History

of the Austin-Weston Center

for

Cosmetic Surgery

1978-2000

Harvey W. Austin, MD,
September, 2000
The Beginning

Dr. Austin began the practice in 1978 at the age of 43. Board-Certified, he had already developed and flourished a nine-year practice of Plastic and Reconstructive Surgery in Pittsburgh.

Following a 22 month sabbatical, he chose to stay in the Washington DC area. In late 1978, he established a cosmetic surgical practice, opening his first office at Suite 110, The Regency, 1800 Old Meadow Road in McLean, Virginia.

By doing so, he became the first Board Certified Plastic Surgeon in the entire Washington Metropolitan area to limit his practice exclusively to cosmetic surgery. Dr. Austin may also hold the honor of being the first surgeon in the United States to have moved to an area and simply opened a practice of cosmetic surgery without first having created a base of patients from a reconstructive practice. Established plastic surgeons predicted he would fail.

He created this vision for his practice:

*The Purpose of the practice of Harvey W. Austin, MD, Ltd, is to provide consistently excellent cosmetic surgical recommendations and results in a manner which supports the patients, the staff, the surgeons and the community.*

He obtained privileges to admit and operate at Arlington Hospital and also established a small office operating suite. As his practice began its slow climb, he had time on his hands, so he performed reconstructive procedures, on a volunteer basis, for the inmates of Lorton Prison, the first surgeon to have done so. He spoke about cosmetic surgery to women’s groups, medical students, physicians assistants; in fact, to any one who would stand still long enough to listen. He began giving evening lectures about cosmetic surgery for an adult education center.

His practice slowly grew as other physicians began to refer patients to him. His enthusiasm about the extraordinary results of cosmetic surgery, in the face of the public attitude of disdain for the specialty, drew thoughtful patients to his practice. They in turn referred others.
A boost occurred in December, 1981 when an article was published in the Washington Post about Dr. Austin’s work, *A Day in the Life of a Plastic Surgeon.*

He joined multiple surgeons in authoring a book about cosmetic surgery and used the book, *Better Than Ever,* to more effectively inform patients about various procedures.

By 1983, five years after it began, his practice of cosmetic surgery was arguably the largest and most prestigious in the Washington area and necessitated an expansion to larger space. He and his staff of five moved to occupy the adjacent free-standing building at 1776 Old Meadow Road containing 5200 square feet. This became another first - the first *free standing* practice of cosmetic surgery in the Washington area. This move tripled the potential space, but for the first three years the practice five shared a third of it with a financial consultation business, Jacques Rebibo and Associates.
The Early Years

In 1986, Dr. George Weston joined him as an associate. He passed his Boards in Plastic and Reconstructive Surgery and, within a few years became a partner.

These early years were busy ones as the practice increased ten to twenty percent each year. The two physicians and their enlarging staff developed innovative concepts for the practice designed to create a powerful future.

• They become the first in the area to begin showing Before and After photographs of other patients to demonstrate what a potential patient might reasonably expect. This practice is now commonly accepted throughout the country.

• They continued Dr. Austin’s practice of providing consultation visits without charge, a concept fifteen years ahead its time, only now becoming widespread.

• They developed the concept of the Cosmetic Surgical Consultant, a comfortable and well-informed woman employee who has had cosmetic surgery herself and whose job is to be in the patient’s corner as she chooses what, if any, cosmetic surgery to have. She functions as a constant liaison between doctor and patient and provides individual support for the patient until her/his surgery.

• They developed a trusting relationship with their staff, consulting them before instituting changes in procedure. They adopted brainstorming sessions, based on the notion, “there’s a lot of talent in the room.”

• They created Monday morning staff meetings, the original of which were “Friday acknowledgment meetings.” Important subjects and concepts were discussed at monthly dinner staff meetings.

• They made cosmetic surgery available without charge to each staff member after employment for a year. This policy has benefited their patients also, for those staff members have willingly made their results known. Almost every staff member has requested and had some procedure performed.

• They developed 168 distinctions about cosmetic surgery. These continue to be the cornerstones of their practice.

• Their facility became among the first certified by the fledgling certifying organization, The American Association for Accreditation of Ambulatory Plastic Surgery Facilities (AAAAPSF). Dr. Austin become an Inspector of other plastic surgical facilities for them.

• Dr. Austin authored the lead article presenting a new paradigm of Doctor-Patient
They developed and championed a new paradigm of cosmetic surgery, originally stated as **Cosmetic Surgery is about more than altering features. It is about revealing Essence.** Presently this new paradigm is being stated this way:

**Cosmetic Surgery treats Symbolic Misrepresentation - a concept based on the notion that each person is youthful and beautiful inside but has visual symbols which are both misrepresentative and generative - symbols of anger, sadness, aging or unattractiveness. Cosmetic surgery alters these inappropriate symbols to allow the inner self to be revealed.**
Focus of Innovation - The Aging Mouth

• The Center has become known for a particular focus. In addition to performing all aspects of cosmetic surgery, they have developed and popularized techniques for correction of the aging mouth:

1. In 1982, Dr. Austin created and presented a display on *The Lip Lift - An Innovative Procedure*, at the national convention of the American Society of Plastic and Reconstructive Surgery.


3. In 1991, they presented their expanded and pioneering work about rejuvenating the aging mouth, a heretofore neglected area of aging in the face, to the national meeting of the American Society of Aesthetic Plastic Surgery. This work was also presented at surgical conferences in Las Vegas, Tortola, Istanbul, Stockholm, Beverly Hills and Washington D.C.

The Austin-Weston Center Emerges

Dr. Weston became a partner in 1990 and they changed the name to the Austin-Weston Center for Cosmetic Surgery. In 1991 they created a Ten Year Plan of expansion for their practice, based on a notion that the future could pull, rather than the present, push. Conversation was initiated about the possibility of the Center eventually becoming an institution known world wide, like the Mayo Clinic.

Dr. Weston began giving the yearly Educational Course on Rejuvenating the Aging Mouth at the ASPRS (now ASPS) meeting. It is in its seventh year and always sold out.

They were written up in People Magazine and appeared on the Oprah Winfrey and the Phil Donahue TV shows. They were also invited to be on Geraldo and Jerry Springer television shows but declined in the interest of good taste.

Their practice became demanding enough that they sought a third plastic surgeon and of the sixty applicants, they selected Dr. Robert Sigal - a fully-trained plastic surgeon, a board certified general surgeon, talented, personable, and trained at Harvard and the University of Pennsylvania. Shortly thereafter, Dr. Sigal took and passed his Boards in Plastic and Reconstructive Surgery, becoming doubly boarded. He brought a particular interest in endoscopic surgery and use of the laser. He introduced the use of Botox and purchased a Cytron Laser for the practice. With his formula for tumescence, he began doing large volume liposuction. He bought a half dozen web site names and established the Center as a web site presence.

To accommodate the patient demand they also added two new operating rooms and increased their staff to 20.

They saw that the public lacked reliable information about cosmetic surgery. To fill that lack, they wrote and published 17 columns about cosmetic surgery in the lay press, focusing on their innovative paradigm. They were published as advertisements and have been praised for their candor and informational value. Says Dr. Weston, “Our advertisements do not extol our particular practice. Rather their content supports all practices and all patients by informing the public what cosmetic surgery can and can not accomplish. Informed patients choose wisely.”
The Center Matures

As Dr. Austin, in his early sixties, began to cut back his hours, gradually shifting from a five day work week to a four and then to a three day week, it became clear that a new associate would be required. Dr. Austin passed the mantle of the presidency to Dr. Weston in 1995, continuing his surgical duties, but passing the larger responsibility to his trusted partner.

To quote Dr. Austin,

"We owe an enormous amount of the success of the practice to two people. The first is Jacques Rebibo. Not only is he my most intimate friend, but he is a genius regarding building an organization which truly takes care of its staff and clients. In the early days I turned to him again and again with problems. He has served as our official and honored Advisor for many years.

The second debt we owe is to Werner Erhard, the founder of the personal development and training organization formerly known as est and now known as Landmark Education Corporation. All of our physicians have taken their workshops and they are offered as a staff benefit. Over two thirds of our staff has taken The Landmark Forum. The principles gained have served as the cornerstone of our Center."

Dr. Austin was formally initiated as Elder at the Center Christmas party in 1998. The ceremony was produced by their “personal anthropologist,” Dr. Rebecca Huss-Ashmore, Chair of the Department of Medical Anthropology at the University of Pennsylvania Medical School. Dr. Weston, as President, presented him with a Masai staff, a stool and the traditional red blanket.

In 1998 a fourth plastic surgeon, Dr. Byron Poindexter joined them, forming thus perhaps the largest cosmetic surgery practice in the country. Dr. Poindexter soon passed his Boards in Plastic Surgery,

It was becoming clear that the size of the practice and its huge vision for the future required a reorganization. They hired Phyllis Chorazy CPA, as the ideal Chief Operating Officer. Ms. Chorazy was highly trusted and possessed an intimate appreciation and understanding of the practice, both because she had handled the Center’s finances since 1983 and also because she had been their cosmetic surgery patient. She improved the administrative procedures, relieving doctors of the day-to-day running of the practice and establishing more of a corporate identity. She reorganized the staff so that four department heads reported to her.

She, Dr. Sigal and Dr. Poindexter created a new computer system, simplifying their complex paper system. Two years earlier, the practice had begun using a computer imaging system as an information tool. Patients could see their original and their altered image, helping to inform them what might and might not be accomplished.

Dr. Sigal became the partner in charge of marketing. He had proven to be an effective medical
writer and he spearheaded a major forty page article requested by a prestigious journal. Entitled, *Cosmetic Surgery for the Aged Face*, it was published in *Perspectives in Plastic Surgery* in October, 2000.

Dr. Sigal co-presented the course on Rejuvenating the Aging Mouth with Dr. Weston at the 2000 ASPS meeting in Los Angeles. Dr. Austin also participated on a panel on Perioral Aesthetic Surgery.

Of critical import is that all four surgeons like and respect one another, not only as surgeons but as individuals of deep character and commitment. Such attributes have also been sought when they hire a new staff member. As a result each is self-motivated and works with little need for supervision. Staff turnover has been minimal and usually only occurs when circumstances require a move out of the area.

In 1999 surgeons and staff began a dialogue to develop a mission statement which would be sustainable deep into the future. After they roughed it in, Dr. Poindexter refined the wording. It reads:

**MISSION STATEMENT**

*At The Austin-Weston Center for Cosmetic Surgery, we provide exceptional cosmetic surgical care and results. Our philosophy and our skills enhance the lives of our patients, our staff, and serve as an inspiration for the community.*

**Our Center is a place:**

- Where everyone wins.
- Where everyone walking through our doors feels welcomed and appreciated for who they are and what they dream.
- Where transformations are made possible in an environment rich with passion, knowledge and expertise.

**OUR VISION**

- To be the premier cosmetic surgery center in the world and a leader in advancing the possibilities of cosmetic surgery.

Weekly staff meetings invariably begin with one staff member reading the Mission Statement.
Future History

By the end of 1999, it became clear that the physical space could no longer accommodate the practice with its four physicians and staff of 25. Patients were requesting - and being denied - many ancillary services which other cosmetic surgeons were beginning to provide: permanent makeup tattooing, skin care products, Obaji skin-care regimes, power peels, etc. Worse, potential patients requesting consultations were being postponed for days or weeks. The space simply was not available.

After a months-long search, they selected a desirable site in Reston, the hub of a wealthy and expanding commercial and residential area with a reputation as the “e-commerce center of the world.” The two acre site is adjacent to the Dulles International Airport Access Route and contains a ten thousand foot building. They plan to add an additional five thousand square feet to accommodate future expansion.

Should the future of the Austin-Weston Center for Cosmetic Surgery include its development as an Institute, this site will allow the erection of a forty thousand square foot building.
Interview with George Weston, MD, President, regarding his viewpoint of the history of the practice

Sept 12, 2000

*What do you consider the most important decisions in the establishment of the practice?*

Mostly, they are among the original decisions Dr. Austin made:

- Choosing McLean as the location to start the practice.
- Choosing to create a practice of exclusively cosmetic surgery and moving into a free-standing facility. Both were revolutionary at the time.
- Electing to go beyond the traditional unwillingness of physicians to train others to perform some of the details ordinary felt to be the province of the physician.
- Choosing to be expansive and have other qualified surgeons join him rather than maintaining an individual practice which would stop when he retired. That, combined with his commitment to institutionalize the practice.
- Our joint decision to name the practice the Austin-Weston Center for Cosmetic Surgery.
- His basic philosophy of considering cosmetic surgery to be of far greater importance than it has been considered, by either the lay public or by plastic surgeons themselves. He felt it to be a valid means, not only of looking as good as you feel, but as a valid avenue of full self-expression. Further, he felt it to be one of the “gateless gates” of transformation.
- His being willing to listen to his staff and having cosmetic surgery himself. He put his “body where his mouth was.”

- A few other things of importance:
  - I had cosmetic surgery myself.
  - My joining him was a major event. So was the arrival of Rob and Byron.
  - Interestingly, though, being on the Oprah or Donahue TV Shows was not really important regarding the practice, I don’t think.
  - There were two special patients, Randy and Louise, who spoke of their results in such a way that altered Harvey’s entire view of cosmetic surgery and thus altered our practice.

*What Else?*

I’m on a roll now. Lots of other things…
1. Of the greatest importance is our realization that traditional cosmetic surgical techniques and concepts did not provide the results we wanted for our patients. So we had to invent procedures which would.

2. Another was our appreciation of the ambivalent attitude of our plastic surgical colleagues whereby they favored the reconstructive aspect of their practices and disdained cosmetic surgery. We found it puzzling that they were willing to perform it on others yet unwilling to have it themselves. Our insight into its value permitted us to regard it more favorably.

3. We have made a wise selection of staff and doctors, allowing a “natural growth” of the practice.

4. Harvey was smart enough to take three months off to see how retirement felt, rather than just retire. On returning, he decided not to retire. Until that point his conversation had been very strong! In fact, he returned with more enthusiasm than ever.

5. Our being the first to advertise in the area. We realized that people needed to know what cosmetic surgery could accomplish. We wrote 17 informative columns, but could not interest the media in publishing them as columns. So we purchased the space and published them that way. I guess you would call them “informative ads”. We’ve coined the term, “primary” advertising for them - that advertising which informs the public about a developing industry.

6. The forward thinking of hiring Rob in 1994, perhaps before we absolutely needed an associate. Rob came that early because Harvey was planning to slow down and it takes a full year, practically a fellowship, to train a surgeon in our thinking and techniques. Moreover, it takes a long time to develop a sufficient reputation to have a full practice - three to six years.

7. We hired Phyllis Chorazy as our Chief Operating Officer. The timing was good because Carol, our office manager, couldn’t do five jobs at once. (“I was burning out.”) Phyllis has been the perfect person for the job.

8. Putting in our new computer system.

9. The good luck to have our patient, Judy Welch, on the cover of The Washingtonian Magazine. Not to mention the articles about us in Regardies and Allure Magazines. And quoted in Reader’s Digest and the People Magazine article. All that stuff.

10. Creating the original Patient Consultant, Margaret Butler, in 1981.

11. Carol Adams, presently head of the Consulting Department started working for us in 1983 and started consulting, under Margaret’s initial tutelage, two years later.

12. The idea of not charging for consultations. Patients love the opportunity to speak about cosmetic surgery without having to pay to have the conversation.

13. Buying the computer imager.

14. Dr. Austin’s decision to personally invest one hundred thousand dollars to end hunger in the world via The Hunger Project. This altruistic motive and worldly commitment yielded a deep demand for both excellence and material success. I remember that, out of this, we immediately needed a new operating room.

15. Dr. Austin’s integrity - particularly his decision never to perform cosmetic surgery just for the money. Our rule has become “Never do it unless you are enrolled in its benefit for the patient”.

16. Hiring Elliott J. as a marketing consultant for a little while. While he was expensive and his services seemed limited and of little immediate value, nonetheless we enlarged our thinking because of his presence – and we took over the entire building out of it.

17. Free surgery for the staff.

18. Our stunning success in attracting good staff. I want to note, just so we don’t forget, our OR
supervisors from the beginning. In order, they are: Leslie Gelles, Shirley Goodspeed, Deborah Kelly, Ramina Abrahimoff, Steve Walker, John Hagan, Lisa, Glascock, Melissa Colonamos and Margaret Thur.

19. Dr. Austin stepped beyond the medical hierarchy and hired people on the basis of their character rather than on the basis of medical credentials. And then allowed them to be accountable for what they desired and could perform. We didn’t limit them because they did not have particular educational background. Out of this, we have had an absolutely fabulous staff.

And that’s all I have to say about that. For now. So y’all get back to work now, y’hear?