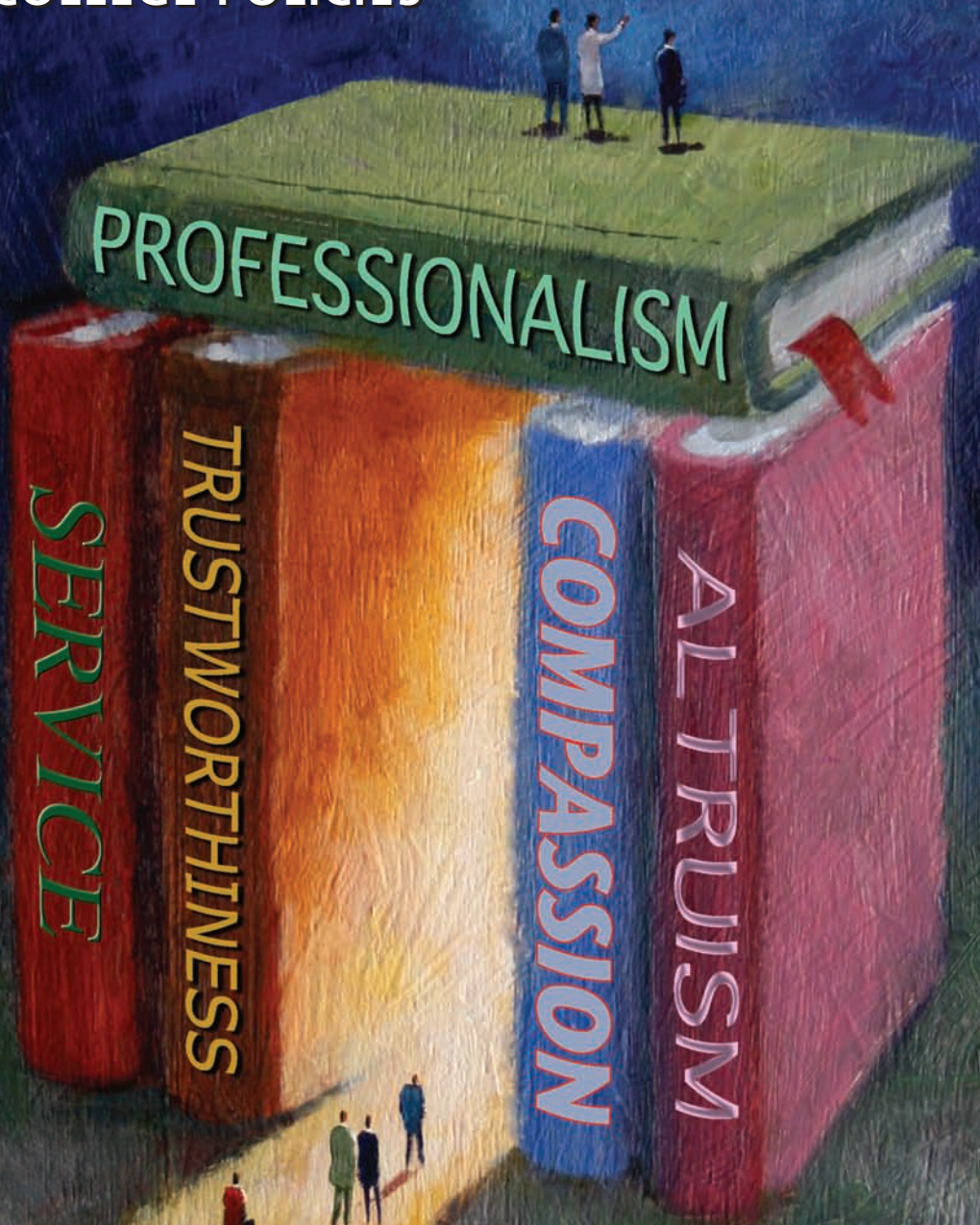




COLLEGE OF PHYSICIANS AND SURGEONS OF ONTARIO

The Practice Guide

MEDICAL PROFESSIONALISM
AND COLLEGE POLICIES



SEPTEMBER 2007



THE
COLLEGE
OF
PHYSICIANS
AND
SURGEONS
OF
ONTARIO

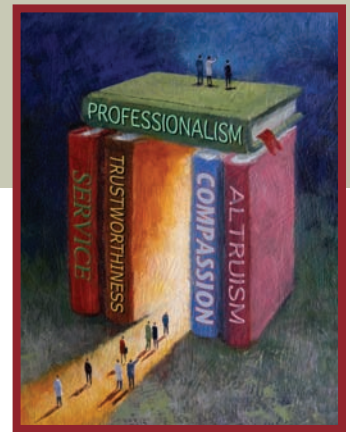
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For the most recent version, please see the practice guide on-line at www.cpso.on.ca.

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College of Physicians and Surgeons of Ontario
80 College Street, Toronto, Ontario M5G 2E2
Telephone: (416) 967-2600

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Cover image: Andrew Judd

Medicine is about compassion, service, altruism, and trustworthiness, values that have always and will continue to guide the profession

Introduction

The purpose of this practice guide is to articulate the expectations of the medical profession for its members. The guide does not set out any new expectations for physicians, but is an articulation of existing values that provide the foundation for the practise of medicine. From these overarching values flow principles of practice and related duties. Together, the values, principles and duties of medical professionalism enable the profession to provide the best quality care.

Medical professionalism is the translation of the values of the profession — compassion, service, altruism, and trustworthiness — into action. Medical professionalism is demonstrated when these values are upheld in the everyday interactions that comprise each doctor's own medical practice.

Professionalism also underpins the social contract between the medical profession and the public: in return for a monopoly over the practice of medicine, professional autonomy and the privilege of self-regulation, the profession has made a commitment to competence, integrity, altruism, and the promotion of the public good within its domain. This social contract is reflected in the ethical tenets of the profession, the legislation governing the profession, and the standards of practice for physicians.

The social contract is a covenant of the profession as a collective. Individual physicians are not expected to assume responsibility for society at large, but to uphold the social contract through their commitment to their profession, their medical practice, and their patients.

This practice guide is intended to:

1. Articulate the profession's values and the principles of medical practice;
2. Provide assistance to the membership in determining its specific duties and the reasons for those duties; and
3. Organize the existing policies of the College of Physicians and Surgeons of Ontario within a principled framework and provide a basis for new policy development. All College policies will be explicitly grounded in the values, principles and duties set out in this guide. Practical examples will illustrate how the policies apply in day-to-day medical practice.

The values, principles and duties are intended to provide broad guidance to the profession, rather than describe specific standards for practice or create legal obligations. Physicians are encouraged to refer to the relevant College policies for more specific guidance about their obligations, including those set out in legislation and by-law.

Assimilating into day-to-day practice the values, principles and duties set out in this guide is a high ideal that may seem to be overwhelming. However, it is worth striving for and is not unachievable. In fact, it is exhibited daily in physicians' offices and hospitals across Ontario, reflecting the longstanding tradition of excellence in the medical profession.

The overarching values — compassion, service, altruism, and trustworthiness — and the principles of the profession will remain constant. The specific duties that flow from the values/principles, however, may change as the environment changes. This guide has been prepared with the recognition that change is inevitable and any guidance to the profession should be capable of responding to new issues. To remain responsive, the College welcomes your feedback on this guide and the policies it frames.



THE ROLE OF THE COLLEGE OF PHYSICIANS AND SURGEONS OF ONTARIO

The College is the embodiment in statute of the ethics of the profession. The College's primary obligation to the public is to ensure that members of the profession are competent in the areas in which they practice. The College's motto is 'The best quality care for the people of Ontario by the doctors of Ontario'. Quality care involves more than clinical excellence—it is also safe, effective and compassionate practice.

Incorporating ethical principles of practice and existing legislation into College policies is one way for the College to fulfill its mandate of ensuring quality care for the people of Ontario. The College and, through the College, the profession, expect compliance with these policies.

USE OF THIS GUIDE

The practice guide outlines to the profession and the public the expectations the medical profession holds for itself. It can not and is not intended to address every situation that may arise in the practice of medicine. For specific situations that are not covered here, physicians should rely on the values and principles articulated to guide their practice, and should not hesitate to seek advice.

This practice guide does not stand alone. There are many resources available, which through varying approaches, provide excellent guidance to physicians on how to practice well. These include the principles of bioethics, the Royal College of Physicians and Surgeons of Canada's CanMEDS framework, the Canadian Medical Association's Code of Ethics, and codes and guidelines from other medical leaders across Canada and internationally. The CPSO's practice guide is not intended to replace these resources; rather, it is intended to organize the information in a way that will best guide *Ontario* physicians in how to meet the expectations of their profession. It should be used in companionship with other resources, rather than in isolation. A more complete list of helpful resources has been provided at the end of this document.

This guide is designed to be of use to multiple stakeholders, including: practising physicians; patients and the public; medical students and residents; educators and clinical teachers; other health care professionals; administrators; and government and public officials.



Values of the Profession

Medicine is about **compassion, service, altruism, and trustworthiness**, values that have always and will continue to guide the profession. These values are the basis for the principles, duties and policies that follow.

COMPASSION

Individual doctors serve their patients by assessing, diagnosing and treating patients, and through rehabilitation and habilitation, palliation, health promotion, and disease prevention. However, medicine is more than procedures and physicians are more than purveyors of technology. Compassion is fundamental to the relationship between the patient and the doctor. Compassion is defined as a deep awareness of the suffering of another coupled with the wish to relieve it.

SERVICE

Service means working for the benefit of another. Doctors in Ontario are dedicated to serving their patients.

To serve their patients, physicians must be competent in the medical areas in which they practice. Competence requires the application of current knowledge with requisite skill and judgment needed to meet the patient's medical needs. In this, physicians should strive for excellence.

Service is not only competence; it is also putting the patient first. A physician has professional responsibility to their patients, individually and collectively; their patients' families; their own practice; and the health care system. However, at any given time a physician's primary responsibility is to the individual patient before them.

Physicians, as a profession, also have a collective responsibility to the public, which is demonstrated by collaborating with and supporting colleagues and other health professionals, and participating in self-regulation in the public interest. The profession has a critical respon-

sibility to the public as a whole via its responsibility to regulate. Just as doctors serve patients, the College, as the representative of the profession in self-regulation, has the ethical and statutory responsibility to serve the public by regulating physicians in the public interest.

ALTRUISM

Altruism, as a principle of action, is the highest commitment to service. Altruism in medicine is defined as practising unselfishly and with a regard for others.

Patients' needs are paramount and must be considered before the individual physician's needs, the needs of physicians as a group, or the public as a whole. This is not to say that physicians must sacrifice their health or other important aspects of their life for their patients. Rather, it means that when providing care to a patient, a physician should always put that patient first.

TRUSTWORTHINESS

Trustworthiness is the cornerstone of the practice of medicine. It is the demonstration of compassion, service and altruism that earns the medical profession the trust of the public. This trust manifests itself in the social contract between the profession and the public, as well as the relationship an individual patient has with his or her doctor.

Maintaining trust is an important aspect of medical professionalism. Patients must be able to trust that the physician will always uphold the values of the profession; in the absence of the trusting relationship the physician cannot help the patient and the patient cannot benefit from the relationship.

Principles of Practice and Duties of Physicians

Overarching principles of practice flow from the values articulated above. The principles of practice, in turn, ground the specific duties of the individual physician.

Physicians accepted into practice in Ontario meet a standard of excellence in education and performance. Patients trust their physicians to be clinically competent in all areas of their practice. However, competence is more than just clinical skills and knowledge; it is also practising safely and effectively. Safe and effective care is achieved when physicians know about and abide by their professional obligations, and are competent as communicators, collaborators, advocators, and managers. It is expected that throughout a physician's career he or she will maintain his or her competence to ensure that patients receive the best care possible.

The principles of practice listed below encompass these competencies. Duties reflect the profession's values and demonstrate the principles of practice in action.

A. INDIVIDUALLY TO THE PATIENT

Principles of Practice

The doctor-patient relationship is the foundation of the practice of medicine. It reflects the values of compassion, service, altruism, and trustworthiness. Trustworthiness is the cornerstone of the doctor-patient relationship; without trust a good doctor-patient relationship cannot exist.

Physicians have a fiduciary duty to their patients—because the balance of knowledge and information favours the physician, patients are reliant on their physicians and may be vulnerable. The patient must always be confident that the physician has put the needs of the patient first. This principle should inform all aspects of the physician's practice.

Physicians are expected to make their patient's needs the first priority, but accomplishing this requires a broader focus than the direct physician-patient relationship. In order to meet individual patient needs, physicians should consider their contributions to their individual patients, but also to their own practice, the community, and the health care system. Physicians hold a respected position in society and, in return, they have responsibilities. Physicians should never forget that their primary

responsibility is to the patient(s) standing before them, either individually or collectively.

Duties

1. Demonstrating Professional Competence

Physicians should be skilled clinicians committed to the values of the profession.

Physicians should be committed to lifelong learning and be responsible for maintaining the medical knowledge and clinical skills necessary to provide the highest possible quality of care to patients.

At all times physicians should:

- be aware of deficiencies in knowledge or ability;
- obtain help when needed; and
- ensure that their practice matches their level of competence.

In terms of individual patient care, physicians should provide medical care based on objective evidence whenever possible. This includes demonstrating a sense of inquiry and taking a scientific approach to solving clinical issues for the benefit of the patient.

Relevant Existing Policies & Publications

- Complementary Medicine
- Prescribing Practices
- Medical Records
- Requirements When Changing Scope of Practice
- Requirements When Re-Entering Medical Practice
- Ultrasound for Non-Medical Reasons
- Anabolic Steroids
- Female Circumcision, Excision and Infibulation
- Preventing Medication Errors
- Professional Responsibilities in Postgraduate Medical Education
- Professional Responsibilities in Undergraduate Medical Education
- Physicians with Blood Borne Pathogens
- Medical Marijuana
- Proposed Revalidation Program

Principles of Practice and Duties of Physicians

- A Practical Guide for Safe and Effective Office-Based Practices
- Infection Control in the Physician's Office
- Clinical Practice Guidelines—Position Statement
- Boundaries Self-Assessment Tool
- Prescription Drug Abuse
- Regulations Concerning Benzodiazepines and Other Targeted Substances
- Clinical Practice Guidelines and Parameters

2. Maintaining Confidentiality

An important component of trust is the honest and compassionate communication of information in complete confidence.

Receiving and giving sensitive patient information is essential to the physician's ability to provide quality care to the patient. Patients give information to physicians in a unique context where they have the utmost faith that the physician will maintain patient privacy and confidentiality.

Physicians must safeguard patient information. Occasionally, however, their responsibility to the public outweighs their responsibility to an individual patient, necessitating reporting to another party.

Relevant Existing Policies & Publications

- Confidentiality of Personal Health Information
- Cooperation with the College
- Female Circumcision, Excision, and Infibulation
- Mandatory Reporting
- Medical Records
- Prescribing Practices
- Shadowing: Observing Physicians in a Clinical Setting
- Third Party Reports
- Faxing Prescriptions
- Telemedicine

3. Collaborating with Patients and Others

Providing the best quality care for the people of Ontario requires physicians to work together effectively—with patients, other doctors and other health professionals—within the organizations, institutions and systems for health care delivery in Ontario.

Collaboration with an individual patient is essential to providing good medical care. The physician must work with the patient in order to understand the patient's health care needs, to formulate treatment plans that are optimal for the patient, to ensure that the patient remains informed about his or her care, and to address patient questions and concerns. To maximize the effectiveness of collaboration, physicians must have patients' trust, which is maintained, in part, through effective communication and treating patients with respect.

Collaboration is not only about getting along and treating others with respect—although this is extremely important—it is also about recognizing and accepting the unique roles and contributions of other health professionals. The best interests of patients are served when physicians utilize the skills of others, whether they are physicians or other health professionals.

Good quality health care is often delivered by a team of professionals and individuals who contribute expertise in a variety of ways. To achieve the goal of providing the best possible health care to patients, physicians should also make a commitment to those others who share this goal. Physicians should work respectfully and collaboratively with other members of the health care team to maximize the quality of patients' care.

Relevant Existing Policies & Publications

- Complementary Medicine
- Physician Working Relations with Pharmacists
- Fostering Collaborative Relationships with Nurse Practitioners
- Disruptive Physician Behaviour Initiative
- Methadone Administration in the Treatment of Opioid Dependence
- Faxing Prescriptions
- Telemedicine



4. Communicating with Patients and Others

Good communication is a fundamental component of a trusting doctor-patient relationship. Communications with patients, their families, colleagues, and other health care professionals should always reflect civility and professionalism.

Physicians should ensure that patients are appropriately informed about their medical care. All communication with patients should recognize an individual patient's autonomy and demonstrate a collaborative approach to patient decision-making.

Physicians should demonstrate cultural sensitivity in their communication with patients and families.

Physicians should demonstrate an awareness of their own values and how their values relate to or differ from those of their patients and families.

While communicating with compassion and engendering the trust of patients are vital to the doctor-patient relationship, physicians should also be aware of boundary issues and the potential for transference in the doctor-patient relationship.

Should conflict arise, either between the physician and patient, or the patient's family, the physician should work with the patient, the patient's family (if the patient consents) and any other supports to resolve the conflict respectfully. However, if the patient wishes to limit the information available to family or even other health care professionals who are also providing care, the physician must respect that decision.

In communications with the community at large, physicians must ensure that representations they make are, to the best of their knowledge, truthful.

Physicians should participate in educating patients and colleagues to ensure that medical knowledge is appropriately conveyed to facilitate health promotion and disease prevention.

Relevant Existing Policies & Publications

- Consent to Medical Treatment
- Disclosure of Harm
- Advertising by MDs
- Decision-Making for the End of Life
- Use of Title "Plastic Surgeon"
- Complementary Medicine
- Ending the Physician-Patient Relationship
- Avoid Complaints of Sexual Abuse
- Medical Records
- Physician-Patient 'Dating'
- Boundaries Self-Assessment Tool
- Practice Management Considerations for Physicians Who Cease to Practise, Take an Extended Leave of Absence or Close Their Practice Due to Relocation

5. Managing Conflicts of Interest

A physician must always act in the patient's best interests.

A physician's interests should not be in conflict with the patient's. Any conflicts of interest must be properly managed so as not to compromise the patient's best interests, or be avoided.

Physicians should guard against compromising their duty to their patients by pursuing personal advantage, whether financial or otherwise, at the expense of the patient. Physicians, like any other member of society, are entitled to earn an income and be paid appropriately for their services to patients. However, in all situations where a conflict of interest arises in the course of professional duties and activities, physicians should recognize the conflict, ensure that the patient's best interests remain paramount and, where appropriate, disclose the conflict of interest to the patient.

Physicians should also be aware of the possibility of damage to the reputation of the profession by the appearance of a conflict, even though an actual conflict may not exist, and avoid creating such a perception.

Principles of Practice and Duties of Physicians

Relevant Existing Policies & Publications

- Conflict of Interest
- Conflict of Interest: Recruitment of Subjects for Research Studies
- Advertising by MDs
- Disclosure of Harm
- Block Fees and Uninsured Services
- Drug Samples (Clinical Evaluation Packages)
- MDs Relationships with Drug Companies
- Treating Self and Family Members
- Withdrawal of Physician Services During Job Action

6. Advocating for Patients

Advocacy is an important component of the doctor-patient relationship; physicians should, individually and collectively, advocate for their patients. Advocacy involves the responsible use of expertise and influence to advance patients' health care interests.

