Get to know cover artist, David Hidalgo, MD, FACS—see page 31

Call for Abstracts—Submissions. Are. Open!

Welcome to Our New CEO—Mark Theis

Web Strategy Chat with Kevin Charles

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The Aesthetic Society:
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M y third presidential update, 25% of the way through my presidential year already! So here’s the news, the updates and what to be on the look-out for! And this will be my last presidential update with Sue Dykema in residence. Farewell and best wishes, Sue! And welcome again to our new CEO, Mark Theis, who has been drinking from The Aesthetic Society firehose for three weeks and is still excited to be here!

THE NEWS!
While the presidential travel season is over for a few weeks, I did have one final trip to the Southeastern Society of Plastic and Reconstructive Surgery Meeting in the Bahamas! For those of you who have not attended a Southeastern meeting, I highly recommend you check one out. The quality of the meeting is outstanding and it’s very family centric with hours set aside for family vacation. The hotels are fabulous, like this year’s SLS Baha Mar. Notice the amazing beach shot above.

And they featured two of my top three favorite keynote speakers I have heard in the last twenty-five years of plastic surgery meetings! Below is a photo of a slide from Adrian Ballinger’s Keynote. He is an extreme mountain climber (summitted Everest eight times!) and this talk was entitled, “K2 without O2.” He spoke about how important preparation is, but how resilient one must be to handle the unforeseen happenings that can occur on an expedition such as this. Certainly, one can apply those lessons to plastic surgery as well as to life.

I want to send out a big thanks to Dr. Bert Losken, President of SESPRS and to Dr. Bruce Mast, Head of the Program Committee who invited me.

THE UPDATE!
Coming in January, the week before the Dubai meeting, is our hybrid virtual Nuances in Injectables meeting. This will be held in the late afternoon and evening Friday, January 12th.

BE ON THE LOOK OUT!
For the Call for Abstracts for the International American Aesthetic Meeting—Dubai. This is the inaugural meeting co-sponsored by The Aesthetic Society, the Emirates Plastic Surgery Society and the Arab Association of Surgical and Medical Aesthetics. Mark your calendars for January 19–21, 2024, I want to see you there! Program and details soon to come! And they are exploring adding a plastic surgery golf tournament to the afternoon of the 21st. I don’t even play golf, and I want to see a Dubai golf course in person!

So, without a lot of meetings to attend I find myself reading more, traveling with family, and spending time with our two Maine Coon Kittens. Loki four months and Thor five months are happy to weigh down my suitcase and keep me home for a few weeks.

And remember, RADAR may be gone but we still have easy access to ASJ through members.theaestheticsurgery.org.

A slide from Adrian Ballinger’s Keynote at the Southeastern Society of Plastic and Reconstructive Surgery Meeting.

Our two Maine Coon Kittens, Loki four months and Thor five months are happy to weigh down my suitcase and keep me home for a few weeks.
Have you completed a study or developed a new idea you would like to present at The Aesthetic Meeting 2024?

On behalf of The Aesthetic Society’s Program Committee, we invite you to submit an abstract for The Aesthetic Meeting 2024. The application deadline is Friday, November 3, 2023.

The Aesthetic Meeting is the premier global gathering of aesthetic plastic surgeons. Submit an abstract and join us in Vancouver, BC Canada.

Scan the QR code to submit your application or visit the link below:
theaestheticsociety.org/medical-professionals/meetings/call-abstracts

The Aesthetic Meeting 2024
May 2–5, 2024
Vancouver, BC Canada
MEETINGS CALENDAR

Brought to you by

meetings.theaestheticsociety.org

The Aesthetic Cruise 2024
June 11–23, 2024

Chair: Tim Papadopoulos, MD
Vice Chair: Kristi Hustak, MD

BOOK TODAY!

In Collaboration With

BAAPS 2023—Facial Surgery & Body Contouring—British Association of Aesthetic Plastic Surgeons
September 28–29, 2023
Savoy Place
London, England
baaps.org.uk

Australasian Society of Aesthetic Plastic Surgeons—45th Annual ASAPS Conference
October 13–15, 2023
The Langham Gold Coast, Australia
aestheticplasticsurgeons.org.au/event/2023-annual-asaps-conference-save-the-date

CSAPS 50th Annual Meeting—Canadian Society for Aesthetic Plastic Surgery
October 26–29, 2023
Hyatt Regency Vancouver
Vancouver, BC Canada
csaps.ca/medical-professionals/meeting-program-and-registration

5th Norwegian-American Aesthetic Meeting
October 27, 2023
Oslo, Norway
Contact: oslomeeting@naam.no
naam.no

Nuances in Injectables:
The Next Beauty Frontier
A Virtual Symposium, 5–9pm CST
January 12, 2024

The Aesthetic Meeting 2024
May 2–5, 2024
Exhibits: May 3–5
Vancouver Convention Centre
Vancouver BC Canada

In Collaboration With

59th Brazilian Congress of Plastic Surgery—Brazilian Society of Plastic Surgery
November 15–18, 2023
Royal Palm Hall
Campinas, SP, Brazil
www2.cirurgiaplastica.org.br

International American Aesthetic Meeting—DUBAI
January 19–21, 2024
Dubai, United Arab Emirates
arabasma.org

Indian Association of Aesthetic Plastic Surgeons 19th Annual Conference
Pre Workshop: March 26, 2024
Medanta The Medicity, Gurugram
Conference: March 27–30, 2024
The Leela Ambience Gurugram Hotel & Residences, Gurugram NCR, India
aesurg.com

CSAPS 51st Annual Meeting
November 21–24, 2024
Four Seasons Hotel Montreal
Montreal, QC Canada

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2023 North Carolina Society of Plastic Surgeons Annual Scientific Meeting
November 10–12, 2023
Kiawah Island, South Carolina
ncsps.com/annual-meeting

The Florida Plastic Surgery Forum
December 7–10, 2023
Palm Beach, Florida
fps.org/meetings

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Nuances in Injectables Coming This Winter!
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Vice Chair
Ashley Amalfi, MD
CME Chair
Trent Douglas, MD

CME Available
meetings.theaestheticsociety.org/injectables

REGISTER TODAY!

The Road to Dubai 2024

Education on Demand
NUANCES IN INJECTABLES: THE NEXT BEAUTY FRONTIER

A Virtual Symposium

January 12, 2024
5–9pm CST

Chair: Christopher Surek, DO
Vice Chair: Ashley Amalfi, MD
CME Chair: Trent Douglas, MD

CME Available
meetings.theaestheticsociety.org/injectables

REGISTER TODAY!
Join us for a unique offering of injectable education on Friday evening, January 12, 2024. Dr. Chris Surek and faculty will highlight various techniques for a multicultural approach to the use of fillers and toxins for different ethnicities.

Didactic discussion, anatomy discussion, live injections, before and afters, risks and complications. All thoroughly addressed in advanced injectable areas!

This was an excellent overview of injectable filler techniques and complication management.

Great live demos!

The feedback from last year speaks for itself—this highly condensed, veteran-level symposium is indispensable for both surgeons and staff!

Excellent presentation combining technique, theory and the use of ultrasound to enhance patient safety and address complications.

Excellent presentation of differing techniques and products to treat challenging anatomic conditions in a safe manner.

Loved the experienced presenters and the blend of practical pearls and safety.

Appreciate the combination of live injectable with didactic lectures.

Register Today!
“Unveiling Aesthetic Wonders”
Dubai Welcomes You!

INTERNATIONAL AMERICAN AESTHETIC MEETING
DUBAI 2024

Hosted by:
The Arab Association of Surgical & Medical Aesthetics (AASMA)
Emirates Plastic Surgery Society (EPSS)

In Collaboration with:
The American Society for Aesthetic Plastic Surgery (The Aesthetic Society)

Foad Nahai, MD
The Aesthetic Society
Program Co-Chair

Ayman Helmi, MD
EPSS Program Co-Chair

Gianluca Campiglio, MD
AASMA Program Co-Chair

SAVE THE DATE
19 TO 21 JANUARY 2024
The Road to Dubai 2024

After several meetings between members of the Arab Association of Surgical and Medical Aesthetics (AASMA), the Emirates Plastic Surgery Society (EPSS), and The Aesthetic Society, a new international aesthetic meeting was born...

INTERNATIONAL AMERICAN AESTHETIC MEETING (IAAM): DUBAI 2024
JANUARY 19–21, 2024

Read below to see how a series of fortunate encounters with our friends across the globe has resulted in a new aesthetic opportunity.

1. September 2022: Dr. Jamal Jomah, President of the Arab Association of Surgical and Medical Aesthetics (AASMA), and Sue Dykema met at the ISAPS meeting in Istanbul, Turkey, where Dr. Jomah requested the opportunity to discuss an educational collaboration with The Aesthetic Society.

2. October 2022: Dr. Jamal Jomah, Dr. Zuhair Al Fardan, President of the Emirates Plastic Surgery Society (EPSS), and members of the Dubai Department of Economy and Tourism met with then Society President Dr. Jennifer Walden, Sue Dykema, and Courtney Muehlebach in Boston to discuss the possibility of a co-sponsored meeting with the goal of making it an annual event.

3. April 2023: The Aesthetic Society Board approved the continued exploration and negotiation of co-sponsoring and organizing faculty for a branded meeting in Dubai.

4. May 2023: Dr. Walden and Courtney traveled to Dubai for a site visit. A meeting name is determined: International American Aesthetic Meeting (IAAM): Dubai 2024.

5. June 2023: The co-sponsored meeting agreement was signed by Drs. Al Fardan, Jomah, and Sue. Dr. Foad Nahai was confirmed as the Program Co-Chair representing The Aesthetic Society, with Dr. Gianluca Campiglio as Program Co-Chair for AASMA, and Dr. Ayman Helmi as Program Co-Chair for EPSS.

6. July 2023–January 2024: Planning and promotion continues for staff and the Program Planning Committee including the 3 Program Co-Chairs along with Drs. Jamil Ahmad, Zuhair Al Fardan, Mindy Haws, Jamal Jomah, and Jennifer Walden.

7. Join us in Dubai for a truly international educational experience January 19–21, 2024! View the program and register at arabasma.org
THE AESTHETIC CRUISE 2024

July 11–23, 2024
Chair: Tim Papadopoulos, MD
Vice Chair: Kristi Hustak, MD

OCEANIA CRUISES — Vista
- Barcelona, Spain
- Palma de Mallorca, Spain
- Saint Tropez, France
- Florence/Pisa/Tuscany (Livorno), Italy
- Olbia/Porto Cero (Sardinia), Italy
- Rome (Civitavecchia), Italy
- Naples/Pompeii, Italy
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meetings.theaestheticsociety.org/cruise
Couldn’t make it to The Aesthetic Meeting 2023?
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www.theaestheticsociety.org/medical-professionals/aesthetic-care-team
As you know, pre- and post-op practices are equally as important as the surgeries themselves. Improving patient safety and patient outcomes are top priorities at The Aesthetic Society. We would love to dedicate a section of ASN to give your teams a voice on the innovative array of tips and techniques your practice provides for patient success.

Each issue of ASN will feature a specific skin care/device methodology, providing valuable information collected through the questionnaire surveys you can access below, with the opportunity to expand upon in future issues of ASN as well.

Choose a topic and submit a 750 word summary to info@theaestheticsociety.org or fill in a topic Q&A below.
The Aesthetic Society Mission

Advance the science, art, and safe practice of aesthetic plastic surgery and cosmetic medicine through education, research, and innovation while maintaining the highest standards of ethical conduct.
Meet Mark

We are excited to welcome Mark Theis to The Aesthetic Society as our new CEO. Mark joined the team on July 10 and brings a wealth of experience to our organization. He has worked on an international scale in multiple facets of sales development, business strategy, integrated marketing and organizational management for member-based associations and Fortune 500 companies. We had a chance to sit down with Mark and ask him about why he wanted to make The Aesthetic Society his new home and asked him some more personal questions.

Question

Tell us what made you gravitate to The Aesthetic Society?

Answer

Actually, it was the ideal opportunity for me. At this stage of my career, I wanted to leverage my experience with three unique trade associations and three global hotel brands by applying the skills I acquired to an organization outside of the tourism and hospitality industries. I thrive in a collaborative and innovative environment, and The Society not only provides that, but represents an industry that is experiencing explosive growth.

It was clear to me that as aesthetic medicine continues to expand, there are so many exciting possibilities and the potential for The Society to continue and enhance its leadership in the marketplace. My excitement grew as I continued through the search process, and I was inspired by the passionate discussions and innovative ideas that surfaced in my meetings with the committee. It is a pivotal time for The Society and its future, and I am enthusiastic about growing the brand, expanding membership, increasing partner engagement and crystalizing its unique value proposition.

Question

What is one thing about you that might help members really understand who you are? Do you sing in the shower? Do you have a photographic memory?

Answer

[Laughing] You definitely do not want to hear me sing—in the shower or anywhere else! It is funny you mentioned the shower though—I do have many “ah-ha” moments there, especially when I am brainstorming or thinking about how to do something new or in a different way. And while I do not have a “photographic” memory, I do have an eye for aesthetics and design and paying attention to details. Maybe it’s the Chicagoo in me and being a Mies van der Rohe buff.

I have been closely involved in launching several new hotel brands over my career, and I guess the one thing that defines my approach to things is that in addition to doing the research and applying a targeted strategy, I believe that keeping your brand consistent is crucial for building trust, recognition, and loyalty among your customers and prospects. Consistency also helps you stand out from the competition.

Continued on Page 21
Meet Mark
Continued from Page 20

Question
Please share a memorable experience that will help our members get to know you a little better.

Answer
Well, from a work perspective, being in the tourism industry when the pandemic hit was a unique test on so many levels. From having to lay off fifty percent of our corporate staff to temporarily closing half of our hotels, it was unlike anything I had experienced in my career, and exceptionally complex. It required me to draw on many skill sets: enhancing our internal and external communication channels, utilizing new technology and tools, reimagining processes, and creating cross-functional teams to re-engineer the way we did things.

It touched on so many aspects of our business, but that kept me agile and definitely utilized and enhanced my problem-solving skills. But the real value in the experience was the teamwork it created and how an empathy-driven approach got us through. I feel the approach was very similar to how our members view their responsibility to their patients regarding the safety and effectiveness of aesthetic medicine—leading with empathy and care.

Question
What keeps you sane?

Answer
My Peloton! Hands down. I’m a junkie—it’s my tribe, my vibe, my community—and I’m very committed. It is also another place where I get some of my best ideas and inspiration. And without question my husband and our two dogs keep me grounded. They also remind me that a lot of other concerns, even the difficult things, are not really a matter of life or death. Oh, and Amazon Prime of course!

Question
What advice would you give your younger self?

Answer
Don’t be afraid to let loose. If I could rewind my life, I would give myself more freedom to explore beyond what I thought of at the time as the “right” or “only” path. To try things and learn from the experience. This is something I have now embraced and over the last two decades I have intentionally considered different options and welcomed the experiences and learning that followed.

Question
In another life I would have been...?

Answer
I’ve already alluded to my affinity for design—I think in another life I would have been an architect, or perhaps a collector of Scandinavian furniture. Actually, I’m collecting a lot of furniture in this life! [with a chuckle]

Question
What has been your favorite travel adventure?

Answer
That’s a tough one. You’ll discover right away that I love to travel; in fact, I tend to have my trips planned and booked as far as two years out. I am an avid downhill skier and hiker, so I typically take at least one mountain trip every year. I just got back from an amazing seven-day trek in the Dolomites before starting my job here, but hiking in Bhutan a couple years ago was an incredible adventure and I still think about it a lot.
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As of May 2023, both Ozempic and Wegovy are on the “FDA Drug Shortages List,” and compounded versions of the drugs are therefore legal while these drugs remain on that list.

As many aesthetic practices have now incorporated semaglutide into their practices toassist their patients with weight loss, physicians should remain cognizant of several clinical and legal risks associated with the prescription of this admittedly effective medication.

On the clinical side, practitioners should ensure that patients are aware of potential side effects of the drug, including nausea, vomiting, and uncomfortable gastrologic issues. Moreover, not all patients are suitable candidates for semaglutide therapy, especially those with a history of low blood sugar, pancreatitis, and decreased kidney function. For these reasons, it is imperative that physicians choose candidates for semaglutide therapy carefully and provide qualifying patients with a written informed consent before initiating any such therapy.

In addition to ensuring that patients meet clinical guidelines and are informed of the risks and benefits of semaglutide therapy, prescribers also need to ensure the authenticity of the drugs they prescribe. Because drugs such as Ozempic were originally intended for the treatment of diabetes, but have now become increasingly popular for weight loss, many patients have experienced difficulty in acquiring semaglutide products from their normal commercial pharmacy, as current demand has exceeded the availability of the drug. As a result, many physicians have directed their patients to compounding pharmacies to ensure an adequate supply of compounds that include semaglutide. As of May 2023, both Ozempic and Wegovy are on the “FDA Drug Shortages List,” and compounded versions of the drugs are therefore legal while these drugs remain on that list. Both providers and patients should be aware that compounded versions of these compounded drugs may not be identical to the brand name versions; in particular, the FDA has reported that many compounded varieties may be salt formulations, which the FDA has not found to be safe and effective.

Continued on Page 25
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– Daniel C. Mills, M.D., F.A.C.S. Past President of the American Society for Aesthetic Plastic Surgery

Contact: Christopher Edge, 609-737-1154 ext. 301
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Finally, physicians must ensure that they abide by all laws and ethical guidelines when promoting the use of semaglutide and its ancillary products. Virtually all states now enforce laws that prohibit the misleading advertising or advertisements that create unrealistic expectations; therefore, it is essential that any advertisement for semaglutide is balanced and includes reference to possible negative side effects, as well as a recognition that not all patients will attain optimum results. As with any advertisement for aesthetic medication or procedure, managing a patient’s expectations is essential.

Admittedly, the positive aspects of semaglutide often outweigh these risks, and responsible prescribing of the medication can be of great value to both the aesthetic physician and the patient. Nevertheless, as with any medication, physicians should ensure that patients are acceptable candidates, understand the risks, and obtain the drug from reputable sources that will ensure the integrity of the pharmaceutical product.

As always, The Aesthetic Society will be following developments, including warnings from both the manufacturer and the FDA, and will provide further information to its members as such information becomes available.

LEGAL UPDATE:
The Skinny on Semaglutide

Continued from Page 23

Prompted by a rash of patient deaths attributable to gluteal fat grafts, particularly in the Miami area, the Florida Legislature and Governor Desantis passed HB 1471, which for the first time places into statute several safety provisions related to the BBL procedure. Among the bill’s highlights are:

• Mandatory use of ultrasound;
• The surgeon must see the patient at least 24 hours before the procedure (no more same day “in and outs”); by contrast, many clinics have reportedly been seeing the patient for the first time on the actual day of surgery;
• The SURGEON must perform both the fat extraction and injection; by contrast, many practices were allowing non-surgeons to perform the fat extraction;
• There must be at least a 1:1 surgeon/patient ratio; previously, some physicians were providing simultaneous BBLs (usually with a non-surgeon performing the fat extraction);

• Codifies the ban on intra- or submuscular injections, placing into statute a standard of practice that the Florida Board of Medicine had adopted in 2019;
• All office surgery units must be inspected by state prior to opening (AAAASF accreditation is OK after the “pre-inspection”). Under previous law, an office surgery unit could operate while it awaited its first annual inspection.

The legislation, which was heavily promoted by the Florida Society of Plastic Surgeons, became effective on July 1, 2023, and the Florida Board of Medicine will consider additional restrictions at its August rule hearing.

Disclaimer: Mr. Nuland also serves as the lobbyist for the Florida Society of Plastic Surgeons and was intimately involved in the negotiation and lobbying of the legislation.

Cybersecurity Webinars—Coming this Fall

As many of you know too well, plastic surgeons continue to be a target of vicious cybersecurity attacks. To help our members, The Aesthetic Society is organizing a series of webinars with cybersecurity experts. This webinar series will focus on prevention and what to do if it happens to you.

Read The Aesthetic Society’s “The Skinny” and watch your email for dates and times for this important information. We will also be recording it for our members’ later access.
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Residents Mark Your Calendars!

Apply for a fellowship position in an Aesthetic Society Endorsed Fellowship! Our Endorsed Fellowship Program through SF Match will open on September 11 for applicants looking to start their fellowship training in July 2025.

NICK SINCLAIR, MD

I completed an Aesthetic Society Endorsed Fellowship at University of Texas Southwestern. It exceeded my expectations in every way! Though my residency program offered a robust experience in aesthetic surgery, the added year of fellowship was critical to becoming an aesthetic surgeon. A focused year of fellowship allows one to gain advanced insights into the nuances of preoperative evaluation, patient management, and both surgical and non-surgical procedures. Further, mentorship and guidance from the attending surgeons at UT Southwestern helped me grow as a physician, academician, and person. Hands down, I would choose to do this fellowship again.

NEIL M. VRANIS, MD

Undergoing an additional year of subspecialization training was one of the best things I could have done for myself and for my patients. Fellowship afforded me the opportunity to master nuances in the pre-operative assessment, focused surgical planning, and successfully execute complex procedures to ultimately deliver the best possible results for patients. Training under internationally respected leaders and pioneers in the fields of rhinoplasty, deep-plane facelifts, and body contouring with autologous fat transfer (S-Curve®) has given me the confidence to take on challenging cases from day one in practice and deliver the high-level results that patients demand and deserve.

BRIAN BASSIRI-TEHRANI, MD

I am thrilled to share my positive experience for my Aesthetic Society Endorsed Aesthetic Fellowship. This transformative year exceeded my expectations, equipping me with the knowledge and proficiency to advance and thrive in the aesthetic arena. It truly was a privilege and an honor to work with expert faculty during my fellowship year. It has undoubtedly accelerated my professional growth and opened many doors for me and my career. I am more confident than ever I will deliver exceptional care to my patients. I wholeheartedly recommend an aesthetic fellowship to any trainee who is committed and dedicated to excelling in aesthetic surgery.

MATTHEW NOVAK, MD

Aesthetic plastic surgery is a science and art that requires both dedicated study and practice to develop and perfect. The opportunity to do additional training in aesthetic surgery after a plastic surgery residency is invaluable and would benefit any surgeon who is considering doing any amount of aesthetics in their practice. Trainees that go on to complete an Aesthetic Society Endorsed Fellowship will be well ahead of the curve when starting their career in any practice setting. I am so grateful for the experience, how it has positioned me to begin my practice, and would choose to do it again without hesitation.

LUCAS BOEHM, MD

My fellowship year exceeded expectations in every way possible. The fellowship provided an extremely well-rounded experience in breast surgery, body contouring, and facial aesthetic surgery. The fellow clinic was well supported and very well run. In addition, the exposure to the business of plastic surgery and to industry was very beneficial. Overall, I felt very well prepared to join a private cosmetic surgery practice after completing the fellowship. Dr. Calobrace is a master surgeon and a true mentor. I could not recommend his fellowship enough.
The patient’s journey may start with several research steps before they even visit your practice. Understanding what patients are researching can help you anticipate their questions and be ready to provide the answers they need to choose you for their procedure.

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71% of consumers said they researched provider information before making an appointment.1

---

1Path to Care, Cosmetic Care Findings, conducted by Chadwick Martin Bailey on behalf of CareCredit, October 2021.
Don’t miss the next issue to learn more about the Consultation stage of the patient’s journey.

Here’s what a patient’s research might look like.

### Rhinoplasty Research

**Possible treatment options & providers**
- Look up procedures on providers’ websites
- Check out social media

**Research cost, fees & financing options**
- Look up the average cost for rhinoplasty
- See what financing options are available

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I have been drawing since age six and have continued throughout my career. I had some formal training that culminated in a double major in studio fine arts while premed at Georgetown. In more recent times I came to realize that I was not meeting my own expectations as a painter, so I dropped it to focus more intensively on drawing. While I had considerable experience using graphite, that medium is limited in the amount of contrast possible because the darkest values had a detracting sheen to them. Charcoal pencil does not have that drawback. Furthermore, it made large scale drawing more practical. Currently, my drawings are typically over 40" in both dimensions. Large scale adds more presence to the image.

Given that only evenings and weekends are available, I can typically spend a year on a single drawing, although I always have two going at the same time. It’s much like building a house though, as efforts are progressively additive despite the glacial pace. Similarly, like building a house, once it’s complete the memory of “construction” fades rapidly. Also, since remuneration is not part of the equation, time concerns are not either. As a result, pursuit of perfection can be sought without compromise. Our rapid paced times today are not very supportive of this type of focus but when I look back at the detail, I see in Renaissance paintings I realize that this used to be common practice.

This type of photorealist drawing was inspired by the works of Robert Longo and the late Chuck Close, two amazing contemporaries well enshrined in today’s most important museums. My drawings are based either on family photographs or images found on the internet. The image both tells a story and provides a stimulating compositional presence that enhances the technical virtuosity exhibited in the rendering process. Today, finding the right image is probably the most challenging part of the entire process.

Drawing exercises the way I see form, proportions, and shadow. The rendering process connects the brain and hand in pursuit of aesthetic ideals. Both elements regularly practiced make me a better plastic surgeon too.
The Aesthetic Society leadership proactively and consistently reach out to young plastic surgeons like me to include us at the table. I feel seen and heard even as a first-time committee member.

I have always felt valued and welcomed by The Aesthetic Society and have sensed its encouragement to contribute to the advancement of our specialty independently of any other individual consideration.

The Aesthetic Society has always been a welcoming organization for me, even right after I joined in 2007. They’ve always been interested in my thoughts and ideas - how I would do things. I would not be where I am today had The Aesthetic Society not been inclusive and welcoming of me and my individuality!

I love how broad the scope of aesthetic surgery is and how ASJ and the annual Aesthetic Meeting allow us to be able to share those ideas and concepts in a safe place among surgeons across the globe. That makes The Society and ASJ so inclusive and provides me with diverse ideas for how to take care of my patients in an international practice with the support of The Aesthetic Society.
The Aesthetic Society has played an integral role in my career development by providing me with a network of surgeons with whom I’ve had the opportunity to create a mentor-mentee relationship. It is an honor to be part of a society that prioritizes excellence, community, and diversity.

The Aesthetic Society is the land of opportunity. Not only do they provide the best education in aesthetic medicine and surgery, it’s a very welcoming community.

The Aesthetic Society makes me feel welcome and included because I can be myself. I don’t have to behave in a certain manner, dress in a specific way, or have an important title — I am free to be me! I am in private practice, love shoes and purses, have tattoos, and like clothes that express my mood and individuality. All of these have been welcomed in The Aesthetic Society.

Being a part of The Aesthetic Society provides me with a wealth of resources and opportunities to enhance my skills and knowledge, which can ultimately lead to better outcomes for patients and a stronger reputation in the field.
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INTERNATIONAL COLLABORATIONS

We continue our strategic focus on international engagement with editors, authors, and reviewers. We’d like to thank SOFCEP, The French Society, for their generous welcome in Versailles recently during their annual meeting. We are still celebrating our 10-year partnership! We’d also like to thank The British Association of Aesthetic Plastic Surgeons, The Rhinoplasty Society, and The Canadian Society for Aesthetic Plastic Surgery, our partners for whom ASJ is their official English-language publication. Finally, we are grateful to our Premier International Partners for their continued support: Dutch Society for Aesthetic Plastic Surgery, Norwegian Society for Aesthetic Plastic Surgery, and Spanish Association of Aesthetic Plastic Surgery. Next, we head to Athens, Greece for the ISAPS meeting—we look forward to seeing many of our members and authors there!

ASJ and ASJ Open Forum

Current issue of ASJ: https://academic.oup.com/asj/issue/43/8
Current issue of ASJOF: academic.oup.com/asjopenforum/issue/volume/5

Immediate Past President Dr. Jennifer Walden presents at the SOFCEP meeting in Versailles, France.

Dr. Bruce Van Natta at the SOFCEP meeting in Versailles discussing an article in ASJ.

Dr. Catherine Bergerey-Galley, SOFCEP President, with Phaedra Cress during the event at Ecuries Du Chateau De Versailles.

The Aesthetic Society President, Dr. Mindy Haws in the SOFCEP exhibit hall with Kristin Crescenzi (BD, Franklin Lakes, NJ), Phaedra Cress, and Immediate Past President of ASERF, Dr. Bruce Van Natta.

Continued on Page 36
A beautiful equestrian performance at Ecuries Du Chateau De Versailles, hosted by SOFCEP.

Prior to the session “Women’s Symposium and Round Table,” speakers and attendees gathered during the SOFCEP meeting.

Dr. Catherine Bergerey-Galley, SOFCEP President, and Past SOFCEP President Dr. Michel Rouif present Dr. Mindy Haws and Phaedra Cress with awards during the meeting.

Dr. Katarina Andjelkov, ASJ Editorial Board Member, presents during the SOFCEP meeting in Versailles.

PUBLISHING OPPORTUNITIES AND DISCOUNTS FOR OUR MEMBERS

Ready to publish in ASJ Open Forum? Don’t forget to take advantage of a special member discount. Mention this discount in the cover letter when you submit and save 50% off the publishing charges in ASJ Open Forum. Ready to make your ASJ article open access? We’ve got a discount for that! We’re now offering 25% off the open access publishing fees for all ASJ articles. Questions? Drop us a line: journal@theaestheticsociety.org.

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DID YOU KNOW?

The average time to first decision is well under the industry standard of 30 days, averaging just 15 days for ASJ and 9 days for ASJ Open Forum! Once accepted, authors can expect their articles to publish online in Accepted Format in approximately 7 days. Submit today and experience rapid review and publication with our international journals.
Have You Mistakenly Unsubscribed from Aesthetic Society Emails?

