

Cosmetic Procedures: Practice Guideline for Registered Nurses and Nurse Practitioners

The College of Registered Nurses of Newfoundland and Labrador¹ is the regulatory body for all Registered Nurses (RNs) and Nurse Practitioners (NPs) in the province. The primary mandate of the College is public protection. The College achieves this by ensuring that all RNs/NPs meet the requirements for registration and annual licensure, and by promoting standards for safe, competent, and ethical nursing practice. This practice guideline addresses practice expectations and considerations for RNs/NPs when engaging in cosmetic procedures². Cosmetic procedures may include, but are not limited to, treatments such as dermal fillers, volume enhancers, collagen stimulators, microneedling, lipolysis, and neuromodulators such as Botox.

Scope of Practice

Scope of practice of the profession is impacted by provincial and federal legislation, standards of practice, entry-level competencies, ethical code, regulatory documents, and other organizational standards, such as those developed by experts in a particular area or a special interest group (SIG). All applicable legislation, regulations, and standards associated with the provision of cosmetic procedures must be followed. While cosmetic procedures are within the scope of the nursing profession, RNs and NPs must determine if cosmetic procedures are within their individual scope of practice. To do this, RNs and NPs must determine if they have the education, authorization, and competence to safely perform the cosmetic procedure and manage the outcomes of care.

Education

Entry-level education (e.g., Bachelor of Science in Nursing, Master of Nursing – NP, etc.) does not provide RNs and NPs the competence (necessary knowledge, skills, and judgement) to safely perform cosmetic procedures and manage the outcomes of care; therefore, continuing education, which includes both theory and practice, is required.

The College does not endorse any particular course(s) for RNs and NPs to gain the individual competence in the provision of cosmetic procedures. There are several organizations or groups in Canada that focus on cosmetic procedures and offer education and training. Some of these include, but are not limited to:

- Canadian Society of Aesthetic Specialty Nurses (CSASN)
- Canadian Association of Medical Aesthetics (CAMA)
- Canadian Board of Aesthetic Medicine (CBAM)
- THMA Consulting Inc: Medical Aesthetics Training and Mentoring

¹ Herein referred to as the “College”.

² Also referred to as medical aesthetics or aesthetic nursing.

It is the responsibility of RNs/NPs to ensure that any initial and ongoing education and training they undertake provides essential competencies to integrate the knowledge, skills, and judgment to perform procedures safely. RNs/NPs who perform cosmetic procedures must be engaged in continuous learning related to this area of practice to maintain their competence. Furthermore, RNs/NPs must ensure education and training meets industry standards, is evidence-informed, and demonstrates best practices.

NOTE: Each cosmetic procedure must be considered individually when determining if it falls within the RN's or NP's individual scope of practice and competence.

Authorization

RNs/NPs must determine if they have the appropriate authority to carry out activities within the practice setting. RNs must work in collaboration with a qualified authorized prescriber (e.g., NP or physician) when providing cosmetic procedures. RNs require authorization in the form of a direct order or care (medical) directive from an authorized prescriber with the appropriate competence in cosmetic procedures. Policies that outline when an assessment by the authorized prescriber is required, as well as how to follow up with the authorized prescriber when there are concerns about the appropriateness of a care directive for a specific client must be established. If the RN determines the care directive should not be implemented, the authorized prescriber must be notified, and the discussion and outcome(s) must be documented. Additionally, RNs require care directives from the authorized prescriber to carry out interventions or administer medications in the event of unintended care outcomes.

RNs/NPs must adhere to the rules set out in legislation (e.g., Food and Drugs Act, Food and Drug Regulations) related to purchasing medications and products for the provision of cosmetic procedures. Medications and products purchased for cosmetic procedures must only be used within the practice setting(s) in which the authorized prescriber provides oversight and authorization for RNs performing cosmetic procedures.

As authorized prescribers, NPs with the individual competence can prescribe medications and products approved by Health Canada for cosmetic procedures, as well as perform cosmetic procedures for clients. In addition, NPs may act as a clinical director for the provision of cosmetic procedures and provide oversight for RNs performing cosmetic procedures.

NOTE: If the NP is not performing the cosmetic procedure but is authorizing an RN with the competence to perform it, the NP is still required to have obtained the necessary competence through continuing education.

NPs providing authorization for the RN to perform cosmetic procedures must determine the appropriate level of supervision required. Considerations to determine the appropriate level of supervision include:

- the cosmetic procedure being authorized
- the client characteristics, such as health status and specific health care needs
- the education, training, and experience of the RN
- the setting where the cosmetic procedure is being performed and the available resources and environmental supports in place

Following an assessment of the level of risk to client safety, it may be determined that the NP must be onsite to provide the appropriate level of supervision; however, when an NP determines that they do not need to be onsite for supervision, based on the assessed level of risk to client safety, they must be available for consultation and assistance.

For more information related to care directives and medications, refer to the most current version of Care Directives and Preprinted Orders and Medication Management documents on the College's website.

NOTE: Some practice settings may supply medications that can be purchased by the client. NPs are authorized to dispense medications. As per the Pharmacy Act, RNs who are not working within the health authority (e.g., NLHS) are not authorized to dispense medications to clients.

Competence

RNs/NPs must be able to integrate and apply the knowledge, skills, and judgment required to safely perform cosmetic procedures and manage the outcomes of care. A client assessment must be completed before performing a cosmetic procedure and RNs/NPs must be able to determine if the procedure is not appropriate for the client and not within their individual competence. RNs/NPs assess and recognize risks for their client and implement strategies to decrease the risk(s).

The physical environment, including access to emergency medications and equipment, must support the safe performance of the procedure and enable the RN/NP to safely manage the outcomes of care. Appropriate resources, both human and material, must be in place to monitor and intervene in case of an adverse reaction. In addition, RNs and NPs must have the competence to safely use, care for, maintain, and perform quality controls for any medical devices or equipment, as outlined by best practices and/or as required by the manufacturer. Furthermore, medical devices used for the provision of cosmetic procedures must be approved by Health Canada.

Informed Consent

Informed consent must be obtained and documented in the client's health record. Information that the RN/NP must communicate to clients before performing a cosmetic procedure includes, but is not limited to:

- what the client can expect
- all known risks, possible side effects, and benefits
- anticipated outcomes of the procedure
- potential complications and how the complications could manifest
- when to seek medical attention
- what could happen if the client chooses not to seek medical attention

Potential risks associated with the use of testimonials, endorsements, or other representations of opinion (e.g., the potential to breach privacy and confidentiality) must be ethically managed. Informed consent must be obtained and documented prior to using client testimonials. For more information on the use of testimonials, please refer to the most current version of the Advertising Nursing Services document on the College's website.

Infection Prevention and Control

In order to reduce the risk to clients and themselves, RNs and NPs must implement evidence-informed infection control prevention practices, which include but not limited to the appropriate handling, cleaning, and disposing of the material and equipment needed for any procedures. RNs and NPs are expected to monitor for changing clinical infection control practices and adapt practice as required.

Privacy and Confidentiality

RNs/NPs maintain privacy and confidentiality and adhere to the Personal Health Information Act (PHIA) in all practice settings in which care is being provided (e.g., clinic or spa setting). For information related to PHIA, RNs and NPs can review the following resources:

- PHIA Online Education Course offered by the Department of Health and Community Services of the Government of NL, which can be found here: [PHIA Online Education Course \(skillbuilder.ca\)](https://www.skillbuilder.ca/PHIA-Online-Education-Course)
- PHIA Toolkit for Small Custodians, which can be found here: [PHIAToolkitSmallCustodians.pdf \(oipc.nl.ca\)](https://www.oipc.nl.ca/PHIAToolkitSmallCustodians.pdf)

NOTE: RNs and NPs who perform cosmetic procedures and are self-employed or working under a contract, must adhere to the principles in the College's Self Employment document and submit the Nursing Practice Checklist found in Appendix B of the document to the College.

The Canadian Association of Self-Employed Registered Nurses (CASE RNs) provides support and resources for RNs in independent practice.

Liability Considerations

The following list includes several inherent risks and important considerations related to the provision of cosmetic procedures:

- cosmetic procedures are elective; therefore, the requirements of informed consent are generally more onerous and more complex (e.g., all known risks must be disclosed)
- subjective assessment of the cosmetic procedure results
- advertising influences the client's expectations
- personal financial investment for the client
- facilities where cosmetic procedures are provided may not be owned or operated by a physician or a health-care professional, in which case the RN/NP may be the custodian of personal health information and have greater legal and professional obligations to ensure compliance with their regulatory requirements and personal health information legislation
 - if there is uncertainty about who is the custodian of personal health information, RNs/NPs are encouraged to contact the Office of the Information and Privacy Officer and/or seek legal advice
- the relationship between the RN/NP and the facility or owner of the clinic should be adequately defined in a written agreement (e.g., independent contractor or employee)
 - RN/NP contractual obligations contained in the written agreement should be consistent with their professional obligations and regulatory requirements
- business insurance may be considered

RNs and NPs are responsible for ensuring they have the appropriate professional liability insurance for performing cosmetic procedures and should contact the Canadian Nurses Protective Society (CNPS) for further information.

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