

FORUM Welcomes 1-800-NEW-HAIR

HAIR TRANSPLANT FORUM welcomes a new advertiser, Newmonics Medical Marketing Corporation, with their 1-800-NEW-HAIR™ program.

This is a consortium marketing concept. Newmonics Medical Marketing Corporation plans to advertise medical services—in this case hair transplant surgery—to the general public in national magazines and newspapers. When prospective patients respond to the ads and call the advertised 800 number, their calls will be received directly by a hair transplant surgeon who has subscribed to Newmonics for that geographic area.

This is an intriguing concept that will probably be very effective.

LEVERAGE YOUR PRACTICE
BRING PATIENTS DIRECTLY TO YOUR OFFICE
THEY CALL 1•800•NEW•HAIR®
YOU RECEIVE THEIR CALLS DIRECTLY INTO
YOUR OFFICE

ADVERTISING IN MAJOR NATIONAL MAGAZINES
"CALL 1-800-NEW-HAIR"
GENERATES CANDIDATES FOR HAIR RESTORATION
IN YOUR AREA



FOR INFORMATION CONTACT
JACK FISHMAN
818-345-6710



NEWMONICS MEDICAL MARKETING CORPORATION

Tiemann Has Various Sizes in Punches

In the November-December 1991 issue of the FORUM an editor's note stated that George Tiemann & Company has square punches, but the range of sizes is limited. Tiemann Vice-President Kenneth Moriarty writes to correct that statement:

"I just want to make you aware that we have 3.5" to 4.75", in .25" increments. We could possible make them smaller and definitely larger, if requested."

The FORUM thanks Mr. Moriarty for this information.


Thanks to Robbins

The FORUM thanks Robbins Instruments, Inc. for their early support. They perceived the importance of this publication from the beginning and helped the editor when he needed it the most.

Robbins has always been on the cutting edge of instrumentation for hair transplant surgery. They now have a Vallis-like double/triple-bladed knife that is available in a range of widths.

At the Forefront with New Surgical Techniques Since 1952

- Orentreich® Original Manual and Power Punches
- Alt Carbon-Steel Hair Trephines (Australian)
- Punch Adapter Handles
- Acrotorque Hand Engine
- Marritt Micro-Graft Dilators
- Dermo-Jet Needleless Injector
- Pron-Pillow
- Hair Transplantation Scissors



- Alt Galeal Elevator
- LaRoe Blunt Dissecting Forceps
- Brandy Multiple-Blade Handle
- Scalp Reduction Instruments
- Vision Magnification Aids
- Punch Sharpener-Stone
- Sterilization Cases
- Video Tape
- Text Books and Reprints of Articles from Journals

DERMO-JET MODEL G, HIGH PRESSURE SYRINGE

• Hair Transplantation • Dermabrasion • High Pressure Injection •

ROBBINS INSTRUMENTS, INC.
 Medical Engineers

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Fees for Hair Transplant Surgery

Dr. Marcelo Gandelman

By the Area and By the Hour

I am commenting on your article, *Minigrafts Cause Maxi-Fees*, from HAIR TRANSPLANT FORUM, Volume 2, Number 2.

When I charged by the graft, I felt tied to the fee previously agreed upon with the patient. If the estimated number of punches proved to be insufficient, I had to do more without additional charge. If my estimate proved to be too high, I had to do fewer grafts and reduce my fee.

For eight years now, I have been charging by the area grafted and the time consumed in one session. The charge is independent of the kind of graft (mini, quad, large graft, etc.).

This policy puts me more at

ease during surgery.

Besides, patients are not well acquainted with the different techniques and the skill required. They do not know that you are charging more for micros because you work harder on them.

The only thing the patient can evaluate is the fact that his friend, who recommended you, has had the same operation; and he expects the same fee.

Despite these considerations, I do not have a standard fee. Since making micros involves more time, I believe that charging by the area and by time consumed is a clear and honest way to set and explain fees to the patient.

Dr. Sheldon Kabaker

By the Session

I have begun charging by the session, which I describe as abbreviated, regular, or extended. I tell the patient that each session consists of a minimum of 50, 100 or 150 grafts, respectively.

The breakdown of circular grafts to mini-grafts to minigrafts to micrografts varies from one patient to another, but the total number of grafts always exceeds the minimum number.

I am not quite satisfied with this system, or with the ease of explaining it to patients, especially when their reference is to charges by the graft.

I look forward to reading the ideas of others in the FORUM.



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