

# Do You Need a Plastic Surgery Concierge?

High-flyers are paying for nip-tuck hand-holders. Do you need a plastic surgery concierge?

BY [JOLENE EDGAR](#) PUBLISHED: APR 28, 2023



VINCENT BESNAULT // GETTY IMAGES

**S**urveying the vast and tangled plastic-surgery terrain of her native South Florida, Diane\*, 55, found herself, once again, paralyzed by possibilities. Her earlier exploration had stalled when the standard navigational tools—word-of-mouth referrals, online research, requisite consultations—yielded bad vibes only. Five years later, uneasy from her false start and no less baffled by the surgical purveyors dotting the landscape, she changed tack, hiring a prominent aesthetics consultant whom she discovered, serendipitously, via Instagram.

“She had gotten a facial at a doctor’s office in Miami and posted about it,” Diane says. That post made its way into Diane’s feed, prompting a follow and the usual sizing-up. “One day, it just hit me to make an appointment with her.” Their hour-long Zoom supplied more than a roadmap to reputable providers. “The most valuable advice she gave was telling me exactly what I needed,” she adds—not an isolated facelift, but a full face and neck lift; not a traditional tummy tuck, but a rarer reverse tummy tuck. She left the call with a list of names and a clear itinerary.

The aesthetics consultant (a.k.a. concierge/advocate/broker) isn’t a new calling, mind you. The OG matchmaker, according to the

field's most revered plastic surgeons, is industry insider and author [Wendy Lewis](#), who launched her consultancy, the Knife Coach, in 1997. At the time, with the internet in its infancy and magazines dedicating scant coverage to cosmetic surgery, prospective patients were effectively lost. "No one talked about having work done back then and there was such a stigma [surrounding plastic surgery]," Lewis recalls. "If you were in a certain posh circle, then you might have a conversation over Cobb salad as to who did your Botox," she says. But without such a squad, "you really had nowhere to turn." Alas, Lewis served as a beacon for the adrift and daunted, illuminating tried-and-true treatments for common insecurities and unshrouding elite surgeons famous only to those in-the-know.

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Lewis's clientele included everyone from the impossibly booked-and-busy, to the extremely nervous and deeply private, to the unfortunate lot

who'd been botched and were now desperately seeking a top-notch fixer. "I do a lot of corrective procedures," notes Miami plastic surgeon [Adam J. Rubinstein, MD](#). Consultants frequently send him patients "who've had a rough go and don't want to make the same mistake a second time."

Plastic surgeon [Steven Teitelbaum, MD](#) says that the folks who find his Santa Monica practice by way of consultants can't really be typecast. "I can't say they're the rich ones, the anxious ones, the un-self-assured ones," he says. "Those statements may sound right from an armchair, but I don't think they're true. These patients are just like anybody else."

After nearly two decades of counseling and networking, Lewis shuttered the Knife Coach, believing her service "had run its course," given the rise of social media and the swiftness with

which it was usurping her role. “Instagram changed everything,” she says, providing surgeons with a soapbox from which to spout their philosophies along with a global gallery for displaying their work. Suddenly, the doctor was always in. “They became so much more accessible and open to talking to patients,” Lewis adds. “Why did anyone need a consultant anymore?”

Plastic surgeons can think of plenty of reasons, actually, starting with the obvious: “It can be difficult to determine a surgeon’s credentials, peel back a social-media facade, and critically evaluate before-and-after photos,” says New York plastic surgeon [Umbareen Mahmood, MD](#) . Beyond ferrying patients through a sea of online hucksters and bogus claims, savvy consultants can steer them to uniquely specialized hands in an increasingly niche field. “I see value in this, even for my own wife,” says [Sam Rizk, MD](#) , a New York facial plastic surgeon known for his undetectable nose jobs and deep plane facelifts. When she wanted her belly button tweaked, Rizk was unsure where to send her. “I don’t look past the neck,” he says; “I don’t know who does the best belly button.” But guess who did: his go-to broker.

## The Good, The Bad, and The Gauche

Other doctors question the merits (and integrity) of consultants. [Theda C. Kontis, MD](#) , a Baltimore facial plastic surgeon and president of the [American Academy of Facial Plastic and Reconstructive Surgery](#) , deems them to be wholly unnecessary—downright “predatory,” she adds—contending that people can easily locate a skilled specialist by doing their own legwork (meeting with multiple board-certified surgeons, reviewing photos, ensuring aesthetics align). She urges patients to be wary of these self-proclaimed authorities, pointing out that “most consultants have no medical background and none are qualified to do a facial analysis and recommend surgery.”

Nevertheless, diagnosing needs and prescribing solutions fall within the broker job description, along with vetting doctors, making connections, and hand-holding (upon request). In special cases,

consultants will reportedly accompany clients to consultations and, when permissible, oversee proceedings in the operating room. For the record, the surgeons we interviewed say they've never invited a consultant into the O.R. — and few could fathom a reason to do so.

Some bristle at the “patient advocate” title that these go-betweens adopt. “It inherently implies that the surgeon is a conflicting party,” Mahmood insists. “As a plastic surgeon, I view my role as the foremost ally for my patients— *I* am their advocate.” Underscoring her sentiment, a leading facelift surgeon, who requested anonymity, argues that consultants “sew an innate distrust of surgeons, damaging the physician-patient relationship.”

The murky financial relationship between various brokers and doctors also stirs skepticism. Despite rumors of exorbitant retainer fees and kickbacks, the surgeons in this story deny paying for referrals, finding the suggestion of quid pro quo to be utterly unethical. “As soon as a dollar goes from doctor to consultant, it compromises the best interest of the patients,” Rubinstein says. Rizk co-signs: A concierge “cannot be in bed with any doctor—that is very important.”

For patients, like Diane, cosmetic consultants can be a godsend, improving the surgical journey in unexpected ways. But rather than taking their advice as gospel, one should carefully weigh it as they would any other informed opinion—letting their gut be their ultimate guide.

*\* Names have been changed.*

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