

Little Beauty ACADEMY

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Anti-Wrinkle Injection Refresher

How does botulinum toxin work?

BTX works by inhibiting the release of the neurotransmitter acetylcholine from motor nerve terminals through 4 stages; Binding, internalization, blocking and reestablishment of neuromuscular transmission.

In simpler terms to understand- Btx works by blocking the signals sent to the muscles, without these signals, the muscles cannot contract. By not contracting, this reduces the appearance of lines and wrinkles, and prevents lines and wrinkles from forming.

Stage 1: BINDING

Btx binds to receptor on external membrane of motor cholinergic neurons via the heavy chain.

Stage 2: INTERNALIZATION

Btx then enters the nerve terminal via endocytosis to form a toxin receptor vesicle. Light chain of the molecule is released into the cell.

Stage 3: BLOCKING

When inside the nerve terminal, btx type A cleaves SNAP-25. As the snare complex cannot form, exocytosis of Ach is blocked.

Stage 4- RE-ESTABLISHMENT OF NEUROMUSCULAR TRANSMISSION

Btx prevents affected terminals from stimulating contraction of the muscle. The storage and synthesis of Ach and the conduction of electrical signals along the nerve fiber is unaffected.

The development of a new neuromuscular junction means that muscle activity continues- usually after around 3 months meaning clients will need to repeat the treatment usually every 12 weeks to maintain results.

Therapeutic Uses

- Cosmetic; Facial lines (frown lines, crow's feet), Hypertrophic platysma muscle bands
- Sweating and Allergy Disorders; Axillary and palmar hyperhidrosis, Frey syndrome (redness and sweating related to food)
- Focal Dystonia; Cervical dystonia (spasmodic torticollis), Blepharospasm (eyelid closure)
- Smooth muscle Hyperactive Disorders; Neurogenic bladder, chronic and fissures
- Chronic pain and localized muscle spasms; tension headache, migraines, lateral epicondylitis.

Dermatological/Cosmetic Indications

Aesthetic indications

- Dynamic lines
- Horizontal forehead lines
- Glabellar lines
- Crow's feet
- Bunny lines
- Marionette line
- Platysma bands
- Dimpled chin

Non aesthetic indications

- Localized axillary or palmar hyperhidrosis which has been nonresponsive to topical treatment.

The causes of facial lines and wrinkles

Sun damage: Irregular thickening of the dermis causes collagen damage and can change pigmentation

Smoking: Decreases capillary blood flow, causes lip lines, reduces collagen and elastin.

Muscle movement- Repetitive facial expressions, people tend to sleep on one side, smiling and frowning

Loss of fat: Loss of fat/volume in face.

Loss of elasticity due to gravitational changes: Soft tissues lose resilience

Remodeling of cartilage and bone: Stretching of cartilage

Consultation advice

Sun damage- Avoid long exposure to the sun, use a sunscreen of SPF 50.

Smoking- Increases facial lines and delays skin healing.

Exercise- Good for the skin, promotes healing and health

Products- Emollients, Vitamins A, B, C and E, antioxidants, Alpha and Beta-hydroxy acids

WATER- Drink plenty of water

Diet- Consume a healthy, balanced diet with plenty of fruits and vegetables.

It's a good idea to add all these to your aftercare sheets, so clients remember to follow this advice when they leave the appointment too. (See end of manual for example aftercare forms & consent forms you can use & adapt to make your own)

Contraindication

Medical:

- At 'risk' medical condition (myasthenia gravis, Lambert- Eaton syndrome, ALS)
- Pregnancy, breast feeding or planned pregnancy
- Allergy or sensitivity to BTX
- Aminoglycoside antibiotics (Gentamicin, Amikacin, Streptomycin)
- Active cancer

Facial:

- Marked facial asymmetry
- Skin problem/infection near injection site
- History of facial nerve palsy

Why are these contraindications?

Myasthenia gravis is a long-term neuromuscular disease which leads to varying amounts of skeletal muscle weakness. The most commonly effected muscles are those of the face, eyes and swallowing. This condition can also lead to drooping eyelids, loss of vision and trouble talking and walking.

There is research which suggests a suspected link between botulinum toxin and myasthenia gravis, therefore it is advised not to perform this treatment on anyone with this condition.

Lambert-Eaton syndrome causes the immune system to attack neuromuscular junctions, meaning the area where your muscles and nerves connect. This is usually where your nerve cells pass signals along to your muscles, which enables them to move. It again like Myasthenia gravis can cause muscle weakness and trouble walking.

This advice would be best practice for any neuromuscular diseases & If you are ever unsure you should contact your prescriber for clarification/advice.

Pregnancy and breastfeeding:

Administering botulinum toxin to a pregnant lady can be dangerous & may harm the fetus/baby. Likewise, if people are trying to conceive & may be pregnant this treatment should not be carried out.

Like alcohol, btx can pass through to the milk and essentially be fed to the baby if the client is breastfeeding.

Aminoglycoside antibiotics (Gentamicin, Amikacin, Streptomycin):

Research shows btx can interact with these antibiotics, as these drugs can cause neuromuscular blocking activity which can lead to nerve damage.

Cancer:

No treatments should be carried out for a client with active cancer, this is safe practice for any type of cancer and for any treatment. It would not be worth the risk to the patient, with all of the medication for the cancer, the possible side effects from the btx etc.

If a client is in remission, some clinicians do not treat, purely at the risk of is causing harm to the patient, if you do treat with botulinum toxin or any injectable treatment, it is strongly advised you ask the client to provide a letter from their oncologist or GP who give the ok for them to get this treatment done. Any proof like this should be on letter headed paper, signed by the clinician and you should take a copy for your records.

