



An Advisory Opinion adopted by the Alaska Board of Nursing (AKBON) is an interpretation of Alaska law. While an advisory opinion is not law, it is the AKBON's official opinion on whether certain nursing procedures, policies, and other practices comply with the standards of nursing practice in Alaska. Facility policies may restrict practice further in their setting and/or require additional expectations related to competency, validation, training and supervision to assure the safety of their patient population and/or decrease risk. National evidence based standard references are included.

OPINION: Medical Aesthetic, Cosmetic, and Dermatologic Procedures.

APPROVED DATE: November 6, 2024

REVIEWED DATE: 11/7/17, 11/6/2024

REVISED DATE: 2/7/18, 11/6/2024

Within the Scope of Practice/Role of APRN RN LPN CNA

ADVISORY OPINION

The Alaska State Board of Nursing (AKBON) receives frequent questions regarding **Medical Aesthetic, Cosmetic, and Dermatologic Procedures**. The purpose of this opinion is to provide guidance to nurses. In accordance with Alaska statute 08.68.100 the Alaska State Board of Nursing (AKBON) has approved the following Advisory Opinion on November 6, 2024.

POSITION STATEMENT:

The Board acknowledges the following Medical Aesthetic, Cosmetic, and Dermatologic procedures are within the scope of nursing for a Registered Nurse and Licensed Practical Nurse provided the following guidelines are followed:

1. The nurse may perform the procedure who has the documented and demonstrated knowledge, skill, and competency to perform the procedure pursuant to the Nursing Scope of Practice.
2. There are agency policies and procedures and any required protocols in place for the nurse to perform the procedure.
3. The nurse is compliant with licensure or certification by any other regulatory body (other than the AKBON) and has met all requirements established by any other regulatory agency which has

- authority over the procedure.
4. The nurse maintains accountability and responsibility for nursing care related to the procedure and follows the accepted standard of care which would be provided by a reasonable and prudent nurse.
 5. Clients have granted informed consent. In obtaining informed consent for a nursing intervention, the nurse shall provide the patient/client/family with the nature and consequences of any procedure, the reasonable risks (if any), possible side effects, benefits, and purposes of the procedure and any alternative procedures available.
 6. The use of any of these procedures does not authorize the licensed nurse to diagnose or prescribe.
 7. Procedures are not performed independently. Procedures are authorized pursuant to Nursing Standards and Practice and is performed under the supervision of a physician/APRN/PA who has the knowledge, skill, and competence to perform the procedure, and has performed an initial, documented history and physical assessment/evaluation and developed a client-specific medical treatment plan. This includes ongoing involvement of the provider, verifies an established client-provider relationship, and prevents the nurse from medically diagnosing, determining the need for medical treatment, and prescribing/dispensing. It is within the scope of practice for a registered nurse to execute the medical orders from a licensed physician/APRN/PA. The physician/APRN/PA must be properly trained in the aesthetic, cosmetic or dermatologic procedure.
 - A change to the treatment plan or initial order requires that the provider perform and document additional history and physical assessment/evaluation prior to the implementation.
 8. Telehealth is acceptable for the physical assessment/evaluation by a provider to ensure an established and ongoing relationship between the client and prescribing provider. Providers should review telehealth regulations.
 9. It is the responsibility of the physician/APRN/PA to be aware of the extent of training and the ability of the nurse to competently perform the procedures and meet the standard of care for the procedures.
 10. The nurse may administer the treatment only after the physician/APRN/PA has assessed the patient and a plan of treatment has been determined. This plan shall include, but not be limited to the location for injections; dosage, post procedure care and possible follow up.
 11. Nurses performing this procedure shall be working under supervision of a licensed physician/APRN/PA, who is available to the nurse in person or through electronic communications during a procedure for any further consultation and management of any potential adverse events.
 12. The RN/LPN is excluded from administering any aesthetic or cosmetic procedures to pediatric patients/clients (defined as under the age of 18).

Competence Acquisition

The nurse must acquire education that includes a supervised practicum resulting in a competency evaluation commensurate with the procedure. Components of the education include, as appropriate to the specific procedure, but are not limited to:

- Anatomy and physiology.
- Pathophysiology of the integumentary system and supporting structures.
- Cosmological and dermatologic conditions.
- Wound healing principles.
- Safe use of product/device/equipment.
- Side effects and management.
- Management of emergencies.
- Patient and environmental safety.
- Training program for healthcare professionals

Practice

Nurses licensed by the Board practice within their scope, are responsible and accountable for their nursing judgments, actions, and competency and do not perform activities outside their scope of practice.

The patient assessment must be performed and documented by a registered nurse and duly authorized prescriber. The performance of the procedure is pursuant to the orders of a duly authorized prescriber. The nurse must verify the orders from a duly authorized prescriber to include the patient's name, valid order date, medication or substance name, dosage, route, anatomical site for administration, specific administration directions and prescriber signature.

It is not within the scope of practice for a nurse who is not authorized to practice as an advanced practice registered nurse (APRN) to medically diagnose, or to prescribe medications or treatments.

It is not within the scope of the RN/LPN who is without APRN licensure and prescriptive authority to:

- select the medication/solution, dosage, device or device setting to be used in the performance of a cosmetic or dermatological procedure.
- purchase or obtain a drug, substance, controlled substance analogue or immediate precursor in any schedule or class to be used in the performance of a cosmetic or dermatological procedure independently or as an agent of the prescriber.

It is the Board's position that nurses whose practice includes aesthetic or cosmetic procedures may not practice in an organization that does not have policies and procedures that include:

- A requirement for informed consent.
- No patients under the age of 18 years old are to be administered an aesthetics or cosmetic procedure by a nurse
- A requirement for a comprehensive, documented evaluation.
- Recommendations for self-care.
- Follow-up recommendations.
- Situations that require referral.

- Management of side effects; and
- Provisions for emergent care

Documentation criteria must include:

- Review and verification of informed consent that clearly informs the patient of the operator's qualifications, licensure, and expected outcomes of the procedure.
- Assessment data inclusive of past medical, surgical, allergy and medication histories.
- Skin typing/classification.
- Sun exposure history.
- Current cosmetic/dermatologic product usage.
- Exclusion from treatment criteria.
- Identification of and evaluation of test site as indicated.
- Specifics of procedure performed and patient response to procedure; and
- Directions for referral back to or consultation with the duly authorized prescriber of procedure.

The nurse must document and provide the patient with written pre and post procedure education which includes, but is not limited to, self-care instructions and follow-up recommendations inclusive of continued and emergent care needs.

References

Wyoming Board of Nursing (2022). ADVISORY OPINION AESTHETIC & INFUSION THERAPY PROCEDURES. <https://drive.google.com/file/d/1sXCg2oJ1AuK9clfea-JW1S3-sxdarnTc/view>

Texas Board of Nursing Bulletin (2020). See pages 8-10.

https://www.bon.texas.gov/pdfs/newsletter_pdfs/2020/July%202020%20Bulletin%20Web.pdf

Mississippi Nurse Practice Act. (n.d.). Mississippi Board of Nursing. <https://www.msbn.ms.gov/laws-rules/nursing-practice-act>

· *Botox Advisory Opinion.* (n.d.). Alaska Board of Nursing. chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://www.commerce.alaska.gov/web/Portals/5/pub/NUR_Position_Botox_2018.02.pdf

Oregon Board of Nursing. Prescriptive and Dispensing Authority in Oregon for Advanced Practice Nurses.