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- Award Season Round-Up

The Aesthetic Society®

The Aesthetic Meeting 2023

Miami Beach, FL
Miami Beach Convention Center

April 19–23, 2023
Exhibits: April 21–23
GalaFLEX LITE™

See Strength in LITE

GalaFLEX LITE, a lightweight, low-profile P4HB scaffold, designed for anatomical compliance, to provide predictable, restorative strength.

Flex Your Options

GalaFLEX LITE expands your selection of P4HB scaffolds, providing more options to better suit your clinical needs and techniques in plastic and reconstructive surgery.

• Developed from P4HB™, a naturally bioabsorbable polymer
• Results in tissue that is 2X stronger than native tissue\textsuperscript{1,2,3}
• Designed for anatomical compliance

Real Strength Starts From Within™

Indications for Use
GalaFLEX LITE scaffold is intended to reinforce soft tissue where weakness exists in patients undergoing plastic and reconstructive surgery, or for use in procedures involving soft tissue repair, such as the repair of fascial defects that require the addition of a reinforcing or bridging material to obtain the desired surgical result.

Important Safety Considerations
Possible complications include recurrence of the soft tissue defect, infection, seroma, pain, scaffold migration, wound dehiscence, adhesions, hematoma, inflammation and extrusion. The safety and product use of GalaFLEX scaffold for patients with hypersensitivities to the antibiotics kanamycin sulfate and tetracycline hydrochloride is unknown. GalaFLEX scaffolds have not been studied for use in breast reconstructive surgeries. The safety and effectiveness of GalaFLEX scaffold in neural tissue and in cardiovascular tissue has not been established. The safety and effectiveness of GalaFLEX scaffold in pediatric use has not been established.

For complete safety information, consult the GalaFLEX LITE Instructions for Use, which can be found at www.galateasurgical.com/ifu.

1. Preclinical data on file at Tepha Inc. Results may not correlate to clinical performance in humans.
3. Data on File at Tepha.

GalaFLEX Surgical, Inc., is now part of Becton Dickinson & Company, GalaFLEX Surgical © 2022, 500197 Rev D
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Send address changes and membership inquiries to:
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The Aesthetic Society
11262 Monarch Street, Garden Grove, CA 92841
Email: hello@theaestheticsociety.org

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Aesthetic Society News • Spring 2023
Respondents said they’re more likely to listen to their doctor over friends, family and influencers when selecting a product, treatment or procedure.

75%

The Winter 2023 edition shows that the desire for cosmetic improvement is as strong as ever, and discerning patients and consumers continue to place a heavy focus on aesthetics.
Dear Members,

Happy Spring! I hope you are enjoying the start of your 2023 New Year! With any new year I always think of ‘new beginnings’ with the coming of Spring, and in that respect, I’m reflecting on the pipeline and our own new members. Therefore, in this edition of ASN I chose to give an update on recruitment and membership initiatives!

EXTERNSHIP PROGRAM

We are actively developing programs to enhance exposure to younger residents and medical students in the pipeline. Our first ASERF-sponsored Externship “match” took place through our new mentorship program for medical students with a serious interest in plastic surgery, yet with no plastic surgery division or department at their home institution. ASERF’s Externship Program is designed to expose medical students to aesthetic plastic surgery through mentorship over the course of 12 months. Each extern receives $3,000 in financial assistance for the year. Mentors are requested to do the following: agree to mentor a medical student for 1 year, 2 hours each month for 1:1 conversation with an assigned mentee, 5-day observership in your practice/office, include the ASERF Extern in some aspect of a research project, and meet your student at The Aesthetic Meeting. For those of you already serving as a mentor, on behalf of the Board of Directors, thank you in advance for your dedication and service to plastic surgery and assisting in the development of potential members of both ASERF and The Aesthetic Society. If you are interested in serving as a mentor, please contact either Dr. Camille Cash or myself, we are always grateful for any member who wants to step up to be a mentor to future plastic surgeons! Also, if you know of any industry partners interested in supporting the program, that is always appreciated and it’s for a great cause.

NEW MEMBERS VOTED IN ON JANUARY 1, 2023

- Active: 80 (35 are female)
- International Active: 14 (3 are female)
- Total: 94

As the first female president, I’m compelled to report on the demographic breakdown. The above numbers for our society reflect an increase in the number of female members per application cycle; naturally we think representation in leadership has been a positive force for this to occur. Indeed, the percentage of female Active & International Active Members has grown over the last 5 years. This April, I will hand the gavel over to Dr. Melinda Haws, and then she to Dr. Kiya Movassaghi—these committed leaders will continue to focus on growing our future membership.

ABPS MEMBERSHIP STATISTICS

I am also happy to report that for the first time ever, the percentage of female members in The Aesthetic Society matches that of the percentage of female diplomates of the American Board of Plastic Surgery and therefore, our specialty overall. Of the 7,644 active diplomates in the ABPS, 17.6% are female. When counting The Aesthetic Society active US members only, we are nearly identical with 17.3% of our members being female. This is definitely a first, so let’s continue to break barriers as we are better and more powerful together!

Below is the breakdown of the number of active ABPS diplomates:

- Female: 1,348
- Male: 6,295
- Unknown: 1

Of the 7,644 active diplomates, 17.6% are female. (Source: American Board of Plastic Surgery, January 2023)

If you are interested in reviewing our membership numbers and trends over time, please take a look at the amazing pictorial with a graph provided by Senior Membership Manager, Marissa Connors.

Our Active Membership application is open and accepting applicants—please note the deadline is July 1, 2023. Complete your application from start to finish 100% online at theaestheticsociety.org/membership

In closing, thank you for your continued support of The Aesthetic Society and for enhancing our inclusive and diverse culture of members both from the US and abroad. I can’t wait to see you at The Aesthetic Meeting 2023 in Miami Beach, so register and book your hotel today!

THE AESTHETIC SOCIETY MEMBERSHIP STATISTICS AS OF JANUARY 23, 2023

- Active: 1978
- International Active: 225
- Associate: 124
- International Associate: 5
- Residents & Fellows: 765

Membership by the Numbers
By Jennifer L. Walden, MD, FACS
The only FDA-approved PLLA collagen biostimulator injectable

Important Safety Information

**Indication:** Sculptra® (injectable poly-L-lactic acid) is indicated for use in people with healthy immune systems for the correction of shallow to deep nasolabial fold contour deficiencies 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 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.

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<th>Meeting</th>
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Miami, FL  
bakergordonsymposium.com |
| The 15th American-Brazilian Aesthetic Meeting | February 16–20, 2023  
Park City, UT  
americanbrazilianaestheticmeeting.com |
| Dallas Cosmetic Medicine & Surgery and Rhinoplasty Meeting | March 10–13, 2023  
Dallas, TX  
dallashinoplastyandcosmeticmeeting.com |
| Indie Aesthetic Surgery Summit           | August 26–27, 2023       | A Virtual Event  
dindeaestheticsurgerysummit.com |
| AICPE National Congress—Italian Society of Aesthetic Plastic Surgery | April 14–16, 2023  
aicpe.org |
| Spring Academy VDAEPC 2023—Association of German Aesthetic Plastic Surgeons | May 5–6, 2023  
Hotel Adlon Kempinski Berlin  
Berlin, Germany  
vdaepc2023.de |
| OFCEP Congress 2023—French Society of Plastic Aesthetic Surgeons | June 1–3, 2023  
Versailles, Palais Des Congrès  
chirurgiens-esthetiques-plasticiens.com/  
congres-sofcep-2/?lang=en |
| ISAPS Olympiad Athens World Congress 2023—International Society of Aesthetic Plastic Surgery | August 31–September 2, 2023  
Megaron Athens Concert Hall  
Athens, Greece  
isaps.org |
| BAAPS 2023—Facial Surgery & Body Contouring—British Association of Aesthetic Plastic Surgeons | September 28–29, 2023  
Savoy Place  
London, England  
baaps.org.uk |
REGISTER TODAY

The Aesthetic Meeting 2023

Miami Beach, FL
Miami Beach Convention Center
April 19–23, 2023
Exhibits: April 21–23
meetings.theaestheticsociety.org
DISCOVER AESTHETIC ONE

Over 25,000 breast implants have been registered with the Aesthetic One app. Has your practice joined the revolution? It’s the only way to register breast implants with manufacturers and share information with patients in under three minutes. Developed by The Aesthetic Society and ASERF, with support from Allergan Aesthetics, an AbbVie Company, Aesthetic One is the fastest-growing implant registration platform. Want to learn more? Visit The Aesthetic Society booth for a demo!

SAVE ON OUR BEAUTIFUL AND EFFECTIVE PRODUCTS

Expertise is everything; put it on display with these stylish and functional products. Stop by our booth to browse certificates, plaques, and folders. We’re happy to extend a 20% discount on all products when you place an order in the booth or call us at 562-799-2356 and mention your Aesthetic Meeting discount. But hurry—discounts apply only through April 30!

MEMBERSHIP

We’d love to talk with you about the many benefits of your Aesthetic Society Membership and how you can make the most of it. We also have a new Aesthetic Care Team Affiliate Program for your staff! Not yet a member? We can help you get started!

READY FOR YOUR CLOSEUP?

Come alone or bring your friends and have fun in The Aesthetic Society’s photobooth! Photos are instantly available via a link. Share on your social media... just don’t forget to tag us #theaestheticsociety @AestheticSocietyMembers

AESTHETIC SURGERY EDUCATION AND RESEARCH FOUNDATION (ASERF)

Celebrating 30 years of ASERF at The Aesthetic Meeting 2023! Visit ASERF in The Aesthetic Society booth and learn about what is happening in our 30th Anniversary year, including a new website launch, recently funded projects, available research and patient assistance grants, the new Externship Program, and our Electronic Data Capture System (SETA). Join a celebratory 30th Anniversary champagne toast on Saturday, April 22, at 4:00pm and donate to honor the 2023 Career Achievement Award honorees Drs. James Stuzin and John Tebbetts.

AESTHETIC SURGERY JOURNAL AND AESTHETIC SURGERY JOURNAL OPEN FORUM

Celebrate ASJ and ASJ Open Forum by visiting its editorial team in our booth! Chat with the Editors in Chief and editorial staff about your upcoming submission, ideas for video contributions, and more. Feeling social? Grab a photo with the team and share it on social media. Sign up in the booth for their annual Book Giveaway (open to all MDs) and win some of the latest book publications in our specialty.

BID TO WIN

Take advantage of amazing savings and help the specialty at the same time by bidding in the ASERF Silent Auction. There are wonderful offers and products available. Visit the ASERF Silent Auction counter within The Aesthetic Society’s booth for more details, or bid online at events.handbid.com/auctions/aserf-auction-2023.

“BEYOND THE BEFORE & AFTER” VIEWING LOUNGE

Have you caught up with the latest episodes of our award-winning docuseries, “Beyond the Before & After?” Visit our viewing lounge, just a few aisles away in the Aesthetic Marketplace in Booth #2457, for a (semi) private screening! Experience these uplifting stories of aesthetic plastic surgery patients, many of them just like yours.
Join ASERF as we honor 
Drs. James M. Stuzin and John B. Tebbetts 
For Their Many Achievements

The ASERF Career Achievement Award 
is presented to individuals who have made a 
significant impact on the field of aesthetic 
plastic surgery—having spent their entire 
career promoting and improving the specialty 
through education, communications, 
administration, and research.

Pay Tribute to Our Honorees by Supporting ASERF. 
To make a donation in honor of the distinguished 
careers of Drs. Stuzin and Tebbetts, please make 
your gift online at aserf.org/awarddonate and 
include a comment stating what the honoree 
has meant to you and your career.
FRIDAY, APRIL 21–SUNDAY, APRIL 23

The ASERF Silent Auction is a terrific way to support the Foundation in raising funds for research, while getting a chance to win and save big on a wide array of products and services.

THANK YOU TO THE FOLLOWING COMPANIES AND SURGEONS FOR THEIR GENEROUS DONATIONS

**Allergan Aesthetics** ..........Booth: 2013
CoolSculpting Elite 20 Treatment Card
Starting Bid: $1,820

**Alpha Aesthetics** ..........Booth: 1803
Pair of Gluteal Implants
Starting Bid: $580

**BiLumix** ..........Booth: 2028
BiLumix Gen 2 Headlamp Package
Starting Bid: $437

**Bimini Health Tech** ..........Booth 3213
Puregraft 250 Filtration System
Starting Bid: $168
Puregraft Boost Adipose Micronizer Double Pack & Puregraft 50 Filtration System
Starting Bid: $170

**DefenAge**
DefenAge PRO Exclusive 150K Hair Follicle Serum
Starting Bid: $186

**Trent D. Douglas, MD**
Bose Sport Earbuds
Starting Bid: $100

**Evolutus** ..........Booth: 3049
8 JEUVEAU® (prabotulinumtoxinA-xxfs) Vials for Injection
Starting Bid: $1,750

**HealFast, Inc.** ..........Booth: 2434
30-Pack of HealFast Complete Recovery
Starting Bid: $1,260

**Implantech Associates, Inc.** ..Booth: 2405
Three Silicone Facial Implants
Starting Bid: $446

**Influx Marketing** ..........Booth: 2816
Apple Watch Series 8
Starting Bid: $210

**iNPLANT Funnel** ..........Booth: 2228
Four Boxes of V3 iNPLANT Funnels
Starting Bid: $830

**Leonisa** ..........Booth: 2830
Men’s Firm Compression post-surgical vest
Starting Bid: $30
Post-Surgical Long Sleeve Arm Shaper
Starting Bid: $20
Post-Surgical Short Bottom Girdle
Starting Bid: $20
Post-Surgical Short Girdle with Side Zippers and Wide Straps
Starting Bid: $38
Post-Surgical Wireless Bra with Front Closure
Starting Bid: $18
Sculpting Body Shaper with Built-In Back Support Bra
Starting Bid: $45

**LightStim**
LightStim for Wrinkles
Starting Bid: $87

**Foad Nahai, MD, FACS**
Problems in Periorbital Surgery: A Repair Manual
Starting Bid: $225

**Oculo-Plastik, Inc.**
Black Durette® II Plastic Externals for Light Therapy PDT and LED’s
Starting Bid: $28

**Tulip Medical Products** .......Booth: 2003
Single Use Soft Touch Miller MicroFat + TNF Kit
Starting Bid: $210

**TRAIN WITH AN EXPERT**
Starting Bid: $1,200

**William P. Adams, Jr., MD**
Caroline Glicksman, MD MSJ
Kiya Movassaghi, MD, DMD
Plastic Surgery Clinic
Lorne K. Rosenfield, MD, FACS
Renato Saltz, MD, FACS
Douglas Steinbrech, MD, FACS

**Vacation Packages**

**Los Cabos, Mexico All-Inclusive**
Starting Bid: $6,380

**Fairmont Scottsdale Golf and Spa, Scottsdale, AZ**
Starting Bid: $4,225

**Fiji Paradise**
Starting Bid: $9,450

**Tuscany Culinary Escape**
Starting Bid: $4,950

Please download the Handbid app or visit Booth #1230 for full descriptions, restrictions, and limitations.

**BID TO WIN! USING YOUR SMARTPHONE**
1. Download the free Handbid App from the Apple AppStore or Google Play Store (Android Market).
2. Tap Get Started, tap register now and create your Handbid account.
3. Select the ASERF Auction 2023 from the list and start bidding!

**BID TO WIN! USING THE WEBSITE**
1. Go to events.handbid.com/auctions/aserf-auction-2023, or click or scan the QR code above and select the bright pink REGISTER button in the Event Details Box.
2. Create Your Bidder Account by entering your user information and select Continue to log in.
3. Select to BID in this auction and start bidding!

**DON’T HAVE A SMARTPHONE?**
Visit the ASERF Silent Auction Counter inside of The Aesthetic Society Booth #1230!

Donor List as of January 31, 2023. For the most updated list, download the Handbid app or visit Booth #1230.

Continued on Page 13
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, is 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](https://aserf.org/Mollenkopf).

For Additional Information on the Fund, Please Contact Ivan Rodriguez at: 562.799.2356 or ivan@theaestheticsociety.org
Thank you to the following donors for their generous contributions!

William P. Adams Jr., MD          Caroline A. Glicksman, MD, MSJ          Kiya Movassaghi, MD, DMD          The Plastic Surgery Clinic—Drs. Ryan E. Austin, Frank R. Lista, and Jamil Ahmad          Lorne K. Rosenfield, MD          Renato Saltz, MD          Douglas S. Steinbrech, MD

DESTINATIONS

Los Cabos, Mexico          Fiji Paradise          Golf and Spa, Scottsdale, AZ          Tuscany Culinary Escape

TRAIN WITH AN EXPERT

Donor List as of January 31, 2023. For the most updated list, download the Handbid app or visit Booth #1230.
Explore The Aesthetic Marketplace—Exhibit Booth Map

Scan the QR code for Exhibitor Information

Floor Plan as of January 31, 2023.
Explore The Aesthetic Marketplace

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Exhibitor List as of January 31, 2023. For the most updated list of exhibitors and booth numbers, please download the meeting app.
Your Direct Connection to The Aesthetic Meeting

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### Explore The Aesthetic Marketplace

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Exhibitor List as of January 31, 2023. For the most updated list of exhibitors and booth numbers, please download the meeting app.
The Aesthetic Society Founding Members

*John E. Alexander, MD
*Thomas J. Baker, MD
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*John F. Crosby Jr., MD
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*James F. Dowd, MD
*Simon Fredricks, MD
*Gilbert P. Gradinger, MD
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*Marvin M. Shuster, MD
*Richard E. Straith, MD
*Kirkland W. Todd Jr., MD
*Charles P. Vallis, MD
*Richard C. Webster, MD
*Sidney K. Wynn, MD

*deceased

The Aesthetic Society Past Presidents & Annual Meetings

Organizational Meeting

October 1968

New Orleans, LA

May 1980

Orlando, FL

April 1981

Houston, TX

April 1982

Las Vegas, NV

April 1983

Los Angeles, CA

March 1984

Washington D.C.

April 1985

Boston, MA

April 1986

New Orleans, LA

March 1987

Los Angeles, CA

March 1988

San Francisco, CA

April 1989

Orlando, FL

April 1990

Chicago, IL

April 1991

New York, NY

May 1992

Los Angeles, CA

April 1993

Bostom, MA

April 1994

Dallas, TX

March 1995

San Francisco, CA

April 1996

Orlando, FL

May 1997

New York, NY

May 1998

Los Angeles, CA

May 1999

Dallas, TX

May 2000

Orlando, FL

May 2001

New York, NY

April 2002

Las Vegas, NV

May 2003

Boston, MA

April 2004

Vancouver, B.C. Canada

April 2005

New Orleans, LA

April 2006

Orlando, FL

April 2007

New York, NY

May 2008

San Diego, CA

May 2009

Las Vegas, NV

April 2010

Washington, D.C.

