

B.L.T. Numbing Cream Informed Consent (Benzocaine, Lidocaine, Tetracaine)

BLT NUMBING CREAM - TREATMENT PURPOSE

Benzocaine, Lidocaine, Tetracaine (BLT) Numbing Cream is a compounded analgesic topical cream used to numb your skin and improve pain tolerance during cosmetic procedures. BLT numbing cream will be applied to the planned treatment area 15 to 60 minutes prior to your procedure, and may extend the duration of your appointment. BLT is used in reference to a mixture of Benzocaine, Lidocaine and Tetracaine. BLT has associated risks. It is important that you provide a comprehensive medical history for our staff to review and evaluate its appropriateness for your treatment.

Reason/Benefits:

For pain reduction during radio frequency microneedling procedures or injections

Risks, side effects, and complications:

Risks include pain, rash, allergy, hypotension, discoloration, infection, burn, scar, and ineffective treatment. If numbing cream is used prior to radio frequency microneedling procedures it is important to avoid sun exposure and to wear sun block every day to reduce risk of complications. If you are tanned or have excessive sun exposure, please reschedule your appointment at least 6-8 weeks later for a safe and comfortable treatment. Alternative to numbing: Ice and recommended anti-inflammatory over the counter drugs.

Frequency and duration:

For optimal result, you will need to come in 60 minutes earlier for numbing cream application for radio frequency microneedling treatments and 15 minutes early for numbing any type of filler injectable treatments. You will need to purchase the numbing cream separately as each client may need a specific prescription for the BLT numbing cream. Pricing is provided by our front desk or the nurse administering the treatment.

Treatment:

The numbing cream will be applied to the area of treatment. Duration of treatment: 15 to 60 minutes prior depending on type of treatment.

Post Treatment Precautions:

Wash or wipe out numbing cream prior to procedure. If rash, hypotension, or allergic reaction developed, please notify doctor so that we avoid future use of numbing cream on you.

Post Treatment Expectation: You are still likely going to experience so level of discomfort with numbing cream. And if you are doing laser, we will reduce the power to ensure a safe and comfortable treatment.

I consent to the treatment known as the numbing cream. This treatment has been explained to me and I have had the opportunity to ask questions regarding the procedure. I understand that these treatments are not an exact science and the degree of my improvement is variable. By my signature below, I acknowledge that I have read the information and consent and that I have been given the opportunity to ask questions and that my questions have been answered to my satisfaction. I have been adequately informed of the risks and benefits of this treatment and I wish to proceed with the numbing cream. I have been informed and understand that I need to pay for the numbing cream separate from any injectable treatments or radio frequency microneedling treatment. I also understand that any appointment that I make that is not cancelled within 24 hours I will be charged a \$50 no show fee.

Print Name _____

Patient Signature Date

Beautox Bar LLC

I understand the benefits, risks, treatment, precautions and expectations.

Elizabeth Peterson, RN - VP Elizabeth Peterson, RN