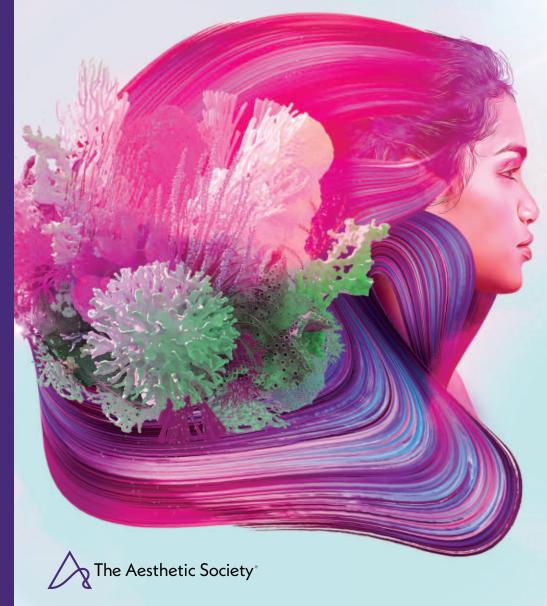
beauty • artistry • expertise • education

AESTHETIC SOCIETY NEWS



Aesthetic Meeting 2023

Miami Beach, FL
Miami Beach Convention Center

April 19–23, 2023 Exhibits: April 21–23

Inside This Issue

Safety Advisory: Mitigating Risks of a Fentanyl Overdose

International MOU Expansion

Facial & Rhino Recap from Vegas

The Rise in Membership

4th Global Women's Alliance Panel Happening LIVE in Miami Beach

Award Season Round-Up



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

Flex Your Options

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

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

Real Strength Starts From Within™





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BD, Franklin Lakes, NJ, 07417, U.S. bd.com

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

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

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

- 1. Preclinical data on file at Tepha Inc. Results may not correlate to clinical performance in humans.
- 2. Deeken, Corey R., and Brent D. Matthews. "Characterization of themechanical 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.

3. Data on File at Tepha.



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The Aesthetic Society

11262 Monarch Street, Garden Grove, CA 92841
Email: hello@theaestheticsociety.org



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- 5 President's Message
- 7 Meetings Calendar

THE AESTHETIC MEETING 2023

- 9 Highlights of The Aesthetic Society Booth
- 10 ASERF Career Achievement Award
- 11 ASERE Silent Auction
- 14 Explore The Aesthetic Marketplace
- 18 Founding Members and Past Presidents
- 19 Thank You to Our Many Volunteers
- 20 Awards

EDUCATION

P6 Facial and Rhinoplasty Symposium

AESTHETIC CARE TEAM

29 Four Full Days of Education for Your Team at The Aesthetic Meeting 2023

SOCIETY NEWS

- 31 International Memorandum of Understanding (MOU) Update
- 32 The Aesthetic Society 2023–2024 Members to Vote on Slate of Candidates
- 35 Patient Safety Advisory: Fentanyl
- 41 Global Alliance for Women Leaders in Aesthetic Plastic Surgery
- 43 ASJ and ASJ Open Forum
- 44 Celebrating Our Official Journal Partners and Premier International Partners Global Impact Letter of Appreciation to Dr. Foad Nahai
- 46 International Collaborations in France and Beyond
- 49 A Look Back at Aesthetic One
- 53 Leadership Training—Our 9th Graduating Class! Media Notes and Quotes
- 54 The Aesthetic Society's Premier Partners
- 56 The Aesthetic Society's Alliance Partners
- 59 Industry Partners Support The Aesthetic Society's Mission
- 63 Membership FAQs and Membership Myth-Busters

FOUNDATION NEWS

- 65 Update on ASERF
- 66 ASERF 2023–2024 Members To Vote on Slate of Candidates
- 69 Established in 1993, ASERF Hits 30-Year Milestone
- 71 Sherrell J. A ston, MD—NYC Plastic Surgeon Donates \$50,000 to Support Aesthetic Surgery Research
- 72 Train with an Expert
- 74 ASERF President's Circle
- 75 ASERF Expands Fundraising Efforts to Meet Growing Research Needs ASERF Prepares for New Website Launch

PRACTICE SOLUTIONS

- 77 Choosing the Right Content Creators to Execute Your Digital Marketing Goals
- 79 Handling Objections: How Skilled Is Your Team?
- 81 Cyber Security Threats
- 83 Is Your Website Ready for the Next Google Analytics Update?
- 85 Is Al Content the Future of Plastic Surgery SEO?
- 87 How Well Was the Patient Informed of Risk Factors Prior to Breast Surgery?
- 89 How to Attract Affluent Cosmetic Patients
- 91 Designing a Withdrawal Strategy: The Most Important Factor in a Successful Retirement
- 93 What to Expect from Your Practice Manager
- 95 The Straight & Narrow

SAFETY MATTERS

- 97 Office-Based Plastic Surgery and Sedation—Dueling Perspectives on Patient Safety
- 98 Tumescent Anesthesia



Respondents said they're more likely to listen to their doctor over friends, family and influencers when selecting a product, treatment or procedure

THE STATE OF AESTHETICS

YOUR COMPLETE GUIDE TO HOW YOUR POTENTIAL PATIENTS NAVIGATE AESTHETIC PROCEDURES.

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



Scan here to access your digital copy of The State of Aesthetics Winter 2023 edition

Managed P.



PRESIDENT'S MESSAGE



Membership by the Numbers

By Jennifer L. Walden, MD, FACS

Dear Members,

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

EXTERNSHIP PROGRAM

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

THE AESTHETIC SOCIETY MEMBERSHIP STATISTICS AS OF JANUARY 23, 2023

Active: 1978

International Active: 225

Associate: 124

• International Associate: 5

· Residents & Fellows: 765

NEW MEMBERS VOTED IN ON JANUARY 1, 2023

· Active: 80 (35 are female)

• International Active: 14 (3 are female)

• Total: 94

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

ABPS MEMBERSHIP STATISTICS

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

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

Female: 1,348

• Male: 6,295

• Unknown: 1

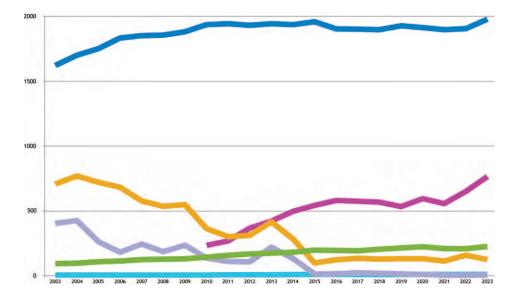
Of the 7,644 active diplomates, 17.6% are female. (Source: American Board of Plastic Surgery, January 2023)

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

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

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







The only FDA-approved PLLA collagen biostimulator injectable¹

Important Safety Information

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

Sculptra should not be used by people that are allergic to any ingredient of the product or have a history of keloid formation or hypertrophic scarring. Safety has not been established in patients who are pregnant, lactating, breastfeeding, or under 18 years of age.

Sculptra has unique injection requirements and should only be used by a trained healthcare practitioner. Contour deficiencies should not be overcorrected because they are expected to gradually improve after treatment.

Sculptra should not be injected into the blood vessels as it may cause vascular occlusion, infarction or embolic phenomena. Use at the site of skin sores, cysts, pimples, rashes, hives or infection should be postponed until healing is complete. Sculptra should not be injected into the red area (vermillion) of the lip or in the peri-orbital area.

The most common side effects after initial treatment include injection site swelling, tenderness, redness, pain, bruising, bleeding, itching and lumps. Other side effects may include small lumps under the skin that are sometimes noticeable when pressing on the treated area. Larger lumps, some with delayed onset with or without inflammation or skin discoloration, have also been reported.

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

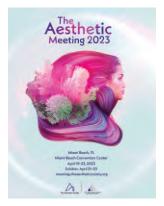
REFERENCE: 1. Sculptra. Instructions for Use. Galderma Laboratories, L.P., 2021.



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The Aesthetic Meeting 2023 April 19–23, 2023

Exhibits: April 21–23

Miami Beach Convention Center



The Aesthetic Cruise 2024 June 11–23, 2024

Endorsed by



Dallas Cosmetic Medicine & Surgery and Rhinoplasty Meeting

March 10-13, 2023

Dallas, TX dallasrhinoplastyandcosmeticmeeting.com

Indie Aesthetic Surgery Summit August 26–27, 2023

A Virtual Event indieaestheticsurgerysummit.com

Jointly provided by



Baker Gordon Educational Symposium

February 9-11, 2023

Miami, FL

bakergordonsymposium.com

The 15th American-Brazilian Aesthetic Meeting

February 16-20, 2023

Park City, UT

americanbrazilianaestheticmeeting.com

Northwest Society of Plastic Surgeons—61st Annual Scientific Meeting

February 18-22, 2023

Whistler, BC nwsps.org

The Rhinoplasty Society Annual Meeting 2023

April 19, 2023

Miami Beach, FL

rhinoplastysociety.org/meetings

In Collaboration With



AICPE National Congress—Italian Society of Aesthetic Plastic Surgery

April 14-16, 2023

aicpe.org

Spring Academy VDAEPC 2023— Association of German Aesthetic Plastic Surgeons

May 5-6, 2023

Hotel Adlon Kempinski Berlin Berlin, Germany vdaepc2023.de

OFCEP Congress 2023— French Society of Plastic Aesthetic Surgeons

June 1-3, 2023

Versailles, Palais Des Congrès chirurgiens-esthetiques-plasticiens.com/ congres-sofcep-2/?lang=en

ISAPS Olympiad Athens World Congress 2023—International Society of Aesthetic Plastic Surgery

August 31-September 2, 2023

Megaron Athens Concert Hall Athens, Greece isaps.org

BAAPS 2023—Facial Surgery & Body Contouring—British Association of Aesthetic Plastic Surgeons

September 28-29, 2023

Savoy Place London, England baaps.org.uk Australasian Society of Aesthetic Plastic Surgeons—45th Annual ASAPS Conference

October 13-15, 2023

The Langham Gold Coast, Australia aestheticplasticsurgeons.org.au/event/2023-annual-asaps-conference-save-the-date

CSAPS 50th Annual Meeting— Canadian Society for Aesthetic Plastic Surgery

October 26-29, 2023

Hyatt Regency Vancouver Vancouver, BC Canada csaps.ca/medical-professionals/ meeting-program-and-registration

5th Norwegian-American Aesthetic Meeting

October 27, 2023

Oslo, Norway naam.no

59th Brazilian Congress of Plastic Surgery—Brazilian Society of Plastic Surgery

November 15–18, 2023

Royal Palm Hall Campinas, SP, Brazil www2.cirurgiaplastica.org.br

Aesthetic Meeting 2023



Miami Beach, FL
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Highlights of The Aesthetic Society Booth—Visit Us in Booth #1230 in The Aesthetic Marketplace

DISCOVER AESTHETIC ONE



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

SAVE ON OUR BEAUTIFUL AND EFFECTIVE PRODUCTS



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

MEMBERSHIP



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

READY FOR YOUR CLOSEUP?



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

AESTHETIC SURGERY EDUCATION AND RESEARCH FOUNDATION (ASERF)



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

Visit Us in The Aesthetic Marketplace Booth #1230

AESTHETIC SURGERY JOURNAL AND AESTHETIC SURGERY JOURNAL OPEN FORUM





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

BID TO WIN



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

"BEYOND THE BEFORE & AFTER" VIEWING LOUNGE



Have you caught up with the latest episodes of our award-winning docuseries, "Beyond the Before & After?" Visit our viewing lounge, just a few aisles away in the Aesthetic Marketplace in Booth #2457, for a (semi) private screening! Experience these uplifting stories of aesthetic plastic surgery patients, many of them just like yours.



A Lifetime of Achievements—A Legacy to Last Generations

Join ASERF as we honor

Drs. James M. Stuzin and John B. Tebbetts

For Their Many Achievements





John B. Tebbetts, MD

ASERF Career Achievement Award

SATURDAY, APRIL 22 • 12:00PM - 2:00PM

Grand Ballroom A • Miami Beach Convention Center

The Society and Foundation Annual Member Business Meeting

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

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

SILENT AUCTION

FRIDAY, APRIL 21-SUNDAY, APRIL 23

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

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

Allergan AestheticsBooth: 2013 CoolSculpting Elite 20 Treatment Card Starting Bid: \$1,820

BiLumixBooth: 2028
BiLumix Gen 2 Headlamp Package
Starting Bid: \$437

Bimini Health Tech.....Booth 3213

Puregraft 250 Filtration System Starting Bid: \$168

Puregraft Boost Adipose Micronizer Double Pack & Puregraft 50 Filtration System Starting Bid: \$170

DefenAge

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

Trent D. Douglas, MD

Bose Sport Earbuds Starting Bid: \$100

EvolusBooth: 3049
8 JEUVEAU® (prabotulinumtoxinA-xvfs)
Vials for Injection
Starting Bid: \$1,750

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

Implantech Associates, Inc...Booth: 2405

Three Silicone Facial Implants Starting Bid: \$446

Influx Marketing.....Booth: 2816

Apple Watch Series 8 Starting Bid: \$210

iNPLANT Funnel......Booth: 2228

Four Boxes of V3 iNPLANT Funnels Starting Bid: \$830 LeonisaBooth: 2830

Men's Firm Compression post-surgical vest Starting Bid: \$30

Post-Surgical Long Sleeve Arm Shaper Starting Bid: \$20

Post-Surgical Short Bottom Girdle Starting Bid: \$20

Post-Surgical Short Girdle with Side Zippers and Wide Straps
Starting Bid: \$38

Post-Surgical Wireless Bra with Front Closure Starting Bid: \$18

Sculpting Body Shaper with Built-In Back Support Bra Starting Bid: \$45

LightStim

LightStim for Wrinkles Starting Bid: \$87

Foad Nahai, MD, FACS

Problems in Periorbital Surgery: A Repair Manual Starting Bid: \$225

Oculo-Plastik, Inc.

Black Durette® II Plastic Externals for Light Therapy PDT and LED's Starting Bid: \$28

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

TRAIN WITH AN EXPERT

Starting Bid: \$1,200

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

VACATION PACKAGES

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

Fairmont Scottsdale Golf and Spa, Scottsdale, AZ

Starting Bid: \$4,225

Fiji Paradise Starting Bid: \$9,450

Tuscany Culinary Escape

Starting Bid: \$4,950

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

BID TO WIN! USING YOUR SMARTPHONE

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

BID TO WIN! USING THE WEBSITE



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

DON'T HAVE A SMARTPHONE?

Visit the ASERF Silent Auction Counter inside of The Aesthetic Society Booth #1230!

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

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**.



SILENT AUCTION

Thank you to the following donors for their generous contributions!

