As botulinum toxin has to be prescribed, legally a consultation needs to be done prior to injecting the treatment, therefore it is also the prescriber's responsibility to ensure the client is safe to have this treatment. It is also your responsibility as the clinician injecting to ensure the prescriber knows your clients' medical history, and to double check the consent forms before injecting.

Botox (50 units) Mixing the Botulinum Toxin

- 1. Botox vial- Storage 2-8 degrees Celsius, check expiry date, remove lid
- 2. Insert green 21G needle into rubber bung to release vacuum
- 3. Draw up 1ml of Bacteriostatic 0.9% saline using the 21G needle
- 4. Insert needle towards the bottom of the vial and slowly inject saline
- 5. Turn vial as injecting – don't shake.
- 6. Concentration- 1ml contains 50units, 0.1ml contains 5 units

1ml dilution of Botox/ Boccouture (50 Units)

Volume (ml)	Units of Botox
0.05	2.5
0.1	5
0.15	7.5
0.2	10
0.3	15
0.4	20
0.5	25
0.6	30
0.7	35
0.8	40
0.9	45
1.0	50

Botulinum Toxin products are NOT interchangeable

Dilution Protocol: Azzalure

- Azzalure 125 Speywood Units 0.85ml per vial
- Botox/Boccouture 50 units. 1.0 ml per vial

Volume (ml)	Units of Azzalure	Units- Botox or Boccouture
0.05	7.5	2.5
0.1	15	5
0.15	22.5	7.5
0.2	30	10
0.25	37.5	12.5
0.3	45	15
0.35	52.5	17.5
0.4	60	20
0.45	67.5	22.5
0.5	75	25

Step-by -step mixing:



1. *Attach Green needle to 1ml syringe and draw up 0.9ml bacteriostatic saline. Remove cap from vial and inject the saline directly into the toxin vial.*
2. *Swirl the vial slightly to allow the powder to dissolve, once dissolved use the same syringe and green needle to draw the diluted Bocouture back into the syringe. You may find it easier tilting the vial to the side to draw up.*

If there are air bubbles, flick the syringe slightly so they go to the surface. If you cannot get all of the air bubbles out, re-inject the solution back into the vial and draw up again.

3. *Once you have drawn it back up, dispose of green needle into sharps box.*
4. *Insert yellow needle onto syringe, keeping cap covered to remain sterile. The Bocouture is now ready to inject.*

Only draw up what you need, for example if a client only wants one area of btx only draw up the amount in ml that you need. So that the remaining can stay in the vial and be used for the top-up, if kept in the fridge. If you have already started to inject the client, the remaining in the syringe must be thrown due to cross-contamination risks.

Equipment List

- Toxin vial
- Bacteriostatic saline 0.9%
- Syringes- 2ml, 1ml, speywood unit or insulin syringe (depends on toxin and dilution)
- Needles; Green 21G for drawing up, yellow 30G for injection
- Topical anesthetic cream e.g. LMX4
- Gloves (non-latex)
- Mirror
- White marking pencil
- Skin cleanser
- Consent form
- Client record
- Aftercare advice sheet

Pre-procedure

- Gain consent
- Take photos of muscles contracted and relaxed
- Note asymmetries
- Never advise to discontinue aspirin/clopidogrel
- Stop other NSAID'S, vitamin E etc. 7-10 days prior to decrease risk of bruising
- Client should be seated or slightly reclining to best observe expressions
- Ensure client is comfortable.
- Inform client when you are ready to inject
- Monitor client's pain during procedure.
- Clean client's treatment area.

Assessment of the face

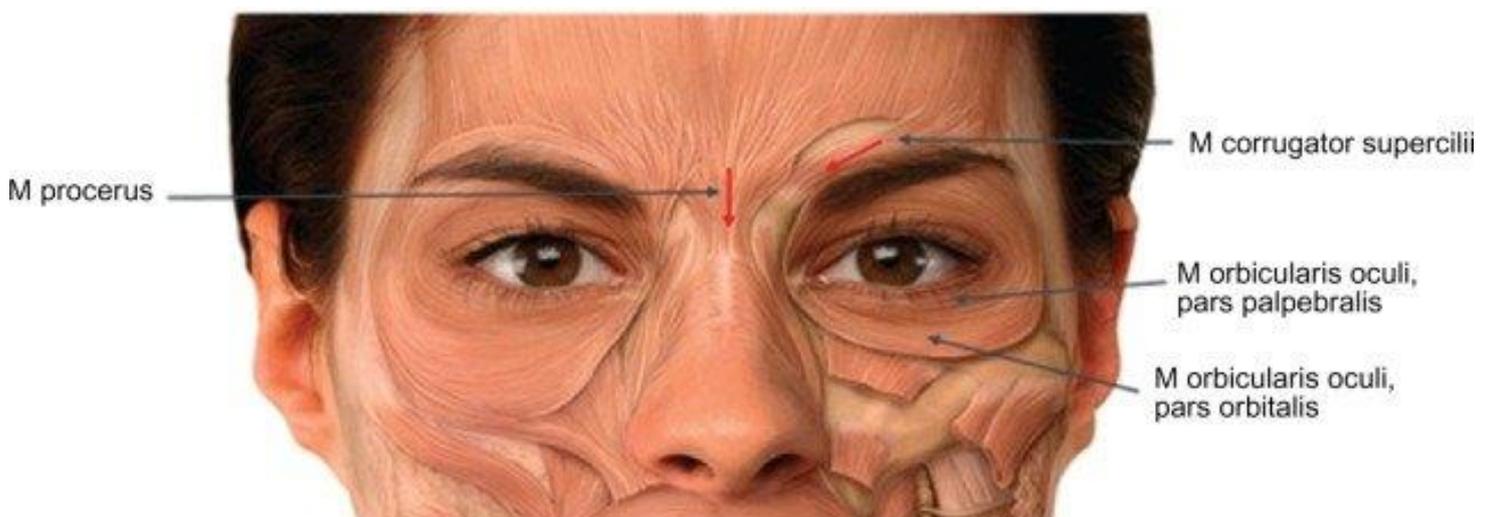
- Anatomy- Asymmetry
- Active/Dynamic lines- generally treated with BTX
- Gravitational lines- generally use dermal fillers
- Skin quality- chemical peels, laser therapy

Injection Technique

- Wear gloves (non-latex)
 - Anesthesia- not usually required, ice to cool area, topical anesthesia; LMX4, EMLA
 - Mark injection sites- soft pencil so easy to remove
 - Hold onto gauze- Apply gentle pressure to any bleeding
 - Record technique- Easy to duplicate and modify
 - **Glabellar Frown Lines**
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- Indications: frown lines, medial eyebrow elevation
 - Muscles targeted- Glabellar complex, corrugator superciliosus, procerus, depressor superciliosus
 - Elicit contraction- 'pull an angry face' 'concentrate'
 - Initial dose 15-25 units

Glabellar muscles:

- Glabellar Complex
- Procerus, corrugator superciliosus, depressor superciliosus
- Function; Draw eyebrows medially and inferiorly
- Corrugator and depressor superciliosus m.lie deep to Frontals and Procerus

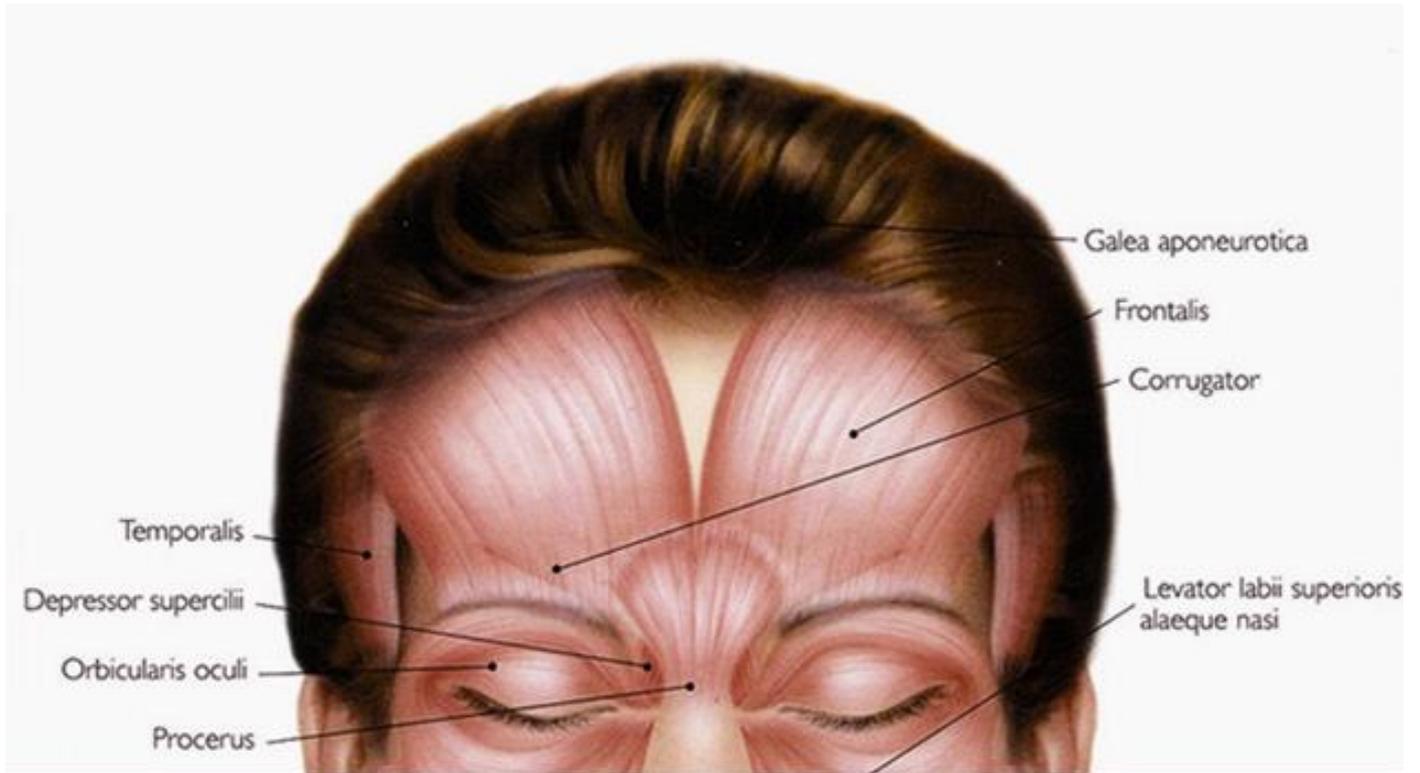


10-20 units of BTX in 4-10 divided doses

Danger areas:

10-20 units in 4-10 divided doses

In the lateral to mid pupillary line, stay 1 finger width above the supro-orbital rim.