Individuals: The health care system is a complex network of care providers, services and benefits. To ensure that patients receive fair and efficient treatment by others involved in their care, physicians should use their knowledge of the system to assist their patients in successfully navigating this network.

Communities and Populations: Physicians have a responsibility to advocate on behalf of their patients to advance policies that promote the health and well-being of the public.

Relevant Existing Policies & Publications

- To be developed

B. AS A MEMBER OF THE PROFESSION, COLLECTIVELY TO THE PUBLIC

Principles of Practice

That the values of compassion, service, altruism, and trustworthiness apply to the individual doctor-patient relationship is clear. Physicians have responsibilities to patients which, as noted earlier, are paramount. However, these values are also reflected in the individual physician's responsibility to the profession of medicine, inasmuch as the medical profession works together to serve the public interest.

Relevant Existing Policies & Publications

- Ethical Recruitment of International Medical Graduates
- Registration Policies

Duties

1. Participating in Self-Regulation

Physicians have been granted the privilege of self-regulation. Society allows physicians to regulate themselves in return for the covenant that this regulation will occur in the public interest. The social contract between the public and the profession places certain responsibilities on the physician as an individual, with respect to his or her colleagues and with respect to collective involvement for the best interests of patients and the community. Meeting these responsibilities requires efficient and appropriate governance and a reliable system of accountability. It is not enough for physicians to accept regulation. To ensure the continuity of self-regulation, each physician should, along with the College, participate in the self-regulatory process.

The goal of regulation is to serve the public by ensuring the best quality care for patients in Ontario. Both the College and individual physicians have a responsibility to ensure quality care by continually improving skills and behaviour as well as responding to concerns around practice/behaviour.



The responsibility for maintaining medical professionalism lies with physicians themselves. Acting in concert with his or her peers, each physician contributes to defining the expectations or standards of the profession as a whole. Individually, each physician upholds those standards in his or her own actions. Fulfillment of this duty is essential to self-regulation.

Relevant Existing Policies & Publications

- Cooperation with the College
- Professional Misconduct
- Mandatory Reporting
- Physicians with Blood Borne Pathogens
- Disclosure of Harm
- Criminal Record Screening
- Requirements When Re-Entering Medical Practice
- Requirements When Changing Scope of Practice
- Professional Responsibilities in Postgraduate Medical Education
- Professional Responsibilities in Undergraduate Medical Education
- Proposed Revalidation Program
- Registration Policies
- Telemedicine
- Guidelines for Supervision

2. Reporting

Physicians must be aware of their reporting obligations and be truthful and forthright in their reports, whether in the context of patient charting, recording of research results, or providing expert information to third parties (i.e., the court, WSIB, insurance companies).

Physicians have a legal and professional duty to keep information about their patients private and confidential. However, under certain circumstances, physicians are required by law, or expected by the College, to report particular events or patient conditions to the appropriate government or regulatory agency. These are ‘mandatory reports’, and are an acceptable breach of patient privacy and confidentiality for a greater societal good.

Relevant Existing Policies & Publications

- Mandatory Reporting
- Medical Records
- Physicians with Blood Borne Pathogens
- Third Party Reports
- Confidentiality of Personal Health Information

3. Educating

Physicians should teach and learn. The profession, and its service to patients, can only be improved by taking a collaborative approach, participating in peer reviews, supporting each other, educating and mentoring each other, and participating in formal education—both within and outside of the profession.

When they are involved in teaching others, physicians should provide instruction in the context of the values set out above.

By teaching others—colleagues, students, other health professionals, their patients, and the community—physicians help ensure that high quality care will be provided to their individual patients and the public in general.

Relevant Existing Policies & Publications

- Professional Responsibilities in Postgraduate Medical Education
- Professional Responsibilities in Undergraduate Medical Education
- Requirements When Changing Scope of Practice
- Requirements When Re-Entering Medical Practice
- Shadowing: Observing Physicians in a Clinical Setting
- Guidelines for Supervision

4. Learning

Physicians have a duty to seek out new evidence and knowledge, to share this knowledge with others and to apply it in practice.