DESTINATIONS



Los Cabos, Mexico



Fiji Paradise



Golf and Spa, Scottsdale, AZ Tuscany Culinary Escape



TRAIN WITH AN EXPERT



William P. Adams Jr., MD



Caroline A. Glicksman, MD, MSJ



Kiya Movassaghi, MD, DMD



The Plastic Surgery Clinic— Drs. Ryan E. Austin, Frank R. Lista, and Jamil Ahmad



Lorne K. Rosenfield, MD



Renato Saltz, MD



Douglas S. Steinbrech, MD

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

Explore The Aesthetic Marketplace—Exhibit Booth Map

1005 1204 1205 1404 attent 1405 1400 1401 1400 1401	Coffee Company, Inc. TouchMD T	The Aesthetic Society* 1230 U.S.K. Vita Moder Clear Digar Tamus Clase Digar Digar	Women Austratic Surgeons (WAS) Lounge 1251 Lounge 1251 1450 1451 1451 1452 1453 1453 1454 1448 Seating	Food Pavilion
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28 HydraFacial 2805 for in 1805 for in 180	Patient Patient Pasis Patient Pasis Pasis Pasis Patient Pasis Pasi	Micro Price Pric	InMode 2649	Tood Pavilion
Neon Gravit US 3204 3206 3404 3200 3201 3400 3201 3400	Medis Styrat RealSelf	3039 3238 3434 3440 3227 3428 3227 3426	Seating Seat	Aesthetic Activation Lounge
	Allergan & Allergan & Sientra, 23 Aesthetics, 25 Aesthetics, 25 Aesthetics, 25 An AbbVie	RealSelf S Revelle S Wenton S	de. SANDOW S	Galderma Galder

Scan the QR code for Exhibitor Information

Floor Plan as of January 31, 2023.

Explore The Aesthetic Marketplace

Company NameBoot	h Number
4th Dimension EMR	2829
Abbott	2253
AcelRx Pharmaceuticals, Inc	2251
AD Surgical	2052
Aerolase	3030
Aesthetic Activation Lounge	3059
Allergan Aesthetics, an AbbVie company	.2013,3031
Alpha Aesthetics	1803
Alphaeon Credit	2026
American Society of Plastic Surgeons (ASPS)	2817
Anthony Products/Gio Pelle	2600
Applied Medico-Legal Solutions, RRG, Inc.	2200
APX Platform	2427
Apyx Medical	2818
Arab Association of Surgical and Medical Aesthetics	2237
ASSI-Accurate Surgical	2027
Augustine Surgical Inc	3004
Ballancer®Pro USA	1219
■ BD	1821
BENEV Company, Inc	1015
Beyond The Before & After Lounge	2457
BiLumix	2028
Bimini Health Tech	3213
Biodermis	2623
Black & Black Surgical, Inc	2449
BRAVE Coalition Foundation .	1638
Brijjit Medical Inc	1249
BTL Aesthetics	2802

Canadian Society for Aesthetic Plastic Surgery	2050
Candace Crowe Design	1637
Candela	2000
Canfield Scientific, Inc	1839
CareCredit	2401
Cartessa Aesthetics	1857
Ceatus Media Group	2039
Cicalux Inc	2235
Clarius Mobile Health	2226
ClearPoint Medical Inc	1426
Connect by ASPS	2819
Contemporary Design Inc	3040
Corganics	2428
Coronado Aesthetics LLC	1449
CosmetAssure	2627
CosmetiSuite a Division of Meditab Software, Inc	2037
Cosmofrance	3038
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Cutera	1626
Cynosure, LLC	2813
Cytrellis Biosystems, Inc	2051
Dagmar Marketing	1653
Design Veronique	3026
Designs for Vision, Inc	2605
DoctorsInternet.com	1615
DRE Medical/ Avante Medical Surgical	3017
Establishment Labs S.A	3039
Etna Intoractivo	1//10

Evolus	3049
Firm Media	283′
Galderma Laboratories, L.P	1859
GetHairMD™	1221
GrowthMed, Inc	2648
Guard Medical Inc	2229
Hanson Medical	1403
Happy Booty Pillow	1659
Hayden Medical Instruments	2430
HealFast, Inc	2434
HydraFacial	260′
Ideal Implant Incorporated	2639
IMCAS	1838
Implantech Associates, Inc	2405
Incredible Marketing	2800
Influx Marketing	2816
● InMode	2649
iNPLANT Funnel	2228
InstaUnicorn LLC	2227
International Society of Aesthetic Plastic Surgery	2239
Interni USA/Athena Trading Inc	
Invotec International, Inc	1641
Isavela Enterprises, Inc	223′
Kimera Labs, Inc.	
KIMS MED CO., LTD.	185′
Leonisa	2830
Liposales Robbins Instruments	1423
Lumenis	1613
Lumisque	3053
Lutronic Inc	1602

Continued on Page 17

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

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Explore The Aesthetic Marketplace

Continued from Page 15

Marena2031
Marina Medical Instruments, Inc2041
Maxxeus3204
Medical Z2438
Medshark Digital3023
Mentor Worldwide, LLC1813
Merz Aesthetics1812
Micrins2626
MicroAire Surgical Instruments1619
Microsurgery Instruments, Inc2835
Midmark Corporation1802
Modern Aesthetics1227
ModMed1622
Möller Medical GmbH2256
MRKTMADE1649
MTF Biologics1413
MyMedLeads2004
Nadia International, Inc2049
Neon Canvas3001
NewBeauty/SANDOW1831
Newmedical Technology, Inc3027
Nextech1213
NextPatient1405
Nitra2452
NUTRAFOL2249
Obagi Medical2827
oVioTechnologies, Inc1648
Pacira Pharmaceuticals3013
PatientFi, LLC2617
Payment Technologies Group3228
Perfect Corp2426
Plastic and Reconstructive Surgery and PRS Global Open2823

Plastic Surgery Studios	1849
Plymouth Medical	2238
PMT Corporation	2234
ProMedical IT	2258
QUAD A	1850
Quality Medical Publishing, Inc	1826
R2 Technologies	3018
RADAR Fx	2841
Rainey Recovery Wear	2248
RealSelf	3217
Red Spot Interactive	1605
Refine USA	1421
Revance Aesthetics	1825
Revelle Aesthetics	3216
Ronin Surgical Corp	1603
Rosemont Media, LLC	2448
Rosivo LLC	1651
Sciton	2439
Senté	2259
Sientra, Inc	2613
skinbetter science	1800
SkinCeuticals	1848
Skinuva	1627
Skytale Group	3222
Societe Francaise des Chirurgiens Esthetiques	
Plasticiens	
Sofwave	
Solta Medical	
Suneva Medical	
Surgical Innovation Associates	
Symplast	
The Aesthetic Arena	2074

The Aesthetic Guide	3215
The Aesthetic Meeting 2024, Vancouver	2857
The Aesthetic Society	1230
Thieme Medical Publishers	1422
Tiemann & A to Z Surgical	1427
TouchMD	1013
Tulip Medical Products	2003
Tuttnauer USA	3016
U.SK Under Skin	1027
Utah Medical Products, Inc	1836
Venus Concept	2431
Viper Equity Partners	2650
Vita Group	1226
Vivant Skin Care	3019
Wasserman Medic	2635
Weave	3015
WebMD Care & Vitals	1801
Wells Johnson	2801
Women Aesthetic Surgeons' (WAS) Lounge	1049
YellowTelescope/SEOversite/ iScreamSocialMedia	1600
Yes Doctor Corporation	1223
Young Pharmaceuticals	1618
Zero Gravity Skin	3005
ZO Skin Health	2030

- Premier Industry Partner
- Alliance Industry Partner

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

The Aesthetic Society Founding Members

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*Sidney K. Wynn, MD

*deceased

The Aesthetic Society Past Presidents & Annual Meetings

Organizational Meeting October 1968 New Orleans, LA *Thomas D. Rees, MD May 1980 Orlando, FL *Bernard L. Kaye, MD **April** 1981 Houston, TX *Thomas J. Baker, MD April 1982 Las Vegas, NV Donald R. Klein, MD April 1983 Los Angeles, CA *Rex A. Peterson, MD March 1984 Washington D.C. George C. Peck, MD April 1985 Boston, MA *Frederick M. Grazer, MD **April 1986** New Orleans, LA *Stanley A. Klatsky, MD March 1987 Los Angeles, CA *Norman M. Cole, MD March 1988 San Francisco, CA *Gaspar W. Anastasi, MD April 1989 Orlando, FL Peter McKinney, MD **April 1990** Chicago, IL Jack A. Friedland, MD April 1991 New York, NY *Edward S. Truppman, MD May 1992 Los Angeles, CA *William P. Graham, III, MD April 1993 Boston, MA Sherrell J. Aston, MD **April** 1994 Dallas, TX Robert Singer, MD March 1995 San Francisco, CA *James L. Baker Jr., MD **April 1996** Orlando, FL *Gustavo A. Colon, MD May 1997 New York, NY *Lawrence B. Robbins, MD May 1998 Los Angeles, CA John G. Penn. MD May 1999 Dallas, TX Fritz E. Barton Jr., MD May 2000 Orlando, FL Daniel C. Morello, MD May 2001 New York, NY Malcolm D. Paul, MD April 2002 Las Vegas, NV

Franklin L. DiSpaltro, MD May 2003 Boston, MA Robert W. Bernard, MD April 2004 Vancouver, B.C. Canada Peter B. Fodor, MD New Orleans, LA April 2005 Mark L. Jewell, MD April 2006 Orlando, FL James M. Stuzin, MD New York, NY April 2007 Foad Nahai, MD May 2008 San Diego, CA Alan H. Gold, MD May 2009 Las Vegas, NV Renato Saltz, MD April 2010 Washington, D.C. Felmont F. Eaves, III, MD May 2011 Boston, MA

Jeffrey M. Kenkel, MD May 2012 Vancouver, B.C. Canada

Leo R. McCafferty, MD April 2013 New York, NY

Jack Fisher, MD April 2014 San Francisco, CA

Michael C. Edwards, MD May 2015 Montréal, Québec, Canada

James C. Grotting, MDApril 2016Las Vegas, NVDaniel C. Mills, II, MDApril 2017San Diego, CAClyde H. Ishii, MDApril 2018New York, NYW. Grant Stevens, MDMay 2019New Orleans, LA

Charles H. Thorne, MD April 2020 The Aesthetic Meeting @Home

Herluf G. Lund Jr., MD April 2021 Miami Beach, FL
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Volunteer Recognition and Awards

Continued from Page 19

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

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Norman M. Cole, MD	1997-2001
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Bahman Guyuron, MD	2008-2009
Laurie A. Casas, MD	2009-2010
Geoffrey R. Keyes, MD	2010-2011
V. Leroy Young, MD	2011-2012
Joe M. Gryskiewicz, MD	2012-2013
William P. Adams Jr., MD	2013-2014
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Neal R. Reisman, MD, JD	2015-2016
Steven Teitelbaum, MD	2016-2017
Barry E. DiBernardo, MD	2017-2018
Julio L. Garcia, MD	2018-2019
Robert Whitfield, MD	2019-2020
Luis M. Rios Jr., MD	2020-2021
Louis L. Strock, MD	2021-2022
Bruce W. Van Natta, MD	2022-2023

Awards

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

TIFFANY AWARD-**BEST SCIENTIFIC PRESENTATION**

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

Vasilios S. Lambros, MD New Orleans, LA Caroline A. Glicksman, MD, MSJ

and Patricia A. McGuire, MD Miami Beach, FL 2021

Steven R. Sigalove, MD

San Diego, CA 2022

2019

2021

2021

SIMON FREDRICKS AWARD FOR **BEST PANELIST**

The Simon Fredricks Award is presented to the individual who is judged the Best Panelist at the annual meeting of the Society.

Holly Casey Wall, MD New Orleans, LA

2019 Steven Teitelbaum, MD Miami Beach, FL 2021

M. Bradley Calobrace, MD

San Diego, CA 2022

ROBERT SINGER AWARD FOR BEST **HOT TOPICS PRESENTATION**

The Robert Singer Award is presented to the individual who is judged the Best Hot Topics presenter at The Aesthetic Society/ASERF Annual Meeting.

James Fernau, MD

New Orleans, LA 2019 Francisco "Paco" Canales, MD

Miami Beach, FL

Patricia A. McGuire, MD San Diego, CA 2022

WALTER SCOTT BROWN AWARD **FOR BEST VIDEO**

The Walter Scott Brown Award is presented to the individual(s) presenting the Best Video at the annual meeting. This award is made possible by a fund established by Walter Scott Brown, MD (1906-1985).

Simeon H. Wall Jr., MD

New Orleans, LA 2019 Dino Elyassnia, MD

Miami Beach, FL Jamil Ahmad, MD

San Diego, CA 2022

Awards

Continued from Page 20

RAYMOND VILAIN AWARD FOR OUTSTANDING SCIENTIFIC PRESENTATION

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

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

PETER B. FODOR AWARD FOR BEST PANEL MODERATOR

The Peter B. Fodor Award is presented to the individual who is judged the Best Panel Moderator at The Aesthetic Society/ASERF Annual Meeting. This etched crystal is made possible through a restricted fund established in 2001 by Barbara and Peter B. Fodor, MD. Nolan S. Karp, MD

New Orleans, LA	2019
G. Jackie Yee, MD	
Miami Beach, FL	2021
Tiffany McCormack, MD	
San Diego, CA	2022

SHERRELL J. ASTON AWARD FOR BEST PRESENTATION BY A RESIDENT, FELLOW. OR CANDIDATE

The Sherrell J. Aston Award was created by Dr. Sharadkumar Dicksheet's "named fund" contribution to The Aesthetic Surgery Education & Research Foundation for the best presentation by a resident, Fellow, or member of the Aesthetic Society Candidate Program. (Beginning in 1995 the criteria was limited to entries from Aesthetic Society annual meetings.)

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

BEST JOURNAL ARTICLE

This award is for the best aesthetic surgery article published in *Aesthetic Surgery Journal*. **2020 Domestic**

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

2020 International

A Consensus on Minimizing the Risk of Hyaluronic Acid Embolic Visual Loss and Suggestions for Immediate Bedside Management

Greg J. Goodman, FACD; Mark R. Magnusson, MBBS, FRACS; Peter Callan, MBBS, FRACS, MBA; Stefania Roberts, MA, MBBS, FRACP; Sarah Hart, MBChB, NZSCM; Cara B. McDonald, MBBS, FACD; Michael Clague, BSc; Alice Rudd, MBBS, FACD; Philip S. Bekhor, MBBS, FACD; Steven Liew, MBBS, FRACS 2021 Domestic

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

2021 International

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

2022 Domestic

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

2022 International

Injection Guidelines for Treating Midface Volume Deficiency With Hyaluronic Acid Fillers: The ATP Approach (Anatomy, Techniques, Products)

Patrick Trévidic, MD; Joely Kaufman-Janette, MD; Susan Weinkle, MD; Raymond Wu, MD; Benji Dhillon, MD; Stéphanie Antunes, PhD; Emilie Macé, PharmD; Pauline Maffert, MSc

BEST AESTHETIC SURGERY JOURNAL RESEARCH PAPER

This award is for the best aesthetic surgery research paper published in *The Aesthetic Surgery Journal*.

2020

Histological Evaluation of the Skin After Fat Grafting: A Blinded, Randomized, Controlled Clinical Study

Juan PBR Maricevich, MD; Marcel FMB Lima, MD; Ana Carolina Maricevich, MD; Marco ABR Maricevich, MD; Larissa FJ Silva, MD

2021

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

3-part series: Impact of Capsulectomy Type

on Post-Explantation Systemic Symptom

Improvement: Findings From the ASERF Systemic Symptoms in Women-Biospecimen Analysis Study: Part 1 Caroline Glicksman, MD, MSJ, FACS; Patricia McGuire, MD; Marshall Kadin, MD; Marisa Lawrence, MD; Melinda Haws, MD; Jill Newby, PhD; Sarah Ferenz, BA; James Sung, MD,

Heavy Metals in Breast Implant Capsules and Breast Tissue: Findings from the Systemic Symptoms in Women-Biospecimen Analysis Study: Part 2

FCAP; Roger Wixtrom, PhD

Roger Wixtrom, PhD; Caroline Glicksman, MD, MSJ, FACS; Marshall Kadin, MD; Marisa Lawrence, MD; Melinda Haws, MD; Sarah Ferenz, BA; James Sung, MD, FCAP; Patricia McGuire, MD

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

BEST AESTHETIC SURGERY JOURNAL OPEN FORUM PAPER

This award is for the best paper published in the Aesthetic Surgery Journal Open Forum. 2020: Tranexamic Acid in Aesthetic Facial Plastic Surgery: A Systematic Review of Evidence, Applications, and Outcomes Garrett D. Locketz, MD, Kirkland N. Lozada, MD, and Jason D. Bloom, MD, FACS 2021: Breast Implant Illness: An Expert-Panel Discussion on Current Research Jeffrey M. Kenkel, MD, FACS, Caroline A. Glicksman, MD, MSJ, Patricia A. McGuire, MD, Luis M. Rios, MD, William P. Adams Jr., MD 2022: Fat Transfer for Gluteal Augmentation: An Expert Video Roundtable Discussion Jeffrey M. Kenkel, MD, FACS, Daniel Del Vecchio, MD, Simeon Wall, Jr, MD, FACS, Patrick Pazmino, MD

Awards

Continued from Page 21

BEST AESTHETIC SURGERY JOURNAL OPEN FORUM INTERNATIONAL PAPER

This award is for the best International paper published in the Aesthetic Surgery Journal Open Forum.

2021

The Usefulness of Magnetic Resonance Angiography to Analyze the Variable Arterial Facial Anatomy in an Effort to Reduce Filler-Associated Blindness: Anatomical Study and Visualization Through an Augmented Reality Application

Marc Mespreuve, MD, PhD; Karl Waked, MD; Barbara Collard, MD; Joris De Ranter, MD; Francis Vanneste, MD; Benoit Hendrickx, MD, PhD

BEST AESTHETIC SURGERY JOURNAL OPEN FORUM RESEARCH PAPER

This award is for the best paper published in the Aesthetic Surgery Journal Open Forum. 2021

The Combined Effect of Intravenous and Topical Tranexamic Acid in Liposuction: A Randomized Double-Blinded Controlled Trial Nicolas M. Abboud, MD; Ayush K. Kapila, MBBS, MD, MRCS; Sofie Abboud; Elie Yaacoub, MD; Marwan H. Abboud, MD

DISTINGUISHED SERVICE AWARD

This award is presented to members of the Society whose dedication, service, and/or contributions to the development, wellbeing, and success of the Society have been demonstrated over many years and have exemplified action above and beyond the expected or ordinary. The award is a Tiffany crystal trapezoid.

Laurie A. Casas, MD	2019
Leo R. McCafferty, MD	2021
Jeffrey M. Kenkel, MD	2022

JEROME R. KLINGBEIL AWARD FOR TEACHING EXCELLENCE

The Jerome R. Klingbeil Award for teaching excellence was established in 1988 to recognize the efforts and the achievements of outstanding Teaching Course instructors and as a memorial to Jerome R. Klingbeil, MD, CAE, (1918–1988). This award was named in honor of Dr. Klingbeil's faithful and dedicated service to the Society. Dr. Klingbeil served this organization and its membership in numerous capacities, including 1973 Local Arrangements Chairman, Chairman of the Convention Planning and Coordination Committee (1974–1984) and as its first Executive Director

(1981–1985). In keeping with the high degree of emphasis Jerry placed upon quality education and professional development, this award is conferred upon Teaching Course instructors who have donated their time and expertise to furnish significant and long-term contributions to the Society and the specialty. Mary Lind Jewell, RPT Geoffrey R. Keyes, MD 2020 Joe M. Gryskiewicz, MD 2020 Z. Paul Lorenc, MD 2020 Barry E. DiBernardo, MD 2022

ASERF CAREER ACHIEVEMENT AWARD

This award honors an esteemed plastic surgeon recognizing their significant contributions and distinguished career; dedication and commitment to aesthetic surgery training and patient safety. This award is funded by donations in his/her name from the surgeons that know him/her best and thankfully recognize his/her powerful influence on our careers and lives.

Robert Singer, MD	2019
Sherrell J. Aston, MD	2022
John B. Tebbetts, MD	2023
(posthumous)	
James M. Stuzin, MD	2023

LEADERSHIP AWARD

This award is presented to an Aesthetic Society member who shows exemplary leadership, service, creativity, and dedication to the subspecialty of Aesthetic Surgery, advancing the organization in the pursuit of its stated mission. The Award is presented at the discretion of the Board of Directors to recognize a superior contribution.

James C. Grotting, MD	2020
Michael C. Edwards, MD	2021
Charlie Thorne, MD	2022

SPECIAL MERIT

The Award of Special Merit commemorates the paramount contributions to the success and wellbeing of the Society which, in the judgment of the Society, was above and beyond the expected and ordinary. The recipient need not be a member of the Society. his award was originally in the form of a document suitable for framing. In 1987, an engraved silver bowl was adopted as this award.

Daniel C. Mills, MD	2019
Richard J. Warren, MD	2019
Kevin Charles	2021
Robert Aicher, Esq.	2022

SPECIAL AWARD

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

ASERF SPECIAL AWARD

Barry E. DiBernardo, MD	2021
Courtney Muehlebach	2022

SCOTT SPEAR AWARD

The Scott Spear Award honors the Best Breast Presentation at The Aesthetic Meeting.

Roy de Vita, MD

New Orleans, LA

Steven R. Sigalove, MD

Miami Beach, FL

Caroline A. Glicksman, MD, MSJ and

Patricia A. McGuire, MD

San Diego, CA

2022

IN CHUL SONG AWARD FOR PHILANTHROPIC SERVICE

This award is made possible by a generous contribution to The Aesthetic Surgery Education and Research Foundation by Sharadkumar Dicksheet, MD. This award is bestowed upon a plastic surgeon whose philanthropic plastic surgery efforts best exemplifies humanitarian service.

Julio L. Garcia, MD	2011
Larry Weinstein, MD	2012
Raj N. Lalla, MD	2013

COMMUNITY SERVICE AWARD

Tolbert Wilkinson, MD	2009
Gang Tattoo Removal Program of T	exas
Jack E. Demos, MD	2013
Founder, Surgicorps, International	
Joe M. Gryskiewicz, MD	2015
Volunteer Services to the Children	of Ecuadoi

Awards

Continued from Page 22

GASPAR W. ANASTASI AWARD

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

Christodoulos Kaoutzanis, MD	
New Orleans, LA	2019
Nneamaka Nwubah, MD	
New Orleans, LA	2019
Justin Bellamy, MD	
Miami Beach, FL	2021
Shirley Shue, MD	
Miami Beach, FL	2021
Alannah Phelan, MD	
San Diego, CA	2022
Jeffrey L. Lisiecki, MD	
San Diego, CA	2022

ASERF RESEARCH AWARD

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

,	
Vancouver, B.C. Canada	2004
Caroline A. Glicksman, MD, MSJ	
San Diego, CA	2022
Patricia A. McGuire, MD	
San Diego, CA	2022

TED LOCKWOOD AWARD FOR EXCELLENCE IN BODY CONTOURING

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

Daniel A. Del Vecchio, MD

New Orleans, LA

Douglas S. Steinbrech, MD

Miami Beach, FL

Simeon H. Wall Jr., MD

San Diego, CA

2022

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





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EDUCATION

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To know it, is to love it. The Aesthetic Society's Facial and Rhinoplasty Symposium was once again a big success! Attendees were actively participating in discussions and the cadaver lab. So many highlights and insightful presentations—this meeting should be on every face surgeon's list!



100%

100

100% OF RESPONDENTS CLAIMED THIS SYMPOSIUM ENHANCED MY PROFESSIONAL EFFECTIVENESS!



Facial and Rhinoplasty Symposium

Continued from Page 26







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Four Full Days of Education for Your Team at The Aesthetic Meeting 2023

he Aesthetic Meeting has long been known as the pinnacle of education for aesthetic plastic surgeons. But a great aesthetic practice requires more than an exceptional surgeon, it takes an entire team that goes beyond. That's why the meeting is now the go-to destination for a surgeon's entire staff. Included with registration are three full days of aesthetic care team education, provided by the foremost experts in the practice management arena.

THURSDAY, APRIL 20

Thursday courses are an additional fee

7:00am - 10:00am

S1 Nurse Cadaver Lab

Chairs: Charles Thorne, MD and

Stelios Wilson, MD

9:00am - 3:00pm

S5 Skills for Successful Patient Coordinators

Karen Zupko, President, Karen Zupko & Associates

12:00pm - 3:00pm

S10 Temperament Theory: Using Science to Improve the Art of Business and Team Relationships

Josyln Vaught

2:00pm - 4:00pm

S14A Physician Extender Injector Competence Training—Level 1— Understanding the Basics of Injection Techniques with Neurotoxins and Hyaluronic Acid Dermal Fillers

Chair: Z. Paul Lorenc, MD

Additional Faculty: Kathy Jones, RN* and

Karen Menard, RN

4:30pm - 6:30pm

S14B Physician Extender Injector Competence Training—Level 2— Advanced/Combination Injection Techniques with Neurotoxins and the Array of FDA-Approved Dermal Fillers

Chair: Z. Paul Lorenc, MD

Additional Faculty: Kathy Jones, RN and

Karen Menard, RN

3:30pm - 6:30pm

S15 The Ritz-Carlton Leadership Center presents: Brand Differentiating Service—Delivering an Elevated Experience Speaker TBD

4:30pm – 6:30pm

S16 Patient Coordinator Alums: Overcoming Scheduling Objections

Karen Zupko, President, KarenZupko & Associates. Inc.

FRIDAY, APRIL 21

9:45am - 12:30pm

Can This Practice Be Saved?
Chairs: Herluf Lund, MD and Karen Zupko

2:00pm - 6:30pm

101/201 Re-Designing Your Aesthetic Practice—How to Get Beyond Today

Co-Chairs: Mark Jewell, MD and

Robert Singer, MD

Presenters: Stephanie Attenberg,

Michael Edwards, MD, Mary Lind Jewell, RPT,

Tom Seery and Verne Weisberg, MD

102/202 Cosmetic Medicine

Z. Paul Lorenc, MD and Jeffrey Kenkel, MD

2:00pm - 4:00pm

109 Tax Reduction for Aesthetic Practices: Best Ideas in 2023

David Mandell

NEW 110 So, You Want to Sell Your Practice? How to Plan Your Exit Strategy Making the Process Seamless

Judy Kozlicki and Karen Zupko

111 Digital Strategy Workshop

Ryan Miller

4:30pm - 6:30pm

209 Ten Steps to Online Marketing Success

210 Doubling In-Office Booking Ratios Ed Syring

211 The Recession is Coming—Will Your Aesthetic Practice Survive?

Sam Peek

SATURDAY, APRIL 22

9:45am - 12:00pm

Creating Magic and Millions in Your Business! A Roadmap to Creating a Successful Plastic Surgery and Medical Spa Business Chairs: Bradley Calobrace, MD and

Nickoli Neville

2:00pm - 4:00pm

309 Relationship Marketing: What It Means and How to Put It in Action

Karen Zupko, President, Karen Zupko & Associates, Inc.

NEW 310 Legal Bootcamp for Plastic Surgeons—The Truth, The Whole Truth and Nothing But the Truth

Alex Thiersch

311 New Advances in Hair Restoration
Alfonso Barrera, MD, Richard Chaffoo, MD, and Carlos Uebel, MD

4:30pm – 6:30pm

409 Staff: Your Biggest Expense or Your Biggest Asset?

Judy Kozlicki and Karen Zupko

SUNDAY, APRIL 23

9:45am - 12:45pm

Pearls and Pitfalls of Starting a Solo Private Practice: From the Perspective of Surgeons, Spouses, and Managers

Chair: Amy Anderson

10:30am - 12:30pm

505 Hot Devices in 2023

Lawrence Bass, MD, Barry DiBernardo, MD and Jason Pozner, MD

506 Opioid-Free: A Better Way to Recover Lawrence Iteld, MD

507 Planning, Opening and Operating Your Own Ambulatory Surgery Suite

Troy Pittman, MD and Jennifer Baxter, MD

508 Successful Principles for Non-Surgical Services: Fast Track Your ROI

Marie Oleser

NEW 509 Basics of Cyber Security Izhak Musli

2:30pm - 4:30pm

606 50 Pearls for Primed Practice Performance

Luis Rios, Jr., MD and Douglas Steinbrech, MD

607 Maximize Your Revenue: How Knowing the Two Most Important KPIs Can Give You a Leg Up

Terri Ross and Izhak Musli



Calling all Members!

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methodology used in pre and post op
care to improve patient progress and
wound-healing results.

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International Memorandum of Understanding (MOU) Update

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

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

ORGANIZATIONS WITH SIGNED MOUS

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

ORGANIZATIONS WITH ANTICIPATED (PENDING) MOUS

 Mexican Association of Plastic, Aesthetic and Reconstructive Surgery —AMCPER



Drs. Brad Calobrace, Bertha Torres Gómez (AMCPER Vice President), Arturo Ramírez-Montañana (AMCPER President), and Jamil Ahmad.



Dr. Walden along side Dr. Arturo Ramírez-Montañana at the Texas Society of Plastic Surgeons Annual Meeting.















Drs. Patrick Malluci and Jamil Ahmad celebrate the signing of the BAAPS MOU!

The Aesthetic Society 2023–2024 Members to Vote on Slate of Candidates



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



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

President-Elect

Current Aesthetic Society/ASERF Committee Work: The Aesthetic Society Executive Committee, Conflict of Interest Committee, Finance & Investment Committee, Industry Policy Committee, Breast Emergency Response Workgroup (Co-Chair), International Fellowship Program, Program Committee, Inclusion & Diversity Committee, Women Aesthetic Surgeons Committee, The Global Alliance for Women Leaders in Aesthetic Plastic Surgery, and

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

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

ABPS Certification: 1999

Executive Search Task Force



PRESIDENT-ELECT (1 year term) Kiya Movassaghi, MD, DMD, FACS

Private Practice; Clinical Assistant Professor of Plastic Surgery, Oregon Health & Science University

Current Board Position: Vice President Current Aesthetic Society/ASERF Committee

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

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

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

ABPS Certification: 2003



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

Current Aesthetic Society /ASERF Committee Work: The Aesthetic Society Executive Committee, Industry Support Committee (Chair), Conflict of Interest Committee, Industry Policy Committee, Finance & Investment Committee, Website Committee, Limitless Leaders Steering Committee, The Global Alliance for Women Leaders in Aesthetic Plastic Surgery, and Executive Search Task Force

Treasurer

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

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

ABPS Certification: 2001



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

Program in Aesthetic Plastic Surgery, University of Toronto

Current Board Position: Secretary

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

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

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

Royal College of Physicians and Surgeons: 2010



SECRETARY (1 year term) Nolan S. Karp, MD New York, NY Vice Chair of Clinical Operations, Hansjörg Wyss Department of Plastic Surgery,

Professor of Plastic Surgery, NYU School of Medicine, Chief of the Plastic Surgery Service, Tisch Hospital

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

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

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

ABPS Certification: 1994

MEMBERS-AT-LARGE

(3 year terms)



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

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

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

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

ABPS Certification: 2018

MEMBERS-AT-LARGE

(3-year terms)

Continued from Page 32



Douglas S. Steinbrech, MD New York, NY Private Practice Alpha Male Plastic Surgery NY/LA/Chicago Current Board Position: Member-at-Large

Current Aesthetic Society/ASERF Committee Work: Education Commission (Vice Commissioner), Industry Exhibits Committee, Program Committee (Vice Chair), and Innovative Procedures Committee

National Affiliations: The Aesthetic Society, ABPS, ASPS, ACS, FACS, Joint Commission, AMA, ABMS, AECEP, NESPS, NYRSPS

Training: NYU General Surgery, NYU Institute of Reconstructive Plastic Surgery

ABPS Certification: 2006



K. Kye Higdon, MD
Nashville, TN
Private Practice
The Aesthetic
Society/ASERF Committee
Work: Communications
Commissioner, Finance &
Investment Committee,

Residents & Fellows Forum Workgroup, *ASJ* Editorial Board, *ASJ Open Forum* Editorial Board, and Executive Search Task Force

National Affiliations: The Aesthetic Society, ASERF, AAPS, ASPS, Southeastern SPRS, ACAPS, AMA, TNSPS, JB Lynch Society

Training: University of Alabama, Medical School at University of MS, University of TN, Vanderbilt University Medical Center

ABPS Certification: 2012



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

APPLICATION REVIEW COMMITTEE (3-year terms)



Alvin B. Cohn, MD Vestavia Hills, AL (Southeast)



M. Scott Haydon, MDWest Lake Hills, TX
(South Central)



Tracy M. Pfeifer, MDNew York, NY
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Julie J. Khanna, MD Oakville, ON (Canada)

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Erin M. Kennedy, MDDubuque, IA
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Frank R. Lista, MD Mississauga, ON (Canada)

Those continuing in positions: MEMBERS-AT-LARGE



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



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



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



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



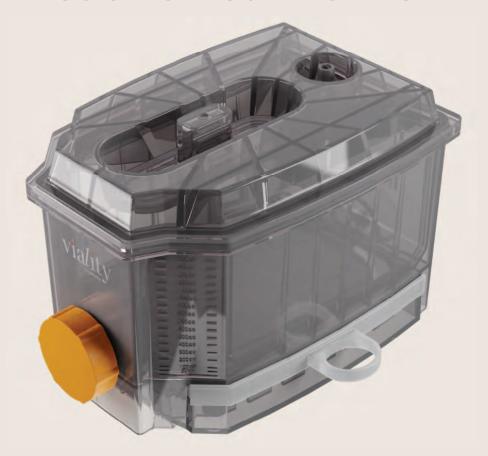
Lorne K. Rosenfield, MD (until 2025)
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REFERENCES

- 1. An Y, Panayi AC, Mi B, Fu S, Orgill DP. Comparative Analysis of Two Automated Fat-processing Systems. Plast Reconstr Surg Glob Open. 2020;8(1):e2587. Published 2020 Jan 17. doi:10.1097/GOX.0000000000002587
- 2. Medina MA 3rd, Nguyen JT, Kirkham JC, Lee JH, McCormack MC, Randolph MA, Austen WG Jr. Polymer therapy: a novel treatment to improve fat graft viability. Plast Reconstr Surg. 2011 Jun;127(6):2270-2282. doi: 10.1097/PRS.0b013e3182139fc1. PMID: 21617461.lmages and selections reprinted with permission.









OFFICIAL BUSINESS

Patient Safety Advisory: Fentanyl

Jennifer Walden, MD, FACS, President—The Aesthetic Society
Lina Triana, MD, President—International Society of Aesthetic Plastic Surgery

This patient safety advisory was developed by: Mark Jewell, MD, member of ISAPS and The Aesthetic Society and ISAPS Patient Safety Committee; Hillary Jewell, MIPH, RN NP; Robert Singer, MD, member of ISAPS and The Aesthetic Society; Montserrat Fontbona, MD (ISAPS Patient Safety Committee Chair); Lina Triana, MD (ISAPS President); and Jennifer Walden, MD (The Aesthetic Society President) provided editorial assistance.

The authors declare that they have no conflict of interest regarding the writing of this patient safety advisory and did not receive funding.

COUNTERFEIT PRESCRIPTION MEDICATIONS THAT CONTAIN FENTANYL AND PATIENT SAFETY

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

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

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

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

Two milligrams of pure fentanyl fits on the point of a pencil. If ingested, this is a lethal dose.



Two milligrams of pure fentanyl fits on the point of a pencil. If ingested, this is a lethal dose. Photo Credit US DEA

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

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

Fentanyl overdoses are now the leading cause of death for individuals in the age range of 10 to 19 years in the United States. Earlier US Center for Disease Control (US CDC)

Continued on Page 37



Legitimate Oxycodone 30mg

DEA Photo

Counterfeit Oxycodone 30mg

Photo Credit US DEA: justice.gov/usao-id/pr/acting-us-attorney-warns-increasing-danger-counterfeit-prescription-opioids-containing





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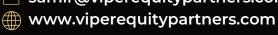
Contact Samir Qureshi



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samir@viperequitypartners.com















Patient Safety Advisory: Fentanyl

Continued from Page 35

reports from 2019–2021 revealed approximately 90% of overdose deaths involved opioids, and 83.9% involved illicitly manufactured fentanyl. Counterfeit pill evidence was present in 24.5% of overdose deaths. Last year there were 133 deaths of children younger than 3 who ingested fentanyl accidentally in the United States of America. ^{5,6} Fentanyl patches have contributed to child overdoses in Australia. ⁷

Educational initiatives for children, adolescents, and college students have tremendous value to help them understand the extreme risk of accidental fentanyl overdose and death.⁸

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

PHARMACOLOGY BACKGROUND OF FENTANYL

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

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

Initiatives aimed at regulating the flow of fentanyl precursor chemicals and fentanyl from China has not been successful. China halted cooperation with the United States on combatting drug trafficking in 2022. Hopefully in the future the United States can delink counternarcotics policy through diplomatic channels with the Chinese government and its enforcement from the U.S.-China global rivalry and overall state of mutual relations.^{19,20}

affinity for opioid receptors 30 times greater than that of fentanyl. 12

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

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

NALOXONE

Naloxone is useful in treating both acute opioid overdose and respiratory or mental depression due to opioids. It is administered intravenously, intramuscularly, or via nasal spray. Depending on the venue, naloxone is available without a prescription as part of harm reduction initiatives in the USA and worldwide. Naloxone acts rapidly to reverse

Earlier US Center for Disease Control (US CDC) reports from 2019–2021 revealed approximately 90% of overdose deaths involved opioids, and 83.9% involved illicitly manufactured fentanyl. Counterfeit pill evidence was present in 24.5% of overdose deaths. Last year there were 133 deaths of children younger than 3 who ingested fentanyl accidentally in

opioid overdosage. Other adjunctive measures such as rescue breathing and cardiopulmonary resuscitation may be required. Prescribing naloxone should be accompanied by standard education for patients and caregivers that includes preventing, identifying, and responding to an overdose.^{15,16}

REGULATORY STATUS OF SYNTHETIC OPIOIDS

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

FENTANYL GEOPOLITICAL ISSUES

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

Initiatives aimed at regulating the flow of fentanyl precursor chemicals and fentanyl from China has not been successful. China halted cooperation with the United States on combatting drug trafficking in 2022. Hopefully

Continued on Page 39

the United States of America. 5,6

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Patient Safety Advisory: Fentanyl

Continued from Page 37

in the future the United States can delink counternarcotics policy through diplomatic channels with the Chinese government and its enforcement from the U.S.-China global rivalry and overall state of mutual relations.^{19,20}

There is significant variation in the prevalence of illicitly manufactured opioids globally. Fentanyl is being used by individuals addicted to opioids worldwide. Heroin, methamphetamine, and cocaine often contain fentanyl, resulting in overdose and deaths. Some geographical areas tend to have less prevalence of counterfeit drugs that contain fentanyl or ways for individuals to acquire pain pills and mood-altering medications in the street or over the internet. Other locations such as the United States of America has the greatest incidence of illicit fentanyl prevalence, including fake prescription pills.

According to a press release by the American Society of Anesthesiologists (October 2021), approximately 20% of patients who are opioid-naïve before surgery continue to use opioids three months after surgery. This includes all surgical specialties. For some patients, surgery including plastic surgery may create an unintended gateway to long-term opioid use. While the CDC notes synthetic opioids (primarily illicitly manufactured fentanyl) appear to be the main reason for the increase in mortality statistics in the United States, persistent opioid use after surgery can play a role in producing overdose and death.²¹

Surgeons should be alert to persistent opioid use and utilize alternative non-opioid pain management protocols This strategy appears effective in helping patients recover from body contouring procedures (abdominoplasty) without reliance on opioids.²²

The United States Drug Enforcement Administration has a web page with a QR barcode in the pdf document (page 2) that patients can see actual examples of fake pills containing fentanyl along side of legitimate pills. Patients can access this useful information by scanning the barcode with their smart phone. The page with the QR barcode can be printed and placed in exam rooms and reception areas for patients to use.²³

According to a press release by the American Society of Anesthesiologists (October 2021), approximately 20% of patients who are opioid-naïve before surgery continue to use opioids three months after surgery. This includes all surgical specialties. For some patients, surgery including plastic surgery may create an unintended gateway to long-term opioid use.

PATIENT SAFETY COMMUNICATIONS TO MITIGATE RISK OF FENTANYL OVERDOSE AND DEATH

- We believe that patient safety education concerning the fentanyl crisis is needed.
 One suggestion would consist of patient education material on your web site and in pre-surgical materials regarding the risks from fake medications that contain fentanyl.
- Instruct patients to only take prescription medications that are prescribed by a physician, physician's assistant or nurse practitioner. If prescription refills are needed, have this arranged ahead of time and never purchase them on the street, from another person, or over the internet without a prescription. This applies to all types of medications.
- Educate patients to keep all prescription medications in a safe place to prevent children from accidentally taking them or sharing with friends.
- Educate patients regarding how to take prescribed opioid pain medications for an acute event such as an injury or surgery. Patients are advised to destroy unused opioid pain pills when the need to manage pain can be accomplished with non-opioid medications such as ibuprofen or acetaminophen.
- Never trust your own eyes to determine if a pill is legitimate. The only safe medications are ones prescribed by a trusted medical professional and dispensed by a licensed pharmacist.
- Never ask for medication from another person. There is no way to verify if it is safe.
- During the COVID pandemic, many patients have developed mental health issues such as anxiety, sleep disorders, and depression.
 They are advised to seek medical care from their personal physician. Patients should

- never self-medicate with mood-altering drugs that are purchased online without a physician, physician's assistant, or nurse practitioner's prescription or obtained from another person.
- Plastic surgeons are not trained to treat mental health issues such as depression, anxiety, or sleep disorders. Be forthright with patients requesting prescriptions to treat mental health issues and refer them back to their personal physician for care.
- There are many treatment options for patients who are addicted to opioids including the drug suboxone and drug addiction rehabilitation programs.
- Fentanyl test strips have some benefits but may not be widely available.²⁴

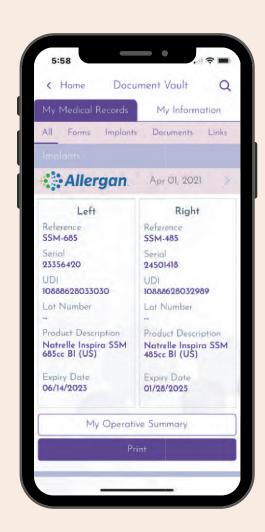
PHYSICIAN—NURSING—PATIENT EDUCATION RESOURCES

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- 5. bit.ly/3YhbZLi
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- 21. bit.ly/3XTU1hT
- 22. bit.ly/3WXrfMe
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We're Not Your Typical Registry.

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



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

Scan the QR code to learn more or register.

Account activation typically requires 1–2 business days.
Available to physicians in the US.





Global Alliance for Women Leaders in Aesthetic Plastic Surgery— Paths to Leadership and Paying it Forward

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

The fourth panel, to be held live during The Aesthetic Meeting 2023, will be presented, and recorded in conjunction with our annual Women Aesthetic Surgeons' Symposium. As



this will be during the final days of Dr. Jennifer Walden serving as President of The Aesthetic Society, it would give her great joy to have all participate. She will moderate a discussion including surgeons and industry professionals focusing on our stories, how each leader got into and ascended in the field, and the how/

why it is important to implement the "pay it forward" type of mentorship through individual relationships and programs of companies and associations. This panel will be entitled, "Paths to Leadership and Paying it Forward."

All are welcome to participate! Registration for optional course S6 required for a fee.



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Publish your work in the premier open access journal in plastic surgery.

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SOCIETY NEWS





INTERNATIONAL COLLABORATIONS

Our team spent a record number of days on the road last year attending conferences and engaging with international colleagues and affiliate partners at various conferences worldwide. We'd like to thank The British Association of Aesthetic Plastic Surgeons, The Rhinoplasty Society, and The Canadian Society for Aesthetic Plastic Surgery, our partners for whom ASJ is their official Englishlanguage publication. We also thank our Premier International Partners: Dutch Society for Aesthetic Plastic Surgery, Norwegian Society for Aesthetic Plastic Surgery, Royal Belgian Society for Plastic Surgery, Spanish Association of Aesthetic Plastic Surgery.

ASJ ON THE ROAD

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

ASJ and ASJ Open Forum

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



Dr. Caroline Glicksman, Dr. Bill Adams, Dermatologist Christine Romine, MD and Dr. Craig Layt from Australia at the Beauty Through Science meeting.



Dr. Caroline Glicksman and Dr. Deniz Sarhaddi in NYC at the Beauty Through Science meeting.



Phaedra Cress and Quinn Mentone of BD/Galatea Surgical in Times Square, NYC, on the way to dinner.



Dr. Mindy Haws lectured at the BTS meeting and here, meets up with Phaedra Cress for a quick photo op.



Female vendors display a monochromatic vibe in NYC at the BTS meeting.



There's nothing like a steak dinner with friends in NYC during the holidays. Pictured here are Dr. Dan Gould, Dr. Miguel Medina, Quinn Mentone (BD/Galatea Surgical), Blaine Hamilton (Sientra), Trent Newell (BD/Galatea Surgical), Vendor Hunter Fairchild (Ideal Implant), Phaedra Cress, and Dr. Adrienne Laszlo from Hungary.

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Ready for regular alerts about ASJ and ASJ Open Forum content? Sign up here for e-alerts and don't miss a single article: tinyurl.com/mr2rhbaa

Celebrating Our Official Journal Partners and Premier International Partners







On behalf of Editor in Chief, Dr. Foad Nahai, Associate Editor, Dr. Jeffrey Kenkel, and the entire editorial team, we'd like to take this opportunity to thank our partner societies for which ASJ is the official journal of their society.

As seen on the cover of every issue of ASJ, this includes the British Association of Aesthetic Plastic Surgeons (BAAPS), the Canadian Society for Aesthetic Plastic Surgery (CSAPS), and The Rhinoplasty Society. We encourage all members of The Aesthetic Society to engage with these societies, read articles published by their members, and follow them on social media to learn more.

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

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

Global Impact Letter of Appreciation to Dr. Foad Nahai







ASJ Chinese Edition from left to right: Issue 1 (2020.08) Issue 2 (2021.12) Issue 3 (2022.07)

Dear Dr. Foad Nahai

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

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

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

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

choice. Through this platform, Chinese plastic surgeons have been able to get to know you and *ASJ* better, and we have been able to communicate freely and without barriers internationally. Once again, thank you for your support for each of our congresses.

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

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

Yours Sincerely, Haiyan Cui January 12, 2023, China



An Invited Lunch during IMCAS Congress in Paris in 2020





Kind selfie at IMCAS Congress in Paris in 2020.



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



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



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



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



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

SOCIETY NEWS

International Collaborations in France and Beyond

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



Dr. Foad Nahai, *ASJ* Editor in Chief and Phaedra Cress in the booth.



Sue Dykema, Dr. Gene Gerald S. Tiongco, (PAPRAS) and Phaedra Cress met to discuss collaborations during the meeting and again for a photo at the IMCAS Gala.



The 2nd Annual ASJ and ASJ Open Forum International Editorial Board meeting in Paris during IMCAS.

Seated: Drs. Foad Nahai, Ami Kalaaji, Katarina Andjelkov, and Diane Duncan. Standing: Dr. Maurice Nahabedian, Terry Materese, Phaedra Cress, Dr. Mark Albert, and Dr. Sebastien Garson.



Phaedra Cress, SOFCEP President Dr. Catherine Bergeret-Galley, and Sue Dykema pose with performers at the IMCAS Gala.

SOCIETY NEWS



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



Sue Dykema, Dr.
Sebastian Garson
(IMCAS; ASJ
Editorial Board
member), and
Phaedra Cress met
in Paris to discuss
collaborations
between The
Aesthetic Society
and IMCAS.



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



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



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

AESTHETIC ONE EXCEEDS

25,000

REGISTERED IMPLANTS

590+

physicans saving time by ditching papers forms and faxes 25K+

implants registered with manufactures resulting invaluable research data for the FDA

14K+

patients given
permanent access
to their implant
details



A Look Back at Aesthetic One

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

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

-Patricia McGuire, MD

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

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

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

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

RECENT AESTHETIC ONE FEATURE ENHANCEMENTS

Add Fill Amounts for Saline Implants

You can now track the fill amount while registering saline implants. These details will be recorded with the op summary and available in your implant library.

Track Previously Registered Implants

Add past patients to their digital implant library by scanning or manually inputting data from the stickers saved within their practice's registered implant binder.

As a result, patients will receive a digital implant ID card—giving them secure and permanent access to their implant information.

Enhance Workflows for Your Group Practice

assign a single staff member to register implants for multiple physicians - the perfect solution for a busy group practice.

Comply with FDA Requirement

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



Get Started Today!

Physicians can sign up for Aesthetic One at www.aestheticone.com/register

Account activation generally takes 1–2 business days.

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

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



Aesthetic-connect

Have You Joined the Conversation?

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

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



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



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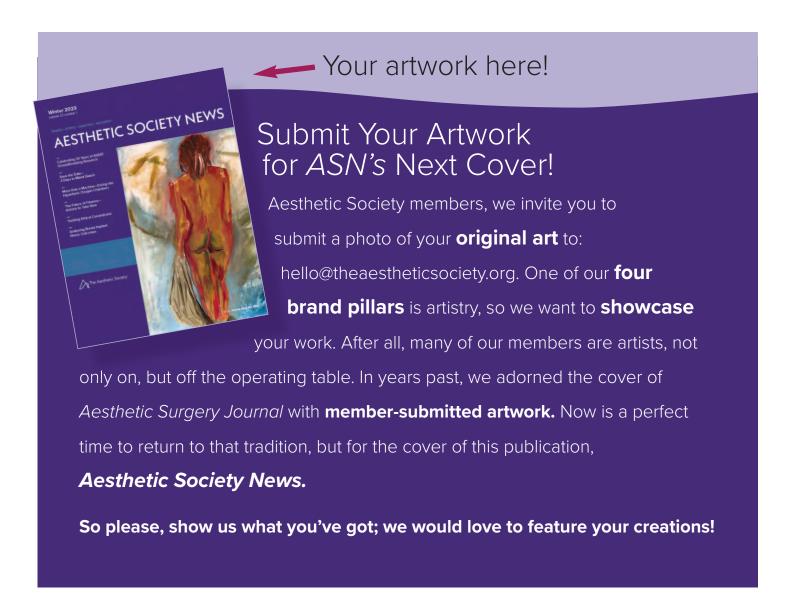


Have You Mistakenly Unsubscribed from Aesthetic Society Emails?

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!



The Aesthetic Society's Industry Partnership Program

















NEWBEAUTY



Founding Premier Partner: Sientra

























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.

Leadership Training—Our 9th Graduating Class!

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

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

patients.

Special thanks to Allergan Aesthetics,

of the program. The opportunity to build

personal relationships with our industry

partners strengthens our ability to innovate

and provide exceptional care to our aesthetic

Galderma, and MTF Biologics for their support

"A fantastic day.

Really focused on topics that will allow me to grow as a leader."



BACK: Sal Pacella, MD; Holly Wall, MD; Brian Leuthner (MTF); Kelly Heath (Galderma); Brad Calobrace, MD; Nolan Karp, MD; Emily Kirby, MD; Oni Garcia, MD; Steve Montante, MD; Emily Hartmann, MD,; Jay Shah (Allergan)

MIDDLE: Trent Douglas, MD; Usha Rajagopal, MD; Karen Horton, MD; Ashley Steinberg, MD; Regina Fearmonti, MD

FRONT: Kye Higdon, MD; and Carlos Cutini Cingozoglu, MD



Media Notes and Quotes

HARPER'S BAZAAR

Injectables of the Future

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

ABC NEWS

Buttocks enhancement procedures can cost thousands, health issues

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

THE ZOE REPORT

'Peel Season' Is Upon Us — Here's How To Find The Right One For Your Skin

Excerpt: Why all the fuss over chemical peels, you ask? Well, as it happens, these skinshedding treatments are especially buzzy due to their ability to do quite a bit of heavy lifting. In fact, the number of "skin treatments," including chemical peels, performed between 2020 and 2021 increased by 37% and remained the third most popular, non-surgical skin procedure category according to annual reporting by The Aesthetic Society.



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.

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.



Real Strength Starts from Within.TM
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 GalaFLEXTM surgical scaffolds,
constructed from the biologically derived
P4HBTM polymer, provides BD with an
innovative platform to transfer soft tissue
repair, reconstruction and regeneration in
plastic and reconstructive 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 is the pure-play dermatology category leader, present in approximately 90 countries. We deliver an innovative, sciencebased portfolio of premium flagship brands and services that span the full spectrum of the fast-growing dermatology market through Injectable Aesthetics, Dermo-Cosmetics and Therapeutic Dermatology. Since our foundation in 1981, we have dedicated our focus and passion to the human body's largest organ—the skin—meeting individual consumer and patient needs with superior outcomes in partnership with healthcare professionals. Because we understand that the skin we're in shapes our lives, we are advancing dermatology for every skin story.



For more than 30 years, Mentor has been trusted and respected by surgeons and their patients, with over eight million women worldwide choosing Mentor® Breast Implants for their breast augmentation and breast reconstruction journeys. Introducing the latest innovation in the MENTOR® MemoryGel® Breast Implant Portfolio! MENTOR® MemoryGel BOOST™ Breast Implant provides the natural feel patients desire with increased form stability to shape the breast.

MER7 AESTHETICS"

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



New Products to Check Out!

Special Offers for Aesthetic Society Members



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



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 Acelluar Dermal Matrix, Renuva Allograft Adipose Matrix, LipoGrafter 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.

NEWBEAUTY

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

With almost 20 years as the leaders in the aesthetics industry, NewBeauty provides board-certified plastic surgeons with the ability to reach their ideal, treatment-seeking patients through a proven 360-degree marketing platform of print, digital, social media and press opportunities. Visit newbeauty.com.

sientra.

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

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

Thank you Industry Partners!

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

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

A special thank you to Founding Premier Partner, Sientra.

INDUSTRY PARTNERS





Applied Medico-Legal Solutions Risk Retention Group, Inc (AMS RRG), a medical liability company, has recently been assigned a rating of A- (Excellent) by AM Best. AMS RRG's financial strength, operations, business profile and risk management all played significant roles in the rating. For more information about AMS RRG please contact Christopher Edge 609-737-1154 ext 301.



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

*Subject to credit approval. Minimum monthly payments required.



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surgeons. Developed in 2003, to help patents
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converts consults into clients and is an
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competitors.

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

New Alliance Partner



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

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

New Alliance Partner



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

MYELLEVATE[®]

by CYNO\URE®

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

New Alliance Partner



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

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!

Patient Fí.

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

REVANCE AESTHETICS.

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

Senté

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

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

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

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

x symplast.

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

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

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

Contact



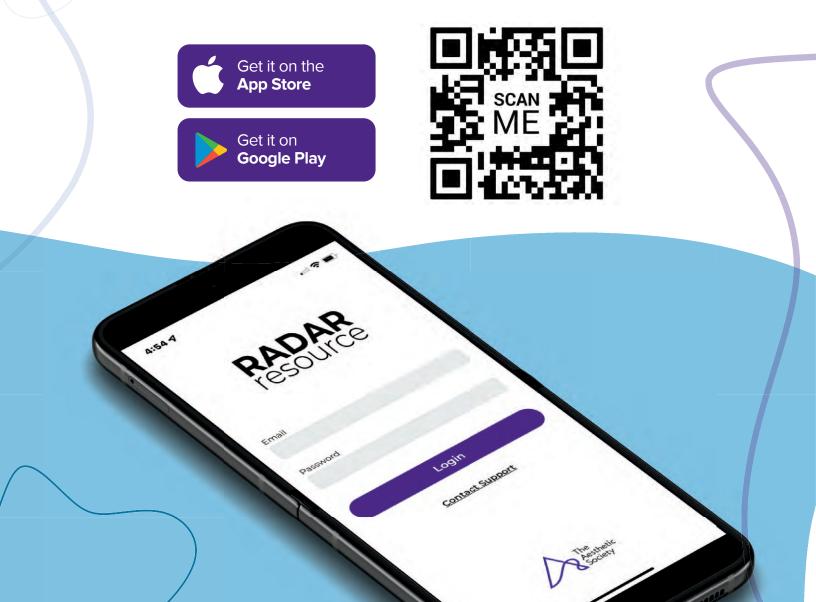
New Products to Check Out!

Special Offers for
Aesthetic Society Members

Introducing the NEW RADAR

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

Download the iOS or Android app(s) by searching "RADAR Resource" in the store.



Industry Partners Support The Aesthetic Society's Mission

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

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

We'd like to thank and acknowledge Founding Premier Partner, Sientra and Alliance Industry Partners MyEllevate by Cynosure and Symplast for their continued support.

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



Founding Premier Partner



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

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

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

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

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

*Data on file

References

- 1. Sientra Fat Grafting Study April 2022
- An Y, Panayi AC, Mi B, Fu S, Orgill DP. Comparative Analysis of Two Automated Fat-processing Systems. Plast Reconstr Surg Glob Open. 2020;8(1):e2587. Published 2020 Jan 17. doi:10.1097/GOX.00000000000002587
- 3. Data on file. In-vivo comparison of gluteal augmentation, P188 vs saline wash. P188 cohort achieved average retention of 71% of volume at 1 year vs 40% for saline wash.



MYELLEVATE®

A Breakthrough Approach to Enhancing the Jawline with MyEllevate

Dr. Adam Rubinstein, MD, FACS

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

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

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

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

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

Continued on Page 61

ASSI®





Designed By: David A. Hidalgo, M.D. **Clinical Professor of Surgery** Cornell University Medical College New York, NY

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SUBMENTAL FACE LIFT RETRACTOR

Ideal Exposure For:

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Industry Partners Support The Aesthetic Society's Mission

MyEllevate by Cynosure Continued from Page 59

improve their neck. The choice used to be, have a facelift or wait to have a facelift. With MyEllevate, I have a solution to offer those "in-between" patients. I started doing MyEllevate procedures years ago, and never looked back. The improvements are impressive. Doing the procedure is straight forward. It's a no-brainer for anyone who sees a lot of patients for facial rejuvenation," Rubinstein says of MyEllevate.

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

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

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

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

an option for my patients that achieves a significant improvement without having to do a facelift or neck lift."

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

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

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

PRD-0301



Symplast is the #1 Mobile EHR & Practice Management Solution for the Medical Aesthetics Industry

Symplast is proud to announce the renewed support of The Aesthetic Society, and the industry, for the 3rd year in a row as Alliance Industry Partner. We collaborate with a strong community of experts, innovators, and pioneers to move the industry forward.

Symplast delivers the 21st century solution that the aesthetics industry has been waiting for! Not just another EHR, Symplast is a mobile and comprehensive solution that gives practices secure access to your practice anywhere, at any time, on any device.

Focused on Patient Care and Practice Growth, Symplast is one complete platform that manages your entire business from check-in to charting, scheduling to marketing, billing to online patient booking, scheduling and practice flow room manager, gift cards, loyalty and memberships, and so much more. Improve your practice by streamlining daily workflows and automating tasks. Upgrade patient care services with features like HIPAA-secure communication, Telehealth, e-Prescribing, digital intake forms, intuitive practice flow, inventory management, and more.

Are you ready to Elevate your Patient Experience with Symplast and help increase productivity and efficiency as your business grows? Join the 4,400+ other Symplast users who are changing the face of their patient care and improving their offerings.

What Symplast users are saying:

"Symplast has provided my team and me with personalized support as they recently helped us transition from NexTech. They are responsive to an ever-changing market and are committed to my practice's success on the platform." Dr. Jennifer Walden of Walden Cosmetic Surgery & Laser Center

"With Symplast, I don't have to worry about paper charts and I'm able to carry my entire practice with me at all times. Our practice has never been more streamlined and efficient, we were all able to learn one software with one platform that allows every staff member to do their job better and increases efficiency. Something that really makes a difference with Symplast is that the communication is always open so if my patient has a question in the middle of the night or after office hours, we can still communicate through the app."

Dr. Renato Saltz of Saltz Plastic Surgery and Spa Victoria

There is a special offer for active members of The Aesthetic Society, claim it at www.symplast.com/tas2023

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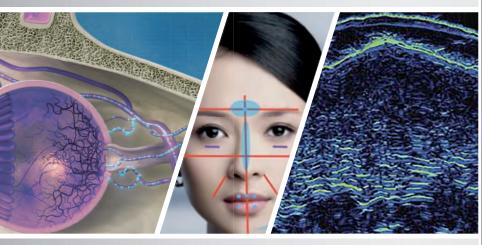
Find out more: http://bit.ly/ASJOFGlobalAssistance

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OPEN ACCESS



AESTHETIC SURGERY JOURNAL

OPEN FORUM

Aesthetic Surgery Journol Open Forum is an open access peer-reviewed international journal focusing on the latest developments and practical, clinical advances in aesthetic surgery and cosmetic treatments.

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Application deadlines are January 5 and July 1

Apply for Active Membership

Education

Expertise

Beauty

Next Application Deadline is July 1

Artistry

Membership FAQs

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

HOW MANY SPONSORS WILL I NEED?

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

WHO MAY SPONSOR ME FOR MEMBERSHIP?

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

WHAT ARE THE DEADLINES FOR SUBMITTING A MEMBERSHIP APPLICATION?

The two deadlines are January 5 and July 1.

HOW LONG WILL IT TAKE FOR MY APPLICATION TO BE REVIEWED?

Applicants who submit materials for the July 1 deadline are eligible for election at the end of the year. Applications submitted by the January 5 deadline are eligible for election in the Spring.

WHAT ARE THE FEES AND WHEN SHOULD THEY BE PAID?

There is a \$250 Application Fee that must be paid along with your completed application. Once voted in, you will be required to pay your annual membership dues:

- Membership dues for Active Members are \$1.275
- Membership dues for International Active Members are \$545

For information on the full application process, visit the Medical Professionals section of theaestheticsociety.org/membership.

For additional information/questions, please contact our Senior Membership Manager, Marissa Simpson via email membership@theaestheticsociety.org or at 562.799.2356.

DO I HAVE TO BE A MEMBER OF ASPS TO BE A MEMBER OF THE AESTHETIC SOCIETY?

No. Membership in ASPS is NOT required to be an Aesthetic Society member.

Membership Myth-Busters

Myth: One must attend an Aesthetic Society meeting to become a member.

Fact: This used to be the case. However, in order to streamline the application process, this requirement was recently removed!

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

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

Myth: One must document a minimum count of aesthetic cases to apply.

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

ONLINE APPLICATION

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

ASERF Mission

Identify and pursue

those issues relevant to

advancing the safety

& effectiveness of

aesthetic medicine

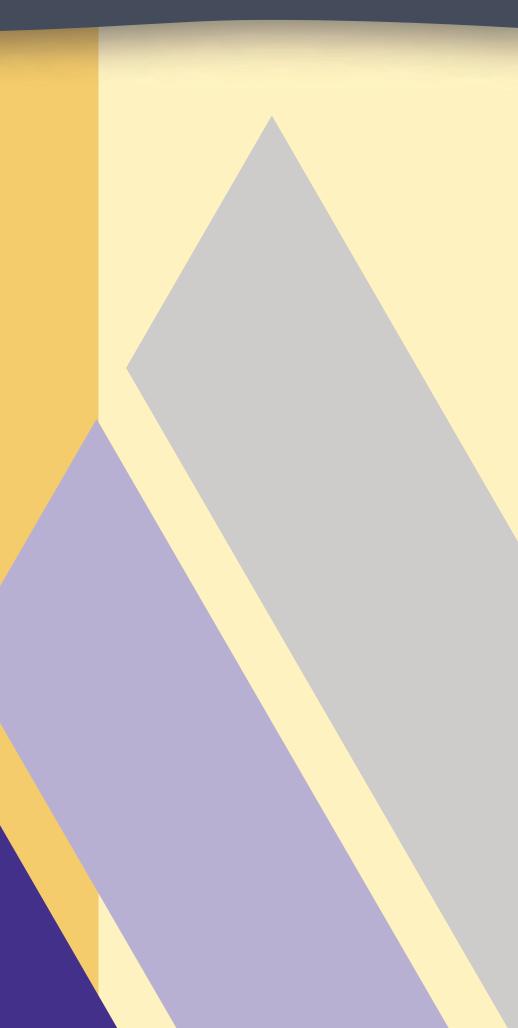
through independent

unbiased, directed

research and

groundbreaking

education.



FOUNDATION NEWS



Update on ASERF

By Bruce W. Van Natta, MD

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

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

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

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

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

- Register for ASERF's Premier Global Hot Topics (course S12 on Thursday, April 20) Listen to your peers evaluate techniques currently in the patient spotlight and learn how to separate hype from reality.
- Attend ASERF's Spotlight on Research (course S9 on Thursday, April 20) Investigators provide updates on their ASERF-funded research studies—lunch included!
- Celebrate with ASERF—On Saturday, April 22, at 4:00PM EDT, ASERF Donors are invited to sip some champagne in the ASERF booth to celebrate The Foundation's 30th Anniversary
- Visit the ASERF booth to check out the new website
- Stop by the ASERF lounge and write your research ideas on our wall
- Raise money for ASERF by having your badge scanned by companies participating in "Raise Cash for Research"
- BID on items in this year's Silent Auction (see pages 11 and 13)

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

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

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

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

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

THANK YOU IC SURGICAL, INC. AND DR. PATRICIA MCGUIRE!

IC Surgical, Inc. has made a \$4,000 unrestricted donation to ASERF.
As a member of their Medical
Advisory Board, Dr. Patricia McGuire requested that in lieu of receiving an honorarium, the money go to ASERF. The ASERF Board is incredibly grateful for the generosity of Dr. McGuire and



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



James M. Stuzin, MD



John B. Tebbetts, MD

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

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

PREVIOUS HONOREES

2022 Sherrell J. Aston, MD
2019 Robert Singer, MD
2018 Scott Spear, MD (posthumous)
2017 Thomas Baker, MD and
Simon Fredricks, MD
2016 Gilbert P. Gradinger, MD
2015 Foad Nahai, MD

2014 Luis O. Vasconez, MD2013 Fritz E. Barton, Jr., MD2010 Thomas D. Rees, MD

ASERF 2023–2024 Members To Vote on Slate of Candidates



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



PRESIDENT
(automatic from
President-Elect)
Caroline A.
Glicksman, MD, MSJ
Sea Girt, NJ
Private Practice; Assistant

Clinical Professor of Surgery, Hackensack Meridian School of Medicine

Current ASERF Board Position: President-Elect Current Aesthetic Society/ASERF Committee Work: ASERF Executive Committee, Traveling Professor Program, ASJ Editorial Board, ASJ Open Forum Editorial Board, ASERF Finance & Investment Task Force, Informed Consent Task Force (Co-Chair), ASERF Scientific Research Committee (Co-Chair), Aesthetic One Committee, RADAR Resource Editorial

Women Leaders in Aesthetic Plastic Surgery **National Affiliations:** The Aesthetic Society, ASERF, ASPS, ISAPS, AAAASF

Committee, and The Global Alliance for

Training: Mount Sinai Hospital: NY General Surgery; Plastic Surgery: New York Hospital, Cornell Medical Center, Memorial Sloan Kettering Cancer Center, Aesthetic Fellowship Massachusetts General Hospital, and Newton Wellesley Hospital

ABPS Certification: 1994



PRESIDENT-ELECT

(1 year term)

Onelio Garcia Jr., MD, FACS

Miami, FL

Private Practice; Vol. A. Professor. Division of Plastic Surgery, University of Miami,

Miller School of Medicine

Current ASERF Board Position: Vice President Current Aesthetic Society/ASERF Committee Work: ASERF Executive Committee, Application Review Committee,

Committee, Application Review Committee, Gluteal Fat Grafting Task Force, ASERF Scientific Research Committee, ASERF Membership Committee, and ASERF Finance & Investment Task Force

National Affiliations: The Aesthetic Society, ASERF, ASPS, ISAPS, SESPRS, and FSPS

Training: University Hospital, Jacksonville, University of Florida

ABPS Certification: 1986



VICE PRESIDENT
(1 year term)

Patricia A. McGuire, MD

St. Louis, MO Private Practice

Current ASERF Board

Position: Treasurer

Current Aesthetic Society/ASERF
Committee Work: ASERF Executive
Committee, Ethics Committee, Bll Task Force,
Informed Consent Task Force, Traveling
Professor Program, ASERF Scientific Research
Committee, ASERF Finance & Investment Task
Force, ASERF Fund Development Committee
(Chair), and The Global Alliance for Women
Leaders in Aesthetic Plastic Surgery

National Affiliations: The Aesthetic Society, ASERF, AMWA, ASPS, and AWS

Training: St. Louis University, University of Missouri, Kansas City; Washington University; St. Louis University

ABPS Certification: 1993



TREASURER
(1 year term)

David A. Sieber, MD

San Francisco, CA

Private Practice

Current ASERF Board
Position: Director
Current Aesthetic Society/ASERF

Committee Work: ASERF Board of Directors, ANN Committee, Aesthetic One Committee, Program Committee, ASERF Scientific Research Committee (Co-Chair), and ASERF Finance & Investment Task Force

National Affiliations: The Aesthetic Society, ASERF

Training: Loyola University Medical Center, University of Minnesota, University of Texas Southwestern

ABPS Certification: 2018

Completing term vacated by Dr. Patricia McGuire



SECRETARY
(2 year term)
Gabriele C.
Miotto, MD
Atlanta, GA

Private Practice; Adjunct Associate Professor of

Plastic and Reconstructive Surgery, Emory University

Current ASERF Board Position: Secretary
Current Aesthetic Society/ASERF
Committee Work: ASERF Executive
Committee, RADAR Resource Editorial
Committee (Editor), ASJ Open Forum Editorial
Board, ASERF Aesthetic Research Community
Task Force (Chair), ASERF Membership
Committee (Chair), ASERF Mollenkopf Breast
Reconstruction Fund Grant Review Committee,
and The Global Alliance for Women Leaders in
Aesthetic Plastic Surgery

National Affiliations: The Aesthetic Society, ASERF, ISAPS, SESPRS, ISAPS Assistant National Secretary

Training: Federal University of Rio Grande do Sul, Emory University School of Medicine, Atlanta, GA; University of Illinois at Urbana, Champaign. IL.

Brazilian Medical Board: 2007

DIRECTORS

(2 year terms)



Camille Cash, MD

Houston, TX
Private Practice
Current Aesthetic
Society/ASERE Board

Society/ASERF Board Position: Aesthetic Society Parliamentarian

Current Aesthetic

Society/ASERF Committee Work: ASERF Externship Program Task Force (Chair), Media Relations Committee, and Inclusion and Diversity Committee

National Affiliations: The Aesthetic Society, ASERF, ASPS

Training: Baylor College of Medicine; St. Joseph Medical Center, Houston, TX

ABPS Certification: 2014

Continued on Page 67

DIRECTORS

Continued from Page 68



Rafael A. Couto, MD San Juan, PR Private Practice Current ASERF Board Position: Director Current Aesthetic Society/ASERF

Committee Work: Program Committee, Young Aesthetic Plastic Surgeons Committee

National Affiliations: The Aesthetic Society, ASERF, ASPS (Candidate), PRSPS, Alpha Omega Alpha Medical Honor Society

Training: Cleveland Clinic Foundation, Aesthetic Society endorsed Aesthetic Surgery Fellowship, University of Texas Southwestern Medical Center

ABPS Certification: 2021



Steven R.
Sigalove, MD
Paradise Valley, AZ
Private Practice
Current Aesthetic
Society/ASERF
Committee Work: ASERF

Scientific Research Committee, Media Relations Committee, Program Committee, and Traveling Professor Program

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

Training: Chicago Medical School, North Chicago, IL, Rush Presbyterian St. Luke's Medical Center, Chicago, IL, The University of Illinois at Chicago

ABPS Certification: 2006



TRUSTEE
(2 year term)
Steven Teitelbaum, MD
Santa Monica, CA



Salvatore J. Pacella, MD (until 2024) San Diego, CA





Thomas G. S. Fiala, MD, MBA (until 2024) Altamonte Springs, FL



David M. Turer, MD (until 2024) Montclair, NJ



Allen Gabriel, MD (until 2024) Vancouver, WA

Thank You ASERF President's Circle Members!

William P. Adams Jr., MD
Sherrell J. Aston, MD
Mark T. Boschert, MD
M. Bradley Calobrace, MD
Sepehr Egrari, MD
Dr. and Mrs. Julio Garcia
Caroline A. Glicksman, MD, MSJ

Daniel A. Hatef, MD
Dr. and Mrs. Jeffrey Kenkel

Dr. and Mrs. Joe Gryskiewicz

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

Who will be next?



Join your colleagues and support aesthetic surgery research and education.

Scan the code above to donate to ASERF today!

Successful research demands the right combination of technology and support.

software platform for aesthetic medicine research. The electronic data capture (EDC) software offers a fully configurable design portal meeting the exact needs of the study, trial, clinician, or end user. Clinical studies and trial deployment through the platform will be more time and



cost-efficient when coupled with the **HIPAA-compliant** mobile applications that are available for **both the study site and the patient.**

Interested in learning more? Reach out to contact@aserf.org

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Supported by:





Established in 1993, ASERF Hits 30-Year Milestone

In the summer of 1992, then-Vice President, Robert Singer, MD, led The Aesthetic Society's strategic planning session which included five areas of unmet needs:

- · Aesthetic surgery research
- · Professional development for office staff
- Educational programs for non-physicians
- Access to information for those interested in plastic surgery as a profession
- Recognition for members who volunteer and donate their time, money, and expertise

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

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

April 20, 1993 (Patriot's Day), with an approved IRS application, Simon Fredricks, MD; Robert Singer, MD; and Bob Stanton,

then Executive Director, outlined the organization's details:

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

Over time, the mission may have changed but the accomplishments are none-the-less impressive:

- \$2,500,000+ invested in aesthetic surgery research
- 250+ research studies funded
- 20+ President's Circle donors (*) (**)
- 1350+ annual members

This April, during The Aesthetic Meeting 2023, ASERF will have officially existed for 30 years. In celebration of this milestone, its accomplishments and impact on the specialty, ASERF will host a small reception inside The Aesthetic Society booth on Saturday, April 22 at 4pm EDT. You are invited to visit the ASERF Booth, located within The Aesthetic Society booth, or the ASERF Lounge, and learn more about applying for a grant, the most recently

funded studies or how you can make a difference by supporting the mission of The Foundation by becoming a member of the President's Circle.

