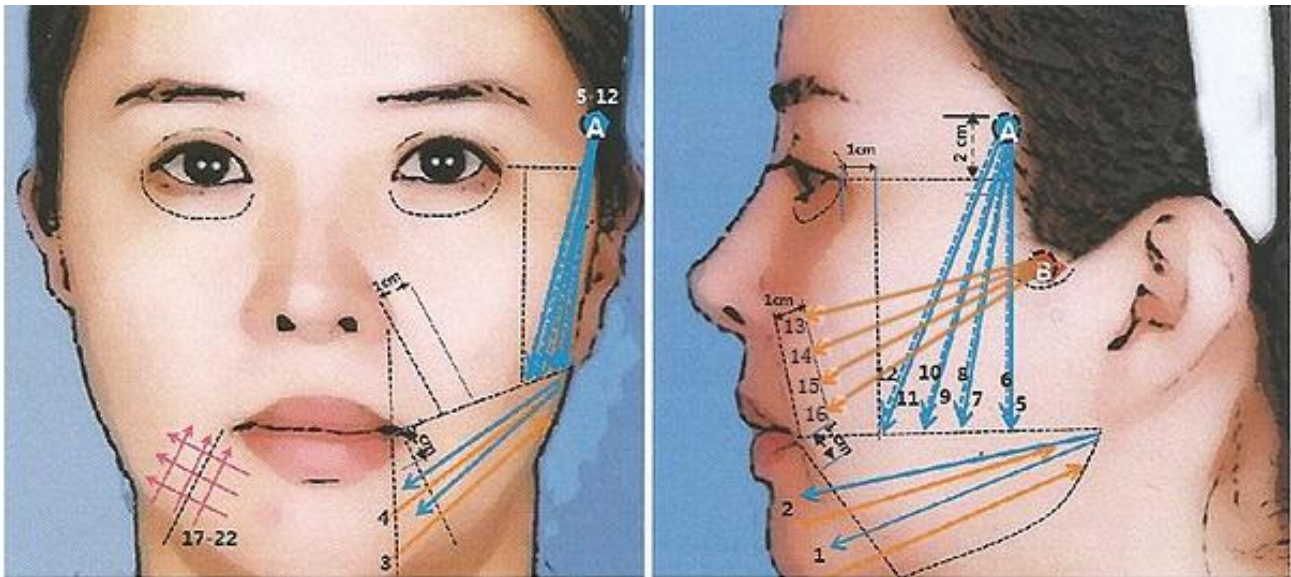


## 1) Design



Sequence	Needed product	Quantity	Placement	Purpose
1-2	Hook Cog 23G 90mm Gold Hook Cog 23G 90mm	2pcs	<b>Deep:</b> Platysma auricular ligament-jowl fat above SMAS	Fixation and redistribution of soft tissue, Volumetric Lifting
3-4	Screw Cog 23G 60mm	2pcs	<b>Superficial:</b> Subcutaneous and superficial fat	Tightening
5-12	Cannula Cog 19G 100mm 21 90mm Gold Cannula Cog 21G 90mm 19G 100mm	4pcs	<b>Deep:</b> Subcutaneous layer->Ligaments ->SMAS and deep fat <b>Superficial:</b> Subcutaneous layer->Superficial Fat layer	Fixation and redistribution of soft tissue, Volumetric Lifting
13-16	Cannula Cog 21G 90mm Gold Cannula Cog 21G 90mm	4pcs	From Subcutaneous to superficial temporal fascia	Lifting lateral Cheek
17-22	Screw Cog 23G 38mm	6pcs	Subcutaneous layer	Marionette lines Tightening

Draw the surface landmark and then mark the insertion pathways of thread. When the sagged jowl is lifted up, the direction achieving most natural contour of lower face is determined. The point where the extension of the direction meets the temporal hair line can be used as entry site A. Entry site B is a part of the zygomatic arch which is located just above the temporo-mandibular joint.

## 2) Anesthesia method

- (1) Local infiltration using 1% lidocaine with epinephrine is used for anesthesia of entry site.
- (2) Tumescent anesthesia can be used for temporal (Sequence 13-16) and lateral cheek (Sequence 5-12). Minimum amount of tumescent solution (2cc per side of face) should be injected into the same layer with thread is inserted layer. It is recommended to wait at least 10 minutes after the injection of tumescent solution.

### 3) Insertion method

1-2

While the soft tissues of mandibular margin is pushed towards the lateral canthus or temple, the thread should be inserted into the entry site which is located at minimum 1cm downward and 1cm inward from marionette line. The thread should be placed at the deep part of subcutaneous jowl fat or just above the platysma muscle, and is inserted into the platysma-auricular ligament near to ear lobe. After insertion, push the soft tissues towards the direction of ear lobe and press it for fixation.

3-4

While the soft tissues of mandibular margin pushed towards the lateral canthus or temple, the thread should be inserted into the entry site which is located at the vertically descended line of nasal alar. Insert the thread into the same pathway of sequence 1-2 or the space between the pathways of sequence 1-2. But, the thread should be placed at the superficial layer of the jowl fat. Insert the thread by rotating the needle gently and carefully towards the ear lobe because the thread is relatively weak and long. If the thread breaks during the insertion, insert new thread again after creating a hole using 18G needle. Near the ear lobe area, the thread is placed at a deeper level.

5~12

Above the zygomatic arch, insert the thread into the subcutaneous fat layer, and below the arch, insert it into the SMAS or deep fat layer. Avoid inserting the threads of sequence 5-7 into the parotid gland. It is necessary that the thread of sequence 11 to penetrate the masseteric cutaneous ligaments and buccal fat pad. It is recommended to avoid creating excessive lifting of the deep layer for patients with profound submalar depression. After insertion, press the soft tissues while pushing the soft tissues up towards the entry site in order to fix the tissues and create lifting effect.

13-16

After inserting thread into the subcutaneous layer through the entry site, move carefully towards the superior temporal line by turning the needle gently. Fix the needle at deep temporal fascia while the scalp tissue around the superior temporal line is pushed down toward the entry site.

17-22

Insert into subdermal layer to increase elasticity