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PRICELIST

+1 (949) 235 3004

VICTORIA® PDO BARBED

	per blister	5+ blisters	QTY	TOTAL
HELIX COG (10 sterile sutures per blister)	$250	$200		
Cannula "L" 19G100 COG360 205 mm				
Cannula "L" 19G100 COG360 165 mm				
Cannula "L" 19G70 COG360 125 mm				
Cannula "L" 23G60 COG360 100 mm				
RHINO TIP (10 sterile sutures per blister)	$240	$220		
Cannula "L" 19G38 RhinoTip COG360 70 mm				
Cannula "L" 19G50 RhinoTip COG360 50 mm				
RHINO BRIDGE (10 sterile sutures per blister)	$240	$200		
Cannula "L" 21G60 RhinoBridge COG 360 80 mm				
IRIS COG (10 sterile sutures per blister)	$510	$470		
Cannula "L" 18G100 IRIS COG 185 mm				

PDO SMOOTH

	per blister	10+ blisters	QTY	TOTAL
MONO TYPE (10 sterile sutures per blister)	$29	$20		
M 31G13 15 mm				
M 30G38 50 mm				
M 30G25 30 mm				
M 26G90 150 mm				
M 26G60 90 mm				
SPIRAL TYPE (10 sterile sutures per blister)	$50	$45		
S 30G38 50 mm				
S 30G25 30 mm				
S 27G50 75 mm				
S 26G60 90 mm				

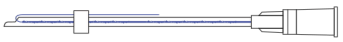
	per blister	5 blisters	QTY	TOTAL
ULTRA LIFT IRIS (1 sterile sutures per blister)	$131	$125		
IRIS COG21G110x2 420 mm				

	per item	50+ items	QTY	TOTAL
Elastic Facial Garment	$20	$15		

MICRONEEDLING

	per vial	QTY	TOTAL
Orabelle Contour (Succinic acid)	$33		
Orabelle Hydrate (Trehalose)	$33		
Orabelle Lift (Dimethylaminoethanol)	$33		
Orabelle Moist (Hyaluronic acid)	$33		

	per pack of two	QTY	TOTAL
Renoubell (Polynucleotide), 2 ml x 2 pcs	$110		



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MICRONEEDLING	per box of 5 vials	QTY	TOTAL
Nithya S-Line Stimulate, 5 ml x 5	$145		
Nithya-S Line Smooth, 5 ml x 5	$145		
Nithya-S Line Shield, 5 ml x 5	$155		

PEELINGS	per vial		
SKINPEEL Mandelic, 50 ml	$84		
SKINPEEL Glycolic, 50 ml	$84		
SKINPEEL Jessner, 50 ml	$84		
SKINPEEL Complex, 50 ml	$84		
SKINPEEL Neutralizer	$84		

	per pack		
MELATITE , 50 ml	$190		

miniTC closed-loop system	$850		

PERSONAL INFORMATION

Clinic Name:_____

NPI#:_____

Name_____Phone #_____E-mail _____

PAYMENT INFORMATION

Name on card_____ cc#_____

CVC_____ EXP DATE_____

BILLING ADDRESS

street address_____, city_____,

state_____, zip code_____

SHIPMENT INFORMATION

addressee_____street address_____,

city_____, state_____, zip code_____

CUSTOMER SIGNATURE_____