Crow's feet

Indications: crow's feet, lateral eyebrow lift

Muscle targeted: orbicularis oculi

Elicit Contraction: grin or squint

Initial dose- 7.5- 15 units per side

Orbicularis Oculi

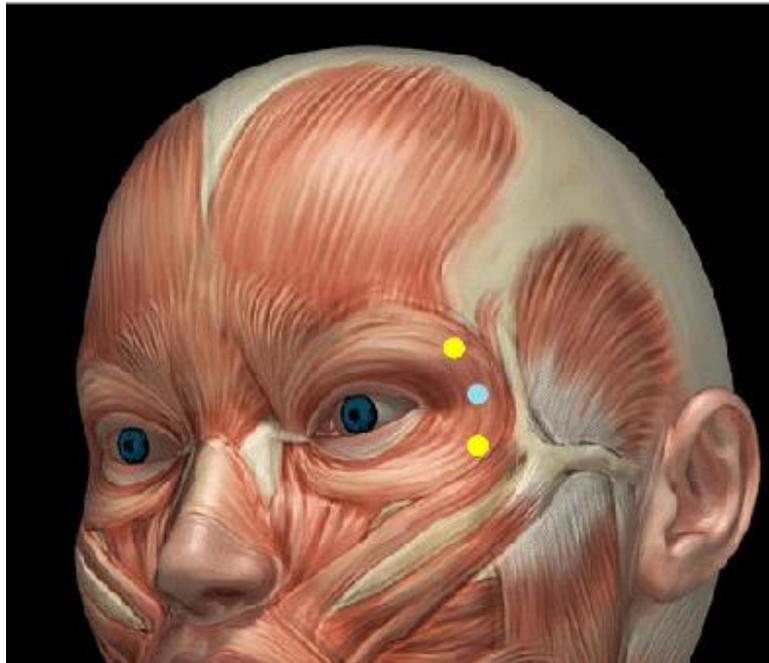
Thin, superficial muscle that encircles the eye

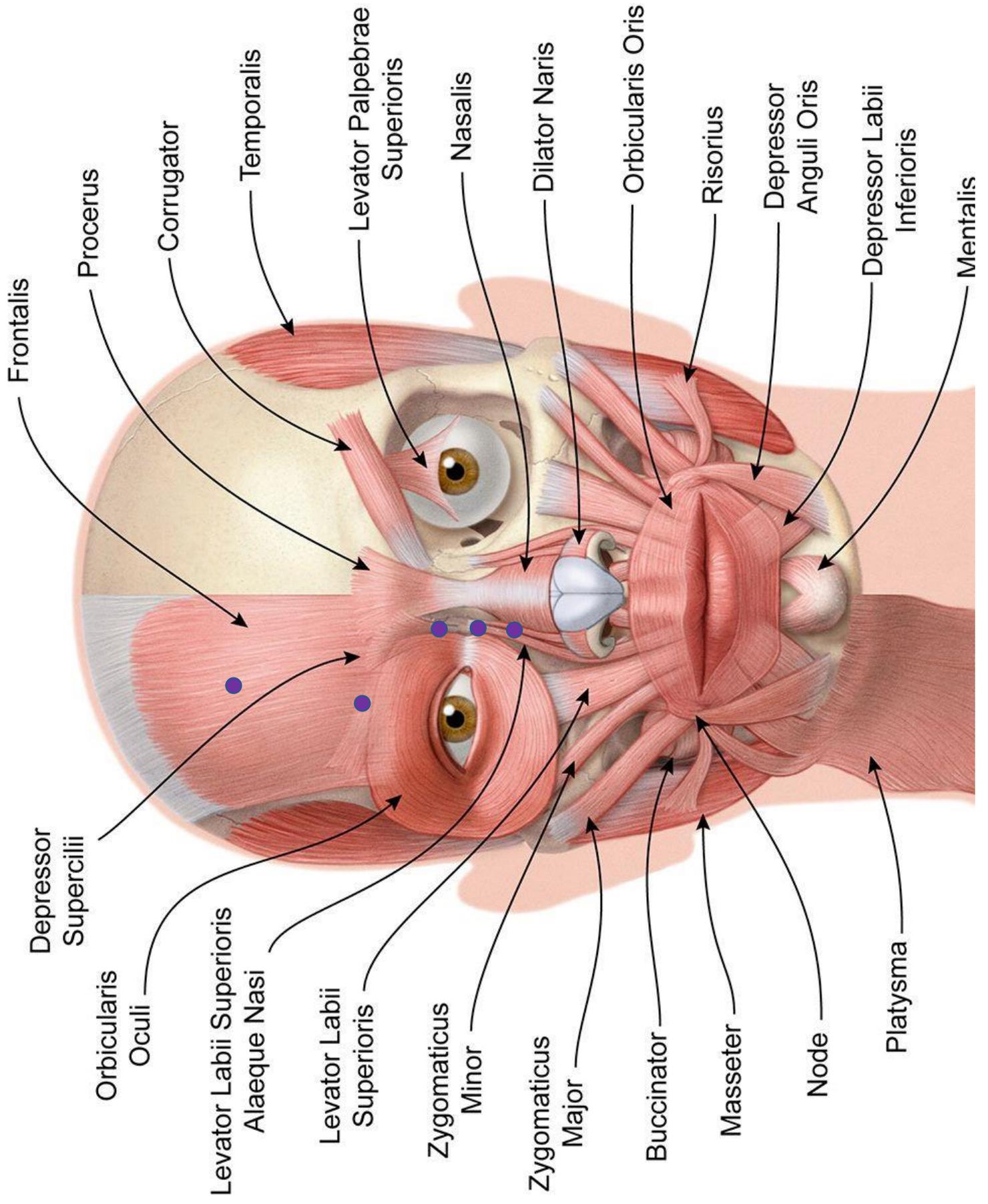
Palpebral portion covers eye, orbital portion around eye

Function: Lateral eyebrow depressor- Crow's feet

Palpebral portion- Reflex and voluntary eyelid closure

- Examine variation by getting patients to smile and squint and make a note of the upper and lower borders of crow's feet.
- Check closely for blood vessels to avoid.
- You don't need to inject deeply as the orbicularis oculi is a superficial muscle.
- Injection technique- 2-5 injections (2-4 units per injection)
- Dose- 7.5-15 units per side
- Cautions- Below the eye, 1-2 units lateral to pupil, stay above the zygomatic arch, avoid any veins. Use ice if needed.





