

# Dermal Filler Treatment Plan

## Patient Information

Patient Name: \_\_\_\_\_ Date: \_\_\_\_\_

Treating Doctor Name: \_\_\_\_\_

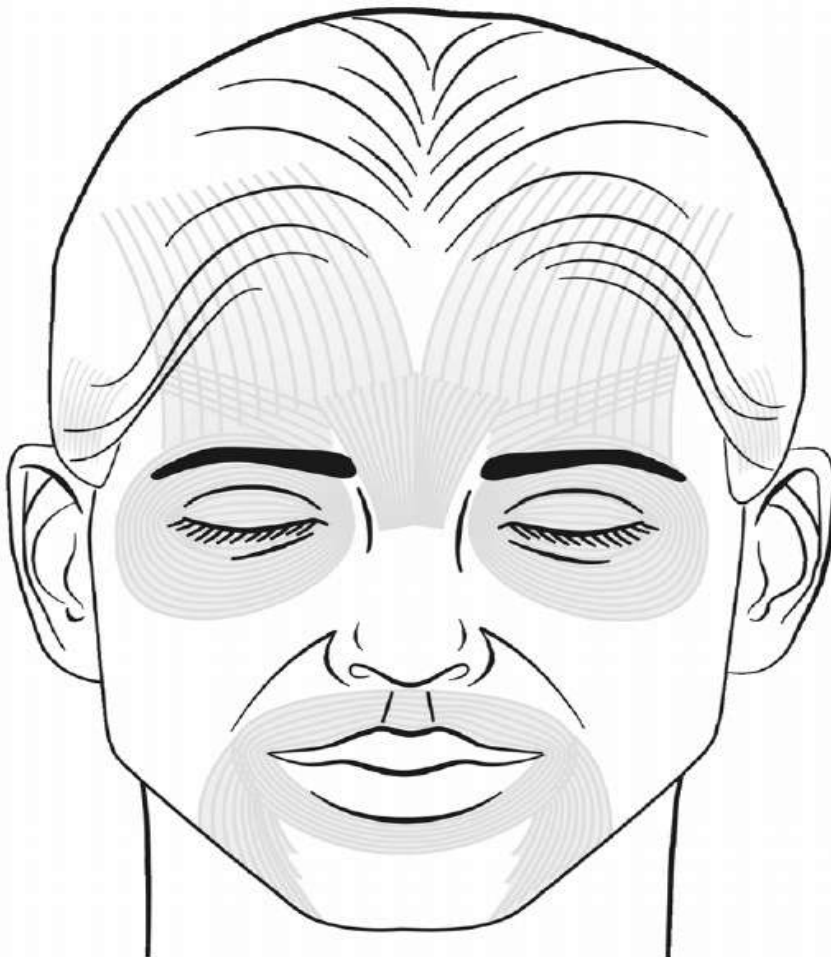
Health History Completed? Yes  No  Date: \_\_\_\_\_ Doctor Initial: \_\_\_\_\_

Dental / Head and Neck Examination Completed? Yes  No  Date: \_\_\_\_\_ Doctor Initial: \_\_\_\_\_

Informed Consent Completed? Yes  No

## Diagnosis ICD-10 Codes (Check all that apply)

- |   |  |                                      |
|---|--|--------------------------------------|
| <input type="checkbox"/> K03.0 Excessive attrition    | <input type="checkbox"/> M26.9 Dentofacial anomalies       | <input type="checkbox"/> _____ Other |
| <input type="checkbox"/> K03.81 Cracked tooth         | <input type="checkbox"/> K13.0 Diseases of lips            | <input type="checkbox"/> _____ Other |
| <input type="checkbox"/> K06.0 Gingival recession     | <input type="checkbox"/> S01.551 Cheek/Lip biting          | <input type="checkbox"/> _____ Other |
| <input type="checkbox"/> M26.00 Anomalies of jaw size | <input type="checkbox"/> K08.419 Loss of teeth trauma      |                                      |
| <input type="checkbox"/> M26.12 Maxillary asymmetry   | <input type="checkbox"/> M26.12 Jaw asymmetry              |                                      |
| <input type="checkbox"/> K08.109 Loss of teeth        | <input type="checkbox"/> M26.50 Dentofacial abnormal funct |                                      |



| Muscle              | Filler Used | Volume Used ml |
|---------------------|-------------|----------------|
| (R) Nasolabial Fold |             |                |
| (L) Nasolabial Fold |             |                |
| (R) Marionette Line |             |                |
| (L) Marionette Line |             |                |
| Upper Lip           |             |                |
| Lower Lip           |             |                |
| (R) Oral Comm       |             |                |
| (L) Oral Comm       |             |                |
|                     |             |                |
|                     |             |                |
|                     |             |                |

Total volume used: \_\_\_\_\_