Georgia: the rules for aesthetic practice

What Georgia's laws and boards say about who may do aesthetic treatments, who must supervise them, and who can own the practice.

Nurse practitioners: Restricted Practice

Nurse practitioners

Restricted (AANP). APRNs practice under a written nurse protocol agreement with a delegating physician, signed by both and filed with the Georgia Composite Medical Board within 30 days ($150), with annual reviews kept on file (O.C.G.A. §43-34-25). A physician may hold protocols for the combined equivalent of 8 APRNs and PAs (§43-34-25(g)).

Delegating to RNs, estheticians and staff

RN cosmetic procedures follow the Georgia Board of Nursing position statement "Cosmetic/Aesthetic Procedures" (April 1, 2024); read it for the order requirements. Cosmetic lasers fall under the Cosmetic Laser Services Act: an assistant laser practitioner (PA, LPN, nurse, esthetician or master cosmetologist with 3 approved laser certificates) works under on-site supervision of a senior laser practitioner (PA or nurse under a consulting physician's protocols). Only nonablative services are covered. A consulting physician, PA or APRN examines the patient first, except for laser hair removal and pulsed light (O.C.G.A. §43-34-244; Ga. Comp. R. & Regs. 360-35).

Schedule II

Limited. Hydrocodone or oxycodone only, in emergency situations, initial prescription of no more than 5 days, adults only, after 1 year of experience, written into the protocol, with 1 hour of continuing education every 2 years (§43-34-25(d.1)).

Who can own the practice

The Composite Medical Board says (May 7, 2026, reaffirmed June 4-5, 2026) that a delegating physician may not take pay of any kind from the APRN or an APRN-owned company for serving as the delegating physician, even through a matching, staffing or management company. It reads that as employment barred by §43-34-25(n) and Rule 360-32-.04(5), outside the settings the law exempts, and judges what an arrangement does, not what it's called, so a contractor agreement with the APRN's business doesn't fix it. The Board says this isn't new, isn't cancelling active protocols, will examine these relationships closely, and can't advise on how to structure a practice. No official source says whether the physician co-owning the practice with the APRN avoids the rule. Confirm how the physician is paid with a Georgia healthcare attorney.

The biggest risk in Georgia. Paying the delegating physician from the APRN's business in any form, including through a staffing or matching company, and laser staff without their own Cosmetic Laser Practitioner license.

Check it with your boards: Georgia Board of Nursing - sos.ga.gov/georgia-board-nursing and Georgia Composite Medical Board - medicalboard.georgia.gov. Checked November 3, 2026. Rules change, so read the current rule on the board's own site before you act.

Ask S.A.G.E. next. S.A.G.E., our AI practice advisor, answers from this same Georgia reference, free in your TMAA account, which you can set up at go.medicalaestheticsassociation.com/start-here. Try:

1. I'm an RN in Georgia. What has to be in place before I offer injectables?
2. What must my medical director agreement cover in Georgia?
3. What can an esthetician do in Georgia, and what needs an order?

S.A.G.E. is not legal advice. For a binding answer, talk to a healthcare attorney in your state.