THE AESTHETIC MEETING 2018 SPECIAL ISSUE

ASERF Celebrates 25 Years!
See Page 35

Learn More About ASAPS Membership Opportunities!
See Page 7

The Aesthetic Meeting 2018
April 26-May 1, 2018
Jacob K. Javits Convention Center
New York, NY

The Artful Approach to Cosmetic Medicine
August 24–26, 2018
Estancia Hotel
La Jolla, CA

APPLY NOW! July 1, 2018 is the next ASAPS Active Member Application Deadline. Learn more at www.surgery.org/active-membership
New day rising.
### ASAPS Provided, Jointly Provided & Endorsed Symposia

**April 12, 2018**  
18th Toronto Breast Symposium  
King Edward Hotel  
Toronto, Ontario, Canada  
Natalie.halsband@utoronto.ca  
www.torontoaestheticmeeting.ca

**April 13 – 14, 2018**  
48th Toronto Aesthetic Plastic Surgery Symposium  
King Edward Hotel  
Toronto, Ontario, Canada  
Natalie.halsband@utoronto.ca  
www.torontoaestheticmeeting.ca

**April 26 – April 29, 2018**  
Skin Care 2018  
New York Marriott Marquis Hotel  
New York, NY  
562.799.2356  
www.spsscs.org/meeting2018

**April 26, 2018**  
The Rhinoplasty Society Annual Meeting 2018  
New York Marriott Marquis Hotel  
New York, NY  
904.786.1377  
www.rhinoplastysociety.org/meetings

### THE AESTHETIC MEETING 2018

**April 26 – May 1, 2018**  
The Aesthetic Meeting 2018  
Jacob K. Javits Convention Center  
New York, NY  
562.799.2356  
www.surgery.org/meeting2018

**May 17 – 20, 2018**  
California Society of Plastic Surgeons 68th Annual Meeting  
The Omni San Diego Hotel  
San Diego, CA  
cspsoffice@att.net  
510.243.1662  
www.californiapiasticsurgeons.org

**August 24 – 26, 2018**  
The Artful Approach to Cosmetic Medicine  
In Collaboration with ASAPS  
Estancia Hotel  
La Jolla, CA  
asaps@asaps.org  
562.799.2356  
surgery.org/cosmetmed2018

**September 21 – 22, 2018**  
Canadian Society for Aesthetic Plastic Surgery 45th Annual Meeting  
Westin Montreal  
Montreal, Quebec, Canada  
csapsoffice@gmail.com  
www.csaps.ca

**October 18 – 20, 2018**  
ASAPS Breast and Body Symposium 2018  
Intercontinental Mark Hopkins Hotel  
San Francisco, CA  
asaps@asaps.org  
www.surgery.org/breastandbody2018

**October 29 – 31, 2018**  
IMRHIS 2018  
Loews Miami Beach Hotel  
Miami, FL  
www.IMRHIS2018.com

**October 31 – November 4, 2018**  
24th Congress of ISAPS  
Miami Beach Convention Center  
Miami Beach, FL  
isaps@isaps.org  
www.isapsmiami2018.com

### EDUCATIONAL OPPORTUNITIES

As Education is the foundation of The Aesthetic Society’s mission, ASAPS is proud to bring you symposia which broaden your breadth of knowledge. Upcoming ASAPS educational opportunities include:

- **The Aesthetic Meeting 2018**  
  April 26 – May 1, 2018  
  New York, City, NY

- **The Artful Approach to Cosmetic Medicine**  
  In collaboration with ASAPS  
  August 24 – 26, 2018  
  La Jolla, CA

- **ASAPS Breast and Body Symposium 2018**  
  October 18 – 20, 2018  
  San Francisco, CA

- **4th Annual Residents’ Symposium**  
  Launching Your Practice—The ASAPS Gift of Expert Advice  
  December 6 – 8, 2018  
  New York City, NY

- **ASAPS Las Vegas 2019 Facial & Rhinoplasty Symposium**  
  January 31 – February 2, 2019  
  Las Vegas, NV

More information about these offerings can be found above. ASAPS appreciates your dedication to continuing education and enhanced patient safety and satisfaction. Thank you!
My Dear Colleagues and Friends, Mahalo!

By Clyde Ishii, MD

It has been my distinct pleasure to have served as the President of The Aesthetic Society over the past year. Our specialty has given me so much through the years, and I have enjoyed the opportunity to connect and learn from so many of you. I so look forward to seeing you all in person in New York for The Aesthetic Meeting 2018 as we celebrate the annual global gathering of innovators and aesthetic experts. Join me at the President’s Welcome Celebration on Saturday, April 28, from 7:00pm–9:00pm, at the Marriott Marquis Times Square, and let’s toast our specialty in person!

Membership: Attracting the Brightest Minds in the Specialty

In an effort to continue to attract dedicated aesthetic plastic surgeons with a focus on patient safety and satisfaction, The Aesthetic Society formed a Task Force, chaired by ASAPS President-Elect W. Grant Stevens, MD, to ensure that our application process is as streamlined and efficient as possible, while maintaining the Society’s high standards for membership. I encourage you to read more on these changes in his article on page 7 of this issue of Aesthetic Society News (ASN). I am proud of the hard work the Task Force put into this process and am excited to see our Society continue to grow and stay at the forefront of our specialty.

The Aesthetic Meeting 2018: New York

I hope you’re planning on joining us at The Aesthetic Meeting in New York, NY, April 26–May 1, at the Javits Convention Center. This year marks the 25th Anniversary of the founding of the Aesthetic Surgery Education and Research Foundation (ASERF) and we’ll be celebrating in a variety of ways. (More details below.) As always, ASAPS will deliver the finest aesthetic education anywhere. Please see Dr. Bill Adams’ article on page 13 of this issue of ASN for all of the highlights.

ASAPS Members, while at the Meeting, make sure to learn about our latest products exclusively for Members. The first is called the Aesthetic Neural Network (ANN.) ANN has the power to scan your patient records or practice management system without touching sensitive patient identifiers or requiring data input from your staff, providing you with easy-to-understand dashboards and allowing you to see how you benchmark against others. Such knowledge arms you with the information you need to better hone your practice marketing and patient services. Stop by the Aesthetic Neural Network Booth #625 to learn more and sign up for this exciting resource. It will revolutionize how you do business.

Are you utilizing the free ASAPS member benefit called the Surgeon as Consumer (SAC)? This closed environment website, accessible only to ASAPS active members through ASAPS.org, allows you to rank 510K devices on a variety of qualities, from clinical efficacy to ROI in a simple, star-based system. It’s a great way to make sure your money is wisely spent! Learn all about it in Booth #624.

ASERF Turns 25 at The Aesthetic Meeting

Join me in congratulating ASERF on 25 years of scientific advances! It has been our tradition that at each Aesthetic Meeting, ASERF honors some of our specialty’s most influential surgeons and researchers. This year, the ASERF Career Achievement Award will posthumously be given to the late Dr. Scott Spear, a friend to so many of us. Please join us for the award ceremony during the ASAPS/ASERF Member Business Meeting on Sunday, April 29, 2018, 12:00pm to 1:30pm, in Room E12–14.

ASERF will also be represented through the always popular “ASERF Premier Global Hot Topics,” the “ASERF Research and Innovative Technology Luncheon,” and a new course, the “ASERF Bootcamp: So You Want to do Research...” Also, make time to check out the ASERF Silent Auction, which is a wonderful way to support the Foundation in raising funds for research, while getting a chance to bid on a wide array of products and services. Stop by ASAPS Booth (#529) in The Aesthetic Marketplace to get your free photo taken with the ASERF 25th anniversary logo in the “We Are Aesthetics” Green Screen Photo Booth.

In Conclusion

I am so proud to be a member of The Aesthetic Society, and serving as President has been a career highlight. I so admire the dedication of my fellow surgeons: we are diligent in our education, learning everything there is to know about our craft, and we are never settled—we keep learning and moving forward. Such efforts ensure that we are providing our patients with the ultimate in safety, care and satisfaction. On top of being excellent surgeons, many of us are also entrepreneurs, learning and navigating the world of business as we position our practices for success. Many of us are also educators, passing on our knowledge to ensure our younger surgeons have the skills needed for safety and success. And, on top of all of this, many of us are philanthropists, giving back to our communities and our specialty.

On this silver anniversary of ASERF, I hope you’ll take the time to contribute to this valuable organization, which funds research that improves us all. Donations can be made at The Aesthetic Meeting’s Registration Desk or at www.aserf.org. Special ASERF lapel pins will be available for those making donations to ASERF.

Through the past year, I have relied on many of you for your guidance, input and support. In particular, I’d like to thank the members of the ASAPS Executive Committee, Board of Directors, and all ASAPS committee members for their outstanding service. Additionally, I cannot thank the administrative staff of the Society enough for their loyalty and hard work throughout the year. Much happens behind the scenes, due to the efforts of Society staff, which benefits our membership and which often appears “effortless;” in fact, it is anything but!

As this issue of ASN marks my last report as President of ASAPS, I join you all in welcoming my good friend and colleague, Grant Stevens, MD, who will be taking over as President at our annual ASAPS/ASERF business meeting. If you know Grant, you know that we can all expect big things from The Aesthetic Society in the coming year. Our future looks bright, and I’m grateful to have played a small part in setting our solid foundation. See you at The Aesthetic Meeting, and Mahalo!

Clyde Ishii, MD, is an aesthetic plastic surgeon practicing in Honolulu, HI, and serves as President of The Aesthetic Society.
Are You Our Next Member?

WE ARE AESTHETICS.

The American Society for Aesthetic Plastic Surgery, Inc.

562.799.2356  www.surgery.org
In just as pleased as you are that the aesthetic surgery specialty is flourishing, in large part because of such dedicated ASAPS Active Members such as yourselves. We continually push forward, encouraging innovation and improved patient care, safety and satisfaction. However, despite such an ever-changing specialty, oftentimes our societies are slower to make such changes or offer innovations. Happily, The Aesthetic Society is at the forefront of the specialty and is making improvements to our application process, which everyone agrees has been onerous.

To encourage younger, qualified surgeons to apply, we are streamlining our application process, removing some of the hurdles that proved daunting to many. Why does The Aesthetic Society need to encourage growth? Quite simply, by encouraging new and younger members, ASAPS can maintain our Society’s prestige, relevance, and encourage successful growth and revenue streams that will benefit the specialty as a whole.

Many of our membership requirements harken back to the exclusionary days when the aesthetic procedures in our specialty did not have the respect that they do today. In order to remain vibrant, some of the Society’s more stringent requirements had to change.

What is Changing?

Case Requirements. Case requirements clearly demonstrate one’s devotion to aesthetics and, as such, are not being eliminated. However, instead of cataloging a set number of cases, applicants will be asked to list the number of cases performed in each category, which the Application Review Committee will review at their discretion. The requirements to complete a plastic surgery residency program and become certified by the ABPS are more comprehensive than ever before. The RRC now requires a total of 150 major aesthetic cases be performed during residency; a significant increase compared to past requirements. This makes our requirement redundant.

Aesthetic CME Requirement. As all prospective members are required to attend an ASAPS meeting prior to applying, at which meetings they receive CME, the CME requirement itself will be eliminated.

Optional Personal Statement. While the steps above have been streamlined, we are adding one additional new optional step: the inclusion of a Personal Statement. Our primary goal is ensuring that in addition to aesthetic surgical skills, ASAPS acquires new members excited about and dedicated to the specialty. We want enthusiastic surgeons who will take up the cause of patient safety and improved patient care and satisfaction, as new ASAPS Members can help fortify and grow our specialty long into the future.

Revised ASAPS Member Requirements

As always, The Aesthetic Society only seeks the best-of-the-best for its membership. Any applicant for Active and International Active Membership will be required to submit the following:

- US and Canadian applicants: Must be Board-certified by the American Board of Plastic Surgery (ABPS) or the Royal College of Physicians and Surgeons of Canada (RCPS)
- International applicants: Must be a member of their country’s national plastic surgery society (must be a society acceptable to the ASAPS Board of Directors) or a member of the International Society of Aesthetic Plastic Surgery (ISAPS) —
- Must have attended The Aesthetic Meeting or an ASAPS Symposium exclusively organized and managed by the Society within the last 4 years

Want to Become a Member of The Aesthetic Society?

At The Aesthetic Meeting, visit ASAPS in Booth #529 and meet Marissa Simpson, Membership Manager. She can help answer all of your questions and set you on the Membership pathway!
Introducing TempSure™
Beautifully Intelligent™
RF Technology

Expandable RF Aesthetic Platform

- **Face handpieces** minimize facial fine lines, wrinkles and tightens skin*
- **Body handpieces** improve the appearance of cellulite
- **Dedicated handpiece treats small areas** and is ideal for women's intimate health applications
- **Powerful 300W generator** with 4MHz RF delivery supports future applications

**Beautifully Intelligent Technology**

- **Therapeutic Logic Control (TLC)** guarantees consistent treatments time after time
- **Temperature monitoring** – real time temperature displayed with response time up to 100x faster than competition¹
- **Safe, consistent and reliable** RF skin tightening* treatments in any practitioner’s hands²

To learn more visit [www.cynosure.com/tempsure](http://www.cynosure.com/tempsure)

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¹Through soft tissue coagulation 2 In-house study 2 State laws vary with regard to delegation of RF treatments by non-physicians and change over time. Consult local regulations. ©2018 Hologic, Inc. All Rights Reserved. Cynosure is a registered trademark of Cynosure, Inc. TempSure and Beautifully Intelligent are trademarks of Cynosure, Inc.
Keeping Up with the Specialty: ASAPS Updates Membership Requirements

Continued from Page 7

- Complete a questionnaire telling us about their plastic surgery training and history
- Complete a summary of surgical cases from the last 12 months
- Provide Two (2) sponsors that are ASAPS Active or Life Members. One must be within their geographical area, while the other can be located anywhere within the U.S. or Canada
- Provide information on all malpractice cases, if any
- Provide verification of accreditation of any surgical facilities that are used
- Provide a listing of their websites and any social media platforms, including print marketing
- Agree to abide by the Society’s Bylaws, Conflict of Interest Policy, and Code of Ethics

- Optional—Submit a personal statement, telling us about themselves and why they want to be an Active Member of ASAPS

Together, united by knowledge, superior education, and a dedication to patient safety, The Aesthetic Society members will continue to form a solid foundation for the specialty. We appreciate your ongoing support as we ensure the Society remains vital and relevant. For those interested in becoming ASAPS Active Members, there are two applications deadlines annually, January 5 and July 1. I encourage you to apply today!

W. Grant Stevens, MD, is an aesthetic plastic surgeon practicing in Marina Del Rey, CA, and serves as President-Elect for The Aesthetic Society.

Promotion to Prospective Patients

ASAPS Logo and Certificate. Distinguish yourself from your competition by using the ASAPS member logo on your website and marketing materials, and receive a membership certificate to display in your office.

Smart Beauty Guide. Patient referral opportunities are available through a complimentary “select a surgeon” listing, by answering patient questions via “ask a surgeon,” and through linking to Smart Beauty Guide (SBG) using our SBG logo on your personal website. Further increase your visibility by purchasing an Enhanced Practice Profile (EPP), allowing patients to more easily find you.

Products. Receive discounts on essential products for your practice, as well as Smart Beauty Guide marketing materials, exclusively for ASAPS members.

Social Media. Receive complimentary twice-monthly digital content for use on your social media accounts and website.

Maximize Your Presence in the Specialty

Networking Opportunities. Enjoy the opportunity serve on committees, and influence change within the aesthetic specialty. ASAPS Active members are also eligible to vote and hold office. Make an impact today!

Interested in learning more about ASAPS Active Membership? Please visit http://bit.ly/2pfpqNj

For ASAPS Candidate for Membership, please visit http://bit.ly/2tQppV1

For ASAPS Residents Program, please visit http://bit.ly/2FWqEqB

*International Members receive online-only subscriptions

We hope you’ll take advantage of this generous program and we’ll see you in New York at The Aesthetic Meeting 2018!

*You are considered a recent graduate if you have completed your plastic surgery training within the last 3 years. Applications must be complete in order to be considered, including the sponsorship form and any accompanying documentation such as your ABPS admissibility letter. The Aesthetic Society cannot guarantee that every applicant will receive complimentary enrollment.

Clyde Ishii, MD, is an aesthetic plastic surgeon practicing in Honolulu, HI, and serves as President of The Aesthetic Society. Chad Tattini, MD, is an aesthetic plastic surgeon practicing in Bloomington, IL, and serves as Chair of the Young Aesthetic Plastic Surgeons Committee.

Hurry and Apply as Space is Limited!

If you’ve been thinking about joining our ASAPS Candidate for Membership Program but the enrollment fees have been holding you back, we have some good news! We are proud to announce that The Aesthetic Society is offering complimentary enrollment in the Candidate for Membership Program for 2018, supported by Allergan Plastic & Regenerative Medicine. This program is available to recent graduates practicing in the United States, and will be given on a first come, first served basis.*

If you are interested in joining, don’t wait! Complete the Candidate for Membership Application today as space is limited! www.surgery.org/professionals/candidate-program

Allergan + LifeCell
Plastic and Regenerative Medicine

Free ASAPS Candidate for Membership Enrollment, Supported by Allergan Plastic & Regenerative Medicine
By Clyde Ishii, MD and Chad Tattini, MD

We hope you’ll take advantage of this generous program and we’ll see you in New York at The Aesthetic Meeting 2018!

*International Members receive online-only subscriptions
THE ANNUAL MEETING OF
The American Society for Aesthetic Plastic Surgery, Inc.
and Aesthetic Surgery Education and Research Foundation

www.surgery.org/meeting2018

Experience the
Global Gathering of
Aesthetic Innovators
and Experts

April 26–May 1, 2018
Exhibits Open April 28–30, 2018

Jacob K. Javits
Convention Center
New York, NY

THE AESTHETIC MEETING 2018

PROGRAM DETAILS

WE ARE AESTHETICS.
Dear Colleagues,

On behalf of the American Society for Aesthetic Plastic Surgery (ASAPS) and the Aesthetic Surgery Education and Research Foundation (ASERF), it is our pleasure to welcome you to The Aesthetic Meeting 2018 in New York, the global gathering of innovators and aesthetic experts. The Aesthetic Meeting is designed for those surgeons passionate about connecting with brilliant minds, learning about groundbreaking advances, and building a successful practice. Our goal is for you to return home with renewed passion, enhanced skills, and ideas for practice growth.

We would like to bring your attention to two key happenings at The Aesthetic Meeting. First, this year will see increased focus on the Society’s research arm, ASERF, as we celebrate its 25 years of scientific advances. While you may be familiar with ASERF’s popular Premier Global Hot Topics, offered each year at The Aesthetic Meeting, that is but the tip of the ASERF iceberg. Your donations help cutting-edge aesthetic surgery research, the results of which benefit us all. We invite you to learn more about this exceptional organization, its important research, and grant funding possibilities during the meeting. Additionally, make sure to bid to win during the ASERF Silent Auction, as the proceeds help us ensure our research efforts remain vital. And ASERF Members and those who make donations to ASERF at The Aesthetic Meeting will receive special lapel pins. Donations can be made at the Registration Desk, the ASERF booth, or go to www.aserf.org to make your gift online.

Secondly, please join us at the Presidential Welcome Celebration on Saturday, April 28 at 7:00pm at the Marriott Marquis Times Square. This will be a fun night of food, drinks, and discovering “What Kind of New Yorker Are You?” This social event is always enjoyable and gives us a chance to thank you for your support of our Societies.

We know that you value the exceptional education you gain each year from The Aesthetic Meeting, and this year promises to be filled with new insights and practice-changing education. See you in New York!

Thank you,

Clyde Ishii, MD
President
American Society for Aesthetic Plastic Surgery

Barry DiBernardo, MD
President
Aesthetic Surgery Education & Research Foundation

Scientific Sessions Learning Objectives
• Achieve reproducible, safe aesthetic surgical outcomes.
• Assess new creativity in delivering optimum results for each individual patient through mastering the interplay of aesthetic variables, the new non-surgical modalities and techniques and their interactions with classic procedures.
• Analyze case studies on the treatment of complications.
• Interpret and apply Evidence-Based Medicine principles in your aesthetic surgery practice.
• Identify the controversies and challenges of today’s aesthetic surgery procedures and practices.
• Identify emerging techniques and trends in cosmetic surgery and cosmetic medicine and their potential applications in your practice.
• Recognize the latest techniques in the prevention of, and treatment of, complications.
• Develop a plan to implement an ethical, effective, technically safe and interactive work environment.
• Employ business and marketing strategies to enhance practice performance for physicians and staff.
• Incorporate a “culture of safety” into your practice.
• Communicate effectively to provide realistic patient expectations.

Program Committee
William P. Adams, Jr., MD—Chair
Jamil Ahmad, MD—Vice Chair
Frank E. Barone, MD
Jay W. Calvert, MD
Al Cohn, MD
Daniel A. Del Vecchio, MD
Trent D. Douglas, MD
Heather J. Furnas, MD
Grady Core, MD
Christine Hamori, MD
Joseph Hunstad, MD
Lawrence Iteld, MD
Michael R. Lee, MD
Herluf G. Lund, MD
Stephen E. Metzinger, MD
Kiya Movassaghi, MD, DMD
James D. Nammoun, MD
Tracy M. Pfeifer, MD
Jason Roostaeian, MD
Kevin Small, MD
Chris Surek, DO
Douglas S. Steinbrech, MD
Marissa J. Tenerbaum, MD
Neil Tanna, MD
Oren M. Tepper, MD
Lorne K. Rosenfield, MD
Simeon H. Wall Jr., MD
Steven G. Wallach, MD
Presidential Welcome Celebration

THE AESTHETIC MEETING 2018

What Kind of New Yorker Are You?
Food, Drinks and Fun!

Saturday, April 28th • 7pm – 9pm
Marriott Marquis Times Square – Broadway Ballroom 6th Floor
Business/Cocktail Attire • No One Under 18 Admitted • Ticket Required
It's hard to believe that in just a few short weeks we will be gathering once again for the annual global gathering of innovators and aesthetic experts, The Aesthetic Meeting 2018. This year, we will be meeting in New York City at the Javits Convention Center, April 26–May 1, 2018. Here you'll learn from the best and brightest minds in aesthetic plastic surgery, as they share the latest in technological advances and techniques. Plus, with our special Staff Sessions and new Tech Tuesday, both ideal for practice staff, you and your team can return home with an array of ideas which can help your practice evolve and grow. (See page 14–15 of this Aesthetic Society News for more information on staff opportunities at The Aesthetic Meeting.)

If you are an aesthetic plastic surgeon passionate about connecting with brilliant minds, learning ground-breaking new advances, and building a successful practice, The Aesthetic Meeting is the leading must-attend educational event of the year. With live demonstrations and courses taught by the finest surgeons and professionals in the specialty, The Aesthetic Meeting has become the gold standard in aesthetic education.

Full meeting information can be found at www.surgery.org/meeting2018, but I wanted to draw your attention to some exciting opportunities occurring at The Aesthetic Meeting 2018:

“Can’t Miss” Presentations
• Keynote Presentation—The Plastic Surgeon Athlete: Top Five Pearls for a Long, Productive Career in the OR—Eric Goodman, DC
• Simple and Safe Lower Eyelid Rejuvenation Surgery—Glenn Jelks, MD
• Interactive Video: Breast Augmentation Mastopexy—Mitchell Brown, MD
• Interactive Video: Novel Concepts in Aesthetic Plastic Surgery for Men—W. Grant Stevens, MD
• Transgender Surgery—Rachel Bluebond-Langner, MD and Hugh McLean, MD
• Experience the Dynamic Global Plastic Bowl Challenge III—Be there to cheer on your country!
• Hot Topics in Breast Surgery—ALCL, Texture, Biofilms—Jamil Ahmad, MD; Bradley Calobrace, MD; Mark Clemens, MD; Anand Deva, MD
• Best of ASAPS 2017 Symposia—Highlights from the Breast & Body Symposium (San Francisco), the Facial & Rhinoplasty Symposium (Las Vegas), and the Aesthetic Cruise (England, Scotland, Norway).

Outstanding Educational Opportunities
• ASAPS/ASAPS GLUTEAL SYMPOSIUM
  Thursday, April 26, 12:30pm–6:00pm (at Javits Convention Center). ASAPS and ISAPS are proud to collaborate on this dynamic symposium with a renowned faculty exploring the latest buttocks enhancement options (additional fee).
• ASERF’s Premier Global Hot Topics
  Friday, April 27, 1:00pm–6:30pm (at the Marriott Marquis Times Square). What’s Hot? What’s Not? Make sure you plan to arrive on time to attend this energy-packed, lively course covering the latest trends and techniques in aesthetic plastic surgery (additional fee).
• TECH TUESDAY: WHAT YOU NEED TO KNOW TO PROTECT YOUR PATIENTS AND YOUR PRACTICE
  Tuesday, May 1, 8:00am–12:00pm. Dynamic morning facilitated by James Grotting, MD (included in your registration fee).
  Please visit www.surgery.org/meeting2018 for more details.

The Aesthetic Meeting Essentials
• Hotels. Early bookers always get the best deals. Don’t get left behind! For the best rates at the most popular hotels, we encourage you to book your rooms today through the ASAPS room block. www.surgery.org/hotels
• ASERF Silent Auction. The Aesthetic Meeting 2018 auction includes the ability to bid electronically, so that even those who cannot attend the meeting can take advantage of some terrific offers and help the specialty in the process. Details can be found at www.surgery.org/silentauction
• Presidential Welcome Reception. Join us on Saturday, April 28th, 7:00pm–9:00pm, for The Aesthetic Meeting’s social event, which is always a lot of fun. Taking place in the Broadway Ballroom on the 6th floor of the New York Marriott Marquis Times Square, food, drinks and fun will be found as we explore the wonderful things the city has to offer. Come and discover “What Kind of a New Yorker are You?” Business attire. No one under 18 permitted. Ticket required.

The Aesthetic Marketplace. In the Aesthetic Marketplace, make sure to visit not only the ASERF Silent Auction and our wonderful exhibitors, but also to attend the short presentations at the Practice Changers Theaters in Booth #1149, which take place during selected coffee breaks and lunches. These are great opportunities to learn about new techniques, products and opportunities which can help your practice run even better. Also, make sure to get you picture taken in the “We are Aesthetics” photo booth!

Credits. At The Aesthetic Meeting 2018, you’ll be able to earn up to 50.25 AMA PRA Category Credits. Attend the entire 2018 Scientific Session and earn 19.25 CME credits. An additional 31 credits are designated for special seminars and optional courses. Earn up to 50.25 CME credits by attending a course in every time frame offered and the entire Scientific Sessions. CME credits are subject to change.

For complete program details, please see pages 16–23 of this issue of Aesthetic Society News, or learn more about this premier global gathering of aesthetic innovators and experts at www.surgery.org/meeting2018. I look forward to seeing you all in New York!

William P. Adams, Jr., M.D., is an aesthetic plastic surgeon practicing in Dallas, TX, and serves as the Chair of the ASAPS Program Committee.
FOR YOUR STAFF

EDUCATE YOUR STAFF, IMPROVE YOUR PRACTICE

Whether your staff is in need of the latest clinical education or tips on how to create a more efficient and effective practice, The Aesthetic Meeting 2018 has just what you’re looking for!

THE AESTHETIC MEETING 2018 STAFF COURSES

For educational opportunities for Office Personnel, Registered Nurses, PAs and Nurse Practitioners, please visit www.surgery.org/meeting2018/staff

April 30–May 2, 2018

Three informative Practice Management Sessions await you and your staff on Sunday, Monday and Tuesday covering everything to maintain a well-run practice.

SOCIETY OF PLASTIC SURGICAL SKIN CARE SPECIALISTS (SPSSCS) ANNUAL MEETING

Thursday, April 26 and Friday, April 27
Marriott Marquis Times Square

Saturday, April 28 and Sunday, April 29
Javits Convention Center

www.spsscs.org/meeting2018

We heard you! SPSSCS will be meeting closer to the ASAPS meeting for your staff to expand their opportunities for education. Register your Office Personnel, Registered Nurses, PA’s and Nurse Practitioners for this meeting and then have them stay and take in all that ASAPS offers. Educating your staff will in turn help your practice.

Thursday, April 26
General Session

Friday, April 27
ASAPS Cosmetic Medicine

Saturday, April 28
General Session

Sunday, April 29
Optional Post-Meeting Courses

FOR DETAILED COURSE DESCRIPTIONS AND FEES PLEASE VISIT WWW.SURGERY.ORG/MEETING2018
CREATE YOUR STAFF EXPERIENCE AT THE AESTHETIC MEETING!

Friday, April 27
Dive into the World of Effective Practice Management by Choosing from These Educational Courses*
8:00am–12:00pm
S7 Re-Designing Your Aesthetic Practice—How to Get Beyond Today*
Co-Chairs: Mark Jewell, MD and Robert Singer, MD

Presenters:
Barry Fernando, MD, Michael Edwards, MD, Mary Lind Jewell, RPT, and Tom Seery

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

116 Social Media Workshop—Twitter, Facebook, RealSelf *
Thomas Seery, Maureen Ezekwugo and Rich Low

211 The Patient Attraction and Conversion Blueprint*
Catherine Maley

214 A Basic and Beginner Introduction to Social Media*
Matthew Nykiel, MD

Saturday, April 28
Creating a Successful Practice is the Focus of Saturday's Educational Courses*
9:00am–4:30pm
S14 Skills for Successful Patient Coordinators*
Karen Zupko, President, KarenZupko & Associates

12:30pm–1:30pm
309 Ten Steps to Online Marketing Success*
Peter Houtz, MD

310 Make Your Website a Lead Generator and E-Commerce Juggernaut and Weed Out Price Shoppers in the Process*
Jonathan Kaplan, MD

Sunday, April 29
A Jam-Packed Day Begins with Staff Sessions (included with Staff Registration) and a Variety of Educational Course Options.*
7:45am–12:00pm
Staff Sessions (included with Aesthetic Meeting Staff Registration)

9:00am–11:00am
S17 Patient Coordinator Alums: Overcoming Scheduling Objections*

12:00pm–1:00pm
S18 Financial Management for Spouses and Managers*

NEW 419 Controversies in Online Marketing with Expert Q&A*
Ryan Miller, Michael Bogdan, MD, Keith Humes, and Sam Peek

12:00pm–2:30pm
S19A Physician Extender (RN/NP/PA) Injector Competence Training—Part 1–Understanding the Basics of Injection Techniques with Neurotoxins and Hyaluronic Acid Dermal Fillers*
Miles Gravier, MD, Z. Paul Lorenc, MD

3:00pm–5:30pm
S19B Physician Extender (RN/NP/PA) Injector Competence Training—Part 2—Advanced/Combination Injection Techniques with Neurotoxins and the Array of FDA-Approved Dermal Fillers*
Miles Gravier, MD, Z. Paul Lorenc, MD

12:30pm–4:30pm
S20A The Institute for Laser and Light Based Technology—Foundations of Light and Laser*
John Hoopman

4:30pm–6:30pm
S20B Laser Safety Officer Training*
John Hoopman, LSO

2:00pm–4:00pm
S14 Developing Systems in Aesthetic Practice to be Successful in the 21st Century*
Luis Rios, Jr., MD, and Douglas Steinbrech, MD

Monday, April 30
With Staff Sessions (included with Staff Registration) and Light and Laser Courses*, You’re Sure to Find Something of Value Monday at The Aesthetic Meeting.
8:00am–12:30pm
Staff Sessions (included with Aesthetic Meeting Staff Registration)

2:00pm–4:00pm
NEW 416 The Marketing Totem Pole*
Jon Hoffenberg

4:30pm–6:30pm
NEW 711 How Snapchat and Instagram Stories Transformed my Practice (and I Don’t Even Have a Ton of Followers!)*
Jonathan Kaplan, MD

NEW 712 Doubling in Office Booking Ratios*
Jon Hoffenberg

713 Cultivating Authority Online: Where Reputation and Rankings Intersect*
Ryan Miller

Tuesday, May 1
Learn How to Keep Your Patients and Practice Protected During Tech Tuesday
8:00am–12:30pm
Tech Tuesday (included with Aesthetic Meeting Staff Registration)

Look for Staff Session and Tech Tuesdays details under Sunday, Monday and Tuesday.