COMMON	Request photos/videos from client, review and examine history	Management options
Swelling	✓	Local trauma, typically lasts from 1-2 weeks post treatment unless associated with bruising, oedema or allergy.
Headache	✓	Stats show 10% of people will get headaches for up to 14 days post treatment. Advise paracetamol, fluids & to see GP if persists.
Petichia (<2mm) Purpura (3-5mm) Haematoma Echymosis/bruising >5mm	✓	Everyone will bruise differently; advice ice & reassure its only temporary.
Asymmetry	✓	More noticeable in the frontalis, rectify by adding more to the other side if safe to do so.
Hasn't worked as well as client expected	✓	<ol style="list-style-type: none"> 1. Review and top up between days 14-19 if required 2. Allow time for it to fully work: 14 days 3. Compare with before photos 4. Advise it is not a complete science and results can vary 5. You could try an alternative brand in 12 weeks' time 6. Advise clients botulinum toxin won't get rid of deep lines, only softens them.
Eyebrows too raised, or lines above eyes	✓	Not injecting enough toxin in one side (or both) can cause the eyebrows to raise too much, leaving 'M' lines above the eyes. Rectify by injecting 0.25ml to lateral muscle. Use tiny dose as this area has a high risk of eye drooping.
Less Common	Request photos/videos from client, review and examine history	Management options
Medial brow ptosis	✓	Caused by injecting either too much in the medial forehead or too inferiorly. Can also be caused by injecting into the frontalis instead of the corrugators (injecting too high near eyebrow area). Advise toxin will wear off, steam can help break down faster & inject lower next time.
Lateral brow ptosis	✓	Can be caused by injecting too much into lateral frontalis. Can rectify by injecting orbicularis oculi (if haven't already injected).

The 'Spock brow'	✓	Can be caused by a lateral frontalis, lateral injection can soften. Can also advise to wait if drop risk is high.
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Rare	Request photos/videos from client, review and examine history	Management options
Eyelid ptosis	✓	Levator Palpabrae muscle relaxed by botulinum toxin. Will take 6-8 weeks to return to normal. Advise steam can help break the toxin down more quickly. Aid recovery and discomfort with Apraclonidine/lopidine eye drops. These require a script and can be prescribed by your prescriber or clients GP.
Muscle spasm	✓	Usually happens in the frontalis, could be relieved by alternative product top up. Reassure will resolve in a few weeks. Be aware re-injecting botulinum toxin may cause the same issue.
Double vision	✓	This is where the lateral rectus muscle is affected. Usually by over medial injection of orbicularis oculi (crow's feet). Recovers with time only & advise client to see GP.
Dry eye	✓	Due to tear gland being affected. Treat with eyedrops, advise to see GP if issue persists.
Cheek ptosis	✓	Caused when injecting orbicularis oculi, instead injecting into zygomaticus major (cheeks). Will recover in time.
Periorbital edema	✓ ✓	Rare but can occur after frontalis treatment. Will recover over time.

Aftercare:

- Avoid lying down or bending forward for long periods of time for at least 4 hours after treatment
- Do not massage the injected areas
- Avoid rigorous activity for the rest of the day
- Move injected muscles every 5 minutes by frowning, squinting and raising eyebrows for an hour post injection
- Take paracetamol if you develop a headache
- You can apply makeup to cover bruising
- If you have any questions or concerns, please contact your place of treatment

SEE BACK OF TRAINING MANUAL FOR EXAMPLE AFTERCARE SHEETS YOU CAN PHOTOCOPY AND USE FOR YOUR CLIENTS.

TOXIN MARKETING

Please copy this link into your safari to read the full ASA guidelines regarding botulinum toxin advertising:

<https://www.asa.org.uk/resource/enforcement-notice-botox-social-media.html>

Legally, you are not permitted to advertise botulinum toxin as it is a prescribed drug. Any words that could hint at being the same treatment can also result in your social media posts/pages being removed and people reporting your account.

This includes posting before and after photo's that could relate to this treatment.

The best thing to advertise is for 'anti-wrinkle consultations' as this could refer to any cosmetic treatment. This way your clients know you offer this, without mentioning the exact words, and send the clients your before and after photos direct if they would like to see your work.

This is frustrating for us all, especially as client photos are what will draw clients to your page, however we have known people who have ignored the guidelines and have had their Instagram pages completely removed.

Botulinum Toxin FAQ's

When should a top up be done if required?

The btx will take 14 days to fully work, therefore a top-up shouldn't be done before this time. Injecting more Botox before 14 days could lead to complications such as drooping or eyebrows raising too much. The best time for a top up are days 14-19, this is when it is safest and will have best effect. If the client isn't available during this time they should wait until their next treatment in 3 months' time.

What If my client is requesting a top-up at a later stage?

Often, clients will message 4-6 weeks after initial treatment, stating their treatment has worn off. This can happen because the muscles are starting to contract again, they may have been exercising which can cause the toxin to break down more quickly, and things such as sun exposure. Advise it is only safe to inject more Botox at earliest week 10 from initial treatment, over-use can cause immunity to Botox and complications such as drooping.

Do the results always work the same for each client?

Botox isn't a complete science, so you could have one client and treat them twice with Botox and gain different results each time. This is why it is really important to take before photos so you can compare the results.

Should I charge for top-ups?

I never advertise top-ups as part of the treatment, I find if you advertise it, clients will come for it regardless of whether they require it or not. I instead ask the client to send me photos of them frowning, raising eyebrows and smiling to compare their results to the before photos. This way we can see if there is any movement, and if a top-up is required. Often client's will tell you themselves whether they think the results are to their expectations. You will find some people charge £20-£30 for top up's and some offer it as part of the treatment. Remember one vial of 50 units Bocouture or 125 units Azzalure covers the 3 treatment areas. If you only order one vial on the prescription for the client you will need to pay to order another prescription for the top-up vial from your prescriber, as well as the cost of the vial itself. So, plan your prices according to whether you are going to include the top-ups.

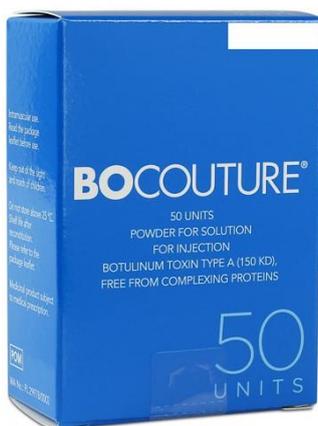
Are top-ups always required?

Often no, and if they are it's never usually for the crow's feet area. The frontalis and glabella muscle can be stronger and may require a top-up.

My client doesn't think it has made a difference

This is why it is essential to keep the before photos of all of your clients. You can compare the results next to each other on collage app's and show that it has taken effect. This is often a good way to manage possible complaints, by showing the client that lines and wrinkles are visibly reduced.

Botulinum Toxin



Research suggests Azzalure has better results than Bocouture, however some clinicians prefer the results from Bocouture. Again, like fillers try both and see which you get better results from. The results can also vary from client to client with each remember.

- *Azzalure and Botox you have to keep in the fridge, Bocouture you don't need to keep in the fridge so logistically this may be better for some people.*
- *Currently Aesthetica Solutions sell Azzalure in a 2 pack only. Meaning you have to pay for 2 vials worth instead of 1, even if you only have one client. The second vial can be used for the top up if required or for that clients next treatment.*
- *Having tried all 3 of the above, Azzalure or Bocouture are my go-to. Usually I lean towards Azzalure, however for training session where often no fridge is available, we use Bocouture.*
- *All 3 are diluted with Bacteriostatic saline.*
- *Remember you need a prescription for btx- Refer to prescriber guide separate to manual for step-by-step guide for using our prescriber.*

EQUIPMENT

Complete equipment list for btx & filler treatments

- *Toxin vial*
- *Dermal filler*
- *Bacteriostatic 0.9% saline*
- *Numbing cream i.e. LMX4*
- *Latex-free gloves*
- *PPE: See JCCP guide for advised PPE:
<https://www.jccp.org.uk/ckfinder/userfiles/files/Preparing%20for%20return%20to%20practice%20June%20update%20v2.pdf>*
- *Make-up remover/facial wipes*
- *Green needles (to draw up) 18G*
- *Yellow needles (to inject) 24G*
- *Sharps box*
- *Couch roll*
- *Small hand-held mirror*
- *1ml syringes*
- *Emergency drugs (See emergency drugs page)*

Usually Amazon are good for gloves, sharps box and PPE also. Once you have purchased your equipment, the only costs you really have regularly will be cost of the toxin or filler, and prescribing fees.

EMERGENCY DRUGS

It is essential you have these drugs before you inject any clients. These need to be stored and taken with you everywhere you go to inject.

- ***Epi-pen (If you cannot get hold of an epi-pen, you can purchase Adrenaline injections (1:1000) units, or Emerade 500mcg).***
- ***Hyaluronidase – we advise to stock 4 vials. If you cannot get hold of 4, minimum you should have is 2 at any one time.***
- ***Soluble Aspirin 300mg***
- ***It is a good idea to have lucozade bottles, or sugary sweets/drink stocked.***
- ***First aid kit is recommended.***

In an emergency situation, you would use your knowledge from your life support training and call 999.

REGISTERING WITH THE PHARMACY

The following are useful
 Wigmore Medical
 Acre Pharmacy
 Fox Pharma
 Reliable Medicare

WHERE YOU CAN WORK

So, you have completed your aesthetics training, great! Now you can decide where you want to work, and how you want to run your business. Most of our students work for themselves, working from home or from established salons.

1. *Working from salons. This is a great way to build your clientele and we would always recommend this to all of our students. At least to begin with, this is a really good way of getting in lots of practice, with the help of the salon advertising for you & bringing you the clients. You will either be able to pay a day rate, so each day you use their room you will pay X amount. Some salons prefer to take a % of what you make during the day. Both have their advantages. Paying X set amount I personally think is better sometimes as you know once that payment is done, everything you make that day is your own. However, paying a % of your total earnings to the salon can be beneficial as it sometimes means more incentive for the salon staff to market your business and book clients in for you. Afterall, the more people they book in, the more money they make. Joining beauty groups on Facebook or approaching local salons and asking if they need an aesthetic practitioner is an easy way to get a base sorted.*

2. *Working from home. This is popular as it means you can fit clients in as and when this suits you. Students have often used spare rooms in their house or used dividers to section one part off for a treatment bed and some storage. Remember to check with your local council for guidelines about working from home.*
3. *Working mobile. Pre-covid19 insurance companies didn't have an issue with people working in other people's homes. It is always best to check with your insurance broker before you work mobile, to see if they cover this, especially during this time. From personal experience, this is a hassle as its time consuming going from house to house, you feel like you are taking everything but the kitchen sink with you and its really difficult sometimes to inject in other people's homes if they don't have anywhere for you to place all of your equipment.*
4. *Established aesthetic clinics. Now and again you will see advertisements to work for established clinics. This is great for continued development and training opportunity's, great for experience injecting if they already have a clientele, but not so great income wise (usually). You are most likely going to make more money working for yourself, rather than on a salaried basis.*
5. *Dental practices. Often dental surgeries either rent their rooms out to aesthetic practitioners or take you on to do aesthetic treatments. This is great because not only do you have access to their clientele, you also have clinical medical rooms to work in. This set up usually works similar to salons, either renting the room for the day or giving them a cut of your earnings.*

PRICING ADVICE

Below are my own price lists for both of the locations I hold clinics. As you can see, they vary depending on location. One of the most commonly asked questions once a student has completed training is how much they should charge. This always depends on where they live, or where they are practicing.

