Frown Lines Questionnaire

Which frown lines procedure is the correct one for me? (What are the options?)

What is the estimated cost of the procedure?

How long is one appointment?

How often will I need to receive treatment?

How far apart are the treatments?

What are the common side effects or complications associated with the procedure?

How can I prepare for the treatment/procedure?

Do the treatments hurt?

What are my pain management and anesthesia options?

How long is the recovery time associated with my procedure?

Do you have before-and-after patient images to help to prepare me for what to expect?

Will someone walk me through the process before going in for treatment?

What are the risks?
What should I expect after the procedure is performed? (i.e., short-term and long-term effects; activity restrictions; expected recovery period)

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Other Questions and Notes

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Is a doctor on site?  
☐ Yes  ☐ No

Is the doctor board-certified in dermatology or in another specialty with equivalent training and experience?  
☐ Yes  ☐ No

Was my medical history taken?  
☐ Yes  ☐ No

Was I given an initial evaluation to determine if the technique or procedure is appropriate for my skin type?  
☐ Yes  ☐ No

Did the doctor show me before-and-after photos?  
☐ Yes  ☐ No