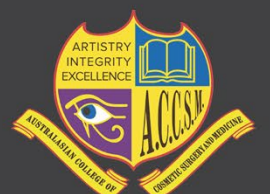


**ACCSM
Cosmetic
Surgery
Training
Program
Curriculum**

Learning Outcomes


AUSTRALASIAN COLLEGE
OF COSMETIC SURGERY AND MEDICINE



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President's Introduction

The Australasian College of Cosmetic Surgery and Medicine (ACCSM) has a proud 20-year history of serving the Australian public.

The College motto 'raising standards, protecting patients' is achieved through the Colleges provision of high-level procedure specific training in Cosmetic Surgery and through staunch patient advocacy. Of note in this regard, the ACCSM developed the first code of conduct for Cosmetic Surgery and was approved by the ACCC.

The ACCSM has a comprehensive CanMED aligned Cosmetic Surgery training curriculum. The curriculum has been revised and mapped to the AMC capability Statements for programs of study in Cosmetic Surgery and has adopted a system of programmatic assessment with learning outcomes blueprinted to training and standardised assessments to ensure graduate competence.

The program provides the professional, theoretical, and technical skills-based training necessary for an extended scope of practice in Cosmetic Surgery.

Cosmetic Surgery differs from other branches of Surgery in a number of unique ways. Firstly, Cosmetic Surgery does not target the resolution of organic disease but instead the provision of aesthetic improvement. The metric for a successful outcome is therefore not disease resolution but instead patient satisfaction which is subjective and multifactorial.

Secondly, medical necessity is usually the main driver for Surgery and patients often present reluctantly. By contrast, in Cosmetic Surgery strong patient desire is the main driving force for Surgery necessitating Cosmetic Surgery Proceduralists to evaluate and adjudicate its appropriateness.

Thirdly, there is often conflict between the best interests of the patient and the financial interests of the Cosmetic Surgery Proceduralist. While this is not unique to Cosmetic Surgery, the issue is more acute.

Finally, due to the highly elective nature of Cosmetic Surgery, the risk benefit ratio must be set significantly higher.

In recognition of these characteristics the College curriculum necessarily emphasises training in ethical practice, patient communication, management of expectations, psychosocial considerations, cultural awareness, appropriate patient selection, and safe surgical practice.

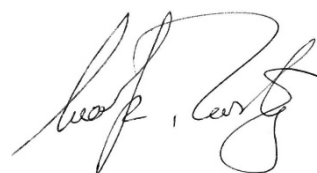
High-level Cosmetic Surgery training in Australia necessarily requires a hybrid system between public teaching hospitals and the private sector.

Core Surgical Competence (CSC) is gained through extensive surgical training in public teaching hospitals and is a key prerequisite for the ACCSM Cosmetic Surgery training program. CSC is exemplified by teaching hospital entrustment of the trainee to take patients to the operating theatre and perform Surgery without direct supervision.

Advanced training in Cosmetic Surgery by contrast needs to occur in the Private sector where the vast bulk of Cosmetic Surgery is performed. In this environment, through the College's structured training program, trainees have high exposure to the full spectrum of cosmetic surgery procedures and can gain the necessary proficiency and experience to become safe and technically competent Cosmetic Surgery Proceduralists.

Research into future trends in Cosmetic Surgery commissioned by the ACCSM in June 2023 forecasts an enormous increase in demand for Cosmetic Surgery with 7 million Australians or 38% of the adult population considering or planning Cosmetic Surgery procedures over the next 10 years.

The ACCSM training program ensures that there will be ethical, highly trained, and technically skilled Cosmetic Surgery Proceduralists to meet this demand and keep the public safe.



Dr Anoop Rastogi
ACCSM President

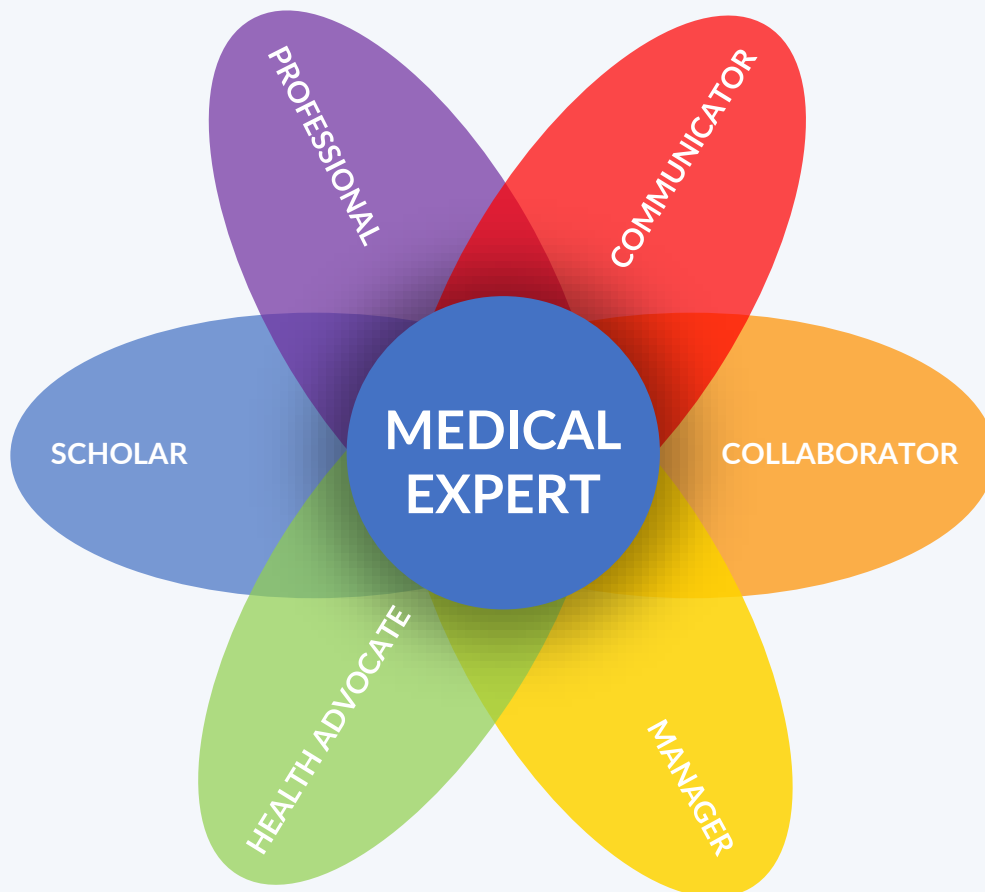
Curriculum Design

The ACCSM cosmetic surgery curriculum has been created around a set of program outcome statements that define the expected competencies, skills, knowledge, and attributes required of a skilled, safe, and ethical Cosmetic Surgery Proceduralist. These program outcome statements are based on both the CANMEDS

framework and the AMC Outcome (Capability) Statements for Cosmetic Surgery Programs of Study. Each learning outcome included in this curriculum links to at least one of these program outcome statements and all program outcome statements are covered across multiple learning outcomes.

Incorporating the CanMEDS Framework

The CanMEDS framework describes the seven roles that a doctor should fulfill to provide high-quality patient care. These roles are:



These roles provide a comprehensive framework for the development of a doctors competencies throughout their training and practice and are reflected in the Program Outcome statement domains and the learning outcomes of the training program curriculum.

Program Outcome Statements

Domain 1: Medical Expert (linked to the outcome capability statement Domain 1: The Cosmetic Surgery Practitioner)

A. Knowledge

Cosmetic Surgery Proceduralists assess patients to determine their suitability for procedures, develop comprehensive and individualised surgical plans, ensure early recognition and prevention of complications, and possess a thorough understanding of adjunct treatments that complement surgical interventions for optimal patient outcomes.

B. Skills

Cosmetic Surgery Proceduralists effectively utilise preventative and therapeutic interventions and manage complications with skill and precision ensuring safe and successful surgical outcomes for their patients. They demonstrate proficiency in performing a wide range of cosmetic surgical procedures related to the face and neck, brow, eyelids, ears, nose, chin, breasts, abdomen, brow, skin, lipoplasty and to post bariatric surgery.

Domain 2: Ethical Practitioner (linked to the outcome capability statement Domain 2: The cosmetic surgery practitioner as ethical professional and leader and Domain 3: The cosmetic surgery practitioner as patient and health advocate)

Cosmetic Surgery Proceduralists demonstrate that they practice according to the ethical standards set by medical guidelines, ensuring the highest level of confidentiality and prioritising patient well-being and quality of care. Cosmetic Surgery Proceduralists responsibly manage the competing interests of patients who request elective procedures and the commercial implications of these requests.

Domain 3: Effective Communicator (linked to the outcome capability statement Domain 2: The cosmetic surgery practitioner as ethical professional and leader)

Cosmetic Surgery Proceduralists communicate effectively with their patients to establish rapport and trust. They seek advice from senior colleagues when necessary, and successfully communicate with other healthcare professionals to provide comprehensive care and optimise patient outcomes.

Domain 4: Critical Thinker (linked to the outcome capability statement Domain 4: The cosmetic surgery practitioner as reflective and evidence informed practitioner)

Cosmetic Surgery Proceduralists apply evidence-based principles to identify the unique surgical needs of their patients, and to make informed decisions to assist with developing individualised surgical plans that optimise outcomes and patient satisfaction.

Cosmetic Surgery Proceduralists effectively manage complications and comorbidities, while proactively identifying and implementing risk management processes to ensure patient safety throughout the surgical journey.

Domain 5: Educator and Researcher (linked to the outcome capability statement Domain 4: The cosmetic surgery practitioner as reflective and evidence informed practitioner)

Cosmetic Surgery Proceduralists use their research skills to contribute to the progression of the profession, advancing knowledge, and raising standards of practice to protect patients. They actively contribute to the body of knowledge through research, while also passing on their expertise to new doctors, promoting professionalism within the field, and educating the wider community about cosmetic surgery.

Domain 6: Commitment to Lifelong Learning (linked to the outcome capability statement Domain 4: The cosmetic surgery practitioner as reflective and evidence informed practitioner)

As lifelong learners, Cosmetic Surgery Proceduralists take on the responsibility of maintaining high standards, staying current with the latest advancements in the field, ensuring alignment with best practices, and continually expanding their knowledge and expertise to increase both the depth and breadth of their capabilities.



Learning Outcomes

Key Area 1: Introduction to Cosmetic Surgery	
Topic 1: History & Evolution of Cosmetic Surgery	
1.1.1 Evolution of current procedures	I. Understand the historical context and milestones in the development of cosmetic surgery procedures.
	II. Identify the key technological advancements that have contributed to the evolution of current cosmetic surgery procedures.
	III. Analyse the impact of societal, cultural, and technological factors on the evolution of cosmetic surgery and the expectations of patients seeking these procedures.
	IV. Evaluate the ethical considerations associated with the evolution of cosmetic surgery procedures.
	V. Explain the roles and responsibilities of different healthcare professionals in the execution of multi-disciplinary cosmetic surgery procedures.
	VI. Identify the advantages and challenges associated with multi-disciplinary approaches in cosmetic surgery.
	VII. Explain how the integration of multiple disciplines in cosmetic surgery can enhance outcomes for patients.
1.1.2 Divergence of Cosmetic and Plastic/Reconstructive Surgery	I. Differentiate between cosmetic surgery and plastic/reconstructive surgery based on their historical development and distinct goals.
	II. Describe the factors that have contributed to the divergence of cosmetic and plastic/reconstructive surgery.
	III. Identify the general limitations of cosmetic and plastic/reconstructive surgery procedures.
	IV. Understand the different needs and motivations of patients seeking cosmetic surgery versus plastic/reconstructive surgery procedures.
	V. Critically assess the ethical and legal implications arising from the divergence of cosmetic and plastic/reconstructive surgery procedures.
Topic 2: Scope of Practice	
1.2.1 Scope of Practice	I. Discuss Scope of practice and its component parts – education and training, certification, clinical experience, recency of practice and Continuing Professional Development.
	II. Appreciate the importance of Scope of practice in the Australian context where fields of practice are limited by medical practitioner self-regulation rather than regulatory prescription.
	III. Understand that scope of practice expands with additional education and training, additional certification, continuing professional development and broadening clinical experience and diminishes in the absence of recency of practice.
	IV. Understand the scope of practice appropriate for doctors who have completed the ACCSM Cosmetic Surgery Training Program and pathways for broadening of a graduate's scope of practice.

	V. Recognise that limits of one's individual competencies and self-regulating one's scope of practice is essential in keeping the Australian public safe.
Topic 3: Ethics, safety, and the Cosmetic Surgery patient	
1.3.1 Key distinctions, and considerations in Cosmetic Surgery	I. Differentiate cosmetic surgery from other surgical branches by recognising its primary focus on aesthetic improvement rather than the resolution of organic diseases.
	II. Recognise that the measure of success in cosmetic surgery is reliant on patient satisfaction which is subjective and multifactorial.
	III. Appreciate differences in the risk-benefit ratio in cosmetic surgery, acknowledging its highly elective nature.
1.3.2 Ethics and the Cosmetic Surgery Proceduralist	I. Understand why specific ethics training is important in cosmetic surgery
	II. Recognise that doctors must be held to a higher ethical standard due to the unquestioning trust by patients that the advice and treatments provided are given in the patient's best interest.
	III. Define ethical practice and describe how this relates to the concepts of patient autonomy, beneficence, non-maleficence, and justice.
	IV. Recognise the potential conflict between the best interests of the patient and the financial interests of the doctor and develop strategies to mitigate this whenever treatment or advice is provided.
	V. Understand the doctors' ethical obligations in the corporate context and the need to advocate for the patient when a conflict of interest arises.
	VI. Recognise the doctors' ethical obligations in advertising and the requirement to advertise within the guidelines set by statutory authorities, including AHPRA.
1.3.3 The role of Continuing Professional Development and ethical Cosmetic Surgery practice	I. Evaluate the role of ongoing education and professional development in staying current with evolving ethical standards and safety protocols in cosmetic surgery.
	II. Recognise the importance of continuous improvement to ensure the highest standards of patient care and ethical practice
Topic 4: Considerations for patient selection	
1.4.1 Assessing patients	I. Assess whether a patient is a suitable candidate for cosmetic surgery based on their medical history, physiological factors, and aesthetic goals.
1.4.2 Medical Contraindications	I. Identify common medical contraindications that may affect a patient's suitability for cosmetic surgery.
	II. Apply strategies of assessing and managing medical contraindications in the context of patient selection for cosmetic surgery.
	III. Evaluate the potential impact of pre-existing medical conditions on the safety and outcomes of cosmetic surgery procedures.
1.4.3 Psychosocial Considerations and Contraindications	I. Recognise the influence of psychosocial factors on patient suitability for outcomes in cosmetic surgery.
	II. Assess the impact of social supports, including family, friends, and psychological support, on the decision-making process, post-surgical recovery, and satisfaction of patients.

