procedure explained to me by the designated licensed medical professional. I understand the success of this procedure can NOT be guaranteed and I am aware of the benefits and risks associated with this procedure.

Your injector may recommend a 7-10 day follow up from the original procedure date to evaluate symmetry and necessity for minor adjustments to the treated area. If desired, additional syringes can also be purchased and administer at this visit if time and schedule permits.

I have read and understand the information listed above. Patient's Initials \_\_\_\_\_

Patient Signature \_\_\_\_\_

Date \_\_\_\_\_