May 2011

Boston, MA

May 2012

Vancouver, B.C. Canada

April 2013

New York, NY

April 2014

San Francisco, CA

May 2015

Montréal, Québec, Canada

April 2016

Las Vegas, NV

April 2017

San Diego, CA

April 2018

New York, NY

May 2019

New Orleans, LA

April 2020

The Aesthetic Meeting @Home

April 2021

Miami Beach, FL

April 2022

San Diego, CA

April 2023

Miami Beach, FL
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Tracy M. Pfeifer, MD—Treasurer
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Lorne K. Rosenfield, MD
Douglas S. Steinbrech, MD
Marissa J. Tenenbaum, MD
Steven G. Wallach, MD
Camille G. Cash, MD—Parliamentarian
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Joe Gryskiewicz, MD
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Sarvam P. TerKonda, MD

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Steven M. Camp, MD—Vice Commissioner
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Aesthetic Neural Network Committee
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Luis M. Rios Jr., MD—Co-Chair
Aesthetic One Committee
Nolan S. Karp, MD—Chair
Bylaws Committee
Jeffrey M. Kenkel, MD—Chair

Conflict of Interest Committee
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Ethics Committee
Patricia A. McGuire, MD—Chair
Finance & Investment Committee
Nolan S. Karp, MD—Chair
Inclusion & Diversity Committee
Anureet K. Bajaj, MD—Co-Chair
Herluf G. Lund, MD—Co-Chair
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Gaurav Bharti, MD—Chair
Industry Policy Committee
David R. Stephens, MD—Chair
Industry Support Committee
Tracy M. Pfeifer, MD—Chair
Product Development and Market Research Committee
Michelle A. Shermak, MD—Chair

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Susan E. MacLennan, MD—Vice Commissioner
ASJ Editorial Board
Foad Nahai, MD—ASJ Editor-in-Chief
Jeffrey M. Kenkel, MD—ASJ Associate Editor
and ASJ Open Forum Editor-in-Chief
Breast Emergency Response Workgroup
William P. Adams Jr., MD—Co-Chair
M. Bradley Calobrace, MD, Co-Chair
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Steven Sigalove, MD
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Leadership Development Committee
Clyde H. Ishii, MD—Chair
Nominating Committee
Simeon H. Wall Jr., MD—Chair
Women Aesthetic Surgeons Committee
Anureet K. Bajaj, MD—Chair
Young Aesthetic Plastic Surgeons Committee (YAPS)
Mark G. Albert, MD—Chair
Resident & Fellows Forum Workgroup
K. Kye Higdon, MD—Chair

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Herluf G. Lund, Jr., MD
Representative to the ACS Advisory Council for Plastic & Maxillofacial Surgery
Brian K. Brzowski, MD
Liaison to the FDA
William P. Adams Jr., MD
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Christopher L. Nuland, Esq.
Executive Director
Sue M. Dykema, CAE
Executive Director Emeritus
Robert Stanton

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Aesthetic Surgery Education and Research Foundation—ASERF

The Aesthetic Surgery Education and Research Foundation was established in 1993 as the philanthropic arm of The Aesthetic Society.

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ASERF PAST PRESIDENTS
Simon Fredricks, MD 1993–1997
Norman M. Cole, MD 1997–2001
Robert Singer, MD 2001–2004
Jeffrey Lang, MD 2004–2006
Alan H. Gold, MD 2006–2008
Bahman Guyuron, MD 2008–2009
Laurie A. Casas, MD 2009–2010
Geoffrey R. Keyes, MD 2010–2011
V. Leroy Young, MD 2011–2012
Joe M. Gryskiewicz, MD 2012–2013
Al Aly, MD 2014–2015
Neal R. Reisman, MD, JD 2015–2016
Steven Teitelbaum, MD 2016–2017
Barry E. DiBernardo, MD 2017–2018
Julio L. Garcia, MD 2018–2019
Robert Whitfield, MD 2019–2020
Luis M. Rios Jr, MD 2020–2021
Louis L. Strock, MD 2021–2022
Bruce W. Van Natta, MD 2022–2023

Awards

In most cases, winners from the last 3 years are listed. For a complete list of previous award winners, please visit www.aserf.org

TIFFANY AWARD—BEST SCIENTIFIC PRESENTATION
A Tiffany crystal prism on an onyx base is presented to the individual who provides the Best Scientific Presentation during the annual meeting of the Society. The trophy is presented during the subsequent annual meeting.

Vasilios S. Lambros, MD
New Orleans, LA 2019
Caroline A. Glicksman, MD, MSJ
and Patricia A. McGuire, MD
Miami Beach, FL 2021
Steven R. Sigalove, MD
San Diego, CA 2022

SIMON FREDRICKS AWARD FOR BEST PANELIST
The Simon Fredricks Award is presented to the individual who is judged the Best Panelist at the annual meeting of the Society.

Holly Casey Wall, MD
New Orleans, LA 2019
Steven Teitelbaum, MD
Miami Beach, FL 2021
M. Bradley Calobrace, MD
San Diego, CA 2022

ROBERT SINGER AWARD FOR BEST HOT TOPICS PRESENTATION
The Robert Singer Award is presented to the individual who is judged the Best Hot Topics presenter at The Aesthetic Society/ASERF Annual Meeting.

James Fernau, MD
New Orleans, LA 2019
Francisco “Paco” Canales, MD
Miami Beach, FL 2021
Patricia A. McGuire, MD
San Diego, CA 2022

WALTER SCOTT BROWN AWARD FOR BEST VIDEO
The Walter Scott Brown Award is presented to the individual(s) presenting the Best Video at the annual meeting. This award is made possible by a fund established by Walter Scott Brown, MD (1906–1985).

Simeon H. Wall Jr., MD
New Orleans, LA 2019
Dino Elyassnia, MD
Miami Beach, FL 2021
Jamil Ahmad, MD
San Diego, CA 2022

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Awards

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RAYMOND VILAIN AWARD FOR OUTSTANDING SCIENTIFIC PRESENTATION
The Raymond Vilain Award is presented to an International Active member or an international surgeon for an outstanding scientific presentation at an Aesthetic Society/ASERF meeting. This award is given in the name of Raymond Vilain, a Corresponding Member of the Society from 1973–1989.

Yoav Barnea, MD
New Orleans, LA
2019
Luis Humberto Uribe Morelli, MD
Miami Beach, FL
2021
Patrick Mallucci, MD
San Diego, CA
2022

PETER B. FODOR AWARD FOR BEST PANEL MODERATOR
The Peter B. Fodor Award is presented to the individual who is judged the Best Panel Moderator at The Aesthetic Society/ASERF Annual Meeting. This award was established in 2001 by Barbara and Peter B. Fodor, MD. Nolan S. Karp, MD
New Orleans, LA
2019
G. Jackie Yee, MD
Miami Beach, FL
2021
Tiffany McCormack, MD
San Diego, CA
2022

SHERRELL J. ASTON AWARD FOR BEST PRESENTATION BY A RESIDENT, FELLOW, OR CANDIDATE
The Sherrell J. Aston Award was created by Dr. Sharadkumar Dickshet’s “named fund” contribution to The Aesthetic Surgery Education & Research Foundation for the best presentation by a resident, fellow, or member of the Aesthetic Society Candidate Program. (Beginning in 1995 the criteria was limited to entries from Aesthetic Society annual meetings.)

Christopher C. Sureau, DO
New Orleans, LA
2019
Justin L. Perez, MD
Miami, FL
2021
David M. Turer, MD
San Diego, CA
2022

BEST JOURNAL ARTICLE
This award is for the best aesthetic surgery article published in Aesthetic Surgery Journal.

2020 Domestic
Int Decision Making in Preservation Rhinoplasty: A 100 Case Series with One-Year Follow Up
Aaron M. Kosins, MD, Rollin K. Daniel, MD

2020 International
A Consensus on Minimizing the Risk of Hyaluronic Acid Embolic Visual Loss and Suggestions for Immediate Bedside Management
Greg J. Goodman, FACD; Mark R. Magnusson, MBBS, FRACS; Peter Callan, MBBS, FRACS; MFA; Stefania Roberts, MA, MBBS, FRACP; Sarah Hart, MBChb, NZSCM, Cara B. McDonald, MBBS, FRACS; Michael Clague, BSc; Alice Rudd, MBBS, FACD; Philip S. Bekhor, MBBS, FACD; Steven Liew, MBBS, FRACS

2021 Domestic
A Practical Guide to Managing Patients With Systemic Symptoms and Breast Implants
Patricia A. McGuire, MD; Daniel J. Clauw, MD; Jason Hammer, MD; Melinda J. Haws, MD; William P. Adams Jr., MD

2021 International
Aspiration Before Tissue Filler—An Exercise in Futility and Unsafe Practice
Greg J. Goodman, MBBS, FACD; GradDipClinEpi, MD; Mark R. Magnusson, MBBS, FRACS; Peter Callan, MBBS, FRACS; MBA; Stefania Roberts, MA, MBBS, FRACP; Sarah Hart, MBChB, NZSCM, Frank Lin, MBBS, FRACS; Eqram Rahman, MBBS, MS, PhD; Cara B. McDonald, MBBS, FRACS; Steven Liew, MBBS, FRACS; Cath Porter, MBBS, Niamh Corduff, FRACS; Michael Clague, BA

2022 Domestic
Practice Advisory on Gluteal Fat Grafting
Daniel Del Vecchio, MD; Jeffrey M. Kenkel, MD, FACS

2022 International
Injection Guidelines for Treating Midface Volume Deficiency With Hyaluronic Acid Fillers: The ATP Approach (Anatomy, Techniques, Products)
Patrick Trévidic, MD; Joely Kaufman-Janette, MD; Susan Weinkle, MD, Raymond Wu, MD; Benji Dhillon, MD; Stéphanie Antunes, PhD, Emilie Macé, PharmD; Pauline Maffert, MSc

BEST AESTHETIC SURGERY JOURNAL RESEARCH PAPER
This award is for the best aesthetic surgery research paper published in The Aesthetic Surgery Journal.

2020
Histological Evaluation of the Skin After Fat Grafting: A Blinded, Randomized, Controlled Clinical Study
Juan PBR Maricevich, MD; Marcel FMB Lima, MD; Ana Carolina Maricevich, MD; Marco ABR Maricevich, MD; Larissa FJ Silva, MD

2021
Safety Considerations of Fat Grafting in Buttock Augmentation
Rebecca C. O’Neill, MD; Summer E. Hanson, MD, PhD, FACS; Edward Reece, MD, MBA, FACS; Sebastian Winocour, MD, MSc, FACS

2022
3-part series: Impact of Capsuleotomy Type on Post-Explantation Systemic Symptom Improvement: Findings From the ASERF Systemic Symptoms in Women—Biospecimen Analysis Study: Part 1
Caroline Glicksman, MD, MSJ, FACS; Patricia McGuire, MD; Marshall Kadın, MD; Marisa Lawrence, MD; Melinda Haws, MD; Jill Newby, PhD; Sarah Ferenz, BA; James Sung, MD, FCAP; Roger Wixtrom, PhD

Heavy Metals in Breast Implant Capsules and Breast Tissue: Findings from the Systemic Symptoms in Women—Biospecimen Analysis Study: Part 2
Roger Wixtrom, PhD; Caroline Glicksman, MD, MSJ, FACS; Marshall Kadın, MD, Marisa Lawrence, MD, Melinda Haws, MD; Sarah Ferenz, BA; James Sung, MD, FCAP; Patricia McGuire, MD

Microbes, Histology, Blood Analysis, Enterotoxins, and Cytokines: Findings From the ASERF Systemic Symptoms in Women—Biospecimen Analysis Study: Part 3
Patricia McGuire, MD; Caroline Glicksman, MD, MSJ, FACS, Roger Wixtrom, PhD; C. James Sung, MD, FCAP; Robert Hamilton, PhD, D(ABMLI); Marisa Lawrence, MD; Melinda Haws, MD; Sarah Ferenz, BA; Marshall Kadın, MD

BEST AESTHETIC SURGERY JOURNAL OPEN FORUM PAPER
This award is for the best paper published in the Aesthetic Surgery Journal Open Forum.

Garrett D. Locketz, MD; Kirkland N. Lozada, MD, and Jason D. Bloom, MD, FACS

2021: Breast Implant Illness: An Expert-Panel Discussion on Current Research
Jeffrey M. Kenkel, MD, FACS; Caroline A. Glicksman, MD, MSJ, Patricia A. McGuire, MD, Luis M. Rios, MD, William P. Adams Jr., MD

2022: Fat Transfer for Gluteal Augmentation: An Expert Video Roundtable Discussion
Jeffrey M. Kenkel, MD, FACS, Daniel Del Vecchio, MD; Simeon Wall, Jr, MD, FACS, Patrick Pazmino, MD

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Awards
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BEST AESTHETIC SURGERY JOURNAL OPEN FORUM INTERNATIONAL PAPER
This award is for the best International paper published in the Aesthetic Surgery Journal Open Forum.
2021
The Usefulness of Magnetic Resonance Angiography to Analyze the Variable Arterial Facial Anatomy in an Effort to Reduce Filler-Associated Blindness: Anatomical Study and Visualization Through an Augmented Reality Application
Marc Mespreuve, MD, PhD; Karl Waked, MD; Barbara Collard, MD; Joris De Ranter, MD; Francis Vanneste, MD; Benoit Hendrickx, MD, PhD

BEST AESTHETIC SURGERY JOURNAL OPEN FORUM RESEARCH PAPER
This award is for the best paper published in the Aesthetic Surgery Journal Open Forum.
2021
The Combined Effect of Intravenous and Topical Tranexamic Acid in Liposuction: A Randomized Double-Blinded Controlled Trial
Nicolas M. Abboud, MD; Ayush K. Kapila, MBBS, MD, MRCS; Sofie Abboud; Elie Yaacoub, MD; Marwan H. Abboud, MD

DISTINGUISHED SERVICE AWARD
This award is presented to members of the Society whose dedication, service, and/or contributions to the development, wellbeing, and success of the Society have been demonstrated over many years and have exemplified action above and beyond the expected or ordinary. The award is a Tiffany crystal trapezoid.
Laurie A. Casas, MD 2019
Leo R. McCafferty, MD 2021
Jeffrey M. Kenkel, MD 2022

JEROME R. KLINGBEIL AWARD FOR TEACHING EXCELLENCE
The Jerome R. Klingbeil Award for teaching excellence was established in 1988 to recognize the efforts and the achievements of outstanding Teaching Course instructors and as a memorial to Jerome R. Klingbeil, MD, CAE, (1918–1988). This award was named in honor of Dr. Klingbeil’s faithful and dedicated service to the Society. Dr. Klingbeil served this organization and its membership in numerous capacities, including 1973 Local Arrangements Chairman, Chairman of the Convention Planning and Coordination Committee (1974–1984) and as its first Executive Director (1981–1985). In keeping with the high degree of emphasis Jerry placed upon quality education and professional development, this award is conferred upon Teaching Course instructors who have donated their time and expertise to furnish significant and long-term contributions to the Society and the specialty.
Mary Lind Jewell, RPT 2019
Geoffrey R. Keyes, MD 2020
Joe M. Gryskiewicz, MD 2020
Z. Paul Lorenc, MD 2020
Barry E. DiBernardo, MD 2022

ASERF CAREER ACHIEVEMENT AWARD
This award honors an esteemed plastic surgeon recognizing their significant contributions and distinguished career, dedication and commitment to aesthetic surgery training and patient safety. This award is funded by donations in his/her name from the surgeons that know him/her best and thankfully recognize his/her powerful influence on our careers and lives.
Robert Singer, MD 2019
Sherrell J. Aston, MD 2022
John B. Tebbetts, MD 2023
(posthumous)
James M. Stuzin, MD 2023

LEADERSHIP AWARD
This award is presented to an Aesthetic Society member who shows exemplary leadership, service, creativity, and dedication to the subspecialty of Aesthetic Surgery, advancing the organization in the pursuit of its stated mission. The Award is presented at the discretion of the Board of Directors to recognize a superior contribution.
James C. Grotting, MD 2020
Michael C. Edwards, MD 2021
Charlie Thorne, MD 2022

SPECIAL MERIT
The Award of Special Merit commemorates the paramount contributions to the success and wellbeing of the Society which, in the judgment of the Society, was above and beyond the expected and ordinary. The recipient need not be a member of the Society. His award was originally in the form of a document suitable for framing. In 1987, an engraved silver bowl was adopted as this award.
Daniel C. Mills, MD 2019
Richard J. Warren, MD 2019
Kevin Charles 2021
Robert Aicher, Esq. 2022

SPECIAL AWARD
Tracy M. Pfeifer, MD 2020
Jamil Ahmad, MD 2021
Michael A. Bogdan, MD, MBA 2021
James Fernau, MD 2021
Nolan S. Karp, MD 2021
Kathleen McClemmy 2021
Debi Toombs 2022
Sue M. Dykema, CAE 2022

ASERF SPECIAL AWARD
Barry E. DiBernardo, MD 2021
Courtney Muehlebach 2022

SCOTT SPEAR AWARD
The Scott Spear Award honors the Best Breast Presentation at The Aesthetic Meeting. Roy de Vita, MD New Orleans, LA 2019
Steven R. Sigalove, MD Miami Beach, FL 2021
Caroline A. Glicksman, MD, MSJ and Patricia A. McGuire, MD San Diego, CA 2022

IN CHUL SONG AWARD FOR PHILANTHROPIC SERVICE
This award is made possible by a generous contribution to The Aesthetic Surgery Education and Research Foundation by Sharadkumar Dicksheet, MD. This award is bestowed upon a plastic surgeon whose philanthropic plastic surgery efforts best exemplifies humanitarian service.
Julio L. Garcia, MD 2011
Larry Weinstein, MD 2012
Raj N. Lalia, MD 2013

COMMUNITY SERVICE AWARD
Toibert Wilkinson, MD 2009
Gang Tattoo Removal Program of Texas Jack E. Demos, MD 2013
Founder, Surgicorps, International
Joe M. Gryskiewicz, MD 2015
Volunteer Services to the Children of Ecuador

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GASPAR W. ANASTASI AWARD
The Gaspar W. Anastasi Award is presented to the highest rated resident and/or fellow scientific papers at the Residents & Fellows Forum during the annual meeting of the Society. The award consists of a check for $250 and the opportunity to present the paper to the full Scientific Session of the annual meeting.

Christodoulou Kaoutzanis, MD
New Orleans, LA 2019

Nneamaka Nwubah, MD
New Orleans, LA 2019

Justin Bellamy, MD
Miami Beach, FL 2021

Shirley Shue, MD
Miami Beach, FL 2021

Alannah Phelan, MD
San Diego, CA 2022

Jeffrey L. Lisiecki, MD
San Diego, CA 2022

ASERF RESEARCH AWARD
The ASERF (Aesthetic Surgery Education & Research Foundation) Research Award is conferred in those extraordinary circumstances when the results of research projects have a profound and monumental effect upon the specialty of Aesthetic Plastic Surgery and the quality of service provided to our patients.

V. Leroy Young, MD
Vancouver, B.C. Canada 2004

Caroline A. Glicksman, MD, MSJ
San Diego, CA 2022

Patricia A. McGuire, MD
San Diego, CA 2022

TED LOCKWOOD AWARD FOR EXCELLENCE IN BODY CONTOURING
This award was created to recognize Dr. Ted Lockwood’s visionary contributions to aesthetic body contouring. The recipient of this award is a plastic surgeon who demonstrates a dedication to research, clinical excellence, patient safety and peer education in all aspects of body contouring as demonstrated by publication in scientific journals, clinical presentations, and by ongoing innovation in body contouring techniques.

Daniel A. Del Vecchio, MD
New Orleans, LA 2019

Douglas S. Steinbrech, MD
Miami Beach, FL 2021

Simeon H. Wall Jr., MD
San Diego, CA 2022

Update Your Aesthetic Society Logo!

The logo and guidelines for its use can be found at theaestheticsociety.org/logo

The logo and guidelines for its use can be found at theaestheticsociety.org/logo

THE AESTHETIC MEETING 2023
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
- Messina (Sicily), Italy
- Istanbul, Turkey
- Bozcaada (Troy), Turkey
- Athens (Piraeus), Greece

CME Available

meetings.theaestheticsociety.org/cruise
Advancing Aesthetic Surgery for More than 50 Years!

We provide surgeons with the latest and most cutting-edge tools, techniques and resources they need to safely innovate and advance the field of Aesthetic Surgery and Medicine.
To know it, is to love it. The Aesthetic Society’s Facial and Rhinoplasty Symposium was once again a big success! Attendees were actively participating in discussions and the cadaver lab. So many highlights and insightful presentations—this meeting should be on every face surgeon’s list!

100% OF RESPONDENTS CLAIMED THIS SYMPOSIUM ENHANCED MY PROFESSIONAL EFFECTIVENESS!
Facial and Rhinoplasty Symposium

“Dr. Miotto is an incredible surgeon, educator, and generous mentor for female surgeons. Her continued role as a speaker as well as inclusion of other female surgeons on the panels will only enhance this meeting.”

“Shout out to Chris and all the instructors. This is my fourth time here... 34 years in practice and I still pick up a lot of great ideas. I’ll be back again!” —John Bess, MD Phoenix, AZ
It’s time.

Now your entire staff can be a part of The Aesthetic Society.


To deliver on those pillars, your entire care team should embody them too.

