Office of Professional Licensure Review

UTAH DEPARTMENT OF COMMERCE

Interim Committee Presentation

Minor Surgical, Med Spa & Wellness Review

September 16th, 2026

MSMW issues addressed

Minor Surgical Procedures	• Scope of practice for APRNs and PAs impacted by Utah Supreme Court decision • Lack of clarity regarding the types of procedures APRNs and PAs may perform
Medical Spas	• Expansion in the types of services offered in medical spas • Unclear regulation regarding who can do what • Concerns regarding a lack of oversight from medical directors • Instances of patient harm related to non-pharmacist compounding in medical spas
Ketamine Clinics	• Growth in off-label use of ketamine for mental health indications • Ketamine treatments have medical and psychological risks that are unaddressed by current regulations

Stakeholder engagement

OPLR held **nine** in-depth policy discussions with a **technical working group**

Name	Profession	Affiliation	Education
Shelbi Brooke	Physician Assistant	The Plastics Clinic & Spa	Rocky Mountain University
Kevin Byrne	Physician (Psychiatry)	University of Utah; Huntsman Mental Health Institute	Boston University
Rich Cox	Pharmacist	Intermountain Healthcare	University of Utah
Shawn Kinross	Certified Registered Nurse Anesthetist	Intermountain Healthcare	Southern Connecticut State University
Eric Millican	Physician (Dermatology)	University of Utah	Washington University
Christine Platt	Advanced Practice Nurse Practitioner	Brigham Young University Parkinson Dermatology	Brigham Young University University of Arizona
Mallory Stahl	Master Esthetician	Elle Esthetics	Skin Science Institute

OPLR also held **six vetting sessions** to get feedback on proposals from a wide range of stakeholders, including individuals from:

- The Utah Medical Association
- The Utah Academy of Physician Assistants
- Utah Nurse Practitioners
- Utah Association of Nurse Anesthetists
- Utah Action Coalition for Health
- The University of Utah Health
- Intermountain Health
- DOPL Board Members
- APRN and PA education programs

These meetings also included individual practitioners involved in these spaces.

Recommendation overview

Minor Surgical Procedures	Medical Spas	Ketamine Clinics
• Define **'surgical procedure'** • Define **'minor surgical procedure'** as a subset of 'surgical procedure' – APRNs and PAs may perform independently • Define **'minor cosmetic medical procedure'** as a subset of 'minor surgical procedure' – can be delegated to an RN, LPN, or master esthetician	• Define **'medical spa'** • Define **'responsible cosmetic medical practitioner'** and **'qualified cosmetic practitioner'** • Allow a responsible cosmetic medical practitioner to **delegate** a minor cosmetic medical procedure, cosmetic injection, or wellness injection to a qualified cosmetic practitioner **under supervision** • Outline the **responsibilities** of the delegating responsible cosmetic medical practitioner	• Define **'psychiatric ketamine clinic'** • Define **'responsible medical practitioner'** and require one **on-site** at all times • Define the **responsibilities** of a responsible medical practitioner • Limit the prescription of **at-home ketamine** to patients **seen by a provider** and who have **received monitored treatments** in the past

Definition of 'surgical procedure'

Surgical Procedures

- Physicians may perform independently
- APRNs and PAs may assist *(see next slide for those APPs may perform independently)*

A **'surgical procedure'** means a medical intervention that involves the incision, excision, puncture, implantation, repair, destruction, or structural alteration of living tissue, an organ, or a body part.

Surgical procedure **does not include** the following:

- Puncture of tissue for the introduction or withdrawal of a substance at the intradermal, subcutaneous, intramuscular or intravascular level;
- Dry needling as defined in 58-24b-102(3);
- The practice of acupuncture as defined in 58-72-102(5);
- Microneedling that does not exceed a penetration depth of 1.5 millimeters and does not include energy-based frequency or the infusion of substances;
- Body piercing as defined in 26B-7-401(7)(a), ear piercing as defined in 26B-7-401(10), permanent cosmetics as defined in 26B-7-401(17), and tattooing;
- The practice of electrolysis.

'Implantation' means the placement of a medical device into a body cavity, natural orifice, or surgically created opening which is intended to remain in the body after the completion of the procedure.

Implantation **does not include**:

- The placement of a tube or catheter into a natural orifice for airway management, feeding, drainage, or decompression
- The replacement, exchange, or removal of a tube or catheter in an established tract.

