Treatment record template with batch numbers (UK aesthetics)

Appointment details

Patient name: _____

Patient reference / record number: _____

Date of treatment: _____

Treating practitioner: _____

Prescriber (if different): _____

Treatment

Treatment performed: _____

Areas treated (mark on face diagram and list): _____

Face diagram reference / photo reference: _____

Pre-treatment checks

- ☐ Signed consent form for this treatment is on file and current
- ☐ Medical history reviewed; patient confirms no changes to health, medication or pregnancy status
- ☐ Allergies checked (including lidocaine and hyaluronidase where relevant)
- ☐ Pre-treatment photographs taken and filed
- ☐ Skin prepared and treatment area cleaned
- ☐ Topical anaesthetic used: Yes / No Product: _____

Products used

Product	Batch number	Expiry	Dose / volume	Site(s)

Total units / volume used: _____

Product wastage (amount and reason): _____

Treatment notes

Technique, needle/cannula and gauge, depth, and any observations during treatment:

Any immediate adverse event or complication, and action taken:

Post-treatment

- ☐ Post-treatment photographs taken (where applicable)
- ☐ Written aftercare instructions given and explained
- ☐ Emergency contact details for the clinic given
- ☐ Patient advised of expected onset/settling time and review window

Next review or follow-up date: _____

Next treatment due (if part of a course): _____

Practitioner sign-off

I confirm that this record is an accurate, contemporaneous account of the treatment provided.

Practitioner signature: _____

Print name and qualification: _____

Date: _____