

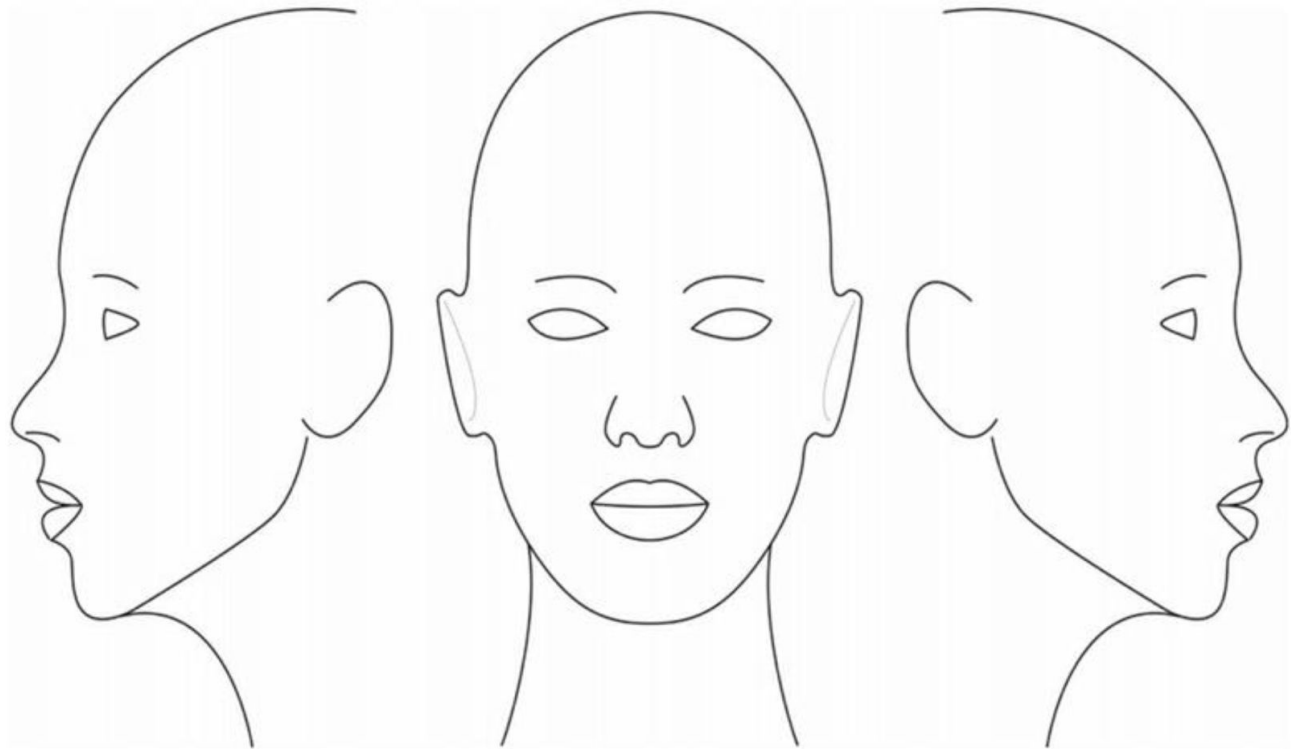
EuroThreads / PDO Threads Injection Record



Patient Name: _____

Date of Treatment: _____

Area Treated & Threads Used:



Notes:
