



FILLER

Patient Name : _____ Visit Date : _____

- Hyalutonic Acid Filler injections
- Prep: Face cleansed with Skin Medica Sensitive skin cleanser, then topical Chlorhexidine
- Face marked out per Dr. Remington
- Antiviral meds if indicated:

- Face local topical anaesthetic applied to lips
- Syringe type and number of syringes:

	JUPXC	JUXC
<input type="radio"/> Volift Lot	<input type="text"/>	<input type="text"/>
<input type="radio"/> Volbella Lot	<input type="text"/>	<input type="text"/>
<input type="radio"/> Voluma Lot	<input type="text"/>	<input type="text"/>

Additional Notes :

