

**MCGUINNESS DERMATOLOGY**

**CONSENT FOR INJECTION OF HA FILLERS ( HAF )  
( Restylane, Perlane, Juvederm)**

This consent for the injection of HAF, is to help you understand the major risks and benefits of the procedure, and to try and minimize the risk of having problems with your injections. Please read this consent form carefully and completely, and your health care provider will review it with you, as well as discussing other aspects of the treatment. Your provider will answer any and all questions prior to your treatment to your satisfaction. Do not proceed with treatment with HAF, unless you are completely satisfied that all your questions have been answered, you understand the major risks and benefits of treatment with HAF, and you are comfortable that treatment with HAF is right for you.

Patient Name \_\_\_\_\_ DOB \_\_\_\_\_ DOV \_\_\_\_\_

Name of Injector: Kim Welch, B.S.N., R.N. Sally Bradley, RN Louisa Lang, R.N.  
\_\_\_\_\_

Current Prescription Medications \_\_\_\_\_

Current Over the Counter/Non Prescription Medication/Holistic Products/Dietary Supplements  
\_\_\_\_\_

Please List Any Medication Allergies (include lidocaine, “novocaine”, or any other “numbing”)  
\_\_\_\_\_

Please List Any Serious Allergic Reactions to Anything You Have Experienced  
\_\_\_\_\_

Do You Have a History of Facial Cold Sores/Herpes \_\_\_\_\_

Please List Any Significant Medical Conditions \_\_\_\_\_

Women, Are You Actively Avoiding Pregnancy            yes    no

Women, Are You Breast Feeding                            yes    no

Do You Heal With Excess or Large Scars or Keloids    yes    no

Any Recent Facial Infection of Any Type \_\_\_\_\_

**IF POSSIBLE, TO DECREASE EXCESS BLEEDING/BRUISING, PLEASE AVOID THE FOLLOWING PRODUCTS, OR PRODUCTS LIKE THEM FOR AT LEAST ONE WEEK PRIOR**

TO, AND FOLLOWING TREATMENT WITH, HAF – Nsaids (aspirin, ibuprofen, Celebrex, advil, motrin, aleve among others), vitamin E, st johns wort, ginkgo biloba, alcohol, fish oils including omega-3. Salicylates also thin the blood, and are found in significant levels in a surprising number of herbs, spices, fruits, and dried fruit.

Prescription medications such as Coumadin or warfarin, heparin, lovenox (enoxaparin), Plavix, dipyridamole, Aggrenox, among others are used to thin the blood, for significant medical conditions. It is not appropriate, nor do we recommend stopping these type of medications without first consulting your medical doctor who prescribed them, especially for cosmetic procedures.

The risk of not stopping these listed products before treatment with injected HAF, is increased bleeding and bruising, but your overall medical health is of more importance. **TALK TO YOUR DOCTOR!**

## BENEFITS OF TREATMENT WITH HAF

Injection of HAF is done to reduce/improve the appearance of lines and wrinkles in the skin, and to “volumize”, or “plump up” areas of the skin that have become depressed or “hollowed”, due to the loss of underlying bone, fat, or other soft tissues. Please note that “improve” and “reduce” are the key words. Perfection is not a reasonable endpoint. These changes are usually/often the result of aging. Many people believe that such treatment improves a persons appearance, with resulting benefits in self esteem, a more youthful, less “tired” appearance, and favorable benefits in the workplace and career. The most common areas treated with HAF are the face and hands. The FDA has approved the use of each HAF for certain body areas. However, as in many treatments in medicine, HAF are often used in areas of the body not approved, as yet, by the FDA. This type of treatment is called “off label”, and is common practice with HAF. Please be assured that when HAF are used in our office in “off label” treatments, that those same treatments are performed by most other healthcare professionals in a similar fashion, and are considered safe and effective by the vast majority of our peers in the medical community.

