



Woodbridge Dermatology
& Laser Centre

Dr. Gail L. Nield, M.D., FRCPC

Dr. Antony S. Nield, M.D.

NIELD & NIELD MEDICINE

PROFESSIONAL CORPORATION

301 - 8077 Islington Avenue

Woodbridge, ON L4L 7X7

(905) 851-1436 Fax: (905) 264-8847

Patient Consent Form for Hyperhidrosis Treatment with BOTOX® injection

I am aware that when BOTOX® (botulinum toxin type A) is injected into the axilla/palms/soles; it blocks a neurotransmitter responsible for triggering the local sweating response. The average duration of effects is 7 months with 38.6% of patients achieving duration of effect for more than 1 (one) year. This may be shorter or longer in any individuals. The reduction in sweating begins to take effect in 1 (one) day, but may not be fully effective until day 7 (seven). I may need a second injection if the first was not enough to diminish the sweating.

Risk and Complications

BOTOX® is contraindicated for women who are pregnant or breastfeeding or who have a neuromuscular disorder. I am not aware that I am pregnant or breastfeeding or have Myasthenia Gravis or Eaton Lambert's Disease or any other neuromuscular disease.

When treating the underarm/palms/soles, the most common side effect of the treatment is a perceived increase in sweating in other parts of the body. This was reported in 4.5% of patients in clinical studies. Other adverse events include localized pain, tenderness and/or bruising, which can be expected for any injection procedure. Local muscle weakness may occur when the hands are treated.

Payment

I understand that this is a private paying procedure and that payment is my responsibility. In some cases, if I have a 3rd party insurance drug plan, reimbursement may be possible for part or all of the treatment costs.

I have read the above and understand it. The doctor has answered my questions satisfactorily. I accept the costs, risks and complications of the procedure.

Name: _____

Signed: _____

Date: _____ Witness: _____