



## PRE-OP DERMAL FILLER | DOB:

### DERMAL FILLER

*Pre-Treatment Instructions*

### PRECAUTIONS

*You are not considered a candidate for Dermal Filler injections if you have any of the following:*

- Myasthenia Gravis or a Neuromuscular disorder
- Allergy to Botulinum Toxin, or human albumin
- Pregnant or breastfeeding

### PRE PROCEDURE TIMELINE

#### Two Weeks

- Schedule your Dermal Filler appointment at least 2 weeks prior to a special event that you may be attending, such as a wedding or a vacation. Results from the Dermal Filler injections will take approximately 4 to 7 days to appear. Also bruising and swelling may be apparent during that time period. Sculptra does take longer to see results so plan accordingly with your provider.
- Avoid anti-inflammatory/blood-thinning medications, if possible for a period of 2 weeks before treatment. Medications and supplements such as aspirin, vitamin E, ginkgo biloba, ginseng, St. John's Wort, Omega 3/Fish Oil supplements, Ibuprofen, Motrin, Advil, Aleve, and other NSAIDS have a blood-thinning effect and can increase the risk of bruising and swelling after injections.
- If you are taking prescription blood thinners such as Coumadin or Plavix, you should check with the prescribing doctor to see if you are able to stop these medicines for 7-10 days before your appointment and at least 2 days after the procedure has been done.
- If you have a history of cold sores please let your dentist know, they may put you on an antiviral medication prior to treatment.
- Sunburned skin is difficult to treat so try to avoid extended exposure to the sun.

#### Two Days

- If you have a rash, cold sore, or blemish on the area to be treated, please be sure to contact our office to reschedule your appointment at least 24 hours in advance.
- Discontinue Retin-A 2 days before and 2 days after treatment.
- Avoid waxing, bleaching, tweezing, and the use of hair removal creams in the area to be treated.

#### Day Of

- Be sure to eat a small meal, snack, or protein shake before your procedure.
- Please come to your appointment with a clean face, no make-up or moisturizer prior to your procedure.

Patient's signature:

Date:

Doctor's signature:

Date: