

## CODE OF ETHICS - SCHEDULE "B" TO THIS BYLAW

### General Principles

1. Consider first the well-being of the patient.
2. Practice the profession of medicine in a manner that treats the patient with dignity and as a person worthy of respect.
3. Provide for appropriate care for the patient, including physical comfort and spiritual and psychosocial support, even when cure is no longer possible.
4. Consider the well-being of society in matters affecting health.
5. Practise the art and science of medicine competently, with integrity and without impairment.
6. Engage in lifelong learning to maintain and improve your professional knowledge, skills and attitudes.
7. Resist any influence or interference that could undermine your professional integrity.
8. Refuse to participate in or support practices that violate basic human rights.
9. Support the search for new knowledge.

### Responsibilities to the Patient

10. Recognize and disclose conflicts of interest that arise in the course of your professional duties and activities and resolve them in the best interest of patients.
11. Inform the patient when your personal values would influence the recommendation or practice of any medical procedure that the patient needs or wants.
12. Do not exploit patients for personal advantage.
13. Be honest and open with patients; recognize the patient's right to know the patient's past and present medical status. When harm occurs to a patient, disclose it to the patient.
14. Recognize your limitations and recognize the competence of others and, when indicated, recommend or seek additional opinions and services.
15. In determining professional fees to patients for non-insured services, consider both the nature of the service provided and the ability of the patient to pay, and be prepared to discuss the fee with the patient.
16. Provide the patient with any explanation necessary for understanding an account for professional fees.
17. In providing medical service, do not discriminate against any patient on such grounds as age, gender, marital status, medical condition, national or ethnic origin, physical or mental disability, political affiliation, race, religion, sexual orientation, or socioeconomic

status. This does not abrogate the physician's right to refuse to accept a patient for legitimate reasons.

18. Provide whatever appropriate assistance you can to any person with an urgent need for medical care.
19. In an emergency, assist a colleague when the colleague so requests.
20. Having accepted professional responsibility for a patient, continue to provide services until they are no longer required or wanted, until another suitable physician has assumed responsibility for the patient, or until the patient has been given adequate notice that you intend to terminate the relationship.
21. Limit treatment of yourself or members of your immediate family to minor or emergency services and only when another physician is not readily available; there should be no fee for such treatment.

### **Communication, Decision Making and Consent**

22. When providing patient services, ensure that you are clearly identified to the patient.
23. Provide the patients with the information, alternatives and advice they need to make informed decisions about their medical care and answer their questions to the best of your ability.
24. Make every reasonable effort to communicate with the patients in such a way that information exchanged is understood.
25. Ensure that information is available or has been provided to patients so that they know how to obtain care in your absence.
26. Recommend only those diagnostic and therapeutic services that you consider to be beneficial to the patient or to others. If a procedure is recommended for the benefit of others, as for example in matters of public health, inform the patient of this fact and proceed only with explicit informed consent or where required by law.
27. Respect the right of a competent patient to accept or reject any medical care recommended.
28. Respect the patient's reasonable request for a second opinion from a physician of the patient's choice.
29. Acknowledge the patient's right to attend another health care provider.
30. Consider the patient's preference in selection of a consultant.
31. Recognize the need to balance the developing competency of minors and the role of families in medical decision-making. Respect the autonomy of those minors who are authorized to consent to treatment.
32. Ascertain wherever possible and recognize the patient's wishes about the initiation, continuation or cessation of life-sustaining treatment.

33. Respect the intentions of an incompetent patient as they were expressed (e.g. through an advance directive or proxy designation) before the patient became incompetent.
34. When the intentions of an incompetent patient are unknown and when no formal mechanism for making treatment decisions is in place, render such treatment as you believe to be in accordance with the patient's values or, if these are unknown, the patient's best interests.
35. Be considerate of the patient's family and significant others and cooperate with them in the patient's interest.
36. When a patient expresses discontent with medical care received from you, attempt to resolve the issues. If the issues are not resolvable, provide the patient with information about the role of the College and its complaints process.

