CANADIAN MEDICAL ASSOCIATION

CODE OF ETHICS

1990

Transcribed from the original by

A Keith W Brownell MD, FRCPC and Elizabeth “Libby” Brownell RN, BA

April 2001
THE CANADIAN MEDICAL ASSOCIATION

CODE
OF
ETHICS

Principles of Ethical Behaviour for all physicians, including those who may not be engaged directly in clinical practice.

I
Consider first the well-being of the patient.

II
Honour your profession and its traditions.

III
Recognize your limitations and the special skills of others in the prevention and treatment of disease.

IV
Protect the patient's secrets.

V
Teach and be taught.

VI
Remember that integrity and professional ability should be your best advertisement.

VII
Be responsible in setting a value on your services.
GUIDE TO THE ETHICAL BEHAVIOUR OF PHYSICIANS

A physician should be aware of the standards established by tradition and act within the general principles which have governed professional conduct.

The Oath of Hippocrates represented the desire of the members of that day to establish for themselves standards of conduct in living and in the practice of their art. Since then the principles established have been retained as our basic guidelines for ethical living with the profession of medicine.

The International Code of Ethics and the Declaration of Geneva (1948), developed and approved by The World Medical Association, have modernized the ancient codes. They have been endorsed by each member organization, including The Canadian Medical Association, as a general guide having worldwide application.

The Canadian Medical Association accepts the responsibility of delineating the standard of ethical behaviour expected of Canadian physicians.

An interpretation of these principles is developed in the following pages, as a guide for individual physicians and provincial authorities.
RESPONSIBILITIES TO THE PATIENT

An Ethical Physician:

Standard of Care

1. will practice the art and science of medicine to the best of his/her ability;
2. will continue self education to improve his/her standards of medical care:

Respect for patient

3. will practice in a fashion that is above reproach and will take neither physical, emotional nor financial advantage of the patient;

Patient’s rights

4. will recognize his/her professional limitations and, when indicated, recommend to the patient that additional opinions and services be obtained;
5. will recognize that a patient has the right to accept or reject any physician and any medical care recommended. The patient having chosen a physician has the right to request of that physician opinions from other physicians of the patient’s choice;
6. will keep in confidence information derived from a patient or from a colleague regarding a patient and divulge it only with the permission of the patient except when otherwise required by law;
7. when acting on behalf of a third party will ensure that the patient understands the physician’s legal responsibility to the third party before proceeding with the examination;
8. will recommend only diagnostic procedures that are believed necessary to assist in the care of the patient, and therapy that is believed necessary for the well-being of the patient. The physician will recognize a responsibility in advising the patient of the findings and recommendations and will exchange such information with the patient as is necessary for the patient to reach a decision;
9. will, upon a patient’s request, supply the information that is required to enable the patient to receive any benefits to which the patient may be entitled;
10. will be considerate of the anxiety of the patient’s next-of-kin and co-
    operate with them in the patient’s interest;

    Choice of patient

11. will recognize the responsibility of a physician to render medical
    service to any person regardless of colour, religion or political belief;
12. shall, except in an emergency, have the right to refuse to accept a
    patient;
13. will render all possible assistance to any patient, where an urgent need
    for medical care exists;
14. will, when the patient is unable to give consent and an agent is
    unavailable to give consent, render such therapy as the physician
    believes to be in the patient’s interest;

    Continuity of care

15. will, if absent, ensure the availability of medical care to his/her patients
    if possible; will, once having accepted professional responsibility for an
    acutely ill patient, continue to provide services until they are no longer
    required, or until arrangements have been made for the services of
    another suitable physician; may, in any other situation, withdraw from
    the responsibility for the care of any patient provided that the patient is
    given adequate notice of that intention;

    Personal morality

16. will inform the patient when personal morality or religious conscience
    prevent the recommendation of some form of therapy;

    Clinical research

17. will ensure that, before initiating clinical research involving humans,
    such research is appraised scientifically and ethically and approved by
    a responsible committee and is sufficiently planned and supervised
    that the individuals are unlikely to suffer any harm. The physician will
    ascertain that previous research and the purpose of the experiment
    justify this additional method of investigation. Before proceeding, the
    physician will obtain the consent of all involved persons or their agents,
    and will proceed only after explaining the purpose of the clinical
    investigation and any possible health hazard that can be reasonably
    foreseen;

    The dying patient
18. will allow death to occur with dignity and comfort when death of the body appears to be inevitable;
19. may support the body when clinical death of the brain has occurred, but need not prolong life by unusual or heroic means;

