



## **EPISODE 177 From Urology to A Highly Successful Med Spa & Aesthetics Practice**

**With guest Dr. Lanna Cheuck**

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LC: “I was now known as the disruptor, the person who rattled cages. It was then that I decided, okay, well, then I'm going to take matters into my own hands and make my own money. But why don't I do aesthetics? What I realized very quickly was that I made a difference in people's lives.”

HF: Welcome to The Doctor's Crossing Carpe Diem podcast. If you're questioning your career in medicine, you've come to the right place. I'm Heather Fork, a former dermatologist and founder of The Doctor's Crossing. As a master-certified coach, I've helped hundreds of physicians find greater happiness in their careers, whether in medicine, a nonclinical job, or something else. I started this podcast to help you discover the career path that's best for you and give you some resources and encouragement to make it happen. You don't need to get stuck at the white coat crossroads. So, pull up a chair, my friend, and let's carpe that diem.

Hey there and welcome back to the Doctor's Crossing Carpe Diem podcast. I'm your host, Heather Fork, and you're listening to episode number 177. You never know how life events can shape the direction of your career and life. Our guest today probably never imagined when she was training hard to be a urologic surgeon at Brown University that one day she would be the founder and CEO of a highly successful company that offers medical aesthetics and facial rejuvenation.

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I've been looking for a guest who could talk to us about starting an aesthetics practice, also referred to as a med spa, and I'm very excited to have found board-certified urologist Dr. Lanna Cheuck, who is the perfect person to talk about this topic. Not only did she start her own aesthetic practice, where her reputation is such that patients fly in from around the country to see her, but she also created a training program for physicians wanting to learn how to have their own practice in this niche area.

We will be hearing how certain challenging events in Dr. Cheuck's life were pivotal in her career transition. I find this part of her story very important, as when we make a plan to follow the long road of becoming a physician, we never know what will happen that causes us to reconsider our direction and where we find our calling.

It is a true honor and pleasure to welcome Dr. Lanna Cheuck to the podcast. Hey, Lanna, how are you?

LC: Good, Heather. Thank you so much for inviting me on your podcast. I'm really excited about this.

HF: I am too, and it's so interesting. When I found you, I was actually in a physician Facebook group, and there were so many people reaching out and wanting to DM you and talk to you and find out how you did this, so they could do it themselves. I've been wanting to do this anyway, but it just confirmed my decision that we needed to have an episode about this on the podcast.

LC: Absolutely. I belong to a lot of Facebook groups, and in one of the groups, there's always a question from physicians saying, "I'm really burnt out, and I'm looking into going into aesthetics", and then there's all this noise around of how that's a terrible idea, and so I would love to answer as many questions as possible.

HF: Well, thank you. Thank you so much. As always, I'd like to begin with your story about where you were and what was going on when things started shifting a bit for you.

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LC: It all started after I gave birth to my first child. She was a premature baby at 30 weeks of gestation, and as physicians, you guys know, we are the worst patients. And I had placenta previa, and I was told to stay off my feet, but I didn't listen, because we don't listen to our bodies. We don't take care of ourselves, and we just think we can work, work, work. All the way up until the day that I bled, I was working, and even standing in the ORs with heavy gowns and being under fluoro and doing very difficult long cases. I remember the day that I started having some bleeding, and I was admitted to the hospital. I was still working. I was on a drip and getting steroids. I was still working. I was on Epic answering questions. This is what we're conditioned to do, we're conditioned to be. And so, after I had my child, she was in the NICU for two months, and we thought, okay, she just had to learn how to breathe. The ABCs, airway, breathing, circulation. She just had to breathe and not be sad when she was drinking milk, which was obviously too sad for her.

And it wasn't until probably when she was 35 weeks of gestation, preemie, that we were told that she had abnormal retinas, and then that went through a whole litany of surgeries and transfers to multiple hospitals, and at one point we had to go to Michigan to see the specialist for pediatric ophthalmology. It was a tough time, and I took off work for about six months, and every day we went to visit our little baby in the NICU. And then one day I just said, "You know what? I just can't see myself being a W-2 employee anymore. Or I could see myself being a W-2 employee, but how the heck can I build an empire for my children or my child who is probably going to be dependent on us for the rest of our life?" Because the surgeries didn't work, her retinas were detached upon examination and the procedure that was performed, actually six, or seven procedures that were performed in the OR, and none of it worked.