For More Information and Attendance Requirements, Please Visit www.surgery.org/meeting2018

*Additional fee applies.
THE AESTHETIC MEETING

THURSDAY, APRIL 26, 2018

6:30am–6:00pm  Registration Open
                Javits Center
6:30am–8:00pm  Registration Open
                Marriott Marquis
8:15am–11:30am ASAPS Board
                Meeting
12:30pm–2:30pm ASERF Board
                Meeting
7:00pm–8:30pm  Faculty/VIP/
                International
                Reception,
                Marriott Marquis

FRIDAY, APRIL 27, 2018

6:30am–6:30pm  Registration Open
                Javits Center and
                Marriott Marquis

EDUCATIONAL COURSES*

FACE
7:30am–2:00pm
S6 Cosmetic Medicine
(2018)
(SC A N O E)
Chair: Lorenz

PRACTICE MANAGEMENT
8:00am–1:00pm
S7 Re-Designing Your Aesthetic Practice
—How to Get Beyond Today
(SC A N O E)
Co-Chairs: Jewell/Singer

RESIDENTS ONLY
8:00am–1:00pm
S8 Residents and Fellows Forum [RF]
Co-Chairs: Kahn/Higdon
2:00pm–4:00pm
NEW S9 Filler Injection Crash Course
for Residents and Fellows
Higdon/Kenkel/Lamb/Lambr/Seiber/
Sinn/Surek/Zins

RHINOPLASTY
7:00am–12:30pm
S10 Rhinoplasty Symposium 2018
(SC A N O E)
Co-Chairs: Keyes/Berkowitz

OTHER
8:00am–5:00pm
S11 Medical Life Drawing & Sculpture:
The Human Figure
Fairbanks/Fairbanks
1:00pm–6:30pm
S12 Premier Global Hot Topics
(Marriot Marquis)
(SC A N O E)
Co-Chairs: Ahmad/McCormack/Wall

FACE
101/201 Facelift: Planning and
Technique
(SC A N O E)
Marten

BREAST
103 The Lift and Fill Facelift—
Redefining a Natural Look in Facial
Rejuvenation
(SC A N O E)
Rohrich
104 Effective, Efficient, Patient Friendly
Facelifting Using SMAS, Fat and
Tumescent Technique
(SC A N O E)
Bucky
105 Reshaping the Face and Lid-Cheek
Junction
(SC A N O E)
Warren

BODY
106 Planning for Primary Breast
Augmentation: Incision, Pocket, Implant
(SC A N O E)
Lista
BR-107 Shaping the Breast: A
Comprehensive Approach in Primary
Augmentation, Revision Augmentation
and Reconstructive Breast Surgery
(SC A N O E)
Movahaghi

EYES
110 Focus on the Lower Eyelid and
Cheek in Blepharoplasty
(SC A N O E)
Jelks/Jelks
BR-111 Comprehensive
Treatment of Difficult Eyelids, Festoons
and Malar Bags
(SC A N O E)
Asaadi

FOR DETAILED COURSE DESCRIPTIONS AND FEES PLEASE VISIT WWW.SURGERY.ORG/MEETING2018
**PATIENT SAFETY**

**MOC-PS™**

112 Keeping Safe and Out of Trouble: A Fresh Look at the Culture of Patient Safety

Sganoe

Eaves/Perdikis

**PRACTICE MANAGEMENT**

**NEW 113** Keep and Protect More of What You Make: Best Practices in Corporate Structure; Tax Reduction and Asset Protection for Aesthetic Surgeons

Sganoe

Mandell

**MARKETING**

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

Sganoe

Zupko

115 Social Media for Plastic Surgeons by a Plastic Surgeon

Sganoe

Nazarian

116 Social Media Workshop—Twitter, Facebook, RealSelf

Sganoe

Seery/Ezekwugo/Sheie

4:30pm–6:30pm

2-Hour Courses

**FACE**

**MOC-PS™**

203 Customizing the Facelift Procedure for the Individual Patient

S

Thorne

204 Facelift Rejuvenation: Short Scar Facelift, Neck Lift and Temporal Brow Lift

Saganoe

Matarasso

205 Wide Awake Cosmetic Surgery and Minimal Pain Filler Injection

Saganoe

Lalonde

**BREAST**

206 Use of Internal Support Devices to Enhance Outcomes in Breast Surgery

Sganoe

Van Natta

**BODY**

209 Keeping Your Body Contouring Patients Safe: 20 Tips to Better Contouring Strategies and Safer Surgeries

Sganoe

Mentz/Fortes/Hustak/Morales/Newall/Patronella

210 Aesthetic Vaginal Plastic Surgery

S

Triana

**PRACTICE MANAGEMENT**

211 The Patient Attraction and Conversion Blueprint

Sganoe

Maley

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

Sganoe

Zupko/O’iesen

**NEW 213** Starting a Private Practice from Scratch—Lessons and Pitfalls

Sganoe

Douglas/Gallus

**MARKETING**

214 A Basic and Beginner Introduction to Social Media

Sganoe

Nykiel

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**THEME: THE AESTHETIC MEETING**

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**SCIENTIFIC SESSION BLUE**

7:15am–7:30am

Welcome 2017 Annual Meeting Awards

7:30am–8:45am

Opening Panel: Four Critical Concepts to Consider in Any Facelift Technique

Moderator: James Stuzin, MD

Audience Moderators:

William Adams, Jr., MD

Jamil Ahmad, MD

Panelists:

Daniel Baker, MD

Timothy Marten, MD

Foad Nahai, MD

Discussants:

Val Lambros, MD

Richard Warren, MD

8:45am–10:00am

Panel: Critical Decisions in Re-Operative Breast Implant Surgery

Moderator: Frank Lista, MD

Audience Moderators:

Jon Kurkjian, MD

Steve Teitelbaum, MD

Panelists:

Elizabeth Hall-Findlay, MD

Patricia McGuire, MD

Louis Strock, MD

Martine Delerro, MD

Discussants:

Jack Fisher, MD

Craig Layt, MD

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**JOIN IN THE CONVERSATION!**


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**NEED MORE INFO?**

Check online at www.surgery.org/meeting2018 for the latest updates on MOC-PS™ courses.

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**KEY**

S Surgeons

A PAs and Nurse Practitioners

Q Office Personnel

BR Boardroom Breakout

G Spouses

N Registered Nurses

E Exhibitors

C Cadaver Lab

* Additional Fee

All courses/events will be held at the Javits Convention Center unless otherwise noted.
THE AESTHETIC MEETING

SATURDAY, APRIL 28, 2018, cont’d

10:00am–10:30am
Coffee Break in The Aesthetic Marketplace

10:30am–12:00pm
Panel: Subplatysmal Surgery—A New Standard in Cervical Contouring?
Moderator: Charles Thorne, MD
Audience Moderators:
Michael Lee, MD
Oren Tepper, MD

Panelists:
Francisco Bravo, MD
Dino Elyassnia, MD
Gerald O’Daniel, MD
Mario Pelle-Ceravolo, MD

Discussants:
Daniel Baker, MD
Louis Bucky, MD

12:00pm–12:30pm
The Plastic Surgeon Athlete: Top Five Pearls for a Long Productive Career in the OR
Keynote Speaker: Eric Goodman, DC

12:30pm–2:00pm
Lunch in the Aesthetic Marketplace or Optional Courses

2:00pm–3:15pm
Panel: High Definition Body Contouring—Creating Shape Through Lipoplasty, Muscle Etching and Volume Addition
Moderator: Rod Rohrich, MD
Audience Moderators:
Jennifer Capla, MD
Kye Higdon, MD

Panelists:
Ashkan Ghaemian, MD
Alfredo Hoyos, MD
Douglas Steinbrech, MD
Simeon Well, Jr, MD

Discussants:
Jeffrey Kenkel, MD
Henry Mentz, MD

3:15pm–4:00pm
Panel: Point/Counterpoint: Upper Lid and Brow Rejuvenation
Moderator: Sherrell Aston, MD
Audience Moderators:
Melinda Haws, MD
Sammy Sinno, MD

Panelists:
Timothy Marten, MD vs David Hidalgo, MD
Patrick Sullivan, MD vs Mark Codner, MD

Discussant: Charles Thorne, MD

4:00pm–4:30pm
Coffee Break in The Aesthetic Marketplace

4:30pm–5:45pm
ASAPS Global Plastic Bowl III
Moderator: William Adams, Jr., MD
Audience Moderator: Jamil Ahmad, MD
Teams
Representing North America:
Marissa Tenenbaum, MD
Oren Tepper, MD

Representing South America:
Lina Triana, MD
Humberto Morelli, MD
Representing Europe/Africa:
Patrick Mallucci, MD
Peter Scott, MD
Representing Asia/Australia:
Tim Papadopoulos, MD
Mark Magnuson, MD

Expert Panelists:
Per Heden, MD
Craig Layt, MD
Volney Pitombo, MD
Jennifer Walden, MD

EDUCATIONAL COURSES*

❖ PRACTICE MANAGEMENT
9:00am–4:30pm
S14 Skills for Successful Patient Coordinators
G A N O
Zupko

❖ OTHER
12:30pm–2:00pm
S15 Research and Innovative Technology Luncheon
S A
Adams/Gryskiewicz

1:30pm–3:00pm
S16 Medical Students Interested in Plastic Surgery (For Medical Students Only)
Tenenbaum/Whitfield

12:30pm–1:30pm
1-Hour Courses

❖ FACE
301 Full Facial Fat MicroAugmentation Under Local Anesthesia—Office Based Procedure
S A
Ptak

❖ BREAST
302 Technical Refinements of the Vertical Mammaplasty: A Modified LeJour Approach
Wallach

NEW 303 Pre-Pectoral Breast Augmentation and Reconstruction
S G A N O E
Becker

❖ BODY
304 Labiaplasty and Female Aesthetic Genital Surgery
Alter

BR-305 Ask the Experts: Body Contouring After Bariatric Surgery
S Eaves/Hunstad

NEW 306 Oblique Flankplasty as an Alternative to Lower Body Lift
S Hurwitz

❖ COSMETIC MEDICINE
NEW BR-307 Novel Approach for the Treatment of Spider Veins
S G A N O E
Given

❖ PRACTICE MANAGEMENT
NEW 308 Retirement Planning—Building Value from a Clinical and Business Perspective
S G A N O E
Byrd/Burns

❖ MARKETING
309 10 Steps to Online Marketing Success
S G A N O
Houtz

310 Make Your Website a Lead Generator and E-Commerce Juggernaut and Weed Out Price Shoppers in the Process
S G A N O E
Kaplan

❖ OTHER
NEW 311 Secrets to an Aesthetic Practice: How to Deliver Superior Results and Attract More Patients in 2019
S G A N O E
Rosenfeld

DOWNLOAD THE APP!
In lieu of a Program Book, this year’s Aesthetic Meeting will feature an app with all of the information you need to make your experience a success. Look for download instructions coming soon, via email, to all registered attendees.

FOR DETAILED COURSE DESCRIPTIONS AND FEES PLEASE VISIT WWW.SURGERY.ORG/MEETING2018
SUNDAY, APRIL 29, 2018

6:30am–5:00pm
Registration Open
9:00am–5:00pm
The Aesthetic Marketplace Open
12:00pm–2:00pm
Lunch in The Aesthetic Marketplace
ASAPS/ASERF Member Business Meeting
Luncheon

11:00am–12:00pm
Panel: Perioral Rejuvenation—The Final Frontier
Moderator: Oren Tepper, MD
Audience Moderators: Jason Pozner, MD
Chris Surek, DO
Panelists:
Jonathan Levine, DMD
Arthur Swift, MD
Haiden Himand, MD
Discussants:
Steve Levine, MD
Jason Roostaeian, MD

10:00am–11:30am
Panel: Top to Bottom: Video Variations in Body Contouring Surgery
Moderator: Jeffrey Kenkel, MD
Audience Moderators: Luis Macias, MD
Ryan Austin, MD
Panelists:
Alfredo Hoyos, MD
Joseph Hunstad, MD
Dennis Hurwitz, MD
Todd Pollock, MD
Discussants:
Robert Cohen, MD
Mary Gingrass, MD

11:30am–12:00pm
Panel: Gender Confirmation: Top Surgery
Moderator: Loren Schechter, MD
Audience Moderators: Meghan Nadeau, MD
David Sieber, MD
Panelists:
Rachel Bluebond-Langner, MD
Hugh McLean, MD
Discussant: Lawrence Draper, MD

SCIENTIFIC SESSION BLUE

7:45am–8:45am
Panel: It’s More than Just a Filler—Benefits Beyond Volumizing
Moderator: James Stuzin, MD
Audience Moderators: Clifford Clark, MD
Jacob Unger, MD
Panelists:
Jonquille Chantrey, MD
Steve Fagien, MD
Mark Magnusson, MD
Arthur Swift, MD
Discussants:
Laurie Casas, MD, Val Lambros, MD

8:45am–9:30am
Mini Panel: Hot Topics in Female Cosmetic Genital Surgery—Does It Really Work?
Moderator: Julie Khanna, MD
Audience Moderators: Camile Cash, MD
Patricia McGuire, MD
Panelists:
Heather Furnas, MD
Otto Piacik, MD
Francisco Canales, MD
Discussants:
Christine Flammori, MD, John Hunter, MD

9:30am–10:00am
Coffee Break in The Aesthetic Marketplace

10:00am–11:00am
Panel: Hot Topics in Breast Surgery—ALCL, Texture, Biofilms
Moderator: Nolan Karp, MD
Audience Moderators: William Adams, Jr., MD
Melinda Haws, MD
Panelists:
Jamil Ahmad, MD
Bradley Galbraite, MD
Mark Cierns, MD
Anand Deva, MD
Discussants:
Caroline Glicksman, MD
Peter Lennox, MD

SCIENTIFIC SESSION ORANGE

7:45am–8:15am
Interactive Video: Keys to a Safe and Optimized Result in Buttock Augmentation
Presenter: Daniel Del Vecchio, MD
Discussants:
Henry Mentz, MD
Jeffrey Gusenoff, MD

8:15am–9:30am
Panel: Buttock Augmentation Mini Debates
Moderator: Jamil Ahmad, MD
Audience Moderators:
Mark Albert, MD
Tracy Pfeifer, MD
Panel:
Fat vs Implants
Simeon Wall, Jr., MD vs Douglas Senderoff, MD
Intermuscular vs Subcutaneous
Alfred Hoyos, MD vs Daniel Del Vecchio, MD
Fat vs Implants
Syringe Injection vs Roller Pump
Ashkan Ghandhari, MD vs Daniel Del Vecchio MD
Discussants:
Raul Gonzalez, MD
Steven Teitelbaum, MD

9:30am–10:00am
Coffee Break in The Aesthetic Marketplace

RAPID FIRE SESSION

Session Chair: Oren Tepper, MD

8:00am–8:45am
Scientific Paper Forum—Breast and Body Part 1
Moderator: Nolan Karp, MD

8:45am–9:30am
Scientific Paper Forum—Breast and Body Part 2
Moderator: Jeffrey Kenkel, MD

9:30am–10:00am
Coffee Break in The Aesthetic Marketplace

10:00am–11:00am
Hot Topics New Tech Quick Hits
Moderators:
Simeon Wall, Jr., MD
Oren Tepper, MD

11:00am–12:00pm
Scientific Paper Forum—Face and Rhinoplasty
Moderator: Sherrell Aston, MD

FOR DETAILED COURSE DESCRIPTIONS AND FEES PLEASE VISIT WWW.SURGERY.ORG/MEETING2018
EDUCATIONAL COURSES*

PRACTICE MANAGEMENT
9:00am–11:00am
S17 Patient Coordinator Alums: Overcoming Scheduling Objections
G A N C
Zupko

12:00pm–1:00pm
S18 Financial Management for Spouses and Managers
G O
Zupko

COSMETIC MEDICINE
12:00pm–2:30pm
S19A Physician Extender (RN/NP/PA) Injector Competence Training—Part 1—Understanding the Basics of Injection Techniques with Neurotoxins and Hyaluronic Acid Dermal Fillers
A N
Graiver/Lorenc

3:00pm–5:30pm
S19B Physician Extender (RN/NP/PA) Injector Competence Training—Part 2—Advanced/Combination Injection Techniques with Neurotoxins and the Array of FDA-Approved Dermal Fillers
A N
Graiver/Lorenc

12:30pm–4:30pm
S20A The Institute for Laser and Light Based Technology—Foundations of Light and Laser
S A N O
Hoormap

4:30pm–6:30pm
S20B Laser Safety Officer Training
S A N O
Hoormap

2:00pm–6:30pm
4-Hour Courses

BREAST
401/501 Aesthetic Breast Reconstruction: The New Paradigm in Breast Surgery
S G A N O
Namnoum/Brown/Bucky/Grotting/Zienowicz

BREAST
402/502 Arms, Breast, Back, Buttocks and Thighs Following Major Weight Loss
S G A N O
Hurstad/Rubin

403/503 Gluteal Augmentation
S A N
Abel de la Peña/Gonzalez/Mendez

PRACTICE MANAGEMENT
404/504 What Patients Really Want
S G A N O
Eaves/Fiala/Olesen/Perdikis/Seery

2:00pm–4:00pm
2-Hour Courses

FACE
405 Advanced Techniques for Rejuvenation of the Neck and Lower Face
S
Sullivan/Marten/Levine

NEW 408 Secrets to Facial Rejuvenation with the Pinch Rhytidoplasty and Blepharoplasty 2018
S G A N O E
Rosenfield

BREAST
BR-406 Transaxillary Endoscopic Breast Augmentation: Processes and Refinements to Improve Patient Outcomes
S E
Strock/Core

BR-407 Augmentation Mastopexy—Avoiding Complications
S
Kortesis/Restifo

BODY
S A N
Stoker/Chia/Theodorou/Hoyos

RHINOPLASTY
410 Understand Rhinoplasty in Two Hours
S A N
Constantian

411 Advances in Primary and Revision Rhinoplasty—How to Get Better Results
S
Rohrich/Ahmad

EYES
412 Injection Techniques for Tear Trough and Peri-Orbital Area: Minimize Complications and Optimize Results
S
Hirmand

413 Oculoplastic Surgery for the Plastic Surgeon
S G A N
Codner/Jeels/Jeels

414 Advanced Upper Lid Aesthetic Surgery
S
Mendelson
**Cosmetic Medicine**

415 The Injector’s Toolbox: Staying Safe, Accurate and Reproducible  
**SAHN**  
Surek/Lamb

416 Hot Devices in 2018  
**SGANOE**  
DiBernardo/Bass/Pozner

**Practice Management**

418 How to Plan and Execute Your Transition from a Career in Plastic Surgery  
**SGANOE**  
Fernandez

514 Developing Systems in Aesthetic Practice to be Successful in the 21st Century  
**SGANOC**  
Rios/Steinbrech

**Marketing**

419 Controversies in Online Marketing with Expert Q&A  
**SGANOE**  
Bogardan/Humes/Miller/Peek

**Other**

420 Aesthetic Neural Network (ANN) Demonstration/Education  
**SGANOE**  
Boyer/Schmidt

4:30pm-6:30pm  
2-Hour Courses

**Face**

505 Neck Lift: Planning and Technique  
**SA**  
Martens

506 Optimizing the Neck Lift: Platysmaplasty, Bands and Submandibular Gland without Submental Incision  
**SA**  
Gonzalez

**Breast**

MOCPS™

507 Optimizing Outcomes in Breast Augmentation and Augmentation-Mastopexy  
**SGANOE**  
Adams/Sieber

New 508 The Inframammary Fold and Soft Tissue Relationships in Breast Augmentation: Strategies for Control, Complication Prevention and Repair  
**SGANOE**  
Strock/Caplin

**Body**

MOCPS™

BR-509 Abdominoplasty: Current Concepts and Techniques to Improve Outcomes  
**S**  
Rios/Aly/Pollock

510 Liposuction and Body Contouring  
**SGANOC**  
Saltz/Ribeiro/Matos

New 511 The Corset Body Lift: The Art of Waistline Shaping in the Massive Weight Loss Patient  
**SGANOE**  
Moya

**Rhinoplasty**

BR-512 Principles of Structural Rhinoplasty  
**S**  
Cerkes

**Cosmetic Medicine**

513 Micro-Needling: Induced Collagen Formation and Delivery System for Skin and Hair Enhancement  
**SGANOE**  
Sasaki

**Marketing**

515 Content Dynasty: A Step by Step Guide to Building Your Online Empire  
**SGANOE**  
Peek

New 516 Insider Tips from 5 Socially-Savvy Plastic Surgeons; Using Online Tools to Connect with Patients  
**SGANOE**  
Youn/Walden/Furnas/Khorsandi/Schulman/Lewis

517 Taking Control of Your Online Reputation  
**SGANOE**  
Humes

**Other**

518 New Advances in Hair Restoration  
**SGANOE**  
Barrera/Fisher/Jebeib/Vogel

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**MONDAY, APRIL 30, 2018**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>6:30am–5:00pm</td>
<td>Registration Open</td>
</tr>
<tr>
<td>9:00am–5:00pm</td>
<td>The Aesthetic Marketplace Open</td>
</tr>
<tr>
<td>12:30pm–2:00pm</td>
<td>Lunch in The Aesthetic Marketplace</td>
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</tbody>
</table>

**Scientific Session Blue**

7:45am–9:00am  
Junior—Senior Plastic Surgery Prom: Put Me in, Coach, and See What I Can Do  
Moderator: Jamil Ahmad, MD  
Presenters/Panelists: Oren Tepper, MD/Nicholas Taibbi, MD/Jason Roostaan, MD/Jeffrey Kenkel, MD/Neil Tanna, MD/Charles Thorne, MD  
Discussants: Bahman Guyuron, MD

9:15am–9:45am  
Special Presentation: Simple and Safe Lower Eyelid Rejuvenation Surgery  
Presenter: Glenn Jolks, MD  
Discussants: Charles Thorne, MD/Richard Warren, MD

9:45am–10:15am  
Coffee Break in The Aesthetic Marketplace

10:15am–11:30am  
Panel: C’Mon Man Roundtable: Urban Legends in Plastic Surgery—What’s the Deal, Man?  
Separating Fact from Fiction  
Moderator: William Adams, Jr., MD  
Panelists: Mark Epstein, MD/Nolan Karp, MD/Frank Lista, MD/W. Grant Stevens, MD/Steve Teitelbaum, MD

11:30am–12:15pm  
Special Presentation: Masterclass: Analysis and Technique for Facial Fillers  
Presenter: Arthur Swift, MD  
Discussants: Haideh Hirmand, MD/Z. Paul Lorenc, MD

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**Key**

- S: Surgeons  
- A: PAs and Nurse Practitioners  
- O: Office Personnel  
- BR: Boardroom Breakout  
- G: Spouses  
- N: Registered Nurses  
- E: Exhibitors  
- C: Cadaver Lab  
*Additional Fee

All courses/events will be held at the Javits Convention Center unless otherwise noted.

For detailed course descriptions and fees please visit www.surgery.org/meeting2018

Program Subject to Change
RAPID FIRE SESSION

**Session Chair:** Jason Roostaeian, MD

**8:00am–8:45am**
Interactive Video: Breast Augmentation Mastopexy

**Presenter:** Mitchell Brown, MD

**Discussants:**
Bradley Calabrace, MD
Tracy Pfeifer, MD

**8:45am–9:45am**
Panels: Management of Facial Fat and Filler Complications

**Moderator:** Robert Singer, MD

**Audience Moderators:**
Patrick Sullivan, MD
Gary Tuma, MD

**Panelists:**
Val Lambros, MD
Z. Paul Lorenc, MD
Foad Nahai, MD

**Discussants:**
Clifford Clark, MD
Louis Bucky, MD

**9:45am–10:15am**
Coffee Break in The Aesthetic Marketplace

**10:15am–11:45am**
Panels: Finesse Rhinoplasty: My Greatest Technical Pearl

**Moderator:** Jamil Ahmad, MD

**Panelists:**
Jay Calvert, MD
Nazim Cerkes, MD
Ashkan Gharavi, MD
Geoffrey Keyes, MD
Aaron Kosins, MD
Volney Plombo, MD

**Discussants:**
Bahman Guyuron, MD
Rod Rohrich, MD

**11:45am–12:30pm**
Interactive Video: Novel Concepts in Aesthetic Plastic Surgery for the Male

**Presenter:** W. Grant Stevens, MD

**Discussants:**
Herluf Lund, MD
Marissa Tenenbaum, MD

FOR DETAILED COURSE DESCRIPTIONS AND FEES PLEASE VISIT WWW.SURGERY.ORG/MEETING2018
COSMETIC MEDICINE
609 Intelligent Choices in Injectables: Complications, Strategies and Combination Therapy
Kinney/Lorenc

610 Advances in Skin Resurfacing
Obagi/Bashey

PRACTICE MANAGEMENT
611 Maximizing Time and Financial Efficiency by Utilizing Technology and Patient Consultants
Rios

612 Reading Prospective Patients More Effectively and Improving Scheduling Results
Zupko

PATIENT SAFETY
BR-613 Managing and Mitigating Aesthetic Risks
Moore/Boyd/Martin

MARKETING
NEW 614 Non-Core Aesthetic Providers Are Nipping At Your Heels: How You Can Win
Duncan/Fox/Low/Oleson/Reisman

NEW 616 The Marketing Totem Pole
Hoffenberg

OTHER
NEW 312 ASERF Bootcamp: So You Want to do Research?
Brown/Clemens/DiBernardo/Pannucci/Sarwer

4:30pm–6:30pm
2-Hour Courses

FACE
MOCPS™
703 Safety in Facelifting: How to Avoid Complications and How to Treat Them
Zins/Moon

BREAST
BR-704 Challenging Cases in Revision Breast Implant Surgery
Brown/Bucky

705 All Seasons Vertical Augmentation/Mastopexy
Swanson

BODY
BR-706 Maximizing Aesthetics in Abdominoplasty
Pollock

RHINOPLASTY
707 Multicultural Rhinoplasty: Anatomy, Analysis, and Techniques for Success
Ghavami/Gryskiewicz

COSMETIC MEDICINE
708 Combining Fillers and Neurotoxins for Pan-Facial Rejuvenation
Kane

PATIENT SAFETY
709 Cutting Edge Topics in Patient Safety with the Masters
Rios/Young/Adams/Reisman/Delorenzi/Davison

NEW 710 Challenges and Safety in Combined and High-Risk Aesthetic Procedures: What Are the Limits? Mortality and Morbidity, Postoperative Pain Relief, and Quick Recovery
Kalaaj/Aly/Higdon/Triana

MARKETING
NEW 711 How Snapchat and Instagram Stories Transformed my Practice (and I Don’t Even Have a Ton of Followers!)
Kaplan

NEW 712 Doubling In Office Bookings
Hoffenberg

713 Cultivating Authority Online: Where Reputation and Rankings Intersect
Miller

TUESDAY, MAY 1, 2018
6:30am–12:00pm
Registration Open
12:00pm–2:00pm
ASAPS New Board Meeting

THE BEST OF ASAPS SYMPOSIA
8:00am–9:30am
Best of ASAPS Breast and Body—Insight Session
Jeffrey Kenkel, MD and William Adams, Jr., MD

9:30am–11:00am
Best of ASAPS Facial and Rhinoplasty Symposium
Charles Thorne, MD and Louis Bucky, MD

11:00am–12:00pm
Best of The Aesthetic Cruise 2017
W. Grant Stevens, MD and Melinda Haws, MD

TECH TUESDAYS
8:00am–12:00pm
What You Need to Know to Protect Your Patients and Your Practice
Facilitator: James Grotting, MD
- Cybersecurity
- What Do I Do If I’m Victimized by Cyber Criminals?
- How Ransomware Works
- Internet Connectivity
- Patient Consents—Notice of Privacy Practices
- Recommendations to Safeguard Your Privacy
- HITRUST Certified Cloud Data Storage & HIPAA
- Group Discussions/Scenarios/Analysis

Presenters:
Robert Aicher, Esq
Jack Danasy
R. Brannon Claytor, MD
Kye Higdon, MD
Ed Purkiss
Jason Wreath

KEY
S Surgeons
P PAs and Nurse Practitioners
O Office Personnel
BR Boardroom Breakout
G Spouses
N Registered Nurses
E Exhibitors
C Cadaver Lab
* Additional Fee

All courses/events will be held at the Javits Convention Center unless otherwise noted

FOR DETAILED COURSE DESCRIPTIONS AND FEES PLEASE VISIT WWW.SURGERY.ORG/MEETING2018
**General Information**

**Badges**
You may retrieve your badge at pre-registration at the NY Marriott Marquis Time Square on the 8th floor lobby level Liberty Room:
Thursday, April 26, 6:30am – 8:00pm and Friday, April 27, 6:30am – 6:30pm; and at the Javits Convention Center Hall A Lobby Thursday, April 26th – Tuesday, May 1st.

**Children**
Due to safety concerns and other issues, please note that children under 18 are not allowed in The Aesthetic Marketplace (Exhibits) at any time. Additionally, no one under 18 is allowed at the Presidential Welcome Celebration. We thank you for your cooperation.

**Claim Your CME Credits**
Attendees are required to log into www.surgery.org/eval and complete an electronic or online form[s] to claim credits for each educational activity. Your credits are unclaimed unless you complete this process.

The AMA requires that you certify the number of CME credits commensurate with your participation. After the meeting concludes, you will receive email reminders to navigate to www.surgery.org/eval to claim your CME. If you have any questions, please contact Candace@surgery.org or call the Central Office at 562-799-2356.

For ASAPS Members: CME credits will be uploaded to the “My CME Record” on the ASAPS Members Only Portal, www.asaps.org. After the meeting, if you complete your evaluation form[s] and claim your credits, you will be notified in an email when your credits are uploaded to your individual online CME Record. You may use www.asaps.org to create specific cycles for your credentialing and licensure CME requirements.

Also for ASAPS members, your claimed CME credits will be submitted to the combined plastic surgery database maintained by ASPS by July 2018. We rely on ASPS to upload the credits to your individual record.

**CME Credit Designation Statement**

The American Society for Aesthetic Plastic Surgery designates this live activity for a maximum of 50.25 AMA PRA Category I Credits™. Physicians should claim only credit commensurate with the extent of their participation in the activity.

The Scientific Sessions are designated for 19.25 credits. An additional 31 credits are designated for special seminars and optional courses. Earn up to 50.25 CME credits by attending a course in every time frame offered and the entire Scientific Sessions. CME credits are subject to change.

**Corporate Satellite Symposia**
Several exhibiting companies will be sponsoring educational programs or promotional events in the evenings, so as not to conflict with The Aesthetic Society’s educational programming. Symposia details including date, time and location are provided in the Aesthetic Meeting App and on www.surgery.org/meeting2018 under program. These events are not sponsored or endorsed by ASAPS/ASRF.

**Disclaimer**
The content of this program is presented solely for educational purposes and is intended for use by medical practitioners in the plastic surgery specialty. This material is intended to express the opinions, techniques or approaches of the authors and presenters which may be beneficial and/or of interest to other practitioners. ASAPS sponsorship of this program and/or advertising are not to be construed, in any fashion, as an endorsement of the materials or products presented.

**Disclosures**
Relationships with commercial entities, as defined by ACCME (a commercial interest is any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients) will be disclosed online and listed on the App. This regulation includes spousal relationships, yet is narrow in scope. For example, a trademarked procedure is not a commercial interest as defined by ACCME. Hospitals and surgery centers that offer these procedures are not commercial interests. An individual who does work as a provider of clinical services to patients, not an ACCME-defined commercial interest. Consulting or ownership relationships in practice management/marketing, and social media/Internet are examples of non-commercial relationships and are not printed in the disclosure list. Additionally, the Society’s disclosure list does not include any CV items such as volunteer positions, relationships with publishers or titles of textbooks. However, the faculty oftentimes discloses these relationships to the Society and they may include these items on their first slide. If you have questions, please contact the Aesthetic Society’s Director of CME, Candace Spradley at candace@surgery.org. For a list of The Aesthetic Meeting 2018’s faculty disclosures, please see The Aesthetic Meeting’s app, available soon in the Apple App and Google Play stores.

**Emergency Medical Care and First Aid**
For all emergencies at the Javits Convention Center you may please dial 212-216-2222 from your cell phone.

**MOC-PS™ Maintenance of Certification**
If you are a Board-Certified Plastic Surgeon Licensed after 1995, this applies to you. The American Board of Plastic Surgery requires you to participate in its structured life-long learning and self-assessment program, Maintenance of Certification, MOC. Every three years, MOC requires you to:

- select a “tracer” procedure
- submit 10 consecutive cases of that tracer procedure
- review a benchmarking report
- complete an MOC-approved course approved for that tracer

If you are working through your MOC and need an approved course in one of these tracers:

- Facelifting
- Augmentation mammoplasty
- Reduction mammoplasty
- Liposuction
- Abdominoplasty
- Patient Safety [for those physicians not in clinical practice]

Look for the MOC-PS™ logo adjacent to the course title. Seven courses have been approved by The American Board of Plastic Surgery and qualify for one of the above tracer procedures within the Cosmetic and/or Comprehensive Modules for MOC-PS™.

**Meeting App**
Download The Aesthetic Meeting 2018 app for the optimal Meeting experience.

- iPhone Users: Go to the Apple APP Store and search, “The Aesthetic Meeting 2018” and tap the download icon.
- Android Users: Go to the Google Play Store, search, “The Aesthetic Meeting 2018” and tap the download icon.

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Meeting Attendance
The American Society for Aesthetic Plastic Surgery, Inc. and the Aesthetic Surgery Education & Research Foundation reserve the right to restrict admission to their meetings to ensure the most favorable educational environment for the attendees.

Patient Safety CME
The Aesthetic Society requires that all Active Members earn a minimum of 20 CME credits in patient safety related topics every three years. Attend the entire 2018 Scientific Session and you can claim 8 patient safety credits. Additional credits can be earned by attending selected optional courses where the ▲ symbol appears, up to a maximum of 13.75 credits. The number inside the symbol indicates the number of credits within the presentation that are applicable toward patient safety CME. See “Claim Your CME Credits” in the General Information Section on the App for how your credits will be reported.

Radar Resource
Be sure to bring your tablet, laptop, or smartphone to the meeting and explore the latest abilities that RADAR Resource delivers! Offering fresh content, new discussion capabilities, detailed interactive cases, and much more—this is the ultimate tool for ASAPS Members, Candidates for Membership, Residents, and ASJ subscribers. Learn how this Aesthetic Society benefit can work for you by having a personal demonstration with our RADAR gurus! Feel free to stop by the ASAPS booth to experience the power of RADAR while attending the meeting.

Registration Hours
Marriott, 8th Floor Lobby Liberty Room
Thursday, April 26  6:30am – 8:00pm
Friday, April 27   6:30am – 6:30pm
Javits
Thursday, April 26  6:30am – 6:00pm
Friday, April 27   6:30am – 6:30pm
Saturday, April 28  6:30am – 5:30pm
Sunday, April 29   6:30am – 5:00pm
Monday, April 30  6:30am – 5:00pm
Tuesday, May 1  6:30am – 12:00pm

Speaker Ready Hours
Thursday, April 26  7:00am – 6:00pm
Friday, April 27   6:30am – 7:00pm
Saturday, April 28  6:00am – 6:00pm
Sunday, April 29   6:45am – 6:00pm
Monday, April 30  6:45am – 6:00pm
Tuesday, May 1  7:00am – 12:30pm

Transportation
Bus
To Javits from the New York Marriott Marquis, pick up location at the Marriott is on the 45th street entrance on the lower level
Thursday, April 26  5:30am – 10:00am
11:00am – 7:00pm*
Friday, April 27   5:30am – 7:00pm*
Saturday, April 28  5:30am – 10:00pm
3:00pm – 7:00pm
Sunday, April 29   5:30am – 10:00pm
3:00pm – 7:00pm
Monday, April 30  5:30am – 10:00pm
3:00pm – 7:00pm
Tuesday, May 1  5:30am – 10:00am
11:00am – 3:00pm
Available every 15 minutes
*Midday every 30 minutes

Subway Station
Subway Service Now Available! Brand new state-of-the-art 34th street Hudson Yard station is a great fast way to get from the Javits Center to Times Square. The station is located directly across the street from the Center and the number 7 train is a quick 5 minute one-stop ride. Service from Times Square to the Javits Center is via the 42nd Street Times Square station (7 train). To view a New York City subway map, please visit: http://web.mta.info/maps/submap.html

Women Aesthetic Surgeons’ Lounge
Visit the W.A.S. Lounge located in The Aesthetic Marketplace, Booth #1161. Take advantage of this opportunity to engage with colleagues in an informal environment created to facilitate collaboration, education and camaraderie among women plastic surgeons. Network with your peers while enjoying a beverage and a snack. The lounge will be open Saturday, Sunday and Monday from 9am–5pm. Supported by Allergan.

Women Aesthetic Surgeons’ Lactation Suite Courtesy of Allergan
Perfect for the mom on the go who needs a private space.
Jacob K. Javits Convention Center
Level 1, Hall 1E, Room E-17

A—Teaching Courses
1BC—Exhibits
Special Events Hall—Blue Session
E—Orange, Rapid Fire, Staff
ISSA Dorsal Nasal Rasps

- These Dorsal Nasal Rasps are 2mm wide and allow in-office nasal work on the dorsal hump under local anesthesia.

Designed by:
Issa Eshima MD, FACS
San Francisco, CA

ASSI.25726
ISSA DORSAL NASAL RASP 16.5cm, straight, 2x3mm working end: 25mm, grit #2

ASSI.25926
ISSA DORSAL NASAL RASP 16.5cm, straight, 2x3mm working end: 25mm, grit #3
Join ASERF as We Honor the Late
Dr. Scott Spear
Surgeon, Educator, Researcher for His Many Achievements

ASERF Career Achievement Award
Sunday, April 29, 2018
12:00 pm to 2:00 pm
Room E12-14 · Jacob K. Javits Convention Center

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, while having held leadership roles with ASERF and/or The Aesthetic Society.

Pay Tribute to Our Honoree by Supporting ASERF
To make a donation in honor of the distinguished career of Dr. Spear, please visit The Aesthetic Meeting’s registration area or go to aserf.org to make your gift online.
Thank you to the following companies for their generous donations!

ALASTIN Skincare, Inc., Booth: 969
Coravin Wine
Starting Bid: $45

ALASTIN Skincare, Inc., Booth: 969
ALASTIN Skincare Product Basket
Starting Bid: $700

Alpine Pharmaceuticals, Booth: 1037
SINECCH
Starting Bid: $480

ASSI—Accurate Surgical, Booth: 705
Epstein Abdominoplasty Retractor
Starting Bid: $200

Black and Black Surgical, Inc., Booth 335
Vitruvian Infiltration Pump and One Box of Tubing
Starting Bid: $1,050

Canfield, Booth 823
iPad Pro 10.5, Canfield iPad application for Mirror/Visia/Vectra
Starting Bid: $410

Cutera, Booth: 919
One case of Mindego Ridge Vineyard 2014 Pinot Noir
Starting Bid: $210

DefenAge, Booth: 1111
Clinical Power Trio (DefenAge’s Core Regimen) Five Kits
Starting Bid: $500

DermatConcepts/Environ, Booth: 362
Environ Basic Facial Package
Starting Bid: $85

Galatea Surgical, Booth: 241
GalaFlex Scaffold
Starting Bid: $500

Galatea Surgical, Booth: 241
GalaSHAPE 3D
Starting Bid: $500

Galatea Surgical, Booth: 241
GalaFORM 3D
Starting Bid: $500

Implantech Associates, Inc., Booth: 610
Three Silicone Facial Implants
Starting Bid: $420

LightStim, Booth: 355
LightStim for Wrinkles
Starting Bid: $90

Merz Aesthetics, Booth 617
Merz Aesthetics Portfolio Package
Starting Bid: $6,240

MicroAire, Booth 1017
Limited Edition MicroAire Pink PAL Handpiece
Starting Bid: $9,000

OCULO-PLASTIK, INC.
OPSlims2 Dynamic Eyewear for IPL
Starting Bid: $140

RealSelf, Booth: 275
Spotlight Credit
Starting Bid: $735

RxBra, Booth: 854
The RxBra, Post Surgery Bra
Starting Bid: $35

Sente, Inc., Booth: 1052
Anti-Aging skincare
Starting Bid: $265

Skinbetter Science, Booth: 752
Skincare Basket
Starting Bid: $210

Syneron Candela, Booth 549
Two Year Service on Prolong RF Based MicroNeedling Product
Starting Bid: $5,000

Tulip Medical Products, Booth: 441
Tulip GEMS Single Use NanoTransfer Kit and the GEMS Harvesting Kit
Starting Bid: $180

Viveve, Inc., Booth: 755
Apple Watch Series 3
Starting Bid: $140

Vizium 360 (RealPatient Ratings), Booth: 727
PsMarketing Annual Contract
Starting Bid: $1,152

VOE, S.A., Booth: 562
Push Up Girdle with Active Ingredients
Starting Bid: $16

VOE, S.A., Booth: 562
Leggings with Active Ingredients
Starting Bid: $14

VOE, S.A., Booth: 562
Waist Shaper with Active Ingredients
Starting Bid: $14

VACATION GETAWAYS
Bali Double V Vacation
Starting Bid: $11,850

Cabo Timeshare Getaway for Six Nights
Starting Bid: $420

Montage in Deer Valley (Donated by W. Grant Stevens, MD)
Starting Bid: $2,275

Punta Bellena Residence in Los Cabos, Mexico (Donated by W. Grant Stevens, MD)
Starting Bid: $2,100

Ferrari Italy Experiences
Starting Bid: $8,800

Napa Wine & Cheese
Starting Bid: $2,830

Tuscany Vacation
Starting Bid: $9,500

Port Douglas Vacation
Starting Bid: $6,750

TRAIN WITH AN EXPERT
Starting Bid: $1,000

Jamil Ahmad, MD and Frank Lista, MD: The Plastic Surgery Clinic
Laurie Casas, MD
Barry DiBernardo, MD
Heather J. Furnas, MD
Elizabeth Hall-Findlay, MD
Foad Nahai, MD
Jason Pozner, MD
Luis Rios, MD
Lorne Rosenfield, MD
Renato Saltz, MD
W. Grant Stevens, MD
Louis L. Strock, MD
Jennifer Walden, MD

BID TO WIN! USING YOUR SMARTPHONE
1. Download the free Handbid App from the Apple AppStore or Google Play Store (Android Market)
2. Tap Get Started & Create your Handbid Account
3. Select the ASERF Auction 2018 from the list and START BIDDING!

BID TO WIN! USING THE WEBSITE
1. Go to https://www.handbid.com/auctions/aserf-silent-auction-2018 and select the REGISTER button just under the banner image
2. Create Your Bidder Account by entering your user information and select Continue to login.
3. Select to BID in this auction and START BIDDING!
Thank you to the following companies for their generous donations!

- Galatin Skincare
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- Black & Black Surgical
- Canfield
- Cutera
- DefenAge Skincare
- Environ
- Galatea Surgical
- Implantech
- LightStim
- Merz Aesthetics
- Microaire
- Oculoplastik
- Pink
- RealSelf
- Skinfitter Science
- Syneron Candela
- Tulip
- Viveve
- Vizium360
- V. O. E

Please note: Restrictions may apply on items available for bidding. Please see onsite auction brochure for details and restrictions.
Experience The Aesthetic Meeting in a Whole New Way

DOWNLOAD THE MEETING APP!

iPhone Users:
Go to the Apple APP Store and search, “The Aesthetic Meeting 2018” and tap the download icon.

Android Users:
Go to the Google Play Store, search, “The Aesthetic Meeting 2018” and tap the download icon.

Look for The Aesthetic Meeting 2018 soon in the App stores!

Have Questions?
Stop by the information booth at The Aesthetic Meeting!
Explore The Aesthetic Marketplace, Exhibit Hall 1BC

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Zimmer USA .......................................... 852
Zion Consulting ....................................... 666
ZO Skin Health, Inc. by Zein Obagi, MD .......... 717
Join Us in Marking the 25th Anniversary of ASERF!

Donate $250, $2,500, or $25,000 to ASERF today to celebrate 25 years of scientific advances. Current Members of ASERF and those who make a donation at The Aesthetic Meeting, will receive:

• ASERF 25th Anniversary Lapel Pin ($200 - $2,499 donation)
• Lapel Pin & Silver Anniversary Benefactor Ribbon ($2,500 - $24,999 donation)
• Exclusive ASERF 25th Anniversary Lapel Pin & Benefactor Ribbon ($25,000 donation)
• Recognition in Aesthetic Society News, Summer 2018 (all donations)

Make Your Donation online, www.aserf.org at the ASAPS Registration Desk, or by stopping by the ASERF booth.

All contributions made to ASERF are tax-deductible

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ASERF: 25 Years of Scientific Advances

In the summer of 1992, plastic surgery was gradually rising in popularity. While the medical community easily embraced the reconstructive side, the aesthetic plastic surgery elements were largely dismissed. Thus, the research and education opportunities at that time favored reconstructive plastic surgery, leaving little for aesthetic research. The American Society for Aesthetic Plastic Surgery (ASAPS) was interested in pursuing aesthetic research initiatives, but had limited resources. Additionally, it couldn’t accept charitable donations from members because it was incorporated under the Internal Revenue Service code as a trade association, 502 (c)(6).

During the Aesthetic Society’s Strategic Planning Meeting in July, 1992, in Rosemont, Illinois, chaired by Robert Singer, MD, the idea for what would become the Aesthetic Surgery Education and Research Foundation (ASERF) was born. The organization would fully form the following year, and the establishment of such enabled ASAPS members to make tax-deductible contributions to facilitate aesthetic surgery research, with 100% of these donations going solely to research.

The Formation of ASERF

On April 20, 1993, while celebrating Patriot’s Day in Boston, MA, during The Aesthetic Meeting, ASAPS members, Drs. Simon Fredricks, Robert Singer and then-Society Executive Director, Robert G. Stanton, had lunch at the Westin-Copley Place. Their conversation evolved to include other founding members, such as Drs. Francis Wollfort, Jeffrey Lang, Gustavo Colon, Lawrence Robbins, and John Penn.

Dr. Simon Fredricks was named the first president of ASERF. In the first year of the Foundation, 436 members joined, contributing $52,983. Mentor and McGhan became the first two corporate members of ASERF, contributing $2,000 each.

Impacting Aesthetics through Research and Meaningful Partnerships

ASERF provides growth opportunities for ASAPS members interested in conducting clinical research, identifying and funding research that benefits patients, physicians and the entire field of aesthetic medicine. The first program developed by ASERF was a panel moderated by the ASERF President Dr. Simon Fredricks at The Aesthetic Meeting, specifically for staff members of aesthetic surgery facilities. This panel discussed office management issues and identified solutions to address them, and was created in honor of Mrs. Joyce Kaye who helped pioneer the practice management classes and lectures available to plastic surgeons.

The Foundation held its first Silent Auction in 2013. Over the years, this program has grown and become one of the major sources of revenue for the Foundation, bringing in more than $261,000 in the 2017 auction.

ASERF created an award system celebrating members’ achievements in aesthetic research with prizes ranging from $750–$1,000. The first awards included: best aesthetic surgery presentation by resident, best scientific presentation, best panelist, best video

ASERF began as scribbles on paper and has evolved into a critical source of funding for aesthetic research.

Continued on Page 36
presentation, best scientific exhibit, best scientific exhibit by resident, best Aesthetic Surgery Journal article and aesthetic surgeon whose philanthropic surgical assistance to citizens of less fortunate countries best exemplifies humanitarian service.

In 1996, ASAP S created a task force to determine the safety and efficacy of the Ultrasound-Assisted Lipoplasty device. ASERF, ASPRS, the Plastic Surgery Foundation (PSEF), and Lipoplasty Society of North America (LSNA) were invited to participate in the task force. Their research findings provided a basis to announce that the device was safe when used by properly trained plastic surgeons experienced in the traditional suction assisted liposuction. The findings were also used to create a course curriculum, sponsored by ASERF and PSEF, for instruction on the physics, technology and use of the device. Over 1000 surgeons signed up for this course in the first nine months of 1997. The Hot Topics taskforce was created as a spin-off educating and training members on the emerging trends in procedural techniques, devices and aesthetic research. The Premier GlobalHot Topics session held at the annual Aesthetic Meeting was established to achieve those goals and remains one of the most discussed sessions during The Aesthetic Meeting.

Today

Research projects have included a study of the morbidity and mortality in the ambulatory surgery center setting. This project was partially funded by ASERF, as well as ASAPS and the American Society of Plastic and Reconstructive Surgeons (ASPRS). Findings from this study showed that office surgery centers have a better record than hospitals.

For a list of recently funded ASERF grants, please see page 83 in this issue of ASN.

ASERF has funded 36 clinical studies over the last ten years and raised $2.2 million through charitable donations from members, the Silent Auction, and corporate entities. To learn more about the ASERF, visit www.aserf.org. For a list of recently funded ASERF grants, please see page 79 in this issue of ASN.

Discover ASERF at The Aesthetic Meeting!

Bid to Win in the ASERF Silent Auction
Saturday April 28 – Monday April 29
The Aesthetic Marketplace, Booth #743

#S12 ASERF Premier Global Hot Topics*
Friday, April 27, 2018  •  1:00pm – 6:30pm
5.5 CME credits
Discounted pre-registration fee: $300
On-site fee: $350. Lunch will be provided.
Moderators: Jamil Ahmad, MD; Tiffany McCormack, MD; and Simeon Wall, Jr., MD

#S15 ASERF Research and Innovative Technology Luncheon*
Saturday, April 28  •  12:30pm – 2:00pm
1.5 CME credits
Discounted pre-registration fee: $85
On-site fee: $135
Co-Chairs: William P. Adams, Jr., MD and Joe Gryskiewicz, MD

#312 ASERF Bootcamp: So You Want to do Research*
Monday, April 30  •  2:00pm – 4:00pm
1 CME credit
Discounted pre-registration fee: $85
On-site fee: $135
Spencer Brown, PhD; Mark Clemens, MD; Barry DiBernardo, MD; Chris Pannucci, MD; and David Sarwer, MD

*Additional fees apply
ASERF Presidents—25 Years of Outstanding Leadership

Simon Fredricks, MD
1993–1997

Norman M. Cole, MD
1997–2001

Robert Singer, MD
2001–2004

Jeffrey Lang, MD
2004–2006

Alan H. Gold, MD
2006–2008

Bahman Guyuron, MD
2008–2009

Laurie A. Casas, MD
2009–2010

Geoffrey R. Keyes, MD
2010–2011

V. Leroy Young, MD
2011–2012

Joe M. Gryskiewicz, MD
2012–2013

William P. Adams, Jr., MD
2013–2014

Ali Aly, MD
2014–2015

Neal R. Reisman, MD, JD
2015–2016

Steven Teitelbaum, MD
2016–2017

Barry DiBernardo, MD
2017–2018

Julio Garcia, MD
2018–2019
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Purchase Education on Demand at the Registration Desk

In Addition to Selected Scientific Sessions, the Following Courses will be Captured:*

104 Effective, Efficient, Patient Friendly Facelifting Using SMAS, Fat and Tumescent Technique
Louis Bucky, MD

115 Social Media for Plastic Surgeons by a Plastic Surgeon
Sheila Nazarian, MD

206 Use of Internal Support Devices to Enhance Outcomes in Breast Surgery
Bruce Van Natta, MD

209 Keeping Your Body Contouring Patients Safe: Twenty Tips to Better Contouring Strategies and Safer Surgeries
Henry Mentz, MD; Chris Patronella, MD; German Newall, MD; Raul Morales, MD; Kristi Hustak, MD; Paul Fortes, MD

302 Technical Refinements of the Vertical Mammaplasty: A Modified LeJour Approach
Steve Wallach, MD

303 Pre-Pectoral Breast Augmentation and Reconstruction
Hilton Becker, MD

402/502 Arms, Breast, Back, Buttocks and Thighs Following Major Weight Loss
Joseph Hunstad, MD and J. Peter Rubin, MD

414 Advanced Upper Lid Aesthetic Surgery
Bryan Mendelson, MD

507 Optimizing Outcomes in Breast Augmentation and Augmentation/ Mastopexy
William Adams, Jr., MD and David Sieber, MD

609 Intelligent Choices in Injectables: Complications, Strategies and Combination Therapy
Brian Kinney, MD and Z. Paul Lorenc, MD

312 ASERF Bootcamp: So You Want to do Research?
Spencer Brown, PhD; Mark Clemens, MD; Barry DiBernardo, MD; and David Sarver, PhD

711 How Snapchat and Instagram Stories Transformed my Practice (and I Don’t Even Have a Ton of Followers!)
Jonathan Kaplan, MD

713 Cultivating Authority Online: Where Reputation and Rankings Intersect
Ryan Miller

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Selected 2018 Scientific Sessions and Optional Courses—$899

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*Program Subject to Change.

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Continued on Page 41
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Only through May 15, enjoy a discount of 20% on all Aesthetic Society products, including our popular members-only Smart Beauty Guide line of brochures. With an array of products to meet your need, The Aesthetic Society works daily to ensure your practice’s success.

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*Offer ends May 15, 2018. Offer applies to new product purchases or new Enhanced Practice Profiles only, not renewals. Some products are exclusively for Members of The Aesthetic Society.

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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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**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, etched with the Seal, includes a plate engraved with the name of the recipient and is presented during the subsequent annual meeting.

Claudia L. Delorenzi, MD 2015
Montreal, Quebec, Canada
Heather J. Furnas, MD 2016
Las Vegas, NV
Steven R. Cohen, MD 2017
San Diego, CA

**Simon Fredricks Award**
The Simon Fredricks Award is presented to the individual who is judged the Best Panelist at the annual meeting of the Society. The award consists of an etched Tiffany crystal box.

William P. Adams, Jr., MD 2015
Montreal, Quebec, Canada
Timothy J. Maren, MD 2016
Las Vegas, NV
Daniel C. Baker, MD 2017
San Diego, CA

**Best Panel Moderator Award**
This award is presented to the individual who is judged the Best Panel Moderator at the ASAPS/ASERF Annual Meeting. This etched triangular crystal on a green marble base is made possible through a restricted fund established in 2001 by Barbara and Peter B. Fodor, MD.

Sherrell J. Aston, MD 2015
Montreal, Quebec, Canada
William P. Adams, Jr., MD 2016
Las Vegas, NV
James M. Stuzin, MD 2017
San Diego, CA
**Walter Scott Brown Award**
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).
Clinton D. McCord, MD 2008
San Diego, CA
Lawrence S. Reed, MD 2009
Las Vegas, NV
Daniel C. Baker, MD 2015
Montréal, Québec, Canada

**Raymond Vilain Award**
The Raymond Vilain Award is presented to an International Active member or an international surgeon for an outstanding scientific presentation at an ASAPS/ASERF meeting. This award is given in the name of Raymond Vilain, MD, a Corresponding Member of the Society from 1973–1989.
Bryan Mendelson, MD 2015
Montréal, Québec, Canada
Jean-François Pascal, MD 2016
Las Vegas, NV
Alfredo E. Hoyos, MD 2017
San Diego, CA

**Robert Singer Award for Best Hot Topics Presentation**
Daniel A. Del Vecchio, MD 2015
W. Grant Stevens, MD 2016
Henry A. Mentz, MD 2017

**Jerome R. Klingbeil Award**
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. The Aesthetic Society is proud to present a bust of Queen Nefertiti in recognition of demonstrated commitment and excellence to:
Glenn W. Jelks, MD
Clifford P. Clark, MD
Felmont F. Eaves, MD
Jeffrey M. Kenkel, MD
Rod J. Rohrich, MD
Renato Saltz, MD
Robert Singer, MD
William P. Adams, Jr., MD
Michael I. Kulik, MD
Timothy J. Marten, MD
Foaa Nahai, MD
Grady B. Core, MD
Joseph P. Hunstad, MD
Constantino G. Mendieta, MD
Kiyà Movassaghi, M.D., DMD

**Sherrell J. Aston Award**
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 or member of the ASAPS Candidate Program. (Beginning in 1993 the criteria was limited to entries from Aesthetic Society annual meetings.)
Daniel Gould, MD 2015
Montréal, Québec, Canada
David A. Sieber, MD 2016
Las Vegas, NV
Paul N. Afroz, MD 2017
San Diego, CA

**Best Journal Article**
This award is for the best aesthetic surgery article published in a scientific journal.
2015 Domestic: Achilleas Thoma, MD, MSC, FRCS(c), FACS; Manraj Nirmal Kaur, PT, PhD(c); Chris J. Hong, BHS, & Yu Kit Li, MD
2015 International: Reza Nassab, MBA, MSC, FRCS(plast)
2016 Domestic: Joel E. Pessa MD, FACS
2016 International: Ruth Graf, MD, PhD; André Ricardo Dall Oglio Tolazzi, MSc; Priscilla Balbinot, MD; André Paim, MD; Pedro Miguel Valente, MBBS (Hons), MS, FACC; & Renato da Silva Freitas, MD, PhD
2017 Domestic: Mark W. Clemens, MD & Steven M. Horwitz, MD
2017 International: Ru-Lin Huang, MD, PhD; Yun Xie, MD; Wenzin Wang, MD, PhD; Tanja Herrler, MD; Jia Zhou, MD, PhD; Peijuan Zhao, MD; Lee LQ Pu, MD, PhD; & Qingfeng Li, MD, PhD

**Best Aesthetic Surgery Journal Research Paper**
The Best Research Paper award is made possible through the National Institute of Aesthetic Research (NIAR) in conjunction with the British Association of Aesthetic Plastic Surgeons.
2015 Characterization of Adipose Tissue for Autologous Fat Grafting
Thomas M. Suszynski, MD; David A. Sieber, MD; Allen L. Van Beek, MD, & Bruce L. Cunningham, MD
2016 The Relationship of Bacterial Biofilms and Capsular Contracture in Breast Implants
Dragana Ajdic, PhD; Yasmina Zoghbi, MS; David Gerth MD; Zubin J. Panthaki MD; & Seth Thraller MD, FMD, FACS
2017 Adipose Stem Cell Function Maintained with Age: An Intra-Subject Study of Long-Term Cryopreserved Cells
Lauren E. Kokai, PhD; Dmitry O. Traktuev, PhD; Liyong Zhang, PhD; Stephanie Merfield-Clauss, BS; Gabriella DiBernardo, BS; Hongyan Lu, PhD; Kacey G. Marra, PhD; Albert Donnenberg, PhD; Vera Donnenberg, PhD; E. Michael Meyer, BS; Peter B. Fodor, MD; Keith L. March, MD, PhD; & J. Peter Rubin, MD

**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.
Gilbert P Gradinger, MD 2016
Las Vegas, NV
Thomas J. Baker, MD & Simon Fredricks, MD 2017
San Diego, CA
Scott Spear, MD (posthumous) 2018
New York, NY

Continued on Page 45
I became a plastic surgeon because it was the perfect union between science and art. Aesthetic plastic surgery is one of the toughest disciplines and the education I receive from ASAPS helps me know that I’m fully versed on all the latest techniques.

~ Arturo Ramirez-Montanana, MD
ASAPS International Active Member since 2006
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Distinguished Service
This award is presented to members of the Society whose dedication, service, and/or contributions to the development, well being, 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 on a marble base.
Robert Stanton 2011
Gustavo A. Colon, MD 2013
James M. Stuzin, MD 2015

Leadership Award
This award is presented to an ASAPS 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 to the Society and its members. The award is a small, covered Tiffany box.
Mark L. Jewell, MD 2015
Jack Fisher, MD 2016
Leo McCafferty, MD 2017

Special Merit
The Award of Special Merit commemorates the paramount contributions to the success and well being 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. This award was originally in the form of a document suitable for framing. In 1987, an engraved silver bowl was adopted as this award.
Sue M. Dykema, CAE 2013
Joan Kron 2015
Barry Fernando, MD 2016

Special Award Winners
Dave Cherkes
San Francisco, CA
Robert Aicher, Esq.
Montréal, Québec, Canada
Bruce F. Connell, MD
New York, NY

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

Community Service Award
Tolbert Wilkinson, MD 2009
Las Vegas, NV
Gang Tattoo Removal Program of Texas
Jack E. Demos, MD 2013
New York, NY
Founder, Surgicorps, Int.
Joe M. Gryskiewicz, MD 2015
Montréal, Québec, Canada
Volunteer Services to the Children of Ecuador, Guatemala, and Peru

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.
Paul N. Afroz, MD 2015
Montréal, Québec, Canada
Anthony Wilson, MD 2015
Montréal, Québec, Canada
Chris Surek, DO 2016
Las Vegas, NV
Matthew Orgel, MD 2016
Las Vegas, NV
Erica Bartlett, MD 2017
San Diego, CA
Paul N. Afroz, MD 2017
San Diego, CA

A full list of awards from all years can be found at www.aserf.org
Get Your Free Photo!

Show Your Dedication to the Specialty in the “We Are Aesthetics” Green Screen Photo Booth

Visit The Aesthetic Society in The Aesthetic Marketplace, Booth #529
Saturday, April 28 through Monday, April 30
9:00am to 5:00pm

A free printed photo awaits you in the fun “We Are Aesthetics” Green Screen Photo Booth. Simply choose from 12 unique backdrops, select your desired props, and join in the fun! You’ll receive a free printed photo, as well as an electronic photo emailed directly to you. There’s no limit on photos, so take one or twenty. You can even choose a white background and refresh your professional headshot!

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#trustASAPS • #AestheticMtg18
#TheAestheticMeeting2018

12 Background Choices Including White for a Professional Headshot
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The Aesthetic Marketplace is Open Saturday, April 28 – Monday, April 30, 9:00am – 5:00pm

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**Ask About Membership Opportunities**

Take advantage of ASAPS' streamlined membership application process and learn about Allergan's sponsorship of Candidate for Membership program by visiting the ASAPS Booth #529. Membership Manager Marissa Simpson will be on-hand to answer your questions and assist you in applying.

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Everyone can enjoy 20% savings on ALL Aesthetic Society products, and ASAPS Members can take advantage of a special 30% savings on new Enhanced Practice Profiles (EPP). Visit ASAPS Booth #529 for product samples and to place your order. Or, call The Aesthetic Society at 562.799.2356 to place your order. But hurry—discounts apply only through May 15!

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**Aesthetic Surgical Journal/RADAR**

Celebrate the importance of aesthetic research by visiting the editorial team of Aesthetic Surgical Journal (ASJ) in ASAPS Booth #529. Learn all about RADAR Resource, which allows you to explore ASJ in ways you’ve never imagined. Come visit ASJ for these special events:

- Enjoy a champagne toast, courtesy of Galatea, Saturday, April 28 during the afternoon break.
- Check your tote bag—are you a winner? Join the fun in the ASJ bag drop game and come claim your prize in Booth #529!

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**Make Sure You Never Spend Poorly Again**

Exclusively for ASAPS Members, Surgeon as Consumer is a free, private portal on which surgeons can share their experiences—good or bad—with light and laser devices they’ve purchased. It’s a great way to make sure you don’t make a purchase you’ll regret. Kevin Charles, ASAPS’ Director of Web Strategy and Development, will be happy to show you how the portal works, and help you get started reading or writing reviews in Booth #624.

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**Where Does Your Practice Stand When Compared to Your Peers?**

Have you ever wondered how your practice stands up when benchmarked against your peers? Wonder no more! The Aesthetic Neural Network (ANN) is a practice changer, allowing you to get more metrics from your EMR than ever before. Visit ANN in Booth #625 and speak with Melissa Schmidt for more information and a demo!

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**Free Photos!**

Get a free printed photo, as well as an electronic photo emailed directly to you, in the “We Are Aesthetics” Green Screen Photo Booth. Simply choose from 12 cool backgrounds, select a prop, and “click!”—your photos are delivered. You can also choose a white background and refresh your professional headshot. Visit ASAPS Booth #529 for your free photo—and bring your friends! There is no limit, so take one photo, or twenty!

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**Store Your Patient Info Securely—On the ASAPS CLOUD**

You’ll never have to worry about the security of your patient information again if it’s stored on the ASAPS CLOUD. Let Ronan Solutions share with you the benefits of ASAPS.CLOUD and, as an ASAPS Advantage Partner, you’ll enjoy substantial savings. Learn more in Booth #724.

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**Set Sail for Adventure—and Education!**

Book your cabin now for The Aesthetic Cruise 2019! Bob Newman, cruise coordinator, will be available to book your cabin on this educational cruise, which journeys to Italy, Malta, Greece, Montenegro, Croatia, and Slovenia, June 23–July 4, 2019. Visit Bob in Booth #525 to learn more.

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**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 in Booth #743 for more details, or bid online at handbid.com/aserf.
### Corporate Satellite Symposia

Not Endorsed by ASAPS or ASERF. No CME provided by ASAPS

**THURSDAY, APRIL 26**

Registration and Complimentary Buffet Dinner  
6:30pm – 7:00pm  
Clinical Program and Live Demonstration  
PARADIGM MEDICAL COMMUNICATIONS, LLC  
7:00pm – 10:00pm  
Remodel, Refresh, Rejuvenate: A Comprehensive Approach to Optimizing Aesthetic Outcomes  
Julius W. Few Jr, MD and Z. Paul Lorenc, MD, FACS  
New York Marriott Marquis, Astor Ballroom  
To register: www.paradigmmmc.com/667mtg

**FRIDAY, APRIL 27**

SYNERON CANDELIA  
6:30pm  
Radiofrequency Based Microneedling—Non-Surgical Single Treatment with Profound® Results  
New York Marriott Marquis  

**SUNDAY, APRIL 29**

ALLERGAN  
6:30pm  
Applications of Fat Grafting and Implant Selection in Your Aesthetic Practice  
Steven Jacobson, MD  
Jacobson Plastic Surgery, Rochester, Minnesota  
Bill Kortesis, MD, FACS  
Huntsville, North Carolina  
Robert P. Schmid, MD, FACS, Lubbock Plastic Surgery Institute, Lubbock, Texas  
New York Marriott Marquis, Salon 1–2, 5th Floor  
To register: https://Allergan.cvent.com/BRTradeshowEvent_NewYork

### Lunch & Learns and Focus Groups

#### SATURDAY, APRIL 28

**Lunch and Learn**  
**ALLERGAN**  
12:30 – 1:30pm  
Latest Advances from SkinMedica®  
Kevin L. Smith, MD, FACS—Charlotte, NC  
Jacob K. Javits Convention Center, Room C02  
To register: www.mediforcereg.com/SALG34009

**Lunch and Learn**  
**NEOGRAFT**  
12:30 – 1:30pm  
How Hair Restoration with NeoGraft Profoundly Impacts Facial Aesthetics & Your Practice’s Revenue  
Dr. Jack Fisher, NeoGraft CMO  
Dr. Stephen J. Ronan  
Jacob K. Javits Convention Center, Room C03  
To register: http://bit.ly/2o0Ba5Q

**Lunch and Learn**  
**RED SPOT INTERACTIVE**  
12:30 – 1:30pm  
Profit-Driven Patient Acquisition  
Jason Tuschman  
Jacob K. Javits Convention Center, Room A01  
To register: www.redspotinteractive.com/RSVP

#### MONDAY, APRIL 30

**Lunch and Learn**  
**MERZ**  
12:30 – 1:30pm  
Enhancing Your Non-Surgical Practice: Utilizing Customization and Visualization to Optimize Patient Outcomes  
Julius Few, MD and Gabriella Casabona, MD  
Jacob K. Javits Convention Center, Room C03  
To register: www.surveymonkey.com/r/JG777Q7

**Lunch and Learn**  
**KCI, AN ACELITY COMPANY**  
12:30 – 1:30pm  
Enhancing Plastic Surgery Recovery Outcomes with Advanced Closure Technologies  
Rafael Gottenger, MD  
Jacob K. Javits Convention Center, Room C05  
To register: www.cvent.com/d/6tq5xx

### Practice Changers Theater

Practice Changers are the popular, quick educational segments offered in The Aesthetic Marketplace, Booth #1149 during breaks. Short and impactful, Practice Changers allow you to maximize your learning time, allowing you to return to your practice with pearls of wisdom you can put to good use right away. For The Aesthetic Meeting 2018, we have invited such Practice Changers faculty as:

Hatem Abou-Sayed, MD  
Robert Aicher, Esq.  
Saulo Alves, MD  
Joel Aronowitz, MD  
Russell Babbitt, MD  
Michael Bogdan, MD, MBA  
John Q. Cook, MD  
David Evans, MBA  
Bill Fukui  
Peter Houtz  
Keith Humes  
Bradley Hubbard, MD  
Kimberly Khouri, MD  
William Lao, MD  
Nelson Letizio, MD  
Walter Marou, MD  
Juan Mejia, MD  
Ryan Miller  
Andreas Nikolis, MD  
Ivona Percec, MD  
Tracy Pfeifer, MD  
Sammy Sinno, MD  
Christopher Sures, DO  
Jennifer Walden, MD  
Jason Whitesides

For a full list of faculty and topics, please visit the Practice Changers in The Aesthetic Marketplace, aisle 1100, Booth #1149.
Visit Cruise Coordinator
Bob Newman at
The Aesthetic Meeting!
Book Your Cabin and
Get Questions Answered
in Booth #525

www.surgery.org/cruise2019

This activity has been approved for
AMA PRA Category one credit™
Preserving the Orbicularis Branches of the Zygomatic Nerve with the Orbicularis Oculi Muscle Elevation During Facelift Surgery
Min-Hee Ryu, MD; David Kahng, MD and Lee Seng Kho

Breast Augmentation Changes in Sensitivity and Lactation
Rubén Sánchez Eligio, MD and André Ferlito Vargas, MD

Rhytidectomy Can Be Performed Safely Under Local Anesthesia With Oral Sedation: Outcome Analysis of 174 Patients
Gianfranco Frojo, MD; Aarson Dotson, BA; Sunees Kassan, MD and Heruf Lund, MD

Silicorna of the Breasts: Case Series
Igor Passaglia, MD

Current Trends in Reduction Mammaplasty: Revisiting the Lejour Technique
Libby R. Copeland-Halperin, MD; Lauren Smith, BSN, RN and Michelle Copeland, DMD, MD, FACS

Labiaplasty: Current Trends of ASAPS Members
Turkia Abbed, MD; Charlie Chan, MD; Bill Kortesis, MD; Libby R. Copeland Halperin, MD; Lauren Smith, BSN, RN and Michelle Copeland, DMD, MD, FACS

A Multi-center, Open-Label, Prospective Study of Cannula Injection of Small Particle Hyaluronic Acid Plus Lidocaine for Lip Augmentation
Miles Graifer, MD, FACS; Raj Chopra, MD; FACS; Sabrina Fabi, MD, FAAD, FAACS, Mark Nestor, MD, PhD, Patricia Meuse, PhD and Jay H. Mashburn, PhD

Back to Basics: Could the Preoperative Skin Antiseptic Agent Help Prevent Biofilm-Related Capsular Contracture? Jenny Carvajal, MD; Melissa Carvajal, Diego Chavez and Professor Gilma Hernandez

A Very Fast and Efficient Technique for Diastasis Recti Repair
Domingos Q. De Paola, MD

“Round" Mini Lift A Simplified Fast Recovery Mini-MACS Lift
Domingos Q. De Paola, MD

The Central Area of the Face—Post Primary Rhytidoplasty in the Last 5 Years in Ivo Pitanguy Institute
Alvaro Daher, Sr., MD; Marcelo Daher MD and Joao Paulo Verbicario, MD

A Novel, Reliable, and Effective Method of Reduction Malarplasty without Bone Fixation
Tae Sung Lee, MD

Clockwise Rotation of the Occlusal Plane for Aesthetic Purposes by Double Jaw Surgery without Orthodontic Treatment
Tae Sung Lee, MD

Global Contributions to the Aesthetic Surgery Journal over the Past Decade
Christopher van Belle, MD; Fernando Ovaleur, MD; W. John Kitzmiller, MD and Ryan Gobble, MD

Toradol® Use in Breast Reconstruction: Risk of Hematoma and Benefit of Post-Operative Pain Control
Brittany N. Nguyen, BS; Ruth J. Barta, MD; Christine Stewart, MD and Cherrie A. Heinrich, MD

Prospective Evaluation of IncobotulinumtoxinA in the Management of the Masseter Using Two Different Injection Techniques
Andreas Nikolos, MD, MSc, FRCS; Kaitlyn Enright, BSc, MSc and Victoria Park

Comparison of Diluted Calcium Hydroxylapatite and Microfocused Ultrasound for Rejuvenation of the Aging Chest
Sabrina G. Fabi, MD and Mitchell P. Goldman, MD

Jeremy A. Brauer, MD; Michael P. O’Neil and Roy G. Geronemus, MD

Sodium Thiosulfate Injection Reduces the Amount of Calcium Hydroxylapatite Particles: An Animal Study
Peter Kreymerman, MD, FACS; Walter R. Miller, Jr., DVM; Michael Ovston, DVM, MS, DACVP; and David Dobrowski

Improvement of Chin Profile Using Calcium Hydroxylapatite with Integral Lidocaine
John P. Fezza, MD

A Case Report of a Breast Implant-Associated Plasmacytoma and Literature Review of Non-ALCL Breast Implant-Associated Neoplasms
Fernando Ovaleur, Jr., MD; Sam Beydoun, BS; Christopher van Belle, MD; William John Kitzmiller, MD; Kristina Brannock, MD and Ryan Gobble, MD

Retro-Rectus Prosthesis for Core Myofascial Restoration in Cosmetic Abdominoplasty
Sherdon M. Lincoing MB, FACS

While at The Aesthetic Meeting, Book Your Aesthetic Cruise 2019!

Evolution... Only on an Aesthetic Cruise can you cruise the world in comfort while honing up on aesthetic surgery skills and techniques. In 2019, The Aesthetic Cruise sets sail on a magical adventure on Oceania Cruises’ Riviera ship to Italy, Malta, Greece, Montenegro, Croatia and Slovenia on June 23 – July 4. Chaired by Melinda Haws, MD and Vice Chair Joseph Hunstad, MD, this is sure to be a memorable trip.

At The Aesthetic Meeting, Learn to Take Care of Your Own Health

Dr. Eric Goodman, Chief Imagineer and Lead Instructor of Foundation Training, will be giving the keynote speech, “The Plastic Surgeon Athlete: Top 5 Pearls for a Long Productive Career in the OR.” Dr. Goodman combined his experience as a strength coach, personal trainer and Chiropractor to create a simple strengthening program that facilitates the body’s natural healing ability and quickly improves degenerative movement patterns, called Foundation Training. Make sure to attend the Scientific Session on Saturday, April 28, 12:00pm – 12:30pm, and learn key tips for self-care.

Dr. Goodman will also be in the W.A.S. Lounge (Women Aesthetic Surgeons), Booth #1161 during the morning break on Saturday, April 28, 10:00am – 10:30am. Stop by and get your questions answered!

Scientific Posters
Continued from Page 51

Collagen Induction Therapy (CIT) by Medical/Surgical Needling Promotes Ideal Skin Regeneration
Marshall T. Parfention, MD, FACS, Matthias C. Aust, MD, Shawna Akin, MLE; Gary Fudan, MD and Des Fernandes, MD

Submandibular Gland Reduction and Tangential Excision of the Anterior Belly of the Diagistics in Aesthetic Contouring of the Neck
Charalampos K. Rammos, MD, Bill G. Kortesis, MD; Gaurav Bharti, MD and Joseph P. Hunsbird, MD

Public Interest in Breast Augmentation
Stelios C. Wilson, MD; David A. Daar, MD, MBA; Sammy Sinno, MD and Steven M. Levine, MD

Stav Brown, BS and Yoram Wolf, MD

Assessing Quality of Life and Patient-Reported Satisfaction with Masculinizing Top Surgery: A Mixed-Methods Descriptive Survey Study
Grace Poulier, BA; Catherine C. Motoksa, BS; Ian T. Nolan, BM; Tiffany E. Cook, BGS; Whitney Slaa, FNP-C; John T. Strainx, MD; Jennifer E. Thomson, BS; Kimberly Khouri, BS; M. David Go6thar, MS and Alexis Hazen MD

Perception of Facial Aging with Temporal Hollowing and a Guide for Implementing Treatments
Michael Chung, BS; Karen B. Lu, BA; Xingchen Li, BA; Justin Perez, MD; Deniz Basci, MD and Bardia Amirikia, MD

Trends in Fat Grafting: A 10-Year Analysis of the Major Plastic Surgery Journals
Farrah C. Liu, BS; Zachary S. Gala, BME; Samir Janne Hasbun, MD; Juan Pablo Arbelaez, MD; Brianne Mitchell, MD and Alexandra Condé-Green, MD

Transabdominal Breast Augmentation: A 7 Year Review
Clarissa Lima Vieira Moreira, MD; Roberto Luiz Sodré, MD and José Augusto Caill, MD

The Synergistic Effects of Multimodal Therapy Resulting in Better Outcomes for Women Seeking Vaginal and Bladder Rejuvenation
Jennifer Walden, MD, FACS and Sherlyn D. Garcia, BS

Summary of a Decade’s Experience: Sound Framework Is the Foundation of Nasal Reconstruction
Xiaona Lu, MD and Fei Fan, MD

Introducing Individualized Surgical Guidelines for Liposuction Safety Generated by a Risk Assessment Formula
Olivier A. Deign, MD, MPH and Henry A. Mentz, MD

Evaluating the Anatomic Basis of Gluteal Augmentation
Walter Marro, MD; Ricardo Gonzalez and Andre Vargas

Lipomiabdosphastoplasty; Changing Paradigms
Walter Marro, MD; Muska Bromley, MD, MSc and Alberto Caldera, MD, MSc, FACS

Management of Oily Cysts after Breast Lipofilling
Musu Bromley, MD, MSC; Walter Marro, MD and Alberto Caldera MD, MSc, FACS

Pathological Scarring Treatment with Transcutaneous Steroid Penetration Using CO2 Fractional Laser
S. Morie, MD; Musa Bromley, MD, MSC; A. Forodanti, MD; Y. More, MD; F. Costa, MD and F. Mazzaroni, MD

Progressive Tension Sutures in Abdominoplasty: How Many Are Enough
Musu Bromley, MD, MSC; Walter Marro, MD and C. Sa, MD, MSC

Breast Lipofilling in Post Bariatric Patients; A Modern Reality
Musu Bromley, MD, MSC; Walter Marro, MD; Alberto Caldera, MD, MSC

3D Perioral Assessment following Lip Lift
Brian D. Mikolas, MD; Jonathan B. Levine, DMD; Jillian E. Scheckler, MD and Garen M. Tepper, MD

Role of Layered Contouring Make-Up in an Aesthetic Surgery Clinic and its Effects on Nasal Width
Karen B. Lu, BA; Michael Chung, BS; Xingchen Li, BA; Justin Perez, MD; Deniz Basci, MD; Jeanne Doyle and Bardia Amirikia, MD

Results of a Multi-center, Randomized, Evaluator-Blinded, Delayed-Treatment-Controlled Study of the Effectiveness and Safety of Renevia, a Resorbable Matrix for the Delivery of Autologous Adipose Derived Cells to Treat Subcutaneous Facial Lipoatrophy
Defects Arising from HIV
Arina Matus Palau, Javier San Martin, PhD; J. Benito-Ruiz; Jennifer Bahr-Davidson, PhD; Tom Zarembrinkski, PhD, MBA; Oscar Cuzzanis, PhD, MD and Ramon LLul, PhD, MD

Duration of Effect in Two Phase 3, Randomized, Double-Blind, Placebo Controlled, Multi-Center Trials Evaluating Safety & Efficacy of DaxibotulinumtoxinA for Injection Treating Moderate to Severe Glabellar Lines (SAKURA 1 & 2)
Arthur Swift, MD; Jean Carruthers, MD; John Joseph, MD; Steve Fagien, MD; Steve Yoolin, MD; Brian Biesman, MD; Eric Park, MD; Daniel Snyder, PhD and Roman Rubio, MD
NEW: Rapid Fire Sessions—Hall E, Room 7 & 8

Dynamic presentations from abstracts are mixed with lively panel discussions in the new Rapid Fire Sessions. Come listen, learn, and dissect the findings!

SUNDAY, APRIL 29

Chair: Oren Tepper, MD

SCIENTIFIC PAPER FORUM—BREAST AND BODY 1
Moderator: Nolan Karp, MD

8:00am – 8:05am
Physical Properties of Silicone Gel Breast Implants
Mark Jewell, MD

8:07am – 8:12am
The Ideal Implant Structured Breast Implant—Six Year Clinical Trial Results
Larry Nichter, MD

8:14am – 8:19am
Breast Implant Explanation with Simultaneous Mastopexy and Volume Restoration: Outcome Analysis of 118 Consecutive Cases
Charles Messa, III, MD

8:21am – 8:26am
Identifying and Impacting the True Incidence of BIA-ALCL—Seeking Meaningful Data and Good Science
Bruce Van Natta, MD

8:28am – 8:35am
Breast Augmentation (Mastopexy and Lipofilling): An Option for Quitting Breast Implants
Ruth Graf, PhD, MD; Andre Pazio Sr., MD; Priscilla Balbinot, MS, MD; Maria Cecilia Ono, PhD, MD and Daniele Pace, PhD, MD

8:37am – 8:45am
Discussion

SCIENTIFIC PAPER FORUM—BREAST AND BODY 2
Moderator: Jeffrey Kenkel, MD

8:45am – 8:50am
Galaflex Internal Support: Direct Implant Opposition during Complex Breast Revisions
Narayanan Nair, MD; Cristina Alvarez, RN and Daniel Mills II, MD, FACS

8:52am – 8:57am
Brazilian Butt Lift: A Review of Pulmonary Fat Embolism and Fat Embolism Syndromes
Olivier Deigni, MD, MPH; Stephanie Nemir, MD, PhD; Rolando Morales Jr., MD and Henry Mentz III, MD

8:59am – 9:04am
Internal Drainage During Arm Lift in Massive Weight Loss Patients: A Novel Technique to Reduce Seroma
Adel Michel Wilson, MD, FRCS, MSc

9:06am – 9:11am
The Effects of a New Tumescent Solution on Adipocytes and Stem Cells for Fat Transfer
Martin I. Newman, MD

9:13am – 9:18am
Characterizing the Saddlebag Deformity Following Lower Body Lift
Stephanie Dreifuss, MD; Omar E. Beidas, MD; J. Peter Rubin, MD and Jeffrey A. Gusanoff, MD

9:20am – 9:25am
Squamous Cell Carcinoma Associated with Breast Implant Capsules—A New Entity of Chronic Inflammatory Capsular Malignancies (CICM)
Mytien Goldberg, MD; Cathy Tang, MD; Thomas Wilson, MD; Jay Granzow, MD and Brian Boyd, MD

9:27am – 9:32am
Toradol® Use in Autologous Breast Reconstruction for Pain Control: Is There Increased Hematoma Risk?
Brittany Nguyen; Ruth J. Barta, MD and Cherrie Heinrich, MD

9:34am – 9:39am
Breast Implant-Associated Bilateral B-Cell Lymphoma: Case Report and Review of the Literature
Vivi Chen, BS; Don Hoang, MD, MHS and Sharon Clancy, MD

9:39am – 9:45pm
Discussion

9:45am – 10:15am
Break

10:15am – 11:15am
Hot Topics New Tech Quick Hits
Moderators: Simeon Wall, MD and Oren Tepper, MD

11:15am – 11:20am
A Phase III, Multicenter, Randomized, Double-Blind, Active and Placebo-Controlled, Single Dose Trial to Demonstrate the Efficacy and Safety of Prabotulinumtoxina in Adult Subjects for Treatment of Moderate to Severe Glabellar Lines
Per Heden, MD, PhD

11:22am – 11:27am
Residents and Fellows Forum Winner

11:29am – 11:34am
Precision Rhinoplasty Using Virtual Surgical Planning and 3D-Printed, Sterilizable, Patient-Specific Anatomic Models
Samantha Malha, BA; Jonathan Bekisz, BA; Hannah List, BA; Paulo Coelho, DDS, PhD; Lukasz Witek, MSc, PhD and Roberto Flores, MD

11:36am – 11:41am
Implications of Different Patterns of Lateral Nasal Osteotomy: A Cadaver Study
Shawn Mosheif, MD and Ali Saijadiian, MD

11:43am – 11:48am
Indications of Tip “Contour Graft” (Mustache graft) for Control of Tip Width and Contour and Support of Soft Triangle in Rhinoplasty
Ahmad Tavassoli Ashrafi, MD; Ronak Mousavi and Farshid Sheikh

11:50am – 11:55am
Rhinoplasty with Concurrent Fat Grafting
Kyle Gabriel, MD Cyril Gary, MD, Marcus Valcarce-Asgapen, BA’ Robin Wu, BS; Kirun Baweja and Derek Steinbacher, MD, DMD

11:55am – 12:00pm
Discussion

MONDAY, APRIL 30

Chair: Jason Roostaeian, MD

SCIENTIFIC PAPER FORUM—BREAST AND BODY 3
Moderators: John Diaz, MD and Joseph Hunstad, MD

8:00am – 8:05am
Outcomes Analysis of Goldilocks Mastectomy and Breast Reconstruction: The Mayo Clinic Experience
Arif Chaudhry, MD; Jeremie Oliver, BS, BA; Saad Alsulaib, MD and Jorys Martinez-Jorge, MD

8:08am – 8:13am
Combined Labia Minor and Labia Majora Reduction: Is it Safe?
John G. Hunter, MD

8:14am – 8:19am
Lipoabdominoplasty and Oblique Flankplasty: An Alternative to Fleur De Lys Abdominoplasty and Lower Body Lift
Dennis J. Hurwitz, MD

Continued on Page 55
PATIENTS IN NEED?

For Uninsured Patients, Utilize the BIA-ALCL Patient Fund

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

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

For ASAPS, ASPS, ASERF and PSF member surgeons who have patients diagnosed with ALCL, visit: www.ASERF.org/BIA-ALCL, for all criteria and to download a grant request form.

Made Possible By Generous Contributions From

For additional information on the Fund, please contact Ivan Rodriguez at (562) 799-2356 or ivan@surgery.org
NEW: Rapid Fire Sessions—Hall E, Room 7 & 8

Continued from Page 53

8:21am – 8:26am
Functional Characterization of Fibroblasts Differentiated from Adipose-Derived Stem Cells
Robert Gersch, PhD and Ivona Percec, MD, PhD

8:28am – 8:35am
Vaginal Laxity, Sexual Distress and Sexual Dysfunction: A Cross-Sectional Study of Sexual Morbidity in a Plastic Surgery Practice
Ali Qureshi, MD, Ketan Sharma, MD; Melissa Thornton; Terence Myckatyn, MD and Marissa Tenenbaum, MD

8:35am – 8:40am
Discussion

8:40am – 8:45am
Rates of Seroma Are Not Increased When Combining Liposuction with Progressive Tension Suture
Aboadinooplasty: A Retrospective Cohort Study of 619 Patients
Daniel Gould, MD, PhD; Luis H. Macias, MD, FACS; Ziyad Hammoudeh, MD; Phillip Dauwe, MD; Fouad Saeg, BS; and W. Grant Stevens, MD

8:47am – 8:52am
Mammaplasty Using Silicone Implants: Surgical Planning Refinements
André Vargas, MD, MSc

8:54am – 8:59am
No Increased Risk of Seroma in Progressive Tension Suture Drainless Lipo-Abdominoplasty with Autologous Fat Grafting to Hips and Gluteal Region
Luis H. Macias, MD, FACS; David T. Lee, MD; Amanda K. Nelson, MD; Ziyad Hammoudeh, MD; Fouad Saeg, BS; Daniel J. Gould, MD PhD and W. Grant Stevens, MD

9:01am – 9:06am
Recent and Historical Trends in FDA Regulation of Aesthetic Devices
Ashish Choudhary, MD, Daniel Gould, MD, PhD; Ziyad Hammoudeh, MD; Phillip Dauwe, MD; Luis H. Macias, MD, FACS and W. Grant Stevens, MD

9:08am – 9:13am
Residents and Fellows Winner

9:13am – 9:15am
Discussion

9:15am – 9:45am
Mini Panel—Starting a Practice
Moderator: Daniel Baker, MD
Panelists: David Sieber, MD; Michael Lee, MD and Steven Levine, MD

9:45am – 10:15am
Break

10:15am – 11:00am
Best of Hot Topics
Simeon Wall, Jr., MD; Jamil Ahmad, MD; Robert Singer, MD and Joe Gryskiewicz, MD

SCIENTIFIC PAPER FORUM—FACE/COSMETIC MEDICINE
Moderator: Foad Nahai, MD and Barry DiBernardo, MD

11:00am – 11:05am
Assessing the Efficacy of Deoxycholic Acid for the Treatment of Submental Fat: A Three-Dimensional Study
Jacob Grow, MD and Richard Korentager, MD

11:07am – 11:12am
Reverse Perichondrium-SMAS FLAP of the Lower Lateral Cartilages, a Novel Technique for the TIP Refinements
Luis Eduardo Guerrero Sr., MD and Hector Milla, Sr, MD

11:14am – 11:19am
Aspiration Prior to Injection of Dermal Fillers: An In Vitro Study and Case Series
Gabriela Casabona, MD

11:21am – 11:26am
A Systematic Review of Nasal Augmentation Implants: Eptfe (Gore-tex) Versus Silicone
Han Hoang, MD; Michael Januszky, MD and J Brian Boyd, MD

11:26am – 11:30am
Discussion

11:30am – 11:35am
Lower Eyelid Blepharoplasty: Does the Literature Support the Longevity of This Procedure?
David Daar, MD, MBA; Stelios Wilson, MD; Samantha Malina, BA; Salma Abdou, BA and Steven Levine, MD

11:37am – 11:42am
Identifying Aesthetically Appealing Upper Eyelid Topographic Proportions
Eibert Vaca, MD; Eugene Park, MD and Mohammed Alghoul, MD

11:44am – 11:49am
Multi-Center, Double-Blind, Vehicle-Controlled Clinical Trial of an Alpha and Beta Defensin—Containing Anti-Aging Skin Care Regimen with Clinical, Histopathologic, Immunohistochemical, Photographic and Ultrasound Evaluation
Barry DiBernardo, MD

11:51am – 11:56am
Autologous Fat Grafting’s Effect on Edema and Ecchymoses Following Rhinoplasty
Kyle Gabr, MD; Cyril Gary, MD; Ean Sabenski, MD; Sina Torabi, BA; Fouad Chouari, BS; Rajendra Sawh-Martinez, MD, MHS; Raysa Cabrejo, BS; Xiaona Lu, MD, MS and Derek Steinbacher, MD

11:56am – 12:00pm
Discussion

12:00pm – 12:05pm
DWP-450, Purified Botulinum Toxin Type A, for the Treatment of Moderate-to-Severe Glabellar Lines in Adult Subjects: Results from a Multi-Center, Open Label, Repeat Dose, Long Term Exposure, Year Long Phase II Safety Study
Z. Paul Lorenz, MD

12:07pm – 12:12pm
Automated Objective Assessment of Facial Aesthetic Procedures Using Machine Learning
Akash Chandawar, MD; Daniel Gould, MD, PhD and W. Grant Stevens, MD

12:14pm – 12:19pm
Decreased SIRT1 Activity Negatively Affects Mitochondrial Function and Biogenesis Leading to Blunted Adipogenesis in Aging Cell
Jeffrey Baum, PhD, Raia Dierov, MS, Catherine Calvert, MD and Ivona Percec, MD, PhD

12:21pm – 12:26pm
Analysis of ASAPS Endorsed Aesthetic Fellowships
Charlie Chen, MD; Ziyad Hammoudeh, MD; Turkia Abbed, MD; Phillip Dauwe, MD; Gaurav Bharti, MD; Bill Kortesis, MD; W. Grant Stevens, MD and Joseph Hunstad, MD

12:26pm – 12:30pm
Discussion
IMPORTANT SAFETY INFORMATION

APPROVED USES:
Restylane® Refyne and Restylane® Defyne
Restylane® Refyne and Restylane® Defyne are mid-to-deep injection into the facial tissue for the correction of moderate to severe facial wrinkles and folds, such as nasolabial folds, in patients over the age of 21.

Restylane® Defyne is indicated for injection into the mid-to-deep dermis for correction of moderate to severe, deep facial wrinkles and folds, such as nasolabial folds, in patients over the age of 21.

CONTRAINDICATIONS:
Restylane Refyne and Restylane Defyne contain traces of gram-positive bacterial protein and are contraindicated for patients with allergies to such material or for patients with severe allergies that have required in-hospital treatment. They should not be used by patients with bleeding disorders, with hypersensitivity to amide-type local anesthetics, such as lidocaine, or by women who are pregnant or breastfeeding.

POSSIBLE SIDE EFFECTS:
The most commonly observed side effects include swelling, redness, pain, bruising, tenderness, headache, lump formation, and itching at the injection site. Use at the site of skin sores, pimplies, rashes, hives, cysts, or infection should be postponed until healing is complete.

These products should not be injected into the blood vessels as it may cause vascular occlusion, infarction, or embolic phenomena. Use with caution in patients recently treated with anticoagulant or platelet inhibitors to avoid bleeding and bruising.

As with all skin injection procedures, there is a risk of infection.

To report a side effect with any of the Restylane products, please call Galderma Laboratories, L.P. at 1-855-425-8722.

Restylane Refyne and Restylane Defyne are available only through a licensed practitioner.

Complete Instructions for Use are available at www.RestylaneUSA.com.


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When all your living starts lining up

start Silking

Restylane® Silk smoothes those living lines around your mouth, for lips that reveal only what you want them to. It’s the end of the line for lips.

See Anne before and after Silking at RestylaneSilk.com/LivingLines

Important Safety Information

Indication: Restylane® Silk is indicated for submucosal implantation for lip augmentation and dermal implantation for correction of perioral rhytids in patients over the age of 21.

Restylane Silk contains traces of gram-positive bacterial protein and is contraindicated for patients with allergies to such material or for patients with severe allergies that have required in-hospital treatment. Restylane Silk should not be used by patients with bleeding disorders, with hypersensitivity to amide-type local anesthetics, such as lidocaine, under the age of 22, or by women who are pregnant or breastfeeding. Restylane Silk should not be injected anywhere except the dermis or lip submucosa. Use of Restylane Silk at the site of skin sores, pimples, rashes, hives, cysts, or infection should be postponed until healing is complete. The most commonly observed side effects are swelling, tenderness, bruising, pain, and redness at the injection site. These are typically mild in severity and resolve in 2-7 days after treatment. Serious but rare side effects include delayed onset infections, recurrence of herpetic eruptions, and superficial necrosis and scarring at the injection site. Do not implant into blood vessels. Use with caution in patients recently treated with anticoagulant or platelet inhibitors to avoid bleeding and bruising. Treatment volume should be limited to 1.5 mL per lip per treatment and 1.0 mL for perioral rhytid correction, as greater amounts significantly increase moderate and severe injection site reactions. The safety or effectiveness of treatment in areas other than lips and perioral rhytids has not been established in controlled clinical studies. Restylane Silk is only available through a licensed practitioner. Complete Instructions for Use are available at www.RestylaneSilk.com.
ASAPS LAS VEGAS 2019
FACIAL & RHINOPLASTY SYMPOSIUM

January 31–February 2, 2019
The Cosmopolitan of Las Vegas
Las Vegas, NV

Chair: Louis Bucky, MD
Vice Chair: Charles Thorne, MD

WE ARE AESTHETICS.

Intimate Learning Environment
Exceptional Education
Optional Cadaver Labs

CME Available
This activity has been approved for
AMA PRA Category I credit™

www.surgery.org/face2019
My sincere thanks to our spectacular faculty and 135 attending surgeons for making the ASAPS Las Vegas 2018 Facial and Rhinoplasty Aesthetic Symposium one for the record books. Held in February 2018 at The Cosmopolitan of Las Vegas, this exciting program featured some of the best minds specializing in facial and rhinoplasty aesthetic surgery today.

Thank you to our talented faculty, including Mark Albert, MD; Richard Bensimon, MD; Francisco Bravo, MD; Spencer Cochran, MD; Michael Edwards, MD; Ashkan Gavami, MD; Jeffrey Kenkel, MD; Jeffrey Marcus, MD; Timothy Marten, MD; Gerald O’Daniel, MD; Mario Pelle-Ceravolo, MD; Jason Roostaeian, MD; Sammy Sinno, MD; Chris Surek, DO; Oren Tepper, MD; Patrick Tonnard, MD; and Richard Warren, MD.

This wonderful group of educators covered such topics as aging concepts, anatomical landmarks and deviations, aesthetic evaluation, fat grafting, fillers (including a live demonstration), and much more. New levels of interaction from the audience simply elevated the enthusiasm that was obvious with the attendees.

Two moments in particular stand out for me, which demonstrate the value of this symposium: during a break, presenter Chris Surek, DO, was surrounded by attendees, many more senior, who drilled down into his presentation and were clearly galvanized by his teaching. Similarly, during another break I noticed a table in the exhibit hall, full of younger attendees, discussing what they’ve learned in great detail and debating each other, challenging each other’s thinking. It is precisely this kind of passion and devotion to the specialty that I witness each year at this symposium and it builds excitement for both faculty and attendees alike.


I hope you’ll consider joining us next year for the ASAPS 2019 Facial & Rhinoplasty Symposium on January 31–February 2, 2019 at The Cosmopolitan of Las Vegas. You’ll return home with improved techniques, which leads to better patient care and improved patient satisfaction. Look for more details, coming soon at surgery.org/face2019.

Charles Thorne, MD, is an aesthetic plastic surgeon practicing in New York, NY, and serves as Vice President and Education Commissioner of The Aesthetic Society.
ASAPS 2018–2019 ASAPS Members to Vote on Slate of Candidates

President

W. Grant Stevens, MD, FACS
Marina Del Rey, CA
Private Practice; Clinical Professor of Surgery, USC Keck School of Medicine, Division of Plastic Surgery; Director Aesthetic Surgery Division and the Aesthetic Surgery Fellowship

Current Board Position: President-Elect

ASAPS/ASERF Committee Work: Executive Committee, Aesthetic Training Committee, AJSC Editorial Board, Conflict of Interest Committee, External Marketing Committee, Finance and Investment Committee, Industry Exhibits Committee, Industry Support Committee, Women Aesthetic Surgeons’ Committee, ASERF Board of Directors

National Affiliations: ASAPS, ASERF, AAPS, AAFPRS, ASPS, ACS, ISAPS

Training: Washington University School of Medicine, Harbor/UCLA Medical Center, General Surgery; Washington University School of Medicine, Hand Surgery; Washington University School of Medicine, Plastic Surgery

ABPS Certification: 1989

Secretary

Jennifer L. Walden, MD, FACS
Austin, TX
Private Practice, Clinical Assistant Professor, UT Southwestern Medical Center

Current Board Position: Member-at-Large

ASAPS/ASERF Committee Work: Communications Commissioner, Finance & Investment Committee, Breast Implant Associated ALCL Task Force, Media Relations Committee, Women Aesthetic Surgeons’ Committee, Candidate Liaison Committee (Chair – former), Industry Support Committee, Aesthetic Neural Network Task Force (Chair), Aesthetic Neural Network Business Task Force (Co-Chair), Surgeon As Consumer Task Force (Chair), Social Media Task Force (Chair), Publications Committee, ASJ Social Media Ambassador

National Affiliations: ASAPS, ASPS, ISAPS, AAAASF, AWS

Training: University of Texas, Medical Branch; Manhattan Eye, Ear and Throat Hospital

ABPS Certification: 2005

MEMBERS AT LARGE

(3-year terms)

President-Elect

Charles H. Thorne, MD
New York, NY
Private Practice; Chairman, Department of Plastic Surgery at Lenox Hill Hospital and Manhattan Eye, Ear and Throat Hospital

Current Board Position: Vice President

ASAPS Committee Work: Executive Committee, Education Commissioner, Finance & Investment Committee, Industry Policy Committee, Aesthetic Training

Treasurer

William P. Adams, Jr., MD
Dallas, TX
Private Practice and Associate Clinical professor and Program Director of Aesthetic Fellowship, UT Southwestern Department of Plastic Surgery, Dallas, Texas

Current Board Position: Treasurer

ASAPS Committee Work: Continuing Medical Education Committee, MOC Task Force

National Affiliations: ASAPS, ASERF, ASPS, ACS, PSF, AAPS

Training: Yale College, UCLA School of Medicine, Massachusetts General Hospital Surgery Residency, Plastic Surgery, NYU, Craniofacial Surgery

ABPS Certification: 1991

Melinda J. Haws, MD
Nashville, TN
Private Practice

Current Board Position: Member-at-Large

ASAPS Committee Work: Industry Exhibits Committee, Women Aesthetic Surgeons’ Committee, Teaching Course Subcommittee

National Affiliations: ASAPS, ASPS, ACS

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

ABPS Certification: 1999

Continued on Page 61
MEMBERS AT LARGE
(3-year terms)
Continued from Page 60

Nolan 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 Board Position: Member-at-Large
ASAPS/ASERF Committee Work: Scientific Research Committee, Aesthetic Training Committee, Continuing Medical Education Committee, RADAR Resource Editorial Board
National Affiliations: ASAPS, ASERF, ASPS, PSRC, ACS, ASBD, AAPS
Training: University of Manitoba, Canada, St. Mary’s Hospital, San Francisco, Baylor College of Medicine, Texas, Anderson Hospital, Texas
ABPS Certification: 1987

Tracy Pfeifer, MD, MS
New York, NY
Private Practice
Current Board Position: Member-at-Large
ASAPS/ASERF Committee Work: Symposium Committee (Co-Chair), RADAR Editorial Committee (Chair), Program Committee, Application Review Committee, Media Relations Committee, Social Media Task Force
National Affiliations: ASAPS, ACS, AAPS, ASPS, 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: 1994

Lorne K. Rosenfield, MD
Burlingame, CA
Private Practice, Professor UCSF and Stanford University
ASAPS/ASERF Committee Work: Patient Safety Committee (Chair),
Teaching Course Subcommittee (Chair), Judicial Council, Research Committee, Continuing Medical Education, MOC Task Force, Program Committee, Symposium Committee, Traveling Professor Program
National Affiliations: ASAPS, ASPS, AAPA, ISAPS, AAAASF, ABPS
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: 1987

Those continuing in positions:
MEMBERS-AT-LARGE
Jamil Ahmad, MD
Toronto, Ontario, Canada (until 2019)
Michael A. Bogdan, MD, MBA
Southlake, TX (until 2020)
Joseph P. Hunstad, MD
Charlotte, NC (until 2020 – 2nd Term)
Kiya Movassaghi, MD, DMD
Eugene, OR (until 2019 – 2nd Term)
Simeon H. Wall, Jr., MD
Shreveport, LA (until 2020 – 2nd Term)

Jack Fisher, MD
Nashville, TN

Earl A. Campbell, MD
Calgary, Alberta (Canada)

Francisco (Paco) Canales, MD
Santa Rosa, CA (Far West)

R. Brannon Claytor, MD
Bryn Mawr, PA (Northeast)

Clark Schierle, MD
Chicago, IL (Midwest)

ETHICS COMMITTEE
(3-year terms)

Richard A. Baxter, MD
Mountlake Terrace, WA (Northwest)

Mark Constantian, MD
Nashua, NH (Northeast)

JUDICIAL COUNCIL
(3-year terms)

Allen Gabriel, MD
Vancouver, WA (West)

Christine Hamori, MD
Duxbury, MA (East)
ASERF 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 2018-2019 during the ASERF Annual Business Meeting Luncheon. All Active Members are invited to attend on Sunday, April 29 at 12 noon at The Aesthetic Meeting 2018 in New York City.

President
Julio Garcia, MD
(automatic from Las Vegas, NV
President-Elect)
Private Practice
Current ASERF Board Position: President-Elect
ASAPS/ASERF Committee work: Ethics Committee, International Fellowship Program, Program Committee, ASERF Executive Committee
National Affiliations: ASAPS, ASERF
Training: Northwestern University; University Illinois College of Medicine; University of Illinois Medical Center, Plastic and Reconstructive Surgery
ABPS Certification: 1991

President-Elect
Robert Whitfield, MD
Austin, TX
Private Practice
Current ASERF Board Position: Vice President
ASAPS/ASERF Committee work: External Marketing Committee, Innovative Procedures Committee, Medical Student Committee
National Affiliations: ASAPS, ASERF, ASPS, ACS, AMA
Training: University of Nevada; University of Nevada School of Medicine; Indiana University, General Surgery; Indiana University, Plastic Surgery; University of Nevada School of Medicine, Microsurgery Fellowship
ABPS Certification: 2006

Vice President
Luis M. Rios, Jr., MD
(1 year term)
Edinburg, TX
Private Practice; Clinical Professor: University of Texas San Antonio Dept. of Surgery, Clinical Faculty UTRGV Medical School
Current ASERF Board Position: Treasurer
ASAPS/ASERF Committee work: Bylaws Committee, Fund Development Committee (Chair), Mollenkopf Breast Reconstruction Fund-Grant Review Committee, Aesthetic Neural Network Task Force, Aesthetic Neural Network Business Task Force, Finance & Investment Committee, Industry Exhibits Committee, Continuing Medical Education Committee, Patient Safety Committee
National Affiliations: ASAPS, ASERF, ASPS, AAASSF
Training: Harvard; Southwestern Medical School; UC Davis, General Surgery; Baylor College of Medicine, Hand Surgery; Tulane University, Plastic Surgery
ABPS Certification: 1999

Treasurer
Mark Clemens, MD, FACS
(2 year term)
Houston, TX
Academic Practice, Associate Professor, Department of Plastic Surgery, University of Texas MD Anderson Cancer Center
Current ASERF Board Position: Director
ASAPS/ASERF Committee work: Innovative Ideas Task Force, Research Network Committee
National Affiliations: ASAPS, ASERF, ABPS, ACS, ASCO, ASPS, ASRM, ISAPS, PSRC, WSRM
Training: MD Anderson Cancer Center Fellowship, Penn State College of Medicine, Georgetown University Residency, Cornell University
ABPS Certification: 2012

DIRECTORS
(2 year terms)

Daniel Del Vecchio, MD
Boston, MA
Private Practice
Current Board Position: Director
ASAPS/ASERF Committee work: Program Committee, Traveling Professor Program, Innovative Procedures Committee
National Affiliations: ASAPS, ASERF, AMA, ASMS
Training: Harvard Medical School, Yale University, Massachusetts General Hospital
ABPS Certification: 1996

Lee Q. Pu, MD, PhD, FACS, FICS
Sacramento, CA
Professor of Surgery (Plastic), UC Davis Medical Center
ASAPS/ASERF Committee work: ASJ Editorial Board
Clinical Editor
National Affiliations: ASAPS, ASPS, AAAS, ASA, ACS AMS, ICS, ISAPS, ASRM, ISP RS, WSRM, PSRC, ISPRES
Training: Beijing University School of Medicine, Yale University, University of South Florida, Tampa
ABPS Certification: 2001

Bruce Van Natta, MD
Indianapolis, IN
Private Practice, Clinical Associate Professor of Plastic Surgery, Indiana University School of Medicine
ASAPS/ASERF Committee work: Breast Implant Associated ALCI Task Force, Media Relations Committee
National Affiliations: ASAPS, ASERF, ABPS, ACS
Training: Indiana University School of Medicine, Indiana University Hospital, ABPS Certification: 1991

Continued on Page 62
Join SENTÉ® in Raising Funds for Research!

In honor of ASERF’s 25th Anniversary SENTÉ® is raising funds for aesthetic surgery research and we need your help to do it!

SENTÉ® will make a $100 donation to ASERF for each Aesthetic Meeting attendee who stops by SENTÉ® booth #1052 and has their badge scanned, with the goal of raising up to $10,000!

To help ASERF receive this donation, please stop by Booth #1052 in The Aesthetic Marketplace, Saturday, April 28 – Monday, April 30 and help make a major impact on aesthetic surgery research.

The mission of the Foundation is to identify and pursue those issues relevant to advancing the safety and effectiveness of aesthetic medicine through independent, unbiased, directed research and groundbreaking education.
“Given the focus on aesthetics in my practice, I wanted to align myself with the leaders in the specialty, which is why I became a Member of ASAPS. The continuing education I receive helps me be the best surgeon possible.”

~ Susan Lovelle, MD
ASAPS member since 2006
A Successful International Aesthetic Surgery Congress in Shanghai, China
By Nolan S. Karp, MD, FACS and Lee L.Q. Pu, MD, PhD, FACS

ASAPS co-sponsored the Chinese Congress of Aesthetic Medicine/Shanghai Global Aesthetic Medicine Summit with CAPA, the Chinese Association of Plastics and Aesthetics on December 8–10, 2017. The meeting attracted approximately 1100 physician attendees from all over China. Fifteen ASAPS members lectured along with a Chinese, Korean, Japanese and Taiwanese Faculty of about 80 surgeons. The faculty invited by ASAPS included: Al Aly, MD; Brad Calobrace, MD; Jay Calvert, MD; Steven Dayan, MD; Bahman Guyuron, MD; Clyde Ishii, MD; Nolan Karp, MD; Geoffrey Keyes, MD; Roger Khouri, MD; Timothy Marten, MD; Daniel Mills, MD; Foad Nahai, MD; Lee Pu, MD; Dean Tortiuni, MD; and Richard Warren, MD.

Drs. Lee Pu and Nolan Karp organized the ASAPS program. Dr. Haiyan Cui, Executive Chairman of the Chinese Congress of Aesthetic Medicine and Chairman of Chinese Association of Aesthetic Medicine and Art, organized the overall meeting and program.

The meeting started on Friday, December 8 with Masters Sessions hosted by two of the largest aesthetic medicine and surgery clinics in China. The Bestway venue hosted sessions on injectables, fillers and facial rejuvenation. The My Like venue hosted sessions on aesthetic breast surgery, fat grafting to the breast, and rhinoplasty. At both sites the auditoriums were full and the sessions were very warmly received with lively discussion. At the conclusion of these sessions, a Faculty dinner was held at a restaurant overlooking the Bund with a wonderful view of the Huangpu River and the amazing Shanghai skyline. The welcome was warm and the meal was served as a traditional multicourse Chinese banquet. In typical Chinese fashion the hosts went from table to table to thank and toast all participants.

The next two days of the meeting were held at the Shanghai Expo Center in the Pudong area at the site of the Shanghai 2010 Expo. Dr. Pu hosted the opening ceremony. A large auditorium seating over 1100 people was completely full, and Dr. Bin Zhang, the President of CAPA made opening remarks and welcomed everyone. Next to speak was Dr. Clyde Ishii, the President of ASAPS. He thanked the organizers for inviting ASAPS and gave an inspired welcome. Also speaking in this session were Dr. Lim Jong Hak from South Korea, Marina Landau from Israel, and Su-Ben Tsao from Taiwan.

The next session was an International Forum on the development of aesthetic medicine in China. Dr. Clyde Ishii spoke

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The Business of Launching Your Practice
The ASAPS Gift of Expert Advice

Residents’ Symposium

Chair: Gary Tuma, MD
Co-Chair: Nolan Karp, MD

WE ARE AESTHETICS.

December 7–9, 2018
SHIELD Center, New York City

www.surgery.org/residents2018
A Successful International Aesthetic Surgery Congress in Shanghai, China

Continued from Page 65

about ASAPS and aesthetic surgery education in the United States. Dr. Foad Nahai lectured on the Aesthetic Surgery Journal. Dr. Dan Mills talked about organizing an Aesthetic Surgery Fellowship, and Dr. Lee Pu discussed the professional career of a plastic surgeon in the United States. Drs. Yufeng Ai, Zouliang Qi, and Zhijia Wu spoke about aesthetic surgery and medicine in China.

The afternoon session on December 9 and the full day December 10 consisted of panels with two lectures from ASAPS faculty and two lectures from Chinese faculty. This included the following sessions: Fat Grafting/Body, Aesthetic Breast, Rhinoplasty, Injectables/toxins/non-invasive, and Facial rejuvenation.

On December 9 there was a Faculty dinner cruise on the Hangpau River. There was excellent food and fine Chinese wine. The view of the Shanghai skyline was spectacular. We enjoyed a live band with very spirited Chinese and American dancing. The hospitality was terrific and faculty members really enjoyed such an event in this metropolitan city.

Overall, this meeting in Shanghai was a great experience for the ASAPS faculty. The venues were excellent and the meeting organization and operations were at the level that we have in the USA. There was simultaneous translation from English to Chinese and vice versa as well as other common western languages. The general impression of the Chinese organizers was that the ASAPS faculty provided terrific talks and this meeting represented a good opportunity for American and Chinese plastic surgeons to work together and learn directly from each other. The feedback for this congress, by our Chinese colleagues, has been the best scientific meeting of aesthetic surgery education in the country for 2017. The Chinese organizers would like to make this meeting as an annual event in Shanghai, China if possible.
Are You Making the Most of the ASAPS Advantage Provider Program?

The Advantage Provider Program was created to provide members with pre-negotiated special pricing on products and services, to enhance practice performance.

Each ASAPS Advantage Provider is rigorously vetted, carefully selected and has agreed to uphold our strict ethical standards.

When you purchase a product from an Advantage Provider, you are also helping The Aesthetic Society offset costs, which helps keep your membership fees as low as possible.

ASAPS.CLOUD POWERED BY RONAN SOLUTIONS

The Aesthetic Society is pleased to announce ASAPS.CLOUD—a new service, brought to you by ANZU®—the creators of RADAR Resource, and Iron Medical Systems®—a leading provider of secure private medical clouds. As the newest ASAPS Advantage Program provider, ASAPS.CLOUD is the first HITRUST® certified, aesthetic and plastic surgery-specific cloud offering in the world.

For more information, please contact Ronan Solutions (partnership of Anzu & Iron Medical Systems) at 602.884.8330, or by email at sales@ronansolutions.com.

Vizium360/RealPatientRatings® is a survey-based system designed to harvest verified patient reviews for your website that patients want to see and search engines value. This content boosts rankings and increases traffic and conversions. Your patients can use our ReviewMultiplier™ to post reviews on major consumer sites and enhance your online reputation.

Vizium360/RealPatientRatings offers its patient rating software at a reduced rate for ASAPS members. 800.267.1228, extension 106 • www.vizium.com
The American Board of Plastic Surgery will institute sweeping changes in response to diplomate concerns regarding the burden, cost and relevance of the current Maintenance of Certification in Plastic Surgery Program.

Some of the planned changes for 2019 include:

1. **Testing from home rather than traveling to a test center.**
   The 4 modular continuous certification exams (Hand, Cosmetic, Craniofacial and Comprehensive) will be Internet-based. Diplomates may log in as often as necessary during the month of April to complete the 200 questions from the comfort of their home.
   Pre-test studying time dramatically reduced. Pertinent content for each question will now be incorporated into the exam. After answering a question, the diplomate will be directed to the rationale. After reading the rationale, the diplomate will be offered an additional opportunity to answer the question correctly if incorrectly answered on the first attempt.

2. **Knowledge Check-Ins available.**
   The ABPS will offer annual 30-question assessments. The check-ins are part of a longitudinal learning program that will provide immediate feedback on subject matter and educational resources. The longitudinal assessment will start as a voluntary pilot study in 2019—all diplomates are welcome to participate. After ABMS approval of this pilot, satisfactory completion of the annual knowledge Check-Ins, for a 10-year cycle, will result in an exemption from the 10-year exam.

3. **Reduced Fees.**
   The ABPS will convert to a single annual fee that is a 15% reduction of the current 10-year total fee structure.

4. **Reduced Reporting.**
   The Professionalism requirements will be reduced to reporting twice during the 10-year cycle rather than three times. A Professional Standing Update will be required in Year 3 of the 10-year cycle and a Professionalism Audit will replace the Examination Application in Year 9.
   Many more changes have been enacted that will reduce the diplomate's cost and time commitment. Look for greater detail throughout 2018. The ABPS appreciates all those diplomates who provided feedback and is pleased to offer these changes to make continuous certification less burdensome, more relevant and more valuable.
   Please send feedback or suggestions to staff@abplasticsurgery.org.
REVANCE IS PURSUING WAYS TO ADVANCE THE NEUROMODULATOR PRODUCT CATEGORY

The neuromodulator market hasn’t changed significantly in more than 30 years, yet patient needs and wants continue to evolve. An emerging biotechnology leader in aesthetic medicine and underserved therapeutic specialties, Revance is poised to enter – if not redefine – the neuromodulator space.

Fueled by rigorous research and innovative thinking, we are exploring truly new solutions that meet the growing expectations of patients and the surgeons who serve them.

THE JOURNEY BEGINS AT REVANCE.COM
POWERED BY REMARKABLE SCIENCE.
DRIVEN BY ENDURING PERFORMANCE.

Revance® is a proud Alliance partner of The Aesthetic Society and its commitment to education, research, and innovation.
SEE WHERE OUR SCIENCE AND PERFORMANCE WILL TAKE US NEXT

Revance is more than a biotechnology company taking an innovative approach to neuromodulator science – we’re on a continuing journey to redefine aesthetic medicine. We are unified in our purpose and possess the speed, the audacity, and the grit to go the distance. We’re ready. Are you?

FOLLOW EVERY STEP ON REVANCE TV

We’re creating an exclusive aesthetic medicine channel with some of the world’s leading pioneers in social science, medicine, and sports. Take an early look today and tell us what you think. We look forward to your feedback and partnership as we build this channel together.

JOIN THE JOURNEY AT REVANCETV.COM
ASAPS.CLOUD: The New Practice Technology Standard
An ASAPS Advantage Partner Offers Security for Your Data

ASAPS.CLOUD is the first HITRUST® certified, aesthetic and plastic surgery-specific cloud offering in the world, and is an ASAPS Advantage Program, offering substantial savings to ASAPS Members. Created by ANZU®—the creators of RADAR Resource—and Iron Medical Systems®—a leading provider of secure private medical clouds, the ASAPS.CLOUD provides the highest assurance that your patient information is protected from cyber threats.

As a leading expert and the largest cloud provider to radiation and medical oncology organizations nationwide, Iron Medical Systems bring ASAPS members a HITRUST certified infrastructure that meets the highest standards for managing electronic protected healthcare information (ePHI), protecting electronic medical records (EMR/PM) and ensuring ultimate data privacy, regulatory compliance and security of patient photos. Private clouds are usually reserved for large organizations and wealthy businesses, but ASAPS is proud to endorse this highly optimized and workflow-specific system, built expressly for the aesthetics practice, at a fraction of what similar services would cost anywhere else.

Private clouds are usually reserved for large organizations and wealthy businesses, but ASAPS is proud to endorse this highly optimized and workflow-specific system, built expressly for the aesthetics practice, at a fraction of what similar services would cost anywhere else.

An aesthetic surgery practice has unique security risks that are different from other medical specialties. Before and after photographs and 3D digital images are an integral part of the patient’s medical record and treatment plan. Unfortunately, patient photos make aesthetic practices the most vulnerable entities to malicious attack. Compromise of such images with their imbedded patient metadata can produce devastating results to practice reputations, including serious legal implications. The ASAPS.CLOUD solves this problem by never storing an image file in the user’s system, even at time of upload, by executing the imaging software in the cloud and not on the user’s computer. In addition, by using the revolutionary “bundleBOX™” a nano-computer about the size of a deck of cards, all uploaded photos instantly stream to the protected cloud and are not stored locally, protecting them from risk.

With ASAPS.CLOUD, each practice resides within its own private space—there is no joint tenancy within the software or virtual architecture of your infrastructure. Additionally, your private cloud lives in a thermo-regulated steel vault—behind armed guards and biometric security. Critical data is real-time mirrored to multiple backups and locations 24/7.

Need to access patient information while not in the office? World-class infrastructure and triple-redundant network connectivity ensure that you’ll be able to use your mission-critical systems from the office, home, on vacation or even in the air, if need be, on your laptop, iPad, Surface or even an iPhone.

ASAPS.CLOUD is always online. Always. ASAPS.CLOUD resides in the IO Data Centers that boast “24xForever™” uptime. IO Data Centers are SSAE 16-compliant, SOC 2 Type 2 information fortresses taking care of entities like Goldman Sachs, Lockheed Martin and CBS.

ASAPS has also recognized the significant threat of ransomware to its member practices and how a successful attack can have a devastating effect on patient care, patient privacy and practice reputation. The average direct cost (prior to insurance, legal fees and reparations) to a practice that faces a ransomware attack is $17,000, with recent examples demanding more than $100,000. Most practices are unprotected and end up paying the ransom, desperately hoping that their patient information and practice systems will be returned intact, which is not always the case. As a HIPAA breach, every hacked practice is required to report the event to the Office of Civil Rights and likely to the entire patient database as well.

Your transition to the cloud will be simple, easy and efficient. Regardless of whether you use Nextech, Inform&Enhance®, Vectra®, Mirror™ or other medical software, ASAPS.CLOUD will allow you to sleep better knowing your ePHI and patient photos are secure, protected and backed up.

For more information, please contact Ronan Solutions (partnership of Anzu & Iron Medical Systems) at 602.884.8330 or by email at sales@ronansolutions.com.

Learn More about ASAPS.CLOUD at The Aesthetic Meeting!

Visit Ronan Solutions and the ASAPS.CLOUD in The Aesthetic Marketplace, Booth #724, Saturday, April 28 – Monday, April 30, 9:00am – 5:00pm

Regardless of whether you use Nextech, Inform&Enhance®, Vectra®, Mirror™ or other medical software, ASAPS.CLOUD will allow you to sleep better knowing your ePHI and patient photos are secure, protected and backed up.
CAN YOU BENCHMARK YOUR PRACTICE AGAINST 1,433,502 PROCEDURES?

NOW YOU CAN WITH

The Aesthetic Neural Network is a software solution that gives meaning to your own practice information:

- Harvest your practice data
- Benchmark your practice with other ASAPS members
- Cull out inefficiencies and improve your bottom line

**ANN can revolutionize the way you manage your practice. . . Is it time for you to get on board?**

For more information, contact Melissa Schmidt at melissa@surgery.org
562-799-2356

An exclusive ASAPS Members Benefit

Meet “ANN” in Booth #625 in The Aesthetic Marketplace!
Meet ANN: The Aesthetic Neural Network

A Complimentary ASAPSMember Practice Benchmarking Tool

With the Aesthetic Neural Network (ANN) - developed exclusively for ASAP members—you can now truly harness the power of your own data to benchmark your practice against your peers in a safe, private, and secure environment.

How Does ANN Run?
ANN is powered by hardware called a bundleBOX, which is delivered to your office and connects directly to your existing system. Each night, the bundleBOX “queries” your software for basic procedural and billing information, minus patient identifiers, and transfers it to a highly secure Cloud environment. The ANN Cloud has the highest level of security possible today (HITRUST). As opposed to “public Clouds”—think Amazon or Google—ours is a private Cloud only for individual ASAP members. It’s a level of security you most likely don’t have in your office.

How Do I Compare?
Developers work to ensure that your individual practice terminology, which might be different than your colleagues’, is mapped appropriately. That way, when the data is delivered back, you are comparing apples to apples.

Your data is interpreted by the proprietary ANN software system and translated into specialized, user-friendly Dashboards for you. Each Dashboard shows your data against the aggregate (the compiled data of all other aesthetic surgeons on ANN).

These real-time Dashboards show you snapshots of your practice, helping you to answer questions like:
• Do I see the most patients during the same month every year? Is it the same month when many of my colleagues also experience a peak?
• Did my gross charges peak in the same month (or year) when I had the highest volume of patients?
• How many of my patients are coming back to me for a different procedure? Am I seeing the same common patterns between first and second procedures that my colleagues are seeing?
• How many of them are seeing me again for the same procedure? Is that a higher or lower percentage than my colleagues?
• Which of my practice areas is most profitable? Is it the same area where I have the most patient volume?
• What is the balance of gross charges from my surgical vs. non-surgical offerings?
• Is the new laser I purchased bringing me the same patient volume and profitability as my colleagues?
• Are my colleagues offering new procedures or technologies I should consider?
• Is my targeted marketing, advertising, or social media outreach bringing more new patients during a specific time of year?

How Can I Use This Data?
The aggregated data in ANN can be used for practice management decisions, marketing strategy, research, advocacy, patient safety issues...the list is only restricted by your imagination.

For more information on ANN, please contact Melissa Schmidt, ANN Product Manager: melissa@surgery.org or 562.799.2356.

Example of a Drill-down on a Pie Chart
You can “drill-down” into your data by a double click on the pie chart. In this example, med spa procedures are over 50% of additional revenue generated. Double click on the med-spa portion of the pie chart to reveal the distribution of the procedures and their revenue.

Drilling down on “Dermal Fillers” reveals the exact products distribution and revenue.

Meet “ANN” at The Aesthetic Meeting Booth #625 in The Aesthetic Marketplace
Saturday, April 28 – Monday, April 30 • 9:00am – 5:00pm
Exclusive Medical Liability Insurance Premium Discount for ASAPS Members

Ask about our CYBER SECURITY POLICY

For more information contact Chris Edge at cedge@amsrrg.com or 866-461-1221

Experience the Difference www.amsrrg.com
Aesthetic Surgery Journal Update

To read the current issue of the Aesthetic Surgery Journal, visit: https://goo.gl/KAH1Yy

More Is More, Faster Is Better

To date we’ve published 5 monthly issues this year and the response to our frequency increase has been very positive. If you’ve published an article this year, you’re likely to have noticed that before it was published in final form, the accepted manuscript appeared online within approximately one week of acceptance. We believe in the importance of rapid publication and ensuring new techniques and science reach our readership as soon as possible. We hope you will always consider ASJ first for your new submissions.

Join Us in the ASAPS Booth

The Aesthetic Surgery Journal team will be in NYC for The Aesthetic Meeting 2018 and we look forward to spending time with all of our authors, editors, reviewers, and readers. Come take a photo with a creative version of the Journal cover designed to “pop” on social media. There’s lots new about and discuss along with special events taking place such as the Galatea Surgical Champagne Toast. Come sit a spell, talk about your ideas for new submissions to ASJ, and learn what’s next.

Video Is King:

A special shout out to Dr. Michael Lee, who recently joined our editorial board as Digital Video Editor. Dr. Lee’s keen eye has been critical to a new initiative whereby video still images are selected and appear in print—you may have noticed these still images in the past few issues of ASJ. We know how important video is in our specialty and the ability to provide video and synthesize its importance concisely is a new benefit we hope will be helpful to our readers. If you’re planning to submit a video to ASJ along with your article, write us here with questions: journal@surgery.org.

A Well-Earned Promotion

We congratulate the talented Hunter Alexander who was recently promoted to Managing Editor of ASJ and RADAR. Hunter manages the peer review process for ASJ and works closely with Dr. Nahai, Dr. Kenkel, Phaedra Cress, and Kyleigh Vrettos to ensure the highest quality standards of excellence are maintained for each and every article. He has worked diligently at ASAPS for more than 7 years. We are also excited to share the news of his son’s birth. Baby boy Johnny Hunter Alexander was born on 2/1/18. Congratulations, Hunter!

Read Up, School Up with ASJ

Here are some must-read articles you may find useful in your daily practice:

Most Cited:

- Fat Injection to the Breast: Technique, Results, and Indications Based on 880 Procedures Over 10 Years: https://goo.gl/uwbGh2
- Natrelle Style 410 Form-Stable Silicone Breast Implants: Core Study Results at 6 Years: https://goo.gl/8RwLsA
- Abdominoplasty With Progressive Tension Closure Using A Barbed Suture Technique: https://goo.gl/RVMSZZ
- Complications Following Injection of Soft-Tissue Fillers: https://goo.gl/4VUhr
- Use of the Acellular Dermal Matrix in Revisionary Aesthetic Breast Surgery: https://goo.gl/Mqo6bk

Most Read:

- Labia Minora, Labia Majora, and Clitoral Hood Alteration: Experience-Based Recommendations: https://goo.gl/tbCeg3

How Can We Improve?

All that we do is to serve the readership—our ASAPS membership. Your feedback is critical to our continued success. Do you want to shoot a video or become active with our social media team? If you have ideas for improvement or suggestions for innovations, please drop us a line here: journal@surgery.org and as always, we appreciate and thank you for your support.

Kyleigh Vrettos, ASJ’s Editorial Assistant with Dr. Foad Nahai, ASJ’s Editor in Chief and Debi Toombs, ASAPS Senior Director of Meetings and Education.

Dr. Michael Lee, ASJ’s Digital Video Editor.

Hunter Alexander, Managing Editor, ASJ and RADAR, and his baby boy Johnny Hunter Alexander.

Dr. Jamil Ahmad, My Way Section Editor visits with Phaedra Cress, Executive Editor of ASJ.
Learn More About RADAR at The Aesthetic Meeting. Visit Booth #529!

Login today at www.radarresource.org

Go to www.surgery.org/radar for more information or contact hunter@surgery.org
Stop by the ASAPS Booth to experience the power of RADAR

Be sure to bring your tablet, laptop, or smartphone to The Aesthetic Meeting and explore the latest abilities that RADAR Resource delivers! Offering fresh content, new discussion capabilities, detailed interactive cases, and much more—this is the ultimate tool for ASAPS Members, Candidates for Membership, Residents, and ASJ subscribers. Learn how this Aesthetic Society benefit can work for you by having a personal demonstration with our RADAR gurus! Feel free to stop by the ASAPS booth to experience the power of RADAR while attending the meeting.

What Can You Do on RADAR?

• Interact, share ideas, and ask questions within a private social network of your colleagues (now with both open and private discussion capabilities).
• Access fresh content that is added regularly to the RADAR library. Content includes: issues of the Aesthetic Surgery Journal, extensive video content, patient safety resources, practice management webinars, and much more!
• Highlight text, bookmark videos, and add notes to publications with your personal audio, a video, and/or reference links.
• Create your own personal digital library by uploading PDF content on RADAR.
• Use the various annotation features on the platform for your personal content and build detailed binders on your clinical research or personal topics of interest.
• View interactive cases provided by plastic surgeons and industry. These cases illustrate options, rationale for approaches, and best practices via branch logic, multimedia attachments, and reference links.

Logging Into RADAR

Access to RADAR is complimentary to Members and Candidates for Membership of The Aesthetic Society (domestic and international). Residents and Fellows enrolled in The Aesthetic Society’s Resident Program, and Aesthetic Surgery Journal subscribers. Users can access RADAR by:

• Responsive Web Version—Via your tablet, smartphone, or computer, go to www.radarresource.org and input your login credentials.
• iPad App—Via your iPad 2 or newer, search ‘ASAPS’ in the App Store and download the free app.

Questions or Concerns?

Contact Hunter Alexander (hunter@surgery.org) if you need any help!

Have You Mistakenly Unsubscribed?

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 asaps@surgery.org, and ask to be re-subscribed to our communications list. We value your support of The Aesthetic Society. Thank you!

Surgeon as consumer

Is it Time to Give that Useless 510K Device the SAC?

Ah, 510K devices. “No downtime.” “Cash cows.” “No adverse events.” “The one thing that will have patients lining up at the door.” All wonderful claims.

Of course, many of these devices do live up to their promotion and hold an important place in your armamentarium. Patients love noninvasive options. And often these procedures can turn a one-time visit into a regular and loyal patient.

But, let’s face it, many of these pieces of equipment don’t live up to their promises. For years members have searched for guidance, before leasing or purchasing equipment. Now, thanks to the Surgeon as Consumer product (SAC), you have it.

Based on a simple star rating system, SAC was created by members, for members. It lets you review your 501K device in a password protected, safe environment. You can even submit a review anonymously.

You can access SAC by logging onto www.asaps.org and entering your user name and password. There you will find reviews from other members and be able to submit your own. Remember, SAC is a service exclusively for use by Aesthetic Society members.

Help yourself and help others by reading and writing device reviews today!

Learn More about Surgeon as Consumer at The Aesthetic Meeting!

The Aesthetic Marketplace
Booth #624
Saturday, April 28 – Monday, April 30, 9:00am – 5:00pm
CosmetAssure®
We Cover Complications.

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the GOLD STANDARD in complications insurance.

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Protect your PRACTICE.

THE AESTHETIC MEETING 2018
New York · April 28 - 30

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Some Patients of Cosmetic Surgeon Praised by Reality TV Stars Say He Disfigured Them

**Inside Edition** Broadcast
http://ivet.co/2FZ0Oc8

Excerpt: Reality TV stars like Mob Wives’ Renee Graziano and Love & Hip Hop’s Kimbella may swear by Dr. Ayman Shahine, but not everyone is a fan of the gynecologist turned cosmetic surgeon. Connie Zuniga, 29, wanted to get her bikini figure back, but claims the Brazilian butt lift performed by Dr. Shahine left her disfigured.

Inside Edition asked Dr. Adam Rubinstein, a board certified plastic surgeon and member of the American Society for Aesthetic Plastic Surgery, to examine Zuniga. He says her procedure was botched. “Without a doubt—there is no doubt in my mind—I would call that a botched procedure,” Rubinstein said.

**The 4 Biggest Plastic Surgery Trends for 2018**
Allure

Excerpt: As far as cosmetic procedures go—2017 was the unofficial Year of Plumped-Up Lips. While lip augmentation is still on the rise, the www.surgery.org (ASAPS) predicts some non-lip-related procedures will be all the rage in 2018. Below, the most surprising trends on the horizon for the new year.

“It creates a full, perky look—it’s essentially an internal bra, with no foreign material,” explains Grant Stevens, a Los Angeles-based plastic surgeon, who pioneered the two-hour procedure after noticing that lasers affect breast tissue similarly to facial tissue (i.e. improved elasticity and smoothness). Instead of removing and discarding excess skin from the breast, the Laser Bra Lift leaves skin intact and treats it with a CO2 laser, thereby creating an “internal bra.”

**When a Man Needs a Safe Place**
New York Times:
http://nyti.ms/2BGHyqZ

Excerpt: On Dec. 26, Dr. Rowe is opening the Club House, a medical man-cave on the Upper East Side where men can gather for Poker Botox Nights, Cognac and Chemical Peels, hair transplants, microneedling, liposuction and, yes, penis enlargement procedures.

Possibly he’s on to something. About 8 to 10 percent of plastic surgery procedures across the country are performed on men, according to the American Society for Aesthetic Plastic Surgery. Liposuction and tummy tucks are the top two procedures.

In 2014, Grant Stevens, a plastic surgeon, opened Marina ManLand next to his main office in Marina del Rey, Calif. It has a private entrance, reception area and treatment rooms with names like the Dog House, the Bear’s Lair and the Lion’s Den. The scent of new car leather and freshly cut green grass wafts through the rooms. The bathroom has a urinal and a 24-inch flat-screen TV with the making of the Sports Illustrated Swimsuit Issue playing on a loop.

“It’s very male friendly, but it’s not female unfriendly,” said Dr. Stevens, the president-elect of American Society for Aesthetic Plastic Surgery. “It’s not a strip club. It’s kind of a cross between a sports bar and maybe a smoker’s lounge.”

Will Butt Implants Really Give You the Bigger Booty of Your Dreams?

Women’s Health
http://bit.ly/2HDFa3z

Excerpt: In an era ruled by image, noninvasive treatments like injectables and dermal fillers appeal to consumers across multiple demographics. According to the American Society for Aesthetic Plastic Surgery, Botulinum Toxin—neurotoxic cosmetic injections like Botox, Dysport and Xeomin—is the most popular nonsurgical option with more than 4.5 million procedures performed in 2016. No longer associated with “getting older,” the clinics are seeing unprecedented numbers of Millennials flocking to get the treatment done. Within just five years, Botulinum Toxin use among people aged 19 to 34 increased by 87%.

**Show Your Patients You Are a Member of ASAPS**

Alerting your patients that you’re a member of one of the most distinguished medical societies focused on higher learning is easy! Simply use our complimentary logos on your website, stationery, business cards, brochures, and advertising to let prospects know that you’ve achieved the distinction of membership. Logos can be found here: http://bit.ly/1aLdLq0
For information on how logos can be used, please review: http://bit.ly/2yJ0Yr6
### WOMEN’S GUIDE TO BREAST IMPLANT CHOICES

Consider the Benefits and Compromises of Each

<table>
<thead>
<tr>
<th></th>
<th>Silicone Gel Breast Implants</th>
<th>IDEAL IMPLANT® Structured Breast Implant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Looks Good</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Feels Natural</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Capsule Contracture Risk*</td>
<td>Allergan 16.2% Mentor 9.8% Sientra 10.0%</td>
<td>6.3%</td>
</tr>
<tr>
<td>Rupture Risk*</td>
<td>Allergan 7.4% Mentor 3.4% Sientra 5.4%</td>
<td>1.8%</td>
</tr>
<tr>
<td>Rupture is “Silent”</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>How Rupture is Detected</td>
<td>MRI scan</td>
<td>Look at breast</td>
</tr>
<tr>
<td>FDA Recommended Monitoring for Rupture</td>
<td>MRI at 3 years, then every 2 years for life</td>
<td>None</td>
</tr>
<tr>
<td>FDA Recommends Removal if Rupture Detected</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Rupture Removal Surgery</td>
<td>Complex (possible capsulectomy)</td>
<td>Simple</td>
</tr>
<tr>
<td>Material Contacting Tissues</td>
<td>Silicone gel</td>
<td>Saline</td>
</tr>
<tr>
<td>Material is Absorbed</td>
<td>No (sticks to tissues)</td>
<td>Yes</td>
</tr>
<tr>
<td>Rupture Warranty (Lifetime replacement; $3,500 for 10 yrs)</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Capsule Contracture Warranty (Replacement for 10 yrs)</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>FDA Approved for Ages 18-22</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Incision Length</td>
<td>Longer</td>
<td>Shorter</td>
</tr>
<tr>
<td>Patient Fee</td>
<td>-</td>
<td>About $500 more</td>
</tr>
</tbody>
</table>

See the benefits of the Structured Implant over Silicone Gel Implants

To learn more, visit idealimplant.com

Refer to the FDA-approved IDEAL IMPLANT Patient Information Booklet at idealimplant.com for information about the risks and benefits associated with the IDEAL IMPLANT® Structured Breast Implant. Additional information may be obtained at idealimplant.com.
As my year as President as ASERF comes to a close, I can’t help but be proud to be serving in this role as we celebrate ASERF’s 25 years of Scientific Advances. The importance of clinical research to patient care is key to our specialty, and ASERF plays a vital role in funding aesthetic surgery research, with the vast majority of donations going directly to research, not administration, fundraising or other superfluous concerns.

**ASERF at The Aesthetic Meeting**

If you’re attending The Aesthetic Meeting 2018 in New York, you’ll have ample opportunities to learn more about ASERF and take part in this celebration of our 25 years.

**Honoring the Late Scott Spear, MD**

Each year, ASERF has the opportunity to honor some of our specialty’s most influential surgeons and researchers. This year, the ASERF Career Achievement Award will posthumously be given to the late surgeon, educator, and researcher, Dr. Scott Spear. The award will be given during the ASAPS/ASERF Member Business Meeting on Sunday, April 29, 2018, from 12:00pm to 1:30pm, in Room E12–14 of the Jacob K. Javits Convention Center. I hope you’ll join me in paying tribute to our honoree by making a donation in honor of the distinguished career of Dr. Spear. To do so, please visit The Aesthetic Meeting’s registration area or go to www.aserf.org to make your gift online.