The Aesthetic Society has recently become aware that some members and colleagues have mistakenly clicked “Unsubscribe” on our emails, which removes a person entirely from all Aesthetic Society email communication. Typically, a person may think that they are unsubscribing from only that particular symposium promotion, for example, but in reality they are unsubscribing from all Society emails. The Aesthetic Society makes every effort to ensure that the emails we send are relevant to you, with important Society information, educational opportunities, and member offerings. Please be assured that we never loan or sell our email lists.

If you have not received email from The Aesthetic Society in some time, it is likely that you may have mistakenly unsubscribed from email communications. If this was in error, please email hello@theaestheticsociety.org, and ask to be re-subscribed to our communications list. We value your support of The Aesthetic Society. Thank you!

Submit Your Artwork for ASN’s Next Cover!

Aesthetic Society members, we invite you to submit a photo of your original art to: hello@theaestheticsociety.org. One of our four brand pillars is artistry, so we want to showcase your work. After all, many of our members are artists, not only on, but off the operating table. In years past, we adorned the cover of Aesthetic Surgery Journal with member-submitted artwork. Now is a perfect time to return to that tradition, but for the cover of this publication, Aesthetic Society News.

So please, show us what you’ve got; we would love to feature your creations!
• Designed to assist in the performance of the dissection of the upper abdominal tunnel

• Superior ergonomic handling - less fatigue - provides excellent exposure

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ASSI.ABR41726
80 x 27mm blade with 60mm wide working end with teeth, fiber optic and ergonomic handle

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Hello, I’m Kevin Charles, your Senior Director of Web Strategy and Development at The Aesthetic Society. My website production and development journey spans over two decades and is filled with continuous learning and adaptation to the ever-evolving digital landscape.

I work closely with our members daily, offering guidance and support as they develop their member profiles. Member profiles serve as a gateway for our members to connect with their audience. I help them craft these portals by assisting in the addition of before and after photos, addressing consumer queries, and articulating the unique value proposition of their practices.

One critical aspect of my role involves providing our members personalized consultation services related to their professional websites. By leveraging my understanding of SEO trends and strategies, I advise our members on enhancing their search engine visibility, ensuring their digital presence doesn’t go unnoticed.

In the age of information, managing one’s online reputation is paramount. A substantial part of my interaction with members revolves around guiding them through the complexities of online reputation management. Whether responding to reviews, dealing with comments, or navigating the occasional negative press, I help our members maintain a positive and professional online image.

Technical issues, although unavoidable, need not be daunting. I’m always on standby to help members resolve their technical challenges. With rising concerns over digital security, I provide timely and necessary consultation on cybersecurity issues, ensuring the safety of our members’ digital domains.

Apart from providing individualized assistance, I spearhead website production and development for The Aesthetic Society. My vision is to transform our sites into an engaging, comprehensive platform that not only serves as a hub of information but also an interactive space promoting education and fostering community ties within the aesthetic plastic surgery field.

The robustness and seamless functioning of our web properties rest on my shoulders. I’m dedicated to infrastructure maintenance, troubleshooting technical issues, and enhancing site performance, ensuring an optimal and user-friendly experience for all our members.

Despite my role being deeply rooted in technology, I try never to lose sight of the human element. Each project I take up is designed with our diverse audience in mind. It’s all about creating an environment that connects, supports, and educates.

Keeping up-to-date with the latest digital trends and technologies is a commitment I made over 20 years ago, and it remains as strong as ever. This constant learning ensures our web presence is a true reflection of The Aesthetic Society’s core values and mission, effectively extending our influence in the digital sphere.

The contributions I’ve made to The Aesthetic Society fill me with immense pride. Through tireless efforts and relentless pursuit of excellence, I’m committed to maintaining our digital platforms as a leading resource in the field of aesthetic plastic surgery. Serving as the Senior Director of Web Strategy and Development isn’t just a role; it’s a privilege and a passion.

Meet the Staff—Kevin Charles
Senior Director, Web Strategy and Development

Starting with this issue of Aesthetic Society News, we are featuring a different Aesthetic Society member... Getting a look behind the OR and gaining a better understanding of who you are and what you do outside of your regular practice. See our first Member Highlight on page 40.

Do you volunteer? Are you a plastic surgeon for a sports team? Do you hike the highest peaks? Are you a musician? Or are you involved with local politics?

We want to hear from you. Send us an email and get ready to tell us more about yourself: hello@theaestheticsociety.org
In this new column we will be featuring a different surgeon every issue. Going beyond their practice to find out more about what makes them who they are.

LET’S GET TO KNOW:
GREGORY ALBERT, MD

Dr. Albert is an Aesthetic Society member, practicing out of the Optimization Centre in Boca Raton, Florida. For twenty years he has also been the plastic surgeon for the Florida Panthers, an NHL team that made it to The Stanley Cups Finals this year.

Question
Please tell me about your role as the plastic surgeon for The Panthers. What does it entail and how did you come to be in this position?

Answer
The CEO of the Panthers reached out to my wife, who is also my office manager. The Orthopedic Surgeon who was putting the medical team together, recommended me for the position. At the time, I did not know much about hockey, what the role would entail, nor how often they would get injured. But I was up for the challenge, and it did not disappoint. Working on professional athletes was always part of my career plans. Being a part of the action in time-pressured situations to get players back in the game and ready to perform at an optimal level turned out to be very rewarding. The camaraderie with the other team doctors, management, coaches, and players has been a fantastic experience and a bonus I was not expecting. Another bonus is that my daughters have basically grown up in the arena with the players, staff, and their families.

Question
What is the biggest difference between working with athletes vs. your regular patients?

Answer
Athletes are “patched together” more for form and function with an emphasis on function. Patients are generally more concerned with the cosmetic result. With athletes, I am concerned about the next injury while fixing the injury at hand. So, preservation of tissue while leaving options for possible future injuries is always a concern. With facial fractures, depending on the location, player, and their history of injuries, I may use titanium plates and screws over absorbable mesh.

Question
Are there different timelines post-op for healing requirements for athletes?

Answer
Both healing and getting a player back on the ice is of utmost importance. It is essential that players work with the medical team, athletic trainers, and physical therapist for a successful recovery. Everyone works together to get them back on the ice during practice and ultimately game day. I like to under promise and overdeliver meaning that I overestimate time off until they are back on the ice. If they are back on ice sooner, then I look like a hero.

Question
What are some of the unique questions/concerns that your athletes ask you and how have their mindset changed your perspective in the way you operate?

Continued on Page 41
A surprising fact is that about 90% of athletes care how they look which is probably very different from players twenty plus years ago. Most players do not have, nor desire, thick scars anymore. The idea of mitigating scars pushed me to develop a scar cream that players have used for last fifteen years, something I now provide to my regular patients.

What are some of the common injuries or issues that you encounter as the team’s plastic surgeon?

Lacerations on eyebrows and chins is the number one injury. This is followed closely by broken noses and orbital fractures which are usually handled after the game. I will also treat NHL and NFL players with Botox for hyperhidrosis.

How do you approach treating these injuries?

Most injuries are taken care of in the treatment room. It is a high-adrenaline environment, with lots of excitement. I work with the medical team in a treatment room adjacent to the locker room (just off the ice). The roar of the crowd keeps us engaged with getting players back in the game.

Could you share any memorable experiences or success stories where your expertise as a plastic surgeon made a significant difference for a player’s recovery or career?

A long-term Panther player, and frequent flyer to the treatment room, came off the ice after he had been hit with a puck in the middle of the eyes going at least 100mph. He said, “doc not a problem.” I said, “I don’t think so.” I wound up fixing his naso-orbital-ethmoid fracture with a titanium plate making up most of his newly reconstructed nose. He made me look good and went back to playing the next week. More importantly, his wife said he never looked better!

One of the referees got in the way of a slap shot in front of the Panther bench and sustained multiple facial fractures. He was definitely one of the worst sports injuries I have treated. I fixed him up and he was very grateful since he was in line to get nominated for the Stanley Cup Final. I put him back together and with his hard work, he made it back in time to officiate at the Stanley Cup Finals. As a thank you, I got a very special gift that is very limited in number…a signed jersey from an NHL referee.

I got a call from the trainer of the Miami Dolphins that a lineman had sustained an orbital blowout fracture. The next day he had a CT to confirm the diagnosis. On Tuesday, I fixed the orbital blowout fracture with plates and screws. Next few days he trained, and I cleared him to play the next Sunday (1 week later). He played well and the coach and president of the Dolphins called to thank me for doing such a good job.

Another player came off the ice in the first period and to most of the medical staff, had looked like he had broken his jaw. I stitched him up and told him we need to take an x-ray to make sure he did not break his jaw. He refused and said he felt fine. At the end of the game, an x-ray showed a severely comminuted mandible fracture. He essentially played the whole game with a fractured jaw... and no pain meds.
Players are generally very tough. However, one injured player from an opposing team came into the treatment room with his trainer. He wanted to get back on the ice quickly and requested no anesthesia. His requirement was that the trainer had to hold his hand. During the minor procedure, the trainer was sweating and in much more pain than the player because the player was squeezing his hand with a tobacco tin cutting into his palm.

**Question**

In what ways does your role as the plastic surgeon for an NHL team differ from your work in a traditional medical setting? What unique challenges or opportunities does it present?

**Answer**

When I first started working with the team, I had to speak with the player’s agent and explain why a fix needed to be done. Thankfully, trust in my abilities has grown and those type of conversations have not occurred in the past ten years.

The biggest challenge is predicting when the player can go back to the game.

**Question**

As a plastic surgeon, how do you collaborate with other members of the medical team to ensure the best possible care for the players?

**Answer**

Sometimes we discuss ways to mitigate players’ downtime. Plastics patients get back quicker than orthopedic patients so it’s a matter of timing as to which discipline works on a player first.

**Question**

How do you support the players’ emotional well-being during the recovery process? Are there any specific strategies or approaches you use to help them cope with the physical and psychological aspects of their injuries?

**Answer**

Players require lots of emotional reassurance. Each player has an entourage that includes their manager, agent, wife/girlfriend, etc. that give input as to how surgery must to be absolutely perfect so they can get back to work as soon as possible. The player simply wants easy and uncomplicated recovery.

**Question**

Can you discuss the impact of plastic surgery on the players’ confidence and self-esteem? How does it contribute to their overall performance on the ice?

**Answer**

Young athletes want to look good in life after the game... And want to look their best while still a player. Plastic surgery makes them feel more confident. Although athletes are in top shape, a majority appear to age quicker, and look older prematurely. Athletes are even more sensitive to looking young, and often do what they can to look younger for longer to keep up their confidence.

**Question**

What measures do you take to stay updated with the latest advancements and techniques in plastic surgery relevant to sports-related injuries?

**Answer**

NHL yearly meeting
- Regular NHL updates
- Orthopedic sports medicine updates regarding new criteria

Dr. Albert and medical team filming for the documentary, “Innovators in Sports.”
**Question**

What advice would you give to aspiring plastic surgeons who are interested in working with professional sports teams? What qualities or skills are essential to succeed in this specialized field?

**Answer**

Be patient!
- Offer up services to teams that don’t have surgeons.
- Know your value—Plastic Surgeons have specific skill sets important to every athlete. Nose and breathing.
- Don’t ask anything in return. Consider it an honor to treat the players, which is essential across all sports. The incentive is not monetary, it is the reward of getting them back to playing ASAP.
- Volunteer with a team.
- Understand that some teams have you pay to treat the players.

**Question**

And what advice would you give to your younger self? And to those starting out in plastic surgery.

**Answer**

Remain humble! Give the patients time and treat them like a person
- Be available... but with caution.
- Be patient. And allow some things to come to you.
- Be seen and not heard... in the locker room.
- Sit back and observe before jumping in and doing something too aggressive.
- Do what you’re passionate about. Not for the money. You must love people.
- Listen. And know what the patient wants.

**Question**

What is the first app you check in the morning? Last app checked at night?

**Answer**

I don’t rely on apps the way most people do. In that sense, I’m a bit boring. However, every morning I check The Weather app and CNBC. My oldest daughter is a golfer, so the last app I check every night is The Weather.

**Question**

Do you listen to music while in surgery? If so, what is your favorite?

**Answer**

Rock and alternative
- Nickelback and Goo Goo Dolls
- Eminem

**Question**

In another life I would have been....

**Answer**

I’m not sure what I would do if not a surgeon affecting people’s lives in a positive way.

**Question**

The best bit of advice I ever received was...
- My mom who died from cancer at 56 told me to enjoy the journey. Before you know it, it will be over.
- While at my wedding my dad told me to be nice.
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Gynecomastia & Tummy Tuck

Eva
Her Breasts Equal Courage
Breast Reconstruction

Jessica
Finally Putting Herself First
Plastic Surgery After Weight Loss

Kase
Their Identity Affirmed
Breast Removal

Scan to watch their stories.
Step into the Future of Aesthetic Surgery with Aesthetic One!

Looking back on an extraordinary first half of the year, Aesthetic One has paved the way for revolutionary advancements in aesthetic surgery and patient care.

The app was designed to streamline the implant registration process for physicians and has become the go-to tool for leading implant surgeons, transforming their practices and patient care.

COLLABORATING FOR PROGRESS

Aesthetic One’s commitment to excellence is further underscored by its recent collaboration with MDEpiNet, a global public-private partnership operating under a cooperative agreement with the FDA and the Center for Devices and Radiological Health. The joint efforts of Aesthetic One and MDEpiNet are focused on establishing a Memorandum of Understanding, facilitating a collaborative review of data and analysis regarding the real-world practices of plastic surgeons’ off-label use of Betadine. Leveraging Aesthetic One’s unique platform, this review is set to create reusable real-world data resources, enabling multiple stakeholders to evaluate devices with greater confidence and precision.

UNLEASHING THE POTENTIAL FOR 2023 AND BEYOND

As we look ahead, Aesthetic One has exciting enhancements to empower more physicians and patients with permanent access to essential data.

• Enhanced Data Collection for Enhanced Patient Care: Every detail matters in patient care. Aesthetic One now features smart logic in operative forms, capturing more data with less input time. Real-time data collection provides valuable insights, elevating patient care and identifying trends in breast surgery patients.

• Multi-Physician Connect for Seamless Transitions: Patient journeys should be seamless. Our Multi-Physician Connect feature enables patients seeking care from a different surgeon to connect effortlessly. Sharing implant ID card details ensures crucial implant-specific information is accessible to their new physician, prioritizing patient privacy.

STAY AHEAD WITH REMARKABLE FEATURES

• Enhanced Group Practice Workflows: Simplify registration by assigning a staff member to register implants for multiple physicians, perfect for busy practices.

• Saline Implant Fill Amount Tracking: Effortlessly monitor and record saline implant fill amounts, providing insightful patient data.

• Seamless Implant Library Integration: Easily add past patients to their digital implant library for secure and permanent access to implant information.

• FDA Compliance Made Easy: Document FDA compliance for each patient effortlessly, adhering to safety requirements and study results for breast implants.

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Embrace the power of Aesthetic One and become part of a transformative journey in aesthetic surgery. Register today using the QR code provided or by visiting aestheticone.com/register. Account activation typically takes just 1–2 business days, and staff accounts can be set up once physicians activate their accounts.

Enhanced Group Practice Workflows: Simplify registration by assigning a staff member to register implants for multiple physicians, perfect for busy practices.
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Support our Industry Partners and consider using their products in your practice.
Media Notes and Quotes

LITTLE BLACK BOOK
New Episodes Launched of ‘Beyond the Before & After’ Original Docuseries for The Aesthetic Society
Excerpt: The Aesthetic Society released four new episodes of its original docuseries ‘Beyond the Before & After.’ This original docuseries by The Aesthetic Society and Greenpoint Pictures, continues to provide a platform for real patients to tell their individual journeys of how aesthetic plastic surgery helped transform their lives, not just physically, but emotionally. “At The Aesthetic Society, we believe every patient has a unique story that deserves to be told and ‘Beyond the Before & After’ gives patients a platform to share how aesthetic surgery impacts their lives,” says Dr. Jennifer Walden, President of The Aesthetic Society. “Often, patients seek aesthetic surgery because they want their external appearance to match how they feel inside, and these stories illuminate each personal journey. These patient stories are both powerful and inspiring.”

NEWBEAUTY
How a Tummy Tuck Helped 2 Sisters Regain Their Strength After Childbirth
Excerpt: The abdominal region consists of the skin, a layer of natural fat, and underlying muscles,” explains Nashville plastic surgeon and The Aesthetic Society Board member, Kent “Kye” Higdon, MD. “The prominent muscles, commonly known as the abs, form a central line called the linea alba. Normally, this line is tight and narrow, but during pregnancy or weight gain, the hormonal and physical changes associated with these conditions allow the muscles to stretch and accommodate the growing abdomen.” This stretching causes the muscles to separate, resulting in widening of the linea alba, a condition called diastasis recti. “The separation creates a visible ridge or protrusion between the muscles, which may resemble a hernia,” explains Dr. Higdon. “It can be uncomfortable and occasionally painful, although it should be noted that diastasis recti is distinct from an actual hernia.”

YAHOO FINANCE
Nashville Plastic Surgeon Melinda Haws, MD, Named New President of The Aesthetic Society
Excerpt: “I am thrilled to serve as President of this well-loved organization with a long history of dedicated membership and partners,” says Dr. Haws. “My goal in leading The Aesthetic Society is to build on the achievements of the past 55 years and maintain the high level of standards we are known for in education and patient safety in aesthetic surgery. I plan to expand our membership and accelerate our impact in the technology space as well as bring you a meeting not to be missed in Vancouver 2024.”

The newest member benefit is a brand-new place for Society members to interact. This is an opportunity to join a conversation, ask questions, share documents, collaborate on research through ARC, network... all behind a password-protected Member Portal.

Have You Joined the Conversation?
INDUSTRY PARTNERS

The Aesthetic Society’s partnership program provides industry with strategic benefits and opportunities to collaborate with Aesthetic Society members in support of our mission.

As a benefit, Premier and Alliance partners are given the opportunity to provide key updates and information on products, promotions, and discounts. The Aesthetic Society is driven to provide visibility and support for our partners.

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At Allergan Aesthetics, an AbbVie company, we develop, manufacture, and market a portfolio of leading aesthetics brands and products. Our aesthetics portfolio includes facial injectables, body contouring, plastics, skin care, and more. With our own research and development function focused on driving innovation in aesthetics, we’re committed to providing the most comprehensive science-based product offering available. For more information, visit www.AllerganAesthetics.com.

**GalaFLEX™ Scaffold by BD** helps support, reinforce and repair soft tissue in plastic and reconstructive surgery.

To continue BD’s commitment to our loyal GalaFLEX™ Scaffold customers, we have established a dedicated team of Plastic and Reconstructive Surgery (PRS) Customer Success Navigators to help you “navigate” BD. The PRS Customer Success Navigators are available to help you with account maintenance, invoice payment and urgent order fulfillment, to name a few. We are regionally located and are in addition to the BD Customer Service and Medical Affairs team you already know.

Call 833.342.2073 or email PRSsupport@bd.com to learn more about the strength and stability of GalaFLEX™ Scaffold with the support and service you expect from BD.

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**Galderma**

EST. 1981

We are advancing dermatology for every skin story by empowering beauty in all forms.

At Galderma, we embrace these differences and offer cutting-edge, premium brands that fit people’s individual needs, across the full spectrum of dermatology through Aesthetics, Consumer Care and Prescription Medicine. Galderma’s passion for education and unique innovation enables our patients to truly embrace their individual skin story. Collaboration is part of our DNA—a cultural driver for how we interact within and beyond the company. Galderma has a broad range of Aesthetic solutions and innovation that drives the future of aesthetics forward.

**Merz Aesthetics**

Merz Aesthetics is a medical aesthetics business with a long history of empowering health care professionals, patients and employees to live every day with confidence. We aim to help people around the world look, feel and live like the best versions of themselves—however they define it. Clinically proven and category-leading, its product portfolio includes injectables, devices and skin care treatments designed to meet each patient’s needs with high standards of safety and efficacy. Being family owned for more than 112 years, Merz Aesthetics is known for building unique connections with customers who feel like family. Merz Aesthetics’ global headquarters is in Raleigh, N.C., USA, with a commercial presence in 36 countries worldwide. It is also a part of Merz Group, which was founded in 1908 and is based in Frankfurt, Germany. Learn more at merzaesthetics.com.

New Products to Check Out!

Special Offers for Aesthetic Society Members
Establishment Labs is a global medical technology company dedicated to improving women’s health through FemTech solutions, with an initial focus on breast health, reconstruction & wellness. The company offers a number of technologies marketed under its Motiva® brand. Over 2 million Motiva Implants® have been delivered to market in more than 80 countries since 2010. The company recently released two-year interim data from its Motiva Core pivotal study, an ongoing US clinical trial of investigational medical devices under an FDA-approved Investigational Device Exemption (IDE). While no conclusions should be drawn based on interim data, preliminary clinical results are encouraging.

NEWBEAUTY

For over 20 years, NewBeauty has led the way in aesthetic industry coverage. From its beginning as the only magazine 100 percent dedicated to beauty, to its powerhouse presence as a leading luxury brand, NewBeauty educates and empowers women everywhere. NewBeauty cuts to the core of beauty to deliver trusted coverage on the latest beauty products, treatments and cosmetic procedures available in health and wellness. Consistently at the forefront of both aesthetic innovation and the expanding concept of beauty itself, NewBeauty has never strayed from its original goal of providing real, in-depth and trusted beauty information.

NewBeauty enables readers to make better beauty decisions reach qualified practitioners. In that time, no other brand has done more to connect board-certified plastic surgeons with their ideal patients. Visit newbeauty.com.

Sientra offers leading transformative treatments and technologies focused on progressing the art of plastic surgery and making a difference in patients’ lives. With an unrivaled safety profile, state-of-the-art science and exceptional service; paired with unparalleled partnerships with plastic surgeons, the Sientra portfolio of proprietary innovations radically advances how plastic surgeons think, work and care for their patients. The company’s core breast products segment includes its state-of-the-art Sientra breast implants and its ground-breaking dual-port breast tissue expander, AlloX2®, In addition, the Sientra portfolio also includes their novel fat transfer device, Viality™, the first and only Lipoaspirate Wash System using AuraClens™ and BIOCORNEUM® the #1 performing, preferred and recommended scar gel of plastic surgeons (data on file).
INDUSTRY PARTNERS

The Aesthetic Society®

Alliance Partners

Applied Medico-Legal Solutions Risk Retention Group, Inc (AMS RRG), a medical liability company, has been assigned a rating of A- (Excellent) by AM Best. AMS RRG’s financial strength, operations, business profile and risk management all played significant roles in the rating. To learn more about how AMS RRG can protect you and your practice from medical and cyber liability, contact Christopher Edge 609-737-1154 ext 301.

CosmetAssure®

CosmetAssure is a proud Alliance Partner of the Aesthetic Society, and our coverage is an exclusive benefit to member surgeons. Developed in 2003, to help patients reduce or eliminate out-of-pocket medical expenses related to treating a complication following aesthetic surgery. Our coverage converts consults into clients and is an excellent way to distinguish your practice from competitors.

To learn more or become a participating surgeon, contact us today at 855.874.1230 or info@cosmetassure.com.

Earned

New Alliance Partner

Earned is a personal wealth platform designed exclusively for physicians. We handle everything from career advisory, insurance, cash management, estate planning, investing, and taxes, all under one roof. Because we think existing solutions fall short, we’ve created our own proprietary technology so that you can access your net worth and view your financial health easily through our app, whenever you want. Learn more at www.earnedwealth.com.

InMode

InMode Ltd. is a leading global provider of innovative and award winning medical technologies that focuses on well-being and life-changing results. InMode develops, manufactures, and markets platforms that harness novel radio-frequency (RF) based technology that strives to enable new emerging minimally-invasive procedures and improve existing surgical procedures. InMode has leveraged its medically-accepted RF technologies to offer a comprehensive line of platforms that will enable us to capitalize on a multi-billion dollar market opportunity across several categories of surgical specialty such as plastic surgery, gynecology, dermatology, ENT’s and ophthalmologists.

www.inmodemd.com

SURGICAL SITE COMPLICATIONS HAPPEN. PROTECT YOUR WORK WITH NPSEAL.

Plastic surgery patients deserve smarter healing. As an Alliance Partner of The Aesthetic Society, Guard Medical invites you to discover NPseal; an ultra-portable Negative Pressure Wound Therapy (NPWT) dressing for closed incisions that does not require batteries and tubes. Plastic Surgeons may use NPWT to support healing on procedures such as abdominoplasties, breast augmentations, mammoplasties, mastopexies and more. For Aesthetic Society Members, use the promo code AS23 for exclusive pricing. For more detailed information about NPseal, please visit guard-medical.com. Join us in elevating patient experience.

Learn more at guard-medical.com.

NPseal®

www.inmodemd.com

Evolut®

MORE THAN A PRODUCT. WE’RE YOUR PARTNER.

Our Evolut® Loyalty Program is designed to accelerate your profitability. We put your practice front and center with co-branded marketing opportunities, our Evolut Rewards patient loyalty program, and transparent pricing. We’re the only company in the tox space that can say that we’re the only one dedicated exclusively to aesthetics.

The CareCredit health, wellness and beauty credit card dedicated to helping millions of patients get the care they want or need by offering promotional financing options. Now accepted at more than 260,000 locations nationwide, the CareCredit credit card allows cardholders to make convenient monthly payments for aesthetic procedures that help them achieve the look they want. Once approved, patients can use their card again for additional procedures or skin care products you provide.* CareCredit also gives reconstructive patients a way to pay for deductibles, co-pays and other fees not covered by insurance. Learn more about CareCredit by visiting carecredit.com/asaps or call 855-860-9001.

*Subject to credit approval. Minimum monthly payments required.
POWER YOUR PRACTICE GROWTH WITH PATIENTFI AND PRIVI

Help more patients say "yes" with our innovative practice revenue solutions. PatientFi's friendly financing offers higher approval rates for higher amounts. And it's proven to deliver 2x faster case acceptance than other financing companies. For your non-invasive business, meet PRIVI, the first and only aesthetic membership platform of its kind. Only PRIVI pays you upfront while patients pay monthly for treatment plans. Convert more patients faster—and keep them coming back! Maximize your revenue potential with the proven power of patient financing and aesthetic memberships.

Explore more at pages.patientfi.com/signup/patientfi-privi/ or call 866-774-2409.

Sofwave

Sofwave™ breakthrough, non-invasive Synchronous Ultrasound Parallel Beam Technology SUPERB™ FDA-cleared to lift the eyebrow, lift submental tissue, improve facial lines and wrinkles. Sofwave™ is also FDA-cleared for the improvement in the appearance of cellulite.

Sofwave™ answers the growing demand for non-invasive treatments that deliver noticeable wrinkle reduction and lifting for all face and neck areas. Our SUPERB™ technology uses seven cooled transducers, directly coupled to the epidermis, creating a unique 3D array of volumetric, cylindrical-shaped thermal zones, which in turn deliver continuous parallel energy simultaneously to coagulate more tissue areas more quickly at a depth of 1.5mm mid-dermis in order to improve skin effect in half the treatment time of other technologies, no matter the skin type.

REVANCE AESTHETICS

Revance is a biotechnology company setting the new standard in healthcare with innovative aesthetic and therapeutic offerings that elevate patient and physician experiences. Revance’s aesthetics portfolio of expertly created products and services, including DAXXIFY™ (DaxibotulinumtoxinA-lanm) for injection, the RHA® Collection of dermal fillers, and OPUL®, the first-of-its-kind Relational Commerce platform for aesthetic practices, deliver a differentiated and exclusive offering for the company’s elite practice partners and their consumers. Revance has also partnered with Viatris Inc. to develop a biosimilar to BOTOX®, which will compete in the existing short-acting neuromodulator marketplace. Revance’s therapeutics pipeline is currently focused on muscle movement disorders including evaluating DAXXIFY™ in two debilitating conditions, cervical dystonia and upper limb spasticity.

Symplast

Putting patients at its core, Symplast’s HER & PM System enables over 4,400 users to elevate their aesthetic businesses through improved patient engagement. Tailor-made for the aesthetic industry, our true-cloud software offers a user-friendly patient app, ensuring your practice meets compliance standards. With the ability to manage your practice remotely, our 24/7 unlimited support, and an “own your own data” approach, Symplast offers seamless business operations and data control. We’re more than a system; we’re a growth partner in retail health. Choose Symplast for a solution that evolves with you.

Is Your Company Ready to Fully Engage with The Aesthetic Society?

Contact Jackie Nunn at jackie@theaestheticsociety.org for more information about partnership opportunities.

New Products to Check Out! Special Offers for Aesthetic Society Members
Industry Partners Support The Aesthetic Society’s Mission

The Aesthetic Society is pleased to partner with industry in support of The Society’s mission to advance the science, art, and safe practice of aesthetic plastic surgery and aesthetic medicine among qualified plastic surgeons.

“The Aesthetic Society’s ongoing partnership with industry is vital to the advancement of aesthetic plastic surgery. Industry support helps The Aesthetic Society unleash the power of science and education to advance outcomes and safety for our patients.”—Dr. Tracy Pfeifer, Industry Relations Chair.

We’d like to thank and acknowledge Premier Partner, MTF Biologics, and Alliance Partners, CareCredit, CosmetAssure, and NP Seal by Guard Medical, for their continued support.

The Aesthetic Society values our Industry Partners, and we thank all our partners for their meaningful contributions.

**MTF Biologics**

**RENUVA, A SIMPLE OFF-THE-SHELF TREATMENT FOR AGE-RELATED FAT LOSS**

Renuva is a groundbreaking treatment that is gradually replaced with the body’s own fat. Renuva is safe and effective for replacing age-related volume loss in the face, hands and body. Until now, medically trained aesthetic injectors didn’t have an off-the-shelf treatment that could replace a patient’s fat loss with fat. With Renuva, now we do!

Introduced in 2016, Renuva is an allograft adipose matrix, derived from human tissue, which goes through strict screening and processing to preserve the collagens and proteins inherent to adipose tissue. Regenerative collagens and proteins have been used for years in medicine and now are being used in aesthetics. For nearly 100 years, human tissue has been used for reconstructive and other procedures, including skin grafting, burn care, abdominal wall repair, and other surgical procedures.

Renuva comes from MTF Biologics, a global organization on the forefront of saving and healing lives through innovations in tissue and organ donation, transplantation, and research. We collaborate with leading physicians, scientists, and experts in tissue and organ recovery to honor donated gifts, serve patients and advance science. Proud to be a Premier Partner with the Aesthetic Society, MTF Biologics provides the highest quality and safest grafts, funding clinicians and researchers to further the science of transplantation, support mission trips and more. From orthopedics to wound care to plastic and reconstructive surgery, MTF Biologics has been developing innovative, effective allograft solutions to treat patients for 36 years with zero incidence of disease transmission.

*“Turning 50 is a milestone for any woman and then I got divorced. I just feel like I look older and not fresh. Then I had Renuva and couldn’t pinpoint what it did, but it just made me look younger and fresher and healthier. And so now I’m 53 going into this dating world and I just feel better; I feel more confident!”*—Renuva patient Gayle, age 53

Renuva can be used anywhere in the body where fat exists. Common examples include cheeks, hands, and body. All tissue is consented for cosmetic use by donor families. Renuva is also being used in reconstructive procedures like pediatric cleft palate, cleft lip, craniofacial and breast reconstruction procedures, with research underway for other potential uses. 100% of the revenue from Renuva is reinvested, allowing MTF Biologics to serve our mission to heal & save lives.

For more information go to myRenuva.com and follow @myRenuva

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**CareCredit Offers Resources to Help Your Practice Thrive**

CareCredit is a health, wellness and beauty credit card dedicated to helping millions of patients get the care they want by offering promotional financing options. Now accepted at more than 260,000 locations nationwide, the CareCredit credit card allows cardholders to make convenient monthly payments for aesthetic procedures that help them achieve the look they want. Patients have the ability to see if they prequalify for the CareCredit credit card with no impact to their credit bureau score.

“CareCredit is pleased to continue our partnership with The Aesthetic Society as an Alliance Partner. CareCredit has over 35 years of experience with patient financing and helping to remove the payment hurdle from the decision-making process. CareCredit offers flexible payment options for out-of-pocket health and wellness expenses, allowing patients to move forward with the procedure they want,” said Jill Behm, SVP and General Manager, CareCredit Specialty—Cosmetic.

CareCredit offers resources to help your practice thrive including custom reports that provide tailored insights to your practice, contactless payment through a custom link and QR code, digital tools and much more. A simple and convenient solution that can help your patients schedule without delay.

Learn more about CareCredit by visiting carecredit.com/asn or call 855-860-9001. *Subject to credit approval. Minimum monthly payments required. See carecredit.com for details.*

Continued on Page 53
Industry Partners Support The Aesthetic Society’s Mission

Continued from Page 52

COSMETASSURE CELEBRATES 20TH ANNIVERSARY

We want to thank our Participating Surgeons and their staff for allowing us to support them and their patients for 20 years! As the leader in the aesthetic complications insurance industry, CosmetAssure has protected board-certified plastic surgeons since 2003. We are proud to be a long-time Alliance Partner of the Aesthetic Society.

We remain focused on patient safety and will continue to provide a superior product to protect your patients and add value to your practice. Our industry-leading surgery and complications data combine to give the plastic surgery community a valuable resource. Throughout this year we will be focusing on bringing more of this data direct to our members in the form of valuable insights into the complications related to plastic surgery. For instance, we can confidently say that:

- Overall, aesthetic plastic surgery is very safe with a major complication rate which remains low.
- Abdominoplasty and gluteal augmentation complication rates significantly increase when you add liposuction or contouring to another area of body.
- Facelift patients who are overweight (BMI greater than 25) are at higher risk for infection.
- Men have nearly a four times greater risk of hematoma following facelift than women (RR=3.9).
- Augmentation mastopexy has significantly higher complication rates overall than either augmentation or mastopexy alone.
- Finally, one of our recent studies has documented a major complication rate for capsulectomy of 13% which is a good number to quote during informed consent for those patients insisting on total capsulectomy along with implant removal.
- CosmetAssure helps convert consults into clients

CosmetAssure is available to all board-certified (or eligible) members of The Aesthetic Society (or Associate Members), and can be an effective marketing tool to differentiate yourself from the competition.

Becoming a participating surgeon assures your patients and prospective patients that you have taken responsible, proactive steps to protect them in the unlikely event of a complication.

Visit our website at www.cosmetassure.com to learn how you can help support this effort by becoming a Participating Surgeon and helping to protect your patient’s financial well-being in the event of unexpected post-surgical complications. You can also contact us directly at info@cosmetassure.com.

NPseal is:

- A simple, easy-to-use device that delivers NPWT and may promote wound healing, while lowering the barriers of high complexity and cost. Numerous peer reviewed studies have demonstrated the utility of NPWT in reducing the risk of surgical site complications.*
- Available in multiple sizes and patients can wear it for up to 6 days. Patient can shower with NPseal.
- Clinician friendly: easy to use with a simple 3-step process: apply, seal, and pinch the pump to establish and maintain negative pressure (-75 to -125 mmHg).
- Patient friendly: NPseal’s ultra-portable design without batteries and tubes makes it easier for patients to wear comfortably.
- Cost Effective: NPseal delivers NPWT at a competitive price point that allows for expanded use.

At Guard Medical, we believe that plastic surgery patients deserve smarter healing. As an exclusive offer for Aesthetic Society Members, we provide special pricing when you use the promo code AS23.

For more detailed information about NPseal and its benefits, please visit guard-medical.com. Join us in elevating patient experience.

- www.guard-medical.com/home
- Indications For Use per K212971
- Strugala et al, Meta-Analysis of Comparative Trials Evaluating a Prophylactic Single-Use Negative Pressure Wound Therapy System for the Prevention of Surgical Site Complications, SURGICAL INFECTIONS Volume 18, Number 7, 2017

Introducing Guard Medical, a new Alliance Partner of the Aesthetic Society. We invite you to discover the innovative technology called NPseal, an ultra-portable Negative Pressure Wound Therapy (NPWT) dressing designed specifically for closed incisions. Unlike traditional NPWT systems, NPseal eliminates the need for batteries and tubes, offering a simplified experience.

Plastic Surgeons may use NPWT to support healing on procedures such as abdominoplasties, breast augmentations, mammoplasties, mastopexies and more. Learn more about one of our surgeon’s experience with NPseal by visiting: vimeo.com/npseal/plasticsurgeontestimonial.
Patients Deserve Smarter Healing

Negative Pressure, Positively Simple.
NPseal is an ultra-portable negative pressure wound therapy dressing for closed incisions that does not require batteries and tubes.

INTRODUCING
The Next Generation NPseal
Redefining Patient Experience
Learn more at npseal.com

Exclusive Pricing For Aesthetic Society Members using promo code AS23

Promo applicable for first time customers. Limit on first order only.
Membership FAQs

What questions about The Aesthetic Society or membership do you have? What myths can we help dispel? If you have questions about anything related to our Society, simply email membership@theaestheticsociety.org and you’ll get an answer to your question!

How many sponsors will I need?
You will need at least two (2) sponsors. U.S. and Canadian applicants must have one sponsor that is in your geographical location while the other can be any Aesthetic Society Active/Life Member that knows you well. Each sponsor will need to complete the sponsorship form on your behalf. International applicants must have one Aesthetic Society Active/International Active or Life Member sponsor, and the other must be a member in a national plastic surgery society acceptable to The Aesthetic Society, or from an ISAPS member in their country.

Who may sponsor me for membership?
Any Active or Life Member of The Aesthetic Society, who is not a family member, an associate and/or partner in the same practice may sponsor you for Active membership. Sponsorship forms are included within the application.

What are the deadlines for submitting a membership application?
The two deadlines are January 5 and July 1.

How long will it take for my application to be reviewed?
Applicants who submit materials for the July 1 deadline are eligible for election at the end of the year. Applications submitted by the January 5 deadline are eligible for election in the Spring.

What are the fees and when should they be paid?
There is a $250 Application Fee that must be paid along with your completed application. Once voted in, you will be required to pay your annual membership dues:
- Membership dues for Active Members are $1,275
- Membership dues for International Active Members are $545

For information on the full application process, visit the Medical Professionals section of theaestheticsociety.org/membership. For additional information/questions, please contact our Senior Membership Manager, Marissa Simpson via email membership@theaestheticsociety.org or at 562.799.2356.

Do I have to be a member of ASPS to be a member of the aesthetic society?
No. Membership in ASPS is NOT required to be an Aesthetic Society member.

Distinguish Your Practice With Aesthetic Society Products

Visit theaestheticsociety.org/shop to order!

- Membership Certificate
- Classic Walnut Membership Plaque
- Floating Metallic Membership Plaque
- Consultation Folders (Packs of 100)
- Procedure Brochures (Packs of 50)
  Abdomnoplasty, Breast Augmentation, Breast Lift, Breast Reduction, Eyelid Surgery, Facelift, Liposuction, Surgery of the Nose
ASERF Mission

Identify and pursue those issues relevant to advancing the safety & effectiveness of aesthetic medicine through independent unbiased, directed research and groundbreaking education.
Successful research demands the right combination of technology and support.

SETA is the only optimized software platform for aesthetic medicine research. The electronic data capture (EDC) software offers a fully configurable design portal meeting the exact needs of the study, trial, clinician, or end user. Clinical studies and trial deployment through the platform will be more time and cost-efficient when coupled with the HIPAA-compliant mobile applications that are available for both the study site and the patient.

Interested in learning more? Email contact@aserf.org

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The Aesthetic Surgery Education and Research Foundation

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MENTOR®

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Publication Assistance
Assists in publishing your manuscript in Aesthetic Surgery Journal.

21 CFR Part 11 Compliant
Ensures authenticity, integrity, and confidentiality of raw electronic data and the nonrepudiation of electronic signatures.

Data Collection
Captures required data points directly from research participants.

Participant/Site Recruitment
Identifies and recruits surgeon participants.

Learning Management System
Equipped with a study-specific multimedia training library that includes learning plans, manuals, and software.

HIPAA-Compliant
Provides HIPAA-compliant applications available for the study site and the patient.

21 CFR Part 11
Compliant
Ensures authenticity, integrity, and confidentiality of raw electronic data and the nonrepudiation of electronic signatures.
In my first three months as President of ASERF, my calendar has been packed with Zoom meetings, travel, more Zoom meetings, my full-time surgery practice of course, research, and more Zoom meetings. By nature, I love my hectic lifestyle with my family, a new Great Dane puppy, a busy practice, and consulting, so when one project is winding down, I start four more.

On a recent Membership Committee call, we discussed the breadth of research. The Foundation has supported, and we were reminded that when you support ASERF, you support the entire specialty. In the past few years some of the largest grants ever awarded by ASERF were directed toward studies involving BIA-ALCL and Systemic Symptoms Associated with Breast Implants (SSBI), several of which I have been honored to be the principal investigator and lead author along with Dr. Pat McGuire. Over the last 30 years however, ASERF has funded the few years some of the largest grants ever awarded by ASERF were directed toward studies involving BIA-ALCL and Systemic Symptoms Associated with Breast Implants (SSBI), several of which I have been honored to be the principal investigator and lead author along with Dr. Pat McGuire. Over the last 30 years however, ASERF has funded both small- and large-scale grants in all areas, leading to publications in ASJ and ASJOF. A short list of some of the most relevant papers and roundtables in recent years are mentioned below, all made possible with your dues and generous donations:

**ASJ OPEN FORUM**

- “Lip Lift Video Roundtable” — Foad Nahai, MD; Thomas O’Daniel, MD; Francisco Bravo, MD; and Chia Chi Kao, MD
- “Incorporating High-Resolution Ultrasound Into Your Practice” — Jeffrey Kenkel, MD; Christopher Surek, DO; Bradley Bengtson, MD; Steven Sigelove, MD; and Pat Pazmiño, MD
- “BBL Safety and Florida Legislature: What You Should Know, How You Can Help” — Jeffrey M. Kenkel, MD, FACS; Max Polo, MD; Pat Pazmiño, MD; and Onelio Garcia, Jr., MD

**AESTHETIC SURGERY JOURNAL**

- “Trends in Aesthetic Surgery Fellowship Training: An Analysis of Supply and Demand” — James Zins, MD; Isaac James, MD; Andrew Kocubia, MD; Jacob Grow, MD; Isabel Ho, MD; M. Bradley Calobrace, MD; and Kiya Movassaghi, MD
- “Evaluation of Breast Implant-Associated Anaplastic Large Cell Lymphoma With Whole Exome and Genome Sequencing” — Neha Akkad, MD; Rohan Kodgule, MD; Eric J Duncavage, MD; Neha Mehta-Shah, MD, MScI; David H Spencer, MD, PhD; Marcus Watkins, PhD; Cara Shirai, PhD; and Terence Myckatyn, MD, FACS, FRCSC
- “A Randomized, Placebo-Controlled Trial Evaluating the Single and Combined Efficacy of Radiofrequency and Hybrid Fractional Laser for Nonsurgical Aesthetic Genital Procedures in Post-Menopausal Women” — Christine Wamsley, BA; Mikaela Kiselvitz, MD, BSN, RN; Nicole R Vingan, BS; Sydney Oesch, MD; Karen Lu, MD; Jennifer Barillas, BS; John Hoopman, CMLSO; Yucel Akgul, MD, PhD; Deniz Basci, MD; Kimberly Kho, MD; Philippe E Zimmern, MD; and Jeffrey M Kenkel, MD, FACS
- “Longevity of Post-Explantation Systemic Symptom Improvement and Potential Etiologies: Findings From the ASERF Systemic Symptoms in Women—Biospecimen Analysis Study: Part 4” — Caroline Glicksman, MD, MSJ, FACS; Patricia McGuire, MD; Marshall Kadin, MD; Kirsten Barnes, PhD; Roger Wixtrom, PhD; Marisa Lawrence, MD; Melinda Haws, MD; Sarah Ferenz, BA; C. James Sung, MD, FCAP; Robert G Hamilton, PhD; and Kate Faasse, PhD

**RESEARCH COLLABORATION AND AESTHETIC ONE**

One of the top priorities of the leadership at The Foundation is collaboration with The Aesthetic Society to collect procedural data for research purposes. I am pleased to share that we have made significant strides over the past year. Just recently, Dr. Bill Adams, Society staff, and I connected with the director of MDEpiNet (the Medical Device Epidemiology Network), a global public-private partnership operating under a cooperative agreement with the FDA and the Center for Devices and Radiological Health. Their primary mission is to develop and test innovative methods, infrastructure, and partnerships to create reusable real-world data resources and facilitate device evaluation by multiple stakeholders. Our collaboration with MDEpiNet aims to establish a Memorandum of Understanding to explore some of our Aesthetic One registry data. The first initiative will review the real-world practices of aesthetic plastic surgeons use of Betadine in contact with several implants where its use still remains off-label. This review will utilize procedural data collected through our Aesthetic One app and will serve as a crucial step toward gaining recognition for the unique and valuable data that the platform provides.