And so, I thought, "Okay, I know what to do. Ask for more money." So, if I ask for more money I could feel a bit better about saving for my child for the future. I did that, I asked my chairman for more money, and I was told, "Well, if you can show me that you're worth more, then maybe I'll consider giving you more money." At the same time, I found



out from my male colleagues that they were making \$100,000 more than me, but I was working harder, seeing the more difficult patients, seeing patients in the ICU, and patients from nursing homes. Patients that nobody else wanted to operate on, I was operating on those patients, and I got very, very good outcomes because I'm a very skilled laparoscopic robotic urologic surgeon.

And so, going through all that and then just thinking, "Well, I think I'm worth more, so why don't I prove that I'm worth more?" Within a month, I got another contract in my hand that said, we're going to give you this much more money, and we're going to make you the residency program director of this urology program, which as you know, in academia, that is the mecca. Actually, the chairman is the mecca, but if you're a program residency director, that's the second in line to becoming chairman. And I showed it to him, thinking that he was going to be really impressed, and he would give me something, but he said, "No, I'm not going to be able to pay you this much, you should just leave."

I realized, number one, asking for more money actually put a target on my back. I was now known as the disruptor, the person who rattled cages, the person who was asking for more than what they wanted to give me. And it was then that I decided, "Okay, well, then I'm going to take matters into my own hands and make my own money." And that's when I realized, well, why don't I do aesthetics? Because my father owns a spa in the city, and I just thought, "Well, why don't I learn this extra craft that physicians can learn? And let's see if I like it. I asked my chairman if I could do it, he said, fine.

I took a course, and as a surgeon, I am a see-one, do-one, teach-one. That's exactly how I was. I started even without patients, and I started training people, as people wanted to get into the field, I knew how to do the procedures, but I only injected my mother and my sister.

But what I realized very quickly was that I actually had the artistry for aesthetics, and what I also understood very quickly, Heather, was that I made a difference in people's lives. People just not only felt better and stuff. It wasn't about vanity, it's not that they look in the mirror, and they're like, "Oh, I'm pretty." But they look in the mirror, and they remember who they were before they started getting older, and stress in their lives, and death are all around them.

It really made an impact on me the first time I realized that I was actually touching lives because as physicians, that's all we want to do. We want to make people happy, we want to make them feel better. This was a way that I could still find value in what I do, even though the urology profession is this amazing profession that my parents wanted me to do when I was young, and I could definitely get into their story about how they risked their lives and escaped from communism, and came to America, and made that whole huge change in their lives.

When I learned about their story, about how they sacrificed their lives for the future of their children's education, life, and opportunities, I knew that I had to do everything that I could to afford not only the opportunities and education but also have that financial freedom so that I didn't have to work every single day of my life, which is exactly what I did for the last seven years before I had my child.

HF: Well, there's so much here, but I want to back up a little bit, Lanna. I heard what happened to your daughter when I listened to a podcast when I was trying to learn more about you, and when I heard that she was born early, that she had retinal detachment, and that she wasn't able to see, I felt like crying.

LC: When your kids are born, so many things happen in life, and you never know what's going to happen in life. And so for me, yes, it was something different, yes, it was something that we didn't plan, and who the heck would have thought? We actually have a friend whose son is blind, and she was a good friend of mine. We grew apart, but it's

very rare to have these kinds of issues, and not just from premature fertility, but perhaps some genetic mutation that we weren't aware of.

Things like that happen, but I'll tell you one thing that I've learned, Heather. I am so thankful, and I am so grateful, my child is amazing, and she teaches us so much love. I remember when I was telling my chairman about my child, and he said, "Oh, is it retinoblastoma?" And I took a step back, and I was like, "Oh no, thank God it's not." Because anytime you are faced with any adversity, or any changes, or anything that we feel is just different from what you expect, you just need to step back and just be grateful that it wasn't cancer, or that it wasn't something else.

And I'll tell you this much, Heather. We were told that she probably won't see anything. And that's true in one eye, but in the other eye, she's able to see light, but she's able to see more than light. She's able to see colors, she's able to see things that are in front of her. And I think probably one of the things that I've learned the most is when she was first born, we didn't think she could see anything, and I don't think she saw anything. But as she grew up, we realized that maybe just her brain, and just the way that our brains are so malleable that it's able to put together the picture. So, now she's able to walk and not bump into huge objects, which is amazing. She's able to play a video game very close up with the little vision, the little peripheral vision that she has in the one eye.

So, it's really amazing because I feel like miracles happen all the time, but to be told that your child may never see anything, and then just realizing that not only can she see, but now she went to a school for the blind, and she actually sees more than her friends. And so, she's the one who's leading her friends.

HF: They say it's not so much what happens to us, it's how we respond. And you took this as an opportunity to figure out how you could have the time and the resources to be able to be available for her and your family and also have a career that gave you the flexibility to be who you needed to be. And we know in medicine that can be so challenging, especially when you're a surgeon. But there's more to your story of how you really had to figure out how you wanted to respond to another difficult experience that you had.

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Do you want to tell us a little bit about what happened with the situation at work where they weren't paying you what was equitable? And even when you presented a competing offer, they weren't really willing to work with you.

LC: I started doing aesthetics on the side and I started growing, but I can never fully grow because I can never really put myself out there and market myself. And I was too afraid to leave. And as a lot of physicians who feel burnout or the situation has changed and or they've had children and they want to pivot, they always have one foot out the door. But it's very difficult for us as W-2 earners, as the mentality of being a surgical intern then a resident to then go out and do something completely different and become an entrepreneur. We're just not built that way.

And so for me, it was more of let me still do this on the side, even though I was told I couldn't do it. But then I was eight months pregnant and I was calling to the HR office and I was blindsided because I was told the three words that nobody else ever wants to hear in their lives, which was, "You're getting fired."

HF: Oh no, that's terrible.

LC: To this day, I'm like, how the heck does she look at someone waddling into the office at eight months pregnant and just tell them you're getting fired? It was like nothing to her. But I'll tell you what. It was the best thing that's ever happened to me. It was the best thing that's ever happened to me because sometimes we all need to push in life and give us that nudge. And when you have no other option, then failure is not going to happen. Because there's no safety net. There's no backup plan when you're the backup plan. I was the only breadwinner in my family. My husband actually stopped working in HR so that he could take care of our child full-time.

And so, when things like that happen and you have no other choice, you just go and you just do it and you just start sprinting and you don't look back. And that's exactly what happened. I remember days I was in my father's spa waiting for that one patient to come

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that I would get per week and then no show. Or then they show and they thought everything was going to be for free. And so, I remember those late nights, the tough days where now I had a newborn child at home, but I had to go back right away because I had to work for them when I didn't have a job anymore.

I was able to get a good severance package and I just chalked it up saying, "You know what? This is the best thing that could happen to me." And I'll tell you what happened after that was that I put myself out there. I started becoming more visible. I went on social media because now I can, now nothing is holding me back. Now I don't need to play small. Now I can do whatever I want to do and put myself out there. And that's exactly what I did.

And then day by day, slowly but surely, I would get one more patient maybe every day or every week, however, it was to the point where I started becoming busier, busier. And now I have a huge practice in Manhattan near Central Park South and Columbus Circle near the plaza. And I opened up three other additional locations. I have four locations. I'm a national trainer for aesthetics in Galderma and I speak as a luminary for laser companies and in-mode radio frequency technology. And now I'm a mentor and I have my own platform because back then nobody gave me a platform as a urologist going into aesthetics. So, I made my own platform. I started training. And so, that's kind of how everything happened that helped me pivot into aesthetics.

HF: Well, when people hear success stories like yours, they often think this isn't possible for me. You have some special super talent. And people don't have to go to the degree that you have, Lanna, but before we even really talk about how you became so successful in terms of, "Is this a real natural gift for you?" Would you like to just describe what a day it's like on the job? So, if the physician is trying to think about, "Well, what exactly happens? Is it even something I want to do?" Help them envision what's going on day to day.





LC: Absolutely. As a business owner, you're kind of pretty much on 24/7. For me to say you have better work-life integration. You make it what it is. And when you have your own business, it is like your baby and you have to take care of it. A typical day for me. I now, thankfully, because I have a huge team, I have about 20 employees. I have two PAs. I have an NP who now become my partner in two other locations. I have a CRNA. I have an OB-GYN. I have facial plastics and oculoplastics that work with me.

And so, I only work, when I say I only work, I am in the office injecting three days a week. When I inject those three days a week, I have patients coming from all over. They either drive in or they're local or they're flying in. And it's not just the country, which is amazing, but it's across the world. We get people from other countries, which really speaks volumes about social media and how social media can bring people to come see you from afar. Just last week, we had someone from Amsterdam, and then the week before Hong Kong. And so, they're flying from Georgia and all that. It's within the US but also outside.

And then I train, probably I would train like once a month, but now I have the injectors that I've hired to train and they've been with me. I've trained them and they now do all my techniques. And all my other injectors are the ones that are seeing the patients. I want to get them busy. And of course, there's going to be a subset of patients that just want to see me. So, they see me.

I price differently for me. I do charge a premium. I don't discount myself. And in the beginning, I thought that by charging high prices, I wouldn't get anybody. But what I realized was that when people see the value in you, and you're really good at something, you don't need to discount. And that's something that I always talk about. I do some training, usually physicians or nurses or PAs, they usually come from near or far. And sometimes they fly in to see me. Actually, most of the time. We do get some local people as well but a lot of people flying in from all over to see me.

And then I also love to speak because I realized that I can impact lives by telling my story. I can impact lives by teaching them something else. And if I could help somebody else, Heather, who was in my situation, that would give me so much pleasure. But it's not easy. It takes a lot of grit. It takes a lot of that hustle mentality. And you got to eat, breathe and talk business. And you have to always have that on your mind.

I talk a lot about how to be a good business person, and how to be an entrepreneur. What are the qualities? What are some of the values that you need to be an entrepreneur? And certainly, nobody needs to do what I do. But I do what I do because once I grew into that niche which is the full-face celebrity, like a facelift, there were just so many other things that I could start doing now that I earned that trust.

And that's why I built communities, a Facebook group of physicians who are in the aesthetics field or want to get into the aesthetics field. And so, we have a community that gives advice and mentors. And then we decided, we have a huge community. It's actually now over 30-something thousand injectors in our community.

And we said, "Well, why don't we just go to these different companies? And because there's power in numbers, why don't we get better pricing on things like a GPO, a group purchasing organization?" Then we started our face med store, basically, because we needed supplies for our practices. And why not just buy in bulk and then share the savings with all of our members? And so, that's another thing that spun off of just building a community and building a network where people can rely on each other for advice and mentorship and training.

HF: You're doing a lot of things. And we don't have a lot of time left on the podcast. But there are so many things I want to ask you a little more about the nuts and bolts for the physician thinking about this. And for people who aren't that familiar with what you actually do when you have an aesthetics practice, can you describe, a patient comes in, what are you looking at? What are you offering them in terms of injectables or a non-surgical facelift?

LC: Yeah. Neuromodulators, of course, and there's multiple different companies that make them. Of course, everyone knows Botox by brand name. This part is actually my favorite. Fillers, thermal fillers, Radiesse, Sculptra, which is a biosimulator, anything that's going to help replace and or enhance and give you more volumization, give you smoother skin, decrease fine lines and wrinkles because of the dynamic movement. Those are the things that we do, plus lasers and plus Morpheus. Everything that we can do in a regenerative way to help your body remake some of that collagen. We also do sexual health. We offer a lot of services for sexual health.

But we are first and foremost known as a facial aesthetics practice. And so, people that are coming in, they're going to come in for that full face rejuvenation and then they're going to see what else we offer and then do all the other things. That's why we started expanding our services slowly.

HF: Excellent. We talked just a little bit before about how this is something that's not necessarily just vanity, but when someone looks better, they have more confidence and it can be transformative for them. Do you have maybe an example of someone who comes to mind when you think of that transformation for someone?

LC: One of my first patients. That's how early I learned it. One of my first patients came to me and I did a full face rejuvenation. I just came out of training and I found this patient. She actually came into the spa looking for other services, but then saw that I was doing procedures and she let me do her whole face. And this was over a series of two to three visits. And she said to me, "Dr. Lanna, people at work actually treat me better." And it was the first time that I realized, "Wow."

Because of how we look and how we feel and just our presence and our energy and our aura, everything emanates from how we feel inside. So, if you feel better, if you look your best, if you feel your best, if you look rested and youthful, you can succeed more and people will treat you differently. I've had people that have gotten raises. I've had

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people that have gotten promoted simply because they looked better. They felt better. They were more confident and they were in such a positive space that affects every single part of you. So, absolutely. I see that happening all the time.

And also in aesthetics, guess what? It's actually good to be a woman, especially a minority woman. When I got into robotics and urology, I was a 1% of minority female robotic urologist that's out there. It was like a man's world. And so, in aesthetics, it's actually good to be a female. Who doesn't want someone who knows how they feel and knows what they want from an artistry standpoint? Anyways, it's not a detriment to be a female in the aesthetics field.

HF: And you had mentioned that it's great to be a woman. Now, should a male physician who might be thinking about this, just write it off as "I should just leave this to the female physicians?"

LC: No, absolutely not. No. It's basically anyone who has a passion for aesthetics. As long as you have passion for something and you really care about it, you can learn, you can take invest in yourself, get the proper training, get really good at your craft. And that's how you'll succeed because when you're really good in your craft and you're a good person and you treat your patients the right way, you can be very successful in just those three things.

HF: Do you know male physicians?

LC: Absolutely. My mentors are male physicians and have done very well. My first mentor was a vein specialist. He was an anesthesiologist pain physician who went into veins and subsequently and then trained me on aesthetics. And then subsequently sold his practice for \$180 million. And then my current mentor is someone, and my partner is someone who is a retired ER physician. It's not specific just to men or women, but we get men and women. I would say men make up about 10% of the aesthetic space, but we also do sexual health procedures and hormone optimization. Men, like their bro talks. And so, there's a lot of things that men also come to us for.

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HF: Well, that's a really good point. It's interesting that you do both. And I'm curious if we have a physician listening who maybe they are in family medicine, they're not in a surgical specialty, and they're wondering, "I don't even know if I have that aesthetic gift", how do they even start to think about exploring this area? And if it could be a fit for them.

LC: First, they have to take a course. They have to take a course, they have to see how they feel holding a syringe. I could pretty much tell from the first 10 to 15 minutes of training someone since I've trained thousands of people if it's going to be easy for them or not. And that's not to say that you won't be successful if you can't hold a syringe the right way, but it takes a lot of practice as well. Rarely do I see someone who just gets into it and it's just great off the bat. The people that do the best are people who are proceduralists. That's the bottom line. Those are going to be either CRNA, your anesthesiologist or your interventional pain spine. People already doing a lot of procedures, working with needles every day.

Those are the people that I see tend to really flourish well with the technical part of it. Of course, the aesthetics part of it is a little bit different. You have to learn the talk and you have to visualize in your mind's eye exactly what you can do to help that patient achieve their goals, but also understand their goals and also understand the anatomy.

I think it's really important to start with getting some good training and then just starting to inject. And to inject could be injecting your family members, your sisters, your mom, and then just seeing how you feel about that. And then once you realize if this is right for you, and you may not realize it till later on, because my first couple of patients that I did, one basal bagel had a chronic seizure. I thought I killed her. And then the second patient I injected was my mom and she developed Bell's palsy. Maybe related, may not be related, but I thought I gave her a stroke. And so, I'm surprised I even made it this far, but I kept pushing.

They always say winners are just losers who tried one more time. And so, it's really the people that I see that are really doing well in this field are people who are consistently pushing themselves, getting educated, showing up every single day, having a goal in life, but also just not afraid to go out there and market who they are, what they do and telling everyone what they do. And I think that's really important too.

HF: That is really interesting that you had those experiences and it didn't stop you. I'm curious, Lanna, when you think about yourself, were there any hints that you had this aesthetic gift earlier? Because I'm curious if a physician might be wondering, "Well, I don't know if I even want to take this course and invest in it. Maybe I can handle a needle well, but I want to know exactly what to do with a needle."

LC: I love this question. Absolutely not. I was never artistic, or creative growing up. I don't draw well. I don't even know how to put on makeup, to be honest. I pay a makeup artist a lot of money every week to come and do my makeup. But for some reason, I'm really good at this. So no, you may not be an artist. It doesn't mean that you can't be good at this. Now, obviously, if you're an artist, that gives you a leg up, but it just means that we never developed this part of our brain until we had to.

