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As the end of residency looms large, a craniofacial fellowship may be just what the doctor ordered. page 9

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By Kendra Y. Mims

*Plastic Surgery Resident* aims to provide readers with career advice to help them advance in their profession after residency by sharing insights on how to create their desired career path.

In this issue, we present ASPS member Amir Dorafshar, MD, Baltimore, associate professor of Plastic and Reconstructive Surgery and clinical co-director of the Face Transplant Program at the Johns Hopkins University School of Medicine.

Dr. Dorafshar completed his general surgery residency and plastic surgery residency at the University of Chicago’s Pritzker School of Medicine. He also completed his research fellowship at UCLA School of Medicine and his craniofacial/microsurgical fellowship at the Johns Hopkins Medical Institute in 2010. Dr. Dorafshar specializes in adult and pediatric craniofacial surgery following congenital, oncological or traumatic conditions.

From his fellowship at Johns Hopkins to tips for maintaining work-life balance, Dr. Dorafshar shares highlights from his career journey with *PSR*.

**PSR: How did you select your fellowship?**

**Dr. Dorafshar:** We did a lot of microsurgical reconstruction at the University of Chicago. I fell in love with head and neck reconstructive microsurgery. Toward the end of my residency, I developed an interest in facial transplantation as a method to improve our reconstruction of the head and neck area. I knew Eduardo Rodriguez, MD, was interested in performing a face transplant in Baltimore. I also knew Baltimore has a steep history in craniofacial reconstruction, particularly in traumatic facial reconstruction. I wanted to learn something that would complement the things I learned in my residency with respect to head and neck microsurgery.

Microvascular surgery is generally about moving tissue from one region of the body to another region, but to do craniofacial surgery, one must have a deeper understanding of the craniofacial skeleton and how to manipulate it surgically. I thought craniofacial surgery would complement my training in head and neck microsurgery.

**PSR: What impact has your fellowship had on the advancement of your career?**

**Dr. Dorafshar:** My fellowship laid the foundation to the rest of my career. I was fortunate to be at the right place at the right time. During my fellowship year I was able to help with some of the foundational work for the facial transplantation project that we completed in Baltimore. My
fellowship also helped me to become recruited as a junior faculty member at the Johns Hopkins Hospital and Shock Trauma. Staying in the same location helped me immensely, as I was familiar with my surroundings and I had excellent infrastructure around me to continue my research projects. Right away, I was also exposed to complex cases and was able to have excellent mentoring to help me through them. This enabled me to write about my experiences, publish them and get more recognized in the field.

**PSR: How important is it to have a mentor?**
*Dr. Dorafshar:* It’s by far the most important thing you can have. Good mentors are the absolute reason I am here today. Without those people to guide you and help you along the way, there’s no way you can make it. Mentorship is the most valuable resource we have.

**PSR: How do you start a craniofacial practice?**
*Dr. Dorafshar:* Get good mentors to help you. Craniofacial surgery is a challenging specialty that requires a great deal of experience and skill. When you’re just starting out, you need someone to help you and guide you along the way. I think having good mentors are the most important and valuable assets that you can have when you start out in your career.

**PSR: When did you publish your first paper?**
*Dr. Dorafshar:* I’ve been writing papers since I was a medical student. I was still working on papers from the year that I spent in the lab during a research fellowship at UCLA, even during plastic surgery residency. I think the last one was published by the time I was a fourth-year plastic surgery resident. By the time I was a Fellow, I had a number of research projects that were in the process of getting published. I guess it’s built over many years. It doesn’t come overnight.

**PSR: How does teaching play a role in your schedule?**
*Dr. Dorafshar:* Teaching is one of the best parts of my jobs and one that I probably enjoy the most. I try to teach at all levels including undergraduates, medical students, residents and Fellows. I give lectures and sometimes lead anatomical dissections focusing on craniofacial anatomy and exposures. I also help lead core curriculum at the Johns Hopkins downtown location, so I facilitate our residents to learn the basic concepts of plastic surgery. I also help with the Resident Cosmetic Clinic, in which our chief residents have more independence with offering cosmetic surgery to our patients.

**PSR: What is the most important attribute to being a successful resident?**
*Dr. Dorafshar:* I think there are several attributes to becoming a successful resident, which may be quite different from becoming a successful faculty member. The characteristics that come to mind are being motivated, driven and determined to succeed, with a humility and compassion for patient care. I also think it is important not just to accept the status quo, but also think how can we do things better through our work and research.

**PSR: What was the biggest non-medical challenge of residency, and how did you handle it?**
*Dr. Dorafshar:* I’m not sure I’ll ever manage the perfect work-life balance—that’s like most of the plastic surgeons I know. I think work-life balance is the hardest thing to maintain. It’s important to stay healthy, fit and active, and not to get so involved that you forget to live the rest of your life. I try to stay fit and active as much as I can by playing squash and doing yoga to maintain my work-life balance and keep things fun and exciting.

**PSR: What do you enjoy the most about your work?**
*Dr. Dorafshar:* I love craniofacial surgery. The face is so important because it’s right there in front of you and everyone sees it. People are stigmatized by it and socially conscious of their facial appearance. The face is so intrinsic to our daily lives, and restoring that sense of normalcy to people’s lives, that’s the most satisfying part for me. That’s why I do craniofacial surgery, whether it’s cancer reconstruction, putting the broken bones of the patient’s face back together after a trauma or making children who are born with congenital differences look close to normal. I think the thing that I enjoy most is the feeling you get when you have just finished a craniofacial reconstruction on a child and you show their parents for the first time what their son or daughter now looks like. They are so happy and relieved that you have managed to help their child that it’s really just an amazing feeling.

**PSR: Do you have any parting words of advice for plastic surgery residents?**
*Dr. Dorafshar:* Work hard. Be determined. Don’t accept the status quo—and try to achieve excellence.