Patient Name: _____

Date of Consultation: _____

Cosmetic Practitioner Name: _____

Clinic Name: _____

Clinic Address: _____

# PATIENT CONSENT

## COSMETIC TREATMENT WITH DYSPORT®

### Important information as discussed with your cosmetic practitioner

Dysport contains Botulinum Toxin Type A, a muscle relaxant which acts on the junctions between the nerves and muscles thereby preventing or helping to reduce the muscles in the treated area from contracting. Once the muscles are relaxed, the overlying wrinkles will soften or reduce.

Dysport contains a small amount of albumin that has been obtained from human blood. The risk of a viral infection is rare but cannot be eliminated completely when using human blood or products made from human blood.

The effects of Dysport usually occur within 2–3 days post-injection but it may take up to 21 days for the peak effect to occur, with the duration of effect lasting 4 months or more. The effects may vary from person to person. Treatment effects are temporary and retreatment is necessary to maintain the results.

The most frequent side effects reported after treatment are headache and injection site reactions, including discomfort, burning, redness and bruising. Other side effects may include local muscle weakness, including temporary drooping of the eyelids or eyebrows along with swelling of the eyelids, double vision, dry eyes, pins and needles or numbness, and nausea or flu-like symptoms. If you experience any of these unwanted side effects, you should consult your cosmetic practitioner.

Dysport is not recommended for pregnant or breast-feeding women or for those intending to become pregnant or breast-feed. There are some medicines that can interfere with the way Dysport works, therefore, it is important to tell your treating cosmetic practitioner about all the medicines you are taking, including any that you buy without prescription from your pharmacy, supermarket or health food shop. Dysport must not be given to patients who have had a previous allergic reaction to Botulinum Toxin Type A or are allergic to any ingredients in Dysport; any patient with a medical condition of a neuro-muscular type such as myasthenia gravis and certain neurological disorders; or if there is any sign of infection at the proposed injection site.

Dysport®

C. BOTULINUM TYPE A TOXIN – HAEMAGGLUTININ COMPLEX

# CONSENT

I confirm that I have had a consultation with **[name of cosmetic practitioner]**_____ prior to treatment with Dysport and have been informed regarding the treatment and procedure, indications, expected results and possible side effects. I have read the Dysport Consumer Medicine Information and have had any questions relating to the treatment answered to my satisfaction. I confirm that I have fully disclosed details of previous treatments and my full medical history during consultation.

In particular, I confirm that I have informed my cosmetic practitioner if:

- I am pregnant or intend to become pregnant, or if I am breastfeeding or plan to start breastfeeding
- I am taking any blood thinning medication
- I have had any previous allergic reaction to Botulinum Toxin Type A or I am allergic to any ingredients in Dysport (Clostridium Botulinum Type A Toxin - Haemagglutinin Complex, 125 microgram human serum albumin and 2.5 mg lactose in a sterile, lyophilised form without a preservative)
- I have any neuromuscular conditions including myasthenia gravis or myasthenic syndrome
- I am aware of any potential infection at the proposed injection sites
- I am taking any other medications, including non-prescription medications or food supplements

I am having this treatment for cosmetic reasons and understand that results may vary from person to person.

I agree to follow the aftercare instructions provided by my cosmetic practitioner and understand that follow-up at two weeks is generally recommended. I have been informed and understand that further treatments will be required to maintain the effects, as the treatment results are temporary.

Patient specific comments based on consultation: **[cosmetic practitioner to insert]**

_____

_____

I understand that I am paying for a treatment and not a guaranteed result as individual results may vary; and I accept that retreatment, if required, will be at my expense.

I understand that this form will be retained in my medical records.
For information on the clinic/practice privacy policy please ask the treating cosmetic practitioner.

I have read and fully understand the above and have had sufficient opportunity to discuss with and ask questions with **[name of cosmetic practitioner]**_____

I request and consent to treatment with Dysport.

Patient's name: _____

Patient's signature: _____ Date: _____

Cosmetic practitioner's name: _____

Cosmetic practitioner's signature: _____ Date: _____

Dysport® is a prescription medicine containing 300 & 500 IU of botulinum toxin. It is used for the treatment of frown lines and crow's feet around the eyes. Dysport® has risks and benefits. Please read the Consumer Medicines Information for further details at www.medsafe.govt.nz. ALWAYS FOLLOW THE INSTRUCTIONS YOU ARE GIVEN. Product and treatment costs will apply.

Galderma Australia Pty Ltd, Suite 4, 13B Narabang Way, Belrose NSW 2085. ABN 12 003 976 930. Distributed in NZ by Healthcare Logistics, 58 Richard Pearse Drive, Airport Oaks, Mangere 2022, NZ. Phone: 1800 144 944 (AUS) 0800 174 104 (NZ) Fax: +61 (2) 9986 1699. Sponsor: Ipsen Pty Ltd, Level 2, Building 4, Brandon Office Park, 540 Springvale Road, Glen Waverley, Victoria 3150 Australia. Distributed by Galderma Australia Pty Ltd for the glabellar lines and lateral canthal lines indications only. Dysport® is a trademark of Ipsen Pty Ltd. Galderma trademark is owned by Galderma Holding S.A. TAPS approval: NA 12132. April 2021.AU Code: PMAU0313. NZ Code: 115340. AU-DYS-2100014.

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