

ACOFP CODE OF ETHICS

Adopted June 14, 2017 by the ACOFP Board of Governors

Preamble

To promote the highest quality of healthcare to our patients, the ACOFP Committee on Ethics has formulated the following Code to serve as a guide to aid osteopathic family physicians in their professional lives. The standards presented are designed to address the osteopathic family physician's responsibility to his/her patients, the families in their charge, professional colleagues, and to society, as a whole. The Articles are not meant to be the only ethical standards a prudent osteopathic family physician should follow, as conference of the Doctor of Osteopathic Medicine degree itself carries inherit responsibilities.

Article 1

The osteopathic family physician, shall keep in confidence personal and medical information obtained about a patient or a family while performing his/her professional duties. Information thus obtained shall never be divulged by the osteopathic family physician except when required or allowed by law or when authorized by the patient or responsible party.

Article 2

The osteopathic family physician shall give a candid account of the patient's condition to the patient or to those responsible for the patient's care who are authorized by the patient or by law to received health information regarding the patient.

Article 3

A physician/patient relationship should be founded on mutual trust, mutual cooperation and mutual respect. The patient must have complete freedom to choose his/her physician. The physician must have complete freedom to choose patients whom he/she shall serve. However, the physician should not refuse to accept patients solely on the basis of distinguishing characteristics, including but not limited to, race, color, religion, gender, sexual orientation, gender identity, or national origin.

Article 4

When terminating the physician/patient relationship or withdrawing from a case, the physician should give due notice to the patient, family or those responsible for the patient's care so that another physician may be engaged. The withdrawing physician should make himself/herself available during the transition period so that the transfer of care of the patient is as seamless as possible and affords the patient the highest quality of care. An osteopathic family physician who renders emergency care to a patient whom he/she has withdrawn from is considered to have acted in a professional and ethical manner.

Article 5

The osteopathic family physician should practice within the confines of what is considered to be standard of care, based on a body of recognized systematized and scientific knowledge principles. An osteopathic family physician should maintain competence in such principles by demonstrating a devotion to lifelong education.

Article 6

An osteopathic family physician recognizes the value of his/her professional associations and should be encouraged to maintain membership in the American College of Osteopathic Family Physicians and remain in good standing. The osteopathic family physician realizes that to preserve autonomy, his/her participation in state and regional activities promotes self-regulation and his/her participation should be encouraged. Dedicated to the principle of lifelong education, the osteopathic family physician should participate in regional, state and national Continuing Medical Education programs.

Article 7

An osteopathic family physician shall not advertise for, or solicit patients directly or indirectly, using terms or claims that are false or misleading.

Article 8

An osteopathic family physician shall not claim to have or indicate possession of any degree recognized as the basis for licensure to practice the healing arts unless he/she actually licensed on the basis of that degree in the state where the practice is located. An osteopathic family physician shall display the DO degree and other indications of specialty practice in accordance with the rules of the American Osteopathic Association and the American College of Osteopathic Family Physicians.

Article 9

An osteopathic family physician shall obtain appropriate consultation whenever it is deemed advisable for the care of the patient or requested by the patient, family, or those responsible for the patient's care.

Article 10

In any dispute among physicians involving ethical or organizational matters, the matter in controversy should be referred to the appropriate arbitrating bodies. Prior to that action, the physicians with opposing views, should make every effort to settle the dispute between each other amicably, enlisting the aid of colleagues if necessary.

Article 11

In any dispute between or among physicians regarding the diagnosis and treatment of a patient, the attending physician has the responsibility for the final decision regarding the treatment plan for the patient. In all cases, the physicians should not draw patients into the disagreement or make the patient choose a side.

Article 12

Any fee charged by an osteopathic family physician shall represent services actually rendered or supervised by that physician and should compensate him/her for those services performed for the benefit of the patient. Division of professional fees, commonly known as fee splitting, for the express purpose of patient referrals, is unethical.

Article 13

An osteopathic family physician shall respect the law. He/she should also attempt to promote and support laws in local, state and national political arena that will improve both patient care and public health.

Article 14

An osteopathic family physician recognizes his/her position in the dynamics of the community in which they live and practice. They should make every effort to participate in community activities and services whenever possible.

Article 15

An osteopathic family physician shall consider a romantic relationship or sexual misconduct with a patient to be unethical. Sexual misconduct is defined as sexual contact or an attempt to have sexual contact with any patient with whom the physician has a concurrent physician/patient relationship. Sexual or romantic relationships with former patients are considered unethical if the physician uses or exploits trust, knowledge, emotions or influence derived from the previous professional relationship.

Article 16

An osteopathic family physician shall consider sexual harassment to be unethical. Sexual harassment is defined as a physical act or verbal statement of intimidation of a sexual nature involving a colleague or subordinate, which creates an unreasonable, intimidating hostile or offensive workplace or academic setting.

Article 17

The osteopathic family physician shall honor the family unit and work to preserve, strengthen and protect it as being fundamental to the care of our patients.

Article 18

An osteopathic family physician shall be supportive of osteopathic colleges and state and national osteopathic organizations. The osteopathic family physician shall not engage in slander or acts of sedition towards the osteopathic profession or its supporting organizations.

###