

Dermatology Scope of Practice Guidelines

The PA may initiate, continue, or modify treatment of uncomplicated skin conditions without direct physician supervision or consultation:

- acne and related disorders
- inflammatory dermatoses (including uncomplicated psoriasis [non-erythrodermic psoriasis])
- infectious dermatoses (including bacterial, viral, fungal, and parasitic diseases and infestations)
- benign neoplasms
- dyschromias
- alopecia
- disorders due to photoaging
- uncomplicated bullous dermatoses
- focal cutaneous malignancies (actinic keratoses, basal cell carcinomas, squamous cell carcinomas)

Occasionally, the PA may be expected to **continue treatment** for a more complicated condition if so delegated by the supervising physician or if a physician is not available. Such treatment will be limited to temporary medication refills for up to 30 days until supervising physician follow-up is obtained.

The PA's may initiate, continue, or modify treatment with drug therapy, medical devices, and minor surgical procedures appropriate to the treatment of patients in a general dermatology practice.

Drug therapy which may be prescribed:

- topical and systemic anti-inflammatory medications, including oral and intramuscular corticosteroids, NSAIDs, and colchicine
- topical and systemic antibacterial, antiviral, antifungal, and antiparasitic medications
- topical and injectable local anesthetics
- topical acne, psoriasis, and wart medications
- systemic antihistamines, including doxepin
- injectable systemic immunosuppressants, including biologics and corticosteroids
- oral corticosteroids
- oral antimalarials
- isotretinoin
- antiandrogens (spironolactone, finasteride)
- eflornithine
- hydroxyurea
- amitriptyline
- miscellaneous dermatologic preparations such as antipruritics, moisturizers, barrier creams, keratolytics, sunscreens, shampoos, vitamin/mineral/amino acid supplements, minoxidil, and hydroquinone
- compounded topical medications
- anaphylaxis kits

Medical devices:

- ultraviolet light therapy
- bandages, dressings
- support hose

Minor surgical procedures:

- cryotherapy
- debridement
- suturing
- shave, punch, or incisional biopsies
- shave, punch, or fusiform excisions
- curettage and electrodesiccation
- assisting in Mohs surgery

The PA may **continue** treatment for up to 30 days with the following medications until supervising physician follow-up can be obtained:

- methotrexate
- psoralens
- azathioprine
- acitretin

The PA will immediately consult or refer to the supervising physician all patients with complicated diagnostic and treatment problems and all conditions which present outside the scope of these guidelines, including:

- melanomas and other malignancies which require wide excision or Mohs surgery
- extensive bullous or exfoliative dermatoses
- cutaneous manifestations of systemic diseases, including HIV-related dermatoses
- pregnancy-related dermatoses
- cutaneous lymphomas
- mycobacterial infections