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In their article, “ The Use of Non-Physicians in Cosmetic Dermatology: Legal and Regulatory Standards,” authors Hibler and Rossi discuss how the growing demand for cosmetic surgery has led to an equal demand for estheticians and other non-physicians or medically licensed personnel to perform cosmetic medical procedures. According to the authors, the increase of non-physicians offering medical care has “ blurred” the role of the physician in cosmetic surgery. Consequently, when a problem in medical services do occur, patients, on the one hand, may be at a loss on who is responsible and what remedies might be available to them. Moreover, depending on their specific health insurance plan, they may have to pay on their own for the services of a non-physician. Physicians, on the other hand, who supervise non-physicians, may also be placed in a challenging situation of being liable but not covered by their own insurance in problems in the procedure occur. Clearly, the authors wrote the article as a warning to physicians, and non-physician performing cosmetic and plastic surgery to understand the potential issues that could arise from using non-medially licensed staff to perform medical procedures. The article is also a warning to patients or people thinking about cosmetic and plastic surgery to be aware of the legal and regulatory frameworks that are in place to protect them.
There is or could be a promising market for medically licensed, certified estheticians. As a licensed esthetician who is thinking of a career in plastic surgical nursing, the article was extremely informative. Although the main focus of the article was on cosmetic surgery rather than plastic surgery, it is clear that the article is as relevant to plastic surgery, if not more, since cosmetic surgery is a field of plastic surgery. Prior to reading the article, I was not really sure of how or if my background as an esthetician would be useful in pursuing a career in plastic surgical nursing, however, as the article made clear not only is my background useful but it might extremely helpful when I eventually look for employment after graduation. For example, the article claims there is a growing number of physicians that are using nurses to perform cosmetic procedures without necessarily having the proper education to perform the procedures. To be sure, according to the article, most nurses that work in cosmetic or plastic surgery obtain their knowledge not through “ comprehensive or clinical training” but rather from “ on-the-job instruction or apprenticeship-like training” (Hibler & Rossi, 2015). However, as a certified esthetician, I actually have much of the same training and education as the physician at least for some procedures. Indeed, as an esthetician I have expertise in skincare that requires knowledge of anatomy, biology and chemistry so that I can recognize certain skin diseases. Furthermore, I have experience in knowing how to check skin both prior or after a surgery in order to determine what procedures are useful or should be avoided.
The article also states that the number of people looking to have cosmetic surgery performed on them is increasing each year so much so that physicians are forced to using non-physician staff or patients going to places other than a hospital or clinic to have their surgeries performed. Indeed, according to the article, between 2004 and 2008, there has been a 400 percent increase in the number of medical spa openings in the country (Hibler & Rossi, 2015). Accordingly, with the demand for these services only growing the need for people with the skills to perform the services will also rise.
As a registered nurse, I would satisfy a number or legal and regulatory requirements that give a physician protection from liability. As the article explains, some of the most common claims against physicians allowing non-licensed staff to perform these procedures include inadequate examination. As a register nurse, however, I would have the necessary skills and knowledge to properly examine a patient or assist in the examination of a patient. Another common problem the article discusses is improper diagnosis. As a licensed esthetician, I have the skill and knowledge of a range of services that will help the physical adequately perform cosmetic and plastic surgical procedures. In order to be certified, an esthetician must complete between 200 and 600 hours of training, as well as pass a written exam and practical test. Moreover, estheticians are often required to have some post-graduate education as well as complete continuing education requirements to stay certified. As mentioned above, my knowledge of skincare would not only assist a physician in making a proper diagnosis but could also be helpful in recommending medications and treatments, in consulting physicians before surgeries and even in helping to properly sterilize medical and surgical tools. This would be especially true for cosmetic surgery as well as certain plastic surgery procedures such as skin grafts.
In conclusion, prior to reading the article I did not know what the career prospects were for a certified esthetician who wants to become a registered nurse. After reading the article, it is quite clear that cosmetic and plastic surgery needs people with my background in skin care and my eventual profession as a register nurse. To be sure my background and interest are perfectly matched for a promising and increasingly needed career field.

## References

Hibler, B. P., and Anthony M. Rossi. The Use of Non-Physicians in Cosmetic Dermatology: Legal and Regulatory Standards. Current Dermatology Reports, 2. 63-70. June 2015.