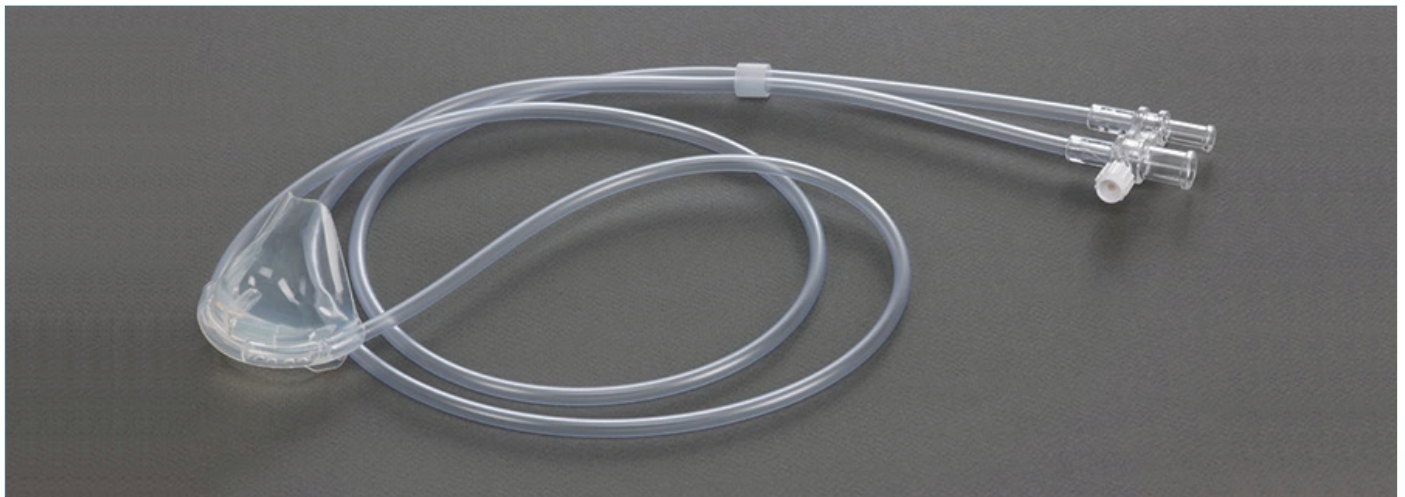


PORTER
Silhouette
LOW PROFILE NASAL MASK

Change your view of nitrous oxide.



Traditional nasal mask



The Porter Silhouette nasal mask is available in 4 sizes: Pedito, Adult Small, Medium and Large resulting in a perfect fit for all of your patients.



- Low profile
- Scavenging efficiency

- Unobstructed access
- Predictable experience

- Single patient use
- Adheres to nose

PORTER
The Trusted Name In Nitrous

www.porterinstrument.com/silhouette

How To Get Started

It's quick and easy to start using Porter's SILHOUETTE nitrous oxide nasal masks in your dental practice. Porter's SILHOUETTE low profile nasal masks can easily be retrofitted to any ADA accepted flowmeter.

Get started today by ordering a Connection Kit and a Variety Pack!

The Porter SILHOUETTE Low Profile Nasal Mask is only available through authorized Porter dental dealers.

Porter SILHOUETTE Nasal Mask Part Numbers

QTY.	PART	DESCRIPTION	RETAIL \$	SALES \$
	SIL-CONN-KIT	Flowmeter Connection Kit (order one for each flowmeter) Includes: Cannula Adapter Breathing Bag Cap, 6.5' Fresh Gas / Vacuum Tubing, 4 Color Coded Sizer Masks, and Clip	\$75	
	SIL-VAR-4X3	Variety 12 Pack: 3 Silhouette Nasal Masks of each size - Pediatric, Adult Small, Medium, Large	\$168	
	SIL-PEDO-12	Pediatric 12 Pack: 12 Pediatric Silhouette Masks	\$168	
	SIL-PEDO-24	Pediatric 24 Pack: 24 Pediatric Silhouette Masks	\$320	
	SIL-SM-12	Adult Small 12 Pack: 12 Adult Small Silhouette Nasal Masks	\$168	
	SIL-SM-24	Adult Small 24 Pack: 24 Adult Small Silhouette Nasal Masks	\$320	
	SIL-MED-12	Medium 12 Pack: 12 Medium Silhouette Masks	\$168	
	SIL-MED-24	Medium 24 Pack: 24 Medium Silhouette Masks	\$320	
	SIL-LG-12	Large 12 Pack: 12 Large Silhouette Nasal Masks	\$168	
	SIL-LG-24	Large 24 Pack: 24 Large Silhouette Nasal Masks	\$320	
	SIL-SIZER-4	Silhouette Sizer Masks - Color Coded - 1 For Each Size (included w/ SIL-CONN-KIT)	\$30	
	SIL-ADPT-KIT	Includes 3 Cannula Adapters, 3 Breathing Bag Caps and 3 Hose Clips	\$27	

Order through your authorized Porter dental dealer.

NAME _____

PRACTICE NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

PREFERRED DENTAL DEALER _____

OF NITROUS USES/WEEK _____

Contact Porter Instrument For More Information or Assistance:

Phone: 215-723-4000

Fax: 215-723-5106

Email: porternitrous@parker.com



www.porterinstrument.com/silhouette