	<p>III. Identify psychosocial indications, including realistic expectations, emotional stability, and adequate support systems, that contribute to positive surgical outcomes.</p> <p>IV. Assess psychological contraindications using assessment tools, including unrealistic expectations and body dysmorphia that may indicate the need for additional assessment or intervention before proceeding with cosmetic surgery.</p>
1.4.4 Patient History of Previous Cosmetic Procedures	<p>I. Evaluate the significance of a patient's prior cosmetic medical and surgical history (including the outcomes of previous consultations with other Cosmetic Surgery Proceduralists) in the context of patient selection for future procedures.</p> <p>II. Analyse the potential impact of previous cosmetic surgeries, including outcomes, complications, and patient satisfaction, on the decision-making process for subsequent procedures.</p> <p>III. Assess the need for additional pre-operative evaluation or adjustments in surgical planning based on the patient's prior cosmetic history.</p> <p>IV. Develop strategies for effectively communicating with patients about their prior cosmetic history and managing expectations for future procedures.</p>
1.4.5 Economic Circumstances and Impacts on Treatment and Care	<p>I. Evaluate the potential influence of economic factors on treatment choices, including the selection of procedures, choice of Cosmetic Surgery Proceduralist, or decision to postpone or forego Surgery.</p> <p>II. Evaluate the ethical implications of economic disparities in cosmetic surgery patients and their potential impact on patient outcomes.</p>
1.4.6 Impact of Age on Patient Selection	<p>I. Describe the age-related considerations that may affect patient selection for cosmetic surgery, including physiological changes, healing capacity, and cognitive competency.</p> <p>II. Assess the potential risks and benefits of cosmetic surgery in different age groups and evaluate the appropriateness of surgical interventions based on age-related factors.</p> <p>III. Understand the legal and ethical implications related to age-related patient selection and informed consent in cosmetic surgery.</p>
1.4.7 Ethnic and cultural considerations	<p>I. Appreciate variations in ethnic and cultural considerations of aesthetics</p> <p>II. Demonstrate appropriate cultural awareness and sensitivity in patient interactions</p> <p>III. Appreciate that the risks of surgical procedures (scarring and pigmentation) may vary between patients from different ethnic backgrounds</p>
Topic 5: Patient Safety	
1.5.1 Pre-operative patient management and optimisation	<p>I. Recognise the importance of pre-operative optimisation in ensuring patient safety in cosmetic surgery.</p> <p>II. Evaluate the impact of modifiable risk factors on surgical outcomes and complications.</p> <p>III. Use appropriate referral pathways to direct patients to pre-operative interventions, including smoking cessation programs, nutritional support, and management of chronic health conditions.</p>
1.5.2 Safe use of anaesthesia and sedation	<p>I. Understand the principles and techniques of anaesthesia and sedation commonly used in cosmetic surgery procedures.</p>

	<p>II. Identify potential complications and adverse events associated with anaesthesia and sedation in the context of cosmetic surgery.</p> <p>III. Identify strategies to mitigate the risks and ensure patient safety during anaesthesia and sedation procedures.</p>
1.5.3 Prevention and Management of common surgical complications	<p>I. Describe appropriate use of emergency protocols and interventions in the event of anaesthesia-related complications.</p> <p>II. Discuss the principles of infection control, aseptic technique, and wound care and describe how these reduce the risk of complications.</p> <p>III. Identify strategies for prevention, early detection, and prompt management of infections, bleeding, and wound breakdown in cosmetic surgery.</p> <p>IV. Apply appropriate wound care protocols, use of dressings, and follow-up care to promote optimal healing and minimize complications.</p>
1.5.4 DVT and PE Management and Prevention	<p>I. Recognise the risk factors for deep vein thrombosis (DVT) and pulmonary embolism in cosmetic surgery patients.</p> <p>II. Accurately describe the signs and symptoms of DVT/PE.</p> <p>III. Apply appropriate strategies for DVT/PE risk assessment, prevention, diagnosis, and management in the perioperative period.</p> <p>IV. Understand the appropriate use of prophylactic measures, including patient preparation, pharmacological agents and mechanical interventions, to prevent DVT/PE in cosmetic surgery patients.</p> <p>V. Implement appropriate interventions in case of suspected DVT.</p>
1.5.5 Infection Control and Appropriate Use of Antibiotics	<p>I. Understand the principles of infection control and the importance of appropriate antibiotic use in cosmetic surgery.</p> <p>II. Evaluate the indications, selection, and administration of antibiotics for prophylaxis in cosmetic surgery.</p> <p>III. Identify strategies to prevent the development and spread of healthcare-associated infections in the cosmetic surgical setting.</p> <p>IV. Describe the principles of antimicrobial stewardship and guidelines to optimise antibiotic use and minimise the risk of resistance and adverse events.</p>
1.5.6 Pain Management	<p>I. Recognise the importance of effective pain management in cosmetic surgery for patient comfort and well-being.</p> <p>II. Describe different pharmacological and non-pharmacological approaches to pain management in the perioperative and postoperative periods.</p> <p>III. Apply appropriate strategies for tailored pain assessment and management plans based on patient needs and preferences.</p> <p>IV. Monitor and address potential complications and adverse effects associated with pain medications.</p>
1.5.7 Selection of Appropriate Surgical Locations	<p>I. Understand the importance of selecting appropriate surgical locations for cosmetic procedures, considering patient safety and quality standards.</p> <p>II. Differentiate between accredited and licensed surgical facilities and their respective regulatory requirements</p> <p>III. Understand the role of national quality and safety commissions in ensuring patient safety and quality of care in cosmetic surgery.</p>

	IV. Apply knowledge of regulatory standards and guidelines to make informed decisions regarding the selection of surgical facilities for cosmetic procedures.
	V. Evaluate the governance and supporting environment of clinical/surgical locations and use this information to support decisions about sites that are suitable for your practice and safe for patients.
	VI. Evaluate the models of practice in place at different surgical locations and use this information to support decisions about sites that are suitable for your practice and safe for patients.
1.5.8 The Role of the Cosmetic Surgical Practitioner in Managing Surgical Emergencies	I. Identify the potential surgical emergencies that may arise during or after cosmetic surgery procedures.
	II. Demonstrate effective communication, teamwork, and decision-making skills in high-pressure situations.
	III. Effectively manage common operative emergencies including haemorrhage, airway compromise, respiratory depression, and local anaesthetic toxicity.
	IV. Effectively manage reactions to administered medications.
	V. Understand the roles and responsibilities of the healthcare team in responding to and managing surgical emergencies.
1.5.9 Management of Anaphylaxis and Cardiac Emergencies	I. Recognise the signs and symptoms of anaphylaxis and cardiac emergencies in the context of cosmetic surgery.
	II. Describe the principles and protocols for the management of anaphylaxis and cardiac emergencies, including early recognition, prompt intervention, and coordination with emergency medical services
	III. Effectively administer appropriate emergency treatments.
Topic 6: Collaborative patient care	
1.6.1 Working in a multi-disciplinary environment	I. Recognise the collaborative nature of multi-disciplinary procedures in cosmetic surgery, involving various medical specialties.
	II. Explain the roles and responsibilities of different healthcare professionals in the execution of multi-disciplinary cosmetic surgery procedures
	III. Identify the advantages and challenges associated with multi-disciplinary approaches in cosmetic surgery.
	IV. Explain how the integration of multiple disciplines in cosmetic surgery can enhance outcomes for patients.
1.6.2 Identification of Suitable Sources for collaboration	I. Recognise the importance of establishing a clinical support network in the context of providing comprehensive patient care in cosmetic surgery.
	II. Develop strategies for effective communication and collaboration with the clinical support network to enhance patient outcomes and professional growth.
	III. Identify suitable sources of support and advice, including experienced colleagues, mentors, professional organisations.
	IV. Critically evaluate how different healthcare professionals, can provide specialised support and advice in cosmetic surgery.
1.6.3 Establishing a Referral Network	I. Understand the significance of establishing a referral network to ensure appropriate and timely access to specialised care for patients in need.

	II. Develop a network of healthcare professionals and specialists in various disciplines relevant to cosmetic surgery, including dermatology, ophthalmology, and psychiatry, for potential referral.
	III. Demonstrate effective referral management skills, including appropriate documentation, clear communication of patient information, and coordination of care, to optimise patient outcomes and continuity of care.
1.6.4 Establishing an evidence base for your practice	I. Review evolving surgical techniques and emerging technologies and assess the relevance and applicability to your practice
	II. Critically assess and evaluate scientific literature, including research studies, clinical trials, and scholarly publications, in order to make informed decisions and apply evidence-based practices in cosmetic surgery.

Key Area 2: Fundamentals of Working with the Cosmetic Surgery Patient

Topic 1: Communicating effectively for patient care

2.1.1 Tailoring communications	I. Consider cultural, religious, and linguistic requirements in identifying individual patient needs, preferences, and communication styles to tailor information effectively.
	II. Apply active listening skills to understand patients' concerns, questions, and expectations.
	III. Develop strategies for clear and empathetic communication to build trust and rapport with patients.
2.1.2 Taking an appropriate patient history	I. Effectively gather comprehensive medical and Cosmetic histories from patients.
	II. Identify relevant factors that may impact treatment options or outcomes based on the patient's history.
	III. Apply appropriate questioning techniques to gather specific information related to cosmetic concerns and goals.
2.1.3 Maintaining appropriate patient records	I. Appreciate the importance of maintaining clear and thorough medical records that include: <ul style="list-style-type: none"> ○ Patient history ○ Records of examinations ○ Procedural plans ○ Discussion points engaged in during consultation ○ Assessment of patient expectations and plans to address these
2.1.4 Considering the patient's desired outcomes	I. Elicit and prioritise patients' desired cosmetic outcomes and expectations.
	II. Manage patients' expectations by discussing achievable and realistic outcomes.
	III. Apply empathetic communication to address patients' emotional and psychological aspects related to their desired outcomes.
2.1.5 Effectively communicating risks	I. Clearly communicate the potential risks and complications associated with cosmetic procedures including the likelihood of these occurrences.
	I. Communicate postoperative instructions and care guidelines clearly and comprehensively.

2.1.6 Effectively communicating post-operative instructions	II. Use strategies including providing written and visual materials to reinforce postoperative instructions.
	III. Address patient questions and concerns related to postoperative care and recovery.
2.1.7 Presenting alternatives to Surgery	I. Describe treatment alternatives, including surgical and non-surgical options, to address patients' Cosmetic concerns.
	II. Discuss the potential benefits and limitations of different treatment approaches.
	III. Present "no surgery or treatment" as an alternative to surgery.
	IV. Provide patients with the opportunity to discuss and consider seeking a second opinion from another qualified medical practitioner.
	V. Participate in shared decision-making with patients in the selection of the most suitable option.
2.1.8 Communicating effectively with other healthcare and administrative staff	I. Communicate and collaborate with other healthcare and administrative staff to ensure seamless coordination and patient-centred care within a cosmetic surgery practice.
Topic 2: Informed Consent	
2.2.1 Key elements of informed consent	I. Describe the elements of informed consent, including the disclosure of risks, benefits, and alternatives to the proposed procedure.
	II. Appreciate the importance of discussing pain management, expected recovery time, and the potential impact on daily activities as part of informed consent.
	III. Demonstrate the ability to obtain informed consent in a culturally sensitive and patient-centred manner, including the need to have a translator for patients whose English is not their first language.
2.2.2 Operative consent	I. Explain the potential risks and complications associated with the proposed cosmetic surgery procedures.
	II. Present the expected benefits and anticipated outcomes of the surgery based on the individual patient's characteristics and goals.
	III. Discuss alternative treatment options, including non-surgical options, and the option of no treatment.
	IV. Assess patients' understanding of the information provided during the consent process and address any questions or concerns they may have.
2.2.3 Considerations for financial consent	I. Appreciate the importance of discussing the financial aspects of cosmetic surgery, including the total cost, payment options, and potential need for revision surgery.
	II. Provide transparent information on additional costs, including anaesthesia fees, facility fees, and postoperative care expenses.
	III. Demonstrate sensitivity when discussing financial matters.
2.2.4 Consent for the involvement of other surgeons, trainees, and assistants	I. Explain the roles and responsibilities of other surgeons, trainees, and assistants who may be involved in the surgical procedure.
	II. Appreciate the importance of obtaining patient consent for the involvement of any additional healthcare professionals or trainees in the surgery.

	III. Address any concerns or preferences the patient may have regarding the involvement of other individuals in the surgical team.
Topic 3: Management of patient expectations	
2.3.1 Pre-operative management of expectations	I. Understand the importance of managing patient expectations before the cosmetic surgery procedure.
	II. Apply effective screening techniques to assess patient motivations, goals, and expectations.
	III. Identify factors that may influence patient expectations, including psychological factors, social influences, and media portrayal of cosmetic surgery.
	IV. Engage in open and honest discussions with patients to align their expectations with realistic outcomes.
2.3.2 Calibrating patient expectations	I. Employ effective communication techniques to calibrate patient expectations, ensuring they have a realistic understanding of the potential outcomes and limitations of the cosmetic procedure.
	II. Identify tools that are helpful in illustrating realistic expectations (e.g. before and after photos, photography apps and systems) and acknowledge their limitations.
	III. Provide evidence-based information on the success rates and potential complications of the cosmetic procedure to help patients make informed decisions.
2.3.3 Management of post-operative dissatisfaction	I. Recognise the potential for post-operative dissatisfaction in cosmetic surgery patients.
	II. Apply strategies for addressing and managing patient dissatisfaction, including active listening, empathy, and problem-solving skills.
	III. Collaborate with patients to identify appropriate solutions to address areas of dissatisfaction, where feasible.
	IV. Demonstrate the ability to handle patient complaints and concerns in a professional and compassionate manner.
2.3.4 Revision Surgery	I. Appreciate the need for and use of revision surgery in the context of cosmetic procedures.
	II. Identify the factors contributing to the need for revision surgery, including complications, surgical outcomes, and patient satisfaction.
	III. Appreciate the frequency of revision surgeries for different cosmetic procedures and their impact on patient outcomes and satisfaction and use this information in planning for surgeries
	IV. Participate in the planning process for revision surgery and consider timing, patient readiness, financial readiness, and specific surgical considerations.
	V. Comprehensively assess patient needs and expectations during the planning process for revision surgery.
	VI. Collaborate with patients to establish realistic goals and expected outcomes for revision procedures.
	VII. Utilise interdisciplinary communication and consultation, as needed, to plan and coordinate revision surgeries effectively.
Topic 4: Practice safety and support	

2.4.1 Manage a practice that supports high quality patient care	I.	Collaborate with practice managers, practice nurses, and allied health professionals using a team approach to enhance patient care and safety.
	II.	Develop clear and comprehensive patient documentation for patient information, consent, and pre and post operative care instructions.
	III.	Support practice staff in their professional learning and development to ensure there is an adequate level of knowledge across the team so patients receive consistent and accurate information.
	IV.	Support practice staff in their professional learning and development to ensure consistent knowledge about ethical requirements and confidentiality.
2.4.2 Seeking professional support	I.	Identify complicated cases and seek support from colleagues to manage these.

Key Area 3: Fundamentals of Skin and Wound Management

Topic 1: Structure and Function of the skin

3.1.1 Normal skin anatomy and physiology	I.	Describe the layers of the skin, including the epidermis, dermis, and subcutaneous tissue.
	II.	Describe the physiological functions of the skin, including protection, sensation, thermoregulation, and vitamin D synthesis, and articulate how these functions influence cosmetic surgery practices.

Topic 2: Wounds

3.2.1 Wound healing and management	I.	Describe the physiological processes and stages involved in wound healing.
	II.	Identify different types of wounds based on their size, shape, location, depth, base of wound, and surrounding tissue.
	III.	Identify the factors that influence wound healing, including age, nutrition, comorbidities, and medications.
	IV.	Evaluate different wound management techniques, including types of wound dressings, debridement, and suturing, based on the characteristics and stages of wound healing.
	V.	Apply knowledge of wound pathophysiology to make informed decisions on assessment and treatment planning to optimise outcomes.
	VI.	Evaluate the principles of antibiotic stewardship to minimize the risk of antibiotic resistance and adverse effects.
	VII.	Identify the most suitable antibiotic based on the type of infection, the sensitivity of the pathogen, and patient-specific factors.

Topic 3: Pathologies of the skin

3.3.1 Identification of common skin pathologies	I.	Identify and classify common skin pathologies, including skin cancers, dermatitis, psoriasis, eczema, and acne, based on their clinical presentations and etiology.
	II.	Understand the underlying pathophysiological mechanisms that contribute to the development of various skin pathologies.
3.3.2 Management of common skin pathologies	I.	Evaluate the appropriate diagnostic approaches and management strategies for different skin conditions.

	<ul style="list-style-type: none"> II. Provide preventive measures and patient education related to the management of skin pathologies. III. Apply strategies for comprehensive patient assessment and referral to appropriate healthcare specialists when encountering more serious skin pathologies (e.g. extensive skin cancers).
Topic 4: Impacts of internal diseases on the skin	
3.4.1 Identify common skin manifestations of internal diseases	<ul style="list-style-type: none"> I. Recognise the cutaneous manifestations associated with various internal diseases and systemic conditions, including: autoimmune disorders, endocrine disorders, and infectious diseases. II. Recognise skin signs as potential indicators of underlying systemic illnesses.
3.4.2 Contributing to the management of skin pathologies	<ul style="list-style-type: none"> I. Demonstrate strategies for comprehensive patient assessment and appropriate referral when encountering skin manifestations that suggest internal pathology. II. Appreciate the value of interdisciplinary collaboration with other healthcare specialists in the diagnosis and management of skin manifestations related to internal diseases.
Topic 5: Scarring	
3.5.1 Biological process in scar formation	<ul style="list-style-type: none"> I. Describe the biophysiological processes involved in scar formation and the differences between normal scarring, hypertrophic scars, keloid scars, and pigmented scars. II. Identify factors that influence scar formation, including wound tension, genetics, and inflammation.
3.5.2 Management of scars	<ul style="list-style-type: none"> I. Identify potential risks, benefits, and expected outcomes of different scar management approaches. II. Evaluate treatment options for hypertrophic and keloid scars, including local steroid therapy, pressure therapy, and scar revision techniques. III. Understand the mechanisms of action and indications for using local steroid therapy in scar management. IV. Evaluate the principles of pressure therapy and its role in preventing and treating hypertrophic and keloid scars. V. Identify different scar revision techniques, including surgical excision, laser therapy, and dermabrasion, and their applications in scar improvement. VI. Select the most appropriate scar management techniques based on scar characteristics and patient-specific factors.
Topic 6: Pigmentation changes	
3.6.1 Normal v. abnormal pigmentation changes	<ul style="list-style-type: none"> I. Recognise the normal variations in skin pigmentation based on ethnic background, age, and skin type. II. Outline the role of melanin in determining skin colour and its distribution in different skin layers. III. Identify common skin pigmentation disorders, including hyperpigmentation and hypopigmentation and understand their underlying causes. IV. Differentiate between benign pigmented lesions and potentially malignant conditions, including melanoma or dysplastic nevi, for early detection and appropriate management.

	V. Describe the pathophysiological mechanisms leading to abnormal pigmentation changes, including melanocyte dysfunction, inflammation, and hormonal influences.
	VI. Identify common triggers and exacerbating factors for hyperpigmentation.
3.6.2 Treatment options for pigmentation changes	I. Understand the available treatment modalities for skin pigmentation changes, including topical agents (e.g. hydroquinone, retinoids), chemical peels, laser therapies, and cryotherapy.
	II. Evaluate the risks, benefits, and expected outcomes of different treatment options, taking into account patient preferences and skin type.
	III. Develop appropriate treatment plans for patients based on their specific pigmentation concerns and medical history.
Topic 7: Antibiotic use	
3.7.1 Selection and use of appropriate antibiotics	I. Recognise the importance of appropriate antibiotic use in the management of various infections and wound-related conditions.
	II. Identify different classes of antibiotics and their mechanisms of action against specific pathogens.
	III. Accurately diagnose infections and identify pathogens through sending swabs and tissue samples for pathology.
	IV. Evaluate the principles of antibiotic stewardship to minimise the risk of antibiotic resistance and adverse effects.
	V. Identify the most suitable antibiotic based on the type of infection, the sensitivity of the pathogen, and patient-specific factors.

Key Area 4: Diagnosis, assessment, and safe management of Cosmetic Surgery procedures related to the face and neck

Topic 1: Normal facial anatomy and its common variants

4.1.1 Blood supply and innervation of the face	I. Describe the major arterial supply of the face including common variations.
	II. Describe the sensory innervation of the face.
	III. Describe the motor innervation of facial muscles by the facial nerve (cranial nerve VII) and its branches.
4.1.2 Facial musculature and the course and distribution of nerves of the face	I. Describe the main facial muscles, their origins, insertions, and actions.
	II. Describe the course and distribution of facial nerves, including the branches of the facial nerve and the innervation of specific facial muscles.
4.1.3 The Fascial Planes of the Face and the Brow and the Pattern of Facial Components of the Brow, Face, and Neck	I. Describe the facial fascial planes, including the superficial and deep fascia, and their role in facial expression and support.
	II. Describe the anatomical components of the brow, and neck regions, including bones, muscles, nerves, and blood vessels.
	III. Appreciate the impact of facial anatomy on aesthetic considerations and surgical planning in cosmetic procedures.

4.1.4 Aesthetic facial assessment	IV. Perform aesthetic facial assessments including an understanding of the influence of asymmetries.
	V. Use aesthetic evaluations to inform treatment planning in cosmetic surgery and non-surgical interventions.
Topic 2: Pathophysiology of ageing	
4.2.1 Skin changes	I. Identify common skin changes associated with ageing.
	II. Describe the underlying pathophysiological processes responsible for age-related changes in the skin.
	III. Appreciate the impact of intrinsic and extrinsic factors on skin ageing including genetics, hormonal changes, and environmental exposure.
4.2.2 Age related fat loss	I. Describe the pathophysiological mechanisms leading to age-related fat loss and redistribution in the face and body.
	II. Identify the characteristic patterns of fat loss including facial volume depletion and changes in facial and neck contours.
	III. Evaluate the implications of fat loss on facial aesthetics in ageing.
4.2.3 Age related changes in ligamentous support	I. Describe how age-related changes in ligaments contribute to facial sagging and ptosis.
	II. Analyse the impact of ligamentous changes on facial aesthetics and the development of facial ageing features.
4.2.4 Age related muscle and bone atrophy	I. Describe the pathophysiology of muscle and bone atrophy in the ageing process.
	II. Describe the effects of muscle and bone loss on facial appearance, including changes in facial shape and skeletal proportions.
	III. Evaluate the significance of muscle and bone atrophy in the context of age-related functional changes and aesthetic considerations.
4.2.5 The impact of sun exposure on the ageing process	I. Describe the impact of chronic sun exposure on the skin, including photo-ageing and DNA damage.
	II. Identify characteristic patterns of ageing associated with sun exposure, including solar elastosis, pigmentation changes, and increased risk of skin cancer.
Topic 3: Face and neck lifting procedures	
4.3.1 Procedure specific anatomy of the face and neck	I. Identify and locate key surgical anatomical structures at risk in face and neck procedures.
4.3.2 Face and neck lifting procedures	I. Describe the steps involved in facelift procedures including planes of surgery (including subcutaneous, SMAS flaps, deep plane), surgical incisions and their indications, and platysma manipulation.
	II. Appreciate the additional complexities associated with secondary facelift surgery.
	III. Competently perform each element of a facelift surgery.
4.3.3 Adjunctive facial procedures	I. Describe the applicability, usefulness and techniques involved in adjunct procedures including: <ul style="list-style-type: none"> ○ Threads ○ Energy-based devices ○ Light-based therapies ○ Injectable fillers

	<ul style="list-style-type: none"> o Neuromodulation toxin injections
4.3.4 Facial implants	<p>II. Describe procedures for facial augmentation including:</p> <ul style="list-style-type: none"> o Autogenous vs allograft o Types of materials o Implant selection
4.3.5 Management of complications of face and neck procedures	<p>I. Identify potential complications associated with face and neck procedures, including infection, hematoma, wound breakdown, paratoid duct injury, nerve injury, hair loss, and asymmetry.</p>
	<p>II. Evaluate patient-specific risk factors and medical history to develop personalised strategies for complication prevention</p>
	<p>III. Apply evidence-based techniques and best practices to minimise the risk of complications during pre-operative planning and surgical execution.</p>
	<p>IV. Perform thorough post-operative assessments to monitor for potential complications and aid in early detection.</p>
	<p>V. Apply appropriate management strategies for complications, including haematoma, failure of wound healing, infection, salivary gland/duct injury and nerve injury.</p>
4.3.6 Specific considerations for brow lift procedures	<p>I. Describe the indications and contraindications for a brow lift.</p>
	<p>II. Describe common techniques used for brow lifts including endoscopic, direct brow lift, and open browlift and foreheadplasty, methods of fixation, and selection of appropriate incisions.</p>
	<p>III. Apply appropriate prevention and management strategies for common complications in brow lifts.</p>
Topic 4: Eyelids	
4.4.1 Surgical and functional anatomy	<p>I. Describe the applied anatomy of the eyelids and orbit.</p>
	<p>II. Describe the blood supply and innervation of the eye, orbit, and lids.</p>
	<p>III. Describe the ligamentous attachments, fat pads, and musculature of the eye and lids.</p>
4.4.2 Patient specific considerations	<p>I. Describe key racial variations in eyelid structure and their implications for blepharoplasty surgery.</p>
	<p>II. Describe common ocular abnormalities and their causes.</p>
4.4.3 Eye assessments	<p>I. Perform assessment of the eyes for symmetry, tarsal laxity, ectropion, entropion, ptosis, and eyelid shape.</p>
	<p>II. Perform an assessment of the eye to screen for:</p> <ul style="list-style-type: none"> o Signs and symptoms of raised intraocular pressure, o Dry eye o Diseases of the eye o Eye manifestations of thyroid disease o Issues with visual acuity <p>...and refer patients for appropriate management of these.</p>
	<p>I. Describe the applications, indications, limitations and complications of blepharoplasty alone and in combination with other techniques.</p>
	<p>II. Describe the steps involved in procedures of the upper and lower eyelid, including conjunctival incisions, their indications, and complications. Detail the following:</p> <ul style="list-style-type: none"> o Skin, muscle, fat and orbital septal manipulation and excision – indications and complications.

	<ul style="list-style-type: none"> o Indications, technical options, and complications for canthoplasty and canthopexy
	III. Competently perform each element of an upper and lower blepharoplasty procedure
4.4.5 Management of complications of blepharoplasty procedure	I. Identify and manage acute complications of blepharoplasty including retrobulbar haematoma
	II. Apply appropriate prevention and management strategies for common complications in blepharoplasty including entropion, ectropion, lid lag, and inferior oblique muscle injury
Topic 5: Ears	
4.5.1 Surgical anatomy of the ear	I. Describe the anatomy of the ear including embryology and growth (including nomenclature of different elements of the ear).
	II. Describe blood supply of the ear including branches from external carotid artery, posterior auricular artery and superficial temporal artery.
	III. Describe nerve supply of the ear including auriculotemporal nerve, great auricular nerve, branches of the vagus nerve and lesser occipital nerve
4.5.2 Patient specific considerations	I. Describe appropriate age-related considerations (including cartilage maturation) in respect of timing of otoplasty.
	II. Describe syndromes and conditions associated with variations of ear anatomy.
	III. Describe how traumatic deformities impact the ear.
4.5.3 Surgical procedures related to the ear	I. Describe the applications, indications, limitations and complications of surgical techniques for prominent ear correction including cartilage scoring e.g. Chongchet and suture-only techniques e.g. modified Mustardé.
	II. Describe reconstructive procedures of the earlobe– including complications, their avoidance and treatment.
	III. Identify the potential complications of prominent ear correction including infection, necrosis of cartilage and skin and recurrence.
	IV. Describe various dressing techniques and their relative merits.
	V. Competently perform each element of otoplasty.
	VI. Describe appropriate prevention and management strategies for common complications of otoplasty.
	VII. Appreciate the additional complexities associated with secondary ear surgery.
Topic 6: Nose	
4.6.1 Surgical and functional anatomy of the nose	I. Describe the key anatomical features of the nose including blood and nerve supply, nasal bones, nasal cartilages and the soft tissues of the nose.
	II. Describe normal physiological functions of the nose and how these may be affected by nasal surgery.

	III. Describe the common causes of nasal deformities including: aesthetic, traumatic, disease-related, congenital, tumours and prior surgery.
	IV. Identify clinical conditions relevant for rhinoplasty including: allergic or vasomotor rhinitis, epistaxis, polyps, airway obstruction with septal deviation.
4.6.2 Patient specific considerations	I. Appreciate the complexities of facial aesthetics and how this impacts planning for rhinoplasty surgery.
	II. Recognise the clinical significance of dysmorphophobia in the cohort of patients seeking rhinoplasty surgery.
	III. Appreciate variations in ethnic and cultural considerations of aesthetics and the specific implications for rhinoplasty
4.6.3 Surgical procedures for rhinoplasty	I. Perform assessment of patient suitability for rhinoplasty surgery including intranasal examinations and functional assessments.
	II. Understand appropriate use of autologous and alloplastic implant materials.
	III. Describe the following techniques including suitability and indications for each: <ul style="list-style-type: none"> ○ Techniques to manage the nasal dorsum including dorsal hump reduction and dorsal augmentation ○ Osteotomy techniques including options for osteotomy placement ○ Endonasal and open rhinoplasty techniques ○ Techniques for the modification of the alar base ○ Techniques for the management of septal abnormalities including cartilage grafting and resection techniques ○ Techniques for nasal tip adjustment including resection, dome suturing and controller projection
	IV. Competently perform each element of a rhinoplasty procedure
	V. Implement strategies for the prevention, early detection and management of common complications in rhinoplasty surgery.
	VI. Appreciate the complexities when performing secondary rhinoplasty.
Topic 7. Chin	
4.7.1 Specific anatomy relevant to the chin	I. Describe the bone and soft tissue structures of the chin and mandible.
	II. Describe blood and nerve supply of the chin.
	III. Appreciate aesthetic considerations of the chin and propose appropriate treatment options.
4.7.2 Surgical Procedures for the chin	I. Perform assessment of patient suitability for chin augmentation.
	II. Describe the applications, indications, limitations and complications of surgical techniques for genioplasty including minimally invasive techniques.
	III. Understand appropriate use of autologous and alloplastic implant materials.
	IV. Competently perform each element of a genioplasty procedure.
	V. Implement strategies for the prevention, early detection and management of common complications in genioplasty.
	VI. Demonstrate appropriate follow-up assessment and management of late - stage complications of genioplasty patients.

Key Area 5: Diagnosis, assessment and safe management of Cosmetic Surgery procedures related to the breast

Topic 1: Breast anatomy and physiology

5.1.1 Surgical anatomy and physiology of the breast	I.	Describe the applied anatomy of the breast, its blood supply, nerve supply, muscles of the chest wall, glandular tissue, fascial layers and support structures.
	II.	Describe typical development of the breast including hormonal influences
	III.	Describe variations and deformities of the breast and associated structures
	IV.	Describe the changes to breast anatomy and physiology in pregnancy and lactation
	V.	Identify commonly occurring benign breast pathologies
	VI.	Describe how the ageing process is related to changes in breast tissue
	VII.	Understand the influences of pregnancy, lactation, weight loss, trauma, congenital deformities, benign and malignant tumours, skin conditions, and lobular and ductal disease on breast morphology.
	VIII.	Describe the iatrogenic influences on breast morphology including previous surgery, breast implants, radiotherapy, chemotherapy and medications
5.1.2 Aesthetic considerations of the breast	I.	Appreciate factors that contribute to breast aesthetics including nipple position and size, areolar shape and size, volume distribution, symmetry, degree of ptosis, body proportions and the patient's perspective of ideal breast aesthetics.

Topic 2: Assessing Patients for Breast Surgery

5.2.1 Physical assessment	I.	Perform a clinical breast assessment including assessment of: <ul style="list-style-type: none"> o Breast volume o Symmetry o Degree of ptosis o Nipple position and areola size o Skin integrity/quality o Breast parenchyma and fat distribution o Breast pathology o Previous breast surgery
	II.	Identify patients who require additional investigations and refer appropriately
5.2.2 Psychosocial assessment	I.	Appreciate the psychosocial complexities that may be associated with breast surgery and how these may influence decision making
	II.	Discuss the assessment of patient psychological suitability for aesthetic breast surgery and appropriately refer for expert psychological advice as necessary

Topic 3: Procedures for breast Surgery

5.3.1 Pre-surgical considerations for breast Surgery	I.	Discuss various designs and approaches to breast augmentation and their applications
	II.	Discuss the history of breast implants
	III.	Describe the suitability of different types of implant materials including their content, structure, physical and biological properties.

	IV. Describe the nature, physiology, and behaviour of implant capsules
	V. Describe appropriate management of capsular contracture
	VI. Describe implant infection in the context of pathogenesis, risk factors, mitigating strategies to minimise this risk and the management approach for this complication.
	VII. Describe the various hypothesized pathophysiologies of Breast implant illness and BIA-ALCL
	VIII. Describe the appropriate diagnosis and treatment of BIA-ALCL
	IX. Appreciate the importance of long term follow up and surveillance of patients with breast implants
5.3.2. Augmentation mammoplasty	I. Describe surgical techniques for augmentation mammoplasty including: <ul style="list-style-type: none"> o Incision placement o Surgical planes (submuscular, subglandular/subfascial, dual plane) o Adjunctive techniques
	II. Competently perform each element of augmentation mammoplasty using the above techniques
	III. Implement strategies for the prevention, early detection and management of common complications in augmentation mammoplasty
	IV. Demonstrate appropriate follow-up assessment and management of patients post augmentation mammoplasty
	V. Appropriately manage complications of breast augmentation surgery including peri-prosthetic infection, displacement, capsular contracture, rupture, and seroma
	VI. Appreciate the additional risks and complications of revision breast augmentation.
5.3.3 Mastopexy/Reduction mammoplasty	I. Discuss the various available techniques in mastopexy and reduction surgery and their associated benefits, risks and their relevance to: <ul style="list-style-type: none"> o breast size and shape o scar position and size o breast feeding o nipple areolar positioning and preservation
	II. Describe the components of mastopexy and reduction surgery including: <ul style="list-style-type: none"> o Skin; wise pattern, vertical or lollypop and periareolar or Benelli o Pedicle; superomedial, central, inferior and free nipple graft. o Parenchymal excision and manipulation o The use of mesh and/or suture fixation.
	III. Appreciate the additional risks of secondary breast reduction surgery
	IV. Describe the role and limitations of liposuction in breast reduction surgery
	V. Demonstrate appropriate follow-up assessment and management of patients post reduction mammoplasty
	VI. Appropriately manage complications including haematoma, nipple loss, nipple sensory loss, wound breakdown, infection and collection
	VII. Appropriately manage later stage complications including asymmetry, poor scarring, bottoming out and nipple malposition

5.3.4 Augmentation mastopexy	I. Appreciate the risks and benefits associated with simultaneous augmentation mastopexy vs. staged augmentation mastopexy
5.3.5 Assessment and correction of congenital breast deformity	I. Identify common chest wall and breast deformities
	II. Identify patients requiring referral for management of particular congenital breast and chest wall deformities
	III. Assess the degree of deformity and consider how this would impact selection of technique
	IV. Discuss the various techniques used to correct congenital breast deformities, their applications and associated benefits and risks
	V. Competently perform each element of a tuberous breast correction procedure
Topic 4: Gynaecomastia	
5.4.1 Pre-surgical considerations	I. Describe how gynaecomastia is graded and the appropriate treatment for each grade
	II. Identify systemic pathologies, drugs, medication and hormonal imbalances that can result in gynaecomastia
	III. Identify the appropriate range of tests and investigations that should be prepared for a patient presenting with gynaecomastia
5.4.2 Gynaecomastia procedures	I. Recognise the risk of blood loss in the chest that may occur with gynaecomastia procedures
	II. Describe the potential complications of the procedure including poor scar, 'dinner plate deformity', recurrence and irregularities
	III. Competently perform each element of gynaecomastia surgery
	IV. Competently perform lipoplasty in conjunction with gynaecomastia surgery
Topic 5: Nipple and Areolar Surgery	
5.5.1 Procedures in Nipple and Areolar Surgery	I. Describe techniques to reduce the areola
	II. Describe techniques of nipple reduction and how choice of technique may impact wound healing of the nipple and may lead to nipple compromise
	III. Describe techniques used to correct an inverted nipple including risks and complications associated with these techniques.
	IV. Discuss implications for surgery on the nipple and areola with a patient who may wish to breastfeed in the future.

Key Area 6: Diagnosis, assessment and safe management of Cosmetic Surgery procedures related to the abdomen

Topic 1: Specific anatomy and physiology of the abdomen

6.1.1 Anatomy and physiology of the abdominal wall	I.	Identify the layers of the abdominal wall, including skin, adipose layer, fascia, muscle, peritoneum, and their importance in cosmetic abdominal surgeries.
	II.	Understand the role of the subcutaneous fat layer in the abdominal contour and its variations in different regions of the abdomen.
	III.	Describe the vascular supply of the abdominal regions, including the epigastric, umbilical, and suprapubic regions, and their anatomical variations.
	IV.	Describe the distribution of nerves, including the cutaneous branches of the lower thoracoabdominal nerves and the iliohypogastric and ilioinguinal nerves, and their importance in abdominal sensation and innervation.
	V.	Analyse the clinical significance of the vascular and nerve supply in abdominal surgery and the management of abdominal pain during the recovery period.
6.1.2 Common abnormalities of the abdominal wall	I.	Identify common postpartum abdominal changes, including diastasis recti and skin changes, and describe their underlying pathophysiology.
	II.	Appreciate the impact of abdominal surgery on normal anatomy, including scars and adhesions, and their potential effects on abdominal function and aesthetics.
	III.	Evaluate abdominal abnormalities associated with lipodystrophy, obesity, and weight loss, including excess skin and laxity, and propose appropriate management options.
	IV.	Understand the anatomical changes and underlying causes of divarication of recti and its influence on abdominal contour.

Topic 2: Assessing patients for abdominal Cosmetic Surgery procedures

6.2.1 Assessing patient suitability	I.	Assess patient suitability for abdominoplasty by taking a focused history and assessing relevant factors including: <ul style="list-style-type: none"> ○ Age ○ BMI ○ Nutritional and metabolic states ○ Exercise ○ Occupation ○ History of weight loss and stability ○ Previous pregnancies and/or plans for future pregnancies ○ Presence of hernia ○ Prior abdominal surgery and bariatric surgery ○ Presence of rectus diastasis ○ Skin quality
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Topic 3: Cosmetic Surgery procedures of the abdomen

6.3.1 Abdominoplasty procedures	I.	Describe the principles and specific technique involved in a simple/limited abdominoplasty with laxity confined to the infra-umbilical region with no muscle diastasis and no umbilical repositioning.
	II.	Competently perform each element of a simple abdominoplasty.
	III.	Describe the principles and specific techniques involved in a radical/full abdominoplasty including: <ul style="list-style-type: none"> ○ Avelar technique ○ Pitanguy's technique ○ Lockwood's high lateral tension ○ fleur-de-lis abdominoplasty

	<ul style="list-style-type: none"> ○ functional apronectomy ○ reverse abdominoplasty
	IV. Describe the indications, advantages, limitations, and potential complications associated with each technique.
	V. Competently perform each element of a radical/full abdominoplasty (including umbilical repositioning and rectus diastasis repair) using the Avascular technique, Pitanguy technique, and Lockwood's high lateral tension.
	VI. Demonstrate appropriate follow-up assessment and management of patients post abdominoplasty surgery.
6.3.2 Complications of abdominal Surgery	I. Identify and appropriately manage the early complications that may arise after abdominal cosmetic surgery, including bleeding, infection, and seroma formation.
	II. Describe the risk factors associated with skin flap loss, umbilicus loss, and deep organ perforation and strategies to mitigate these risks.
	III. Recognise the signs and symptoms and implement appropriate interventions for early detection and management of serious complications including: <ul style="list-style-type: none"> ○ DVT ○ PE ○ Atelectasis ○ Fluid imbalance ○ Organ perforation
	IV. Identify and appropriately manage the late complications that may occur following abdominal cosmetic surgery, including scar migration and poor scarring, residual laxity, recurrence of rectus diastasis, malposition of the umbilicus and contour defects.

Key Area 7: Diagnosis, assessment and safe management of Cosmetic Surgery procedures related to lipoplasty

Topic 1: History of liposuction and evolution of the current procedure

7.1.1 Historical development of liposuction	I. Describe the evolution of liposuction techniques from their inception to the modern era.
	II. Describe the early techniques for liposuction.
	III. Explain the rationale behind the introduction of modern techniques and their benefits in comparison to traditional approaches.

Topic 2: Anatomy, physiology and pharmacology

7.2.1 Soft tissue anatomy and physiology	I. Describe key anatomical structures of the skin, superficial and deep structures of fat, fascia, zones of adhesions, lymphatics.
	II. Describe the physiology of adipose tissue.
	III. Discuss the importance of fluid balance in liposuction.
7.2.2 Pharmacology	I. Discuss the principles of tumescent anesthesia including rationale for use, composition, concentration, safety, toxicity, excretion, and interactions.
	II. Discuss complications related to tumescent anaesthesia.
	III. Describe stages of toxicity and associated signs and symptoms.

	IV. Implement strategies for prevention, early detection and management of toxicity
Topic 3: Assessing patient suitability for lipoplasty procedures	
7.3.1 Assessing patient suitability	I. Assess patient suitability for liposuction by taking a focused history and assessing relevant factors and contraindications including: <ul style="list-style-type: none"> ○ Age ○ BMI ○ Nutritional state ○ Exercise ○ Occupation ○ History of weight loss and stability ○ Previous pregnancies and/or plans for future pregnancies ○ Metabolic state ○ Presence of hernia ○ Presence of rectus diastasis ○ Skin quality including striae, laxity, elasticity, and cellulite ○ Prior surgery ○ Previous liposuction ○ Associated co-morbidities
Topic 4: Lipoplasty procedures	
7.4.1 Indications and contraindications	I. Recognise the appropriate indications for lipoplasty procedures in different anatomical areas.
7.4.2 Techniques and technologies in lipoplasty	I. Describe different lipoplasty techniques, including traditional liposuction, power-assisted liposuction (PAL), ultrasound-assisted liposuction (UAL), and laser-assisted liposuction (LAL).
	II. Evaluate the advantages, disadvantages, and potential risks associated with each lipoplasty technique.
	III. Discuss the benefits and risks associated with sedation vs. general anaesthesia.
	IV. Select the most appropriate lipoplasty technique based on patient characteristics, treatment goals, and desired outcomes.
	V. Demonstrate technical proficiency in performing lipoplasty procedures, including proper incision placement, cannula insertion, and fat extraction.
	VI. Demonstrate understanding of college guidelines for liposuction.
	VII. Work within the regulatory requirements of the current jurisdiction in relation to liposuction practice.
	VIII. Competently perform each element of a lipoplasty procedure.
7.4.3 Postoperative care and complication management	I. Identify and manage common postoperative complications including bruising, swelling, and seroma.
	II. Recognise signs of potential serious complications, including deep vein thrombosis (DVT) or fat embolism, and implement appropriate management protocols.

Key Area 8 Diagnosis, assessment and safe management of body contouring Surgery

Topic 1: Key considerations in body contouring Surgery

8.1.1 Pre-operative assessment and management	I. Demonstrate an understanding of lipoplasty in the context of body contouring surgery.
	II. Appreciate the metabolic consequences of massive weight loss surgery and how this can impact wound healing.
8.1.2 Specific safety considerations for body contouring Surgery	III. Identify and manage tissue compromise including necrosis and ischaemia in the context of body contouring.

Topic 2: Brachioplasty

8.2.1 Procedure specific anatomy and physiology	I. Identify key anatomical structures of the arm including the course of sensory and motor nerves.
	II. Describe the potential risks of nerve damage in brachioplasty surgery and strategies to mitigate these.
	III. Describe compartment syndrome including the cause, treatment, and appropriate management.
8.2.2 Brachioplasty procedures	I. Describe the common skin incisions used in brachioplasty and risks associated with these.
	II. Evaluate the risk and benefits of brachioplasty for patients seeking body contouring.
	III. Discuss scar management in brachioplasty in the context of body contouring.

Topic 3: Thighplasty

8.3.1 Procedure specific anatomy and physiology	I. Identify key anatomical structures of the leg including the course of sensory and motor nerves.
	II. Describe the potential risks of nerve damage in thighplasty surgery and strategies to mitigate these.
8.3.2 Thighplasty procedures	I. Describe common thighlift incisions and discuss the potential risks and benefits of each.
	II. Appreciate the impact of skin tension and various surgical techniques on preventing excessive skin resection.
	III. Appreciate the importance of deep suturing to fixed structures to prevent scar migration.
	IV. Describe wound closure techniques in thighplasty including sutures and dressings.
	V. Explain why specific antibiotics are required to prevent infection in this anatomical area.
	VI. Identify and manage common postoperative complications including wound breakdown, and poor scarring.

Key Area 9 Diagnosis, assessment and safe management of Female Genital Cosmetic/Aesthetic Surgery

Topic 1: Anatomy and physiology

9.1.1 Soft tissue anatomy and physiology	I. Describe the anatomy of the external female genitalia with particular reference to nerves and blood supply.
	II. Appreciate that labiaplasty is generally the term used to describe procedures that reduce excess labia minora skin.

Topic 2: Assessing patient suitability for female genital Cosmetic Surgery

9.2.1 Physical assessment	I. Appreciate normal variations in the length, size and pigmentation of the labia minora.
	II. Assess patients for evidence of infection or pre-existing pathology.
9.2.2 Psychosocial assessment	I. Appreciate that patient expectations may be influenced by multiple complex factors, such as culture, self-esteem, social media, and expectations of others.
	II. Appropriately respond to cultural safety considerations.
	III. Confidently discuss labiaplasty with patients and appreciate that there be many factors (e.g. exercise, look, and sexual health) that motivate patients to seek this procedure.
	IV. Appreciate the complex psychological, mental, and emotional impacts that this procedure can have on women, particularly those who are young, vulnerable or those with a history of mental health issues.
	V. Accurately identify patients requiring support from other specialist practitioners and refer appropriately.
9.2.3 Labiaplasty procedures	I. Describe various skin incisions appropriate for labiaplasty and their advantages and disadvantages.
	II. Distinguish between the trim and wedge techniques and variations including the disadvantages and advantages of each.
	III. Describe the ancillary procedures that can be done in conjunction with reducing excess labia minora skin including: labia majora reduction, fat grafting to the mons and Cosmetic medical treatments.
	IV. Describe all the steps in a labiaplasty procedure.
	V. Discuss how to identify, manage and prevent main complications of labiaplasty including haematoma, dehiscence, over-resection, nerve damage and damage to the introitus and competently manage these complications.
	VI. Appropriately identify and manage difficult cases through appropriate referrals to specialist colleagues.
	VII. Appreciate the additional complications for patients requiring revision surgery.