**Bid to Win in the ASERF Silent Auction**

The ASERF Silent Auction is a terrific way to assist ASERF in raising funds for research, while getting a chance to win and save big on a wide array of products and services. A special thanks to all of our donors for your kindness, support and generosity. (A full list of vendors and their donations can be found in this issue of ASN page 28 The auction is held inside The Aesthetic Marketplace, in Booth #743 on Saturday, April 28 – Monday April 30. Make sure to get your bid in by the time of auction close, Monday, April 30, by 2pm Eastern. Bidding can also be done via phone or online at www.handbid.com/aserf.

**ASERF Premier Global Hot Topics (#S12)*

If you’ve ever attended an Aesthetic Meeting, you’ll know that the ASERF Premier Global Hot Topics is always a lively, provocative educational experience. This year, we are privileged to have as moderators Jamil Ahmad, MD; Tiffany McCormack, MD; and Simeon Wall, Jr., MD; guiding us through the fact and fiction of the latest advances and trends. Join us on Friday, April 27, 2018, 1:00pm – 6:30pm.

**ASERF Research and Innovative Technology Luncheon (#S15)*

Each year I end up learning something during the annual ASERF Research and Innovative Technology Luncheon, which is always followed by interesting conversations with my colleagues. I hope you’ll consider attending on Saturday, April 28, 12:30pm – 2:00pm.

**ASERF Bootcamp: So You Want to do Research (#312)*

I’m very excited about this new course for which I’m faculty, along with Spencer Brown, PhD, Mark Clemens, MD, Chris Pannucci, MD, and David Sarwer, MD. Each year, I hear from my peers, “I really would like to do aesthetic surgery research, but don’t know how…” This course addresses that very topic, walking you through the ins and outs of the valuable field of aesthetic surgery research. I hope to see you at course #312 on Monday, April 30, 2:00pm – 4:00pm.

**ASERF Photo Ops**

I hope you’ll join in the 25th Anniversary fun by taking your photo in front of our ASERF logo photo op. Or, stop by ASAPS in The Aesthetic Marketplace, Booth #529, and select the ASERF background in the “We Are Aesthetics” Green Screen Photo Booth. You’ll get a free printed photo, as well as one emailed to you, from 9:00am-5:00pm on Saturday, April 28 – Monday, April 30.

**Thank You!**

This has been a terrific year for ASERF and I’m proud to have played some role in advancing our organization and setting it up for continuing success. My sincere thanks to the ASERF Board of Directors and Executive Committee for their ongoing support and dedication to the specialty:

- Julio Garcia, MD, MD—President-Elect
- Robert Whitfield, MD—Vice President
- Luis M. Rios, Jr., MD—Treasurer

On a personal note, Julio, I know that this fine organization will be in your safe care, given your dedication to our specialty of aesthetic surgery. Good luck, dear friend!

To everyone, please keep improved patient care and satisfaction in the forefront of your thoughts. Whether you’re seeing a patient in your office, reading up on the latest research in ASJ on RADAR Resource, or making a donation to ASERF, your efforts and dedication do make a difference, and I appreciate your support.

Dr. Barry DiBernardo is an aesthetic plastic surgeon practicing in Montclair, New Jersey, and serves as the President of ASERF.

*Additional fees apply.

**What Grants has ASERF Recently Funded?**

- Dr. Narayanan Nair—Genomic Profiling to Understand the Pathogenesis of BIA-ALCL
- Dr. Ross Sayadi—New Innovation for Projected Flap Design
- Dr. William Adams, Jr.—Biofilms and Breast Implants—Scientific Guidance (for) Prevention and Treatment
- Dr. Marshall Kadin—Pathogenesis of BIA-ALCL

Completed research is generally presented as abstracts during The Aesthetic Meeting and/or submitted for publication to the Aesthetic Surgery Journal.
Working together to advance the science, art, and safe practice of aesthetic plastic surgery and cosmetic medicine through education, research, and innovation while maintaining the highest standards of ethical conduct among qualified plastic surgeons.

Support ASAPS Industry Partners and consider using their products in your practice.
Membership FAQs

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

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

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

When will the membership vote on my application?
Applicants who submit materials for the July 1 deadline are eligible for election at the end of the year. Applications submitted by the January 5 deadline are eligible for election in the Spring.

What will fulfill the meeting attendance requirement?
The following meetings are exclusively organized by The Aesthetic Society, and qualify:
- The Aesthetic Meeting (ASAPS Annual Meeting)
- The ASAPS Las Vegas Facial & Rhinoplasty Symposium
- The Biennial Aesthetic Cruise
- ASAPS Breast & Body Symposium

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 $1,198
- Membership dues for International Active Members are $470

How many sponsors will I need to have ultimately?
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 ASAPS Active/Life Member that knows you well. Each sponsor will need to complete the sponsorship form on your behalf (the forms will be included with the application). International applicants must have one ASAPS Active/International Active or Life Member sponsor, and the other must be a member in a national plastic surgery society acceptable to ASAPS, or from an ISAPS member in their country.

For information on the full application process, visit the Membership section of surgery.org.

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

Meet the Staff

Christina Diaz
Registration and Administrative Assistant Christina Diaz might not be a familiar face, but she might be a familiar voice, as she is often one of the first to respond to callers of The Aesthetic Society. She started as a temporary hire in October 2014, but was officially hired on January 1, 2015 as a full time employee. Asked why she enjoys working at ASAPS, Christina replied, “I love the people I work with. They make coming into work something I look forward to each day. I also really enjoy getting ready for The Aesthetic Meeting! It is amazing seeing everything you’ve worked on all year long come together in one magical week!”
In her free time, Christina enjoys watching anime with her teenage son, going to Disneyland, and gaming with her boyfriend. If you’re attending The Aesthetic Meeting, stop by the Registration Desk and introduce yourself to Christina!

Share Your Stories!
ASAPS Members, have you found a grateful patient through our Smart Beauty Guide website? Or learned a technique at The Aesthetic Meeting which changed your practice? If you’ve benefited in some way by the education you’ve received or through the tools and services The Aesthetic Society offers, share your story with us! Simply email asaps@surgery.org and we will be in contact with you soon.
Allergan plc (NYSE: AGN), headquartered in Dublin, Ireland, is a bold, global pharmaceutical company and a leader in a new industry model—Growth Pharma. Allergan is focused on developing, manufacturing and commercializing branded pharmaceutical, device, biologic, surgical and regenerative medicine products for patients around the world.

Allergan’s success is powered by our global colleagues’ commitment to being Bold for Life. Together, we build bridges, power ideas, act fast and drive results for our customers and patients around the world by always doing what is right.

Galatea Surgical offers a Collection of Surgical Scaffolds constructed of monofilament fibers from its proprietary P4HB™ biopolymer, and indicated for soft tissue support to repair, elevate and reinforce deficiencies in plastic and reconstructive surgery. Galatea offers the first and only 3-dimensional scaffold for plastic and reconstructive surgery. GalaSHAPE 3D and GalaFORM 3D are designed to uplift the body’s natural shape, provide easier placement and reduce procedure time. Galatea scaffolds provide excellent strength retention, elasticity, and biocompatibility designed for long-term support. For more information, visit www.galateasurgical.com.

Cellfina® is the only FDA-cleared, minimally invasive procedure proven to improve the appearance of cellulite with results that last at least three years—the longest FDA-cleared duration for a cellulite treatment. With just a single procedure, Cellfina precisely and consistently treats the primary structural cause of cellulite dimples for the smooth look many women have been seeking for years. We’re so confident in the procedure’s results, they’re backed by our CYA (Cellfina® Yearlong Assurance) Guarantee. For more details, visit Cellfina.com.

The unique and profitable NeoGraft business proposition just got stronger! NeoGraft is now able to offer our plastic surgeons a “Subscription Model” that allows for substantial flexibility and even further solidifies our back-end partnership. Never has it been easier to tap into one of the fastest growing aesthetic trends, providing patients with a clinical outcome that is as good as it gets. With the purchase of the NeoGraft 2.0, we’ll reserve a spot for you to attend our upcoming clinical and business preceptorship with Dr. Jack Fisher, NeoGraft CMO and ASAPS past president.

To learn more about NeoGraft’s new “Subscription Model,” please contact Kelly Guest at kguest@neograft.com.

*Must acknowledge the ASAPS ad to receive preceptorship offer.

MERZ AESTHETICS™

For more than a decade, NewBeauty has served as the go-to resource for engaged, procedure-seeking consumers looking for education, insight and expert opinions on all things related to aesthetic and cosmetic treatments. Today, that expertise is available to your practice through NewBeauty Pro, a full-service marketing platform that can elevate your practice effectively and efficiently, while allowing you to reach the most qualified of new patients. To stand out in the crowded cosmetic marketplace and join our definitive list of top doctors in the country, contact us today at elite@newbeautypro.com.

Sientra, a leader in the plastic surgery industry and known for bringing innovation to the market, continues to evolve their product portfolio:

- AlloX2®, Dermaspan™ and Softspan™ expanders, offering the most innovative designs for optimal results
- Breast Implants with High-Strength Cohesive Silicone Gel, sold exclusively to board-certified and board-eligible plastic surgeons
- BIOCORNEUM, the physician’s choice for advance scar treatment, now with a new look
- MiraDry, the only FDA-cleared device to reduce underarm sweat, odor and permanently reduce hair of all colors

Sientra also offers ENHANCE practice-building webinars; designed to offer insights and expertise to plastic surgeons and their staff on practice management. Learn more about Sientra at sientra.com.

XpresHAn Technology™ creating gels that offer a range of flexibility and support for varied patient needs. For more information, please visit www.galdermausa.com and www.galderma.com.
AMS RRG, Inc. invites you to participate in the “Managing and Mitigating Aesthetic Risks” CME credited course on Monday April 30th at 2:00 pm at The Aesthetic Meeting. This course will cover:

- Clinical and administrative risks leading to a professional liability claim
- Identify and mitigate risks as to the litigious patient presenting for aesthetic procedures
- How to identify risks you may not see
- Compare and contrast settlements and complaints filed against aesthetic physicians in different states
- Review cases on Representative Contemporary Malpractice presented by panel
- Participants are encouraged to bring cases for Panel review and discussion

Please stop by the AMS booth, #523, to discuss any of the topics with us. Must register with ASAPS to attend the course.

Canfield Scientific is the global leader in developing 2D and 3D imaging systems for the medical and skin care industries.

- IntelliStudio® the fully-automated total body mapping system with 50MP camera, video options and programmable zoom, captures studio-quality non-polarized and cross-polarized 2D and 3D images quickly and easily.
- VECTRA® 3D technology offers powerful assessment and simulation tools for face, body and breast procedures, including the handheld H1 ideal for facial aesthetic procedures, the XT with 360° body stitching, circumferential measurement, and ultra-high resolution color image capture, and ground-breaking WB360 whole body surface imaging system.
- VISIA® delivers a powerful skin care consultation with fast, easy, reproducible photo documentation and surface and subsurface skin conditions analysis.

Learn more at www.canfieldsci.com.

CareCredit is a health, beauty and wellness credit card dedicated to helping millions of patients get the care they want and need for over 30 years by offering special financing options. Now accepted at more than 200,000 healthcare provider and merchant locations nationwide, the CareCredit credit card allows cardholders to make convenient monthly payments for aesthetic procedures that help them achieve the look they want. Once approved, patients can use their card again for additional procedures and services you provide.* CareCredit also gives reconstructive patients a way to pay for deductibles, co-pays and other fees not covered by insurance. Learn more about CareCredit by visiting carecredit.com/asn or call 855-860-9001.

*Subject to credit approval. Minimum monthly payments required.

CosmetAssure® exclusively provides board certified plastic surgeons with a financial safety net for patients having elective aesthetic surgery. The program works to remove the stress and uncertainty from unexpected medical expenses due to post-surgical complications.

As an Alliance Partner and the Gold Standard in complications insurance, we work diligently to deliver a superior product to surgeons and patients. CosmetAssure is easy to implement in your practice.

Exclusive program features include:
- ASAPS members automatically qualify for enrollment
- No cost to enroll
- Tiered pricing based on volume of cosmetic patients
- Capsular Contracture coverage for 18 months
- Convenient online claims reporting

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

KCI, an Acelity Company and the Cleveland Clinic present “Complex Surgical Cases in Acute Wounds and Breast Reconstruction: Pre-Operative through Post-Operative Considerations” to be held July 14–15, 2018 at the Cleveland Clinic, in Cleveland, OH. The two-day program will cover considerations and algorithms for utilizing negative pressure wound therapy, cover complex cases, feature a cadaver lab, and include a tour of the Cleveland Clinic.

Please contact your local Acelity representative or email Kristine.Villarreal@Acelity.com for more information.

Acelity L.P. Inc. and its subsidiaries are a global advanced wound care company that leverages the strengths of Kinetic Concepts, Inc. and Systagenix Wound Management, Limited.
Privately held aesthetics company Suneva Medical develops, manufactures and commercializes innovative products, including flagship brand, Bellafill®. Available in the U.S., Canada, Hong Kong, Korea and Mexico, Bellafill is the only dermal filler approved by the FDA for treating nasolabial folds and facial acne scars. For more information, visit www.sunevamedical.com.

- Bellafill® (U.S.) is the only dermal filler established safe and effective for the correction of nasolabial folds through 5 years
- Bellafill® (U.S.) is the only dermal filler indicated for the correction of moderate to severe, atrophic, distensible facial acne scars on the cheek in patients over the age of 21 years old

Thermi®, an Almirall company, is a leading developer and manufacturer of temperature controlled radiofrequency devices. The company currently offers three devices: ThermiRF®, Thermi250®, and ThermiVa®.

- ThermiRF: A platform technology which combines temperature control with advanced real-time temperature monitoring to enable a myriad of non- and minimally-invasive soft tissue options.
- Thermi250: A high powered, temperature regulated, radiofrequency system emitting at 470 kHz that offers patients temporary reduction in the appearance of cellulite.
- ThermiVa: A non-invasive radiofrequency device that heats vulvovaginal tissue.

To learn more about Thermi and what its technology can offer, please visit www.thermi.com.

Revance® is an emerging biotechnology leader in aesthetic medicine and underserved therapeutic specialties. We stand poised to enter, if not redefine, the neuromodulator product category.

We’re currently developing the first new neuromodulator product in nearly 30 years, our investigational product candidate, DaxibotulinumtoxinA for Injection (RT002). RT002 unites a highly purified botulinum toxin type A molecule with our patented peptide excipient to produce the first potentially long-acting injectable neuromodulator.

We recently announced positive Phase 3 pivotal trial results for RT002, meeting all primary and secondary endpoints. An open-label, long-term safety study is currently underway, with an anticipated application for approval in 2020.

Elevate your Skincare with the Power of Science. ZO® Skin Health’s premium solutions uphold the standard of excellence in skin health and rejuvenation. ZO®’s comprehensive philosophy provides skincare professionals and patients with essential resources for healthy skin through a continuum of protocols to deliver the most advanced results in the market. This systematic approach enables physicians to retain patients indefinitely, while keeping patients’ skin strong, healthy and free of disease. Our product formulations feature high concentrations of scientifically proven active ingredients, exclusive ZO® complexes and innovative delivery systems. Visit us to see what’s new at booth #717 at The Aesthetic Meeting.

For information on the products and services offered by ASAPS Industry Partners, please contact the companies directly, and be sure to let them know you are a member of The Aesthetic Society. Click on the company logos on www.surgery.org to link to the company websites.
Industry Partners Continue Their Support

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

We are thrilled to continue strategic partnerships with founding Premier partner Sientra and Founding Alliance partner Rosemont Media, along with Galatea Surgical, AMS, CareCredit, and Suneva Medical.

Premier Industry Partners

Galatea Surgical, Inc., an ASAPS Premier Partner for the past two years, is committed to enhancing and extending the life of aesthetic plastic and reconstructive surgery procedures through the use of the next generation in biomaterials. P4HB™ (poly-4-hydroxybutyrate). Galatea offers surgeons, a collection of monofilament, bioresorbable scaffolds that enable the patient to generate their own new tissue, resorb in 12–18 months and provide a 3–5 times stronger repair with the goal of achieving longer, more enduring results.

At this past year’s Aesthetic Meeting, Galatea celebrated 50 Years of Aesthetics by launching the first and only 3-dimensional scaffold for plastic and reconstructive surgery. These GalaSHAPE® 3D and GalaFORM® 3D scaffolds are designed to uplift the body’s natural shape, provide easier placement and reduce procedure time.

The May issue of the Aesthetic Surgery Journal will include one-year data for the Galatea Post Market Study “The use of GalaFLEX in Protic Breasts” by William P. Adams Jr., MD; Richard Baxter, MD; Caroline Glickman, MD; Bruce Mast, MD; Michael Tantillo, MD and Bruce Van Natta, MD.

William P Adams Jr., MD from Dallas, Texas commented, “The Galatea post-market study indicates the value of using mesh to support breast tissue during a mastopexy procedure. This study proves not only that the mesh works, but it works very well with extremely low complications. Virtually all patients elected to have Galatea mesh used in their breast lift procedures.”

“At Galatea, we are very proud of our premier partnership with ASAPS as we continue to partner with ASAPS surgeons to explore new uses for our Galatea Collection of scaffolds. Galatea scaffolds provide exceptional strength during the healing phase and offer a natural choice to soft tissue support in plastic and reconstructive procedures” states Lois Lombardi, Vice President of Galatea Surgical.

For more information on Galatea Collection of Transitory Scaffolds, please visit www.galateasurgical.com.

sientra.

2018 marks eight years since Sientra became ASAPS founding Premier partner! Sientra (NASDAQ:SIENT), is a leader in plastic surgery known for bringing innovation to the market through a diversified portfolio of breast implants and tissue expanders targeted exclusively to board-certified plastic surgeons, and a range of other aesthetic and specialty products including BIOCORNEUM® and miraDry. We are excited about the addition of miraDry to our portfolio and are announcing several significant improvements to the protocol that will benefit both professionals and their patients.

B.J. Scheessele, VP of Marketing for Sientra said, “We are proud to continue a long-standing partnership with The Aesthetic Society as the Founding Premier Partner. We believe this partnership is important in developing and maintaining relationships with ASAPS members as well as advancing innovations in the industry as a whole. As we approach the final FDA approval of our new U.S.-based manufacturing partner, we continue to serve a portion of our customer base and we look forward to expanding our best-in-class level of service. We appreciate the support board-certified plastic surgeons have given us throughout the years and look forward to a long and prosperous partnership.”

Sientra continues to lead education and awareness initiatives by publishing several articles providing a comprehensive look at safety, effectiveness and use of Sientra products. Final results from Sientra’s Core Study peer-reviewed published data at 10 years demonstrate overall safety and effectiveness of Sientra’s portfolio of round and shaped silicone gel breast implants, as well as high patient and surgeon satisfaction.

Finally, Sientra launched Full Circle, a first-in-kind annual charitable program to support research of breast cancer prevention, detection and treatment and to elevate awareness among breast cancer and breast reconstruction community.

For more information about Sientra’s product offerings, please visit www.sientra.com

Alliance Industry Partners

Applied Medico-legal Solution Risk Retention Group, Inc. (AMS RRG) enters year three as an Alliance partner! AMS RRG was established in 2003 in Florida, at a time when the state was at the epicenter of a major medical liability crisis. Medical liability companies were no longer covering doctors in Florida and as a result a healthcare crisis seemed imminent. Richard B. Welch and Steven Shapiro, MD utilized their healthcare backgrounds to create a liability solution for physicians that helped instill best practices and therefore lower premium rates. It worked! 15 years later AMS RRG is stronger than ever and premiums are once again competitive not only in the state of Florida but across the country.

AMS RRG continues to make best practices one of the focal points of our business. This was further demonstrated in 2012 when Harry K. Moon, MD, FACS was brought on board to start up Preferred Aesthetics. As a practicing Plastic Surgeon, Dr. Moon is able to provide a concierge level of personalized risk management tools and underwriting guidelines that give insureds the ability to reduce risk and save money as a result. Dr. Moon has not only made a significant impact in underwriting and risk management but also with managing claims. Dr. Moon applies his knowledge within the Aesthetics specialty to review professional liability cases and assist the claims attorneys in evaluating the severity

Continued on Page 91
The Most Trusted Name In Hair Restoration

Discover why NeoGraft is the must have tool in one of the fastest growing segments of the aesthetic industry.

-One of the highest per patient revenues in all of aesthetics.

-From training and technical support to marketing and scheduling, NeoGraft has a proprietary step-by-step process that will help drive patient leads and seamlessly integrate hair restoration into your practice.

-NeoGraft consistently ranks 96%+ “Worth It” by patients on RealSelf.com.

“When evaluating medical equipment, I look for a few consistent features: high patient satisfaction and patient demand, high revenue per procedure, the ability to delegate and low consumable costs. The NeoGraft device checked every box and provided my practice with top-notch customer support from day one. It’s one of the best investments I’ve made in my practice to date.”

-Stephen J. Ronan, MD, Blackhawk Plastic Surgery

Learn how to get your share of this 2.5 billion dollar industry at neograftdocs.com or by contacting Kelly Guest at kguest@neograft.com.
of the risk. If a claim should be settled sooner due to increased risk, Dr. Moon can discuss with the insured, make recommendations and assist the claims attorneys as required.

At AMS RRG our focus on medicine is what sets us apart from other medical liability companies. Contact us today at www.amsrg.com so you too can, Experience the Difference.

CareCredit is entering its second year as an Alliance partner. CareCredit is a health, beauty and wellness credit card dedicated to helping millions of patients get the care they want and need by offering special financing options. Now accepted at more than 200,000 healthcare provider and merchant locations nationwide, the CareCredit credit card allows cardholders to make convenient monthly payments for aesthetic procedures that help them achieve the look they want. Once approved, patients can use their card again for additional procedures and services you provide. * CareCredit also gives reconstructive patients a way to pay for deductibles, co-pays and other fees not covered by insurance.

“CareCredit is once again excited to be an ASAPS Alliance Partner and provide a payment option so that patients can move forward with treatments they want and need with the convenience of monthly payments. CareCredit has over 30 years of experience with patient financing helping to remove the payment hurdle from the decision-making process,” said Jill Frattallone, CareCredit Vice President of Sales and Client Development, Cosmetic and Dermatology.

Patients can now pay their pre-surgical deposits online up to 30 days in advance with CareCredit’s Pay My Provider. With Pay My Provider, patients can pay their deposits or outstanding balance online anytime from anywhere using their CareCredit credit card with special financing options.*

Start accepting online payment:
• Get your practice’s custom payment URL and share it with all your patients in statements, emails or social media.
• Spend less time on billing and collections.

• No extra fee for your practice. Processing rates are the same online as in the office.
• Receive payment in 2 business days.

A simple and convenient solution that can help your patients schedule without delay. And you get paid fast.

Learn more about CareCredit by visiting carecredit.com/asn or call 855-860-9001.

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

This year marks a special year for founding Alliance partner Rosemont Media as they celebrate the company’s ten-year anniversary! While they have grown and changed in many ways over the years, they remain dedicated to their initial goal: to provide effective digital marketing solutions through ethical and transparent services.

Rosemont Media has remained ahead of the curve in the digital marketing industry, which has enabled them to deliver innovative products and services of the highest quality. This has also helped them build a strong reputation in the elective healthcare marketing field.

“The thing that drives me the most is the constant change that continually presents new and exciting opportunities. I am very optimistic about the future of digital marketing and look forward to continuing to produce the highest quality websites and marketing strategies for healthcare professionals.” — Keith Humes, CEO

“My company our very first clients are still clients to this day, which is a powerful testament to the incredible talent of our team.”

— Courtney Humes, Product Development Director

They are extremely grateful to have the continued support and loyalty of incredible clients, who are some of the most prestigious and talented surgeons in the world.

Rosemont Media prides themselves on being a Modern Ad Agency. Through all-encompassing Internet strategies, market exclusivity, social media and search engine optimization, reputation management, continuous public relations support, impeccable website design, and unprecedented levels of customer service, Rosemont Media has achieved great success by working to ensure the success of clients.

For information go to www.rosemontmedia.com

Suneva continues as an Alliance partner into 2019. Dedicated to developing, manufacturing and commercializing novel, differentiated products for the aesthetic markets, Suneva Medical (San Diego, CA) meets the high demand of both physicians and patients with their flagship product, Bellafill.

Bellafill is the only dermal filler clinically proven and established sale and effective for the correction of nasolabial folds and the correction of moderate to severe, atrophic, distensible facial acne scars on the cheeks in patients over the age of 21 years old. Answering a need in the marketplace for longer-lasting, natural-looking results that improve over time, Bellafill has five-year safety and efficacy data from the largest and longest prospective dermal filler study ever conducted through the FDA.

“We are dedicated to training our medical professionals to ensure the best patient outcomes for every appointment,” says Suneva Medical CEO Preston Romm. “It is this commitment, in combination with our clinical data, post market surveillance results and proven efficacy that has driven an optimistic future for Bellafill.”

Bellafill® is only available through licensed medical professionals. The list of providing physicians and additional information can be found at www.bellafill.com.
Celebrating 10 Years of Digital Marketing Innovation

Rosemont Media has been in business for over a decade, working with aesthetic practices from all around the world. We are innovative thinkers striving to discover unique, yet effective opportunities to grow your practice through our all-encompassing strategies.

We are Proud to be the Founding ASAPS Alliance Partner

Committed to Excellence, Trained and Certified by Google

The Aesthetic Meeting 2018, NYC | Find us at Booth: #721
Custom Website Design
Strategy Takeovers
Sustainable SEO
Google Adwords Premier Partner
Social Media Marketing

Course 419:
Controversies in Online Marketing with Expert Q&A
Sunday, April 29, 2:00 - 4:00 p.m.
Presenter: Keith Humes, CEO Rosemont Media
2 CME CREDITS – PRIOR REGISTRATION REQUIRED WITH ASAPS

Course 517:
Taking Control of Your Online Reputation
Sunday, April 29, 4:30 - 6:30 p.m.
Presenter: Keith Humes, CEO Rosemont Media
2 CME CREDITS – PRIOR REGISTRATION REQUIRED WITH ASAPS
NEW!

POLICIES & PROCEDURES
EMPLOYEE HANDBOOK
JOB DESCRIPTIONS

The Essentials for Your Practice

Make Sure Your Practice is Running Smoothly with These Essential Tools!

A must for every office, these three essential documents have been created by your colleagues at The Aesthetic Society, with insight from leading practice management expert Karen Zupko & Associates, specifically for the aesthetic plastic surgery practice. Comprehensive and fully-customizable, simply download these Microsoft Word documents and personalize to your specific practice needs. These tools will help keep your practice running smoothly, allowing you to focus on what you do best.

ASAPS Members
ASAPS Candidates for Membership
ASAPS Residents Program
$299

Non-member Physician
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Enjoy 20% Savings on All Aesthetic Society Products!

Visit Booth #529 to enjoy your savings today.

To Take Advantage of this Special Pricing,
Please Call 562.799.2356

*Offer Good Through May 15, 2018 Only.
Some Products are Exclusively for Members of The Aesthetic Society.
The landscape of online consumerism has dramatically changed over the last several years. As Google becomes increasingly intuitive and influential, business owners must learn to adapt to the changes happening online. Although you don’t view your life’s work and passion as a commodity, growing online trends are transforming it into one. Even highly-skilled services are reviewed, rated, and consumed similar to how someone finds out which restaurant has the best food.

While you understand how your education, skills, and techniques set you and your practice apart from your competitors, people online don’t necessarily want to know how you are better than other practices; they just want to know that you are better. The technicalities of your profession fall by the wayside when it comes to your online presence and what people are saying about you and your practice. The cycle of click-throughs to lead conversion to obtaining a new patient is all dependent on today’s instant information world. Online, a patient’s testimonial and review can be as effective as a best friend’s recommendation.

**Why Do Reviews Matter?**

Studies conducted by BrightLocal indicate that over 90 percent of consumers read online reviews when searching for a local business. Of the people surveyed, 85 percent stated that they trust online reviews as much as personal recommendations, and 49 percent of people said they wouldn’t choose a business with a rating lower than four stars. From these studies, it is clear that having poor reviews can cause you to be undesirable to potential consumers.

Appearing favorable online can have a positive impact on your visibility in search engines. The good news is that you can improve your local organic search rankings as well as increase the likelihood you’ll appear in Google’s local 3-pack (the top three local businesses that Google suggests in a particular location). The businesses that appear in Google’s local 3-pack usually become the most viewed websites by people searching online for particular local categories. Factors that impact your chances of being in the Google 3-pack include your proximity to the searcher, your business’ engagement on social media, and citations (the consistency of your NAP—name, address, and phone number).

**Patient Testimonials vs. Reviews**

Patient testimonials are different than patient reviews. Patient testimonials are typically provided directly to you, which you can then post on your website. The ratings from these testimonials are likely viewed in local web searches. Reviews, on the other hand, are left by patients on platforms like Google, RealSelf, Healthgrades, Facebook, and Yelp. Additionally, Google My Business reviews are displayed in the local 3-pack and are one of the more important review sets to track.

**Do Testimonials and Reviews Impact Click-Through Rates?**

A study conducted by BrightLocal indicated that reviews have a significant impact on your click-through rate (CTR). Businesses with a five-star rating had a 69 percent CTR, and those with a four-star rating had a 59 percent CTR. Conversely, businesses with one- or two-star ratings showed a lower CTR than those with no reviews at all. From this information, we can infer that people have more trust in a business when there is nothing to say rather than when there is something bad to say.

**But Why are Click-Through Rates Important?**

So why does the number of clicks on your website matter? Visibility and the cycle of Google authority are the reasons why. Your website is key for creating leads, which then become consultations that you may not have received through word-of-mouth referrals. A well-constructed, clean, informative website plays a significant role in getting those leads, but it cannot happen if people never see your website. It works on this cycle:

- People click through to the website
- People stay on the website by clicking on various pages
- They potentially fill out a contact form
- This web traffic boosts your Google positioning
- Your business gains visibility
- You increase the likelihood of getting more click-throughs

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**Meet Peter Houtz at The Aesthetic Meeting!**

#309 10 Steps to Online Marketing Success*  
Saturday April 28 • 12:30 pm  
*Additional fee applies

Plastic Surgery Studios can be found in The Aesthetic Marketplace, Booth #429  
Saturday April 28 – Monday April 30  
9:00am–5:00pm

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Discover how Epionce clinical skin care improves the lives of your patients, and your practice.

**Fights Signs of Aging**
Clinically Proven Equal to 0.05% Tretinoin for Anti-Aging

**Helps Clear Problem Skin**
Clinically Proven Equal to 10% Benzoyl Peroxide for Blemish-Prone Skin

**Reduces Dark Spots**
Clinically Proven Equal to 4% Hydroquinone for Hyperpigmentation

For more information, visit us at ASAPS Booth No. 114 or contact us:
info@epionce.com | epionce.com | (866) 374 6623
Clinical study data on file. ©2018 Epionce, Inc.
How to Get the Ratings to Boost Your Click-Through Rate

You want to generate a higher volume of positive reviews to balance out any potential negative ones. Getting patients to leave reviews can often be as easy as asking, as seven out of 10 people will write a review when requested.

The review process starts in your office; you and your staff need to foster positive relationships with your patients. Within several days of a patient’s final follow-up visit, call or send an email or text asking if they would kindly provide you with a review. A good practice is to diversify review types between patients. You may want to direct one patient to Google, another to Healthgrades,” and a third to leave a unique testimonial for your website.

Monitoring Your Online Reputation

Not every review you receive is going to be positive. There are, unfortunately, people who are never happy with a service and others who only like to be negative online. Luckily, Google is working to improve the programs that identify spam or fake reviews. As a business, you should do your due diligence by regularly checking your review platforms.

If you come across a negative review from an actual patient, you can attempt to respond to him/her. Try to understand why he/she had a poor experience and find out what you can do to correct the issue. When possible, avoid being defensive or accusatory. Often, when customers feel like their concerns are being heard, they can be prompted to change or alter their review. However, since some people will stick by their initial review, it is good practice to buf up your review quantities to help drown out any negative reviews.

If you run a busy practice, you might feel that you don’t have the time to monitor your online presence as frequently as needed. To help, you can consider hiring a reputable company to do the monitoring for you. Depending on the company you work with, they can:
- Ensure your NAP is consistent across platforms to improve local interest;
- Provide social media services to help you better engage with the community; and
- Identify various reviews and bring them to your attention so that you can leave a response when necessary.

Peter Houtz is Vice President of sales at Plastic Surgery Studios.
Evidence Based Pricing Strategy for Plastic Surgeons—Winning the Price Wars
By Karen Zupko

One area of practice administration where most plastic surgery practices make poor decisions is in how and when to discount their fees. Surgeons make responsible decisions caring for patients using evidence-based medicine—yet fail to apply evidence-based management principles when it comes pricing their services.

Why is it that some plastic surgery practices choose to compete solely on price? Offering “we’ll match that quote!” language when answering prospective patient email inquiries—from virtual strangers—makes them look less professional and more like car dealers. Racing for the bottom is a no-win situation.

But the reality is, competition can be fierce and intimidating. Pricing is a key element of every product and service on the market. So, what insights can we gain from marketing experts? Perhaps borrowing some smart pricing strategies can enhance both your brand and your bottom line. Read on.

How Do You Know if Your Price is Right?
Harry Beckwith, author of Selling the Invisible, an excellent book on service marketing, is a noted ad man and consultant to Fortune 500 companies. He advises: “If no one complains about your price, it’s too low. If almost everyone complains it’s too high.” Well, then what level of price resistance is just right? Beckwith’s answer: “Fifteen to 20%.” He explains; “Close to 10% of people will complain about any price. Some of these want a ‘deal’. Others are mistrustful and assume every price is overstated. Still others want to get the price they had in mind when they approached you, because it is the price they hoped for and budgeted for.”

The latter group of patients have what is known as an “anchor price” in mind based on their online data gathering, conversations with friends and their own budget. Moving someone off their anchor price requires a lot of work and patience. Time that is often best spent elsewhere.

If we assume 10% of your consult patients are congenital objectors, ask yourself how often the remaining 90% of potential patients are expressing price resistance. If it’s another 10%—according to Beckwith, that’s about right which leaves you with 80% of the target market. If price resistance grows and is expressed at or above the 25% mark—questions need to be asked about whether your marketing messages are attracting the wrong group of potential patients. Perhaps something else is to blame such as a “no consult fee” policy which by its very nature attracts crowds of deal seekers.

How Premium Brands Behave
Premium brands target very different customers than their lower price driven brethren. And so should you. When practices rush to offer deals and compete on price they often tamish their brand by looking desperate. It can backfire and make it difficult to recoup your reputation. In fact, too good a deal can make some patients suspicious. Some prospects won’t choose you because they feel you must be cutting corners some place—you’re second rate and they want only the best.

