



Name: _____

Is this your 1st time getting Dermal Fillers? Yes No

How did you hear of Botox Oahu? _____

Do you have any allergies? No Yes _____

Have you taken Motrin, Aleve, or Naprosyn in the last 3 days? No Yes

Have you taken Aspirin, blood thinners, or Excedrin in the last week? No Yes

Do you get cold sores on your lips? No Yes

Dermal Filler Location Circle areas you are interested in treating



Remember that if you give us a 5 star rating (Please!) on Yelp for your services today you will get a credit of \$25 for your next visit. Please let us know if we can serve you better in any way. Mahalo!