

MALAYSIAN MEDICAL COUNCIL



GUIDELINES ON THE ETHICAL ASPECTS OF AESTHETIC MEDICAL PRACTICE

1. Introduction

Aesthetic medical practice is rooted in the belief that the well-being of an individual is about being satisfied with one's health, job and the environment he or she lives in. The goal is the creation of a harmonious physical and psychological balance as desired by clients, by administering medical treatment modalities.

Although aesthetic medicine is **not** being recognized as a medical specialty in Malaysia, aesthetic medical practice is on the rise and is gaining popular demand from all sectors of the population. A large number of registered medical practitioners are engaged in such practice, both in family physician (or general practitioner) and specialist healthcare facilities.

Aesthetic medical practice is recognised to be scientific in its approach and practice. In this respect, it is acknowledged that the established specialties of dermatology and plastic surgery have provided the sound scientific and medical basis for current aesthetic medical practice. The scientific concepts underpinning aesthetic medical practice have resulted from much work done and published in dermatology and plastic surgical literature and is taught within the core curriculum of these two specialties.

Aesthetic medical practice may be through non-invasive, minimally invasive and invasive modalities.

2. Definition

Aesthetic Medical Practice is defined as: “An area of medical practice which embraces multidisciplinary modalities dedicated to create a harmonious physical and psychological balance through non-invasive and minimally invasive treatment modalities which is evidence-based. These modalities focus on the anatomy and physiology of the skin and physical appearance to satisfy the normal (non-pathological) aesthetic desires and goals of the client and are carried out by registered medical practitioners.”

3. Requirements of the Practitioner in Aesthetic Medical Practice

The registered medical practitioner in aesthetic medicine practice:

- a. shall be a general (family) practitioner or a specialist in any recognized field of specialty;
- b. shall possess experience through recognized practical training courses conducted by *bona fide* professional bodies specialising in aesthetic medical practice as recognised by the Main Credentialling and Privileging Committee for Aesthetic Medical Practice of the Medical Practice Division of the Ministry of Health;
- c. shall provide documentary evidence of having undergone such training and practical/written examination in a *bona fide* professional body, to be processed by the Main Credentialling and Privileging Committee for Aesthetic Medical Practice, as prescribed in the Guidelines on Aesthetic Medical Practice for Registered Medical Practitioners issued by the Medical Practice Division of the Ministry of Health;
- d. shall exercise strict patient selection criteria, obtain informed consent and generally observe all aspects of the Code of Professional Conduct of the Malaysian Medical Council and other relevant guidelines of the Malaysian Medical Council and directives of the Ministry of Health;
- e. shall pay particular attention to exclude, through proper physical examination and relevant investigations, any pathological or clinically morbid conditions causing physical deformity or cosmetic blemish, before embarking on a procedure to correct such deformity or blemish; in the event that such conditions be suspected or identified, no aesthetic procedures must be undertaken and the client referred to a relevant specialist for further management;
- f. shall place client/patient safety as the primary concern and should provide aesthetic medicine services in an approved healthcare facility as required by the Private Healthcare Facilities and Services Act 1998 and Regulations 2006, or in any government hospital with adequate facilities for surgery;
- g. is subject to all relevant parts of the Amended Medical Act 2012, and the Regulations when adopted and is subject to the Code of Professional Conduct, Good Medical Practice and Confidentiality and any other Guidelines of the Malaysian Medical Council;

- h. shall be aware that Complaints lodged by members of the public or any enforcement units, on the Aesthetic Medical Practice carried out by him, may lead to a disciplinary inquiry by the Malaysian Medical Council.

4. Training & Certification in Aesthetic Procedures

The Malaysian Medical Council is not directly involved in the training and certification of registered medical practitioners, but is primarily concerned with the standard of practice as laid down in the Code of Professional Conduct and in Good Medical Practice and Confidentiality, and other guidelines adopted by the Council.

The Main Credentialling and Privileging Committee for Aesthetic Medical Practice is directly responsible for all aspects of credentialling and privileging of practitioners involved in aesthetic medical practice.

The composition of The Main Credentialling and Privileging Committee for Aesthetic Medical Practice and Terms of Reference are in **Annexure A**.

A foreign medical practitioner, intending to pursue a course on aesthetic medical practice or participate in training workshops in Malaysia will be required to apply for Registration and/or Temporary Practising Certificate (TPC), and such other details and requirements as lay down by the Evaluation Committee of the Malaysian Medical Council. Such application shall be vetted by the Main Credentialling and Privileging Committee for Aesthetic Medical Practice of the Medical Practice Division of the Ministry of Health, and if found suitable may be submitted in the required form and format to the Evaluation Committee for consideration.

The Main Credentialling and Privileging Committee for Aesthetic Medical Practice may place the name of such foreign medical practitioner in the National Registry of Aesthetic Medical Practitioners as may be deemed appropriate, after approval by the Evaluation Committee of the Malaysian Medical Council, and subjected to conditions as applicable for Malaysian citizens. (vide section 5 below)

5. National Registry of Registered Medical Practitioners Practising Aesthetic Medical Practice

- a. The Medical Practice Division of the Ministry of Health shall maintain the National Registry of Registered Medical Practitioners Practising Aesthetic Medical Practice, as prescribed in the Guidelines on Aesthetic Medical Practice for Registered Medical Practitioners.

