

Vermont Board of Nursing  
Position Statement

Nurses Role in the Administration of Cosmetic Injectables

**Question:** Is the administration of cosmetic injectables within the scope of practice of the licensed nurse?

**Definition(s)**

**Cosmetic Injectables** – two separate **types** are addressed in this document:

1. **Fillers** - Cosmetic or dermal fillers are materials injected underneath the skin to smooth lines and make the skin appear fuller. After injection, the plumper skin shows fewer wrinkles.
  - **Absorbable fillers** are absorbed by the body over time. Examples are Restylane® (non-animal stabilized hyaluronic acid (NASHA) injectable gel) and Juvederm® (hyaluronic acid gel).
  - **Permanent fillers** are *not* absorbed by the body over time.
2. **Botox®** - A highly purified preparation of botulinum toxin A, a neurotoxin produced by the bacterium Clostridium botulinum used to paralyze facial muscles and thus smooth wrinkles.

**Background**

In general, the scope of practice for licensed nurses may include the administration of injectable medications (such as analgesics, insulin and flu vaccine) in circumstances where the administration is part of a medically prescribed plan of care and the safety and well being of the patient can be ensured as noted below.

Each nurse who is administering injectables is required to possess the educational preparation and current clinical competence to perform acts in a safe and effective manner. The nurse should have documented educational preparation, supervised clinical practice experience, and ongoing competency validation appropriate to responsibilities, treatment provided, and the patient/population served. The documentation should be readily available in the nurse's personnel file. There should also be relevant policies and procedures in place by the employing agency.

After review of the statutes governing nursing practice, standards of nursing practice, and position statements written by other states, the Vermont Board of Nursing issued this position statement.

**Position Statement which Reflects Nurse's Roles and Responsibilities**

The administration of **permanent fillers** is **not** within the scope of nursing practice of an RN or LPN.

The administration of *absorbable* fillers or Botox® may be within the scope of nursing practice of an **RN** if the following guidelines are observed:

- A. The RN may administer the cosmetic injectable medication with a valid written order from a provider (Physician, Physician Assistant (PA) or Advanced Practice Registered Nurse (APRN) who is authorized to practice in Vermont.
- B. An RN may not independently select the medication or dosage to be administered during a procedure. The actual medication, dosage and site must be specified in the provider order.
- C. In executing the procedure, the RN communicates changes in patient status to the authorized provider directing and/or supervising the procedure and to other appropriate personnel in a timely manner. The Physician, PA or APRN must be available by phone at all times and be able to assess client within 4 hours of the procedure if requested to do so.

The administration of *absorbable* fillers or Botox® may be within the scope of nursing practice of an **LPN** if the following guidelines are observed:

- A. The LPN may administer the cosmetic injectable medication with a valid written order from a provider (Physician, PA or APRN) who is authorized to practice in Vermont.
- B. LPN's may administer these injectables only when the Physician, PA or APRN is directly **on-site** during the

- procedure and when the Physician, PA or APRN has assessed the client immediately prior to the procedure.
- C. An LPN may not independently select the medication or dosage to be administered during a procedure. The actual medication, dosage and site must be specified in the provider order.
  - D. In executing the procedure, the LPN communicates changes in patient status to the authorized provider who is supervising the procedure **on-site** and to other appropriate personnel in a timely manner.

In order to ensure patient safety, the RN or LPN should obtain and demonstrate the following knowledge and skills prior to engaging in these procedures:

- A. Anatomy, physiology, pathophysiology of the skin and facial muscles
- B. Proper technique for each procedure.
- C. Proper physical assessment parameters, indications and contraindications for treatment.
- D. Pharmacology including drug actions/interactions, side effects, contraindications, and untoward effects.
- E. Proper selection, maintenance and utilization of equipment.
- F. Ability to articulate realistic and expected outcomes of the procedure to the client
- G. Ability to describe potential complications and side effects.
- H. Nursing care and appropriate nursing interventions that would be required in the event of complications or untoward outcomes.
- I. Infection control
- J. Documentation appropriate to the type of the procedure being performed.
- K. Performance of the procedure at least three times in the presence of the credentialed provider.

### References/Citations

VT Statute 1572 - Definitions

Massachusetts Board of Registration in Nursing Advisory Ruling – Medical Aesthetic Procedures. January 2009.

Ohio Board of Nursing – Interpretive Guideline – Guidelines for licensed nurse administration of cosmetic/aesthetic injectable medications. July 2008

Kentucky Board of Nursing Advisory Opinion Statement – Cosmetic and Dermatological Procedures by Nurses. February 2008

Rhode Island Office of Health Professionals Regulation – Policy Statement on Office Based Esthetic Procedures. Available 3/28/2008

American Academy of Dermatology – Scope of Practice Statement – AAD Website 2009

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**This opinion is subject to change as changes in nursing practice occur.**