We are excited about this opportunity to contribute to advancing knowledge in aesthetic surgery and enhancing patient care. The collective efforts of Aesthetic One, The Aesthetic Society, and MDEpiNet will undoubtedly pave the way for improved communication with the FDA, as well as improved safety, efficacy, and innovation in our field.

Caroline A. Glicksman, MD, MSJ is an aesthetic plastic surgeon practicing in Sea Girt, New Jersey, and serves as President of ASERF.
ASERF President’s Circle

These members have donated $50,000 or made a $100,000 planned gift to ASERF

- William P. Adams Jr., MD
- Sherrell J. Aston, MD
- Mark T. Boschert, MD
- M. Bradley Calobrace, MD
- Sepehr Egrari, MD
- Julius W. Few, MD
- Dr. and Mrs. Julio Luis Garcia
- Caroline A. Glicksman, MD, MSJ
- Dr. and Mrs. Joe Gryskiewicz
- Daniel A. Hatef, MD
- Dr. and Mrs. Jeffrey M. Kenkel
- Luis López Tallaj, MD
- Patricia A. McGuire, MD
- Dr. and Mrs. Daniel C. Mills II
- Susan and Steve Mollenkopf
- Dr. and Mrs. James Payne
- Dr. and Mrs. Luis M. Rios Jr.
- Dr. and Mrs. Robert Singer
- Douglas S. Steinbrech, MD
- Dr. and Mrs. Louis L. Strock
- Charles H. Thorne, MD
- Bruce W. Van Natta, MD

Will You Be Our Next President’s Circle Member?

Contact Tom Purcell, CAE
tom@aserf.org for more information.
Aesthetic Society News • Fall 2023

Are You a Member of ASERF?

ASERF has invested over $3.1MM over the last 30 years by providing grants to more than 150 studies. It has been able to achieve these successes through membership dues and donations, largely from members of The Aesthetic Society.

The findings from those studies are submitted to the Aesthetic Surgery Journal for publication, and to date 79 have been published.

While there is a direct correlation between ASERF’s work supporting The Aesthetic Society’s journal and its education endeavors, only 46% of Society members support ASERF through its annual $200 dues. To better understand why some Society members join ASERF and others don’t, the ASERF Membership Committee will be surveying membership to learn more about the issue this fall.

If a rising tide lifts all boats, is it a fair assumption that an increase in ASERF membership would benefit all plastic surgery, regardless of what studies it has funded or what your specific specialties are?

Thank you in advance for participating in the survey—your responses will help shape the future of the foundation.

ASERF Externship Program Expected to Double Participants

The ASERF Externship Program is expected to double the number of participants for FY 2024! The program’s success during the pilot phase has increased interest from industry which has enabled ASERF to secure additional funding for the coming year.

The Board of Directors gratefully acknowledges the following companies for their support: Galderma, Merz, Mentor, and Sientra.

The program, which matches a member of The Aesthetic Society as a mentor with a medical student without a home plastic surgery program, will announce the selected externs in early September. Those selected will participate in a 5-day observership at their mentor’s practice, participate in a research project, as well as expand their network while attending The Aesthetic Meeting 2024.

While the aim of the program is to expose underrepresented minority medical students to plastic surgery, the goal is to increase their chances of securing a plastic surgery residency.

“More and more minorities are interested in plastic surgery, however, many forego treatment as they are unable to find a doctor that understands their specific ethnic or cultural background. The Externship Program not only addresses the lack of diversity among potential surgeons and members, but also addresses a growing need. That is, ensure patients find a surgeon who, in short, looks like them,” noted Camille Cash, MD, Externship Program Task Force Chair.
Are you a **resident** or **fellow** looking for **funding** to attend The Aesthetic Meeting 2024?

Scan the QR Code to Learn More and Apply Today!

Application Portal Open: September 1–December 1, 2023
Apply for the ASERF Resident Travel Scholarship

APPLICATION PORTAL OPEN: SEPTEMBER 1–DECEMBER 1, 2023

ASERF Established the Resident Travel Scholarship to benefit residents and fellows by providing financial support for travel expenses associated with attending The Aesthetic Meeting. We will be awarding 25 grants, in the amount of $2,000 each to the residents and fellows selected. Scholarship funds must be used to offset the costs of travel, hotel, and other expenses associated with attending The Aesthetic Meeting 2024.

QUALIFYING CRITERIA

ASERF Resident Travel Scholarship applicants must meet the following criteria:

- Must be enrolled and in good standing in an approved plastic surgery training program in the US/Canada
- Submit a letter of recommendation from the resident’s or fellow’s program director
- Submit a Curriculum Vitae
- Must be enrolled in The Aesthetic Society’s Residents and Fellows Program—Enroll Now
- Submit an essay explaining the importance of attending The Aesthetic Meeting 2024
- Agree to attend the entire educational session during the meeting
- Agree to accept the scholarship funding after the annual meeting for which the scholarship was provided (to ensure attendance)
- Agree to write a short article about their most important learning experience during the meeting, which may be used in an issue of Aesthetic Society News

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Through their participation in Raise Cash For Research, evolus and Senté made generous donations of $2,500 each to ASERF.

Raise Cash for Research increases engagement and drives attendees to your exhibit booth during The Aesthetic Meeting all while making an impact on aesthetic surgery research. Thank you evolus and Senté for supporting ASERF and ultimately, the specialty!

Scan the QR Code on page 62 to Learn More and Apply Today!
The Aesthetic Surgery Education and Research Foundation (ASERF) is pleased to announce that the Mollenkopf Aesthetic Breast Reconstruction Fund, which aids breast cancer patients in completing their aesthetic breast reconstruction journey, continues to be available to patients nationwide.

Made possible through generous restricted donations by Susan & Steve Mollenkopf and matched by the Qualcomm Foundation.

Grants of up to $5,000
Assist underinsured or uninsured patients in completing a quality aesthetic breast reconstruction following breast cancer.

Ideal Candidates
Women who have had breast reconstruction with unacceptable results and who are deferring surgery due to financial issues.

Use of Funds
Ideally, doctors would donate their surgical skills and the grant money would help cover the patient’s operating room fees, anesthesia, deductibles and other related expenses.

The Aesthetic Society and ASERF member surgeons who have patients eligible for a Mollenkopf Fund grant, please view all details and download the grant request form at aserf.org/Mollenkopf.

For Additional Information on the Fund, Please Contact Ivan Rodriguez at: 562.799.2356 or ivan@theaestheticsociety.org
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What is the Aesthetic Research Community?
- A network of Aesthetic Surgeons willing to share ideas and collaborate on research
- A source for aesthetic surgery research guidance

Who may participate?
- Aesthetic Society and ASERF Members, Associate Members, and Residents & Fellows Program Members

How do I join?
- Log in to AestheticConnect
- Join the Aesthetic Research Community
- Start a discussion thread or comment on existing threads

Questions?
Email contact@aserf.org today!

ASERF.ORG
Practical advice you can put to use today to help your practice run more efficiently.
What can a ‘Virtual Assistant’ do for your practice?
By Wendy Lewis

Back to the Basics of Digital Marketing
By Keith C Humes, CEO Rosemont Media, llc

Key Factors to Consider when Launching a Medical Spa to Expand your Plastic Surgery Practice
By Terri Ross, Terri Ross Consulting

Are You Using the Proper Smart Bidding Strategies in Google Ads to Maximize Your ROI?
By Peter Houtz, Vice President of Sales at Plastic Surgery Studios

Put it in Writing—Crafting Patient Correspondence
Do you know what’s going out on your letterhead?
By Karen Zupko

Using A.I. to Grow Your Practice
By Catherine Maley, MBA

By David Mandell, JD, MBA and Michael Lewellen, CFP®

Understanding a Glossary of Insurance Terms
By Harry K. Moon, MD, FACS

The Straight & Narrow—
By Joe Gryskiewicz, MD

Put it in Writing—Crafting Patient Correspondence
Do you know what’s going out on your letterhead?
By Karen Zupko

Understanding a Glossary of Insurance Terms
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According to Research and Markets, “The Global Healthcare Chatbot Market is expected to grow at a CAGR of 21.56% from 2021–2027 to reach US $967.7 million by 2027.” 1

Chatbots—also called Virtual Assistants—are now routinely used for all forms of customer service functions for almost any kind of business or entity. I consider these to be an essential asset to update your practice to modern standards.

As consumers grow accustomed to using this model of communications, chatbots are getting much more sophisticated, user-friendly, affordable, customizable, and they are available at all price points. Most of us now prefer to communicate through text or email rather than phone. No one wants to get stuck on hold waiting for someone to help them, especially when calling a high-end plastic surgeon’s office.

Virtual assistants are now readily deployed as messengers on websites to answer questions and FAQs. They can be programmed to book a flight, get a hotel room, schedule any kind of reservation from dinner to a hair appointment, without the user calling or waiting on hold to get a representative.

In fact, according to the The Medical Futurist, “Over the past years, smart algorithm-powered, text- or voice-based interfaces have multiplied, and they are also taking their place in healthcare.”... “The general idea is that in the future, these talking or texting smart algorithms might become the first contact point for primary care.”

They can operate on almost any digital platform, including messaging apps, social channels, texting, website queries, plus more customized and complex tasks. For example, adding a ‘Go Live’ or ‘Speak to us’ button on your site, that is programmed to respond to a range of the most common queries, can make the difference between keeping a potential patient engaged on your site for longer, or getting distracted and moving on to a competitor’s site.

Common queries to program your bot:
- Do you offer (fill in the blank) treatment?
- What skincare do you feature?
- When is the next appointment available?
- Can I have laser hair removal in your practice?
- I want to reschedule, cancel or book an appointment.
- Do you take insurance and which ones?

One caveat that can defeat a chatbot application for patients is not having it operate swiftly 24/7, or it getting overloaded keeping users waiting. For example, I used the chatbot on my building management company’s site to reset my password. I received a response from their chatbot instantly, “Paige is here to help!” However, 15 minutes later, Paige had never turned up, so I gave up and aborted the mission. This epic fail can be a stumbling block for aesthetic patients who are not too happy to wait to see their plastic surgeon, let alone a robot.

In the era of AI, it makes sense to take advantage of all relevant digital tools to upgrade your practice systems and increase efficiency. Considering the widespread adoption of chatbots in all or most aspects of medicine, patients are now more conditioned to use these tools whenever needed in many aspects of their lives.

Staying on top of patient demands as well as emerging technologies for your practice is a critical success factor. Continuous advances in these communication tools, along with the swift adoption of AI, underscore that adding a chatbot for your practice is a worthwhile expense.

Wendy Lewis is the Founder & President of Wendy Lewis & Co Ltd Global Aesthetics Consultancy since 1997, a marketing communications boutique in New York City specializing in beauty, wellness and aesthetics. Their clients include skincare, medical devices, start-ups, aesthetic practices and medspas. An award-winning writer, she serves on the Editorial Board of “Prime International Anti-Ageing Journal,” and regularly contributes to “Aesthetic Society News,” “Practical Dermatology,” “Modern Aesthetics,” and many other publications. Wendy is a frequent speaker, course instructor, and presenter at conferences and webinars in the US and globally. She is the founder of the LinkedIn group, Global Aesthetics Professionals, with over 5,000 members. Her first textbook, Aesthetic Clinic Marketing in the Digital Age (Taylor & Francis) will launch a second edition in 2023.

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Email marketing is still one of the most cost effective and underutilized ways to market your practice.

WHEN IS THE BEST TIME TO SEND EMAIL BLASTS?

Many of us are bombarded by numerous emails every day, and the fuller our inbox gets, the less likely we are to read messages in their entirety—let alone open certain emails at all. This is why, when it comes to planning your own email marketing campaigns, timing is one of the most important elements to consider. You can put the greatest minds and resources into creating email blasts, but without the right timing, your message may not reach people at all.

While the success of your medical or dental practice’s email blast is greatly influenced by a number of factors, make sure you’re optimizing the scheduled “send” time by paying attention to the time of day and day of the week. After all, for your message to have the greatest impact, it first needs to be seen. So when is the best time and day to get people to open eblasts?

BEST TIME OF DAY TO SEND EMAILS

Research data reveals that the longer an email sits unopened in a person’s inbox, the less likely it is to ever be read. The key is to define your target audience and identify times of the day during which they will be more likely to check their email (i.e., mornings, afternoons, evenings, etc.).

Although there is no clear-cut time for ensuring the best open rate, sending emails before or after lunch can often be an excellent option. Around this time of the day, most people have had time to sift through their morning mail and don’t feel as overwhelmed with an overflowing inbox.

BEST DAY OF THE WEEK TO SEND EMAILS

Studies show that the majority of emails are sent Monday through Friday, with Tuesdays and Thursdays generating the most traffic. We have found that Mondays should typically be avoided due to the hectic nature of the first day of the week. Depending on the time of day, Fridays may also be less than ideal since people tend to “check out” early for the weekend.

As a result, Tuesdays, Wednesdays, and Thursdays are often the best options. If your practice is open on the weekends, Saturday may also be an excellent choice as there will generally be less competition with patients’ work emails.

HOW FAR AHEAD OF AN EVENT SHOULD I SEND OUT AN EMAIL BLAST?

Since many email blasts are crafted as announcements about timely events (such as new specials being offered soon or an open house at the practice), it’s important to give the viewer enough time to plan. It is also important that you don’t send them out so early that they may be easier to forget as time passes. It typically depends on the type of event (or the availability/longevity of a particular special), but a minimum of three to five days beforehand is often advised. If the event is a particularly large one with a lot of planning involved, it might be good to send out more than one email blast spaced over time—the first about three or more months prior, and a reminder email blast closer to the date of the event.

NEED OUR HELP?

In the end, the best time and day to send email blasts will depend on your specific marketing campaign and industry. If you want a glimpse inside how to set your eblasts up for success, check out our email marketing checklist, which includes timing among several other important factors worth considering.

Want to make sure your email blasts have the highest potential for reach? Rosemont Media is highly experienced in generating and maintaining successful email marketing campaigns for medical and dental practices. For more individualized answers to your questions, or to let us help you with your email marketing needs, please feel free to contact us today so we can better customize a strategy based on the unique goals of your practice.

