Kybella Patient Instructions

Pre-Treatment:

- Inform provider of all medical conditions, medications you are taking, skin disorders, allergies, history of anaphylaxis, and any other medical problems you may have
- Please keep in mind that you may want to schedule your treatment at least two weeks in advance of a special event. Swelling will occur
- Avoid alcohol 24-48 hours before your appointment to reduce your chance of bruising
- Avoid Fish Oil, Aspirin, Vitamin E, St. John's Wort, and other non-steroidal anti-inflammatory products (Advil, Aleve, Motrin, Ibuprofen) 7 days before your appointment to reduce your chance of bruising
- Come to your appointment with **no makeup**
- Do not stop taking any medications that have been prescribed to you without consulting your prescribing physician

Post-Treatment:

- Do contact me if you experience any problems or have any questions
- **Do** apply Ice packs to the treated area during the first 48 hours if possible ice for 20 minutes on and 20 minutes off. Swelling, bruising, redness and inflammation is expected
- Do take Tylenol if needed to decrease post treatment discomfort. Avoid NSAIDs, salty foods
- Do sleep on your back and with head elevated for the next 3-5 days after treatment
- Do wrap your neck and chin tightly with a head wrap, you may also sleep wearing head wrap
- Do drink plenty of water and fluids after treatment
- Do Not massage or manipulate injection sites for 48 hours after injection
- Do Not participate in any strenuous exercise for a minimum 72 hours
- **Do** schedule your next appointment in 6-8 weeks. Kybella requires 2-6 sessions for optimal results

Other important information:

- Patient should be in good overall health
- **Do Not** use Kybella if you are pregnant/breastfeeding or under the age of 18
- Do Not use Kybella if you have a active skin infection in treatment area
- Do Not use Kybella if you have a history of bleeding disorder
- Do Not use Kybella if you have a past or current history of dysphagia (trouble swallowing)
- Not all submental fullness may respond to Kybella

Patient Signature

Patient Name (Print)

Date

Health Care Professional SignatureHealth Care Professional Name (Print)