Examples: Coronary artery bypass, appendectomy, amputation, liposuction, rhinoplasty, craniotomy

Definition of 'minor surgical procedure'

Surgical Procedures

Minor Surgical Procedures

- Physicians, APRNs, and PAs may perform independently

A **'minor surgical procedure'** means a surgical procedure that:

- In accordance with generally accepted professional standards, is ordinarily performed under minimal **sedation** as defined in Section 58-1-510(1)(e), local anesthesia, topical anesthesia, or without anesthesia; AND
- Presents a low **risk** of death, permanent or severe disability, or permanent or severe unintentional loss of bodily function; AND
- Does not, in the ordinary course, require post-operative **hospitalization** or intensive **monitoring**.

Examples: Incision and drainage, laceration repair, removal of a foreign body from skin tissue, IUD insertion

Definition of 'minor cosmetic medical procedure'

Surgical Procedures

Minor Surgical Procedures

Minor Cosmetic Medical Procedures

- Physicians, APRNS, and PAs may perform independently
- RNs, LPNs, and master estheticians may perform under supervision

A **'minor cosmetic medical procedure'** is a minor surgical procedure that:

- Is performed to **enhance or alter an individual's appearance** and not to promote the proper function of the body or prevent or treat illness or disease; AND
- In accordance with generally accepted professional standards, is ordinarily performed under **topical anesthesia or without anesthesia**; AND
- Does not destroy or alter tissue **below the subcutaneous layer**; AND
- **Does not involve** the incision, excision, vaporization, or implantation of tissue, an organ, or a body part

Examples: Intense pulsed light treatments, cryolipolysis, laser hair removal, medium-depth chemical peels, RF skin tightening

Surgical procedure scope of practice matrix

All licensees will be limited to performing procedures for which they have documented training.

	MDs/DOs	APRNs	PAs	RNs	LPNs	Master Estheticians	Medical Assistant
Surgical Procedure	May independently perform	May assist with	May assist with	No	No	No	No
Minor Surgical Procedure	May independently perform	May independently perform	May independently perform	No	No	No	No
Minor Cosmetic Medical Procedure	May independently perform May act as a "responsible cosmetic medical practitioner"	May independently perform May act as a "responsible cosmetic medical practitioner"	May independently perform May act as a "responsible cosmetic medical practitioner"	May perform under **general** supervision*	May perform under **direct** supervision*	May perform under **general** supervision*	No

Each profession still has a separate legal scope that contains services besides these types of procedures.
* OPLR recommends setting a baseline supervision level for all minor cosmetic medical procedures while allowing DOPL in rule, with collaboration from boards, to raise the level of supervision for certain higher-risk procedures.

Surgical assisting for APRNs and PAs

Allow APRNs and PAs to
assist with non-minor surgical procedures.

This would mean performing appropriate aspects of the procedure under the delegation and supervision of a physician.

The physician would be required to participate in all critical portions of the procedure and must be immediately available to provide care during the entire procedure.

Medical spa definition

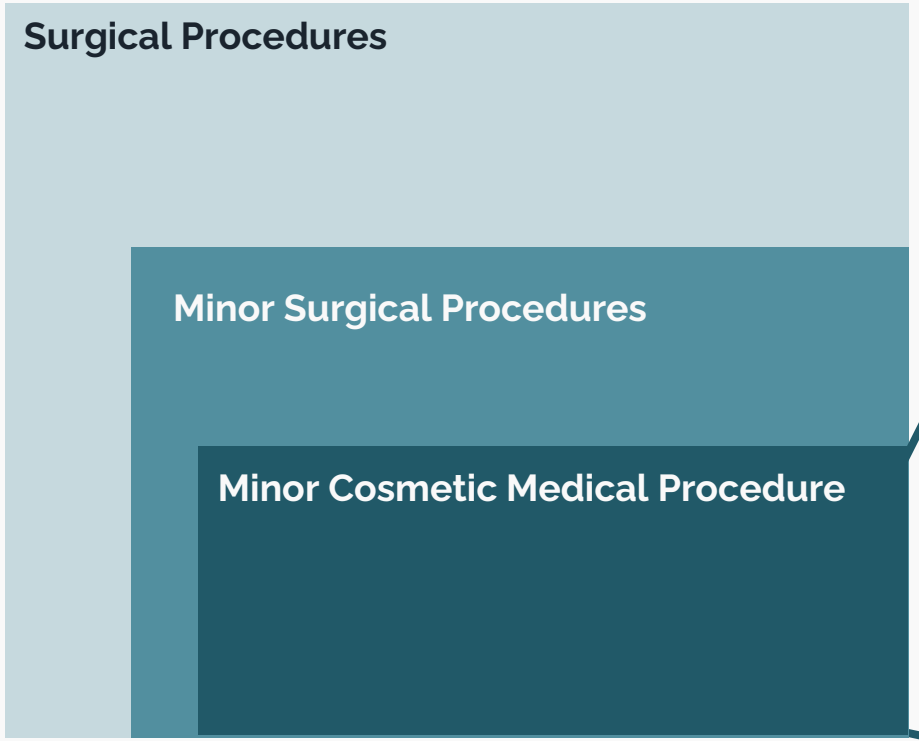
OPLR recommends that the state define a medical spa as:

A facility that offers:

- **Minor cosmetic medical procedures**
- **Cosmetic injections**
- **Wellness injections**

Any facility required to be licensed by DHHS would be exempt from this definition.

‘Minor cosmetic medical procedure’ definition



A **‘minor cosmetic medical procedure’** is a minor surgical procedure that:

- Is performed to enhance or alter an individual’s appearance and not to promote the proper function of the body or prevent or treat illness or disease; AND
- In accordance with generally accepted professional standards, is ordinarily performed under topical anesthesia or without anesthesia; AND
- Does not destroy or alter tissue below the subcutaneous layer; AND
- Does not involve the incision, excision, vaporization, or implantation of tissue, an organ, or a body part

Injection definitions

Cosmetic Injections*

A procedure in which a medication or substance, including a neurotoxin or filler, is injected for cosmetic purposes.

Wellness Injections**

A procedure:

a) In which fluids, nutrients, medications, minerals, vitamins, hormones, peptides, biological products, or blood or a blood derivative are injected directly into a patient's body by an intradermal, subcutaneous, intravenous, or intramuscular route; and

b) Which is sought by a patient to alleviate symptoms of temporary discomfort or improve temporary wellness.

* Based on the definition of 'cosmetic medical procedure' found in Utah's Medical Practice Act (see UCA 58-67-102(11)).

** Based, in part, on Texas' definition of 'elective intravenous therapy.'

Med spa delegation and supervision framework

A cosmetic minor cosmetic medical procedure, cosmetic injection, or wellness injection must be:
a) Performed by a **responsible cosmetic medical practitioner**; or
b) Performed by a **qualified cosmetic practitioner** under the **delegation** and **supervision** of a responsible medical practitioner

	Examples	Responsible Cosmetic Medical Practitioner	Qualified Cosmetic Practitioner (Min. Required Supervision)*	Evaluation Required*	Individual Treatment Plan Required**	Other Responsibilities of Medical Practitioner
Minor Cosmetic Medical Procedure	Laser treatments, non-invasive body contouring	Must: 1. Be licensed as a physician, APRN, or PA (with independent practice authority); and 2. Have education and training in the procedures they will delegate	RN (General) Master Esthetician (General) LPN (Direct)	Yes	Yes	
Cosmetic Injection	Botox, filler, filler removal, liquid lipo		RN (General)	Yes	Yes	Ensure any compounding is done according to state law (see next page)
Wellness Injection	IV hydration, peptides, hormone replacement		RN (Indirect)	Yes	Yes	

* The legislature could give DOPL authority to heighten the required level of supervision for specific procedures if evidence of harm
** To match current policy, OPLR recommends allowing the evaluation for only hair removal procedures to be delegated to an RN or master esthetician.

Compounding authority

OPLR recommends that the state be explicit about who can compound drugs and under what conditions.

In a DHHS-licensed facility or a DOPL-licensed pharmacy, the following may compound:

- **Pharmacists** and **pharmacy techs**
- **Physicians**
- **APRNs** and **PAs**, limited to *immediate use compounding*,
- Any **individual authorized to administer a medication**, limited to *immediate use compounding* and **under the direction** of pharmacist, physician, APRN or PA

In all other settings, the following may compound:

- **Pharmacists** and **pharmacy techs**
- **Physicians**
- **APRNs** and **PAs**, limited to *immediate use compounding*,

Immediate Use Compounding

Term used in U.S. Pharmacopeia for compounding in which:

- Three or fewer unique products are mixed; and
- The drug will be administered to a patient within 4 hours of the start of preparation.