- b. Entry into the Register will be according to requirements laid down by the Director General of Health Malaysia, as indicated in section 3(c) above. Only medical practitioners so registered may offer aesthetic medical practice services.
 - c. Should any practitioner practising aesthetic medical practice be found guilty of any offence after due process of disciplinary inquiry according to the Amended Medical Act 2012 and Regulations when adopted and punished by his name being removed from the Register of Medical Practitioners, such practitioner shall also be consequently removed from the National Registry of Registered Medical Practitioners Practising Aesthetic Medical Practice.
6. A registered medical practitioner engaged in aesthetic medical practice is **not** considered a specialist, as such practice is not registrable as a specialty or 'sub-specialty' in the National Specialist Register.

7. Types of Aesthetic Medical Practice

Aesthetic medical practice may be classified as non-invasive, minimally invasive or invasive. While it is accepted that a registered medical practitioner who is holding a specialty qualification may conduct procedures within their core area of practice; it is a requirement that those practising invasive procedures must possess a recognised higher surgical degree.

The three categories have been defined by the Medical Practice Division of the Ministry of Health.

The three categories will be defined and periodically revised.

8. Place of Practice

Aesthetic medical practice may be conducted by registered medical practitioners in private clinics, ambulatory care centres and hospitals, as defined and described in the Private Healthcare Facilities & Services Act 1998 and Regulations 2006, and in government hospitals.

The nature of the aesthetic procedure may be classified, based on the complexity of the procedure, as non-invasive, minimally invasive or invasive; and the place where each of these is conducted have been defined by the Medical Practice Division of the Ministry of Health.

Generally, major invasive procedures will be carried out in healthcare facilities with provisions for in-patient, operation theatre, anaesthetic and surgical interventions.

Non-invasive, minimally invasive, and selectively invasive procedures may be carried out in Clinics and in Ambulatory Care Centres, which have facilities for such practice.

The decision on the types of cases and the location in the healthcare facility for performing such procedures will primarily be made by the medical practitioner, and approved by the Medical Practice Division of the Ministry of Health.

In all such matters, the medical practitioner is required to ensure satisfactory standard of care during all phases of management as described in the Code of Professional Conduct of the Malaysian Medical Council.

9. Assistants

The registered medical practitioner in private aesthetic medicine practice may employ non-medical, unregistered persons, (like beauticians, cosmetic therapists and others) to assist in his practice, who will be termed “assistants” for purposes of this Guideline, but should not be associated with such persons as business or professional partners or as an employee.

The practitioner shall not provide cover of any description or nature for the independent aesthetic or cosmetic practice of such unregistered persons in his place of practice or elsewhere.

The registered medical practitioner shall be vicariously and totally liable for all untoward professional occurrences or adverse events that may become the subject of a complaint and subsequent disciplinary inquiry in relation to such assistants under his employment.

10. Sign Boards and Announcements

The external sign boards of a healthcare facility in which a registered medical practitioner conducts aesthetic medical practice, shall not carry the words ‘aesthetic medicine practitioner’ or details of aesthetic medical practices, in that or in any other connotative form implying aesthetic medical practice.

However, such information may be displayed within the premises.

However, the availability of aesthetic medical practices and the scope of services provided by a medical practitioner may be carried in any announcements or information about clinics or healthcare facilities in the print or electronic media as at present allowed by the Malaysian Medical Council, the Medical Practice Division of the Ministry of Health, and the Medicines Advertising Board (*Lembaga Iklan Ubat*) of the Pharmaceutical Division of the Ministry of Health.

Prior approval must be obtained from the Medicines Advertising Board (*Lembaga Iklan Ubat*) and/or other relevant authorities of the Ministry of Health with regards the details and format of the announcements.

11. Ambit of this Guideline

Other Acts or any amendments to any existing Act, when coming into force, may eventually address some aspects of Aesthetic Medical Practice and other related treatment modalities, in which case this Ethics Guideline may be appropriately amended by the Malaysian Medical Council as and when required.

12. Annexures:

Annexure A : The Main Credentialing and Privileging Committee for Aesthetic Medical Practice, Medical Practice Division, Ministry of Health Malaysia

ANNEXURE A

The Main Credentialing and Privileging Committee for Aesthetic Medical Practice, Medical Practice Division, Ministry of Health Malaysia

The Main Credentialing and Privileging Committee for Aesthetic Medical Practice, appointed by the Director General of Health, consists of members from the Ministry of Health, Academy of Medicine, the Aesthetic Medical Practice Societies and Universities.

Terms of reference for the Main Credentialing and Privileging Committee for Aesthetic Medical Practice – please refer to the Guidelines on Aesthetic Medical Practice for Registered Medical Practitioners.

The Malaysian Medical Council's 2015 revised Guideline on the Ethical Aspects of Aesthetic Medical Practice was drafted by the Ethics Committee, Malaysian Medical Council.

This revised Guidelines on the Ethical Aspects of Aesthetic Medical Practice was adopted by the Malaysian Medical Council on the 21 April 2015.