

29<sup>th</sup> May, 2015

Dear Sir/Madam

### **Consultation Paper - Cosmetic Medical and Surgical Procedures**

On March 17<sup>th</sup> a consultation paper was released regarding cosmetic medical and surgical procedures and I thank you for the opportunity to respond.

[REDACTED]

Throughout my career I have had extensive experience with minor non-surgical treatments. I have found the systems in place at [REDACTED] surpasses the safety of any of my previous workplaces, and this was a primary reason for my choice in making the investment with [REDACTED]. The reason I have found this important, is that as a Nurse, I have always been driven to look out for the best interest for my patients/clients and wanted to be involved with a company that truly looked at the injectable service from a quality and safety perspective for the protection of the client, and the Nurse administering the treatment.

The use of telemedicine in our business is one that I have absolute confidence in and do not believe it is a method that reduces the outcome for the client. In fact, the Doctors we use, work solely for our business and as such the client gets the undivided attention of two qualified professionals who reinforce client care principals together. The comprehensive medical history I get from each of my clients immediately flags anything I need to beware of and it is reassuring that I can contact a Doctor within minutes if I have a concern. All possible risks and side effects, and aftercare is covered and the client is sent home with a hard copy of this. Our clients are phoned the day after their procedure and return to our clinics two weeks after treatment for review.

When I compare the safety measures and ease of access to Doctors within [REDACTED] to the experiences I have had working in other medical institutions, I believe that our industry (at least where I work) is far superior. As a Registered Nurse in a hospital environment it is an accepted part of medicine and in fact common practice to provide training and advice to inexperienced medical residents, who often rely on advice and experience from Registered Nurses regarding the administering of drugs.

In the vast majority of medical environments, the Doctor provides the big picture patient treatment plan and the Registered Nurse is responsible for administering much of that plan, as well as the on-going care. This is no difference at [REDACTED] whereby under the direct supervision of a Doctor, the Registered Nurse takes responsibility for taking care and following up with the client.

Changes to our current practice by restricting the use of telemedicine would have a significant negative impact on our business. Cosmetic injectables account for a large portion of the revenue earned within the business and we have developed a strong database of loyal and satisfied clients. Should the business no longer be able to provide these services in the manner it currently does, then we would have to look at the viability of the business and whether it can sustain a) further

costs to facilitate an injectable service that will seriously reduce profitability or b) loss of revenue by stopping this service for customer's altogether. The impact of us closing our businesses would result in over twenty employees across two clinics becoming unemployed.

On a personal level the closure of each individual clinic would result in personal financial losses of approximately one million dollars (\$1,000,000) per clinic through the loss of business value, ongoing lease payments and redundancy payments. As an owner of two businesses I was planning to expand this in the future, which would provide significant investment and employment opportunities within the local communities. Any future investment will remain on hold until this issue is resolved and should I not be able to provide cosmetic injectables via telemedicine within the clinics then any further business ventures would not proceed.

Yours sincerely,