The best thing to do is research local aesthetic clinics and businesses local to you, and either match their prices or go slightly lower than the average prices. One thing to remember is never go to low, people will worry they aren't getting either good products, or a great service if you charge 80% less than everyone else in the area. You are medical professionals, have extensive training and trained in complications and management. People will pay for the service knowing they are going to a professional who is safe.

Your prices may also vary depending on the product you use.

- *Remember the ASA guidelines for advertising prescription drugs. Use 'anti-wrinkle' consultations'.*

LONDON

0.5ml lip filler: £160

1ml lip filler: £220

Anti-wrinkle consultations: POA

Vitamin B12: £30

Cheek Filler 2ml £400 (each additional 1ml £180)

Jawline Filler £420 (each additional 1ml £180)

Tear troughs £420

Fat dissolving £200 per area, per session

MIDLANDS (Burton on Trent clinics)

0.5ml: £120

1ml: £180

Anti-wrinkle consultations: POA

Vitamin B12: £25

Cheek Filler 2ml £380 (each additional 1ml £180)

Jawline Filler 2ml £400 (each additional 1ml £180)

Tear troughs £380

BUSINESS TIPS

- *Decide whether you want to go Limited and set up a limited company on company's house or operate as a sole trader.*
- *Business banking. We recommend setting up a business bank account, easier to manage your payments and tax. There are tons of business accounts out there. Tide is a good one to set up which is quick, you gain account number and sort code the same day and I personally find it really easy to use!*
- *Find an accountant. We, as a business wouldn't be able to function without our accountant. They do all the mathematics which would be virtually impossible for me to get my head around without sitting there for hours on end! We recommend Andy: andy@hallaccountants.co.uk*
- *Card payments. For card payments we use a Sum-up machine, really simple and easy to use. You pay a percentage off each transaction you receive; they send a card reader out to you and you download the app on your phone so you can check payments coming in (payments go directly to your linked bank account).*
https://sumup.co.uk/welcome/home/?gclid=Cj0KCQiA60r_BRC_ARIsAPzuer8DomR3it9poEJgKlaEAG87YF1uFj8hTOnTJe-6AWZBMPcgUjCzdGQaAkWwEALw_wcB

SOCIAL MEDIA AND MARKETING

Social media is where we find most of our clients/students to train. Instagram is our main social media account; I am not the best at updating our Facebook! Nowadays everyone is on social media, and it's the perfect way of finding clients suitable for your clinics. You can market your business any way you want to, and mostly all for free on platforms like Instagram and Facebook.

- *Create a business profile on Instagram. This way you are able to access more features and see things such as insights & promote posts.*
- *Apps such as 'Canva' are what we use for our posts, you can use their templates or make your own.*
- *Follow people in your area, reach out to people who are local to you and can use your services.*
- *Try to be consistent with posting*
- *Use hashtags to gain likes, followers and draw people to your page*
- *Tag the location when you are posting pics to find people in your area*
- *Gift vouchers are a good idea for all seasons, especially during the run up to Christmas.*
- *Ask family and friends to share your page & follow!*
- *Upload all of your before and after photos. Investing in a ring light from places like Amazon usually mean really good photos!*
- *Websites: Wix and Shopify are probably the easiest websites I have used in the past. If you don't want to make your own, or like me you can't make a decent website at all there are website builders who can design and create your perfect website. Shop around for the best price. Websites are a good way to manage your bookings, but there are also booking systems you can use such as 'Booksy' which clients can click on via link and book an appointments*

INSURANCE

Insurance company we recommend: Insync

<https://insyncinsurance.co.uk>

To arrange your quote and insurance policy, contact Joel McKay at Insync using the email below & mention Essex Dolls Aesthetics & Training Academy has recommended you.

Joel.McKay@insyncinsurance.co.uk

- *Medic price is usually around £500 per annum.*
- *Flexible payment options or one-off payments*
- *Insurance policy usually takes no longer than 1-2 days to set up depending on the time you call.*
- *You can inject your own clients as soon as you have your indemnity insurance in place.*

There are many aesthetic indemnity providers, research and gather quotes and work out which is the best for you and your business. It is crucial that you have indemnity insurance in place before you inject any clients of your own. If you go onto do advanced training, some treatments may not increase your policy, however you must inform them to add the treatments onto your policy.

Botox aftercare

If you have any concerns, please contact (insert email and phone number)

The treatment does not work instantly; takes about 4 hours to absorb into the muscle and starts to visibly work within 2-6 days after treatment. At 14 days it is at its maximum effect.

The full effects last from 6 – 16 weeks before movement returns. The rate of movement return varies from person to person and the frequency of treatments is an individual choice if a restricted movement is to be maintained. If you get some movement back after a few weeks, this is normal and reflects the rate of your cell receptor replacement occurring in the facial muscles.

After your treatment

Some activities may increase the risk of side effects:

- Do not touch the injection areas as you may introduce bacteria and cause infection
 - For 4 hours after the treatment, do not lie down or do any rigorous exercise or exert pressure on the area treated
- For 24-36 hours after treatment, do not expose yourself to extreme movements, exercise or temperatures to avoid the solution migrating to other muscles
- If you experience any adverse effects, contact (insert name) and your GP as necessary
 - Possible Risks & Side Effects: Botulinum Toxin Type A

You may experience some temporary side effects following your treatment.
Common side effects (1-10 people in 100)

- Bruising, redness, tingling, swelling, irritation, itching, discomfort at the injection sites, headache,

Uncommon side effects

- Tired eyes, drooping of upper eye lid, watering eyes, dry eyes, swelling of the eye lid, twitching of the muscles around the eye, disturbed or blurred vision, blurred vision – be careful if driving or operating machinery, eye movement disorder, muscle weakness in eyes, overcompensation in other muscles. Dizziness. Allergic reactions – itchy rash. Muscle weakness away from injection site

These side effects usually occur within the first week and are usually mild to moderate.