Anyone engaged in compounding would be required to follow professional standards adopted by the Division (likely U.S. Pharmacopeia standards).

Ketamine regulation should address associated risks

Risks associated with ketamine:

Short-term risks

- **Airway Emergencies** – very rare at sub-anesthetic doses but also very serious
- **Blood Pressure Issues** – more common but usually not serious, contraindication
- **Negative Psychological Experiences** – more common than airway, but less serious
- **Safety Issues After Discharge** – related to the dissociative effects

Long-term risks

- **Abuse and Dependency** – possible but not as common as some other drugs
- **Urinary Tract and Cognition Issues** – possible with long-term, recreational use

Ketamine regulation should address associated risks

Risk	Policy Proposal
Airway Emergencies	• Require a qualified 'responsible medical practitioner' to be on-site at all times • Require monitoring at all times • Limit at-home prescriptions
Blood Pressure	
Negative Psychological Experiences	• Require someone on site qualified to respond to psychological emergencies • Limit at-home prescriptions
Safety Issues After Discharge	• Task the 'responsible medical practitioner' with establishing safe protocols for discharge • Limit at-home prescriptions
Abuse and Dependency	• Require a diagnosis/indication, mental health treatment, and valid order for treatments • Limit at-home prescriptions
Urinary Tract and Cognition Issues	

Define a psychiatric ketamine clinic

Define a ketamine clinic and require a responsible medical practitioner to be on-site:

"Psychiatric ketamine clinic" means a facility that offers ketamine treatments for mental health disorders.

- DHHS-licensed facilities would be exempt

Require the owner of a psychiatric ketamine clinic to either:

- Qualify as a responsible medical practitioner; or
- Employ at least one responsible medical practitioner.

Require a qualified responsible medial practitioner must be on-site whenever ketamine treatments are being administered.

Establish qualifications and responsibilities of a responsible medical practitioner

Qualifications of a responsible medical practitioner:

To qualify as a responsible medical practitioner in a psychiatric ketamine clinic, and individual must:

- Be **actively licensed** in the state as a:
  - Physician
  - APRN
  - PA (who has completed their collaborative practice period)
  - CRNA?
- Have **4,000 hours of clinical experience** in a residency or post-licensure clinical practice; and
- Be **trained to perform the responsibilities** outlined.

Responsibilities of a responsible medical practitioner:

A responsible medical practitioner in a psychiatric ketamine clinic is responsible for ensuring that each individual receiving treatment:

- has a **mental health diagnosis or indication**, as determined by someone legally authorized to diagnose, for which there is evidence that ketamine may be efficacious;
- is receiving **ongoing mental health treatment** from an individual licensed to provide such treatment;
- has a **valid order to receive ketamine treatments**, given by someone legally authorized to prescribe the treatment;
- receives **dosing** that is in accordance with **professional standards** adopted by the division in collaboration with relevant boards
- is **monitored continuously** throughout the treatment by someone trained to respond to **medical needs** and someone trained to respond to **psychological needs**
- is **discharged** from the facility only after:
  - the individual's **vitals have returned** to pre-procedure levels; and
  - the individual has been assessed by the medical director as **medically and psychologically stable**.

Limit the prescription of ketamine for at-home use

A prescriber may only prescribe ketamine treatments for at-home use under the following conditions:

- The prescriber has evaluated the patient **in person during the previous year**
- The patient has received at least **two ketamine treatments monitored** by a healthcare practitioner in person which **did not result in serious side effects**.

A prescriber may prescribe a maximum of **three-months supply at a time**.

To renew the prescription for another three months, the prescriber must **meet with the patient in-person or via telehealth**, though the requirement that they have met with the patient in-person in the last year would still apply.

Outstanding issues to be addressed

Minor Surgical

- Tweak the language in 'surgical' to ensure liposuction and incision/drainage are included
- Address a few procedures falling in minor that shouldn't, a few procedures not falling in minor that should
- Develop a provision to allow NPs and PAs to perform a procedure in an emergency

Medical Spas

- Establish supervision levels above the base-level for any higher risk procedures

Ketamine Clinics

- Determine the role of a CRNA given extensive training on the medical side but legal complexities