Formal Synopsis Session Title: Practice Management Papers Session Date and Time: September 24, 2011; 1:20 PM

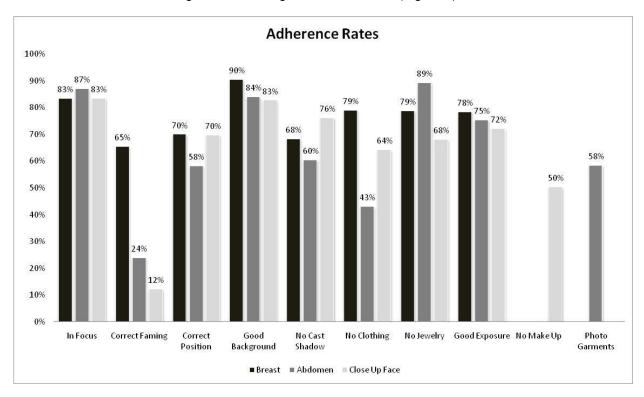
Title: Adherence to Photographic Standards: A Review of Plastic Surgeon Websites

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Background: Photographic documentation is essential in Plastic Surgery. In order to assist plastic surgeons in professionalism, privacy, operative planning, and documentation of pertinent anatomy without distortion or distraction the American Society of Plastic Surgeons/Plastic Surgery Education Foundation (ASPS/PSEF) published *The Photographic Standards in Plastic Surgery*. Adherence to these standards were assessed.

Methods: The 2010 ASPS membership roster contains over 4700 members. To limit the number of members to those more likely to host a website, we utilized the 2010 American Society for Aesthetic Plastic Surgery, Inc (ASAPS) roster of 2600 members. Ten percent were randomly selected. Non-ASPS members, international members with the exception of Canada, members without websites, and those without images of interest were excluded, leaving 122 (4.7%) member websites. Standard views of breast augmentation, abdominoplasty or rhinoplasty images were reviewed. If present, the first and last set of before and after images were evaluated for focus, framing, positioning, presence of uniform background, absence of cast shadow, absence of clothing, absence of jewelry, use of photo garments and exposure.

Results: None of the 122 websites were in complete adherence with the evaluated ASPS/PSEF standards. Evaluation of all 2180 images demonstrated individual category adherence ranging from 39-87%. Specifically, adherences of individual categories of all images were as follows (Figure 1)



Conclusions: We observed that images frequently deviated from ASPS/PSEF standards. The categories with least adherence were framing, positioning, the presence of clothing and cast shadow. Surprisingly, 15% of images were out of focus. Uniform adherence with ASPS/PSEF standards will help distinguish accredited plastic surgeons, promote professionalism, reduce errors, and provide appropriate documentation. Accessibility to photographic standards and guidelines should be facilitated. Additionally, plastic surgeons should continue to update themselves on photographic standards, review their websites, and strive for adherence with those standards.

Figure 1: Adherence rates to individual category standards

References:

1. Plastic Surgery Education Foundation. The Photographic Standards in Plastic Surgery. 2006

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