Benefits of Enrolling Your Staff:

• Educational opportunities at The Aesthetic Meeting, including face-to-face and virtual
• Discounted registration fees for meetings and symposia
• Subscription to Aesthetic Society News, with content of interest to the aesthetic care team
• Subscription to RADAR Resource content specific to plastic surgery staff and practice management
• Professional development for staff to grow your practice
• Grow network of like-minded individuals
• Access to dedicated networking opportunities

Learn More and Enroll at:
www.theaestheticsociety.org/medical-professionals/aesthetic-care-team
The Aesthetic Meeting has long been known as the pinnacle of education for aesthetic plastic surgeons. But a great aesthetic practice requires more than an exceptional surgeon, it takes an entire team that goes beyond. That’s why the meeting is now the go-to destination for a surgeon’s entire staff. Included with registration are three full days of aesthetic care team education, provided by the foremost experts in the practice management arena.

**THURSDAY, APRIL 20**

*Thursday courses are an additional fee*

- **7:00am – 10:00am**
  - S1 Nurse Cadaver Lab
    - Chairs: Charles Thorne, MD and Stelios Wilson, MD

- **9:00am – 3:00pm**
  - S5 Skills for Successful Patient Coordinators
    - Karen Zupko, President, KarenZupko & Associates

- **12:00pm – 3:00pm**
  - S10 Temperament Theory: Using Science to Improve the Art of Business and Team Relationships
    - Josyn Vaught

- **2:00pm – 4:00pm**
  - S14A Physician Extender Injector Competence Training—Level 1—Understanding the Basics of Injection Techniques with Neurotoxins and Hylauronic Acid Dermal Fillers
    - Chair: Z. Paul Lorenc, MD
    - Additional Faculty: Kathy Jones, RN and Karen Menard, RN

- **4:30pm – 6:30pm**
  - S101/201 Re-Designing Your Aesthetic Practice—How to Get Beyond Today
    - Co-Chairs: Mark Jewell, MD and Robert Singer
    - Presenters: Stephanie Attenberg, Michael Edwards, MD, Mary Lind Jewell, RPT, Tom Seery and Verne Weisberg, MD

- **9:00am – 3:00pm**
  - 102/202 Cosmetic Medicine
    - Z. Paul Lorenc, MD and Jeffrey Kenkel, MD

- **2:00pm – 4:00pm**
  - 109 Tax Reduction for Aesthetic Practices: Best Ideas in 2023
    - David Mandell

- **2:00pm – 4:00pm**
  - NEW 110 So, You Want to Sell Your Practice? How to Plan Your Exit Strategy Making the Process Seamless
    - Judy Kozlicki and Karen Zupko

- **111 Digital Strategy Workshop**
  - Ryan Miller

- **4:30pm – 6:30pm**
  - 209 Ten Steps to Online Marketing Success
    - Peter Houtz

- **2:30pm – 4:30pm**
  - 210 Doubling In-Office Booking Ratios
    - Ed Syring

- **2:30pm – 4:30pm**
  - 211 The Recession is Coming—Will Your Aesthetic Practice Survive?
    - Sam Peek

**FRIDAY, APRIL 21**

- **9:45am – 12:30pm**
  - Can This Practice Be Saved?
    - Chairs: Herluf Lund, MD and Karen Zupko

- **2:00pm – 6:30pm**
  - 101/201 Re-Designing Your Aesthetic Practice—How to Get Beyond Today
    - Co-Chairs: Mark Jewell, MD and Robert Singer, MD
    - Presenters: Stephanie Attenberg, Michael Edwards, MD, Mary Lind Jewell, RPT, Tom Seery and Verne Weisberg, MD

- **102/202 Cosmetic Medicine**
  - Z. Paul Lorenc, MD and Jeffrey Kenkel, MD

- **2:00pm – 6:30pm**
  - 109 Tax Reduction for Aesthetic Practices: Best Ideas in 2023
    - David Mandell

- **4:30pm – 6:30pm**
  - NEW 110 So, You Want to Sell Your Practice? How to Plan Your Exit Strategy Making the Process Seamless
    - Judy Kozlicki and Karen Zupko

- **111 Digital Strategy Workshop**
  - Ryan Miller

- **4:30pm – 6:30pm**
  - S14B Physician Extender Injector Competence Training—Level 2—Advanced/Combination Injection Techniques with Neurotoxins and the Array of FDA-Approved Dermal Fillers
    - Chair: Z. Paul Lorenc, MD
    - Additional Faculty: Kathy Jones, RN and Karen Menard, RN

**SATURDAY, APRIL 22**

- **9:45am – 12:00pm**
  - Creating Magic and Millions in Your Business! A Roadmap to Creating a Successful Plastic Surgery and Medical Spa Business
    - Chairs: Bradley Calobrace, MD and Nickoli Neville

- **2:00pm – 4:00pm**
  - 309 Relationship Marketing: What It Means and How to Put It in Action

- **2:30pm – 4:30pm**
  - 310 Legal Bootcamp for Plastic Surgeons—The Truth, The Whole Truth and Nothing But the Truth
    - Alex Thiersch

- **2:30pm – 4:30pm**
  - 311 New Advances in Hair Restoration
    - Alfonso Barrera, MD, Richard Chaffoo, MD, and Carlos Uebel, MD

- **4:30pm – 6:30pm**
  - 409 Staff: Your Biggest Expense or Your Biggest Asset?
    - Judy Kozlicki and Karen Zupko

**SUNDAY, APRIL 23**

- **9:45am – 12:45pm**
  - Pearls and Pitfalls of Starting a Solo Private Practice: From the Perspective of Surgeons, Spouses, and Managers
    - Chair: Amy Anderson

- **10:30am – 12:30pm**
  - 505 Hot Devices in 2023
    - Lawrence Bass, MD, Barry DiBernardo, MD and Jason Pozner, MD

- **10:30am – 12:30pm**
  - 506 Opioid-Free: A Better Way to Recover
    - Lawrence Iteld, MD

- **10:30am – 12:30pm**
  - 507 Planning, Opening and Operating Your Own Ambulatory Surgery Suite
    - Troy Pittman, MD and Jennifer Baxter, MD

- **10:30am – 12:30pm**
  - 508 Successful Principles for Non-Surgical Services: Fast Track Your ROI
    - Marie Olesen

- **10:30am – 12:30pm**
  - 509 Basics of Cyber Security
    - Izhak Musli

- **2:30pm – 4:30pm**
  - 606 50 Pearls for Primed Practice Performance
    - Luis Rios, Jr., MD and Douglas Steinbrech, MD

- **2:30pm – 4:30pm**
  - 607 Maximize Your Revenue: How Knowing the Two Most Important KPIs Can Give You a Leg Up
    - Terri Ross and Izhak Musli

**CALLING ALL MEMBERS!**

We would love to hear from your Aesthetic Care Teams. Please encourage them to submit an article to be featured in this quarterly publication Aesthetic Society News. Articles can cover an innovative array of skincare/device methodology used in pre and post op care to improve patient progress and wound-healing results.

*info@theaestheticsociety.org*
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.
International Memorandum of Understanding (MOU) Update

We have made great progress with our worldwide relationships with new MOUs outside of the United States; many of our international colleagues have demonstrated interest in partnering with us.

Most recently, The Aesthetic Society has signed a new memorandum of understanding with our neighbors The Mexican Association of Plastic, Aesthetic and Reconstructive Surgery (AMCPER) led by Dr. Arturo Ramírez-Montaña, who is also the ISAPS President-Elect. We are also pleased to have recently signed an MOU with The Emirates Plastic Surgery Society and The Arab Association of Plastic, Aesthetic and Reconstructive Surgery and look forward to nurturing that relationship where our premier education and surgeon educators are in demand.

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ORGANIZATIONS WITH SIGNED MOUs
- Arab Association of Surgical and Medical Aesthetics—AASMA
- Australasian Society of Aesthetic Plastic Surgeons—ASAPS
- Brazilian Society of Plastic Surgery—SBCP
- British Association of Aesthetic Plastic Surgeons—BAAPS
- Association of German Aesthetic Plastic Surgeons—VDAEPC
- Canadian Society for Aesthetic Plastic Surgery—CSAPS
- Emirates Plastic Surgery Society—EPSS
- German Society of Plastic, Reconstructive and Aesthetic Surgeons—DGPRAC
- International Master Course on Aging Science—IMCAS
- Int’l Society of Aesthetic Plastic Surgery—ISAPS
- Italian Society of Aesthetic Plastic Surgery—AICPE
- Korean Society for Aesthetic Plastic Surgery—KSAPS
- French Society of Plastic Aesthetic Surgeons—SOFCEP
- Norwegian Society for Aesthetic Plastic Surgery—NSAPS
- The Spanish Association of Aesthetic Plastic Surgery—AECEP

ORGANIZATIONS WITH ANTICIPATED (PENDING) MOUs
- Mexican Association of Plastic, Aesthetic and Reconstructive Surgery—AMCPER
The Aesthetic Society 2023–2024
Members to Vote on Slate of Candidates

Active members of The Aesthetic Society will hear reports on Society business and elect new officers for 2023–2024 during The Aesthetic Society/ASERF Annual Business Luncheon. All Active Members are invited to attend on Saturday, April 22, 2023 at 12 noon during The Aesthetic Meeting 2023 in Miami Beach, FL.

PRESIDENT (automatic from President-Elect)
Melinda J. Haws, MD
Nashville, TN
Private Practice
Current Board Position: President-Elect


National Affiliations: The Aesthetic Society, ASERF, ASPS, AAPS, and ACS

Training: Southern Illinois University, General Surgery; Southern Illinois University, Plastic Surgery; Nashville Plastic Surgery, Aesthetic Fellowship

ABPS Certification: 1999

PRESIDENT-ELECT (1 year term)
Kiya Movassaghi, MD, DMD, FACS
Private Practice; Clinical Assistant Professor of Plastic Surgery, Oregon Health & Science University

Current Board Position: Vice President

Current Aesthetic Society/ASERF Committee Work: The Aesthetic Society Executive Committee, Conflict of Interest Committee, Finance & Investment Committee, Industry Support Committee (Vice Chair), Aesthetic Training Committee (Co-Chair), Traveling Professor Program, Publications Committee, Application Review Committee (Vice Chair), Inclusion & Diversity Committee, and Executive Search Task Force

National Affiliations: The Aesthetic Society, ASERF, ASPS, NWSAPS and OSPS

Training: Harvard Medical School, Harvard Dental School, General Surgery; Beth Israel Deaconess Medical Center and Massachusetts General Hospital at Harvard Medical School; Harvard Combined Plastic Surgery Program

ABPS Certification: 2003

VICE PRESIDENT (1 year term)
Tracy M. Pfeifer, MD
New York, NY
Private Practice
Current Board Position: Treasurer


National Affiliations: The Aesthetic Society, ASERF, ACS, AAPS, ASPS, and ISAPS

Training: New York Hospital-Cornell Medical Center, Institute of Reconstructive Plastic Surgery-NYU Medical Center, Plastic Surgery of the Breast, Atlanta Plastic Surgery

ABPS Certification: 2001

TREASURER (1 year term)
Jamal Ahmad, MD
New York, NY
Toronto, Ontario, Canada
Private Practice; Assistant Professor, Department of Surgery, University of Toronto; Director, Education Program in Aesthetic Plastic Surgery, University of Toronto

Current Board Position: Secretary

The Aesthetic Society/ASERF Committee Work: The Aesthetic Society Executive Committee, Education Commissioner, Aesthetic Training Committee, Industry Policy Committee, Continuing Medical Education Committee, Finance & Investment Committee, Breast Emergency Response Workgroup, ASJ Editorial Board, ASJ Open Forum Editorial Board, ASERF Career Achievement Award Steering Committee, ASERF Innovative Procedures Committee (Co-Chair), and Executive Search Task Force

National Affiliations: The Aesthetic Society, ASERF, CSAPS, CSPS, ISAPS, and The Rhinoplasty Society

Training: Medical School, Royal College of Surgeons in Ireland; Integrated Plastic Surgery, University of Texas Southwestern Medical Center, Breast Reconstruction Fellowship, University of Toronto

Royal College of Physicians and Surgeons: 2010

SECRETARY (1 year term)
Nolan S. Karp, MD
New York, NY
Vice Chair of Clinical Operations, Hansjörg Wyss Department of Plastic Surgery, Professor of Plastic Surgery, NYU School of Medicine, Chief of the Plastic Surgery Service, Tisch Hospital

Current Aesthetic Society/ASERF Committee Work: ASERF Director, Finance & Investment Committee (Chair), Aesthetic Neural Network Committee (Co-Chair), App Governance Workgroup, Industry Policy Committee, Breast Emergency Response Workgroup, Program Committee (Chair), Continuing Medical Education Committee, Publications Committee, Symposium Committee, and Young Aesthetic Plastic Surgeons Committee

National Affiliations: The Aesthetic Society, ASERF, ASPS, PSRC, ACS, AAPS

Training: Northwestern University School of Medicine, New York University School of Medicine, Institute of Reconstructive Plastic Surgery at New York University School of Medicine

ABPS Certification: 1994

MEMBERS-AT-LARGE (3 year terms)

Mark G. Albert, MD
New York, NY
Private Practice; Program Director of The Manhattan Eye, Ear, and Throat Hospital Aesthetic Surgery Fellowship; Assistant Clinical Professor at Zucker School of Medicine

The Aesthetic Society/ASERF Committee Work: Young Aesthetic Plastic Surgeons Committee (Chair), Aesthetic Training Committee, Inclusion and Diversity Committee, RADAR Resource Editorial Committee, ASERF Externship Task Force, ASJ Editorial Board, ASERF Career Achievement Award Steering Committee, ASJ Journal Club Moderator, ASJ Open Forum Podcast

National Affiliations: The Aesthetic Society, ASERF, The Rhinoplasty Society

Training: Undergraduate: The University of Pennsylvania, Medical School; Michigan State College of Medicine, Integrated Plastic Surgery; University of Massachusetts. Aesthetic Fellowship: Manhattan Eye, Ear, and Throat Hospital.

ABPS Certification: 2018

Continued on Page 33
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**Douglas S. Steinbrech, MD**  
New York, NY  
Private Practice Alpha Male Plastic Surgery NY/LA/Chicago  
**Current Board Position:** Member-at-Large  
**Current Aesthetic Society/ASERF Committee Work:** Education Commission (Vice Commissioner), Industry Exhibits Committee, Program Committee (Vice Chair), and Innovative Procedures Committee  
**National Affiliations:** The Aesthetic Society, ABPS, ASPS, ACS, FACS, Joint Commission, AMA, ABMS, AECEP, NESPS, NYSRPS  
**Training:** NYU General Surgery, NYU Institute of Reconstructive Plastic Surgery  
**ABPS Certification:** 2006

**K. Kye Higdon, MD**  
Nashville, TN  
Private Practice  
**The Aesthetic Society/ASERF Committee Work:** Communications Commissioner, Finance & Investment Committee, Residents & Fellows Forum Workgroup, ASJ Editorial Board, ASJ Open Forum Editorial Board, and Executive Search Task Force  
**National Affiliations:** The Aesthetic Society, ASERF, AAPS, ASPS, Southeastern SPRS, ACAPS, AMA, TNSPS, JB Lynch Society  
**Training:** University of Alabama, Medical School at University of MS, University of TN, Vanderbilt University Medical Center  
**ABPS Certification:** 2012

**TRUSTEE**  
(3-year term)  
**Leo R. McCafferty, MD**  
Pittsburg, PS

**APPLICATION REVIEW COMMITTEE**  
(3-year terms)  
**Alvin B. Cohn, MD**  
Vestavia Hills, AL  
(Southeast)

**ETHICS COMMITTEE**  
(3-year terms)  
**Eugene J. Cherny, MD**  
Des Moines, IA  
(Midwest)

**JUDICIAL COUNCIL**  
(3-year terms)  
**Erin M. Kennedy, MD**  
Dubuque, IA  
(Midwest)

**Those continuing in positions:**

**MEMBERS-AT-LARGE**

- **M. Bradley Calobrace, MD**  
  (until 2025)  
  Louisville, KY

- **R. Brannon Claytor, MD**  
  (until 2024)  
  Bryn Mawr, PA

- **Grady B. Core, MD**  
  (until 2024)  
  Birmingham, AL

- **Trent D. Douglas, MD**  
  (until 2025)  
  Greenbrae, CA

- **Lorne K. Rosenfield, MD**  
  (until 2025)  
  Burlingame, CA

- **Marissa J. Tenenbaum, MD**  
  (until 2024)  
  St. Louis, MO

**M. Scott Haydon, MD**  
West Lake Hills, TX  
(South Central)

**Tracy M. Pfeifer, MD**  
New York, NY  
(New York City)

**Julie J. Khanna, MD**  
Oakville, ON  
(Canada)
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
The purpose of this patient safety communication is to alert plastic surgeons, nurses, and patients about the risks of fentanyl-containing counterfeit prescription medications that patients can obtain outside of those prescribed by a physician, physician’s assistant, or nurse practitioner and purchased at a licensed pharmacy. This becomes a patient safety issue where unintentional fentanyl overdose and death can occur. Patients are not well-educated about these risks and how to stay safe. Children and adolescents are also at risk. We believe that a conversation with patients will save lives and prevent tragedies.

This crisis has escalated to the extent that a patient safety advisory regarding the extreme danger of illicit fentanyl has been jointly developed by ISAPS and The Aesthetic Society. The purpose of this communication is to discuss this matter in the context of patient safety and how to take actionable steps to mitigate risk for patients. Additionally, we will review the pharmacology of powerful synthetic opioids, geopolitical issues, and naloxone used to treat opioid overdose.

Unlike legitimate medications that are manufactured with tight quality controls and good pharmaceutical manufacturing processes, there is no control over how much fentanyl is contained in counterfeit medications. Only two milligrams of fentanyl is considered a potential lethal dose; it’s particularly dangerous for someone who does not have a tolerance to opioids.

Criminal drug networks mass-produce pills that contain fentanyl and falsely market them as legitimate prescription pills. Counterfeit pills are easily accessible and often sold on the street, social media and e-commerce platforms, making them available to anyone with a smartphone, including minors. Many pills are physically indistinguishable by their appearance from prescription opioids such as oxycodone, hydrocodone, benzodiazepines like alprazolam, or stimulants like amphetamine and methylphenidate used for treating attention deficit disorders. They contain identical identification numbers and marks like a legitimate pill has stamped on its surface.1,2 Patients who seek medications in this fashion are exposed to the risk of fentanyl overdose and death.

Two milligrams of pure fentanyl fits on the point of a pencil. If ingested, this is a lethal dose. The United States Drug Enforcement Administration (US DEA) Laboratory has determined that, of the fentanyl-laced fake prescription pills analyzed in 2022, six out of ten now contain a potentially lethal dose of fentanyl. We would urge you to share this recent US DEA press release on this topic with your patients.1

According to the United States Center for Disease Control (US CDC), 107,375 people in the United States died of drug overdoses and drug poisonings in the 12-month period ending in January 2022.3 A staggering 67 percent of these deaths involved synthetic opioids like fentanyl. Some of these deaths were attributed to fentanyl mixed with other illicit drugs like cocaine, methamphetamine, and heroin, with many users unaware they were actually taking fentanyl. There is no data of how many of these deaths occurred after surgery from taking illicitly obtained pills containing fentanyl.

Fentanyl overdoses are now the leading cause of death for individuals in the age range of 10 to 19 years in the United States. Earlier US Center for Disease Control (US CDC)
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reports from 2019–2021 revealed approximately 90% of overdose deaths involved opioids, and 83.9% involved illicitly manufactured fentanyl. Counterfeit pill evidence was present in 24.5% of overdose deaths. Last year there were 133 deaths of children younger than 3 who ingested fentanyl accidentally in the United States of America.5, 6 Fentanyl patches have contributed to child overdoses in Australia.7 Educational initiatives for children, adolescents, and college students have tremendous value to help them understand the extreme risk of accidental fentanyl overdose and death.8

According to reports, the US DEA and the US Customs and Border Patrol (US CBP) have seized over 10,000 kg of fentanyl powder and 50.6 million tablets containing fentanyl in 2022. No statistics are available on the amount of fentanyl seized in other countries. The United States of America has the greatest amount of illicit fentanyl. This is reflected in the statistics cited in this advisory. This equates to approximately 379 million doses of fentanyl according to a press release by the US DEA.9

PHARMACOLOGY BACKGROUND OF FENTANYL

Fentanyl is a synthetic opioid first developed approximately 60 years ago. It is a relative of meperidine, (phenylpiperidine series). There have been approximately 1400 fentanyl analogs synthesized (fentalogs), some sold illicitly as designer drugs.10 11 Opioids like codeine, hydrocodone, oxycodone, and hydromorphone are synthesized by modifications of morphine. Heroin is diacetyl morphine sourced from opium.

