# North Dakota Board of Nursing Practice Guidance Role of The Licensed Nurse in Aesthetic Practices

Guidance regarding the interpretation and application of the Nurse Practices Act (NPA) may be adopted by the ND Board of Nursing (Board) as a means of providing direction to licensees and stakeholders who seek to ensure safe nursing practice and to address issues of concern relevant to public protection. (North Dakota Century Code (NDCC) 43-12.1-08(2)(p)).

Board approved practice guidance does not carry the force and effect of the law/rules. Each licensed nurse (nurse) is "responsible and accountable to practice according to the standards of practice prescribed by the board and the profession"; and must "accept responsibility for judgments, individual nursing actions, competence, decisions, and behavior in the course of nursing practice." (*Standards of Practice, North Dakota Administrative Code (NDAC) 54-05-01-07 and 54-05-02-04*). "Competence": means the application and integration of knowledge, skills, ability, and judgment necessary to meet standards. (NDAC 54-01-03-01(16)).

## Background/Significance

In January 2018, the Board approved the following interpretative statement to address public concerns related to the role of the nurse in aesthetic practices in ND. There were no legislative changes to existing law or rules:

RN Scope of Practice and Prescribed Injectable Aesthetic Agents:

A Registered Nurse, with evidence of comprehensive, specialized, and accredited training; Certification; and competencies, may inject FDA approved medical aesthetic/cosmetic agents, as part of a medically prescribed treatment plan, which includes a documented initial assessment/evaluation for each individual client by the prescriber. (NDAC 54-05-02-04; NDAC 54-05-02-05).

A Registered Nurse cannot medically diagnose; determine medical treatment; or prescribe or dispense legend pharmaceuticals (NDCC 43-12.1-02(5); NDAC 61-04-02-01; Board of Pharmacy Administrative Guidelines for Practitioner dispensing in ND).

However, public concerns and inconsistencies of aesthetic practice in ND continued thus, the Board of Nursing:

- Reviewed related Board practice statements
- Reviewed current evidence-based nursing and healthcare literature
- Completed the Scope of Practice Decision-Making Framework adopted by the Board
- Obtained input from stakeholders regarding current practice related to the RN role in aesthetic practices
- Explored relevant national trends, advisory opinions, and surveys related to aesthetics and regulation

### **Definitions related to this Practice Guidance**

- **Dispensing:** the preparation and delivery of a prescription drug, pursuant to a lawful order, in a suitable container appropriately labeled for subsequent administrations to or use by a patient. Board of Pharmacy provide an exemption to duly licensed practitioner of medicine supplying the practitioner's own patients with such remedies as the practitioner may desire for a patient's immediate needs, etc. 43-15-8; NDCC 43-15-02; NDAC 61-04-02-01.
- **Medication administration:** delivery of medication by a licensed nurse or an individual delegated to and supervised by a licensed nurse, to a client whose use of that medication must be monitored and

evaluated applying specialized knowledge, skills, and abilities possessed by a licensed nurse. NDAC 54-01-03-01(44).

- **Nursing:** the performance of acts utilizing specialized knowledge, skills, and abilities for people in a variety of settings (aesthetics practices are considered a setting). Acts may not be deemed to include acts of medical diagnosis or treatment or the practice of medicine as defined in chapter 43-17. NDCC 43-12.1-02(5).
- **Prescriber:** a qualified healthcare professional who is educated, trained, and licensed to perform the services authorized in the treatment plan. This individual must be a Physician, Physician's Assistant or APRN with Prescriptive Authority (AMA, AZ BON, LA BON, KY BON).
- **Prescriptive practices:** assessing the need for drugs, immunizing agents, or devices and writing a prescription to be filled by a licensed pharmacist. NDCC 43-12.1-02(6).
- **Prescription**: any order for drugs or medical supplies, if such order is written or signed or transmitted by an individual licensed by law to prescribe and administer such drugs or medical supplies, etc. NDCC 43-15-26.

