

THE RESULTS ARE IN: A LOOK AT HOW COVID-19 DISRUPTED FACIAL PLASTIC SURGERY AND AESTHETICS

he AAFPRS released its 2020 trends survey results earlier this month. More so than any year before, 2020 disrupted the aesthetic industry in a big way. For the first time, our Academy digs deep into exactly how COVID-19 impacted facial plastic surgery trends, consumer influences, and the professional aesthetic community.

The year 2020 was anything but predictable. Here's what changed.

Over the past few years, use of non-invasive procedures to forestall the signs of aging have been steadily on the rise. The pandemic flipped

the switch, creating a surge in surgical demand not seen in recent years. Despite the fact that many non-essential surgeries and aesthetic services were put on hold for months earlier in the pandemic, AAFPRS members ultimately saw an increase in demand as 2020 progressed—now higher than ever.

A full 70 percent of AAFPRS members report a rise in bookings and treatments over the course of the COVID-19 pandemic, with nine-in-10 facial plastic surgeons indicating an increase in bookings and treatments of more than 10 percent. Surgical procedures are the most common procedures as part of this upsurge, perhaps cancelling out any decreases that might have resulted from the economic crisis and lockdowns.

AAFPRS members who experienced higher patient volume almost unanimously (96 percent) agree that men and women have more time and flexibility to recover from treatments due to social distancing and the benefits of working from home. Rhinoplasty (78 percent), facelifts (69 percent), eye lifts (65 percent) and neck lifts/treatments (58 percent) have increased most notably, likely due to more time spent



The 'Zoom effect' has factored in an increase in bookings over the course of the COVID-19 pandemic, according to 83% of AAFPRS members, while patients having more disposable income due to not spending it elsewhere is perceived as a contributing factor by 64% of respondents.





on digital devices and an unprecedented virtual lifestyle.

For the first time in years, AAFPRS members report nonsurgical treatment demand decreasing in 2020. The average amount of minimally invasive procedures was down by nine percent compared to 2019, driven by a decline in skin treatments (down 29 percent) and fillers (down eight percent). Neurotoxins and Botox® remained consistent with 2019 demand.

Zoning in on ZOOM dysmorphia Why the drastic shift? AAFPRS members point to the "ZOOM effect" as a major contributing factor in changing behaviors (according to 83 percent of

respondents), while patients having more disposable income due to not spending it elsewhere is a strong second (64 percent) in patients changing behaviors.

"These factors, combined with masks, less travel, and people being able to work from home without missing a beat in their career, has led to a marked increase in surgical procedures," states AAFPRS president, Paul J. Carniol, MD. "Last year presented completely uncharted territory for our industry, and these statistics point to a strong desire to look and feel confident that has not wavered despite major lifestyle changes and obstacles."

As the first to identify the "selfie-awareness" trend highlighted from previous annual surveys, the AAFPRS is now spotlighting an evolution of this hyper-awareness of one's own on-screen image; only this time, it's live and via video. Deemed "ZOOM dysmorphia" in a recent study published in the AAFPRS journal *Facial Plastic Surgery & Aesthetic Medicine*, the pressures of a virtual lifestyle had a huge impact on the way we view ourselves.

See Video Conferencing, page 8



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President's Message: A New Year.



e are now in the eleventh month of COVID. It has created multiple challenges for all of us. First of all, we have the challenge of protecting our patients and ourselves from becoming sick with COVID.

COVID has added a whole new dimension of dealing with our patients. At the same time there has been an ongoing shortage of PPE for healthcare personnel. In our office we have had an order for replacement N95 masks since mid-December. We still have not received these masks. The approval and distribution of the two vaccines to healthcare providers is just starting to make a

difference. We will all feel better when at least 70 percent of all Americans have been vaccinated.

It is quite impressive that the vaccines have been developed in record time. Although the development of the specific vaccines occurred in 2020, the development of these MRNA vaccines started in development by researchers 20 years ago at the University of Pennsylvania School of Medicine.

Some of our members have become quite ill with COVID and one of us has passed. Paymon Simoni, MD, practiced in Beverly Hills California (see article on page 13). He was only 50 years old and had no pre-existing medical problems. According to a media report, he performed injection of lip fillers in a patient who was found to be positive for COVID shortly after the treatment. He wore a mask at all times. Obviously we send thoughts of support to Dr. Simoni's wife and children—and we also pause to recognize that his unfortunate passing further emphasizes the importance of the new vaccines to prevent a COVID infection. Even wearing a mask, the disease can still be contracted. In my office, we actively encourage all of the staff to receive the vaccine and encourage all of our patients to obtain the vaccine as quickly as they are able to do

Even with the COVID pandemic, the AAFPRS has been moving ahead to better serve our members. We have moved our Spring 2021 Rhinoplasty and Facial Rejuvenation meetings to May of 2022 for obvious COVID-related reasons. The program chairs will remain the same and they will work harder than ever to provide you with an exceptional face-to-face educational experience next year.

We decided to hold a differnt type of Spring Meeting this year and yes, as you might expect, it will be virtual. The AAFPRS Masters of Facial Plastic Surgery will be held May 14-16, 2021. There will be excellent presentations covering a whole gamut of facial plastic and reconstructive surgery topics. You can attend the meeting without traveling and still get the quality learning experience, while receiving highly valuable CME credits. Attendees will also avoid the expense and inconvenience associated with traveling (especially now during the pandemic) and you will not have to miss too many hours off your practice either. Our Academy overall meeting directors J. Randall Jordan, MD, and Catherine Winslow, MD, together with our conference course chairs Anthony Brissett, MD; Ivan Wayne, MD; Jennifer Levine, MD; and Amir Moradi, MD, are working hard on this outstanding program that you will not want to miss!

Plans are also underway for our 2021 AAFPRS Annual Meeting to be held in Las Vegas, September 29 - October 2 at the Paris Las Vegas Hotel. I am optimistic that this conference will happen "in person" and I

AN UPDATE OF WHAT'S TO COME

hope to see you all healthy then.

Congratulations to our first group vice president for diversity and inclusion. Jennifer Parker Porter, MD. Dr. Porter has been a great contributor to facial plastic surgery and our Academy. She has an impressive resume. She has her undergraduate degree from Brown University and her medical degree from Duke University. She is on the clinical faculty at Georgetown Medical School. She had a facial plastic surgery fellowship with M. Eugene Tardy, MD, and Dean M. Toriumi, MD. Eighteen years ago, she started her practice and has recently brought on an associate, Jigar Sitapara, MD.

Discussing the new Academy Board position Dr. Porter says, "I am excited about the opportunity to serve as the first VP for diversity and inclusion. The Academy's overwhelming support in embracing diversity and inclusion will contribute to our growth and strength." Dr. Porter will be serving as the acting group vice president for diversity and inclusion until a full three-year term candidate is elected later this October, as part of the 2021 election process.

Our president-elect, Corey Maas, MD; administrative chair of the Multimedia Committee Sam Lam, MD; and chair of the Worldwide Web Subcommittee Albert Fox, MD, are working on a continuous update of our Academy website. This will ensure that it encompasses all of the advancements in our specialty. In this way everyone who goes to our website will have the latest information and education related to facial plastic surgery.

Travis Tollefson, MD, has been doing a great job as our new (since October 1, 2020) editor-inchief of our journal Facial Plastic Surgery & Aesthetic Medicine. It has an impressive impact factor rating of 3.787; thanks to all of the efforts of Dr. Tollefson, Dr. John S. Rhee, MD, MPH (who was

the previous editor-in-chief for many years of the journal through September 30, 2020), the members of the Editorial Board, and the numerous contributors to our journal. Dr. Tollefson and I have been working with the journal publisher Mary Ann Liebert as part of a continuing effort to further improve our journal. More information about this will be coming in the future. Our FACE TO FACE humani-

tarian program has just been awarded \$241,000 as part of a court ordered cy pres distribution. After an initial settlement settlement (in a court case that did not involve the AAFPRS). there were some residual funds and one third of the residual funds was awarded to our program. This award will allow us to further sustain the activities of this program. FACE TO FACE is involved in three areas: 1) international missions that focus mainly on treating children with facial birth defects and trauma: 2) treating the unfortunate victims of domestic violence in the U.S.; and 3) performing facial plastic and reconstructive surgery on soldiers who have sustained facial injuries while serving our nation. It is my unhappy duty to

report that we have lost another member; a humble, talented, and brilliant facial plastic surgeon. Wm. Russell Ries, MD. He passed on Jan 5, 2021 from pancreatic cancer. Dr. Ries had the endowed Carol and John S Odess Chair in Facial Plastic Surgery at Vanderbilt University Medical Center. He was a dedicated supporter of our Academy and served previously on the AAFPRS Board. During his career he gave numerous lectures at meetings in the U.S. and internationally. He even lectured several times at the biannual Facial Reconstruction Meeting at Rutgers New Jersey Medical School. He was a dear friend to many of us, a great teacher and a great physician.

Please see a wonderful tribute to him on page 12.

All of your suggestions and efforts for our Academy are appreciated. Please contact me with your thoughts. We are here for you. We are continuing all of our efforts for our Academy and our specialty. Stay healthy.

Family Col. MD

Paul J. Carniol, MD

IN BRIFF

Samuel M. Lam, MD, of Dallas,

has been elected to serve as the president of the American Board of Hair Restoration Surgery (ABHRS) for 2021. He served



as vice president last year, secretary, treasurer, Web chair, and marketing chair for the ABHRS.

Sherard 'Scott' Tatum, MD, of Syracuse, N.Y., has been named chair of the Department of Otolaryngology-Head and Neck Surgery, Upstate Medical University, effective January 18, 2021. Dr. Tatum had served as



interim chair of the department since April 2018. The appointment was announced by Lawrence Chin, MD, dean of the College of Medicine.

See Upstate Faculty, page 17

CELEBRATING BLACK HISTORY MONTH: DR. BOAHENE, FIRST AFRICAN AMERICAN AAFPRS FELLOWSHIP DIRECTOR

ofi Derek O. Boahene, MD, a valued AAFPRS member and highly skilled facial plastic and reconstructive surgeon, is now also forever linked historically with the AAFPRS Foundation's fellowship program. Dr. Boahene has become the first African American to be the director of an ACPSE accredited fellowship program, under the auspices of the AAFPRS Foundation, almost 60 years after the Fellowship Program's inception. Clearly, this stands as both an exciting and impressive professional accomplishment for Dr. Boahene and a long overdue organizational achievement for our AAFPRSsomething that most certainly should be celebrated!

Currently a professor in the Department of Otolaryngology-Head and Neck Surgery, Division of Facial Plastic and Reconstructive Surgery at Johns Hopkins University School of Medicine in Baltimore, Dr. Boahene is recognized nationally and internationally for his clinical expertise, in particular for his work in facial plastic and reconstructive surgery for skull base surgery. He has been credited for the development of nationally/internationally recognized standards of care in 2012 for Evelid Approach to Skull Base Surgery, in 2013 for Minimally Invasive Temporalis Tendon Transfer, and in 2016 for Timing of Facial Nerve Grafting after CPA Tumor Resection. Dr. Boahene has also collaborated on over 100 publications, is an author of over 40 book chapters and several textbooks, and has even written a personal memoir, entitled However Far the Stream Flows, the Making of the Man who Rebuilds Faces.

Dr. Boahene recently reflected upon the importance of teaching AAFPRS fellows-in-training and

why it is so significant for him personally and professionally to become a fellowship director himself. "Over the past 16 years, I have been fortunate to participate in the training of about 18 AAFPRS fellows who are doing exceptional work around the country," he shared. "And now, taking up directorship of the Johns Hopkins FPRS Fellowship Program has been profoundly meaningful and professionally renewing in several ways." Dr. Boahene emphasized the unparalleled opportunity and importance of more directly training and mentoring the next generation of leaders in our specialty. In this regard, he observed "to remain leaders in facial plastic surgery, our fellowship training programs must offer valuable scientific research opportunities and outstanding clinical experiences that address relevant questions of our day-and together, with my co-fellowship directors, it is an honor to continue to create and foster such opportunities for future trainees."

Beyond the excitement and sense of responsibility any clinical leader would likely experience when embarking upon this new and vital teaching role, Dr. Boahene also expressed deep pride in becoming the first African American AAFPRS fellowship director. "While I was initially unaware of this fact," he candidly admitted, "it is such an honor to be the first African American FPRS fellowship director-and I certainly hope that soon there will be the second, the third, and many more." Recognizing the magnitude fellowship director mentoring plays to improve clinical learning and grow program diversity, Dr. Boahene conveyed, "I credit my mentor, Peter Hilger, MD, for being a model fellowship director, seeking



out diversity among his fellows over the years and spurring them on to remain actively engaged in the educational activities of our Academy."

Contemplating the profound need to further advance diversity and inclusion within our field. Dr. Boahene affirmed that it is extremely crucial and valuable that our specialty reflects the diversity of the communities our members serve-and our AAFPRS fellowship programs can play a critical role in such an effort. "This will require strategic encouragement of diversity and inclusion among our trainees and directors," he observed. Quickly adding, "specifically we should make centralized efforts, as an Academy, to identify and characterize the diversity gaps in our current representation-and once characterized, we can consciously design activities and programs that connect talented residents early in their training to the scientific and clinical potentials of our specialty and fellowship training programs."

As the AAFPRS continues to take multifaceted strategic steps to further enhance diversity and inclusion within our Academy and throughout our specialty, the AAFPRS Board and our AAFPRS Task Force for Diversity and Inclusion have specifically identified the importance of growing diversity within our fellowship programs. Given Dr. Boahene's background, experience, and

See Teachina Leaders, page 17

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RESPONDING TO CRISIS AND HOW YOU'VE STEPPED UP

e have never seen first-hand a crisis like the coronavirus pandemic. The amount of people affected, the number of deaths, the geographic range sets this crisis on a scale we never experienced before in our lifetimes. The Academy has never seen a global pandemic to this degree in its 57-year history. But throughout our history we have responded to other crises and we have seen the numerous ways in which you step up.

Within days of the September 11 terrorist attacks, the phone rang at the American Board of Facial Plastic and Reconstructive Surgery's (ABFPRS) office. "I'm ready to ship out and won't be in touch for a while." The calls came from ABFPRS diplomates on active military duty and reservists who were expected to be deployed. About two dozen ABFPRS diplomates at that time served in the U.S. armed forces.

When responding to a crisis, there's the initial reaction. The hours and days after news strikes there's a rollercoaster of emotions. Fear, anxiety, and adrenaline affects every person differently. During our current challenging times with the global pandemic, we have seen you step up. Each one of you pledges to "pursue the practice of surgery with scientific honesty and to place the welfare of my patients above all else." You go above and beyond that.

Each crisis demands different skills, expertise, and responses. As facial plastic surgeons, you utilize your unique skills and expertise to respond to each situation. Whether it's holding fundraisers after a disaster or offering pro-bono services in response to an emergency, you find a way to help.

After the initial responses to an emergency subsides, we have seen you care for the long-term welfare of your patients. For example, several September 11 first responders are to this day afflicted with severe health conditions, such as chronic sinusitis. Robert A. Guida, MD, a Manhattan-based physician who is board certified by both ABFPRS and the American Board of Otolaryngology-Head and Neck Surgery, treats many patients today experiencing chronic sinusitis after their heroic acts of service.

In addition to caring for individual patients, we have seen the creation of committees and humanitarian programs in response to crises. In 2003, the AAFPRS Board of Directors created "FACE TO FACE: Facial Plastic Surgery's Homeland Response Team" in response to the September 11 attacks. This team was created to have AAFPRS volunteers ready to assist in their cities when disaster and terrorism occur. Paul J. Carniol, MD said, "Many of us were ready and waiting to assist victims of September 11. We need to-as an organization-take a stand and be prepared to serve when our talents and skills are required."

Then in 2009, AAFPRS launched FACES OF HONOR, a pro-bono humanitarian program for veterans. "I believed that this Academy could somehow 'give back," then AAFPRS president Donn R. Chatham, MD, stated. "Veterans offered themselves to protect us. Could we not offer our compassionate surgical skills to them when needed? How gratifying could it be to use our surgical expertise to help improve the injuries of a worthy veteran who has been wounded?"

There are different levels of responses when a crisis hits. First, there's an initial response to the tragedy, then there's treating the long-term effects, and then there's the creation of committees and organizations to help mitigate the damage in the future or prevent the disaster from happening again. It's hard to predict the long-term effects of this pandemic, since we are still

in the middle of it; but throughout this crisis, you have stepped up. Collectively, members of our Academy have partnered to create immensely valuable clinical guidance for safely operating within the realities of the pandemic, and have also collaborated to generate interdisciplinary non-surgical guidance, as well. Additionally, we have seen how you use your unique talents and skills to care for the welfare of your patients (with many Academy members putting yourselves in harm's way on the COVID frontlines) and that is the guiding light that will lead us all through any crisis to come.

Editor's Note: This article is part of a series highlighting stories from the Robert L. Simons Archives & Heritage Center. It was written by Justine Rothbart, the AAFPRS archivist.

Explore Our History

The Robert L. Simons Archives and Heritage Center is dedicated to collecting, preserving, and providing access to information vital to the legacy of facial plastic surgery. These vital records are accessible through the Digital Archives. This will give you access to a treasure of information from association events and activities, information about surgeons and their careers, personal papers and letters, artwork from fellow surgeons, personal scrapbooks from early AAFPRS presidents, books, videos, photographs, and more, Browse through the records documenting the history of humanitarian programs. such as FACE TO FACE. Take a look at the many achievements of Women in Facial Plastic Surgery. Search through the profiles of surgeons who have participated in the Fellowship Program since the program's beginning in 1969.

We are continuously adding to the Digital Archives, so if you would like to donate documents, photographs, videos, or anything that helps tell the full story of facial plastic surgery, email our archivist Justine at archives@aafprs.org.





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SURGICAL PROCEDURE DEMAND SKYROCKETS: VIDEO CONFERENCING TAKES SELFIE AWARENESS TO THE NEXT LEVEL

From Cover Story, page 1 From students stuck at a computer all day to adults working and socializing from behind a screen, the constant bombardment with one's own image was responsible for significant selfperception shifts and could account for the intensified demand for facial plastic surgery. The number of teens seeking rhinoplasty is up from 2019, with 41 percent of surgeons identifying this as a rising trend along with the desire to look better on video conferencing (a new trend, reported by 16 percent of AAFPRS members).

"Real time video cannot be FaceTuned or photoshopped to smooth out a bump on the nose, crow's feet or a sagging neck," says Dr. Carniol. "Unlike selfies and video editing apps like TikTok and Reels on Instagram, the video conferencing used for school, work, and ZOOMing with family and friends, does not allow for filtering capabilities, making it a particularly easy lens for selfscrutiny."

While staring at yourself on screen all day became normalized in 2020, it follows that people asking for eyelid procedures to look less tired was highlighted as trending by 56 percent.

The more things change, the more things stay the same

The most common procedures were similar to 2019, despite the disruption caused by COVID-19. The three most common surgical procedures performed by AAFPRS members in 2020 were rhinoplasty, facelifts (including partial facelifts), and blepharoplasty.

Women continue to be the most likely patients for facial plastic surgery, with neurotoxins (72 percent), fillers (61 percent). and rhinoplasty (52 percent) topping the 2020 wish list. Hair transplantation is the only procedure for which men far

surpass women. While most neurotoxin/Botox® treatments were for female patients, last year saw a 27 percent increase in these injectables as one of the top three treatments for male patients.

Otoplasty has the most gender equality, with 55 percent of survey participants saying the procedure is gender balanced. Coincidentally, "We've been hearing from a lot of patients that ears are a feature that stand out to them on video conferencing calls," shares Dr. Carniol.

The most common procedure among patients under 34 years old is rhinoplasty, which remains consistent from 2018 and 2019. As for celebrity influence, 83 percent of surgeons indicate that everyone from A-Listers to vloggers to reality stars have a moderate-to-high level of influence on patient requests for facial plastic surgery—about the same as 2019, which saw an increase of 21 percent compared to 2016.

The lasting impact of COVID-19 concerns

The year 2020 may have marked the full Millennial takeover of the aesthetic industry. Patients age 56 or older represent a lower percentage of patients overall in 2020, perhaps due to concerns about COVID-19, while demand in the under 30 age group remains strong, even during a pandemic. Holding steady for three years in a row, the pandemic solidified that self-care remains top of Millennials' priority list.

Top concerns of patients regarding going under the knife, changed a lot in the last year. with cost topping the consideration chart for the first time. Other top concerns included looking unnatural and recovery time, which was unsurprisingly down from 2019 as people worked from home and socialized less.

The 2020 AAFPRS annual trends survey was conducted in December 2020 by ACUPOLL Precision Research, Inc. through an online survey of AAFPRS members. If you were one of those who completed the survey, you should have already received-by email-social media graphics highlighting these trends. The first 50 respondents who completed the survey in its entirety will receive products in the mail shortly: DefenAge Six-Week Perfection Neck Tightening Cream (\$127 value) and a TIZO facial sunscreen collection (\$92

The two lucky winners of the complimentary registration to one AAFPRS 2021 or 2022 meeting are: Jennifer Kim, MD Ann Arbor, Mich. Grant Gillman, MD Pittsburgh, Pa.

Please email Rita Chua Magness if you have any questions: rcmagness@aafprs.org.

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WOMEN IN FACIAL PLASTIC SURGERY MY OWN PERSONAL EXPERIENCE AS A PATIENT HELPED SHAPE WHO I AM TODAY

By Thuy-Van Tina Ho, MD

t was time for me to conquer my most feared enemy: the mirror. My eyes opened slowly to the intricate patterns of crusty stitches crawling all over my fresh wounds. This first confrontation with my new visage was over. I underwent the same daunting process eight times in my youth, for the eight reconstructive surgeries I endured because of a large, potentially cancerous nevus on my forehead. For every negative memory of a new scar, however, there exists a positive one of the surgeons who made a concrete difference in my early life. The hospital was more than just a childhood battlefield; it was the birthplace of my dream of becoming a reconstructive surgeon.'

This introduction to my personal statement that supported my college, medical school, residency, and fellowship applications, sets the stage well for why I ultimately pursued a career in facial plastic and reconstructive

SEEN HERE ARE BEFORE AND AFTER PHOTOS OF THEN FOURTH GRADER DR. HO AS SURGICAL PATIENT FEATURING Z-PLASTY REVISION.



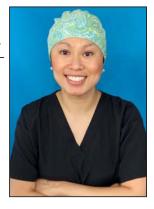


surgery. I have childhood ties to Philadelphia and to Children's Hospital of Philadelphia (CHOP) as a patient, and last summer had the serendipitous opportunity of reuniting with my own plastic and reconstructive surgeon David Low, MD, over 20 years later. It was quite the sentimental and educational trip down memory lane reviewing my own patient photos with him from the perspective of both a patient and surgeon and discussing my last reconstructive procedure centered on a Z-plasty to improve my left brow position, as shown in the before and after photos below. He in turn was able to appreciate the rare chance of seeing his maintained beautiful reconstructive results in one of his patients several years later. Dr. Low has joked with me as well that he saved me many years of Botox injections given the location and extent of my reconstructive surgeries. I will never forget this full circle experience and the early imprint Dr. Low had on my career direction.

As both a former surgical patient and a surgeon, I always keep with me the insight that the

appearance of the scars often matters greatly to the patient and always strive to perform my best closure at the end of any surgery, to make every stitch count and be perfect. Now a mother with a young son, I imagine the anxiety and worry my parents carried through every surgery experience whenever I review the copies of my own patient photos from Dr. Low and use that perspective to

DR. HO IS REUNITED WITH HER RECONSTRUCTIVE SURGEON DAVID LOW, MD, OVER 20 YEARS



keep me grounded in every discussion with each surgical patient and their loved ones. One year ago, I actually saw a young female patient in her 20s for consultation for a large nevus localized to her forehead that she desired to have removed. It felt so surreal to be able to convey to this patient how closely I could relate with her condition, and I ultimately helped refer her to an academic surgeon for her care. I am humbled by and grateful for my own patient experiences and the positive impact of my reconstructive surgeon and how they have shaped me into the facial plastic and reconstructive surgeon I am today.





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IN MEMORIAM: THE ACADEMY MOURNS THE LOSS OF OUR

o home, doctor—go home." Such was the counsel so often heard from our teacher Wm.
Russell Ries, MD, to any resident, staff, or his partner in facial plastic surgery who stayed too late at work, reminding us of things that we should all value the most: family and friendships.

It saddens me to inform you that our friend and beloved colleague Russell, went home to his Creator on January 5, 2021 from pancreatic cancer with his dear family by his side. He was 67. His children—Russell, Bud, and Katie—and grandchildren (seen in the adjacent column), were all able to visit with him and his wife Susie over the holidays and share their love, stories, and sentiments.

His indelible tenure spanning well over three decades as chief of facial plastic and reconstructive surgery at Vanderbilt and his active involvement in our Academy, touched many lives—each with a caring hand uniquely his.

All of us will remember him as a gentleman, so kind and supportive to everyone who crossed his path. To be his partner and mentee at Vanderbilt for the last nine years, has been a life honor and a daily lesson on how to be a terrific human being.



DR. RIES (CENTER), IS SEEN HERE WITH HIS FELLOWS AND FORMER RESIDENTS FROM VANDERBILT UNIVERSITY (FROM LEFT TO RIGHT): SCOTT OWEN, MD; JUSTIN SOWDER, MD; AUSTIN ADAMS, MD; DR. RIES; HARRY WRIGHT, MD; SCOTT STEPHAN, MD; AND ANDREW BECKLER, MD.



Russell was born prematurely on January 30, 1953, in Union City, Tenn. Weighing only three pounds, three ounces at birth, Russell was determined to persevere from an early age and always

> armed with a deep curiosity and passion for learning. Russell earned his medical degree from the University of Tennessee in Memphis and completed residencies at Baptist Memorial Hospital in Memphis and Northwestern Memorial Hospital in Chicago. He completed a

fellowship under Jack R. Anderson, MD, in facial plastic and reconstructive surgery at Tulane University Medical Center.

Dr. Ries was a diplomate of the American Board of Facial Plastic and Reconstructive Surgery and a diplomate of the American Board of Otolaryngology-Head and Neck Surgery. Throughout the years, he served as a pillar on which our Academy was built, dedicating his time and efforts to strengthen the foundation of facial plastic surgery as the experts in our field. He was appointed to direct several AAFPRS Foundation meetings and courses and also served on numerous committees, many of which he chaired. In 2004, he was elected to the AAFPRS Board of Directors by his peers. He served as director-at-large from 2004 to 2007 and group vice president for public and regulatory affairs from 2014 to 2018.

In 2006, he was named the first holder of the Carol and John S. Odess Chair in Facial Plastic and Reconstructive Surgery in the Department of Otolaryngology at Vanderbilt. In this role, he expanded research in the use of lasers for facial plastic surgery and exemplified legendary teaching skills that inspired many residents to seek careers in his discipline, growing the division into a top program in the country. He was also instrumental in founding the Vanderbilt's facial plastic and reconstructive fellowship in 2014, for which he served as program director.

Because of his medical expertise and superb ability to communicate, he was invited to share his knowledge in international conferences held in China, Panama, Columbia, Egypt, Brazil, South Africa, and France. Generous with his time and kind to everyone regardless of their circumstances, Russell participated in many medical missions in Ecuador and other outreach efforts

FRIENDS: RUSSELL RIES, MD AND PAYMAN SIMONI, MD

His legacy lives on in the many people who were fortunate enough to be around him: his colleagues, fellows, residents, trainees, patients, and friends.

The history of the Vanderbilt Otolaryngology Department and the AAFPRS has been written, in part, by Russell and the parts he wrote always came from a place of thoughtfulness and magnanimity. As a humble and talented facial plastic and reconstructive surgeon. Russell made his positive mark on the facial plastic surgery community here and abroad. He achieved ultimate success, both as an accomplished professional as well as an appreciated human being. Words cannot fully express how much he will be missed.

We all wished we had more time with him. His ability to make everyone feel welcomed and special—like they were family—is why his work family across our Academy will join the Ries family in sorrow of the passing of this terrific human being, our friend, Russell.

This heart-felt piece was written by Scott Stephan, MD, who was Dr. Ries' partner and mentee at Vanderbilt University for nine years.





t is with great sadness and a heavy heart that I write to you, my colleagues, on the passing of Payman Simoni, MD on January 8, 2021. He passed due to intracranial hemorrhage while in the intensive care unit being treated for pulmonary complications of COVID-19.

Dr. Simoni was an embodiment of the American Dream. As a teenager, he immigrated by himself to the United States from Iran in search of a better life. He landed in New York, where he sought refuge and enrolled himself at Yeshiva University where he excelled in his scholastic endeavors. After graduating, he attended Albert Einstein School of Medicine in New York. He ultimately completed residency in otolaryngology-head and neck surgery and facial plastic and reconstructive surgery at Birmingham Hospital affiliated with the University of Alabama. Dr. Simoni initially began his practice in New York where he married his beloved Rashin Simoni, with whom he has two daughters-Rona, and Ariella. In 2006, Dr. Simoni and his growing family followed his dream of becoming a Beverly Hills facial plastic surgeon and moved to the West Coast.

> While practicing in Beverly Hills, Dr. Simoni quickly established a positive reputation as a facial plastic and reconstructive surgeon. He had numerous television appearances and continued to contribute to our field and society by speaking at our educational conferences and meetings. He was very forthcoming with his techniques, and shared pearls of his practice openly with his colleagues. An affable and fun-loving person, he was loved by his patients and colleagues alike. He enjoyed his work and was able to make his office a fun place to



be. He had Halloween parties and Black Friday special events for his patients and staff.

Dr. Simoni was known to his friends as the life of the party. An amateur singer, he was always first to grab the microphone and join the band on stage at his friends' events. He also loved to share a magic trick or two and always had a crowd around him. Dr. Simoni had recently become a certified magician and had held appearances at the Magic Castle in Los Angeles. He was also a licensed pilot and enjoyed flying his personal plane to Las Vegas to enjoy a weekend with his wife and friends. He was especially eager to fly himself to the annual Vegas Cosmetic Surgery and Aesthetic Dermatology Symposium where he enjoyed speaking on topics such as rhinoplasty and facelift techniques.

Always known to be a true self-starter with a passion for life, Dr. Simoni will be greatly missed by his family, friends, and colleagues alike.

This tribute was written by Behrooz Torkian, MD, a good friend of Dr. Simoni in Beverly Hills.



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ABFPRS CORNER: JUNE EXAMINATIONS MOVED TO SEPTEMBER

OVID-19 is still impacting ABFPRS programs and examinations. The ABFPRS Board of Directors has been hoping that the changes brought by the COVID-19 pandemic would have allowed us to return to some semblance of normalcy by now. As you all know, that's not the case-yet. Although the vaccine has been introduced and many of you have received it, we don't believe that June gives us enough time to allow more individuals crucial to examination weekend to receive vaccinations.

To allow more time for vaccinations to reach a greater portion of the population, the ABFPRS Board of Directors has made the decision to reschedule the upcoming June 25-27, 2021, ABFPRS and IBCFPRS primary examinations as well as the ABFPRS MOC in FPRS® examination to September. Rescheduling the exam to the middle of September will give us approximately three additional months. We're hoping that those three months will allow more individuals to receive the vaccine to protect the health and well-being of our candidates, examiners, proctors, staff, and the public who are not in the first groups scheduled to receive the COVID-19 vaccine.

The rescheduled dates for the 2021 examination are:

- September 17-18, for surgeons originally scheduled for the 2020 ABFPRS primary examination
- September 18-19, for surgeons who have registered and been approved to sit for the 2021 ABFPRS primary examination
- September 19, for surgeons who are taking the MOC in FPRS® examination instead of the annual FACEforward longitudinal assessment program for completion of Part III requirements.

These examinations will still take place at the Ritz Carlton Pentagon City in Arlington, Va. If



you are unavailable on these new dates, the next examinations will be held on June 25-26, 2022. Additional information regarding the 2021 examination will be sent out to all examinees in June.

We sincerely hope that you will be available for the rescheduled dates in September, but if you need to make different arrangements or schedule a refund, please contact the ABFPRS office on or before March 10, 2021.

These are unprecedented times and the ABFPRS Board of Directors appreciates your understanding and patience as we deal with these challenges. We will get through this together.

If you have any questions about the upcoming examinations, please contact Laurie Wirth, ABFPRS executive director at (703) 549-3223 or by email at lwirth@abfprs.org.

PAID CLASSIFIED AD

We are looking for a facial plastic surgeon to join a 30vear established and successful facial cosmetic surgery practice in Seattle, Washington. The practice owns it's private on-site Medicare certified ASC and is proud of a long time employed and cohesive team of professional staff. Candidates must be fellowship trained and board certified / board eligible in facial plastic surgery and have a significant interest or experience in rhinoplasty surgery. Any interested candidates should contact the practice with an up-to-date CV: jsilver@seattlefacial.com

A VIRTUAL SPRING MEETING: ESSEN-TIAL EDUCATION FOR RESIDENTS

egistration is open for the 2021 AAFPRS Vir tual Spring Meeting! This one-of-a-kind event will be held April 9-10, in conjunction with the Combined Otolaryngology Spring Meetings (COSM).

Each year, the AAFPRS Spring Meeting offers a unique learning opportunity, convening hundreds of residents, fellows-intraining, medical students and practicing physicians in the fields of facial plastic and reconstructive surgery and otolaryngologyhead and neck surgery for the purpose of disseminating and exchanging cutting edge clinical and basic scientific researchand this year is no exception. Although we've moved to a digital format, we're committed to delivering a rich, high-caliber education.

We're Bringing the Best and the Brightest to You

Course chairs Celeste C. Gary, MD; Linda N. Lee, MD; and Sachin S. Pawar, MD, took great care to design a phenomenal program featuring a stellar lineup of panels and keynote speakers, as well as top-rated oral abstracts and e-posters.

Topics range from facial rejuvenation, minimally invasive techniques, and energy-based devices to special considerations for geriatric populations, facial gender affirmation, facial reconstruction, rhinoplasty... and everything in between. Don't miss the chance to enhance your knowledge and skills, thereby improving the quality of patient care.

And, because COSM brings together the members of several organizations, you can attend the AAFPRS program, participate in See More CME. page 17 renuva STILL YOU, ONLY BETTER. Renuva contains the same collegens, growth factors and proteins as your own fat - and nothing more*. The treatment is injected anywhere native fat exists to restore volume, where desired. Renuva for: · Cheeks Temples Hands · Nasolabial folds Neck Décolletage · Contouring · Cellulite dimples · Liposuction irregularities Actual Renuva® Patient



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*Kokai, et.al. Clinical Evaluation of an Off-the-Shelf Allogeneic Adipose Matrix for Soft Tissue Reconstruction, Plastic and Reconstructive Surgery - Global Open: January 2020 - Volume 8 - Issue 1 - p e2574 doi: 10.1097/G

MEMBER RECOGNITION

The AAFPRS would like to acknowledge the new and upgraded members.

FELLOW MEMBERS

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The AAFPRS Membership Department is pleased to announce that the Member Directory is now online and can be found here: https://connect.aafprs.org/network/members.

You will need your AAFPRS login credentials to access your colleagues information.

The AAFPRS thanks <u>Implantech</u> for their partial sponsorship of this member-only function.

MORE CME, ONE FLAT FEE @ COSM

From Spring Meeting, page 14 fireside chats, view product demos and virtual exhibit booths, and network with your peers from other otolaryngology-focused societies.



More CME and More Value

This year, we're offering a flat registration fee that provides an "all-access pass" to view each of the nine participating societies' LIVE programming, on-demand sessions and interactive e-posters. This means you can earn up to approximately 118 AMA PRA Category 1 Credits^{1M} for one low price. Event better, each presentation will remain online through May 31, 2021, so you can view everything at your own pace.

As you can see, the 2021 AAFPRS Virtual Spring Meeting will provide world-class education and ample opportunities to network with colleagues in a rich virtual learning environment.

Don't miss out on this Couchto-COSM event. Register today at www.aafprs.org/COSM.

Other CME opportunities are available on the AAFPRS website by way of our FaceValue webinars. For now, they are complimentary to AAFPRS members. You can view them here: https://learn.aafprs.org/webinars.



FACIAL PLASTIC TIMES JANUARY/FEBRUARY 2021

AAFPRS MEETINGS AND EVENTS

2021 APRIL 9-10

AAFPRS Virtual Spring Meeting @ COSM

Co-chairs: Celeste Gary, MD; Linda Lee, MD; and Sachin Pawar, MD

MAY 13-16
AAFPRS Masters of Facial Plastic
Surgery
Virtual Conference Format

SEPTEMBER 29-OCTOBER 2 AAFPRS ANNUAL MEETING

Las Vegas, NV
Co-chairs: Jason D. Bloom, MD; Umang
Mehta, MD; L. Mike Nayak, MD; and
Angela, K. Sturm, MD:

APRIL 27-28
 AAFPRS Spring Meeting@ COSM
 Dallas, TX

OCTOBER 20-23
AAFPRS ANNUAL MEETING
13th International Symposium of
Facial Plastic Surgery
(Pre-Conference Workshops: Oct. 19)
National Harbor, MD (Washington, DC

Meetings Education Director:
J. Randall Jordan, MD, AAFPRS
Meetings Education Director-Elect:
Catherine P. Winslow, MD. AAFPRS

UPSTATE FACULTY

From In Brief, page 3 "I'm grateful to have Dr.

Tatum continue his service as chair to this important clinical department," said Dr. Chin. "He is an exceptional physician, researcher and campus leader; Upstate will continue to benefit by his valuable and dedicated service."

Dr. Tatum has served on the Upstate faculty for nearly 30 years serving on numerous committees, including the Trauma Committee, Medical Student Advisor Program, Scientific Reviewer for Institutional Review Roard

AAFPRS members are encouraged to submit their appointments and accomplishments for recognition in this column. Please submit your brief write-up to Rita Chua Magness at rcmagness@aafprs.org.

TEACHING LEAD-ERS AND MENTORS

From Black History Month, page 4 skills to provide an excellent fellowship program, as well as his unwavering commitment to leverage his role as the first African American fellowship director to enhance diversity, inclusion, and equity in our specialty, the AAFPRS is exceptionally pleased he has decided to join our fellowship team of distinguished teaching leaders and mentors.

Editor's Note: This article was written by Fatima Porter-EL, AAFPRS Fellowship Manager. Fatima has been with the Academy for 29 years and has managed the Fellowship Program since the early 90s. For questions regarding the program, please email Fatima directly at fporter-EL@aafprs.org.

The Educational and Research Foundation for the American Academy of Facial Plastic and Reconstructive Surgery Annual Giving Report for 2020

Created to Make a Meaningful Impact

In 1974, the Educational and Research Foundation for the American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS Foundation) was created to foster, promote, support, augment, develop, and encourage investigative knowledge and charitable and humanitarian application of facial plastic and reconstructive surgery.

Mission

The AAFPRS Foundation supports education, research, and humanitarian efforts of AAFPRS members in the service of patients.

General Overview

The Foundation raised \$46,800 in cash in 2020 from 24 individual and corporate donors. Seven companies provided financial support for meetings and educational offerings totaling \$81,250. These funds are raised through a variety of sources including:

- 1. Corporate Sponsorships, support of educational sessions and in-kind donations at AAFPRS Meetings.
- 2. Gifts to the Foundation Annual Fund—an Annual Fund is:
 - The cornerstone of a comprehensive development program.
 - Separate and distinct from money raised from past endowments, such as the Bernstein Research Grants.
- 3. Members, Friends and other organizational donors.

How Your Donation Makes All the Difference

- > Supports the development and implementation of the AAFPRS Foundation's unparalleled educational conferences, scientific meetings and webinars.
- Recognizes and grants monetary awards to outstanding authors of research papers in facial plastic and reconstructive surgery.
- > Supports the Foundation's research program.
- Supports the Foundation's educational and communication portal (AAFPRS CONNECT) which provides educational and communication tools for Academy members as well as a permanent Transcript of each members Continuing Medical Education credits earned via AAFPRS sponsored meetings and activities.
- > Supports the Foundation's FACE TO FACE Program by funding a database to capture patient information.
- > Supports the Foundation's FACE TO FACE Domestic Violence and FACES OF HONOR programs, which matches survivors of domestic violence or our military to an AAFPRS volunteer physician, who provides pro bono services to assist the survivor in reclaiming their life.
- Encourages the collecting of historical memorabilia instructive on the subject of the development of facial plastic surgery and provides funds for the Robert L. Simons Archive and Heritage Center.
- > Supports Fellowship Program database that assists in tracking and management of requirements and application information.
- > Supports our mentor/mentee programs and practice management programs and templets.
- Keeps operating costs of the Foundation down.

Foundation Contributors

The AAFPRS Foundation wishes to thank the following individuals for their monetary support.

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Friends of the Foundation

Friends of the Foundation is anyone who donated less than \$1,000.

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2020 Corporate Supporters

The AAFPRS wishes to thank and acknowledge the following companies and organizations for their support to AAFPRS meetings and educational offerings.

In-Kind Donations

The AAFPRS wishes to thank and acknowledge the following for their generous in-kind contributions to AAFPRS Foundation meetings and educational offerings.

Galderma Laboratories

To make a contribution to the Foundation, please go to www.aafprs.org, select AAFPRS Foundation and Donate Now. Or contact the Foundation at info@aafprs.org.

The AAFPRS Foundation prepares the report of contributions made for each Fiscal Year. Every effort is made to ensure that the information included is accurate. If any inadvertent errors or omissions have occurred, kindly notify the AAFPRS so that we may correct our records.

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