## WHAT ARE HAF

HAF are gels that are composed of hyaluronic acid, a naturally occurring compound found in many places throughout the human body. The natural hyaluronic acid found in our bodies, is constantly being made and broken down by our bodies. Similarly, these HAF, once injected into the skin and subcutaneous tissues, will gradually be broken down, and eventually will be completely gone. This /periodically to maintain the benefits derived from their use. The HAF used for cosmetic improvement which we are discussing, are often made by certain bacteria. However, they are purified and sterilized prior to use, and in no way pose a risk of infection by their use.

## ALTERNATIVES TO HAF

The use of HAF for cosmetic improvement is not a medically necessary procedure. You could certainly choose to not treat wrinkles, lines, or hollows in the skin at all. Other treatments that could be used include topical creams, chemical peels, lasers, and surgery, among others.

## RISKS OF TREATMENT WITH HAF (this is not a complete list, but covers the majority of risks)

The practice of medicine is not an exact science, as much as we would like it to be. You must realize, and accept, that even for those well trained in using HAF such as ourselves, injecting material into the skin and subcutaneous areas, using needles and multiple injection sites, does have some risks. Some of the most common and/or major risks include, but are not limited to: 1) Pain. Topical numbing creams, and sometimes numbing material in the HAF itself, or nerve blocks are used to minimize pain; 2) Bleeding/bruising. Obviously, the HAF must be injected via a needle, into the desired tissue, using multiple injection points. This will cause bleeding and almost always notable bruising. Some of these effects will be seen immediately with the treatment, and some may take days to show up. Usually the bleeding/bruising are not too bad. Some bruising may take weeks to resolve however, and could be very significant. Keep this in mind when planning your treatment, if you have important meetings or vacations. This is the reason why not using any products that might thin the blood for at least one week before treatment, if possible, is important; 3) Swelling. This is to be expected, and may arise during the treatment, and develop for days after the treatment. Again, this is very much expected, but usually not severe. It usually resolves in a week or two. Keep this in mind when planning important meetings and vacations; 4) Lumps. The injected areas will be smoothed out by your provider during treatment, but, not infrequently, you may feel some degree of lumps or bumps under the skin for some time after the treatment, even though the treated area will not look lumpy; 5) Infection. The skin surface being treated with HAF will be cleansed prior to treatment. The HAF is a sterile product. The chance of infection exists, but occurs rarely. If you were to get an infection, it could show up a few days or months after the injection, depending on what type of infection it was. The signs of infection could vary greatly, but include redness, swelling, pain, pustules, among others. Please contact us if you are suspicious of an infection after treatment; 6) Asymmetry. As stated, medicine is not an exact science, and true perfection is rarely attained. Some differences between sides treated may exist before and after treatment, but will certainly be addressed, often through the use of before and after pictures; 7) HAF migration. Sometimes the HAF will change position after it has been injected, during the ensuing weeks to months. This is not common, but could occur. Please let us know if you think this has happened; 8) Rarely, if the HAF is placed in the tissue too superficially, it may become slightly visible as a pearly, light bluish small bump. This can be corrected easily. Please let us know; 9) Scar or keloid formation. Very rare. Please let us know if you heal with large or prominent scars, even from minor injuries; 10) Other – itching, discoloration,

muscle twitching, numbness. Can occur, but usually resolve shortly without incident; 11) True nerve damage. Extremely rare, but anytime needles are being injected multiple times in places that lots of nerves exist, could happen. In most cases, if the HAF is being injected into a nerve that could present a problem later, you will feel a rather painful sensation. If this rare event were to happen please advise your provider at that time; 12) Allergic reaction. If you have ever had a bad reaction of any type to previous HAF injections, please tell your provider about it, before treatment. Allergic reactions, or side effects, could be excessive swelling of the area injected, or the eyes, tongue, or throat, trouble breathing, passing out, extreme headache or vision problems, among others.

The last risk to be covered is “necrosis”, or death of tissue in and around the area that was injected with the HAF. This is an extremely rare event, of course, and the actual cause of the necrosis has not been determined with precision yet. It is thought that in these cases, the HAF is injected directly into an artery, or around an artery, and this leads to blockage of the artery, and death of the tissue normally supplied blood by the affected artery. When it occurs, it almost always happens when injecting the area between the eyebrows, or close to the groove between the nose and cheek. Symptoms of this would include pain and usually a dusky, mottled reddish discoloration in the nose, cheek, lip, forehead area. These symptoms could show up immediately or a few hours later, but certainly within 24 hrs . Please let your provider know immediately if you suspect this has occurred. It can be reversed or minimized in most cases, if treated quickly, but can lead to very notable tissue death, ulceration, and scar, requiring plastic surgery repair. Again, it is an extremely rare, but noted event.