Michael Silverstein and Neil Fiske, formerly of Boston Consulting Group, authored a book entitled Trading UP: Why Consumers Want New Luxury Goods and How Companies Create Them. Their research shows in dozens of categories, new luxury brands now sell at huge premiums over conventional goods. In other words, people are willing to pay a little more if they feel they are getting a unique value. A plastic surgery practice that understands the importance of creating an “aura of value” knows how to differentiate themselves from the pack. Since patients cannot “try on” your service, every touchpoint must be polished to convey a premium experience.

In our role as advisor, we counsel plastic surgeons and their managers who have set reasonable fee schedules, about staying steady the course when the Ob-Gyn group

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downstairs or the dentist across the hall starts marketing deeply discounted rates on injectables. When Tiffany’s sees Kaye’s jewelers offering diamond rings for $489—do they rush to price match? No. When Chanel sees that Bloomingdale’s is offering 25% off clothing on Labor Day do they offer a sale? When Dunkin’ Donuts cuts the price of a cup of coffee, does Starbucks reduce the cost of a Grande? No. In fact, around 2011, Dunkin’ cut and Starbucks responded by increasing the price of their coffee.

Premium brands know who they are, what their value proposition is and maintain their pricing structure. They fully realize that they are not everyone’s jeweler, designer, or coffee purveyor. Many plastic surgeons need to adopt the philosophy that they are not “everyone’s plastic surgeon.”

Provider who is profitable. The fact is that pricing power comes with differentiation. You can market luxury, or you can market economy—it’s hard to market ‘just like everyone else.’

**Know your Audience**

Dr. Paul Wang of Northwestern University’s Kellogg School of Business is widely known for identification of different buyer types. Two of these classifications are particularly relevant to plastic surgeons.

**Transaction Buyers** are primarily motivated by price. They are willing to shop around for nearly every purchase. This is the prospective patient that comes into your office with three quotes in hand from other surgeons demanding that you match the lowest one. These patients are not loyal. Understand this truth: They came for the price, and they’ll leave for the price. It’s all about the getting “a deal.” Haggling is a sport to them. Pull up the transactions for your special promotions and you’ll find their names. File them under the “Groupon crowd.” A powerful response to these quote waving patients is, “I understand. And, if price is your primary criteria for choosing a surgeon, why haven’t you scheduled with one of them?” The typical reply is usually “Well, I had to ask.” Or “You’re the best” or “I like Dr. Wonderful best.”

Never price match their “best offer” from another office. Word of mouth and mouse will spread that you can be low balled.

**Relationship Buyers**, as defined by Wang are clients, customer and patients who genuinely like you and your services. They feel comfortably ‘at home in your office.’ Your staff not only knows their names when they call or come into the office—they know about their vacation plans, their recent promotion and upcoming social occasions. These patients think of your practice first as their reliable source for aesthetic information, care and services. They value helpfulness and good service. A relationship buyer feels shopping around is a waste of time. A patient in this category, having been educated by your staff, will not be swayed by bargains. You’d be smart to know who your “marketing mavens” are. They are likely long-time patients, who

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**Meet Karen Zupko at The Aesthetic Meeting!**

**#114 Relationship Marketing: What It Means and How to Put It in Action**
Friday, April 27 • 2:00pm – 4:00pm

**#212 Successful Principles for Non-Surgical Services: Fast Track Your ROI**
Friday, April 27 • 4:30pm – 6:30pm

**#S14 Skills for Successful Patient Coordinators**
Saturday, April 28 • 9:00am – 4:30pm

**#S17 Patient Coordinator Alums: Overcoming Scheduling Objections**
Sunday, April 29 • 9:00am – 11:00am

**#S18 Financial Management for Spouses and Managers**
Sunday, April 29 • 12:00pm – 1:00pm

**#612 Reading Prospective Patients More Effectively and Improving Scheduling Results**
Monday, April 30 • 2:00pm – 4:00pm

**Co-Facilitator for Staff Session: “Better Staff, Better Practice”**
Monday, April 30, 8:00am – 12:30pm

*Additional fee applies

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have invested in and entrusted you to keep them looking terrific and they’ll recommend you to friends. There are no sweeter words than someone referring to you as “my plastic surgeon.”

**Tip:** There tend to be more early adopters among Relationship buyers according to Wang. Remember this when launching a new service, such as vaginal rejuvenation. His research shows the number of early adopters among the Transaction buyers is very low. Don’t waste time or money inviting them. Invest in the type of patient who values that new loyalty program you’re preparing to launch.

Continued on Page 101
Introducing MENTOR® MemoryGel® Xtra Breast Implants

The soft, natural feel your patients desire* with increased projection, fullness and firmness.†

**Own The Day**

*As compared with saline-filled breast implants
†When compared to MemoryGel® Breast Implants.


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

Breast implants are not lifetime devices and breast implantation is not necessarily a one-time surgery. The most common complications with the MemoryGel® Breast Implants include capsular contracture, asymmetry, and breast pain. A lower risk of complication is rupture. The health consequences of a ruptured silicone gel-filled breast implant have not been fully established. MRI screenings are recommended three years after initial implant surgery and then every two years after to detect silent rupture.

Patients should receive a copy of Important Information for Augmentation Patients about MENTOR® MemoryGel® Silicone Gel-Filled Breast Implants or Important Information for Reconstruction Patients about MENTOR® MemoryGel® Silicone Gel-Filled Breast Implants. Your patient needs to read and understand the information regarding the risks and benefits of breast implants, with an opportunity to consult with you prior to deciding on surgery. For detailed indications, contraindications, warnings and precautions associated with the use of MemoryGel® Breast Implants, please refer to the Product Insert Data Sheet provided with each product, or online at www.mentorwllc.com.

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Bundled pricing is another effective way to subtly discount. The beauty of this approach is the consumer cannot see which business partner or partners lowered their usual fee—nothing is itemized—so all discounting is opaque.

To up the transaction negotiation to line by line scrutiny, he points out that looking at one number simplifies decision-making and that the psychological cost of purchasing all the items is lowered. “Buyers feel like they are getting a deal.”

Does this type of bundled pricing work for plastic surgeons? Yes. Most notably for breast augmentation which is typically bought by a price sensitive younger patient demographic. Instead of listing the surgeon’s fee, the operating room time, the anesthesia, implants, special bras, and whatever else—you propose a fee of $6500 (as an example) as all-inclusive except for pain medications which vary due to patient safety and preference.

**Smart Strategies for Special Pricing**

Under certain circumstances special pricing can increase the profitability of your practice and amplify your brand. Here are a few important notes and creative ideas:

**Get in the Driver’s Seat.** You create ‘special pricing’ offers—not the patients.

**Offer special pricing at times that are advantageous to you.** Every practice, in every geography has a ‘doldrums season.’ For many it is from around August 1st through the end of September. When patients this spring ask for a “discount” or express their wish to pay less, offer them a “fee reduction” if they schedule by a certain date for surgery during a specific time period—say August 15th to September 15th. “When Dr. Wonderful’s otherwise busy schedule has more openings.”

**Evaluate which procedures offer a high margin.** As an example, an upper lid bleph done in the special procedure room, paired with the right aesthetician services for a bundled fee may be very profitable. It’s an easy “age reducing treatment” with a short recovery time.

**Consider multiple procedure discounts for surgery in the same field.** This makes sense if the patient schedules an abdominoplasty and two or three areas of lipo. This is a price reduction you can prospectively offer. It makes sense because you collect on an additional hour or two of surgical fees, with only slightly more time pre and post operatively. We commonly see practices offer anywhere between 5% and 25% off the second and third procedure with 10% being the median. Never reduce the price on the primary or most expensive procedure.

**Consider occupational discounts.** Teachers have seasonal breaks so you eliminate the issue of recovery time. Flight attendants can travel easily to areas of the country where talented surgeons produce beautiful results for lower cost than their home base. In Atlanta, Dallas and Chicago it’s easy to see why a surgeon would offer “special pricing” for Delta, American and United flight attendants respectively. And, it makes them feel special. High end real estate agents tend to be of certain age, have the financial means to afford surgery and place a high value on their appearance. Added bonus—the field is largely female, and they talk. Focus your “special offers.” Use a rifle, not a shotgun. You’ll capture more of the audience you want.

Do you still feel compelled to join in your competitor’s race to lower margins? Is that really a race you want to win? Don’t let a discounted fee schedule do all the talking. It’s worth stopping to think about your marketing messages, who they attract, and your pricing strategy—if you have one. Consider how a tactical switch, based on reliable experts in the field can impact your profitability while creating an aura of value for your practice.

Karen Zupko educates plastic surgery effectively Patient Care Coordinators on how to handle pricing objections in regional workshops and at the annual meeting. See www.karenzupko.com.

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**The Language of Discounting**

Yes, you can—under certain circumstances offer reduced fees. But first, replace the word “discount.” Upscale your language use “special pricing” or “value pricing.”

Second, stop with the percentage off deals. *The Psychology Of Discounting: Something Doesn’t Add Up* in the June 30th, 2012 issue of The Economist elaborates on research from the University of Minnosta’s Carlson School of Business. It discusses consumer innumeracy—a fancy way of saying that most people are lousy at fractions. So, deals like ’13% or 17%’ off confuse most patients. When you offer “13% off a syringe of Restylane” all you’ve done is hyper-perplex them. Why? Because most people don’t have an “anchor” price for a syringe of any injectable in mind—and if they did, calculating 13% in their head is darn near impossible. Confusing people will not put them in the mood to buy.

Take a page from smart cosmetic companies who have demonstrated for decades their competency at marketing to women. Instead of percentages off a tube of their magic potion, they say something like, “Buy $75 of product and you’ll receive a complimentary bag of these goodies worth $50.” According to the Economist, “Research proves that consumers much prefer getting something extra for free, to getting something cheaper.” The “Buy One, Get One Free” offer capitalizes on this preference.

Bundled pricing is another effective way to subtly discount. The travel industry often uses bundled pricing. A 7-day trip marketed on an airline vacation site includes business airfare, which are widely popular. It’s easy to budget and make a decision. No additional charges or surprises are lurking behind the price tag. The beauty of this approach is the consumer cannot see which business partner or partners lowered their usual fee—nothing is itemized—so all discounting is opaque. Bravo.

Anthony Tjan, Entrepreneur in Residence at the Harvard Business School, elaborated on the benefits of bundled pricing in a 2010 HBR article. “When a seller unbundles options, it opens
Dear ASAPS Surgeon,

Are you sure your staff is doing all they can to convert incoming surgical leads? They may be too busy to follow up. Or they may not know what to say when following up.

Put your follow up on automatic. You’ll have peace of mind knowing the leads you’re paying a fortune for in SEO, PPC, etc. get special treatment because the scripts, strategies and protocol are in place.

Schedule your free call with me today at (877) 339-8833 if it’s time to Fix Your Follow Up.
How frustrating is it to spend a ton of money, staff time and resources on internet marketing for new cosmetic patient leads only to have those very leads come in as prospective patients and leave as prospective patients… STILL.

You can’t afford to waste any more time or money on marketing if you are not converting these leads…

It’s too competitive, it’s too crowded and it’s too expensive NOT to do everything within your control to convert these Internet leads into paid procedures.

**Here’s a typical consultation scenario…**

Hmm…

You thought you had a great consultation with your prospective patient, Sara.

Sara had a good consultation with you and your staff and she asked lots of questions and you had a good connection… at least you thought you did.

But then you find out from your coordinator Sara ended up saying, “I gotta think about it” and walked out the door.

Now what? Maybe your staff emails or calls them and then they are dropped in the “dead leads” file.

You move onto the next consultation that you hope converts and the cycle of waste continues…

**Why Don’t Patients Book?**

Since cosmetic rejuvenation is a very personal as well as emotional decision, there are all sorts of reasons why prospective patients don’t book…

- Maybe they have other consultations lined up
- Maybe they don’t have a comfortable way to pay for it
- Maybe they’re confused about something you said so now they will research it more before deciding to move forward
- Or maybe…
- They received bad news that morning or
- They got flack from their family when they told them about meeting with you;
- Or a dozen other benign things could have happened that had nothing to do with you.

It could have had everything to do with the patient’s frame of mind at the time that prevented them from moving forward.

The point is people change, their moods change and their circumstances change so you can never assume anything.

**What Do You Do When You Can’t Convert Consultations?**

Let’s say you did everything right and now you are stuck because you don’t know how or even if you should follow up for fear of looking as if you are chasing the patient.

Use these strategies to follow up professionally and close the procedure:

**Follow Up Protocol**

Develop a follow up protocol to follow each and every time to follow up on revenue-generating consultations that didn’t book… YET.

Otherwise, it’s too easy to never get around to following up because there are a million other things to do. Protocol takes the emotion out of it and it becomes what you do automatically… no matter how busy you are.

**Collapse Time**

Time is your enemy in the follow up process. The more time that goes by without the prospective patient hearing from you, the more distant you become.

Collapse time by following up quickly, repeatedly and often. That’s how you differentiate yourself from your competitors who follow up weeks later (or never).

**Add a Sense of Urgency to Your Follow Up**

Since its human nature for prospective patients to put off making a big decision, you want to counter with a sense of urgency to get the patient off the fence.

**Fix Your Follow Up**

By Catherine Maley, MBA

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**Meet Catherine Maley at The Aesthetic Meeting!**

**#211 The Patient Attraction and Conversion Blueprint**

Friday April 27 • 2:00–4:00pm

*Additional fee applies*

Give them very compelling reasons to stop procrastinating. For example:

1. Your schedule is filling up quickly SO BOOK NOW OR YOU’LL HAVE TO WAIT
2. Your prices are going up next month
3. If they can have surgery on a Wednesday next month, they get a $500 price reduction
4. If you want it done before [wedding, summer, etc], they need to take into account the recovery time (IE, even though the downtime is less than 7 days, they are still a bit limited in activity like swimming and dancing), so they’ll want to get it done before this [date].

You need to customize these to your liking and use them in your standard protocol so you get comfortable telling the prospective patient WHY they need to make a decision now rather than later.

The most successful cosmetic practices have systems in place to follow up quickly, strategically and consistently. They spent a lot of time, money and effort attracting prospective patients so they do all they can to see it through to a YES.

These fix your follow up strategies “pave the way” for your staff to do all they can to confidently convert these valuable consultations.

Catherine Maley, MBA is author of “Your Aesthetic Practice/What Your Patients Are Saying” and President of Cosmetic Image Marketing. She uses creative patient-attraction and staff-training strategies to get you more patients and more profits. Catherine can be reached at (877) 339-8833 or visit her website at www.CosmeticImageMarketing.com.
In my last article, “Practical Data Security for Medical Professionals” (http://bit.ly/206p8la), I discussed some of the most common ways that medical practices can deter others from gaining access to their networks and the highly valued PHI that they contain. In short, improving the strength of passwords and eliminating password sharing (still among the largest problems we see in the market), encrypting data, usernames and passwords, and requiring user authentication and third party vendor audits are just some of the steps that you can take to bolster your office’s data security and send the bad guys looking elsewhere.

Here I would like to bring to your attention some recently released statistics on data security breaches in healthcare that are intended to reinforce the importance of staff training and vigilance on the part of providers and practice administrators.

**Healthcare Data Breaches, by the Numbers:**

IBM Security and Ponemon Institute research indicates that the average cost of a data breach is $3.62 million globally. However, for the seventh year in a row, healthcare has topped the list as the most expensive industry for data breaches. “Healthcare data breaches cost organizations $380 per record, more than 2.5 times the global average across industries ($141 per record.)”

The 2017 Annual Data Breach Year-End Review published by the Identity Theft Resource Center® (http://bit.ly/2GpHgDP) and CyberScout® reported that there were 1,579 data breaches in the U.S. in 2017, a 44.7% increase over 2016 and a new record high. Of those, 374 (23.7%) were in the medical/healthcare sector.

According to the 2017 Data Breach Investigations Report (http://vz.to/2qihidi), a respected analysis of data security incidents (denial of service and website defacement) and global data breaches (incidents that involve the release of personally sensitive, protected and/or confidential data) compiled by Verizon and over sixty of its national and international partners:

- There were over 450 data security incidents and nearly 300 data breaches (confirmed data disclosure) in the healthcare industry last year, representing 15% of total data breaches. Of those, 80% were the result of “privilege misuse” (unapproved or malicious use of company resources), miscellaneous error (unintentional actions that compromised and exposed sensitive data) and physical theft or loss of assets with sensitive data on them.
- 62% of breaches were the result of some form of hacking, and 80% of hacking-related breaches were accomplished with the help of stolen passwords or weak/easily guessable passwords.
- 51% of breaches used some form of malware, and 66% of that malware was installed using malicious email attachments.

The importance of information security professionals to your practice.

Perhaps most significantly, according to the Verizon report 19% of healthcare breaches in 2017 occurred with small healthcare practices, which often do not have the resources available or, more importantly, do not make the resources available to prepare for and defend against the most common types of hacking activities.

On this note, I would like to share an anecdotal observation about the gravity of the threat to medical practices today.

In our business we are often in contact with practices and their staff members that are seeking assistance with their clinical photography software, which in turn frequently means that we are asked for help with their computers. And while we do not formally track the data, I would estimate that less than 30-40% of these practices have engaged a qualified information technology and security professional to help them with their network configuration and security.

Often this critically important task is handled by members of the staff or their relatives who are “very technical” and “good with computers.” If this sounds familiar to you, this is the time to begin thinking about getting some help reviewing your systems and training your staff in the importance of good security practices and security awareness.

Unfortunately, this is not a drill folks. This is the real thing. And I hope that you are taking it very seriously.

Freddy is the CEO of Epitomize Inc., a team of healthcare and medical imaging experts devoted to revolutionizing the role of clinical photography in medicine. Our premier service is Epitomize Cloud™, a state-of-the-art cloud-based, digital-asset storage and management solution for image data. The service can be accessed through secure credentials from any device, and can be paired with our sophisticated Epitomize Capture™ app. Email us at info@epitomize.com or call us at (888) 602-3865.

Freddy is passionate about the subject of digital imaging in medicine and the role that clinical photography can play in improving the quality of care for patients. Follow him on Twitter: @epitomize.
I began my career doing all forms of plastic surgery, and decided to focus on aesthetics as it best fit my skills as a surgeon and I enjoy working with patients who are pleased with their results. While I began as a Candidate of The Aesthetic Society, I decided to become an Active Member as the education I gain from The Aesthetic Meeting and other ASAPS sources was superior to education I received elsewhere.

~ Himansu R. Shah, MD
ASAPS Member since 2014

Visit Membership Manager Marissa Simpson in ASAPS Booth #529 and Learn More Today!
**SEO & WEBSITE STRATEGY TAKEOVERS: WHAT YOU NEED TO KNOW**

With the number of Internet marketing companies skyrocketing in recent years, selecting the right firm to help you reach your goals can be a daunting task—especially if you are in the market for a new vendor. When this is the case, perhaps the biggest consideration is how adept your potential agency will be at taking over all your assets.

As a trusted industry veteran, Rosemont Media has helped numerous clients navigate successful SEO and website strategy takeovers, making sure the transition is smooth regardless of how sensitive the relationship is between a practice and their former marketing provider. Based on our experience, we have put together a list of questions that should be asked—and answers that should be received—to help ensure your transition to a new Internet marketing company is as seamless as possible.

**QUESTIONS TO ASK POTENTIAL NEW INTERNET MARKETING PROVIDERS**

- **How many consultants and/or representatives will be assigned to my account?**
  
  You want a group of seasoned professionals working together on your account. With a team approach, you can benefit from multiple helping hands attending to your needs, collective collaboration on your strategy, and optimal availability when you want to touch base.

- **What will you do to ensure my website won’t crash and my rankings won’t drop during the transition?**
  
  Your new marketing firm should have streamlined systems in place for website transfers, and they should explain exactly how these systems help to prevent site crashes and/or drops in ranking. It is important to also ask for examples of successful transitions they have completed in the past, preferably featuring clients who were in a position similar to your own.

- **How would you change my SEO strategy for the better?**
  
  Don’t let the main reason for switching marketing agencies get lost in the transition itself—you want improved SEO. Your new provider should offer a comprehensive span of services, including custom website design, content creation, link building, social media marketing, reputation management, and more. Make sure they provide an extensive overview of exactly what they offer and how they plan to customize a strategy based on your site’s specific needs and goals. Once again, asking for examples to verify that similar tactics do indeed work is critical. It also helps to benchmark your rankings before you make a switch.

- **Are your designers, developers, and writers full-time and in-house, or is the work outsourced?**
  
  Not only is it essential for an online marketing firm to have personnel in these positions, but “full-time” and “in-house” are key adjectives you should listen for when a potential firm speaks about their team. The number of developers, writers, designers, and certified Adwords managers directly impacts the workload a company can handle, and having full-time, in-house employees means your needs are not being shipped outside of the company for completion (which can result in disjointed final products).

- **Do you have experience working with plastic surgery practices?**
  
  Similar to choosing a plastic surgeon, experience is key when it comes to selecting an Internet marketing agency. You want a company that is well-versed in SEO strategy for aesthetic plastic surgery practices—and one that has demonstrable examples and results to back it up.

- **Does your team have experience managing all the needs of a practice my size in a similar market?**
  
  Again, request examples. Your prospective firm should be able to show you work it has done for clients of similar size and market competitiveness. A company that claims it has the experience you seek but is unable (or unwilling) to produce evidence of its successes should draw a major red flag.

**FINAL THOUGHTS AND CONSIDERATIONS**

The idea of leaving one Internet marketing provider to sign with another can be terrifying. How will your former company handle the news? Will they be professional and make the transition easy and painless for you, or will they be unhelpful and unpleasant to deal with from start to finish? Worst of all—will they sabotage your website on your way out the door in an attempt to prevent future success elsewhere?

These are all extremely common concerns for plastic surgery practices seeking a new online marketing direction, but the good news is, you don’t have to go through the process alone when you choose the right firm. By asking the right questions and insisting to view verifiable evidence of past success, you can select a company that will hold your hand every step of the way while simultaneously getting your SEO and website strategy up to speed.

If you are looking for a new Internet marketing company, or if you would like to speak with an experienced industry professional to discover how you can improve your current online strategy, please contact Rosemont Media, LLC at www.rosenmontmedia.com/asaps. Also, check out Rosemont Media’s educational blog—the Rosemont Review—at rosenmontmedia.com for the latest on how to position yourself for success in the world of SEO.
Are you looking for more exposure on your brand’s Facebook page? Do you feel limited by the recent changes to the functioning of the site’s newsfeed? By optimizing your social media tools and adding live video to your social marketing strategy, you will engage not only your current followers, but a prospective audience as well.

While the latest changes to the look of Facebook’s newsfeed means you’ll be seeing less from the brands you follow and more from friends and family, you can still maximize on this by utilizing one of Facebook’s strongest tools available to marketers: Facebook live video. Facebook’s live video gives you an opportunity to provide real-time engagement in an exciting and dynamic manner. As video is currently the most relevant form of social marketing, you will reach not only your existing clients, but you’ll increase your exposure to potential customers as your Facebook followers share with their friends and family on their personal accounts.

Here are three ways in which you can add Facebook live video to your brand’s marketing strategy:

**Co-Collaborate**

Would it be beneficial to cross promote with another leader in the field? Is there an industry influencer you would like to collaborate with? Host an exciting Q&A, invite readers to submit questions, and talk about what excites you both in the future of the industry. This not only opens you up as a thought leader and team player within the industry, but the co-collaboration invites new social followers for both parties through the shared publicity.

**Behind The Scenes**

Within aesthetics, there might be some trepidation among new or potential clients as they desire to learn more about a specific treatment or service of which they are unfamiliar. Invite them into your practice with a live video tour of your office, meet the staff, or even demonstrate a treatment option while your audience watches in real-time with the opportunity to ask questions as it’s happening. Not only is this educational, but you can use it as an opportunity to show the warm and welcoming side of your practice.

**Giveaways**

It’s true, everyone loves to receive a free gift! If there’s one way to secure a large audience for your next Facebook live video, it’s the chance to win. Show off a new treatment, promote your latest products—whatever it might be, use the live video as an opportunity to give a special follower the chance to enjoy your new product or service, free of charge. You can bet it will draw a larger audience, and the lucky winner will likely turn into a repeat customer.

Host an exciting Q&A, invite readers to submit questions, and talk about what excites you both in the future of the industry. This not only opens you up as a thought leader and team player within the industry, but the co-collaboration invites new social followers for both parties through the shared publicity.

To learn more about branding, selling, and staying connected with your clients in the digital age of aesthetics, visit LVBX at TheLiveBox.com.

Nicole Gusé is the Vice President of Marketing at The Live Box + LVBX Magazine, a full-service marketing agency and digital commerce platform serving the aesthetics industry. For more information, visit TheLiveBox.com.
NewBeauty Pro is a 360-degree marketing platform designed to promote your practice and enhance your brand.

2 out of 3 NewBeauty readers plan to have an in-office cosmetic procedure in the next 12 months. Reach your future patients now.

Opportunities:
- Print
- Digital
- Social
- Video
- Events
- Custom content and more

For more information, visit newbeautypro.com or email elite@newbeautypro.com.
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 now available nationwide.

The Fund, established in 2016 and made possible through generous restricted donations to ASERF by Susan and Steve Mollenkopf and matched by the Qualcomm Foundation, provides grants of up to $5,000 to assist underinsured or uninsured patients in completing a quality aesthetic breast reconstruction following breast cancer.

To date, the generosity of the Mollenkopfs and Qualcomm has resulted in the availability of more than 60 grants to eligible patients. The proliferation of this unique patient support inspired Susan Mollenkopf—herself a two-time breast cancer survivor and patient of ASERF/ASAPS member Dr. Scott Barttelbort—to give her blessing to expanding the Fund’s availability for patients nationwide.

“We are so grateful to Susan and Steve Mollenkopf for their continued support of this fund and for generously extending their commitment to give hope to women across America,” said Dr. Barttelbort.

The ideal candidate to receive a Mollenkopf grant are women who have had breast reconstruction but for whatever reason, still have unacceptable results and who are deferring surgery due to financial difficulties. 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.

For ASERF and ASAPS member surgeons who have patients eligible for a Mollenkopf Fund grant, please download the grant request form (www.aserf.org/Mollenkopf), which outlines the criteria and application process. When a surgeon confirms patient eligibility, complete the form and return to ASERF in a timely manner. At that time, a four-person committee will review all grant requests.

This collaboration between ASERF, the Mollenkopfs and Qualcomm has already positively impacted women on a regional level and is ready to help change lives in all 50 states.

For additional information on the Fund, please contact Ivan Rodriguez at (562) 799-2356 or ivan@surgery.org.

The Fund... provides grants of up to $5,000 to assist underinsured or uninsured patients in completing a quality aesthetic breast reconstruction following breast cancer.

Amy Breehl (left), patient of ASAPS member Dr. Scott Barttelbort (center) and the first recipient of a Mollenkopf Breast Reconstruction Fund grant, with Susan Mollenkopf (right).

ASERF President Dr. Barry DiBernardo (left) presents Susan and Steve Mollenkopf with a token acknowledging the philanthropic couple as the newest members of the President’s Circle of major donors.
Never Buy or Lease a Useless Piece of Equipment Again!

Introducing the Surgeon as Consumer Solution – the Site Where YOU Write the Reviews.

How many of us have been approached to buy or lease the latest 510K device, only to find it later serving as a very expensive coat rack? While the ones that live up to their promise are a big hit with patients and practice—what about the ones that don’t live up?

Society members have long asked for help, and here it is! The Surgeon as Consumer Solution (SAC) is a closed site, accessible only through ASAPS.org and only for active ASAPS members. It uses a simple star rating system to rank equipment on everything from clinical efficacy to ROI.

Visit asaps.org now, log-in, click on “Surgeon as Consumer,” and you have fellow surgeons’ device reviews at your fingertips—and the ability to share your views with others. All completely free—an ASAPS benefit of membership!

Learn More in Booth #624

Be Informed. Be Smart. And Share Your Experiences!

Exclusively for ASAPS Members

www.ASAPS.org
A Black Box Misadventure
By Tom Crais, MD, FACS

Several years ago while I was visiting Fritz Barton’s office, he ushered me down a hallway, opened a door and said, “This is the black box area.” Black boxes, I remembered from high school science, were the metaphorical ultimate sources of technological mystery, whereas black boxes in aircraft tell the ultimate story of misguided adventures. Black boxes in our practices tell us the ultimate story of good and bad investments.

Within our industry, black boxes are ubiquitous. They are exciting new technologies that invariably come with high price tags, and just as often, with exaggerated outcomes until actual experience tempers collegial enthusiasm. Regrettably, we no longer have our science teachers to reveal the boxes’ mystery, and before long, these devices often become dust catchers in our own “black box area.”

Fritz was telling me to be keenly aware and to beware, yet recently I did not heed his warning, and I purchased a black box. You may ask, how did this happen, especially so late in my career?

I Need a New Black Box
With local competition from a variety of cosmetic rivals, including aestheticians, nurses, dentists, and other core and non-core specialties, I came to believe that staying up to date with technology was essential to a successful practice. Global advertisements, glittery speakers, industry reps and the occasional patient query all feed the fantasy that with the latest device, I would be more competitive and strengthen my bottom line with a box that would “pay for itself.” And what better place to see the latest devices than at the ASAPS annual meeting?

The Exhibit Hall Was Magical
For several days I strolled the aisles of exhibits at The Aesthetic Show 2017 San Diego, enjoying the pretty lights and comparing all of the lipolysis devices. I was surrounded by smiling faces, shaking hands, slaps on the back, and lots of old friends out there doing what they do best: selling equipment to physicians who have money and who always ponder their income stream.

I was familiar with one particular company since I had purchased a couple of their machines in the past. My investment had been not insignificant, roughly $200,000 for both devices, and the customer service from my expensive service contracts had been poor after the first year. Nevertheless, I thought because it was the last day of the exhibits, and I had been a good customer, they would give me a great meeting discount for purchasing a new device.

The senior sales rep was on his way out to catch his plane. Sure enough, they confirmed I was a good customer and I would, in fact, be entitled to a substantial discount, which they said I could get only at the meeting. It was wonderful, even mesmerizing, being with my device manufacturer friends, or so I felt it was in their presence. It was late, and the exhibitors were breaking down their stalls. They assured me it wasn’t too late for me to sign a contract, but we would have to step outside. Did I really need to be in such a hurry? I never asked myself that question.

So, there I was, sitting with a salesman on a couch outside of the hall after the exhibits had closed. The contract was several pages of fine print. Even though I realized the light in the hallway was dim, I was thinking, being honest, that with all of my other deals over the years where I thought the salesmen really were looking out for me, I surely could trust this one, and it would be ok to sign what he placed in front of me. Not so!

The Deal
First was the purchase agreement, which I signed, but it sounded attractive to finance it over time with the manufacturer. The salesman, with the assistance of his manager, made a call and handed the phone to me. I believed I was speaking with the manufacturer’s financing department. I was completely wrong. I was, in fact, speaking to a representative of, and signing a finance agreement with, a third party financing company, which has an internet presence I wish I had investigated first.

I ended up buying the device for $160,750 (a supposed $40,000 discount) which, when financed for 5-1/5 years, resulted in total payments of $217,675.80. Think about that for a moment. The manufacturer likely sold my contract to the financing company for a 10% discount, meaning I could have had the device for $144,750 if I had negotiated. Instead, I ended up paying 50% more for the device by financing than if I had paid cash or if I had financed it locally on my own. The strong closing promises distracted me from reality: I erred substantially, and I bought another questionably performing black box.

When I got back to my office I realized what I had done. Soon thereafter, I began phoning the manufacturer and the financing company, getting nowhere, and getting “the run around.” Once I realized the manufacturer had been already fully paid by the financing company, I began asking both companies for a truth in lending contract, an amortization schedule, even just a schedule of interest rates, and received nothing. I spent six months haggling and speaking with receptionists, with unreturned calls and a lack of requested information. The manufacturer, my expensive friend, in which I had prior trust, totally blew me off.

Sleepless Nights
So, once I realized what a blunder I had made, I started losing sleep. I began asking myself, how could I sign these perfectly legal contracts, and be so easily taken advantage of? How could I trust the reps, even after my previous unsatisfactory experience with their company? How could I trust my colleagues who hype these black boxes? How could I have forgotten that I’m the one with the money, the one with the ability to negotiate, and the one with the power to walk away to research and negotiate another day?

What I Learned
I learned that neither company could care less how well the device worked, or how much I was paying for it to provide disappointing results. I learned business leases do not have the same truth in lending disclosures required of consumer loans, nor a “cooling off” period where you can buy a car on Saturday, for instance, and on Monday you can cancel the deal. I learned the only way out of my financing agreement would be to pay

Continued on Page 113
I joined The Aesthetic Society primarily because of the ability to interact with colleagues and the excellent educational opportunities it provides. The Aesthetic Meeting is an optimal environment for collaboration and exchange of new ideas.”

~ Heideh Arbabzadeh, MD
ASAPS Member since 2007
With the increased adoption of digital medical services, from electronic health records to internet-connected monitoring devices, healthcare-specific cyber risks continue to expand. Recently, AllScripts, the healthcare IT services company, reported a major ransomware event that has impacted its physician clients throughout the country. The incident has prevented many practices from accessing their patient files and has forced physicians to incur significant expenses in IT assessments, notification expenses, and lost income due to business interruption.

The following provides a guide to HIPAA compliance, acknowledging the reality that access to patient data in a digitally-enabled world is increasingly complex and effective preparation is essential to recovery from incidents similar to the AllScripts breach.

**5 Steps to Keep Your Practice HIPAA Compliant**

**Conduct a Risk Assessment**

Risk assessments and analysis are the foundation to ensuring HIPAA compliance and preventing an unpleasant experience with the U.S. Department of Health and Human Services Office for Civil Rights (“OCR”). In fact, failure to conduct a risk analysis is the most common HIPAA violation found during the OCRs investigations. Analyzing your risks is the starting point to determining a proper information security program and assigning appropriate risk mitigation measures.

**Train Employees**

HIPAA Rules require that the organization’s workforce is properly trained on the HIPAA Privacy, Security, and Breach Notification Rules. Additionally, employees that have access to protected health information (“PHI”) need to be trained on the specific privacy and security policies and procedures. Remember to train employees on all facets of data communication, including the use of text messaging for client communications. While HIPAA doesn’t strictly prohibit texting, employees should not use traditional texting to send PHI and should always get consent before texting patients. Using alternative secure messaging platforms that encrypt data can help to mitigate risk, but only if the software and the processes in place are HIPAA compliant.

