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Sculptra Aesthetic Information and Consent Form with Post Instructions

Name of Patient: _____ **Date:** _____

Diagnosis – A natural, youthful face is full and not tight. Age related changes of the lips and mouth include atrophy of the lips and atrophy of the corners of the mouth resulting in downturn. Another early sign of aging is the development of nasolabial lines and hollow appearance to cheeks. Although the upper face can easily be rejuvenated with Botox, the lower face is less amenable to this treatment. In order to treat the entire aging face, a combination of Botox and injectable fillers is often needed for optimal results.

Sculptra Aesthetic – Sculptra Aesthetic is a safe, synthetic, and biocompatible material that is injected below the surface of the skin. It's made up of microspheres (a spherical shell that is usually made of a biodegradable or resorbable plastic polymer, that has a very small diameter usually in the micrometer or nanometer range, and that is often filled with a substance, as a drug or antibody, for release as the shell is degraded) of poly-L-lactic acid. Because poly-L-lactic acid is the main ingredient in Sculptra Aesthetic, patients don't require allergy testing.

The results of Sculptra Aesthetic are not immediate. At your first treatment visit, it may appear that Sculptra worked immediately because of swelling from the injections and the water used to dilute Sculptra Aesthetic. A few days following the treatment, when the swelling goes down and the water is absorbed by your body, you may look as you did before your treatment. Sculptra Aesthetic takes time to gradually correct the depression in your skin. Your doctor will decide the appropriate number of treatment sessions and the amount of Sculptra Aesthetic you will need at each session. Multiple sessions are often required and patients with severe facial fat loss may require 3 to 6 treatment sessions.

Side Effects – Side effects of Sculptra Aesthetic may include: delayed appearance of small bumps under the skin in the treated area, bleeding, tenderness or discomfort, redness, bruising, or swelling may occur at the site of injection.

The practice of medicine and surgery is not an exact science, and, therefore, reputable practitioners cannot guarantee results. The results of the injections may not last for as long or as well as expected. There are no promises or guarantees regarding the degree of improvement when using Sculptra.

Postoperative Care –

- Ice packs may be used during the first 24 hours- 10 minutes on, 10 minutes off.
- Massage the injected site vigorously twice daily for the first week.
- Elevate the head with two pillows while sleeping during the first few days to minimize swelling.
- Aspirin, NSAIDs, and alcohol should be avoided for the first few days after treatment.
- Tylenol may be used for pain control.
- Exaggerated movements of the areas augmented should be avoided for the first several days.
- Avoid hot foods or gum chewing for the first several hours as mouth trauma may occur in the anesthetized areas.

Notify the physician for significant swelling, bleeding, eye pain, vision loss, dusky discoloration, excessive pain, or fever.

Drugs, Pregnancy and Allergies – You should not be pregnant, nursing an infant, have a history of a bleeding disorder, abnormal scarring or autoimmune disease. You should not be taking any of the following medications: immunosuppressants or blood thinners. Also, you should have told your physician if you have a history of oral herpes simplex (cold sores).

Alternatives – As explained, not all wrinkles will respond to soft Sculptra Aesthetic™. Other alternatives are dermabrasion; chemical peeling; laser resurfacing; face-lifting, browlifting, necklifting, and other surgical resecting of the frown muscles of the frown muscles of the brow; treatments with Retin-A or Renova or alpha hydroxy acids may also produce some benefits.

Photography – I hereby give my permission to _____ or any of the medical personnel at _____, to take photographs of all treated sites for diagnostic purposes and to accurately document the medical record in the usual and customary manner. I agree that these photographs are the property of _____ and my photographs can be used for teaching purposes, to illustrate scientific papers, books or for use in general lectures. It is specifically understood that in any such publication or use, I shall not be identified by name.

Follow-Up Suggested by the Doctor – I agree to follow up with my doctor 4-6 weeks following my treatment and at reasonable intervals to assess my status. I agree to inform Dr. _____ of any problem that I am having and to allow her to see me at that time. If second opinions or consultants are recommended to me, I plan to follow her suggestions.

Consent –

I voluntarily request treatment by _____. Using Sculptra Aesthetic which has been explained to me, and my questions regarding such treatment, its alternative, its complications and risk have been answered by the doctor, her staff, and/ or written information. The information which I have been given has been in terms clear to me and I understand the risks and complications of the treatments. My questions have been fully and completely answered for me and I have read this document and understand its contents. I hereby give my unrestricted informed consent for the procedure.

_____ I have received Post Treatment Instructions.

DO NOT SIGN THIS FORM UNLESS YOU HAVE READ IT AND FEEL THAT YOU UNDERSTAND IT. ASK ANY QUESTIONS YOU MIGHT HAVE BEFORE SIGNING THIS FORM. DO NOT SIGN THIS FORM IF YOU HAVE TAKEN MEDICATIONS WHICH MAY IMPAIR YOUR MENTAL ABILITIES OR IF YOU FEEL RUSHED OR UNDER PRESSURE.

_____ Printed Name of Patient Date	_____ Signature of Patient
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_____ Signature of Parent of Legal Guardian Date (if different than patient)	_____ Printed Name	_____ Relationship to Patient
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_____ Witness Date	_____ Printed Name
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I have informed the patient of the available alternatives to soft tissue augmentation, and of the potential risks and complications that may occur as a result of this treatment.