HF: Well, that's helpful. I'm incredibly an artist myself, but I love dermatology and I never did a lot of facial rejuvenation except for peels and the Obagi program. But I really agree with you that when you help someone feel better, it can be transformative is, I saw that with the Accutane patients and clearing up those faces from acne and the scarring. It is an important area. And I'm sure some people poo-poo it as this is not being a real doctor, but I think it's important that we not judge other people because we all have our own path. And my motto really is you have to figure out what's going to work for you because no one else walks in your shoes.

LC: Absolutely. And thank you for saying that because I did get a lot of hate when I started this. I was kind of cyberbullied quite a bit. Yeah. Which then led me to create our

Facebook group. Because if I wasn't comfortable sharing my journey in a Facebook group where I was ridiculed, then I would start my own group. And now we have over 30,000 members. Every time there's some sort of rejection or failure, it just leads to redirection and you just have to change it and mold it in a way to spin it into a positive thing. Everything in life that you think about without the bad, there is no good. So, it's never a linear process to become successful. It's always up and down and all around and circling back. But at the end of the day, you just keep going at it.

There are a lot of other people in my shoes. And so, that's why I want to be a mentor to those people who are starting this journey who may not be getting all the help, the mentorship that they need. And so I'm that person who's trying to help others. And I do believe my mission and my calling is to help others succeed in the business of aesthetics.

HF: I love that you shared that, because I can't tell you how many times I hear people say, "Well, I don't want to write that article for KevinMD, or I don't want to put this on my LinkedIn, or I don't want to put myself out there because what will people say to me?" They're afraid of criticism. And you just gave a great example of how you shouldn't be afraid of it. Because it actually can increase your resolve to follow your calling and your mission. And if we put stuff out there that pleases everybody, are we really pleasing anybody? And are we serving anybody if it's all catered to not upsetting anybody or not challenging them or not pushing an edge?

LC: Absolutely. It's not for the thin-skinned people, which I am. I'm a people pleaser and when people are mad at me or people say mean things on the internet, it really affects me. But what I realized is that none of what they say is about me. It's a reflection of them. And I pretty much get hate every day. I can go into all the things that people have done to me, other physicians, other female physicians, and male physicians as well. And recently trying to get us kicked out.

All these things and we just end up being stronger because at the end of the day, we're good people. And when you're good at your craft and you're a good person and you help other people, no one can really take me down really. And if they do, I know I have enough confidence in myself to build back up. And so, I do what I do every day because I love it. I try to help out as many people as I can. But yes, every day there are people, there is some negativity always because people don't want to see you succeed. And they are fine when you're not making waves and you're not rattling cages and you're not being a disruptor. But once you are, people will start targeting you. But guess what? All the people in the world, all the women in the world that have ever become any trailblazer had to rattle some cages and had to push through that and break the glass ceiling. And so, I've kind of made it my mission now to not let that bother me and support other people and help them in their journey.

HF: Well, congratulations to you, and you have excellent patient reviews and you're obviously doing a high level of work that's helping people in the niche that you chose. And it's a free country. So, I'd love it if you could tell the listeners about how to get in touch with you if they're interested in finding out about how you train physicians.

LC: Absolutely. I have a website, but before I talk about my website, Instagram is so key because you can see all the before and after work that we do from training to patient procedures. That's going to be Doctor Lanna, who's on Instagram. Doctor Lanna spelled out, and also on TikTok as well. And then my website is doctorlanna.com.

HF: All right. Well, Dr. Lanna, we'll have all that information in the show notes and I thank you so much again for coming on the podcast to share your story.

LC: Thank you so much, Heather. I really enjoyed it.

HF: All right, well thank you. All right, my dear listeners, I appreciate you being here. I couldn't do this without you, I wouldn't want to. I always love to ask you if there's





someone you think could benefit from hearing this podcast. And it doesn't have to be someone who's interested in aesthetics practice, but more needs some encouragement to follow what's going to be best for them. And if they're feeling that medicine or the practice that they're in or how much they're being paid really isn't working for them to take some action to find out what will help them feel like they're doing what they're meant to do in a way that serves them and their family.

Please share the podcast. Even just one person will be great. And as always, don't forget to carpe that diem and I'll see you in the next episode. Bye for now.

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Podcast details

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