



SKIN TOX

AFTERCARE AND CONSENT FORM

Procedural Description

The **Skin Tox Treatment** is a minimally invasive skin booster inspired by Korean skincare techniques, designed to improve skin texture, reduce pore size, and create a smooth, glass-like complexion. This treatment involves the superficial application of **50 units of neurotoxin (Botulinum Toxin Type A)**, injected just beneath the skin's surface. Unlike traditional neurotoxin injections, Skin Tox is administered superficially, providing targeted skin-tightening, fine line reduction, and hydration enhancement without significantly altering facial expressions.

For clients interested in treating the neck area, an additional 20 units are required, priced at \$9 per unit. This optional add-on refines skin texture and reduces fine lines in the neck.

Treatments are generally recommended every 3-4 months for optimal results.

Benefits of Skin Tox Treatment

- **Improved Skin Texture:** Reduces pore size and refines texture for smoother skin.
- **Fine Line Reduction:** Targets superficial lines to achieve a youthful look.
- **Hydration Boost:** Enhances skin hydration, contributing to a dewy glow.
- **Subtle Skin Tightening:** Provides gentle tightening and improved elasticity without altering expressions.

Treatment Areas

- **Face:** The primary area, using 50 units of neurotoxin beneath the skin for a refined complexion.
- **Neck:** Optional treatment with an additional 20 units (at \$9 per unit) to improve texture and reduce fine lines.

Pre-Treatment Instructions

- **Avoid Blood Thinners:** Refrain from taking aspirin, ibuprofen, vitamin E, fish oil, or other blood-thinning agents 5-7 days prior.
- **Avoid Alcohol and Smoking:** Avoid alcohol and smoking for 48 hours before treatment to reduce bruising and enhance healing.
- **Cold Sore Precaution:** Inform your provider if you have a history of cold sores.
- **Arrive with Clean Skin:** Arrive with no makeup to maintain a sterile environment.

Post-Treatment Instructions

- **Avoid Touching or Rubbing:** Do not touch or massage the treated area for 24 hours.
- **Stay Upright:** Remain upright for 4 hours after treatment to avoid unintended product migration.
- **Avoid Makeup:** Avoid applying makeup to treated areas for 24 hours.
- **Avoid Heat and Exercise:** Avoid hot showers, saunas, and strenuous exercise for 24 hours.
- **Sun Protection:** Use SPF 40+ sunscreen daily and avoid direct sunlight for 7-10 days post-treatment.
- **Stay Hydrated:** Drink plenty of water to support skin hydration and healing.

Possible Side Effects and Risks

While generally safe, the Skin Tox Treatment may involve the following risks:

- **Common Side Effects:** Mild redness, swelling, bruising, or tenderness.
- **Less Common Risks:**
 - **Infection:** Signs include redness, warmth, or pus; contact us immediately if symptoms develop.
 - **Allergic Reactions:** Symptoms may include rash, hives, or swelling.
 - **Spread of Toxin Effects:** Although unlikely, superficial neurotoxin injections may spread, causing unintended muscle weakness.
 - **Neuromuscular Complications:** Rare cases of systemic effects, such as muscle weakness or swallowing difficulties.

Contraindications

This treatment is not suitable for individuals who:

- Are Pregnant or Breastfeeding.
- Have Known Allergies to Neurotoxin Ingredients.
- Have Neuromuscular Disorders.
- Have Active Skin Infections in the treatment area.

Acknowledgment and Consent

- **Procedure Understanding:** I acknowledge the nature and purpose of the Skin Tox Treatment.
- **Risks and Side Effects:** I understand the potential risks and side effects.
- **No Guarantee of Results:** I acknowledge that results may vary.
- **Alternative Treatments:** I have been informed of alternative options.
- **Questions Addressed:** I confirm that all my questions have been answered.

Consent to Clinical Photography

I understand that clinical photographs may be taken before and after my procedure for documentation, treatment planning, and monitoring of progress. These images are confidential and will be securely stored as part of my medical record. They will not be used for marketing or educational purposes without my explicit, separate consent.

WRITTEN CONSENT

By signing below, I confirm that I have read and fully understand the information provided in this consent form for the **Skin Tox Treatment**. I acknowledge the potential risks, benefits, and aftercare requirements, and I agree to follow all recommended instructions. I confirm that I have had the opportunity to ask questions, and all my questions have been answered to my satisfaction. **I consent to the administration of the Skin Tox Treatment by the trained professionals at Honey Skincare Studio.**

PRINTED NAME:

SIGNATURE:

DATE:
