



# COSMETIC PHYSICIANS COLLEGE OF AUSTRALASIA

## Membership Information Pack

*Before you apply for membership please read and understand the college constitution, policies, protocols and guidelines. You are then required to apply online via the membership portal at <http://www.cPCA.net.au/apply-now>. Alternatively, you can complete the attached application form, provide up-to-date curriculum vitae, as well as copies of certificates related to your medical registration, medical indemnity fund membership, memberships of industry related associations/ organisations and provide character references.*

Suite 1, Unit 4  
48 Winton Road  
JOONDALUP WA 6027  
Phone 1300 552 127  
Fax (08) 9300 2412

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## Contact the CPCA

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<b>Email:</b>	<a href="mailto:cpcapca.net.au">cpcapca.net.au</a>
<b>Telephone:</b>	9am – 5pm, WST 1300 552 127 (08) 9300 2414 (08) 6201 7317
<b>Facsimilie:</b>	(08) 9300 2412
<b>Website:</b>	<a href="http://www.cpcapca.net.au">www.cpcapca.net.au</a>
<b>Postal Address:</b>	Suite 1, Unit 4, 48 Winton Road JOONDALUP WA 6027

# COSMETIC PHYSICIANS COLLEGE *of* AUSTRALASIA Ltd

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*For the Establishment & Maintenance of High Standards, Skills and Conduct within the field of Cosmetic Medicine*

Dear Prospective Member,

The Cosmetic Physicians College of Australasia Ltd (CPCA) is pleased to provide you with an information pack. Further information is available in the enclosed USB drive.

It is the intention of this pack to provide an overview of the college's aims and objectives and how it intends to serve those practicing in and being treated by the practice of non-invasive cosmetic medicine.

The CPCA encourages and supports doctors focusing on cosmetic medicine and we hope this information is of value to you.

Yours faithfully

**COSMETIC PHYSICIANS COLLEGE OF AUSTRALASIA LTD**



**Dr Douglas Grose**

MB BS BSc (Med), Hons I, DObsRCOG, FCPCA

President Cosmetic Physicians College of Australasia Ltd 2015 – 2018

# Mission Statement

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The College is a public not-for-profit body.

The principal objects of the College are to establish and maintain high standards of learning, skills and conduct in cosmetic medicine.

We wish to support public education and awareness of cosmetic medicine.

We will implement cosmetic medical educational programs and support research into cosmetic medical treatments that will in turn aid and support medical practitioners wishing to further their knowledge of cosmetic medicine.

College objectives will be furthered by our co-operation with health professionals, like minded associations, institutes, governments, corporations, and medical practitioners, etc., from other medical disciplines that also hold an interest in cosmetic medicine.

With the support of its members, the College aims to position and promote itself as the leading representative body for medical practitioners of cosmetic medicine in Australasia.

## The Board

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### MEMBER ELECTED

President	Dr Douglas Grose
Vice President	Dr Adam Rish
Secretary	Dr Paul Spano
Treasurer	Dr John Mahony
Public Relations Officer	Dr Eduard Roos

### BOARD ELECTED

Member Representative	Dr Mary Dingley
Member Representative	Dr Sean Arendse

## The Board

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### President

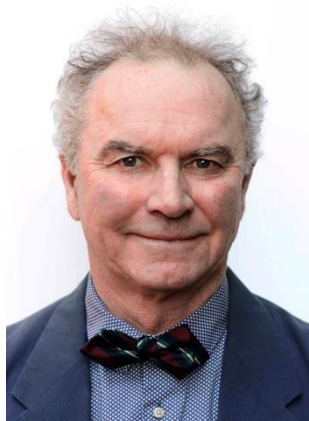


**Dr Douglas Grose** graduated in Medicine from Sydney University in 1970. In 1968 he obtained a BSc with First Class Honours in Pharmacology. After Junior Residency at Sydney Hospital he worked until 1974 in Papua New Guinea as an Army Medical Officer.

In mid-1974 he commenced General Practice in Rockhampton, retiring in 1995 to focus entirely on cosmetic dermatology with a particular focus on acne and diffuse sun damage. In 1996 he established Australian Skin Clinics at Southport on the Gold Coast and progressively developed that practice into a medical day spa with full time beauty therapists complementing the medical and nursing teams.

Doug sold his practice in early 2007 and is now working part time as a surgical assistant as well as doing training and consultancy work in cosmetic medicine. He has been an active member of the Cosmetic Physicians Society since 1999 and was an inaugural Fellow of the Australasian College of Cosmetic Surgery. He is a frequent speaker at medical conferences and training seminars.

### Vice President



**Dr Adam Rish** (BMedSc, MBBS, BA (Hons), MFA, FFMACCS) is the director and owner of Laserase in Bondi Junction, NSW. He is NSW representative of the Cosmetic Physicians Society of Australasia. He is also a Fellow of the Faculty of Medicine of the Australasian College of Cosmetic Surgery. He has been involved in laser and cosmetic medicine since 1987 and has been trained in Australia, New Zealand and the USA in laser and cosmetic techniques. He is also a professional artist having held 35 solo exhibitions with representation in many of the significant state and national collections.

### Secretary



**Dr Paul Spano** graduated from Melbourne University in 1991 then gained Fellowship to the Australian College of General Practitioners in 1995. Commencing practice in a broad range of Cosmetic Medicine in 1996, Paul then joined the Cosmetic Physicians Society in 1999 and spoke at the inaugural conference that year and several meetings thereafter and sat on the National Executive Committee until 2004. Paul was the second national trainer for Allergan in 2001. Paul began hair transplantation in 2006 and became a member of the International Society of Hair Restoration Surgeons in 2007. In 2009 Paul gained the Diploma in Cosmetic Medicine via examination at the Australian College of Cosmetic Surgery and Fellowship in 2012. Paul is now a Fellow of the Cosmetic Physicians College of Australasia.

## The Board

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### Treasurer



**Dr John Mahony** studied Medicine at Sydney University 1980-1984 graduating early 1985. Internship and residency years followed in the Illawarra, covering general medical and surgical terms, paediatrics, O&G, ICU, psychiatry, emergency, etc, until the end of 1990. In 1991 he travelled: through South America, North America, cycled through Europe and visited Gallipoli.

After a range of locum general practice postings including Coonabarabran and Grenfell he took over Newtown Medical Centre in 1993 and remained as practice principal for ten years. The practice was busy, employing up to six other GPs under Dr Mahony's supervision.

Then, after further training with various cosmetic physicians and cosmetic surgeons, and upon passing the relevant exams, Dr Mahony was admitted as an inaugural Fellow of the Faculty of Medicine of the Australasian College of Cosmetic Surgery in 2002 and opened Peach Cosmetic Medicine, in Paddington in 2003.

Dr Mahony has since worked exclusively in Cosmetic Medicine, full time in Paddington, growing the practice largely by word-of-mouth amongst inner Eastern Suburbs locals. His cosmetic interests run to the whole gamut of the field, but there is a particular focus on wrinkle injections, fillers, IPL and laser treatments, and liposuction.

In 2010 Dr Mahony delivered a paper at the Annual Conference of the Australasian College of Cosmetic Surgery on safety in office surgical procedures, reviewing the literature and legislation and regulations pertaining to such procedures, and introduced the concept of mixing prophylactic antibiotic into the tumescent anaesthetic used in liposuction. This ensures high levels of antibiotic are delivered precisely where the suctioning occurs, without relying on the poor and variable delivery that otherwise occurs to fat from IV or PO administration, especially in the presence of adrenaline. Dr Mahony has never had infection complicate a liposuction procedure.

Dr Mahony has also delivered lectures in various fora on topics such as laser and IPL hair removal, wrinkle injection treatments, various fillers, and anti-ageing medicine using certain hormones.

After having spent some time on the Board of the Australasian College of Cosmetic Surgery as a non-executive Director in 2013-2014, now in 2015 Dr Mahony is excited to have been elected as inaugural Treasurer of the Cosmetic Physicians College of Australasia.

## The Board

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### Public Relations Officer



**Dr Eduard Roos** has a special interest in Cosmetic and Skin cancer medicine. He is founder and Medical Director of Cosmetic Elegance Clinic in Toowoomba Queensland.

He has been involved in Cosmetic Medicine since 1999 and he has been a member of CPSA and is a fellow of CPCA.

He has been a foundation board member of CPCA. After a 2 year break he is now inspired and motivated to serve on the board and to promote, cosmetic medicine, as a special interest specialist field of medicine and to improve the standard of cosmetic medicine in Australia and Australasia.

It is his vision to see the CPCA develop into a specialist college and to establish it as the leading representative and advocacy body for cosmetic medicine in Australia.

### Member Representative



**Dr Mary Dingley** M.B., B.S., F.F.M.A.C.C.S., Diploma of Laser Medicine Cosmetic and Dermatological (A.C.C.S.)

Special Interests: Cosmetic injectables and laser & associated technology. Dr Mary Dingley has been practising cosmetic medicine since 1987. As a veteran of the industry she has seen the remarkable growth of the field, both in terms of numbers of practitioners as well as types of procedures performed.

Dr Dingley is a member and past President of the Cosmetic Physicians' Society of Australasia and is an advisor to government bodies on issues such as laser safety, training, cosmetic medicine and medicolegal issues generally. She is a Fellow and served as Dean of the Faculty of Medicine of the Australasian College of Cosmetic Surgery from 2007 to 2013.

### Member Representative



**Dr Sean Arendse** graduated from King College London in 1996, moved to Australia in 2000 and grew his career as an Emergency Physician. Currently, he continues his role as a senior emergency physician and past Director of Emergency Medicine Training at The Alfred Hospital in Melbourne.

He is the medical director of Flawless Rejuvenation Skin Clinics, and national trainer and regular speaker for Galderma. He also speaks regularly for both Lumenis and Cutera.

Sean completed a Post Graduate Diploma in Clinical Dermatology with Queen Mary's College, University of London in 2016, and his special interests include safety in the Aesthetic industry which prompted him to develop the Emergency in the cosmetic Practice course.

# The Membership Committee

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## BOARD ELECTED

**Dr Douglas Grose**  
Chair Person



**Dr Mary Dingley**



**Dr Eduard Roos**





# Constitution, Policies, Protocols & Guidelines

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Rules	Link
CPCA Constitution	<a href="http://www.cPCA.net.au/pdf/Constitution/ASIC_Approved_with_Index-Revision_3.9.15_CPCA_Constitution_ASIC_Doc_Id_029059876_v1.0.pdf">http://www.cPCA.net.au/pdf/Constitution/ASIC_Approved_with_Index-Revision_3.9.15_CPCA_Constitution_ASIC_Doc_Id_029059876_v1.0.pdf</a>

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## Adopted Policies

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Regulating Agency Guidelines:	
<ul style="list-style-type: none"> <li>National Standard: Accreditation of Cosmetic Clinics</li> </ul>	<a href="http://www.cosmeticphysicians.org.au/pdf/NS10010-2007%20ACCREDITATION%20OF%20COSMETIC%20CLINIC%20S.pdf">http://www.cosmeticphysicians.org.au/pdf/NS10010-2007%20ACCREDITATION%20OF%20COSMETIC%20CLINIC%20S.pdf</a>
<b>TGA:</b> Advertising	<a href="http://www.comlaw.gov.au/Details/F2007L00576">http://www.comlaw.gov.au/Details/F2007L00576</a>
<b>Medical Board of Australia/AHPRA:</b> <ul style="list-style-type: none"> <li>Codes &amp; Guidelines (All)</li> <li>Code of Conduct</li> <li>Advertising Regulated Health Services</li> <li>Continuing Professional Development Registration Standard</li> <li>Telemedicine Policy</li> </ul>	<ul style="list-style-type: none"> <li><a href="http://www.medicalboard.gov.au/Codes-Guidelines-Policies.aspx">http://www.medicalboard.gov.au/Codes-Guidelines-Policies.aspx</a></li> <li><a href="http://www.medicalboard.gov.au/Codes-Guidelines-Policies/Code-of-conduct.aspx">http://www.medicalboard.gov.au/Codes-Guidelines-Policies/Code-of-conduct.aspx</a></li> <li><a href="http://www.medicalboard.gov.au/Codes-Guidelines-Policies/Guidelines-for-advertising-regulated-health-services.aspx">http://www.medicalboard.gov.au/Codes-Guidelines-Policies/Guidelines-for-advertising-regulated-health-services.aspx</a></li> <li><a href="http://www.cpcpa.net.au/pdf/Policies/Medical-Continuing-Professional-Development-Registration-Standard.PDF">http://www.cpcpa.net.au/pdf/Policies/Medical-Continuing-Professional-Development-Registration-Standard.PDF</a></li> <li><a href="http://www.cpcpa.net.au/pdf/Policies/Medical-Board---Guidelines---Technology-Based-Consultations.PDF">http://www.cpcpa.net.au/pdf/Policies/Medical-Board---Guidelines---Technology-Based-Consultations.PDF</a></li> </ul>
<b>RACGP:</b> Your Practice	<a href="http://www.racgp.org.au/your-practice/">http://www.racgp.org.au/your-practice/</a>
<b>RACGP:</b> Infection Control	<a href="http://www.racgp.org.au/your-practice/standards/infectioncontrol/">http://www.racgp.org.au/your-practice/standards/infectioncontrol/</a>
<b>RACGP:</b> Managing Patient Records	<a href="http://www.racgp.org.au/search-results/?q=MANAGING%20PATIENT%20RECORDS">http://www.racgp.org.au/search-results/?q=MANAGING%20PATIENT%20RECORDS</a>
<b>RACGP:</b> Managing External Requests for Patient	<a href="http://www.cpcpa.net.au/pdf/Policies/managing-external-requests-for-patient-information.pdf">http://www.cpcpa.net.au/pdf/Policies/managing-external-requests-for-patient-information.pdf</a>
<b>RACGP:</b> Computer and Information Security Standards	<a href="https://www.racgp.org.au/your-practice/standards/computer-and-information-security-standards/">https://www.racgp.org.au/your-practice/standards/computer-and-information-security-standards/</a>
<b>RACGP:</b> Health Promotion & Preventative Care	<a href="https://www.racgp.org.au/your-practice/standards/standards4thedition/practice-services/1-3/health-promotion-and-preventive-care/">https://www.racgp.org.au/your-practice/standards/standards4thedition/practice-services/1-3/health-promotion-and-preventive-care/</a>
<b>RACGP:</b> eHealth Policy	<a href="https://www.racgp.org.au/your-practice/ehealth/">https://www.racgp.org.au/your-practice/ehealth/</a>
<b>RACS:</b> Discrimination, Bullying and Sexual Harassment Policy	<a href="https://www.surgeons.org/media/25155360/2017-05-25_pol_rel-gov-028_discrimination_bullying_and_sexual_harassment.pdf">https://www.surgeons.org/media/25155360/2017-05-25_pol_rel-gov-028_discrimination_bullying_and_sexual_harassment.pdf</a>
<b>NHMRC:</b> Australian Prevention & Control of Infections	<a href="http://www.nhmrc.gov.au/guidelines/publications/cd33">http://www.nhmrc.gov.au/guidelines/publications/cd33</a>
<b>AMA:</b> Code of Ethics	<a href="http://www.cpcpa.net.au/pdf/Policies/ama_code_of_ethics.pdf">http://www.cpcpa.net.au/pdf/Policies/ama_code_of_ethics.pdf</a>
<b>AMA &amp; MIIAA:</b> Clinical Images and the Use of Personal Mobile Devices	<a href="https://www.dermcoll.edu.au/wp-content/uploads/2015/03/FINAL_AMA_Clinical_Images_Guide1.pdf">https://www.dermcoll.edu.au/wp-content/uploads/2015/03/FINAL_AMA_Clinical_Images_Guide1.pdf</a>

### Advertising Guidelines

Current August 2014

Advertising is common in cosmetic medicine and there is a variety of requirements which must be satisfied to avoid invoking the wrath of various societies, medical boards or the Therapeutic Goods Administration.

While each individual member should satisfy him- or herself that all state, national, Society and college requirements have been satisfied, the following may be a guide as it lists the most important points or the most common problems encountered within our field.

Full descriptions of requirements may be found at:

- [www.medicalboard.gov.au](http://www.medicalboard.gov.au) or [www.ahpra.gov.au](http://www.ahpra.gov.au)
- [www.tgacc.com.au](http://www.tgacc.com.au)
- [www.cosmeticsurgery.org.au](http://www.cosmeticsurgery.org.au)

Advertising must not:

- Be false, misleading or deceptive;
- Offer discounts, inducements or special offers;
- Use testimonials or purported testimonials;
- Create unreasonable expectations or promote unnecessary use of services.

In advertising, claims must be able to be substantiated and comparisons should not be made with other health professionals.

Photos of treatments must only depict actual patients of the mentioned doctor or clinic and must show the result of only the advertised treatment.

Written consent must be gained to use these photos in advertising. Before and after photos must have consistency in position, lighting, expression, make-up, etc. and must state that the referenced change is due to the cited procedure.

S4 medication names must not be used in advertising. Neither the trade nor generic name nor any corruption thereof may be used. BOTOX, botulinum toxin, BTX-A, Btox, Restylane, Juvederm, hyaluronic acid injections and others are all not permitted. Terms such as “cosmetic injections”, “wrinkle-relaxing injections”, “dermal filler injections” and “sweat-reducing injections” are all permitted.

YOU are responsible for your advertising, not any staff member or administrator. Employed doctors and those that work out of others’ clinics are expected to take reasonable steps to ensure that advertising of that clinic or on their behalf complies with guidelines.

CPCA members, other than Fellows, Full, Life & Honorary members, are **not permitted** to claim membership of the College or use the College logo in advertising.

Fellow, Full, Life & Honorary members **may** claim College membership and use the College logo in their advertising. However, **only** Fellows (and Fellows that become Life or Honorary members) are permitted to use “FCPCA” as a post nominal.

As part of the application process your website will be reviewed by our Membership Committee. We have a high number of applications requiring multiple website checks. This is very time consuming and frustrating for all concerned. It is worthwhile educating oneself as to the official advertising requirements (as stipulated by the above organisations). Repeated breaches will make one liable to disciplinary action by the TGA or the MBA/AHPRA. The CPCA does not wish to, itself, be held in breach by association with doctors who flaunt such guidelines.

### Botox Party Policy

Current August 2014

The CPCA considers the administration of botulinum toxin or any dermal filler, or the performance of any cosmetic medical procedure, in a party setting, to be incompatible with good medical care. The CPCA believes these types of non-invasive and minimally-invasive cosmetic procedures are medical procedures which should be conducted in the appropriate medical setting.

The CPCA, with reference to the CPCA Protocol for Delegated Cosmetic S4 Injections, endorses individual face-to-face consultations with each patient, to be performed by the doctor performing the treatment or supervising the registered nurse to whom the procedures are delegated. A full medical history should be gained, and examination performed by the doctor to ensure that the intending patient is psychologically and physically suited for treatment.

The CPCA does not condone the performance of cosmetic medical procedures in a setting where:

- The medical practitioner is not supervising the delegated injector;
- The medical practitioner is “prescribing” the medication after the administration takes place or not providing a written order at all;
- The medical practitioner is prescribing the medication without personally conducting an in-person face-to-face consultation, history-taking and examination of the patient;
- Consent is gained in a coercive or peer-pressure-related environment;
- Consent is gained after imbibing alcoholic beverages or other not-medically-necessary mind- or mood-altering substances.

The CPCA does not endorse the administration of botulinum toxin or dermal fillers by delegated injectors with a lesser qualification than registered nurse. All such registered nurse injectors must hold appropriate independent indemnity insurance, if not covered by the doctors’ practice insurance as employees, and legitimate registration in the state or territory in which they are working.

The CPCA maintains that all doctors must maintain their medical registration in the state or territory in which they conduct their practice(s).

The CPCA does not consider supervision to be adequate if the registered nurse delegated injector is effectively operating independently of the supplying doctor.

With regards to the injection of dermal fillers, the CPCA does not believe any advanced techniques, such as deep filling along the orbital rim, the use of a sub-dermal cannula, or the equivalent placement with a long, sharp needle, to be within the scope of practice of a registered nurse. These advanced techniques and other off-label uses of cosmetic medicines should be performed by the doctors themselves.

The CPCA does not in any circumstances condone the use of any cosmetic injectable substances, or use of pieces of electronic medical equipment, that are not TGA-approved for use in Australia.

## Constitution, Policies, Protocols & Guidelines

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### CME/CPD Policy

Current September 2017

The Medical Board of Australia requires all medical practitioners who are engaged in any form of practice to participate regularly in continuing medical education that is relevant to their scope of practice in order to maintain, develop and enhance their knowledge skills and performance and so ensure that they deliver appropriate and safe care. The College has developed a program which meets the Medical Board requirements but also meets the requirements of the College to retain membership level within the College. All members are required to submit evidence of CME/CPD to the College annually to comply with this requirement.

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### Complaints Protocol

Current August 2015

If you are wishing for the CPCA to pursue a complaint (for example unsupervised nurse injectors etc.) then these are the steps that you have to follow:

Address your complaint in writing to the President of the CPCA;

- You must detail in your complaint what areas of your state health act, TGA or other relevant legislation is being breached;
- If possible, identify if there is a medically registered practitioner involved;
- If your complaint involves advertising please attach a copy/scan of the advertisement, keeping in mind that the date of the advertisement should be shown. It can be useful to screen capture websites when appropriate.
- Send the letter to CPCA head office addressed to the President:
  - Via post:  
Suite 1, Unit 4, 48 Winton Road,  
Joondalup, WA, 6027
  - Via email: [cpcapca@cpca.net.au](mailto:cpcapca@cpca.net.au) or
  - Via fax: (08) 9300 2412.

Your complaint will then be assessed by the Board of the CPCA and formalized if deemed appropriate. The more information that you provide the better the chances of resolution.

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### CPCA Conflict of Interest Policy

Current February 2015

#### **Article I: Purpose**

The purpose of this conflict of interest policy is to establish the procedures applicable to the identification and resolution of conflicts of interest in the context of transactions or arrangements entered into by Cosmetic Physicians College of Australia (CPCA) where an Interested Person (defined below) may have a Financial Interest (defined below) in or Fiduciary Responsibility (as defined below) towards an individual or entity with which CPCA is negotiating a transaction or arrangement. The determination that a conflict of interest exists does not prohibit the CPCA from entering into the proposed transaction or arrangement provided that the procedures set forth in Article III below are followed. This policy is intended to supplement but not replace any applicable state laws governing conflicts of interest applicable to non-profit and charitable corporations.

To view the full policy, please go to [http://www.cpcapca.net.au/pdf/Policies/CPCA\\_Conflict\\_of\\_Interest\\_Policy\\_and\\_Acknowledgement\\_form\\_Updated\\_03.12.15.pdf](http://www.cpcapca.net.au/pdf/Policies/CPCA_Conflict_of_Interest_Policy_and_Acknowledgement_form_Updated_03.12.15.pdf)

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### Credit Card Payment Policy

Current May 2017

Due to the nature of the College revenue being generated by annual memberships, which are technically paid for in advance, the current merchant account provider has imposed transaction-processing restrictions upon the College. This is because of the bank's possible liability to the member/s should the College fail to provide what has been paid for by the member.

To enable the College to work with the imposed restrictions it has had to review the terms under which it passes on the convenient credit card payment option.

To view the full policy, please go to [http://www.cpga.net.au/pdf/Policies/Credit\\_Card\\_Payment\\_Policy\\_V1\\_04.05.2017.pdf](http://www.cpga.net.au/pdf/Policies/Credit_Card_Payment_Policy_V1_04.05.2017.pdf)

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### Protocol for Delegated Cosmetic S4 Injections

Current September 2016

Suitably-trained registered nurses may administer S4 medicines for cosmetic purposes after a doctor has consulted in person, face-to-face with a patient and formulated a written treatment plan:

1. To cover a time period no greater than 1 year
2. Stipulating the areas to be treated
3. Stating which medications are to be used
4. Setting the maximum number of procedures
5. Stating the maximum dosages of the medications to be administered.

The patient and treatment plan would be reviewed:

1. At the expiration of the set time period
2. If unexpected side effects or complications occurred
3. If the patient or nurse were unhappy with the results
4. If new indications for the ordered medications were contemplated
5. If other medications were considered for the original or new indications
6. If the original presentation were altered by e.g. surgery, trauma, pregnancy or other procedures for which the original treatment plan did not cater.

If the patient is taking new medications the nurse would need to check with the supervising doctor prior to the procedure to ensure there were no contraindications to proceeding with the treatment plan.

The doctor should ensure that the nurse is fully competent and capable to carry out all injections that are delegated to him/her. The supervising doctor must be capable of performing these procedures him- or herself and should perform those procedures which are outside the nurse's capabilities him- or herself.

Suitably-trained registered nurses may perform such procedures at adequately-equipped premises, distant from the doctor's rooms, if treatment plans for all patients had previously been formulated by the supervising doctor, following an in person, face-to-face consultation. The doctor should be readily contactable but need not be on site.

After each instance where S4 medicines are taken away from the doctor's rooms, an inventory must be performed. The amount of stock returned must be reconciled with the amount taken away, that recorded as injected and the monetary return.

### Protocol for Delegated Cosmetic S4 Injections

Current August 2014

Continued.....

It is not acceptable for a doctor to on-sell S4 medications to a nurse or other person to then administer these to patients, regardless of any prior order for the administration of said medications.

Registered nurses performing such procedures must:

1. Have current national registration
2. Be covered by the practice insurance policy, or in the case of an independent contractor have his or her own policy
3. Have had adequate training in the particular procedure/s
4. Have been certified as competent where certification exists, or deemed competent by a trainer
5. Approved by the supervising doctor.

The CPCA does not endorse the use of injectors whose qualifications or experience is less than that stated above and is vehemently opposed to injections being given by non-paramedical persons such as beauty therapists.

All members should ensure there are no additional requirements pertinent to their own state or territory which must be fulfilled.

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### Use of TGA Registered Medical Devices Policy

Current August 2014

The Cosmetic Physicians College of Australasia requires all members to use only TGA-registered medical devices.

At CPCA conferences, all medical devices sold and displayed by trade must be TGA-approved and proof of this approval must be available for viewing on request. For new devices for which TGA approval has not yet been finalised, a clearly visible and legible sign must be affixed to the device stating that the device is not for sale and it is not TGA-approved.

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### Policy Regarding Attendance at CPCA Events

Current August 2014

#### **Preamble**

A CPCA Event is defined as being any meeting organised, co-organised, co-hosted, or cross-promoted by CPCA. Examples include:

#### **Procedural:**

CPCA Board meetings  
CPCA Annual General Meeting

#### **Educational:**

CPCA Introduction to Cosmetic Medicine Courses  
CPCA State Branch Educational Meetings

### Policy Regarding Attendance at CPCA Events

Current August 2014

Continued.....

CPCA Annual Scientific Meetings (For 2015, this will be run in conjunction with Australasian Society of Aesthetic Plastic Surgery for a trial period and then reviewed. Prior to this, since 2009, these were run in conjunction with ACCS).

This Policy is designed to outline the default restrictions on attendance at such meetings. Variations to this Policy for any specific event must be pre-approved by the CPCA board, or as outlined below.

#### Restrictions

CPCA Board Meetings: Only CPCA Board members may attend these meetings. In addition, a designated CPCA staff member may attend for the purposes of recording minutes. On occasion, there may be an invited participant who attends for a specific purpose and is only present for the time taken to deal with that purpose.

CPCA Annual General Meetings: Only financial CPCA members may attend and vote. In addition, a reasonable number of CPCA staff may attend for the purposes of manning the doors, distributing paperwork, managing floor microphones and recording minutes.

CPCA Introduction to Cosmetic Medicine Courses: Any registered medical practitioner may attend these courses, upon payment (in full) of the registration fee. The introductory courses are restricted to medical practitioners, **invited industry/trade representatives, volunteer procedural subjects (“models”), and anaesthetists/emergency physicians or others whose presence is required during procedural demonstrations.**

CPCA State Branch Educational Meetings: By default, only financial CPCA members, invited speakers [**and invited industry/trade representatives**] may attend such meetings. Doctors who have applied for, or are considering applying for, CPCA membership may also be allowed to attend, at the discretion of the CPCA Member organising the event. In addition, doctors who work with CPCA Members in their cosmetic practices may attend at the discretion of the CPCA

Member organising the event, after the employing CPCA Member has confirmed such status with the organizing CPCA Member. This privilege is extended on a once-only basis. Such doctors are expected to join the Society if they wish to attend future meetings.

By default, non-doctor practice staff members of CPCA Members are excluded from attending such events. Exceptions to this restriction can only be made by prior decision of the CPCA Board.

#### CPCA Annual Scientific Meetings

The Policy regarding these meetings is necessarily more complex (as many different types of events are scheduled), warranting consideration under a separate heading.

It is also important to note that some flexibility is required in the application of CPCA’s policy in this setting, as traditionally these meetings have been co-hosted by CPCA with one or more other specialist medical group/s.

Ultimately, the admissions policy for these meetings will be determined by their Organising Committees. The following policy statement is intended to establish CPCA’s “default” position, for the guidance of CPCA’s representatives on such Committees.



### Policy Regarding Attendance at CPCA Events

Current August 2014

Continued.....

Plenary sessions: open to all delegates.

Workshops and training sessions: open to Full and Fellow delegates only (unless otherwise specified by the Organising Committee, on an event-by-event basis). Paramedical delegates may attend if the number of Full/Fellow delegates is not at capacity, preferably in association with their supervising doctors.

Paramedical training course: Workshops designed for Paramedical delegates may be attended by those delegates only, unless Full/Fellow delegates are required for supervision or demonstration purposes.

Trade display: open to all delegates.

The CPCA does not believe that workshops presented at the Annual Scientific Meeting in any way constitute training. Delegates, be they Full/Fellow or Paramedical, should not believe themselves “trained” in any technique after observing a demonstration.

It is the responsibility of CPCA members to train their own staff to their satisfaction or to organize such training and ensure they are aware of their staff members’ capabilities.

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## Privacy Policy

Current July 2015

### Introduction

We are committed to protecting the privacy of our members’ and applicants’ information and to handling such information in a responsible manner in accordance with the Privacy Act 1988 (Cth), the Privacy Amendment (Enhancing Privacy Protection) Act 2012, the Australian Privacy Principles and relevant State and Territory privacy regulation (referred to as privacy legislation).

This Privacy Policy explains how we collect, use and disclose your personal information, how you may access that information and how you may seek the correction of any information. It also explains how you may make a complaint about a breach of privacy legislation.

This Privacy Policy is current from 1<sup>st</sup> March, 2014. From time to time we may make changes to our policy, processes and systems in relation to how we handle your personal information. We will update this Privacy Policy to reflect any changes. Those changes will be available on our website.

### Collection

We collect information that is necessary and relevant to assess applications for membership, provide services for our members and promote cosmetic medicine, generally. This information may include your name, practice address/es, contact details, date of birth, registration and medical insurance details as well as information about the nature of your practice and your curriculum vitae. It may also include credit card details should you decide to pay your membership this way. This information may be stored on our office computer system as well as paper records.

### **Privacy Policy**

Current July 2015

Continued.....

Wherever possible we will only collect information from you, personally, however we may also need to collect information from other sources such as referees.

We collect information in various ways such as over the phone, in writing or over the internet depending on your method of contact. We may also collect information in person at courses or conferences. This information may be collected by our members or staff.

This information will generally be retained, however it may be archived if membership becomes inactive.

#### **Use and Disclosure**

We will treat your personal information as strictly private and confidential. However, it is a privilege of membership that members' practice contact details are displayed on our website, unless we are otherwise instructed not to do so.

Applicants' details will be shared among our Advisory Panel members to seek approval for membership. We may seek clarification of certain details from you in the event of a query.

We may ask that you seek clarification from your Medical Defence Organisation about aspects of your application.

There may be circumstances where we may be permitted or required by law to disclose your personal information to third parties such as police, solicitors, government regulatory bodies or courts of law.

We may disclose information about you to outside contractors to carry out activities on our behalf, such as an IT service provider, solicitor or debt collection agent. We impose security and confidentiality requirements on how they handle your personal information. Outside contractors are required not to use information about you for any purpose except those activities we have asked them to perform.

#### **Data Quality and Security**

We will take reasonable steps to ensure that your personal information is accurate, complete, up to date and relevant. For this purpose, we request that you inform us of address and contact changes as soon as possible. We request also that you let us know if any of the information we hold about you is incorrect or out of date.

Personal information that we hold is protected by:

- Securing our office premises which are protected by alarms
- Providing locked cabinets for physical record storage
- Placing passwords on computers to limit access and protect electronic information from unauthorised interference, access, modification and disclosure
- Backup data is stored offsite in encrypted form.

#### **Corrections**

If you believe that the information we have about you is not accurate, complete or up-to-date, we ask that you contact us in writing.

### **Privacy Policy**

Current July 2015

Continued.....

#### **Access**

You are entitled to request access to your records. We request that you put your request in writing and we will respond to it within a reasonable time. There may be a fee for the administrative costs of retrieving and providing you with copies of your records.

We may deny access to your records in part or full in certain circumstances permitted by law. We will tell you why access is denied and the options you have to respond to our decision.

#### **Complaints**

If you have a complaint about the privacy of your personal information, we request that you contact us in writing. Upon receipt of a complaint, we will consider the details and attempt to resolve it in accordance with our complaints handling procedures.

If you are dissatisfied with our handling of a complaint, you may make an application to the Australian Information Commissioner or the Privacy Commissioner in your state or territory.

#### **Overseas Transfer of Data**

We will not transfer your personal information to an overseas recipient unless we have your consent or we are required to do so by law.

#### **Contact**

Please direct any enquires, complaints and requests for access to:

The Secretary  
Cosmetic Physicians College of Australasia Ltd.  
Joondalup Professional Centre  
Suite 1, Unit 4, 48 Winton Road  
JOONDALUP, WA, 6027

Tel: 1300 552 127  
Tel: (08) 6201 7317  
Fax: (08) 9300 2414  
Eml: [cpc@cpca.net.au](mailto:cpc@cpca.net.au)

### Refund & Returns Policy

Current February 2015

#### **Returns Policy**

The college does not provide products that can be returned.

#### **Refund Policy**

***In the event of an accidental overpayment***, a full refund will be issued. Please follow the instructions below. There will be no time restrictions applied to your notifying the office of your error. Please allow the office up to fourteen (14) days to confirm your overpayment and issue the refund. The payment will be made according to terms 1 to 3 below.

***After a submission of an application for membership***, if you feel the need to withdraw said application, you must do so in writing. Please state your reason for revoking the application.

Notice of intention to withdraw application must be received at the administration office within fourteen (14) days of date of submission for a full refund to be approved.

All refunds are to be at the discretion of the College. If the application for membership has been processed by the College, then the College reserves the right to charge an administration fee out of the application fee or prior to refund.

#### ***Annual membership part refunds***

In the event of member retirement from medical practice due to disability or death, the College may at its discretion make a partial refund of current year annual fees on request in writing with reason for discontinuation stated.

Where to send the notice:

The Membership Review Committee  
Cosmetic Physicians College of Australasia Ltd  
Joondalup Professional Centre  
Suite 1, Unit 4, 48 Winton Road  
JOONDALUP WA 6027  
Email to: [cpc@cpca.net.au](mailto:cpc@cpca.net.au)  
Fax to: (08) 9300 2412

The date of submission will be deemed to be;

- (a) In the case of online submission via the CPCA website facility: The date of the submission as captured by this facility
- (b) In the case of a faxed submission: The date as recorded on the received and printed document
- (c) In the case of a mailed or delivered (Australia Post or courier) submission: The date the item was received or delivered to the office of administration.

### Refund & Returns Policy

Current February 2015

Continued.....

On refund approval, the payment will be processed according to the below terms:

- (1) If the original payment was paid by cheque or direct credit to the CPCA bank account, the refund must be made payable to the same payer and be paid into the same bank account from which the payment originated\*.
- (2) If the application fee was paid via credit card, the refund can only be processed back to that same credit card from which the payment originated\*.
- (3) \* You will be required to provide proof of payment method as some specific payment details (i.e. credit card numbers) are not captured and stored.

Please allow the office up to fourteen (14) days to confirm your payment and issue the refund.

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### Professional Relationships between CPCA Members and Non-doctor Aesthetic Staff

Current August 2014

#### Background

As the practice of cosmetic medicine becomes ever more complex, most cosmetic physicians will at some point find themselves working alongside both nurses and non-medically trained aestheticians such as beauticians and laser therapists, either as employers, supervisors, or possibly business partners.

Aestheticians in particular are (unlike doctors) not bound by any clearly recognised set of ethical or professional standards, and are unlikely to have received any ethical training. Hence the decisions and recommendations they make to their clients are in most cases likely to be commercially driven. This situation appears to enjoy tacit acceptance by the community at large; however, where medical practitioners interact with aestheticians and aesthetic nurses, the higher ethical standards to which doctors adhere to may at times clash with the commercial considerations driving such businesses.

It is therefore incumbent upon CPCA members to understand their ethical obligations in such circumstances. This document is intended to provide broad guidelines for correct and ethical practice when interacting with non-doctor aesthetic staff in various situations.

#### Definitions

Aesthetic treatments: including (but not limited to) laser and IPL treatments; administration of scheduled substances such as botulinum toxin and dermal fillers; skin needling (e.g. with dermal rollers); cosmetic tattooing; microdermabrasion; radiofrequency skin treatments; assistance at procedures; formulation of skin care plans; advice and dispensing of skin care products.

Aesthetic nurse: a qualified nurse (RN or EN) who engages in aesthetic treatments.

### Professional Relationships between CPCA Members and Non-doctor Aesthetic Staff

Current August 2014

Continued.....

Aesthetician: any person other than a registered medical practitioner or nurse, who engages in aesthetic treatments.

Cover: Supervision (in any way) of the delivery of an aesthetic treatment by a CPCA doctor.

#### Examples of professional relationships between CPCA members and aesthetic staff

There are many different possible types of professional relationships between a CPCA doctor and non-doctor aesthetic staff. Some examples include:

- Aesthetic nurse or aesthetician employed at a CPCA doctor's practice;
- Aesthetic nurse or aesthetician working under contract at a CPCA doctor's practice;
- CPCA doctor working as a locum at an outside practice which employs nurses or aestheticians;
- CPCA doctor working as an employee or under contract at a beauty salon, laser clinic, or other business offering aesthetic medical services;
- CPCA doctor covering aesthetic services at an offsite location;
- Others.

The critical consideration is that wherever a CPCA doctor practices, their scope of medical influence constitutes a bona-fide medical practice to which all the ethical standards of the profession (including CPCA's own member standards) apply.

Hence it is essential that the CPCA doctor's scope of practice be well-defined and agreed to by all parties to the commercial arrangement. This is particularly relevant where the doctor is working at another clinic (or salon) which operates at least partially outside that doctor's control.

This scope of practice should specify whether the doctor is "covering" any or all of the aesthetic treatments offered at that location.

#### Supervision of aesthetic service delivery by CPCA doctors - "on-site"

The NSW Medical Board in its "Supervision Policy" document identifies three levels of supervision:

- Level 1: direct supervision
- Level 2: indirect, on-site supervision
- Level 3: indirect supervision

In most cases, the CPCA doctor will be directly or indirectly supervising services provided by staff on that doctor's own premises (Levels 1 & 2).

In this case, the level of supervision required will depend on the patient's presenting condition, the type of service being administered, and the level of qualification and experience of the aesthetic staff delivering the service.

### Professional Relationships between CPCA Members and Non-doctor Aesthetic Staff

Current August 2014

Continued.....

Any of these levels may be appropriate for a given situation involving a CPCA doctor's patient being treated by an aesthetician. However, certain principles apply:

- The appropriate Federal and State laws must at all times be complied with;

In the case of administration of scheduled substances by nurses, the CPCA Protocol for Delegated Cosmetic S4 Injections must also be followed.

In the specific case of laser and IPL treatment, the following principles apply:

- All operators should hold a recognised Laser Safety Officer's Certificate or suitable equivalent qualification;
- Where an operator is in training and has not yet achieved certification, direct supervision is compulsory;
- All patients must first be consulted in person by a doctor, preferably the CPCA member, or alternatively the member's trainee or another doctor with suitable training and experience in laser/IPL medicine; where a doctor is being trained by the CPCA member, the level of supervision can be at the discretion of the member, based on the trainee's skill and experience level at the time.

#### Supervision by CPCA doctors of aesthetic service delivery - "off-site"

In this situation, the CPCA member will not be available to provide direct supervision on demand. Hence a different set of principles will apply.

Firstly, it is essential that the precise scope of the CPCA doctor's practice is understood by all parties. This could exist at two different levels:

- The clients are effectively the CPCA doctor's patients, and the doctor is delegating their treatment to an aesthetic nurse or aesthetician;
- The clients are not the CPCA doctor's patients, but the doctor assumes responsibility for the overall quality of service delivery for certain procedures.

In the first case, the following principles apply:

- The appropriate Federal and State laws must at all times be complied with;
- In the case of administration of scheduled substances by nurses, the CPCA Protocol for Delegated Cosmetic S4 Injections must also be followed;
- The CPCA doctor must personally ensure that all operators are skilled at the procedures being performed;
- The CPCA doctor must ensure that a detailed and up-to-date "operations manual" exists for all medical procedures performed at the location, and that appropriate medical records are kept;
- For laser and IPL treatment, all operators should hold a recognized Laser Safety Officer's Certificate or suitable equivalent qualification;
- Any patient seeking treatment must be seen by the CPCA doctor prior to treatment. The CPCA doctor must then provide a written treatment protocol for the patient;

### Professional Relationships between CPCA Members and Non-doctor Aesthetic Staff

Current August 2014

Continued.....

- Where any service delivery is undertaken on a client without prior assessment by the CPCA member or another appropriately-qualified doctor, it must be of an essentially non-medical nature. It should be clear that these clients are not patients of the CPCA doctor and are undergoing non-medical treatments. CPCA doctors should not practice at locations where treatments requiring medical supervision are allowed to take place without appropriate medical supervision.

In the second case, the following principles apply:

- The appropriate Federal and State laws must at all times be complied with;
- The CPCA doctor must personally ensure that all operators are skilled at the procedures being performed;
- The CPCA doctor must ensure that a detailed and up-to-date "operations manual" exists for all medical procedures performed at the location, and that appropriate medical records are kept;
- For laser and IPL treatment, all operators should hold a recognised Laser Safety Officer's Certificate or suitable equivalent qualification;
- Administration of scheduled substances, treatment for leg veins, pigmented lesions other than simple freckles, vascular malformations other than isolated telangiectasias, or treatment to areas of skin containing undiagnosed skin lesions, should not be undertaken at that location unless they are being supervised by another appropriately-qualified doctor. CPCA doctors should not be associated with locations where such treatments are allowed to take place without appropriate medical supervision.

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### Social Media Policy

Current August 2014

1. The doctor is responsible for any social media that pertains to their clinical activities.
2. Social media, like other forms of advertising, cannot be seen to promote time limited specials, use illegal terminology including brand names, misleading advertising in the form of written word or photographs, or use testimonials. Nor should it involve children under the age of 18 years where there is direct or implied reference to minors having cosmetic medical procedures.
3. Conversational input from colleagues, clients, or staff that breaches such rules must be removed immediately. For example, a client cannot write that Dr X is the greatest at treatment Y.

Any reference to other social media or websites that have breaches makes the original referring site in breach too.

The CPCA does not condone breaches of advertising in any form whether they were intentional or not. Unintentional breaches by CPCA members must be removed or rectified as soon as it comes to their attention. The CPCA recommends members to contact and be aware of their MDO recommendations concerning social media.

Persistent or recurrent breaching by members may result in disciplinary action against the member, which may include suspension or loss of membership.



### Policy for Solarium Use

Current August 2014

While acknowledging that ultraviolet (UV) light under medical supervision may be useful in treating some skin conditions (e.g. PUVA for vitiligo), the CPCA believes that solarium use is generally harmful and condemns its use for all cosmetic purposes.

Skin damage from exposure to UV light is cumulative and leads to photo-ageing of the skin and significantly increases the risk of skin cancer in the Australian population, which is already at a high risk of this.

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### Technology-based Patient Consultation Policy (Teleconsultation)

Current September 2016

The College does not see teleconsulting as best practice but will not exclude, or expel from membership, otherwise-suitable medical practitioners who either work in groups that use teleconsulting or do teleconsulting themselves. The College does place some limitations on teleconsulting for cosmetic purposes as follows:

- The medical practitioner doing the teleconsultation must work in the field of cosmetic medicine at least part-time and is a member of a cosmetic medical college or society or other college involved with cosmetic medicine and involved in its CME program.
- The medical practitioner doing the teleconsultation accepts responsibility for the outcome where the person performing the treatment is not a medical practitioner.
- The teleconsulting medical practitioner has met the treating nurse in person and has a professional relationship with any nurse he/she delegates to and is satisfied that the nurse has adequate training and experience in cosmetic injectables to perform the specific treatment.
- The patient must have an annual review either face to face or via a teleconsultation with a doctor who meets the criteria stipulated in the first dot-point and who accepts responsibility for the subsequent treatments until further review.
- The person performing the teleconsultation must be available themselves, or through a suitably-trained medical practitioner locum, to offer immediate advice and support to the remote practitioner in the case of an emergency or where the practitioner needs further guidance.
- The person performing the treatment must have in their possession hyaluronidase to use in the event of arterial embolism plus an emergency medical kit to deal with acute allergic reactions and the skill to use them.

Further information can be found on the AHPRA/Medical Board of Australia website by following this link: <http://www.medicalboard.gov.au/Search.aspx?q=%20Guidelines---Technology-Based-Consultations>

### **Use of a Post Nominal & Advertising of Membership of the College**

Current February 2015

#### **Post Nominal**

Post nominal are abbreviations of qualifications held by a person and placed immediately after or immediately below their printed name. The most common are University degrees such as Bachelor and Master Degrees.

#### **Membership**

Membership of an organisation which did not require sitting additional examinations but is part of your profession comes under the heading of “Memberships and Affiliations” and would include such organisations as the AMA, International Academies, Craft organisations such as CPSA and many others. It is perfectly reasonable and correct to advise people of your professional affiliations as it is an indication of continuing professional development and involvement with your peers. However, Membership of an organisation, even a College, is not a professional qualification and cannot be used as a post nominal.

#### **Use of Post Nominal FCPCA**

Only Fellows of the Cosmetic Physicians College may use the post nominal FCPCA or Fellow CPCA. Those who are Members may not use a post nominal but may mention their CPCA Membership on their business documents. Affiliates are not permitted to mention their affiliation to the College in any documents.

Incorrect use of a post nominal by members and affiliates of the College will bring disciplinary action by the College Council. Refusal to correct inappropriate use of post nominal or incorrect information about your relationship to the CPCA may lead to loss of membership at the discretion of the College Council.

# CPCA Membership Benefits

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## INDIVIDUALS

- Through college representation, you will have a voice to express how the cosmetic industry develops,

You will:

- Have industry representation when it comes to government lobbying,
- Be kept informed of and have access to a high standard of educational courses,
- Have access and be encouraged to attend regular state CPCA CME Meetings,
- Have opportunities to meet and have discussions with other members in the field of cosmetic medicine,
- Have an opportunity for mentoring and advice when needed,
- Have free or discounted access to cosmetic magazines such as Cosmetic Surgery Magazine,
- Have access to a library of professional articles and journals such as the Dermatological Surgery Journal, etc.,
- Have access to discounted registration rates for annual conferences, and product exhibitions

We aim to provide the public with up-to-date information about cosmetic medicine and help them locate qualified doctors who focus on cosmetic procedures.

Fellows and Full financial members are encouraged to use the CPCA logo. A part of our PR campaign is to inform members of the public to seek CPCA doctors.

**An Affiliate of the College is NOT permitted to advertise that they are a member. This is only allowed once an Affiliate has upgraded to a Full or Fellow member.**

Depending on your level of membership, you will:

- Be entitled to a post nominal,
- Have the option to list your yourself and your practice on the CPCA website,
- Have the right to promote your membership of the college via our logo and branding,
- Have the right to vote on how the college is run,
- Have the option to stand for election to the Board or be elected to a sub-committee or two.
- Much more

**Help grow and promote the college that promotes you.**

# Membership Levels

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The college has several membership levels. The level at which you enter the college will be assessed and determined by the Membership Committee and is based on your level of education, experience and expertise and your contributions to journals, conferences, the training and education of others in the field of cosmetic medicine.

The membership levels are:

## **Affiliate**

*Brief description:*

A medical student, registrar in training, medical practitioner not fulfilling the criteria required for the Full or Fellow membership classification.

\$750 plus GST

## **Full Member**

*Brief description:*

A medical practitioner who does not fulfil the criteria required for Fellowship.

\$2000 plus GST

## **Fellow**

*Brief description:*

A medical practitioner who is deemed to have fulfilled the criteria for Fellowship, as assessed by the Membership Committee and approved by the Board.

\$2000 plus GST

## **Honorary**

*Brief description:*

A person who, in the opinion of the Board, has made an outstanding contribution to the College.

## **Life**

*Brief description:*

A person who, in the opinion of the Board, has made a significant contribution to the College.

## **Corporate Sponsor**

*Brief description:*

A firm, company or organisation which, in the opinion of the Board, is engaged in activities consistent with the objects of the College

# Applying for Membership

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Applications are taken via the online portal [www.cPCA.net.au](http://www.cPCA.net.au)

In order to apply for membership of the Cosmetic Physicians College of Australasia Ltd, the prescribed form must be completed in full. Should you have any problem with this, please do not hesitate to contact the administration office.

Your form must contain or be accompanied by:

- Your own signature
- A recent head & shoulders photograph (up to 200kb). The college will not use this photo in any publications. Do not go to any expense.
- A photocopy of your passport, including the photo
- Copy of your Curriculum Vitae
- Evidence of medical and surgical training or, if you are a student:
  - Confirmation of university enrolment
  - Copy of current medical registration/annual practising certificate
  - Written references, where contact details for verbal references have not been provided
  - Details of other cosmetic medicine association, society and college memberships
  - Copy of current medical indemnity fund membership, showing level of cover (Details will be checked by CPCA Membership Committee to ensure all our members have adequate cover.)
- Payment of \$150 application fee must accompany your application form. This will be applied to your membership fee, if application is successful.

The following payment options are available to you:

- Payment via credit card: We accept Visa or Master card. American Express is **not** accepted.
  - \* Via telephone 1300 552 127
  - Payment via direct credit to the college bank account, details are; BSB # 306-089, ACCT # 343-239-3, Account Name: Cosmetic Physicians College of Australasia Ltd.
  - \*You must fax or email a remittance advice to (08) 9300 2412 or [cPCA@cPCA.net.au](mailto:cPCA@cPCA.net.au)
- Cheque made payable to *Cosmetic Physicians College of Australasia Ltd.*

Tax invoices and or cash receipts will be sent on receipt of application fee. Once application has been accepted and membership entry level has been assessed by the MRC an applicable tax invoice will be issued for the balance of the membership fee (refer page 29).

## Applying/ Qualifying for **Full Membership**

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Registered medical practitioners who have had one year's full time-equivalent experience in a broad range of cosmetic medical practice may apply for Full Membership. Their experience and expertise will be of a level that the Membership Committee feels is less than that of a Fellow but worthy of recognition as a Full Member.

## Applying/ Qualifying for **Fellowship**

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Registered medical practitioners applying for Fellowship must have at least 5 years' full time-equivalent of cosmetic medical practice and/or successful completion of a fellowship-level training course in cosmetic medicine as approved by the Board. They must have wide-ranging experience and expertise in multiple modalities of cosmetic medicine to the satisfaction of the Membership Committee.