

Winter 2022

volume 26, number 1

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AESTHETIC SOCIETY NEWS



Art by: **Daniel Man, MD**



—
**Our Recent Education:
Now On Demand!**

—
In Memoriam: Norman Cole, MD

—
**Mentorship: The Golden Path
of the Surgeon**

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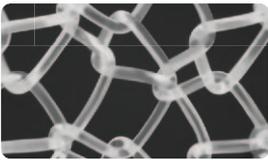


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1. Meilang Xue and Christopher J. Jackson. "Extracellular Matrix Reorganization During Wound Healing and Its Impact on Abnormal Scarring" *Advances in Wound Care*. March 2015.
2. Preclinical data on file; results may not correlate to clinical performance in humans.
3. Deeken, Corey R., and Brent D. Matthews. "Characterization of the mechanical strength, resorption properties, and histologic characteristics of a fully absorbable material (poly-4-hydroxybutyrate—PHASIX mesh) in a porcine model of hernia repair." *ISRN Surgery*. 2013.



Aesthetic Society News

Quarterly Newsletter of The Aesthetic Society

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The Aesthetic Society: www.theaestheticsociety.org

ASERF: www.aserf.org

The Aesthetic Society—Consumer Education:

www.smartbeautyguide.com

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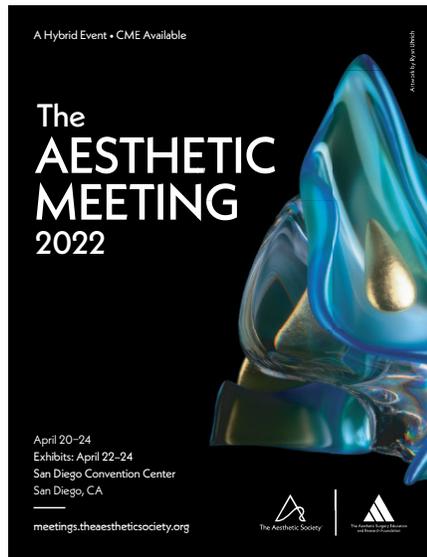
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The Aesthetic Meeting 2022

A Hybrid Event
April 20-24, 2022
 San Diego Convention Center
 San Diego, CA
meetings.theaestheticsociety.org/the-aesthetic-meeting



The Aesthetic Cruise 2022

July 9-21, 2022
 The Baltic
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The Rhinoplasty Society Annual Meeting 2022

April 20, 2022
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14th American-Brazilian Aesthetic Meeting

February 17-21, 2022
 The Sheraton
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25th Annual Meeting: Dallas Cosmetic Surgery™ and Medicine Meeting

International Hybrid Course with Live Surgery
March 10-11, 2022
 Dallas, TX
dallasrhinoplastyandcosmeticmeeting.com

39th Annual Meeting: Dallas Rhinoplasty™ Meeting

March 11-13, 2022
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Non-Surgical Symposium

Organized by the Australasian Society of Aesthetic Plastic Surgeons
June 2-5, 2022
 Gold Coast, Queensland, Australia
aestheticplasticsurgeons.org.au/events

Anatomical Dissection and Cosmetic Procedures Workshop

Organized by the Australasian Society of Aesthetic Plastic Surgeons
June 6, 2022
 MERF Brisbane, Queensland, Australia
aestheticplasticsurgeons.org.au/events



PRESIDENT'S MESSAGE

Mentorship—The Golden Path of the Surgeon

By William P. Adams Jr., MD



“Our chief want in life is somebody who will make us do what we can.”
—Ralph Waldo Emerson

The new year is typically a time when we take a deep breath to reflect and ponder upcoming goals that we would like to achieve. We often start developing a plan to realize those goals. Along with some of these reflections we tend to think about people who professionally or personally have impacted and shaped our lives and careers.

Medicine through the ages has been shaped by the apprenticeship model with physicians learning from more experienced and seasoned physicians. This is no more evident in any area of medicine than surgery, where the physical craft and technical expertise have been passed down from the senior surgeon to the junior surgeon since the first trephination took place 6,000 years ago.

The art of passing down expertise and knowledge is something that comes naturally to many surgeons. This is especially important in aesthetic surgery. With the evolution of the digital age, sometimes digital presence or number of posts on social media are equated with results or expertise. But at the end of the day, what matters is what one can deliver in the operating room. There is no substitute for the cherished pearls provided by a skilled and seasoned aesthetic surgeon. The procedures that we do in aesthetic surgery are nuanced far greater than most other surgical specialties.

I have discussed this before in previous communications, but the *WHY* of The Aesthetic Society is that *WE EDUCATE*. Most of us have received the invaluable gifts from our mentors of a new technique/trick or different way of thinking about the procedure and performing it efficiently. Most of us have many different mentors: some older, some younger, and some our contemporaries. Collectively, they have made us better surgeons, better contributors, and better humans. The collage on this page depicts some, but not all, of my mentors, from whom I have benefitted greatly.

I have observed many surgeons seeking the Golden Nuggets of knowledge that will make them better aesthetic surgeons. The Aesthetic Society is a great place to obtain



many of those; however, as you are thinking about your goals and plans please consider what your mentors have done for you. Remember, The Aesthetic Society, offers many avenues for you to give back and help pass on your invaluable expertise in aesthetic surgery to others. No doubt, Mentorship is the Golden Path of the Surgeon. It is a basic instinct within us.

Opportunities for mentorship within The Aesthetic Society include: Reaching out to younger surgeons at meetings and symposia, serving on the faculty for those events, or applying for the Endorsed Fellowship Program to mentor a fellow within your practice. These

are all excellent opportunities to mentor fellow surgeons, both to improve their individual skills and advance the specialty as a whole, and I hope you will take advantage of them. You can learn more about these opportunities at your home base for everything aesthetic—TheAestheticSociety.org.

William P. Adams Jr., MD, is an aesthetic plastic surgeon practicing in Dallas, TX, and is the current president of The Aesthetic Society.

For more examples, and opportunities for mentoring within The Aesthetic Society, see page 32.

A Hybrid Event • CME Available

Artwork by Ryan Uhrich

The AESTHETIC MEETING 2022

REGISTER TODAY!
Click or scan to learn more.



April 20-24
Exhibits: April 22-24
San Diego Convention Center
San Diego, CA

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Presidents Drs. William P. Adams Jr. and Louis Strock
Invite You to Rock Out in Costume to support
aesthetic research at the...

PRESIDENTIAL WELCOME RECEPTION



FRIDAY
APRIL 22
6:30-9PM
San Diego
Convention Center
Hall E

BATTLE OF THE BANDS
To Benefit ASERF

New Wave or Grunge, Disco or Hair Metal,
put your money (and costume) behind your
musical taste to vote on the winning band
by donating to ASERF!



feat. Jason Roostaeian, MD

VS



feat. Joe Yaccarino
President & CEO of MTF Biologics

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We've worked hard to reimagine our products to align with our beautiful new brand.
Expertise is everything; put it on display with these stylish and functional products.



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Membership Plaques, Consultation Folders, and more!

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SKINCARE PRODUCT SUPPORTS RECOVERY FROM BODY SCULPTING SURGERY



Dr. Laurie A. Casas FACS

With the release of **ReFORM & RePAIR Complex with TriHex Technology®**, ALASTIN Skincare is creating a completely **novel solution** to help improve the post-surgical journey by **accelerating and improving the recovery experience.**

The demand for aesthetic surgical procedures is on the rise with more than \$9 billion spent in 2020 alone, according to statistics from The Aesthetic Society.¹ But statistics also indicate that many potential candidates for surgery remain hesitant to take the plunge. Outside of financial constraints, studies show that two central fears—worry about pain or discomfort and concern over downtime—make would-be patients more nervous about surgery or compel them to avoid it altogether.^{2,3}

Dr. Laurie A. Casas, an ABMS board-certified Plastic Surgeon and Clinical Associate, Section of Plastic & Reconstructive Surgery at The University of Chicago Medicine, says that patients are not entirely wrong to worry. After aesthetic neck, breast, and body sculpting surgery, bruising, discomfort and downtime are some of the most consistent complaints. “Anywhere there’s trauma from the surgical procedure, there’s delayed soreness, swelling, discomfort, and skin irregularities that can last for weeks to months,” she says. “It’s been a persistent problem of mine that my colleagues and I have observed for 30 years, and for the majority of that time, I had not found anything which helped that negative aspect of the patient experience except manual lymphatic drainage.” Dr. Casas reports that all that changed recently with the development of a new product from ALASTIN Skincare®.

The First-of-Its-Kind Product for Body Procedure Recovery

For years, ALASTIN Skincare® has pioneered the peri-procedural topicals industry, developing clinically proven products to support in-office skincare treatments, injectables, body-contouring procedures, and facial surgery—all backed by its proprietary TriHex Technology®. With the release of **ReFORM & RePAIR Complex with TriHex Technology®**, ALASTIN delivers a solution for body surgical procedures, creating a first-of-its kind product.

Dr. Alan Widgerow, MD, MHS, FCS, FACS, who serves as ALASTIN’s Chief Medical Officer, explains, “Our area of focus at ALASTIN has always been partnering with physicians to enhance the patient experience, accelerate healing, and ultimately improve the outcome of procedures.” He adds, “We have introduced a number of disruptive product technologies designed to address a variety of procedure sequela, and ReFORM & RePAIR was really built off of the success and with key ingredients from those individual products.”

Dr. Casas says, “In the past, the only skincare we really had to provide patients pre and post-surgery was over-the-counter moisturizer.” The Chicago-based physician, who is overseeing one of eight ongoing clinical study sites with **ReFORM & RePAIR Complex**, says, “The acceleration in the healing process for the patient and the improved patient experience is undeniable. This topical treatment is a game changer for neck, breast, and body contouring patients because it has helped to minimize down time and dramatically reduce the typical negative post-surgical skin and soft tissue changes.”

A Convergence of Game-Changing Skincare Technologies

Designed to be used both pre- and post-surgery, **ReFORM & RePAIR Complex** is formulated with the power of several existing ALASTIN Skincare® hero ingredients, all backed by clinical data and experience, as well as additional skincare technologies to address the specific needs of a patient following a body surgery. The formulation includes active ingredients from scientifically validated products, including:

- **INhance Post-Injection Serum with TriHex Technology®**: Designed to be paired with injectable procedures, INhance has been shown to help reduce the signs of post-injectable symptoms such as swelling and bruising, which are also two common side-effects for body surgery patients.⁴
- **TransFORM Body Treatment with TriHex Technology®**: Formulated both for body-contouring procedures and as a standalone for daily body skincare, studies have found that TransFORM accelerates the natural removal process of broken-down fat cells, thanks to peptides in the patented LipoDRONE™ delivery system. The product also helps reduce the appearance of crepey, loose skin, which can be an issue for surgical patients as well.⁵
- **Regenerating Skin Nectar with TriHex Technology®**: Regenerating Skin Nectar helps prepare the skin ahead of in-office cosmetic treatments.⁶ TriHex Technology®, which works with the skin to clear out damaged elastin and collagen and supports the natural production of new, healthy elastin and collagen, has been shown to accelerate recovery post-procedure, help to calm post-procedure skin, and reduce downtime when used before and after laser resurfacing procedures.⁷

ReFORM & RePAIR Complex with TriHex Technology® also contains an ingredient, tetrandrine, which was added to help reduce the appearance of scarring. During formulation, Dr. Widgerow says that it was especially critical to validate product penetration to ensure benefit to cosmetic surgery patients. He explains that in lab testing, “We showed that we could get down into a hair follicle and from the hair follicle straight into the subcutaneous tissue. Additionally, we use peptides that are very low molecular weight so they can get through the skin as well.”

Happy Patients, Healthy Practice

Dr. Casas is pleased to be able to advise a simple regimen of a single product targeted to address several post surgical symptoms. She has already seen great results from a current, ongoing double-blind, split-body study in which patients continue to break the blind. Dr. Casas is following patients undergoing surgeries including neck contouring, breast reduction with liposuction of the axilla, and liposuction of hips and thighs from the backside with contouring around the front, interior side with abdominoplasty.

In the current study, patients pre-treated for two weeks pre-surgery and post-surgery through recovery, one side of the body with **ReFORM & RePAIR Complex** and the other side of the body with a bland moisturizer. Dr. Casas says, “Most of the patients are breaking blind two weeks after surgery.” She adds, “Incisions look really healthy at two weeks—they look like a typical six or eight week incision—so this is visibly accelerating that healing process. Bruising and hemosiderin staining, the discoloration of the tissues which occurs from the trauma of surgery, has been diminished both in its intensity and time to resolution. My patients, staff, and I are very excited about the improved patient experience we are seeing in all of our study patients.”

¹ Aesthetic Plastic Surgery National DataBank Statistics 2020. <https://cdn.theaestheticsociety.org/media/statistics/aestheticplasticsurgerynationaldatabase-2020stats.pdf>

² Leitermann, Mona et al. “What’s Preventing Us to Get More Attraction: The Fear of Aesthetic Surgery.” *World Journal of Plastic Surgery*. vol. 5,3 (2016): 226-235.

³ “New RealSelf Survey: Nearly Three in Five U.S. Women Do Not Know There Is a Difference Between Cosmetic Surgeons and Plastic Surgeons.” PR Newswire. <https://www.prnewswire.com/news-releases/new-realfself-survey-nearly-three-in-five-us-women-do-not-know-there-is-a-difference-between-cosmetic-surgeons-and-plastic-surgeons-300895916.html>

⁴ Widgerow, A, et al. (2020, April). “Developing a Topical Adjunct to Injectable Procedures.” *Journal of Drugs in Dermatology*. <https://jddonline.com/articles/dermatology/S1545961620P0398X>

⁵ Moradi A, Poehler J, Bell M. “A randomized double-blind trial evaluating the efficacy and tolerability of topical body treatment with TriHex Technology® combined with abdomen cryolipolysis or radiofrequency procedures.” *Journal of Cosmetic*

Dermatology. 2020 Mar;19(3):677-681.

⁶ Vanaman WMJ, Bolton J, Fabi SG. A randomized, single-blinded trial of a tripeptide/hexapeptide healing regimen following laser resurfacing of the face. *J Cosmet Dermatol*. 2017;16(2):217-222.

⁷ Widgerow, Alan D et al. “Topical Skin Treatment and Its Influence on Surgical Healing: Review of Literature and Underlying Physiology.” *Aesthetic surgery journal*. Open forum vol. 3,3 ojab029. 7 Aug. 2021. doi:10.1093/asjof/ojab029

INTRODUCING ReFORM & RePAIR COMPLEX with TriHex Technology®



Smarter Science.
Stronger Skin.



THE AESTHETIC CRUISE 2022

July 9–21, 2022

Chair: Joseph Hunstad, MD

Vice Chair: Tim Papadopoulos, MD

This activity has been approved for *AMA PRA Category 1 credit™*

OCEANIA CRUISES *Marina*

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-  Skagen, Denmark
-  Kiel, Germany
-  Karlskrona, Sweden
-  Helsinki, Finland
-  Tallinn, Estonia
-  St. Petersburg, Russia
-  Gdansk, Poland
-  Copenhagen, Denmark

meetings.theaestheticsociety.org/cruise



A Review of our Recent Education—Now Available for On-Demand Viewing

While the robust and dazzling Aesthetic Meeting is the capstone of the education provided by The Society, we are proud to offer smaller, more intimate vehicles for aesthetic education in the form of our symposia. Most recently, those included Nuances and Techniques in Injectables, Experienced Insights in Breast and Body Contouring, and The Business of

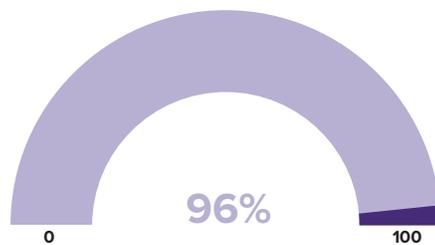
Launching Your Practice: the 7th Annual Residents' Symposium.

Prior to the COVID-19 pandemic, all of our symposia were in-person-only events. Last year, circumstances necessitated that our symposia adopt completely virtual formats, but thanks to our tireless board and resourceful staff, we have been able to constantly adapt to the changing circumstances. Our most

recent symposia were hybrid: some attendees joined us in person, while others did so from the comfort of their homes. We're happy that attendee feedback has been so decisive—this new model has been appreciated, as it offers the one thing that is so important at this time: flexibility.

Read on for a few highlights and testimonials of our recent aesthetic education!

NUANCES AND TECHNIQUES IN INJECTABLES



96% of respondents reported that they were overall Satisfied or Very Satisfied with the educational content.

"I really appreciated seeing other injection techniques, as well as hearing tips and pitfalls. Everything in the symposium was useful and enjoyable to learn about!

Thank you!"

—Mary Matelan, MD

"This is a condensed high yield educational update of the latest and greatest of injectables and their applicable uses in my practice." —Jared Garlick, MD



Chris Surek, DO; Jordan Rihani, MD; and Jackie Yee, MD; walk attendees through a live injectable demonstration.



Restoration jawline injections—3 sessions
An illustration of where injectables can enhance jawline restoration.



A live injection in progress.



All nodules resolved or significantly softened.
Miles Graivier, MD, reviews one success story.

Continued on Page 13

Senté



Dermal Repair Ultra-Nourish

Indulge Your Skin in Nourishing Repair

Replenish and repair for deeply hydrated, nourished skin.

Senté® Dermal Repair Ultra-Nourish combines patented repairing molecule **Heparan Sulfate Analog (HSA)** and a unique blend of lipids, to nourish and smooth dry, sensitive skin.

PATENTED REPAIRING



Hydrates deeply as it supports the skin's natural ability to repair itself.

UNIQUE BLEND OF



LIPIDS

Mimic the components of the skin barrier and restore its function, preventing the evaporation of water.

100%

of subjects in a clinical study agreed

**THEIR SKIN
felt NOURISHED**
at 8 weeks

90%

of subjects agreed that it provided long lasting

**HYDRATION &
MOISTURIZATION**
at 8 weeks

79%

of subjects agreed it made

**FINE LINES & WRINKLES
LESS VISIBLE**
at 8 weeks



HSA
+ LIPIDS

Heparan
Sulfate
Analog

Learn more at sentelabs.com or
contact us at info@sentelabs.com.

