



Aesthetic Society News

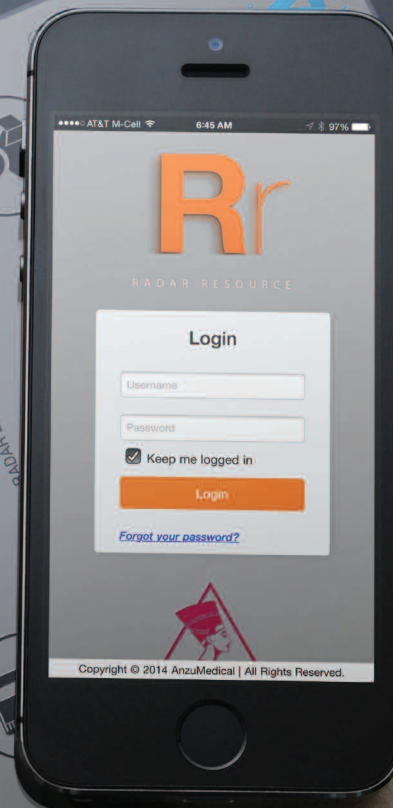
Quarterly Newsletter of the American Society for Aesthetic Plastic Surgery

Volume 19, Number 2 • Spring 2015

SPECIAL AESTHETIC MEETING ISSUE

Meet Us in Montréal! The Aesthetic Meeting 2015 May 14–19, Palais des congrès

- Experience the Global Gathering of Aesthetic Innovators & Experts!
- Demo the All-New RADAR Resource
- Explore the New ASERF Data Hub
- Inspiring Education & World Renowned Faculty

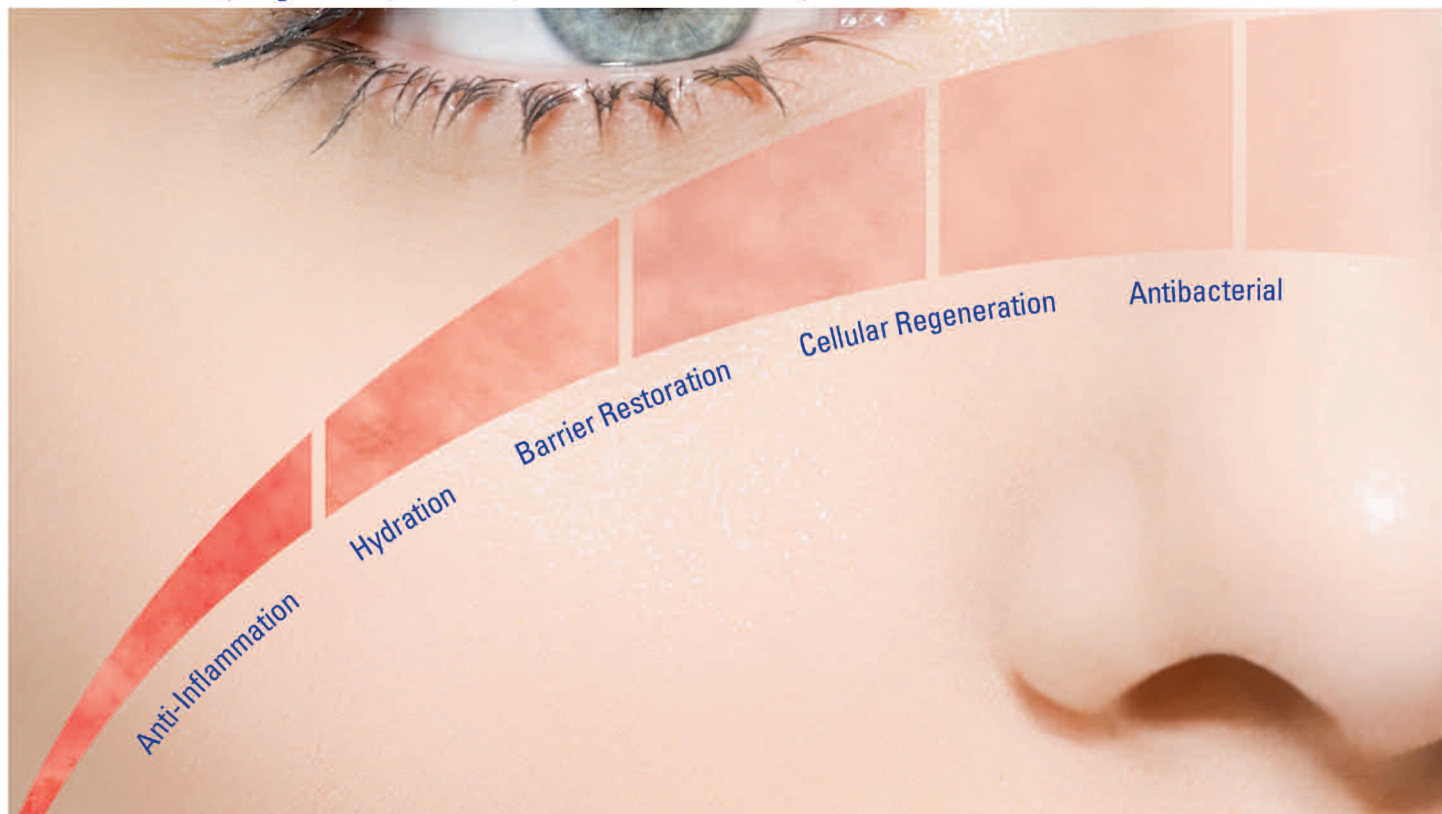


HURRY!

July 1, 2015
is the next ASAPS
Active Member
Application Deadline.
Learn more at
[www.surgery.org/
active-membership](http://www.surgery.org/active-membership)

A ZEIN OBAGI, MD Innovation in Wound Healing ZO® Post Procedure Recovery System™

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The ZO® Post Procedure Recovery System™ developed by Dr. Zein Obagi, addresses the multiple biologic processes that affect speed of recovery following a wide range of procedures that affect skin resurfacing.

Targeting the Biologic Processes of Healing

This ZO® system supports the biologic pathway and essential processes required for re-epithelialization and skin renewal.

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- Easy for patients to use

The New Standard for Post Procedure Care

The ZO® Post Procedure Recovery System encompasses multi-action components that set a new benchmark for rapid recovery and renewal.



POMATROL™ Soothing Ointment

Semi-occlusive ointment hydrates and preserves skin

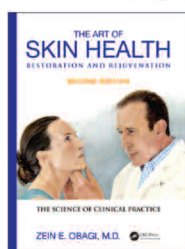
SURFATROL™ Astringent Solution Powder

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REGENACELL™ Epidermal Repair Crème

Continuous hydration and protection to accelerate healing

Dr. Zein Obagi's Newest Book



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Protocols
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Aesthetic Society News

The American Society for Aesthetic Plastic Surgery
The Aesthetic Surgery Education and Research Foundation

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Send address changes and membership inquiries to Membership Department, American Society for Aesthetic Plastic Surgery, 11262 Monarch Street, Garden Grove, CA 92841. Email asaps@surgery.org



The American Society for Aesthetic Plastic Surgery



The Aesthetic Surgery Education and Research Foundation

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ASAPS Members Forum: www.surgery.org/members

ASAPS: www.surgery.org

ASERF: www.aserf.org

ASAPS Consumer Education:
www.smartbeautyguide.com

Society of Plastic Surgical Skin Care Specialists:
www.spsscs.org



ASAPS Calendar

ASAPS Jointly Provided & Endorsed Symposia

April 23, 2015

15th Annual University of Toronto Breast Surgery Symposium

Toronto Marriott Bloor Yorkville Hotel
Toronto, ON, Canada
Tel: 416.946.7641
www.torontoaestheticmeeting.ca

April 24–25, 2015

45th Annual University of Toronto Aesthetic Plastic Surgery Symposium

Toronto Marriott Bloor Yorkville Hotel
Toronto, ON, Canada
Tel: 416.946.7641
www.torontoaestheticmeeting.ca



May 12–14, 2015

Society of Plastic Surgical Skin Care Specialists Skincare 2015

The Westin Hotel
Montréal, QC, Canada
Tel: 562.799.0466
www.spsscs.org/meeting2015

THE AESTHETIC MEETING 2015



May 14–19, 2015

The Aesthetic Meeting 2015

The Palais des congrès de Montréal
Montréal, QC, Canada
Tel: 562.799.2356
www.surgery.org/meeting2015

May 14, 2015

The Rhinoplasty Society Annual Meeting 2015

The Palais des congrès de Montréal
Montréal, QC, Canada
Tel: 904.786.1377
www.rhinoplastysociety.org/meetings

May 22 – 25, 2015

California Society of Plastic Surgeons (CSPS) 65th Annual Meeting

Monterey Marriott and Monterey Conference Center
Monterey, CA
Tel: 510.243.1662
www.californiaplasticsurgeons.org



August 9–17, 2015

The Aesthetic Cruise 2015—Controversies & Challenges in Aesthetic Surgery

Barcelona Spain to Lisbon Portugal
Tel: 562.799.2356
www.surgery.org/cruise2015

September 30–October 3, 2015

AAFPRS Annual Fall Meeting

Sheraton Hotel
Dallas, TX
Tel: 703.299.9291
www.surgery.org/aafprs

October 8–11, 2015

QMP's 11th Annual Aesthetic Surgery Symposium

Chase Park Plaza Hotel
St. Louis, MO
Tel: 314-878-7808
www.qmp.com/meeting2015/aesthetic

January 14–16, 2016

ASAPS Las Vegas 2016 Aesthetic Symposium

The Cosmopolitan Hotel of Las Vegas
Las Vegas, Nevada
Tel: 702-698-7000
www.surgery.org/vegas2016

April 2–7, 2016

The Aesthetic Meeting 2016

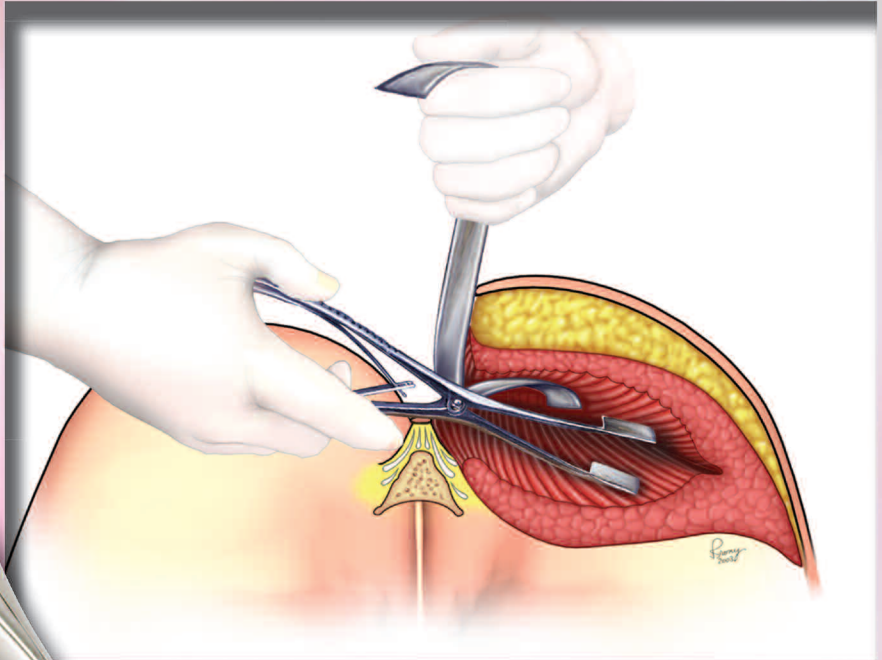
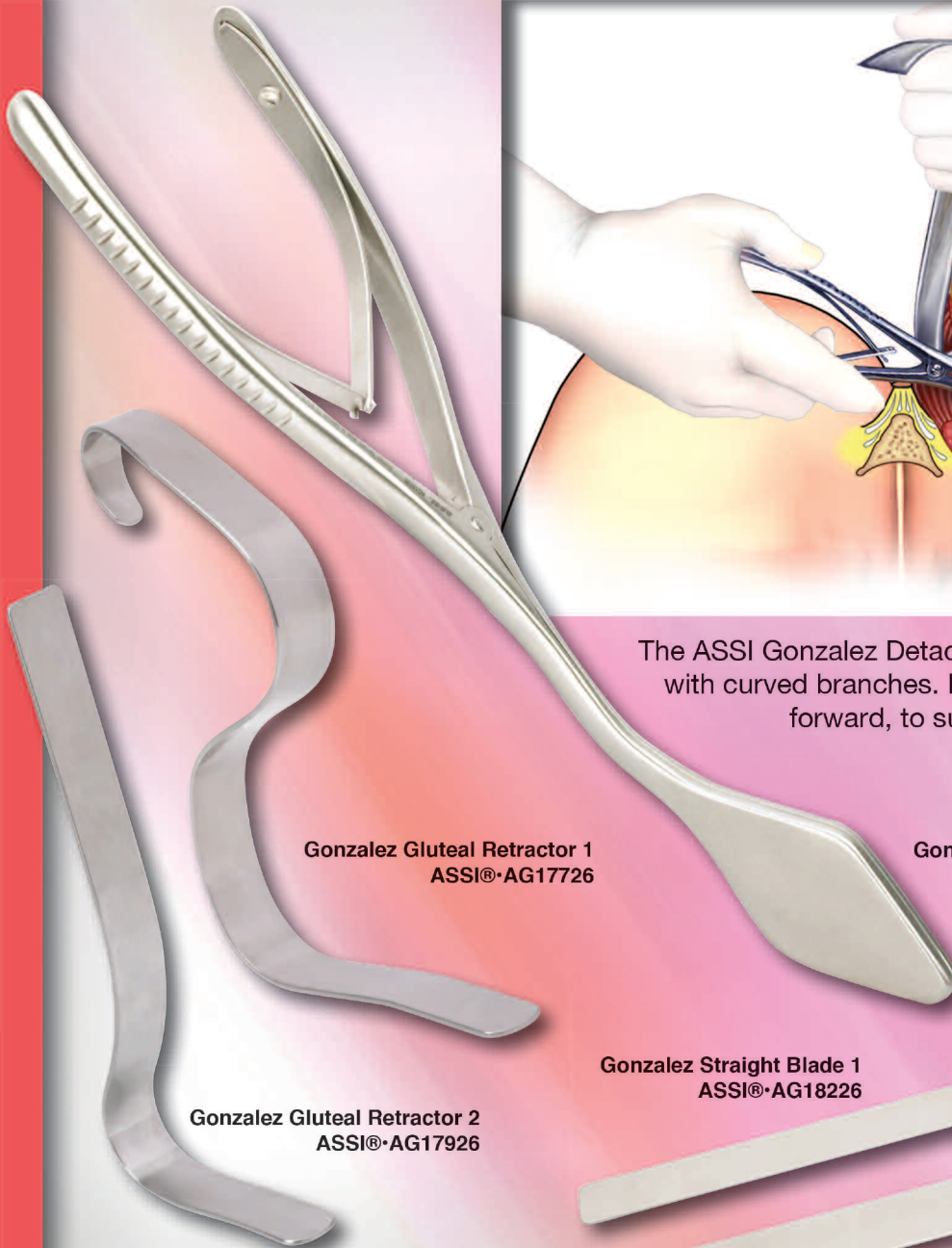
Mandalay Bay Resort & Casino
Las Vegas, NV
Tel: 562.799.2356
www.surgery.org

April 27–May 1, 2017

The Aesthetic Meeting 2017

San Diego, CA
Tel: 562.799.2356
www.surgery.org

ASSI® Gluteal Remodeling Instrumentation



The ASSI Gonzalez Detacher, is shaped like a duck's bill with curved branches. It opens and closes as it moves forward, to suit the implant's size and shape making detachment easier.

Gonzalez Gluteal Retractor 1
ASSI®•AG17726

Gonzalez Detacher w/Duckbill
working end
ASSI®•AG18126

Gonzalez Gluteal Retractor 2
ASSI®•AG17926

Gonzalez Straight Blade 1
ASSI®•AG18226

Gonzalez Straight Blade 2
ASSI®•AG18326

Designed by:
Dr. Gonzalez, Associate Professor of Plastic Surgery,
University of Ribeirao Preto (UNAERP) Medical School, Brazil



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The Joy of Being an Aesthetic Surgeon

Michael C. Edwards, MD

This edition of ASN contains my last report as ASAPS president. It's been an exciting and personally rewarding year. Being president gives you a very different perspective on what it means to be an ASAPS member, but most of all, it makes one appreciate everything that goes into being an aesthetic surgeon even more.

The media is full of reports on the woes of plastic surgery: the starlet with the huge implants, the woman who received a "bargain" injectable with horrifying results, the "human Barbie" or the person who suffered a major adverse event at the hands of a "cosmetic surgeon" who, at the end of the day, is found to be a gynecologist or family practitioner or some other clinician with no training in our specialty.

What the media doesn't cover are the small victories and life changes many of us achieve for our patients every day. Like the middle aged man who has spent his life wearing shirts to the beach because he was embarrassed by his gynecomastic condition. Or the dangerously obese woman who bravely underwent massive weight-loss surgery and now is seeing you to get her body back. Or the vibrant, intelligent older person whose outer self, fallen to old notions of tanning, genetic aging patterns or other thieves now has the look of the energetic person she is. Or the woman who had congenital breast deformity. Or who wanted her pre-child bearing tummy back. The list is virtually endless.

These are just some of the joys of our chosen vocation. To paraphrase one of our colleagues, "it's all about making people a little happier about themselves."

All of us want to please our patients, but never at the risk of an inappropriate procedure and never engaging in practices that would compromise their safety. And as most of us know, the plastic surgery community received a significant victory for safety recently when the corporate medicine chain Lifestyle Lift closed their doors and filed for bankruptcy.

Their story is familiar to us all. Invest millions of dollars in advertising. Get the money. Send the patient to the surgeon without a prior consult. Rake in the cash.

Of course the business model couldn't be sustained. And any board-certified plastic surgeon can tell you why.

The decision to undergo a procedure is a deeply personal one and the relationship between surgeon and patient is at its genesis. Those happy patients like to share their good experiences with their friends and family. And that word of mouth is what builds a reputation and a practice. A corporation does neither.

It has been my honor and privilege to have

served as ASAPS president of the past year. And I can think of no better colleague to hand the reigns to than Dr. Jim Grotting.

A noted lecturer, teacher, clinician and true thought leader in our specialty, Jim will bring his educational experience and fair, balanced judgement to our Society and I ask you to join me in wishing him a great and productive year.



Membership FAQs

Do I have to be a member of ASAPS to be a member of The Aesthetic Society?

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

How do I begin the membership process?

To begin the membership process, please complete the Active Member Checklist at www.surgery.org/checklist and submit to the Membership Manager at alicia@surgery.org or by fax to 562-799-1098 attention Alicia.

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.

What are the deadlines for submitting a membership application?

The two deadlines are January 5 and July 1.

When will my application be voted on?

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.

Do I need to be a member of a professional organization in order to obtain CME?

No. Earning CME credits is not associated with any Society membership.

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 Symposium
- The Biennial Aesthetic Cruise

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 \$1098
- Membership dues for International Active Members are \$840

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 additional information/questions, please contact our Membership Manager, Alicia A. Potochniak via email alicia@surgery.org or at 562.799.2356

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THE MORE
PATIENTS
YOU CAN GET.

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We Cover Complications.

For over ten years, CosmetAssure has kept patients and practices covered against the financial burden of unexpected post-aesthetic surgery complications. Our affordable coverage is available in all 50 states plus D.C. and Puerto Rico, and we are a proud Alliance Partner of the American Society for Aesthetic Plastic Surgery (ASAPS). Provide your patients with peace of mind and gain a competitive advantage at the same time. Plus increase their confidence before the surgery even begins. Call or email us to enroll today.

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WELCOME TO

THE AESTHETIC MEETING 2015

Shaping
the Future:
Innovation
in Aesthetic
Surgery

Palais des
congrès
de Montréal

Montréal,
Québec, Canada

May 14–19, 2015



www.surgery.org/meeting2015

The Annual Meeting of The American Society for
Aesthetic Plastic Surgery, Inc. and Aesthetic Surgery
Education and Research Foundation



The Aesthetic Meeting 2015: Join Us in Montréal!

By Richard J. Warren, MD



Don't Get Conned: Book Your Hotel in the ASAPS Room Block!

For The Aesthetic Meeting 2015 in Montréal, the exclusive ASAPS housing company is Travel Planners, and they are responsible for assisting us with managing our hotel room blocks at these hotels and for assisting you with any individual and group reservation requests you may have. Booking your hotel reservations within our hotel room block allows us to negotiate lower rates than you would get at the same hotel over the same dates booking independently.

The meetings and trade show industry has long had issues with pirate housing companies that represent themselves as working for The Aesthetic Society and calling to offer you a “deal” at our meeting for your hotel rooms. In actuality, when you book with these “poachers,” they take your credit card number, charge your card for rates upfront, provide you with a felonious confirmation number, and when you go to check-in at the hotel, there is no such record of your reservation.

Please be wary of any contact with companies that are directly soliciting your hotel reservations for The Aesthetic Meeting. ALL hotel reservations should be made directly online through the ASAPS meeting registration website and/or with Travel Planners directly. If you, your company, or any of your representatives ever have questions regarding hotel room reservations—or any Annual Meeting related issues—please call The Aesthetic Society directly at 562.799.2356. Book your hotel room at www.surgery.org/hotels.

On behalf of the entire Program Committee, co-chair Charles Thorne, MD, and I look forward to welcoming you to The Aesthetic Meeting 2015, May 14–19 at the Palais des congrès in beautiful Montréal, Québec, Canada. The committee has worked diligently to bring you a premier educational event, with aesthetic experts and innovators from around the world sharing the latest in technological advances and techniques.

For aesthetic plastic surgeons passionate about connecting with brilliant minds, learning ground-breaking new advances, and building a successful practice, The Aesthetic Meeting is the leading, globally-recognized educational event of the year. Plus, with our special Practice Management Scientific Sessions, perfect for practice staff as well as other courses specifically for staff, you and your entire team will return home with an array of ideas which can help your practice evolve and grow.

Full meeting information can be found at www.surgery.org/meeting2015, but I wanted to draw your attention to some exciting opportunities occurring this year.

New at The Aesthetic Meeting 2015

- **Premier Global Hot Topics is now included in the Scientific Sessions!** Don't miss the audience favorite, Premier Global Hot Topics, as it joins the stellar lineup of the Scientific Sessions, included as part of your Aesthetic Meeting registration. Full of dynamic and thought-provoking content, this year will be livelier than ever. Make plans to attend both parts, as it will be split into two sections, on Saturday May 16 and Tuesday May 19. Plan your travel accordingly!
- **Tailoring Facelift Approaches to Individual Patients.** Groundbreaking surgeon Daniel C. Baker presents his 75 minute interactive video exclusively at The Aesthetic Meeting 2015! Educating fellow surgeons for over 25 years, this is your chance to learn from him in person at the Scientific Session Orange, Saturday May 16 at 2pm. His special presentation will include such topics as: Short Scar vs. Classical, Closed vs. Open Neck, Plication vs. SMASectomy, Volume Addition vs. Volume Reduction, Chin Implant, Buccal Fat Excision, and Simultaneous Full Face Skin Resurfacing. This must-see event, available only at The Aesthetic Meeting, will not be recorded. Just one more reason to come to Montréal!
- **The Science of Fat Grafting.** As Director of Program in Regenerative Medicine and Co-Director of the Institute for Stem Cell Biology and Regenerative Medicine at Stanford University School of Medicine, researcher and plastic surgeon Michael Longaker brings a wealth of expertise to The Aesthetic Meeting. Tap into his knowledge and learn more about the science of fat grafting.
- **The Anatomy of Facial Aging.** An internationally respected figure in aesthetic plastic surgery, Bryan C. Mendelson's original research has resulted in facial techniques that obtain results that are not only natural looking, but are also inherently lasting. His many years of research into facial anatomy, which is ongoing, provides the scientific foundation for the techniques developed, which he'll share in this special presentation.
- **How to Get Patients in the Door: Exposing the Motivations Behind Beauty.** With over 30,000 patients and four books to his credit, including the well-known “Fillers, Neurotoxins and Beyond,” facial plastic surgeon Steve H. Dayan is well-versed on the choices patients make. Through his presentation, learn how you too can step into the mind of your prospect and turn that person into a patient.
- **“The Business Side” Scientific Sessions.** Develop a more efficient and successful practice by encouraging your staff to attend the special Practice Management Scientific Sessions on Sunday May 17 – Tuesday, May 19. Topics include:
 - Lead Management
 - Internet Marketing
 - Legal Issues
 - Branding
 - Leveraging ASAPS
 - Price Transparency
 - Social Media

Continued on Page 9

The Aesthetic Meeting 2015

Continued from Page 8

- EHR/EMR
- Retirement Strategy
- Business Solutions
- Reputation Management
- **Meet the ASAPS Board Wine Tasting.** On Sunday May 17, meet ASAPS leadership during a special wine tasting event in The Aesthetic Marketplace. It's your chance to ask questions and provide feedback on your experience as an ASAPS member or Aesthetic Meeting attendee. 3:30 – 4:30pm.
- **ASJ Live!** Located in The Aesthetic Marketplace, top contributors to the Journal will appear in the ASJ Live! Theater, allowing you to deep-dive with them into their research! *Supported by Galderma.*
- **ASAPS Tech Playground.** Venture to the ASAPS booth in The Aesthetic Marketplace and demo the new RADAR Resource (soon to be available across all platforms) and the ASERF Data Hub.
- **ASERF Data Hub.** The ASERF Data Hub, powered by SurgiMetrix, is an exciting portal for surgical data collection, enabling the specialty to data mine information that will ensure plastic surgery is kept out of the hands of regulators, improve patient safety, identify gaps in clinical practice, and assist with creating educational content. Demo the new ASERF Data Hub in ASAPS Tech Playground, Booth #1817. Open Saturday – Monday, 9:00am – 5:00pm.



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

Montréal Savings

DOWNLOAD
THE COUPON
BOOKLET

Take advantage of savings on dining, sights, and shopping by downloading these

valuable coupon offers!

<http://asaps.alamontreal.com/exclusive-offers>

ASERF Silent Auction. The Aesthetic Meeting 2015's 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/silentauktion

The Aesthetic Marketplace. In The Aesthetic Marketplace, make sure to visit not only ASERF Silent Auction and our wonderful exhibitors, but also to attend the short presentations at the Practice Changers Theaters, which take place during coffee breaks. These are great opportunities to learn about new elements which can help your practice run even better.

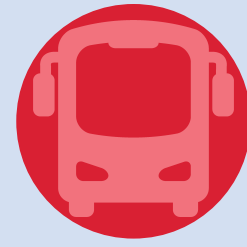
Innovators Luncheon—The Most Interesting Luncheon in the World. You won't want to miss the latest research developments as innovators from around the world present their latest findings. Saturday May 16, 12:30pm – 2:00pm.

Canadian Entry. Please make sure your passport and entrance requirements are satisfied by visiting www.surgery.org/visa

Credits. At The Aesthetic Meeting 2015, you'll be able to earn up to 50.75 AMA PRA Category credits™. Attend the entire 2015 Scientific Session and earn 21.75 CME credits, of which 8 are patient safety CME. An additional 16.25 patient safety CME credits can be earned by attending select Optional courses.

We look forward to seeing you at The Aesthetic Meeting 2015 as we meet in Montréal, Québec, Canada. Our program on May 14–19 at the Palais des congrès. Learn more about this premier global gathering of aesthetic innovators and experts at www.surgery.org/meeting2015. Together, by furthering our education and inspiring each other, we can take our specialty to new heights.

Richard Warren, M.D., is an aesthetic plastic surgeon practicing in Vancouver, BC, Canada, and serves as the chair of The Aesthetic Society Program Committee.



ARRIVING IN MONTRÉAL Practical Information Airport Transportation

747 Shuttle Bus

The 747 shuttle bus service is the most cost effective and efficient way to travel between the airport and the centre of Montréal and runs 24 hours a day, 7 days a week. Once you leave the customs hall, follow the signs for "Shuttle Bus/Navettes" just outside the terminal.

Travel time may vary between 30 to 45 minutes, depending on traffic conditions. Wi-Fi service is available on most 747 buses.

The fare is \$10 (CDN) for unlimited travel throughout the STM bus and metro networks during 24 consecutive hours.

The fare card can be purchased at the airport from the automated dispensers which accept cash, debit and credit cards. If paying on-board, only COINS ARE ACCEPTED—NO BANK BILLS.

For more information please visit www.stm.info

ASAPS Hotels and corresponding bus stops of the 747 Express bus:

- Stop #5: Fairmont Queen Elizabeth & Marriott Chateau Champlain
Stop #6: W Montréal
Stop #7: Embassy Suites, Hyatt Regency, St. James, Westin, InterContinental, Le Dauphin

By Taxi:

Taxi rates are fixed at C\$40 to downtown, one-way, and there is always a minimum charge of C\$17. It is customary to tip the driver anywhere from 10% to 20%, with 15% being the average. Visa, MasterCard and American Express are often, although not always, accepted; therefore it is strongly suggested to advise the taxi dispatcher of your desired method of payment.

THE AESTHETIC MEETING 2016 PRACTICE CHANGERS

Practice Changers Theater is located in Booth #319 in The Aesthetic Marketplace

SATURDAY, MAY 16

MORNING BREAK

9:30am – 10:00am

Station One

9:35am

Precision Otoplasty: Combining Reduction Otoplasty with Traditional Otoplasty

Sammy Sinno, MD

9:45am

RADAR 2.0—What's New?

Tracy Pfeifer, MD

Station Two

9:35am

First, Do No Harm—How Safety Measures Enhance the Performance of Your Practice

Claude Oppikofer, MD

9:45am

How to Advertise in Poor Taste

Robert Aicher, Esq.

LUNCH BREAK

12:45pm – 2:00pm

Station One

12:55pm

Search Engine Optimization

Kevin Charles

1:10pm

An Easy and Cost-Effective Method to Perform the “No-Touch” Technique in Saline Breast Augmentation

Shuhao Zhang, MD

1:25pm

RADAR for Residents

Sammy Sinno, MD

1:40pm

Interactive Cases on RADAR: Everything You Need to Know

Barry Fernando, MD/Jack Fisher, MD

Station Two

12:55pm

The Use of a Monofilament Absorbable Polymer Mesh to Provide Soft Tissue Support in Cosmetic and Reconstructive Breast Surgery

Bruce Van Natta, MD

1:10pm

SERI—Wrapped Dermal Mastopexy—A Description and Pilot Study

Mark Brzeziński, MD

1:25pm

Manland—Incorporating Male Services into Your Practice

W. Grant Stevens, MD

1:40pm

10 Reasons Your Colleagues are Losing Sleep

Robert Aicher, Esq.

AFTERNOON BREAK

4:00pm – 4:30pm

Hot Topics

Station One

4:05pm

Nano-Fat Grafting

Alexis Verpaele, MD

4:15pm

The Online Patient Migration (Hint: It's Away From Your Site)

Ryan Miller

Station Two

4:05pm

Cellfina

Simeon H. Wall, Jr., MD

4:15pm

Gluteal Augmentation

Simeon H. Wall, Jr., MD

SUNDAY, MAY 17

MORNING BREAK

9:30am – 10:00am

Station One

9:35am

Proactive Control of the Inframammary Fold in Primary Breast Augmentation

Kevin Small, MD

9:45am

Reduction of Lip From the Visible Lip

Subramaniam Arumugam, MD

Station Two

9:35am

RADAR 2.0—What's New?

Tracy Pfeifer, MD

9:45am

RADAR for Residents

Sammy Sinno, MD

MONDAY, MAY 17

MORNING BREAK

9:45am – 10:15am

Station One

9:50am

Circum-mammary Purse String Technique for Internal Mastopexy

Robert Rehnke, MD

10:00am

Search Engine Optimization

Kevin Charles

12:55pm

Redefining Abdominal Anatomy: A New Application of the Progressive Tension Suture Technique

Christopher Patronella, MD

1:10pm

Umbilicorraphy: Key Elements in Creating a Natural Umbilicus During Abdominoplasty

Christopher Patronella, MD

Station Two

9:50am

Interactive Cases on RADAR: Everything You Need to Know

Barry Fernando, MD and Jack Fisher, MD

10:00am

Clearing the Air—Best Practices for Breast Implant Pocket Preparation

William Adams, Jr., MD

LUNCH BREAK

12:30pm – 2:00pm

Station One

12:40pm

Periorbital Rejuvenation through Autoaugmentation Upper Blepharoplasty and Superficial Lateral Browlift with Deep Temporalis Fascia (DTF) Fixation

Francisco Bravo, MD

12:55pm

Redefining Abdominal Anatomy: A New Application of the Progressive Tension Suture Technique

Christopher Patronella, MD

1:10pm

Umbilicorraphy: Key Elements in Creating a Natural Umbilicus During Abdominoplasty

Christopher Patronella, MD

1:25pm

Zwivel Online Cosmetic Consultations: Stop Wasting Your Time On Consultations That Go Nowhere

Jordan Farkas, MD

1:40pm

Crisis Management

John O'Leary

Station Two

12:40pm

How to Use Social Media to Grow Your Practice

Jennifer Walden, MD

12:55pm

10 Things You Should Do to Get Sued

Robert Aicher, Esq.

1:10pm

Did You Drop Something? How to Manage Lead Retention

Karen Zupko

1:25pm

Compliance Management and Data Collection—ASERF Data Hub

Geoffrey Keyes, MD

1:40pm

What's Your Video Strategy? Create, Curate and Convert using Video Marketing

Jennifer Longtin

The Aesthetic Meeting 2015



Enjoy 20% Savings on ASAPS Products

Visit The Aesthetic Marketplace, Booth #1817, to take advantage of savings on all Aesthetic Society marketing collateral, educational DVDs, and more! Open Saturday May 16-Monday May 18, 9:00am-5:00pm.

Get a Free WE ARE AESTHETICS Photo!

Join the WE ARE AESTHETICS campaign by having your photo taken at the WE ARE AESTHETICS Photo Booth & Lounge (Booth #2017) in The Aesthetic Marketplace. You'll be sent your photo to use on social media and see your photo shared by ASAPS as well. Send

the signal to all that you value the aesthetic plastic surgery specialty with these complimentary photos. Open Saturday, May 16 – Monday, May 18, 9:00am – 5:00pm.



WE ARE AESTHETICS.



Watch your favorite medical journal come to life in the *Aesthetic Surgery Journal's* ASJ Live! Theater. This is your chance to ask questions of authors and editors, listen to discussions of important articles, and learn more about this vital publication, which the Thomson Reuters Journal Citation Report gives an Impact Factor of 2.034, ranking it 67th out of 204 journals in the overall surgery category. Open Saturday-Monday, 9:00am – 5:00pm, in The Aesthetic Marketplace.

Supported by Galderma.



Bid at the ASERF Silent Auction

Bid and win at the ASERF Silent Auction! Funds raised will go to support the new ASERF Data Hub.

Bidding begins online

May 1 and ends at The Aesthetic Meeting Montréal on May 18. This year all auction bidding can be done from the convenience of your smart phone or online.

To participate, please sign Up for an account at Handbid (<https://hand.bid/aserf>). Once bidding begins, LOGIN to the Handbid app on your mobile device and bid on auction items! Don't have a smartphone? Don't worry! You can bid online at <https://hand.bid/aserf> or by using an iPad at the event. The ASERF Silent Auction will take place in Booth #1701 in The Aesthetic Marketplace. Open Saturday, May 16 – Monday, May 18, 9:00am – 5:00pm. Bidding ends at 3:00pm Eastern on Monday, May 18.



Women Aesthetic Surgeons' Lounge

Visit the W.A.S. Lounge in The Aesthetic

Marketplace, Booth #109, to engage with colleagues and discuss topics specific to women in plastic surgery all designed to create a sense of camaraderie. Network with your peers while enjoying a beverage and snack! Open Saturday, May 16 – Monday, May 18, 9:00am – 5:00pm. Brought to you by Sientra.



Demo New Products in the ASAPS Tech Playground

RADAR Resource is all-new and now available on all platforms. Demo the

must-have medical library in Booth #1817. Also in Booth #1817, experience and give feedback on the new ASERF Data Hub, which will help with benchmarking and compliance issues. Open Saturday, May 16 – Monday, May 18, 9:00am – 5:00pm.

Pick Up Your Virtual Event Bag!



As visiting The Aesthetic Marketplace in its entirety while also attending educational courses can be a challenge, this year The Aesthetic Society is producing a virtual event bag! As a new benefit to

our attendees, we've invited all of our 2015 exhibitors to promote their products, discounts and other exclusive content to attendees in one convenient location.

Whether or not you're attending The Aesthetic Meeting, keep your eyes peeled for an email invitation to your digital event bag. We hope that you will take advantage by previewing what will be showcased in the exhibit hall even before the meeting has begun! Don't miss out on any of our exhibitors' offerings in 2015!

For additional information, please contact our Exhibits Manager, Erika Ortiz-Ramos, Erika@surgery.org.

Not Yet Registered?

Onsite registration for The Aesthetic Meeting 2015 will be available at the Palais des congrès de Montréal, lower level. Upon entry to the Palais, follow the colorful circles to Registration.

PASSPORTS AND VISAS

For information about entrance to Canada, please visit www.surgery.org/visa. If you need an invitation letter from ASAPS to complete your visa application, please contact Victoria Ruiz at victoria@surgery.org.

ONSITE REGISTRATION HOURS:

Thursday May 14	6:30am – 6:00pm
Friday May 15	6:30am – 6:30pm
Saturday May 16	6:15am – 5:30pm
Sunday May 17	6:30am – 5:00pm
Monday May 18	6:30am – 5:00pm
Tuesday May 19	6:30am – 12:00pm



THANK YOU!

On behalf of the Aesthetic Surgery Education and Research Foundation (ASERF), please accept our thanks to all who have contributed generously. Your support throughout the years has enabled ASERF to fund research which benefits patients, physicians, and the entire field of medicine. We are pleased to announce the launch of the new ASERF Data Hub, powered by SurgiMetrix, the creation of which will lead to further enhancements in our specialty. During The Aesthetic Meeting, make sure you demo the ASERF Data Hub in The Aesthetic Marketplace and learn how to put this new tool to work on your behalf.

Please visit ASERF during The Aesthetic Meeting to learn more about our dedication to aesthetic surgery, our ongoing research studies, and how you can contribute to this important cause.

ASERF Lounge

Room 518B, Fifth Floor

Palais des congrès de Montréal

Hours: Saturday May 16, 7:30am-4:30pm

Sunday May 17, 7:30am-4:30pm

Monday May 18, 7:30am-1:00pm

ASERF Data Hub, powered by SurgiMetrix

Booth #1817, The Aesthetic Marketplace

Palais des congrès de Montréal

Hours: Saturday May 16 - Monday May 18, 9:00am-5:00pm



**THE AESTHETIC SURGERY EDUCATION
AND RESEARCH FOUNDATION**

Terrific Opportunities for Staff!

With the lowest exchange rate in years, a trip to Montréal has never been more affordable, and The Aesthetic Meeting offers numerous educational opportunities to learn and develop staff skills

Practice Management: The Business Side

Develop a more efficient and successful practice by encouraging your staff to attend the special Practice Management Scientific Sessions (The Business Side) on Sunday, May 17–Tuesday, May 19. Topics include, Lead Management, Branding & Marketing, Legal Issues, Retirement Strategy, Business Solutions, Reputation Management, and more! This is a terrific opportunity to provide your staff the tools they need to ensure a successful practice.

Only a \$250 fee grants your staff access to the 3-day Practice Management Session, The Aesthetic Marketplace, and the Presidential Welcome Cirque Spectacular. Take advantage of this wonderful educational opportunity and register your staff today!

The Aesthetic Meeting 2015: Courses for Staff

The educational opportunities for staff don't end with the Practice Management Scientific Session, The Business Side! Check out all the exciting courses for nurses, office staff, and physician assistants at www.surgery.org/meeting2015

Re-Designing Your Aesthetic Practice—How to Get Beyond Today (S6) 4 CME credits
Cosmetic Medicine 2015—Harnessing the Power of Cosmetic Medicine in Your Practice (S9) 8.5 CME Credits

Physician Extender Injector Competence Training—Level 1—Understanding the Basics of Injection Techniques with Neurotoxins and Hyaluronic Acid Dermal Fillers (S17A) 2.5 CME Credits

Physician Extender Injector Competence Training—Level 2—Advanced/Combination Injection Techniques with Neurotoxins and the Array of FDA-Approved Dermal Fillers (S17B) 2.5 CME Credits



Interested in only an Aesthetic Marketplace pass? They're available in advance for only \$35 or onsite for \$50.



The Skin Care Meeting is Open to Anyone!

Do you have either skin care professionals or others interested in learning more about skin care? The Skin Care Meeting is open to all and the industry's most knowledgeable skin care specialists, physicians, nurses and scientific researchers serve as faculty. Sessions address such topics as cutting edge skin treatments to advanced pre and post-operative clinical skin care. Scientific research, aesthetic artistry, professional development, clinical patient care, marketing and business skills are also emphasized.

All Skin Care 2015 attendees are also invited to attend an all-day educational bonus organized by ASAPS: Cosmetic Medicine 2015—Harnessing the Power of Cosmetic Medicine in Your Practice. To learn more about Skin Care 2015, May 12–15, please click here.

AAAASF Certified Surveyors Training

In an effort to meet the increasing demand for accreditation and oversight, the American Association for Accreditation of Ambulatory Surgery Facilities (AAAASF) is currently seeking certified surveyors. To see if you qualify, please check this list at <http://bit.ly/1AMFYJ5>.

AAAASF has scheduled a training workshop for Friday, May 15, 2015 in Montréal association with The American Society of Aesthetic Plastic Surgery (ASAPS) annual meeting. For further information and registration specifics, please go to <http://bit.ly/1GxwqWr>.

Attendance is FREE for physicians, nurses and anesthesiologists in AAAASF accredited facilities. Continuing Medical Education (CME) credits are offered for participation through ASAPS and future survey work conducted on behalf of AAAASF is compensated. We hope to see you in Montréal!

American Society of Plastic Surgical Nurses Meeting



May 15–17, at the 12th annual ASPSN Aesthetic Symposium, your nurses will learn the latest in education and research to help

promote practice excellence, nursing leadership, optimal patient safety, and outcomes. Learn more here.



AIM Your Pathway to Higher Learning

Expert Ongoing Education

With the ASAPS Aesthetic Immersion Modules (AIM), your education doesn't stop when the course is over. The AIM program is perfect for those aesthetic surgeons who want to intensify their learning experience by continuing the dialogue throughout the year.

Learn from recognized leading experts in aesthetic education through interactive settings. Within a 5-year period, attend all three courses in the module, as well as participate in at least two of the webinars. Those who fulfill the requirements will receive an AIM Certificate of Completion in their field of study.

Here's what you do:

- Look for the AIM logo on the course schedule. Select a teaching course in Face, Body, Breast, or Rhinoplasty. You can take courses in all four areas at The Aesthetic Meeting 2015.
- Commit to at least one webinar per year, per topic. For example, if you choose the breast module you will be invited to one webinar on the topic that expands on the coverage in the teaching course. Additional webinar fees apply.
- Join your colleagues for online discussion groups using RADAR Resource, The Aesthetic Society's resource library app. By registering for an AIM, you not only learn from instructors at the annual Aesthetic Meeting, but your education continues throughout the year in the form of follow-up webinars and online discussions. With AIM, you are making a commitment to your education as well as welcoming the opportunity to form relationships with colleagues who share a passion for the same field of study as you. For more information, visit www.surgery.org/aim.



What's New with RADAR Resource

By Tracy Pfeifer, MD

Recognizing the digital age, the need to have easy access to information and supporting The Aesthetic Society's commitment to cutting edge aesthetic education, ASAPS is proud to announce RADAR Resource 2.0. For those of you not familiar with RADAR, it is an app and web-based program that allows you to access stored educational content at any time. RADAR takes the place of your file cabinet and/or stacks of journals but it also does so much more.

RADAR Resource can be accessed from any mobile device or desktop computer 24/7. You no longer have to scan and save an article to your desktop. Eliminate cutting out articles and filing them in your file cabinet. With RADAR all of your go-to articles are with you for easy reference at any time.

What you can do with RADAR Resource:

- Access any issue of *Aesthetic Surgery Journal* going back to 1995.
- Store your favorite reference articles from *ASJ* for easy reference. This takes the place of your file cabinet or PDF scans on your desktop. Your articles can be accessed at any time from your mobile device or any desktop. How do you do it? Create a "Binder" and store your articles there. Makes finding a given article a breeze. For example, store an article on Treating Chemosis in your Blepharoplasty binder. Click on your binder and all your stored articles appear. Empty out that file cabinet drawer!

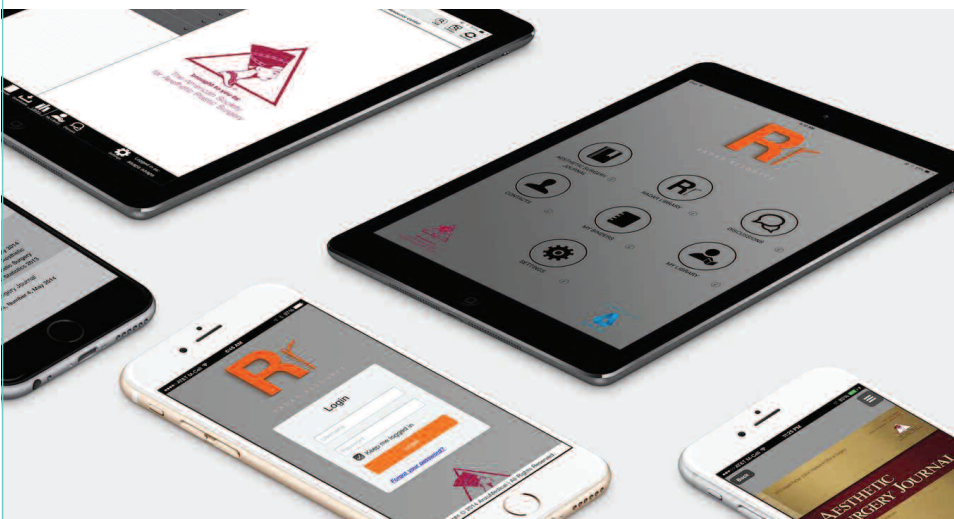
- Engage in community discussions with other ASAPS members in the Discussions forum. Post a question and RADAR users will give their feedback and advice. This valuable feature allows surgeons to share experiences, knowledge and problem solve. The discussions feature is especially helpful if you are in solo practice and do not feel comfortable reaching out to local colleagues or you just need to brainstorm. Recent discussions include a very enlightening one about pre-operative screening for HIV and Hepatitis C. Plus, it is fun and a great way to make new ASAPS friends!

NEW to RADAR Resource:

- RADAR Resource was previously compatible with only iPad operating systems. **RADAR is now compatible with all operating systems**, so you can access your RADAR using any mobile device. You also have full access to your RADAR from any PC or Apple computer.
- iPad users access RADAR via an app found in the Apple app store. Just search "ASAPS."
- All other devices-iPhone, Android, Microsoft operating systems and Apple and PC desktops access RADAR via a URL, www.radarresource.org.
- New this year is the **Case Based Learning System**. Cases will be developed in order to illustrate options, rationale for approaches and illustrate best practices.
- RADAR Resource 2.0 will include an **integrated Google Search Appliance (GSA)** which will provide accurate and relevant search of all content within the RADAR library including publications, discussion threads, interactive cases, and inside bookmarked videos.
- **Easily locate leading reference articles, videos and presentations by anatomic area.** Each anatomic area has its own section, for example, Breast Augmentation. Within Breast Augmentation you will find all the relevant articles from *ASJ* going back 5 years, recent pertinent video presentations and PowerPoint presentations from past meetings.
- The new **Procedural Video** section will have all videos available on RADAR in one section, searchable by topic. We all know that video is the best way to learn, and ASAPS is dedicated to prioritizing high quality video content. Want to review the key steps in canthopexy right before a case? The video is available to view at any time on your mobile device.
- The newly added **RADAR for Residents** is a cutting edge feature designed to educate our young plastic surgeons who are interested in aesthetic surgery. There will be sections on cases for Residents as well as educational content. Being the best aesthetic surgeons means having the best Aesthetic Education, and RADAR helps provide this.

The ASAPS RADAR Resource product is unique and unmatched-it is cutting edge technology that is groundbreaking. For those of you not yet familiar with RADAR, stop by the ASAPS Booth, 1817, to learn about this powerful app/web-based program and how it can make your life easier. There are numerous ways to interact with and demo RADAR at The Aesthetic Meeting 2015 in Montréal, and don't forget to bring your device: smartphone, iPad, tablet, or laptop!

Tracy Pfeifer, MD, is an aesthetic plastic surgeon practicing in New York, NY. She serves as the Chair of the ASAPS RADAR Resource Editorial Committee.



Montréal RADAR Schedule

Breakfast with RADAR

FRIDAY, MAY 15
8am – 9am
Room 525 Convention Center

Lunch with RADAR

MONDAY, MAY 18
12:30pm – 1:30pm
Room 515 Convention Center

RADAR in The Aesthetic Marketplace

SATURDAY MAY 16
SUNDAY MAY 17
MONDAY MAY 18
Explore the new features at the ASAPS
Tech Playground in Booth 1817

RADAR in the ASJ Live! Theatre

SATURDAY MAY 16
SUNDAY MAY 17
MONDAY MAY 18
4pm – 5pm

RADAR Practice Changers Presentations

Practice Changers Theatre in The
Aesthetic Marketplace

SATURDAY, MAY 16

9:45am – 10:00am
RADAR 2.0 – What's New?
Tracy Pfeifer, MD

1:25pm – 1:40pm
RADAR for Residents
Sammy Sinno, MD

1:40pm – 1:55pm
Interactive Cases on RADAR: Everything
You Need to Know
Barry Fernando, MD & Jack Fisher, MD

SUNDAY, MAY 17

9:35am – 9:45am
RADAR 2.0 – What's New?
Tracy Pfeifer, MD

9:45am – 10:00am
RADAR for Residents
Sammy Sinno, MD

MONDAY, MAY 18

9:50am – 10am
Interactive Cases on RADAR: Everything
You Need to Know
Barry Fernando, MD & Jack Fisher, MD



RADAR for Residents: The Ultimate Educational Experience

By Sammy Sinno, MD

Residents training in the year 2015 have more access to education than ever before. Between lectures, textbooks, online resources, journals, and meetings, we are fortunate to have a variety of ways to learn plastic surgery. Yet amidst these resources there has always been a glaring need in resident education: comprehensive and standardized aesthetic surgery education. RADAR for Residents will be the first application to fulfill this need.

Our vision began with the unifying goal to make RADAR for Residents the best application in plastic surgery education. Under the guidance and vision of Dr. Barry Fernando, along with mentorship from Drs. Marissa Tenenbaum and Terry Myckatyn from Washington University in St. Louis, I was able to recruit a talented team of residents and fellows from across the country to ensure we would have the most useful, in-demand, and high quality features only in the application. The resident and fellow team consisted of David Sieber (Minnesota), Ziyad Hammoudeh (Mayo Clinic), Ashley Amalfi (Southern Illinois), Ajul Shah (Yale), Brian Derby (Dr. Grotting's fellow), and Nyama Sillah (Beth Isreal fellow). After many hours of deliberations, meetings, and brainstorming sessions, the team decided that the most important features of RADAR for Residents should include expert opinions/pearls, excellent quality multimedia/videos, and oral board style clinical questions in a case-builder format all on an easy to navigate platform.

To meet these goals, RADAR for Residents has been designed to be the ultimate resource for aesthetic surgery education. The layout is very user-friendly and robust. Each video, article, and case will also be searchable and catalogued via the Google Search Appliance, as RADAR for Residents will be the first medical application to use this high-powered search capability. Additionally, the application will feature a case builder, which will allow residents to load relevant cases exclusively onto the application to be discussed by



experts. The case builder function will incorporate branched logic, allowing users to select a variety of choices and pathways for management, each full of quality explanations and references. The application will also incorporate gamification software (at a later date), awarding points to users for completing case scenarios. These points will be tracked for awards that may include books, meeting attendance/travel stipend, or instructional courses.

The entire RADAR team has worked tirelessly to make the RADAR for Residents the best application possible, a cannot-miss for anyone serious about aesthetic surgery education. As we near launch at The Aesthetic Meeting 2015 in Montréal, I encourage all of my fellow residents to be a part of history and an unparalleled educational experience with RADAR for Residents. Visit ASAPS Booth #1817 in Montréal for more information!

Sammy Sinno, MD, is a plastic surgery resident at New York University.

Watch. Learn. Advance.

The Aesthetic Meeting 2015 Education on Demand*

Purchase Scientific Sessions AND Optional Courses and **SAVE!**

The education you need is only a mouse click away! With the purchase of Aesthetic Meeting 2015 Education on Demand, you can watch selections from both Scientific Sessions Orange and Blue, as well as 15 optional courses when you want and wherever you want.

Unlimited online access is available June 15, 2015 to June 30, 2016. The perfect way to learn from some of the finest in the specialty, all from your practice or home.



WE ARE
AESTHETICS.

*No CME credit
Program Subject to Change

Education On Demand can be purchased online at:
www.surgery.org/educationondemand2015



Top Montréal Restaurants for the Gourmet Traveler

by Mayssam Samaha

Some people eat to live and some live to eat. This list is for the latter: those who are driven by the decadent pleasure of discovering new gourmand destinations and enjoying delectable gastronomic experiences.

For fine dining par excellence: Restaurant Toqué!

Chef Normand Laprise's cuisine—the very one that started the Montréal food revolution—will leave you speechless and wanting more.



Toqué! Restaurant
900, Jean-Paul-Riopelle
Place, Montréal (Québec)
H2Z 2B2 Canada
514-499-2084

www.restaurant-toque.com

For the trendy crowd: Hotel Herman

The northern Québec cuisine is even prettier than the branché crowd that frequents this much-applauded establishment.



Hotel Herman
5171, rue Saint-Laurent,
Montréal (Québec)
H2T 1R9 Canada
514-278-7000

www.hotelherman.com

For the quintessential Montréal night out: Joe Beef

You'll be treated to the best Montréal has to offer, paired with a great glass of wine.

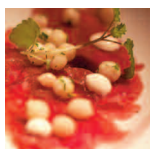


Joe Beef
2491, Notre-Dame West,
Montréal (Québec)
H3J 1N6, Canada
514-935-6504

www.joebeef.ca

For the fish and seafood aficionados: Le Filet

The delicate ocean-based dishes have become the toast of the town. And speaking of toasts, do try the one with sea urchin and seaweed butter.



Le Filet
219, Mont-Royal West Ave.,
Montréal (Québec)
H2T 2T2, Canada
514-360-6060

www.lefilet.ca

For those willing to travel for food: Restaurant Le St Urbain

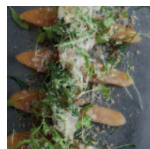
One of the city's best tables, it's located a tad out of the way, but is very much worth the trip. You'll enjoy the elegant food and excellent wine list.



Restaurant Le St Urbain
96, Fleury Ouest, Montréal
(Québec) H3L 1T2, Canada
514-504-7700
www.lesturbain.com

For those who want to see and be seen: Pastaga

Star chef Martin Juneau's food draws admiring crowds in and the casual yet dazzling food keeps them coming back for more.



Pastaga
6389, Saint-Laurent,
Montréal (Québec)
H2S 3C3, Canada
438-381-6389

www.pastaga.ca

For the sweet tooth: Patrice Pâtissier

Here, you can end a great and delicate dinner with one of Patrice Demers' scrumptious desserts.



Patrice Pâtissier
2360, rue Notre-Dame
Ouest, Montréal (Québec)
H3J 1N4, Canada
514-439-5434

www.patricepatissier.ca

For the foie gras enthusiasts: La Chronique

This is where you go for the best foie gras in Montréal, and keep returning for the flawless French-inspired menu.

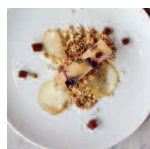


La Chronique
104 Ave. Laurier Ouest,
Montréal (Québec)
H2T 2N7, Canada
514.271.3095

www.lachronique.qc.ca

For the design lovers: Le Serpent

The industrial chic restaurant design will wow you just as much as the Italian-inspired menu.



Le Serpent
257, Prince Street,
Montréal (Québec)
H3C 2N4, Canada
514-316-4666

www.leserpent.ca

For the star treatment: Restaurant Les 400 coups

Local ingredients shine in an ambiance worthy of an old Hollywood movie set.



Restaurant Les 400 coups
400, Notre-Dame Est,
Montréal (Québec)
H2Y 1C8, Canada
514-985-0400

www.les400coups.ca

For those in search of exotic flavours: Estiatorio Milos

You'll savour the vast array of delicate Mediterranean dishes, fresh seafood and scrumptious desserts in a décor reminiscent of a Greek holiday.



Estiatorio Milos
5357, Avenue Du Parc,
Montréal (Québec)
H2V 4G9, Canada
514-272-3522

www.milos.ca

For a Michelin-star experience: Maison Boulud

Chef Daniel Boulud's extensive expertise shines through his chef de cuisine Riccardo Bertolino, and the exquisite service that reigns within the sumptuous dining room.



Maison Boulud at
Ritz-Carlton Montréal
1288, Rue Sherbrooke Quest,
Montréal (Québec)
H3G 1H6, Canada

514-842-4224

www.maisonboulud.com/montreal

For those who want to feel like a local: Bouillon Bilk

This restaurant is so inconspicuous, that it's easy to miss, but it would be such a shame because the cuisine here is sophisticated yet unpretentious, set against a minimal décor that lets the dishes shine.



Bouillon Bilk
1595, boul St-Laurent,
Montréal (Québec)
H2X 2S9, Canada
514-845-1595

www.bouillonbilk.com

Article and Photographs Courtesy of Tourism Montréal.

“The ASAPS educational curriculum is very strong and offers residents the opportunity to attend The Aesthetic Meeting and other symposia free of charge. In particular, The Aesthetic Meeting gives us as residents the chance to discover what kind of surgeons we want to become.”



Chris Surek, DO
ASAPS Residents Program Participant

WE ARE AESTHETICS.

Shaping the Future of Smart Beauty.

www.surgery.org



THE AMERICAN SOCIETY FOR
AESTHETIC PLASTIC SURGERY, INC.

Montréal's Circus Story

Once upon a time, in a small picturesque Québec village, two talented buddies unwittingly sparked an upheaval so significant that it would develop to include millions of people across the planet.

Dear Reader, if you are wondering whether you are about to embark upon a tale of adventure, tragedy, comedy or mystery, it is all of the above and more: it is an incredible success story detailing how Montréal has become the world's undisputed Big Top. Read on!

Circus Arts Redefined: the Story of Cirque du Soleil

Twenty-five years strong, Québec-based Cirque du Soleil was born from a simple dream between friends who wanted to amuse audiences, see the world, and have fun doing it.

In the early eighties, Guy Laliberté and Gilles Ste-Croix led a group of young street performers—stilt-walkers, jugglers, musicians, dancers, and fire eaters—known as the “High Heels Club.” Spurred on by the crowd's enthusiasm, the group develops an entertainer's festival that eventually becomes the Cirque du Soleil.

With its trademark elements of creativity, fantasy, innovation, original music, acrobatics, dance, theatre, extraordinary costumes, sets and lighting, the Cirque offers a circus that was before unseen; an art form of intangible magic promoting beauty of movement, of sound, of surroundings, of emotion. Their shows illustrate human triumph over the impossible; unlike traditional circus acts, Cirque du Soleil does not include animals.

Their mission: to invoke the imagination, provoke the senses and evoke the emotions of people throughout the world. To this, the Cirque remains true, mesmerizing over 90 million spectators in over 200 countries since its inception in 1984. From humble beginnings of a mere twenty performers, the Cirque has grown to include 4,000 employees, of which 1,000 are artists, from over 40 different countries.

They have garnered numerous prestigious awards and have participated in distinguished events such as opening and closing ceremonies for Olympic Games and Super Bowl XLI, to name but a few. They have many notable upcoming performances planned, including the World's Fair in Shanghai.

Their international headquarters, including state-of-the-art training facilities and studio, are in Montréal.

The Renewal Continues

The incredible success of Cirque du Soleil has nurtured the development of numerous other significant projects and companies.

A Place to Call Home: TOHU

Quite simply, TOHU is about the circus, the earth, and its people; it is a sustainable development initiative in the heart of Montréal's Saint-Michel neighbourhood. Its mission is to establish Montréal as an international centre for the circus arts; to participate actively in the rehabilitation of the area; and to contribute to the urban renewal of its neighbourhood.

A non-profit organization born from a combined initiative of En Piste (the Canadian circus arts Network), the National Circus School, and the Cirque du Soleil, TOHU is now one of the largest centres in the world for circus arts training, creation, production and performance. It is also home to the National Circus School and the residences of the Cirque du Soleil. In addition, the TOHU Pavilion, featuring a circular variable-geometry performance space, is the only one of its kind in Canada.

Cirque Éloize

A leader in contemporary circus arts, Cirque Éloize expresses its innovative nature through theatricality and humanity,

Experience authentic Montréal cirque traditions at the Magic of Montréal Presidential Welcome Cirque Spectacular.

Saturday, May 16

7:00pm–10:00pm
Windsor Station

Shuttles available from designated hotels.

combining circus arts with music, dance and theatre. Since 1993, Cirque Éloize has presented over 3,000 performances in 30 countries, has participated in several international festivals and has also enjoyed success on Broadway (New York City).

The first-ever Montréal Circus Arts Festival

Given Montréal's global reputation for festivals and circus arts, it is only natural that the city hosts its very own International Circus Arts Festival. In June 2010, the first Montréal circus festival was presented, symbolizing a legendary meeting of extraordinary artistic talent in the heart of the world's circus arts superpower.

Not even the SKY is the limit!

The world of the circus—with Montréal as its hometown—is a magical place where physicality disobeys physics and creativity defies imagination. It is a place where anything is possible: where a stilt walker can go from entertaining a simple street crowd to addressing the world from a space station. But that, dear Reader, is another story...

MUST-SEE EXTRAVAGANZA!

PRESIDENTIAL
WELCOME
CIRQUE
SPECTACULAR

Saturday, May 16, 2015

7:00 pm

WINDSOR STATION
Montréal, Québec, Canada



Does Your Aesthetic Team Have the Education They Need?

The Society of Plastic Surgical Skin Care Specialists is now accepting new memberships from licensed skin care specialists practicing in the offices of board certified Plastic, Facial Plastic, Oculoplastic or Dermatologic Surgeons. Learn more at www.spsscs.org.



Society of Plastic Surgical
Skin Care Specialists

www.spsscs.org

Looking for High Level Skin Care Education from Sources You Trust?

Do you have a nurse or aesthetician in your practice? Could your existing staff benefit from unbiased plastic surgical skin care education? They will definitely benefit by attending the many educational presentations at the Society of Plastic Surgical Skin Care Specialists (SPSSCS) Annual Meeting, **Skin Care 2015: Exploring Science and Technology in Plastic Surgical Skin Care, May 12–15, 2015** at Le Westin Montréal Hotel in Montréal, Québec, Canada, just prior to The Aesthetic Meeting.

Many of our members have a wide range of educational needs; clinical expertise, business knowledge and marketing are just a few, so this year's program is designed to meet these needs. We have an exciting lineup of faculty and educational topics (*please see details at right*).

All Skin Care 2015 attendees are also invited to attend an all-day educational bonus organized by ASAPS: *Cosmetic Medicine 2015—Harnessing the Power of Cosmetic Medicine in Your Practice*. Enhance the quality of your practice by giving your staff the tools they need to better serve your patients. Registration information is now available, please visit our website at www.spsscs.org/meeting2015

Our 2015 Faculty Includes:

Bob Aicher, Esq
Al Aly, MD
Badir Amirlak, MD
Goesel Anson, MD
Alicia Barrera
Gail Belott, RN
Denise Byrnes
Therese Clark
Claudio DeLorenzi, MD

Donna Erb
Julius Few, MD
Joe Gryskiewicz, MD
Thomas Hitchcock, MD
John Hoopman, CMLSO
Kathy Jones, BSN, RN, CPSN
Kian Karimi, MD
Becky Kuehn
John Kulesza

Angela McDonald
Maria Mekas, RN, BSN
Karen Menard, RN
Ryan Miller
John Renucci, MD
Cindy Steele
Arthur Swift, MD
Jean-Francois Tremblay, MD
Rob Trov

Our 2015 Topics Include:

Camouflage makeup
Challenges in men's skin care
Chemistry of skin lightening
Dermaplaning
Hot topics
Injectables
Lasers
Legal liability issues
Live peel demonstrations

Marketing and events
Microneedling
Networking Roundtable discussions
Oncology skin care
OSHA updates
Photodamage treatment
Post operative skin care and scar reduction

Pregnancy and hormonal issues
Product ingredients
Rosacea
Social media
Sunscreens
Tissue regeneration
Treating patients with significant weight loss

SPSSCS Announces Changes to Guidelines for Professional Conduct

At a recent SPSSCS Board of Directors meeting, the decision was made to eliminate item #7 from the SPSSCS Guidelines for Professional Conduct:

- **Tips and Gratuities:** SPSSCS members shall not solicit or accept tips for professional services or procedures performed.

Effective immediately, the SPSSCS no longer takes a position on the subject of tips and gratuities recognizing that our members are working with a myriad of compensation structures. To view the complete "Guidelines for Professional Conduct," please visit: www.spsscs.org/guidelines-for-professional-conduct

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Chair: Mark Codner, MD
Co-Chair: Sal Pacella, MD, MBA

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Free for Residents & Fellows: The Business of Launching Your Practice



The American Society for Aesthetic Plastic Surgery (ASAPS) is preparing a gift for Senior Plastic Surgery Residents. The offering is a symposium—a quick weekend getaway in Dallas, Texas for “The Business of Launching Your Practice—The ASAPS Gift of Expert Advice” to be held December 11–13, 2015.

This symposium will be free of charge to qualifying attendees—Plastic Surgery Residents & Fellows graduating from the classes of 2012–2016. We will address the business concerns of graduating residents as to “what comes next” after graduation. Chairman Mark Codner, MD, and Co-Chair Sal Pacella, MD, MBA, are building the symposium around the common concerns of residents, asking “What is your greatest concern/fear in going out into practice?”

Additional faculty will include practice management experts Ryan Miller (Etna Interactive) and Karen Zupko (Zupko and Associates), with other faculty announced soon.

The Grand Hyatt at DFW—a beautiful 4 Diamond hotel—is located in the Dallas/Forth Worth airport, making time away minimal and easy.

Visit the ASAPS Website at www.surgery.org/residents2015 for updates.

This Symposium
is Free to
Qualified Attendees,
Courtesy of
ASAPS!

Set Sail for Adventure and Aesthetic Education: The Aesthetic Cruise 2015

Hurry! There is still time to register and book your cabin for ASAPS’ biennial voyage, The Aesthetic Cruise 2015: Controversies and Challenges in Aesthetic Surgery. This is an excellent opportunity to interact with aesthetic surgery experts in an intimate learning environment, all while visiting dazzling ports of call. Departing from Barcelona, Spain, the luxurious Regent’s Seven Seas Mariner will visit such destinations in Spain as Ibiza, Valencia, and Almeria, then journey to Gibraltar and Tangier. The ship will then return to see Cadiz, Spain, before arriving at its final port, Lisbon, Portugal.

The world’s first all-suite, all-balcony ship, Seven Seas Mariner features four gourmet restaurants with open seating. Hallmarks include generous amenities and a welcome spaciousness. Catering to only 700 guests, her staff-to-guest ratio of 1 to 1.6 ensures the absolute highest level of personal service.

CME will be available. Please refer to www.surgery.org/cruise2015 for details.

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ASN2015CA



ASAPS Las Vegas 2015 Aesthetic Symposium: Another Successful Year!

By Richard J. Warren, MD

Dr. Glenn Jelks and I would like to extend our sincere thanks to all who made the recent *ASAPS Las Vegas 2015 Aesthetic Symposium: State of the Art in Facial Rejuvenation* such a success. This educational event at The Bellagio Hotel, now in its second year, brought together the world's foremost aesthetic faculty for an in-depth exploration of aging concepts, anatomy, aesthetic evaluation, surgical options, fat grafting, fillers, and complications. Attendance was terrific, with 177 surgeons participating in the symposium. For the second year in a row, our **optional facial cadaver lab** sold out, with participants raving about the one-on-one interactive learning. The special one-day "**Skin Care Session**" was organized by the Society of Plastic Surgical Skin Care Specialists (SPSSCS) and proved quite successful as well; those attending enjoyed the opportunity to learn from faculty from the physician symposium as well as industry professionals.

We were fortunate enough to have the wonderful Robert Singer, MD, act as moderator for many of our panels. The interactive discussion format, using discussants to ask the panelists questions, ensured a lively exchange as panelists were occasionally challenged and ideas considered.

It was wonderful to have such dynamic education in a city as fun as Vegas, which kept attendees busy from early morning to late at night!

Our thanks to our faculty for the symposium and cadaver labs for their time and energy. Faculty included Javier Beut, MD; Nuri Celik, MD; Mario Pelle-Ceravolo, MD; Steven Cohen, MD; Sydney Coleman, MD; Barry DiBernardo, MD; Michael Edwards, MD; James Grotting, MD; Geoffrey Gurtner, MD; Bahman Guyuron, MD; Jeffrey Kenkel, MD; Jerome Lamb, MD; Z. Paul Lorenc, MD; Timothy Marten, MD; Robert Singer, MD; Christopher Surek, DO; Oren Tepper, MD; Charles Thorne, MD; and Patrick Tonnard, MD.

We greatly appreciated our many wonderful exhibitors who joined us in Las Vegas to demonstrate their innovative products and services.

Skin Care Session

Chair Elena Reyes, C-RMA, RST, CIDESCO, and Co-Chair Karen Menard, RN, were fortunate to have assembled a wonderful faculty for this special session, which was open to skin care specialists. Faculty included Sandra Adams; Goesel Anson, MD; Alicia Barrera; Therese Clark; Barry DiBernardo, MD; Peter Houtz; James Hoyt, MD; Keith Humes; Jeffrey Kenkel, MD; Z. Paul Lorenc, MD; Timothy Marten, MD; Ryan Miller; and Kyle Mills.

Save the Date!

Due to the overwhelming success of this aesthetic symposium, I am pleased to announce that next year has already been

scheduled. Please plan to join us for the ASAPS Las Vegas 2016 Aesthetic Symposium on January 14–16 at The Cosmopolitan Hotel of Las Vegas. More details will soon be found at www.surgery.org/lasvegas2016.

As 2015's cadaver lab sold out, make sure you book early for the ASAPS Las Vegas 2016 Aesthetic Symposium, as it promises to be an exceptional educational experience.

Richard J. Warren, M.D., is an aesthetic plastic surgeon practicing in Vancouver, B.C., Canada. He sits on the Aesthetic Society's Board of Directors and serves as Chair of the Education Commission.

SAVE THE DATE!

ASAPS Las Vegas 2016 Aesthetic Symposium

STATE OF THE ART IN FACIAL REJUVENATION

January 14–16, 2016

The Cosmopolitan Hotel of Las Vegas
Las Vegas, Nevada



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Update on ASERF

By Al Aly, MD



THE AESTHETIC SURGERY EDUCATION
AND RESEARCH FOUNDATION

ASERF Career Achievement Award

Recently, the ASERF board selected Foad Nahai, MD as the 2015 ASERF Career Achievement Award Winner.



Dr. Nahai is currently the most well recognized name in plastic surgery the world over. It would be safe to say that there are no practicing plastic surgeons alive that have not been affected by Dr. Nahai in some way. His contributions span the entire specialty of plastic surgery starting with his seminal textbook, co-edited with his late dear friend Stephen Mathes, "Reconstructive Surgery: Clinical Atlas and Basic Techniques." This book is the basis for all of modern day muscle flap surgery. His contributions in aesthetic surgery are no less impressive with what many consider the best aesthetic surgery textbook entitled "The Art of Aesthetic Surgery: Principles and Techniques," a complete and encyclopedic look at aesthetic surgery.

Dr. Nahai has been involved in leadership of plastic surgery for over 20 years. He was the educational "czar" for aesthetic surgery for a decade and presided over the two largest aesthetic surgery societies in the world; The American Society for Aesthetic Plastic Surgery (ASAPS) and the International Society of Aesthetic Plastic Surgery (ISAPS). Last but not least, since Dr. Nahai took over the helm of

the *Aesthetic Surgery Journal*, it has become the leading aesthetic surgery journal in the world.

Just as important as his contributions to the literature and leadership accomplishments, Dr. Nahai has personally educated hundreds of residents and fellows. He has helped guide the careers of many very well-known, and not so well known plastic surgeons.

Although what is included above is a mere fraction of what Dr. Nahai has accomplished, it is his kind and gentle nature that truly impresses his friends and colleagues.

Although many individuals have contributed to plastic surgery, Dr. Nahai is one of a few who has contributed with such immensity and breadth, certainly worthy of this honor. For nearly 35+ years he has criss-crossed the globe educating his peers and colleagues, running a busy practice, creating new surgical procedures and volunteering for thousands of hours for organizations such as ASAPS.

ASERF Data Hub

With each passing month ASERF gets closer to launching the Data Hub. The Data Hub will serve as a single point entry system for surgical procedures providing insight into plastic surgical outcomes and complications. This promises to be one of the most powerful tools that plastic surgeons will have at their disposal, to both participate in and to gain insight and information from.

That information will be utilized to cover educational gaps and create new educational programs. Additionally, the information can be aggregated to determine best practice and increase patient safety.

RESEARCH UPDATE: Pulmonary Embolism Study

Data collection for a study, sponsored in part by the Aesthetic Surgery Education Research Foundation has been completed. The retrospective study, encompassing cases reported from 2001-2013, is reviewing approximately 10,000,000 procedures and 417 venous thromboembolisms (VTE).

Data points collected include patient demographic information, types of procedures performed, Caprini evaluations, individual

surgeon technique and perioperative management in addition to anesthesia approach.

The methodology for the study required a chart review, carried out by contacting surgeons whose patients experienced a VTE, to query them about their patients and their care using the designed data points.

A computer analysis program has been designed to allow for an in depth analysis that should provide additional insight into the development of VTE.

Attractiveness Study

Recently, I created a task force to study the objective evaluation of aesthetic surgery results. Currently aesthetic surgery results are judged subjectively based on the concept that "beauty is in the eye of the beholder." This approach has kept aesthetic surgery in the realm of art and away from real scientific rigor. Quantitative evaluation of aesthetic surgery results should fundamentally change the practice of aesthetic surgery. It is however a difficult goal to attain and this is due in large part to our lack of "yard sticks" to measure results against. The first step in developing yard sticks is understanding "attractiveness and beauty." It would seem that plastic surgeons should be the world's experts on this subject, but we are not. Plastic surgery core curriculum is sparse when it comes to real scientific data on attractiveness and beauty.

The task force will investigate the scientific knowledge currently available on beauty and attractiveness, repeat some of the studies in these areas, and contribute new ones to the field. This will help infuse these concepts into the plastic surgery core curriculum, and finally utilize this information to delineate a path for the objective evaluation of aesthetic surgery results. The task force will determine areas of research that will help reach these goals.

The ASERF Nominating Committee recommends the following slate of candidates for the 2015–2016 term:



President
(Automatic from
President-Elect)
**Neal R. Reisman,
MD, JD**

Houston, TX
Private Practice, Plastic
Surgery Specialists, P.A.;
Clinical Professor of Plastic Surgery, Baylor
College of Medicine; Chief of Plastic Surgery,
Baylor—St. Luke's Medical Center
Current ASERF Board Position:
President-Elect



President Elect
**Steven
Teitelbaum, MD**

Santa Monica, CA
Private Practice
Assistant Clinical
Professor of Plastic
Surgery, David Geffen
School of Medicine at UCLA
Current ASERF Board Position:
Vice President
National Affiliations: ASAPS, ASERF, ASPS,
ACS, ISAPS
Training: Harvard/Beth Israel Hospital,
Boston, MA, General Surgery; University of
Southern California, Plastic Surgery
ABPS Certification: 1997



Vice President
**Barry DiBernardo,
MD**

Montclair, NJ
Private Practice
**Current ASERF Board
Position:** Secretary
National Affiliations:
ASAPS, ASERF, ASPS, ASLMS, ISHRS, ISAPS
Training: Cornell University Medical
College; Albert Einstein College of Medicine,
Plastic Surgery
ABPS Certification: 1993



Secretary
Julio Garcia, MD

Las Vegas, NV
Private Practice
**Current ASERF Board
Position:** Director
National Affiliations:
ASAPS, ASERF, ASPS, ISAPS, ACS
Training: Northwestern University; University
Illinois College of Medicine; University of
Illinois Medical Center, Plastic and
Reconstructive Surgery
ABPS Certification: 1991



Director (lay director
1 year term)
**Spencer Brown,
PhD**

Camden, NJ
Director of Research,
Department of Surgery,
Cooper University Hospital
Current ASERF Board Position:
Lay Director
National Affiliations: International
Federation of Adipose Therapeutics and
Science Society
Training: PhD in Lipid Metabolism from the
University of Pennsylvania, Post-doctoral in
Molecular Biology at Baylor College of
Medicine in Pre and Post-doctoral training
grants in Cardiovascular Research from NIH



Director (2-year term)
**Robert Whitfield,
MD**

Austin, TX
Private Practice
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



Director (2-year term)
**Luis M. Rios Jr.,
MD**

Edinburg, TX
Private Practice
**Current ASERF Board
Position:** Director
National Affiliations:
ASAPS, ASERF, ASPS
Training: Harvard; Southwestern Medical
School; UC Davis, General Surgery; Baylor
College of Medicine, Hand Surgery; Tulane
University, Plastic Surgery;
ABPS Certification: 1999



Trustee (2-year term)
**William P. Adams
Jr., MD**

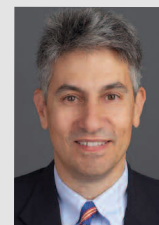
Continuing their terms:



Treasurer
**Scott W.
Barttelbort, MD**



Director
**Geoffrey C.
Gurtner, MD**



Director
**Michael T.
Longaker, MD**

Members to Vote on Slate of Candidates



Active members of the American Society for Aesthetic Plastic Surgery (ASAPS) will hear reports on Society business and elect new officers for 2015–2016 during the ASAPS/ASERF Annual Business Luncheon. All Active Members are invited to attend on Sunday, May 17, 2015 at 12 noon during the Aesthetic Meeting 2015 in Montréal.



President
(Automatic from
President-Elect)
**James C.
Grotting, MD**
Birmingham, AL
Private Practice; Clinical
Professor of Plastic

Surgery, University of Alabama at
Birmingham and the University of
Wisconsin, Madison

Current Board Position: President-Elect
Automatically ascends to President



President-Elect
**Daniel C. Mills,
II, MD**
Laguna Beach, CA
Private Practice
**Current Board
Position:** Vice
President

ASAPS Committee Work: Executive
Committee, Advocacy
Relations Committee (current Chair);
Aesthetic Training Committee, Finance &
Investment Committee, Industry Policy
Committee, Leadership Development
Committee, ASJ Editorial Board—ASJ
Technology Editor, ASERF Data Base
Review Task Force (current Chair), ASERF
Fund Development Committee, ASERF
Website Committee

National Affiliations: ASAPS & ACS
Training: Wright State University, General
Surgery; Medical College of Ohio, Plastic
Surgery
ABPS certification: 1990



Vice President
**Clyde H. Ishii,
MD**
Honolulu, HI
Private Practice
**Current Board
Position:** Treasurer
ASAPS Committee

Work: Executive Committee, Finance &
Investment Committee (current Chair),
Industry Policy Committee, Publications
Committee, International Fellowship
Program (current Chair)

National Affiliations: ASAPS, ASPS, ACS,
ASLMS

Training: Jefferson Medical College,
University of Virginia, General Surgery;
Emory University, Plastic Surgery; NYU,
Hand Surgery

ABPS Certification: 1987



Secretary
**Charles Thorne,
MD**
New York, NY
Private Practice
**ASAPS Committee
Work:** Judicial Council,
Education Commissioner

(current Vice Chair), Program Committee
(current Vice Chair)

National Affiliations: ASAPS, ASPS, ACS
Training: Yale College, UCLA School of
Medicine, Massachusetts General Hospital
Surgery Residency, Plastic Surgery; NYU,
Craniofacial Surgery

ABPS Certification: 1991



Treasurer
**W. Grant Stevens,
MD**
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: Secretary
ASAPS Committee Work: Executive
Committee, Administrative Commissioner,
Finance & Investment Committee, Industry
Support Committee (current Chair), Program
Committee, Traveling Professor Program, ASJ
Clinical Editor

National Affiliations: ASAPS, ASERF, ACS,
ISAPS

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

ABPS Certification: 1989



Members at Large
**Melinda J. Haws,
MD**
Nashville, TN
Private Practice
Current Board Position:
Parliamentarian
ASAPS Committee

Work: Industry Exhibits Committee, Industry
Support Committee, Women Aesthetic
Surgeons' Committee (current Vice Chair),
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



Sanjay Grover, MD

Newport Beach, CA
Private Practice
Current Board Position:
Member at Large
ASAPS Committee

Work: Finance and Investment Committee, Communications Commissioner, Industry Policy Committee (current Chair), Industry Exhibits, Industry Policy Committee, Electronic Communications Committee
National Affiliations: ASAPS, ASPS, ACS, The Rhinoplasty Society
Training: UCLA, UC San Diego School of Medicine
ABPS Certification: 2002, Recertified 2012



Herluf Lund, MD

St. Louis, MO
Private Practice
Current Board Position:
Member at Large
ASAPS Committee
Work: Administrative

Commission (current Vice Commissioner), Finance & Investment Committee, Industry Exhibits Committee, Industry Policy Committee (current Vice Chair), Product Development and Market Research Committee (current Chair), External Marketing Committee, International Fellowship Program, Program Committee, Membership Commissioner, Membership Task Force, New Member Committee, Marketing Task Force (Vice Chair),
National Affiliations: ASAPS, ASPS, ACS, AMA
Training: Washington School of Medicine; University of Texas at Houston, General Surgery; Washington School of Medicine, Plastic Surgery Residency
ABPS Certification: 1994

Trustee

(3-year term)



Felmont F. Eaves, III, MD

Atlanta, Georgia

Those continuing in positions:

William P. Adams, Jr., MD

Dallas, TX
(3-year term)

Simeon H. Wall Jr., MD

Shreveport, LA
(3-year term)

Richard J. Warren, MD

Vancouver, BC, CA
(3-year term)

Jennifer L. Walden, MD

Austin, TX
(completing vacated term until 2016)

Kiya Movassaghi, MD

Eugene, OR
(3-year term)

Steven Teitelbaum, MD

Santa Monica, CA
(3-year term)

Application Review Committee

(3-year terms)



Northeast
Douglas S. Steinbrech, MD
New York, New York



Canada
Brian Peterson, MD
Kelowna, BC, Canada



Midwest
Clark F. Schierle, PhD, MD
Chicago, IL



Far West
Paul Faringer, MD
Honolulu, HI

Ethics Committee

(3-year terms)



Northwest
Allen Gabriel, MD
Eugene, OR



Northeast
Christine Hamori, MD
Duxbury MA

Judicial Council

(3-year terms)



West
Scott Bartelbort, MD
La Jolla, CA



East
Roberta Gartside, MD
Reston, VA

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Americans Spent More Than \$12 Billion in 2014 on Cosmetic Procedures as Male Plastic Surgery Rose 43% over a Five Year Period

For the second year in a row, Americans spent more than \$12 billion on both surgical and nonsurgical procedures with more than 10 million cosmetic procedures performed in 2014. Of the total spent, \$7.5 billion was spent on surgical procedures, \$2.3 billion on injectable procedures, and \$2 billion on skin rejuvenation procedures and \$6 million on other nonsurgical procedures.

Procedures that showed the largest growth in volume from 2013 to 2014 included buttock augmentation (up 86%), labiaplasty (up 49%) and nonsurgical fat reduction (up 42%).

The top five surgical procedures for both men and women combined in 2014 were: liposuction (342,494 procedures), breast augmentation (286,694 procedures), blepharoplasty (165,714 procedures), abdominoplasty (164,021 procedures), and rhinoplasty (145,909 procedures).

The top five nonsurgical procedures for both men and women combined in 2014 were: botulinum toxin (3,588,218 procedures), hyaluronic acid (1,696,621 procedures), hair removal (828,480 procedures), chemical peel (484,053 procedures), and microdermabrasion (417,034 procedures).

The cosmetic surgery tide is changing and with it, more men facing a challenging and sometimes ageist job market are flocking to plastic surgeons to maintain a youthful appearance. Plastic surgery is not just for women anymore. According to the recent statistics, the number of men undergoing cosmetic procedures is up 43% over a five year period (since 2010) and up 273% since 1997. A board-certified plastic surgeon's ability to provide a full spectrum of care—nonsurgical to surgical—catered to an individual's needs is one of the many factors driving this trend. This is not a trend that is expected to wane anytime soon.

Surgical procedures that have increased significantly among men over the past 5 years include: facelift (up 44%), blepharoplasty (up 34%), and male breast reduction (up 33%). Nonsurgical procedures that have been popular among men over the same time period include: hyaluronic acid (up 94%), botulinum toxin (up 84%), Intense Pulsed

Light (up 44%), and nonsurgical skin tightening (up 37%).

The most popular surgical procedures for men in 2014 were: liposuction, rhinoplasty, blepharoplasty, male breast reduction and facelift.

Women continue to drive the cosmetic industry with more than 9.6 million cosmetic procedures in 2014 accounting for 90% of the total. The number of cosmetic procedures for women increased over 429% since 1997. The most popular surgical procedures for women in 2014 were: liposuction, breast augmentation, abdominoplasty, blepharoplasty and breast lift.

The age group that had the most cosmetic procedures was age 35–50 with over 4.2 million procedures followed in order by age 51–64, age 19–34, age 65 and over, lastly age 18 and under.

The most popular procedure for each age group was: Otoplasty for age 18 and under, breast augmentation for age 19–34, liposuction for age 35–50, liposuction for age 51–64 and facelift for age 65 and over.

For a second year in a row, racial and ethnic minorities accounted for approximately 22% of all cosmetic procedures: Hispanics (8.3%), African-Americans (7.1%), Asians (5.1%) and other non-Caucasians (1.3%).

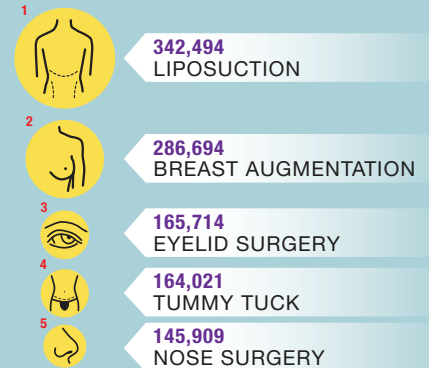
In 2014, 56.3% of all cosmetic procedures were performed in an office facility, 26% were performed in a free-standing surgical center and 17.2% in a hospital.

These statistics are based on a paper-based questionnaire that was mailed to 30,000 board-certified physicians including dermatologists, otolaryngologists and plastic surgeons. A total of 901 physicians responded, of which 786 were active physicians. Though the confidence intervals change by procedure, depending on the groupings sample size and the response variance, the overall survey portion of this research has a standard error of +/- 3.45% at a 95% level of confidence. To obtain a full copy of the report, visit the media section of The Aesthetic Society's website, www.surgery.org.

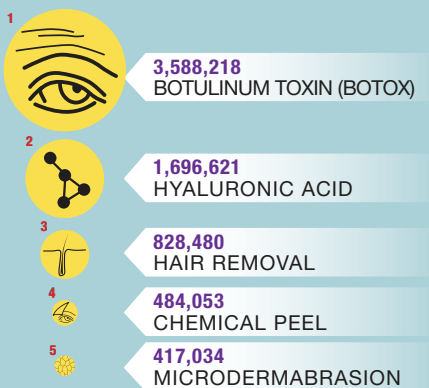
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AESTHETIC PLASTIC SURGERY

2014 STATISTICS

TOP 5 SURGICAL PROCEDURES





TOP 5 NON-SURGICAL PROCEDURES



FUN FACTS

 **MALE COSMETIC SURGERY HAS INCREASED BY 43% OVER THE PAST FIVE YEARS.**

 **WOMEN HAD MORE THAN 9.6 MILLION COSMETIC PROCEDURES, A 429% INCREASE FROM 1997 WHEN THE FIRST SURVEY WAS CONDUCTED**

 **AMERICANS SPENT MORE THAN 12 BILLION ON COMBINED SURGICAL AND NONSURGICAL COSMETIC PROCEDURES IN 2014**

 **BUTTOCK AUGMENTATION AND LABIAPLASTY PROCEDURES INCREASED BY 86% AND 49% RESPECTIVELY**


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It's more than just business to us.



Aesthetic Surgery Journal Update

Retreat

The editorial team, Section Editors, and invited guests attended the ASJ Retreat in Las Vegas in February at the Delano Hotel. It was a very productive meeting that allowed the group to discuss the successes of 2014, strategize for 2015 and beyond, and participate in team-building and brainstorming sessions. Many photos were taken and videos produced, and we'll soon share everything with you on YouTube, Twitter, and Facebook, so please like us and #RT us to your colleagues.

Dr. Foad Nahai and all of us at ASJ wish to personally thank all attendees; you have our most sincere gratitude for taking time away from your busy practices to join us. Thank you!



Annual Meeting

The ASJ editorial team is gearing up for a spectacular meeting in Montréal. Have you heard about ASJ Live! yet? It's a brand new space designed exclusively for the *Aesthetic Surgery Journal*. Here we will host presentations, spotlight the most downloaded papers and hear from their authors live, perform raffles and giveaways, host RADAR Resource training sessions, interview leadership and supporters, and more. If you'd like to become involved, help out, or participate in any way, just drop us a line (journal@surgery.org) for more information and watch this space for new details about ASJ Live! *Supported by Galderma.*

Videos

Have you been keeping up with us on YouTube? All of our videos are available on the ASJ YouTube channel:

<https://www.youtube.com/ASJOnline>. Our channel has more than 1 million views and 1800+ subscribers. We are so grateful for the support of the aesthetic community. We recommend these new videos as "must watch."

<http://goo.gl/C3MwzV>

<http://goo.gl/eTD9S3>

<http://goo.gl/gqvDIT>

<http://goo.gl/xVFWGR>

CME

It's here! The CME portion of the new ASJ website has launched. We hope you'll participate and earn CME credits. The link is below. No time like the present to take care of those CME requirements!

<https://asjcme.oxfordjournals.org/s/catalog>

Calling All Job Seekers and Employers

We're pleased to announce a new component of the ASJ website: Job Board. Oxford University Press has created a Journals Career Network that allows job hunters and employers to quickly search listings and apply

or post a new listing at reasonable rates. The Job Board is focused on placements in the fields of Medicine and Health. We encourage you to take a look and give us feedback. As the Job Board is a new feature, the positions may not all be related to aesthetic surgery but in time and as the site matures, we hope it will become an important resource for our readers and society members.

To access the ASJ Job Board, click here: <http://goo.gl/uB6e6l> As always, if you need help or have questions, please let us know at: journal@surgery.org.

ASJ Executive Editor Q&A



The *Aesthetic Society Journal's* Executive Editor, Phaedra Cress, was appointed Director of the World Association of Medical Editors (WAME). WAME is a global association of editors of peer-

reviewed medical journals. This highly respected association encourages further education, research, and practice for medical professionals. Phaedra Cress was able to share more on the application process, her new responsibilities, and what the association has to offer.

Q: Congratulations on your new position at WAME, can you tell us about the process and how you were elected?

A: Thank you so much, I'm really honored by the appointment and hope to contribute meaningfully and strategically to the group. It's a two-year appointment for 2015 and 2016. All WAME members were informed that three seats were about to become available since the previous directors' appointments were completed. I decided to apply and was soon after advised that I had made the first cut.

Q: How long did the process take until you were notified that you'd been elected?

A: From submission to acceptance, it was about 2+ months. I am so proud to be able to serve WAME as a director along with the other two Directors, Fatema Jawad from Pakistan, and Rajeev Kumar from India—it truly is a global organization!

Q: What are your responsibilities in this role?

A: In this volunteer role, I will consult with the Board and assist in strategic planning for WAME, in particular as related to the annual conference October 2–4 in New Delhi. I will also liaise between WAME and the regional associations of editors.

Q: Is there anything else you'd like to share?

A: Yes, if you don't mind, I'd just like to say a bit about WAME for those who may wish to apply for membership or attend the annual meeting. On the WAME website, you'll see their mission: WAME is a global association of editors of peer-reviewed medical journals who seek to foster cooperation and communication among editors, improve editorial standards, promote professionalism in medical editing through education, self-criticism, and self-regulation, and encourage research on the principles and practice of medical editing. From what I've observed, this is a global organization comprised of experienced and educated members who genuinely care about improving the age-old peer review processes and helping one another tackle the nuances and pitfalls every editor, author, and reviewer traverses in academia. Two important links are below and I would like to once again thank the President, Lorraine Ferris, PhD, Past President and Chairman, Farrokh Habibzadeh, MD, Vice President, Rod Rohrich, MD, and the WAME board members for affording me this opportunity. I look forward to collaborating with them over the next two years. www.meeting2015wame.org; www.wame.org.





Exciting New Products Your Patients Will Love!

By Herluf Lund, MD

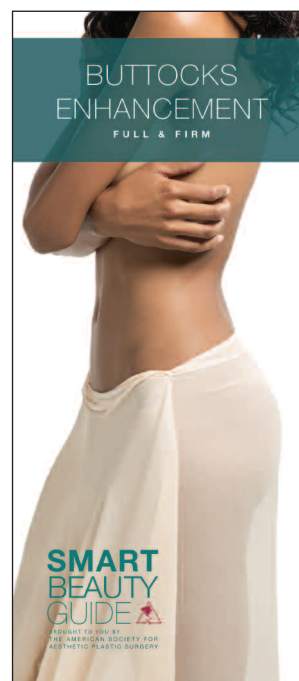
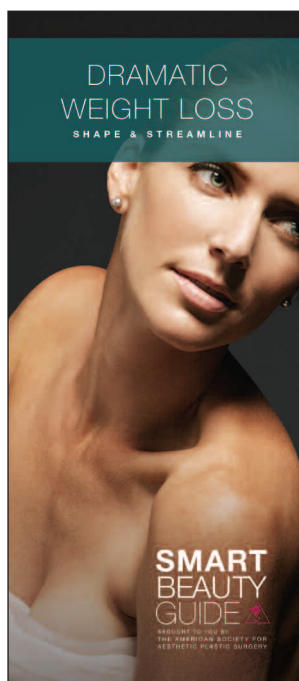
One of the pleasures of serving on the ASAPS Product Development and Market Research Committee has been assisting in the creation of tools and services our ASAPS members can use to promote their practices and enhance patient care. This year, we have been quite active, with the creation of three new procedural brochures (Arm & Thigh Lift, Buttocks Enhancement, Dramatic Weight Loss) and a new Guide to Facial Rejuvenation. These new brochures will be for sale beginning at The Aesthetic Meeting in Montréal, with samples and product discounts of 20% at ASAPS Booth #1817.

All-New! Guide to Facial Rejuvenation

Filled with vetted Smart Beauty Guide content and proprietary illustrations and photography, the new Guide to Facial Rejuvenation is customizable with your photo, bio, and practice information. Covering essential skin care, cosmetic medicine, and aesthetic surgical procedures for the face, this brochure is sure to appeal to the patient seeking detailed education on the latest facial techniques. It includes a section on Kythera's new nonsurgical chin fat treatment, as well as mini-facelift information. This 8.5" x 11," 24 pages plus customizable cover brochure is exclusively for members of The Aesthetic Society.

New Additions to Our Best-Selling Brochure Line

As the ASAPS 2014 statistics revealed, the public is very interested in buttocks augmentation, making this the ideal time to debut our new Buttocks Enhancement brochure. Along with the new Arm & Thigh Lift and Dramatic Weight Loss, these sleek new brochures cover an array of the most popular cosmetic surgical procedures, educating your patients on the procedure's benefits, surgical process, recovery, safety, risks, results, and other important information. Exclusively for members of The Aesthetic Society, these 12 and 16 page brochures are perfect for mailing in a standard envelope and feature a beautiful metallic blue band around the cover.



Exclusively for members of The Aesthetic Society, these sleek new brochures cover an array of the most popular cosmetic surgical procedures, educating your patients on the procedure's benefits, surgical process, recovery, safety, risks, results, and other important information.

Endorsed Member Services

As a reminder, the ASAPS Endorsed Member Services Program (EMS) assists members with purchasing decisions by negotiating special pricing in areas that will enhance practice performance through products and services, each EMS provider is rigorously vetted and carefully selected to be first-in-class, financially stable, and has agreed to uphold our strict ethical standards. Currently, ASAPS has three vendors in this program:

Medelita

www.medelita.com

The Live Box

www.thelivebox.com

Merchant Advocate

<http://merchantadvocate.com/asapsmembers>

Additionally, when you purchase a product or service from an EMS provider, you support your Society, as a small percentage of the sale

goes to the Society as a royalty. These royalties will help offset the Society's costs which help keep your membership fees as low as possible.

As always, if you have suggestions for new products or services which might benefit your fellow Society members, please let us know by emailing asaps@surgery.org. We look forward to seeing you at the ASAPS Booth #1817 at The Aesthetic Meeting 2015, where you can view the new brochures, select samples for your office staff, and purchase products at special Aesthetic Meeting savings.

Herluf Lund, MD, is an aesthetic plastic surgeon practicing in St. Louis, MO. A member of the ASAPS Board of Directors, Dr. Lund serves as chair of the ASAPS Product Development & Market Research Committee.

Save 20%
on Aesthetic
Society
Products
May 1 – June 15!

GUIDE TO FACIAL REJUVENATION



**SMART
BEAUTY
GUIDE**
BROUGHT TO YOU BY
THE AMERICAN SOCIETY FOR
AESTHETIC PLASTIC SURGERY

- Customize with Your Practice Info, Bio and Photo
- Latest Cosmetic Medicine Techniques, Including Non-Surgical Chin Fat Treatment
- Beautiful Illustrations and Photography



YOUR FACE PUT YOUR BEST FACE FORWARD

Cosmetic medical procedures are a blend of both art and science. The American Society for Aesthetic Plastic Surgery has a number of member surgeons who are weekend painters and sculptors, focusing on the human face and form. Plastic surgeons as a whole have a strong feeling for beauty. Their goal is to enhance the harmony of your facial features while preserving your unique facial character. Facial plastic surgery can lift your brow, open up your eyes, reshape your nose, reduce prominent ears, contour your cheeks, shape your chin, and firm up your neck and jawline. Sometimes enhancing a single facial feature brings your whole face in balance, improving overall appearance, making you appear more youthful, and increasing your self-confidence.

Your face is the first part of you that people notice, and a pleasing countenance will help you feel confident and assured.

NOTE: Only models are depicted in this brochure.

FACELIFT / RHYTIDECTOMY





Today's facelift techniques are designed to tighten deep tissues, firm up loose skin, and address volume changes that occur with aging. The goal of a facelift is to deliver your most youthful and natural look. Heredity, skin texture, and the underlying bone structure of your face all play a role in how many years your facelift will remove and, to some extent, how long these changes will last.


Facelifts are not one size fits all; the procedure is dictated by your facial characteristics. In some, the deeper facial tissues may be repositioned or tightened to restore a more youthful contour. In others, removal or addition of fat or other soft tissue fillers may be necessary to achieve optimal results.

Common to all facelifts is that excess skin is removed to yield a smoother, firmer facial appearance. One important goal of every facelift is to hide incisions, so that following surgery you can easily camouflage them with hair or makeup. The placement and length of incisions vary, depending on the facelift technique that best suits you. A facelift incision typically starts in the front of the ear, wrapping around the earlobe, with variations going up into the hairline of the temple, or behind the ear. Your doctor will help you determine the best technique to meet your individual needs.

Facelifts can also improve your neck, with your surgeon treating cordlike neck bands through a small incision placed under your chin, and through the same incision remove excess fat and tighten neck muscles. Excess neck fat can also be removed through a very small incision (or incisions) using liposuction.

After your facelift, you may feel tightness or numbness in your face and neck. Some skin discoloration is common, and you can expect some swelling, which will resolve shortly. Your skin will be sensitive, so you will need to be extra careful to apply sun block products daily. You can apply makeup soon after surgery and return to work within a few weeks.



1. A facelift corrects visible signs of aging such as deep cheek folds, jowls, and loose skin on the front and sides of your neck.
2. Facelift incisions may be placed within the hairline and within natural contours in front of and behind the ears, as shown.
3. Skin is then pulled back and the incision closed.
4. Modified incisions include variations of the "short scar," with shorter incisions around the ear.
5. After surgery, the skin on your face and neck will look smoother, firmer, and freer.



In Memoriam

It is with great sadness that we announce the passing of the following Aesthetic Society members:

- Haron A. Aziz, MD (1947–2015) member since 1992, Columbus, OH
- Vincent R. Digregorio, MD (1942–2015) member since 2014, Garden City, NY
- Mark Gorney, MD (1924–2014) member since 1970, Napa, CA
- Yves-Gerard Illouz, MD (1929–2015) member since 1988, Paris, FR
- Ross H. Musgrave, MD (1921–2014) member since 1975, Pittsburgh, PA
- John Q. Owsley, MD (1928–2014) member since 1971, San Francisco, CA
- David V. Poole, MD (1957–2015) member since 2002, Altamonte Springs, FL
- Peter Randall, MD (1923–2014) member since 1974, Gwynedd, PA
- James K. Smith, MD (1955–2013) member since 1999, Moon Township, PA

The Society will be acknowledging these individuals at the ASAPS Annual Business Meeting in Montréal on Sunday, May 17, 2015.

ASAPS Welcomes New International Affiliate: Australasian Society



The Australasian Society of Aesthetic Plastic Surgery's president, Tim Papadopoulos, MD, and ASAPS president Michael C. Edwards, MD, celebrate the new affiliate program union between the two organizations.

The Aesthetic Society (ASAPS/US) is pleased to announce that the Australasian Society of Aesthetic Plastic Surgery (ASAPS/AUS) has become an International Affiliate of ASAPS. Those members of the Australasian Society who choose to participate in the International Affiliate program will enjoy many benefits, including access to print and online versions of Aesthetic Surgery Journal (ASJ), access to RADAR Resource (ASAPS/US's educational platform and app), discounts on annual meeting and ASAPS/US-sponsored symposia registration fees, and the right to attend ASAPS/US annual meetings without invitation. We are excited about this new opportunity and look forward to announcing other International Affiliate countries soon as we continue to strengthen alliances within our specialty.

Meet the Staff!



Tom Purcell, Director of Member Services, Development, and Industry Relations, has worked at The Aesthetic Society for 13 years. Alongside the member services

team, he helps create new strategies designed to attract new members and assists major donors with gifts to ASERF. As the lead staffer

for Industry Relations, Tom works with industry through corporate support, grants, advertising, promotions, and special projects. When asked what he likes most about working at ASAPS, Tom's first thought was, "The people. Everyone enjoys being associated with ASAPS: staff, members, and our valued corporate supporters." Outside of the office, Tom enjoys living close to the ocean where he is able to appreciate beach walks and the local architecture, of which he is a fan. The next time you see Tom, please say hello!

Aesthetic Society Bids Farewell to Longtime Staffer



It was with sadness that ASAPS California staffers gathered to bid a fond farewell to Julie Kennard, whose husband's promotion prompted a move from the area. Julie was a bright light in the office, friendly and upbeat, and we wish her family well with their move.

Are You Regularly Updating Your EPP?

Fully optimized for Google search, Enhanced Practice Profiles rely on procedural keywords and practice locations to help patients find you. Please review your EPP and make sure that the procedures you perform are listed so that search engines will connect prospects with your profile on SmartBeautyGuide.com. If you need assistance in updating your EPP, please contact webmaster Lisa Orozco at lisa@surgery.org or 562.799.2356.

Emerging Trends: Who is the Typical ASAPS Member?

New survey results suggest aesthetic practices are healthy, ASAPS should be devoted only to aesthetic surgeons, and members would welcome tools to navigate online review sites.

Aesthetic Society members are a unique group with practice management and educational needs quite different from their primarily reconstructive colleagues. In order to insure that ASAPS meets these needs, leadership conducted a membership survey in November, 2014. An internet-based survey was distributed to all active members via the research firm Industry Insights. Among the findings, a profile of the “typical” Aesthetic Society member:

The ASAPS Member Respondent

Demographics

- More than 20 Years in plastic surgery
- 11 to 15 years as ASAPS member

Practice Type

- Owns Solo Practice
- 80% Aesthetic Procedures / 20% Reconstructive Procedures
- Members of: ASPS, ASAPS, ACS, and State Plastic Surgery Society

Recent Practice Experiences

- 2014 Net Income Remained the same as 2013
- Tracks Referral Sources
- Considers “Other Plastic Surgeons” to be most significant competitor

Reputation Management

- Participates in Online Site Reviews, which primarily include:
 - Real Self
 - Google +
 - Health Grades
- Equally Likely to have been or not to have been the subject of a legitimate, bad review

- Equally Likely to have been or not to have been the subject of a fraudulent review
- Has not been the subject of a slanderous review

Key Opinions

- Would find reputation management tools somewhat or very helpful
- Is against or unsure about ASAPS organizing educational meetings with other core specialties
- Would not be in favor of the proposed change to the “Associate Member” category

* Typical reflects the “middle” respondent for ordinal questions or categorical item(s) chosen by 50% or more of respondents.

For the full report please log on to the members-only section of www.surgery.org

Media Notes & Quotes

Buttocks augmentations are up 86 percent over 2013. Michael C. Edwards, a plastic surgeon and the president of the ASAPS notes that most women don’t want giant backsides; they just want more shapely ones. The other big news is breast revisions, which are up 30.4 percent. Many attribute that rise to aging implants in need of replacement, along with many women’s desire to switch from saline to silicone-gel-filled implants, which may not have been available when they originally had surgery.

The Surprising New Trends in Plastic Surgery

Allure

February 26, 2015

Current nonsurgical fat-reduction techniques include radiofrequency, ultrasound, and cryolipolysis. “The rise in its popularity is indicative of the public’s desire for nonsurgical alternatives in lieu of their invasive counterparts,” says ASAPS President and Las Vegas plastic surgeon Michael Edwards, MD, in a news release. “Due to the technological advancement and efficacy of nonsurgical fat-reduction devices, it’s not surprising that

more people are opting to freeze or melt away stubborn body fat in the comfort of their surgeon’s office as opposed to undergoing surgery. However, it must be noted the results aren’t the same.”

PSP: Plastic Surgery Practice

ASAPS: Nonsurgical Fat-Reduction Procedures, Butt Lifts Reign Supreme in 2014
February 26, 2015

“There’s big buzz around nonsurgical techniques for melting fat. Some statistics came out this morning from the American Society for Aesthetic Plastic Surgery showing that the soon-to-be number one nonsurgical treatment requested is the melting away of unwanted fat all over the body,” says Dr. Julius Few. “The key is finding a board-certified plastic surgeon with experience using these new technologies and the best place to look is through the American Society for Aesthetic Plastic Surgery who specialize in these kind of treatments.

Fox 32 News Chicago

Top Beauty Trends of 2015: Dr. Julius Few
February 26, 2015

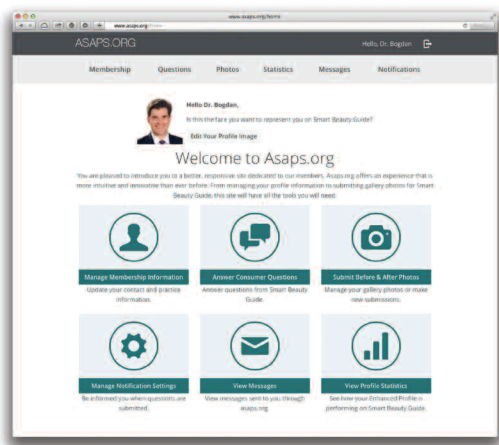
More than 11 million cosmetic procedures (both non-invasive, like Botox, and invasive, like face lifts and breast augmentation) were had in the U.S. last year, according to the American Society for Aesthetic Plastic Surgery (ASAPS). The reasons women—and an increasing amount of men, who account for than a million of that number—opt to have procedures are as wide and varied as the individual experiences we all bring to the table.

My own decision to get a breast augmentation was rife with fear, not for the procedure, which I had deeply researched (and consequently wrote an eBook about) and knew was a safe option when done by a properly credentialed board-certified plastic surgeon, but for the potential social consequences I’d incur if people found out. Would people think I lacked authenticity, was less intelligent and capable a person?

The Daily Beast

We Need to Shut Up About Plastic Surgery
February 16, 2015

Build Your Social Media Base and Expand Your Reach. New Tools from The Aesthetic Society.



Easy-to-Use Tools for ASAPS Members!

Take control of your online presence with the help of the new ASAPS.org member portal. Just log in and you'll be able to:

- Manage Membership Information
- Answer Consumer Questions
- Submit Before and After Photos to the Photo Gallery
- Access the Message Center
- View Your EPP Statistics (for those members with EPPs)

If you have questions about these new features, please contact our webmaster, Lisa Orozco, at lisa@surgery.org or by calling 800.364.2146 or 562.799.2356.



Social Media Content is Just a Click Away!

With the new ASAPS Social Media Newsletter, you have instant access to ASAPS-vetted content to share with your patients on Facebook, Twitter, Google+, and LinkedIn. Delivered by email twice monthly, directly into your inbox, simply click on the social media icons next to each entry and share:

- Videos
- Blog posts
- News
- And More!

Add your practice or marketing manager to the social media newsletter distribution list by entering their info at asaps.org!





ASAPS Member Survey on Texting and Sharing Cell Numbers with Patients

By Farzad R Nahai, MD

Many physicians are using their personal cell phones to text and talk with patients. In order to gain some insight into this practice among ASAPS members, a ten question online survey was conducted in December 2014 investigating preferences and attitudes towards texting and sharing personal cell numbers with established patients. The survey was promoted in the December ASAPS E-news.

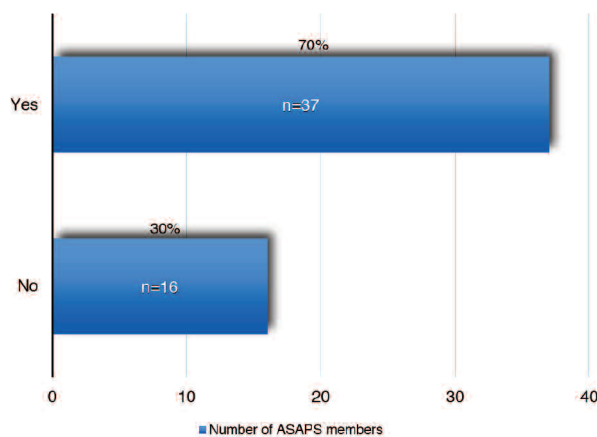
The survey was made available online for one month with a total of 55 respondents answering almost all the questions. 80% (n=43) of the respondents were men and 20% (n=11) were women with one non-responder. The majority, 77% (n=41) were 51 years of age or older. The vast majority are in solo private practice 76% (n=42) with 11% (n=6) in group private practice and the rest being a mix of university and hospital-based practitioners. 83% (n=46) of respondents report having a practice that is 100% or 75% cosmetic. When asked if you share your cell number with your established patients, 70% (n=37) said yes and 30% (n=16) said no. A similar number, 76% (n=42) reported texting and receiving photos on their mobile devices from patients. Common reasons sighted to not share personal cell numbers included just not wanting to and concerns with HIPPA and security. When asked if you thought texting with your patients improves care and patient satisfaction, 68% and 83% agreed respectively.

About half the respondents wrote comments in the open-ended section. Most were supportive of sharing cell numbers with

patients. Positive comments included “for a cosmetic boutique practice as mine it is essential,” “no one has ever abused the use of my cell number and I actually get less calls,” “patients LOVE the accessibility and they know they cannot text urgent issues,” and “this modality has made the care of my patients better.” Others disparaged the practice with comments like “texting is too easy [for patients to do] and [is distracting] to the surgeon,” “I have found texting with my patients has in fact been counter-productive,” “texting is more time consuming than a phone call,” and “giving patients your personal cell number allows patients to invade your personal life at all times. I’m not willing to do that [in my current position]. I may have felt differently in my previous private 90% cosmetic practice.” Some comments issued good advice stating the need to “[keep] a security code on your phone... and commit the communications to [the patient],” and “there is an obvious need for safe and secure texting.”

This survey indicates that a high percentage (70%) of ASAPS members (mostly men in solo private practice over the age of 51 whose practices are almost exclusively cosmetic) share their cell numbers and text with their patients. Furthermore, a high percentage of members believe that this practice is valuable because it improves patient care and enhances patient satisfaction. Some members choose not to share their number with patients or text because of a desire for privacy and concerns with HIPPA and security.

ASAPS member’s response when asked if they share their cell number with established patients. (n=52)



Have You Applied for the All New Candidate for Membership Program?

On January 1, 2015, The Aesthetic Society implemented an updated Candidate for Membership Program, which is rich with new benefits. Upon implementation, the original program was dissolved. Be sure to apply for the new program and re-instate your benefits, plus more! For a complete list of benefits and to download the application, visit: www.surgery.org/professionals/candidate-for-membership

NEW! ASAPS Now Has CME Tracking!

One of the top requests from ASAPS Members has been that The Society create its own CME tracking system. We’re happy to report that now, ASAPS has. Welcome to “My CME Record 1.0,” exclusively for ASAPS Members only. This newly developed ASAPS online “My CME Record 1.0” tool is ready for you to test to see how it works. After attending The Aesthetic 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 My CME Record 1.0. You may add your other CME activities as well as create specific cycles for your credentialing and licensure CME requirements. Simply enter the cycle dates, give it a name, enter the credits required, and let My CME Record 1.0 do the rest.

As terrific as “My CME Record 1.0” is, The Aesthetic Society is already hard at work on “My CME Record 2.0” as we strive to provide the tools and services our Members need and desire. Look for more information on this tool in the summer issue of *Aesthetic Society News*.

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.

Industry Partner Updates

ASAPS values its Industry Partners and is pleased to provide ongoing strategic support and visibility to its Premier and Alliance Partners. ASAPS has re-signed with a number of Partners and welcomes two new Alliance Partners. The partnerships provide a direct reach to ASAPS members, and additional benefits at The Aesthetic Meeting and throughout the year.

Premier Industry Partners

sientra.

Founding Sponsor and Premier Partner, **Sientra**, renews its sponsorship and partnership with ASAPS for another year. Sientra is committed exclusively to board-certified plastic surgeons, and to making a difference in patients' lives by enhancing their body image, growing their self-esteem and restoring their confidence. Sientra offers board-certified and board-admissible plastic surgeons a broad product line of breast implants, breast tissue expanders, and other specialty products.

"At Sientra we are proud to be founding sponsor of the Premier Industry Partner program and our association with ASAPS," explained Hani Zeini, Founder, President and CEO of Sientra. "We are pleased to extend this relationship for another year given our shared commitment to serve highly-trained, board-certified plastic surgeons and the common goal of bettering the Plastic Surgery industry with creative educational initiatives in a multifaceted approach."

Sientra is the only company to currently offer a full portfolio of round and shaped 5th generation silicone gel breast implants in the U.S. The company is the first in the U.S. to exclusively offer its products and services to board-certified and board-admissible plastic surgeons. Moreover, Sientra is an industry-leader in innovations as the first company to offer shaped breast implants in the U.S. and the first and only company to offer 5th generation round breast implants. In addition, Sientra offers unique plastic surgeon-centric programs such as its C3 program.

Sientra, Inc. is a NASDAQ traded public company under the symbol SIEN.

NEWBEAUTY

THE BEAUTY AUTHORITY

NewBeauty has also signed for another year as a Premier Industry Partner. NewBeauty has revolutionized the way people learn about beauty and cosmetic enhancement. Celebrating their 10th year as the beauty authority, the award-winning magazine has educated millions of women about cosmetic enhancement.

It is the first magazine devoted exclusively to providing a comprehensive guide to the latest advances in plastic surgery and dermatology, and reveal the best non-surgical beauty secrets, must-have products and expert advice.

"Women are looking for trusted information, true inspiration and actionable advice—and NewBeauty delivers it," states Yolanda Yoh Bucher, Editor in Chief.

To ensure NewBeauty magazine is a trusted and valuable resource, the NewBeauty editorial advisory board was created to enforce ethical standards and scientific integrity. Their editorial team works closely with members of their board to ensure standards of quality, and experts in their unique fields to deliver information that is smart and easy to understand.

Leveraging the authority of NewBeauty, NewBeautyPRO launched in 2014 as a full-service marketing platform to help board-certified doctors build, grow and maintain successful cosmetic practices.

Alliance Partners



Continuing as an Alliance Partner, **Rosemont Media** prides themselves on being a modern ad agency. They work to ensure the success of their clients by creating the best all-encompassing marketing plans for medical practices including website design, social media management, SEO and public relations support. They develop internet strategies, and ensure a competitive advantage by working with just one practice per market in each area.

"Simply put ASAPS is the best of the best!" states Keith C. Humes, CEO Rosemont Media

In addition to market exclusivity, they are known for their award winning design, cutting edge technology and personalized customer service. Their graphic designers, writers, and consultants have extensive knowledge and experience developing websites for a range of medical fields. They design state-of-the-art, user-friendly websites customized to ensure that the results provide the best possible reflection of each practice. They work collaboratively with practices to develop the look and navigation of each site, and their experienced team of writers create custom content.

SKINCEUTICALS

SkinCeuticals has also re-signed as an Alliance Partner. Their mission is to improve skin health. Dedicated to this purpose, they provide advanced skincare backed by science. They discover, develop, and deliver innovative skincare products that improve the overall health and appearance of the skin. Founded in 1994, their skin cancer research led to pivotal breakthroughs in antioxidants. Their high potency formulas are concentrated in pure actives and are proven to penetrate optimally into skin.

Made in the USA, their clinical skincare is used by dermatologists, plastic surgeons, and medi-spas for daily homecare and to complement aesthetic procedures. They formulate to correct signs of aging, protect healthy skin, and prevent future damage.

They subject their active ingredients and final formulations to rigorous clinical studies in order to obtain scientifically validated proof that they deliver on their claims—reinforcing their commitment to provide advanced skincare backed by science.

Two new Alliance Partners have just joined with ASAPS, Kythera and Nextech.

Continued on Page 41

Industry Partner Updates

Continued from Page 40



KYTHERA is a biopharmaceutical company that focuses on developing and commercializing novel medical aesthetics products that can lead to a healthy and positive self-image across all stages of life. The company is leveraging its extensive biotechnology and aesthetics experience to aggressively expand its product portfolio and pipeline. To learn more about KYTHERA and its products go to kytherabiopharma.com

Keith Leonard, CEO and president of KYTHERA, commented about the ASAPS Partnership: "We are thrilled to partner with ASAPS in 2015, which promises to be an exciting year for our company and ASAPS. We appreciate the support and interest from the organization's members in both our company and our pipeline of medical aesthetic products that inspire beautiful confidence."

KYTHERA's late-stage clinical development product candidate, ATX-101, is currently under review by the U.S. Food and Drug Administration. If approved, ATX-101 would be a less-invasive, non-surgical option for the treatment of submental fullness. ATX-101 has been under development for more than 8 years, and the subject of 19 clinical studies involving more than 2,600 patients.

KYTHERA Biopharmaceuticals was founded in 2005 and continues to translate its rigorous, yet elegant science into products that address much-cited, but under-treated aesthetic complaints.



ASAPS also welcomes **Nextech** as a new Alliance Partner! Nextech is a top-ranked, first-class provider of specialty specific electronic medical record software (EMR) and practice management software designed to seamlessly adapt to practice workflows from implementation, to continuous support and training. They collaborate with the Plastic Surgery community to design user-friendly software, and utilize a team of specialized trainers that work on-location to ensure a

smooth transition to the Nextech software. Nextech's team of skilled in-house developers works diligently to bring clients the best in healthcare technology. They offer providers the opportunity to fine-tune their EMR experience through federally compliant software built to integrate with their practice workflow.

"Deeply rooted in the plastic surgery market, Nextech began as a plastic surgery practice management system over 18 years ago", states David Henriksen, president and CEO of Nextech. "As an ASAPS Alliance Partner, we look forward to advancing technological innovations in terms of medical records and patient engagement that support the educational and advocacy missions of the American Society of Aesthetic Plastic Surgeons."

Nextech first opened its doors to plastic surgeons looking to increase their quality of care through comprehensive technology built to efficiently operate their practices. Their electronic software is fully integrated to boost workflow efficiencies, manage practice revenue trends, enhance patient engagement and increase productivity through its mobile platform. Plastic Surgeons can leverage software features such as marketing and ROI tracking as well as the native iPad application created to allow the freedom of anytime, anywhere record access. Nextech continues to evolve its product with the thoughtful and strategic input of specialty physicians.

For more information on ASAPS Partners please go to www.surgery.org and click on the Partner logos to be directed to the company websites.

Save 20% on Products from The Aesthetic Society



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A portrait of Susan Lovelle, MD, a Black woman with long, dark, wavy hair and bangs. She is smiling warmly at the camera, wearing a black cardigan over a black and white striped top. Her arms are crossed.

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Susan Lovelle, MD
ASAPS member since 2006

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BY ZEIN OBAGI, MD

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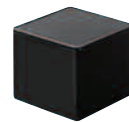
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Do I Really Need an Investment Advisor?

The Nine Reasons Physician-Investors Underperform Without Professional Management

David B. Mandell, JD, MBA and Robert G. Peelman, CFP®

There are multiple layers to the question: do I really need an investment advisor? Although there are no easy answers for everyone and every situation, data shows that the vast majority of retail investors, including plastic surgeons, are better off utilizing the services of an investment advisor as opposed to managing their investments on their own.

Why/how do investment advisors make a difference? Theoretically, no one has a greater interest than you in protecting and looking after your investments. However, your personal interest in protecting and looking after your investments may be the single greatest factor working against your investment performance. Most investors are risk-averse, biased creatures prone to putting too much credence into noise, trends and herd mentality.

Why do investors, including physicians, do so poorly? You have likely heard of the impact of the basic human emotions of *greed* and *fear* on investing—getting overly optimistic when the market goes up, assuming it will continue to do so, and wanting in on the action (GREED) and becoming extremely pessimistic during downturns and wanting out before losing everything (FEAR).

Why do we act this way?

In 2010, the Securities and Exchange Commission Office of Investor Education and Advocacy requested that The United States Library of Congress Federal Research Division prepare a report on the behavioral traits of U.S. retail investors. The report identifies *nine* common investing mistakes that affect investment performance. These traits are common behavioral characteristics that work against your investment returns, usually because you are too emotionally involved in the decision making process.

The nine most common mistakes

Active Trading is the practice of engaging in regular, ongoing buying and selling of investments while monitoring the pricing in hopes of timing the activity to take advantage of market conditions. Active traders underperform the market. For the average retail investor, constant activity and speculative behavior are detrimental to long-term portfolio performance. A good advisor



should assist you in creating a long-term strategic plan that does not involve churning or activity for the sake of activity.

Disposition effect is the tendency of retail investors to hold losing investments too long and subsequently sell winning investments too soon. Most people are risk-averse—even more so when handling their own investments. Loss-averse investors tend to sell high performing investments in hopes of offsetting losses from losing investments.

Paying More Attention to the Past Returns of Mutual Funds than to Fees. Many investors, including physicians, pay too much credence to the past performance of mutual funds while virtually ignoring the funds' transactional costs, expense ratios and fees. These types of fees can have a significant drag on the performance of your portfolio if they are not accounted for. Your advisor should account for fees in any analysis of your holdings. Remember, it is not only the performance of the fund that matters, but ultimately the value you get out of it.

Familiarity bias is the tendency of many investors to gravitate towards investment opportunities that are familiar to them. This bias leads to investing in glamor stocks or glamor companies, investing too heavily in a local stock, or employees investing too heavily in their employer's stock. A good advisor will

work to ensure you are aware of being overly concentrated in certain areas and will seek to keep your portfolio properly diversified in order to limit exposure.

Mania/Panic. Mania is the sudden increase in value of a "hot" investment, wherein the masses rush to get in on the action. Panic is the inverse, where everyone tries to abandon a sinking ship. What is the next "bubble"? When will there be another "crash"? With the advent of 24-hour financial news channels, social media and other concentrations of constant financial information, investors are now, more than ever, susceptible to mania and panic. All the noise leads to the next common factor...

Noise Trading often takes place when the physician-investor decides to take action without engaging in fundamental analysis. When investors too closely follow the daily headlines, false signals and short-term volatility, their portfolios suffer. Long-term plans require picking investments via economic, financial and other qualitative and quantitative analyses. Advisors take emotion out of the equation and seek to build your plan to weather manias and panics and keep you from following the herd fueled by the noise of the day's leading story.

Momentum Investing is the practice of

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Do I Really Need an Investment Advisor?

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buying securities with recent high returns and selling securities with low recent returns assuming that past trends and performance will continue. Chasing momentum leads to speculative bubbles with the masses inflating prices. Similar to manias and panics, retail investors are often the last ones to know either way, causing them to often jump on a security experiencing momentum at the wrong time, usually buying high and selling low—with obvious detrimental effects on their portfolio.

Under-diversification happens when the investor becomes too heavily concentrated in a specific type of investment. This increases their exposure by having too many eggs in one basket. It goes without saying that any long-term investment plan requires diversification. However, investors, including physicians, generally need the assistance of an advisor to diversify correctly. Otherwise, they may be susceptible to the next common error.

Naïve Diversification is the practice of a physician-investor deciding to diversify between a number of investments in equal proportions rather than strategic proportions. Proper diversification in the investment arena is not simply putting X asset classes in X equal percentages. Rather, a proper allocation strategy should weight your differing investments in a manner aligned with your personal risk tolerance in order to build value over the long term.

By the Numbers

Historical data shows that retail investors, including physicians, make the same *Greed* and *Fear* mistakes time and time again; buying investments when prices are high and selling once they have fallen. According to the latest 2014 release of *Dalbar's Quantitative Analysis of Investor Behavior*, the average investor in a blend of equities and fixed-income mutual funds garnered only a 2.6 percent net annualized rate of return for the 10-year time period ending Dec. 31, 2013. During the same period, the S&P 500 returned 7.4 percent—a clear underperformance by orders of magnitude against the index. The same average investor hasn't fared any better over longer time frames. The 20-year annualized return comes in at 2.5 percent, while the 30-year annualized rate is just 1.9 percent.

The best advisors work with their physician-clients to create strategic, properly diversified, long-term investment plans. The plans must be tailored to the client's personal risk tolerance and goals, while attempting to minimize fees and costs, as well as tax-drag.

Conclusion

Advisors don't exist strictly to pick the best stock, mutual fund or ETF or to simply forecast economic conditions and make tactical decisions in a portfolio. While those are important components, an advisor should act as a buffer who puts space between you and your investments to take some of the emotion out of the decisions. The bottom line: the emotional connection between you and your money affects your decisions. Your savings represents security, stability and your goals. It's more than wealth—it's your future. With all of this on the line, it is virtually impossible for you to make consistently rational investment decisions over the course of your investing life.

The best advisors work with their physician-clients to create strategic, properly-diversified, long-term investment plans. The plans must be tailored to the client's personal risk tolerance and goals, while attempting to minimize fees and costs, as well as tax-drag.

Utilizing the assistance of an investment advisor will not alleviate *all* the risk associated with investing in securities markets. Nothing can take all the risk out of investing. However, a strong advisor can protect you against emotions, myopia and fixation on short-term results.

David B. Mandell, JD, MBA, is an attorney and author of five national books for doctors, including, "For Doctors Only: A Guide to Working Less & Building More," as well as a number of state books. He is a principal of the financial consulting firm OJM Group www.ojmgroupp.com along with Robert G. Peelman, CFP,® who is Director of Investment Planning. They can be reached at 877-656-4362 or mandell@ojmgroupp.com

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A BUYER'S GUIDE FOR INTERNET MARKETING IN 2015

Co-authored by Rosemont Media CEO Keith Humes and John Lewis, Senior Writer & Editor



What could be the problem? You're one of the most skilled and experienced plastic surgeons in your area. Your patients love you and don't stop raving about the cosmetic results you helped them achieve. Your online presence is... well... you have a website - that should be enough. Why can't you get more patients through your door?

Contrary to popular belief, just because you have a website doesn't mean your practice is visible to online viewers interested in plastic surgery. This is where a full-service Internet marketing company comes into play. In addition to designing and managing your website, such a firm can provide innovative search engine optimization services like content marketing, social media marketing, and more - all of which is imperative to attaining increased online visibility and growing brand awareness.

If you are currently shopping for an Internet marketing company (or if you're now realizing you should be), below are some essential factors to consider before making your decision.



Hiring a full-service Internet marketing company can help increase your online visibility and direct more patients to your practice.

SEO HAS EVOLVED

In the not too distant past, SEO was all about link building - the more links you had directing to, from, and within your website, the better. While high quality links still play a key role, search engine optimization now centers around the production of unique, valuable content that engages users. **The goal is to have product champions associated with your practice, and to do so you need to have solid content marketing and social media marketing strategies in place**, both of which can nicely complement one another to expand your website's online reach.

Key Takeaway: Employing outdated and/or black-hat SEO tactics can damage your website's search engine rankings, or worse, have your site deindexed from Google results completely. If your Internet marketing company fails to keep pace with the consistent evolution of SEO, you need to look elsewhere.

NOT ALL FIRMS ARE CREATED EQUAL

First and foremost, you should **ensure your SEO firm has experience in designing, building, and managing custom websites for your particular specialty**. Just because a company offers all the SEO services you're seeking doesn't mean they've had success in your industry. Secondly, **make sure they offer market exclusivity** - you don't want them also helping your local competition. Lastly, **confirm all services are performed in-house**. If the company isn't capable of building and managing your website in-house, how are they going to fix any potential issues? How quickly can they get your site back on track if they have to outsource to resolve every little problem?

Key Takeaway: Ask these questions: How much experience do you have with SEO for my particular specialty? Do you offer market exclusivity? Is everything done in-house?

WHAT TYPE OF RESULTS CAN YOU EXPECT?

In the world of SEO, first page Google results don't happen overnight. Ask the company what their most important SEO strategies are, and how they plan to get your practice into the top results. **Only ethical search engine optimization techniques will ensure continued, long-term success**. Furthermore, find out how they plan to measure and benchmark your SEO results. This helps determine how well the strategies being employed are working.

Key Takeaway: Steer clear of firms that use words like "fast" or "immediate" in regard to SEO results. Though your rankings can improve in a relatively short period of time using ethical SEO strategies, the only way to guarantee an instant boost is to utilize black-hat tactics.

YOU GET WHAT YOU PAY FOR

SEO companies offering customized services and individualized attention at the drop of a hat are going to charge more - and for good reason. **The value of a custom website built from scratch as opposed to a template design cannot be understated** in distinguishing your brand from others. Pair that with a responsive customer service representative overseeing the inner-workings of your SEO strategy, and you've got a priceless recipe for success.

Key Takeaway: Don't be turned off by SEO prices. Thoroughly analyze what services you'll be getting for what you pay, and don't always settle for the first quote you receive. In fact, obtain at least two to three proposals prior to making your final decision.

BE WARY OF LONG-TERM CONTRACTS AND FANCY LINGO

Never sign a two-year (or longer) agreement with an Internet marketing company - you don't want to be locked into a bad SEO strategy. We recommend negotiating a 30-day out on any agreement you make, which gives you the leverage to jump ship if something doesn't feel right. Also, **watch out for licensing fees and be cautious of proprietary software**, the latter of which may require you to remain with a company that doesn't necessarily offer the best services for your needs.

Key Takeaway: Don't be swayed by big promises. By signing year-to-year agreements, you can go elsewhere if you're not completely satisfied with progress made in your SEO results.

FINAL SUGGESTIONS

Just because an Internet marketing company has a great doctor as a client doesn't mean they are automatically a good SEO firm. Get referrals. Search the company's website and look at their portfolio. Call other plastic surgeons to learn about their experience with the firm you're considering. Most importantly, **arm yourself with questions**.

For up-to-date information about Internet marketing for plastic surgeons, check out Rosemont Media's informative blog - the Rosemont Review - on our website at rosemontmedia.com. Google's webmaster guidelines are also a great resource: goo.gl/2uaC4L

If you have any questions, please contact Rosemont Media, llc at info@rosemontmedia.com.



How to Market to Women

How to Make Your Practice Irresistible to the World's Most Powerful Consumers

by Julie Guest

One morning, a well-dressed couple drove into a BMW dealership. After months of research they were excited that, in a few short hours, they'd finally be taking home their dream car. All that remained was a simple test drive to confirm their excellent choice.

The salesman thrust out his hand, enthusiastically pumping it up and down. He rode shotgun while the husband jumped behind the wheel and the wife sat in the back. The two men talked torque, performance engineering, zero-to-sixty specs. The car drove like a dream. Then the wife happened to notice something. It seemed trivial, but the more she thought about it, the more it bugged her. Wincing inwardly at the scorn that was about to come from the front seat, she asked, "So, what's up with the cup holders?"

The salesman shot her a pitiful stare. "They're right there."

"Yes," she replied, "but they're so tiny. And those claws look flimsy. There's no way they'd actually hold a coffee mug."

Deathly silence from the front seat. Her husband did his best to keep a straight face.

"Well, that's because Europeans don't eat or drink in their cars," the salesman finally retorted.

"Yes, but I do," the wife insisted, "and so do my kids."

Another irritated look from the salesman. "Well, you could just hold your drinks between your legs..."

Needless to say, the salesman went home that day without the sale, and the husband-and-wife team went home without their new car (although theirs was only a temporary setback).

After doing a quick online search, the couple found that the flimsy cup holders were a common complaint of many BMW owners. The answer was a simple attachment that could be purchased for less than \$100. Happy to have found such a simple solution, the couple headed back out to a *different* BMW dealership and this time, came home with their new car.

You're not alone if you're thinking that this sounds slightly ridiculous—a luxury car deal blown because of cup holders? But this salesman made the very common *and* very costly mistake of *assuming that the woman didn't have any say* in the buying decision.

Nothing is further from the truth. According to the most recent statistics published by

Ogilvy & Mather, women account for a whopping 85% (*and rising*) of all consumer purchases across the board—even in those "classically male" categories such as vehicles, gaming, insurance and technology.

While there are two sexes in the human race, one of them does most of the buying.

The Marketing Blindspot

You might be thinking how fortuitous it is that your practice predominantly caters to women. But here's the rub. Men and women make their buying decisions *very* differently and, without realizing it, most businesses use words and images in their marketing that, while exciting for men, can cause a negative reaction in women.

For example, read this print ad for the Ford Flex SUV. It shows the car winding its way through the darkness, which might be perceived as exciting, or scary, depending on your point of view:

Ford Flex: CPR for the Dead of Night

Go stimulate something. Like the idea that a vehicle with three rows of seats can also be a nimble footed, refrigerator-equipped, 24 mpg head-turner.

This car has three rows of seats and a fridge. Sounds more like a "soccer mom" vehicle to me, which means women will be the primary purchasers. Why then would the marketing agency use the words "CPR" and "Dead" to headline a campaign for a car in which women will be transporting their children? This gross misunderstanding can be fatal to businesses and it's made repeatedly in advertising—especially aesthetic medical marketing.

You might be thinking, "Well, not me. I use photos of beautiful women in my advertising." Unfortunately, appealing to women's psychology and convincing them to choose

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How to Market to Women

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you as their cosmetic surgeon requires a far more sophisticated approach—an in-depth understanding of the science of persuasion and the differences between how each gender thinks.

Having Women on Your Team Is Not Enough

The presumed solution is to get women involved in the creation of your marketing, but that's not the easy fix either. Most of us have been so indoctrinated in advertising predominantly geared toward men that we've lost touch with how to communicate with women and no longer consciously realize gender differences in buyer behavior, even in ourselves. The answer lies in recognizing the differences between how men and women think, and then coming up with concrete strategies.

Men Are an Island. Women Are a Foreign Country.

From a young age boys are taught that independence is a virtue, and their self-esteem is fueled by achieving things without help from anyone else. Being independent, strong and competitive are qualities that carry them into adulthood, which is why competitive-driven ad messages resonate with men. When little girls get together, their games are collaborative and based on role playing. Scores are not generally kept. You can't win a game of tea party. *Conversation is the glue that binds their friendships from an early age.*

Fast forward to adulthood. Men are generally baffled by the things women seem to show interest in—the kind of suit someone wears, who designed their shoes, whether they've lost weight or have monogrammed cufflinks. *To women, details matter.* Men typically want to know the bottom line—“Give me all the info, the technical details, and I'll make the decision.” Women, however, will base their buying decision on the strength of their “perceived relationship” with you. They'll review your credentials and website, and search out every possible review about your practice. They'll look for mentions of you in the media, TV shows you've been featured on, articles you've written and books you've authored. They'll scour social media sites to see who else is talking about you.

In other words, women will base their buying decision on “the story” they piece together about you. While they will want to verify your level of expertise, just being a great cosmetic surgeon is seldom enough to get them to pull out their checkbooks.

Leveraging the Oprah Factor

Perhaps one of the best examples of successful marketing to women is Oprah. Her name might make you groan, but her success at connecting with her enormous fan base of middle-America moms is undeniable. What's even more extraordinary is that in reality she has very little in common with them—she's single, childless and a self-made billionaire.

So how does Oprah do it? By finding common ground with her audience through personal stories, revealing her vulnerabilities and minimizing her status differences. Her audience sees that, “Wow, Oprah's just a regular person like me,” and *that's* what makes her so influential.

If you're thinking, “Well, I'm not Oprah, I'm a *physician* and I'm not about to disclose that kind of personal information publicly,” remember that Oprah's fan base is your target market. You don't have to disclose the level of information that Oprah does. However, it would be a mistake not to pay attention to some of the strategies that made her a billionaire.

- **Leverage YOU as your unique brand.**

Don't give in to the temptation to hide behind a corporate-sounding “professional brand” the way many big healthcare companies and Fortune 500 companies do. The most successful, memorable brands of all time are based around the unique personalities of their founders: Steve Jobs, Richard Branson, Martha Stewart, Warren Buffet. The medical profession is rife with boilerplate websites and cookie-cutter advertising that make aesthetic practices look virtually identical. *You* are your own most valuable, truly unique asset. Not leveraging yourself in your branding is a Mount Everest-sized lost opportunity.

- **Use stories liberally, and as the foundation of your marketing.**

Maybe it's a throwback to our childhood memories of sitting on our parent's knee and being read to at bedtime, but nothing builds

rapport and trust faster than a well-told story—of you, your team *and* your patients.

- **Lead with *practical benefits*, not *technical aspects*.**

Having lipo isn't just about removing fat using four different kinds of thermal energy—it's about helping patients fit into those skinny jeans again. Too often, I see marketing that's filled with “just the facts” about treatments and procedures. While a man might be more interested in facts, a woman is swayed by *what a treatment can do for her*.

- **Humanize your practice by minimizing your status differences.**

Are your evenings spent ferrying your children to sports practices, too? Where are your favorite vacation spots? If you have any doubt about the effectiveness of this strategy, just look at the explosion of reality TV programs and social media sharing. People live vicariously, and they admire what they see.

- **Say “Thank You!” early and often.**

Women are voracious referrers. If they encounter a business they love, you can bet they'll tell everyone they know about it. Grow your word-of-mouth referrals by thanking your patients for referrals early and often. Women notice when they don't get a thank-you, and they prefer to give their business to companies that *will* demonstrate their appreciation.

Women will certainly use your credentials and “facts and figures” as justification once they've made a decision, but they decide foremost on more complex criteria and how they perceive you as a person. Marketing to women is not about excluding men, it's about understanding how they buy, and how to reposition your marketing to make your practice irresistible to these powerful consumers.

Julie Guest is a best selling author, marketing consultant, and co-founder of Premier Physician Marketing. To request a complimentary copy of her latest book 67 Marketing Secrets To Ethically Attract New Patients and Grow Your Practice please visit: www.PremierPhysicianMarketing.com/ASAPS and enter your mailing address. Your free copy will ship same day.

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Diary of a Mystery Shopper: Look at Your Practice Through the Eyes of a Patient

By Cheryl Toth, MBA

Author's note: All names have been changed to preserve practice anonymity.

I liked Dr. Lavender from the moment she walked into the exam room. She was bubbly, smiling, friendly, and well dressed. I forgot all about the fact that she was 22 minutes late. She actually read through the forms and asked me questions about my grandma's breast cancer, abnormal mammogram, and both the surgeries I have had. She answered all my questions about how long I would have to stop running.

Dr. Lavender listened and understood my needs. In just 20 minutes she made me feel like we were friends. I never felt rushed. She told me, "someone as fit as you won't have any trouble recovering. You'll be just fine." She built my confidence about having the surgery.

This excerpt is taken from the journal notes I made while working on a client project last year. We were evaluating key competitors of an aesthetic surgeon in the West. As part of the project, we evaluated the entire patient experience, from Web site and phone inquiry, to appointment confirmation, consultation, fee quote, patient materials, and follow up. As is true for all the mystery shopping projects we do, the results revealed a number of areas where these competitors fell short.

In the case of Dr. Lavender, she delivered what we would consider a "rock star" consultation. But this high note was quieted quickly when her patient care coordinator entered the room.

Janet did not attempt any personal conversation or ask me questions. She went right into the fee quote and scheduling policies. She didn't use my name or ask me why I was considering surgery. I said my biggest concern was that I would have to stop running for six weeks, and she responded that she, too, was a runner. This was a window for her to initiate conversation with me, but she did not. She just kept telling me the fees and the policies like a robot. She then plowed into "we offer financing" before she asked if I needed it.

I told Janet that I wanted to look at my race before I could set a date. She did not attempt to handle this rejection or request a time to follow up with me. I left Dr. Lavender's office feeling invisible. If I never called or showed up again, I don't think anyone would remember me. In fact,

CUSTOMER SATISFACTION



they have probably already forgotten that I was there.

And I was right. As I write this article, it has been **nine months** since that visit and no one from this practice has ever called, written, or emailed to follow up. Ever. *Not even to thank me for the consultation.*

All Too Common

In our work with aesthetic practices nationwide, we see a lot of this. Although the surgeon often creates a real sense of connection with a patient during the exam, there are many disconnection points that dismantle that positive experience. In this project, the most common were:

- Virtually no one used my name or built rapport. I felt like a "number."
- Patient coordinators led with costs and policies every time. It was a "tell," not a conversation.
- I was not asked critical questions that made me feel like anyone was listening.
- Fee quotes, letters, and patient materials were poorly written and some were simply unprofessional.
- **Follow up was non-existent**, except for one, automated and impersonal email.

These disconnects cost you real patients and real revenue. If a patient leaves without scheduling, and with no sense of relationship with practice, it's unlikely you'll hear from her again. Because so few patient coordinators follow up with these patients, they end up being just another account practice management system—a piece of gold that is never mined.

If you prefer a "numbers game" practice, in which you must see a high volume of patients in order for a certain percentage of them keep the schedule filled, you can get by with these disconnects.

But if you want to create a value-based patient experience and build relationships that enable you to see fewer consultations and schedule more surgeries, evaluate your consultation process through the eyes of the patient. You'll find a series of improvements that can be made.

1. First Impressions on the Web and Telephone

When was the last time you or staff reviewed the practice's web site? Are you aware of what's being said—and not being said—during telephone inquiries?

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All the practices we visited as part of this project had dated Web sites with tiny font and too much text. Pages contained vague adjectives such as “experienced,” “committed to your care,” and “qualified” and too many of the same procedure descriptions.

Our phone inquiries were only slightly better than the Web. Staff in each practice were pleasant, but everyone answered questions with features instead of benefits. They said things like, “He is board certified in plastic surgery,” and “Our consultation is complimentary.” Since this was true of our client and all of his competitors, none of this information was remarkable. Only one staffer proactively asked me why I was interested in having a breast augmentation, and what my timeframe was. And only one practice offered online registration. This same practice also sent an appointment confirmation by email and text.

Take Action: Review your Web site from the demographic perspective of your primary patient. Ask 3–5 patients or friends in your demographic to review it. Review it against at least three of your competitors. Does the site convey your differentiators? Does it offer patients value?

Ask these same reviewers to call the office and inquire about your services. Does staff build rapport and take an interest in them? Are they asked about their timeframe and reason for the procedure?

If you don’t already offer them, move toward online registration and automated appointment reminders. Patients want and appreciate both.

2. Check-in.

I arrived about 5 minutes ahead of my appointment and had left my paperwork at home. Mary at the front desk did a great job making me feel this was not a big deal. She used my name and handed me fresh registration forms in a quality leather binder.

Reception staff are the first people patients see when they arrive. The way they treat patients sets the tone of the entire visit. Make sure everyone is trained, articulate, and accommodating.

Reception staff must also maintain awareness about patients who’ve been

Only one staffer proactively asked me why I was interested in having a breast augmentation, and what my timeframe was. And only one practice offered online registration. This same practice also sent an appointment confirmation by email and text.

waiting. If your goal is to deliver a first class experience, you cannot afford a misstep like this:

At my appointment time of 1:30pm, no one came to tell me the doctor was running late. 1:35, nothing. 1:40, nothing. 1:45, nothing. 1:48, someone came out and called, “Cheryl?” She did not tell me her name or who she was. She did not apologize for the doctor running late.

As the clock ticked, two staff sat behind the reception desk and chit chatted. It would have taken them 30 seconds to update me on the delay, and offer me a cold drink or something else to diffuse my frustration. But they didn’t.

And don’t forget that the reception area can create a lasting, visual impression. Patients appreciate tasteful and tidy décor and perks such as guest wireless and cold drinks. Dr. Lavender’s office was particularly lovely.

The reception area was tastefully designed without being pretentious. Pretty furniture and very comfortable. Good outdoor light—large windows. No cloying smells and very interesting feminine art. Think Nicole Miller meets Catherine the Great meets Frieda Kahlo. I wondered if it was a local artist.

Take Action: Conduct a self-evaluation:

- How refined are the customer service skills of your reception staff? Do they use patient names, portray confidence, and make patients feel comfortable? Do they inform patients of delays?

- Sit in your reception area and look around. Are all furniture and furnishings up to date and clean? Is guest wireless information prominent? Are perks such as sweets, water or gourmet coffee available and stocked?

3. Physician consultation.

Little Touches Mean A Lot

Plus points in the practices we shopped:

- Bowls of one-bite candy bars throughout the practice.
- Bold feminine wall art.
- Tastefully designed and locally made SPF sportswear for sale.
- The surgeon’s dog—which he brought to the office a few days a week.
- A small refrigerator with bottled water in the reception area.

Building rapport with the patient during the consultation is vital, and like Dr. Lavender, both Susan and Dr. Gold were experts at it. Their banter and handoffs were well orchestrated and smooth. Dr. Gold complimented me and was clear about risks and benefits. He explained exactly how he would perform my neck lift. He has probably explained this 1,000 times, but he made it sound as if it was the first time. It was not hurried and he did not look bored.

Dr. Green did a stellar job selling the benefit of an ASC vs. an in-office O.R. He told me there were multiple physicians and nurses to handle a problem in the ASC. If something goes wrong in-office, you have fewer clinical staff to step in. But he also overwhelmed me with implant choices:

Dr. Green talked too much about sizes and options. My head was swimming. All I knew is that I wanted sporty breasts, about a C cup, no more than 320 cc’s. He did finally say: I think the cohesive gel is best. But it took him a while to get there.

As we observe and coach aesthetic surgeons on their consultation style, we advise that there are three drivers that must be in place for patients to schedule. They must 1) feel confident in your technical skills, 2) agree with the treatment plan (functional), and 3) have a positive rapport with the surgeon (emotional). Building a relationship, creating trust by alleviating fears and conveying

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confidence, and guiding patients to make good decisions for themselves will help you achieve all three.

Take Action: Conduct a self-evaluation:

- What do you do to build rapport with the patient? Do you ask open-ended questions that enable conversation? Do you convey interest in the patient's family, occupation, recreation, and dreams?
- Do you give the patient at least one compliment during the consult?
- Do you calm perceived fears about safety?
- How energized and present are you as you describe the procedure and risks?
- Are you guiding/advising the patient, or offering more choices than they are capable of handling?

4. Patient coordinator fee quote conversation.

Imaging Makes a Big Impression

From my journal entries:

The breast imager got me really excited about possibilities. When you have had small breasts your whole life and then you see what you could look like with larger breasts, wow. It looks so real.

Dr. Gold took photographs of me, with him holding up my neck as if post-op. Then Susan left and Dr. Gold cleaned up the photos in the exam room using a digital imager. The photos looked awesome and I got to take them home. I found myself seriously considering this surgery.

Delores was professionally dressed, but not "well dressed." She was pleasant but not personable. She didn't use my name or ask me anything personal. Just took me into her office and dove straight into the quote. When I asked her about a new procedure that Dr. Gold mentioned, Delores said she didn't know enough about the procedure to explain it to me. I would need to wait for the aesthetician.

Dr. Green's patient coordinator was the most effective.

Shannon met us halfway down the hall. She was cheerful, well dressed, confident, and had great conversation skills. Perfect package. She was gushing with excitement and asked if I was willing to be their first patient to use a new imaging machine. After reviewing the fee quote, Shannon thanked me for being the first patient to use the breast imager and offered a complimentary facial as a gift. Her warmth and appreciation were genuine.

The fee quote document is the last marketing impression and unarguably the most important. In this project, we identified grammar errors, typos, and poor writing in nearly every fee quote (as well as in letters and patient materials)—including the glaring: *Patient Coordinatoor*. Some quotes were printed on copy paper instead of letterhead, with no place for the patient or coordinator to sign. We regularly find similar problems with clients.

Take Action: Conduct a self-evaluation:

- What level of professionalism and personality does your patient coordinator convey?
- Does she dive right into the fee quote or does she effectively build rapport? Many patient coordinators need training or coaching in this area.
- Does the patient coordinator understand how to ask open-ended questions and handle objections?
- Is she trained and comfortable describing every service and procedure?
- What level of authority do you give your patient coordinator to surprise and delight patients?
- Review the fee quote, letters, and patient materials and remove any typos, bad grammar, or syntax errors.

If you don't have the right writing and editorial skills on your team, contract a writer/editor. A small investment will result in a big return by boosting the professionalism of your documents.

5. Follow-up.

Not one of the practices visited for this project sent a personalized thank-you note. None followed up with me to encourage or ask me to come in for a secondary consultation or spa service. No one offered a discount on product or a special patient event as encouragement to come back. No one contacted me to say the physician had a cancellation and would I like to schedule my breast augmentation in three weeks?

All of these are effective follow up strategies, but were totally missed.

If you could make only *one change* in your effort to increase your services and revenue,

that change should be to follow-up with patients who leave without scheduling. The yield can be extraordinary. Because so many patient coordinators never do it, this one change can result in two or three additional surgeries per month.

Take Action: First, if your practice does not send a personal thank-you note after every consultation, start that now. Send a handwritten note on fine stationery or a personalized email. We prefer a handwritten note. It's a lost art that many have discarded, and will set you apart.

Second, schedule a staff meeting to discuss a process for post-consultation follow up. As part of the fee quote discussion, ask the patient coordinator to ask the patient's permission to follow-up at an agreed-upon day and time. For example, "in two weeks." Then schedule that follow up and actually call. Write up scripts so the patient coordinator feels comfortable and make sure to use notes from previous rapport building to drive conversation. Getting beyond email will continue to build the relationship and can reveal the real reasons the patient does not schedule in ways electronic communication cannot.

As Maya Angelou famously said, *I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel.* Take a look at your consultation process through the eyes of a patient and make changes that will improve their experience. A few refinements will increase the number of surgeries scheduled and take your practice to the next level.

Cheryl Toth is a writer and content developer for Chicago-based KarenZupko & Associates, Inc., which provides consultation, training, coaching, and workshops for aesthetic practices. She brings 22 years of consulting, training, software product and executive management experience to her projects.

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Legal Update: Lifestyle Lift: RIP or Resurrection?

by Bob Aicher, Esq.

When speaking with a Midwestern friend in March, I asked if he had heard of Lifestyle Lift, and he responded, No. I was pleased, of course, because

Lifestyle Lift has earned a reputation for litigation, a \$300,000 fine in NY for astroturfing, advertising that warranted an investigation by the Florida Attorney General, medical professional criticism and patient complaints, all reasons to want one's friends and loved ones to stay away. I was also amazed he had never heard of the company, because Lifestyle Lift was reportedly spending up to \$1 million per week in advertising, and the thought that someone in America might have escaped being confronted by some of those media dollars seemed impossible.

For those of you too busy practicing quality aesthetic medicine to follow the ups and downs of this particular branded procedure, Lifestyle Lift's obituary or restructuring plan is being written as we speak. According to the Wall Street Journal, in mid-2014 Mark Mitchell of US Medical Management made a \$5.4 million investment in Lifestyle Lift on top of an existing \$18 million loan from JPMorgan Chase. In the fall, Lifestyle Lift stopped most of its advertising, precipitating a 90% drop in potential customer contacts. On October 9, 2014, Mark Mitchell filed suit in Michigan state court, alleging Lifestyle Lift provided "false, fraudulent and intentionally misleading" information on its finances. On March 11, 2015, the Michigan court entered judgment against Lifestyle Lift.

That afternoon, LL TX West, PLLC dba Lifestyle Lift filed a voluntary Chapter 7 No Asset bankruptcy petition in the Northern District of Texas. Two weeks later on March 27, 2015, Lifestyle Lift Holding Inc. filed for Chapter 11 bankruptcy in the Eastern District of Michigan, case No. 15-44839-wsd.

The 20 largest unsecured claims list 19 pending litigations plus Mark Mitchell's judgment of \$5.5 million. Lifestyle Lift's filings indicate assets of less than \$50,000 and



liabilities of between \$10 million and \$50 million. Despite such debt, Lifestyle Lift says it is hoping to emerge from bankruptcy and reopen most, if not

all, of its 50 surgery centers, including rehiring its former employees, doctors and medical staff.

Bankruptcies are not uncommon, but Lifestyle Lift's difficulties seem unusual in a rising economy. Again according to the Wall Street Journal's investigation, at its 2013 peak, Lifestyle Lift earned \$186 million in revenue generated by \$1 million per week in advertising, yet even such Herculean efforts still netted only a 2% conversion of telephone calls into paying patients. Lifestyle Lift has not explained how it got into this predicament. Perhaps it was the public spending more on injectables and non-invasive procedures rather than traditional surgery. Perhaps the Attorneys General investigations in New York and Florida were cumulative in undermining the public's perception of the company. Perhaps patient feedback via social media played a significant part.

Or perhaps Lifestyle Lift was relying too heavily upon advertising to sustain its revenue. Our members rely largely upon personal recommendations and word of mouth to build their practices. Perhaps for Lifestyle Lift, word of mouth was the problem, which even recognizable spokespersons and \$1 million per week in advertising could not overcome.

Bankruptcy filings provide only a financial snapshot of now, and typically feature minimal assets, breathtaking debt and a daunting list of creditors. Yet, behind every bankruptcy is a story. Always. Bankruptcy filings don't reveal where the assets went, why the cash is gone, how such debt was amassed, and when they knew everything was falling apart. Court documents state what is, not how it all came to be. Why is what we all want to know.

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1. Kinney BM, Jeffers LLC, Ratliff GE, Carlisle DA. Silicone gel breast implants: science and testing. *Plast Reconstr Surg.* 2014;134(1S):47S-56S.