Physicians are expected to keep abreast of current developments in their field, which includes maintaining an awareness of relevant practice guidelines and implementing them as appropriate. All research must be initiated and pursued in an ethical manner.

Principles of Practice and Duties of Physicians

Relevant Existing Policies & Publications

- Professional Responsibilities in Postgraduate Medical Education
- Professional Responsibilities in Undergraduate Medical Education
- Drug Samples (Clinical Evaluation Packages)
- Prescribing Drugs That Have Not Been Approved for Use in Canada
- Clinical Practice Guidelines—Position Statement
- Guidelines for Supervision

5. Advocating for a Safe Health Care System

A health care system that balances safety, caring and effectiveness is the best way to ensure patients receive high quality care. To improve the quality of care that the system provides, physicians should work collaboratively with other professionals to reduce the incidence of medical error and adverse outcomes.

Physicians should also collaborate with others for the effective management of health care resources.

Relevant Existing Policies & Publications

- Delegation of Controlled Acts
- Disclosure of Harm
- Withdrawal of Physician Services During Job Action
- Methadone Administration in the Treatment of Opioid Dependence
- Practice Management Considerations for Physicians Who Cease to Practise, Take an Extended Leave of Absence or Close Their Practice Due to Relocation
- Syringe Disposal

6. Collaborating With Other Health Care Professionals

In addition to an individual physician's responsibility to collaborate with other members of a health care team in providing care to individual patients, physicians as a group have a responsibility to collaborate with other health care professionals in order to serve Ontario patients.

This kind of collaborative interaction between physicians and others includes the exchange of information; developing collaborative guidelines; fostering positive relationships at the institutional level; sharing decision-making, where appropriate and in the patient's best interest; and developing policies that ensure quality of care.

Relevant Existing Policies & Publications

- Confidentiality of Personal Health Information
- Complementary Medicine
- Delegation of Controlled Acts
- Mandatory Reporting
- Physician Working Relations with Pharmacists
- Fostering Collaborative Relationships with Nurse Practitioners
- Disruptive Physician Behaviour Initiative

C. TO THEMSELVES AND COLLEAGUES

Principles of Practice

The practice of medicine is challenging. Physicians are expected by the profession and the public to meet high standards for excellence in the care they provide to patients. In addition, physicians often face competing demands—from patients, other health care professionals, the health care system, and from the expectations the physician holds for him or herself. These factors can give rise to stress, fatigue, exhaustion and frustration, which can have an impact on both the physician personally and the care the physician is able to provide to his or her patients.

Physicians, as a group, should provide mentorship, support and care to one another, in order to ensure their patients receive quality care, as well as to maintain their own personal wellness.



Duties

1. Mentorship

Physicians should be prepared to provide to colleagues, and accept from colleagues, both formal and informal mentorship. Mentorship involves the sharing of knowledge, experience and ideals, and allows physicians the opportunity to obtain advice and support in their various physician roles. As mentors, physicians should lead by example.

Mentorship is also an informal mechanism for maintaining the high expectations and standards of the profession.

Relevant Existing Policies & Publications

- Shadowing: Observing Physicians in a Clinical Setting

2. Wellness

Physician wellness is a critical component of the professional practice of medicine. Wellness is defined as the condition of good physical and mental health necessary to provide high quality care to patients and to fulfill the duties noted above.

Because physicians cannot serve their own patients if they are not well, physicians may have to put their own needs for wellness ahead of the needs of individual patients or the public as a whole in some circumstances.

Physician wellness is also important for its own sake, independent of any responsibility to others.

Physicians should only care for patients when they are well enough to do so. In order to ensure that patients receive high quality care, physicians have a responsibility to:

- be aware of their own health, which includes being able to recognize when they are not well enough to provide competent care;
- obtain help, if necessary, from colleagues, their own physician, or other supports, in order to ensure their own wellness;
- adjust their practice, as necessary, to ensure that patients can and do receive appropriate care.