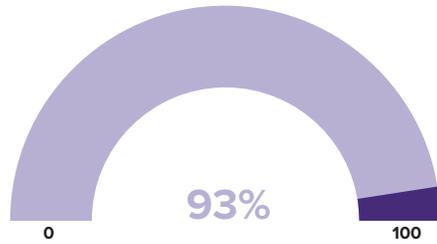
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A Review of our Recent Education—Now Available for On-Demand Viewing

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EXPERIENCED INSIGHTS IN BREAST AND BODY CONTOURING



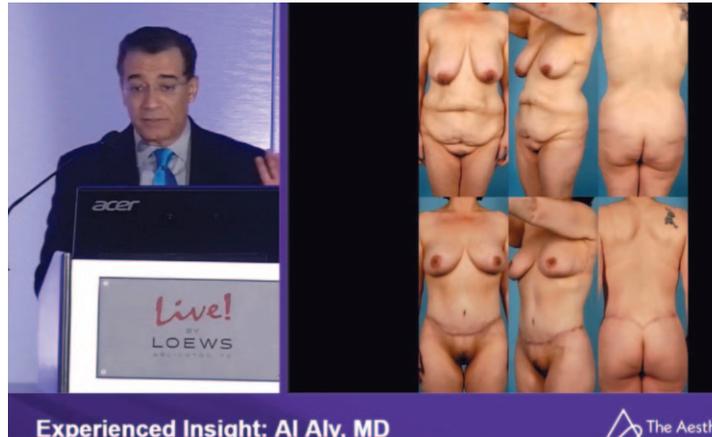
93% of respondents reported that they would recommend this meeting to a colleague.

“I loved the symposium! The discussion was great because it was honest and sought to provide best practices to attendees. This symposium will be a must in the years to come. —Paul Manuel Ali Ouddane Robles, MD

“This format was perfect! There was a great dynamic interplay between speakers, panelists, and the audience.”
—Steven A Teitelbaum, MD



Gabriele Miotto, MD; Julie Khana, MD; and Kristi Hustak, MD; share a quick photo before presenting in educational sessions.



Al Aly, MD, displays a before-and-after comparison while instructing on how he obtained the results.



Many residents and fellows were thrilled to attend the symposium—shown left to right front row: Gianfranco Frojo, MD; Brian May, MD; faculty member Danielle LeBlanc, MD; Candidate Abby Culver, MD; and ASERF President Louis Strock, MD. Back row: Victor Chang, MD; Sameer Halani, MD; Alex Cheah, MD; and Joe Kelling, MD.



A sneak peek behind the scenes at how the symposium magic is made!

Continued on Page 15

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“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



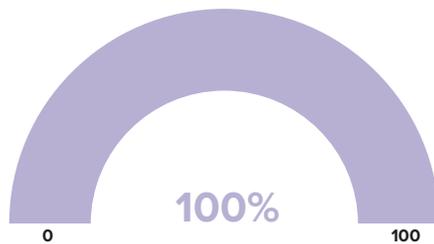
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THE BUSINESS OF LAUNCHING YOUR PRACTICE: THE 7TH ANNUAL RESIDENTS' SYMPOSIUM



100% of respondents reported that they were Very Satisfied with their overall experience on the virtual platform.

“The Residents’ Symposium is everything business that isn’t discussed in residency in one weekend. It is truly a hidden jewel offered during residency!”

—Joshua Cohen, MD

“The meeting was fantastic. An extensive amount of information was covered, but very concisely. I appreciate all the time spent by each speaker to prepare and educate us.”

—Margaret Ferguson, MD



Discussions at The Residents’ Symposium were lively! From top left to bottom right: Ashley Gordon, MD; Ashley Amalfi, MD; Marissa Tenenbaum, MD; and Umbareen Mahmood, MD



Dave Sieber, MD; Troy Pittman, MD; Chet Mays, MD; and Ashley Gordon, MD offer sage advice to the next generation of aesthetic plastic surgeons.

Didn’t attend? Not to worry! The education from these three symposia is available to purchase for on-demand access! Click or scan the code to get started. Members, Candidates for Membership, and Residents: search your email or email hello@theaestheticsociety.org for promo codes for discounted access! The Residents’ Symposium is available for on-demand access on RADAR Resource.





AESTHETIC CARE TEAM

The Impact of Seasonal Changes on Skin and Patient Care

By Lindsay Cole

For the majority of those of us in the US, we are blessed to experience all four seasons in all their glory. However, the shift in seasons can impact many aspects of our lives, a major example being our skin. This is particularly true in the winter months when our environment often becomes colder and dryer. Working in plastic surgery, we understand that it is important to be cognizant of the body's largest organ, the skin. Its health impacts the overall results patients achieve in our practice.

Whether we are doing pre- or post-operative skin care, maintenance, and prevention, or utilizing injectables, peels, or other modalities, the value of periodically tweaking our patients' at-home skincare regimen or in-office treatments should never be underestimated, particularly in the winter. Our patients appreciate when they see that we are reacting to their changing circumstances, like the weather, but also how the weather impacts their seasonal activities.

How do we take the not-so-great side effects of our environments, improve our skin's health, and begin to reverse signs of premature aging? This is a question I often ask out loud to patients in my practice and I love to see the look on their faces, because clearly, they are not here to discuss the weather. However, if we pause for a moment, we will see amazing correlations in nature to our skin.

I always use bark on a birch tree as an example. We even have birch tree branches in our practice as decoration, which has been helpful and convenient to use as visual examples. I explain that microscopically, our skin looks like bark on a tree, and how it is important for a tree to be able to effectively shed the old, dead bark to reveal its beautiful healthy, smooth, even-colored trunk, and how that shedding process helps the tree to grow. Ultimately, what we all would like is smooth, healthy, bright, beautiful, and youthful skin, so I explain that we would never take sap, or molasses, or even mud and cake it onto the trunk of the tree; that would be ridiculous. If



I explain that microscopically, our skin looks like bark on a tree, and how it is important for a tree to be able to effectively shed the old, dead bark to reveal its beautiful healthy, smooth, even-colored trunk, and how that shedding process helps the tree to grow.

we were to do that, the tree wouldn't grow or thrive; the tree would begin to wither and lose its vitality and lushness because we would be inhibiting the process that it wants and needs to do to continue to be healthy and grow. This is an effective example, especially when discussing cellular turnover, stimulating collagen and elastin production, and general exfoliation, whether it be from their products at home, or a treatment we are doing in the office such as a peel or a laser, because so much of what we are working to improve with our patients involves their skin in one way, shape, or form.

Our patients are looking to us to help advise them in our areas of expertise. It is important for us now more than ever that we don't take their trust for granted, and to continually take proactive steps in trekking with them in their patient/provider relationship. This includes navigating with them throughout the seasons and anticipating their needs and

listening to their goals, because doing so helps facilitate a stronger bond with them and we retain our patients for years to come. Their loyalty is priceless.

Companies selling fads on social media platforms, MLM companies, and mass-produced OTC products don't get the same opportunity to connect and care for our patients like we do. Make sure you're offering the most appropriate treatments, products, and/or specials that will help give your patients' skin the healthiest boost for the season, climate, and environment. Be methodical in your approach to offering your patients the most comprehensive care that makes sense not only for your geographical location and season, but for their lifestyle as well, and the results that they are looking to you to help them achieve. Keeping all of that in mind will help to ensure a successful, dynamic, and harmonious relationship with your patients, both now and for years to come.

Lindsay Cole from Toledo, OH, has been an aesthetician for 12 years and has worked in plastic surgery for 10 years. Lindsay works in the Northwest Ohio and Southeast Michigan area with Peter Koltz MD and PekoMD.

Whether we are doing pre- or post-operative skincare, maintenance and prevention, or utilizing injectables, peels or other modalities, the value of periodically tweaking our patients' at-home skincare regimen or in-office treatments should never be underestimated, but particularly in the winter.

Aesthetic Care Team... Here's a Podcast Just for You!

The Aesthetics Staff Bootcamp podcast is an educational podcast designed for newer staff to serve as a source of essential information about a variety of popular aesthetic procedures.

THE FIRST SEASON COVERS:

- Breast Augmentation
- Liposuction
- Rhinoplasty
- Abdominoplasty
- Injectables

This podcast is meant to be a helpful supplement to the surgeon's unique protocols.

Designed to benefit staff who are newer to the practice, the Aesthetics Staff Bootcamp podcast also serves as a refresher for established staff members. This information will be helpful for clinical and non-clinical staff as they actively engage and care for patients.

Dr. Regina Nouhan, a retired plastic surgeon with a long practice history, is your guide for this learning experience.

Each episode highlights five basic categories of information about the procedure.

These include:

- Definitions and medical terminology
- Surgical procedure and pertinent anatomy
- Consultation pearls
- Before & after care



SCAN OR
CLICK BELOW
TO LISTEN
TO THE
PODCASTS!



- Patient experience (including questions and complications)
...with other important information interspersed as needed.

The Information is organized in a user-friendly manner. You may find it's a lot to digest at one sitting, so revisit sections of each episode as often as necessary to meet your own personal needs.

AESTHETIC CARE TEAM AFFILIATE PROGRAM

It's time.

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

Beauty. Artistry. Education. Expertise.

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

Benefits of Enrolling Your Staff:

- Discounted registration fees for meetings and symposia, whether face to face or online, with education tailored to your staffs' needs
- Subscriptions to RADAR Resource and *Aesthetic Society News*, filled with content tailored for your Aesthetic Care Team
- Access to professional development and dedicated networking opportunities
- Your practice is enrolled, so membership is transferable between staff
- A terrific employee retention tool



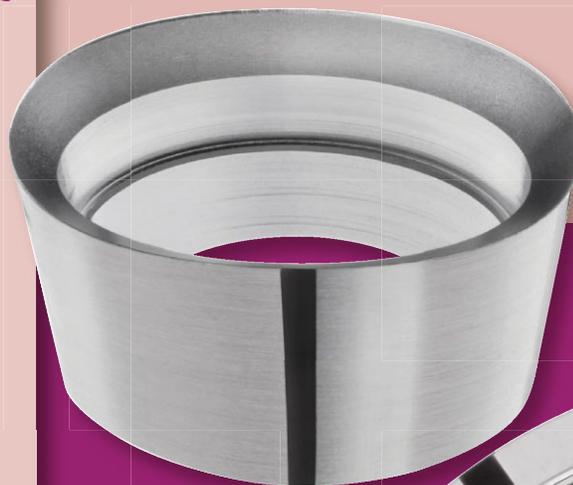
Welcome your team to
The Aesthetic Society family.

Learn More & Enroll At:
theaestheticsociety.org/aestheticcareteam

ASSI[®] Oval Areola Marker

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Tucson, AZ



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Build Your Profile on our New Website!

By Michael A. Bogdan, MD, MBA, FACS

After tireless effort, hard work, and dedication from staff, leadership, consultants, and technology specialists, we are pleased to announce the launch of our updated website property, theaestheticsociety.org.

Theaestheticsociety.org was not a typical website redesign project; it is a complete reimaging of The Society's online presence.

We had several goals in mind during the design process of the theaestheticsociety.org, not least of which was incorporating our new brand identity into the property. The new website now more closely aligns with our mission and brand pillars of beauty, artistry, expertise, and education.

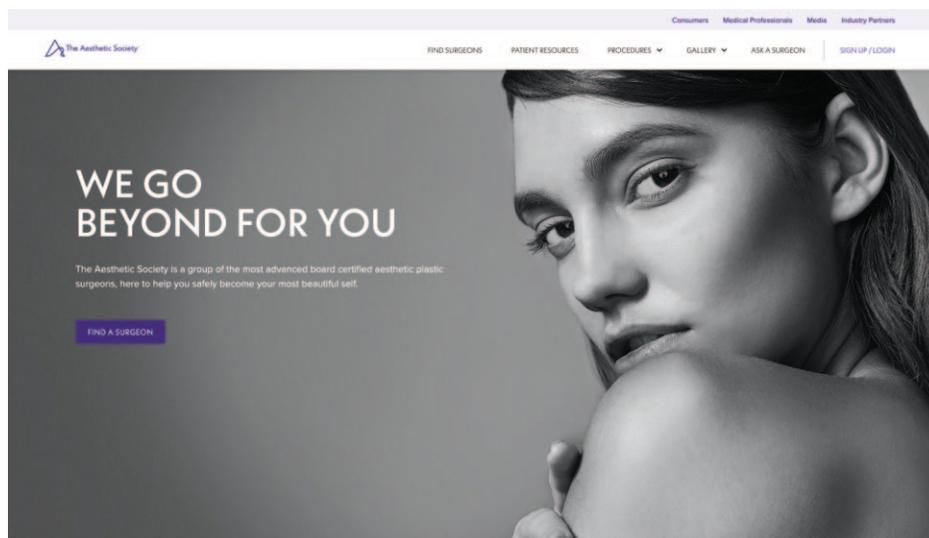
Another of our aims was to consolidate a sprawling digital footprint that scattered many of the Society's critical functions and concerns across multiple websites.

Theaestheticsociety.org is now the one-stop website for members, consumers, industry partners, and the press.

It goes without saying that we needed to modernize and streamline our technology stack. The new website employs best-of-breed tooling, methodology, and infrastructure. The site's frontend has been similarly revamped to offer the most responsive and intuitive user experience.

NEW SITE HIGHLIGHTS

Patient Testimonials: A dedicated section on your member Public Profile highlights patient testimonials, allowing you to spotlight their satisfaction and praise for your skills as an aesthetic surgeon.



Find a Surgeon: This feature has been significantly upgraded so patients can quickly find member surgeons that match their needs. It uses an interactive map, desired procedures, and key practice features, such as languages and payment methods offered. Additionally, it now has enhanced support for Multi-Location and Group Practices.

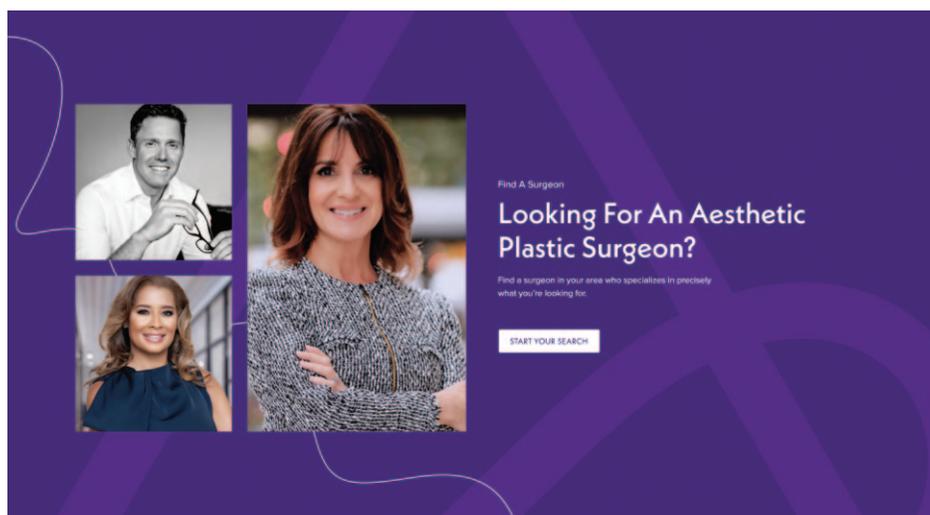
Photo Gallery: Features the most searchable Before and After Photo Gallery available for aesthetic plastic surgery, using industry-leading filter capabilities and a location-based sorting option to match patients with the images most relevant to their body and desired results. Allows you to showcase your skills worldwide and attract

well-qualified patients who have a more realistic vision of what you can achieve together.

Consultation Requests: Prospective patients can send requests directly through the site, enabling you to easily connect with and track patients who prefer to communicate digitally. Buttons to initiate Consultation Requests will be featured prominently with all your submitted content, including your Photo Cases, Answers, Find a Surgeon, and your Public Profile, making it easier than ever for new patients to get in touch.

Please take a few moments to explore theaestheticsociety.org and, if you have not already done so, update your Public Profile, making sure it is as complete as possible. This will aid in prospective patients finding your practice within the Find a Surgeon feature. We hope you and your patients are excited and empowered by this beautiful and functional new resource.

Dr. Bogdan is an aesthetic surgeon practicing in Grapevine, TX, and oversaw the creation of theaestheticsociety.org as the chair of the Website Taskforce.



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The Aesthetic
Meeting 2022
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The Aesthetic Society Presents: BEYOND THE BEFORE & AFTER

By Laura Leatherberry



This series provokes a new understanding of how plastic surgery impacts people's lives, going beyond the superficial to be more inclusive of what many patients experience.

The series will debut in February!

Supported by

Allergan Aesthetics
an AbbVie company

At The Aesthetic Society, we believe every patient has a unique story that deserves to be told. That's why we created Beyond The Before & After, a docuseries exploring life after aesthetic plastic surgery. This series provokes a new understanding of how plastic surgery impacts people's lives, going beyond the superficial to be more inclusive of what many patients experience. We give patients the platform to tell their untold stories of how plastic surgery helped them transform their lives, not just physically but emotionally too,

with the goal of helping others feel more empowered in their own lives.

In this series, we feature a single mom's journey with weight loss and self-love, a non-binary person's story about self-discovery and acceptance, a breast cancer survivor's path to becoming the new woman she is today, and a father's pursuit of a healthier and happier lifestyle. With the help of a caring and qualified aesthetic plastic surgeon, each patient was able to fix something they wanted to change

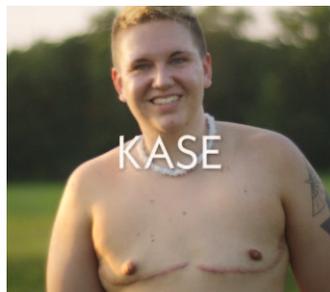
or restore on their body, but their results went well beyond that.

The series will debut in February!

Laura Leatherberry is a branding consultant who has worked with The Aesthetic Society for three years, rebranding the organization. Her latest contributions include creating the "Beyond" creative campaign, writing content for the new website, and producing the "Beyond The Before & After" docuseries.



JESSICA



KASE



EVA



COLBY

CareCredit is a business tool that can help you convert more patients today.

If you're not talking about financing during every cost conversation, you could be letting dollars walk out the door. Talking about patient financing at every consultation could be the difference between a patient choosing you for their procedure or going to a competitor.



Offering a financing solution like the CareCredit health, wellness and beauty credit card can help you reach your revenue goals. That's because **CareCredit is more than just a payment option, it's a business tool** that can help you convert more

consultations into scheduled procedures. Here's how adding patient financing to your practice's toolbox can help you find opportunities to grow your practice.

Make financing part of every consultation.

The key to helping patients choose you for their procedure is to make promotional financing part of every consultation. CareCredit can help make this easier with the **Payment Calculator**, which patients can use to see their estimated monthly payments with the CareCredit credit card. When they have a convenient way to pay, more of your patients may accept your full recommended plan. It all adds up to help make the cost conversation easier for everyone.

Give patients a contactless way to apply and pay.

Many patients have come to appreciate the convenience of contactless payments. With your **CareCredit custom link**, your patients have a direct link to financing on their mobile device. They can learn about financing, see if they prequalify, and then apply for the CareCredit credit card. If approved, they can use their account to pay right away. It's a quick and easy way for patients to access financing and pay over time* for procedures or skin care products. Check out [carecredit.com/mycustomlink](https://www.carecredit.com/mycustomlink) to learn more.



How to Talk to Patients About Financing

Try saying this during your next recommendation:

"Some of our patients prefer a monthly payment option. For that, we accept the CareCredit credit card. If you'd like to learn more or apply, you can scan this QR code with your phone."

\$5,125 is the average first ticket for a patient opening a CareCredit account in a cosmetic surgery practice.¹



Get support to help convert more consultations.

No matter how you communicate with your patients, CareCredit makes it easy to let them know you offer convenient financing with free tools and resources. Download a QR code embedded with your custom link that patients can scan to apply or pay while in your practice. Plus, get a free listing on the CareCredit.com Acceptance Locator, which receives on average 1.5+ million searches per month.² Take advantage of these great resources to reach more patients and you could see an increase in scheduled procedures.

CareCredit cardholders have a **6.6x higher average ticket** than spending on a typical general purpose credit card.⁴ With CareCredit as a tool in your practice's toolbox, you can connect with patients in entirely new ways. It's a simple solution that can help you unlock more opportunities to help increase your revenue and boost your business, all while helping more patients get the procedures or skin care products they need or want.

¹Average 2020 1st ticket sale in independent cosmetic surgery practices that accept CareCredit. CareCredit Analytics, 2020.

²January–December 2020 Omniture Web Report.

³Cardholder Engagement Study Q3 2020.

⁴CareCredit 2020 Analytics and The Nilson Report—February 2020 ed., 50 largest U.S. Visa & Mastercard Credit Card Issuers data table.

*Subject to credit approval. Minimum monthly payments required. See carecredit.com for details.

47% of cardholders say they would have postponed or decreased their procedure's scope if CareCredit was not available.³

Join the CareCredit network today.
Visit carecredit.com/asn or call 855-860-9001.

Already enrolled?
Visit carecredit.com/providercenter to access exclusive tools and resources.



This insert was independently produced by CareCredit. *Aesthetic Society News* had no part in its production. The views expressed here do not necessarily reflect those of the editor, editorial board, or the publisher.



Bylaws Modernization—All Members Asked to Vote!

By Jeffrey M. Kenkel, MD—Chair, Bylaws Committee

As our organization continues to evolve and be responsive to our member's needs, so must the Bylaws that guide the governance of The Aesthetic Society.

The last two years have presented unfathomable changes and our Society must adapt to remain relevant. The Board of Directors charged the Bylaws Committee with pursuing an extensive modernization to provide a framework for the future. Many of

the changes impact ease of use such as reorganization of clauses, use of Arabic numbering, gender neutrality, and updated verbiage, etc.

Several changes are more significant and represent "material" changes that members need to understand. A "Chart of Material Changes" appears below for your review. **As of this writing, the request for your vote has**

already been emailed to you. Please vote and make your voice heard!

I would like to thank the members of the Bylaws Committee for their work on this project—Drs. Monte Eaves, Greg Evans, Roberta Gartside, Erin Kennedy, Leo McCafferty, Dan Mills, and Robert Singer. Special thanks as well to Bob Aicher, our Legal Counsel, who was immensely helpful in this process.

PROPOSED MATERIAL CHANGES TO THE AESTHETIC SOCIETY BYLAWS—2022

EXPLANATION FOR RECOMMENDED CHANGE

Addition to Society Purposes:

- 8. To promote and advance the subspecialty of aesthetic surgery so that it may maintain its proper place within the field of plastic surgery.

The goal of aesthetic surgery being properly recognized as a subspecialty of plastic surgery warranted additional emphasis.

Membership Requirement—No Meeting Required:

- A. Applicants for membership are no longer required to attend a meeting prior to applying for membership.
- B. Current members are no longer required to attend a meeting once every four years to maintain membership.

Given the current global travel situation and the fact that access to Society aesthetic education can now be obtained online, it is recommended that this requirement be removed.

Vote on Applicants for Membership:

- A. Active Members will receive a list of all applicants for membership and be encouraged to comment on individuals if they have an ethical or some other concern about the applicant. All comments are considered by the Application Review Committee during their deliberations. *This is the current process and will continue in this fashion for member feedback.*
- B. Active Members will **no longer vote** on the final list of applicants recommended by the Application Review Committee. The Board of Directors will have the final vote on all applicants.

Active Members regularly comment on applicants for membership and that process will continue to aid applicant evaluation.

Historically, once the recommended list is distributed for a vote, all applicants are approved.

Revised Clause:

- 3. Approval Procedures. The names of the applicants will be submitted to the membership for their review and comment at least 30 days in advance of the vote of the Board of Directors. The Application Review Committee will review all comments received from the membership and will then forward all names of applicants to the Board of Directors and will signify which applicants are recommended to be tabled for six (6) months or one (1) year, which applicants are recommended for rejection for two (2) years, and which applicants are recommended for membership. Applicants receiving approval of four-fifths (4/5) of the members of the Board of Directors will be admitted to membership. An applicant rejected for membership may reapply two (2) years thereafter. The Secretary will inform all applicants and each member of the Society of the action taken. New members must sign a pledge to adhere to the Society's Bylaws, Conflict of Interest Policy, Code of Ethics, Breast Implant Device Registration requirement, and for Active members, to operate only in accredited surgical facilities.

The recommendation is to eliminate the final vote by members and only require Board approval.

Continued on Page 25

Bylaws Modernization—All Members Asked to Vote!

Continued from Page 24

New Membership Requirement—Register Breast Implant Devices—Annual Attestation:

Breast Implant Device Registration. All Active and International Active Members who perform breast implant surgery must register the implant devices through any one of the manufacturers approved methods. Compliance is a requirement of membership, and each member will annually sign and return to The Aesthetic Society a statement attesting to compliance. Failure to comply with The Aesthetic Society’s breast implant device registration requirement will lead to sanctions up to and including expulsion from membership. After expulsion for one (1) year, a previous member may apply to the Trustees for reinstatement as a member.

Added as 2.2.1.1 and 2.2.4.1

Demonstrates commitment to patient safety and promotes better surveillance. Implant registration is already part of the office workflow and is not an additional task being imposed on members.

Recommendation aligns with current requirement that all Active Members operate in accredited surgical facilities.

Attestation will be required effective with 2023 Dues renewal.

Removed “Programs” from Bylaws:

- Candidate for Membership Program
- International Candidate for Membership Program
- Aesthetic Care Team Affiliate Program

These “Programs” are not categories of membership. Implementation and oversight will be detailed via Society Policies.

New Standing Committee: Aesthetic One

1. **Aesthetic One.** The Aesthetic One Committee is charged with overseeing the development of, and recommending further refinements and improvements to, Aesthetic One, an integration of the Aesthetic App for Patients and the Aesthetic App for Surgeons.

Recommend elevation from a Task Force to a Standing Committee.

New Standing Committee: Inclusion and Diversity

- 8.1.7 **Inclusion and Diversity.** The Inclusion and Diversity Committee will proactively collaborate with other committees to review and implement programs and policies that support the Society’s commitment to diversity and fostering an inclusive culture.

Recommend elevation from a Task Force to a Standing Committee.

Increased Member Representation on Finance & Investment Committee:

- 8.1.6 **Finance and Investment.** The Finance and Investment Committee will consist of the President-Elect, Vice-President, Secretary, Treasurer, commissioners, and up to eight (8) members appointed by the President for a term of one (1) year. The Committee will consider all matters concerning the financial affairs of the Society and make recommendations based on its considerations to the Board of Directors.

Increased member representation from three (3) to eight (8) appointed by the President.

Expanded Approval Process for Meeting Attendees from Outside the Specialty and added allowance for ISPAN (Int’l Society of Plastic & Aesthetic Nurses) Members to attend:

Revised Clause:

- 9.2 **Attendance at Educational Sessions During The Aesthetic Meeting.** Attendance at the scientific sessions and optional courses of the annual meeting will be limited to members of the American Society for Aesthetic Plastic Surgery, Inc.; members of the American Society of Plastic Surgeons, Inc.; residents in approved plastic surgery training programs who submit an affidavit from their chief of service; Candidates for Membership; Candidates for International Membership; Aesthetic Care Team Affiliates; members of ISAPS; members of ISPAN; plastic surgical nurses who submit a letter of verification of employment by a board certified plastic surgeon, and plastic surgeons who are recognized members of a national plastic surgery society acceptable to the Board of Directors. Other individuals may attend the meeting by special invitation of the Executive Committee or the Chair of the Program Committee, subject to consultation with the Executive and Deputy Executive Directors.

Individuals from outside the specialty may attend by special invitation if approved by the Executive Committee (currently only requires approval by the President & President-Elect).

Program Chair retains ability to invite speakers as needed for enrichment of educational program.

Recommend inclusion of ISPAN members as an approved attendee category.

Continued on Page 27



BIA-ALCL Patient Assistance Fund

Let Your Patient Focus on Recovery

The Aesthetic Society and the American Society of Plastic Surgeons, in conjunction with the Aesthetic Surgery Education and Research Foundation and the Plastic Surgery Foundation, are pleased to offer the BIA-ALCL Patient Assistance Fund to patients diagnosed with ALCL.



Patient Fund Criteria

- Health insurance must be either exhausted or unavailable
- No health insurance through any other source
- U.S. Patients Only
- Diagnosed with ALCL following National Comprehensive Cancer Network (NCCN) treatment guidelines

For Aesthetic Society, ASPS, ASERF and PSF member surgeons who have patients diagnosed with ALCL, visit: aserf.org/BIA-ALCL, for all criteria and to download an application.

For Additional Information on the Fund,
Please Contact Ivan Rodriguez at:
562.799.2356 or ivan@theaestheticsociety.org

Thanks to Generous Contributions From:



Bylaws Modernization—All Members Asked to Vote!

Continued from Page 25

Amendments to the Bylaws:

Currently, all Bylaws amendments, however small, require membership approval. The proposed Revised Clauses below clarify that:

- A. Proposed changes to membership rights, membership meeting quorum increases, or alterations to the Bylaws amendment procedures will require a vote of the membership, whereas;
- B. Proposed changes to Society administration, committees, operations, and procedures will require a vote of the Board of Directors only but will be circulated to the membership in advance for review and comment.

Revised Clauses:

- 13.1 Initiation.** Proposed amendments to the Bylaws may be initiated by any 25 Active voting members, or by the Bylaws Committee, or by any member of the Board of Directors. All proposed amendments will be submitted, in written or electronic form, to the Chair of the Bylaws Committee for that Committee's review and recommendation to the Board of Directors.
- 13.2 Amendments Requiring Membership Vote.** If the proposed amendment restricts the rights or privileges of members of the Society, increases the quorum for membership meetings, or alters the procedures for amendment of the Bylaws, such proposed amendments must be placed before the membership for a vote.
- 13.3 Amendments Requiring Board Vote Only.** When the proposed amendment does not meet the requirements of Section 2 above, following thirty (30) day prior written notice to the members of the Society accompanied by a copy of the proposed amendment, at any meeting of the Board of Directors thereafter held, the Board of Directors, by two-thirds vote of the quorum present, may adopt or reject such proposed amendment or may amend the proposal and adopt or reject it as amended.
- 13.4 Appeal of Board Rejection of Amendment.** In the event the Board rejects the proposed amendment or fails to accept it within three (3) months, any twenty-five (25) Active members may make a written request that the matter be placed before the membership for a vote, which the Board of Directors will do within sixty (60) days. Proponents and opponents of the Bylaws proposal will provide statements to the membership of no more than 500 words each. The proposed amendment may be adopted only by a three-quarters (3/4) majority vote of the Active members voting.

Provides a framework to protect member's rights within the Society yet allows for more expedient action by the Board of Directors, if needed.

Updated Indemnification Language

Revised Clause:

- 14.0 Indemnification and Insurance.** The Society will indemnify its trustees, officers and employees, and may indemnify other persons described in Section 7237(a) of the California Corporations Code, including persons formerly occupying any such position, against all expenses, judgments, fines, settlements, and other amounts actually and reasonably incurred by them in connection with any proceeding, as that term is used in that Section, providing such person had no reasonable cause to believe their conduct was unlawful. The Society may purchase insurance to protect itself against liabilities and expenses, but the Society doing so will not invalidate any policy conditions otherwise limiting coverage.

Indemnification is provided by the Society to encourage leadership volunteerism.

Modernized from original language adopted in 1967.

Mollenkopf Aesthetic Breast Reconstruction Fund

Now Available Nationwide!

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.

For Additional Information on the Fund, Please Contact Ivan Rodriguez at:
562.799.2356 or ivan@theaestheticsociety.org



The Aesthetic Surgery Education
and Research Foundation



Update on ASERF

By Louis L. Strock, MD



The Aesthetic Surgery Education and Research Foundation



THANK YOU ALASTIN AND OUR FACULTY!

ALASTIN Skincare has made an \$18,000 unrestricted donation to ASERF. Experienced Insights in Breast & Body Contouring Symposium faculty were offered an honorarium to participate in an ALASTIN advisory board meeting, with the option to donate that honorarium to ASERF. The ASERF Board is incredibly grateful for the generosity of all who donated and ALASTIN for making this opportunity available!

- “Defining Ideal External Female Genital Anatomy Via Crowdsourcing Analysis”
Frojo G, Kareh AM, Probst KX, Rector JD, Plikaitis CM, Lund HG, Lin AY
Aesthetic Surgery Journal, sjab312

Louis L. Strock, MD is an aesthetic plastic surgeon practicing in Fort Worth, Texas, and serves as President of ASERF.

In November, I was fortunate to be the presenter for ASJ GEMS (Global Educational Meetings) on my experience with Transaxillary Breast Augmentation. The GEMS program is an innovative and valuable resource for surgeons to share their expertise with other Aesthetic Society and ASERF members. A point of emphasis of GEMS is protected time for questions and answers after the presentation. I also appreciated the opportunity to promote ASERF funded research during my presentation, consistent with my goal to highlight how member dues and donations support research that has direct value for clinical practice. To be added to the email invite list for ASJ GEMS, contact Phaedra Cress, phaedra@theaestheticsociety.org.

In December, ASERF members were provided with complimentary access to a presentation from Drs. Caroline Glicksman and Patricia McGuire for their ASERF-funded study, “Systemic Symptoms: Biospecimen Analysis Study.” This is the largest ASERF grant for physician-initiated research to date, the results of which will have a profound impact on our

specialty, as ASERF and The Aesthetic Society work together to bring a more scientific approach to evaluate and study the issues that commonly fall under the label of Breast Implant Illness (BII) with the public, social media, and the FDA. If you are an ASERF member and would like complimentary access to this video, contact Ivan Rodriguez at ivan@theaestheticsociety.org.

RESEARCH PROJECTS RECENTLY APPROVED FOR ASERF FUNDING

- “Tranexamic Acid Pharmacokinetics In Tumescence Solution: What Dose is Safe?”
Joseph P. Hunstad, MD (\$18,095)
- “Hand Aesthetic Survey Study Grant”
Douglas Miller Rothkopf, MD (\$5,550)

ASERF-FUNDED RESEARCH RECENTLY PUBLISHED IN ASJ

- “Body Image Concerns and Associated Impairment Among Adults Seeking Body Contouring Following Bariatric Surgery”
Bennett BL, Grilo CM, Alperovich M, Ivezaj V
Aesthetic Surgery Journal, sjab327

COMING SOON

SETA

In 2022, ASERF Will Introduce SETA, A New Electronic Data Capture (EDC) System

Survey, Extraction, Transformation, and Analysis—SETA (say-tuh)

- Empowers ASERF member surgeons, clinical researchers, and industry partners to extract prospective and retrospective data from The Aesthetic Society’s technology platforms, ANN and Aesthetic One.
- Captures data points directly from research participants.
- Offers a fully configurable design portal meeting the exact needs of the study, trial, clinician, or end user.
- Enables ASERF to develop and maintain multiple clinical studies and expand its research efforts, including offering CRO services to industry.
- Profits from the CRO offerings will be used to support ASERF’s mission: identify and pursue those issues relevant to advancing the safety and effectiveness of aesthetic medicine through independent, unbiased, directed research, and groundbreaking education.

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Interested in learning more?
Email contact@aserf.org
for more information.

The SETA platform is supported by



Aesthetic Surgery Journal

Resident and Fellow Article Competition

There's no doubt that as plastic surgery residents and fellows, you represent the future of our specialty, and possess insights that might be missed by your colleagues in practice. Now's your chance to shine. Submit your clinical or research article to *ASJ* for a chance to win \$200 worth of Oxford University Press books.

Your submission should be received no later than February 1, 2022. All submissions will undergo the same rigorous peer review as all *ASJ* submissions; the winner will be published in a future 2022 issue with a special designation, an Instagram Live interview with Editor in Chief Dr. Foad Nahai, and promotion via social media and at the annual meeting in San Diego.

COMPETITION RULES

- Competition is open to all residents and fellows, US and International.
- Submissions will be due February 1, 2022.
- The winner will receive \$200 worth of Oxford University Press books and an Instagram Live Interview with Editor in Chief Dr. Foad Nahai.
- The winner's paper will be published in 2022 in *ASJ* and will have a special designation.

