

NORTH CAROLINA STATE BOARD OF DENTAL EXAMINERS

INTERPRETIVE STATEMENT ON ELECTIVE COSMETIC PROCEDURES

[Reviewed by the Office of the NC Attorney General – September 2021]

SUBJECT

The use of elective cosmetic procedures and/or cosmetic drug or chemical facial enhancements in the practice of dentistry.¹

PURPOSE

To set forth the North Carolina Board of Dental Examiners' position on the use of elective cosmetic surgery and/or cosmetic drug or chemical facial enhancements in the practice of dentistry.

ISSUE

Are purely cosmetic procedures and/or purely cosmetic drug or chemical facial enhancements within the scope of the practice of dentistry under the North Carolina Dental Practice Act (the Act) and its attendant rules?

DISCUSSION

The North Carolina Dental Board has received several inquiries from dentists around North Carolina as to whether it is permissible for them to offer Botox® injections, or similar procedures, to their patients. The reasons for the procedures vary greatly from enhancing a patient's facial appearance, to treating jaw pain. It is the Board's position that North Carolina law is very clear on what constitutes the practice of dentistry and that it should be applied on a case-by-case basis.

The definition of dentistry is found in NC General Statute §90-29(b)(1) which states that

A person shall be deemed to be practicing dentistry in this State who does, undertakes or attempts to do, or claims the ability to do any one or more of the following acts or things which, for the purposes of this Article, constitute the practice of dentistry:

- (1) Diagnoses, treats, operates, or prescribes for any disease, disorder, pain, deformity, injury, deficiency, defect, or other physical condition of the human teeth, gums, alveolar process, jaws, maxilla, mandible, or adjacent tissues or structures of the oral cavity; . . .**

N.C. Gen. Stat. §90-29(b)(1).

The statute also defines other particular actions or procedures on an individual's teeth, any of which taken alone, would constitute the practice of dentistry. Additionally, an individual can be practicing dentistry if he or she:

[a]dministers an anesthetic of any kind in the treatment of dental or oral diseases or physical conditions, or in preparation for or incident to any operation within the oral cavity; provided, however, that this subsection shall not apply to a lawfully qualified nurse anesthetist who administers such anesthetic under the supervision and direction of a licensed dentist or physician.

N.C. Gen. Stat. §90-29(b)(6).

N.C. Gen. Stat. §90-29(b)(10) further defines dentistry to include a dentist who **“performs or engages in any of the clinical practices included in the curricula of recognized dental schools or colleges.”**

Currently, cosmetic procedures and cosmetic drug or chemical enhancements of the face for purely aesthetic purposes are being marketed to dentists as a means to enhance the type of services offered by a dental practice. It is the position of the Board that the use of cosmetic facial procedures and/or drug or cosmetic chemical facial enhancement for purely cosmetic and/or dermatological applications may be outside the scope of practice of dentistry as defined by the Act, as it does not involve the treatment of the teeth, gums, alveolar process, jaws, maxilla, mandible, or adjacent tissues or structures of the oral cavity, and is not being used as an anesthetic. However, a properly trained general dentist could be allowed to use Botox® (botulinum toxin) to treat a *dental condition* where there is sufficient credible scientific evidence that such use meets the standard of care for the treatment of the diagnosed dental condition.

This opinion notwithstanding, the Board is aware that dental curricula and the four-year residency curricula in Oral and Maxillofacial Surgery accredited by the American Dental Association Commission of Dental Accreditation requires the performance of and proficiency in the treatment of conditions of the entire craniofacial complex, including treatment of facial trauma, cleft and craniofacial surgery, surgical reconstructive treatment of maxillofacial skeletal deformities and cosmetic/aesthetic procedures including elective facial surgery and the use and application of chemical facial enhancements.

The Board recognizes that hospital credentialing standards established by the Joint Commission of Accreditation of Hospital Organizations, based on education, training and experience, also permit appropriately trained Oral and Maxillofacial Surgeons (OMS) to perform cosmetic/aesthetic procedures including the administration of chemical facial enhancements for cosmetic purposes. Since some earlier residency curricula in Oral and Maxillofacial Surgery may not have included standards for performing elective cosmetic procedures and the use thereof, Oral and Maxillofacial surgeons must produce documentation of their requisite proven education, training, and experience when

requested by the Board if they employ any of these treatment modalities for purely cosmetic purposes.

If any licensee lacks the requisite education and training, or performs cosmetic procedures not included in the curricula of accredited dental schools or residency programs on areas of the human body not within the scope of NC General Statute §90-29(b)(1), the Board may consider such action to be outside the scope of practice and subject to discipline. All complaints filed with the Board regarding elective cosmetic procedures will be investigated following standard procedures and decisions will be rendered on a case-by-case basis.

1. Drug or Chemical facial enhancements may include a wide array of products marketed for alteration of the skin and subcutaneous structures of the head, face, and neck. These include but are not limited to: Botulinum A (Botox[®]), Restylane[®], Collagen, and adipose tissue.