Washington State Nursing Care Quality Assurance Commission

POSITION STATEMENT: Administration of Botox and the Role of Licensed Nurses

Botulinum Toxin Type A is a protein produced by the bacterium *Clostridium botulinum*. When used in medical settings as an injectable form of sterile, purified botulinum toxin, small doses of the toxin are injected into the affected muscles and block the release of the chemical acetylcholine that would otherwise signal the muscle to contract. The toxin thus paralyzes or weakens the injected muscle. This statement refers only to the use of Botox for cosmetic purposes and is not to be construed for any other medical uses or medical setting.

The Washington State Nursing Commission recognizes the use of Botox for cosmetic purposes has increased dramatically since its release by the US Food and Drug Administration in April 2002. According to the American Society for Dermatologic Surgery, Botox injection for the treatment of frown lines and “crows feet” is the 4th most common cosmetic procedure. Botox is administered as an intramuscular injection into specific muscle groups in the forehead, glabellar area and around the eyes to smooth out lines and wrinkles.

Botox injection procedures are within the scope of nursing for a Registered Nurse and a Licensed Practical Nurse provided the following guidelines are followed:

1. The nurse is competent to perform the procedure and has the documented and demonstrated knowledge, skill, and ability to perform the procedure pursuant to WAC 246-840-700 (4)
2. There are agency policies and procedures and any required protocols in place for the nurse to perform the procedure.
3. The nurse is in compliance with licensure or certification by any other regulatory body (other than the Washington State Nursing Care Quality Assurance Commission) and has met all requirements established by any other regulatory agency which has authority over the procedure.
4. The nurse maintains accountability and responsibility for nursing care related to the procedure and follows the accepted standard of care which would be provided by a reasonable and prudent nurse.
5. Clients have granted informed consent. In obtaining informed consent for a nursing intervention, the nurse shall provide the patient/client/family with the nature and consequences of any procedure, the reasonable risks (if any), possible side effects, benefits, and purposes of the procedure and any alternative procedures available.
6. The use of any of these procedures does not authorize the licensed nurse to diagnose or prescribe.
The procedure is not performed independently. It is authorized pursuant to RCW 18.79.260, 18.79.270 and is performed under the direct supervision of a physician who is present at the site where the procedure is performed and has the knowledge, skill, and ability to perform the procedure.

Because it is within the scope of practice for a registered nurse and a licensed practical nurse to execute the medical orders from a licensed physician, the physician must be properly trained in cutaneous medicine and surgery and in the administration of Botox for cosmetic purposes. Nurses accepting these orders shall show appropriate training in anatomy of the facial musculature, proper administration, possible side effects, and post procedure care for the safety and well being of the patient.

It is the responsibility of the physician to be aware of the extent of training and the ability of the nurse to competently perform the injections and meet the standard of care for the procedure. The nurse may administer the treatment only after the physician has assessed the patient and a plan of treatment has been determined. This plan shall include, but not be limited to the location for injections; dosage, post procedure care and possible follow up. Nurses performing this procedure shall be working under direct supervision of a licensed physician, who is immediately available at the time of the procedure for any further consultation and management of any potential adverse events.