SUBMISSION INSTRUCTIONS

Submit your paper to mc.manuscriptcentral.com/asjournal and include a cover letter requesting that your manuscript be included in the Resident and Fellow Article Completion. Please contact the Editorial Office (journal@surgery.org) with any questions or comments.



aestheticsurgeryjournal.com





ASJ and ASJ Open Forum

Read the current issue of ASJ here: <https://bit.ly/3rITCBM>

THREE YEARS OF ASJ OPEN FORUM AND WHAT'S COMING IN 2022

We invite you to read Issue 4 of *ASJ Open Forum*, packed with must-read content ranging from gender affirming surgery to evaluating facelift complications with the SMASectomy technique to high-dose neuromodulators and High Yield Injection Targets and Danger Zones for Facial Filler Injection: <https://bit.ly/3lqVQvt>. We welcome your next submission to the premier open access journal in aesthetics here: <https://bit.ly/3j1Dt5u>. In 2022, we will move to a “continuous publication” format so you can expect even more rapid publication of the premier open access journal in aesthetic surgery. We're proud at the accomplishments of *ASJ Open Forum* over the past 3 years including indexing in PubMed Central and the Directory of Open Access Journals, several APEX awards, an increase in the volume and

Video Highlights

<p>Breast Implant illness: An Expert-Panel Discussion on Current Research</p> <p>In this expert video roundtable discussion, the panelists describe the current state of BII challenges, research, and education, as well as its physical indications and implications for patients. They also address the work of The Aesthetic Society and ASERF to improve education and patient outcomes.</p> <p>Read more</p>	<p>An Innovative Approach for Facial Rejuvenation and Contouring Injections in Asian Patients</p> <p>In the Chinese translation of this article, the authors propose the “Future Codes” design in Chinese calligraphy, a concept encompassing a systematic overall design for the art of facial injection in Asian patients.</p> <p>Read more</p>	<p>Video Commentary on: Abdominoplasty in the Massive Weight Loss Patient: Are Aesthetic Goals and Safety Mutually Exclusive?</p> <p>In this Video Commentary, Dr. Ai Aly puts the research on abdominoplasty in MWL patients into perspective and shares his professional insights.</p> <p>Read more</p>	<p>Commentary on: Subpectoral Implant Repositioning With Partial Capsule Preservation: Treating the Long-Term Complications of Subglandular Breast Augmentation</p> <p>Dr. Louis Strock, President of ASERF, draws on his own experience to discuss the merits and limitations of the authors' approach to subpectoral implant repositioning in this Video Commentary.</p> <p>Read more</p>

quality of submissions by well-known authors, podcasts, and an extensive video collection of clinical techniques, video reviews, video commentaries, and video roundtable discussions. We're also proud to share that we are creating visual abstracts for many articles

published and invite authors to submit a brief author highlight video to showcase their *ASJ Open Forum* publication. Watch this space for more news and updates and please follow us on social media and on our newly-launched Instagram account: @asj_openforum.

ASJ at Plastic Surgery The Meeting in San Diego!



Laura Simson and Phaedra Cress raised a glass of bubbly with Dr. Barry DiBernardo during the ASJ 25th Anniversary Champagne Toast.



Sue Dykema and Dr. Bradley Calobrace took part in the ASJ 25th Anniversary Champagne Toast with nearly 100 others who attended.



A meeting of the minds in the ASJ and ASJ Open Forum booth with Dr. David Turer, Dr. Roy Kim, Dr. Mo Alghoul, Editor in Chief Dr. Foad Nahai, Dr. Ozan Bitik, and Dr. Barry DiBernardo.

More on Mentorship

In his President's Update, Dr. William P. Adams Jr. outlined the importance of mentorship within the specialty of aesthetic surgery. In addition to the opportunities he mentioned, The Aesthetic Society and ASERF are dedicated to expanding opportunities for mentorship, especially within underserved communities.

To illustrate, 85% of Black physicians graduate from one of the four Historically Black College (HBC) medical schools, but not all of those institutions have dedicated departments of plastic surgery. At the same time, the Student National Medical Association (SNMA) reports a 20% increase in interest in aesthetic surgery among its membership, showing a gap between the demand for aesthetic education and its supply.

To address that gap, Society members have devised fresh solutions. Surgeon-teachers are participating in cross-university collaborations, like the one between The Department of

Plastic Surgery at Vanderbilt University Medical Center and Meharry University School of Medicine. Two Society members, Dr. Kye Higdon, the Program Director for Plastic Surgery Residencies, and Dr. Galen Perdakis, Chair of the Department of Plastic Surgery, are long-time mentors, helping guide Meharry students both in and out of the classroom for the majority of the program's 11-year history.

In the past several months, the Young Aesthetic Plastic Surgeons Committee, under the leadership of committee chair Dr. Mark Albert, began a new initiative taking a direct approach. In continued coordination with SNMA, the committee was given a list of medical students in need of mentors in aesthetic surgery. Committee members were paired with mentees, who have been in fruitful communication since.

In exciting news, ASERF plans to launch an externship program to increase networking and research opportunities for medical

students without access to a plastic surgery residency program where they would normally exist.

ASERF's President, Dr. Louis Strock, elaborated. "Acceptance into a residency program is a very competitive process. Externships don't level the playing field, but they do provide opportunities to engage with members, and become involved in research or writing papers where they don't already exist" continued Strock. "Not to mention, the program supports both The Society's and ASERF's goal goals of building out their membership pipelines."

Society and Foundation member, Dr. Camile Cash of Houston, will chair ASERF's implementing task force, which is expected to outline the educational goals, learning objectives and expectations of host surgeons. Additionally, the task force will create an application and selection process for surgeons who wish to host an extern, as well as medical students who seek the chance to align themselves with ASERF and The Aesthetic Society.

The program will complement The Aesthetic Society's recently approved and adopted Inclusion and Diversity Task Force goals. Multiple Aesthetic Society Industry Partners have already expressed a strong interest in supporting this important initiative of ASERF and The Aesthetic Society.

"Acceptance into a residency program is a very competitive process. Externships don't level the playing field, but they do provide opportunities to engage with members, and become involved in research or writing papers where they don't already exist.

—ASERF President, Dr. Louis Strock



← Your artwork here!

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. Final selections will be made by the Publications Committee.

In Memoriam: Norman Cole, MD

Norman Cole, MD was a legend in plastic surgery. He served as President of The Aesthetic Society from 1987–1988. A decade later, he served as President of ASERF from 1997–2001.



Notably, he was President of ASPRS (ASPS) during the “breast implant crisis” of the early 1990s. He is one of only two leaders to have served as president of both The Aesthetic Society and The American Society of Plastic Surgeons and his contributions to the Specialty are numerous.

It was during his term as President-Elect of The Aesthetic Society, that he suggested focusing on the term aesthetic to promote Society members as experts within that specific field of plastic surgery, advice that has continued to brand us as the go-to for aesthetic education.

Dr. Cole was a believer in science and research. He worked hard to provide opportunities for plastic surgeons to flourish in these areas. His memory would be well-honored by donating to ASERF. To do so, visit aserf.org, click Donate Now, and be sure to enter “in memory of Norman Cole” in the comment box.

He passed on December 29, 2021, at the age of 85. It was a good life and he will be missed.

REMEMBRANCES OF NORMAN COLE, MD

I first met Norman Cole in 1986 while participating in The Aesthetic Society symposium in Beijing and Shanghai China. Although he was the incoming ASAPS President and I was on no one’s radar, we struck up a friendship, and he remained a mentor and trusted advisor to me ever since.

Aside from his legendary accomplishments in our chosen field, Norm was what I call “a pony person.” That is demonstrated in his comments above; i.e. even if he found himself in a room full of horse manure (the COVID pandemic), he would say “there’s got to be a pony in here somewhere.” He always seemed to make the best of everything.

Always hopeful, always realistic, always grounded, often mischievous, in love with life... Oh how he is missed already.

—Daniel C. Morello, MD, FACS

Dr. Cole was instrumental in protecting access to breast implants during the early 1990s breast implant crisis. Having been president of The Aesthetic Society from 1987 to 1988 and then president of ASPS during the implant crisis put him in a unique position with both societies. Dr. Cole was influential in promoting sound science at this difficult time. He was also significantly involved in formulating clinical and basic research studies to evaluate breast implants.

—Jack Fisher, MD



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!



Membership FAQs

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.

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.

WHEN WILL THE MEMBERSHIP VOTE ON MY APPLICATION?

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.

Apply for Active Membership
Application Deadlines are
January 5 and July 1

WHAT WILL FULFILL THE MEETING ATTENDANCE REQUIREMENT?

The following meetings are exclusively organized by The Aesthetic Society and qualify, whether attended in-person or via online live-stream. Meetings must have been attended within four years prior to application.

- The Aesthetic Meeting (The Aesthetic Society's Annual Meeting)
- The Aesthetic Society's Facial and Rhinoplasty Symposium
- The Biennial Aesthetic Cruise
- Experienced Insights: Breast and Body Contouring—An Aesthetic Society Symposium
- The Aesthetic Meeting Series

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 Membership Manager, Marissa Simpson via email membership@theaestheticsociety.org or at 562.799.2356.

NEW: ONLINE APPLICATION

Complete your application from start to finish 100% online
theaestheticsociety.org/membership

Membership Myth-Busters

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

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 in order to become an Aesthetic Society member. As long as you meet our requirements, you can apply for membership today!

Myth: The Aesthetic Society's streamlined application process means that we are somehow lowering our membership standards.

Fact: Our Society will continue to accept only the best and brightest surgeons, with a major focus on aesthetic surgery and cosmetic medicine. We want the best trained people, and those high standards will never change. That is how we differentiate ourselves from the crowd. Only the process has been streamlined.

Myth: One must be a Candidate for Membership in order to apply for Active Membership in The Aesthetic Society.

Fact: As long as a surgeon meets our application requirements, they can apply for Active Membership immediately.

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!

Injectable + Proven

The Future of Cellulite Treatment Is QWO

QWO
collagenase clostridium
histolyticum-aes injection
0.92mg

Rewrite the story of how you treat cellulite in your practice with QWO, the first and only FDA-approved injectable for moderate to severe cellulite in the buttocks of adult women.

Adding QWO to your practice may have a positive impact by bringing value and new patients, while delivering a treatment that appropriate patients have been looking for.¹²



Nonsurgical treatment with visible results, 28 days after third treatment (21 days apart).^{1*}



Thought to address three factors associated with cellulite.³⁻⁶ The exact mechanism for the treatment of moderate to severe cellulite is unknown.



In clinical trials, no post-treatment downtime was required.⁷

*Individual results may vary.



1,800 patients participated in the overall clinical trial program for QWO.⁸

Most comprehensively studied treatment for cellulite.⁸

INDICATION

Qwo® is indicated for the treatment of moderate to severe cellulite in the buttocks of adult women.

IMPORTANT SAFETY INFORMATION FOR QWO CONTRAINDICATIONS

QWO is contraindicated in patients with a history of hypersensitivity to collagenase or to any of the excipients or the presence of infection at the injection sites.

WARNINGS AND PRECAUTIONS

Hypersensitivity Reactions

Serious hypersensitivity reactions including anaphylaxis have been reported with the use of collagenase clostridium histolyticum. If such a reaction occurs, further injection of QWO should be discontinued and appropriate medical therapy immediately instituted. Advise patients to seek immediate medical attention if they experience any symptoms of serious hypersensitivity reactions.

WARNINGS AND PRECAUTIONS (cont)

Injection Site Bruising

In clinical trials, 84% of subjects treated with QWO experienced injection site bruising. Subjects with coagulation disorders or using anticoagulant or antiplatelet medications (except those taking ≤ 150 mg aspirin daily) were excluded from participating in Trials 1 and 2.

QWO should be used with caution in patients with bleeding abnormalities or who are currently being treated with antiplatelet (except those taking ≤ 150 mg aspirin daily) or anticoagulant therapy.

Substitution of Collagenase Products

QWO must not be substituted with other injectable collagenase products. QWO is not intended for the treatment of Peyronie's Disease or Dupuytren's Contracture.

ADVERSE REACTIONS

In clinical trials, the most commonly reported adverse reactions in patients treated with QWO with an incidence $\geq 10\%$ were at the injection site: bruising, pain, nodule and pruritus.

Please see Brief Summary of Full Prescribing Information on the following page.

Visit QWO-HCP.com to learn more!

References: **1.** QWO [prescribing information], Malvern, PA: Endo Aesthetics LLC. **2.** Data on File. EA-EA-05052. Endo Aesthetics LLC. **3.** Data on File. EA-QW-05073. Endo Aesthetics LLC. **4.** Piérard GE, Nizet JL, Pierard-Franchimont C. Cellulite: from standing fat herniation to hypodermal stretch marks. *Am J Dermatopathol.* 2000;22(1):34-37. **5.** Nürnberger F, Müller G. So-called cellulite: an invented disease. *J Dermatol Surg Oncol.* 1978;4(3):221-229. **6.** Rudolph C, Hladik C, Hamade H, et al. Structural gender dimorphism and the biomechanics of the gluteal subcutaneous tissue: implications for the pathophysiology of cellulite. *Plast Reconstr Surg.* 2019;143(4):1077-1086. **7.** Data on File. EA-QW-05087. Endo Aesthetics LLC. **8.** Data on File. EA-QW-05105. Endo Aesthetics LLC.

 **endo aesthetics**

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EA-QW-05500/May 2021 www.qwo.com

QWO™ (collagenase clostridium histolyticum-aes) for injection, for subcutaneous use

Brief Summary

For complete information, see the full Prescribing Information

INDICATIONS AND USAGE

QWO is indicated for the treatment of moderate to severe cellulite in the buttocks of adult women.

CONTRAINDICATIONS

QWO is contraindicated in:

- patients with a history of hypersensitivity to collagenase or to any of the excipients [see Warnings and Precautions].
- the presence of infection at the injection sites.

WARNINGS AND PRECAUTIONS

Hypersensitivity Reactions

Serious hypersensitivity reactions including anaphylaxis have been reported with the use of collagenase clostridium histolyticum. If such a reaction occurs, further injection of QWO should be discontinued and appropriate medical therapy immediately instituted.

Injection Site Bruising

In clinical trials, 84% of subjects treated with QWO experienced injection site bruising [see Adverse Reactions]. Subjects with coagulation disorders or using anticoagulant or antiplatelet medications (except those taking ≤ 150 mg aspirin daily) were excluded from participating in Trials 1 and 2.

QWO should be used with caution in patients with bleeding abnormalities or who are currently being treated with antiplatelet (except those taking ≤ 150 mg aspirin daily) or anticoagulant therapy.

Substitution of Collagenase Products

QWO must not be substituted with other injectable collagenase products. QWO is not intended for the treatment of Peyronie's Disease or Dupuytren's Contracture

ADVERSE REACTIONS

The following adverse reactions to QWO for injection are discussed in greater detail in other sections of the labeling:

- Hypersensitivity [see Contraindications and Warnings and Precautions].
- Injection Site Bruising [see Warnings and Precautions].

Clinical Trials Experience

Because clinical trials are conducted under widely varying conditions, the adverse reaction rates observed in the clinical trials of a drug cannot be directly compared to rates in the clinical trials of another drug and may not reflect the rates observed in clinical practice.

In two double-blind, placebo-controlled clinical trials (Trials 1 and 2) of identical design, 424 female subjects with cellulite in the buttocks received QWO and 419 female subjects with cellulite received placebo. Enrolled subjects were adults age 18 to 78 years with moderate to severe cellulite (graded as 3 or 4 on a 0 to 4 scale) and without excessive skin laxity. The majority were White (78%) or African American (18%). Subjects completed up to 3 treatment visits separated by 21 days and were followed for up to 6 months after the last treatment visit in a separate open-label extension trial (Trial 3).

The following table shows the incidence of adverse reactions that were reported in $\geq 1\%$ of subjects who received QWO-and at a frequency greater than subjects who received placebo in Trials 1 and 2 through Day 71. Generally, adverse reactions had a duration of less than 21 days.

Adverse Reactions Occurring in $\geq 1\%$ of Subjects in Trials 1 and 2 Through Day 71

Adverse Reactions at Injection Site	QWO N=424 %	Placebo N=419 %
Bruising	84	21
Pain	48	10
Nodule	33	1
Pruritus	15	1
Erythema	9	5
Discoloration	8	1
Swelling	8	1
Warmth	3	0

Pooled terms:

- Bruising - injection site bruising, injection site hematoma, and injection site hemorrhage (refers to verbatim term injection site ecchymosis)
- Pain - injection site pain, injection site discomfort, and injection site dysesthesia
- Swelling - injection site swelling, injection site edema, injection site induration
- Discoloration - injection site discoloration
- Nodule- injection site mass and injection site nodule

Four hundred seventy-nine (479) subjects from Trials 1 and 2 completed a 6-month observation phase in the ongoing open-label safety extension (Trial 3). No long-term safety signals have been identified.

Immunogenicity

As with all therapeutic proteins, there is potential for immunogenicity. The detection of antibody formation is highly dependent on the sensitivity and specificity of the assay. Additionally, the observed incidence of antibody (including neutralizing antibody) positivity in an assay may be influenced by several factors including assay methodology, sample handling, timing of sample collection, concomitant medications, and underlying disease. For these reasons, comparison of the incidence of antibodies in the studies described below with the incidence of antibodies in other studies or to other products, including other collagenase clostridium histolyticum products, may be misleading. By Day 22, approximately 53% (203/383) and 26% (101/383) of subjects who completed the first treatment visit of QWO at the recommended dose in Trials 1 and 2 developed anti-AUX-I and anti-AUX-II antibodies, respectively. The majority ($> 96\%$) of subjects developed antibodies for AUX-I and AUX-II after second and third treatment visits. Antibody titers suggested that antibodies were retained for up to 360 days after receiving the first recommended dose. By Day 71, approximately 68% and 83% of subjects developed antibodies to AUX-I and AUX-II which were classified as neutralizing, respectively.

Antibodies to AUX-I and AUX-II including those classified as neutralizing were not associated with changes in clinical response or adverse reactions at injection site.

Postmarketing Experience

Because adverse reactions are reported voluntarily from a population of uncertain size, it is not always possible to reliably estimate their frequency or establish a causal relationship to drug exposure. The following adverse reaction was reported during post approval use of a collagenase product:

Immune system disorders: serious hypersensitivity reactions including anaphylaxis [see Warnings and Precautions].

USE IN SPECIFIC POPULATIONS

Pregnancy

Risk Summary

There are no available data on collagenase clostridium histolyticum use in pregnant women to evaluate for a drug-associated risk of major birth defects, miscarriage or adverse maternal or fetal outcomes. Following subcutaneous injection, the systemic concentrations for QWO were below the bioanalytical assay limit of quantification [see Clinical Pharmacology in the full Prescribing Information].

In animal reproduction studies, intravenous administration of collagenase clostridium histolyticum to pregnant rats during organogenesis at doses up to 0.13 mg/rat (43 \times human equivalent dose [HED] on a mg/kg basis) revealed no evidence of harm to the fetus. The estimated background risk of major birth defects and miscarriage for the indicated population is unknown. All pregnancies have a background risk of birth defect, loss, or other adverse outcomes. In the US general population, the estimated background risk of major birth defects and miscarriage in clinically recognized pregnancies is 2-4% and 15-20%, respectively.

Lactation

Risk Summary

There are no data on the presence of collagenase clostridium histolyticum in human milk, the effects of collagenase clostridium histolyticum on the breastfed child or on milk production. Following subcutaneous injection, the systemic concentrations for QWO were below the bioanalytical assay limit of quantification [see Clinical Pharmacology in the full Prescribing Information]. The developmental and health benefits of breastfeeding should be considered along with the mother's clinical need for collagenase clostridium histolyticum and any potential adverse effects on the breastfed child from collagenase clostridium histolyticum, or from the underlying maternal condition.

