

DERMAL FILLER TREATMENTS

CLINICAL POLICIES AND PROCEDURES



SECTION 2

Dermal Filler Patient History

Name: _____ Date: _____

Address: _____

Telephone: _____ Cell: _____

Date of Birth: _____

Consent signed: Yes No Date: _____

Previous Dermal Filler Yes No Date: _____

Complications: Yes No Date: _____

Type Dermal Fillers: _____

History of Anaphylactic Shock: Yes No Date: _____

History of Allergies: Yes No Date: _____

Medications

Asprin Yes No

Anti-Inflammatories Yes No

Anticoagulants Yes No

Steroids Yes No

Non-Steroidals Yes No
(i.e. Advil, Aleve, Celebrex)

Supplements

Ginko Biloba Yes No

Vitamin A Yes No

Vitamin E Yes No

Garlic Yes No

Flax Oil Yes No

Do you have at present, any history of the following medical conditions?

Have you had in the past, any history of the following medical conditions?

- | | | |
|---------------------------------|-----|----|
| 1. Multiple Severe Allergies | Yes | No |
| 2. HX of Herpes around the Lips | Yes | No |
| 3. Immunosuppressive Therapy | Yes | No |
| 4. Autoimmune Disease | Yes | No |
| 5. Other Medical History | Yes | No |

(if you answered Yes to any one of the above please explain below)

Comments:

I have answered the above questions to the best of my knowledge

Signature

Date

Post Treatment Form For Patients

After your treatment with dermal fillers, you might have some redness and swelling. This is normally less than seven (7) days.

- 1) Cold compresses may be used immediately after treatment to reduce swelling. If the inconvenience continues beyond seven (7) days or if other reactions or side effects occur, please contact the doctor.
- 2) Avoid touching the treated areas within six (6) hours following treatment. Do not massage the injection sites day of the injections. After that, the area can be gently washed.
- 3) You may shower and place make-up the following day.
- 4) Sunbathing and cold outdoor activities should be avoided until any redness or swelling disappears.
- 5) Avoid exercise and alcohol for six (6) hours after treatment.
- 6) Take anti-inflammatories if you have any pain; this should be enough. You might develop a headache as a consequence of the injections.
- 7) You might see some bruising occurring one (1) to two (2) days after injections at any of the injection sites. These will eventually go away in several days.
- 8) If you have previously suffered from facial cold sores, there is a risk that the needle punctures could contribute to a recurrence. Speak to the doctor about medications that may minimize a recurrence.
- 9) We generally like for you to return for a post injection appointment in five (5) to seven (7) days.