

## SCOPE OF PRACTISE FOR THERAPIST IN THE SKIN, BODY, AND NAIL CARE INDUSTRY

TREATMENT/EQUIPMENT/ PROCEDURE	BEAUTY TECHNOLOGIST	BEAUTY THERAPIST	SOMATOLOGIST	ADVANCED AESTHETIC THERAPIST	OUTSIDE SCOPE OF PRACTICE
<b>Electrotherapy</b>					
Galvanic Current		X	X	X	
High Frequency		X	X	X	
Microcurrent		X	X	X	
Ultrasound for Aesthetic procedures			X	X	
Steamer	X	X	X	X	
Pulverisation	X	X	X	X	
Brush Machine	X	X	X	X	
Interferential		X	X	X	
Vacuum Suction		X	X	X	
G-5		X	X	X	
<b>Exfoliation/Skin Peeling</b>					
Exfoliation (non-invasive)	X	X	X	X	
Microdermabrasion (Epidermal layer only)		X	X	X	
Dermaplane		X	X	X	
Enzymatic Exfoliation		X	X	X	
Chemical Peeling – superficial (Epidermal level only, associated with Level 1 frosting only)		X	X	X	
Chemical Peeling – medium dept (Epidermal and Dermal Level, associated with Level 1 and 2 frosting)				X supervision required	
Chemical Peeling – deep					X

Hair Removal/Reduction					
Electrical Epilation – Diathermy	X (Proof of Training)	X (Proof of Training)	X (Specialist training required)	X	
Electrical Epilation – Blend	X (Proof of Training)	X (Proof of Training)	X (Specialist training required)	X	
Waxing	X	X	X	X	
Threading	X (Specialist training required)	X (Specialist training required)	X (Specialist training required)	X	
Sugaring	X (Specialist training required)	X (Specialist training required)	X (Specialist training required)	X (specialist training required)	
IPL		X (Specialist training required)	X (Specialist training required)	X	
Laser		X (Specialist training required)	X (Specialist training required)	X	
Skin Rejuvenation					
Laser – Non-ablative Treatment of Skin (e.g., brown spots, pigmentary disorders, facial vessels & redness, tattoos)			X (Specialist training required)	X	
Laser - Ablative				X (Specialist training required)	
Laser - Fractional				X (Specialist training required)	
IPL		X (Specialist training required)	X (Specialist training required)	X	
Micro needling 0.25mm – 1mm (Epidermal)		X (Specialist training required)	X (Specialist training required)	X	
Micro needling up to 2mm (Epidermal and Dermal)				X (Specialist training required)	
Mesotherapy – Transdermal					X
Needles Mesotherapy			X (Specialist training required)	X (Specialist training required)	
PRP					X
LED				X	
PDT using ALA (Aminolaevulinic Acid)				X supervision required	
Radio Frequency			X (Specialist training required)	X	

Body Sculpting					
Radio Frequency			X (Specialist training required)	X	
Endermologie		X (Specialist training required)	X (Specialist training required)	X	
Cryotherapy – (fat freezing)				X (Specialist training required)	
Injectables					
Neuromodulators					X
Tissue Dermal Fillers					X
Sclerotherapy					X
Platelet Rich Injectables					X
Other					
Minor skin lesion removal (Epilation, Lamprobe, Plasma Devices)				X (Specialist training required)	
Plasma devices (spot treatments only, no full face treatments or non-surgical blepharoplasty)				X Direct supervision required	X
Pigment implantations	X (Specialist training required)	X (Specialist training required)	X (Specialist training required)	X (Specialist training required)	
Application of topical anaesthetic (up to 5% lidocaine)		X	X	X	
Application of topical anaesthetic (higher than 6% lidocaine)			X Supervision required	X Supervision required	
Injecting Anaesthetic					X
Extractions	X	X	X	X	
Capillary treatments with diathermy method			X (Specialist training required)	X (Specialist training required)	
Acupuncture/Dry needling					X
Skin Procedures involving cutting of living tissue					X
UV radiation (treatment of skin diseases)					X
Removal of warts and moles					X
Treatment of varicose veins					X
Carboxytherapy				X Direct supervision required	

Heat therapy					
Steambath		X (Specialist training required)	X	X (Specialist training required)	
Sauna		X (Specialist training required)	X	X (Specialist training required)	
Infra Red		X (Specialist training required)	X	X	
Ultra Violet (sunbeds)	X	X	X	X	
Heat Pads		X (Specialist training required)	X	X	
Warm Compresses	X	X	X	X	
Steam	X	X	X	X	
Hand and Foot Treatments					
Manicure	X	X	X	X (Specialist training required)	
Pedicure	X	X	X	X (Specialist training required)	
Podiatry/Chiropody					X
Removal of warts					X
Treatment of mild ingrown toenails (non-surgical)			X		
Treatment of fungal infections					X
Treatment of Bacterial infections					X
Artificial Nail Systems (Gel and Acrylic)	X	X (Specialist training required)	X (Specialist training required)	X (Specialist training required)	

Skin Care Treatments					
Manual Facial (Cleanse, Tone, Basic Skin Analysis, Secondary Cleanse with steam, Massage, Mask Application, Tone and Daycream)	X	X	X	X	
Basic Skin Analysis (identification of basic skin types)	X	X	X	X	
Facial Massage	X	X	X	X	
Facial using prescribed electrotherapy treatments (as per syllabus outcomes)		X	X	X	
Advanced Skin Analysis (Identification of skin types, conditions, disorders and diseases) NB may not diagnose.		X	X	X	
Body Treatments					
Postural Assessment		X	X		
Body Exfoliation	X	X	X		
Body Wrap	X	X	X		
Back Massage	X	X	X		
Swedish Body Massage		X	X		
Hot Stone Massage		X (Specialist training required)	X (Specialist training required)		
Manual Lymph Drainage		X (Specialist training required)	X (Specialist training required)	X (Specialist training required)	
Deep Tissue Massage		X (Specialist training required)	X (Specialist training required)		
Sport Massage		X (Specialist training required)	X (Specialist training required)		

Complementary Therapies					
Aromatherapy			X		
Reflexology			X		
Thai Massage		X (Specialist training required)	X (Specialist training required)		
Shiatsu Massage		X (Specialist training required)	X (Specialist training required)		
Iridology		X (Specialist training required)	X (Specialist training required)		
Indian Head Massage		X (Specialist training required)	X (Specialist training required)		
Hawaiin Massage		X (Specialist training required)	X (Specialist training required)		
Reiki		X (Specialist training required)	X (Specialist training required)		
Spa Therapies					
Hydro tub			X		
Vichy Shower			X		
Rasul Treatment			X		

## **COMMITMENT SHEET**

I \_\_\_\_\_, ID no \_\_\_\_\_ hereby confirm that

1. I have read the complete scope of practise for my Designation as well as have read all other designations.
2. I agree to abide to the scope of practise as per my appointed Designation. Should I not be designated to ensure to become designated before conducting treatments.
3. I am aware that should I practise outside the scope of my Designation that I would face disciplinary process and designation could be revoked.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date