

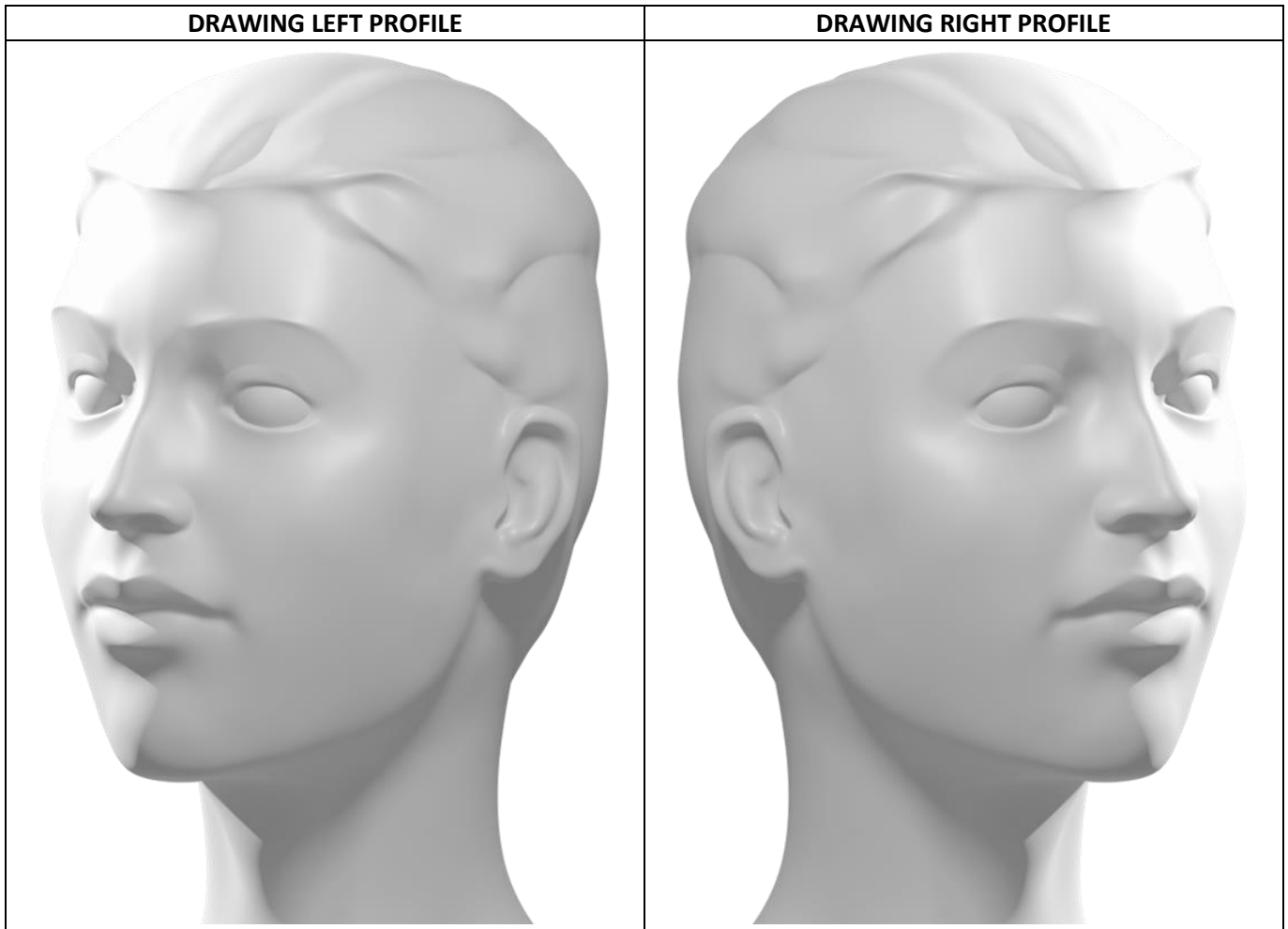
Doctor

Date of the thread lift: / /

Patient's details

Name : Activity :
 First Name :
 Birth date : Female Male

PREOPERATIVE TREATMENT	POSTOPERATIVE TREATMENT	ANESTHESIA
<input type="checkbox"/> AB: <input type="checkbox"/> Analgesic: <input type="checkbox"/> NSAIDs: <input type="checkbox"/> Corticosteroids: <input type="checkbox"/> Sedative:	<input type="checkbox"/> AB: <input type="checkbox"/> Analgesic: <input type="checkbox"/> NSAIDs: <input type="checkbox"/> Corticosteroids: <input type="checkbox"/> Sedative:	<input type="checkbox"/> Local <input type="checkbox"/> General <input type="checkbox"/> Other:



LAYING		
Zone & Number of threads per side:	<input type="checkbox"/> Eyebrow <input type="checkbox"/> Cheekbone <input type="checkbox"/> Orbicular <input type="checkbox"/> Marionette	<input type="checkbox"/> Jowl <input type="checkbox"/> Other <input type="checkbox"/> Neck
Thread 1	Temporal entry: cm above & cm in front of the ear	Upper exit : cm from the entry point
Thread 2	Temporal entry: cm above & cm in front of the ear	Upper exit : cm from the entry point
Thread 3	Temporal entry: cm above & cm in front of the ear	Upper exit : cm from the entry point
Thread 4	Temporal entry: cm above & cm in front of the ear	Upper exit : cm from the entry point
Thread 5	Temporal entry: cm above & cm in front of the ear	Upper exit : cm from the entry point
Thread 6	Temporal entry: cm above & cm in front of the ear	Upper exit : cm from the entry point
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