Dermatological Procedures by Licensed Nurses

The South Dakota Board of Nursing is authorized by the state of South Dakota, pursuant to SDCL 36-9-1.1, to safeguard life, health and the public welfare; and to protect citizens from unauthorized, unqualified and improper application of nursing practices.

The practice of registered nurses, pursuant to SDCL 36-9-3 (14,) and licensed practical nurses, pursuant to SDCL 36-9-4 (10), allows a nurse to perform other acts that require education and training consistent with professional standards as prescribed by the board, by rules promulgated pursuant to chapter 1-26, and commensurate with the nurse’s education, demonstrated competence, and experience.

The South Dakota Board of Nursing issues opinions as to what constitutes safe nursing practice. As such, an opinion is not a regulation of the Board and does not have the force and effect of law. An opinion is issued as a guideline to licensees who wish to engage in safe nursing practice, and to facilitate the delivery of safe, effective nursing care to the public.

Practice Statement

The South Dakota Board of Nursing affirms, pursuant to SDCL 36-9-3, SDCL 36-9-4, and ARSD 20:48:04:01, that the performance of aesthetic cosmetic, medical aesthetic or other dermatological procedures may be performed by a licensed registered nurse and licensed practical nurse as a part of a medically prescribed plan of care for treatment of various dermatological conditions or as a part of a health maintenance/health promotion regime.

With appropriate education, agency approval, and as appropriately supervised by a South Dakota licensed and qualified medical provider, such as a physician, nurse practitioner, or physician’s assistant, a licensed registered nurse or licensed practical nurse may perform:

- Non-ablative light-based devices;
- Non-invasive chemical peels, topical procedures, and microdermabrasion;
- Cold heat for destruction of fat with non-invasive methods (such as Coolsculpting®);
- Injectable treatments, excluding dermal fillers, using FDA approved products only (such as Botox®); and
- Sclerotherapy of superficial veins (LPNs are excluded from performing sclerotherapy).

> Authorized prescribers are expected to use particular caution when delegating injections due to potential risks.

A licensed practical nurse requires direct supervision by the medical provider/prescriber who is physically present in the immediate area and available to intervene if necessary (ARSD 20:48:01).

The ultimate responsibility for delegation and supervision of the delegated procedures lies with the qualified medical prescriber. The registered nurse or licensed practical nurse must exercise clinical judgment and is personally responsible when accepting delegated medical acts from qualified medical providers.

Purpose

The following guidelines are intended to promote safe care. Registered nurses, licensed practical nurses, and institutions are encouraged to also refer to other national standards of practice and evidence based literature to identify additional guidelines or considerations specific to a practice setting or patient population served.

Guidelines

A. Each nurse should obtain educational preparation, receive supervised clinical practice experience, and demonstrate clinical competency to perform these acts within a safe and effective manner and according to accepted standards of practice. Documentation on educational preparation should be readily available upon request; and include:

1. Anatomy, physiology, pathophysiology of the integumentary system and supporting structures specific to procedure performed;
2. Proper client selection and history taking, physical assessment parameters, and wound healing principles;
3. Safe use of product, device, equipment; indications/contraindications, side effects of treatment;
4. Pharmacology including drug action/interactions, indications/contraindications, side effects of treatment;
5. Management of emergencies; and
6. Competency validation.

B. The facility or practice setting should maintain written policies consistent with applicable standards of practice and evidence based practice. Documentation of procedures performed should include:
   1. Review and verification of informed consent informing patient of nurse’s qualifications and expected outcomes of procedure;
   2. Patient assessment and history data;
   3. Specifics of procedure performed and patient response to procedure; and
   4. Directions for referral back to or consultation with the authorized prescriber of the procedure;

The nurse should provide the patient with written pre and post procedure education.

Laser Use

The South Dakota Joint Board of Nursing and Medical and Osteopathic Examiners affirmed in 2011 that only physicians, nurse practitioners, and physician assistants may be trained to use lasers pursuant to SDCL 36-4-8.2 and approved the Laser Utilization by Nurse Practitioners and Physician Assistants protocol.

Other Acts

Regarding the performance of body piercings, tattoos, permanent make-up, and electrolysis, the Board affirmed that these functions are not the practice of nursing and hours worked performing such acts may not be used for initial licensure or renewal of a nursing license. If a nurse chooses to perform these procedures the nurse should be appropriately registered or licensed by the appropriate state regulatory board.

References


Applicable South Dakota Nursing Laws

1. 36-9-3. Practice of registered nurse
2. 36-9-4. Practice of licensed practical nurse
3. 36-9-4.1. Additional functions after special training of licensed practical nurse