**Implement Policies & Procedures**

HIPAA’s Privacy and Security Rules require healthcare organizations to have data security policies and procedures addressing a multitude of risks. Inadequate policies and procedures are a frequent violation cited in HIPAA enforcement actions, as regulators will review your organization’s policies and procedures during their investigations. Don’t forget to review these policies no less than annually and when needed based on risk, law changes, technology, and environment.

**Manage Vendors Appropriately**

Vendor risks have become one of the top data security concerns for healthcare organizations. As OCR holds business associates and covered entities liable for HIPAA compliance when it comes to vendor relationships, it is important for healthcare organizations to have a vendor management program in place to maintain control of their business associates processing PHI.

**Prepare an Incident Response Plan**

The best way to handle a data breach is to be prepared in advance. When responding to a data breach, critical decisions must be made in a condensed time frame to meet the notification deadlines imposed by HIPAA and OCR (most notably the 60-day notification rule). Any mistakes can be costly and have a lasting impact. Having a game plan in place, and a response team that has rehearsed the plan, can minimize harm to the organization and those affected. That includes having established relationships in vendor teams, such as external breach management team which has relationships with forensic analysts, mail houses, and regulators.

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Social Media Mastery—Learn From The Pros

By Wendy Lewis

At The Aesthetic Meeting 2018 taking place in my home town New York City, I will have the honor of moderating a not-to-be-missed course with five ASAPS members who are among the superstars of social media, Insider Tips from 5 Socially Savvy Plastic Surgeons. Featuring Drs. Anthony Youn, Heather Furnas, Jennifer Walden, Matthew Schulman and Christopher Khorsandi, the panel of experts will address how they do their social and shed light on the major pitfalls to avoid for board-certified plastic surgeons. This 2-hour intensive course will foster an interactive and candid discussion on best practices as the panelists share their individual experiences and what they have learned along the way.

Social Media 2018

The one constant about social media is that it is in a perpetual state of flux. Much like Google frequently tweaks their algorithm with little to no notice driving all of us into panic mode, Facebook and other major digital players follow suit. These fluctuations can greatly affect your methods and strategies. If you are tracking your progress closely as you should be, you may see engagement tank unexpectedly through no fault of your own. It takes an army just to keep up with it all!

According to Tony Youn, Michigan plastic surgeon and best-selling author with an uber popular podcast, “Guidelines for optimal use of social media are always changing. Just recently, Mark Zuckerberg announced that Facebook would be changing their algorithm to de-emphasize posts by businesses in favor of personal posts. How should a plastic surgeon and his or her social media team respond so that they can still maintain their reach with prospective patients? I will give practical tips and hacks to make social media optimally work for you.”

Driving traffic to your website has always presented a conundrum for plastic surgeons, especially in these volatile times. The two primary ways to generate visitors is through search and social. Although more people still tend to look for businesses via search, social search is undeniably picking up steam.

Dr. Chris Khorsandi from Las Vegas, NV, who has amassed a huge following on Instagram, will address the explosion of social media and its effects on SEO. “There is a rotation out of traditional search into social media search. This notion applies directly to the world of plastic surgery where the patients are looking at results first, and surgeons second,” he says. Is SEO dead? How does one position their practice for the next 10 years to take advantage of these trends? are among the key topics he will elaborate on.

Best Platforms

A overriding consideration for plastic surgeons is how to allocate resources in terms of budget and staff time. Social channels continually strive to outperform each of the others and fine tune their increasingly sophisticated ad platforms. So, it is critical to design a strategy and track results to distinguish the tactics that are working well and deserve more of your marketing dollars than those that are not reaching your target audiences or generating leads that convert into real patients. Amassing thousands of followers who are obsessed with BBL videos or breast augmentation pics but who are not candidates for procedures, may look good on your monthly stats but won’t go far to keep your surgical schedule full.

“As social media evolves over time, I have found it interesting to keep up to date with which channels are the most highly visited, have a tangible benefit for businesses, and provide the most fulfilling social network for family and friends. Instagram's latest internal figures show 25 million businesses have a business profile on the network (70.7% of US businesses), and over 200 million users visit at least one business profile every day,” says Dr. Jennifer Walden of Austin, TX.

Indeed, Instagram has emerged as the most effective social platform for aesthetic plastic surgeons due to the smart tools that have been added and the fact that it integrates seamlessly with your Facebook business page in terms of sharing content and doubling up on ads and promoted/sponsored posts. Instagram stories has now surpassed Snapchat stories by a wide margin. Instagram Stories is considered to be the real sweet spot of the app that has only recently become supported by dashboard tools such as Hootsuite. Another new addition is Instagram Shopping which allows users to make instant purchases right on the app.

“One thing that is novel for plastic surgeons is that Instagram users are not shy about following brands they like (we are used to people denying any interest in plastic surgery even if they have had a procedure done). 75% of Instagram users take action, such as visiting a website, after looking at a brand’s post. So, if you have good-looking products (as aesthetic plastic surgeons often do), Instagram is a no brainer. To that end, Facebook has over a billion visitors daily and the ability to geographically target and reach its users to provide them information about a surgeon and his or her practice. There seems to be a thirst for plastic surgery-related content on social media, and I will talk about ways to take advantage of this unprecedented

Continued on Page 117
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era of open access to the consumer and potential patients," says Dr. Walden.

New York City plastic surgeon Matthew Schulman is also known as the ‘Snapchat Surgeon,’ having amassed a loyal following and 4.3M daily views. He will present his case for how Snapchat has worked to elevate his profile. “Among plastic surgeons, Snapchat is the least frequently used social media platform. However, in my experience it is among the most powerful in terms of engagement and conversion. Snapchat users spend more time on the platform daily than users on other social media platforms. Critical examination of my own practice data demonstrates that patients who are following me on Snapchat at the time of the consultation have a booking rate twice that of non-Snapchat followers. The reason for this increased conversion is simple. Snapchat provides a unique way to showcase your personality, your practice philosophy, your surgical techniques, and your results. You can create a worldwide brand awareness and those followers have pre-selected you to be their surgeon. I will illustrate how to use Snapchat and incorporate it into your practice in a way that is professional, responsible, and ethical. Snapchat is a powerful resource that is vastly underutilized among plastic surgeons,” he says.

Content Creation

Social media has tremendous potential to disseminate information and forge meaningful relationships with prospective patients. However, for plastic surgeons, these exchanges must be explored while maintaining the same professional and ethical standards used for any other form of communications. Anything you post on a social network may be disseminated (whether intended or not) to a larger audience and may be taken out of context. Everything you post can remain available forever, even if you delete it, by virtue of a screenshot, forward or share. So, what are the best ways to navigate this delicate balance in a medium that constantly pushes the envelope?

Creating content that will resonate with their target audiences to build a robust following, while at the same time staying within ethical guidelines poses challenges for time-strapped plastic surgeons. In 2018, it’s all about memorable images and live streaming video as these types of posts tend to perform well across all channels, from blogs to LinkedIn to draw the viewer in. But how much transparency is too much, and how do you know where to draw the line?

Dr. Heather Furnas in Santa Rosa, CA will speak about her concept of ‘Social Media in 3-D’ based on the discussion she recently wrote for Plastic and Reconstructive Surgery. “Some plastic surgeons focus so much on the dangers of social media that we may miss opportunities to reach a wider audience. By “Social Media in 3-D,” I mean that social media isn’t limited to a direct post, any online content (blogs, peer-reviewed articles, clinical videos, etc.) can be shared on social media and therefore can be associated with the same risks. Ultimately, we should be looking at how to expand, not limit, our audience reach,” says Dr. Furnas.

The panel will discuss what’s coming next that plastic surgeons need to stay on top of. For example, Facebook Messages and WhatsApp (owned by Facebook) are arising as new ways to communicate with patients. WhatsApp is now encrypted, but Facebook Messages can be hacked if someone gets hold of your mobile device or cracks your password. Customized chatbots are popping up on every website and social network and are becoming an essential tool for customer engagement. Consumers are also increasingly calling out businesses on social platforms and expect a response in real time, which is changing the need for plastic surgery practices to staff up to meet their 24/7 demands. Lastly, a recent New York Times article entitled ‘The Follower Factory,’ raised concerns about the hordes of fake followers on social channels and the threat of bots and hackers. This panel will also address how to protect your practice online and the best ways to grow a real and loyal fan base.

Please join us in New York for this informative course. We are looking forward to learning from each other.

Wendy Lewis is Founder/President of Wendy Lewis & Co Ltd, Global Aesthetics Consultancy, a marketing communications boutique in New York City since 1997. She is also Founder/Editor in Chief of Beautyinthebag.com, and the author of 12 books, including Aesthetic Clinic Marketing in the Digital Age (CRC Press) published in January 2018. She is a prolific contributor to many publications, websites and trade journals in the US and Europe, and a frequent presenter at national and international conferences.

Social media has tremendous potential to disseminate information and forge meaningful relationships with prospective patients. However, for plastic surgeons, these exchanges must be explored while maintaining the same professional and ethical standards used for any other form of communications.

Follow us and we’ll follow you back!

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Do Competitive Practices Send You Huge Gift Baskets?
By Scott Harvey

Paid Online Advertising is one of the wonders of the business world.

You can precisely target prospective patients who are actively seeking your services. You can stop or start your ads any time. Change your budget on any whim. Tell Google, Facebook, LinkedIn and others to “retarget” interested people who have visited your website.

You know this. And that’s why you’ve spent a larger and larger part of your total advertising budget on digital media over the years. We think that’s absolutely the right thing to do.

Unless you have less than top-notch ratings on all the review sites.

You know this too—and as frustrating as Yelp® or RealSelf® or Google® reviews can be, they’re here to stay.

Let’s keep it simple and say you’re targeting “breast augmentation [cityname].” Even with a great Quality Score in AdWords, you’re still probably paying $6.50+ CPC (Cost per Click.)

So, she looks at your website, sees the pretty pictures of her “future self,” keeps digging and sees some great before-and-after shots, then your diplomas, teaching positions, department chairs, etc. Your office pictures look good. Your staff looks friendly and approachable.

Congrats, you made it through step 1.

What’s step 2? She types in “Yelp.com.” And then RealSelf.com. And then Google.com.

If you have a great overall rating average and a reasonably large number of reviews and respond thoughtfully to any negative comments and have enough strong, detailed reviews that are pertinent to the procedure they want to have you perform, congratulations—you’ll get to the next step where they contact you.

And if not?

Then you just spent $6.50 to send that prospective patient to the surgeon down the street. (And if you take action on this, show me—and I’ll send you the gift basket instead…)

There are few markets where online reviews are more closely scrutinized. People aren’t just spending a bundle of money. They’re baring their physical body and their insecurities—and at best they’ll be out of circulation for a while and uncomfortable for a bit before they see their outstanding results.

At worst, they’ll be one of the unlucky few that they’ve all heard a horror story or two about.

Preaching to the choir, I know.

Because online reviews can be make-or-break for a practice, we thought it would just be piling on to continually write on the topic. We thought that every practice had already been brutalized enough by unreasonable, post-op-instruction-ignoring patients, vicious competitors, and disgruntled former employees.

Remarkably, that still doesn’t seem to be the case for many of the practices we talk to. And the disturbing thing?

Most practices are just giving up and resigning themselves to the fact that “that’s just the way it is in this brave new social-media world.”

That’s going to stop—RIGHT NOW. You can take the power back. Really.

I know you’re already connected to your reviews in a visceral way—get that. But in case you start slipping back to the “that’s just the way it is” thinking, here are a few quick statistics to spur you on before we talk solutions.

• 90% (+) of consumers consult online reviews before making a decision
• Harvard Business Review reported that for each star gained, gross revenue went up 5% - 9%
• 90% (+) of consumers hesitate to do business with companies that have fewer than 4 stars
• Unhappy customers are 11 times more likely to leave a review than a happy one
• Forbes Magazine reported that companies risk losing 22% of their potential revenue when prospects find just 1 negative review on the first page of search results… 44% with 2 negative reviews on the first page, and 59% with 3 negative reviews.

It’s sheer insanity the way that the bad guys can damage your livelihood, and the good guys need to fight back. Each practice’s situation is obviously unique and quite fluid, so there’s no one-size-fits-all cookbook. But here are the critical things to focus on:

1. Quantity. This is at the top of the list because it can cure lots of other ills. There are two main reasons for this.

First, the more reviews you have, the smaller incremental difference any one review can make to hurt you. For example, if you have a 5-star average, but only 5 reviews total, just one 1-star review will drop you from 5 stars to 4.3. A second 1-star review will drop you to 3.9 (remember the statistic above about 90% of consumers hesitating to do business with companies under 4 stars?)

Second, a large number of reviews effectively create a “moat” around your

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business. If the aforementioned difficult patient who wants to make up facts to hurt you sees that you only have 10 reviews, she knows that she can significantly harm your practice by leaving a scathing, 1-star review. (Same with competitors and former employees.) But if you’ve got 100 reviews, let’s say with a 4.3 average, a single 1-star review will not actually impact your numerical average.

They aren’t doing that calculation of course, but they do see a bunch of overwhelmingly positive reviews, and know that their negative review will get lost in the noise. And if they do a nasty review anyway, you’d be surprised how often those 100 reviewers will jump in and defend you. That’s powerful.

NOTE: When it comes to Yelp!®, don’t “try to get more reviews”—they will try to penalize businesses who actively solicit reviews.

2. Quality. We can’t talk quantity without quality of course—a bunch of short, bland 5-star reviews from people who have only done 1 review in their life will be ignored by prospective patients, thinking they are written by employees or friends. (And that’s if they don’t get automatically “filtered” by Yelp!®, as I’m sure you’ve had happen.)

Many consumers want to let other people think for them, and if they see low-quality reviews, they’re just going to pass and go on to the next practice without a second thought. Conversely, the high-quality patients that you really want are getting more and more savvy about the review ecosystem. Even a decently-written 5-star review might not move them nearly as much as a long, detailed, thoughtful 4-star review.

3. Respond. You absolutely must reply to negative reviews. But you should wait just a beat before you do for two reasons. First, it gives you time to cool off and be more introspective. (If you don’t need that when an unreasonable patient takes shots at you, you’re stronger than I am.) Second, on Yelp!® more than any other platform, if the reviewer has done fewer than 3 reviews total (of any business), have few if any “friends,” and have been on the review site for a month or less, there’s a pretty strong chance that the review will automatically be scrubbed.

(If it’s a real patient with a real issue, and you can turn it into a positive, reply anyway.) But if it is one of the myriad fraudulent-looking reviews that doesn’t match up with any known patient names for your practice, it’s best to just give it 48–72 hours and see what happens—if you reply quickly, even if Yelp!® was going to scrub it, your reply makes it “real” and then it will stay.

There’s a strategy behind the right way to reply to reviews that you are 99% sure are done by former employees and competitors, but that’s beyond the scope of this article. But as you may have guessed, one of the worst things you can do is say something along those lines, even if you are all but certain.

Above I said you absolutely must reply to negative reviews. But you should really reply to positive reviews as well. It just makes a practice look even more on top of things when you thank the positive people as well.

Finally, since your response to the negative reviews are so critical, I wanted to go back to this quickly. Steven Covey says that people listen trying to reply instead of listening trying to understand. Even though she didn’t do any of the things you told her to do after her procedure and is now blaming you, you need to—as difficult as it is—take responsibility for some of that in your reply and not make them wrong for their feelings.

Again, not enough room to go deep into this here. It’s not reasonable to assume that the practice is always wrong and you should take the fall for everything, every time. The closer you can get to the patient’s side though—as frustrating as it can be—the better that is for future readers of the review.

So now let’s bring this all back making progress for your practice on your reviews. Do you know what it is that will help you in terms of the three pillars mentioned above (quantity, quality, and responding?)

A system.

Instead of trying to get more reviews “when you can” and “after office fire xyz is put out,” you have to work it into your daily process.

Which patients you’ll work most closely with. When you’ll approach them. How you’ll approach them (email, text, etc.) What you’ll say. When you’ll follow up. What you’ll say when you respond to negative (again, and positive) reviews.

Let’s get real. We’re all working extremely hard throughout our day, and anything that isn’t written down and easy to execute on just isn’t going to happen.

One last bit of levity to help illustrate how idiotic this whole online review world can be. Go ahead and look up … Yelp!® They have a 2.0 star average.

Scott Harvey is the Co-Founder of Cosmetic Funnels, LLC, an aesthetics-only marketing agency, and author of “Plastic Surgeons: Are You Getting Your Share?”

For a personalized, real-world action plan to improve your online reviews, visit http://cosmeticfunnels.com/rep (These are very time-intensive, so we need to limit it to the first 10 practices who request it.)
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* Data on file **Cohen et al. Five-Year Safety and Satisfaction Study of PMMA Collagen in the Correction of Nasolabial Folds. Dermatol Surg. 2015 Dec; 41 Suppl 1:S302-13 ***Data on file Bellafill® is indicated for the correction of nasolabial folds and moderate to severe, atrophic, distensible facial acne scars on the cheek in patients over the age of 21 years. Patients who have had a positive reaction to the Bellafill® Skin Test, have a history of severe allergies, have known bovine collagen allergies, are allergic to lidocaine, have bleeding disorders or are prone to thick scar formation and/or excessive scarring should not receive Bellafill®. The safety of Bellafill® for use during pregnancy, breastfeeding, or in patients under 21 has not been established. You may experience temporary swelling, redness, pain, bruising, lumps/bumps, itching, and discoloration at the treatment site. These side effects are usually transient and typically resolve within 1–7 days. You may experience lumps/bumps/papules that may occur more than one month after injection and that may persist. Less common side effects include rash and itching more than 48 hours after treatment, persistent swelling or redness, lumps/bumps, acne, and increased sensitivity at treatment sites. Infrequently, granulomas may occur and may be treated by your licensed physician provider. Be sure to call your licensed provider immediately if you notice any unusual skin reactions around the treatment area. Based on the 5-Year Post Approval Study with 1008 patients, long-term safety of Bellafill® for up to 5-years has been established. For more safety information, please consult with your physician and the patient labeling that can be found by visiting our website www.bellafil.com.


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At the end of 2017, Congress enacted sweeping tax reform that has widespread effects on both individual physicians and medical practices. This is the largest change to the Tax Code in years, with many changes taking effect January 1, 2018. This article provides an overview of some of the changes that we felt would have the most impact on aesthetic physicians and their practices.

**Taxes at the Individual Level**

For individuals, first and foremost are changes to the tax rates and brackets. There are now seven tax brackets, with a top rate of 37 percent. See chart at right. Capital gains and dividend rates remain unchanged.

In addition to rate and bracket changes, there are several other aspects to the new law affecting individuals. The standard deduction has nearly doubled, from what would have been $6,500 in 2018 for single taxpayers and $13,000 for married taxpayers filing jointly to $12,000 and $24,000 respectively. However, there will no longer be a deduction for personal or dependency exemptions. These had previously been reduced or eliminated for many high-income taxpayers.

While the Alternative Minimum Tax (AMT) was not repealed for individuals, the exemption amounts increased to $70,300 for single taxpayers and $109,400 for married filing jointly, and the exemption phase-out now will not begin until $500,000 for single taxpayers and $1,000,000 for married filers. The “kiddie” tax has been simplified, and unearned income of children to whom this applies will now be taxed at trust and estate rates rather than at their parents’ rates. This also means there will no longer be a need to include siblings’ unearned income when calculating the tax. Also notable for parents, Section 529 plan distributions of up to $10,000 per year per student can be used for elementary and secondary school expenses under the new law. Previously, such distributions could only be used for qualified higher education expenses. The child tax credit increases to $2,000 per child with $1,400 of that being refundable under the new law.

Many changes to itemized deductions for individual taxpayers may impact many physicians in significant ways. The deduction for state and local income, sales and property taxes is capped at $10,000 per year per person for state and local taxes and $5,000 per year for property taxes. Most miscellaneous itemized deductions are eliminated, including tax preparation fees, investment fees, and unreimbursed employee business expenses. The medical expense deduction floor is reduced to 7.5 percent for 2017 and 2018.

For mortgages incurred after December 16, 2017, interest is deductible for the principal residence and a second residence on loan principal of $750,000 (previously the loan limitation was $1,000,000). Current mortgages are grandfathered at the $1 million amount. Refinancing of grandfathered mortgages is also grandfathered but not beyond the term and amount of the original mortgage. In addition, interest on home equity loans will no longer be deductible.

The limit for charitable contributions to public charities increases to 60 percent of AGI from the previous 50 percent, however the deduction for contributions made in exchange for college athletic event seating rights is no longer allowed. The new law also eliminates PEASE limitations, which reduced itemized deductions for higher income taxpayers.

The estate tax exemption and gift tax exemption are generally doubled from $5 million per individual to $10 million as indexed for inflation occurring after 2011 for decedents dying after December 31, 2017 and before January 1, 2026. For 2018, the exclusion amount is $11.2 million.

**Taxes at the Practice Level**

Business taxpayers will also see many changes. Perhaps most notable is the new flat 21 percent corporate tax rate for corporation tax years beginning after December 31, 2017.

Continued on Page 125
You’ve trusted it for elective patients wanting a new look. Now you can count on it for reconstructive patients. The CareCredit healthcare and beauty credit card gives patients a dedicated financing resource to pay for:

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The Straight & Narrow
By Joe Gryskiewicz, MD

Question:
Joe,
What would you do? My younger partner was called into the E.R. two nights ago for a 29-year-old woman with an infected breast implant. He wasn’t even on call, but the ER couldn’t get ahold of the actual PS on the call list! She had a breast augmentation/mastopexy by a board certified plastic surgeon three weeks ago. She had severe post op nausea and vomiting and developed a hematoma 5-days post-op. I don’t believe he charged her for the hematoma evacuation. She is now briefly here in NYC on a business trip from California. The California guy took her to his office OR, drained the hematoma, washed the pocket out, and replaced the same implant about 15 days ago. She was fine, and so just flying in for business. While here she developed swelling in that same breast, a 102-degree fever and came to the ER. Her WBC was 18,000 and my partner told me that she looked sick. He took her to the OR and removed the implant. Our patient coordinator called the patient today to ask if the California PS had used CosmetAssure or another cosmetic surgery insurance (they didn’t), because her regular health insurance will deny it as a complication from a cosmetic procedure. My question—do you charge her for taking out her implant?

My younger partner has mixed feelings. He operated on her in the middle of the night, so he deserves to be paid, but I also think that if one of my patients had the same issue, I would hope that whomever operated on her would minimize costs. I myself am currently taking care of a 75-year-old woman who had an abdominoplasty (yes, 75!) in Florida. The surgeon’s office called and asked if we could remove her drain. I told my staff I would remove the drain and wouldn’t charge the patient. Then the woman shows up and she has an infected seroma, I had to open and pack her wound and have been seeing her every couple of days to manage this wound. The schmuck Florida plastic surgeon hasn’t even responded to my emails or phone calls telling him what is going on! I have not been charging her, but because of his disinterest, I no longer feel I am the Good Samaritan. I feel I am being used for saving a schmuck’s butt.

Should my younger partner charge this California patient with the infected cosmetic implant?

Answer:
Kudos to both of you for helping patients in a time of need. This is a sticky wicket. The overriding concern is that your partner did not abandon this patient. I feel sorry for the patient, in a far-away place, and septic. I also feel bad for your younger partner, having to pile into the hospital in the middle of the night. Part of me wants to bill the original surgeon because your younger partner was the Good Samaritan in the ER. I assume Dr. California will be most grateful for what you have done, and maybe even offer to compensate you depending on any forthcoming insurance payment. If the patient had not been traveling, and had become infected, then she would probably not have been charged. This may be her expectation. I would meet with her to discuss her expectations. If you do bill the patient directly, you could tell her to present your bill to Dr. California. If he refuses to chip in, then have her try Yelp—or worse. Bad behavior should be penalized, not ignored.

Your younger partner treated an actual infection. This was medically necessary. He reported to the ER and did not abandon the patient. I strongly believe he should be paid. This infection required an ER admission and subsequent transfer to the OR, in the middle of the night. I would continue to press her insurance company because an infection is a medical condition, regardless of the source. I would accept assignment if insurance did pay. See if the hospital gets paid by insurance.

I assume Dr. California has no knowledge of this situation. I would call him and ask if he gave her any restrictions, such as NOT to travel. Depending how collegial your partner feels, you could ultimately send a bill to Dr. California. He should be showing a little love here. I see no reason he shouldn’t pay your partner, because he bailed him out.

No mention was made of how the California PS reacted to your good deed. Did he call you? Did he acknowledge your good deed? Did he keep in touch with the patient? One thing I’d say: If the California surgeon were being collegial I’d only want to see my surgical fee covered. In this case, the hospital provided the OR. If the surgeon were a friend or acquaintance I’d do the whole thing for free (and even suck up the OR costs if it happened to be done in my office OR.) But if the surgeon were a schmuck I’d want to get my fee covered. Then I’d be basing my response on the personality of the first surgeon… a recipe for a lawsuit.

One might argue that all of this should have been discussed before the case, and any required fees paid up front. Our ASAPS Code of Ethics speaks to this and prohibits the practice: 1.06 Professional Fees (b) A member shall not charge fees for emergent and/or medically necessary care that are exorbitant, i.e., fees that are wholly disproportionate to the

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Monday, April 30 • 4:30 pm – 6:30 pm

*Additional fee applies
Alternative minimum tax has been repealed for corporations. There is also a provision for immediate 100 percent expensing for the purchase of business equipment placed in service after September 27, 2017 and before January 1, 2023. The depreciation cap on luxury autos has been raised, and the limitation for Section 179 expensing has been set at $1 million. The deduction for net interest expenses will now be limited to 30 percent of adjusted taxable income. Net operating loss carryforwards will also be limited to 80 percent of taxable income, and Section 1301-like kind exchanges will be limited to real property. The deduction for any activity deemed entertainment, amusement or recreation (including club membership dues) has been repealed, but 50 percent of business meals will still be deductible.

In what may be the greatest failure of “tax simplification” there are new provisions for pass-through business income – including that from S corporations, partnerships and sole proprietorships – impacting most medical practices.

There will be a 20 percent deduction against qualified business income of these pass-through entities. The deduction amount will be the lesser of:

- 20 percent of the taxpayer’s qualified business income; or
- The greater of 1) 50 percent of W2 wages paid with respect to the business or 2) the sum of 25 percent of the W2 wages paid plus 2.5 percent of unadjusted basis of all qualified property

The deduction is further limited to the net of taxpayer’s taxable income less taxpayer’s net capital gain. The wage limitation does not apply to married taxpayers with taxable income under $315,000 ($157,500 for single taxpayers).

However, specified service businesses (accountants, attorneys, doctors, etc.) are excluded from the deduction unless they are under the $315,000 / $157,500 taxable income thresholds.

**Conclusion**

In our experience, the new tax law will mean lower taxes for some physicians and higher taxes for others. For all physicians, there is no year to be more focused on tax efficiency than 2018.

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Joe Gryskiewicz, MD, is an aesthetic plastic surgeon practicing in Burnsville, MN, and Clinical Professor University of Minnesota (Craniofacial-Cleft Palate Clinics). He serves on the ASAPS Judicial Council and is Chair of the ASERF Research Committee. Disclaimer: Dr. Joe’s opinions aren’t those of the Ethics Committee or the Judicial Council.
The Aesthetic Society’s Patient Safety Committee would like to remind you that an increased focus on patient safety leads to enhanced surgical performance and efficiency. When a surgeon puts safety first, patients are better satisfied, resulting in more referrals, which ultimately impacts your bottom line.

“Primum non nocere”—First do no harm
Dr. Tom is a successful plastic surgeon in one of the most competitive markets in the world. Marketing is not a luxury; it is a necessity for survival. His website is the anchor that drives everything else he does. Tom had previously worked with other marketing agencies—both those with medical experience and those without. He was reluctantly ready to create something new and start a more comprehensive marketing strategy. But first things first—he needed a new website.

When Tom first came on as a client, I had not been formally introduced to him in any way. It was late one Thursday afternoon, and my instant messenger program started to chirp, interrupting Skrillex’s new song in my ear. Ben, one of our seasoned project managers out of our Minneapolis office was beside himself—flustered and clearly upset. “You’ll be getting a call or email from Dr. Tom… he just hung up on me.”

I slouched in my chair, wracking my brain as I tried to piece together the puzzle. I presumptively pondered things I had heard during status update meetings or conversations that had previously occurred, looking for clues that he might have been upset. Nothing was ringing any bells—there was simply nothing on the radar.

“What had gone wrong?” just replayed over and over in my mind, finally interrupted by a new message from Ben. It was lengthy. As I was reading through Ben’s summation, the picture started coming together. As I finished with the de-briefing, it was clear—this is how building a website goes straight to hell.

The last message from Ben before he signed off took me by surprise. “Dr Tom was upset—so upset he yelled and cursed at me. I can’t work with him again.”

I could not reach for my iPhone quick enough… Who does Tom think he is?!

Let’s go back. Tom first came across our booth at the ASAPS Facial Symposium in Las Vegas a few years ago. This was the first time he’d heard of us and probed us with some qualifier questions, “How long have you been around?” and “Who else have you worked with?” But these preliminary questions were all that occurred during this interaction with Dr. Tom.

It was not until the annual Aesthetic Meeting that he stopped by our booth once again. This time, he was ready to make a change. He had remembered us from the previous symposium, and perhaps our positioning in the exhibit hall was just right—the process was quick. He was interested in buying, and we were interested in selling. The questioning of both of our intents and goals was superficial at best.

I often analogize that working with a digital agency is much like entering into a romantic relationship—we need to both be on the same page with our goals and objectives. We did a terrible job of setting expectations, and Tom did a terrible job of learning about us and how our process is different and unique from the other companies he had worked with prior. Instead, we were both in website lust—ready to build a new cutting-edge, technologically sophisticated website that the plastic surgery world would recognize.

We were both excited to start the relationship. We went through the discovery process, and things were great. He liked certain styles, and we thought his attention to detail was impressive. For being a busy surgeon, he did his best to prioritize the new website build and get us the elements we needed.

Communication was good and our relationship was flourishing. Everyone was happy and things were going great.

Then, disaster struck. Tom suffered a major death in his family and things came to an immediate halt. The project was placed on hold and like the sails of any sailboat when the wind stops—all momentum died. It took several months before the project resumed. When Tom was ready to come back, he had also changed his mind (and some key staff along the way), and now wanted to redesign the concept we had previously created. We understood, knowing people change their mind frequently.

Our next concept was disjointed and lacked creativity—a complete swing and a miss. We went back to the drawing board again. The third time was the charm, but now we were several more months into the project. All parties were starting to feel a level of fatigue, and the light in the distance seemed too far and too unattainable. Ben knew we needed to finish this project.

Haste led to mistakes. We made mistakes. Tom sent us the wrong files. His communication that had been so robust and thoughtful before was now reduced to one liners and fragments.

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here and there. No one was paying close enough attention, and tension began to mount. Ben, being “Minnesota nice” was constantly trying to appease Tom, but Tom wanted to see action and movement. Ben’s ‘nice’ personality started to fray in Tom’s desire to rush the project to completion. Emails were exchanged and conversations took place, but no one was really listening. All the while, the tension became palpable in the subtext of every email.

Things came to a head when Tom asked for a review of all the content by our copywriting team. Ben queued up the work for the team to review, and let Tom know it would be five business days for a full review. The tension turned to frustration and immediate anger. “FIVE DAYS!!! I could do it in ONE! I just want my $%^#@ website completed!” And click. Months of delays on both sides had created a crisis situation.

With my iPhone pressed to my face and his line ringing, I expected to be upset with Tom, envisioning our initial conversation to be filled with contempt and passive-aggressive jabs. I could not have been more wrong. Tom was frustrated and his passion got the best of him. However, as I explained things to him from my perspective, his response was even-tempered and understandable.

“I didn’t know that—no one ever told me that,” were his replies. As I explained things from a more neutral perspective, Tom did his best to listen and see things from the other side—not just from his personal frustration with the clock counting down in his own mind. We were 167 days into the project and it felt like there was no end in sight. I could see the end game and I shared that vision with Tom.

The most important part of this conversation was admitting what was wrong and the reasons for delays on our end. I was also honest about the poor job we did of setting the right expectations with Tom for his website build.

We work on 100 or more new websites each year; over 1000 in the last 10 years. I learned some valuable lessons working with Tom on finishing his website and I would like to share those hard-learned lessons with you. When things did break down, we had to reset all the dynamics of the relationship to even be heard.

- **Momentum is everything:** If you can approach a new project with a goal of creating momentum within it, you’ll fare better. We were a bit disjointed in our approach and it caused us to lose our momentum. In fact, it was hard to gain momentum at all until we were working on the site for 24 hours straight. Be conscious of how important focus and momentum are to delivering a project on time, especially if you have limited resources.

- **Give ownership to a specialist within the project:** If you have one person doing too much of everything, ultimately that person is going to burn out. They just have too many big decisions to make and it’s mentally draining. By the end of the process, Tom literally couldn’t make a decision anymore. I was extremely burnt out taking direction and orders from Tom while he was unable to give over certain control elements. So when thinking about embarking on something big, remember that you hire an expert for a reason.

- **Communication is everything:** Prioritize it. The worst thing you can do when embarking on a big project is to have communication failure. In this instance, we both failed to communicate what was reasonable and what our expectations were.

- **Inevitably, things will come up that no one anticipated:** Both sides need to understand that life happens. Sometimes these hiccups in the road are small, and sometimes they are far more serious. We need to work proactively with each other to overcome them, be reasonable and reset expectations based on this new framework. Fixating on things that neither of us could control did not make this particular project go any quicker.

- **Never settle for email or text communications when tensions are high:** I could have emailed Tom with a list of reasons why he was being unreasonable. He could have done the same. Text messages would have been so much worse. After our initial phone call where we each decided to listen to one another, I went to visit him face-to-face. It was critical for us working together to be able to hammer things out directly.

We are now 202 days into this project and the site will launch this weekend. The project was more than double the amount of time it should have taken. Tom had delays on his end and we compounded those. This should have been an exciting time and instead, we are all thankful it’s nearing launch and we are moving on to actually marketing the website.

It would have been easy to walk away from this relationship and throw in the towel. Instead, we learned. We learned from where we failed, and Tom learned that despite being a brilliant surgeon, perhaps marketing is not his calling. I think we are going to be together for a long time!

_Sam Peek, JD, serves as the Incredible Executive Officer at www.incrediblenmarketing.com._
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