

YOUR DECISION:

HYPERHIDROSIS (ANTI-SWEATING INJECTIONS WITH BOTULINIM TOXIN TYPE A)[®]

I confirm that I have either discussed other treatment options for excessive sweating, with my own Doctor (GP), or I have decided that I do not wish to seek this advice. I understand that alternatives to botulinum toxin injections include special prescription deodorant, powders and surgery.

I am aware that it may be possible for me to receive this treatment free of charge, on the NHS, but I have chosen to instead receive this treatment as a private, paying customer.

I understand that underarm shaving is best avoided for 48 hours before or after treatment. I understand that shaving within this timeframe simply gives a slight increase in the risk of a skin infection.

Compensatory Sweating

I understand that commonly, underarm or palmar Botulinum Toxin Type A injections will lead to 'compensatory sweating'. This is when stopping sweating in one area leads to increased sweating elsewhere - for example the back or thighs. Although this is very common, most patients will report high satisfaction levels in the overall outcome - presumably because they can tolerate sweating excessively elsewhere on their body more than in the area treated.

Pain

I understand that it is recommended that practitioners apply a strong anesthetic cream or gel prior to injecting. Following the application of this anaesthetic, pain during treatment of the underarm area is normally minimal. Treatment to the palms of the hands is more painful as it is a nerve-dense area.

I understand that the effects of treatment typically last 9-12 months but that this is not guaranteed as it varies between patients.

I have read the above, have been given ample opportunity to ask questions about the procedure and have decided to proceed today with treatment, hereby giving my written consent.

CLIENT: Name:..... Signature:..... Date:.....

Clinician:

I confirm I have summarised the relevant consent information verbally & checked understanding.

Clinician Signature:

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Date:

Additional Notes/Lot Numbers of Products

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