### **Confidentiality**

37. Protect the personal health information of your patients and respect the privacy of others' personal health information.
38. Respect the patient's right to confidentiality except as provided by the law, or when the maintenance of confidentiality may result in a significant risk of substantial harm to others or to the patient if the patient is incompetent; in such cases, take all reasonable steps to inform the patient that confidentiality will be breached.
39. When a patient threatens to cause serious harm to another person or persons and it is likely that the threat will be carried out, the member must inform the appropriate authority or otherwise ensure that the threatened party is informed.
40. Be aware of the patient's rights with respect to the collection, use, disclosure and access to their personal health information; ensure that such information is recorded accurately.
41. Upon a patient's request, provide the patient or a third party with a copy of his or her medical record, unless there is a compelling reason to believe that information contained in the record will result in substantial harm to the patient or others.
42. Upon the patient's request, supply the information and documentation that is required to enable the patient to receive any benefits to which the patient may be entitled.
43. When acting on behalf of a third party, take reasonable steps to ensure that the patient understands the nature and extent of your responsibility to the third party.

**Responsibilities to Society**

44. Recognize that community, society and the environment are important factors in the health of individual patients.
45. Accept a share of the profession's responsibility to society in matters relating to public health, health education, environmental protection, legislation affecting the health or well-being of the community, and the need for testimony at judicial proceedings.
46. Recognize the responsibility of members to promote fair access to health care resources.
47. Use health care resources prudently.
48. Recognize a responsibility to give the generally held opinions of the profession when interpreting scientific knowledge to the public; when presenting an opinion that is contrary to the generally held opinion of the profession, so indicate.
49. When expressing a medical opinion for public consumption, first communicate to colleagues through recognized scientific channels the results of any medical research, in order that those colleagues may establish an opinion of the merits of the opinion before it is presented to the public.

**Responsibilities to the Profession**

50. Recognize that the self-regulation of the profession is a privilege and that each member has a continuing responsibility to merit this privilege and to support its institutions.
51. Teach and learn from patients, their families, medical students, residents, other colleagues and other health professionals.
52. Avoid impugning the reputation of colleagues for personal motives; however, report to the appropriate authority any unprofessional conduct by colleagues.
53. When a member reasonably believes that another member may have displayed a pattern of deficiency in care, inform the responsible authority.
54. A member who reasonably believes that another member:
  - a) is unfit to practise, incompetent or unethical; or
  - b) suffers from a mental or physical disorder or illness that may affect his or her fitness to practise, and continues to practise despite having been counselled not to;must disclose the belief to the registrar, along with the name of the other member and particulars of the suspected disorder, illness, lack of fitness to practise, incompetency or unethical behaviour.
55. Be willing to participate in peer review of yourself and other members and to undergo review by your peers. Enter into associations, contracts and agreements only if you can maintain your professional integrity and safeguard the interests of your patients.

56. Avoid promoting, as a member of the medical profession, any service (except your own) or product for personal gain.
57. Share with colleagues the diagnostic or therapeutic agents and procedures that you employ.
58. Collaborate with other members and health professionals in the care of patients and the functioning and improvement of health services. Treat these colleagues with dignity and as persons worthy of respect.

**Responsibilities to Oneself**

59. Promote and maintain your own health and well-being.
60. Seek help from colleagues and appropriately qualified professionals for personal problems that might adversely affect your service to patients, society or the profession.

**Clinical Research**

61. Ensure that any research in which you participate is evaluated both scientifically and ethically and is approved by a research ethics board that meets current standards of practice.
62. Inform the potential research subject, or proxy, about the purpose of the study, its source of funding, the nature and relative probability of harms and benefits, and the nature of your participation including any compensation.
63. Before proceeding with the study, obtain the informed consent of the subject, or proxy, and advise prospective subjects that they have the right to decline or withdraw from the study at any time, without prejudice to their ongoing care.

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