Pediatric Use

The safety and effectiveness of QWO have not been established in pediatric patients.

Geriatric Use

In two double-blind, placebo-controlled, clinical trials in subjects with cellulite (Trials 1 and 2), 24 (5.7%) of the 424 subjects who received QWO were 65 years of age or older. No overall differences in safety of QWO were observed between these patients and younger patients.

PATIENT COUNSELING INFORMATION

Advise the patient to read the FDA-approved patient labeling (Patient Information).

Hypersensitivity

Advise patients to seek immediate medical attention if they experience any symptoms of serious hypersensitivity reactions [see Warnings and Precautions].

Injection Site Bruising

Advise patients that injection site bruising may occur with administration of QWO [see Warnings and Precautions].

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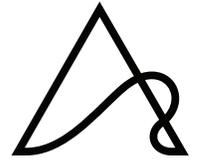
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- New! COVID-19 Emergency Webinar Series

The Aesthetic Society's Industry Partnership Program



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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.

Media Notes and Quotes

ALLURE

The FDA Just Strengthened Its Safety Requirements for Breast Implants

Excerpt: Pre-surgical checklists can help protect both patient and provider. "These lists make sure every single patient has understood certain key points, are easier to review than long and rambling documents, and they provide greater liability coverage for the surgeon and manufacturer on those issues," says Steven Teitelbaum, M.D., an associate clinical professor of plastic surgery at the UCLA School of Medicine. He does point out that in his experience, these comprehensive lists seldom change a patient's final decision regarding surgery.

"We are all accustomed to signing consents and releases, whether to enroll in an exercise class or to update the operating system on our phones.... [this checklist] will help patients make more informed decisions, but the reality is that no one inclined to get an implant chooses not to do so when you show them the paperwork," he says. "Most patients getting implants today have extensively researched implants online, and by the time they are ready to sign the consent, they have already made up their mind." But here's where patient and doctor relationships become more important: "What patients pay attention to is how the doctor explains each of the issues in their own words. A patient is probably inclined to trust the perspective [though which] their chosen surgeon describes the issues."

THE NEW YORK TIMES

Brazilian Butt Lifts Surge, Despite Risks

Excerpt: And with that, Dayyani became another one of the thousands of women worldwide undergoing one of the most popular cosmetic surgeries (some men get it too, but not very many). In 2020 alone, there were 40,320 buttock augmentations, which include both implants and fat grafting, the Aesthetic Society reports. According to Google keyword data, "BBL" was searched roughly 200,000 times per month between January and May 2021. It's also one of the deadliest.

A July 2017 report by the Aesthetic Surgery Education and Research Foundation in *Aesthetic Surgery Journal* noted that one to two out of 6,000 BBLs resulted in death, the highest mortality rate for any cosmetic surgery. In 2018, the British Association of Aesthetic and Plastic Surgery advised surgeons in the United Kingdom to stop performing it, although they couldn't ban it outright.

INSIDER

Doctors warn Brazilian butt lifts can be dangerous, with more and more 'dead fat' being injected into people's butts

Excerpt: According to a July 2017 report by the Aesthetic Surgery Education and Research Foundation in *Aesthetic Surgery Journal*, 2 out of every 6,000 BBLs result in death. Today, a BBL can cost anywhere between \$3,000 and \$30,000, depending on where a patient is willing to travel and the risks they're willing to take, according to the *Times*.



Meet the Staff: Kara Bonela

I am pleased to be the Senior Director of Communications & Marketing for The Aesthetic Society. This is a wonderful opportunity to utilize my luxury background for such a forward-thinking organization.

I have always had a fascination with what compels someone to buy one product over another, such as a fifty-dollar lipstick versus something similar that costs much less. Turns out it's all in the branding and the story we weave as marketers.

While at Meredith Corporation I produced an award-winning, monthly luxury entertainment magazine, as well as managed the client relationship with DIRECTV. Prior to that I worked to build luxury beauty brands on a global scale for Lancaster Group Cosmetics, L'Oréal, Lancôme, and others. My products and innovations are still among some of the most successful in the industry.

During my time at Capitol Records I established a department to create alternate revenue streams for iconic artists such as Dean Martin and Nat King Cole.

When my mother was diagnosed with Alzheimer's, I chose to contribute to the cause using my vast experience to help Alzheimer's Los Angeles, a local nonprofit. This role afforded me the unique opportunity to completely re-brand and redesign all marketing materials, resulting in exponentially increased awareness, engagement, and donations.

I am a long-time Brentwood, CA resident, living with my husband of more than twenty-two years and our beautiful Labradoodle.

As a frustrated artist, I can often be found drawing in my free time.

Update Your Aesthetic Society Logo!

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





The Aesthetic Society®

Premier Partners

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

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

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!

Allergan Aesthetics

an AbbVie company

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



Endo Aesthetics is pushing the boundaries of aesthetic artistry by designing bold solutions that address unmet needs—starting with Qwo™ (collagenase clostridium histolyticum) the first and only FDA-approved injectable for the treatment of moderate to severe cellulite in buttocks of adult women. Endo Aesthetics is a part of Endo International plc, a company grounded in over two decades of pharmaceutical and scientific excellence. Endo is headquartered in Malvern, PA. Learn more at EndoAesthetics.com to sign up for updates.



GALATEA®
SURGICAL



Real Strength Starts from Within.™ We are thrilled to announce that Galatea Surgical is now part of the BD family, following more than 10 years of collaboration. Our collection of GalaFLEX™ surgical scaffolds, constructed from the biologically derived P4HB™ polymer, provides BD with an innovative platform to transform soft tissue repair, reconstruction, and regeneration in plastic and reconstructive surgery procedures.

All GalaFLEX scaffolds are indicated to support, repair, and reinforce soft tissue in plastic and reconstructive surgery.

Because no two patients are alike, the collection of GalaFLEX scaffolds now includes a lightweight, low-profile P4HB scaffold, adding more options to complement your technique and your patients. GalaFLEX LITE™ is designed to enhance anatomical compliance while providing predictable, restorative strength.

Visit www.GalateaSurgical.com for more information on Galatea scaffolds as well as indications for use, safety considerations and reference documents.

GALDERMA

EST. 1981

Galderma, the world's largest independent global dermatology company, has an extensive product portfolio of best-in-class aesthetic solutions, prescription medicines and consumer care products. The company partners with aesthetic providers worldwide to impact the lives of patients by providing innovative solutions driven by groundbreaking medical research to help patients achieve natural-looking results. For more information, visit www.galderma.com/us.



 Mentor is committed to supporting you, your practice and your patients. Mentor customers receive exclusive benefits from strategic partner companies, including Galderma who provides participating ASPIRE Galderma Rewards members with additional opportunities to create value when performing breast augmentation surgery with Mentor Breast Implants. For more information, please reach out to your Mentor Sales Representative.

MERZ AESTHETICS™

At Merz Aesthetics, we are family-owned since 1908 and treat customers, patients and employees like family. It drives our unique connection with healthcare professionals, and it's what makes their success our success. For us it's personal—listening, advising, supporting and celebrating them as we pursue a shared vision to help the world look better, feel better and live better.

We are a leading, global aesthetics company, and our award-winning portfolio of injectables, devices and skincare products helps health care professionals fuel confidence through aesthetic medicine.



New Products to Check Out!
Special Offers for
Aesthetic Society Members



MTF Biologics is a global nonprofit organization that saves and heals lives by honoring donated gifts, serving patients and advancing science. For over 30 years, we have been dedicated to advancing patient outcomes by focusing on innovative, biologic solutions that support and enhance tissue healing. Today, we offer a comprehensive portfolio of aesthetic medicine solutions for providers and patients worldwide including FlexHD Acellular Dermal Matrix, Renuva Allograft Adipose Matrix, LipoGraft Fat Transfer System, Profile Costal Cartilage and MESO BioMatrix Acellular Peritoneum Matrix. These represent surgical and nonsurgical solutions for soft tissue support, rhinoplasty, and volume restoration treatments for patients seeking a healthy and youthful lifestyle.

sientra.

 Sientra offers leading transformative treatments and technologies focused on progressing the art of plastic surgery and making a difference in patients' lives. With unrivaled safety, 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 BIOCORNEUM® the #1 performing, preferred and recommended scar gel of plastic surgeons (data on file).

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.



The Aesthetic Society®

Alliance Partners



A Medical Liability
Insurance Company

◆ Applied Medico-Legal Solutions Risk Retention Group (AMS RRG) continues to make risk management a high priority with the announcement that Adaptrack (adaptrack.com) has partnered with AMS Management Group (amsmanagementgroup.com) and its insurance offerings through AMS RRG (www.amsrrg.com). Powered by Adaptrack's plug-n-play innovative Insurtech capabilities, the agreement enables customized, pro-clinician risk management solutions, which will be immediately available to over 3,000 AMS RRG members. The members will receive Adaptrack's differentiated risk management solutions while attaining a premium discount off of their medical liability coverage. Adaptrack helps clinicians avoid costly risks through AI-powered personalized nudges. To learn more about how AMS RRG and Adaptrack can assist you and your practice, please contact, Chris Edge at cedge@amsrrg.com.



CareCredit is a health, wellness and beauty credit card dedicated to helping millions of patients get the care they want and need by offering promotional financing options. Now accepted at more than 250,000 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 and services 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.



We Cover Complications.

◆ CosmetAssure exclusively provides board-certified plastic surgeons with a financial safety net for patients having elective aesthetic surgery. Every surgery carries the risk of a complication, including aesthetic surgery. Our program works to remove the stress and uncertainty by covering out-of-pocket medical expenses related to post-surgical complications. As the Gold-Standard in complications insurance, we remain committed to patient safety and steadfast in our focus to deliver a superior product to the plastic surgery industry. Exclusive program features include automatic enrollment for Aesthetic Society Members, Capsular Contracture coverage for 18 months, and convenient online claims reporting.

To become a participating surgeon or learn more about our industry leading coverage, contact us at 855.874.1230 or info@cosmetassure.com.

New Alliance Partner



◆ 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.MyEllevate.com.



◆ 3M is one global team deploying differentiated technologies into effective solutions that deliver improved health care outcomes with better economics. 3M is proud to showcase 3M™ Prevena™ Therapy, which is the FIRST and ONLY medical device shown to aid in reducing the incidence of seroma, and in high risk patients, aids in reducing the incidence of superficial surgical site infections in Class I and Class II wounds. For limitations and safety information regarding Prevena Therapy, please refer to 3M.com.

10% discount—CODE: KCIASAPS for Prevena Therapy through Medicalmonks.com



Abbott Nutrition is making an everlasting impact on human health as one of the world's leading authorities in science-based nutrition nourishing every stage of life. As your lifelong nutrition partner and advocate, we invite you to learn more about Juven, our therapeutic nutritional powder for wound and surgical incision healing. Visit Juven.com to learn how Juven can help your patients. Juven.com provides product information, clinical research, delicious recipes and more. Learn more about Juven and Abbott Nutrition today.



 The Planatome® blade by Entrepix Medical applies Chemical Mechanical Planarization (CMP)—used to polish silicon wafers on computer microchips—to surgical equipment. This patented technology from the semiconductor industry transforms the 100+ year old blade design being used today and produces a radically smoother, and more durable blade that provides a cleaner, more controlled, and precise cut. By eliminating the serrations found on all standard blades, Planatome® molecularly polished blades minimize surgically induced tissue trauma and provides patients and surgeons with improved post-operative healing, reduced scarring, and less nerve damage. Planatome® Technology offers a cutting-edge tool for the hands of exceptional surgeons. For more information, please contact us at <https://planatome.com/contact>.



REVANCE ♦ AESTHETICS

 Revance is a biotechnology company focused on aesthetic and therapeutic offerings, notably its next-generation investigational neuromodulator product, DaxibotulinumtoxinA for Injection. DaxibotulinumtoxinA for Injection combines a proprietary stabilizing peptide excipient with a highly purified botulinum toxin that does not contain human or animal-based components and is manufactured exclusively in the U.S.

Beyond DaxibotulinumtoxinA for Injection, Revance has a portfolio of products and services for aesthetics practices designed to transform the physician and patient experience. These prestige offerings feature the RHA® Collection of dermal fillers for the correction of dynamic facial wrinkles and folds and the HintMD fintech platform.

Senté

 Senté developed the first and only skincare line that includes patented Heparan Sulfate Analog (HSA). This breakthrough technology targets the underlying causes of chronic inflammation and helps improve the appearance of redness, wrinkles and discoloration. In addition to daily use, Dermal Repair Cream and Dermal Repair Ultra-Nourish are both proven safe and effective after non-ablative laser and microneedling treatments.

Online skincare sales help to build patient loyalty for your practice while also enhancing the visibility of your practice to new and existing patients. We created our Affiliate Program to support product sales, enabling you to sell Senté to your patients to keep them engaged between visits, while your practice earns commission on every sale.

Register now to take advantage of the exclusive members offer.

Email affiliate@sentelabs.com to register today!



Providing the #1 All-in-One Mobile EHR/Practice Management platform for aesthetic businesses, Symplast delivers 21st century service and solutions that clinics and med spas have been waiting for! Symplast's suite of tools includes conversion dashboards, HIPAA-compliant messaging (text, images, and photos), revenue cycle management, virtual appointments, lead management and follow up, digital intake, appointment reminders, e-prescription and more!

From check-in to charting, scheduling to marketing, Symplast's platform enables you to run your business from anywhere in the world, on any device, at any time! With expert data migration, unlimited support, and no hidden fees, Symplast is the right choice for your practice!

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

Contact

Jackie Nunn at jackie@theaestheticsociety.org

for more information
about partnership
opportunities.



New Products to Check Out!
Special Offers for
Aesthetic Society Members

Industry Partners Support The Aesthetic Society's Mission

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

"The Aesthetic Society's ongoing partnership with industry is vital to the advancement of aesthetic plastic surgery. The Aesthetic Society especially acknowledges industry's support during the very trying time of COVID. Ultimately, 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 Support Chair.

We'd like to thank and acknowledge Premier Partner Galderma for their ongoing support. In addition, we'd like to thank and acknowledge Alliance partners Abbott, MyEllevate by Cyonsure, and Revance Aesthetics as they each continue with industry partnerships.

The Aesthetic Society values our industry partners and thanks each and every one for their meaningful contributions.

PREMIER INDUSTRY PARTNER

GALDERMA

EST. 1981

Sponsored by Galderma. With a unique legacy in dermatology as well as decades of cutting-edge innovation, Galderma is the leading company solely dedicated to skin health and advancing the future of dermatology. Galderma delivers an array of sophisticated services, and most notable is their aesthetics business.

To summarize Galderma Aesthetics' unique approach, Diane Gomez-Thinnes, Head of Galderma U.S., shares, "We put patients first, and our investments in R&D and education are designed to move aesthetics forward, through enabling aesthetics professionals' businesses to grow and expanding the market to meet patients' demands."

Galderma's decades of expertise, dedication to providing support and education, and the continued growth of our comprehensive portfolio of injectables enables us to drive the market forward. A large part of this is accomplished through our support of aesthetics professionals and their customers. We provide

our customers with the latest and greatest treatments, services, and education to help their patients achieve optimal results that enhance their skin health and meet their individual needs.

For example, GAIN—the Galderma Aesthetic Injector Network—provides complimentary education and training on the latest developments, techniques, and best practices for Galderma aesthetic products. We connect practitioners around the country with leading experts through interactive webinars, Q&A sessions, and training sessions.

We build loyalty through our ASPIRE Galderma Rewards program, which provides a range of benefits to consumers including reward points on qualifying treatments, after-care support, and the ability to set a preferred specialist. ASPIRE Galderma Rewards also includes benefits for aesthetics professionals. This program provides custom insights and data to identify new patient opportunities and provide treatment resources to patients. Galderma's goal is to help aesthetics professionals treat their patients with our innovative portfolio products and help consumers embrace their injectable journey without apology.

Because we understand that the skin we're in shapes our life journey, we are advancing dermatology for every skin story. For more information visit www.galderma.com/us.

ALLIANCE INDUSTRY PARTNERS



Tips For Wound Healing Following a Surgical Procedure

By Dr. Jeanine Downie, in partnership with Abbott

More than 17 million surgeries occur in the U.S. each year, ranging from laparoscopic repairs to major operations and orthopedic replacement surgeries – all resulting in surgical incision wounds.

As a dermatologist and dermatologic surgeon, I'm always advising my patients on how they can optimize the wound healing process after a procedure to reduce the risk of infection and other complications.

Wound healing is more than skin deep. It's a complex process, with complete healing taking up to a year. The type, size and location of the incision, as well as factors such as age,

health status, diabetes and underlying immune system conditions, can all impact the healing process. Many patients don't know what to expect, but as their plastic surgeon, you can help them take proactive steps to help heal, including prioritizing nutrition, which is an often-overlooked part of recovery.

As you know, our skin is our largest organ, and just like our bodies need fuel, our skin also needs additional calories as well as protein, amino acids, vitamins and minerals to generate new tissue at the wound site. Not getting enough of these nutrients can impair the healing process.

For some people, it can be difficult to get enough of the right nutrients from diet alone. That's why I recommend using a nutrition supplement like Abbott's scientifically-designed therapeutic drink, Juven® to help fill the gap. Juven's blend of key ingredients, such as arginine and glutamine, has been shown to enhance collagen formation in as little as two weeks—supporting wound healing from the inside out.

Consider adding Juven to your patient's post-operative care plan. It's available on Amazon and at CVS and Walgreens. Visit www.Juven.com for more information.



The Game Changer: Why the MyEllevate® Procedure Is Taking the Place of Traditional Neck Lifts

During the past few years, the convergence of professionals' inability to take time off work, the ubiquity of the Zoom meeting, and the occasional unsolicited Facetime call, has resulted in unprecedented resistance among patients to undergo invasive surgical procedures. This hesitation is due to the recovery time required by invasive procedures. Nowadays, if it's not a "lunchtime treatment" clients can pop in and out of, it's not an option.

Enter Dr. Gregory Mueller's MyEllevate procedure. The innovative technique is a light-guided suture suspension procedure that effectively takes the scalpel and stitches out of the modern neck lift. The technique utilizes a Suturod® Device to position a support system underneath the skin. This system lifts

Continued on Page 45

Industry Partners Support The Aesthetic Society's Mission

MyEllevate Continued from Page 44

bands and glands, tightening and lifting for remarkable facial rejuvenation.

