Guiding Principles for ASAPS Members Conducting Training In Surgical and Non-Surgical Procedures

- 1. At the Extraordinary General Meeting ("EGM") of ASAPS held in Sydney on 20 October 2018,
- 2. The overwhelming majority of ASAPS members ("Members") passed the resolution to repeal the ASAPS Constitution and replace it with a new Constitution.
- 3. The key change to the Constitution was to Rule 12 which deals with the Professional Conduct of Members.
- 4. New Rules 12.1 through 12.5 were added to the Constitution to ensure that performance of cosmetic procedures and training of surgical and non-surgical procedures was undertaken by Members who are RACS qualified or possess an equivalent qualification.
- 5. At the EGM, it was resolved that for the purposes of providing greater clarity to Members around this change to Rule 12, that Guiding Principles be developed to assist Members on the interpretation and use of Rule 12.
- 6. The following table summarises the key guiding principles underpinning the changes to Rule 12.1 through 12.5:

Rule	What is permitted by the New Rule 12	Guidelines
12.2	Who can perform cosmetic procedures or delegate performance of non-surgical cosmetic procedures?	Only FRACS qualified practitioners in Plastic and Reconstructive Surgery (or academic equivalent) can: (a) Engage in cosmetic surgical procedures; or (b) FRACS qualified practitioners and medical practitioners can delegate non-surgical cosmetic procedures to appropriate medical staff in accordance with applicable regulations.
12.3	When delegating Non-Surgical Cosmetic Procedures, what guidelines need to be followed by Members?	Members must use best practice procedures as may be set out ASAPS from time to time in relation to:
12.4	What training of medical professionals in cosmetic procedures is permitted under Rule 12?	Members can only train medical professionals in cosmetic procedures who:

	 hold an academic equivalent and have satisfied training requirements as those laid down for the Fellowship Diploma in Plastic Surgery. Are accredited or non-accredited trainees in Plastic and Reconstructive Surgery (PRS) A member is not in breach if a PRS trainee does not complete training and later commences practice as a non-FRACS "cosmetic surgeon" and this intention was unknown to the member. Local or International Fellow in Plastic and Reconstructive Surgery in a recognised Fellowship Position. GP surgical assistants are not covered under the umbrella of cosmetic surgical training if not separately practicing cosmetic surgery (i.e. not also a non-FRACS "cosmetic surgeon") A member is not in breach if a GP surgical assistant later commences practice as a non-FRACS "cosmetic surgeon" and this intention was unknown to the member.
What does medical professionals with an academic equivalent mean?	FRACS surgeons who are not Plastic Surgeons who operate with or assist the Plastic Surgeons within the area of their Training / specialty and can only do so in the context of combined cases or shared care model.
Who can Members not train in cosmetic surgical procedures?	 General practitioners Non FRACS qualified cosmetic surgeons Overseas practitioners who do not hold an academic equivalent to FRACS and Fellowship Diploma in Plastic Surgery
What does "not directly or indirectly train or cause to be trained" mean?	Members cannot train non-FRACS or non-academic equivalent medical practitioners:

	What if a member decides to knowingly disregard Rule 12?	•	The Board may consider that this is conduct unbecoming of a Member. The Board may, at its discretion, avail itself of all rights under the ASAPS Constitution against the Member including expulsion as a member of ASAPS under Rule 10.2.
	What necessitated the change to Rule 12?	•	With the growth of surgical procedures (and delegation of non-surgical procedures) being undertaken by non-FRACS (or equivalent) qualified practitioners, there is a need to ensure that Members not contribute to this potential harm to patients using such services delivered or delegated by non-FRACS qualified practitioners qualified in Plastic and Reconstructive Surgery.