Preparing to be an Aesthetic Injector:  *Starting with the Right Foundation*

This book is provided by TITAN Aesthetic Recruiting as Course #1 in the Injector Preparation Course series. For additional information and employment opportunities as an Aesthetic Injector, please visit [www.titanaestheticrecruiting.com](http://www.titanaestheticrecruiting.com)
Congratulations - You’ve taken the first step!

The market for non-surgical aesthetic treatments is growing faster than ever before. Yet no Nursing, Nurse Practitioner or Physician Assistant program in the United States has a learning track or residency program for providers wishing to specialize in aesthetic medicine. This book can be your first step in understanding the U.S. medical aesthetic market and the role of non-physician aesthetic injectors in aesthetics. Before you decide to do a hands-on training class, read this book and learn your anatomy to start with the right foundation.

When purchasing this course, you also purchased access to the “Essentials” section of the Complete Face online learning app created by Australian Plastic Surgeons Steven Liew, M.B., B.S., F.R.A.C.S. and Peter Callan, M.B., B.S., F.R.A.C.S., MBA as well as skilled injector Emma Williams, BSc., MedSc., Aesthetic Nurse. Learning anatomy is the foundation of the clinical knowledge that you need in order to be safe as an injector, so be sure to take that learning to heart. Injecting is not just knowing what products to inject in what part of the body, but also knowing what to do when something goes wrong. And the better you know anatomy, the safer you will be as an injector. The Complete Face education includes a knowledge quiz that you can complete for each section. Be sure to complete these quizzes and print them off. You may be able to submit these to your state board for CME in most states. But you will need to submit them to TITAN in order to register for the next course in this series “Teaching your Brain to Inject”, so be sure to hang on to them!

The last page of this book is your “Aesthetic Injector Preparation Checklist”. You may print off this page and keep it on your desk to guide you in this journey. When you have completed the book, the action items on your check list and all quizzes supporting the “Essentials” section of the Complete Face app, then you are eligible to be screened by a TITAN Placement Director and to register for Course #2. So, get reading and have fun starting your journey!

Mary Beth Hagen, MBA
CEO/Founder,
TITAN Aesthetic Recruiting
Table of Contents

Chapter 1: U. S. Aesthetic Market History
Chapter 2: The Role of the Aesthetic Injector
Chapter 3: Understanding Injectable Products
Chapter 4: Preparing for a Career Transition
Chapter 5: Breaking into the Industry
Chapter 6: Insights into Compensation
Chapter 7: Support Resources for Injectors
Chapter 1:
A Brief Historical Overview of the Aesthetic Market in the United States
Overview

The non-surgical aesthetic industry is effectively finishing its 17th year since the FDA approval of BOTOX® Cosmetic in April 2002. Like the teenager that now has access to a driver’s license and a variety of new options, the industry is changing in terms of market and consumer dynamics. But it is important to understand the history of aesthetics in the United States to better understand where the industry is going in the future. This first chapter will help you understand the roots of non-surgical aesthetics in the United States and how changing dynamics have impacted the industry and who is injecting and owning aesthetic practices since BOTOX® Cosmetic was approved in 2002.

The History: From Physician Offices to Medspas

The Aesthetic industry had much of its “rootstock” created by physician husband and wife team Alastair and Jean Carruthers. These physicians noticed that the botulinum toxin A product that Dr. Jean was using to treat blepharospasm and strabismus in her ophthalmology patients also seemed to soften wrinkles in the glabellar area. Her husband was a dermatology researcher and they both worked with Allergan to develop and run clinical trials for the aesthetic use of the product that was approved by the FDA in 2002 as BOTOX® Cosmetic. The first indication was for glabellar lines and BOTOX® Cosmetic joined collagen as injectables that were available to aesthetic patients in the United States. https://carruthers-humphrey.com/how-about-botox/

At the start of the new millennium, the “core” group of physicians that worked with patients seeking cosmetic wrinkle reduction and dermal filler treatments was primarily Dermatologists, Plastic Surgeons, Facial Plastic Surgeons and Ophthalmologists. These four specialties became known as the Aesthetic “Core 4” and dominated the use of injectable aesthetic products like collagen, early hyaluronic acid fillers and BOTOX® Cosmetic. While many plastic surgeons utilized their nurses as injectors, the other specialties tended to do the injections themselves and the majority of treatments were conducted in physician offices, usually by physicians themselves.
But 10 years later, the market was seeing increased demand for non-surgical treatments and while the number of aesthetic products/treatments had increased, there was also an increased demand for therapeutic dermatology services. The wait time to see a dermatologist could often be 6-8 weeks or more and this coincided with a similar demand for aesthetic treatments as more products came to market and social media started to create growing awareness. This increased demand coupled with the Affordable Care Act legislation led to a rise in the number of “non-core” providers purchasing neurotoxins, dermal fillers and other aesthetic treatment products, often building businesses that would be known as Medspas.

Ideal Image, Sona Medspa, LaserAway and Skin Spirit were all early adopters of the medspa concept, though Ideal Image, Sona and LaserAway initially began as laser hair removal businesses. These early medical “spas” began taking aesthetic treatments out of the traditional physician offices and enhanced the patient experience with beautiful and inviting environments while focusing on cash-pay aesthetic treatments and skincare. They also became early adopters of national advertising, using radio, print and online marketing to develop awareness of their brands and their businesses.

This growth of the medspa business was concerning to core physician groups and a variety of states implemented legislative changes driven by groups of physicians looking to protect patient safety. Some states passed laws putting limits on who could inject while others implemented or worked to enforce good faith exam laws that required a physician, Nurse Practitioner or Physician Assistant to conduct a medical exam before treatments were provided. Additionally, guidelines or laws were developed or amended to ensure that physicians had oversight on medspa activity. Yet the medspas continued to flourish, and in many cases, were not only owned by “non-core” physicians but many times by RN or NP injectors themselves in states where they could legally do so.
As the economy recovered after the 2011-2012 recession, private equity investment activity began to infiltrate the dermatology space. 2015 and 2016 saw investments flow to Advanced Dermatology (Maitland, FL), Forefront Dermatology (Manitowoc, WI), West Dermatology (Orange Cty, CA) and Schweiger Dermatology (NYC, NY) as well as a host of smaller dermatology groups. This led to a host of acquisitions, smaller “roll up” groups buying private dermatology offices and consolidation of practices in anticipation of being purchased by one of the “big groups”. Practice owners began to focus on maximizing a practice’s value so when (or if) selling was an option, they were well positioned for maximum gain. These groups also represented a good “exit strategy” for older dermatologists looking to retire.

Here are some links to acquisition or investment stories of note:


https://omersprivatemarkets.com/omers-private-equity-acquires-forefront-dermatology

https://www.audaxprivateequity.com/casestudies/advanced-dermatology-cosmetic-surgery


The investment goal for a private equity firm investing in a business is that they expect to sell the investment several years later at a profit – so the P&L of these dermatology groups has become an item of scrutiny. And a high Cost of Goods (COGS) of aesthetic products like toxins or dermal fillers make the profitability of aesthetic procedures look low compared to the high margin for therapeutic dermatology. As practices are acquired by private equity groups, the focus on therapeutic procedures increases – and patients interested in aesthetic procedures may go elsewhere or have a very long wait for an appointment. This has led patients to explore other options for aesthetic treatments where they can get quicker appointment times or perhaps even a more luxurious environment for their treatments.
The post-recession period also provided one other interesting thing of note regarding the value of aesthetic treatments during complex financial time periods. Many plastic surgeons saw elective procedures like breast augmentations and face lifts significantly drop in terms of surgeries booked during the recession. But interestingly, patients seemed to replace expensive surgeries with temporary injectable treatments. The surgeons that fared the best during the recession were those that had a strong non-surgical side of their business and in many cases, a strong non-physician injector may have helped the practice balance out the loss of surgical revenue. And as the economy rebounded, non-physician providers started being more in demand than ever before.

**Beyond Faces: Body Contouring and New Patient Groups**

Social media awareness and new aesthetic treatments like body shaping, skin tightening, and fat removal increased consumer demand for aesthetic treatments beyond the face and awakened an entire new group of consumers that were interested in body contouring. National medspa chains invested in thousands of these machines and consumer advertising for aesthetic device treatments significantly increased, drawing in new patient groups who had never before considered aesthetic treatments.

Millennials started garnering attention from aesthetic product manufacturers as well as aesthetic practices. In the western United States in particular, some medspa chains began to focus on the millennial consumer almost exclusively and started touting ‘micro-treatments’ instead of the “full correction” mindset that many of the aesthetic manufacturers had talked about for years. The new mindset for aesthetic patients tended to lean toward “easy in and out” and a “less is more” philosophy. So as dermatology practices were being acquired and reducing the focus on cosmetic treatments, these new medspa businesses used social media and influencers to build a new consumer database of potential patients by highlighting body treatments and prevention services.
Here are some links that may provide additional background:


Social media also gave awareness to a broader range of consumers, including men. Intrigued by body contouring options, men started to investigate treatments in aesthetic practices. Male-only clinics popped up in some larger markets and manufacturers created male-targeted advertising campaigns to drive more men into aesthetic practices. No longer did everyone assume that aesthetic treatments were only something done by rich, middle-aged women. For all intents and purposes, aesthetic treatments had become part of the mainstream.

**The New Opportunity to Meet Demand**

With a focus on new treatments, patient experiences and growing social media awareness, the demand for aesthetic services is set to increase exponentially in the coming years. The American Society for Aesthetic Plastic Surgery has surveyed physicians for more than 15 years regarding surgical and non-surgical procedures and in 2017, actually changed the survey methodology they used to better focus on surgical opportunity since the non-surgical arena had significantly outpaced surgical treatments in # of procedures. But even with those changes, they still reported a 40%+ growth for toxins and fillers in the previous 5 years and that doesn’t appear to be slowing down.

Additionally, the consumer educational site, www.realself.com, was originally launched to create conversations between consumers or prospective patients and surgeons, yet in recent years has seen the focus shift to non-surgical treatment interest as well. A recent poll conducted by RealSelf reveals “more than one in three adults (37%) in the U.S. are considering at least one cosmetic treatment in the next 12 months, with significantly more considering nonsurgical procedures (34%) than surgical ones (24%).” https://blog.realself.com/2018/09/26/cosmetic-treatments-survey/

The rapid growth of the medical spa market even allowed for the birth of a new organization to support this group of medical practices - The American Medical Spa Association. This group has statistics listed on their website noting that there are more than 4200 medical spas in the United States with a growth trajectory of over 8% annually. This organization provides help and support with legal questions surrounding medical spa ownership, the various state laws that affect medical spas and online forums for members to exchange ideas, questions and issues they face as business owners. And of course, one of the top topics discussed is how to find non-physician injectors for their medical spa businesses. Many RNs, NPs and PAs that work in medical spas or own their own business find the services of this organization invaluable and regularly attend the Medical Spa Show or regional Bootcamps to network and learn. You can find out more information about AmSpa and membership in this organization by visiting their website at www.americanmedspa.org.
But most businesses - whether medspa or physician practice - find that running an aesthetic practice isn’t as easy as offering BOTOX® Cosmetic and waiting for the patients to flood in. Market research from manufacturers, social media sites and a host of other sources consistently shows that consumers are fearful of 2 things that prevent them from getting aesthetic treatments – cost and fear of not looking normal. Stories on the internet have flooded potential patients with stories, pictures and options, so it is possible that consumers are more confused than ever before and great injectors are needed to help educate patients.

**Why Isn’t It Easy?**

With a high demand for non-surgical services, why isn’t it easy for a medical provider or business owner to open a medical spa or aesthetic clinic and just meet this demand? There are 3 primary reasons that don’t have easy answers.

- Success in aesthetics is all about patient outcomes. And patient outcomes are dependent upon the skill of the injector. Yet there simply aren’t enough trained and qualified injectors to meet the demand. While there are residency and fellowship programs to train physicians to become dermatologists, surgeons and ophthalmologists, there are no NP, PA or RN training programs designed to prepare non-physician professionals to become aesthetic providers. That lack of professional training coupled with high demand for injectors is a conundrum for aesthetic businesses looking for good injectors.

- Patients hear about so many treatments but don’t know what or whom to believe. What works? How many treatments? How much will it cost? Will it REALLY work? Do I have to keep coming back? Is it permanent? Is it temporary? Is it safe? The best providers and clinics work hard to educate their patients, not sell to them. Keeping this focus can be hard with investors asking for a return on their investment. But safety and education must come first in aesthetic treatment consultations. These treatments are not like getting manicures or hair extensions – they are medical procedures that must be treated as such. Business owners, whether medical providers or businesspeople, and injectors must understand that there are state and national laws and guidelines that must be followed for patient safety.
Nothing is cheap in aesthetics. The products cost a lot. The devices and machines cost a lot. The providers and physicians cost a lot. The insurance and the advertising and the marketing cost a lot. So those costs are passed on to the patients and often the treatments and services cost a lot. Sometimes financing can help, but often it is simply helping prospective patients understand that they need to save for the treatments they want and cutting corners usually doesn’t provide a great patient outcome. So now go back to reason #1.

The Growing Demand for Aesthetic Injectors

Aesthetic clinics and medical spas can be successful, even with all of the challenges. The opportunity for continued growth with good and safe patient outcomes lies with having well-trained, competent and self-motivated injectors to provide injectable treatments.

There is no better time to invest in yourself for transitioning into the non-surgical aesthetic business. Demand is high and new products coming to market will continue to “normalize” aesthetic treatments so that most millennials will think of BOTOX just like coloring their hair. The only way to build a lasting, successful business is with happy patients who tell their friends. And they do that when they have great patient outcomes provided by a well-trained aesthetic injector.
Chapter 2: The Role of the Aesthetic Injector
What is an “Aesthetic Injector”? 

If you search on any of the online job posting sites, you can enter a variety of terms to describe someone who is not a physician but injects aesthetic products and provides aesthetic treatments and services. Cosmetic Injector. Cosmetic Nurse. Aesthetic Injector. Aesthetic Provider. Injection Specialist. Aesthetic Mid-level. All of these terms can be accurate. And none of them are all-encompassing in terms of what aesthetic providers do because the state laws and credentials vary so much.

For the purpose of this book, we will use the term “Non-Physician Aesthetic Injector” to refer to a Registered Nurse, Nurse Practitioner or Physician Assistant who works at an aesthetic medical clinic and has injecting toxins and dermal fillers as their primary job responsibility. But this book will also discuss the various activities and treatments performed by aesthetic professionals to be sure those looking to transition into this role understand the career more fully.

This section of the book will cover 4 topics:

- The role of the non-physician aesthetic injector and competencies required
- An overview of aesthetic professionals that can be part of the aesthetic team
- How state laws vary and affect who can and cannot inject
- Use of the term “Certified” and feedback from Aesthetic Injection professionals about how they view training, academic credentials
Competencies of the Non-Physician Aesthetic Injector

Whether a Registered Nurse, a Physician Assistant or a Nurse Practitioner, these professionals all undergo years of additional study and training to specialize in injecting neurotoxins, dermal fillers and other injectable products used to enhance and restore a patient’s satisfaction with how he or she sees themselves. But their foundational medical foundation is important when considering transitioning into a career in aesthetic injecting.

These 3 credentialed professionals (plus physicians) have a license that allows them to do transdermal injections and their academic training is important in establishing a foundation of knowledge of patient care and a variety of aspects in medicine. There is high value in being an established clinician and have experience treating patients in their chosen field before transitioning into aesthetic medicine. Let’s think about why this is important.

Aesthetic patients are having medical treatments done to different parts of their bodies and especially their face, not getting manicures or having their hair dyed. Botulinum toxin A is the most potent toxin in the world ([https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(05)72119-X/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(05)72119-X/fulltext)) and dermal fillers range from having a short duration to being permanent. Patients may have adverse events when the products are injected, and seizures or fainting during the procedures are not uncommon. Each product has a host of adverse events that can happen during and after injection of the product, so injector skill is not just in placing the product but in understanding what to do when an adverse event occurs.
The clinician injecting these products must have experience in treating patients or in working in a medical environment to be a safe aesthetic provider. Additionally, logic and organizational skills support the success of non-physician aesthetic injectors. Charting is very important in treating aesthetic patients because aesthetic patients usually return for repeat or follow up treatment several times a year. A detailed record of what was injected and where treatments were provided is critical to providing reproducible results that lead to patient satisfaction as well as providing a record of treatments that can be invaluable in handling any patient concerns. Other tasks may also require “left brain skills” since Injectors can be responsible for inventory management of injectable products, following up with patients after treatments to ensure the desired outcome was obtained and staying up to date on products in the field.

One other foundational clinical aspect that is pertinent for aesthetic injectors is having a strong knowledge of facial anatomy. The risk of hitting vessels or nerves during an injection procedure is high and knowing the anatomy and how to place product safely is the most important thing that a prospective injector can learn in preparing to enter the field.

But being a good clinician is not the only qualification for an RN, NP or PA to be successful in the field of aesthetics. Most great injectors also have many “right brain” traits as well. Professionals who choose to specialize in aesthetic medicine are usually excellent communicators who care deeply about educating patients on the products they use, the procedures done and the outcomes that can be expected. They don’t focus on telling a patient what is wrong and how to fix it, but instead will engage patients in discussions about what bothers them and their priorities for treatments.

During the aging process, the facial landmarks shift and change. Patients may have certain features on their faces that have been there since childhood – deep set eyes, small lips or a lack of a structured jawline, for example – and they are used to how these characteristics appear on their face. But a new line or sagging volume may be all they see when they look in the mirror, so the best injectors listen to their patients and note the concerns addressed by each patient.
And while communication and education are so important, having the ability to see artistically is also a hallmark of great aesthetic injectors. Understanding the role of shape, volume, symmetry, balance, proportion, placement and skin tone from an aesthetic view is inherent in great injectors. This artistic eye cannot be taught and professionals that don’t have this innate aptitude may become skilled at some aesthetic treatments but will probably never be outstanding professionals at the same level as those who have a natural aesthetic eye. Seeing where to place product is just as important as knowing what product to use and that is the hallmark of the true non-physician aesthetic injector.

No one knows how many non-physician aesthetic injectors there are in the United States. Aesthetic product manufacturers keep track of who buys their products rather than who injects toxins and fillers. There is no organization the encompasses RN, NP and PA injectors and while there are many groups that support this growing specialty, there are no academic training programs or residency tracks that have alumni records of who trains in aesthetics or who actually injects. That is an opportunity for the future, but for now, it is important to understand that most injectors are part of a full aesthetic team of professionals and how they help support aesthetic patient care and optimal, safe outcomes.

The Team of Aesthetic Professionals and their Roles

For a patient to get the most benefit from aesthetic treatments, injectable products may fall into a continuum of care for the patient. Let’s think about these aesthetic professional team members and how they support ongoing patient care.

Physicians

As discussed previously, aesthetic injectable products were first used primarily by physicians. Plastic Surgeons and Facial Plastic Surgeons were early adopters of collagen products to augment the surgical results that they could provide to patients after bovine collagen was first approved by the FDA in 1981.
Dermatologists also were active in investigating the use of fillers and toxins and along with ophthalmologists, these 4 specialties were the early advocates of aesthetic injectables.

But plastic surgeons probably played the biggest role in helping to create the specialty of the non-physician aesthetic injector. First with collagen dermal fillers and then with BOTOX® Cosmetic, surgeons asked their nurses to take over injecting patients, leaving the surgeons more time in surgery. Since patients needed to return several times a year to get re-treated, these plastic surgery nurses developed strong relationships with patients and when Restylane® was introduced to the U.S. market in the early months of 2004 (after FDA approval in December 2003), Medicis and Allergan saw their training sessions continue to be filled with more and more non-physician injector trainees.

These physician specialists are still the key players in treating patients in the aesthetic market and often will hire a variety of professionals to support clinical services provided to patients. For many RNs, NPs or PAs, the goal is to find one of these specialists to hire and train them as an injector. However, it is also rare to find a specialist willing to train a naïve injector candidate, so that is why strong, self-motivated preparation is integral to finding a job with one of the “Core 4” specialties.

In the medical spa world, many of these aesthetic businesses are owned by business professionals or even non-physician injectors themselves. These businesses may require a medical director that will oversee the activities of the aesthetic medical spa. Active medical directors who are well-trained in aesthetic services and see patients in the business are true assets to aesthetic practices. But there are also medspas that will simply hire a physician to act as a medical director to meet state laws. There is a lot of controversy on the role of a medical director and experts in this field may provide more insight. (https://www.byrdadatto.com/banter/123s-medical-spa-medical-director/)
Estheticians

According to www.estheticianEDU.org, an organization dedicated to supporting estheticians preparing for state licensure around the United States, “Estheticians are skincare specialists responsible for performing a variety of facial and body treatments designed to increase, improve, or maintain the health and appearance of the skin”.

The professionals are dedicated to keeping skin healthy and looking blemish-free. Facials, exfoliations, some laser therapy, microdermabrasion and even make up application may be services that are provided by estheticians. And since they can often notice skin conditions that may require attention by a medical professional, they often work hand in hand with dermatologists or other aesthetic medical providers.

Estheticians can be a strong partner for a non-physician aesthetic injector because they can help the patient “protect their investment” in injectables by keeping skin healthy with complementary treatments and by educating patients on medical grade skincare products that can slow the facial aging process or help protect the skin from environmental damage.

While requirements to become an esthetician do vary by state, applicants usually will enroll in a beauty or cosmetology school and go through around 600 hours of training. Those that complete the course will qualify to take the licensure exam in their state. [https://study.com/esthetician_education.html](https://study.com/esthetician_education.html) But state laws vary regarding what services can be performed by an esthetician, so be sure to check in your state for specifics.

Laser Techs

Laser Technicians are usually specialized providers of laser hair removal or other laser skincare or treatment devices. But the treatments they can perform and the training required vary widely from state to state. Some states require those who do laser hair removal to have a special certification denoting their training in this area. In other areas, estheticians will be trained by manufacturers of laser devices to use different lasers or conduct treatments. And in some states, no training at all is required. But those who perform laser services can be a great support for patients in an aesthetic clinic with the appropriate supervision.
Patient Coordinator or Care Consultant

In many plastic surgery offices, there is a role called the Patient Coordinator or Patient Care Coordinator. This role can be a huge support to physicians who may be uncomfortable discussing scheduling or finances with patients. Often a Patient Coordinator will meet with the patient to educate them on procedures or options before introducing them to the surgeon. This can facilitate a “girlfriend” type of conversation, with questions and concerns being discussed prior to the patient meeting with the physician. Then after the surgical consult, this team member will often discuss the cost of the procedure or help to find financing options for the patient. In some medical spas, this role is looked at as a Sales Consultant position and they will be responsible for “selling” services to the patients rather than the physician or non-physician aesthetic injector quoting prices for procedures.

Just remember that your entire team will support you in providing the best care for your patients. Working together as a team will increase retention, referrals and patient satisfaction for all of the services provided in an aesthetic continuum.
State Law Considerations for Injectors

**Who Can Inject?**

As you think about a career in aesthetic injecting, one of your first areas of research should be to identify whether you can inject aesthetic products in your state. This section is not intended as legal advice and should not be construed as such. Resources are provided to assist you in researching this topic, so this should help you get a start on identifying if your credentials allow you to inject in your state and the possible oversight that you will need.

In most states, you will be able to perform injections if you are an RN, NP or PA. However, there are several states that restrict Registered Nurses from injecting, so for example, if you are in Florida, injectors must be either NPs or PAs. Several states prohibit the delegation of aesthetic injectable procedures, so all aesthetic injectable procedures must be provided by physicians. In other states, the laws are murky or non-existent and you may find even those with no medical training performing injections under the delegation of a physician who is not on site. TITAN Aesthetic Recruiting only works with and recognizes non-physician injectors who are Registered Nurses, Nurse Practitioners or Physician Assistants and does not provide training or support for those with licenses that do not allow transdermal injections.

**Good Faith Exams**

Additionally, states are also adopting or enforcing “Good Faith Exam” laws. Since an RN license does not allow for diagnosing or prescribing treatment, patients must be examined by a physician, an NP or a PA to determine the diagnosis and direct the treatment that can then be administered by an RN.

The focus on a Good Faith Exam has created the need for more aesthetically-trained NPs and PAs in states like California and Texas and has also led to the rise of telemedicine businesses that focus on providing Good Faith Exams for clinics that do not typically have a physician, NP or PA at the location where an RN will perform services. AmSpa has a good article on this issue: [https://www.americanmedspa.org/blogpost/1633466/282824/Top-Medical-Spa-Legal-Issues](https://www.americanmedspa.org/blogpost/1633466/282824/Top-Medical-Spa-Legal-Issues)
If you are an RN, NP or PA and looking into opening your own medspa business after your aesthetic training, please consider joining the American Med Spa Association. AmSpa provides “legal, compliance, and business resources for medical spas and medical aesthetic practices” and the yearly membership is a small price to pay to hopefully avoid legal or compliance ramifications. Even established businesses find that they benefit by having support to aware of changing laws and regulations. Visit [www.amspa.org](http://www.amspa.org) for information.

**Independent Practice Authority for Nurse Practitioners**

With the growing need for more healthcare providers in rural areas, many states have given Nurse Practitioners (or Advanced Practice Nurses) the ability to practice independently. These Independent Practice states may allow Nurse Practitioners to purchase and run a clinic without the oversite of physician medical director. These laws are changing constantly (Illinois just adopted administrative rules for APRNs in June), so the American Association of Nurse Practitioner website can provide more insight on this topic: [https://www.aanp.org/advocacy/state/state-practice-environment](https://www.aanp.org/advocacy/state/state-practice-environment)
Aesthetic Injecting Certification

For highly trained and experienced non-physician aesthetic injectors, there is nothing more maddening than someone who attends a weekend training course credentialing themselves by saying they are “certified in toxins and fillers”. This section will cover the difference between a certificate of completion or attendance and Board Certification.

Many training courses are available throughout the United States. Some are ½ day and some are weeks long. Some provide CME/CEUs and some are product specific. Courses are offered by for-profit businesses and others are taught by highly experienced aesthetic injectors who want to provide good training. Some are provided by manufacturers and some are available at society meetings and conferences. But most offer certificates of completion or attendance.

Having one of these certificates is a piece of paper, NOT A CERTIFICATION. I cannot stress that highly enough and you need to understand the difference.

**CANS Board Certification**

For non-physician aesthetic injectors, the only Board-Certification is the Certified Aesthetic Nurse Specialist (CANS) certification. There is a rigorous exam that must be passed and a stringent list of requirements that RNs and NPs must fulfill before sitting for the exam. This exam is sponsored by the Plastic Surgical Nursing Certification Board and exams are given several times throughout the year.

The Nursing group ISPAN (International Society of Plastic and Aesthetic Nurses) was originally incorporated as the Plastic Surgery nursing group, ASPSN (American Society for Plastic and Surgical Nurses). With the rise of demand for aesthetic training and a need to add education for this growing specialty, the group updated their name in 2018 to incorporate aesthetics. A group of highly experienced Registered Nurses and Nurse Practitioners had joined together to write and create the certification exam and to develop the Board Certification that passage of the exam bestows. Unfortunately, Physician Assistants cannot sit for this exam or receive the certification at this time, but you can learn more about the CANS exam below. Certification must be renewed every three years.
CANS Eligibility

At the time a nurse applies to sit for the certification exam, applicants must:

- Be currently licensed as a Registered Nurse in the United States, its territories or Canada, holding a current full and unrestricted license.
- Have spent at least 1,000 practice hours within the core specialties during the last two (2) years.
- Have a minimum of two (2) years of nursing experience as a registered nurse within the four Core Specialties in collaboration or in a practice with a physician that is board Certified within a core specialty. This can be in a general staff, administrative, teaching, or research capacity for at least three (3) years prior to application.
- Be currently working in collaboration or in a practice with a physician that is Board Certified within one of the following specialties: Plastic/Aesthetic Surgery, Ophthalmology, Dermatology, or Facial Plastic Surgery (ENT).
- Have your supervising core physician, who holds a current full and unrestricted license, endorse your application.

For more information about the CANS exam and ISPAN, please visit www.ispan.org
Thoughts from Experienced Aesthetic Injectors

I think it is important to hear from some of the great injectors across the country about how they credential themselves to their patients. Prospective Injectors looking to enter the aesthetic profession need to understand how you can describe and market yourself professionally without implying a level of training that is not appropriate.

“I am a Certified Aesthetic Nurse Specialist. The exam isn’t easy and is not required for injectors, so it shouldn’t be a term that is just thrown around. Certification means that you have passed the CANS exam. Once you pass that test, then you can use the term “Certified”.”

“I wish that injectors would stop saying “certified” when they are not actually certified. It is so misleading, but the general public has NO clue.”

“I say that I’m an aesthetic injector. Not all of us are nurses (I’m a Physician Assistant), so that term covers everyone.”

“I’ve worked very hard for my master’s degree in Nursing and my Nurse Practitioner designation. I tell patients that I am a Nurse Practitioner that has a special interest and additional education in Aesthetic Procedures. Aesthetic Injector or Injector Practitioner is a very general term that covers many levels of training and education.”

“Aesthetic NP, Aesthetic RN, Aesthetic PA……we have all earned our respective degrees and additional specialization in aesthetics. So lumping everyone into an “aesthetic provider” category is not my preference. The public needs to know our degree first and then our specialty.”

“So many people in this field create their own titles when almost none are recognized by governing boards, making this field appear to not be credible or the providers professional. We really need to tout our education and training.”

So, learn all that you can as you further your training and become an “Aesthetic” NP, PA or RN. You will have an entire group of aesthetic professionals looking to support you as long as you put in the time and effort to truly educate yourself on your desired profession!
Chapter 3:

*Understanding the Injectable Products*
What are aesthetic injectable products?

When most consumers think of injectables in the aesthetic space, they most often will identify neurotoxins and dermal fillers first. But each year, there are more and more options for filling, lifting, relaxing, enhancing and softening the face….and other body parts now as well. Let’s first look at the areas that are most often identified for facial treatments as well as some new opportunities for addressing signs of aging in other parts of the body.

Where are injectables used in the face and head?

Upper Face

There are basically two types of lines that bother patients in the upper face. Many of the lines in the upper part of the face area caused by repetitive muscle movement and can appear when the face is animated or when the face is in repose. The lines that appear when smiling or looking concerned are called “dynamic lines” while the lines that are visible when the muscles are at rest are called “static lines”. Neurotoxins used in aesthetic treatments are purified proteins from the bacteria Clostridium Botulinum and are used to relax the muscles that cause lines and to prevent muscle activity that causes folds in the skin – or wrinkles. Neurotoxins are primarily used to treat the lines between the eyebrows, called glabellar lines, as well as lateral canthal lines (also known as crow’s feet) and forehead lines. Other uses may be to relax the muscles that cause wrinkles around the mouth or that pull the top lip up high during a smile, revealing the gum above the top row of teeth. Toxins may also be used to relax the muscles that pull down the corners of the mouth or to smooth out dimpling in the chin. Some people may also seek to have the bands in the neck, called platysmal bands, softened with neurotoxins so that the neck looks smoother and more youthful.
Mid and Lower Face

Many lines in the lower part of the face are caused from volume loss or from fat pads that shift downward with the aging process. Injectable filler products can soften lines but are most often used to restore volume that has been lost or has shifted during the aging process. An injector can use fillers to augment certain areas of the face or to balance out proportions or features of the face. The “descent and deflation” that happens in the aging process can be slowed or reversed by injecting volume back into areas of the face. But there are different durations, different areas of placement and different ways that the fillers interact with the patient’s natural tissue, so understanding which fillers to use where in the face is a very important part of learning to inject dermal fillers.

While the aesthetic use of dermal fillers in the United States started with different forms of collagen, there is currently no aesthetic collagen-only product available in the market. The several types of dermal fillers that are routinely used in the United States are as follows:

- **Hyaluronic Acid fillers** – Hyaluronic Acid occurs naturally as a component of the skin and can be thought of as the body’s natural sponge. HA is found in skin, in joints and in eyeballs among other places in the body. This natural sugar molecule’s job is to hold water in the tissue. When we are born, we have a lot of HA in our skin and it is added and replaced in tissue about every three days. For an example of high-density HA in skin, think of a baby’s plump cheeks. But as we age, our body loses the ability to replace HA as quickly in our cells and so we end up losing more HA than we create, leading to volume loss, especially in the face. But scientists found a way to stabilize the HA that is injected as dermal fillers and that allows patients to replace lost volume and delay the signs of aging in some cases. The FDA-approved versions of HA fillers currently available for purchase in the US include the Juvederm® family of fillers, the Restylane® family of fillers, Belotero® and Revanesse Versa®. The Teosyal® brand of fillers has had some versions approved in the U.S, but currently does not have a distribution partner so is not available for purchase.
• **Calcium Hydroxylapatite dermal filler** – This filler is created by suspending calcium hydroxylapatite microspheres of 25–45 microns diameter in a gel carrier of carboxymethylcellulose. In addition to aesthetic indications in the face and in the back of hands, it also has medical indications for nipple projection for nipple areolar reconstruction, urinary incontinence, vesicoureteral reflux, vocal cord augmentation, and use as a radiographic tissue marker. 
  
  [https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2544361/](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2544361/) This product is available in the United States and sold as Radiesse®

• **Poly-L-lactic acid (PLLA) dermal filler** – this filler was originally approved in the United States to treat lipoatrophy associated with HIV and received approval for aesthetic use in 2009. This synthetic polymer stimulates an inflammatory response when injected into tissue, leading to collagen production. Multiple treatments are usually needed to achieve the desired effect. 
  
  [https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3865975/](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3865975/) This product is sold in the United States as Sculptra® and while has aesthetic indications only for the face, is often used off-label to augment various parts of the body.

• **Other products and categories**
  
  o **PMMA microspheres** – this dermal filler is comprised of 80 percent purified bovine collagen with 20 percent polymethylmethacrylate (PMMA) microspheres, and lidocaine. After injection, the body’s immune system is stimulated to create scar-tissue-like collagen around the microspheres. This is considered a semi-permanent filler. Originally, marketed in the United States as Artefill, the product named was changed to Bellafill in 2014 and received an indication for acne scars in 2015. 
  

  o **PDO (Polydioxanone) threads and polyglycolide/l-lactide threads**– these absorbable suture suspensions are designed for short term lifting of the mid and lower face. With many companies vying for attention in this newly crowded market, Sinclair Pharma’s Silhouette threads (polyglycolide/l-lactide) may have more clinical data supporting their use. 
  
Submental (Chin) Area

For many years, non-surgical aesthetic treatments stopped at the chin, to the chagrin of people who hated their “double chin”. But in 2015, the FDA approved deoxycholic acid for injection “for improvement in the appearance of moderate to severe submental fullness”. Known as Kybella®, this product offered the first new injectable category of treatments in many years. In addition to using Kybella to remove fat under the chin, many injectors also use the product off-label for treatment of bra-fat areas, love handles and fat around knees.

This section is only an overview of the types of injectable products used in the United States and is not meant as product training. For in-depth product training and education, please register for TITAN Course #2 “Teaching your Brain to Inject” upon completion of this course.

Aesthetic Injectable Product Manufacturers

There are many companies that sell and support their products in the aesthetic space. The companies that have a prominent research and development or sales activities in injectables are listed below to assist you in gaining familiarity with the companies that may support your work as a non-physician aesthetic injector.

Allergan

Allergan manufactures and sells a wide variety of injectable products and is the largest of the injectable companies. Their injectable product lines include:

- BOTOX® Cosmetic
- The Juvederm® Family of Fillers including Juvederm Ultra and Ultra Plus, Voluma, Vollure and Volbella
- Kybella®

Allergan also has sales forces that sell CoolSculpting®, SkinMedica® Skincare products, Latisse®, DermalInfusion® and Allergan breast implants. Allergan is based in Irvine, CA.
**Galderma**

Galderma owns and manufactures a host of dermatologic and dermal filler products and also licenses a neurotoxin from Ipsen. Their product lines include:

- The Restylane® Family of Fillers including Restylane, Restylane Silk, Restylane Lyft, Restylane Refyne and Defyne
- Dysport® for aesthetic use
- Sculptra®

Another interesting note is that Galderma also owns the blockbuster consumer acne brand Proactiv®. Galderma is based in Ft. Worth, TX.

**Merz**

Merz USA got their start in the United States when this privately held German company purchased BioForm and acquired Radiesse®. While the smallest of the aesthetic injectable companies in the US, they do have several complementary businesses that support the overall aesthetic market. Their injectable products include:

- Radiesse® dermal filler
- Belotero® dermal filler
- Xeomin® dermal filler

Merz made an impact with marketing when they signed supermodel Christie Brinkley to represent their brands. Merz also owns Ultherapy®, Cellfina®, Asclera® for sclerotherapy and the NeoCutis® medical grade skincare line. Merz USA is based in Raleigh, NC.
**Prolenium US**

This Canadian-based company markets Revanesse® Versa™ in the United States through an independent contractor sales force.

**Evolus**

Evolus is a new injectable company which recently launched the 4th botulinumtoxinA product approved by the FDA. Jeuveau® was originally developed by the Korean company, DaeWong, and became available in the United States in May 2019.

**Revance**

Revance originally received attention for their research with a topical form of botulinumtoxin. Now in trials as an injection, this new molecular structure incorporates peptides and is expected to provide additional duration in FDA clinical trials. Look for this product to enter the market in 2020 with distinct differences from the non-peptide toxins currently available.

**Sinclair Pharma**

One of the only thread companies to have a US sales force presence, Sinclair Pharma sales team trains and supports the Silhouette Instalift® absorbable suture suspension threads.
Working with the Manufacturers

When you have found a position as an injector in an aesthetic clinic, the manufacturer sales reps can provide strong support for your practice and patients. There are areas where you will find helpful support, so be sure to seek out sales representatives for the products chosen for your aesthetic clinic.

Training

Most manufacturers will provide training courses that cover how to safely inject their aesthetic products. But know that each sales rep usually gets a limited amount of training dollars to spend each quarter and it is only good business for them to choose to place those trainings in clinics that are interested in purchasing product. If you are starting out as a new injector in a small or new clinic, it will be harder to get training support than if you are joining a well-established practice.

Also know that training provided by the manufacturer should always be “on label” in keeping with the indications for use as approved by the FDA. If they will not provide training for injecting fillers into temples or injecting toxins in the lower face, it is not because they are being stubborn but because they legally cannot support training in areas not having FDA approved indications. Ask them to show you their company websites where they offer online training or injection videos. These can be very helpful as you start to learn injection techniques.

Sales representatives will support you when they know you truly want the training to learn more about their products. Most of the manufacturers contract with physician and non-physician aesthetic injectors to provide training on their products since reps cannot inject. These trainers can be great resources if you have questions in the future and many are on Instagram or Facebook with the opportunity to learn from their posts. You might find that a trainer that contracts with a manufacturer also has their own training company. If so, you might hire that person on your own to provide additional training after or before a company-sponsored training event.
Samples

Everyone wants samples of injectable products. You. Your clinic staff. Your friends. Your medical director. Samples are in high demand and are a limited resource, so please be respectful when asking your sales rep to provide samples to you. Do not sell toxin samples (this is prohibited by the PDMA act of 1987) and do use samples for training or for introducing patients to new products or treatment areas or to help your staff understand the treatments you provide. But please remember they are a resource to help you and not a “right”.

Business Development Support

Many representatives in the aesthetic industry are not called “sales reps”. They are Business Development Managers or Account Managers or Aesthetic Experience Managers. Use them to learn more about how to manage your aesthetic business continuum. The manufacturer representatives have a wealth of information at their fingertips about the aesthetic space, marketing ideas, promotional support and product information. These representatives succeed when you succeed, so use their resources to further your own product knowledge, to help educate your patients and to be more efficient in your practice.

Many injectable companies have patient and customer loyalty programs that can save patients money and save money for your aesthetic clinic. Tap into these resources and you will find that they help with patient retention and education. These loyalty programs can also help with patient referrals and can encourage your happy patients to refer friends to you.

Market Dynamics

You can also learn a lot about your particular market or competitors in the area from your sales reps. A simple question like “What are you seeing in the area this month?” can garner a great deal of information, from social media campaigns to competitive offers to new businesses opening or injectors changing practices. Additionally, the manufacturers usually have strong consumer market research teams that have information on national trends and may be able to update you on market nuances.
Listen to their selling or promotional messages and pay attention to when they have product promotions. You’ll often find that existing products will have promotional programs when a new product is getting ready to launch. These programs can help you learn how you want to use your own promotional resources and to identify which products lead to return on investment when you also create promotional activity.

Whatever products you choose to use, make sure they are FDA approved or cleared and that you are purchasing directly from the manufacturer or approved distribution channels. Also make sure that you have the knowledge necessary to use products safely and to give patients the outcomes they want and expect. You don’t have to always have the “latest and greatest” products if you aren’t sure of the efficacy and safety of a treatment, so always keep your own education top of mind and remember that your product sales representatives can help you do that!
Chapter 4: Preparing for a Career Transition
Decide if this is the Right Career for YOU

“How do I get started as an aesthetic injector?” Anyone in the field of aesthetic medicine in any fashion hears this question regularly. There is a lot of information available in the aesthetic field, but almost 2 decades after BOTOX® Cosmetic was approved for aesthetic uses, getting a position as a new aesthetic injector still seems to be a matter of pure luck.

Many clinicians think that the first step to becoming an injector is to attend a training course, but this may be a waste of money if you train before you have a job and the daily opportunity to reinforce and practice your new skills. Some courses are incredibly expensive, and others include so much material that there is no way you can retain all of the information. Preparing for a career transition should start with ensuring that you understand the job functions of an Aesthetic Injector and all that goes with it.

Misperceptions about the Aesthetic Injecting Career

Aesthetic Injecting truly is a unique specialty and involves many clinical and business skills that are not part of other RN, NP or PA positions. Consider an internist that worked in primary care for 10 years and then decided that he or she wanted to transition into cardiology. That physician would not just start sending resumes to the local cardiology practices, asking for a job because cardiology was a passion and they were burnt out on primary care. The physician would apply to residency and even fellowship programs to re-train in cardiology before being considered for a position in the new specialty.

This is similar to how any NP, RN or PA must re-train in order to be valuable to an aesthetic practice as an injector. Aesthetic professionals need to have strong clinical skills, especially with anatomy, but also need to understand key business principles since the aesthetic business is all cash-pay and not covered by insurance. An injector must build a patient base, provide satisfactory results that meet patient expectations and ensure patient retention so that your repeat patients refer friends. Just because you can put in an IV does not mean you have the skills to be a good injector. Liking beauty magazines does not mean you have the skills to inject, the knowledge to educate patients or ability to handle adverse events.
You must truly understand the job and work hard to get hired as an Aesthetic RN, NP or PA. Here are several steps to get you started.

1. **Get injected or at least go for a consultation**

It is surprising how many people say they want to be an injector but have never set foot in an aesthetic practice. Before you decide on this career path, you will want to get injected or at least have an aesthetic consultation or watch aesthetic procedures be performed. If you feel you aren’t ready for an injectable treatment but are interested in other care for your skin, then at least have a consultation so you see a professional in action and can ask questions. But be sure those questions are about the product or treatment and please don’t hound the injector about how to get a job injecting. The most valuable asset that an injector has is their time and their knowledge, so please be respectful.

2. **Read everything you can find on aesthetics**

While there are a lot of good videos online, much of your background learning will be reading about anatomy, the aesthetic market, the products and the research in this industry. There are many valuable texts that you can buy and use as resources and you may want to have these available for future reference throughout your injecting career. Some that come highly recommended are:
3. **Review and Update your Online Profiles**

In this digital age, the first thing that recruiters and employers will do when you contact them is to look you up online. Many employers (and TITAN Aesthetic Recruiting) will ask you to submit a social media profile link in your employment application. LinkedIn, Facebook, Instagram – they are now your digital “calling card” and the image you project online will make an impression to prospective employers.
Be sure to always have your Linked In profile updated and ensure that your job history corresponds with your resume or CV. You will want to have a current, professional picture on your Linked In page as well as any aesthetic training/experience that you have participated in during your transition time. One very important tip is to provide personal contact information on Linked In so that recruiters and potential employers have a way to contact you beyond reaching out to your current employer. You can simply go to your own profile and then click on “Contact Info”. Enter your personal email and cell phone number to make it easy for people to find and communicate with you.

With other social media sites, you will want to ensure that there is nothing visible on those sites that might cause concern with a prospective employer. It is not only new grads that need to be careful about the content of social media sites these days!

It is also a good idea to Google yourself to see what appears as the result of a search. Any negative information that might show up in an online search might color the impression of you that an employer is developing. It also is a good idea to have someone else do an online search with your name as well. Sometimes different information will appear. If you see something that you don’t like, it is possible that prospective employers will see this as well.

