



American Society of  
Cosmetic Dermatology  
& Aesthetic Surgery

## 2010 ASCDAS Membership Survey

Thank you for taking the time to complete this ASCDAS Membership Survey! The information you provide will be kept strictly confidential and should take less than three (3) minutes to complete. As a token of our appreciation for your participation, we will send you one of our new ASCDAS member lapel pins! Please return this survey to the address listed below. If you have any questions about this survey, please contact the ASCDAS offices at 888-531-8330 or via email at [info@ascdas.org](mailto:info@ascdas.org).

(1) Please describe the percentage of your own practice time devoted to cosmetic dermatology procedures:

- a) 0% - 10%
- b) 11% - 25%
- c) 26% - 50%
- d) 51% - 75%
- e) 76% - 100%

(2) If you have any additional physicians in your practice, please describe the percentage of total practice time that is devoted to cosmetic dermatology procedures:

- a) 0% - 10%
- b) 11% - 25%
- c) 26% - 50%
- d) 51% - 75%
- e) 76% - 100%

(3) Have you attended a past annual meeting of the ASCDAS?      YES      NO

Do you think that the ASCDAS should:

(4) Host a separate stand alone annual/national meeting?      YES      NO

(5) Continue a joint annual meeting with the American Society for Dermatologic Surgery (ASDS)?      YES      NO

(6) Merge itself into the ASDS and cease to be a separate entity?      YES      NO

(7) Hold small regional "how to" aesthetic/cosmetic workshops?      YES      NO

(8) If YES to Questions 4, 5 or 7, what topics would be of interest to you for these meetings?

(9) Please state the importance of each of the benefits listed below:

	LEAST IMPT			MOST IMPT	
Networking with Other Cosmetic Dermatologists	1	2	3	4	5
Discount on ASCDAS Annual Meeting	1	2	3	4	5
Complimentary Subscription to the Cosmetic Dermatology Journal	1	2	3	4	5
Regional Training/Demonstration Workshops	1	2	3	4	5
Display Certificate of Membership	1	2	3	4	5
ASCDAS Fellowship Recognitions in Cosmetic Dermatology	1	2	3	4	5
ASCDAS Accredited Cosmetic Dermatology Practice	1	2	3	4	5
ASCDAS Online Training Resources	1	2	3	4	5
Other: _____	1	2	3	4	5

(10) What could ASCDAS do to help you get more out of your membership?:

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(11) Are you male or female (circle one)?

(12) What is your age?:

- a) 18 years – 23 years
- b) 24 years – 29 years
- c) 30 years – 39 years
- d) 40 years – 49 years
- e) 50 years – 59 years
- f) 60 years +

**THANK YOU FOR YOUR PARTICIPATION! A SUMMARY OF THESE RESULTS WILL BE POSTED ON THE ASCDAS WEBSITE ([WWW.ASCDAS.ORG](http://WWW.ASCDAS.ORG)) IN THE NEAR FUTURE.**

\_\_\_\_\_ **For Office Use Only – Not For Publication** \_\_\_\_\_

PRINT MEMBER NAME: \_\_\_\_\_

PRACTICE NAME: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_