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

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

CELEBRATING 30 YEARS

Advancing Aesthetics Since 1993



Do you

have a great **research** idea?

SHARE. CONNECT. LAUNCH.

WHAT IS THE AESTHETIC RESEARCH COMMUNITY?

- A network of Aesthetic Surgeons willing to share ideas and collaborate on research
- A source for aesthetic surgery research guidance

WHO MAY PARTICIPATE?

 Aesthetic Society and ASERF Members, Associates and Residents

HOW DO I JOIN?

- Scan the QR Code
- Complete the brief form
- A member of the ARC Committee will contact you



ASERF.ORG



NYC Plastic Surgeon Donates \$50,000 to Support Aesthetic Surgery Research

Sherrell J. Aston, MD ASERF'S NEWEST MAJOR DONOR AND MEMBER OF THE PRESIDENT'S CIRCLE

World-renowned double board-certified plastic surgeon, educator, professor, author, businessman, and Past President of The Aesthetic Society, Sherrell J. Aston, MD, becomes ASERF's newest major donor and member of The President's Circle.

Dr. Aston has been conducting Plastic Surgery research for nearly 50 years. His foray into research occurred while he served as Chief Resident at New York University. He and Chlom Williams MD, a plastic surgery fellow at NYU from Australia investigated the impact of blood within the breast implant pocket and fibrous capsular contracture in baboon models. The study was published in PRS. Since then, Dr. Aston has continually improved his own practice through clinical research.

"Over the years, I have studied facial and nasal anatomy with the emphasis on the direct clinical application to surgical techniques for improved aesthetic results," he shared. "More recently, I have been studying the benefits of advanced radiofrequency technology for facial

rejuvenation as a stand-alone procedure or used concomitantly with surgical techniques."

Globally, Dr. Aston is considered one of the developers of modern facelift techniques, and an expert in closed rhinoplasty and blepharoplasty.

"ASERF-funded research has had a huge impact in multiple areas of our great specialty in terms of improved techniques, patient outcomes, and patient safety. Making a sizeable donation to assist those efforts was an easy decision."

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

Upon reviewing the complete list of studies supported by The Aesthetic Surgery Education and Research Foundation (ASERF), Dr. Sherrell Aston, declares every plastic surgeon and millions of patients have benefited from ASERF's investment in aesthetic surgery research.

"I wholeheartedly urge all my plastic surgery colleagues to financially support ASERF so that they may continue to fund groundbreaking studies and investigate the fundamentally important initiatives that are important to our specialty. Your donations will assure the continuation of the superb projects that give us currently usable knowledge, and which will help lay a stronger foundation for the next generation of colleagues and their patients."



The Aesthetic Surgery Education and Research Foundation

FOUNDATION NEWS



Train with an Expert

By Jamil Ahmad, MD, FRCSC

Several years ago, we developed the 'Train with an Expert' experience as part of the ASERF Silent Auction. There has always been a need for practicing plastic surgeons to have practical and intimate educational experiences, and our Aesthetic Society members were looking for ways to support our Foundation. Since then, we have had many members support The Foundation by hosting these 'Train with an Expert' experiences and many plastic surgeons have embraced the concept and had enriching educational experiences. At the Plastic Surgery Clinic in Mississauga, Canada, Drs. Frank Lista, Ryan Austin, and I have participated as 'Train with an Expert' hosts since the inception of the program and have had the honor of spending time with so many wonderful colleagues and sharing our experience and exchanging ideas. Additionally, we have made many great friendships as a result.

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

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

Dr. Moneer Jaibaji of Coronado, CA, generously donated to ASERF for the opportunity to visit our practice. "In May of this year, I was fortunate to have won a bid

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

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

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



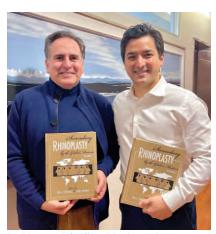
The Aesthetic Surgery Education and Research Foundation

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

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

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

Continued on Page 73



Dr. Moneer Jaibaji and Dr Ahmad, October 2022, Toronto, Canada



Dr. Ahmad and Dr. Claytor, November 2022, Toronto, Canada



Dr. Claytor, November 2022, Toronto, Canada

Train with an Expert

Continued from Page 72

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

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



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



From left to right Kevin Adams (from Sientra), Dr. David Janssen, Dr. Bruce Webber, Dr. Kiya Movassaghi, and Dr. Dan Zegzula.



Enjoying the outdoors in Oregon. from left to right, Niloo Movassaghi, Dr. Kiya Movassaghi, Dr. David Janssen and Kristin Janssen.

'TRAIN WITH AN EXPERT' OPPORTUNITIES AT THE AESTHETIC MEETING 2023



William P. Adams Jr., MD



Caroline A. Glicksman, MD, MSJ



Kiya Movassaghi, MD, DMD



The Plastic Surgery Clinic—Drs. Ryan E. Austin, Frank R. Lista, and Jamil Ahmad



Lorne K. Rosenfield, MD



Renato Saltz, MD



Douglas S.

See page 11 for how to bid on this incredible educational experience!

FOUNDATION NEWS

ASERF President's Circle

THESE MEMBERS HAVE DONATED \$50,000 OR MADE A \$100,000 PLANNED GIFT TO ASERF



William P. Adams Jr., MD



Sherrell J. Aston, MD



Mark T. Boschert, MD



M. Bradley Calobrace, MD



Sepehr Egrari, MD



Dr. and Mrs. Julio Luis Garcia



Caroline A. Glicksman, MD, MSJ



Dr. and Mrs. Joe Gryskiewicz



Daniel A. Hatef, MD



Dr. and Mrs. Jeffrey M. Kenkel



Luis López Tallaj, MD



Patricia A. McGuire, MD



Dr. and Mrs. Daniel C. Mills II



Susan and Steve Mollenkopf



Dr. and Mrs. James Payne



Dr. and Mrs. Luis M. Rios Jr.



Dr. and Mrs. Robert Singer



Douglas S. Steinbrech, MD



Dr. and Mrs. Louis L. Strock



Bruce W. Van Natta, MD

Will You Be Our Next President's Circle Member?

Contact Tom Purcell, CAE tom@aserf.org for more information.

ASERF Expands Fundraising Efforts to Meet Growing Research Needs

As ASERF enters its 30th year, The Foundation is introducing a new fundraising program as it prepares for the next 30 years.

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

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

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

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

Dr. Adams, who also serves a Chair of

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

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

ASERF Prepares for New Website Launch

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

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

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

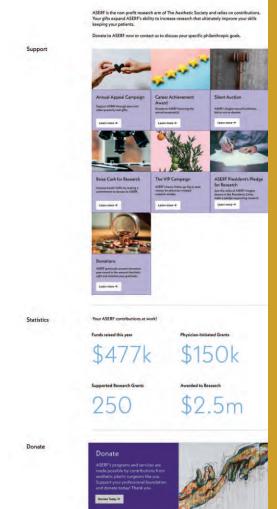
- Share programs, services, and those who benefit
- Recognize its accomplishments and donors, as well as acting as a report card
- Provide opportunities to join, apply for grants, become involved or support the mission

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

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

A first look at the new ASERF website under development.
While at The Aesthetic Meeting 2023 in Miami Beach, stop by the ASERF Booth, located in The Aesthetic Society Booth #1230 to see the site just before it goes live.







Practical advice you can put to use today to help your practice run more efficiently.



Choosing the Right Content Creators to Execute Your Digital Marketing Goals

By Wendy Lewis

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

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

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

THE NEW CONTENT CREATORS

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

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

TAKING CARE OF BUSINESS

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

USING CREATORS TO ELEVATE YOUR BRAND

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

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

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

When working with well-known creators, leverage their popularity. Let your brand and mission fit into their style rather than the other way around. If you ask them to change their

style to fit the brand, you may sour the relationship. Their followers may also lose interest in the content they are putting out, which would defeat its purpose.

GIVING FEEDBACK GENTLY

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

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

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

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

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

When working with well-known creators, leverage their popularity. Let your brand and mission fit into their style rather than the other way around. If you ask them to change their style to fit the brand, you may sour the relationship.





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

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



Learn more:

midmark.com/procedurechair



Handling Objections: How Skilled Is Your Team?

By Karen Zupko

"Well, she's board certified..."

"Look, he's been doing surgery for 35 years..."

"Our fees are competitive for our market..."

"Sorry, that's our policy..."

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

BOARD CERTIFICATION

The total number of ABPS Board Certified Plastic Surgeons is 7,706 as of November 2022. To be clear, board certification is crucial and important, but that is where the bar starts for educated consumers. In any major metropolitan area, there are easily several hundred with identical certifications. So, using that credential as your sole justification is not going to be meaningful as a differentiator.

YOU'VE BEEN OPERATING FOR DECADES...

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

YOUR FEES ARE PREDICATED ON THE MARKET...

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

POLICIES AND PROCEDURES

These are necessary for running a business. Patients must understand them as part of informed consent, but they are not an answer to an objection. "It's our policy" is the

equivalent of your parents saying, "Why? Because I said so!" How does that make you feel?

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

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

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

We like these:

- "Dr. Wonderful has done over 815 breast reductions."
- "Dr. Amazing has spoken at 27 major meetings as invited faculty to present on her technique. Her colleagues recognize they can learn from her."

Articulating how gifted you are in the procedure the patient is considering is impactful. So are real patient reviews on patient satisfaction.

On the other hand, Dr. Junior may have been with you for six months. Best to have some stories about his fellowships and accolades.

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

"In order to ensure an optimal result Dr. Exceptional feels it's important for you to lower your BMI."

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

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

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

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

Meet Karen Zupko at The Aesthetic Meeting 2023

THURSDAY, APRIL 20

9:00am - 3:00pm

Course S5—Skills for Successful Patient Coordination

4:30 - 6:30pm

Course S16—Patient Coordinator Alums: Overcoming Scheduling Objections

FRIDAY, APRIL 21

9:45am - 12:30pm

Can This Practice Be Saved? With Herluf Lund, MD

Course 110—So, You Want to Sell Your Practice? How to Plan Your Exit Strategy Making the Process Seamless

SATURDAY, APRIL 22

2:00 - 4:00pm

Course 309—Relationship Marketing: What It Means and How to Put it in Action

4:30 – 6:30pm

Course 409—Staff: Your Biggest Expense or Your Biggest Asset? With Judy Kozlicki

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Cyber Security Threats

By Dan Mortenson

Cyber security threats in the healthcare industry are increasing; there were an estimated 11 million data breaches at healthcare facilities around the world during the pandemic.

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

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

Along with federal and state laws and policies changing, insurance carriers are increasing rates for cyber insurance while demanding closer adherence to these new standards to help businesses of all sizes better understand, manage, and reduce their cybersecurity risk and protect their networks and data. The goal of all these changes is to



HIPPA has been updated several times in recent years to address cyber security within current internet platforms and also deal with widespread threats.

make medical practices aware of the cyberattack threats and make patient data protection a priority. HIPPA also requires yearly audits to verify that the status of the network security is up-to-date and to make sure its protection is keeping up with the ever-changing landscape.

As these policies and attacks evolve, so too does the strategy for protecting medical offices. To address the challenges for medical facilities, a layered security approach is needed. Our company includes cyber assessment tools, documentation, and user training to get a baseline of the current network layout and level of security. For data and network protection, we recommend implementing offsite encrypted backups, a network protection for the internal office, and email scanning. Antivirus and malware scans are run at every level. These services include security professionals monitoring activity to identify areas of concern, and most importantly, fix

problems or respond to attacks quickly. Of note, Google Drive, SharePoint, and other cloud services can adhere to the standards for storing PHI data *if configured to be secure*. However, the default settings may not provide the security required.

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

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

Of particular concern, these policy changes have also increased fines and penalties for the exposure of patient's PHI data because of lax or insufficient computer security and doesn't excuse a "lack of knowledge" of cyber policies and can consider not having security as "willful neglect."



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Making the Switch to GA4. Is Your Website Ready for the Next Google Analytics Update?

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

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

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

This version is Google Analytics 4.

UNDERSTANDING THE SWITCH: UNIVERSAL ANALYTICS TO GOOGLE ANALYTICS 4

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

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

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

Key Benefits of GA4's Machine Learning and Insights:

- · Increased focus on data privacy
- Increased ability to track data across devices (phone, tablet, laptop) as long as the device is logged into the user's Google account
- Increased ability to track data across apps (using both website and app data)



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

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

CHANGING PRIVACY LAWS MEANS CHANGING DATA COLLECTION

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

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

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

WHEN DO YOU NEED TO SWITCH TO GA4?

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

Peter Houtz is the Vice President of Sales for Plastic Surgery Studios, a full-service online digital marketing agency serving the aesthetics industry since 1998. Peter is a frequent presenter at The Aesthetic Meeting and can be reached by phone at (909) 758-8320 or by email at peter.houtz@plasticsurgerystudios.com.

Meet Peter Houtz at The Aesthetic Meeting 2023

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4:30 - 6:30pm

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Is Al Content the Future of Plastic Surgery SEO?

By Keith C Humes, CEO Rosemont Media, Ilc

Today's artificial intelligence (AI) technology is transforming the way we live.

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

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

THE RECENT SURGE OF AI IN SEARCH ENGINES

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

In addition to practices utilizing AI to write content, search engines are taking advantage of the latest advancements as well. In fact, Bing has plans to release a version of its search engine using ChatGPT, and Google is constantly improving upon its own advanced AI technologies. As AI products continue to evolve, they'll no doubt transform how search is used and, therefore, how SEO is performed.

HOW GOOGLE RANKS AI-WRITTEN CONTENT

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



Al can't develop new ideas or offer the human perspective it simply regurgitates what already exists.

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

WHY AI CAN'T REPLACE HUMANS IN SEO

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

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

HOW TO USE AI IN THE CONTENT CREATION PROCESS

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

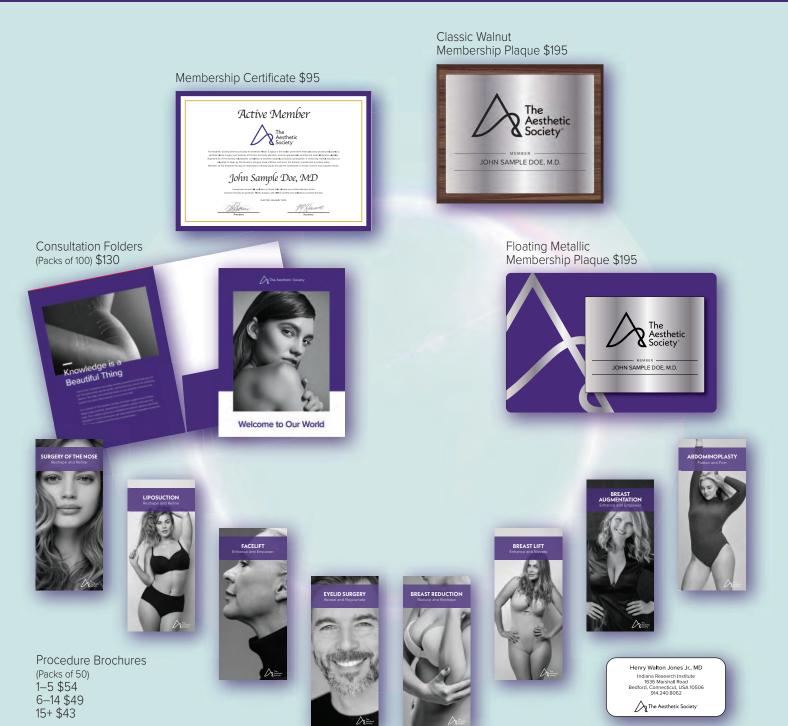
- Generating highly searched topic ideas
- Creating outlines based on user metrics and other websites
- Finding missing information within existing content
- Speeding the content creation process
 Should a plastic surgery practice utilize AI to generate content, it's essential to enlist a professional to review it. This not only ensures accuracy, but also a natural sound that incorporates the plastic surgeon's unique point of view.

