



## BOTOX INFORMED CONSENT

Patient \_\_\_\_\_

TO THE PATIENT: You have the right to be informed about your skin condition and treatment so that you may make the decision whether or not to undergo the procedure after knowing the risks and hazards involved. This disclosure is not meant to scare or alarm you, it is simply an effort to better inform you so that you may give or withhold your consent for the treatment program.

I have requested that Dr. Charles J. Sarosy attempt to improve my facial expression lines with Botox. This is trademark for botulinum toxin. These injections have been used for more than decade in children and adult to improve the problem of muscle spasm of facial muscles. This toxin has also been useful to correct double vision due to muscle imbalance. Injections of minute amounts weaken the muscle and prevent frowning, crow's feet and expression lines. Although the results are dramatic, I have been informed that the practice of medicine is not an exact science and that no guarantees can be or have been made concerning expected results.

INITIAL \_\_\_\_\_

The solution is injected with a small needle into the muscle. You see the benefits develop over the next five to seven days. Less frowning will be possible.

Side effects and complications have been minimal. Occasionally, slight swelling, and/or bruising may last for several days after the injections. Rarely, and adjacent muscle may be weakened for several weeks after an injection. I have been advised of the risks involved in such treatment, the expected benefits of such treatment, and alternative, including no treatment at all.

INITIAL \_\_\_\_\_

I understand that I may not get 100% response achieved, if I should need another injection, I will be billed for the cost of the medication only.

INITIAL \_\_\_\_\_

I agree that this constitutes full disclosure, and that it supersedes and previous verbal or written disclosure. I certify that I have read and fully understand the above paragraphs, and that I have sufficient opportunity for discussion and ask questions.

PATIENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

STAFF SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_