

Cosmetic interventions



Summary

This guidance will make sure that you provide the right standard of care to your patient when carrying out cosmetic interventions. It covers issues such as:

- recognising and working within the limits of your competence
- making sure that you get consent from your patient yourself
- having a clear discussion with your patient about outcome, benefits and risks
- giving your patients time to reflect so they can make an informed decision
- taking into account your patients vulnerabilities and psychological needs
- marketing your services responsibly.

Cosmetic interventions

Professional standards: More detailed guidance

This guidance came into effect 1 June 2016.

This guidance was last updated on 13 December 2024.

You can find the latest version of all our professional standards at www.gmc-uk.org/guidance.

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About our Cosmetic interventions guidance

How this guidance applies to you

This guidance, which forms part of the professional standards, is for all doctors, physician associates and anaesthesia associates who offer cosmetic interventions.

The standards of good practice apply to doctors, physician associates and anaesthesia associates (collectively referred to as medical professionals and whom we address directly as 'you' throughout the guidance). As with all our professional standards, this guidance applies to all our registrants to the extent it is relevant to the individual's practice.

The cosmetic sector is a rapidly expanding area of practice that has gone from being a niche market to a popular service that is now widely available. Cosmetic interventions can have a significant impact on the health and wellbeing of patients. There have been particular concerns about patient safety and whether the sector operates in an ethical manner. It is important that medical professionals have the right skills, the products used are safe, and patients get accurate information before they decide to have a cosmetic intervention. This guidance sets out a framework for practice to address these concerns.

By cosmetic interventions we mean any intervention, procedure or treatment carried out with the primary objective of changing an aspect of a patient's physical appearance. This includes surgical and non-surgical procedures, both invasive and non-invasive.

The key aims of this guidance are to make sure that medical professionals:

- are appropriately trained and experienced to practise safely
- work with each individual patient to make sure their expectations about the outcomes that can be achieved for them are realistic
- follow current guidelines or protocols for safe, effective provision of cosmetic interventions
- consider the psychological needs of their patients
- do not allow any financial or commercial interests in a particular intervention, or an organisation providing cosmetic interventions, to adversely affect standards of good patient care.

This guidance does not apply to interventions that amount to female genital mutilation (FGM), which is illegal in the UK. If you are not sure whether a particular cosmetic intervention falls within the legal definition of FGM¹ then you must seek advice, eg from your defence organisation or your employer's legal department.

Using this guidance

This guidance incorporates principles from our existing guidance, and is structured under the four domains of *Good medical practice*. In some cases, it sets a higher standard than in our other guidance to address the specific safety issues and ethical concerns particular to the cosmetic sector, as recommended by Sir Bruce Keogh's *Review of the regulation of cosmetic interventions*.² You must read this guidance alongside our other guidance³ for a full understanding of the expected standards of practice.

Throughout this document we've highlighted certain paragraphs of our other guidance, which you must read to get the full picture. You can also find these extracts in the links on the right hand side.

Throughout this guidance, we use the terms 'you must' and 'you should' in the following ways.

- 'You must' is used for a legal or ethical duty you're expected to meet (or be able to justify why you didn't).
- 'You should' is used for duties or principles that either:
 - may not apply to you or to the situation you're currently in, or
 - you may not be able to comply with because of factors outside your control

The professional standards describe good practice, and not every departure from them will be considered serious. You must use your professional judgement to apply the standards to your day-to-day practice. If you do this, act in good faith and in the interests of patients, you will be able to explain and justify your decisions and actions. We say more about professional judgement, and how the professional standards relate to our fitness to practise processes, appraisal and revalidation, at the beginning of *Good medical practice*.

Other sources of guidance

A number of organisations, including the Royal College of Surgeons, have produced guidance on the professional standards, skills and experience needed to carry out cosmetic interventions.

The Committee of Advertising Practice has developed guidance on the advertising and marketing of cosmetic interventions. We have included references and links to these other sources of guidance, which complement our guidance for medical professionals.

