

ARKANSAS STATE BOARD OF NURSING

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Arkansas Department of Health

Division of Healthcare Related
Boards & Commissions

POSITION STATEMENT

21-1

Role of the Licensed Nurse in the Practice of Aesthetics

The performance of aesthetic procedures is within the scope of practice of a trained advanced practice registered nurse (APRN) or registered nurse (RN) as part of a medically prescribed plan of care for treatment of various dermatological conditions or as a part of a health maintenance and health promotion regime. The performance of aesthetic procedures is not within the scope of practice of a licensed practical nurse (LPN) or a licensed psychiatric technician nurse (LPTN).

A. EDUCATIONAL PREPARATION

The nurse shall have documented educational preparation, supervised clinical practice experience and competency validation appropriate to responsibilities, treatment provided, and patient population served. The delegating physician or supervising APRN shall document competency for the RN. For APRNs practicing under a collaborative practice agreement, the collaborating physician shall document competency for the APRN. For APRNs, the practice of aesthetics must fall within the scope of practice for the individual population foci.

B. Documentation of ongoing competence should be readily available in the APRN or RN's personnel file. To ensure patient safety, the APRN and RN should gain and demonstrate the following knowledge and skill before engaging in aesthetics procedures:

1. Anatomy, physiology, and pathophysiology regarding the integumentary system as well as systems specific to the procedure(s) being performed.
2. Proper technique for each dermatologic procedure and nursing care required.
3. Proper client selection, history taking, physical assessment parameters, indications and contraindications for treatment.
4. Pharmacology including drug actions/interactions, side effects, contraindications, and untoward effects.
5. Proper selection, maintenance and utilization of equipment.
6. Realistic and expected outcomes of the procedure(s).
7. Potential complications and side effects of the procedure(s).
8. Management of complications or adverse reactions.
9. Infection control.
10. Safety precautions.
11. Documentation appropriate to the type of the procedure being performed.
12. Supervised clinical practice experience.
13. Competency validation.

C. PRACTICE SETTINGS

Aesthetic procedures shall be prescribed by a qualified physician or an APRN with prescriptive authority.

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- D. RNs shall practice under a patient specific order written by the delegating physician or supervising APRN. The use of standing orders for aesthetic cosmetic procedures is acceptable, provided the standing orders are documented in the patient’s medical record. Standing orders shall be reviewed by the prescriber on an annual basis. The standing orders shall contain the following:
1. Patient name;
 2. Patient specific diagnosis;
 3. Procedure(s);
 4. Treatment site;
 5. Drug (when applicable);
 6. Dosage (when applicable);
 7. Frequency;
 8. Instructions for emergency and follow-up care; and
 9. Prescriber signature and date.
- E. The APRN or physician shall be available to the RN in person or through electronic communications during a procedure. Such provisions shall be contained in the practice setting’s standard procedures and protocols.
- F. In addition to these requirements, the Arkansas Board of Nursing has published Position Statement 98-6, *Scope of Practice Decision-Making Model* that contains a decision tree chart providing guidance to nurses in determining whether a selected act is within an individual nurse’s scope of practice and if education and training are adequate to perform a specified procedure or treatment.

Sources:

Arkansas Nurse Practice Act and Rules. Title 17, Chapter 87. Retrieved from <https://www.healthy.arkansas.gov/programs-services/topics/arkansas-board-of-nursing>.

Arkansas State Board of Nursing, Position Statement 98-6, LPN/RN Scope of Practice Decision Making Model. January 10, 2013

Arkansas State Board of Nursing, Position Statement 98-6, APRN Scope of Practice Decision Making Model September 11, 2018

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