## This practice guidance is NOT intended to apply to:

• The licensed practical nurse.

## Role of the Nurse in Aesthetic Practice

1. It is the nurse's responsibility and accountability to base nursing decisions on nursing knowledge and skills; and participate in nursing practice to the extent of basic nursing education and additional skills acquired through subsequent education and experience.

Comprehensive, specialized, and accredited training related to aesthetics provides evidence of appropriate knowledge, skills, and competencies of the nurse. Facility policies & procedures must include initial and ongoing competencies. NDAC 54-05-02-04(2)-(4); NDAC 54-05-02-05(1), (2), (7), (10), and (12).

The Board acknowledges the following related to nurse education in aesthetic practices:

- a. Successful completion of training and demonstrated competency includes at a minimum: A comprehensive didactic component and a supervised practicum where each procedure is evaluated by a qualified practitioner (AZ BON).
- b. Board recognized comprehensive and specialized education and continuing education programs must be approved or accredited by:
  - i. ND Board of Nursing (or another jurisdiction's state nursing board)
  - ii. Accredited college or university
  - iii. Health care regulatory board, or
  - iv. Professional organization that is nationally accredited to approve continuing education programs; and
- c. National specialty certifications are preferred to ensure accredited training, such as Certified Aesthetic Nurse Specialist (Plastic Surgical Nursing Certification Board), Dermatology Nurse Certified (Dermatology Nursing Certification Board), or other related certifications.
- It is the nurse's responsibility and accountability to remain within legal scope and standards of practice, which **excludes** medical diagnosing, determining medical treatment, and/or prescribing/dispensing of FDA approved agents/devices. NDCC 43-12.1-02(5); NDAC 54-05-02-04; NDAC 54-05-02-05; NDAC 54-05-03.1-10; NDAC 61-04-02-01; Board of Pharmacy Administrative Guidelines for Practitioner dispensing in ND.

The Board acknowledges the following related to the role of the nurse in aesthetic practices:

a. FDA approved medical agents/devices require prescriptive authority to initiate, plan, order, prescribe, and dispense. Determining dosages is an element of prescribing. It is **not** within the scope of practice of the nurse to prescribe or dispense FDA approved agents/devices.

- b. Prior to implementation of any medical treatment the prescriber performs an initial, documented history and physical assessment/evaluation and develops a client-specific medical treatment plan. This includes ongoing involvement of prescriber, verifies an established client-prescriber relationship and prevents the nurse from medically diagnosing, determining need for medical treatment, and prescribing/dispensing.
- c. Telehealth as defined in NDCC 26.1-36-09.15(1)(g) is acceptable for physical assessment/evaluation by a prescriber to ensure an established and ongoing relationship between the client and prescriber.
- d. A change to the treatment plan or initial order (ie. Type of treatment, location of treatment, product changes, dosage changes) requires that the prescriber performs and documents an additional history and physical assessment/evaluation prior to implementation.

## **References:**

American Medical Association. (2013). Retrieved October 16, 2019

Arizona Board of Nursing. (2019). Advisory Opinion: Medical Aesthetic Procedures Performed by Licensed Nurses, Licensed Cosmetologist, Licensed Aestheticians and Certified Laser Technologists Practice Statement. Retrieved October 16, 2019

Kentucky Board of Nursing. (2018) Advisory Opinion: Cosmetic and Dermatological Procedures by Nurses. Retrieved October 16, 2019

Louisiana Board of Nursing. (2011) Declaratory Statement: Cosmetic and Aesthetic Dermatological Procedures and Treatments Performed by Registered Nurses and Advanced Practice Registered Nurses. Retrieved October 16, 2019

North Dakota Administrative Code, Article 54-05. Standards of Practice.

North Dakota Century Code, Chapter 43-12.1. Nurse Practices Act.

NDBON Approved 10/19