

Medical Director Conversation Guide

How to approach, explain, and onboard a supervising physician

Purpose

Most physicians aren't opposed to supervising aesthetic laser services — they just worry about risk, time commitment, and unclear expectations. The goal of this conversation is to remove uncertainty. You're not trying to "sell" them on the idea. You're showing them the structure already exists and you're inviting them into a defined role.

Who to reach out to

Start with physicians who already understand outpatient care and low-acuity procedures. Family medicine, ER, urgent care, dermatology, and cosmetic providers are usually the most receptive. Avoid surgeons with heavy operating schedules and physicians who have never interacted with cosmetic services. Also avoid anyone who immediately treats the relationship like a business partnership. This is a supervising medical role, not shared ownership.

How to open the conversation

Keep it straightforward and professional.

Example:

"Hi Dr. Smith, I operate a waxing & sugaring salon and we're adding laser treatments that require medical oversight. We follow established protocols and trained providers. I wanted to see if you'd be open to discussing what the supervising physician role typically involves."

Then stop talking. Let them lead with questions.

Do not lead with pay, urgency, or problems you're trying to solve.

How to describe the role

Your explanation should lower perceived workload.

"You wouldn't be performing treatments or running the business. The role is clinical oversight, reviewing protocols, being available if a reaction occurs, and periodic chart review depending on state requirements."

What they are responsible for

- Approving treatment protocols
- Providing guidance if a reaction occurs

- Occasional chart review
- Being reachable for clinical escalation

What they are not responsible for

- Daily operations
- Staff management
- Performing treatments
- Sales or marketing
- Routine client communication

Common questions you'll hear

Who actually performs treatments?

Certified laser technicians who are trained and operate under defined protocols.

What happens if a client has a reaction?

Treatment stops immediately, documentation is created, and you are contacted for guidance or referral.

How much time does this take?

Usually minimal, typically a small number of hours per month depending on state rules.

How often will I be contacted?

Infrequently. Mostly initial setup and rare escalation questions.

What about liability?

The facility maintains professional liability coverage for treatments and staff. Your role is medical oversight within that framework.

When to discuss compensation

Only after they understand the role.

“We typically structure this as a monthly medical oversight agreement. I can send a sample agreement so you can review expectations clearly.”

Red flags

- They want to control operations
- They refuse to review protocols
- They won't be reachable for escalation
- They want a percentage of revenue
- They discourage documentation standards

Next steps after interest

- Send the agreement template

- Confirm insurance requirements
- Agree on the escalation contact method
- Share contact information with staff

Key takeaway

Doctors rarely say no to structured oversight. They say no to uncertainty. Your job in the conversation is simply to make the structure clear.