

Practice Directive

Providing Aesthetic Services

College of Registered Nurses of Prince Edward
Island

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Introduction

This tool is a resource for nurses who currently provide or are considering providing aesthetic services. This document should be used to inform RNs and NPs of their professional responsibilities and accountabilities related to aesthetic nursing and providing aesthetic services. Like all regulatory tools, this document should be used in conjunction with employer policies, applicable legislation and the standards of practice and code of ethical conduct for RNs and NPs.

What are aesthetic services?

Aesthetic services are the provision of specialized procedures intended to alter, enhance or preserve a person's appearance. Examples include but are not limited to dermal fillers, volume enhancers, collagen stimulators, lipolysis, platelet rich plasma, and neuromodulators such as Botox.

Esthetic services are different than aesthetic services and do not need to be performed by a regulated health professional (such as facials, waxing, piercings, tattooing including semi-permanent makeup). These services would not fall within the definition of nursing. These hours would not qualify as nursing practice hours.

RNs and NPs who engage in aesthetic nursing are expected to apply the nursing process and comply with current RN or NP legislation, practice standards, competencies and ethical responsibilities (CRNS, 2025).

Additional Education

Each RN and NP is responsible and accountable for ensuring they have the knowledge, skill and judgment to practice safely, competently and ethically. Entry -to-practice education programs do not provide the required education for RNs and NPs to perform aesthetic nursing. Therefore, RNs and NPs require additional education and training, beyond on-the-job training, to attain the appropriate competencies to practice competently and safely. Ongoing learning and training are expected as part of continuing competence (CRNS, 2025). Nurses must ensure the education and training they take meets industry standards, is evidence-informed and demonstrates best practices (CRNA, 2023).

The College is not involved in the approval of non-nursing education programs or education programs that are not entry-level nursing programs. The College does not endorse any particular aesthetics program.

Guidance for Nurses

There must be:

- An initial assessment by a qualified NP or physician with the appropriate competence in aesthetic nursing/aesthetic medicine
- Ongoing nursing assessments to determine whether intended outcomes are being achieved
- A plan of care that is appropriate for the client
- Subsequent assessments by a qualified NP or physician when the client is not achieving the intended outcomes or there is a change in dosage.
- An authorizing mechanism
- Established protocols to mitigate any risks to clients that may occur when a treatment is being provided, such as responding to an emergent or urgent situation

Nurses must work within their designated scope of practice to care for clients and are obligated to consult and collaborate with an appropriate care provider when the needs of the client exceed their individual competence, professional scope of practice, or when clients are not achieving outcomes as intended.

The ordering provider must be reasonably accessible while the procedure and treatment is being performed in case they are needed to assist or manage a complication. They must be available to attend within a reasonable time frame appropriate for the nature of the situation or complication. This may mean virtual or in-person, depending on the circumstance (CRNS, 2025).

It is important to recognize that aesthetic services are not benign procedures and pose potential risks to clients including an increased risk of morbidity. Nurses should recognize when the risk associated with a procedure, treatment plan, medication or situation is heightened. For example, with initial dosages of medications, changes in medication dosages, new site, and clients with a history of adverse or inconsistent response or reaction to previous treatments.

Informed Consent

The RN or NP must obtain and document informed consent before implementing the treatment plan. Informed consent is obtained according to legislation, practice standards, and the Code of Ethical Conduct. Informed consent means the RN or NP has explained the intervention, including alternative options, and disclosed the risks and potential complications. Consent must be

voluntary and cannot be coerced from the client through undue influence or intentional misrepresentation. The client can withdraw consent for treatment at any time (CRNS, 2025). If prior to starting treatment, there is a change in the treatment plan or client condition, the consent must be renewed to ensure valid consent. As well, consent must be obtained each time the intervention or procedure is provided (CRNA, 2023).

Conflicts of Interest

Nurses have an ethical responsibility to identify and address conflicts of interest. Both actual and potential conflicts of interests that arise in professional relationships should be disclosed, this includes personal relationships, affiliations, financial or personal interests. The conflict should be resolved in the interest of the needs and concerns of the client.

Examples include, but are not limited to

- Compensation arrangements based on selling higher volumes of injections
- Office space rentals based on revenues
- Requirement to reimburse employer or owner in the event of a complication
- Paying kickbacks or referral fees
- Advertising offering volume discounts or promotional offers on injectables
(CRNA, 2023)

Please refer to CRNMPEI's Practice Directive: Therapeutic Nurse Client Relationship

Advertising

Health Canada requires all health professionals to follow Canada's Food and Drug Act and the regulatory requirements for advertising health products. Please refer to CRNMPEI's Practice Directive: Advertising.

Infection Prevention and Control Responsibilities

RNs and NPs must implement evidence-based infection prevention and control principles, standards and guidelines to reduce the risk to the client, public, and their self. Best practices include but are not limited to appropriate handling, cleaning and disposing of materials and equipment needed for the procedure (CRNS, 2025).

Procurement and Storage

Drugs, substances and equipment must be procured through legitimate means. Nurses must follow standards and best practice guidelines for storage and handling of drugs and substances. Additionally, nurses must follow manufacturer recommendations for safe storing to maintain the quality and efficacy of the drug, such as temperature and light requirements (CRNA, 2023).

Documentation

Nurses are legally required to document all nursing care provided and it is not optional. It is an integral part of the nurse's practice, and an important tool that nurses use to ensure high-quality client care. Please refer to CRNMPEI's Practice Directive: Documentation.

Privacy

Privacy and management of health information requirements are outlined in legislation, regulations and standards of practice. Nurses must meet the minimum expectations as outlined CRNMPEI's Practice Directive: Privacy and Confidentiality.

Self- Employed Practice

Please refer to CRNMPEI's Practice Directive: Self-Employment for further information regarding being self-employed.

Professional Liability Protection

Please contact CNPS for further discussion on professional liability protection related to aesthetic nursing practice.

Can I count hours worked as a nurse providing aesthetic services towards my current of practice hours?

Hours worked as a nurse providing aesthetic services may be counted as long as your practice meets the legislated definition of nursing services. Do not advertise nursing services until you have confirmed that your practice meets the definition of nursing found in the *Registered Nurses and Registered Psychiatric Nurses Regulations*.

Resources

Canadian Nurses Protective Society. (2021). Ask a lawyer: Providing cosmetic services. Accessed on May 22, 2025 from <https://cnps.ca/article/ask-a-lawyer-providing-cosmetic-services/>

College of Registered Nurses of Alberta. (2023). Injectable aesthetic therapies. Accessed on May 22, 2025 from <https://nurses.ab.ca/media/4j3ffv13/injectable-aesthetic-therapies-practice-advice.pdf>

College of Registered Nurses of Saskatchewan. (2025). Aesthetic nursing resource. Accessed on May 22, 2025 from <https://www.crnsc.ca/wp-content/uploads/2023/04/Aesthetic-Nursing-Resource.pdf>