4. **Watch YouTube, Instagram and Facebook videos on injecting**

While this may seem like a “no brainer” suggestion, it can also be a bit tricky to find videos created by talented and qualified injectors. Keep in mind that just like everything else on the internet, there are good videos and there are very bad (even scary) videos out there. If you find a video that seems helpful, research the injector to learn their credentials. Obviously, you don’t want to learn from the girl that injects herself in the mirror in the bathroom!

Many of the trainers and training companies listed on the TITAN Aesthetic Recruiting website have videos available to watch on YouTube. Additionally, you can research the agendas to identify presenters at aesthetic conferences who are speaking on topics of interest. Then search YouTube (or even Google) to find videos or information from reputable physicians or injectors.
Instagram and Facebook can also offer a wide array of injection video clips. Again, remember that there is just as much bad injecting online (or perhaps even more) than excellent examples, so always check the credentials of the injectors that you like to watch. You can also look for online reviews of patients who visit the injectors that you have found. If you can’t find reviews or credentials about someone, be very wary of what they are trying to teach or represent in their online videos or posts.

5. **Take online courses**

Often unrestricted educational grants are provided to organizations like PALETTE Resources (www.paletteresources.com) and AestheticCare (www.aestheticcare.org) to provide online courses covering aesthetic injectable topics. Earning CME for aesthetic education is a great way to show a prospective employer that you are serious about injecting and can help you develop a strong foundation of knowledge.

Other online resources to investigate are medical sites that also provide online CME for aesthetic topics:

- Paradigm Medical Communications ([https://ce.paradigmmc.com/s/catalog](https://ce.paradigmmc.com/s/catalog))

Be sure to keep track of all of the courses that complete as you are preparing for your career transition. The more that you can show an employer that you are self-motivated and willing to invest in yourself, the more willing they will be to take a chance on hiring an inexperienced injector.
Chapter 5: 

Breaking into the Industry
Learn Your Local Aesthetic Market

You’ve spent months reading, studying anatomy and watching injection videos. You understand the aesthetic anatomy vocabulary and know about beauty ratios and golden triangles (and if you don’t, go look them up!). You can identify a tear trough, a nasolabial fold and an ogee curve. Unless you are planning to relocate and look for an aesthetic injector position in a new place, you now need to start learning about your local aesthetic market.

Do your research

Make a list of all of the clinics and practices that offer aesthetic injectable products in your area. Google “BOTOX® Cosmetic near me”, “Restylane® clinics” or “Belotero® offers” to see who advertises aesthetic products where you live. You can also visit the “Find a Specialist” sections of the product websites to find clinics that offer injectable products. But before you can think about where you would like to work, you need to know who might be hiring. Don’t hesitate to also talk to friends and acquaintances about treatments and if they get injected. The first step in transitioning your career is knowing the market and what is available.
Create a network

Once you have your list of clinics, go onto their websites and register for their newsletters or email list. Then you will learn about specials, new products and even open houses and patient events. Attending these events can be another way to learn more about the products and procedures as well as a chance to get to know industry professionals in your area. Introduce yourself to injectors, physicians and manufacturer reps and let them know you are giving yourself an “internship” in aesthetics so that you can be ready when you want to transition your career.

Make friends in the industry

If you have friends or colleagues who can introduce you to professionals in the aesthetic industry, you will have a great way to ask questions and learn. I’m not encouraging you to be a stalker(!), but definitely use your connections to network if you can. You might find an injector that may allow you to shadow them in clinic one day or might be willing to share their experience getting into the industry. Be sure to show your thanks for any support and help they give you with a gift or show of appreciation because anyone who helps you is effectively helping to create more competition for themselves! But you’ll find that many injectors are true educators and will be very willing to help you learn.

Get a part-time job at an aesthetic clinic

I know, I know…. we are all SO busy! But working at the reception desk of a medspa or clinic even one day a week can really help you learn the terminology, the products, the patient mindset and more about the industry. You may also have the chance to meet industry reps who might tell you about clinics looking for injectors. If you can go to an interview and tell the physician or business owner that you prepared for a career as an injector by seeing the business and patients firsthand, you will WOW them in the interview. And who knows, maybe you are so good at bringing patients to the clinic that they will NEED another injector – and you’ll be there waiting to start training!
Broaden Your Learning Opportunities

Go to conferences

This might seem like a waste of money if you don’t have a job as an injector, but the product and procedure knowledge that you will gain in just a few days will be valuable. National meetings that focus on non-physician injectors or extenders can be a great way to learn and to network while you are contemplating a career in aesthetic injecting. The Aesthetic Extender Symposium (www.aestheticextendersymposium.com), the ISPAN Meeting (www.ispan.org) and the Cosmetic Boot Camp – Extender meeting (www.cosmeticbootcamp.com) are all high quality meetings that provide CME and new information on non-surgical aesthetic products and procedures. Plus, you will get a chance to talk to many other non-physician injectors about their careers, how they got started and the best learning opportunities.

Find a Mentor

If you attend a national conference, it is likely that you will meet someone that is currently a non-physician aesthetic injector that you connect with in talking about injecting. Keep in touch with that person and use them as a mentor from afar if they do not live close to you. Sometimes just having someone to speak with about articles you read, techniques you learn or ideas you hear can really help you think about how you can incorporate those concepts into your patient care.

If you do the steps above and in the previous chapter, you’ll be educated and prepared to take advantage of opportunities when they arise. A career as an aesthetic injector is hard work and long hours, so do the work now to show prospective employers that you have what it takes. And of course, call TITAN Aesthetic Recruiting to help you find the right place to start your new career.
Chapter 6:

*Insights into Costs and Compensation*
What Will you Spend and What Should You Get Paid?

Probably two of the most asked questions that we hear at TITAN Aesthetic Recruiting are “How much will it cost to get trained?” or “How much will I be paid as an injector?” There is no easy answer to either of those questions. Training costs will vary depending on the course(s) you choose and how much training you have. In terms of pay, it may surprise you that physicians often aren’t sure about how to pay their Aesthetic RN, NP or PA either. This section will focus on helping you think about the value of your skills to a physician or business owner as you are learning and training as well as the costs involved in running a medical practice.

There are several things to think about when you are trying to identify appropriate compensation as a new injector. Here are several tips to guide your thought process:

1. You should commit to paying for your foundational “hands-on” training when you are speaking to an employer about hiring you as a naïve injector. Most physicians are very hesitant to hire an inexperienced injector. If you commit to paying for your own foundational training, that will tell the physician or clinic owner that you “have skin in the game” and are willing to invest in yourself. If you invest time and money in your career, then they may be more willing to take a chance on you.

2. Your Aesthetic Training will cost about $4000-$5000 but that is nothing compared to what it would cost if there was a Residency program. A TITAN candidate who takes both Injector Preparation Courses as well as hands on training from a TITAN Training Network Company will pay approximately the following:
   a. TITAN Injector Preparation Course #1 (That you have already purchased) -$750
   b. TITAN Injector Preparation Course #2 (Teaching your Brain to Inject) - $999
   c. Hands-on Training – Approximately $2000-$3000 for 1-2 days
   d. Total cost - $3749-$4749
3. Your physician or medical director or business owner will need to put in a lot of hours training you to inject and overseeing your work in the first 6 months. All TITAN candidates are encouraged to think of the first six months at their new position as an internship or residency. You might not make much money during this trial/learning period, but if you have the chance to work with an experienced physician, soak up every bit of information from every person in the clinic. Be loyal and grateful if you find someone to help you achieve your dream.