The best interests of patients are served when physicians take time to meet their own needs and are continually aware of their own wellness. This means recognizing limits imposed by fatigue, stress or illness and taking care to ensure a healthy work-life balance. This is not always easy. Physicians set high expectations for themselves and may not immediately recognize either transient or longer term periods of incapacity. Recognition of transient incapacity is particularly difficult.

In leading by example for patients and colleagues, physicians should avoid self-treatment. Instead, physicians should try to establish a relationship as a patient with another physician they trust for care and should seek advice about their own care from that physician.

If a physician knows that he or she has a serious condition that could be passed on to patients, or that his or her judgment or performance could be significantly affected by a condition or illness, or its treatment, that physician should seek professional advice about ongoing clinical practice.

Relevant Existing Policies & Publications

- Physicians with Blood Borne Pathogens
- Ending the Physician-Patient Relationship
- Treating Self and Family Members
- Physician Health Program (Ontario Medical Association)
- Infection Control in the Physician's Office

3. Collegiality

Collegiality is cooperative interaction between colleagues. The collegiality of relationships can affect the comprehensiveness and continuity of care patients receive, particularly through the referral and consultation processes. For this reason, physicians should be collegial in their dealings with one another. Mutual trust, respect, and knowledge of each other's expertise, skills and responsibilities are all important to establishing collegial relationships.

Managing Conflicting Duties

This is not to say that collegiality may be used to mask ineffective or inappropriate practice, or to protect incompetent or incapacitated physicians. Rather, physicians should accept and support meaningful peer evaluation as a mechanism for upholding the standards of the profession.

Collegiality also fosters cooperation as a profession. At times, it is as a unified voice that physicians can best advance their patients' interests. Physicians should support each other not only individually, but should also, collectively, support the profession in working for the public interest.

Physicians should enter into professional associations and collaborations only if, in doing so, they can maintain professional integrity and safeguard the interests of their patients.

Relevant Existing Policies & Publications

- Disruptive Physician Behaviour Initiative

MANAGING CONFLICTING DUTIES

Conflict among the duties outlined in this guide is inevitable. When conflict arises, physicians should first refer to the fundamental values that ground the principles and duties that follow. For example, if there is a conflict between a physician's obligation to a patient and the obligation to the system (e.g., efficiency), the profession's commitment to the value of altruism makes it clear that the patient should always come first.

Conflicts will not always involve a clear choice between values, instead requiring a balancing of duties and values to determine the best way to proceed. Consultation with colleagues, the College and/or the CMPA or other insurance provider is often the best way to work through these issues.

Looking Forward

This practice guide has been prepared for Ontario physicians and the Ontario public as a way of framing the expectations the medical profession has established for itself. It articulates the values, principles of practice and duties of the profession.

Physicians will always be committed to the fundamental values of compassion, service, altruism, and trustworthiness. These values, and the principles of the profession, will remain constant.

The specific duties that flow from the values/principles, however, may change as the health care environment, and the practice of medicine itself, continues to evolve. This guide has been prepared with the recognition that such evolution is inevitable, and any guidance to the profession must be capable of responding to new issues.

Consequently, the development of this practice guide must be an iterative process. It is only through such an approach that the guide will remain a living document, and continue to be of use to physicians, the public, and other stakeholders in the years to come.

The College always values your feedback on the practice guide and the policies it frames.

SUPPLEMENTARY RESOURCES

Canadian Medical Association—Code of Ethics
<http://policybase.cma.ca/PolicyPDF/PD04-06.pdf>

Royal College of Physicians and Surgeons of Canada—
CanMEDs Framework
<http://rcpsc.medical.org/canmeds/index.php>

Medical Council of Canada—Objectives of the Considerations
of the Legal, Ethical and Organizational Aspects of the Practice of
Medicine (CLEO)
<http://www.mcc.ca/english/publications/index.html>

General Medical Council (UK)—Good Medical Practice—
http://www.gmc-uk.org/guidance/good_medical_practice/index.asp





COLLEGE OF PHYSICIANS AND SURGEONS OF ONTARIO

80 COLLEGE STREET, TORONTO, ONTARIO M5G 2E2