## Use of Lasers/Delegation of Medical Functions

### Board-by-Board Overview

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<th>State</th>
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<td>AL</td>
<td>Chapter 540-X-11. Guidelines for the Use of Lasers and Other Modalities Affecting Living Tissue. Designates Mid-Level Practitioners, Level 1 Delegates, and Level 2 Delegates; categorizes treatments as ablative or non-ablative; defines energy source, direct physician supervision, and on-site supervision. 540-X-11-.03 Use of Lasers and Other Modalities Affecting Living Tissue in the Practice of Medicine. (1) The use of lasers/pulsed light devices, or other energy source, chemical, or modality that affects living tissue, for the purpose of treating a physical disease, disorder, deformity or injury shall constitute the practice of medicine pursuant to Ala. Code §34-24-50. (2) The use of lasers/pulsed light devices for non-ablative procedures cannot be delegated to Level 2 Delegates without the delegating/supervising physician being on-site and immediately available. (3) The use of lasers/pulsed light devices or other energy devices for ablative procedures may only be performed by a physician. (4) Electrocautery may be used by a Level 1 or Level 2 delegate under direct physician supervision. Establishes guidelines on minimum education requirements for physicians and delegates, quality assurance, equipment safety, mandatory injury reporting, physician registration, and safe use of lasers.</td>
<td>Supervision by the delegating physician shall be considered adequate for purposes of this section if the physician is in compliance with this section and the physician: (1) Ensures that patients are adequately informed and, prior to treatment, have signed consent forms that outline reasonably foreseeable side effects and complications which may result from the non-ablative treatment; (2) Is responsible for the formulation or approval of a written protocol which meets the requirements of these rules and is responsible for any patient-specific deviation from the protocol; (3) Reviews and signs, at least annually, the written protocol and any patient specific deviations from the protocol regarding care provided to a patient under the protocol on a schedule defined in the written protocol; (4) Receives, on a schedule defined in the written protocol, a periodic status report on the patient, including any problems or complications encountered; (5) Remains on-site for non-ablative treatments performed by delegates consistent with these rules and is immediately available for consultation, assistance and direction; (6) Personally attends to, evaluates, and treats complications that</td>
<td>540-X-11-.05 Supervision.</td>
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| AK    | Guidelines As To Who May Perform Laser Surgery  
The Alaska State Medical Board has adopted the policies of the American Medical Association, following, to be its guidelines to its licensees in Alaska with regard to who may perform laser surgery.  
Performance of Laser Surgery  
American Medical Association’s Policy H-475.989, Laser Surgery, reads:  
“Laser surgery should be performed only by practitioners licensed to practice medicine and surgery or by those categories of practitioners currently licensed by the state to perform surgical activities.”  
American Medical Association’s Policy H-475.988, Laser Surgery, reads:  
“The board opines that revision, destruction, incision or other structural alteration of human tissue using laser is surgery.”  
“Under the appropriate circumstances, a physician may delegate certain procedures to certified, licensed, non-physician office personnel e.g., nurse, physician assistants, or certified medical assistants). Specifically, the physician must directly supervise the non-physician office personnel to protect the best interest and welfare of each patient. The supervising physician shall be physically present on-site, immediately available, and able to respond promptly to any question or problem that may occur while the procedure is being performed. It is the physician’s obligation to insure that, with respect to each procedure performed, the non-physician office personnel possess the proper training in cutaneous medicine, the indications for the procedure, and the pre- and post-operative care involved.”  
Adopted January 16, 2004 |  |
| AZ-M  | Arizona Admin. Code Article 14  
R12-1-1440. Medical Lasers  
Class 3 and Class 4 laser products used in the practice of medicine must have a means for measuring the level of laser radiation within specified range of error and a guard mechanism on the switch to control patient exposure and prevent inadvertent exposure.  
A.R.S. R4-16-301through 303 provides for a Supervising physician to delegate specific Medical procedures to a medical assistant Consistent with the CAAHEP Standards for An Accredited Educational Program for the Medical Assistant.  
R12-1-1438. Hair Removal and Other Cosmetic Procedures Using Laser and Intense Pulsed Light |  |
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<td>Must calibrate a laser according to the manufacturer's specified calibration procedure, at intervals that do not exceed those specified by the manufacturer.</td>
<td>A registrant must “[n]ot permit an individual to use a medical laser or IPL device for hair removal procedures unless the individual completes an approved operator didactic training program of at least 40 hours duration; is directly supervised for at least 24 hours on the job by a licensed practitioner; and performs or assists in at least 10 hair removal procedures. The individual shall obtain this hands-on experience under the direct supervision of a licensed practitioner.</td>
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<td>In a medical facility where several medical disciplines or a number of different practitioners use Class 3b and Class 4 lasers, a Laser Safety Committee must be formed to govern laser activity, establish use criteria, and approve operating procedures.</td>
<td>A registrant must ensure that the operator follows written procedure protocols established by a licensed practitioner; ensure that the operator follows any written order issued by a licensed practitioner, which describes the specific site of hair removal; maintain a record of each hair removal procedure protocol, maintain each procedure protocol onsite, and ensure that the protocol contains instructions for the patient concerning follow-up monitoring; design each protocol to promote the exercise of professional judgement by the operator “commensurate with the individual's education, experience, and training”; require that a licensed practitioner observe the performance of each operator during actual procedures at intervals that do not exceed six months, maintain a record of the observation, verify that a licensed practitioner is qualified to perform hair removal procedures, and provide radiation safety training.</td>
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<td>For Class 3b and Class 4 lasers, a Physician must also establish a written laser safety training program.</td>
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<td>AZ-O</td>
<td>R12-1-1438. Hair Removal and Other Cosmetic Procedures Using Laser and Intense Pulsed Light</td>
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<td>Requires “registration of any medical laser or IPL device that is a Class II surgical device, certified as complying with the labeling standards in 21 CFR 801.109”</td>
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<td>Registrant must “ensure that the device is only used by a licensed practitioner or an operator who is working under the direct supervision of a licensed practitioner, or at minimum, an operator who is working under the indirect supervision of a licensed practitioner.”</td>
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<td>“Ensure that a licensed practitioner purchases or orders the Class II surgical device that will be used for hair removal procedures.”</td>
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<td>AR</td>
<td>Regulation No. 22. Laser Surgery Guidelines Pursuant to Ark. Code Ann. 17-95-202, the practice of medicine involves the use of surgery for the diagnosing and treatment of human disease, ailment, injury, deformity, or other physical conditions. Surgery is further defined by this Board as any procedure in which human tissue is cut, altered, or otherwise infiltrated by mechanical means, to include the use of lasers. The Board further finds that the use of medical lasers on human beings, for therapeutic or cosmetic lasers, constitutes the practice of medicine. Adopted 6/5/1998; Amended 6/2/2005 <a href="http://www.armedicalboard.org/Professionals/pdf/MPA.pdf">http://www.armedicalboard.org/Professionals/pdf/MPA.pdf</a></td>
<td>Arkansas statutes 17-105 to 111 governs the delegation of health care services to a physician assistant. Physician assistants may perform those duties and responsibilities, including the prescribing, ordering, and administering drugs and medical devices that are delegated by their supervising physician. Supervision shall be continuous, but does not require the physical presence of the supervising physician at the time and place that the services are rendered.</td>
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<td>CA-M</td>
<td>The Business and Professions Code includes the use of laser devices in the definition of the practice of medicine. Only physicians, dentists, physician assistants and nurses may use laser devices, including intense pulse light devices, with physician supervision within their legal scope of practice. The law requires written protocols and procedures relating to supervision. Laser hair removal may be performed only by a physician, or, when working with a physician, registered nurse or physician assistants. A 1997 Attorney General opinion states that physicians may not authorize medical assistants to perform laser treatments. Cosmetic procedures <a href="http://www.caldocinfo.ca.gov/licensee/medical_spas-business.pdf">http://www.caldocinfo.ca.gov/licensee/medical_spas-business.pdf</a> Hair removal <a href="http://www.caldocinfo.ca.gov/allied/medical_assistants_lasers.html">http://www.caldocinfo.ca.gov/allied/medical_assistants_lasers.html</a></td>
<td>The CA Business and Professions Code Relating medical assistants allows a medical assistant, under the supervision of a licensed physician, to administer medication by intradermal, subcutaneous, or intramuscular injections and to perform skin tests and other technical supportive services upon specific authorization. Authorized procedures must be within the scope of the physicians practice and the physician must be physically present in the treatment facility during the performance of the procedures.</td>
<td>CA SB 100, passed 10/9/2011 requires the Medical Board of California, in conjunction with the Board of Registered Nursing and in consultation with the Physician Assistant Committee and professionals in the field, to review issues and problems relating to the use of laser or intense pulse devices for elective cosmetic procedures by their respective licensees. The bill requires the Board to adopt regulations by January 1, 2013 regarding the appropriate level of physician availability needed within clinics or other settings using certain laser or intense pulse light devices for elective cosmetic surgeries.</td>
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<td>CA-O</td>
<td>California Business and Professional Code Section 2459.6 regulates the delegation of a task to an unlicensed person. Physicians may assign only those patient-related tasks that can be safely and effectively performed by an aide. The supervising physician shall be responsible at all times and shall provide continuous and immediate supervision. The physician shall be in the same facility as, and in proximity to the location where the aide is performing the task and shall be readily available at all times.</td>
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<td>CO</td>
<td>It is Board policy that the use of lasers for patient care constitutes the practice of medicine. The Board adopted a policy statement in November 1997 that lasers must be used by a Colorado licensed physician or under the direct and on-site supervision of a Colorado licensed physician. The Board expressed its intent that this be an employer/employee relationship such that the physician has direct control of the unlicensed person. Medical Devices and Esthetic Practices <a href="http://www.dora.state.co.us/barbers_cosmetologists/news/Mc">http://www.dora.state.co.us/barbers_cosmetologists/news/Mc</a></td>
<td>In November 2002, the Board held a hearing on proposed rules regarding the delegation of medical functions to unlicensed persons.</td>
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<td>Ultrasound and Laser. In order for either the cosmetologist or cosmetician to work deeper than the dead skin cell layer (stratum corneum) of the skin, they must be under the supervision of a physician. Ultrasound, laser and the different pulse light therapies may not be performed without the supervision of a physician. Neither license allows any type of cutting or use of electricity or any other means to remove warts, tags, etc. No one in the cosmetology field may practice on any person having an ailment or condition that would create any cuts, sores or rashes that result in openings in the skin.</td>
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<td>COLORADO MEDICAL BOARD RULES REGARDING THE DELEGATION AND SUPERVISION OF MEDICAL SERVICES TO UNLICENSED HEALTH CARE PROVIDERS PURSUANT TO SECTION 12-36-106(3)(l), C.R.S. Rule 800 <a href="http://www.dora.state.co.us/medical/rules/800.pdf">http://www.dora.state.co.us/medical/rules/800.pdf</a></td>
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<td>CT</td>
<td>In December 1997, and confirmed in March 1998, the Board issued a Declaratory Ruling on Use of Lasers for Hair Removal. The Board ruled that a licensed physician with appropriate knowledge, experience and training should assess each patient prior to and during the course of hair removal treatment with laser therapy. Such physicians may delegate the operation of the laser for hair removal to a licensed physician assistant, registered nurse, or licensed practical nurse, who may render service under</td>
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| DE    | 16.0 Health and Sanitation; Electric Nail Files and Laser Technology  
16.4 The use of laser technology for hair removal is not work generally or usually performed by cosmetologists and is prohibited.  
16.5 Violation of any of the regulations, standards or prohibitions established under this Rule shall constitute a grounds for discipline under 24 Del.C. §5113 (24 Del.C. §§5100, 5101(4), 5112 and 5113) | In 1700 Board of Medical Practice, Section 21.1.1 states that a physician who delegates medical responsibility to a non-physician is responsible for that person’s activities and must provide adequate supervision. No function may be delegated to a non-physician who is prohibited by statute or regulation from performing that function. Direct and indirect supervision are defined. Physicians who choose to have their patients followed by a non-physician must personally evaluate any patient at least every three months. |                  |
| DC    | None                               |                                                                                                 |                    |
| FL-M  | The Board of medicine considers the use of high-powered lasers (all Class IIIa, IIIb, and IV lasers as designated by the FDA) to be the practice of medicine. These may be used only by physicians, or by those exempt from the Medical Practice Act (such as nurses) while acting under the direct supervision of a physician. Florida also requires all high-powered laser systems to be registered with the Department of Health. Failure to do so may result in grounds for disciplinary action against a physician and may result in a criminal penalty. Adm Rules 64B8-56.002 Statute Title 32, Chapter 501, Subsection 501.122 (Florida office surgery rules (64B8-9.009) include use of lasers in the definition of surgery) | F.S.A. 458.348  
“Protocols requiring direct supervision.---All protocols relating to electrolysis or electrolysis using laser or light-based hair removal or reduction by persons other than physicians licensed under this chapter or chapter 459 shall require the person performing such service to be appropriately trained and work only under the direct supervision and responsibility of a physician licensed under this chapter or chapter 459.”  
- In office setting where supervision not on-site, primary health practitioners limited to supervising 4 offices in addition to the |                    |
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<td><a href="http://www.doh.state.fl.us/mqa/electrolysis/co_hair-removal.html">http://www.doh.state.fl.us/mqa/electrolysis/co_hair-removal.html</a></td>
<td>primary office location; Specialty practitioners limited to 2; dermatologists limited to 1.</td>
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<td>GA</td>
<td>Georgia Cosmetic Laser Services Act</td>
<td>Provides for licensure of cosmetic laser practitioners on two levels: assistant laser practitioner and senior laser practitioner. Provides licensing standards and requirements, permitted and prohibited activities and requires that each facility offering cosmetic laser services have an agreement with a consulting physician trained in laser modalities and is available for emergency consultation with the cosmetic laser practitioner or anyone employed by the facility. Enacted 05/29/2007</td>
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<td>HI</td>
<td>The Board’s informal opinion is that, except as otherwise provided by law, the use of lasers is considered to be the practice of medicine. Hawaii Legislature May 18, 2011 Requires special license for laser technology application for an esthetician to use ….HOOSER short form bill….relating to regulation SB299 and/or SB300</td>
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<td>ID</td>
<td>The Board adopted guidelines recommending physician evaluation and assessment of the patient prior to and following prescribed treatment with an intense pulsed light and/or laser device. If the actual treatment with an intense pulsed light device is delegated to a properly trained individual, the physician</td>
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| IL    | must maintain on-site supervision while treatment is being performed. The MPA creates an exemption from medical licensure only with regard to the use of Class I or II, nonprescriptive medical devices. | Supervising and Directing Physicians, Fee Rule  
Nancy Kerr, Executive Director, Idaho Board of Medicine, stated the pending rules are the result requests by licensees, nurses, and business interests for the board to review/revise its current policy related to laser procedures. The majority supported the amendment to the rules. The pending rule (1) creates a framework for the training and supervision of personnel providing laser treatment or services to patients in Idaho and (2) provides for accountability of the physician responsible for the laser device or prescriptive cosmetic treatment to train personnel and supervise services and to provide alternate supervision to medical personnel when not available, as well as (3) provides for responsible and reasonable limits on the number of personnel supervised to ensure adequate supervision with a provision for a waiver to consider unusual circumstances, and finally (4) a general housekeeping effort, corrections and clarification in terminology are added.  
Motion Senator Werk moved to approve docket 22-0104-0601. The motion was seconded by Senator Hammond. The motion carried by voice vote.  
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<td>assessement, on-site availability and ultimate responsibility. <a href="http://www.sos.state.il.us/departments/index/register/register_volume32_issue12.pdf">link</a> Standards For Protection Against Laser Radiation <a href="http://www.iema.illinois.gov/legal/pdf/32_315.pdf">link</a></td>
<td>The MPA, IC 25-22.5-1-2 allows a physician to delegate a medical task that is within the physician’s specific area of practice to an employee who is under the direction and supervision of the physician.</td>
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<td>IA</td>
<td>State statute defines the use of lasers as surgery and, therefore, such use constitutes the practice of medicine. MPA, Article 4, Section 844 IAC 4-3-2 Surgical Operations <a href="http://www.in.gov/pla/files/Microsoft_Word_-_Medical_Licensing_Board.2010.pdf">link</a></td>
<td>The Board established an Ad Hoc Committee on the Use of Lasers, Intense Pulsed Light Devices, and Radio-Frequency Devices. The Committee issued a report that was accepted in April 2006. Summary: The Committee concluded that the regulation of lasers and associated devices is a very complex issue, involving a broad range of changing technologies and significant scope of practice implications. However, unregulated widespread use of these devices is an increasing public safety concern. Concerns regarding safety risks for these devices vary significantly. In addition to safety risks, there are concerns regarding the efficacy of the services offered, including fraudulent practices. Choosing a qualified healthcare provider to provide medical treatment with lasers or associated devices is an important decision. The public should consider all of the issues discussed above before choosing a provider. Report from the Ad Hoc Committee on the Use of Lasers, Intense Pulsed Light Devices, and Radio-Frequency Devices <a href="http://medicalboard.iowa.gov/policies/lasers.html">link</a></td>
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<td>KS</td>
<td>In April 2001 and amended in March 2002, the Board adopted regulations relating to supervision of light-based medical treatments. The regulations require physicians to have written practice protocol agreements with those who use a light-based medical device to provide a professional service under their supervision. Treatments are required to be performed at a location where the supervising physician maintains a practice or while the physician is physically immediately available. KSA 65-2872(g) establishes that persons performing medical services under the supervision of a physician are not unlawfully practicing medicine. KSA 65-28, 127 places specific duties on physicians who delegate, etc., acts that constitute the practice of medicine under the MPA.</td>
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<td>KSA</td>
<td>Treatments performed while the physician is not physically present are required to be performed within written operating parameters. Person receiving treatment are required to give consent. This rule does not apply to phototherapy in treatment of hyperbilirubinemia or to a chiropractor engaging in light-based physiotherapy. KSA Article 27, 100-27-1. Article 27.--Light-Based Medical Treatment <a href="http://www.ksbha.org/regulations/article27a.htm">http://www.ksbha.org/regulations/article27a.htm</a></td>
<td>Scope of Practice: Laser Technology <a href="http://kbn.ky.gov/practice/lasertech.htm">http://kbn.ky.gov/practice/lasertech.htm</a></td>
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<td>KY</td>
<td>Only a physician may use a laser for hair removal. BOARD OPINION RELATING TO LASER SURGERY <a href="http://kbml.ky.gov/NR/rdonlyres/C671B7A6-2E0A-4E62-9012-A0B1F2E5F695/0/OpinionLaserSurgery061611.pdf">http://kbml.ky.gov/NR/rdonlyres/C671B7A6-2E0A-4E62-9012-A0B1F2E5F695/0/OpinionLaserSurgery061611.pdf</a></td>
<td>A request was received for an opinion on whether it is within the scope of ARNP practice to: “…evaluate, diagnose, and treat patients with therapeutic interventions that include removal of hair and facial and leg veins using laser technology, performance of skin enhancement procedures, and prescribing of non-controlled substances…without the supervision or authorization of a physician.” Following discussion of the questions posed, statutes governing nursing practice, administrative regulation 201 KAR 20:057 governing ARNP practice, and the KBN Scope of Practice Determination Guidelines, it was the advisory opinion of the Board that the acts stated above are within the scope of ARNP practice. The ARNP who performs these acts must posses the educational preparation and current clinical competency to perform the acts in a safe manner, and be in compliance with 201 KAR 20:057, Section 3, that states, in part: &quot;In the performance of ARNP practice, the ARNP shall…seek consultation or referral in those situations outside the ARNP's scope of practice.&quot; Degree of Supervision Needed by Nurses Who Perform Laser Surgery Treatments <a href="http://kbn.ky.gov/practice/lasersupervision.htm">http://kbn.ky.gov/practice/lasersupervision.htm</a></td>
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| LA    | Statute states that the use of lasers or chemical treatments for therapeutic or cosmetic purposes constitutes the practice of medicine. Only persons licensed under the laws of the state to practice medicine, veterinary medicine, dentistry, or podiatry shall perform laser surgery. | The Board discussed the questions posed and referred individuals to:  
- The Kentucky Board of Medical Licensure for its position statement on the role of the physician in supervision of laser-related activities.  
- The Dermatology Nurses’ Association position paper entitled The Nurse’s Role in Laser Procedures which advises that “…nurses will deliver laser light under the direct supervision of the physician who is on-site, utilizing established protocols that have been determined by the physician at the time of his/her consultation with the patient, or at each pre-treatment session when applicable.”  
- The American Society for Laser Medicine and Surgery Policy for Use of Laser and Related Technology by the Non-Physician which states that “…a properly trained and licensed medical professional may carry out these specifically designed procedures only under direct, onsite physician supervision.” | Pending Legislation |
|       | In November 2001, the Board issued a position statement on the use of medical lasers for chemical skin treatments stating that such treatments are the practice of medicine and may be performed only by a licensed physician or by a non-physician who acts under the direct supervision of a physician licensed in LA. Non-physicians who perform laser or chemical treatments in violation of the law, will be considered to be engaged in the unauthorized practice of medicine.  
**STATEMENT OF POSITION**
L.A. REV. STAT. §37:1261-92  
http://www.lsble.louisiana.gov/Statements%20of%20Position |
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<td>ME-M</td>
<td>Only a physician may use a laser for hair removal. <strong>Professional and Financial Regulation</strong> also works in conjunction with the Board of Licensure in Medicine with regard to laser skin treatment devices Llsed by aestheticians and cosmetologists</td>
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<td>ME-O</td>
<td>Same as Maine Medical</td>
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| MD    | In **October 2002**, the Board issued a Declaratory Ruling (00-1) stating that the use of lasers for hair removal is a surgical act. Only physicians, certified nurse practitioners, registered nurses under Board of Nursing Declaratory Ruling (9701), and physician assistants may use lasers for hair removal.  

“Cosmetic medical procedures” is Chapter 10.32.09, Code of Maryland Regulations, [http://www.mbp.state.md.us/pages/regulations.html](http://www.mbp.state.md.us/pages/regulations.html) |

**.01 Scope.**

A. This chapter governs the performance, delegation, assignment, and supervision of cosmetic medical procedures, and the use of cosmetic medical devices by a physician or under a physician's direction.

B. This chapter does not govern use of medical procedures or medical devices for the purpose of treating a disease.

C. This chapter does not endorse or certify the safety of any cosmetic medical device or cosmetic medical procedure.

D. This chapter does not authorize the delegation of any duties to any person who is not licensed under Health Occupations

**Title 14 of the Maryland Code, 14-306, authorizes the BPQA to adopt rules and regulations relating to duties delegated by a licensed physician.**

“Cosmetic medical procedures” is Chapter 10.32.09, Code of Maryland Regulations.

10.32.09.05

**.05 Physician Responsibilities.**

A. A physician shall:

1. Develop and maintain at each site where the delegated, assigned, or supervised cosmetic medical procedures will be rendered written office protocols for each such cosmetic medical procedure;

2. Personally perform the initial assessment of each patient;

3. Prepare a written treatment plan for each patient, including diagnosis and planned course of treatment and specification of the device and device settings to be used;

4. Obtain informed consent of the patient to be treated by a non-physician;
### State Laser Regulation Law, Rule or Policy

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<th>Article, Annotated Code of Maryland.</th>
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</thead>
<tbody>
<tr>
<td><strong>.03 Physician Qualifications.</strong></td>
</tr>
<tr>
<td>A. License. A physician shall obtain a license to practice medicine in Maryland before the physician may perform, delegate, assign, or supervise cosmetic medical procedures or the use of cosmetic medical devices.</td>
</tr>
<tr>
<td>B. Education.</td>
</tr>
<tr>
<td>(1) A physician who performs, assigns, supervises, or delegates the performance of cosmetic medical procedures by a non-physician first shall obtain training in the indications for and performance of the cosmetic medical procedures and operation of any cosmetic medical device to be used.</td>
</tr>
<tr>
<td>(2) Training programs provided by a manufacturer or vendor of cosmetic medical devices or supplies may not be a physician's only education in the cosmetic medical procedures or the operation of the cosmetic medical devices to be used.</td>
</tr>
<tr>
<td>(3) ACCME or AOA approved continuing education, or completion of an ACGME or AOA accredited postgraduate program that includes training in the cosmetic medical procedure performed satisfies this requirement.</td>
</tr>
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### Requirements Related to Supervision and/or Delegation of Medical Functions to Unlicensed Individuals

| (5) Except as indicated in §B or C of this regulation, provide onsite supervision whenever a non-physician is performing cosmetic medical procedures or using cosmetic medical devices; |
| (6) Retain responsibility for any acts delegated to a non-physician; and |
| (7) Create and maintain medical records in a manner consistent with accepted medical practice and in compliance with Health-General Article, Title 4, Subtitles 3 and 4, Annotated Code of Maryland, and with Health Insurance Portability and Accountability Act of 1996 (42 U.S.C. §1320d-2, as amended, and 45 CFR Parts 160 and 164, as amended). |

### Pending Legislation

| B. The Board may approve a delegation agreement for a physician assistant that permits the physician to delegate performance of cosmetic medical procedures under immediately available supervision after the physician has evaluated the patient and developed a written treatment plan. |
| C. A delegation agreement for a physician assistant that includes cosmetic medical procedures and is approved by the Board before May 2009, is not affected by this chapter. |

### 10.32.09.07.

#### .07 Training of Non-Physicians.

| A. The physician is responsible for assuring that any individual to whom the physician delegates or assigns the performance of a cosmetic medical procedure or the operation of a cosmetic medical device is properly trained. Training shall include both theoretical instruction and clinical instruction. |
| B. Theoretical instruction shall include: |
| (1) Cosmetic-dermatological indications and contraindications for treatment; |
| (2) Identification of realistic and expected outcomes of each procedure; |
| (3) Selection, maintenance, and utilization of equipment; |

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<th>Pending Legislation</th>
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</thead>
<tbody>
<tr>
<td>MA</td>
<td>MA administrative code allows for use of laser acupuncture by acupuncturists. Non-Ablative and Non-Laser Sources Device Use</td>
<td>(4) Appropriate technique for each procedure, including infection control and safety precautions; (5) Pharmacological intervention specific to the procedure; (6) Identification of complications and adverse reactions for each procedure; (7) Emergency procedures to be used in the event of: (a) Complications; (b) Adverse reactions; (c) Equipment malfunction; or (d) Any other interruption of a procedure; and (8) Appropriate documentation of the procedure in the patient's chart. C. Clinical instruction shall include: (1) Observation of performance of the procedure or use of the device by an individual experienced in performing the procedure; and (2) Performing the procedure or using the device under the direct supervision of the delegating physician who is present and observing the procedure a sufficient number of times to assure that the non-physician is competent to perform the procedure without direct supervision.</td>
<td>2012 MA SB 1140 would allow physicians, physician assistants, nurses, electrologist and advanced aestheticians to remove hair from the human body using laser devices or other light-based devices. 2012 MA SB 1112 would define “surgery” as structurally altering the human body by the incision or destruction of tissues or the diagnostic or therapeutic treatment of conditions or disease processes by instruments causing localized alteration or transposition of live human tissue; including lasers, ultrasound, ionizing radiation, scalpels, probes and needles.</td>
</tr>
<tr>
<td>MI</td>
<td>Use of Laser Equipment By Health Professionals</td>
<td>The Code of MA Regulations, 243 CMR 2.00 allows a physician to permit a skilled professional or non-professional assistant to perform services in a manner consistent with accepted medical standards and appropriate to the assistant's skill.</td>
<td>2012 HB 5594 would provide for</td>
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<tr>
<td>MI-O</td>
<td>Position Statement of the Michigan Department of Community Health <a href="http://www.michigan.gov/documents/mdch_laserequipment_143884_7.pdf">http://www.michigan.gov/documents/mdch_laserequipment_143884_7.pdf</a></td>
<td>Delegation of acts, tasks, or functions to licensed or unlicensed individuals; supervision; rules; immunity states that licensed physicians may delegate selected functions to licensed or unlicensed individuals when the functions are within the scope of practice for their profession and are performed under the physician’s supervision. Functions that require physician expertise may not be delegated.</td>
<td>the licensure of naturopathic physicians and allow naturopathic physicians to perform surgical procedures using a laser device.</td>
</tr>
<tr>
<td>MI-O</td>
<td>Uses same position statement as Michigan Medical Use of Laser Equipment by Health Professionals Dec. 5, 2005 Michigan Department of Community Health position statement. Practice of medicine within corporation and limited liability companies. The use of lasers by health professionals constitutes a medical or dental practice and falls within the definition of the practice of medicine. MDCH Position Statement (12/5/2005) <a href="http://www.michigan.gov/documents/mdch_laserequipment_143884_7.pdf">http://www.michigan.gov/documents/mdch_laserequipment_143884_7.pdf</a> Since the use of lasers is considered the practice of medicine and the practice of medicine is a learned profession (Attorney General Opinion 6592), corporations and limited liability companies using lasers for medical or dental services may only incorporate or organize as professional service corporations (PCs) pursuant to Act 192, PA 1962, or as professional service limited liability companies (PLLCs) pursuant to Act 23, PA 1993Act 368, PA 1978.</td>
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<tr>
<td>MN</td>
<td>State statute defines the use of lasers as surgery and, therefore, such use constitutes the practice of medicine. Subd. 3. Practice of medicine defined. <a href="https://www.revisor.mn.gov/statutes/?id=147&amp;view=chapter&amp;year=2010&amp;keyword_type=all&amp;keyword=laser">https://www.revisor.mn.gov/statutes/?id=147&amp;view=chapter&amp;year=2010&amp;keyword_type=all&amp;keyword=laser</a> For purposes of this chapter, a person not exempted under section 147.09 is &quot;practicing medicine&quot; or engaged in the &quot;practice of medicine&quot; if the person does any of the following:</td>
<td>2012 HF 3026/SF 2617 would provide for the regulation of laser treatment by statute. Bill generally requires that the use of laser, intense pulsed light device or radio frequency device for aesthetic treatments may only be performed by a nurse, an advanced medical practitioner or a health practitioner.</td>
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<tr>
<td>MS</td>
<td>(4) offers or undertakes to perform any surgical operation including any invasive or noninvasive procedures involving the use of a laser or laser assisted device, upon any person;</td>
<td></td>
<td>Allows a physician to delegate the performance of a laser treatment through the use of a written protocol.</td>
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<tr>
<td>MS</td>
<td>In 1999, the Board adopted regulations stating that the use of laser devices for invasive or cosmetic procedures is considered the practice of medicine and is, therefore, limited to physicians and those directly supervised by a physician who is on the premises where the procedure is being performed. XIX Regulation Concerning Use of laser Devices, Section 1</td>
<td></td>
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<td>MS</td>
<td><strong>SECTION 1, RULES AND REGULATIONS REV. DATE:</strong> MAY 2011 Chapter 16 Laser Devices  <a href="http://www.msbrml.state.ms.us/regulations/may2011/May2011.pdf">http://www.msbrml.state.ms.us/regulations/may2011/May2011.pdf</a>  100 The use of laser, pulsed light or similar devices, either for invasive or cosmetic procedures, is considered to be the practice of medicine in the state of Mississippi and therefore such use shall be limited to physicians and those directly supervised by physicians, such that a physician is on the premises and would be directly involved in the treatment if required. These rules and regulations shall not apply to any person licensed to practice dentistry if the laser, pulsed light, or similar device is used exclusively for the practice of dentistry. <strong>Adopted March 18, 1999. Amended May 19, 2005. Amended January 18, 2007. Amended March 8, 2007. Amended May 17, 2007. Amended March 27, 2008.</strong></td>
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<td>MO</td>
<td>It is the board’s position that the use of Lasers is considered surgery and should only be used by professionals whose statutory scope of practice authorizes them to perform surgery, or by a healthcare professional under the supervision of a physician. Guidelines / Positions Medical Spas, LASERS, BOTOX <a href="http://pr.mo.gov/boards/healingarts/Medical-Spas-Lasers-Botox.pdf">http://pr.mo.gov/boards/healingarts/Medical-Spas-Lasers-Botox.pdf</a></td>
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<td>MT</td>
<td>Board rules include the use of lasers in the definition of surgery.  <a href="http://www.mtrules.org/gateway/ruleno.aspx?RN=24%2F156">24.156.640</a> MEDICAL ASSISTANT</td>
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<td>NE</td>
<td><a href="http://www.mtrules.org/gateway/ruleno.asp?RN=24%2E156%2E501">24.156.501 DEFINITIONS</a> (11) “Surgery” means any procedure in which human tissue is cut or altered by mechanical or energy forms, including electrical or laser energy or ionizing radiation.</td>
<td><a href="http://www.mtrules.org/gateway/ruleno.asp?RN=24%2E121%2E1509">24.121.1509 IMPLEMENTS, INSTRUMENTS, SUPPLIES, AND EQUIPMENT</a> (10) The use of laser energy, as prescribed in ARM 24.156.501 as “any procedure in which human tissue is cut or altered by mechanical or energy forms, including electrical or laser energy or ionizing radiation” constitutes the practice of medicine and is prohibited for all individuals licensed under this chapter.</td>
<td>The Board of Medicine and Surgery has gone on record to state that use of a laser, for aesthetic procedures, or any other procedures, is the practice of medicine and surgery.</td>
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<tr>
<td>NV-M</td>
<td>In December 1998, the Board issued an advisory opinion indicating that the use of lasers is included in the definition of the practice of medicine. The opinion states that physicians are allowed to delegate certain responsibilities, including the use of lasers, only to employees qualified to perform procedures by way of special skills, education, or experience. Website only lists laser eye surgery Nevada board spokesman stated 6/20/2011 that Nevada does not currently have any regulations regarding the use of a laser.</td>
<td>The physician may not delegate the use of a laser to non-physicians, except that it may be delegated to a physician assistant with supervision and training consistent with the requirements for duties delegated to a physician assistant.</td>
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<tr>
<td>NV-O</td>
<td><a href="http://www.gencourt.state.nh.us/rsa/html/XXX/329/329-1.htm">CHAPTER 329 PHYSICIANS AND SURGEONS</a> Section 329:1 329:1 Practice. – Any person shall be regarded as practicing medicine under the meaning of this chapter who shall diagnose, treat, perform surgery, or prescribe any treatment of medicine</td>
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| NJ    | SUBCHAPTER 4A. SURGERY, SPECIAL PROCEDURES, AND ANESTHESIA SERVICES PERFORMED IN AN OFFICE SETTING  
“Surgery” means a manual or operative procedure, including the use of lasers, performed upon the body for the purpose of preserving health, diagnosing or treating disease, repairing injury, correcting deformity or defects, prolonging life or relieving suffering. Surgery includes, but is not limited to: incision or curettage of tissue or an organ; suture or other repair of tissue or an organ; a closed or open reduction of a fracture or extraction of tissue from the uterus.  
13:35-4A.12 Alternative privileging procedure  
(d) A practitioner who seeks to utilize laser surgery techniques in an office, but does not hold privileges at a licensed hospital to do so, shall submit to the Board an application, which shall include:  
1. Certification of successful completion of an accredited laser training program, in which the curriculum includes instruction in laser care, physics and clinical indications for utilization of the specific laser; or  
2. Documentation from the program director of an accredited residency training program which the applicant has successfully completed, attesting to the inclusion of training in the specific laser therapy for which privileges are being sought during residency training.  
13:35-4A.3  
Minor Surgery  