Within the context of surgery, anesthesia, and acute pain management, fentanyl and two of its analogs (sufentanil and remifentanil) are used. Sufentanil is the most potent µ-receptor agonist available for clinical use. It is 5 to 10 times more potent than fentanyl and 1000 times more potent than morphine. It has an affinity for opioid receptors 30 times greater than that of fentanyl.12

Remifentanil is structurally unique because of its ester linkages.13 This makes it susceptible to hydrolysis by blood esterase, resulting in rapid metabolism and rapid reduction of blood concentration during total intravenous anesthesia (TIVA). Fentanyl is additionally prescribed for malignant and non-malignant chronic pain. It is administered by injection, nasal spray, or skin patch, or absorbed through the cheek as a lozenge or tablet. Other routes of use are intrathecal and spinal anesthesia.

The onset of action of fentanyl is almost immediate when the drug is given intravenously; however, the maximal analgesic and respiratory depressant effect may not be noted for several minutes. Bioavailability depends on the route of administration. Fentanyl is capable of producing severe respiratory depression. It has also been reported to cause nausea, vomiting, dizziness, muscle rigidity, seizures, hypotension, coma, and death.14

NALOXONE

Naloxone is useful in treating both acute opioid overdose and respiratory or mental depression due to opioids. It is administered intravenously, intramuscularly, or via nasal spray. Depending on the venue, naloxone is available without a prescription as part of harm reduction initiatives in the USA and worldwide. Naloxone acts rapidly to reverse opioid overdose. Other adjunctive measures such as rescue breathing and cardiopulmonary resuscitation may be required. Prescribing naloxone should be accompanied by standard education for patients and caregivers that includes preventing, identifying, and responding to an overdose.15 16

REGULATORY STATUS OF SYNTHETIC OPIOIDS

Fentanyl and fentalogs approved for clinical use like sufentanil and remifentanil are classified by virtually every drug regulatory agency worldwide as synthetic opioid narcotic drugs. The United States Food and Drug Administration (US FDA) classifies these are Class 2 Schedule drugs, those with known therapeutic effect, but with high potential for abuse. Fentalogs that are produced to evade regulatory scrutiny would be Class 1 Schedule drugs, without known medical use and high potential for abuse.

FENTANYL GEOPOLITICAL ISSUES

Mexican cartels source fentanyl precursors from Chinese suppliers which are finished in Mexico and smuggled to other countries worldwide. This is not exclusively a Chinese matter as India has also emerged as a source of fentanyl and fentanyl precursors, where Mexican cartels have already developed networks for the distribution of synthetic opioid drugs. It is possible fentanyl and precursor production may disperse to other countries in Africa, Indonesia, Myanmar, and the European Union. Estonia has experienced a fentanyl crisis for many years. Fentanyl is frequently mixed with heroin, methamphetamine, or cocaine to increase potency.17 18

Initiatives aimed at regulating the flow of fentanyl precursor chemicals and fentanyl from China has not been successful. China halted cooperation with the United States on combatting drug trafficking in 2022. Hopefully in the future the United States can delink counternarcotics policy through diplomatic channels with the Chinese government and its enforcement from the U.S.-China global rivalry and overall state of mutual relations.19 20
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According to a press release by the American Society of Anesthesiologists (October 2021), approximately 20% of patients who are opioid-naïve before surgery continue to use opioids three months after surgery. This includes all surgical specialties. For some patients, surgery including plastic surgery may create an unintended gateway to long-term opioid use.

PATIENT SAFETY COMMUNICATIONS TO MITIGATE RISK OF FENTANYL OVERDOSE AND DEATH

- We believe that patient safety education concerning the fentanyl crisis is needed. One suggestion would consist of patient education material on your web site and in pre-surgical materials regarding the risks from fake medications that contain fentanyl.
- Instruct patients to only take prescription medications that are prescribed by a physician, physician’s assistant or nurse practitioner. If prescription refills are needed, have this arranged ahead of time and never purchase them on the street, from another person, or over the internet without a prescription. This applies to all types of medications.
- Educate patients to keep all prescription medications in a safe place to prevent children from accidentally taking them or sharing with friends.
- Educate patients regarding how to take prescribed opioid pain medications for an acute event such as an injury or surgery. Patients are advised to destroy unused opioid pain pills when the need to manage pain can be accomplished with non-opioid medications such as ibuprofen or acetaminophen.
- Never trust your own eyes to determine if a pill is legitimate. The only safe medications are ones prescribed by a trusted medical professional and dispensed by a licensed pharmacist.
- Never ask for medication from another person. There is no way to verify if it is safe.
- During the COVID pandemic, many patients have developed mental health issues such as anxiety, sleep disorders, and depression. They are advised to seek medical care from their personal physician. Patients should never self-medicate with mood-altering drugs that are purchased online without a physician, physician’s assistant, or nurse practitioner’s prescription or obtained from another person.
- Plastic surgeons are not trained to treat mental health issues such as depression, anxiety, or sleep disorders. Be forthright with patients requesting prescriptions to treat mental health issues and refer them back to their personal physician for care.
- There are many treatment options for patients who are addicted to opioids including the drug suboxone and drug addiction rehabilitation programs.
- Fentanyl test strips have some benefits but may not be widely available.

PHYSICIAN—NURSING—PATIENT EDUCATION RESOURCES

1. bit.ly/3HqPH2T
2. bit.ly/3WZYLbk
3. bit.ly/3DAe9y9
4. bit.ly/3RmitchZ
5. bit.ly/3YbZLI
6. bit.ly/3iuJFk
7. bit.ly/3l3EQrQ
8. bit.ly/3J0emf
9. bit.ly/3OGKkO
10. bit.ly/3WTonq
11. bit.ly/3Y7Esn
12. bit.ly/3HqwjJl
13. bit.ly/40ikXv
14. bit.ly/3X7uGM
15. bit.ly/3Rh6A30
16. bit.ly/3HsYyw
17. bit.ly/3Yke6f
18. bit.ly/3HsJff
19. bit.ly/3HGKZ0
20. bit.ly/3HGKZ0
21. bit.ly/3X7uHT
22. bit.ly/3WxmMe
23. bit.ly/40CeT1
24. bit.ly/3Q7thg
We’re Not Your Typical Registry.

Previous registries are time-consuming, hard to access, and fail to empower patients with details of their implants and surgical procedure.

Aesthetic One is a quick and easy digital implant registration option, making data accessible to patients and physicians.

Scan the QR code to learn more or register.

Account activation typically requires 1–2 business days. Available to physicians in the US.
Global Alliance for Women Leaders in Aesthetic Plastic Surgery—
Paths to Leadership and Paying it Forward

After noticing how many women were serving in leadership of aesthetic plastic surgery organizations around the world, The Aesthetic Society formed the Global Alliance for Women Leaders in Aesthetic Plastic Surgery in the summer of 2022. Since that time, we held our inaugural panel via webinar in June 2022 with Presidents and President-Elects from six countries, discussing their keys to success and pathways to leadership: theaestheticsociety.org/medical-professionals/meetings/webinars. A live panel of women leaders from 9 countries was held during the ISAPS meeting in Istanbul in September 2022, titled “Leadership in a Multicultural Environment and Why it is Important Now.” A third webinar panel was recently held, January 7, discussing surgeon work/life balance and personal wellness, entitled “How to Stand in Your Power and Avoid Burnout.”

The fourth panel, to be held live during The Aesthetic Meeting 2023, will be presented, and recorded in conjunction with our annual Women Aesthetic Surgeons’ Symposium. As this will be during the final days of Dr. Jennifer Walden serving as President of The Aesthetic Society, it would give her great joy to have all participate. She will moderate a discussion including surgeons and industry professionals focusing on our stories, how each leader got into and ascended in the field, and the how/why it is important to implement the “pay it forward” type of mentorship through individual relationships and programs of companies and associations. This panel will be entitled, “Paths to Leadership and Paying it Forward.”

All are welcome to participate! Registration for optional course S6 required for a fee.
Publish your work in the premier open access journal in plastic surgery.

As part of The Aesthetic Society’s family of journals, ASJ Open Forum offers high-quality clinical content, digital and video innovations, and educational resources for practicing aesthetic surgeons. Your work is published rapidly and disseminated globally.
ASJ and ASJ Open Forum

Current issue of ASJ: https://academic.oup.com/asj/issue/43/1
Current issue of ASJOF: academic.oup.com/asjopenforum/issue/volume/5

INTERNATIONAL COLLABORATIONS

Our team spent a record number of days on the road last year attending conferences and engaging with international colleagues and affiliate partners at various conferences worldwide. We’d 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. We also thank our Premier International Partners: Dutch Society for Aesthetic Plastic Surgery, Norwegian Society for Aesthetic Plastic Surgery, Royal Belgian Society for Plastic Surgery, Spanish Association of Aesthetic Plastic Surgery.

ASJ ON THE ROAD

We were in NY recently for the Beauty Through Science meeting and were excited to meet up with friends, editors, colleagues, as evidenced by these great photos. We attended IMCAS in Paris, France in January (photos to follow!) Drop us a line when you’re attending a meeting or follow us on social media to see where we’re headed next.

SIGN UP FOR E-ALERTS

Ready for regular alerts about ASJ and ASJ Open Forum content? Sign up here for e-alerts and don’t miss a single article: tinyurl.com/mr2rhbaa
On behalf of Editor in Chief, Dr. Foad Nahai, Associate Editor, Dr. Jeffrey Kenkel, and the entire editorial team, we’d like to take this opportunity to thank our partner societies for which ASJ is the official journal of their society.

As seen on the cover of every issue of ASJ, this includes the British Association of Aesthetic Plastic Surgeons (BAAPS), the Canadian Society for Aesthetic Plastic Surgery (CSAPS), and The Rhinoplasty Society.

We encourage all members of The Aesthetic Society to engage with these societies, read articles published by their members, and follow them on social media to learn more.

We are also indebted to our Premier International Partners for their continued support and contributions. We recognize these partners and encourage our members to connect with the international members of these societies as often as they can, especially during plastic surgery conferences. Our Premier International Partners include the Dutch Society for Aesthetic Plastic Surgery (NVCEP), the Kuwait Society of Plastic Surgeons (KSAPS), the Norwegian Society for Aesthetic Plastic Surgery, the Royal Belgian Society for Plastic Surgery, and the Spanish Association of Aesthetic Plastic Surgery (AECEP).

Collaborating with these organizations has helped ASJ grow and become the #1 journal in all of aesthetic surgery. As always, we thank them all for their generous support and contributions.

Dear Dr. Foad Nahai

I heard you were in the final year as Editor in Chief of ASJ a career to which you have dedicated your life. You have made great achievements in the field of plastic and aesthetic surgery and I believe a new stage of your life is coming. Especially, we appreciate your support to the development of plastic and cosmetic surgery in China.

In 2020 At the IMCAS Congress in Paris, I was invited by you for lunch. At this time, we also actively discussed matters related to the initiation of ASJ Chinese Edition, because we shared a common idea: how we could benefit more doctors of Chinese descent.

We are also very pleased that with your strong support, ASJ Chinese Edition has been successfully launched in China for 3 issues so far, and the exciting content of each issue has generated lively discussions in the industry and provided a good learning platform for Chinese doctors. What’s more, issue 4 is in preparation. We are gradually realizing the idea we had at that time.

We have always attached importance to international exchange and cooperation and the sharing of cosmetic surgery knowledge, so since 2017, we have been organizing conferences related to the field of cosmetic surgery, inviting experts, professors and scholars from all over the world to give presentations on the topic, online and offline at the same time, and have received numerous positive comments. It is worth mentioning that the latest 2022 Oriental Aesthetic and Aesthetic and Plastic Art Conference (OAPAC) has received over 1 million views, which is a world record in the field of plastic and aesthetic viewing.

Your blessings for each congress greatly encourage us and make us believe that international academic exchange is the right choice. Through this platform, Chinese plastic surgeons have been able to get to know you and ASJ better, and we have been able to communicate freely and without barriers internationally. Once again, thank you for your support for each of our congresses.

ASJ is the number one journal in the field of cosmetic surgery and provides valuable cutting-edge knowledge to many medical professionals. We are aware of the advanced and scientific nature of ASJ, so we have spared no effort to promote ASJ to Chinese cosmetic surgeons, hoping to spread the knowledge and concepts that ASJ wants to teach around the world.

Thank you again for your support of the development of plastic and cosmetic surgery in China, and we look forward to our next meeting.

Yours Sincerely,
Haiyan Cui
January 12, 2023, China
On December 24, 2021, Shanghai, we launched the Oriental Aesthetic and Plastic Art Conference (OAPAC) and released the Chinese edition of ASJ issue 2 in Tongji Hospital of Tongji University. Over 875 thousand views witnessed our conference.

On December 8th, the Chinese Congress of Aesthetic Medicine in 2017.

On December 20th, the Oriental Aesthetic and Plastic Art Conference in 2019, as the Founding Conference of ASJ Chinese Edition, was held in Zhejiang Conservatory of Music, Hangzhou. More than 1,000 doctors from all over the country and globally renowned experts participated in the event.

On August 13, 2020, Hangzhou, the ASJ Chinese Edition was released with book donation activity at the opening ceremony of the Mevos International Medical Aesthetic Conference. 8,000 participants on site.

On December 23, Shanghai, we held the Oriental Aesthetic and Plastic Art Conference (OAPAC) in 2022 and promoted the Chinese edition of ASJ. Our conference received over 1 million views, which is a world record in the field of plastic and aesthetic viewing.

Kind selfie at IMCAS Congress in Paris in 2020.
Par in January may have been cold, but the educational content, engagement, and global opportunities were hot! With more than 15,000 attendees, Sue Dykema, Executive Director, and Phaedra Cress, Executive Publisher, Journals, greeted international colleagues, including members of The Aesthetic Society and ASJ subscribers during IMCAS 2023. Highlights included forging new relationships with plastic surgeons from around the world and then spending social time with them at the Palais Garnier during the extraordinary IMCAS Gala event. Operatic performances of dance, song, and music entertained guests throughout the evening, making it a magical night to remember.
Sue Dykema, Dr. Sebastian Garson (IMCAS; ASJ Editorial Board member), and Phaedra Cress met in Paris to discuss collaborations between The Aesthetic Society and IMCAS.

Phaedra Cress, Sarah Johnson (ISAPS), Dr. Michel Rouif (SOFCEP), and Sue Dykema.

Phaedra Cress and Sue Dykema enjoying wine, friendship, and a spectacular evening in Paris at the IMCAS Gala.

Dr. Michael Somenek, Phaedra Cress, and Dr. Foad Nahai take a selfie in between the incredible performances at the Gala.

SOFCEP President Dr. Catherine Bergeret-Galley, Sue Dykema, Dr. Steven Cohen, and Phaedra Cress enjoying the IMCAS Gala.

Sue Dykema, Dr. Steven Dayan, and Phaedra Cress at the Palais Garnier during the IMCAS Gala in Paris.
AESTHETIC ONE EXCEEDS 25,000 REGISTERED IMPLANTS

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14K+ patients given permanent access to their implant details
This past year was an important and productive year for the Aesthetic Society's leading technology platform, Aesthetic One. Aesthetic One, an app that allows physicians to register implants with manufacturers, has allowed many leading implant surgeons to streamline their workflow and replace the antiquated hand-written forms and faxes.

"I was slow to get started using it because I don’t like change, and I am not particularly tech-savvy. It was easier just to hope that the fax the circulator sent made it to the manufacturers, which is stupid, because by the third time I used it, I realized how easy it was, and how much better it is for our patients. And now, seeing how much information we get with literally 20–30 seconds, it almost seems immoral not to use Aesthetic One."

—Patricia McGuire, MD

In addition to digitizing the registration process, the Aesthetic One implant library offers a permanent, secure, digital record for both physicians and patients, easily accessible from any device. With Aesthetic One, patients and physicians no longer have difficulty accessing data on previous implants or procedures in the event of a revision, safety alert, or product recall.

"The app is shockingly easy to use and works seamlessly with my practice to track implants, and this is only one small part of what it can do!"

—Melinda Haws, MD

In 2022, the number of physicians actively registering implants with Aesthetic One grew by 68%. With an expanding user base, over 25,000 implants have been registered through Aesthetic One, representing a 61% increase over 2021. Additionally, the development team implemented key improvements to the app’s functionality based on user feedback.

With these fundamental changes and more improvements on the horizon, Aesthetic One is expected to double the user base in 2023, empowering both physicians and patients with permanent access to essential data.

**Recent Aesthetic One Feature Enhancements**

- **Add Fill Amounts for Saline Implants**
  You can now track the fill amount while registering saline implants. These details will be recorded with the op summary and available in your implant library.

- **Track Previously Registered Implants**
  Add past patients to their digital implant library by scanning or manually inputting data from the stickers saved within their practice’s registered implant binder. As a result, patients will receive a digital implant ID card—giving them secure and permanent access to their implant information.

- **Enhance Workflows for Your Group Practice**
  Assign a single staff member to register implants for multiple physicians - the perfect solution for a busy group practice.

- **Comply with FDA Requirement**
  Document FDA attestation of compliance for each patient easily. This past year, the FDA strengthened the safety requirements and updated study results for breast implants.

**Aesthetic One**

Physicians can sign up for Aesthetic One at [www.aestheticone.com/register](http://www.aestheticone.com/register)

Account activation generally takes 1–2 business days.

STAFF can be set up with an account through the app after their physician’s account has been activated.

If you’d like a demo or have questions, email aestheticone@theaestheticsociety.org

**Aesthetic-Connect**

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Skinuva products provide the most advanced topical therapy for scars with Skinuva Scar and now, Skinuva Scar+. Skinuva also provides the best option for long-term, daily treatment of hyperpigmentation with Skinuva Brite as well as a pharmaceutical grade homeopathic supplement, Skinuva Bruise, to reduce bruising, swelling, and pain from surgeries and cosmetic procedures.

Skinuva Scar+ SPF 30 has all the benefits of the original Skinuva Scar but with added non-nano Zinc Oxide for broad spectrum UVA/UVB protection. Skinuva Scar+ has been specifically formulated for areas exposed to the sun such as the face, neck, and hands to minimize the darkening effects associated with sun exposure and help reduce the appearance of redness and hyperpigmentation.

For more information, visit skinuva.com or contact us at orders@skinuva.com.
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!
These companies GO BEYOND with us…

The Aesthetic Society’s

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PatientFi.

REVANCE AESTHETICS.

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Working together to 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 among qualified plastic surgeons.

Support our Industry Partners and consider using their products in your practice.
The Aesthetic Society’s Leadership Training class of 2022–2023 completed two weekends together, learning new tools and techniques to help them excel as leaders. The curriculum covered topics such as conflict management, consensus building, situational leadership, tools for improved communications, media training, personality profiles, and so much more! Participants expressed their gratitude not only for the skills they learned but also the new friendships formed.

Special thanks to Allergan Aesthetics, Galderma, and MTF Biologics for their support of the program. The opportunity to build personal relationships with our industry partners strengthens our ability to innovate and provide exceptional care to our aesthetic patients.

The next Leadership Training program will be offered later in 2023 and is open to any Active or International Active Member. There are a limited number of slots available, and an application is required. Watch for information about the training session coming later this summer!

“A fantastic day. Really focused on topics that will allow me to grow as a leader.”

