Executive Officer, Medical AHPRA GPO Box 9958 Melbourne 3001.

RE: CONSULTATION - Registered medical practitioners who provide cosmetic medical and surgical procedures.

To Whom it May Concern,

I have been a registered nurse for 40 years, 25+ of those working in cosmetic medicine/surgery. I was one of the first nurses asked to do cosmetic injections - collagen back in 1997.

Since that time I have become very passionate about this aspect of medicine, and have great work satisfaction in improving my patients' lives with my cosmetic treatments.

Cosmetic medicine is my passion, and with hard work I have built up my business and injecting skills, through constant training, and those school less that ALDDA is thinking of implementing.

skills, through constant training, and these schedules that AHPRA is thinking of implementing would, I feel be detrimental to it.

At the recent ACCS Cosmetex conference I was told that "something needs to be done as nurses are injecting in kitchens!!" Of course this needs to be stopped, but we all know every occupation/profession - plumbers, lawyers, doctors, car salesmen - have "bad eggs", but there is not a blanket policy to outlaw all of these professions, just weed out the bad ones, which seems the logical approach.

Since 2007 I have been working with AntiAging in Victoria. Our doctors have worked tirelessly with the Health Commission over many years to implement protocols and practices for the nurses so our injecting is competent and safe. We have monthly training sessions, at which we learn updated techniques, and share with each other our work experience. We also get the opportunity to have leading doctors training us regularly, with the support of major companies Allergan and Galderma. Yearly CPR is essential, and we all carry emergency kits, having ongoing training in all complications which may occur.

I travel to beauty clinics throughout the state and always find my area clean and safe to work in. I consult every patient with our doctors via real time video, all treatments and their general healthcare are discussed, and this is done yearly , as per protocols of the Health Commission, with everything documented. My patients feel they are given excellent care and attention re their health consult, some have said more thorough than their GP .

After explaining to my patients that their treatments may not be possible at their local beauty clinic, they have all been upset. They find the service that we offer at the clinics to be very convenient, and feel happy to have all their beauty care done in the one place, especially in the country, otherwise it would mean a trip to the city at regular intervals, which would be very disruptive to their busy lives. And if there was a GP doing these cosmetic treatments, they feel this is not appropriate going to them where there are people with medical issues, including colds and illnesses.

As this real time video is now widely used in many medical specialties, I feel our group should not be penalised by using it . If I have any issues with a patient outside of this initial consult, there is always a doctor on real time video call to assess and give advice if necessary.

Our nurses and doctors at AntiAging are like family and I can't think of any other work environment in my 40+ years where I have felt this way.

Please realise how these schedules AHPRA is contemplating will affect all in our group who are working diligently to do things the right way.

Yours faithfully,

PATRICIA (Trish) MATHESON RN

Member ANF. ACCS