_Last updated: May 2012_
State Laser Regulation Law, Rule or Policy Requirements Related to Supervision and/or Delegation of Medical Functions to Unlicensed Individuals Pending Legislation

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<tr>
<td>NM-M</td>
<td>Additional examples of minor surgery include closed reduction of a fracture, the incision and drainage of abscesses, certain simple ophthalmologic surgical procedures, such as treatment of chalazions and non-invasive ophthalmologic laser procedures performed with topical anesthesia, limited endoscopies such as flexible sigmoidoscopies, anoscopies, proctoscopies, arthrocenteses, thoracenteses and paracenteses. Minor surgery shall not include any procedure identified as “major surgery” within the meaning of N.J.A.C. 13:35-4.1. “Monitoring” means continuous visual observation 13:35-9,11 Referral; informed consent A certified acupuncturist may perform initial acupuncture treatment only on presentation by the patient of a referral by or diagnosis from a licensed physician. The referring or diagnosing physician shall provide to the treating acupuncturist a diagnosis and pre-evaluation of the patient above, use any of the following methods to effect the stimulation of acupuncture points and channels as part of his or her professional practice: 7. Cold laser used for needle-less acupuncture; SUBCHAPTER 12. ELECTROLOGISTS “Electrology” means the removal of hair permanently through the utilization of solid probe electrode-type epilation, including thermolysis, being of a short wave, high frequency type, and including electrolysis, being of a galvanic type, or a combination of both, which is accomplished by a superimposed or sequential blend. This definition specifically excludes laser and other intense light source hair removal from the definition of electrology.</td>
<td>The MPA, Section 61-6-16(6)(3) states that the Act does not limit or prevent a physician from delegating any task or function to a qualified person otherwise permitted by state law or established by custom, except the dispensing of dangerous drugs. LASERS &amp; LIGHT ACTIVATED DEVICES FOR HAIR REMOVAL New Mexico allows a non-physician to perform laser or light activated hair removal. However, these services to be performed</td>
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In 2000, the Board revised rules and regulations on the use of lasers and light activated devices to incorporate board policy. The rule states that non-physician personnel performing hair removal on patients must have appropriate training in laser usage and the supervising physician must be on the immediate premises during the procedure. However, when the procedure is performed by a trained physician assistant, the supervising physician is not required to be physically present in the building where the surgery is being performed. | |

Last updated: May 2012
In April 2002, the Board adopted a rule stating requirements that must be met before unlicensed personnel may perform hair removal using lasers and light activated devices, including that the supervising physician must be on the immediate premises at all times during a procedure.

16.10.13.7 DEFINITIONS:

C. “Medical therapeutic or cosmetic medical procedure, device, or treatment” means a treatment or procedure that uses any of the following, if the procedure or treatment alters or damages or is capable of altering or damaging living tissue, to improve the patient’s appearance or to achieve an enhanced aesthetic result:

1. injection or insertion of a biologic or synthetic substance for soft tissue augmentation;
2. application of a chemical substance;
3. application of microwave energy; or
4. application of a federal food and drug administration approved prescription device that uses waveform energy of any kind, including, but not limited to lasers or intense pulsed light.

D. “Certified” means the medical assistant has been awarded a certificate.


16.10.13.8 USE OF MEDICAL THERAPEUTIC AND COSMETIC DEVICES. Medical therapeutic or cosmetic devices penetrate and alter human tissue and can result in complications such as visual impairment, blindness, inflammation, burns, scarring, hypo-pigmentation and hyper-pigmentation. The use of medical therapeutic and cosmetic devices is the practice of medicine as defined in Section 61-6-1 NMSA 1978.

A. Limitations.

1. Medical assistants are limited to using medical therapeutic and cosmetic devices that are non-incisive and non-ablative.
2. Medical therapeutic and cosmetic devices may only be used by a medical assistant who is certified pursuant to Subsection D of 16.10.13 NMAC and when the supervising physician is under the supervision of a licensed physician. The rules require:
   * the supervising physician must have interviewed the patient and recorded appropriate history and physical information;
   * the unlicensed person who will be performing the hair removal must have been trained on the procedure;
   * the supervising physician must be on the immediate premises at all times during the procedure;
   * the unlicensed person performing the service must be fully insured under the physician's medical malpractice policy;
   * the patient must be informed that the person providing the service is not a physician; and
   * the Board must have a record of non-licensed staff who are performing these services.
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<td>immediately available on the premises.</td>
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<tr>
<td>B. Responsibility of the supervising physician. A physician who is trained in the safety and use of medical therapeutic or cosmetic devices may supervise medical assistants who perform hair removal and other therapeutic or cosmetic procedures using devices that use waveform energy consistent with the following requirements.</td>
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<tr>
<td>(1)</td>
<td>The supervising physician must provide the following services before treatment by a medical assistant is initiated: patient history, physical examination, diagnosis, treatment protocol, and preparation of medical record.</td>
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<td>(2)</td>
<td>The supervising physician shall review any adverse outcomes or changes in the treatment protocol.</td>
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<td>(3)</td>
<td>The supervising physician shall assure the patient is informed and aware that the individual performing the procedure is a medical assistant and is under the physician's supervision.</td>
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<td>(4)</td>
<td>The supervising physician shall provide the patient instructions for emergency and follow-up care.</td>
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<td>(5)</td>
<td>The supervising physician shall prepare a written protocol for the medical assistant to follow when using the medical therapeutic or cosmetic device. The protocol may include pre and post care treatment related to the procedure as long as the treatment is topical and non-injectable. The physician is responsible for ensuring that the medical assistant uses the medical therapeutic or cosmetic device only in accordance with the written protocol and does not exercise independent medical judgment when using the device.</td>
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<td>(6)</td>
<td>The supervising physician shall assure compliance with the training and reporting requirements of this rule.</td>
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<td>(7)</td>
<td>The supervising physician is ultimately responsible for the safety of the patient, regardless of who performs the treatment using the medical therapeutic or cosmetic device or procedure.</td>
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<tr>
<td>C. Training requirements. Medical assistants who use medical therapeutic or cosmetic devices must have training and be certified on each device they will use. The training on each device must include the following:</td>
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<tr>
<td>(1)</td>
<td>physics and safety of the medical therapeutic or cosmetic device;</td>
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<td>(2)</td>
<td>basic principle of the planned procedure;</td>
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<tr>
<td>(3)</td>
<td>clinical application of the medical therapeutic or cosmetic device, including wavelengths to be used;</td>
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<td>(4) indications and contraindications for the use of the medical therapeutic or cosmetic device; (5) pre-operative and post-operative care; (6) recognition and acute management of complications that may result from the procedure; and (7) infectious disease control procedures required for each procedure.</td>
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<td><strong>D. Reporting requirements.</strong> The supervising physician shall complete a &quot;certificate of training&quot; form and submit it to the board prior to the use of a medical therapeutic or cosmetic device by the medical assistant. The form will be device-specific and document training for each medical therapeutic or cosmetic device used by the medical assistant.</td>
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<td><strong>E. Public communication.</strong> Any public communication offering the performance or administration of a cosmetic medical procedure or treatment shall identify the physician or surgeon responsible for the provision of, or the direct supervision of the procedure or treatment.</td>
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<tr>
<td>NM-O</td>
<td></td>
<td>Section 6530 of the New York Education Law defines professional misconduct and includes: 24) Practicing beyond the scope of practice permitted by state law and performing professional responsibilities a licensee knows he/she is not competent to perform………... 25) Delegating professional responsibilities to a person when the licensee delegating such responsibilities knows or has reason to know that such person is not qualified, by training, experience or by licensure to perform.</td>
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<tr>
<td>NY</td>
<td><strong>In August 2002,</strong> the NY State Board of Medicine passed a resolution recommending that the use of lasers and intense pulsed light for hair removal be considered the practice of medicine and thus be performed by a physician or under direct physician supervision.</td>
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<tr>
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<td>Section 6530 of the New York Education Law defines professional misconduct and includes: 24) Practicing beyond the scope of practice permitted by state law and performing professional responsibilities a licensee knows he/she is not competent to perform………... 25) Delegating professional responsibilities to a person when the licensee delegating such responsibilities knows or has reason to know that such person is not qualified, by training, experience or by licensure to perform.</td>
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<tr>
<td>NC</td>
<td><strong><a href="http://www.ncmedboard.org/position_statements/detail/laser_surgery/">http://www.ncmedboard.org/position_statements/detail/laser_surgery/</a></strong> <strong>In July 1999,</strong> the North Carolina Board adopted a position statement that laser surgery is the practice of medicine and should be performed only by a physician or by a practitioner working within his/her scope of practice and with appropriate medical training under the supervision of a physician or other practitioner licensed to perform surgical services and preferably on-site. The statement was slightly amended in March 2002.</td>
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<td><strong>In August 2002,</strong> the Board amended its position statement on laser hair removal to state that laser hair removal should be</td>
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<td><strong>MPA, Chapter 90, Section 90-18, under practicing without a license, states that physicians are not prohibited from delegating any act or task to a qualified person that is otherwise permitted by law or established by custom.</strong></td>
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<td>**Rule 800 – adopted 11-15-02, establishes 1) that the responsibility for the delivery and outcome of any delegated function lies solely with the delegating physician, 2) adequacy and appropriateness of training for the function should be documented, 3) adequacy and appropriateness of supervision will be judged by the standard of care for a physician directly delivering the same medical service, and 4) delegated services</td>
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<tr>
<td>ND</td>
<td>Only a physician may use a laser for hair removal.</td>
<td>cannot be re-delegated by anyone other than the responsible physician. In addition, prescribing of medication, other than refills, cannot be delegated under CO statute.</td>
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<tr>
<td>NMI</td>
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<td>OH</td>
<td>In 2000, the Board adopted rules that state that the application of light-based medical devices to the human body is the practice of medicine, osteopathic medicine and podiatric medicine. Licensed physicians and osteopathic physicians may delegate the use of light-based medical devices approved by the FDA for phototherapy in treatment of hyperbilirubinemia in neonates to any appropriate person. Additionally, physicians may delegate the application of light-based medical devices to physician assistants and cosmetic therapists for the purpose of hair removal under certain conditions. Violation of the rules constitutes failure to conform to minimum standards of care. Ohio Adm. Rule 4731-23 regulates the delegation of medical tasks. Medical tasks may be delegated by a physician only under certain circumstances including that the person to whom the task is delegated is competent based on specific factors; the task is within the physician’s expertise; and the supervising physician retains responsibility for the delegated task.</td>
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Surgery  
The ablation or alteration of any human tissue by any means including but not limited to the use of sharp surgery, heat, cold, abrasion, laser, chemicals, injection/placement of substances subcutaneous, or the use of FDA approved devices that can only | If the physician is utilizing an Oklahoma licensed nurse, [RN, LPN, APN (advance practice nurse) or APN with prescriptive authority] and IF they are functioning within the scope of their practice act, then the physician may delegate any of the defined medical services to that licensed nurse under general supervision, which may not require the physician to be on-site. It is imperative that the physician contact the Oklahoma Board |

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<td>OR</td>
<td>In January 2002, the Board adopted a position statement that the medical use of lasers is the practice of medicine. Physicians using lasers should be trained appropriately and any physician who delegates a procedure using lasers or intense pulsed light devices to a non-physician should be qualified to do the procedure themselves. Allied health professionals employed to perform a laser or intense pulsed light procedure must have appropriate training and education and must be under the direct supervision of a licensed physician under written guidelines and/or policies. The ultimate responsibility for performing any procedure lies with the physician. Medical Use of Lasers <a href="http://www.oregon.gov/OMB/SOP_Lasers.shtml">http://www.oregon.gov/OMB/SOP_Lasers.shtml</a></td>
<td>A medical doctor may delegate to a health care practitioner or technician the performance of a medical service if (1) the delegation is consistent with the standards of acceptable medical practice embraced by the medical doctor community in the Commonwealth; the delegation isn’t prohibited by regulations promulgated by the board; the delegation isn’t prohibited by statutes or regulations relating to other licensed health care practitioners. 63 P.S. § 422.17(a)</td>
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<tr>
<td>PA-M</td>
<td>Use of lasers not included in the definition of the practice of medicine and not addressed otherwise in statute or rule.</td>
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<td>PA-O</td>
<td>Same as PA-M</td>
<td>Nothing in this act shall be construed to prohibit services and acts rendered by a qualified physician assistant, technician or other allied medical person if such services and acts are rendered under the supervision, direction or control of a licensed physician. 63 P.S. § 271.3(b)</td>
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<td>RI</td>
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<td>SC</td>
<td>12-15-2003 – Policy statement on office based esthetic procedures: <a href="http://www.health.ri.gov/publications/policystatements/BoardOfMedicalLicensureAndDiscipline.pdf">http://www.health.ri.gov/publications/policystatements/BoardOfMedicalLicensureAndDiscipline.pdf</a> It is the position of the Board that office based cosmetic or esthetic procedures that require the use of medical lasers, high-</td>
<td>The MPA, Title 40, Chapter 47, Section 40-47-60 states that the Act does not prohibit licensed physicians from delegating tasks to unlicensed personnel in their employment and on their premises if the task is routine in nature; is performed while the physician is present on the premises and readily available; the task does not involve the verbal transmission of a physician’s order; and the unlicensed person is</td>
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<td>SD</td>
<td>Surgery constitutes the practice of medicine includes the use of a laser or ionizing radiation for the purpose of cutting or otherwise altering human tissue for diagnostic, palliative or therapeutic purposes. SDCL § 36-4-82.</td>
<td>wearing a badge denoting their status. &lt;br&gt;<a href="http://llronline.com/POL/Medical/PDF/Laws/MPACChapt47.pdf">http://llronline.com/POL/Medical/PDF/Laws/MPACChapt47.pdf</a></td>
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<td>frequency radio waves, or injection of sclerosing chemicals or biologically active compounds [e.g. Botulinum toxin A, Botox] are medical procedures. &lt;br&gt;Therefore, prior to undergoing such procedures patients must receive a medical evaluation for appropriateness by a licensed and qualified physician or other practitioner acting within his/her scope of practice. Although these procedures may be performed by an appropriately trained nonphysician working under the supervision and direction of a physician or other practitioner acting within his/her scope of practice, it is the supervising physician’s [or other practitioner acting within his/her scope of practice] responsibility to assure that procedures are conducted appropriately; with appropriate assessment, consent and follow-up; and upon appropriate patients; and that all patient records are maintained according to standards applicable for medical records; and that patient privacy is protected. The supervising physician or other practitioner acting within his/her scope of practice is responsible for any procedures carried out by nonphysicians under his/her direction. &lt;br&gt;Physicians [or other practitioner acting within his/her scope of practice] who perform and supervise such procedures must be able to demonstrate appropriate training and experience. Such training and experience may include, but is not limited to, residency or fellowship. &lt;br&gt;The physician or other practitioner acting within his/her scope of practice is responsible to assure and document adequate training for individuals under his/her supervision. &lt;br&gt;Additionally, other cosmetic procedures such as dermabrasion or the application of potentially scarring chemical treatments [e.g. so-called chemical peels] should also meet this same standard.</td>
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### Requirement Related to Supervision and/or Delegation of Medical Functions to Unlicensed Individuals

Pursuant to the Laser Use and Supervision Policy, individuals performing laser procedures must be under the direct supervision of a physician when the procedure is performed. This includes those delegated to perform laser procedures who are required to have received proper training and to maintain ongoing education in the area of laser technology.

#### Laser Utilization Protocol

**PURPOSE:** The purpose of this policy is to outline the utilization restrictions and procedure for delivery of laser therapy by NPs and PAs.

**POLICY:**

1. The NP/PA laser utilization protocol will be as follows:
   a. Laser therapy will be administered by the NP/PA only after completing an initial laser specific orientation for each individual laser. This training is conducted by each laser manufacturer. A certificate will be acquired after completion and will be maintained in each personnel file.
   b. Under direct supervision of the laser trained collaborating/supervising physician, the NP/PA will be required to perform 40 laser procedures specific to each individual laser which include the Candela V-Beam Pulse Dye Laser, Candela Gentlelase Plus hair removal laser, Candela Smoothbeam Diode Laser, and Cynosure V-Star Pulse-dye Laser. A confidential list of patients treated will be maintained by the NP/PA. This list will be readily available upon request.
   c. The NP/PA will be required to attend and an American Academy of Dermatology approved continuing education program that specifically addresses laser technology. The NP/PA will complete an initial continuing education program within the first year and will be required to maintain 15 continuing education hours per 2 year period of time. Proof of education will be maintained in the personnel record.
   d. No healthcare provider, other than physicians, NPs, or PAs, may be trained to use lasers.

2. The collaborating/supervising physician will monitor and evaluate the progress of the NP/PA and if additional education or supervised training is necessary, the physician will amend this training protocol to require additional training.

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#### State Laser Regulation Law, Rule or Policy

In October 1999, the Board adopted a policy statement defining the use of laser devices as surgery and stating that laser surgery should be performed only by individuals licensed to practice medicine. Use of a laser device for hair removal may be performed by a licensed physician or may be a delegated medical act. If delegated, the person performing the procedure must be under the direct supervision of a physician who must be on-site when the procedure is performed.

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<td>TN-M</td>
<td>Any procedure encompassed within the definition of the practice of medicine contained in T.C.A. § 63-6-204 that is to be performed by the use of a laser shall be considered, except as provided in T.C.A. § 63-26-102(5) and 63-9-106, to be the practice of medicine and any person performing such procedure must be under the supervision of a licensed physician. Rule 0880-02-.14(10). Pursuant to T.C.A. § 63-6-204(a)(1) any person shall be regarded as practicing medicine within the meaning of this chapter who treats, or professes to diagnose, treat, operates on or prescribes for any physical ailment or any physical injury to or deformity of another. Laser surgeries performed (pursuant to these rules—Office Based Surgery) require written policies and procedures that include, but are not limited to, laser safety, education, training, and the supervision of other licensed health care practitioners who are performing laser treatment. A safe environment shall be maintained for laser surgery. Rule 0880-02-.21(8)(b) 0880-2-.21(3)(a) Surgery - The excision or resection, partial or</td>
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The training protocol has been completed.
b. Laser therapy will be delivered only when the collaborating/supervising physician is physically present on site.
c. Laser therapy parameters will be dictated by the collaborating/supervising physician after review of the chart, photographs and patient case. These parameters will include the type of laser to be utilized and the laser delivery settings.
d. No variations of the treatment settings will be made without the prior approval of the collaborating/supervising physician.
e. After the laser treatment is provided, the chart will be returned to the physician. Any untoward side effects, problems, and changing of the treatment plan will be addressed with chart review.
f. Only physicians, NPs, or PAs, trained pursuant to these protocols dated November 17, 2003 may utilize lasers.

2012 TN SR 94 signed by the Speaker on 4/18/2012, directs the Board of Medical Examiners to promulgate rules to prescribe standards for the practice of cosmetic procedures using laser invasive technology and chemical peels.
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<td>TN-O</td>
<td>Use of Laser Equipment – Any procedure encompassed within the definition of the practice of osteopathic medicine contained in T.C.A. § 63-9-106 that is to be performed by the use of a laser shall be considered, except as provided in T.C.A. §§ 63-26-102(5) and 63-6-204, to be the practice of osteopathic medicine. Rule 1050-02-.13(10). Osteopathic medicine is defined as a separate, complete and independent school of medicine and surgery utilizing full methods of diagnosis and treatment of physical and mental health and disease, including the prescription and administration of drugs, medicines, and biological, operative surgery, obstetrics and radiological and other electromagnetic emissions, which places special emphasis on the interrelationship of the muscoskeletal system to other body systems as taught and practiced by recognized associated colleges of osteopathic medicine. T.C.A. § 63-9-106(a). Laser surgeries performed (pursuant to these rules—Office Based Surgery) require written policies and procedures that include, but are not limited to, laser safety, education, training, and the supervision of other licensed health care practitioners who are performing laser treatment. A safe environment shall be maintained for laser surgery. Rule 1050-02-.21(8)(b) 1050-02-.21(3)(o) Surgery - The excision or resection, partial or complete, destruction, incision or other structural alteration of...</td>
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<td>TX</td>
<td>§193.11. Use of Lasers. <a href="http://www.tmb.state.tx.us/rules/laserrule.php.bu070109a">http://www.tmb.state.tx.us/rules/laserrule.php.bu070109a</a></td>
<td>(a) Purpose. As the use of lasers/pulsed light devices is the practice of medicine, the purpose of this section is to provide guidelines for the use of these devices for ablative and non-ablative treatment by physicians. Nothing in these rules shall be construed to relieve the supervising physician of the professional or legal responsibility for the care and treatment of the physician's patients. (b) Definitions. For the purpose of this section, the following definitions will apply. (3) On-site supervision--On-site supervision shall mean continuous supervision in which the individual is in the same building.</td>
<td>The TX MPA in Section 3.06 states that a physician has the authority to delegate a medical act to qualified and properly trained persons if the physician determines that the act can be properly and safely performed by that person and such delegation does not violate any other statute. The delegating physician remains responsible for delegated medical acts.</td>
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<td>TX Board rules, Standing Delegation Orders Chapter 193.1-193.10 relate to delegation of Health care tasks to qualified non-physicians Providing services under physician supervision. A physician may delegate only health care acts that do not require the exercise of independent medical judgment and only when the physician is satisfied that the person has the ability and competence to perform the task. Effective March 6, 2003.</td>
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<td>UT-M</td>
<td>R156-11a. Standards for Approval of Mechanical or Electrical Apparatus. [3] The use of any procedure in which human tissue is cut or altered by laser energy or ionizing radiation is prohibited for all individuals licensed under this chapter unless it is within the scope of practice for the licensee and under the appropriate level of supervision by a licensed health care practitioner acting within the licensed health care practitioner's scope of practice.</td>
<td>2012 UT SB 40 signed by the Governor on 3/23/2012, defines ablative procedure, cosmetic medical facility, cosmetic medical procedure, nonablative procedure, superficial procedure and supervisor. The bill prohibits the use of the term “medical” when advertising a facility that performs cosmetic medical procedures under certain circumstances; exempts certain licensees from the definition of cosmetic medical procedures; and establishes standards for the supervision of cosmetic medical procedures. The bill also amends the practice of medicine and provisions setting forth “unprofessional conduct.”</td>
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<td>UT-O</td>
<td>Same as UT-M</td>
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<td>VT-M</td>
<td>Title 26: Professions and Occupations Chapter 86: Electrologists 26 V.S.A. § 4402. Definitions “Electrology” means the removal of hair by electrical current using needle/probe electrode-type epilation which would include electrolysis (direct current/DC), thermolysis (alternating current/AC), and other processes using electrical current.</td>
<td>Nothing found relating to a laser</td>
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| VT-O  | current/AC), or a combination of both (superimposed or sequential blend). "Electrology" includes the use by properly trained licensed electrologists of lasers approved by the United States Food and Drug Administration for electrology and as otherwise permitted by Vermont law. | Chapter 30: OPTOMETRY 26 V.S.A. § 1728. Use of therapeutic pharmaceutical agents http://www.leg.state.vt.us/statutes/fullsection.cfm?Title=26&Chapter=030&Section=01728  
(b) Nothing in this subchapter shall be construed to permit: (1) the use of therapeutic ultrasound, the use of injections except for the appropriate emergency stabilization of a patient, or the performance of surgery. "Surgery" means any procedure in which human tissue is cut, penetrated, thermally or electrically cauterized except when performing electrolysis, or otherwise infiltrated by mechanical or laser means in a manner not specifically authorized by this act. |  |
| VA    | Nothing on website | http://www.dhp.state.va.us/medicine/leg/Chapter29%20Medicine.doc  
Title 54.1 of the Code of Virginia provides that the code does not prohibit a licensed physician from delegating activities or functions to employees that are nondiscretionary and do not require professional judgment and are customarily delegated to such persons. The physician assumes responsibility for delegated tasks. |  |
| VI    |  |  |  |
(1) For the purposes of this rule, laser, light, radiofrequency, and plasma devices (hereafter LLRP devices) are medical devices that:  
(a) Use a laser, noncoherent light, intense pulsed light, radiofrequency, or plasma to topically penetrate skin and alter human tissue; and  
(b) Are classified by the federal Food and Drug Administration as prescription devices.  
(2) Because an LLRP device penetrates and alters human tissue, | Physician Assistant Responsibilities  
(4) A physician assistant must be appropriately trained in the physics, safety and techniques of using LLRP devices prior to using such a device, and must remain competent for as long as the device is used.  
(5) A physician assistant may use an LLRP device so long as it is with the consent of the sponsoring or supervising physician, it is in compliance with the practice arrangement plan approved by the commission, and it is in accordance with standard medical practice. |  |

