RISKS ASSOCIATED WITH COSMETIC PROCEDURES

The Medical Protective Company

Risk management analysis of closed claims shows a higher rate of litigation when patients have unrealistic expectations about the results of their healthcare. This is especially true when patients seek elective cosmetic treatment.

Doctors who specialize in providing cosmetic services need to be confident that their patients have realistic expectations about the results of treatment. Most providers of cosmetic services are aware that litigation may still occur — even when the clinical outcome was satisfactory — because the patient anticipated a different result.

Patient Misperceptions

Several factors contribute to patient misperceptions. First, the desire to maximize one’s appearance is a highly emotional issue, and some patients expect that a cosmetic treatment or procedure will make them radiantly beautiful rather than simply address a particular cosmetic challenge.

Second, many cosmetic services aren’t covered by insurance, so patients must make significant financial investments to obtain cosmetic procedures or treatments. As a result, some patients find it difficult to accept the possibility that the results may be less than stellar.

Third, some patients are not merely seeking to improve their appearances; they are really trying to become someone else. When such patients discover that — regardless of the clinical results — they must still deal with the same personal issues, their disappointment may be both illogical and unrelenting.

Finally, the doctor and staff need to be sensitive to the possibility that patients may recall promises and optimistic predictions rather than discussions about risks and limitations. Therefore, the importance of informed consent in the cosmetic environment cannot be overstated.

Promises Are Risky

Doctors who promote themselves as cosmetic specialists must be especially careful that their advertising and marketing strategies don’t promise more than they can deliver.
When in the market for “self-improvement,” some prospective patients hear only what they want to hear. For this reason, marketing strategies are often designed to promise emotional rather than physical results.

- “Get the body of your dreams by swimsuit season!”
- “A whole new smile — a whole new outlook on life!”
- “Get the appearance you’ve always wanted!”

None of these slogans offer a physical result; rather, they promise an idealized “happy ever after.” This type of advertising may draw in potential clients, but it also may attract some people whose vision of change is impossible for even the most talented practitioner to help them achieve.

**Advertising as Liability**

Doctors who provide cosmetic care should carefully assess all prospective ads, signs, and brochures designed to sell their services. When reviewing these materials, doctors and staff alike should ask the following questions:

- Will this ad/sign/brochure attract patients who have realistic expectations?
- Will this ad/sign/brochure require that we achieve an impossibly high standard of care?
- Does the language use superlatives, make promises that are unrealistic, urge patients to judge the results by emotional rather than clinical standards? Does the language promise or imply absolute satisfaction?
- Do ads/signs/brochures make critical statements about competitive approaches to the services being offered? Do these comments inadvertently hold the practitioner to a higher standard by comparison?

**Marketing as Liability**

While advertising prods a potential client to take action — to buy a particular product or service — marketing strategies are generally designed to trigger initial interest and help individuals identify wants or needs. Marketing materials may also provide reassurance to a client that he or she has made a wise decision, thereby preventing the post-decision guilt known as “buyers’ remorse.”

Educational materials are an important component of informed consent. They help patients negotiate the sometimes difficult process of formulating their questions. They give doctors the opportunity to clarify and respond to patients’ concerns.

Patient education materials, whether written by the providers themselves or purchased from outside sources, should help patients understand the risks and benefits of proposed treatments. Liability exposures increase when educational materials are
written in terms that maximize the projected outcome of a cosmetic treatment and gloss over its risks.

In their eagerness to support the doctors and contribute to the success of the practice, employees of a cosmetic-focused medical practice may inadvertently mislead patients by referring to the doctors’ skills or past outcomes with glowing terms that might cause patients to assume the same perfect results for their own cases.

It is not uncommon for marketing experts to advise doctors and their teams to engage patients in “acceptance” conversations. However, ethical considerations oppose conscious attempts to manipulate a potential patient into an elective procedure without a clear picture of its potential risks and benefits.

Practice administration should clarify for all members of the team why a particular marketing approach is acceptable and why other tactics are unacceptable.

**Conclusion**

Doctors who market themselves as providers of cosmetic services should be cognizant of the border between a promise of dedicated effort on the patient’s behalf and a promise that the patient will achieve some nebulous vision of perfection.

Advertising and marketing materials should be reviewed for accuracy and for any unintended commitments or promises that might obligate the practitioner to comply with a higher, and perhaps unachievable, standard of care.

Patient education materials should be devoid of marketing hyperbole. Their purpose is to help the patient understand the risks and benefits of a procedure, the treatment plan, and its aftermath, including the patient’s obligation to engage in certain home care procedures and follow-up appointments.

Patients will benefit from their doctors’ clear vision of what cosmetic procedures may be able to achieve — as well as candid evaluations of what they may not be able to deliver.

*This article was produced by the clinical risk management team at Medical Protective, the nation’s oldest professional liability insurance company dedicated to the healthcare professions. For additional information, please contact Laura Cascella at laura.cascella@medpro.com or visit the Medical Protective website at [http://www.medpro.com/](http://www.medpro.com/).*

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