
P: (212) 729-SKIN (7546) | F: (212) 729-9395 | Email: contact@212skin.com | www.212SKIN.com

CONSENT TO RECEIVE: RESTYLANE/JUVEDERM INJECTION (Part 1 of 2)

Purpose and Background

Restylane/Juvederm is a stabilized hyaluronic acid used in the correction of moderate to severe facial wrinkles and folds. All medical and cosmetic procedures carry a risk and may cause complication. The purpose of this document is to make you aware of the nature of the procedure and its risk in advance so that you can decide whether or not to go forward with the procedure.

Procedure

Restylane/Juvederm is administered via injection into specific areas of the face to eliminate or reduce wrinkles and folds. You may apply an aesthetic cream prior to your appointment to reduce discomfort. Multiple injections may be made depending on the site, depth of wrinkle, and technique used. Ice may be applied on the site for a short period afterwards to reduce swelling.

Risk

Although a very thin needle is used, common injection-related reactions could occur, including some initial swelling, pain, itching, discoloration, bruising or tenderness at the injection site if you are using substance that reduces blood clotting such as aspirin or other non-steroidal anti-inflammatory drugs, or alcohol prior to procedure. Certain nutritional supplements including Vitamin E, ginseng, or gingo biloba may also increase your risk of bruising. These reactions generally lessen or disappear within a few days but may last for a week or longer.

As with all injections, this procedure carries the risk of infection. The syringe is sterile and standard precautions associated with injectable materials have been taken. Some visible lumps may occur temporarily following the injection. While the effects of Restylane/Juvederm use can last longer than other comparable treatments, the procedure is still temporary. Additional treatments will be required periodically, generally within 6 months to one year. After treatments, you should minimize exposure of the treated area to excessive sun or UV lamp exposure and extreme cold weather until any swelling or redness has gone away.

Benefits

Restylane/Juvederm has been shown to be safe and effective when compared to collagen, skin implants, and related products to fill in wrinkles line and folds in the skin of the face. Its effect, once the optimal location and pattern of cosmetic use is established, can last 6 months or longer without the need for re-administration.

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Alternatives

This is strictly a voluntary cosmetic procedure. No treatment is necessary or required. Other alternative treatments which vary in sensitivity, effect and duration include: animal-derived collagen filler products, dermal fillers derived from the patient's own fat tissues, Hyaluronic acid fillers.

Consent

The nature and purpose of this procedure, with possible alternative methods of treatment as well as complications have been fully explained to my satisfaction. No guarantee has been given by anyone as to the results that may be obtained by this treatment.

I have read this informed consent and certify that I understand its contents in full. I have had enough time to consider the information from my physician and felt that I am sufficiently advised to consent to this procedure. I hereby give my consent to this procedure and have been asked to sign this form after discussion with the physician

TODAY'S DATE

PATIENT NAME (PRINT)

PATIENT NAME (SIGNATURE)

PHYSICIAN'S SIGNATURE