



Scope of Practice for Dermatologists

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Contact:	HCWS@doh.gov.ae		

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1. Definitions and Abbreviations

No.	Term / Abbreviation	Definition
1.1	Department of Health (DoH)	The regulative body of the Healthcare Sector in the Emirate of Abu Dhabi, established based on Law No. (10) of 2018.
1.2	Competency	The capability of an individual to apply task-related knowledge, skills and abilities required to successfully perform an assigned task in a defined work setting.
1.3	Dermatology	That branch of medicine that deals with the diagnosis, and the medical and surgical management of diseases of the skin, hair, nails and mucous membranes. There are multiple sub-specialties under dermatology, such as: Dermatopathology, Micrographic Dermatologic Surgery, and Pediatric Dermatology.
1.4	May	In the context of this document, 'may' indicates a permission to take a course of action.
1.5	Must	In the context of this document, 'must' indicates a required element that has to be fulfilled.
1.6	Practice Setting	In the context of this document a 'practice setting' refers to a healthcare facility licensed by DoH to deliver healthcare services in areas of prevention, treatment and recovery.
1.7	Privileges	The entitlements of a healthcare professional to provide patient care within a Facility operated by that Provider. Clinical privileges are granted by the privileging committee or similar structure. The clinical privileges are determined by the individual's professional license and scope of practice, experience, competence, as well as the facility license and resources (1).
1.8	Privileging	A process of which the health professional is granted clinical privileges.

1.9

Privileging Committee (or similar structure)

The individual (s) or group that hold the ultimate authority and responsibility for establishing rules and policies, and standards to maintain quality patient care. Examples are medical director, executive medical committee, and speciality board among others. For the purpose of this document, the use of “Privileging Committee” represents the individual or group within a healthcare facility who are responsible for granting, reviewing, renewing, and cancelling of clinical privileges of healthcare professionals.

1.10

Scope of Practice

The predefined range of services, treatments, responsibilities, and activities that might be undertaken within the realm of specific profession.

2.SOP Purpose

The purpose of this document is to:

- 2.1.** Define the scope of medical and surgical services that may be delivered by dermatologist.
- 2.2.** Describe dermatologist’s professional boundaries, accountabilities, ethical and legal obligations toward patients and society.
- 2.3.** Serve as a reference to healthcare workforce, healthcare providers, healthcare payers and governance bodies.

3.SOP Scope

The scope of practice described in this document applies to DOH licensed dermatologists who wish to practice in the Emirate of Abu Dhabi, and to all healthcare providers, public and private, who provide and operate dermatology services.

4.Practice Settings

Dermatologists may practice in a variety of health care settings, including:

- 4.1.** Hospital
- 4.2.** Medical Center
- 4.3.** One Day Surgery Center
- 4.4.** Primary Health Care Center

4.5. Specialized Clinic

4.6. Tele-Medicine Provider

5. Standard of Proficiency

Dermatologists may assume different roles within the continuum of care depending on their training, competencies, experience and clinical privileges. The following sections outline dermatologist's obligations, duties and responsibilities towards self, employer and the society; however, it is not meant to be an all-exhaustive list.

5.1. General obligations

Dermatologists are obliged to observe and abide by a set of requirements in any practice setting; accordingly, they must:

5.1.1. Practice in accordance with UAE local and federal laws, ethical values, standards of professional conduct, delineated clinical privileges, and clinical practice protocols and guidelines published by national or international organizations (2), (3), (4), (5).

5.1.2. Update their medical knowledge and enhance their technical and digital skills continually to achieve best treatment outcomes.

5.1.3. Practice within the scope of the profession, specialty, and license, except during emergency and/or life-threatening situations in which case they must use best endeavors in the interests of preserving health (6).

5.1.4. Deliver dermatologic care services in a licensed facility that provides the appropriate equipment, and other resources necessary for safety and quality of care.

5.1.5. Follow evidence-based practice, clinical practice guidelines, and safety measures, to ensure best possible treatment outcomes and patient safety.

5.1.6. Refrain from performing any medical procedure when the necessary resources are not available unless during emergency situations (6).

5.1.7. Adhere to the limitations on their scope of practice that might be imposed within a specific model of care adopted in the Emirate of Abu Dhabi.

5.1.8. Limit the utilization of diagnostic procedures, prescriptions, and surgical procedures to the extent necessary to manage the patient's case.

5.1.9. Fulfill their reporting obligations to DoH and other pertinent authorities (7), (8), (9).

5.1.10. Fulfill their obligations to protect patient-related data and information, as well as to respect patient privacy and confidentiality (10).

5.1.11. Fulfill their obligations under the current Health Insurance Legislations (11).

5.1.12. Adhere to the mandatory Occupational Safety and Health Code of Practices (CoP) related to their scope of work (12)

5.2. Scope of Patient Care

5.2.1. Dermatologists manage the common ailments, conditions and diseases of skin and visible mucous membranes, nails, hair, mouth, and external genitalia, cutaneous glands and subcutaneous tissue, as well as chronic skin disorders. These include but are not limited to managing patients with:

- Allergies
- Benign and malignant skin cancers and tumors (e.g. melanomas, nevi)
- Blistering disorders
- Common dermatoses
- Cutaneous infections and infestations (parasitic, fungal, bacterial and viral infections)
- Cutaneous manifestations of systemic diseases
- Dermatitis, drug eruptions and other allergic skin disorders
- Dermatological emergencies
- Dermatological manifestations of sexually transmitted diseases
- Diseases of the pilosebaceous unit
- Genodermatoses and developmental anomalies of the skin
- Hair and nail disorders
- Pediatric skin disorders
- Superficial and deep fungal infections
- Tropical dermatoses

5.2.2. In order to respond to patient needs, dermatologists are expected to:

5.2.2.1. Evaluate, diagnose and treat patients

5.2.2.2. Admit patients to inpatient care and one day surgery care when the case warrant admission

5.2.2.3. Perform dermatologic procedures (see 5.2.3)

5.2.2.4. Consult with other healthcare professionals and refer patient whose care requires interventions that are beyond their scope of practice, or necessitates transfer to a different practice setting for better outcomes of care.

5.2.2.5. Consult and collaborate with other healthcare professionals as part of multi-specialty care team, to manage patients:

- with autoimmune and connective tissue disorders
- with dermatological manifestations of psychiatric disorders
- under palliative care for dermatology related morbidities
- with first and second- degree burns

5.2.2.6. Interpret the results of diagnostic laboratory tests such as dermatology relevant serologic tests

5.2.2.7. Prescribe medications following the pertinent regulations and the principle of rational prescribing of medicines (13).

5.2.2.8. Utilize telemedicine technologies in their practice unless the medical condition or disease requires in-person encounter to meet the standard of care (14).

5.2.2.9. Utilize disease altering therapy for the management of skin related vascular disease including recommending compression therapy, performing sclerotherapy, laser and light-based therapy and vascular ulcer treatment

5.2.2.10. Obtain patient consent should they need to utilize medical photography devices for the purpose of documenting the clinical progress of the case provided that patient photographs are protected and kept confidential as any other patient related data and information

5.2.3. Performing dermatology procedures

Performing dermatology procedures requires approval from the healthcare provider's clinical privileging committee based on evidence of education, procedure-specific training, experience and competence, and in alignment with DoH Standard for Clinical Privileging. Dermatologists must report any adverse event that might occur while performing a core or non-core procedure or utilizing equipment.

Dermatology procedures are divided into 2 broad categories based on clinical training and qualifications of dermatologist:

5.2.3.1. Core procedures: These are the clinical procedures that a dermatologist expected be able to perform upon graduating from an accredited postgraduate specialty program (or residency program).

Table 1: Core Procedures List (not exhaustive)

S.N	Core Procedure
1	Chemical denervation for hyperhidrosis
2	Cryotherapy
3	Curettage
4	Dermoscopy
5	Destruction of benign and malignant tumors of the skin, nails or adjacent mucous membranes
6	Electrosurgery
7	Excision of benign and malignant tumors of the skin, nails or adjacent mucous membranes (with simple repair techniques)
8	Incision and drainage of an abscess

9	Intralesional injections
10	Paring of corn and callosity
11	Patch, intradermal, prick and rub skin tests
12	Photodynamic therapy
13	Phototesting and photopatch testing
14	Phototherapy
15	Potassium hydroxide / KOH examination
16	Preparation, microscopic examination and interpretation of skin specimens
17	Skin biopsy (shave, punch, excisional)
18	Temperature testing and using of temperature- based devices
19	Topical, local and regional anesthesia
20	Trichograms
21	Tzanck smears
22	Wood's light examination

5.2.3.2. Advanced (non-core) procedures: These are clinical procedures that dermatologists may perform if these procedures were part of their specialty training outcomes or if the ability to perform them has been obtained through completing a professional clinical training certificate program.

Table 2: Non-core Procedures list (not exhaustive)

S.N	Non-core Procedure
1	Botox / Botulinum toxin injection for aesthetic purposes
2	Chemical peels (superficial, medium and deep)
3	Dermabrasion
4	Dermal Fillers / Soft tissue augmentation
5	Excision of benign and malignant tumors of the skin, nails or adjacent mucous membranes (with intermediate and complex repair techniques)
6	Hair transplant
7	Laser therapy / Laser Surgery Note 1: Laser devices are subject to Ministry of Health and Prevention -MOHAP classification, registration and importation requirements) Note 2: Laser safety training is required
8	Nail Surgery
9	Provocation testing

10	Radiofrequency treatment
11	Sclerotherapy
12	Skin flaps
13	Skin grafts
14	Utilization of sonography (of skin and lymph nodes)
15	Debridement of superficial epidermal and dermal tissue

5.2.4. Other roles of dermatologists

Dermatologists may engage in other activities including but not limited to:

- Authoring, reviewing and publishing journal articles
- Assuming certain responsibilities in healthcare education and training programs as a supervisor, faculty member, lecturer, or a program director
- Issuing medical reports
- Issuing sick leave in accordance with the pertinent regulations (15)
- Providing consultation and advice to other health workforce members related to dermatology
- Providing technical advice as subject matter expert
- Participating in Research projects
- Serving as a member of a specialty-related committee or taskforce
- Supervising interns and residents in the management of dermatologic conditions
- Management and leadership roles in healthcare facilities

6. Specific Learning Requirement / Privileging Requirement

Dermatologists are obliged to complete all the training that is necessary for the delivery of safe and quality dermatologic care. Examples of such training are provided below.

6.1. As a general requirement, dermatologists utilizing any equipment must complete equipment-specific safety training

6.2. Laser safety training is required for utilization of laser devices.

7. Exempted from Scope

None

8.Relevant Reference Documents

No.	Reference Date / Access date	Reference Name	Relation Explanation / Coding / Publication Links
1	13 November 2025	DoH Standard for Clinical Privileging	https://www.doh.gov.ae/en
2	6 September 2022	Ministerial Resolution No. (1448) of 2017 on Adoption of Code of Ethics and Professional Conduct for Health Professionals	https://mohap.gov.ae/ar/w/ministerial-decree-no.-1448-of-the-year-2017-on-adoption-of-code-of-ethics-and-professional-conduct-for-health-professional
3	13 November 2025	DoH Policies, Standards, Resolutions, Bylaws, Manuals and Circulars	https://www.doh.gov.ae/en
4	6 September 2022	Federal Decree Law No. (4) of 2016 Concerning Medical Liability and its Executive Regulations	https://uaelegislation.gov.ae/ar/legislations/1192
5	6 September 2022	Federal Decree Law No. (33) of 2021 Regarding the Regulation of Employment Relationship and its Executive Regulations	https://uaelegislation.gov.ae/ar/legislations/1541
6	8 November 2021	Article 24 of Federal Law No. (5) of 2019 on Regulating the Practice of Human Medicine and its Executive Regulations	https://uaelegislation.gov.ae/ar/legislations/1201

7	6 September 2022	Federal Law on the Prevention of Communicable Disease No. (14) of 2014 and its Executive Regulations	https://uaelegislation.gov.ae/ar/legislations/1198
8	6 September 2022	Federal Law No. (3) of 2016 Concerning Child Rights Law "Wadeema"	https://uaelegislation.gov.ae/ar/legislations/1176
9	13 November 2025	DoH Standard on Reporting Suspected Adverse Drug Reactions and Adverse Events Following Immunization	https://www.doh.gov.ae/en
10	6 September 2022	Federal Law No. (2) of 2019 Concerning the Use of Information and Communication Technology (ICT) in Health Fields	https://uaelegislation.gov.ae/ar/legislations/1209
11	6 September 2022	Health Legislations Encyclopedia: <i>Health Insurance Legislations</i>	https://www.doh.gov.ae/ar/about/law-and-legislations
12	29 July 2022	Abu Dhabi Public Health Center, <i>Code of Practices</i>	https://www.adphc.gov.ae/en/Legislation/Code-of-Practices
13	13 November 2025	Federal Decree-Law No. (38) of 2024 Governing Medical Products, Pharmacists and Pharmaceutical Establishments	https://uaelegislation.gov.ae/ar/legislations/2751
14	18 August 2022	Doh Standard on Tele-Medicine	https://www.doh.gov.ae/en
15	13 November 2025	Standard for the Issuance and Attestation of Sick Leave Certificates	https://www.doh.gov.ae/en