Transplantation

20. may, when death of the brain has occurred, support cellular life in the body when some parts of the body might be used to prolong the life or improve the health of others;
21. will recognize a responsibility to a donor of organs to be transplanted and will give to the donor or the donor’s relatives full disclosure of the intent and the purpose of the procedure; in the case of a living donor, the physician will also explain the risks of the procedure;
22. will refrain from determining the time of death of the donor patient if there is a possibility of being involved as a participant in the transplant procedure, or when his/her association with the proposed recipient might improperly influence professional judgment;
23. may treat the transplant recipient subsequent to the transplant procedure in spite of having determined the time of death of the donor;

Fees to patients

24. will consider, in determining professional fees, both the nature of the service provided and the ability of the patient to pay, and will be prepared to discuss the fee with the patient.
RESPONSIBILITIES TO THE PROFESSION

An Ethical Physician:

Personal conduct

25. will recognize that the profession demands integrity from each physician and dedication to its search for truth and to its service to mankind;
26. will recognize that self discipline of the profession is a privilege and that each physician has a continuing responsibility to merit the retention of this privilege;
27. will behave in a way beyond reproach and will report to the appropriate professional body any conduct by a colleague which might be generally considered as being unbecoming to the profession;
28. will behave in such a manner as to merit the respect of the public for members of the medical profession;
29. will avoid impugning the reputation of any colleague;

Contracts

30. will, when aligned in practice with other physicians, insist that the standards enunciated in this Code of Ethics and the Guide to the Ethical Behaviour of Physicians be maintained;
31. will only enter into a contract regarding professional services which allows fees derived from physicians’ services to be controlled by the physician rendering the services;
32. will enter into a contract with an organization only if it will allow maintenance of professional integrity;
33. will only offer to a colleague a contract which has terms and conditions equitable to both parties;

Reporting medical research

34. will first communicate to colleagues, through recognized scientific channels, the results of any medical research, in order that those colleagues may establish an opinion of its merits before they are presented to the public;

Addressing the public

35. will recognize a responsibility to give the generally held opinions of the profession when interpreting scientific knowledge to the public; when
presenting an opinion which is contrary to the generally held opinion of the profession, the physician will so indicate and will avoid any attempt to enhance his/her own personal professional reputation;

Advertising

36. will build a professional reputation based on ability and integrity, and will only advertise professional services or make professional announcements as regulated by legislation or as permitted by the provincial medical licensing authority;
37. will avoid advocacy of any product when identified as a member of the medical profession;
38. will avoid the use of secret remedies;

Consultation

39. will request the opinion of an appropriate colleague acceptable to the patient when diagnosis or treatment is difficult or obscure, or when the patient requests it. Having requested the opinion of a colleague, the physician will make available all relevant information and indicate clearly whether the consultant is to assume the continuing care of the patient during this illness;
40. will, when consulted by a colleague, report in detail all pertinent findings and recommendations to the attending physician and may outline an opinion to the patient. The consultant will continue with the care of the patient only at the specific request of the attending physician and with the consent of the patient;

Patient care

41. will co-operate with those individuals who, in the opinion of the physician, may assist in the care of the patient;
42. will make available to another physician, upon the request of the patient, a report of pertinent findings and treatment of the patient;
43. will provide medical services to a colleague and dependent family without fee, unless specifically requested to render an account;
44. will limit self-treatment or treatment of family members to minor or emergency services only; such treatments should be without fee;

Financial arrangements

45. will avoid any personal profit motive in ordering drugs, appliances or diagnostic procedures from any facility in which the physician has a financial interest;
46. will refuse to accept any commission or payment, direct or indirect, for any service rendered to a patient by other persons excepting direct employees
and professional colleagues with whom there is a formal partnership or similar agreement.
RESPONSIBILITIES TO SOCIETY

Physicians who act under the principles of this Guide to the Ethical Behaviour for Physicians will find that they have fulfilled many of their responsibilities to society.

An Ethical Physician:

47. will strive to improve the standards of medical services in the community; will accept a share of the profession’s responsibility to society in matters relating to the health and safety of the public, health education, and legislation affecting the health or well-being of the community;

48. will recognize the responsibility as a witness to assist the court in arriving at a just decision;

49. will, in the interest of providing good and adequate medical care, support the opportunity of other physicians to obtain hospital privileges according to individual personal and professional qualifications.

“The complete physician is not a man apart and cannot content himself with the practice of medicine alone, but should make his contribution, as does any other good citizen, towards the well-being and betterment of the community in which he lives.”