Keith Humes is Founder/CEO of Rosemont Media, LLC, a San Diego-based digital marketing agency. As the founding Aesthetic Society Alliance Partner, the firm has helped numerous members successfully navigate the rapidly evolving digital marketing landscape with innovative and effective SEO strategies, social media optimization, and customized website development.

Since many email blasts are crafted as announcements about timely events (such as new specials being offered soon or an open house at the practice), it’s important to give the viewer enough time to plan.
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OXFORD UNIVERSITY PRESS
Med Spas are the fastest growing segment of the global cosmetic surgery market. Many plastic surgery practices are deciding to either: 1) expand their offerings to include non-surgical services; or 2) open a stand-alone Med Spa to help their patients obtain optimal results, increase the life-time value of their patients, and boost their revenue.

It's easy to get lured in and want to hop on the Med Spa bandwagon but you need a strategic plan in place. Here are some key factors to consider:

**MARKET CHARACTERISTICS**

The status, pace, and growth of your niche market is the most critical factor that will directly impact the success and profitability of your Med Spa. Take a pulse of what's happening in your area and research your market to determine how many offices are currently in operation; how many have opened in the past five years; are they expanding; what treatments and services do they offer; and how many other practices have successfully incorporated Med Spas in the area. This research may take some time and effort, but it will be worth it in the long run.

**POPULATION STATISTICS/IDEAL CLIENT AVATAR**

Before launching a stand-alone Med Spa or expanding your services, you'll want to carefully define your target patient population, considering factors such as where they live, where they shop, what restaurants they frequent, types of aesthetic services they are seeking, etc. Researching, identifying, and characterizing your target population will further help you define your niche market. If you can identify a need in your target patient population that hasn’t been met by the current market, you’ve accomplished an important part of launching a new Med Spa and offering non-surgical services.

**COMPETITION**

Identifying and understanding your competitors is a critical factor that will directly impact the success and profitability of your business. Consider what types of services and treatments they offer, what niche they specifically focus on, how long have they been open, how fast they are growing, how many providers and support staff they have, etc. I recommend identifying three to five of the most successful offices in your area to secret shop their practice. Call the practice, view their website, look at their social presence, and even visit the competition.

**LOCATION**

Once you’ve identified your niche market and target patient population, you’ll want to make sure that the region you’re considering can support your vision. The area where you choose to launch is critical. It will affect your ability to staff, manage, and grow your business, so be sure to consider the local demographics. Another big decision is to use your existing facility or build/lease a new one. You will need to complete a market feasibility study and competitive analysis either way.

**TRAINING YOUR TEAM**

Your staff’s ability to listen, engage and communicate with your patients is among the most critical aspects that will shape the success of your office. This begins with hiring the right people and training them well to be able to convert calls or web leads to consultations and then consultations into booked services.

**PERSONAL DRIVE/MINDSET**

Your personal drive and mindset are key elements that will impact the launch/expansion and success of your Med Spa. If you want to have a high-performance practice, you must roll up your sleeves, and be relentless in putting in the time and work to master the legal, compliance, business fundamentals, and best hiring and training practices to create a culture of accountability with intention to provide a high level of customer service.

If you would like to learn more about our Start Up Medical Aesthetics Course or how APX, a practice optimization platform, can help you as you consider expanding please visit www.apxplatform.com.

Terri Ross, an official partner and trainer for AmSpa, offers distinct programs to help you launch or grow your medical aesthetic or plastic surgery practice. She and her team bring a combined 30 years of experience achieving over 600% growth with clients in the most competitive markets in the world, in addition to launching over 40 new medical practices across the country.

I recommend identifying three to five of the most successful offices in your area to secret shop their practice. Call the practice, view their website, look at their social presence, and even visit the competition.
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Are You Using the Proper Smart Bidding Strategies in Google Ads to Maximize Your ROI?
By Peter Houtz, Vice President of Sales at Plastic Surgery Studios

As a plastic surgeon, PPC advertising can create brand awareness and bring more patients to your practice. If you have been using this advertising method, you may have heard about Google Ads Smart Bidding. But are you using Google Ads Smart Bidding strategies, and are you using them properly?

Here is everything you need to know about Google Ads Smart Bidding strategies and how to use them to achieve your business goals.

WHAT IS GOOGLE ADS SMART BIDDING?
Google Ads Smart Bidding can be understood as a collection of automated bidding strategies that rely on advanced machine learning to boost conversions and conversion value. These strategies use algorithms to optimize results and free up the time a person needs to manage a PPC advertising campaign. The configurations of automatic bids are done according to the set performance targets. Using several indicators, the algorithms then assess the likelihood of conversion and choose the bids with the highest chance of generating a new conversion.

HOW TO CHOOSE THE BEST GOOGLE ADS SMART BIDDING STRATEGY BASED ON YOUR GOAL
If you are looking for the best Smart Bidding strategy for your plastic surgery practice, you will have multiple options. The strategies include:
• Maximize Conversions
• Enhanced Cost Per Click (ECPC)
• Maximize Conversion Value
• Target Return on Ad Spend (Target ROAS)
• Target Cost Per Action (Target CPA)

Each Smart Bidding strategy has unique pros and cons, so here’s a guide on matching your business goal with the right Smart Bidding strategy.

INCREASE SALES OR LEADS
If your goal is to get more leads and sales, then you should go for a Smart Bidding strategy that can help you get as many conversions as possible with a fixed ROI or a fixed budget. Examples include Maximize Conversions and Target CPA. Maximize Conversions is a Smart Bidding strategy that seeks to help your campaign get the most conversions on a particular budget. On the other hand, Target CPA sets the maximum amount you are willing to spend on conversions. If your target CPA is set too high, you may overspend. But if it is too low, your conversions might suffer. All in all, you can choose the Maximize Conversions Strategy with or without Target CPA.

INCREASE PROFITS
If your business goal is to increase your profits, you should use a Smart Bidding strategy that gets you as many high-value conversions as possible at a fixed return on ad spend (ROAS) or a fixed budget. Examples include Maximize Conversion Value and Target ROAS.

You can use the strategy with or without a target ROAS, but using Target ROAS will guide the campaign.

PROS AND CONS OF SMART BIDDING
Google Ad Smart Bidding is beneficial in several ways:
• It optimizes your bid, allowing you to spend your advertising budget in the most efficient way possible.
• It saves you time, allowing you to focus on more important aspects of running your business.

HOWEVER, SMART BIDDING IS ALSO ASSOCIATED WITH SOME SHORTCOMINGS
• You have to relinquish your bidding control to machine learning.
• It lacks transparency since not all information that affects the performance of your campaign will be available to you as the advertiser.

THE BOTTOM LINE
Smart Bidding can go a long way in helping you get the most from your Google Ad campaigns. If you are still determining which strategy is best for your business, consult a professional PPC management agency to help you make the right decision.

Peter Houtz is the Vice President of Sales for Plastic Surgery Studios, a full-service marketing agency serving the aesthetics industry since 1998. Peter is a frequent presenter at The Aesthetic Meeting and can be reached by phone at (909) 758-8320 or by email at peter.houtz@plasticsurgerystudios.com.
Viality™ is the only fat transfer system with AuraClens™, a proprietary cleansing mechanism (lipoaspirate wash) to better retain viable fat, leading to more predictable results, and the ability to process 50–1,050 mL of lipoaspirate.²

**REFERENCES**


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MDC-0884 R1
Patients form impressions both consciously and subconsciously. Every touchpoint is an opportunity to impress—or not. At KZA it has come to our attention that patient correspondence is solely in need of polishing. It is part of a patient’s experience and reflects your brand. Here are four things to consider if you care to give your communications an upgrade.

TAKE INVENTORY

What type of letter “library” does your practice have? It is important to identify when and how you are communicating with patients. Reviewing what is being said may cause a brow lift when you see the inaccuracies. “Doctor has been doing surgery for 10 years...” (you just celebrated 20). Or, “Doctor is proudly affiliated with Saint Hospital...” (this partnership ended years ago). Aside from errors, are you taking every opportunity to stay in touch with patients along their journey? Pre-and post-consult, pre-and post-surgery? You should. Is it text, email, or a formal attachment? During your review, check to see if they are receiving good information in a tasteful presentation. Texts are fine for parking and directions. Not so good reviewing my consultation for mommy surgery. “Hi there...” is not the best salutation for a patient seeking a facelift.

DITCH THE FORM LETTER

There is no excuse for a form letter in an aesthetic practice. Cosmetic surgery is a highly personal and emotional decision. For that reason alone, communication needs to reflect the patient’s specific desires and your particular, unique expertise to accommodate them. A pre-consult letter should tell them what to expect and identify your points of differentiation. A post-consult letter should tell them why they are a good candidate and how much you want them as a patient. This does not mean every letter is from scratch. Letters can be 80% template and 20% custom with the custom part in a boiler plate by procedure that your PCC can cut and paste.

ACKNOWLEDGE REFERRALS

Gratitude is timeless. It is also a lost art. If you are not sending thank-you notes to patients who refer their friends, start now. These can be a quick note on email. Ditto on physician referrals. These should come from you, not the office manager or PCC. If several referrals that have resulted in surgery are from one particular individual or physician, get out your letterhead and hand write a thank you, it will be remembered.

SHAKESPEARE DOESN’T WORK HERE

Let your office manager and PCC off the hook. The vast majority of people are not great writers. Unfortunately, this does not mean people are self-objective. The risk of doing your letters in house is they will ramble. The tone and style will not match your brand. Your uniqueness will be lost. There will be typos. Because of the specialty you are in, patients will judge you on clarity and precision.

Once you take inventory, find a professional to review your current correspondence. There are marketing communication specialists that provide this service. KZA can help connect you. You need to be confident that what you put in writing reflects the same attention to detail you demonstrate in surgery.

Karen Zupko is a regular contributor to ASN who participates in the annual meeting regularly. Her firm KZA offers training for PCCs and other staff, as well as operational consultations.
Are you still faxing implant registrations?

The Aesthetic One app is a quick and easy registration option that instantly sends details to the manufacturer and patient. Previous registries are time-consuming, hard to access, and fail to empower patients with details of their implants and surgical procedure.

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2. Scan Implant QR Codes
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3. Register with Manufacturer
   After completing the scan and op summary, tap "Register" to instantly share data with the manufacturer and patient.

Supported by Allergan Aesthetics, an AbbVie company
This podcast was created 4 years ago to be a resource to help surgeons understand the business and marketing side of plastic surgery.

The objective is to help you stay nimble, adaptable and competitive in quickly changing times.

Enjoy!

Catherine Maley, MBA
Using A.I. to Grow Your Practice
By Catherine Maley, MBA

Artificial Intelligence (A.I.) is going mainstream FAST, so you want to know about it since it’s going to affect you (and everyone else) moving forward.

In a nutshell, A.I. develops algorithms that allow machines to analyze and interpret data, identify patterns, learn from experience, and make informed decisions.

So how would you use A.I. to grow your cosmetic practice to stay ahead of the competition?

Here are strategies to consider:

PERSONALIZED PATIENT EXPERIENCES
A.I. can analyze your patient data regarding their communication preferences, needs, concerns and treatment plans, so you can personalize the patient experience. For example, the chatbot on your website can automatically triage prospective patients by learning their location, procedure interested in, financial wherewithal and timing of when they want surgery. It can educate the would-be patient on the procedure FAQs, produce a quote and schedule the consultation, send automated reminders, and provide personalized post-operative care instructions... without your staff’s involvement.

ADVANCED PHOTO IMAGING AND SIMULATION
Before/After photos and simulations give patients a clearer understanding of the expected results. However, A.I. makes it easier to manipulate and enhance images, raising concerns about the authenticity of the results shown and can lead to image manipulation, unrealistic expectations, misleading or exaggerated images so that is a big concern in our industry.

A.I. can have a significant impact on the legitimacy and accuracy of plastic surgery before/after photos so I highly recommend you get all of your REAL photos and videos with your watermark, uploaded to your website, social media platforms, blog posts, etc. so you can prove their authentication by the posted dates.

MARKETING AND LEAD GENERATION
A.I. can also enhance your digital marketing efforts. By analyzing patient behavior, preferences, and demographics, A.I. algorithms can identify the most effective marketing channels, target specific patient segments, and optimize your ad campaigns.

A.I. can also produce content for you in the way of SEO content, blog posts, books, guides and social media posts to use as marketing tools.

By the way, I used A.I. to write this article. On the one hand, it was helpful to give me copy ideas. And on the other hand, it doesn’t talk the way I talk... yet. However, the more you use A.I., the more it emulates your tone and style.

TEST A.I. FOR YOURSELF FOR FREE. HERE’S HOW:
• Sign up with your email and phone number (or use current google or Microsoft account)
• Send a message such as, “How can I get more cosmetic patients?”
• Watch the magic happen right before your eyes!

CONCLUSION
A.I. can be your virtual assistant working 24/7, 7 days a week without taking a break or having to leave the office early. Think of all the tasks you and your staff currently waste time doing that AI can do for you. This presents numerous opportunities for growth, so it would behoove you to get comfortable with this game-changing technology.

Since Year 2000, Catherine Maley, MBA has been a cosmetic practice growth business and marketing consultant, author, international speaker, trainer, blogger and podcaster.

Catherine and her team specialize in growing plastic surgery practices using creative patient attraction, conversion, follow up and retention strategies as well as staff training to turn team members into converting rock stars. Visit Catherine at www.CatherineMaley.com or Instagram @catherinemaleymba.
**Sculptra helps stimulate natural collagen production, reduce wrinkles and improve skin quality, when injected into the cheeks.**¹⁻³ Results can last up to 2 years.⁴

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**Indication:** Sculptra® (injectable poly-L-lactic acid (PILLA-SCA)) is indicated for use in people with healthy immune systems for the correction of shallow to deep nasolabial fold contour deficiencies, fine lines and wrinkles in the cheek region, and other facial wrinkles. Sculptra® should not be used by people that are allergic to any ingredient of the product or have a history of keloid formation or hypertrophic scarring. Safety has not been established in patients who are pregnant, lactating, breastfeeding, or under 18 years of age. Sculptra® should not be used by people that are allergic to any ingredient of the product or have a history of keloid formation or hypertrophic scarring. Safety has not been established in patients who are pregnant, lactating, breastfeeding, or under 18 years of age.

Sculptra® has unique injection requirements and should only be used by a trained healthcare practitioner. Contour deficiencies should not be overcorrected because they are expected to gradually improve after treatment. Sculptra® should not be injected into the blood vessels as it may cause vascular occlusion, infarction or embolic phenomena. Use at the site of skin sores, cysts, pimples, rashes, hives or infection should be postponed until healing is complete. Sculptra® should not be injected into the red area (vermillion) of the lip or in the peri-orbital area. The most common side effects after initial treatment include injection site swelling, tenderness, redness, pain, bruising, bleeding, itching and lumps. Other side effects may include small lumps under the skin that are sometimes noticeable when pressing on the treated area. Larger lumps, some with delayed onset with or without inflammation or skin discoloration, have also been reported.

