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Docs Practice Cosmetic Surgery When They Don't Know How

"Everyone's a critic," the saying goes. Applied to the practice of medicine, that sentiment might become "Everyone's a cosmetic surgeon."

And unless someone is board-certified in plastic/cosmetic surgery, that's a far more threatening reality than the mere annoyance of opinionated people who can't refrain from spouting off.

As reported in [USA Today](#), only 21 states require that offices where doctors perform cosmetic surgery be accredited or licensed. Such practices must have certain life-saving emergency equipment and drugs, must adhere to strict safety procedures including record-keeping, anesthesia and cleanliness and must be subject to inspection.

The problem is known as "practice drift" — physicians who work outside of the areas in which they're trained and board-certified. As quoted in USA Today, "This is on the radar of many state boards," says Humayun Chaudhry, a physician and CEO of the [Federation of State Medical Boards](#) (FSMB). "What doctors should or shouldn't do when they change their area of focus is a concern for everyone."

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As insurance payments to practitioners decline, many seek other avenues of income. Although insurance companies and hospitals generally prohibit doctors from practicing outside of their specialties, office surgery facilities are unregulated in more than half of states. And some clinics that do employ board-certified plastic surgeons have been accused of aggressively marketing less expensive alternatives to traditional plastic surgery, and minimizing their risks. We wrote about [one such procedure](#), liposuction, that had tragic results for a client of our firm.

The spokeswoman for the North Carolina medical board told USA Today, "With cosmetic surgery, procedures are almost always done in the office, often without necessary and appropriate arrangements for emergencies. Doctors who drift typically do not have hospital privileges to do the procedures they are doing in the office [so] if complications do arise, the doctor often cannot even accompany the patient to the hospital."

The medical boards of individual states can discipline doctors for "unprofessional conduct" who practice medicine outside of their training and qualifications, or who put patients at risk because their facilities are insufficient. But most patient advocates say what's really required to solve the problem are laws that codify what's acceptable and what's not. They say you can't leave it open to interpretation.

Opponents say laws restricting practice drift could stifle doctors' abilities to innovate and impose unfair costs.

But when it comes to patient disfigurement or death, what cost is too high? As Dr. Sidney Wolfe, director of Public Citizens' Health Research Group, points out, if a state doesn't have formal guidance or a law covering office-based surgery, "more people are going to get injured. States should want to expand their existing authority."

If you are interested in having, or are planning to have, cosmetic surgery, you should:

- Find out if your doctor is board certified in plastic surgery.
- Find out if your doctor is licensed and has any disciplinary actions on file.
- Locate accredited surgery facilities for your procedure.

The FSMB and/or your state's medical board are resources that can answer your questions. Others include the [American Association for Accreditation of Ambulatory Surgical Facilities, Inc.](#) and the [Accreditation Association for Ambulatory Health Care](#).

You can find more about [cosmetic surgery malpractice, especially about the dangers of anesthesia in a non-hospital operating room](#), on our firm's website.

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