



## PRINCESS PDO (POLYDIOXANONE) ABSORBABLE TREADS TRAINING

### [Introduction to PDO Threads by Dr Nardus Le Grange](#)

We have confirmed the following two training sessions in Cape Town on Thursday, 9<sup>th</sup> February 2017. The training will be held from 09:00 – 13:00 and 14:00 – 18:00. Kindly select which training you would attend.

The sessions would comprise of both a theory session as well as a dedicated practical session where each trainee will get the chance to use PDO threads under the guidance of Dr Le Grange.

**IMPORTANT:** Kindly ensure that you bring your own model for the practical session.

Programme for the day:

Theory:

- Relevant Anatomy
- History & Classification of Threads
- Science of PDO Threads
- Indications
- Contra Indications
- Technique for thread injection
- Complications

Tea / Coffee / Snacks

Practical Session

- Beginner techniques by Dr Le Grange – Live demonstration
- Practical Session – Own model under guidance of Dr Le Grange

**Course Fee:** R4800.00

Included in the course fee all thread units for practical session.

**Venue:**

Suite 2, Canal Edge 3, Tyger Waterfont, Carl Cronje Drive, Bellville

Map Link: [www.legveinclinic.co.za/contact-us](http://www.legveinclinic.co.za/contact-us)

Dare to be perfect



## TRAINING COURSE BOOKING FORM

I would like to book a place for the Princess PDO Threads training as indicated below:

**Course Fee: R4800.00** (please tick): **9<sup>th</sup> February (morning) 09:00 – 13:00**

**Course Fee: R4800.00** (please tick): **9<sup>th</sup> February (afternoon) 14:00 – 16:00**

**NAME OF COMPANY TO BE INVOICED:** .....

**NAME OF DIRECTOR / MEMBER:** .....

**VAT REGISTRATION NUMBER IF APPLICABLE:** .....

Title: \_\_\_\_\_ First name: \_\_\_\_\_ Surname: \_\_\_\_\_

Occupation: \_\_\_\_\_ HPCSA number: \_\_\_\_\_

- Direct Telephone number.....

- E-Mail address.....

- Mobile number.....

### **COMPANY DETAILS**

- Postal Address .....

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- Physical address.....

.....

Please Specify any dietary requirements: .....

**DATE:** ..... **SIGNED:** .....

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**IMPORTANT:** Kindly ensure that you bring your own model for the practical session. Please complete this booking form and email or fax back to us together with proof of payment to secure your booking.

**Only 5 doctors per training session.**

### **PAYMENTS DETAIL:**

PLEASE E-MAIL PAYMENT CONFIRMATION TO: [info@princess-skincare.co.za](mailto:info@princess-skincare.co.za) or FAX: 086-654 1023

**Account Name:** Tasosol Pty Ltd  
**Bank:** ABSA Bank Ltd  
**Account Type:** Current  
**Account Number:** 4087032541  
**Branch Code:** 632005 (Universal)