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

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



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How Well Was the Patient Informed of Risk Factors Prior to Breast Surgery?

By Kelly N. Reddell, Esq.—Vice-President Litigation Management, AMS RRG

The most common medical malpractice claims against plastic and reconstructive surgeons involve breast surgeries.

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

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

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

Most, if not all patients undergoing breast reduction/augmentation surgery will have preoperative photographs taken as part of their record. The side-by-side comparison of a patient's pre-operative breast pictures with



But how well was the patient informed of these risk factors prior to surgery? What recommendations were given to the patient? And how well does the surgeon's chart detail the presence of such risks and advice to the patient pre-operatively?

those of a necrotic nipple and/or total NAC loss can present a very challenging perception hurdle for the defense in a malpractice case. Risk factors for these complications include obesity, diabetes, a past history of poor wound healing, heavy smoking, and/or having large breasts, which strain the blood supply further.

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

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

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

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

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

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



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Catherine Maley, MBAAuthor, *Your Aesthetic Practice*Beauty and the Biz Podcaster







How to Attract Affluent Cosmetic Patients

By Catherine Maley, MBA

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

IT'S NOT ABOUT YOUR SKILLS AT THIS LEVEL

his will be counterintuitive but important to grasp:

It's not about being 2x better at a surgical procedure to charge 2x more.

Board-certified trained plastic surgeons all do a nice job. That's true or you wouldn't be board-certified.

There's more to it than that.

THE AFFLUENT PATIENT'S FRAME OF MIND

Affluent patients pay more because doing so makes them feel more like the person they either wish they were or envision themselves to be.

At this level, you are hardly talking about the surgery.

It's more about the intangibles and what this procedure means to them that is driving their decision.

The affluent patients are looking for a superior service provider... even if it's based on perception.

HOW TO MAKE PRICE DISAPPEAR FROM THE EQUATION

Affluent patients need to feel they are getting the best because they deserve the best.

You become the best by standing out from the crowd. By doing what others won't do or can't do.

The quickest path in today's world is to marry a housewive on Bravo TV but if that's not possible, here are 3 other strategies that help make price go away:

PEER RECOMMENDATIONS

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



Shoot short Instagram video stories answering FAQs and lots of before/after photos of affluent patients and their stories. But also show off your gorgeous office, wine cellar, extravagant travels and luxury lifestyle. This gives affluent patients enough proof and sufficient trust in you to choose you as their go-to plastic surgeon.

Knowing that, you'll want to identify who those patients are in your own practice. Give them an excellent result and an exceptional patient experience.

Now make them part of your VIP Club where you have private events they can invite their affluent friends to.

To make it special, add a charity component to it and invite the media.

It's the exclusivity that gives the affluent patients the feeling of status they want and expect.

BE THE EXPERT

Although you are well versed at all sorts of surgical procedures, the affluent patient wants to go to the BEST.

They want the surgeon who specializes in, for example, blephs, has done 10x more blephs than the average surgeon and who has tons of social proof of hundreds of other happy bleph patients.

It would also be helpful if you are considered, "The Eye Guy" because you have been interviewed by the media and you even train other surgeons on your innovative bleph techniques.

USE SOCIAL MEDIA TO CONNECT WITH AFFLUENT PATIENTS

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

Shoot short Instagram video stories answering bleph FAQs and lots of before/after photos of affluent patients and their stories.

But also show off your gorgeous office, wine cellar, extravagant travels and luxury lifestyle.

This gives affluent patients enough proof and sufficient trust in you to choose you as their go-to plastic surgeon.

CONCLUSION

Attracting the affluent patient takes a different mindset (and some healthy ego).

If you believe you are worth double what your competitors charge, set your practice up to cater to the affluent patients who are attracted to your higher prices because, just like you, they believe they are worth it.

Catherine Maley, MBA is a cosmetic practice consultant, speaker, trainer, and blogger. She also has a podcast called Beauty and the Biz and her popular book, "Your Aesthetic Practice/What Your Patients Are Saying" is read and studied by plastic surgeons and their staff all over the world.

She and her team specialize in growing plastic surgery practices using creative patient attraction, conversion, follow up and retention strategies as well as staff training to turn team members into converting rock stars.

Visit Catherine for Free resources at www.CatherineMaley.com or Instagram @catherinemaleymba.

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Senté

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Designing a Withdrawal Strategy: The Most Important Factor in a Successful Retirement

By David Mandell, JD, MBA and Andrew Taylor, CFP®

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

of these three, a carefully constructed withdrawal strategy is often the most critical factor impacting the successful achievement of a physician's long-term retirement goals.

While a plastic surgeon's primary financial focus during his or her career is to save and accumulate funds for retirement, the design of a withdrawal strategy is equally important to financial health in retirement.

SELECTING A WITHDRAWAL RATE

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

MAKING ROOM FOR TAXES

No one knows what tax rates will be upon retirement. This does not mean physicians should ignore tax planning, but that they should account for the potential costs of taxes and design a strategy to minimize them.

To do this, one must understand how taxes will impact withdrawals and liquidations. Having a plan that considers which withdrawals will trigger ordinary income taxes, which will incur capital gains, and which will realize no tax, is essential.

Lastly, physicians should understand that delaying distributions from their assets will have the greatest impact on their ability to have a successful retirement. Plastic surgeons



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

may have the option of easing into retirement and exploring varying roles within a practice—perhaps transitioning to a consult-only role and giving up surgeries. This can allow a physician to generate a supplemental income for several years, thus moderating the stress on their portfolios by reducing the rate of withdrawal

Financial success or failure in retirement is generally determined in the first several years of retirement. Transitioning into retirement gradually without a sudden loss of income can enhance the odds of success.

CONCLUSION

Most physicians envision a comfortable retirement as a reward for decades of hard work. Do not let the absence of pre-retirement planning hinder this goal. While understanding the basic concepts of an effective withdrawal strategy is a great start, there is no substitute for working with an experienced advisor who can analyze your specific situation and make recommendations to help you reach a financially successful retirement. Contact the authors to learn more.

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David Mandell, JD, MBA, is an attorney and author of more than a dozen books for doctors, including Wealth Planning for the Modern Physician. He is a partner in the wealth management firm OJM Group (www.ojmgroup.com), where Andrew Taylor, CFP®, is a partner and wealth advisor. They can be reached at 877-656-4362 or mandell@ojmgroup.com.

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Meet David Mandell at The Aesthetic Meeting 2023

FRIDAY, APRIL 21

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Course 109—Tax Reduction for Aesthetic Practices: Best Ideas in 2023

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What to Expect from Your Practice Manager

By Terri Ross, Terri Ross Consulting

We all know it takes a strong leader to manage a practice. Without one in place, there are always going to be challenges.

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

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

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

TOP TRAITS A PRACTICE MANAGER SHOULD HAVE

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

- Effective Communicator—You want someone who has earned respect of the team, can conduct successful meetings and stick to an agenda that is tied to an outcome.
- Customer-Centric—Your practice manager must understand the value proposition of both the business and provider, realizing what makes your practice different and go that extra mile to help patients have the best, five-star experience possible.
- Aesthetic Experience—When hiring a practice manager, you might get applicants with other management skills, but learning the aesthetic space involves learning about every procedure or surgery. The features



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

- and benefits, personality types of the clients, more importantly the data and KPIs that are tied to an aesthetic practice.
- Drive—You want someone who is driven, a self-starter, solutions oriented and resourceful.
- Leadership—You want someone who can earn the respect of the front desk team and providers. They must set the tone to establish a culture of trust and communication.
- Coachable—They should be willing to take direction and learn from others.
- Analytical—They must have skills in understanding and interpreting data and metrics; know the top KPIs for aesthetic practice; and have the knowledge of how practice management software works, what data needs to be entered and why, what reports to run and analyze as well as understand industry benchmarks so your practice can achieve maximum potential capacity.
- Problem Solver—They should be solutionfocused not problem-focused.
- Open-minded—A practice manager wears many hats. The job requires somebody who is flexible, agile, and open minded.
- Self-Aware—Your practice manager must be aware of what's going on in all facets of the practice including patients, providers, entire team, culture, workflow & efficiencies.
 Their vision must be circular not linear.

- Be ALL IN—They should have an ALL-IN attitude. That means if they need to do some work at home, they do it. If they need to complete training after hours, they are willing. They are willing to seek expert advice to get to the next level.
- Strive for Excellence—The world is full of mediocrity. It is hard to find good talent, but you want to find someone with a deep, personal desire for excellence. Someone who is not willing to settle for just good. They want to be great.

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

Meet Terri Ross at The Aesthetic Meeting 2023

SUNDAY, APRIL 23

2:30 - 4:30pm

Course 607—Maximize Your Revenue: How Knowing the Two Most Important KPIs Can Give You a Leg Up

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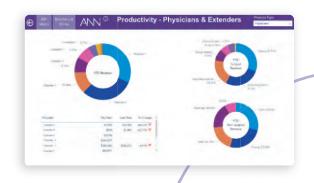
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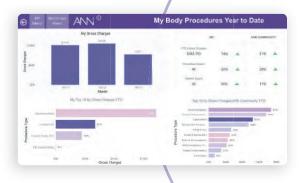
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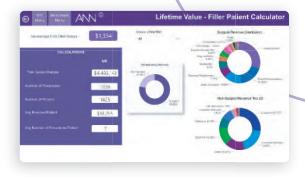




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The Straight & Narrow—

By Joe Gryskiewicz, MD

Have an ethics question for Dr. Joe? Email ethics@theaestheticsociety.org

Editor's Note
This article is
designed to keep
The Aesthetic
Society members
aware of the
real-world ethical
quandaries that
plastic surgeons
commonly face.

Question

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

Answer

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

The ASAPS Code of Ethics Section 3.11 Professional Discipline and Convictions states that (a) Professional discipline of any kind, whether imposed by a certifying body,

regulatory commission, licensing board or a professional society, or any criminal conviction by any governmental body or judicial tribunal, whether or not of a professional nature, and whether or not such discipline or criminal conviction is suspended or stayed on appeal, shall be immediately reported by the member to the Society for review by the Ethics

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

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

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

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

Meet Joe Gryskiewicz at The Aesthetic Meeting 2023

THURSDAY, APRIL 20

2:00 - 6:00pm

Course S13—Modern Techniques in Rhinoplasty for Everyone— A Cadaver Workshop Catch up on all episodes of our docuseries

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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 MATTERS



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

By James Fernau, MD, FACS



There are numerous reports in the literature of the safety of office-based plastic surgery.¹ This paper discusses my experience with oral sedation and the evolution of office-based plastic surgery using local anesthesia with oral sedation and occasional intramuscular supplementation.

All patients are screened with a prescription drug monitoring program or PDMP. This is important because any patients on chronic narcotics are either, not scheduled for officebased surgery or referred to a pain specialist for specific recommendations. Patients are referred for a medical consultation and a clearance letter, stating the patient is a candidate for aesthetic surgery. We use the decontamination protocol, the enhanced recovery after surgery (ERAS) protocol and thoroughly discuss the use of tranexamic acid during surgery.²⁻⁵ The mainstay of our officebased surgery is patient education. Only ASA classification 1 patients are considered for office based surgery. Obstructive sleep apnea is a definite contraindication.

Upon arrival at the office surgical center the patient safety checklist is reviewed with the surgeon and the nurse.⁶ I review potential complications of surgery with the patient a second time. I mark the patient and have the patient check all the marked regions in the mirror, and this is done with a nurse present documenting all of the proposed areas of surgery and photographs are taken. 8 mg of oral ondansetron are first given along with 5 mg of Valium. The patient is then administered 30 µg of sublingual Dsuvia (Sufentanil). The patient is then evaluated at 15 minutes and given oral sedation with liquid Versed. Before using sufentanil, our initial dose of oral Versed was 10 mg and now we have reduced it to 5 mg. Immediately, after taking the oral Versed the patient is taken to the operating room and prepped and padded and draped in the appropriate and sterile fashion. Surgery then commences. If the patient experiences any discomfort during cases such as liposuction, they are occasionally given supplemental intramuscular midazolam, ketamine and/or fentanyl. Generally, we only use 1 mg of the midazolam and ketamine intramuscular agents per dose per hour. After the second dose of ketamine, we then switch to fentanyl to avoid postoperative side effects of the ketamine.



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Fentanyl is generally given in doses of 50 $\mu g/$ ml.

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

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

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

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

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

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

Continued on Page 98

SAFETY MATTERS

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

Continued from Page 97

registered nurse or higher qualifications at the head of the bed continuously monitoring the patient.

James Fernau MD, FACS is on his third term as Chairman of Patient Safety for The Aesthetic Society. He has a private practice in Pittsburgh Pennsylvania and is an Associate Professor of Plastic Surgery at the West Virginia University School of Medicine.

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Tumescent Anesthesia

By R. Brannon Claytor, MD FACS



Many advances in surgical technique over the years have improved aesthetic results with special attention being paid to less invasive procedures.

Mandated COVID

closures at hospitals, and patient requests for outpatient surgeries, were the engine which created the demand for increased expertise in tumescent anesthesia and awake procedures.

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

channels and inhibit the depolarization of nerves, the central nervous system can be protected from noxious stimuli.

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

The hospital administrators were traditionally the gate keepers of safety for the general populace who might otherwise be duped by an overly ambitious or incautious practitioner who may stray "out over his or her proverbial skis," to use a sporting analogy. Now with the advent of more procedures being performed, at the request of the patient, under local

anesthesia, these operations can be moved out of the hospital or even surgery centers and into physicians' offices. While it is impossible to put the genie back in the bottle, it is prudent to request and even demand that the pioneering physician establish outpatient surgical centers which adhere to the medical standards of qualifying bodies such as AAAASF (American Association for Accreditation Ambulatory Surgical Facilities) or the AAAHC (Accreditation Association for Ambulatory Health Care) for the benefit of the public trust and safety.

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

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

R. Brannon Claytor, MD FACS is Chief, Plastic Surgery, Main Line Health; President, Claytor Noone Plastic Surgery; Associate Clinical Professor, Lankenau Institute for Medical Research; Board Member, The Aesthetic Society; and Senior Editor, Aesthetic Section, Education Network, ASPS.

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