Please Note: For a very few people, on some occasions, treatment with Botulinum Type A has no or little effect. This will not necessarily lead to a refund.

General consultation questionnaire

Name: _____ Ms/Miss/Mrs/Mr
(delete as appropriate)

Address: _____

Postcode: _____ Home Tel: _____

Mobile: _____ e-mail: _____

Date of birth: _____ Occupation: _____

Do you smoke? Yes/No How many per day? _____

If 'No', have you ever smoked? Yes/No When did you give up? _____

Height: _____ Current weight: _____

Are you trying to lose weight? Yes/No If 'Yes', how much? _____

Do you have a special diet? Yes/No
If 'Yes', is it Vegetarian/Vegan/Gluten free/Other: _____
(delete as appropriate)

Do you take regular exercise? Yes/No
If 'Yes', what type of exercise do you do? _____

How many days per week do you exercise for 20 minutes or more? _____

Do you drink alcohol? Yes/No If 'Yes', how many units per week: _____

Are you pregnant or breast-feeding? Yes/No

Are you currently taking or have ever taken any of the following medications?

Laxatives/Vitamin E	Yes/No	St John's Wort	Yes/No
Hormones/contraceptive pill	Yes/No	Gentamicin/Neomycin	Yes/No
Steroids/gold injections	Yes/No	Roaccutane	Yes/No
Aspirin/pain killers	Yes/No	Anti-coagulants	Yes/No
If 'Yes', please give details:			

Please list any medication you are taking (including supplements):

Are you allergic to any of the following?

Plasters	Yes/No	Stitches	Yes/No
Iodine	Yes/No	Local anaesthesia	Yes/No
Antibiotics	Yes/No	Beef/Pork	Yes/No
If 'Yes', please give details:			

Are you currently undergoing desensitisation treatment?

Yes/No

If 'Yes', for which allergen? _____

Have you suffered from any of the following?

Heart disease/angina	Yes/No	Thyroid problems	Yes/No
Auto-immune disease	Yes/No	Arthritis	Yes/No
Asthma/bronchitis	Yes/No	Convulsions	Yes/No
Facial cold sores	Yes/No	Depression	Yes/No
High/low blood pressure	Yes/No	Diabetes	Yes/No
Stomach ulcer/colitis	Yes/No	Skin disease (e.g. acne)	Yes/No
HIV/hepatitis	Yes/No	Glaucoma/cataract	Yes/No
Venereal disease	Yes/No	Bell's/facial palsy	Yes/No
Phlebitis	Yes/No	Hypoglycaemia	Yes/No

Do you have any neuromuscular disorders or defects?

Yes/No

e.g. Myasthenia Gravis, Eaton Lambert or Amyotrophic Lateral Sclerosis

Do you suffer from a bleeding disorder? e.g. haemophilia

Yes/No

Have you had any previous surgery?

Yes/No

If 'Yes', please give details: _____

Have you ever been admitted to hospital?

Yes/No

If 'Yes', please give details: _____

Patient name: _____

Patient signature: _____

Date: _____

Azzalure® consent record

Name: _____ Ms/Miss/Mrs/Mr

(delete as appropriate)

Address: _____

Postcode: _____ Date of birth: _____

I confirm I have been informed that:

- **Azzalure®** (Botulinum Toxin Type A) uses the toxin produced by the bacteria responsible for botulism in food poisoning. However, the amount of toxin used is minimal and generally well tolerated in clinical trials. The toxin temporarily weakens the muscles responsible for developing facial expression lines caused by muscle activity. Static facial lines, e.g. those due to sun damage, will not usually respond to treatment with botulinum toxin, as they are not caused by muscle activity.
- **Azzalure®** (Botulinum Toxin Type A) is licensed for the temporary improvement of moderate to severe vertical lines between the eyebrows (glabellar lines) and is injected into the skin to reduce these lines. You are having these injections because the severity of your lines has had an important psychological impact on you.
- **Treatment is not recommended if you are pregnant or breastfeeding.**
- After treatment with **Azzalure®** you should start to see an improvement within 2 to 3 days, however the full effect can take up to 30 days. The benefits of treatment usually last between 4 and 6 months, but can vary depending on your individual response.
- The most common side effects of **Azzalure®** are headache and injection reactions e.g. redness, swelling, irritation, rash, itching, numbness, pain, discomfort, stinging, bruising and bleeding. Normally these reactions are mild to moderate, reversible and occur in the first week after treatment. There is also a small possibility of slight drooping of the eyelid or visual problems.
- Very rarely, botulinum toxin may result in muscle weakness away from the site of injection. Other side effects are listed in the Patient Information Leaflet (please ask if you have not been given this).
- If any symptoms last for more than one week or you are concerned about any symptoms you should report them to your practitioner as soon as possible. Seek urgent medical help if you have difficulties breathing, swallowing, speaking or if your face swells up.
- **Azzalure®** may cause temporary blurred vision or muscle weakness. If affected, you should not drive or use machinery.
- **Azzalure®** contains a very small amount of albumin which comes from human blood. It is very unlikely that this could pass on an infection, but it cannot be entirely ruled out.

I have been fully informed about the risks and benefits of treatment with Azzalure® and authorise:

_____ [name of practitioner] to treat me.

Patient's signature: _____ Date: _____

I confirm that I have fully informed the above named patient about the risks and benefits of treatment with Azzalure®.

Practitioner's signature: _____ Date: _____