4. You will probably have to work weekends or evenings if you want to build your patient base. While you won’t have to work nights or 12 hours shifts, new injectors often find that they can fill their schedules faster if they work evenings or Saturdays. Remember, these treatments are cash pay and the patients who can afford to get treated usually have jobs that they work at during the day. So being available in the evenings or on a weekend may make it easier for them to be treated.

5. Assume that you will need to be a perpetual student in order to be a good injector. Do you know what they call an injector that has stopped learning? A “former” injector. But seriously, the industry is constantly changing with new products, services and techniques, so you need to be committed to continual ongoing education.

6. If you want compensation of around $100,000, you need to bring in about $400,000 in treatments or services. If your patient pays $500 for a treatment, half of that goes to the cost of goods. Then your employer has to pay expenses, overhead, support staff, insurance, etc. So keep in mind the 4X figure when you are thinking about compensation.

7. If you are a Naïve or Novice Injector, you are NOT going to make as much money as you made at your previous position. Unlike reimbursed or therapeutic medicine, you won’t have a full schedule of patients when you start. You will have to build your patient base and until you are seeing 6-10 patients/day, your employer will probably lose money having you as an employee. So, if you are a Physician Assistant making $150,000/year working four days a week, know that you will NOT earn that as a new injector.
What do Aesthetic Injectors Earn?

This was a question that was raised often in the first two years after TITAN Aesthetic Recruiting was founded. That led to the development of the TITAN Aesthetic Non-Physician Injector Compensation survey that was first fielded in 2018 to learn more about injector compensation.

Survey Parameters

In the summer of 2018, more than 200 providers clicked into the survey link with 88 respondents completing the survey. Only Nurse Practitioners, Physician Assistants and Registered Nurses were eligible to complete the survey. To weed out those that were not focused on injecting, only providers spending at least 50% of their time treating aesthetic patients and injecting at least 40% of the time were included in the data analysis. Almost half of the respondents worked in facilities owned by physicians and 23% owned their own business. The tenure of injectors completing the survey ranged from 1 to 20 years with 68% of the respondents working full time. The survey was fielded by Gordian Solutions Group (www.gsginsights.com)

Survey Results

While providers reported a range of types of compensation structures, the average total compensation (hourly/salary plus commission or bonus) was $158,680. Injectors with 1-2 years of experience made slightly more than $90,000 on average while the providers with more than 6 years of experience averaged around $177,000. The data showed that compensation for NP and PA aesthetic providers averaged close to $190,000 while RN injectors realized total compensation of around $130,000. Of interest, injectors working in Dermatology or medspa offices averaged about $142,000 while total compensation for injectors in Plastic Surgery practices was significantly higher, averaging $177,000. There also were regional variations throughout the country and tenure in a specific practice also led to higher compensation.
Of Interest

Respondents with more than 3 years of experience identified that having access to a commission or bonus structure was more important than a high salary or hourly wage. It is important to note that some states consider paying commission on aesthetic services to be “fee splitting”, so it is important to inquire how your state looks at commission and bonus in regard to this issue.

When asked if providers had ever left a job due to inadequate compensation, 40% responded “yes” and noted that they would have had to have received an increase in compensation of 16% or more to have stayed. Respondents indicated that the top 3 reasons for considering a switch to another employer are better work/life balance, better bonus/commission potential and more opportunities for training and professional development.

What does this mean to you?

The TITAN Compensation survey will be conducted each year and it is hopeful that this database will become a good reference source for injectors and employers. But remember that your compensation is based solely on your individual situation and any data from any source is simply a guide to help determine what is right for you and your employer. Learn to be comfortable talking about compensation and don’t be shy to ask if you don’t understand how you are paid. It will almost always be better for you and for your employer to work out compensation differences than to try to re-establish yourself at a new clinic. You won’t make a lot of money during the first year or two, but there can be high financial reward for competent and safe injectors.
What Comes Next?

Congratulations!

You’ve finished this book, “Preparing to be an Aesthetic Injector” and hopefully you have also been working on completing the “Essentials” section of the Complete Face online learning app. The very last page of this book is your Injector Preparation Checklist with items for you to complete as part of your educational journey.

Once you have completed this book, your checklist and your Complete Face quizzes, you are now eligible to complete the TITAN Aesthetic Screening® with a TITAN Placement Director. Please contact TITAN by sending an email with your completed Check list and Complete Face quizzes to info@titanaesthetic.com and ask to schedule your screening.

This screening will allow the team at TITAN to know about your background, your work history and your interest in aesthetics so we can better present you to prospective employers. It will also screen you for the “aesthetic eye” so you have a good understanding of what is natural and innate for you aesthetically.

Once you have completed this screening, you are eligible to register for the TITAN Injector Preparation Course #2, taught by amazing Aesthetic Nurse Practitioner and Injection Specialist Kevin Harrington, MSN, APRN, FNP-C. This course, “Teaching your Brain to Inject”, will introduce you to key topics that are the foundation of being a competent Aesthetic injector and will prepare you for your hands-on training once you have a job.

You can register HERE For the next course or go to https://titanaestheticrecruiting.com/product/teaching-your-brain-to-inject/

Thank you for becoming a TITAN!
Chapter 7:

Support Resources for Aesthetic Injectors
There are many organizations, websites, societies and just general data sources that can help provide additional information as you pursue a career as an aesthetic injector. See below for more resources to support your goals!

Websites to keep handy

**Professional Organizations:**

- [https://dermnppa.org/](https://dermnppa.org/) - Dermatology Education Foundation for NPs and PAs
- [https://www.aanp.org/](https://www.aanp.org/) - American Association of Nurse Practitioners
- [https://www.dnanurse.org/](https://www.dnanurse.org/) - Dermatology Nurses Association

**Aesthetic Organizations:**


**Society Meetings and Conferences**

- [https://www.aestheticextendersymposium.com/](https://www.aestheticextendersymposium.com/) - Aesthetic Extender Symposium (AES)
- [http://ispan.org/meeting/](http://ispan.org/meeting/) - International Society of Plastic and Aesthetic Nurses Meeting (ISPN)
- [https://www.americanmedspa.org/page/MedicalSpaShow](https://www.americanmedspa.org/page/MedicalSpaShow) (AmSpa)
Business and Legal Support

https://www.americanmedspa.org/default.aspx - American Medspa Association

https://www.bsmconsulting.com/ - BSM Consulting

https://shorrsolutions.com/ - Shorr Solutions Consulting

https://mintaesthetics.com/ - Mint Aesthetics Consulting

Aesthetic Training

For the most current list of trainers within the TITAN Training Network, please check the TITAN Website: https://titanaestheticrecruiting.com/titan-training-network-foundational-training/

https://www.completeface.net/ - Complete Face online Learning App

Industry Data and Organizations

https://www.plasticsurgery.org/ - American Society of Plastic Surgeons (ASPS)

https://www.surgery.org/ - American Society of Aesthetic Plastic Surgeons (ASAPS)


https://www.aad.org/ - American Academy of Dermatology (AAD)

https://www.asds.net/ - American Society for Derm Surgery (AS/DS)

https://www.a4m.com/ - American Academy of Anti-Aging Medicine (A4M)
Injector Preparation Checklist

1. ☐ Get injected or participate in an aesthetic consultation

2. ☐ Create a network

3. ☐ Make friends in the industry

4. ☐ Get a part-time job at an aesthetic clinic or go to events

5. ☐ Subscribe to and read Modern Aesthetics, PRIME and Medesthetics Magazines

6. ☐ Learn your anatomy

7. ☐ Go to Conferences

8. ☐ Follow Instagram, Linked In and Facebook pages of reputable injectors

9. ☐ Take Online courses on aesthetic medicine topics

10. ☐ Find a mentor and develop your knowledge base