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**AMA UPDATES ADVICE TO DOCTORS WITH CONSCIENTIOUS
 OBJECTIONS**

AMA Position Statement on Conscientious Objection 2019

The AMA has released its updated *Position Statement on Conscientious Objection 2019* (replacing the *Position Statement on Conscientious Objection 2013*). The policy was reviewed as part of the AMA’s routine, five-year policy review cycle.

A conscientious objection occurs when a doctor, as a result of a conflict with his or her own personal beliefs or values, acknowledges that they cannot provide, or participate in, a legal, legitimate treatment or procedure that would be deemed medically appropriate in the circumstances under professional standards.

A conscientious objection is based on sincerely-held beliefs and moral concerns, not self-interest or discrimination.

AMA President, Dr Tony Bartone, said today that doctors are entitled to have their own personal beliefs and values, as are all members of the community.

“However, doctors have an ethical obligation to minimise disruption to patient care and must never use a conscientious objection to intentionally impede patients’ access to care,” Dr Bartone said.

The AMA advises that a doctor with a conscientious objection should:

- inform the patient of their objection, preferably in advance or as soon as practicable;
- inform the patient that they have the right to see another doctor and ensure the patient has sufficient information to enable them to exercise that right;
- take whatever steps are necessary to ensure the patient’s access to care is not impeded;
- continue to treat the patient with dignity and respect, even if the doctor objects to the treatment or procedure the patient is seeking;
- continue to provide other care to the patient, if they wish;
- refrain from expressing their own personal beliefs to the patient in a way that may cause them distress;
- inform their employer, or prospective employer, of their conscientious objection, and discuss with their employer how they can practise in accordance with their beliefs without compromising patient care or placing a burden on their colleagues; and
- always provide medically appropriate treatment in an emergency situation, even if that treatment conflicts with their personal beliefs and values.

Changes since 2013

The tone and emphasis of the Position Statement has been amended. Rather than taking a prescriptive line, the Position Statement now takes a reflective approach where a doctor is asked to focus on what really should matter the most: the impact of their decisions on the patient in front of them.

A new statement has been included that an objecting doctor should be aware that certain treatments or procedures are time critical.

A new section on institutional conscientious objection has been included. It advises institutions that do not provide particular treatments or procedures due to institutional conscientious objection to inform the public of this so (potential) patients can seek care elsewhere. This section also advocates that a doctor working within such an institution should be allowed to refer a patient (already admitted) who seeks such a service to another doctor outside the facility.

The AMA Position Statement on Conscientious Objection 2019 is at <https://ama.com.au/position-statement/conscientious-objection-2019>

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