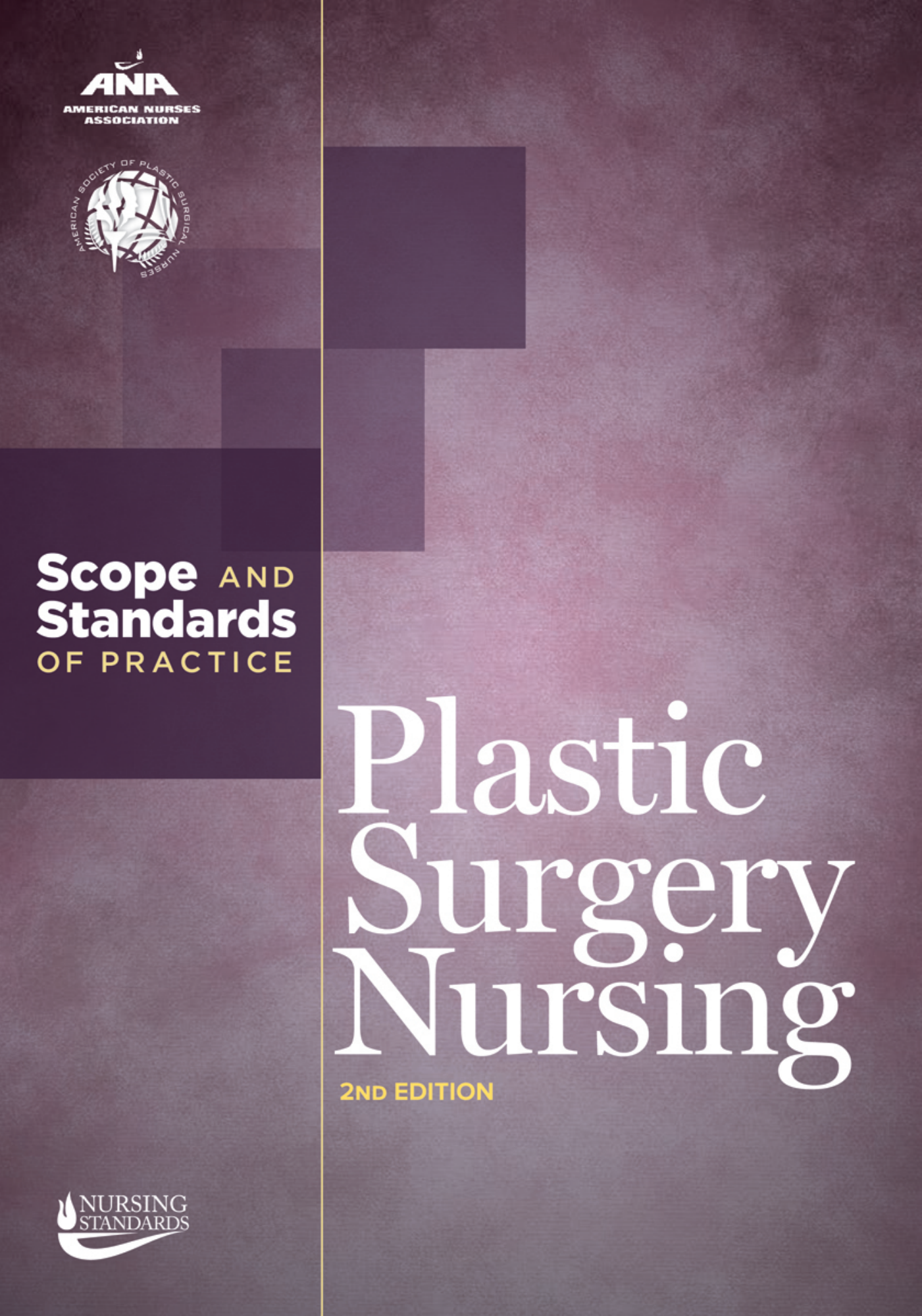
ANA
AMERICAN NURSES ASSOCIATION
AMERICAN SOCIETY OF PLASTIC SURGICAL NURSES
Scope AND Standards OF PRACTICE
Plastic Surgery Nursing
2ND EDITION
NURSING STANDARDS

Scope AND
Standards
OF PRACTICE

Plastic Surgery Nursing

2ND EDITION

American Nurses Association
Silver Spring, Maryland
2013

The American Society of Plastic Surgical Nurses (ASPSN) and the American Nurses Association (ANA) are national professional associations. This joint ASPSN and ANA publication— *Plastic Surgery Nursing: Scope and Standards of Practice, 2nd Edition*—reflects the thinking of the practice of plastic surgery nursing on various issues and should be reviewed in conjunction with state board of nursing policies and practices. State law, rules, and regulations govern the practice of nursing, while *Plastic Surgery Nursing: Scope and Standards of Practice, 2nd Edition* guides plastic surgery registered nurses in the application of their professional skills and responsibilities.