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<td>WA-O</td>
<td>246-919-605. Use of laser, light, radiofrequency, and plasma</td>
<td>(6) Prior to authorizing treatment with an LLRP device, a physician assistant must take a history, perform an appropriate physical examination, make an appropriate diagnosis, recommend appropriate treatment, obtain the patient's informed consent (including informing the patient that a nonphysician may operate the device), provide instructions for emergency and follow-up care, and prepare an appropriate medical record.</td>
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<td><strong>PHYSICIAN ASSISTANT DELEGATION OF LLRP TREATMENT</strong></td>
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<td>(7) A physician assistant who meets the above requirements may delegate an LLRP device procedure to a properly trained and licensed professional, whose licensure and scope of practice allow the use of an LLRP device provided all the following conditions are met:</td>
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<td>(a) The treatment in no way involves surgery as that term is understood in the practice of medicine;</td>
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<td>(b) Such delegated use falls within the supervised professional's lawful scope of practice;</td>
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<td>(c) The LLRP device is not used on the globe of the eye; and</td>
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<td>(d) The supervised professional has appropriate training in, at a minimum, application techniques of each LLRP device, cutaneous medicine, indications and contraindications for such procedures, preprocedural and postprocedural care, potential complications and infectious disease control involved with each treatment.</td>
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<td>(e) The delegating physician assistant has written office protocol for the supervised professional to follow in using the LLRP device. A written office protocol must include at a minimum the following:</td>
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<td>(i) The identity of the individual physician assistant authorized to use the device and responsible for the delegation of the procedure;</td>
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<td>(ii) The LLRP device can result in complications such as visual impairment, blindness, inflammation, burns, scarring, hypopigmentation and hyperpigmentation.</td>
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<td>(3) Use of medical devices using any form of energy to penetrate or alter human tissue for a purpose other than the purpose set forth in subsection (1) of this section constitutes surgery and is outside the scope of this section.</td>
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<td>(10) A physician who meets the above requirements may delegate an LLRP device procedure to a properly trained and licensed professional, whose licensure and scope of practice allow the use of an LLRP device, provided certain conditions are met.</td>
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The use of an LLRP device is the practice of medicine. A physician must be appropriately trained in the physics, safety and techniques of using LLRP devices prior to using such a device, and must remain competent for as long as the device is used.

(5) A physician must use an LLRP device in accordance with standard medical practice.

(6) Prior to authorizing treatment with an LLRP device, a physician must take a history, perform an appropriate physical examination, make an appropriate diagnosis, recommend appropriate treatment, obtain the patient's informed consent (including informing the patient that a nonphysician may operate the device), provide instructions for emergency and follow-up care, and prepare an appropriate medical record.

(7) Regardless of who performs LLRP device treatment, the physician is ultimately responsible for the safety of the patient.

(8) Regardless of who performs LLRP device treatment, the physician is responsible for assuring that each treatment is documented in the patient's medical record.

(9) The physician must ensure that there is a quality assurance program for the facility at which LLRP device procedures are performed regarding the selection and treatment of patients. LLRP device procedure to a properly trained and licensed professional, whose licensure and scope of practice allow the use of an LLRP device, provided all the following conditions are met:

(a) The treatment in no way involves surgery as that term is understood in the practice of medicine;
(b) Such delegated use falls within the supervised professional's lawful scope of practice;
(c) The LLRP device is not used on the globe of the eye;
(d) A physician has a written office protocol for the supervised professional to follow in using the LLRP device. A written office protocol must include at a minimum the following:
(i) The identity of the individual physician authorized to use the device and responsible for the delegation of the procedure;
(ii) A statement of the activities, decision criteria, and plan the supervised professional must follow when performing procedures delegated pursuant to this rule;
(iii) Selection criteria to screen patients for the appropriateness of treatments;
(iv) Identification of devices and settings to be used for patients who meet selection criteria;
(v) Methods by which the specified device is to be operated and maintained;
(vi) A description of appropriate care and follow-up for common complications, serious injury, or emergencies; and
(vii) A statement of the activities, decision criteria, and plan the supervised professional shall follow when performing delegated procedures, including the method for documenting decisions made and a plan for communication or feedback to the authorizing physician concerning specific decisions made;
(e) The supervised professional has appropriate training in, at a minimum, application techniques of each LLRP device, cutaneous medicine, indications and contraindications for such procedures, preprocedural and postprocedural care, potential complications and infectious disease control involved with each treatment;
(f) The delegating physician ensures that the supervised professional uses the LLRP device only in accordance with the written office protocol, and does not exercise independent medical judgment when using the device;
(g) The delegating physician shall be on the immediate premises during the patient's initial treatment and be able to treat...
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<td>WV-M</td>
<td>Public Policy Statement on Surgery using laser, pulsed light, radiofrequency devices, or other Techniques <a href="http://www.wvbom.wv.gov/policysurgerylaser.pdf">http://www.wvbom.wv.gov/policysurgerylaser.pdf</a></td>
<td>complications, provide consultation, or resolve problems, if indicated. The supervised professional may complete the initial treatment if the physician is called away to attend to an emergency; (h) Existing patients with an established treatment plan may continue to receive care during temporary absences of the delegating physician provided that there is a local back-up physician who satisfies the requirements of subsection (4) of this section. The local back-up physician must agree in writing to treat complications, provide consultation or resolve problems if medically indicated. The local back-up physician shall be reachable by phone and able to see the patient within sixty minutes.</td>
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<td>WV-O</td>
<td>BC 2.025 Delegated medical procedures. <a href="http://legis.wisconsin.gov/rsb/code/bc/bc002.pdf">http://legis.wisconsin.gov/rsb/code/bc/bc002.pdf</a></td>
<td>(1) Licensees may provide client services constituting medical procedures only as directed, supervised and inspected by a physician who has the power to direct, decide and oversee the implementation of the client services provided in licensed establishments. (2) Delegated medical procedures include the following: (a) Laser hair removal services. Prior to providing any laser hair removal procedures, a licensee shall complete advanced training in the use of laser devices in a training program of not less than 6 hours. If the training program is provided in a setting other than a licensed school of cosmetology or barbering, the Clearinghouse Rule 05-118 <a href="http://nxt.legis.state.wi.us/nxt/gateway.dll?f=templates&amp;fn=default.htm&amp;d=stats&amp;q=laser">http://nxt.legis.state.wi.us/nxt/gateway.dll?f=templates&amp;fn=default.htm&amp;d=stats&amp;q=laser</a></td>
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|       | program shall incorporate all of the following:  
3) Delegated medical procedures shall be undertaken only pursuant to formal written protocols setting forth the nature and scope of the procedures delegated, describing the supervisory plan, and indicating any contraindications to undertaking the procedure. A laser hair removal product or device, or intense pulsed light device shall not be used on a minor unless the minor is accompanied by a parent or guardian and only under the general supervision of a physician. | | |
| WY    | (vii) Operates or delegates the responsibility to operate a medical device classified as a Class II or Class III medical device by the U.S. Food and Drug Administration unless operation or authorization for operation occurs in a site under the supervision of a person licensed under this chapter. | | |

For informational purposes only. This document is not intended as a comprehensive statement on the law on this topic, nor to be relied upon as authoritative. Non-cited laws, regulation and/or policy could impact analysis on a case-by-case or state-by-state basis. All information should be verified independently.