Websites

[Professional Standards for Cosmetic Surgery](#) - Royal College of Surgeons (2016)

[Marketing of cosmetic interventions](#) - Committee of Advertising Practice (2016)

[The British Association of Aesthetic Plastic Surgeons](#) - code of practice

Reports

[The British Association of Plastic Reconstructive and Aesthetic Surgeons \(2019\)](#)

[Qualification requirements for delivery of cosmetic procedures](#) - NHS Health Education England (2015)

[Report on implementation of qualification requirements for cosmetic procedures](#) - NHS Health Education England (2015)

Key points

If you offer cosmetic interventions, you must:

- seek your patient's consent to the procedure yourself rather than delegate
- make sure patients are given enough time and information before they decide whether to have an intervention
- consider your patients' psychological needs and whether referral to another experienced professional colleague is appropriate
- recognise and work within the limits of your competence, seeking advice when necessary

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- make sure patients have the information they want or need, including written information that supports continuity of care and includes relevant information about the medicines or devices used
 - take particular care when considering requests for interventions on children and young people
 - market your services responsibly, without making unjustifiable claims about interventions, trivialising the risks involved, or using promotional tactics that might encourage people to make ill-considered decisions.

As with all medical professionals in all fields of medicine, you must also:

- work in partnership with patients, treating them with respect and dignity
- keep patients safe, work to improve safety and report safety concerns
- work effectively with colleagues
- keep up to date with and follow relevant law and guidance
- be open and honest about your skills, experience, fees and conflicts of interests.

Knowledge, skills and performance

1. You must recognise and work within the limits of your competence and refer a patient to another practitioner where you cannot safely meet their needs.
2. Before carrying out an intervention for the first time yourself, or supervising others performing it, you must make sure you can do so safely, eg by undergoing training or seeking opportunities for supervised practice⁴
3. You must take part in activities to maintain and develop your competence and performance across the full range of your practice.
4. You must keep up to date with the law and clinical and ethical guidelines that apply to your work. You must follow the law, our guidance and other regulations relevant to your work.
5. You must seek and act on feedback from patients, including information on their satisfaction and physical and psychological outcomes. You must use this, and feedback from colleagues, to inform your practice and improve the quality of your work.
6. You must make sure your annual appraisal covers the whole of your practice.

Safety and quality

7. To help keep patients safe you must follow the guidance on establishing and participating in systems and processes that support quality assurance and service improvement, as set out in *Good medical practice* and our related explanatory guidance. In particular, you must:
 - a. comply with any statutory reporting duties in place
 - b. contribute to national programmes to monitor quality and outcomes, including those of any relevant device registries
 - c. routinely monitor patient outcomes, and audit your practice, reporting at least annual data
 - d. report product safety concerns to the relevant regulator.⁷
8. You should share insights and information about outcomes with other people who offer similar interventions, to improve outcomes and patient safety.⁶
9. You must tell patients how to report complications and adverse reactions.
10. You must be open and honest with patients in your care, or those close to them, if something goes wrong and the patient suffers or may suffer harm or distress as a result.⁷
11. You must carry out a physical examination of patients before, prescribing injectable cosmetic medicines. You must not therefore prescribe these medicines by telephone, video link, online or at the request of others for patients you have not examined.
12. You must seek and act on evidence about the effectiveness of the interventions you offer and use this to improve your performance. You must provide interventions based on the best available up-to-date evidence about effectiveness, side effects and other risks.
13. You should be satisfied that the environment for practice is safe, suitably equipped and staffed and complies with any relevant regulatory requirements.

Communication, partnership and teamwork

14. You must communicate clearly and respectfully with patients, listening to their questions and concerns and considering any needs they may have for support to participate effectively in decision making.

Seeking patients' consent

15. You must be familiar with the guidance in *Decision making and consent*. In the following paragraphs, we've highlighted key points from the guidance, which are important to protecting patients' interests in relation to cosmetic interventions.

Responsibility for seeking consent for cosmetic interventions

16. If you are the medical professional who will be carrying out the intervention, it is your responsibility to discuss it with the patient and seek their consent – you must not delegate this responsibility. It is essential to a shared understanding of expectations and limitations that consent to a cosmetic intervention is sought by the medical professional who will perform it, or supervise its performance by another practitioner.

Responding to requests for cosmetic interventions

17. If a patient requests an intervention, you must follow the guidance in *Decision making and consent*, including consideration of the patient's medical history. You must ask the patient why they would like to have the intervention and the outcome they hope for, before assessing whether the intervention is appropriate and likely to meet their needs.
18. If you believe the intervention is unlikely to deliver the desired outcome or to be of overall benefit to the patient, you must discuss this with the patient and explain your reasoning. If, after discussion, you still believe the intervention will not be of benefit to the patient, you must not provide it. You should discuss other options available to the patient and respect their right to seek a second opinion.
19. When you discuss interventions and options with a patient, you must consider their vulnerabilities and psychological needs. You must satisfy yourself that the patient's request for the cosmetic intervention is voluntary.
20. You must explain any monitoring or follow-up care requirements at the outset. You must tell patients if implanted medical devices may need to be removed or replaced and after how long.
21. You must tell prospective patients if alternative interventions are available that could meet their needs with less risk, including from other practitioners.