The procedure has experienced incredible popularity, and been adopted by surgeons internationally to satisfy patient demand for the minimally invasive, and minimal downtime treatment. Some surgeons report that their books are so full, they can't keep up with the demand. Once they offer the procedure, it becomes very popular in their practice. Another plus is that the technique pairs well with liposuction and other energy treatments, giving patients and surgeons options to consolidate treatments and maximize results.

When asked how his patients had responded to the procedure, Dr. Jason Pozner told us "In just about 2 years I have done 150 MyEllevate and MyEllevate Plus procedures. In over 20 years of practice, I have not introduced another procedure that has given the clinical efficacy and lack of downtime that I have seen with MyEllevate. It has been an absolute game changer for me and my patients."

For more information or to start offering the MyEllevate procedure to your patients, visit www.myellevate.com

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Like all medical procedures, not all patients are suitable for the treatment. 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.



REVANCE • AESTHETICS

RHA® Collection Creates The Prestige Aesthetics Market

As of September 2020, the RHA® Collection, the first and only FDA-approved hyaluronic acid fillers for dynamic wrinkles and folds in the U.S., has taken off in the aesthetics market through an exclusive licensing agreement between Revance and TEOXANE SA, maker of the RHA® Collection.

RHA® Collection: The First Designer Filler ADAPTS TO EACH PATIENT'S FACIAL DYNAMICS

- The first and only hyaluronic acid filler designed to adapt to the dynamic demands of the face, for a more natural look

THE MOST NATURAL AND LEAST MODIFIED HA

- Formulated to be more like the natural hyaluronic acid found in the skin

RESILIENT RHEOLOGY

- Unique combination of stretch and dynamic strength that makes it resilient enough to accompany rather than endure the demands of a constantly moving face

Breaking New Ground in 2021

- **Award Winning:** The RHA® Collection has been featured in InStyle's Best Beauty Buys and was a SHAPE Skin Award recipient.
- **Exclusivity at select aesthetic practices:** A great number of elite practices were eager to provide their clients with added value through innovation.
- **RevanceU:** Revance has grown its injector education programs, both face-to-face and with its robust virtual training platform. In the first half of 2021, over 2,000 injectors were trained live via RevanceU.
- **Consumer Activations:** Revance created and distributed content to be used at customers' practices for their social channels, website and CRM platforms.
- **Financial Services Platform:** Many practices that adopted the RHA® Collection also recognized Revance's financial services platform as a complementary aesthetic service to improve practice economics.

Indication and Important Safety Information

Approved Use: The RHA® Collection of fillers is for injection into the facial tissue for the correction of dynamic facial wrinkles and folds that are moderate to severe, such as nasolabial folds, in adults 22 or older.

IMPORTANT SAFETY INFORMATION

Are there any reasons why I should not receive any RHA® injectable gel formulation?

Do not receive if you have a history of multiple severe allergies or severe allergic reactions; if you are allergic to lidocaine or gram-positive bacterial proteins; or if you have a bleeding disorder.

What precautions should I discuss with my doctor?

- Tell your doctor if you are pregnant or breastfeeding as the safety of these products for use during pregnancy or while breastfeeding has not been studied.
- Tell your doctor if you have a history of excessive scarring, keloid formations or pigmentation disorders, as use of these

products may result in additional scars or changes in pigmentation.

- Tell your doctor if you are planning laser treatments or a chemical peel, as there is a possible risk of inflammation at the treatment site if these procedures are performed after treatment.
- Tell your doctor if you are on immunosuppressive therapy used to decrease your immune response, as use of these products may result in an increased risk of infection.
- Tell your doctor if you are using medications that can prolong bleeding, such as aspirin, ibuprofen, or other blood thinners, as this may increase bruising or bleeding at the injection site.
- The safety and effectiveness of RHA® fillers in areas other than those indicated have not been established in U.S. clinical studies.
- Patients who experience skin injury near the site of injection with this product may be at a higher risk for side effects.
- Minimize strenuous exercise, exposure to extensive sun or heat, and alcoholic beverages within the first 24 hours following treatment.

What are possible side effects?

The most commonly reported side effects included injection-site redness, swelling, pain, tenderness, firmness, lumps/bumps, bruising, discoloration, and itching.

One of the risks with using these products is unintentional injection into a blood vessel, and while rare, the complications can be serious and may be permanent. These complications, which have been reported for facial injections, can include vision abnormalities, blindness, stroke, temporary scabs, or permanent scarring.

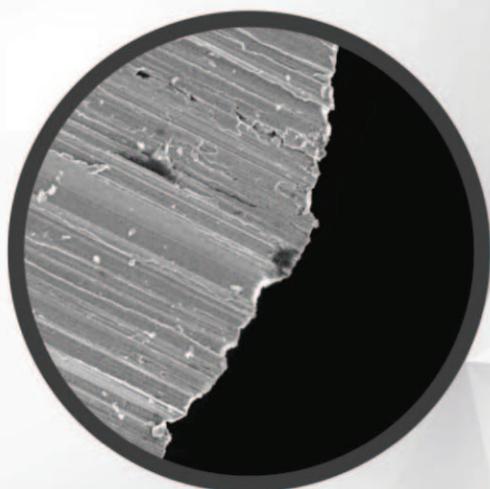
As with all skin injection procedures, there is a risk of infection and recurrence of herpetic eruptions.

To report a side effect with any RHA® product, please call Revance at (877) 373-8669. Please visit RHACollection.com or talk to your doctor for more information.

Available by prescription only.

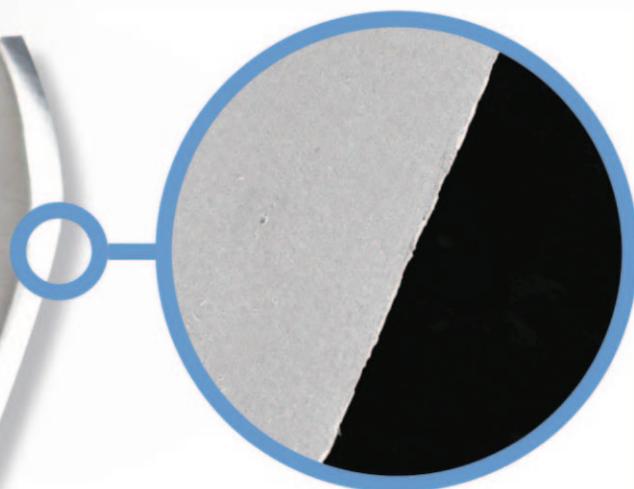
Which blade deserves to be in your exceptional hands?

What you use
TODAY.



Standard Blade Edge
1000x Magnification

What you could use
TOMORROW.



Planatome® Blade Edge
1000x Magnification

Extraordinary Begins Now™

Imagine the difference of a molecularly smooth blade.

Learn how it's achieved at
planatome.com



PLANATOME®

BY ENTREPIX MEDICAL

Over 10,000 breast implants have been registered with Aesthetic One!

Thanks to the 480 physicians participating in Aesthetic One, over 10,000 implants have been registered this past year, and 5900 patients have been empowered with permanent access to their implant details.

ARE YOU READY FOR YOUR PATIENTS TO JOIN THE THOUSANDS WHO HAVE PERMANENT ACCESS TO THEIR BREAST IMPLANT RECORDS?



Scan the QR code or text **A1 ASN to 418418** to learn more about or register for Aesthetic One. Account activation typically requires 1–2 business days.

The Aesthetic One app bridges the gaps between manufacturer, plastic surgeon and patient - making it easy to register breast implants with the manufacturer and maintain a permanent record of all registered implants.

The app's built-in scanning feature quickly and precisely scans QR and barcodes, auto populating a registration form complete with patient data and breast implant details. With one tap, physicians or staff can submit the breast implant registration form directly to the manufacturer.

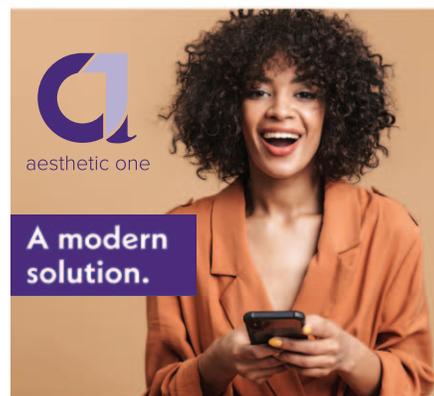
It is also the only implant registration platform that empowers patients with life-time, on-demand access to their breast implant information. The HIPAA-compliant platform

features a paired app for patients, allowing physicians to share individual breast implant ID cards, operative summaries, photos, and more. Physicians and staff can streamline workflow and stay connected to patients with built-in features like touchless intake forms, HIPAA-compliant chat, digital breast-implant registration, and secure record sharing.

"My office, and especially my OR staff, love Aesthetic One. I have shown all my RN circulators how to rapidly enter the surgical and implant data while I'm still closing the patient. By the time I walk out of the OR, the operating report has been completed and the implants have been registered with their manufacturer. No more faxing registration forms," explains Caroline Glicksman, MD, MSJ. "I have many patients who relocate over time and need their breast implant information to be portable. Patients are well-informed and share the responsibility to maintain their breast health and follow-up with long-term implant care."

DID YOU KNOW THAT THE AESTHETIC SOCIETY HAS DEVELOPED A FREE APP TO HELP STREAMLINE NEW IMPLANT DEVICE REQUIREMENTS FROM THE FDA?

Development of the Aesthetic One comes as a result of the March 2019 meeting of the FDA General and Plastic Surgery Devices Panel discussing the safety and risks of breast implants. There was a clear need for improved



Registering breast implants in Aesthetic One only takes minutes, but it leads to years of peace of mind and confidence for your patients.

patient monitoring and collection of critical data, vital steps to keep patients informed so they better understand risks associated with breast implants.

With the latest implant device requirements from the FDA, there will be some increased responsibility for surgeons using implants. The Society has worked to help streamline the process with Aesthetic One which will help physicians document for an attestation of compliance for each patient.

Aesthetic One is available to physicians in the US.

Supported by:
Allergan Aesthetics
an AbbVie company

Registration Made Easy.

CREATE, SHARE AND STORE IMPLANT RECORDS IN UNDER 3 MINUTES RIGHT FROM YOUR DEVICE

"The handwritten forms used to take me 10 minutes to complete. Now I can register an implant in under 3 minutes without hunting down stickers and labels so we can move on to the next case more quickly."





Content Marketing 2022: Staying on Brand

By Wendy Lewis

FACT: WE ARE DROWNING IN CONTENT, GOOD AND BAD.

Just wading through the content being thrown at us in a 24-hour cycle has become a full-time job. It is hard to extract what you really want to consume from all the white noise. If you're feeling the strain, your patients are overwhelmed. They are faced with unlimited choices of quality content which makes it much harder to stand out.

Content marketing is all about creating, publishing, and distributing useful content developed to reach a specific target audience; females between 30–60 with high net worth, interested in beauty treatments, as an example. The right content to reach your desired demographic should be relevant to them and more educational than pure self-promotion in tone and format. It should also be unique to your philosophy and on brand. Ideally, a high percentage of the content you put out should be credible enough to encourage them to take the next action, such as scheduling a virtual or in-person consultation, following your brand on Instagram, or booking a treatment, etc.

The secret sauce of content marketing is knowing who your audience is, learning what they want to consume, where they want to get it, and in what formats. Once you have figured that out, you can be more strategic with your content planning and make it more personalized and original. You probably don't want the same content to pop up every time you log on to a news site or a retailer's Facebook page. Your audience doesn't want to see the same content every time they go to your channels either. The key is to identify what they are most interested in and produce more of that by varying the formats to keep them engaged.

With all the different types of content in use today, it is more difficult to choose the best ones to focus on to build your brand. Experiment with several popular content formats to add diversity to what you post on



Focus some of your content on what you love most about the field and what inspires you to give your audience a glimpse of who you are as a person, not just a surgeon.

your website, blog, and all social channels. You can also remarket the best content that has performed well by switching out the graphics, changing the format, or reworking the composition to keep it fresh.

If you are not sure what formats appeal to your patient population, ask them. You may be surprised by how they respond. In addition to words and images, boost your content in different ways for variety:

- Video is essential on all platforms today
- Statistics reinforce your standing as an expert
- Surveys and polls generate interest
- Infographics can get shared
- GIFs and memes make people smile
- Music sets the right tone
- Case studies showcase your skills
- E-books help to position you as an expert in specific topics

Rather than trying to be all things to all users, align your brand with a handful of core topics that resonate with your key audience and reinforce your special expertise. For example, non-invasive body shaping, breast surgery, women's health, wellness, male aesthetics, etc. This strategy is more narrowly focused. For each of the core topics you choose to start with, break them down by subtopics. As in 'Breast Surgery,' a broad topic, can be broken down into subtopics like, 'Augmentation,' 'Reduction and Lifting,' and 'Reconstruction.'

You can expand by adding more core topics and/or subtopics when this strategy is working well, and you are getting results in the form of consults, new patients, and former patients returning to your practice. My advice is to expand once you have the bandwidth to manage more topics effectively by generating unique and compelling content in a variety of forms.

In my view, it is wiser to position yourself as a specialist in a narrow area to establish your brand, than to be a generalist who is known for doing a little of everything without a strong identity. There are many generalists out there, but far fewer specialists. Cosmetic surgery patients are so much savvier today than when I

Rather than trying to be all things to all users, align your brand with a handful of core topics that resonate with your key audience and reinforce your special expertise. For example, non-invasive body shaping, breast surgery, women's health, wellness, male aesthetics, etc.

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Choosing or Evaluating Your Financial Advisor? Here are Three Factors You Must Consider

By Jason O'Dell MS, CWM and Andrew Taylor, CFP®

Whether you are choosing a new financial advisor or evaluating your current professional, here are three factors you should incorporate into your analysis: 1) avoid getting too caught up in past performance; 2) understand the scope of your relationship with your advisor and the fees you pay; and finally, 3) concentrate on what really matters—your NET return. Let's examine each in order.

1. AVOID GETTING CAUGHT UP IN ADVISOR/FIRM'S PAST PERFORMANCE

A common mistake many investors, including physicians, make when evaluating or selecting their investment advisor is to overrate the importance of an advisor's recent returns. There are several reasons why this approach is flawed:

The time frame may be too short. When looking at an investment's *track record*, many clients will ask for gross returns (already a mistake—see below) on a one-, three- and five-year basis. This is simply not enough data to make any concrete conclusions about skill versus randomness or even luck. In fact, ten years may not be enough. An in-depth examination of this issue is well beyond the scope of this short article. However, if you are interested in learning more about why such measurements must be looked at over decades, we recommend you read the best-selling book *Fooled by Randomness* by Nassim Taleb.

Comparisons of results are not likely not apples to apples. Even the common question, "how did your portfolio perform (last year)?" can lead to misleading answers in cases where portfolios are designed for individual clients. For example, at our firm, many of our clients have customized portfolios—based on their risk tolerance, age, time horizon, tax bracket, objectives and a variety of other factors. Because of various factors, it is entirely possible that Client A could see returns of 6 percent and Client B could have a portfolio gain of 20 percent over the same period. Both investors could be equally satisfied (or dissatisfied) and neither of these results may give you any helpful advice about your particular situation (as Client C). Only in situations when two investors have very similar goals, circumstances and objectives is any comparison worthwhile.



When choosing an investment advisor to manage your portfolio, one should expect a defined communication process throughout the year that is independent of trade suggestions.

Past performance is not a guarantee of future results. Anyone who has ever watched an investment firm's commercial on television, listened to an advertisement on the radio or read one in a newspaper or magazine is familiar with the phrase "past performance is no guarantee of future results." While this can be easily discarded as legalese by consumers, it is fundamental for investors to understand.

2. BE SURE TO ASSESS AND OBJECTIVELY EVALUATE THE RELATIONSHIP WITH YOUR ADVISORS.

Below we identify the most important factors in evaluating your relationship with your financial advisors.

Two-way communication is a fundamental element of client service. When polled, most clients of any professional advisor—from attorney, to CPA, to financial advisor—name "timely and effective two-way communication" as an essential element of a fruitful working relationship. Still, many investment advisors seem to focus more on returns. When choosing an investment advisor to manage your portfolio, one should expect a defined communication process throughout the year that is independent of trade suggestions.

A transparent and client-aligned business model is a must. Given the troublesome conflicts of interest that have come to light in the investment industry during recent years, we feel that all investors (not just physicians) should work with financial firms that use a transparent business model and one that aligns the firm's interests with that of their clients. There are key elements to look for in such an arrangement:

- **Independent Custodian:** Ideally, an investment firm does not act as custodian (i.e., hold) its clients' investments in the firm. Rather, the firm should have arrangements with several of the largest independent custodians (such as Charles Schwab, TD Ameritrade, etc.) to hold their investments for safekeeping, while the investment firm manages the accounts. The inherent checks and balances of this type of arrangement prevents the insular secrecy that allowed Madoff, Stanford and other criminals to operate.
- **Client-Aligned Fee Model:** Many clients today, physicians among them, are realizing that a clear fee-based model works best for them. Under such an arrangement, advisors charge a transparent, clearly defined fee on

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Choosing or Evaluating Your Financial Advisor?

Continued from Page 50

assets they manage. Contrast this with the traditional convoluted transaction-charge model that most brokers utilize where a client pays based on trades in the account, regardless of whether the trade added value or not. In a fee-based model, not only do clients understand exactly what the fee is, but they also understand that the firm's interest is the same as theirs—seeing the portfolio increase in value. The annual management fee the investment firm earns is a percentage of the assets you have in your account with them.

3. FOCUS ON WHAT YOU KEEP—YOUR NET RETURNS.

Many investors focus primarily on management fees and expenses when evaluating advisors. For most investors, the annual fees might range from 50 basis points (0.5 percent) on the low end (very large portfolio in a fee model) to 300 basis points (or 3.0 percent) on the high end (mutual funds can be this high, as can broker transaction costs). Though this huge expense range (600 percent variability!) is one reason why we are so adamant about the AUM-based fee model above, this is *not* an investor's largest expense. Rather, taxes usually are.

The cost of federal and state income and capital gains taxes on a portfolio depends on many factors—the underlying investments, the turnover, the structure in which the investments are held, the other income of the client, the client's state of residence, and more. For higher income investors, taxes will nearly always be high.

Given that some investors are losing between one sixth and nearly half of their gains to taxes, one would think this would be a focus of value-added investment firms. Tax advice could include specific techniques for limiting tax consequences of transactions, such as tax loss/gain harvesting or more general tax diversification in portfolios.

CONCLUSION

Whether you are looking for a new financial advisor or evaluating your current professional, these three factors may prove to be valuable in your search. The authors welcome your questions.

SPECIAL OFFERS: The authors have recently completed *Wealth Planning for the Modern Physician*. To receive free print copies

or ebook downloads of this book or *Wealth Management Made Simple*, text ASAPs to 844-418-1212, or visit www.ojmbookstore.com and enter promotional code ASAPs at checkout.

Jason M. O'Dell, MS, CWM is a financial consultant and author of more than a dozen books for physicians, including *Wealth Planning for the Modern Physician*. He is the managing partner for the wealth management firm OJM Group www.ojmgroupp.com, where Andrew Taylor, CFP® is a partner and wealth advisor. They can be reached at 877-656-4362 or odell@ojmgroupp.com.

Disclosure:

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Content Marketing 2022: Staying on Brand

Continued from Page 49

ran practices in New York. They are looking for plastic surgeons who specialize in offering the best solutions for their specific needs and who are considered 'experts' by their patients and peers.

Aesthetic surgery in all forms is a topic of interest to consumers and will continue to be. Fortunately, it is easier to get more eyes on your content when you're in a hot field that is constantly changing and doing something new. Focus some of your content on what you love most about the field and what inspires you to give your audience a glimpse of who you are as a person, not just a surgeon.

By selectively creating unique and interesting content, you can ignite a conversation and keep your audience coming back for more. As you identify your target audience, serve them better by addressing their wants and needs. Optimizing a content strategy can increase awareness of what you offer and drive long term steady growth 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. An award-winning writer, she serves on the Editorial Board of Prime International Anti-Ageing Journal, and contributes to Practical Dermatology, Modern Aesthetics, and many other publications.

*Wendy is a frequent speaker, course instructor, and moderator at conferences in the US and internationally. Her first textbook, *Aesthetic Clinic Marketing in the Digital Age* (CRC Press) will launch a second edition in 2022. <http://Wendylewisco.com> wil@wendylewisco.com*

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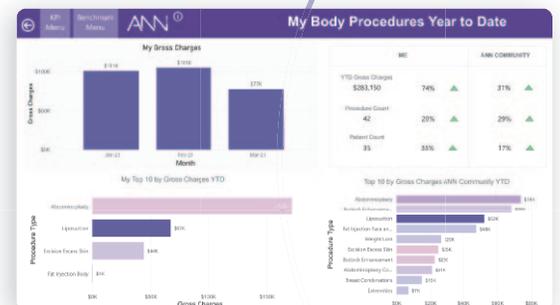
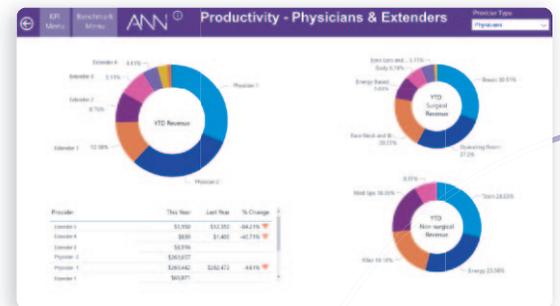
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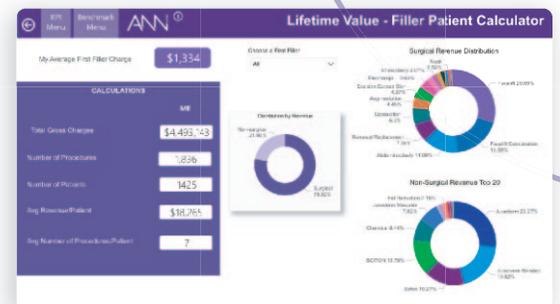
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Transfer of Risk: Beware Overly Broad Contractual Indemnity Agreements

Harry K. Moon, MD, FACS

Consider the following: An plastic surgery group has a professional services agreement (the "Agreement") with local anesthesiologist to assist in the surgery center (the "facility"), which is owned by the plastic surgery group. The group, through its' facility has a contact with the anesthesiologist, which includes a mutual indemnification clause. Specifically, each party indemnifies and holds harmless the other party for its own independent acts of negligence. If there is an anesthesia event which harms a patient, resulting in a bad outcome, a lawsuit will likely name the surgeon, the anesthesiologist, and the facility. If the plaintiff makes no allegation of any independent acts of negligence against the anesthesiologist, but alleges only that the facility is vicariously liable for the acts/ omissions of the anesthesiologist, the facility may demand that the anesthesiologist protect, defend, hold harmless, and indemnify the facility based on the Agreement. The facility

will argue that "but for" the acts/omissions of the anesthesiologist, the facility would not be named in the lawsuit.

Professional liability carriers often exclude contractual liability. Therefore, an obligation to indemnify in the contract between the facility and/or group does not pass on to the carrier under a professional liability policy. However, most carriers do cover indemnification arising under common law. Given this, physicians must exercise caution when executing broad form indemnity agreements and/or contracts with indemnity clauses. It is recommended that if a plastic surgery group has a contractual arrangement with an anesthesia group, the anesthesia group should name the facility on its policy, to avoid cross indemnity claims. In this regard, if the anesthesiologist is named as well as the surgery center, the anesthesia group's carrier will provide protection for both.

Important elements to Indemnity Agreements:

- Have local legal counsel review any indemnity agreement prior to executing it.
- Use limited indemnity language (not broad language where you indemnify everyone for anything and everything!)
- Require mutual or reciprocal indemnification language so that both parties are protected.

For any questions, your claims "team" is here to assist. Call toll free at (866) 520-6896. For more information, please visit our website at www.amsrrg.com/solutions/preferred-programs where you can click on the "Request A Quote" link or please contact Christopher Edge at news submission@amsrrg.com. Christopher Edge is Vice President of Preferred Programs and New Business Development at AMS Management Group.

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How Video Ads on Facebook and Instagram Connect People With Your Brand

By Peter Houtz, Vice President of Sales at Plastic Surgery Studios

Your brand is the heart and soul of your business. It should convey why you exist, what you stand for, and what patients can expect from your practice. Branding also involves the visual representations of your company, such as your logo, color palette, and slogans.

All elements of your marketing, from your website to your stationery to your social channels, should present a consistent branding strategy. This helps your audience identify your business and give meaning to it.

And now, video advertisements on social media are reshaping how practices tell their stories and communicate their brands.

VIDEO IS THE MOST VALUABLE TYPE OF SOCIAL MEDIA MARKETING CONTENT

Social media marketing allows you to promote your practice and reach your target audience through social media platforms. About half of the 7.7 billion people in the world use social media, making these platforms among the most influential arenas in the world.

Marketers currently consider video the most valuable and effective type of social media content.

Videos Are Growing in Popularity

Video content is easy for users to digest, and they prefer it compared to other content formats. People are more likely to watch a video than read a written post with the same content. Video ads allow you to create entertaining and engaging content that captures the attention of users for longer than a photo or article would.

In 2019—even before the pandemic—users spent an average of 59 percent more time watching videos on social platforms than they did in 2016.

Videos Get Increased Social Engagements

Video posts on Instagram get 49 percent more engagement than photo posts. Users are also twice as likely to share videos compared to photos or articles.

HOW VIDEO ADS HELP WITH BRANDING

Social media video advertisements can increase your brand awareness, making your brand more familiar to your target audience with memorable and recognizable branded videos.



People are more likely to watch a video than read a written post with the same content. Video ads allow you to create entertaining and engaging content that captures the attention of users for longer than a photo or article would.

Once they know your brand, customers are increasingly interested in the behind-the-scenes of businesses and getting to know brands on a personal level. Video ads allow you to offer your services in a personable way that creates a deeper connection with your audience.

Video ads can increase your brand lift, giving users a more positive perception of your brand. If a user has a positive experience with your video or finds it helpful, their purchase intent and brand association dramatically increase.

WHERE ARE VIDEO ADS PLACED ON FACEBOOK AND INSTAGRAM?

In-stream

You can choose to have your video ads play within the video content people are already watching on Facebook or Instagram. You can purchase these in-stream ads to deliver your branded messages to your target audience wherever they are watching videos on their social channels, including Instagram TV (IGTV).

News Feeds

Your video advertisement can show up in people's Facebook News Feeds, where they share and see content posted in their network, including profile changes, upcoming events, birthdays, and other updates. Instagram also offers in-feed video ads, where your video is shown between a user's regular content on their feed.

These locations are ideal for increasing brand awareness with helpful or informative videos, as users often quickly scroll through this content without interacting with everything they see.

Stories

Stories are short-form content on Facebook and Instagram that allow you to connect with people in your social networks. They only last for 24 hours and are a great place to give viewers a candid glimpse into your practice.

Rather than having captions, stories allow you to use text and visual overlays to provide your audience with context. Instagram and Facebook stories offer various features you can use to enhance your videos, including filters and special effects.

Video ads in social media stories have a higher click-through rate compared to ads in feeds, making this a great place to convert users aware of your brand into patients.

With video ads, you can drive brand awareness, gain new and repeat patients, and grow your practice.

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.

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Custom Website vs Template Website: Which is Right for Your Practice?

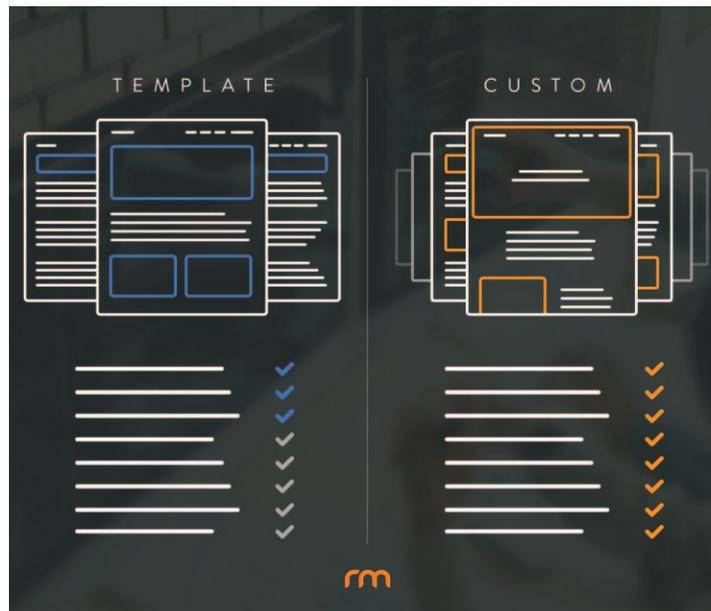
By Keith C. Humes, CEO Rosemont Media

When first starting out, many small businesses opt to utilize a website design service that offers customizable, professional-looking templates that can be up-and-running quickly. While these quick turnaround websites serve a real purpose and can help a business initiate its online presence, the restrictive nature of a template website can eventually become a hindrance. When it comes to plastic surgeons, it is likely that the needs of your practice will quickly outgrow the limitations of template-based sites.

For a plastic surgery practice that is trying to get off the ground, a template-based website might feel like a good fit, especially considering the typical marketing budget is going to be smaller. However, as the practice begins to expand its staff and treatment offerings, the website will need to extend and offer more capabilities and features.

Since custom websites are designed and built specifically with the needs of both the practice and their patients in mind, the overall user experience for both parties will always be better when compared to a template site created with a one-size-fits-all web design service. This means not only is the site designed to enable current and potential patients to quickly and easily access the information they are looking for, but it can be equipped with a personalized set of tools geared towards the practice's unique needs—from call tracking and a patient reviews page to a photo gallery, patient portal, and beyond.

It makes perfect sense to want to weigh your options and wonder if there is enough of a difference between custom and customizable websites to warrant a larger investment. However, in the end, when you purchase a custom website from a full-service digital marketing company, your site is backed by a team of support staff that can help you manage/maintain the site and gain visibility in search engine results. With a template-based website service, there may be a customer



When you purchase a custom website from a full-service digital marketing company, your site is backed by a team of support staff that can help you manage/maintain the site and gain visibility in search engine results. With a template-based website service, there may be a customer service number to contact if you experience issues with your site, but you're ultimately going to be on your own for most of your website needs.

service number to contact if you experience issues with your site, but you're ultimately going to be on your own for most of your website needs.

When we talk about quick turnaround websites, we must also keep in mind the numerous companies that will market and portray that their websites are custom. If they come with a bigger price tag and offer a 30–60-day turnaround, be wary. Quality websites of a larger scope take time to complete the overall planning, designing, and development.

Finally, if the goal of your website is to create a resource for local patients researching procedures offered by your practice, then you will definitely want to invest in a custom strategy. The other aspect to consider is the long-term benefit of owning a custom website/strategy. When you have complete control and ownership over your digital assets, you create the ability for these to be transferred, in the event of a future

transition or sale of the practice. It is not unheard of for a successful website and strategy to be valued at over six figures.

At Rosemont Media, we work in tandem with our customers to create custom websites that are built from the ground up by our own team of experts (never outsourced). We offer comprehensive marketing services, including social media marketing, ad buying, link building, website accessibility tools, and much more. If you'd like to see how we can take your online presence to the next level—whether or not you already have a website—we encourage you to contact us today to speak with one of our knowledgeable consultants.

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.

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10X THE VALUE OF YOUR PRACTICE

To grow a sellable asset that is attractive to buy or just enjoy increased revenues without killing yourself, it takes a predictable and reliable revenue stream. But, advertising budgets keep increasing while the quality of leads keep decreasing. So, what do you do?



The fastest, easiest and cheapest way to grow is to 10X the value of your current patients so they become your sales ambassadors. You set up a system, so surgical patients stay for non-surgical services, and non-surgical patients become surgical patients.

Sounds easy enough, but **you can no longer “hope” this happens organically.** It's too competitive and noisy. You “make it happen” using a strategic system (no pushy sales tactics necessary).



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Catherine Maley, MBA

Author, *Your Aesthetic Practice*

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Why Patient Retention Should Be Your #1 Focus

By Catherine Maley, MBA

Cosmetic patient retention is one of the most critical challenges facing practices today.

Your profits and profitability depend on your ability to create and maintain cosmetic patients for life.

The reasoning for this is very simple: *Marketing is difficult and expensive.* It costs money to generate leads, create a recognizable brand, and get cosmetic patients to choose you.

Without cosmetic patient retention, that time and money is wasted, constantly flowing out as cosmetic patients decide to go with your competitors. With strong retention, on the other hand, you maximize marketing efforts and put those investments to good use, helping to build momentum not only through that cosmetic patient, but with every other person they tell about their experience with you.

Here is another way to look at it: *Churn, or attrition, is one of the most devastating factors affecting profitability because you lose the investment it took to attract each cosmetic patient in the first place, in addition to the loss of potential future revenues and referrals.*

Even a 5% monthly churn rate means a 60% loss of cosmetic patients over the course of one year.

WHY RETENTION MATTERS TO YOUR BOTTOM LINE

Insane competition, commoditization, discounting, and advertising costs through the roof are making it extremely difficult to keep up your lifestyle and income. Here are statistics that you should know:

- It Costs 7X More to Attract a New Patient than to Retain an Existing Patient
- It's 16x cheaper to keep a current cosmetic patient coming back for more

than spending money on advertising trying to attract new "Internet Stranger Patients".

- 50% of New Patients DO NOT RETURN
- New Patient Conversion Rate is a paltry 5% to 20%

You invest time, money, and energy into strategies and campaigns that are geared toward attracting new cosmetic patients and introducing them to your practice. What many practices don't realize is that the most important part of marketing comes after the

first visit, when the focus switches to that of reducing churn and maximizing cosmetic patient retention.

MONETARY VALUE OF RETURNING COSMETIC PATIENTS

The way to combat these challenges is to think smarter and more strategically for the long run.

Use your current assets (existing patients) to generate more revenues for less marketing dollars while using them to bring in new patients too! Here are more stats that matter:

- Existing Patients spend 30% more on their average order size value than new patients
- Loyal Existing Patients spend 67% More Than New Patients
- Existing Patient Conversion Rate to new procedures is 70%-80%

And, according to research by Invesp Consulting, *it costs 7 times as much to attract a new cosmetic patient than it does to keep an existing one.* By focusing on repeat visits, you are able to establish relationships with cosmetic patients and build momentum with them, instead of continuously spending money on acquisition.

Source: Invesp, ProfitWell

ENCOURAGE WORD OF MOUTH REFERRALS

There are various studies that show that *word-of-mouth marketing is one of the most valuable forms of marketing.* Why? Because *92% of people trust recommendations from friends and family over other types of advertising.*

Once a cosmetic patient is loyal to a brand, they are more likely to spend more as well. *The lifetime value of referred cosmetic patients is 16% higher than non-referred cosmetic patients.*

Social media influencers are becoming a form of word-of-mouth marketing as well. Though influencers may not be family and friends, they offer valuable opinions that viewers trust, and that can influence their buying decisions.

10X VALUE OF LOYAL COSMETIC PATIENTS

Beyond the revenue generated by repeat cosmetic patients, there are social benefits to having a loyal following. One is the power of

brand evangelists who grow your practice for you via their return visits, reviews, and social proof.

This is the main reason why a focus on cosmetic patient retention can create brand advocates and allow them to become your unpaid marketing evangelists by boosting your revenues significantly so a *cosmetic patient who was worth \$1K to you is now worth \$10K to you* when you nurture that relationship.

GREAT PATIENT EXPERIENCE

Customer service is an important factor in how loyal cosmetic patients are to your practice. *Those who have a positive experience with a practice may spend up to 140% more than cosmetic patients who did NOT have a good experience.*

This is because the average cosmetic patient's focus has shifted from price to value. Value includes the price of the procedure, as well as the perceived value of the entire experience.

This is extremely important when it comes to your profit margins because it directly implies that a strong cosmetic patient retention rate ensures you have long-lasting and loyal cosmetic patients who will invest in your success and boost your bottom line.

Revenues from happy cosmetic patients, as well as word-of-mouth recommendations, have the power to become a huge portion of your annual revenues, dramatically reducing your cosmetic patient acquisition costs and increasing your revenues.

Catherine Maley, MBA is a cosmetic practice consultant, speaker, trainer, blogger and podcaster. 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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The Importance of Creating Your Unique Value Proposition

By Terri Ross, Terri Ross Consulting

Prospective patients are buyers who want to know the answer to these questions:

- *What's in it for me?*
- *How do your services solve or improve my situation?*
- *What specific benefits do you deliver or offer?*
- *Why should I choose your aesthetics practice or surgeon over another?*
- *What differentiates you from the competition?*

They want emotional reassurance that they are making the right decision to choose you. They typically have some hesitation that something could go wrong, or questions about your expertise, or how much experience you have performing the procedure they want.

