Sculptra®

Patient Consent Form

FOR TREATMENT WITH SCULPTRA

LAST NAME		FIRST NAME			
LAST 4 DIGITS OF NRIC		GENDER		DATE OF BIRTH	
ADDRESS				POSTCODE	
MOBILE		EMAIL			

Sculptra is reconstituted by your physician and injected into the skin to increase the volume of depressed areas, particularly to correct skin depressions, such as in skin creases, wrinkles, folds, scars and for skin aging.

My treating practitioner has explained how and when *Sculptra* is used. I have been given the opportunity to ask questions and have received satisfactory answers to my questions. In particular, I have received information regarding when treatment with *Sculptra* should not take place and have also been informed of precautions, warnings for use with these products and common injection related reactions. These reactions include bruising, itching, pain, transient bleeding, redness or swelling in the treatment area. These reactions are usually resolved within a few days to one week. In some cases more serious adverse events have been reported, but these are rare. These reported reactions include papules/nodules, swelling/oedema, pain, granuloma, symptoms of visual disturbance, infection/abscess, mass/induration, paraesthesia and facial nerve paralysis, erythema, inflammation, bruising/hematoma, discoloration, deformity, scarring/atrophy, hypersensitivity, pruritus, rash, muscle disorders and ischemia/necrosis.

In some cases injection site nodules have occurred early within weeks, or with late onset several months to over one year post-injection. Such nodules are occasionally associated with inflammation or discoloration. In some cases, the nodules were reported to resolve spontaneously or following treatment, but may have a prolonged time or may need surgical excision. Isolated rare cases of vision abnormalities including blindness have been reported following injection of *Sculptra* into the temple area, periorbital areas or cheek.

My practitioner has also informed me that topical anaesthetic cream might be used to provide pain relief. I have received information regarding when and what topical anaesthetics will be used, and information regarding contraindications, warnings/precautions of use of these products and potential side effects.

My treating practitioner has also informed me that, depending on the treated area and injection technique, effects from the *Sculptra* treatment can last up to 25 months, but this period may vary, either longer or shorter. Follow-up treatment can help maintain the desired correction.

I have responded to questions pertaining to any hypersensitivity to anaesthetic agents, to *Sculptra*, to any of the constituents, and to my medical history honestly. I have received a post-treatment advice leaflet as well as information about its contents. I understand the importance of following the advice indicated in the checklist. I have informed my practitioner of all my previous aesthetic treatments, including injections, surgeries, chemical peels etc.

I have read and understood the above and hereby consent to treatment with *Sculptra*.

PATIENT'S SIGNATURE		DATE	

I confirm that I have discussed what the procedure is likely to involve, the benefits and risks of any available alternative treatments (including no treatment) and any particular concerns of this patient.

NAME OF INJECTOR		DATE	
INJECTOR SIGNATURE		JOB TITLE	
CLINIC NAME AND ADDRESS			

SG-SCU-2100009

GALDERMA