Discussing side effects, complications and other risks

22. You must give patients clear, accurate information about the risks of the proposed intervention and any associated procedures, including anaesthesia and sedation,⁸ following the guidance in *Decision making and consent* ([paragraphs 11-12](#), [17-24](#), [27-30](#), [58f](#) and [66-67](#)).
23. You must talk to the patient about any adverse outcomes that may result from the proposed intervention, paying particular attention to those the patient is most concerned about.⁹ You must talk about the potential adverse physical and psychological impact of the intervention going wrong or failing to meet the patient's expectations.

Giving patients time for reflection

24. You must give the patient the time and information they need to reach a voluntary and informed decision about whether to go ahead with an intervention.
25. The amount of time patients need for reflection and the amount and type of information they will need depend on several factors. These include the invasiveness, complexity, permanence and risks of the intervention, how many intervention options the patient is considering and how much information they have already considered about a proposed intervention.
26. You must tell the patient they can change their mind at any point.
27. You must consider whether it is necessary to consult the patient's GP to inform the discussion about benefits and risks. If so, you must seek the patient's permission and, if they refuse, discuss their reasons for doing so and encourage them to allow you to contact their GP. If the patient is determined not to involve their GP, you must record this in their notes and consider how this affects the balance of risk and benefit and whether you should go ahead with the intervention.

Being clear about fees and charges

28. You must explain your charges clearly, so patients know the financial implications of any decision to proceed to the next stage or to withdraw.
29. You must be clear about what is included in quoted prices and what other charges might be payable, including possible charges for revision or routine follow up.

Treating adult patients who lack capacity

30. If you consider providing an intervention for an adult who lacks capacity to make the decision about whether to go ahead with the intervention, you must follow the advice in paragraphs [87-93](#) of our *Decision making and consent* guidance. The advice in these paragraphs takes account of the legal requirements across the UK that govern decision-making with adults who lack capacity.
31. You must seek and take account of the views of people close to the patient, as well as any information you and the healthcare team may have about the patient's wishes, feelings, beliefs and values. Your approach to consulting with those close to the patient should follow the advice on sharing information set out in [paragraphs 8-30](#) of our *Decision making and consent* guidance.

Treating children and young people

32. If providing treatment to children¹⁰, you should be familiar with the detailed advice in [0-18 years](#), which includes the key points set out in this section of guidance. You should take particular care if you consider providing cosmetic interventions for children or young people. You:
 - a. must be satisfied that the proposed intervention is lawful¹¹, and
 - b. should make sure the environment for practice is appropriate to paediatric care, and work with multidisciplinary teams that provide expertise in treating children and young people where necessary.
33. You must only provide interventions that are in the best interests¹² of the child or young person. If a young person has capacity to decide whether to undergo an intervention, you should still encourage them to involve their parents in making their decision.
34. A parent¹³ can consent to an intervention for a child or young person who does not have the maturity and capacity to make the decision, but you should involve the child in the decision as much as possible. If you judge that the child does not want to have the cosmetic intervention, then you must not perform it.
35. Your marketing activities must not target children or young people, through either their content or placement.

Providing continuity of care

36. You should consider whether you or a colleague will need to review the patient's response to the intervention and make sure the patient understands whether you recommend a follow-up appointment.
37. You must make sure the patient has the medicines or equipment they need to care for themselves after an intervention.
38. You must make sure that your patients know how to contact you or another named suitably-qualified person if they experience complications outside your normal working hours.
39. You should give patients written information that explains the intervention they have received in enough detail to enable another medical professional to take over the patient's care. This should include relevant information about the medicines or devices used. You should also send this information, with the patient's consent, to their GP, and any other medical professionals treating them, if it is likely to affect their future healthcare. If the patient objects to the information being sent to their doctor, you must record this in their notes and you will be responsible for providing the patient's follow-up care.
40. You should organise your records in a way that allows identification of patients who have been treated with a particular device or medicine in the event of product safety concerns or regulatory enquiries.
41. You must keep records that contain personal information about patients securely and in line with:
 - a. any data protection law requirements
 - b. our [Confidentiality: good practice in handling patient information guidance](#)
 - c. guidance published by the UK health departments, even when the interventions are provided outside the National Health Service.

Working with colleagues

42. You must make sure that anyone you delegate¹⁴,¹⁵ to has the necessary knowledge, skills and training and is appropriately supervised.
43. You must work effectively with healthcare professionals and others involved in providing care. You must respect the skills of colleagues within multidisciplinary teams and support them to deliver good patient care.

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- 44. You must ask for advice from colleagues if the patient has a health condition that lies outside your field of expertise and that may be relevant to the intervention or the patient's request.
 - 45. You must make sure you build a support network of experienced professional colleagues who can support and advise you. You should ask for advice when you treat patients who may need psychological or other expert assessment or support.

Maintaining trust

Honesty

- 46. You must always be honest and never misleading about your skills, experience, qualifications, professional status and current role.

Communicating information about your services

- 47. When advertising your services, you must follow the regulatory codes and guidelines set by the Committee of Advertising Practice.¹⁶
- 48. You must make sure the information you publish is factual and can be checked, and does not exploit patients' vulnerability or lack of medical knowledge.
- 49. Your marketing must be responsible.¹⁷ It must not minimise or trivialise the risks of interventions and must not exploit patients' vulnerability. You must not claim that interventions are risk free.
- 50. If patients will need to have a medical assessment before you can carry out an intervention, your marketing must make this clear.
- 51. You must not mislead about the results you are likely to achieve. You must not falsely claim or imply that certain results are guaranteed from an intervention.
- 52. You must not use promotional tactics in ways that could encourage people to make an ill-considered decision.
- 53. You must not provide your services as a prize.
- 54. You must not knowingly allow others to misrepresent you or offer your services in ways that would conflict with this guidance.

Honesty in financial dealings

55. You must be open and honest with your patients about any financial or commercial interests that could be seen to affect the way you prescribe for, advise, treat, refer or commission services for them.
56. You must not allow your financial or commercial interests in a cosmetic intervention, or an organisation providing cosmetic interventions, to affect your recommendations to patients or your adherence to expected good standards of care.

Endnotes

1. The legal definition of FGM is very broad and may include procedures such as genital tattoos and piercing. It may be helpful to refer to guidance issued by government and the medical royal colleges, such as [FGM Mandatory reporting duty](#) (accessed 7 March 2016).
2. Department of Health (England) (2013) *Review of the Regulation of Cosmetic Interventions*. See also the Scottish Government report of the *Scottish Cosmetic Interventions Expert Group*. (2015)
3. You can read all of our existing guidance on our [website](#).
4. You can access advice on effective clinical supervision from sources such as the Care Quality Commission's [Regulation 18 guidance](#) (accessed 30 April 2021)
5. Medicines and medical devices in the UK are regulated by the [Medicines and Healthcare products Regulatory Agency](#) (accessed 7 March 2016).
6. [The Private Healthcare Information Network](#) (PHIN) collects and publishes surgical information about independent healthcare to help patients make informed choices (accessed 7 March 2016).
7. See our guidance [Openness and honesty when things go wrong](#).
8. See the Royal College of Anaesthetists' *Safe sedation practice for healthcare procedures* (2021) (accessed 30 April 2021).
9. See *Montgomery v Lanarkshire Health Board (Scotland) [2015]* UKSC 11.

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10. See our guidance [0–18 years](#) for more information about the general principles you should follow, in addition to this guidance, when you treat children and young people.
 11. The [Botulinum Toxin and Cosmetic Fillers \(Children\) Act 2021](#) makes it an offence to provide or arrange these treatments for people under the age of 18, unless approved by a doctor for an assessed medical need and administered by a doctor, nurse, dentist or pharmacist. The Act applies in England only.
 12. See [paragraphs 12 - 13](#) of *0–18 years* for guidance on assessing best interests.
 13. 'Parents' are people with parental responsibility.
 14. 'Colleagues' include anyone a medical professional works with, in and outside their team, whether or not they are also medical professionals.
 15. See our guidance [Delegation and referral](#).
 16. The Committee of Advertising Practice (2013) [Marketing of Cosmetic Interventions](#) (accessed 7 March 2016).
 17. Committee of Advertising Practice (CAP) and Medicines and Healthcare products Regulatory Agency (MHRA) [Enforcement notice: Advertising Botox and other botulinum toxin injections](#) (accessed 30 April 2021).

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Mae croeso i chi gysylltu â ni yn Gymraeg. Byddwn yn ymateb yn Gymraeg, heb i hyn achosi oedi ychwanegol.

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