Sculptra® is available only through a licensed practitioner. Complete Instructions for Use are available at www.SculptraUSA.com/IFU.

**REFERENCES:**


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Although physicians are among the highest-paid professionals in the U.S., unique expenses like career-related insurance and medical school debt payments can dampen a physician’s income, in addition to taxes. A well-designed and properly executed financial plan can help doctors face these unique challenges more effectively.

WHAT IS FINANCIAL PLANNING?

Financial planning is the practice of identifying your wealth planning goals and setting a plan for how to achieve them. Professionals analyze your income, expenses, assets, liabilities, and potential risks to create a sound financial plan.

Although anyone can benefit from financial planning, being a physician makes financial planning all the more crucial. Financial planning lets you manage the money and potential risks associated with your profession by creating a roadmap for your financial goals in the shorter term (becoming financially stable), medium term (reducing taxes, building a nest egg) and longer term (reaching a comfortable retirement on your terms).

WHY DO PHYSICIANS NEED FINANCIAL PLANNING?

Incurrded debt

Although medical school and residency can be an exciting time, loans can pile up during these career stages and leave you with many expenses to settle before starting your practice.

While repaying these debts can be daunting, solid financial planning can prevent them from becoming insurmountable. In addition, working with a professional can help you determine when to use extra income to pay down debt sooner, invest, or purchase a new home: all common concerns of younger physicians.

Career-related expenses

Besides student loans, many career-related expenses can add up quickly and cause cash flow problems. This is especially true for physicians who own their own practices, where expenses like insurance payouts, medical equipment and supplies, and staff salaries can dwindle your finances. Financial planning becomes essential to ensure you can continue practicing and maintain a smooth cash flow.

Income and tax management

Because their compensation puts them in higher tax brackets, tax reduction is typically a top financial goal of most doctors. Financial planners can advise physicians on strategies to maximize tax-deferred retirement contributions, leverage deductions, strategically monitor income and expenses, and ultimately keep more of their hard-earned income.

Asset protection

The unique professional risks physicians face can often jeopardize personal assets. For example, medical malpractice lawsuits can exceed typical insurance protection. A comprehensive financial plan should include risk assessment and protection strategies to shield your assets from potential legal claims and other threats.

Retirement planning

In addition to professional risks, physicians have unique retirement needs. Despite their high earning potential, doctors may start their saving for retirement relatively late, requiring them to save more aggressively than other professionals to ensure a comfortable retirement free from worries about insufficient funds.

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Setting Your Finances on the Right Path

Your career as a physician means you face unique debt, expenses, and risks that can significantly reduce your hard-earned income without proper money and asset management. Protecting your hard-earned money and other assets with a sound financial plan allows you to better focus on your work, knowing your wealth and financial future are in order. View the complete Guide to Financial Planning for Physicians to learn more.

SPECIAL OFFERS: To receive free print copies or ebook downloads of “Wealth Planning for the Modern Physician” or “Wealth Management Made Simple,” text ASAPS to 844-418-1212, or visit www.ojmbookstore.com and enter promotional code ASAPS at checkout.

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Understanding a Glossary of Insurance Terms

By Harry K. Moon, MD, FACS

The complexity and expense of managing an aesthetic surgery practice is ever increasing. What we once referred to as medical malpractice insurance has today become medical liability insurance. Clearly the courts today look increasingly at the degree of one’s liability in caring for a patient as opposed to what was classically “malpractice.”

The glossary of terms in liability insurance forms and their definitions are important for us to understand as we decide the scope and extent of our medical liability coverage.

What follows is the first in a series of short articles by Preferred Aesthetics to help you understand what can be a confusing and unfamiliar glossary of insurance terms.

- **Malpractice**—professional negligence
- **Risk retention group (RRG)**—A group of similarly situated persons or entities that are permitted under federal law to organize across state lines for the purpose of pooling their liability risk and self-insuring.
- **Commercial carriers**—For profit insurance companies, also known as traditional or traditional-line insurers. Commercial carriers are regulated by state laws and must qualify financially to do business in a state.
- **Claims made insurance policy**—An insurance policy that provides coverage for claims arising from incidents that both occur and are reported to the insurance company while the policy is in force.
- **Occurrence Policy**—A type of professional liability insurance policy in which the policy holder is covered for any incident that occurs during the term of the policy, regardless of when a claim arising from the incident is made.
- **Limits of Liability**—The maximum amount an insurer will pay out under the terms of a policy. Professional liability policies typically specify both a per-occurrence limit and an aggregate limit for all claims incurred during the term of the contract. Example: $1 million (per occurrence)/$3 million (aggregate.)
- **Endorsement**—An addition to an insurance policy that changes the original policy in some manner
- **Exclusion**—a component of the insurance policy that sets forth the circumstances under which the physician will not be covered.

Reference:

For more information, please visit our website at www.amsrrg.com/solutions/preferred-programs where you can click on the “Request A Quote” link or please contact Christopher Edge at newsubmission@amsrrg.com.

Christopher Edge is Vice President of Preferred Programs and New Business Development at AMS Management Group.
**Question**

I'm a plastic surgeon just starting out in practice. A local physician assistant came to me and told me that if I allow him to work in my office, he will generate a lot of cosmetic referrals to me. All I have to do is supervise him as he administers Botox® and fillers. What do you think?

**Answer**

I think you don't have to catch every ball that's thrown to you. Please see my previous article in the Summer 23 issue of ASN in regards to medical spas, which touches on this scenario. While no plastic surgeon wants to turn away referrals, especially in difficult economic times, the fact is, these arrangements tend to generate few aesthetic referrals, and you’ll end up with a new competitor when the P.A. moves next door—after you’re done teaching him everything you know.

**Question**

I wonder if I might be unintentionally violating The Aesthetic Society Code of Ethics if I have an ad with a single photo on it (not a pre- and post-op) for skin care. Does the requirement to include the word “model” with a photo apply if it is the only image being used? Do the same rules apply for a medical spa that is medically directed (but not a doctor’s office)? I was also rated “Top Doc” in one of my local magazines, but don’t mention that either.

**Answer**

With or without a logo, if you are advertising as a member of The Aesthetic Society with a non-patient photo (i.e. a model), you must add a disclaimer noting that it’s a model if the photograph suggests that the model received your services.

As for your “Top Doc” honors, I would use it! You cannot claim to be “The Top Doctor,” but you can say you were named “One of the Top Doctors” or “A Top Doctor.” Just be sure to qualify the heading either directly or with an asterisk on your advertising materials to note the magazine.

The columnist, Joe Gryskiewicz, MD, FACS of Minneapolis, Minnesota, currently has over 35 years in practice and has written ethics columns for over a decade. He is past president of ASERF, and The Rhinoplasty Society, a Trustee of ASERF and sits on The Judicial Council for ASAPS. He is an adjunct professor at the University of Minnesota School of Dentistry Craniofacial Cleft Palate Clinics. Readers are encouraged to submit questions directly to “Dr. Joe” at drjoe@tcplasticsurgery.com. Names will be withheld, and the views expressed in this column are those of the author.
Putting Patient Safety First Benefits Everyone

The Aesthetic Society’s Patient Safety Committee would like to remind you that an increased focus on patient safety leads to enhanced surgical performance and efficiency which ultimately impact your bottom line.
Eye safety of the plastic surgery patient including prevention and management of ocular complications is a critical component of perioperative care that applies in both periorbital and non-facial procedures. Multiple factors, including patient-specific anatomy and physiology, procedure type and duration, and intra-operative patient positioning, among others, place our patients at risk for eye injuries that include exposure keratopathy, corneal abrasion, conjunctivitis, chemical burns, and blurry vision to more significant, yet rare, direct globe trauma that can impart permanent visual changes and even blindness. Plastic surgeons and plastic surgery trainees should ensure appropriate preventative measures are taken at all phases of patient care to prevent eye injury. Further, they should understand the signs and symptoms associated with these injuries to provide prompt treatment to enhance patient comfort and prevent permanent untoward sequelae.

Fortunately, eye injuries are uncommon in nonocular surgery and the large studies to date have demonstrated an overall incidence of 0.023-0.056%.1–2 Corneal abrasion is the most common injury with an incidence of 0.013%1 and 0.034%2 in these studies. Exposure keratopathy due to prolonged globe surface contact with the outside environment, while not an external injury per se, also leads to unnecessary morbidity. Surgical patients under general anesthesia are at an elevated risk of eye injury, especially corneal abrasion, for multiple reasons. First, autonomic reflexes including the corneal reflex (blinking following sensory stimulus contact with free nerve ending or mechanoreceptor within corneal epithelium), reflex tearing, and Bell phenomenon are suppressed. Lagophthalmos as well as decreased tear production and tear stability also occur, resulting in a dry, exposed corneal surface susceptible to insult, as well as exposure keratopathy.

Several factors have been shown to place patients at higher risk for eye injury. Older age, likely due to decreased physiologic tear production, and anatomic variations including proptosis and exophthalmos that can predispose patients to lagophthalmos put patients at higher risk of abrasion. Further risk factors include surgeries lasting >60–90 minutes, patient positioning (prone, lateral, or Trendelenburg), head and neck surgery, and pre-operative known ocular surface anomalies, such as dry eye.1–3 History of prior blepharoplasty may also place patients at increased risk. Lastly, pre-operative anemia and intra-operative hypotension that lead to corneal ischemia and subsequent edema make injury more likely.4 More recently, laser treatment for facial rejuvenation places patients at risk for ocular injury and special precautions are needed.

Injury to the eye can occur at any point in care of the surgical patient—from the induction of anesthesia to post-operative recovery. All members of the surgical team including surgeons, anesthesia providers, and operating room and recovery nurses should be educated on appropriate patient eye safety measures.3 At the time of anesthesia induction, the laryngoscope, oxygen face mask, or dangling personal items such as name badges or stethoscopes may accidentally contact the periorbital region. During preparation of the surgical site, pooling of specific solutions, such as chlorhexidine gluconate, around the eyes can lead to chemical burns and corneal injury. Draping procedures, especially for head and neck cases,
also place the eyes at risk. Throughout the case, surgical instruments and electrocautery devices can cause direct physical or thermal trauma to the eye and inadvertent pressure on the face/globes by assistants can also occur. Eye shields and corneal protectors must be placed cautiously to avoid the very injury they seek to prevent. Somnolent and confused patients awakening from anesthesia may scratch at their faces, and close monitoring with patient redirection and reorientation are necessary.

Patients undergoing laser treatment are vulnerable to eye damage from laser beams, and injury can occur from both direct and reflected laser light. Fortunately, eye injury prevention for patients and surgeons alike is completely preventable with appropriate protective measures. The American National Standards Institute (ANSI) provides guidelines for the safe use of lasers and specifies the required optical density of protective eyewear, which must be laser wavelength specific. For laser treatments of the face and periorbital regions, eye shields may be used in place of glasses or goggles.4

Despite these risk factors and known sources of possible injury, several preventative measures have been employed. Immediately following anesthesia induction, the eyelids should be secured in a closed position.

Methods for when the periorbital area is not “prepped-in” range from simple taping to placement of bio-occlusive dressings such as Tegaderm to more robust eye shields/guards, among other proprietary lid coverage options. The advantage of choices that create a water-tight seal is that they prevent evaporation of tear components in addition to providing a physical barrier to trauma, chemical, and thermal damage.

Interestingly, lid taping in combination with lubricant use has shown no benefit compared to lid taping alone.5 Regardless of protection method, lid closure should be maintained until the patient is to be awakened from anesthesia.

The patient reporting post-operative eye pain and visual changes in the recovery area demands an immediate history and physical evaluation. Reported symptoms may include intense pain, foreign body sensation, blurry vision, epiphora, photophobia, and potentially vision loss. A focused physical examination including visual acuity, extra-ocular movements, eyelid function, and pupillary reflexes should be performed. The eyelids should be everted to permit evaluation for foreign bodies. Penetrating injury should be looked for and use of a slit lamp is preferred, if available.3 A fluorescein examination using a Wood’s lamp may be used to detect surface abnormalities consistent with a corneal abrasion, as indicated by fluorescent green pattern at the location of epithelial injury and may be used to distinguish this pathology from exposure keratopathy.

While some eye injuries such as corneal abrasion can be safely managed by the operative plastic surgeon, several findings suggest an ophthalmologist evaluation. Embedded foreign bodies, persistent visual abnormalities, an irregular, dilated, or fixed pupil, corneal ulceration, persistent pain that does not resolve after 24–48 hours, hyphema or hypopyon, and failure of a corneal abrasion to heal after 72 hours are several indications for ophthalmologist involvement.6 Treatment of identified ocular injury has shifted over the past two decades. Of course, more significant injuries should be managed by eye specialists. Patients should be counseled that short episodes of blurry vision can be normal immediately post-operatively, especially if ointments or other topical medications were used during surgery. For the more common injuries including corneal abrasion and exposure keratopathy, initial treatment includes discomfort and pain relief, prevention of infection, and symptom monitoring.

Patients with abrasion are most sensitive in the first 24 hours, so prompt diagnosis and initiation of pain management modalities can significantly improve patient comfort. While previous recommendations favored eye patching to prevent the eyes from drying and to decrease pain, it has been found that this actually prolongs healing time and does not improve pain.7 However, eye patches do have a role in eye protection in exposure keratopathy until symptoms improve. On the other hand, topical anesthetics were previously thought to delay corneal re-epithelialization and thus were contraindicated, but several laboratory and clinical studies have revealed they have an insignificant effect on corneal epithelium. They are highly effective in ocular pain relief but should only be used in the first 24h to permit monitoring of symptoms.3 Additionally, they can mask pain with prolonged use, potentially leading to delayed presentation and treatment of an atypical progression to ulceration or infection. Topical non-steroidal anti-inflammatory agents should only be reserved for patients allergic to topical anesthetics as they are weaker and costlier, and potential for corneal toxicity limits their use to only 1–2 days.

Prophylactic topical antibiotics and lubricants are also indicated for these patients.8 Antibiotics should be prescribed for 2–3 days in general and combination medications with steroids are not recommended due to their causative delay in wound healing. As contact lens wearers are often colonized with gram-negative bacteria, anti-pseudomonal...
SAFETY MATTERS

Your Patient’s Eye Safety

Continued from Page 89

coverage is recommended in this population. Preservative-free lubricating eye drops increase patient comfort during the healing process and enhance eye surface moisture.

In closing, ensuring eye safety of the plastic surgery patient in the peri-operative period is a team effort. Steps should be taken to prevent eye injury or insult from induction of anesthesia through post-operative recovery. Post-operative eye symptoms require swift evaluation and treatment should be initiated immediately if needed to decrease patient discomfort and prevent progression to ulceration, infection, and potentially visual loss. Surgeons should also have a low threshold to involve ophthalmology colleagues.

References

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