## TREATMENT WITH HAF

After a detailed discussion of HAF with your provider, the area(s) to be treated will be specified. Sometimes treatment will occur immediately after this discussion, and other times, treatment may be scheduled for another date and time. Topical or oral treatment with arnica montana, some time prior to or after treatment will probably be discussed. This compound is sometimes helpful to minimize bruising and bleeding.

When the actual treatment is done, the area(s) will be cleaned, and in most cases, topical anesthetic cream will be applied, or in some cases, a nerve block may be used, to provide anesthesia for the procedure. In about 10-30 minutes, after adequate anesthesia has been achieved, the injections will begin. Ice will be applied to areas being treated periodically throughout the procedure. The time to complete the procedure will vary widely, depending on how many areas are being treated. Typical treatment times are from 10-60 minutes. It is common to have some swelling and bruising immediately after treatment, but it is not usually severe.

## POST HAF TREATMENT CARE

If your provider feels it is necessary, you will be asked to make a followup appointment in the office. Please keep this appointment. If you have questions or concerns anytime after treatment, please call your provider.

Typical post HAF care involves minimizing vigorous activity for about a day, to minimize bruising, bleeding, and deforming the HAF. Cooling the area(s) injected gently, with crushed ice, or bags of frozen peas, for about a day is often helpful in this way also. Preferably do not squeeze or pinch the area(s) injected for at least a day, so that the HAF does not get moved, or lose its shape. You may cleanse the skin after any numbness has worn off, with a gentle cleanser, water, and your hands. Do not scrub your face. Avoid the sun, and intense heat, until any swelling and redness is gone. It is recommended that you continue to avoid blood thinners ( examples were previously mentioned ) for at least a week after treatment, if possible. As far as sleeping is concerned, it is possible that if you slept on an area injected with HAF soon after treatment, for an appreciable amount of time, that the HAF could be moved, or be squeezed into a different, less optimal shape or location. I would suggest, that for the first night post HAF injection, to keep this in mind as at least a consideration.

## PAYMENT FOR TREATMENT WITH HAF

I understand that treatment with HAF is a cosmetic procedure, that is voluntary, and not considered medically necessary by insurance companies. As such, I realize, that I am responsible for payment in full at the time of treatment.

## IN CONCLUSION

I have read the preceding information found in this document on treatment with HAF, and understand the enclosed material including risks, benefits, and treatment options other than HAF, and agree and desire to proceed with treatment with HAF. Some potential risks, side effects, and adverse outcomes exist which may not be covered in this document. I have had all my questions answered to my satisfaction, in my discussion with my medical provider. I acknowledge that I have sufficient information to provide informed consent for treatment with HAF.

I also acknowledge that no guarantee or promise can be or was made as to the actual precise final outcome from my treatment with HAF. I understand that more than one treatment session is often needed, and that there will be a distinct and separate fee for each subsequent treatment, including smaller “touch up” sessions. With my signature that follows, I acknowledge and agree to the area(s) to be treated with HAF, the medical provider performing the service, the HAF being used, and the cost of the proposed treatment, on the date signed by me and the medical treatment provider.

RECORD OF HAF TREATMENT

_____	_____	_____
area(s) to be treated	type and quantity of HAF to be used and cost of each	
_____	_____	_____
medical provider signature/date	patient signature/date	witness signature/date

_____	_____	_____
area(s) to be treated	type and quantity of HAF to be used and cost of each	
_____	_____	_____
medical provider signature/date	patient signature/date	witness signature/date

_____	_____	_____
area(s) to be treated	type and quantity of HAF to be used and cost of each	
_____	_____	_____
medical provider signature/date	patient signature/date	witness signature/date