## Technology and Plastic Surgery: Foreword

Samuel J. Lin, M.D. Boston, Mass.

s plastic surgeons, we consider ourselves as innovators and problem-solvers. We may not abide by rote algorithms or protocols for the sake of following well-worn adages. However, we rely on sound surgical judgment and experience that is only attained by years of rigorous surgical training and experience to advance surgical science. We are on the forefront of surgical science, and I believe will continue to be for a very long time.

"Research has been called good business, a necessity, a gamble, a game. It is none of these—it's a state of mind."

-Martin H. Fischer, American physician and author

Over the next several issues of Plastic and Reconstructive Surgery, there will be a special highlighted series of articles on the topic of Technology and Plastic Surgery. Why have such a series of articles? It is the very nature of our field that drives innovation, both clinical and basic science/technological. We have a dichotomous existence, known by the other fields both as innovative (Nobel Prizewinning plastic surgeon Dr. Joseph Murray and kidney transplantation) and otherwise in the treatment of more mundane clinical problems. We have all heard the saying "Imitation is the best form of flattery," and I would say we are constantly being imitated by other medical specialists. However, perhaps the best way to remain at the efficiency frontier is to continue providing the highest quality in patient care and in innovation.

"Today's science is tomorrow's technology." -Edward Teller, Hungarian-American nuclear physicist

However, being innovative has a potential cost, as not all technology and new techniques

From the Beth Israel Deaconess Medical Center, Harvard Medical School.

Received for publication June 24, 2015; accepted September 11, 2015

Copyright © 2016 by the American Society of Plastic Surgeons DOI: 10.1097/PRS.0000000000002126

have equally lasting ability. Indeed, there could be a special edition of the *Journal* devoted to "Once-Tried Techniques and Devices in Plastic Surgery." Nonetheless, we are constantly treading on the balance of innovation or a failed new concept. After all, how do we advance the field other than by careful, deliberate, methodical steps? I am a firm believer in collaboration and the strength in advancing medicine and surgery together with technology.

It is a pleasure to present the upcoming articles and lead authors in this Special Topic Technology and Plastic Surgery series of *Plastic and Reconstructive Surgery*:

The Current Role of 3D Printing in Plastic Surgery

Samuel J. Lin, M.D., and David Dean, Ph.D.

CAD/CAM and 3D Imaging Software in Preoperative Surgical Planning: Who Is Using It and What Are the Practical Results and Indications?

Pravin Patel, M.D., Derek Steinbacher, M.D., D.M.D., William P. Adams, Jr., M.D., and Val Lambros, M.D.

Augmented Reality and Beyond Google Glass: How Can I Use It in My Practice?

Loren Rosenfield, M.D., Evan Garfein, M.D., and Richard Gaster, M.D.

Can I Make Robotic Surgery Make Sense for My Practice?

Jesse C. Selber, M.D., M.P.H., and Steven Clark Bonawitz, M.D.

The Role of Intraoperative Assessment of Perfusion: What Is the Current State and Should I Use It in My Practice?

Michael R. Zenn, M.D., Jeffrey A. Ascherman, M.D., and Lifei Guo, M.D., Ph.D.

**Disclosure:** The author has no financial interest in any of the products or devices mentioned in this article.