Creating a clear, consistent message around your Unique Value Proposition (UVP) and being able to credential the practice and the provider can take the guesswork out of promoting your practice and get your entire team on the same page, delivering the same message—further enhancing your brand.

THE IMPORTANCE OF CREDENTIALING

In a competitive and commoditized marketplace, credentialing is your time to shine. It is your opportunity to display your knowledge, education, and expertise and communicate why patients should trust you and choose you.

Ideally, this information should be apparent on your website. The message should be consistent for your staff answering the phones as well. They should be able to:

- Explain the various services and procedures you offer.
- Communicate how many years you have been in business, how many treatments/surgeries you have performed, the various providers on your team and their level of experience in aesthetics.
- Confidently be able to articulate what makes your practice stand out and differentiates you from your competition.
- Give information on what they can expect when they come to your practice (remember, patients buy an experience not services).

Credentialing is a critical element when mastering phone skills for your front office team as well as a key part of the consultation. Throughout the credentialing conversation, it is important to add a personalized touch by using the patient's name, building rapport and

trust, credentialing yourself by stating your UVP, asking probing questions, and developing a comprehensive treatment plan for the best results possible as well as increasing the lifetime value of that patient.

THE TWO PS OF CREDENTIALING

There are two aspects of credentialing—credentialing your provider and your practice. Your team should be able to answer the following questions when communicating information to prospective patients about your PROVIDER:

- Take some time to jot down your answers as this will help you create your UVP.
- Who will be performing the consultations? Will it be an MD, NP, PA, or RN?
- How many years of experience do they have?
- How many years in aesthetics?
- Has he/she received any special training?
- What range of procedures does the provider perform or specialize in?
- How many (you can estimate) of total surgeries has your practice or provider(s) performed in a particular area?
- Has your provider(s) published any articles or research? Have they conducted any training, seminars or delivered any presentations on a particular surgery or service?

Your team should be able to answer the following questions when communicating information to prospective patients about your PRACTICE:

- How many years has the practice been in business?
- How many years of experience do you have individually or combined with other providers (this can be an impressive number if you combine)?
- Why should someone choose your practice over the competition? What makes your practice different? Location, privacy, late or weekend hours, unique treatments, etc
- How many surgeons do you have?
- What is the practice's specialty/specialties?
- Is there anything different/special about the location or environment (extended hours, bilingual staff)?

By knowing the credentials behind your providers and practice, you are forming the basis for your Unique Value Proposition.

KEY QUESTION TO REMEMBER WHEN CREATING YOUR UVP

Make sure you can elaborate and answer why your UVPs statements matter to the patient. Always think to yourself, "So What?" Or from the patient's view, "WIIFM—What's in it for me?"

HERE ARE A FEW EXAMPLES:

UVP statement: We have 10 years of experience in plastic surgery

WIIFM: Our practice has performed more than 4,000 breast augmentation surgeries.

UVP statement: We use Crisilex, Vectra, Canfield

WIIFM: We use imaging software so you can see what results you'll have.

UVP statement: We use consulting tools
WIIFM: Touch MD is a tool we offer that has an interactive touchscreen that makes it easy for our patients to learn more about a procedure or service.

UVP statement: We have weekend and evening hours

WIIFM: We understand that it is often hard to make appointments during your workday, so we offer extended hours until 7pm to make things more convenient for our working patients.

PRACTICE YOUR UVP

Once you have all your credentialing statements written, you can put them together succinctly like an elevator pitch. Your whole team should practice this and be able to quickly communicate your UVP. My team and I are always here to support you and your practice growth. We have training courses within the APX Platform, our business intelligence growth, training, and analytics platform, that go into detail on credentialing, creating UVP scripts, as well as mastering the art of sales, financial training and efficient operations.

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Aggravating Aggregators

By Bob Aicher, Esq.

Most of our members receive negative posts, hopefully overshadowed by a large number of positive posts. Let's assume it were possible to collect these negative posts from all these websites and repost them on a new website. Let's further assume the new website adds its own negative commentary, based on those aggregated reviews, using catch phrases such as greedy, unnecessary procedures, and botched surgeries. Finally, let's assume your office is then contacted by a so-called reputation management firm, which offers to remove those posts for a price.

You might think this business model resembles extortion, or buying protection. It doesn't and it isn't. One company I've been hearing about lately is called Gripeo. Their business model is protected for several reasons.

- 1. Section 230 of the Communications Decency Act.** Section 230 was passed in 1996 to provide immunity to websites for posting third-party content, and to provide immunity if they removed such third-party content. The goal was to incentivize websites to moderate patently offensive or indecent content. Immunity like this is why Yelp will often decline to pull negative patient posts, and Yelp has always won in court.
- 2. The aggregated posts already exist on other websites.** Since such information is already public, there isn't any extortion, which is the threat of making private facts public. Also, there isn't any protection being sold, because any business harm is already being done by the original post. In fact, when the reputation management firm claims they can get those posts pulled, they're only talking about the aggregator's website, not the original websites. One might ask if the reputation management firms have relationships with the aggregator website.
- 3. Aggregators, like all of us, are entitled to their opinion, protected by the First Amendment.** Opinions cannot include any falsity or defamation, of course, but patient opinions, and those of the aggregators themselves, can nevertheless be crafted to be quite damaging.

Aggregators are not invulnerable, however, for reasons now being explored by ASPS.

- 1. The websites from which the posts were aggregated could claim copyright violation.** Aggregators will no doubt claim fair use, but that argument will fail if the original websites prove the aggregators are posting content for commercial purposes, as opposed to not-for-profit educational purposes, and they are copied entirety of original posts.
- 2. The websites from which the posts were aggregated may claim poaching,** using linking techniques prohibited by Google.
- 3. The aggregators are currently targeting plastic, cosmetic and aesthetic surgeons.** One might speculate such targeting would have a financial motive. This business model arguably succeeds when surgeons accede to an offer to remove a post from the aggregator's website. Proving this could be difficult, but it might provide an attorney fodder for a defense should the aggregator claim it is acting in the public's interest.

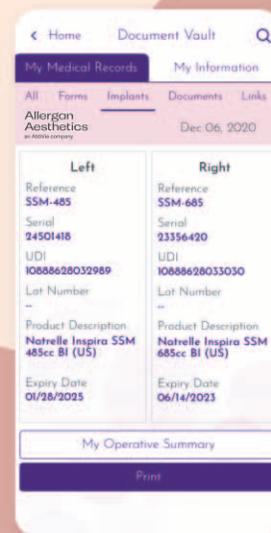
What might come of this? A news outlet may smell injustice. Regulators may suspect an undisclosed conspiracy. An attorney general may see a consumer protection violation. A private attorney may recognize intentional interference with prospective economic advantage. And patients may find negative hyperbolic opinions to be unreliable, sensing secondary gain in the shadows.

Research has shown that 95% of all web traffic goes to the first page of search listings. I, for one, have no intention of visiting the sites of aggregators, thereby improving their rankings. Better to assist regulators, news outlets, and the free-market as they pass judgment on this latest irritant to plastic surgeons.

Bob Aicher is General Counsel to The Aesthetic Society and has represented The Society for 28 years. He can be reached by phone at 707-321-6945 or by email at aicher@sbcglobal.net.



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Have an ethics question
for Dr. Joe? Email
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The Straight & Narrow

By Joe Gryskiewicz, MD

Question

Joe, our office was recently reprimanded by HHS because a patient complained that we charged a retrieval fee for her records for a procedure almost ten years ago. Our attorney settled the matter with HHS successfully and without penalty, but we are left with an ethical dilemma. I am in the process of adopting yet another EHR system (I have been through three without success), yet I have 20,000 records from as far back as 1982 in storage with DataSafe.

Federal law simply does not care about our problem. DataSafe charges me \$75 to retrieve a record, yet HHS says I cannot pass this on to the patient.

Instead, HHS says that doctors can only charge “a reasonable, cost-based fee” that includes office labor, supplies, including any CDs or USB drives requested, postage, and labor for any summary or explanation of the medical records. Here’s the worst part provided by our attorney: “The fee may not include costs associated with verification; documentation; searching for and retrieving the PHI; maintaining systems; recouping capital for data access, storage, or infrastructure; or other costs not listed above even if such costs are authorized by State law.” www.hhs.gov/hipaa/for-professionals/privacy/guidance/access/index.html

How fair is that? I cannot abrogate responsibility by giving the patient a copy of their records before I store them because, if they lose them, I am told I am still responsible.

If I merely give them their records that doesn’t help when they lose them and ask us if we have any copies lying around!

Here’s my ethical dilemma. My medical board says I only have to keep patient records for 7 years, yet I have implanted devices that will last much longer. Don’t I have an ethical obligation to help out my patients by keeping their records as long as possible, in case questions arise about their device? Yet if I do that, I’ll be paying \$75 out of pocket every time they ask for copies. I know what my rabbi would say, but what’s the right thing to do?

Answer

You have hit on an important topic as members retire. I’m assuming the arrangement worked out by your attorney with HHS includes not charging for retrieval fees going forward, and a refund to at least the patient at issue who filed the complaint. I am glad you got this straightened out to some degree.

It really boils down to whether our members prefer to reduce their long-term out-of-pocket expenses by destroying records after their state-mandated medical records retention has expired, or whether they feel a higher calling to keep records indefinitely.

The middle of the road approach would be to destroy all records when permitted by state law for your non-device patients, but to keep medical records indefinitely for patients who have received such devices.

In my situation, although federal law only requires medical records be kept for six years, state law requires they be kept for seven years. Consequently, we queue up paper

charts on adult patients as they hit the seven-year mark. Then we shred them the very day we legally can! But for breast implants, we scan the labels and op notes and keep them indefinitely.

Now that we have an EMR system, we scan all paper charts for returning patients who have prior paper charts less than seven years old. We still are busting at the seams and even rent storage space across the hall for all the paper.

Attorneys have it differently than physicians. Lawyers can and do charge for file retrieval. They generally have clients sign an engagement letter which specifies the fees to retrieve files. Therefore, attorney’s generally charge a retrieval fee provided they advised the client of the arrangement at the beginning of the client relationship. We don’t have that kind of luck!

You have been scrupulously conscientious in preserving your records, going above and beyond. In some ways though, no good deed goes unpunished. If you had destroyed your adult patient charts according to the letter of the law, you would have been home free. Keep in mind when patients receive non-medically necessary aesthetic services only, i.e., no insurance reimbursement, then HIPAA doesn’t even apply, and the permissible copying charges will default to state law, so it’s important to know what your state allows you to charge.

Anyway, some food for thought for all of us, especially those considering retirement.

Joe Gryskiewicz, MD, is an aesthetic plastic surgeon practicing in Burnsville, MN, and Clinical Professor University of Minnesota (Craniofacial-Cleft Palate Clinics). He has served on The Aesthetic Society Judicial Council, is a past president of ASERF and he has been in practice for more than 30 years. Disclaimer: Dr. Joe’s opinions aren’t those of the Ethics Committee or the Judicial Council.

HHS says that doctors can only charge “a reasonable, cost-based fee” that includes office labor, supplies, including any CDs or USB drives requested, postage, and labor for any summary or explanation of the medical records.



CULTURE OF SAFETY

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.





Safety: Attitude is Everything

By Thomas Fiala, MD, MBA, FACS, FRCSC and James Fernau, MD, FACS.



CULTURE OF SAFETY

Developing a “culture of safety” for your operating room starts with a commitment to constant vigilance and a proactive attitude towards minimizing potential harms to patients. Nothing is left to chance in the preparation for the surgical procedure. As surgeons, we can learn from High Reliability Organizations (HROs) in other fields, and adapt and adopt some of the systems that have been proven to work. HRO’s are organizations that operate in a “complex, high-hazard domain for extended periods, without serious accidents or catastrophic failures.”¹ Sound familiar? Classic examples (outside of medicine) include commercial aviation, aerospace, oil and gas drilling, chemical processing, nuclear power and military aircraft carriers, where there are multiple processes occurring rapidly, handling of hazardous or explosive materials, and where accidents can result in multiple fatalities. As surgeons, we want to have our own HRO in each facility where we work, to deliver exceptional care to every patient with each and every procedure, avoiding poor outcomes, complications or potentially life-threatening sequelae.

A great way to start this transformation to becoming an HRO is to have proactive systems in place for every common potential complication. Let’s review a few that are well known, and have been discussed in previous issues of this publication. None of these are expensive or particularly difficult, *but a high-quality organization will make sure they are performed properly for each patient, every time.*

a) Infection

- Patients get the correct antibiotic prophylaxis at the correct time.
- Patients use antibacterial soap for five days prior to surgery.
- The surgical site is prepped with a chlorhexidine-impregnated wipe in the pre-op holding area.



As surgeons, we can learn from High Reliability Organizations (HROs) in other fields, and adapt and adopt some of the systems that have been proven to work. HRO’s are organizations that operate in a “complex, high-hazard domain for extended periods, without serious accidents or catastrophic failures.

- Patients who are at high-risk for MRSA are identified, and undergo a 5-day decolonization routine.²
- Appropriate OR skin-prep.
- Appropriate post-op monitoring of surgical sites, with communication to the surgeon of any issues.
- Early identification & treatment of patients with post-op infections.

b) Pain

- Multimodality analgesia system, to minimize complications from opioids.³
- Pre-emptive use of local anesthetics in the surgical site and with regional nerve blocks (TAP, PECS, and others)

c) Bleeding

- Inject incisions with an epinephrine-containing solution, and wait for it to work.
- Use of electrocautery, and maintenance of accurate hemostasis through careful tissue handling and appropriate dissection.
- Use of TXA to reduce bleeding in facelift, rhinoplasty, liposuction and other procedures.⁴
- Appropriate post-op monitoring for hematoma.

d) Hypothermia

- Keep the pre-op room warm.⁵
- Keep the patient warm with robes and insulating hats in pre-op.
- Active warming in the OR. Use of warmed fluids.
- Avoid exposing a large surface area.
- Monitor the patient’s temperature, and intervene where necessary.

e) VTE prophylaxis

- Preemptively identify patients at high risk for VTE, with a stratified Risk-Assessment model, with Hematology evaluation where needed for patients with familial hypercoagulability syndromes and prior VTE.
- Routine use of Intermittent Pneumatic Compression (IPC) devices for all patients under general anesthesia for more than 45 minutes.
- Chemoprophylaxis for high-risk patients (i.e. Caprini RAM score of 7 or higher), beginning 12-18 hours post-op.⁶
- Identification of patients with post-op VTE and rapid treatment.

While there are many additional areas that can be discussed, the idea is to have a sensible standing policy in place for each and every potential area of concern, and that these practical risk-reduction methods are routinely performed, unless a notable exception is identified, which is then reported to the surgeon, so an alternative can be devised. Rosenfield’s pre-surgical checklist⁷ is

Continued on Page 68

The idea is to have a sensible standing policy in place for each and every potential area of concern, and that these practical risk-reduction methods are routinely performed, unless a notable exception is identified, which is then reported to the surgeon, so an alternative can be devised.

Safety: Attitude is Everything

Continued from Page 67

an excellent reference to review. While this might sound formulaic, it's been shown to work in a variety of healthcare settings, from mega-institutions like the Mayo Clinic down to small community hospitals and leads to better communication, fewer medical errors, higher productivity, decreased physician burnout and higher staff satisfaction.⁸⁻¹⁴

While guidelines from safety-oriented rule makers like AAAASF certainly point us in the right direction, perhaps the most important factor is our own attitude. We must prioritize safety over other performance concerns, and realize that safety is emergent and dynamic. No two accidents or "near-misses" are exactly alike, and new threats to safety can occur daily. Having static policies in a manual is a good start... but it takes a focused group of team members who actively make safety and error-prevention a priority for this to come to fruition. As the leader of the surgical team in an office OR, the surgeon sets the tone. The real secret of an HRO is an organization-wide attitude of "mindfulness," even in successful organizations with a great track record for safety.

Patrick Hudson, a safety expert from the high-risk industry of offshore oil drilling, has published a model of the 5 stages of maturity of an organization,¹² in terms of its attitudes and culture towards safety. (See Fig 1)

1. "Unmindful/Pathological"—"Who cares as long as we're not caught or blamed. Full speed ahead."
2. "Reactive"—"Safety is important. We do a lot whenever we've had an accident."
3. "Systematic"—"We have systems in place to manage all hazards."
4. "Proactive"—"We anticipate and prevent problems before they occur. All team members are comfortable speaking up."
5. "Generative/Holistic"—"Safety is how we do business around here. We are constantly vigilant. The organization is wired for improvement."

Interestingly, in a study of hospitals in Massachusetts, only 4 of 30 hospitals were **proactive** or **generative** (level 4–5); most were **reactive**.¹⁰ Furthermore, even high-performing organizations can backslide: comfort, complacency and bureaucracy can lead to slippage.¹¹

Ask yourself: which of these 5 levels sounds like my own organization? Challenge yourself to take your organization to levels 4

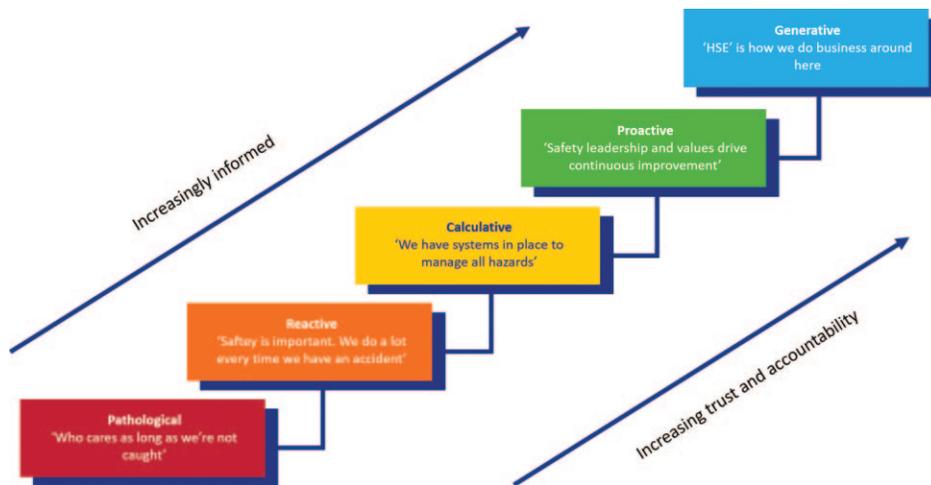


Figure 1. Illustration from: heartsandminds.energyinst.org/toolkit/UYC

and 5. If you are already a level 5, congratulations—now teach the mantra of safety to those around you!

Drs. Fiala & Fernau are both members of the Safety Committee of the Aesthetic Society. Dr. Fernau is the committee's chair.

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