Media Notes and Quotes

HARPER’S BAZAAR
Injectables of the Future
Excerpt: While you’ve perhaps seen headlines forecasting the fall of fillers—and a wave of celebs allegedly dissolving their plumped lips and cheeks—the numbers tell a different story. If statistics reflect societal preferences, the demand for injectables has never been greater. To wit, more than 1.8 million filler procedures were performed in the United States in 2021, per The Aesthetic Society. Only muscle-relaxing neuromodulators, like Xeomin, outrank fillers on the nonsurgical charts—a trend we’ve seen, year over year, for as long as anyone’s been tracking treatments.

ABC NEWS
Buttocks enhancement procedures can cost thousands, health issues
Excerpt: Quinterni shared her story with ABC News, which eventually included traveling to Colombia to have the material that had been injected into her buttock partially removed. In 2021, U.S. doctors conducted more than 61,000 butt augmentation procedures, according to statistics from The Aesthetic Society, a figure that is up more than 37% from the year prior. The FDA warns that “injectable silicone, can be dangerous and can cause serious injury or even death.” And while a Brazilian Butt Lift surgery, which uses a fat transfer, isn’t illegal it still can be dangerous. The Aesthetic Surgery Journal says that the BBL has the highest death rate of any cosmetic surgery.

THE ZOE REPORT
'Peel Season' Is Upon Us — Here’s How To Find The Right One For Your Skin
Excerpt: Why all the fuss over chemical peels, you ask? Well, as it happens, these skin-shedding treatments are especially buzzy due to their ability to do quite a bit of heavy lifting. In fact, the number of “skin treatments,” including chemical peels, performed between 2020 and 2021 increased by 37% and remained the third most popular, non-surgical skin procedure category according to annual reporting by The Aesthetic Society.
At Allergan Aesthetics, an AbbVie company, we develop, manufacture, and market a portfolio of leading aesthetics brands and products. Our aesthetics portfolio includes 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.

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Merz Aesthetics is a medical aesthetics business with a long history of empowering healthcare 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.

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Galerma is the pure-play dermatology category leader, present in approximately 90 countries. We deliver an innovative, science-based portfolio of premium flagship brands and services that span the full spectrum of the fast-growing dermatology market through Injectable Aesthetics, Dermo-Cosmetics and Therapeutic Dermatology. Since our foundation in 1981, we have dedicated our focus and passion to the human body’s largest organ—the skin—meeting individual consumer and patient needs with superior outcomes in partnership with healthcare professionals. Because we understand that the skin we’re in shapes our lives, we are advancing dermatology for every skin story.

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

NewBeauty is the authority on beauty and the trusted resource for the most affluent and influential beauty consumer. The only brand dedicated 100% to beauty with more than 5x the beauty editorial of any other publication, NewBeauty dives deep to provide valuable information, founded in research and vetted by experts, empowering women to make better beauty decisions.

With almost 20 years as the leaders in the aesthetics industry, NewBeauty provides board-certified plastic surgeons with the ability to reach their ideal, treatment-seeking patients through a proven 360-degree marketing platform of print, digital, social media and press opportunities. 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 AuraClenz® and BIOCORNEUM® the #1 performing, preferred and recommended scar gel of plastic surgeons (data on file.)

For information on the products and services offered by industry, please contact the companies directly, and let them know you are an Aesthetic Society member!

Thank you Industry Partners!

The Aesthetic Society thanks all of our industry partners for their ongoing support and collaboration.

The Aesthetic Society’s partnership program provides industry with strategic benefits and opportunities to collaborate with Aesthetic Society members. Working together to support our mission to advance the science, art, and safe practice of aesthetic plastic surgery and cosmetic medicine through education, research, and innovation.

A special thank you to Founding Premier Partner, Sientra.
For information on the products and services offered by industry, please contact the companies directly, and let them know you are an Aesthetic Society member!

Applied Medico-Legal Solutions Risk Retention Group, Inc (AMS RRG), a medical liability company, has recently 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. For more information about AMS RRG please contact Christopher Edge 609-737-1154 ext 301.

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.

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.

New Alliance Partner

Evolution

Evolus is evolving the future of performance beauty. With a passion for precision aesthetics, we deliver the science of natural looking results designed for the art of injection technique. Our forward-thinking digital tools for the aesthetics market revolutionize the relationship between injectors and patients.

Visit us at Booth #3049 at the Aesthetic Meeting in Miami Beach to learn more about growing your practice and Evolve with us!

New Alliance Partner

IN MODE

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, ENTs and ophthalmologists.

www.inmodemd.com

MyEllevate®

The MyEllevate® innovation is a minimally invasive facial rejuvenation solution that offers natural and long-lasting results. It can be used as a standalone procedure or combined with energy-based skin tightening technologies. The MyEllevate® technique utilizes the ICLED® Suturod®, the first and only patented light-guided technology for facial cosmetic procedures, to accurately place sutures without incisions. It takes approximately one hour to perform with a one-time use disposable system. The MyEllevate® solution offers fast recovery and restores a youthful appearance with long-lasting results. For more information, please visit www.cynosure.com/myellevate.

New Alliance Partner

Guard Medical is the company behind NPseal, a breakthrough, ultra-portable negative pressure wound therapy (NPWT) dressing that does not require batteries and tubes. We are an innovation-driven company focused on creating easy-to-use and cost-effective solutions that enable prophylactic use of NPWT on closed surgical incisions. By making this therapy more accessible, Guard Medical is helping to advance medical care and improve patient quality-of-life with faster, smarter healing.
INDUSTRY PARTNERS

PatientFi

PatientFi is the friendly way to pay over time for aesthetic procedures and treatments. By removing the cost barrier, patients can conveniently pay for their procedures on a friendly monthly plan. PatientFi offers zero-interest promotional financing and fixed-rate options with APRs as low as 6.99%. As part of PatientFi’s Alliance Partnership with The Aesthetic Society, we offer exclusive special pricing to all members—which means you enjoy more benefits at a lower cost and more patients can afford the treatments they desire. To learn more visit patientfi.com or call 949-441-5484.

Revance

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 DAXXYIFF™ (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 DAXXYIFF™ in two debilitating conditions, cervical dystonia and upper limb spasticity.

Senté

Senté’s Cysteamine HSA Pigment & Tone Corrector is a new product designed to safely and effectively target pigmentation in all skin tones.

This product brings together two powerful, proven technologies—Senté patented Heparan Sulfate Analog (HSA) to control inflammation that fuels hyperpigmentation, along with Cysteamine HCl, to restore a visibly even complexion to all skin tones without risk of excessive lightening. The hydroquinone-free formula is safe for long-term use and gentle enough for all skin types including dry or sensitive skin.

In a randomized, double-blind clinical trial of 35 subjects with moderate to severe hyperpigmentation, Senté Cysteamine HSA Pigment & Tone Corrector demonstrated a 71% overall reduction in dark spots, while 94% of subjects showed improvement in hyperpigmentation at 16 weeks.

For more information regarding this new innovation from Senté, or to become a Senté partner, contact us at info@sentelabs.com.

Symplast

Since its creation by a plastic surgeon with an adjoining medical spa, Symplast EHR has focused on mobile technology that changes the way providers present their services and the way that patients manage their health care. Using cutting-edge cloud technology, Symplast’s tools are available on computers, tablets, and smartphones, creating a necessary work-life balance for doctors as they access the clinical, financial, and operational data of their business at any time, from any place. We support clients by presenting them with their data, enabling their practice to make informed decisions and provide smarter care. Empowering both practice and patient to know, manage, and engage with one another, Symplast is disrupting the aesthetic industry and transforming the way healthcare is delivered. Our mission is to continue to provide intuitive and innovative tools and solutions that will adapt to meet the ever-changing landscape of healthcare and the needs of today’s aesthetic patient. Symplast knows that your workflows become your patient experience.
Introducing the NEW RADAR

We’ve taken RADAR to the next level with a new mobile app – offering all the content you love right at your fingertips. Enjoy a fresh design and enhanced features across all platforms! Access to your favorite content is just a few taps away.

Download the iOS or Android app(s) by searching “RADAR Resource” in the store.
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 Founding Premier Partner, Sientra and Alliance Industry Partners MyEllevate by Cynosure and Symplast for their continued support.

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

**Founding Premier Partner**

**sientra.**

Sientra Announces Launch of Viality,” A Novel Fat Transfer System

Fat transfer, a procedure used to relocate fat from one area of the body to another where volume is desired, has increased in popularity in recent years and is used in both breast reconstruction and augmentation procedures, as well as across other body areas such as the buttocks, hands and face. Despite fat transfer’s growing popularity, physician satisfaction with the currently available fat transfer systems on the market is low.1 Developed by researchers at Harvard and Massachusetts General Hospital, the Viality system solves this market need. 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. In addition, the design enables gentle fat mixing to protect viable fat cells from damage and a super absorbent foam layer that removes unwanted fluids and maximizes the concentration of fat. The device also has the capability of processing from 50 to more than 1000cc in a single run.

“As the first-of-its-kind technology, Viality will escalate the standards for fat transfer across the industry,” said board-certified Plastic Surgeon Dr. Brad Calobrace, who is a principal investigator for the ongoing Viality clinical study. “Viality has brought innovation and intention together in the operating room. The use of this system has revealed a new, extraordinary approach to fat transfer, providing better predictability and results for my patients.”

Studies have shown that Viality produced an average of 94% cell viability and 89% average fat concentration with low processing time and increased volume for reinjection.2 In addition, the AuraClens concentrating wash was shown in a 20-patient study to improve fat retention by more than 31% compared to saline rinse.3

“At Sientra ‘good’ has never been enough and we are thrilled to be able to offer plastic surgeons, and their patients, this new innovation that will elevate the standards of plastic surgery and the entire fat transfer category,” said Ron Menezes, President and CEO of Sientra. “We believe that the launch of Viality will significantly increase Sientra’s addressable TAM and add meaningful top-line revenue growth in 2023 as we initially target the breast reconstruction and augmentation market while looking to expand into other body areas.”

*Data on file

**References**

1. Sientra Fat Grafting Study April 2022
3. Data on file. In-vivo comparison of gluteal augmentation, P188 vs saline wash. P188 cohort achieved average retention of 71% of volume at 1 year vs 40% for saline wash.

A Breakthrough Approach to Enhancing the Jawline with MyEllevate

Dr. Adam Rubinstein, MD, FACS

Since the popularity of fillers and non-invasive anti-aging solutions swept the cosmetic dermatology and surgical industry in the nineties, there has been a strong trend of patients pushing back on the traditionally invasive procedures such as a full face or neck lift, which require significant downtime to recover post-op, and which create tell-tale scars, swelling, redness and other markers of work having been done for an extended period, post-op. Today, patients are more and more in favor of non-invasive treatments, “lunchtime lifts,” “the Hollywood jawline,” and options for facial rejuvenation and a sculpted jawline, that don’t require the time commitment (or the stitches) that a traditional face or neck lift would.

When the MyEllevate procedure came on the scene, it radically altered the options available to patients around the world. The technique provides similarly long lasting and life enhancing results, without the stitches or the lengthy recovery time of a more invasive facelift or neck lift.

The MyEllevate procedure has understandably taken the plastic surgery world by storm. Surgeons rushed to quickly adopt the technique, to satisfy the requests and fast-growing wait lists of their patients demanding the procedure.

One such surgeon, Dr. Adam Rubinstein, MD, FACS, who runs his own thriving practice in Miami, Florida, promptly added the MyEllevate procedure to the services offered by his own practice and has seen the tremendous growth and influx of patients that the technique has contributed to his practice.

“For the longest time there was nothing to offer patients who were not entirely ready for a facelift or neck lift, but still wanted to

Continued on Page 61
HIDALGO™
SUBMENTAL FACE LIFT RETRACTOR

Ideal Exposure For:
- Caudal aspect of platysmal plication.
- Low transverse platysmal division.
- Anterior cervical defatting and hemostasis.
- Medial SMAS dissection and fixation.

Retractor Features:
- Curved side wings expand visualization
- Fiberoptic endpoint elongates the optical cavity
- Polished Surfaces enhance illumination

ASL.ABR90626
55 x 12mm wide blade w/ Wings, Fiber Optics &
Universal Adapter

ASL.ABR90426
55 x 12mm wide blade w/ Wings, Without Fiber Optics &
Universal Adapter

Designed By:
David A. Hidalgo, M.D.
Clinical Professor of Surgery
Cornell University Medical College
New York, NY
improve their neck. The choice used to be, have a facelift or wait to have a facelift. With MyEllevate, I have a solution to offer those “in-between” patients. I started doing MyEllevate procedures years ago, and never looked back. The improvements are impressive. Doing the procedure is straightforward. It’s a no-brainer for anyone who sees a lot of patients for facial rejuvenation,” Rubinstein says of MyEllevate.

Rubinstein, who has performed thousands of surgical procedures, has personally performed more than 200 MyEllevate procedures on his patients, and seen tremendous results and patient satisfaction that has come from the procedure. Dr. Rubinstein, who is board certified by the American Board of Plastic Surgery, is an award-winning plastic surgeon whose skills are sought out by patients from around the world.

When asked who is the ideal candidate for a MyEllevate procedure, Dr. Rubinstein says “The ideal patient for MyEllevate is someone who has a little excess fat under their chin and a small amount of sagging. MyEllevate is equally effective for men and women of any age. Younger patients typically have firm skin, so ideally the patient would be younger with firm skin. In cases where the patient has some skin laxity, a skin firming procedure can be done at the same time. MyEllevate is easy to pair with skin firming procedures”.

In addition to volumes of happy patients who are rapidly spreading positive word-of-mouth about their experiences and results from the MyEllevate procedure, plastic surgeons consistently report that when they begin offering the procedure, the addition to their offered services, results in a notable boost in their business.

“MyEllevate has expanded my facial rejuvenation practice by allowing me to treat patients that I would have turned away years ago,” Dr. Rubinstein says. "Lots of patients don’t like early signs of aging in their neck. They might not be ready for a neck lift or facelift, but don’t want to accept the changes they see. MyEllevate provides a simple way to rejuvenate aging of the neck without big incisions. I’m now able to turn back the clock for my patients in less than two hours under local anesthesia. Patients are happy since they can avoid a larger, more costly procedure. I’m happy because I can provide an option for my patients that achieves a significant improvement without having to do a facelift or neck lift.”

When asked what the single biggest positive result of having made the decision to add the MyEllevate procedure to the services he offers to patients of his thriving Miami, FL. practice, Rubinstein confidently answers: “MyEllevate gives me an option for my patients who aren’t ready for a bigger procedure, that still achieves great improvement.”

Without a doubt, the MyEllevate procedure’s status and popularity in the cosmetic surgery world is well positioned to continue to grow.

©2022 Cynosure, LLC. All rights reserved. Cynosure, LLC. The MyEllevate® Surgical Suture System is intended for use in soft tissue approximation and elevation of sub dermis and underlying muscle. Like all medical procedures, not all patients are suitable for the treatment. Talk to your medical provider about the risks and benefits of this procedure. A qualified practitioner is solely responsible for evaluating each subject’s suitability to undergo treatment and for informing those being treated about any risks involved with the treatment, pre- and postoperative care, and any other relevant information. Individual results may vary and are not guaranteed. Dr. Rubinstein is a paid consultant of Cynosure, LLC.

PRD-0301

Symplast is the #1 Mobile EHR & Practice Management Solution for the Medical Aesthetics Industry
Symplast is proud to announce the renewed support of The Aesthetic Society, and the industry, for the 3rd year in a row as Alliance Industry Partner. We collaborate with a strong community of experts, innovators, and pioneers to move the industry forward. Symplast delivers the 21st century solution that the aesthetics industry has been waiting for! Not just another EHR, Symplast is a mobile and comprehensive solution that gives practices secure access to your practice anywhere, at any time, on any device.
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OPEN FORUM

ASJ Open Forum is the premier open access journal in aesthetic surgery. Fund your publications with our open access initiatives.

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Academic publishing is evolving and now authors can publish in open access journals without cost, if their institutions participate.

Find out if your institution participates: http://bit.ly/ASJOFReadandPublish

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The Aesthetic Society

asjopenforum.com

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OXFORD UNIVERSITY PRESS
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.

Fact: Many Society leaders and members are not members of ASPS. The Aesthetic Society is the premier aesthetic society, dedicated solely to aesthetic education, and we don’t require membership in any other organization in order to become an Aesthetic Society member. As long as you meet our requirements, you can apply for membership today!

Myth: One must document a minimum count of aesthetic cases to apply.
Fact: While applicants are asked to complete a case log questionnaire, there is no case minimum. Many applicants also perform reconstructive surgery. One’s practice does not need to be 100% aesthetic to apply and be accepted into membership.

Myth: One must attend an Aesthetic Society meeting to become a member.
Fact: This used to be the case. However, in order to streamline the application process, this requirement was recently removed!

Myth: One must be a member of ASPS to be a member of The Aesthetic Society.

Myth: One must document a minimum count of aesthetic cases to apply.
Fact: While applicants are asked to complete a case log questionnaire, there is no case minimum. Many applicants also perform reconstructive surgery. One’s practice does not need to be 100% aesthetic to apply and be accepted into membership.

Online Application
Complete your application from start to finish 100% online theaestheticsociety.org/membership
ASERF
Mission

**Identify** and pursue those issues relevant to **advancing** the **safety** & effectiveness of **aesthetic medicine** through **independent** unbiased, directed **research** and **groundbreaking education**.
S

pring, the season of rebirth and renewal, is upon us. The days are longer, the weather warmer and with each passing day, it is a little less gray.

At SurReal Blackberry Farm, the place I call home, it couldn’t be more evident that spring has sprung. The vines are showing new growth, indicating a bountiful summer harvest, and like the farm, ASERF is springing to life, promising a brighter future.

In this edition of ASN, please take a few minutes to read about ASERF’s current and upcoming activities:

• ASERF celebrates its 30th Anniversary
• ASERF’s 30-Year Impact Report
• The VIP Campaign
• ASERF launching its new website
• Dr. Sherrell J. Aston becomes the newest President’s Circle member
• 10th Annual ASERF Silent Auction
• Raise Cash for Research

Something that everyone looks forward to each year is The Aesthetic Meeting. If you haven’t done so, register for the meeting and reserve your hotel room now. Once that’s taken care of, be sure to include the following items on your check list:

• Register for ASERF’s Premier Global Hot Topics (course S12 on Thursday, April 20)
• Listen to your peers evaluate techniques currently in the patient spotlight and learn how to separate hype from reality.
• Attend ASERF’s Spotlight on Research (course S9 on Thursday, April 20)

Investigators provide updates on their ASERF-funded research studies—lunch included!

• Celebrate with ASERF—On Saturday, April 22, at 4:00PM EDT, ASERF Donors are invited to sip some champagne in the ASERF booth to celebrate The Foundation’s 30th Anniversary
• Visit the ASERF booth to check out the new website
• Stop by the ASERF lounge and write your research ideas on our wall
• Raise money for ASERF by having your badge scanned by companies participating in “Raise Cash for Research”
• Bid on items in this year’s Silent Auction (see pages 11 and 13)

Also taking place at The Aesthetic Meeting 2023, as is done every spring, is the installation of the Board of Directors. It has been a privilege and honor to serve The Foundation. Volunteering is a rewarding experience and I have had the great fortune to work alongside friends and colleagues who I both admire and respect.

I’ve heard from my predecessors that the year following my presidency could be a shock to my system. There will be fewer calls, fewer committee assignments, fewer opportunities to make an impact on an organization I have come to enjoy.

Instead, The Foundation will once again, like the farm, nurture new growth and create new opportunities with the goal of having a bountiful harvest.

On a personal note, I would like to extend my sincere gratitude to my entire ASERF Board, to The Aesthetic Society President Jen Walden, our Executive Director Sue Dykema, Courtney Muehlebach and Tom Purcell for the incredible work and assistance in helping guide The Foundation this past year. I am likewise deeply appreciative of the love and support extended by my plastic surgery family following a recent family tragedy. I am humbled and forever grateful.

Bruce W. Van Natta, MD is an aesthetic plastic surgeon practicing in Indianapolis, Indiana, and serves as President of ASERF.

ASERF to Honor
James M. Stuzin, MD and John B. Tebbetts, MD in Miami Beach

The Foundation is proud to announce that not one, but two influential surgeons will be receiving the 2023 ASERF Career Achievement Award. Join us on April 22 in Miami Beach as we honor James M. Stuzin, MD in his hometown, and posthumously recognize John B. Tebbetts, MD, for their contributions to our specialty.

The Career Achievement Award is bestowed upon a plastic surgeon for their significant contributions and commitment to aesthetic plastic surgery. Drs. Stuzin and Tebbetts have dedicated themselves to the specialty and have significantly influenced all of our careers. It is privilege to include them both with the other esteemed Career Achievement Award honorees.

PREVIOUS HONOREES

2022  Sherrell J. Aston, MD
2019  Robert Singer, MD
2018  Scott Spear, MD (posthumous)
2017  Thomas Baker, MD and Simon Fredricks, MD
2016  Gilbert P. Gradinger, MD
2015  Foad Nahai, MD
2014  Luis O. Vasconez, MD
2013  Fritz E. Barton, Jr., MD
2010  Thomas D. Rees, MD

As a member of their Medical Advisory Board, Dr. Patricia McGuire requested that in lieu of receiving an honorarium, the money go to ASERF. The ASERF Board is incredibly grateful for the generosity of Dr. McGuire and IC Surgical, Inc.
FOUNDATION NEWS

Members To Vote on Slate of Candidates

Active members of the Aesthetic Surgery Education and Research Foundation (ASERF) will hear reports on Foundation business and elect new officers for 2023–2024 during the Aesthetic Society/ASERF Annual Business Meeting Luncheon. All Active Members are invited to attend on Saturday, April 22, 2023 at 12 noon during The Aesthetic Meeting 2023 in Miami Beach, FL.

PRESIDENT (automatic from President-Elect)
Caroline A. Glicksman, MD, MSJ
Sea Girt, NJ
Private Practice; Assistant Clinical Professor of Surgery, Hackensack Meridian School of Medicine
Current ASERF Board Position: President-Elect
Current Aesthetic Society/ASERF Committee Work: ASERF Executive Committee, Traveling Professor Program, ASJ Editorial Board, ASJ Open Forum, Editorial Board, ASERF Finance & Investment Task Force, Informed Consent Task Force (Chair), ASERF Scientific Research Committee (Co-Chair), Aesthetic One Committee, RADAR Resource Editorial Committee, and The Global Alliance for Women Leaders in Aesthetic Plastic Surgery
National Affiliations: The Aesthetic Society, ASERF, ASPS, ISAPS, AAAASF
Training: Mount Sinai Hospital: NY General Surgery, Plastic Surgery: New York Hospital, Cornell Medical Center, Memorial Sloan Kettering Cancer Center, Aesthetic Fellowship Massachusetts General Hospital, and Newton Wellesley Hospital
ABPS Certification: 1994

PRESIDENT-ELECT
Onelio Garcia Jr., MD, FACS
Miami, FL
Private Practice; Vol. A Professor: Division of Plastic Surgery, University of Miami, Miller School of Medicine
Current ASERF Board Position: Vice President
Current Aesthetic Society/ASERF Committee Work: ASERF Executive Committee, Application Review Committee, Gluteal Fat Grafting Task Force, ASERF Scientific Research Committee, ASERF Membership Committee, and ASERF Finance & Investment Task Force
National Affiliations: The Aesthetic Society, ASERF, ASPS, ISAPS, SESPRS, and FSPS
Training: University Hospital, Jacksonville, University of Florida
ABPS Certification: 1986

SECRETARY
(2 year term)
Gabriele C. Miotto, MD
Atlanta, GA
Private Practice; Adjunct Associate Professor of Plastic and Reconstructive Surgery, Emory University
Current ASERF Board Position: Secretary
Current Aesthetic Society/ASERF Committee Work: ASERF Executive Committee, Radiant Resource Editorial Committee (Editor), ASJ Open Forum Editorial Board, ASERF Aesthetic Research Community Task Force (Chair), ASERF Membership Committee (Chair), ASERF Mollenkopf Breast Reconstruction Fund Grant Review Committee, and The Global Alliance for Women Leaders in Aesthetic Plastic Surgery
National Affiliations: The Aesthetic Society, ASERF, ISAPS, SESPRS, ISAPS Assistant National Secretary
Training: Federal University of Rio Grande do Sul, Emory University School of Medicine, Atlanta, GA; University of Illinois at Urbana, Champaign, IL
Brazilian Medical Board: 2007

VICE PRESIDENT (1 year term)
Patricia A. McGuire, MD
St. Louis, MO
Private Practice
Current ASERF Board Position: Treasurer
Current Aesthetic Society/ASERF Committee Work: ASERF Executive Committee, Ethics Committee, Bill Task Force, Informed Consent Task Force, Traveling Professor Program, ASERF Scientific Research Committee, ASERF Finance & Investment Task Force, ASERF Fund Development Committee (Chair), and The Global Alliance for Women Leaders in Aesthetic Plastic Surgery
National Affiliations: The Aesthetic Society, ASERF, AMWA, ASPS, and AWS
Training: St. Louis University, University of Missouri, Kansas City; Washington University; St. Louis University
ABPS Certification: 1993

TREASURER (1 year term)
David A. Sieber, MD
San Francisco, CA
Private Practice
Current ASERF Board Position: Director
Current Aesthetic Society/ASERF Committee Work: ASERF Board of Directors, ANN Committee, Aesthetic One Committee, Program Committee, ASJ Open Forum Editorial Committee, ASERF Scientific Research Committee (Co-Chair), and ASERF Finance & Investment Task Force
National Affiliations: The Aesthetic Society, ASERF
Training: Loyola University Medical Center, University of Minnesota, University of Texas Southwestern
ABPS Certification: 2018
Completing term vacated by Dr. Patricia McGuire

DIRECTORS (2 year terms)

Camille Cash, MD
Houston, TX
Private Practice
Current Aesthetic Society/ASERF Board Position: Aesthetic Society Parliamentarian
Current Aesthetic Society/ASERF Committee Work: ASERF Externship Program Task Force (Chair), Media Relations Committee, and Inclusion and Diversity Committee
National Affiliations: The Aesthetic Society, ASERF, ASPS
Training: Baylor College of Medicine; St. Joseph Medical Center, Houston, TX
ABPS Certification: 2014

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Thank You ASERF President’s Circle Members!

William P. Adams Jr., MD
Sherrell J. Aston, MD
Mark T. Boschert, MD
M. Bradley Calobrace, MD
Sepehr Egari, MD
Dr. and Mrs. Julio Garcia
Caroline A. Glicksman, MD, MSJ
Dr. and Mrs. Joe Gryskiewicz
Daniel A. Hatef, MD
Dr. and Mrs. Jeffrey Kenkel

Luis López Tallaj, MD
Patricia McGuire, MD
Dr. and Mrs. Dan Mills
Susan and Steve Mollenkopf
Dr. and Mrs. James Payne
Dr. and Mrs. Luis Rios, Jr.
Dr. and Mrs. Robert Singer
Douglas S. Steinbrech, MD
Dr. and Mrs. Louis L. Strock
Bruce W. Van Natta, MD

Who will be next?

Join your colleagues and support aesthetic surgery research and education.
Scan the code above to donate to ASERF today!
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? Reach out to contact@aserf.org

Supported by:

- **The Aesthetic Surgery Education and Research Foundation**
- **MENTOR**
In the summer of 1992, then-Vice President, Robert Singer, MD, led The Aesthetic Society’s strategic planning session which included five areas of unmet needs:
- Aesthetic surgery research
- Professional development for office staff
- Educational programs for non-physicians
- Access to information for those interested in plastic surgery as a profession
- Recognition for members who volunteer and donate their time, money, and expertise

Taking place simultaneously, several members wanted to support The Society’s efforts and began sending donations to strengthen the organization. Ultimately, the donations were returned as The Aesthetic Society is not eligible as a 501(c)(6) tax-exempt organization.

Recognizing the unmet need along with a potential revenue stream, the Strategic Planning Committee recommended forming a 501(c)(3) organization to fill the void in plastic surgery. On September 20, 1992, the Board of Directors approved a plan and directed the attorney to officially file with the IRS.

April 20, 1993 (Patriot’s Day), with an approved IRS application, Simon Fredricks, MD; Robert Singer, MD; and Bob Stanton, then Executive Director, outlined the organization’s details:

- The aim—Advance the practice of aesthetic surgery and provide for the enhancement of patient and public welfare, research, public service, public education, plastic surgery education, and enhance the public image of the profession.

Over time, the mission may have changed but the accomplishments are none-the-less impressive:
- $2,500,000+ invested in aesthetic surgery research
- 250+ research studies funded
- 20+ President’s Circle donors (*) (**)
- 1350+ annual members

This April, during The Aesthetic Meeting 2023, ASERF will have officially existed for 30 years. In celebration of this milestone, its accomplishments and impact on the specialty, ASERF will host a small reception inside The Aesthetic Society booth on Saturday, April 22 at 4pm EDT. You are invited to visit the ASERF Booth, located within The Aesthetic Society booth, or the ASERF Lounge, and learn more about applying for a grant, the most recently funded studies or how you can make a difference by supporting the mission of The Foundation by becoming a member of the President’s Circle.

* Indicates a cash gift of $50,000 or a legacy gift of $100,000 provided through your will, trust, or life insurance policy
** Gifts of cash can be made via pledge and paid over 60 months, or transfer of equities

ASERF is a 501(c)(3) charitable organization and donations are tax-deductible. Cash, equities, intellectual property as well as real property can be donated in any amount. ASERF can also be listed as a beneficiary in your trust and/or last will and testament. To inquire about ASERF’s President’s Circle or other donor levels contact Director of Development Tom Purcell, CAE at tom@aserf.org.
Do you have a great research idea?

SHARE. CONNECT. LAUNCH.

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, Associates and Residents

HOW DO I JOIN?

• Scan the QR Code

• Complete the brief form

• A member of the ARC Committee will contact you
World-renowned double board-certified plastic surgeon, educator, professor, author, businessman, and Past President of The Aesthetic Society, Sherrell J. Aston, MD, becomes ASERF’s newest major donor and member of The President’s Circle.

Dr. Aston has been conducting Plastic Surgery research for nearly 50 years. His foray into research occurred while he served as Chief Resident at New York University. He and Chlom Williams MD, a plastic surgery fellow at NYU from Australia investigated the impact of blood within the breast implant pocket and fibrous capsular contracture in baboon models. The study was published in PRS. Since then, Dr. Aston has continually improved his own practice through clinical research. “Over the years, I have studied facial and nasal anatomy with the emphasis on the direct clinical application to surgical techniques for improved aesthetic results,” he shared. “More recently, I have been studying the benefits of advanced radiofrequency technology for facial rejuvenation as a stand-alone procedure or used concomitantly with surgical techniques.”

Globally, Dr. Aston is considered one of the developers of modern facelift techniques, and an expert in closed rhinoplasty and blepharoplasty. “ASERF-funded research has had a huge impact in multiple areas of our great specialty in terms of improved techniques, patient outcomes, and patient safety. Making a sizeable donation to assist those efforts was an easy decision.”

Dr. Aston recognizes all fields of medicine are rapidly changing, including aesthetic plastic surgery. “In terms of technology, artificial intelligence, techniques, medications, patient contact, patient experience, and patient expectations are racing forward at an unprecedented pace. It is necessary that board-certified plastic surgeons, members of The Aesthetic Society, and ASERF are at the forefront of every aspect of research.”

Upon reviewing the complete list of studies supported by The Aesthetic Surgery Education and Research Foundation (ASERF), Dr. Sherrell Aston, declares every plastic surgeon and millions of patients have benefited from ASERF’s investment in aesthetic surgery research. “I wholeheartedly urge all my plastic surgery colleagues to financially support ASERF so that they may continue to fund groundbreaking studies and investigate the fundamentally important initiatives that are important to our specialty. Your donations will assure the continuation of the superb projects that give us currently usable knowledge, and which will help lay a stronger foundation for the next generation of colleagues and their patients.”
Several years ago, we developed the ‘Train with an Expert’ experience as part of the ASERF Silent Auction. There has always been a need for practicing plastic surgeons to have practical and intimate educational experiences, and our Aesthetic Society members were looking for ways to support our Foundation. Since then, we have had many members support the Foundation by hosting these ‘Train with an Expert’ experiences and many plastic surgeons have embraced the concept and had enriching educational experiences. At the Plastic Surgery Clinic in Mississauga, Canada, Drs. Frank Lista, Ryan Austin, and I have participated as ‘Train with an Expert’ hosts since the inception of the program and have had the honor of spending time with so many wonderful colleagues and sharing our experience and exchanging ideas. Additionally, we have made many great friendships as a result.

I would encourage attendees of the Aesthetic Meeting 2023 in Miami Beach, to look at the ‘Train with an Expert’ experience to support ASERF and avail of this unique and incredible educational experience.

Most recently, we hosted several Aesthetic Society member plastic surgeons.

Dr. Moneer Jaibaji of Coronado, CA, generously donated to ASERF for the opportunity to visit our practice. “In May of this year, I was fortunate to have won a bid on the ‘Training with an Expert’ ticket, and in doing so, donating to ASERF. In the following months I planned for my trip to Toronto, where I would visit The Plastic Surgery Clinic and meet Drs. Frank Lista, Jamil Ahmad, and Ryan Austin. There I had a surreal experience; one I would describe as incredible and quite enriching. I was gifted a copy of the book Secondary Rhinoplasty by the Global Masters, which was signed by Dr. Ahmad, the co-editor. While there I was shown new research regarding subfascial breast augmentation, drainless abdominoplasty, vertical breast lift, and several other cosmetic procedures. I am very pleased with the donation I have made and delighted by the experience I had at The Plastic Surgery Clinic.”

Dr. Brannon Claytor of Bryn Mawr, PA, also supported the Foundation and participated in the ‘Train with an Expert’ experience.

“One of the greatest things about The Aesthetic Society is the ASERF-sponsored ‘Train with an Expert.’ It is a great opportunity to spend time with a leader in our field and learn finesse surgical techniques which can elevate your own performance. I am constantly telling residents and staff, ‘our pursuit of perfection is relentless and the pathway to satisfied patients is through continued education.’

“ASERF ‘Train with an Expert’ enables me to continue my education in the pursuit of perfection. Every year I attend The Aesthetic Meeting and look forward to seeing who are the featured ‘Train with an Expert’ host surgeons. This year I selected Drs. Jamil Ahmad, Frank Lista, and Ryan Austin in Toronto to spend a few days seeing how they run an efficient and all-star office. I especially enjoyed being in the operating room with Dr. Ahmad and seeing the nuanced surgical technique of his tummy tuck, breast augmentation, mastopexy, and rhinoplasty surgeries. It was like a master class on steroids! We also attended a Toronto Maple Leafs game! I would recommend this opportunity to surgeons at every level of their career.”

Dr. Dan Hatef won the bid to train with Drs. Bruce Van Natta and William P. Adams Jr. at the Aesthetic Meeting 2022.

“Aesthetic plastic surgery is rapidly evolving, and so keeping up requires not only diligent reading and conference attendance but visiting with the experts. My practice has been trending towards a lot more rhinoplasty and face; but I still do some breast and body and don’t want to fall behind on the learning curve. I was lucky enough to win an observership with Drs. Bruce Van Natta and Bill Adams. Observing what they’re doing live in the...
Train with an Expert
Continued from Page 72

operating room helped me shore up my game below the neck and solidify how I’m using meshes in plastic surgery of the breast.”

Dr. David Janssen won the bid to train with Dr. Kiya Movassaghi. “I had the opportunity to participate in the ASERF auction and win a couple of days with Kiya and Niloo. Additionally, I spent time with Niloo (who is the Practice Manager) drilling down into how they run the business side of their practice. There are always things to learn from the best in their field and we experienced incredible hospitality and found them quite open to the nitty gritty of their success. The time in the operating room was a three-way conversation, as we discussed alternatives to how Kiya, me, and even the Aesthetic Fellow saw as the best way to “skin the cat”. This was a steal of a deal, and their hospitality was world class. I continue to use several of the subtle points I picked up in the OR which have helped to improve my outcomes.”

Dr. David Janssen visiting Dr. Kiya Movassaghi’s office in Eugene, Oregon.

‘TRAIN WITH AN EXPERT’ OPPORTUNITIES AT THE AESTHETIC MEETING 2023

See page 11 for how to bid on this incredible educational experience!
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
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
Bruce W. Van Natta, MD

Will You Be Our Next President’s Circle Member?

Contact Tom Purcell, CAE
tom@aserf.org for more information.
As ASERF enters its 30th year, The Foundation is introducing a new fundraising program as it prepares for the next 30 years.

“ASERF commits more than $100,000 per year on relevant research for aesthetic plastic surgery with a strategic plan for even more support for research which will require additional funding and therefore more fundraising activities,” said Patricia McGuire, MD, ASERF Treasurer and Fund Development Committee Chair. “It is important to support unbiased, scientific research which is expensive to do. ASERF has invested more than $2.5 million, which has produced landmark studies.”

“With the growing interest in plastic surgery, and the introduction of new technologies coming to market there is a need to expand our research activities to support ASERF and the Aesthetic Society’s board-certified plastic surgeons and our patients,” added Dr. McGuire.

The VIP Campaign, a letter writing drive, will launch in February. Seven volunteers have each donated $1,000 and will challenge their peers to match their gifts by sending personal letters. The VIPs have agreed to a collective team goal of $50,000.

VIP Team Captain, William P. Adams Jr., MD, said, “For the inaugural VIP Campaign, ASERF was fortunate to secure seven current and past leaders from both The Society and Foundation to serve as volunteer fundraisers. Over the course of 60 days, we will be FULL THROTTLE expecting to reach our goal.”

Dr. Adams, who also serves a Chair of the Major Giving Workgroup of the ASERF Fund Development Committee, leads a strong 2023 VIP team that includes Julio Garcia, MD; Mindy Haws, MD; Patricia McGuire, MD; Louis Strock, MD; Robert Singer, MD; Bruce Van Natta, MD; and Caroline Glicksman, MD, MSJ.; The VIP Campaign is ASERF’s first person-to-person fundraising appeal. “This is a much more directed approach: Volunteers send a personalized letter to friends and colleagues, asking for a specific amount for a specific purpose,” stated ASERF Director of Development, Tom Purcell, CAE.

The campaign will support ASERF’s Interim Research Grant Program which provides funding for physician-initiated research studies.

ASERF prepares for new website launch

ASERF will launch a new website during The Aesthetic Meeting 2023 in Miami Beach. The current website was last updated in 2013 and since then, technology and priorities have changed. To keep members and donors efficiently up to date, a new website was inevitable.

With a simplified design, the new website will be easier to navigate and will showcase The Foundation’s new color palate, which will compliment The Aesthetic Society’s new look and feel.

Over the next few months, staff and the developers are expected to fine-tune the layout and text and migrate existing information to the new wireframe. When these steps are completed, the following goals will have been met:

- Share programs, services, and those who benefit
- Recognize its accomplishments and donors, as well as acting as a report card
- Provide opportunities to join, apply for grants, become involved or support the mission

While at The Aesthetic Meeting 2023 in Miami Beach, you are invited to stop by the ASERF Booth, located in The Aesthetic Society Booth #1230 to see the site just before it goes live.

Once the newly redesigned site is live, all members will be encouraged to visit and navigate. If you are moved to do so, give the new donation page a try and let us know what you think by making a gift that matches your level of enthusiasm.

A first look at the new ASERF website under development.

While at The Aesthetic Meeting 2023 in Miami Beach, stop by the ASERF Booth, located in The Aesthetic Society Booth #1230 to see the site just before it goes live.
Practical advice you can put to use today to help your practice run more efficiently.
Choosing the Right Content Creators to Execute Your Digital Marketing Goals

By Wendy Lewis

In 2023, it is increasingly important to focus on your creative to stand out in digital media.

Content creation is an integral part of effective digital marketing and brand-building. This may include producing written, audio, or visual information for content marketing platforms, like websites, social channels, blogs, and e-books. The best content strikes just the right mark, in the best format, and with eye-catching visuals to communicate the precise messages you want to deliver in a memorable and informative way. When you post content that doesn’t feel personal, it can have the reverse effect; it can undermine what you are trying to achieve.

Producing unique content should have an end goal in mind, such as to target a specific audience, like affluent women over 40, and stimulate a response, including following your Instagram, visiting your website, making an appointment or a purchase.

THE NEW CONTENT CREATORS

There is a new crew of professional content creators, or ‘creators’ as they are called that are like the new influencers. They are in demand for their unique talent, originality, and passion for effectively communicating messages to the right social media audiences, at the right time. The advantage of working with creators is tapping into their creativity and deep connections within their own networks.

As some of these creators may be young and new to our world of injectables and breast implants, it’s important to make your goals and expectations crystal clear from the outset. Take the time to provide direction in terms of your brand, style, and positioning as well as the specific audiences you want to gain traction with. If the creator is reasonably local, invite them to your practice to learn about what you do and to meet the whole team. Take the time to review the rules governing patient privacy at the outset.

TAKING CARE OF BUSINESS

It is important to set project goals from the very beginning. Just like working with influencers, a detailed contract should be drafted for both parties to sign before embarking on a project. The document should include an NDA, scope of work, terms, deliverables, payment, timelines, and revisions. If the work product is intended to live on the creator’s social channel or channels, those specifics should be included as well as an approximate date to go live and for how long. The contract should also include an exit clause if the relationship does not work out.

USING CREATORS TO ELEVATE YOUR BRAND

Assign someone on your marketing team to develop a relationship with the creator and be responsible for managing the process. Share a brand book that carefully maps out the style and tone of the communications you want to achieve. This should include key messages, look and feel. If they are creating content for placement on your own channels, the style and imagery should be consistent for each piece of content they craft to stay on brand.

If it is your first time working with the creator, share some examples of what great content looks like to you, as well as what you want to avoid. Visuals will make these points much clearer than just words. Provide specific goals to evaluate the process without stifling their creative juices too much.

Make sure the creator has an open line of communication with a team member to answer questions as they arise. Creatives tend to have their own style and work process, so be prepared to let them do their thing at their own pace. However, put deadlines and guidelines in place. For example, creating a series of videos may take longer than just text-based material.

When working with well-known creators, leverage their popularity. Let your brand and mission fit into their style rather than the other way around. If you ask them to change their style to fit the brand, you may sour the relationship. Their followers may also lose interest in the content they are putting out, which would defeat its purpose.

GIVING FEEDBACK GENTLY

Sometimes getting the right messages across can be tricky in the healthcare and aesthetics categories, so ground rules should be established from the outset.

There are many reasons why their content shared may not hit the right tone early in the relationship. There may have been a misunderstanding over instructions that are too open to interpretation. Providing feedback gently will help guide their work without causing any ill will or undesired hissy fits. One or two rounds of feedback are reasonable. If more is needed, re-examine the path of communication to improve efficiency. When the relationship isn’t working, it is prudent to just move on.

As with influencers who have tens to hundreds of thousands of followers, try not to break up with a creator with a high level of notoriety on a sour note. Many of them consider themselves to be ‘artists’ and can be prima donnas.

When the relationship is on good terms, it can lead to generating great content that truly delivers results for your practice.

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.
Let’s take a deeper look at the procedure space.

Midmark has redesigned the procedure space around the caregiver with up-close access to the patient on all sides as well as additional equipment and supplies. And the right procedure chair provides the positioning flexibility the caregiver needs to work comfortably during even the lengthiest of procedures.

Learn more: midmark.com/procedurechair
Handling Objections: How Skilled Is Your Team?

By Karen Zupko

“Well, she’s board certified...”
“Look, he’s been doing surgery for 35 years...”
“Our fees are competitive for our market...”
“Sorry, that’s our policy...”

It may come as a surprise to you that these are not optimal approaches to handling objections to booking surgery. They may be an accurate description of you or your practice, but they are not as convincing as you might think. Let’s take a look at each of these and why they are ineffective.

BOARD CERTIFICATION

The total number of ABPS Board Certified Plastic Surgeons is 7706 as of November 2022. To be clear, board certification is crucial and important, but that is where the bar starts for educated consumers. In any major metropolitan area, there are easily several hundred with identical certifications. So, using that credential as your sole justification is not going to be meaningful as a differentiator.

YOU’VE BEEN OPERATING FOR DECADES...

Another standby rationale is a statement about how long you’ve been operating. That says nothing about how many patients have had experienced positive surgical or treatment outcomes. That’s what counts. Without number of specific cases or factual testimony to patient satisfaction, it is just a chronology.

YOUR FEES ARE PREDICATED ON THE MARKET...

Not too high, not too low... so how can anyone argue about the fee quote? Because the prospective patient is not looking at averages and spreadsheets. They are looking for emotional reasons to connect with YOU, through your patient coordinator. They want to know why you are worth it—regardless of where your fees land “on average.”

POLICIES AND PROCEDURES

These are necessary for running a business. Patients must understand them as part of informed consent, but they are not an answer to an objection. “It’s our policy” is the equivalent of your parents saying, “Why? Because I said so!” How does that make you feel?

After consulting with dozens of practices in 2022, the situational analysis as we see it is--post Covid turnover and retirements have reduced experienced and seasoned staff. Replacing them are a new generation of staff who, in many cases have never worked in a plastic surgery office, nor have they seen challenging economic times. More alarming? They are not trained.

Here’s a diagnostic for you to try with your staff: Ask them to name three “Unique Service Propositions” (USPs) for your practice. (Note: You may ask yourself the same question)

- What sets your practice apart?
- What differentiates you from the board certified plastic surgeon down the hall and two floors above?
- Why are you worth it?

See if you like the answers.

We like these:

- “Dr. Wonderful has done over 815 breast reductions.”
- “Dr. Amazing has spoken at 27 major meetings as invited faculty to present on her technique. Her colleagues recognize they can learn from her.”
- Articulating how gifted you are in the procedure the patient is considering is impactful. So are real patient reviews on patient satisfaction.
- On the other hand, Dr. Junior may have been with you for six months. Best to have some stories about his fellowships and accolades.

Trained and skilled staff know how to provide a rationale for “fees” and “policy” requests.

“In order to ensure an optimal result Dr. Exceptional feels it’s important for you to lower your BMI.”

“Let me explain that our charges allow Dr. Plastics to keep our schedule uncrowded. Some practices over schedule to meet the overhead. He wants to be fresh and relaxed for every case.”

“We have highly experienced staff in the med spa, as well as the nurses in the office and anesthesiologist in the OR. Their expertise pays off. Our team works flawlessly with one another. Dr. Superior regards us an investment that ensures an optimal outcome for you.”

Do yourself a favor in the New Year. Learn what is and isn’t being said on the phone or behind closed doors. Our mystery patient visits are often a source of jaw dropping revelations in even the most established practices. Spend some time with your staff ensuring they reflect your expertise and commitment to an extraordinary experience for every patient.

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.

Meet Karen Zupko at The Aesthetic Meeting 2023

THURSDAY, APRIL 20
9:00am – 3:00pm
Course S5—Skills for Successful Patient Coordination
4:30 – 6:30pm
Course S16—Patient Coordinator Alums: Overcoming Scheduling Objections

FRIDAY, APRIL 21
9:45am – 12:30pm
Can This Practice Be Saved?
With Herluf Lund, MD
Course 110—So, You Want to Sell Your Practice? How to Plan Your Exit Strategy
Making the Process Seamless

SATURDAY, APRIL 22
2:00 – 4:00pm
Course 309—Relationship Marketing: What It Means and How to Put it in Action
4:30 – 6:30pm
Course 409—Staff: Your Biggest Expense or Your Biggest Asset?
With Judy Kozlicki
80% of consumers research payment before deciding to get cosmetic surgery, and when selecting a provider, 74% said it’s important they offer patient financing. The CareCredit health, wellness and beauty credit card with promotional financing options available* can help patients move forward with:

- **Surgical procedures**, as well as anesthesia, medical garments and prescriptions
- **Reconstructive surgery including deductibles, copays** and other costs not covered by insurance
- **Non-invasive procedures**, such as body shaping, injectables and fillers
- **Skincare products** and more

When you accept CareCredit, you’ll have access to free tools and resources to help make the financial conversation easier and reach your practice goals. When patients have a way to fit care into their budget, the results can be beautiful for you both.

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Start accepting the CareCredit credit card today. Call 855-860-9001 or visit carecredit.com/asn

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*CareCredit Path to Care, conducted by Chadwick Martin Bailey on behalf of CareCredit, October 2021.
*Subject to credit approval. Minimum monthly payments required. See carecredit.com for details.
Cyber security threats in the healthcare industry are increasing; there were an estimated 11 million data breaches at healthcare facilities around the world during the pandemic.

These targeted attacks have highlighted the need for the medical industry to look at cyber security from small to large medical facilities and increase protection for patient's PHI (Protected Health Information) data. PHI is data which contains medical results and diagnosis with patient medical records, but those which include social security numbers, phone numbers, email addresses, pictures, or other information are also considered patient identifiable information may be subject to higher levels of security.

HIPPA (Health Insurance Portability and Accountability Act) has changed a lot since it was introduced in 1996 as an umbrella of regulations for the medical community. HIPPA has been updated several times in recent years to address cyber security within current internet platforms and also deal with widespread threats. Of particular concern, these policy changes have also increased fines and penalties for the exposure of patient's PHI data because of lax or insufficient computer security and doesn’t excuse a “lack of knowledge” of cyber policies and can consider not having security as “willful neglect.”

Along with federal and state laws and policies changing, insurance carriers are increasing rates for cyber insurance while demanding closer adherence to these new standards to help businesses of all sizes better understand, manage, and reduce their cybersecurity risk and protect their networks and data. The goal of all these changes is to make medical practices aware of the cyber-attack threats and make patient data protection a priority. HIPPA also requires yearly audits to verify that the status of the network security is up-to-date and to make sure its protection is keeping up with the ever-changing landscape.

As these policies and attacks evolve, so too does the strategy for protecting medical offices. To address the challenges for medical facilities, a layered security approach is needed. Our company includes cyber assessment tools, documentation, and user training to get a baseline of the current network layout and level of security. For data and network protection, we recommend implementing offsite encrypted backups, a network protection for the internal office, and email scanning. Antivirus and malware scans are run at every level. These services include security professionals monitoring activity to identify areas of concern, and most importantly, fix problems or respond to attacks quickly. Of note, Google Drive, SharePoint, and other cloud services can adhere to the standards for storing PHI data if configured to be secure. However, the default settings may not provide the security required.

A key point to compliance with HIPPA is a solid methodology and not just an end goal. Cyber security keeps evolving so there is no certification or audit that will offer a seal of approval. Instead, we recommend the previously mentioned series of best practices to better prepare for and avoid cyber breaches or data losses. This way your patients can feel their data is protected with the proper cyber hygiene.

My company, Hired Geek, Inc. hiredgeek.com has worked with The Aesthetic Society since 2002. We have helped their internal IT infrastructure grow and evolve from server rooms to cloud services. We are focused on cyber security, helping companies navigate the sophisticated threats, and more stringent regulations. We do this by providing concierge network and security service while working with clients to address their most pressing needs.
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We Cover Complications.

20 Years

Coverage that converts consults into clients

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Making the Switch to GA4.  
Is Your Website Ready for the Next Google Analytics Update?  
By Peter Houtz, Vice President of Sales at Plastic Surgery Studios

Millions of websites use Google Analytics to track and measure data. For years, most businesses have been using Universal Analytics, which allows you to see and track “hits” and interactions on web pages.

Universal Analytics (UA) was first introduced in 2012 and became the standard for data collection and organization. However, the world has changed significantly in the last 10 years, including how users view and interact with websites and apps across devices and how privacy laws are established. UA was not set up to manage this ever-changing landscape, and because of that, a new version was needed.

This version is Google Analytics 4.

UNDERSTANDING THE SWITCH: UNIVERSAL ANALYTICS TO GOOGLE ANALYTICS 4

Google Analytics 4, or GA4, offers the most advanced ways to manage, track, and understand data. GA4 operates across platforms (websites and apps) and uses an event-based model that focuses more on the user’s journey than on individual hits.

Universal Analytics placed every hit into a separate category, including page views, social interactions, e-commerce, and app interactions. With GA4, these are all “events” that contribute to the greater picture of the user journey from first visit to conversion.

This newer model uses AI and machine learning to fill in the gaps in data, allowing you to measure users’ engagement across websites and apps.

Key Benefits of GA4’s Machine Learning and Insights:
• Increased focus on data privacy
• Increased ability to track data across devices (phone, tablet, laptop) as long as the device is logged into the user’s Google account
• Increased ability to track data across apps (using both website and app data)

Google Analytics 4, or GA4, offers the most advanced ways to manage, track, and understand data. GA4 operates across platforms (websites and apps) and uses an event-based model that focuses more on the user’s journey than on individual hits.

• Uses “events” to create a comprehensive, well-rounded user journey rather than session-based data
• More control and better customization for the business (your dashboard is entirely customizable to your business’s needs)
• Predictive metrics

CHANGING PRIVACY LAWS MEANS CHANGING DATA COLLECTION

Third-party cookies played a significant role in Universal Analytics. GA4 is built to place less emphasis on these cookies. Instead, it uses AI to create a more comprehensive profile of users without needing the same amount of personal information.

GA4 will also no longer store IP addresses, giving users better privacy protections and control and helping to comply with data privacy laws, such as the California Consumer Privacy Act (CCPA) and the General Data Protection Regulation (GDPR).

In fact, GA4 is not allowed to track users or collect any personally identifiable information (PII).

WHEN DO YOU NEED TO SWITCH TO GA4?

As of July 1, 2023, Universal Analytics will stop reporting new hits and collecting new data. You will be able to view your existing data through the end of 2023; however, you will need to set up GA4 before then to ensure a seamless transition. You will also need to export any existing data, as it will be lost at the end of this year.

Peter Houtz is the Vice President of Sales for Plastic Surgery Studios, a full-service online digital 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.

Meet Peter Houtz at The Aesthetic Meeting 2023

FRIDAY, APRIL 21
4:30 – 6:30pm
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THE AESTHETIC MEETING 2023  FIND US AT BOOTH #2448
Today’s artificial intelligence (AI) technology is transforming the way we live.

From smartphones autocorrecting our texts to Alexa answering our every question, AI is all around us. In the plastic surgery industry, it’s already helping with administrative tasks and diagnostic processes, and as a more recent development, AI is creating content for websites.

With the potential to create more scalable content at a lower cost for their practices, many plastic surgeons are considering the use of AI tools for search engine optimization (SEO). But is the auto-generated content convincing, and can it rank well in search engines?

THE RECENT SURGE OF AI IN SEARCH ENGINES

With the progress made in AI technology—like OpenAI’s recently launched ChatGPT—the potential for AI to assist in plastic surgery practices’ SEO efforts is undeniable. ChatGPT is an online chatbot designed to create content similar to what a human would write. Built from the GPT-3.5 large language model, ChatGPT uses an initial prompt to do everything from conversing with a user to writing entire articles. With its unprecedented capabilities, ChatGPT is taking the world of online search by storm.

In addition to practices utilizing AI to write content, search engines are taking advantage of the latest advancements as well. In fact, Bing has plans to release a version of its search engine using ChatGPT, and Google is constantly improving upon its own advanced AI technologies. As AI products continue to evolve, they’ll no doubt transform how search engines look for patterns and inconsistencies that may indicate AI use, signaling areas to adjust. While helpful, this adds another step to the process and isn’t failproof.

HOW GOOGLE RANKS AI-WRITTEN CONTENT

Although AI content is better than that of content farms, Google still considers it auto-generated content, treating it as spam. In its recent “Helpful Content Update,” Google further emphasized the importance of writing for people first, not search engines—something AI isn’t capable of doing. However, since AI programs like ChatGPT can write original content, how well can Google identify this auto-generated text?

As it continues to develop its own AI, the search giant has become more skilled at detecting auto-generated content. To avoid getting penalized, some people take advantage of AI content detection tools. This software looks for patterns and inconsistencies that may indicate AI use, signaling areas to adjust. While helpful, this adds another step to the process and isn’t failproof.

WHY AI CAN’T REPLACE HUMANS IN SEO

If having AI write plastic surgery content sounds too good to be true, you may be right. While programs like ChatGPT seem to communicate like a human, its content quality is still lacking. AI can’t develop new ideas or offer the human perspective—it simply regurgitates what already exists. This leads to concerns such as:

- Plagiarizing other websites, which doesn’t add much value and may hurt your rankings
- Not sounding natural, because despite learning language patterns, AI is ultimately machine-based
- Spreading misinformation or biases, which can be especially harmful for medical-related content
- Failing to communicate expertise, since it can’t understand human search intent or offer expert insight
- Getting flagged as spam, causing the page to drop from search results

HOW TO USE AI IN THE CONTENT CREATION PROCESS

AI has the ability to write for plastic surgeons, but with the amount of reworking needed, this likely wouldn’t be cost effective. Rather than using AI to write your content, view it as a tool to assist in the creation process. By utilizing AI to understand how people search, you can more effectively optimize your content. Practical ways AI can help with plastic surgery SEO include:

- Generating highly searched topic ideas
- Creating outlines based on user metrics and other websites
- Finding missing information within existing content
- Speeding the content creation process

Should a plastic surgery practice utilize AI to generate content, it’s essential to enlist a professional to review it. This not only ensures accuracy, but also a natural sound that incorporates the plastic surgeon’s unique point of view.

AI has enhanced many areas of life, and with the right precautions, plastic surgeons can utilize this cutting-edge technology to improve their website’s SEO. While tempting to have it completely take over content creation, AI is more beneficial for aiding the research process, allowing you—the plastic surgery expert—to determine what is most helpful for prospective patients.

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.

Is AI Content the Future of Plastic Surgery SEO?

By Keith C Humes, CEO Rosemont Media, llc
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The most common medical malpractice claims against plastic and reconstructive surgeons involve breast surgeries.

The objective of this article is to briefly address professional liability litigation involving necrosis of the nipple areola complex ("NAC") resulting from breast augmentation or reduction surgery.

What is unique to the specialty of aesthetic plastic surgery is that, unlike almost every other surgical specialty, many patients initiate their surgical consultation for personal, aesthetic reasons. There are, of course, medical conditions which require breast surgery. However, regardless of whether a patient consults with a plastic surgeon for medically indicated or personal aesthetic reasons, patients undergoing surgery by a plastic and reconstructive surgeon commonly have very high expectations for excellent aesthetic results. As the breasts are highly vascularized and innervated, if the blood supply to the tissues becomes restricted, the devastating complication of partial or total necrosis to the NAC can develop. This circulatory compromise may be due to arterial insufficiency, or venous congestion because of breast augmentation or reduction surgery.

Thus, a post-operative surgical site infection ("SSI") leading to necrosis of the NAC is generally very difficult for a patient to accept; additional procedures, scarring, deformity and asymmetry are often inextricably linked to the management of these infections. Because the surgical-site infection develops without any pre-operative sign or symptom of infection, and typically involves a lengthy, complex sequela of treatment for the infection and prolonged healing, a patient may begin to investigate "what went wrong during the surgery" that caused such an infection and its devastating aesthetic outcome.

Most, if not all patients undergoing breast reduction/augmentation surgery will have pre-operative photographs taken as part of their record. The side-by-side comparison of a patient's pre-operative breast pictures with those of a necrotic nipple and/or total NAC loss can present a very challenging perception hurdle for the defense in a malpractice case. Risk factors for these complications include obesity, diabetes, a past history of poor wound healing, heavy smoking, and/or having large breasts, which strain the blood supply further.

But how well was the patient informed of these risk factors prior to surgery? What recommendations were given to the patient? And how well does the surgeon's chart detail the presence of such risks and advice to the patient pre-operatively? The overwhelming majority of medical malpractice cases involving this complication include allegations that the patient was not sufficiently informed (and thereby did not provide informed consent to the procedure) of the risks—however uncommon—of the procedure.

The expert retained on behalf of a patient or surgeon will be asked to opine (the use of photographs here is key) about the health and vascular compromise of breast tissue, especially if the surgeon records suggest "surgical site healing well." The patient/plaintiff expert will commonly conclude that rather than take advantage of the best opportunity to salvage the nipple shortly after surgery when indications of an infection presented, the defendant surgeon downplayed the complaint as part of the normal post-op recovery, and failed to adequately and timely treat the developing infection.

Lawsuits involving NAC necrosis typically plead that excessive tissue was removed, that the surgeon failed to appropriately estimate and manage the amount of tissue removed, and that the surgeon failed to timely and adequately address the patient's post-operative complaints. In connection with these allegations, the patient's suit will allege that the surgeon negligently misrepresented the aesthetic outcome of the surgery, failed to perform an accurate preoperative assessment of the vascular supply to the breast, and failed to adequately inform the patient of the risk of infection.

Inadequate documentation frequently compromises the surgeon’s ability to construct a viable defense to these allegations. Thorough documentation of all preoperative and postoperative events can help evidence—long after the patient's care has come to an end with the surgeon—that the patient was well-informed, and that requisite pre-operative and postoperative assessments were timely performed.

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

Christopher Edge is Vice President of Preferred Programs and New Business Development at AMS Management Group.
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Catherine Maley, MBA
Author, Your Aesthetic Practice
Beauty and the Biz Podcaster

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How would you like to charge twice as much as your competitors? You could either double your revenues with the same amount of patients or work less for the same amount of revenues, so let’s look at how you make it happen.

IT’S NOT ABOUT YOUR SKILLS AT THIS LEVEL

This will be counterintuitive but important to grasp:
- It’s not about being 2x better at a surgical procedure to charge 2x more.
- Board-certified trained plastic surgeons all do a nice job. That’s true or you wouldn’t be board-certified.
- There’s more to it than that.

THE AFFLUENT PATIENT’S FRAME OF MIND

Affluent patients pay more because doing so makes them feel more like the person they either wish they were or envision themselves to be.
- At this level, you are hardly talking about the surgery.
- It’s more about the intangibles and what this procedure means to them that is driving their decision.
- The affluent patients are looking for a superior service provider... even if it’s based on perception.

HOW TO MAKE PRICE DISAPPEAR FROM THE EQUATION

Affluent patients need to feel they are getting the best because they desire the best.
- You become the best by standing out from the crowd. By doing what others won’t do or can’t do.
- The quickest path in today’s world is to marry a housewife on Bravo TV but if that’s not possible, here are 3 other strategies that help make price go away.

PEER RECOMMENDATIONS

The affluent are reached more through peer referral than any other avenue. This group of cosmetic patients value trust more than anything else so they turn to others they trust.

Knowing that, you’ll want to identify who those patients are in your own practice. Give them an excellent result and an exceptional patient experience.
- Now make them part of your VIP Club where you have private events they can invite their affluent friends to.
- To make it special, add a charity component to it and invite the media.
- It’s the exclusivity that gives the affluent patients the feeling of status they want and expect.

BE THE EXPERT

Although you are well versed at all sorts of surgical procedures, the affluent patient wants to go to the BEST.
- They want the surgeon who specializes in, for example, blephs, has done 10x more blephs than the average surgeon and who has tons of social proof of hundreds of other happy bleph patients.
- It would also be helpful if you are considered, “The Eye Guy” because you have been interviewed by the media and you even train other surgeons on your innovative bleph techniques.

USE SOCIAL MEDIA TO CONNECT WITH AFFLUENT PATIENTS

Social media has made it possible for you to develop your own fan club quickly and easily.

Knowing that, you’ll want to identify who those patients are in your own practice. Give them an excellent result and an exceptional patient experience.
- Now make them part of your VIP Club where you have private events they can invite their affluent friends to.
- To make it special, add a charity component to it and invite the media.
- It’s the exclusivity that gives the affluent patients the feeling of status they want and expect.

CONCLUSION

Attracting the affluent patient takes a different mindset (and some healthy ego).
- If you believe you are worth double what your competitors charge, set your practice up to cater to the affluent patients who are attracted to your higher prices because, just like you, they believe they are worth it.

Catherine Maley, MBA is a cosmetic practice consultant, speaker, trainer, and blogger. She also has a podcast called Beauty and the Biz and her popular book, “Your Aesthetic Practice/What Your Patients Are Saying” is read and studied by plastic surgeons and their staff all over the world.
- She 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 for Free resources at www.CatherineMaley.com or Instagram @catherinemaleymba.
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1. Randomized, double-blind clinical trial. 35 subjects, ages 25-65; moderate to severe hyperpigmentation. Senté Cysteamine HSA vs. cysteamine only. Data on file, Senté.
Designing a Withdrawal Strategy: The Most Important Factor in a Successful Retirement
By David Mandell, JD, MBA and Andrew Taylor, CFP®

To enable a financially successful retirement, there are three tactics that should be employed during the years preceding retirement and into retirement itself: developing a budget, reviewing asset allocation, and designing a withdrawal strategy.

SELECTING A WITHDRAWAL RATE
A fundamental pitfall in static retirement plans is setting a withdrawal rate which is fixed over a retirement period. Consider that, for many physicians, the retirement stage of life is likely to last 20 years or more. In that time, investment yields may vary widely and both tax rates and personal spending habits could also change. Because of these changing variables, it is essential that flexibility be built into retirement planning, both in initial models (high, middle, low) and when reviewing the plan each year (or more frequently). By having flexible planning models and periodically adjusting them based on real-time results, one can expect to follow a model that can endure throughout retirement, regardless of how many years, or decades that retirement may last.

MAKING ROOM FOR TAXES
No one knows what tax rates will be upon retirement. This does not mean physicians should ignore tax planning, but that they should account for the potential costs of taxes and design a strategy to minimize them. To do this, one must understand how taxes will impact withdrawals and liquidations. Having a plan that considers which withdrawals will trigger ordinary income taxes, which will incur capital gains, and which will realize no tax, is essential.

Lastly, physicians should understand that delaying distributions from their assets will have the greatest impact on their ability to have a successful retirement. Plastic surgeons may have the option of easing into retirement and exploring varying roles within a practice—perhaps transitioning to a consult-only role and giving up surgeries. This can allow a physician to generate a supplemental income for several years, thus moderating the stress on their portfolios by reducing the rate of withdrawal. Financial success or failure in retirement is generally determined in the first several years of retirement. Transitioning into retirement gradually without a sudden loss of income can enhance the odds of success.

CONCLUSION
Most physicians envision a comfortable retirement as a reward for decades of hard work. Do not let the absence of pre-retirement planning hinder this goal. While a plastic surgeon’s primary financial focus during his or her career is to save and accumulate funds for retirement, the design of a withdrawal strategy is equally important to financial health in retirement.

Most physicians envision a comfortable retirement as a reward for decades of hard work. Do not let the absence of pre-retirement planning hinder this goal.

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Meet David Mandell at The Aesthetic Meeting 2023
FRIDAY, APRIL 21
2:00 – 4:00pm
Course 109—Tax Reduction for Aesthetic Practices: Best Ideas in 2023
As an Alliance Partner of The Aesthetic Society, AMS RRG and its Preferred Aesthetics™ program carefully tailors malpractice insurance coverage and premium for Plastic and Aesthetic practices. They were able to assist me in streamlining a malpractice insurance policy that was distinctive to my practice’s needs in addition to reducing my premium costs.

– Daniel C. Mills, M.D., F.A.C.S. Past President of the American Society for Aesthetic Plastic Surgery
We all know it takes a strong leader to manage a practice. Without one in place, there are always going to be challenges.

As a surgeon and practice owner, you’ve chosen to be an entrepreneur. That means in addition to great patient outcomes and results, you also must focus on building a dynamic team, establishing a positive company culture, investing in training, setting goals, understanding your revenue per hour and industry benchmarks, etc.

You must also be able to articulate clearly and outline what you expect of your practice manager. Otherwise, they will just show up for work, do the best job they think they can do with the information they have, without clearly defined goals and expectations.

Leading a practice is such an important role and can be such a rewarding experience. Your team can be your greatest asset or can be your biggest expense. So having clear expectations and goals, investing in solid training and education, and holding your team accountable is crucial.

**TOP TRAITS A PRACTICE MANAGER SHOULD HAVE**

Here are some key traits/qualities to look for when hiring or evaluating if you have the right practice manager in place:

- **Effective Communicator**—You want someone who has earned respect of the team, can conduct successful meetings and stick to an agenda that is tied to an outcome.

- **Customer-Centric**—Your practice manager must understand the value proposition of both the business and provider, realizing what makes your practice different and go that extra mile to help patients have the best, five-star experience possible.

- **Aesthetic Experience**—When hiring a practice manager, you might get applicants with other management skills, but learning the aesthetic space involves learning about every procedure or surgery. The features and benefits, personality types of the clients, more importantly the data and KPIs that are tied to an aesthetic practice.

- **Drive**—You want someone who is driven, a self-starter, solutions oriented and resourceful.

- **Leadership**—You want someone who can earn the respect of the front desk team and providers. They must set the tone to establish a culture of trust and communication.

- **Coachable**—They should be willing to take direction and learn from others.

- **Analytical**—They must have skills in understanding and interpreting data and metrics; know the top KPIs for aesthetic practice; and have the knowledge of how practice management software works, what data needs to be entered and why, what reports to run and analyze as well as understand industry benchmarks so your practice can achieve maximum potential capacity.

- **Problem Solver**—They should be solution-focused not problem-focused.

- **Open-minded**—A practice manager wears many hats. The job requires somebody who is flexible, agile, and open minded.

- **Self-Aware**—Your practice manager must be aware of what’s going on in all facets of the practice including patients, providers, entire team, culture, workflow & efficiencies. Their vision must be circular not linear.

- **Be ALL IN**—They should have an ALL-IN attitude. That means if they need to do some work at home, they do it. If they need to complete training after hours, they are willing. They are willing to seek expert advice to get to the next level.

- **Strive for Excellence**—The world is full of mediocrity. It is hard to find good talent, but you want to find someone with a deep, personal desire for excellence. Someone who is not willing to settle for just good. They want to be great.

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.

*Meet Terri Ross at The Aesthetic Meeting 2023*

**SUNDAY, APRIL 23**

2:30 – 4:30pm

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Question

I hate to admit it, but I had a long affair with a patient. It’s a long story, but we got into an argument about whether she would benefit more from a brow lift versus an upper-lid blepharoplasty, and she ended up suing me for the surgical result—seemingly to have the “last word” in our relationship. Our affair was discovered during the malpractice suit, and her attorney reported our liaison to the state medical board, which suspended my license for several months. I reported this to the ABPS, but do I have to report it to The Aesthetic Society as well? I’m feeling pathetic enough as it is and don’t want to be further embarrassed.

Answer

Thank you for sharing your candidness and the harsh realities that can arise when crossing the murky waters of the patient/romantic relationship line. It is not uncommon for members to report their plight to the Board while neglecting to inform the Society. The ABPS does not communicate with The Aesthetic Society about such matters. All members must inform The Aesthetic Society directly of any limitation of your license, if convicted of a felony, or other crimes relating to, or arising from, the practice of medicine.

The ASAPS Code of Ethics Section 3.11 Professional Discipline and Convictions states that (a) Professional discipline of any kind, whether imposed by a certifying body, regulatory commission, licensing board or a professional society, or any criminal conviction by any governmental body or judicial tribunal, whether or not of a professional nature, and whether or not such discipline or criminal conviction is suspended or stayed on appeal, shall be immediately reported by the member to the Society for review by the Ethics Committee.

(b) Any loss of the right to practice medicine due to license suspension, license revocation or personal incarceration shall result in the automatic termination of membership in the Society.

I guess it goes without saying that our Code states: 1.08 Sexual Misconduct A member shall not engage in sexual misconduct.

The Ethics Committee will review your case. You may also have to meet with the Judicial Council to explain what happened. I can assure you that its members will be objective in their interview with you.

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.
Office-Based Plastic Surgery and Sedation—Dueling Perspectives on Patient Safety

By James Fernau, MD, FACS

There are numerous reports in the literature of the safety of office-based plastic surgery. This paper discusses my experience with oral sedation and the evolution of office-based plastic surgery using local anesthesia with oral sedation and occasional intramuscular supplementation.

All patients are screened with a prescription drug monitoring program or PDMP. This is important because any patients on chronic narcotics are either, not scheduled for office-based surgery or referred to a pain specialist for specific recommendations. Patients are referred for a medical consultation and a clearance letter, stating the patient is a candidate for aesthetic surgery. We use the decontamination protocol, the enhanced recovery after surgery (ERAS) protocol and thoroughly discuss the use of tranexamic acid during surgery. The mainstay of our office-based surgery is patient education. Only ASA classification 1 patients are considered for office based surgery. Obstructive sleep apnea is a definite contraindication.

Upon arrival at the office surgical center the patient safety checklist is reviewed with the surgeon and the nurse. I review potential complications of surgery with the patient a second time. I mark the patient and have the patient check all the marked regions in the mirror, and this is done with a nurse present documenting all of the proposed areas of surgery and photographs are taken. 8 mg of oral ondansetron are first given along with 5 mg of Valium. The patient is then administered 30 µg of sublingual Dsuvia (Sufentanil). The patient is then evaluated at 15 minutes and given oral sedation with liquid Versed. Before using sufentanil, our initial dose of oral Versed was 10 mg and now we have reduced it to 5 mg.

Midazolam is generally given in doses of 50 µg/ml. The initial intramuscular dose of midazolam is generally 1 mg. The dosing schedule is 70 to 80 µg per kilogram. The effects of midazolam can last from one to six hours. Midazolam has an amnesia effect, which lasts anywhere from 20 minutes to an hour. It is eliminated in the urine. It is imperative that midazolam be given prior to ketamine to avoid unnecessary and untoward hallucinations! Flumazenil should always be available as a reversal agent.

The initial intramuscular dose of ketamine ranges from 6.5 to 13 mg per kilogram. A 10 mg per kilogram dose usually produces 12 to 13 minutes of surgical anesthesia with an onset of action in 3 to 5 minutes. Generally, in most cases, we only give 1 mg of ketamine and always give midazolam before the ketamine!

The most common side effects associated with ketamine are nausea, vomiting, dizziness, diplopia, drowsiness, dysphoria, and confusion. There are reports of the emergence phenomenon for approximately 6 to 12% of patients. Rarely patients experience hallucinations. If multiple doses are used during a long surgery, we limit the dosing to two doses, and always give intramuscular midazolam first to avoid unpleasant side effects. If additional dosing for pain is needed, we use intramuscular fentanyl.

Fentanyl is generally given in doses of 50 µg/ml. The usual dosage regimen in adults is 50 to 200 µg for spontaneous respiration. Clinically, we generally dose fentanyl at 50 µg per ml every hour and never exceed 200 µg during any case. Fentanyl should be given only in an environment where the airway can be controlled and by personnel who can control the airway. Naloxone should always be available as a reversal agent.

It is beyond the scope of this article to discuss all the evidence-based clinical and administrative guidelines for office based surgery. However, the last reference is a great summary. It discusses accreditation, culture of safety, personnel and training, informed consent, protocols to ensure safety, fire safety, equipment and sterility, documentation of quality improvement, postoperative care, emergency and transfer protocol, obesity and procedure characteristics, homeopathic supplements, anesthesia, antibiotic prophylaxis, venous thromboembolism, hypothermia, malignant hyperthermia and multi modal analgesia.

Please remember the basic concept of continuous patient monitoring with the capability of end tidal carbon dioxide, electrocardiogram, supplemental oxygen, crash cart and most importantly having a

Continued on Page 98
Tumescent Anesthesia

By R. Brannon Claytor, MD FACS

Many advances in surgical technique over the years have improved aesthetic results with special attention being paid to less invasive procedures. Mandated COVID closures at hospitals, and patient requests for outpatient surgeries, were the engine which created the demand for increased expertise in tumescent anesthesia and awake procedures.

Talented and pioneering surgeons who had honed their skills performing surgery under general anesthesia broadened the envelope of operations which could be successfully performed under local anesthesia. With an emphasis on nerve blocks and judicious use of amides in super charged tumescent fluid and a strong understanding of the safety window of the lipid soluble aminoethylamides which block the voltage gated sodium channels and inhibit the depolarization of nerves, the central nervous system can be protected from noxious stimuli.

While this can be tremendously liberating for the anesthesia averse patient and the highly confident surgeon, it is not to be undertaken lightly. A safe surgical environment is paramount and arguably no procedure should be undertaken by a physician who does not have the credentials to perform the similar procedure within the walls of the hospital. Meaning that they have hospital credentials to perform such operations based on their recognized accredited training. To not advocate or even demand such accountability threatens the slippery slope into chaos and diminished patient safety that the detractors warn against.

The hospital administrators were traditionally the gate keepers of safety for the general populace who might otherwise be duped by an overly ambitious or incautious practitioner who may stray “out over his or her proverbial skis,” to use a sporting analogy. Now, with the advent of more procedures being performed, at the request of the patient, under local anesthesia, these operations can be moved out of the hospital or even surgery centers and into physicians’ offices. While it is impossible to put the genie back in the bottle, it is prudent to request and even demand that the pioneering physician establish outpatient surgical centers which adhere to the medical standards of qualifying bodies such as AAAASF (American Association for Accreditation Ambulatory Surgical Facilities) or the AAAHC (Accreditation Association for Ambulatory Health Care) for the benefit of the public trust and safety.

In administering medications prior to surgery, combinations oxycodone, diazepam and ondansetron are often used. The primary goal is safety and doses may often vary based on age, weight and individual medical history, clinical experience is an important variable in successful outcomes. Concentrations of tumescent fluid with epinephrine and lidocaine should be calculated based on surgeon’s experience and the planned extent of surgery.

For those who are interested in learning more about how to safely perform procedures under tumescent anesthesia, please attend one of the outstanding meetings hosted by The Aesthetic Society to learn more.

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WARNING:

- Breast implants are not considered lifetime devices. The longer people have them, the greater the chances are that they will develop complications, some of which will require more surgery.
- Breast implants have been associated with the development of a cancer of the immune system called breast implant-associated anaplastic large cell lymphoma (BIA-ALCL). This cancer occurs more commonly in patients with textured breast implants than smooth implants, although rates are not well defined. Some patients have died from BIA-ALCL.
- Patients receiving breast implants have reported a variety of systemic symptoms such as joint pain, muscle aches, confusion, chronic fatigue, autoimmune diseases and others. Individual patient risk for developing these symptoms has not been well established. Some patients report complete resolution of symptoms when the implants are removed without replacement.

The sale and distribution of Mentor Breast Implant Devices are restricted to users and/or user facilities that provide information to patients about the risks and benefits of the device prior to its use in the form and manner specified in approved labeling to be provided by Mentor Worldwide LLC.

Important safety Information: MENTOR® MemoryGel® Breast implants are indicated for breast augmentation in women at least 22 years old or for breast reconstruction. Breast implant surgery should not be performed in women with active infection anywhere in their body with existing cancer or pre-cancer of their breast who have not received adequate treatment for those conditions or are pregnant or nursing.

Breast implants are not lifetime devices and breast implantation is not necessarily a one-time surgery. The chance of developing complications increases over time. The most common complications with the MemoryGel® Breast Implants include capsular contracture, asymmetry, and breast pain. A lesser risk of complication is rupture. The health consequences of a ruptured silicone gel-filled breast implant have not been fully established. MRI screenings are recommended three years after initial implant surgery and then every two years after to detect silent rupture. Breast implants are also associated with the risk of breast implant-associated anaplastic large cell lymphoma (BIA-ALCL), an uncommon type of lymphoma. As an individual’s risk of developing BIA-ALCL with MENTOR® Breast Implants is low based on the incidence of worldwide cases.

Patients should receive a copy of Important Information for Augmentation Patients about MENTOR® MemoryGel® Silicone Gel-Filled Breast Implants or Important Information for Reconstruction Patients about MENTOR® MemoryGel® Silicone Gel-Filled Breast Implants. Your patient needs to read and understand the information regarding the risks and benefits of breast implants, with an opportunity to consult with you prior to deciding on surgery.

For detailed indications, contraindications, warnings and precautions associated with the use of MemoryGel® Breast Implants. Please refer to the Instructions for Use (IFU) provided with each product, or online at www.mentorwllc.com.

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