About the American Society of Plastic Surgical Nurses

The American Society of Plastic Surgical Nurses (ASPSN) is committed to the enhancement of quality nursing care delivered to the patient undergoing plastic and reconstructive surgery and nonsurgical aesthetic procedures. ASPSN promotes high standards of plastic and reconstructive surgical and aesthetic nursing practice and patient care through education, analysis and dissemination of information, and scientific inquiry. For more information: https://aspsn.org/

About the American Nurses Association

The American Nurses Association (ANA) is the only full-service professional organization representing the interests of the nation's 3.1 million registered nurses through its constituent/state nurses associations and its organizational affiliates. The ANA advances the nursing profession by fostering high standards of nursing practice, promoting the rights of nurses in the workplace, projecting a positive and realistic view of nursing, and by lobbying the Congress and regulatory agencies on health care issues affecting nurses and the public.

American Nurses Association
8515 Georgia Avenue, Suite 400
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Contributors

Scope and Standards Task Force

Sharon Fritzsche, RN, MSN, APRN-BC
Judy Akin, MSN, RN, PHN
Marcia Spear, DNP, ACNP-BC, CWS, CPSN
Patricia M. Terrell, MSN, CPNP, CNOR, CPSN
Jacqueline Frazee, BSN, CNOR, RNFA, CPSN
Claudette J. Heddens, MA, BSN, ARNP, CPSN
Stephanie Dinman, MSN, CRNP, FNP
Christine Brajkovich, BSN, CNOR, RNFA, CPSN
Michelle Rooks, RN

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American Nurses Association (ANA) Staff

Carol Bickford, PhD, RN-BC, CPHIMS—Content editor

Maureen E. Cones, Esq.—Legal counsel

Yvonne Daley Humes, MSA—Project coordinator

Eric Wurzbacher, BA—Project editor

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About Nursesbooks.org, The Publishing Program of ANA

Nursesbooks.org publishes books on ANA core issues and programs, including ethics, leadership, quality, specialty practice, advanced practice, and the profession's enduring legacy. Best known for the foundational documents of the profession on nursing ethics, scope and standards of practice, and social policy, Nursesbooks.org is the publisher for the professional, career-oriented nurse, reaching and serving nurse educators, administrators, managers, and researchers as well as staff nurses in the course of their professional development.

Scope of Plastic Surgery Nursing Practice

Definition of Plastic Surgery Nursing

Plastic surgery nursing specializes in the protection, maintenance, safety, and optimization of health and human bodily restoration and repair before, during, and after plastic surgery cosmetic, reconstructive, and nonsurgical aesthetic procedures. This is accomplished through the nursing process, and includes diagnosis and treatment of human response. The plastic surgery nurse collaborates, consults, and serves as a liaison and advocate for individuals, families, communities, and populations, bridging the role of the plastic surgery nurse with that of other professionals to promote optimal patient outcomes for the whole person.

Foundation of Plastic Surgery Nursing Practice

The specialty of plastic surgery has long pioneered surgical techniques and treatment strategies for human body and facial repair, reconstruction, and replacement in cases of congenital diseases, traumatic injuries, and cancer reconstruction. Plastic surgery sites include the skin, breast, trunk, craniomaxillofacial structures, musculoskeletal system, extremities, and external genitalia. Plastic surgery focuses on the care of complex wounds, replants, grafts, flaps, free tissue transfer, use of implantable materials, and the healing process and response. In addition, cosmetic or aesthetic surgery is an essential component of plastic surgery and is used both to improve overall appearance and to optimize the outcome of reconstructive procedures. (American Board of Plastic Surgery [ABPS], 2011). Plastic surgery interventions encompass all ages, from the neonate to the advanced geriatric healthcare consumer. This requires specialized knowledge and treatment to ensure optimal outcomes.

Plastic surgery is the only specialty recognized and supported by the American Board of Medical Specialties (ABMS, 2000) that provides plastic, reconstructive, and aesthetic surgical procedures through board certification for plastic surgery (www.abms.org).

Media coverage to the general public has deluged our society with information about plastic surgery that is often questionable and confusing. Unfortunately, because of extensive media coverage of plastic surgery and increasing demands for aesthetic plastic surgery, procedures are being performed by other medical specialties without proper preparation, recognition, regulation, board certification, or surgical residency experience. This lack of regulation, specialized knowledge, and skill exposes individuals, families, communities, and populations to unnecessary health and safety risks. Both the increasing awareness in our society (accurate and otherwise) of plastic surgery and the ambiguities of cosmetic surgery call for more nursing, consumer, and provider educational interventions by plastic surgery nurses to help clarify misconceptions. Plastic surgery nurses are aware of the health risks associated with plastic surgery procedures and, as members of the interprofessional healthcare team, complement the plastic surgery specialty by a mutual focus on healthcare consumer safety, health maintenance, and ultimate satisfaction and outcomes.

Plastic surgery nursing practice and standards reflect the nursing process, the nursing standards of both the American Nurses Association (ANA, 2010a) and the Association of periOperative Registered Nurses (AORN) standards of perioperative practice, and AORN standards of nursing practice (AORN, 2011). Plastic surgery nursing requires specialized knowledge and skill levels for both the reconstructive and aesthetic aspects of surgical interventions during the consultation, preoperative, operative, and postoperative stages of the plastic surgery procedure process. Through the implementation and maintenance of specialized plastic surgery nursing standards of practice, individuals seeking or requiring plastic surgery intervention will be provided with education, knowledge, and care to ensure optimal surgical safety, protection, and outcomes.

Development of Plastic Surgery Nursing Practice

Plastic surgery nursing opportunities continue to expand as the demand for plastic surgery procedures and treatments grows, primarily in the United States. According to the American Society of Plastic Surgeons (www.asps.org), more than 17 million plastic surgery procedures and treatments were

performed in 2009, compared to approximately 1.5 million in 1992. The need for knowledge regarding safety, quality, ethical, and procedural issues will increase as plastic surgery becomes more common in a wide range of surgical environments.

Plastic surgery is an interprofessional specialty. The plastic surgeon's expertise can be utilized by any modality, including but not limited to pediatrics, general surgery, neurosurgery, urology, dermatology, and trauma. Because of the physical and psychological complexities involved in caring for those undergoing plastic surgery, plastic surgery nurses integrate a holistic approach into the plan of care for the plastic surgery healthcare consumer. Plastic surgery nursing skills and knowledge require a strong foundation in the knowledge of pre-, intra-,and postoperative standards and practices; wound healing and wound care; safety and quality; bioethics; psychology; and the application of critical thinking.

In response to the specialized needs of plastic surgery healthcare consumers and the required nursing interventions, 100 surgical nurses convened in 1975 to establish the nonprofit organization called the American Society of Plastic and Reconstructive Surgical Nurses (ASPRSN). In 2001 ASPRSN simplified its name to American Society of Plastic Surgical Nurses (ASPSN). The 100 charter members sought to establish a specialized identity and share the knowledge needed to practice successfully. The mission and philosophy of the ASPSN were founded on principles aimed at improving the quality of nursing care for the healthcare consumer undergoing plastic or reconstructive surgery. The organization is committed to promoting high standards of nursing care and practice through shared knowledge, scientific inquiry, and continuing education, while supporting and encouraging collaborative interaction with clinical practice, administration, research, and academics (www.aspsn.org). The chronology of the development of plastic surgery nursing is summarized below.

Plastic Surgery Nursing: A Chronology

1975 The American Society of Plastic and Reconstructive Surgical Nurses (ASPRSN) held its first national meeting in Toronto, Canada. Sherill Lee Schultz is the first president and founder.

1976 Thirteen local chapters of ASPRSN are established in the United States and Canada.

1980 ASPRSN creates *Plastic Surgical Nursing Journal.*

1980	ASPRSN becomes the 22nd member of the National Federation for Specialty Nursing Organizations.
1984	The plastic surgical nursing bibliography is completed.
1989	The first edition of *Core Curriculum for Plastic and Reconstructive Surgical Nursing* is published.
	The Plastic Surgical Nursing Certification Board (PSNCB) is established.
1991	The first plastic surgical nursing certification examination (CPSN) is given.
1995	ASPRSN establishes a Research Committee to assist ASPRSN nurses with research funds and priorities unique to plastic surgical nursing practice.
1996	The second edition of *Core Curriculum for Plastic and Reconstructive Surgical Nursing* is published.
1998	ASPRSN creates a website: www.aspsn.org.
2001	ASPRSN simplifies its name to the American Society of Plastic Surgical Nurses (ASPSN).
2004	The specialty is recognized and the ASPSN–ANA specialty standards document, *Plastic Surgery Nursing: Scope and Standards of Practice,* is drafted.
2005	*Plastic Surgery Nursing: Scope and Standards of Practice* is published by ANA.
2007	Third edition of *Core Curriculum for Plastic Surgical Nursing* is published.
2010	Task force is initiated to develop an aesthetic nursing certification.
2010	Workgroup is convened to review and revise *Plastic Surgery Nursing: Scope and Standards of Practice.*

Today the ASPSN has more than 1,000 active members working in various nursing environments: surgical facilities, home care, nursing research, outpatient care, hospitals, universities, private practice, medical or medi-spas, and others. Members cover a wide range of educational levels, including associate, bachelor's, master's, and/or doctorate degrees, and have numerous roles, including advanced practice nurses, nurse first-assistant, and nurse educators. ASPSN serves its members through a national structure of local chapters in the United States and Canada (ASPSN, 2010). Through the development of unique plastic surgery knowledge, the plastic surgery nurse can properly respond to and communicate with a multidisciplinary team assigned to any plastic surgery healthcare consumer.

As the field of plastic surgery evolves and incorporates other medical specialties, the climate for plastic surgery nursing requires continual review

of related trends, products, and procedures. Current statistical data found on the American Society of Plastic Surgeon's web site (www.asps.org) for 2009, include a 10% increase in breast reconstruction from 2000 to 2009, with tissue expander reconstruction seeing a 12% increase from 2008 to 2009. Breast reduction surgery has increased by 7% from 2000. Tumor removal, including skin cancers, has decreased from 578,161 procedures in 2000 to 487,146 in 2009. Cosmetic surgical procedures have experienced an overall decline since 2000, with a 20% total decrease. Breast augmentation remains the number-one cosmetic procedure, followed by rhinoplasty. With more and more healthcare consumers undergoing bariatric or weight-loss surgical procedures, the number of body contouring procedures (such as buttock lifts, lower body lifts, and thigh and arm lifts) is increasing significantly, and has experienced more than a 50% increase since 2000 (www.asps.org). Minimally invasive procedures have increased 99% since 2000, with Botox showing a 509% increase from 2000; in addition, there has been a significant rise in procedures for dermal fillers and laser resurfacing (www.asps.org). Due to this extraordinary growth, there has been an influx of nurses into this highly challenging arena of plastic surgery practice.

One goal of plastic surgery nursing is to secure the foundation for safety. This is accomplished through stronger regulations, increased education, and awareness among healthcare consumers, families, communities, and populations seeking or requiring plastic surgery-related interventions.

Plastic surgery nurses promote and improve quality of care before, during, and after plastic surgical procedures and treatments to ensure proper health maintenance, safety, and restoration. Plastic surgery nurses determine the specific nursing intervention needed for each individual undergoing a plastic surgical procedure or treatment, in accordance with the nursing process (assessment, diagnosis, outcomes identification, planning, implementation, and evaluation). This nursing specialty continues to develop the knowledge base for evidence-based practice through research into plastic surgery procedures, treatments, and issues.

Healthcare Consumer Population

The plastic surgery nurse interacts with and cares for healthcare consumers who require or desire plastic or reconstructive surgery for enhancement or restoration purposes. The plastic surgery nurse also interacts with wand educates families of plastic surgery healthcare consumers, as well as communities, regarding plastic surgery procedures and issues. The plastic surgery nurse has

the special knowledge and skills needed to meet the needs of the healthcare consumer population. The plastic surgery nurse provides care in a variety of settings, age groups, and populations, including neonatal, pediatric, adult, geriatric, general surgery, neurosurgery, advanced wound management, dermatology, burns, cancer, and trauma healthcare consumers.

Healthcare consumers receiving care and education from a plastic surgery nurse need a thorough understanding of procedures, personal expectations, and mutual goal setting in order to achieve maximum satisfaction and health maintenance. Plastic surgery nurses help healthcare consumers to deal with perceived or altered body image, perceived surgical outcomes, fears, and learning needs associated with a surgical intervention. Healthcare consumers undergoing plastic surgery may encounter psychological, emotional, and physical imbalances during the recovery phase. Managing the psychological discord associated with physical alterations requires specialized knowledge and education.

Reconstructive Plastic Surgery Population

Reconstructive plastic surgery procedures are performed on skin, breast, trunk, craniomaxillofacial structures, musculoskeletal system, extremities, and external genitalia. Nurses in reconstructive plastic surgery require specialized knowledge related to complex wounds, replants, grafts, flaps, free tissue transfer, and use of implantable materials for reconstruction or repair due to cancer, trauma, burns, superficial injury, congenital defects, or disease. Plastic surgery nurses help the patient to express psychological, physical, and psychosocial needs in order to regain or rediscover coping strategies and successful interactions with society. Thorough assessment and documentation before, during, and after surgery is essential for proper evaluation of healthcare consumer outcomes.

Aesthetic Plastic Surgery Population

The plastic surgery nurse must possess a thorough knowledge of anatomy, body systems, operative standards, and the psychological aspects of body image and perception. An understanding of the needs and assessment of expectations places the plastic surgery nurse in the forefront as an advocate for the aesthetic healthcare consumer's safety. Aesthetic plastic surgery procedures may be applied to skin, breast, trunk, craniomaxillofacial structures, musculoskeletal system, extremities, and external genitalia. Aesthetic plastic surgery may be performed after reconstructive surgery to improve overall results. Aesthetic surgery includes adjustment, enhancement, and alteration according to each

individual healthcare consumer's request and need for plastic surgery intervention. Thorough assessment and documentation before, during, and after surgery is essential for proper evaluation of patient outcomes.

With the development and introduction of new products and technologies, the quest to defy the aging process and enhance beauty continues. According to the 2008 *Plastic Surgery Procedural Statistics* (American Society of Plastic Surgeons, 2009), there has been a steady increase in the number of consumers who have undergone nonsurgical aesthetic procedures, notably injections of botulinum toxin Type A and dermal fillers. This phenomenon has required that healthcare providers adapt to these technical developments to meet the needs of the population, and has led to increased specialization in the area of plastic surgery nursing. In short, plastic surgery nurses require specialized knowledge associated with reconstructive surgical principles to assist in the successful recovery and outcomes of the aesthetic surgery healthcare consumer.

Roles of Plastic Surgery Nurses

Nursing: Scope and Standards of Practice, Second Edition (ANA, 2010a), *Nursing's Social Policy Statement: The Essence of the Profession* (ANA, 2010b), and *Code of Ethics for Nurses with Interpretive Statements* (ANA, 2001) provide the foundation for all registered nurses and their professional practice. The roles of the plastic surgery nurse further derive from the specialty's scope-of-practice statement and specific standards of care, required educational guidelines, and practice environments and settings serving the plastic surgery healthcare consumer. One of the goals of plastic surgery nursing is to reach and educate other nurses and nursing students about plastic surgery issues, procedures, and current trends. Communication and interaction with other nursing specialties about the role of plastic surgery nurses will provide a broader understanding and knowledge base for nursing collaboration. Plastic surgery nurses help build the foundations of knowledge and education for improved outcomes, safety, health maintenance, and health awareness.

General Nursing Role

Registered nurses beginning clinical practice in their first year of licensure are encouraged to gain knowledge and develop skill levels associated with basic medical and surgical principles in preparation for later specialization in plastic surgery nursing. Registered nurses who enter the field of plastic surgery must have a well-rounded knowledge base about a wide variety of healthcare consumer

populations. The scope of knowledge required for the plastic surgery nurse varies with the area of practice interest, previous nursing experience, and level of educational preparation. The general-level plastic surgery nurse will progress into a more expert role with experience, training, mentoring, and additional education.

Advanced Practice Role

Advanced practice plastic surgery nursing roles are increasing in response to personal, professional, and societal needs. Nurse practitioner (NP) and clinical nurse specialist (CNS) are two of the roles included in the term *advanced practice*.

Advanced practice registered nurses (APRNs) play a significant role in meeting the needs of the plastic surgery healthcare consumer. APRNs in plastic surgery are valuable in practice because of their ability to use independent judgment in clinical decision-making and to provide skilled, quality, and detailed advanced nursing care across the continuum. An APRN in plastic surgery has the knowledge and training to provide comprehensive health assessments, differential diagnoses, and treatments for plastic surgery healthcare consumers. The APRN in plastic surgery is an advocate for health maintenance, health promotion, and wellness.

Advanced practice registered nurses in plastic surgery serve as resources and consultants to other healthcare disciplines. Legislation has now made prescriptive authority and third-party reimbursement possible for the APRN in the plastic surgery arena. The APRN is instrumental in facilitating and conducting research in plastic surgery and plays a key role in providing continuity of care for the plastic surgery healthcare consumer based on the best evidence. The roles of the APRN in plastic surgery are developing and expanding.

Educator Role

Plastic surgery nurse educators promote educational clarity, standards, knowledge, and safety related to plastic surgery procedures, issues, and outcomes with other nurses, students, healthcare consumers, other providers, and the community. In this document, the plastic surgery registered nurse (RN) in an educator role is referred to as the *plastic surgery nurse educator*.

Even though all nurses are educators in their role of caring for healthcare consumers, a plastic surgery nurse educator is educated at the master's-degree level or higher with a focus on plastic surgery education. A plastic surgery nurse educator requires a strong knowledge base regarding teaching and learning theories, curriculum development, research, test and measurement evaluation methods, critical thinking skills, and quality improvement techniques. Plastic

surgery nurse educators also comply with and support state educational requirements to teach at community or university institutions. At the graduate or doctoral level, the plastic surgery nurse educator has the opportunity to facilitate and develop focused education, curriculums, and research in plastic surgery nursing.

A plastic surgery nurse educator conducts a needs assessment to help establish educational requirements in various practice environments and settings. A plastic surgery nurse educator functions as an educator and a liaison between the plastic surgeon or advanced practice registered nurse and the healthcare consumer to help ensure continuity of care, health promotion, and health maintenance. A plastic surgery nurse educator provides an appropriate climate for learning, and ensures that the learners are actively involved in the learning process. The plastic surgery nurse educator collects and analyzes data to evaluate the effectiveness and outcomes of various educational strategies, and, if necessary, provides a revised plan to address shortcomings and problems.

A plastic surgery nurse educator is a member of an interprofessional team, and functions as a consultant, change agent, leader, and resource to other nursing and healthcare disciplines. Plastic surgery nurse educators help to generate research and disseminate findings into education and practice.

A plastic surgery nurse educator, in collaboration with plastic surgery nurses, develops instructions, guidelines, materials, and programs for nurses during nursing school rotations, distance learning experiences, and in various practices, environments, and settings related to plastic surgery. A plastic surgery nurse educator also provides education for local and national communities on plastic surgery and relevant resources.

Specialized Nursing Role

Because the demand for procedures to maintain a youthful appearance and beauty has exploded, the development of new and improved aesthetic nonsurgical technologies, products, and procedures has also grown. This has facilitated the development of the aesthetic nurse role within plastic surgical nursing. With the increasing demand for these procedures, the role of the aesthetic nurse becomes more important in plastic surgery as well as other specialties. The aesthetic nurse has a scope of knowledge more specialized to nonsurgical aesthetic procedures and this population of healthcare consumers than the general plastic surgery nurse, and has undergone additional education and training in anatomy, procedural techniques, products, technologies, assessment, and education specific to the aesthetic nonsurgical healthcare consumer.

The aesthetic nurse must be focused on maintaining the highest standards within the specialty by undergoing continuing education, providing excellent outcomes, and maintaining an unrivaled ethical environment. The aesthetic nurse must always consider the healthcare consumer's specific requests, budget, lifestyle, and expectations. The aesthetic nonsurgical healthcare consumer often hears about new products or procedures via the popular media, so the aesthetic nurse, as a professional, must guide and educate the patient to select an appropriate product, procedure, or technology and make necessary referrals to the physician. As these procedures are out-of-pocket expenses to the individual, the aesthetic nurse has an obligation to recommend and provide only those procedures that are appropriate and to avoid any financial conflict of interest.

Educational Preparation for Plastic Surgery Nursing

Broad experience in surgical duties, sterile technique, and postanesthesia care enhances the ability to build on the skill sets needed for specialty practice. As there are no formal academic educational programs for plastic surgery nursing, plastic surgical nurses must build on the general knowledge and education of their respective nursing programs. The plastic surgery nurse learns plastic surgery fundamentals from professional courses offered by ASPSN, core curriculum materials, mentoring, and seminars and workshops pertaining to plastic surgery education, procedures, and issues. Education, experience, and increased familiarity with plastic surgery procedures and outcomes will increase knowledge and help attain the skill levels needed to care for the plastic surgery healthcare consumer. Due to the complexities of plastic surgery, including psychological and psychosocial factors, plastic surgery nurses require a minimum of two years of experience before seeking certification in plastic surgery nursing.

Minimum Requirements for Plastic Surgery Nursing

- Licensure as a registered nurse within the designated state of practice
- Education:
  - Minimum requirement: Associate's degree from an accredited college of nursing
  - Preferred: Bachelor of science degree in nursing from an accredited college of nursing

- Advanced knowledge in surgical principles, anatomy, and physiology for specified age groups from neonates to older adults
- Advanced knowledge in one or more of the following:
  - Wound care, burns, trauma, cancer-related disfigurements
  - Scar management, body image, health assessment, nutrition
- Continuing education and knowledge of current plastic surgery trends, issues, and procedures
- Certification:

  Plastic surgery nursing certification is available (http://psncb.org/)
- Advanced knowledge and training in anatomy, including muscles and blood vessels, aging, assessment, and technologies (aesthetic role).

Plastic Surgery Nursing Research and Evidence-Based Practice

Evidence-based practice (EBP) is a scholarly and systematic problem-solving paradigm that results in the delivery of high-quality health care. To make the best clinical decisions using EBP, research findings are blended with internal evidence—including practice-generated data, clinical expertise, and healthcare consumer values and preferences—to achieve the best outcomes for individuals, groups, populations, and healthcare systems.

Nursing research and EBP contribute to the body of knowledge and enhance healthcare consumer outcomes. The plastic surgery nurse continually evaluates and applies nursing research findings to promote effective and efficient care and improved outcomes. The plastic surgery nurse works with other members of the healthcare team to identify clinical problems and uses existing evidence to improve practice. Nurses must demonstrate that nursing interventions make a positive difference in the outcomes and health status of plastic surgery healthcare consumers. The plastic surgery nurse uses research findings to decrease practice variations, improve outcomes, and create standards of excellence for care and policies. In addition, the plastic surgery nurse assures that changes made in practice are based on the current evidence and seeks out expert resources to assist with specific steps in EBP. Plastic surgery nurses utilize evidence-based practice to keep abreast of medical knowledge relevant to practice and ensure that they are current and up-to-date on the latest evidence.

Increased demand for aesthetic procedures has resulted in a higher number of plastic surgery nurses undertaking the role of aesthetic nurse. Many aesthetic treatments and procedures that claim to rejuvenate the skin are not supported by good scientific evidence; therefore, the plastic surgery nurse must critically appraise the evidence and utilize only the best evidence to guide practice. In this emerging area of practice, the plastic surgery nurse generates an ongoing, systematic evaluation of long-term outcomes and implements practice changes as appropriate. There is a need for unbiased funding of research in this emerging area of practice, and the plastic surgery nurse is positioned to seek this funding.

EBP undergirds and advances the professional practice of all plastic surgery nurses. Plastic surgery nurses must be able to gain, assess, apply, and integrate new knowledge, as well as the ability to adapt to changing circumstances and environments.

Practice Environments and Settings for the Plastic Surgery Nurse

The plastic surgery nurse provides care for healthcare consumers and their families or caretakers in a variety of settings and locations that include hospitals, outpatient ambulatory surgery centers, office-based surgery centers, private practice, and newly evolving medical spas. The plastic surgery nurse is prepared to educate and provide comprehensive care to healthcare consumers in a safe and regulated environment. The plastic surgery nurse provides competent, ethical, and appropriate nursing care to help improve surgical experiences and outcomes. To determine and implement the plan of care, and to ensure optimal outcomes for the plastic surgery healthcare consumer, the plastic surgery nurse encourages and facilitates consultations, communication, and collaboration with other healthcare team members. As a healthcare provider, the value and benefit of the APRN in plastic surgery practices are widely recognized, and the APRN is being utilized in many or most of the previously mentioned practice settings and locations.

Plastic surgery nurses are also knowledgeable about proper policies, procedures, contracts, and regulations, including those for compliance with the Health Insurance Portability and Accountability Act (HIPAA), in appropriate and designated plastic surgery settings. Plastic surgery nurses know and comply with the requirements for federal, state, local, insurance, and accreditation agency standards, regardless of the area of practice. Plastic surgery nurses help promote safer surgical services for the plastic surgery healthcare

consumer. Regulatory factors pertinent to plastic surgery nurses working in any environment may include The Joint Commission (TJC); the Centers for Medicare and Medicaid Services (CMS); Occupational Safety and Health Administration (OSHA) standards for bloodborne pathogens and hazardous waste; the Americans with Disabilities Act; specific hospital rules and regulations; and rules, regulations, and guidelines established by each state board of nursing. All of these ensure public safety. The plastic surgery nurse should also know and address, as appropriate, compliance with the guidelines of the Accreditation Association for Ambulatory Health Care (AAAHC), the AAAHC Institute for Quality Improvement (IQI), the American Association for Accreditation of Ambulatory Surgery Facilities, Inc. (AAAASF), and the U.S. Food and Drug Administration regarding tissue tracking and drug and/or implant recalls.

Hospitals

The plastic surgery nurse working in the hospital environment may care for plastic surgery healthcare consumers in a variety of specialty departments or units. These include, among others, emergency departments; operating rooms; surgical, burn, critical care, and neonatal units; pediatrics; and oncology. Plastic surgery nursing within the hospital environment is multidimensional and includes skills, functions, roles, and responsibilities that evolve from the body of knowledge specific to plastic surgery nursing. The plastic surgery nurse practicing in the hospital environment may provide assessment, analysis, diagnosis, planning, implementation, interventions, outcome identification, and evaluation of healthcare consumers in all age groups whose care requires plastic surgery interventions, procedures, wound care, and other treatments.

Outpatient/Ambulatory Surgery Centers

The plastic surgery nurse working in the outpatient/ambulatory surgery center demonstrates the appropriate skills, knowledge, competencies, and abilities to provide proper and safe nursing care for the plastic surgery healthcare consumer in the preoperative, operative, and postoperative stages of the plastic surgery procedure. The outpatient/ambulatory surgery center must be accredited or certified by the appropriate surgery center accreditation for the state. The plastic surgery nurse working in an outpatient/ambulatory surgery center maintains the plastic surgery nursing standards of practice and standards of professional performance.

Office-Based Surgery Centers

According to ASPS (2009) statistical data, 65% of aesthetic plastic surgery procedures and 46% of reconstructive plastic surgery procedures are performed in a plastic surgeon's office (www.asps.org). This poses risks if the office does not have a properly accredited or regulated surgery facility. Public awareness and understanding of proper accreditation and regulation is needed to provide clarity and guidance when considering plastic surgery. The plastic surgery nurse is aware of the potential confusion surrounding office-based surgery and can be instrumental in providing proper education about accreditation and regulation for other nurses, consumers, and communities.

The role of the plastic surgery nurse in the office-based surgery center includes the consultation, preoperative, postoperative, and follow-up stages of the plastic surgery procedure. The plastic surgery nurse demonstrates the appropriate skills, knowledge, competencies, and abilities to provide proper nursing care for the plastic surgery healthcare consumer. In addition to nursing responsibilities, the office-based plastic surgery nurse may have administrative responsibilities such as staffing, billing, insurance filing, verification and predetermination, as well as budgetary duties including purchasing of medical supplies and equipment.

Assessment, education, planning, and intervention are part of the plastic surgery nurse's role during each stage of a plastic surgery procedure. The plastic surgery nurse helps to improve the quality of care by maintaining standards, including the Standards of Plastic Surgery Nursing, measuring performance, and providing education within the specific office-based surgery center.

Private Practice Settings

The plastic surgery nurse working in a private practice may have responsibilities that include assessing the individual healthcare consumer's needs, developing educational material, assisting physicians or advanced practice plastic surgery nurses, and conducting staff education and in-service and healthcare consumer education. The plastic surgery nurse assesses educational needs and then provides educational material and instruction on the plastic surgery procedure. In addition, there may be management responsibilities such as billing, surgery scheduling, and insurance filing and verification, as well as budgetary duties regarding annual budgets and purchase of medical supplies and equipment.

The plastic surgery nurse also provides preoperative and postoperative counseling regarding technical aspects of the surgical procedure, documented health assessment, pertinent mutual goal planning, and psychosocial assessment and

support. Other responsibilities may include sedation, postanesthesia recovery, and assisting with the procedure.

The plastic surgery nurse may provide consumer education about selecting an appropriate plastic surgery facility and provider that will meet the consumer's needs and provide the best outcomes. The plastic surgery nurse in private practice provides follow-up communication and evaluation to ensure quality of care, health maintenance, and proper documentation. The plastic surgery nurse in private practice maintains the plastic surgery nursing standards of practice and standards of professional performance.

Private practice has increasingly become an area for the aesthetic nurse specialty to practice, in collaboration with the physician. In many instances, this aesthetic nurse performs many, if not all, of the nonsurgical aesthetic enhancement procedures within the practice. In this role, the aesthetic nurse will function as counselor, provider, educator, and communicator. The aesthetic nurse maintains the plastic surgery nursing standards of practice and standards of professional and competent performance, as well as high ethical standards.

Medical Spas

New trends and increasing demands for aesthetic procedures have prompted the emergence of *medical spas*; this is a combination of a medical office and a day spa that operates under the supervision of a medical doctor. Medical spas tend to have a more clinical atmosphere than day spas, and can offer a wide range of services and treatments, including hair removal and reduction, injectables (such as botulinum toxin Type A and fillers), chemical peels, microdermabrasion, minor laser treatments, and/or sclerotherapy.

The plastic surgery nurse in the role of aesthetic nurse in these settings incorporates reputable educational preparation, such as workshops, conferences, and industry training, in learning new technologies and products relating to the procedures directly provided. The aesthetic nurse practices for a period of time directly with the supervising physician before practicing independently and is accountable for her or his practice.

Before practicing independently, the aesthetic nurse must gain the skills to assist in the care of the healthcare consumer who desires medical spa treatments and must have specialized advanced training in aesthetic nursing, including facial anatomy, assessment, products, procedures, and technology. The aesthetic nurse must maintain an active, collaborative relationship with the medical doctor of the spa. The aesthetic nurse may utilize protocols that are developed collaboratively with the medical doctor to guide practice. The

aesthetic nurse should practice documentation of procedures and postprocedure follow-up. The collaborating physician should perform and document periodic supervision of the nurse's performance, to assure competency. The aesthetic nurse should be responsible for utilizing the best available evidence to guide treatment choices, should provide potential consumers with truthful information, and should not have any conflicts of interest.

Ethics and Advocacy in Plastic Surgery Nursing

Ethics is a fundamental part of nursing. Ethical awareness, judgments, and decisions are founded on a combination of principles, theories, and moral foundations. Nursing ethics are based on care and the actions of caring, to enhance and protect healthcare consumer well-being. Plastic surgery nurses are expected to comply with and promote the ethical ideals, model, code, and principles of the nursing profession. *Code of Ethics for Nurses with Interpretive Statements* (ANA, 2001) is the framework on which plastic surgery nurses base ethical analysis and decision-making, and on which standards are based. The plastic surgery nurse is also an advocate for the healthcare consumer and provides care in a nondiscriminatory and nonjudgmental way. Patient advocacy mandates preservation of autonomy, execution of clinical judgments, and management of ethical issues.

The plastic surgery nurse maintains the plastic surgery standards of practice and standards of professional performance in each type of practice environment to help ensure the safety, quality of care, and the highest level of health maintenance or health restoration for the consumer undergoing plastic surgery. The plastic surgery nurse's attitude and performance reflect compassion and understanding of a consumer's self-respect, cultural beliefs, sovereignty, and rights to self-determination and privacy. Plastic surgery nurses implement the principles of autonomy, nonmaleficence, beneficence, and justice when interacting with consumers requiring or desiring plastic surgery interventions. Plastic surgery nurses are aware of the many ethical considerations associated with the public's perception of plastic surgery, which include misleading advertising, issues affecting the aging population, insurance reimbursement, and other matters. Public awareness of these issues is the key to proper acknowledgment of the physical and emotional health concerns and risks of plastic surgery.

Misleading Advertising

Advertisements for plastic surgery are found in print, broadcast media, and the Internet. Many plastic or cosmetic surgery advertisements do not disclose

risks, recovery time, contraindications, physician credentials, type of board certification, or type of surgical facility. Plastic surgery nurses encourage consumers who are interested in plastic surgery to inquire about the physician, the surgical environment, and the procedure in detail, in order to make an informed decision. Although the American Board of Plastic Surgery (www.abps.org) recognizes the role of legitimate advertising in the changing medical scene, it does not approve of plastic surgery advertising that is false or misleading and minimizes the magnitude and possible risks of surgery, or which solicits healthcare consumers for operations that they might not otherwise consider. Public awareness of plastic surgery advertising, in general, is a focus of plastic surgery nursing education in community campaigns.

The Aging Population

The quest for a more youthful appearance to complement longevity is spreading among the aging population in our society. Aging adults are considered vulnerable because of age-related physical and cognitive changes that make them more susceptible to health risks during and after surgery. According to the ASPS statistical chart for age distribution (2009), consumers aged 55 and older underwent 3.1 million total cosmetic procedures, of which 344,000 were surgical and 2.8 million were minimally invasive (www.asps.org). Cosmetic minimally invasive procedures, in general, increased 99% from 2000 to 2009. Plastic surgery nurses must be aware of the specialized needs of the aging population, as well as the ethical considerations associated with their aesthetic surgery requests.

Insurance Reimbursements

Reimbursement for plastic surgery procedures is best facilitated by educating insurance providers as to the differences between cosmetic and reconstructive surgery. Cosmetic surgery seeks to improve the patient's features on a purely aesthetic level, in the absence of any actual deformity or trauma. For this reason, insurance companies normally do not cover cosmetic surgery. In contrast, the purpose of reconstructive surgery is to correct any physical feature that is grossly deformed or abnormal by accepted standards—either as the result of a birth defect, illness, or trauma. Often, reconstructive surgery not only addresses the deformed appearance, but also seeks to correct or improve some deficiency or abnormality in function as well. A plastic surgery nurse in a plastic surgery practice environment is in a unique position to act as a

consumer advocate or a change agent to help secure insurance reimbursements for those undergoing such reconstructive procedures.

Summary of the Scope of Plastic Surgery Nursing Practice

Plastic surgery nursing specializes in the protection, maintenance, safety, and optimization of health and human bodily restoration and repair before, during, and after plastic surgery cosmetic, reconstructive, and nonsurgical aesthetic procedures, regardless of the practice environment. The plastic surgery nurse collaborates, consults, and serves as a liaison and advocate for individuals, families, communities, and populations. With the dynamic and ever-changing healthcare practice environment, the plastic surgery nurse is constantly seeking to utilize the best available evidence to guide practice and promote optimal consumer outcomes for the whole person.