



Position Statement on Medical Professionalism 2010

1. Introduction

1.1 A key feature of the medical profession is to put patients first. Indeed, the *Declaration of Geneva* advises doctors that:

The health of my patient will be my first consideration.

1.2 Doctors are committed to the individual patient and protecting the doctor-patient relationship. This relationship is a partnership based on mutual respect, trust, and collaboration, where both doctor and patient have rights as well as responsibilities Doctors are also committed to protecting and advocating for the health and well-being of the wider public.

1.3 The modern health care environment is dynamic. It is constantly changing, heavily influenced by, and reflective of, the current social, economic, and political environment.

1.4 Whilst the changing health care environment may pose opportunities for the medical profession, it may also pose challenges and even barriers to doctors' responsibility to fulfil their ethical and professional obligations to their patients and the wider public.

1.5 Whilst the medical profession must be responsive to this dynamic health care environment, doctors have a duty to advocate that patients remain at the centre of the health care system.

1.6 The AMA's Code of Ethics calls on doctors to:

- *improve and maintain the health of their patients who entrust themselves to medical care* (abridged);
- safeguard clinical independence and professional integrity from increased demands from third parties, governments, and others;
- improve the standards and quality of, and access to, medical services in the community; and
- 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 of the community.

2. The medical profession in society

2.1 Society values the medical profession's highly specialised knowledge and skills as serving a unique and vital leadership role in the health care system.

2.2 Doctors use their unique expertise to set and maintain high standards of practice, competency, and conduct through an open and accountable process of profession-led regulation.

2.3 Profession-led regulation includes:

- the development and maintenance of ethical codes of behaviour and standards of professional conduct;
- the development and maintenance of clinical standards;
- the enforcement of professional standards through bodies such as the medical boards and other relevant regulatory bodies; and
- the development and maintenance of doctors' health advisory services.

2.4 Society grants the medical profession a high level of professional autonomy and clinical independence because it trusts doctors to put the individual patient's interests first.

2.5 Having regard to this, it is accepted that doctors are committed to serving the wider public as advocates for the public health.





3. Medical professionalism

3.1 Medical professionalism embodies the values and skills that the profession and society expects of doctors. Through adherence to medical professionalism, doctors fulfil their duties to patients and the wider public.

3.2 Although individual doctors have their own personal beliefs and values, the medical profession upholds a core set of values, including (but not limited to):

- respect,
- trust,
- compassion,
- altruism,
- integrity,
- justice,
- accountability,
- protection of confidentiality,
- leadership, and
- collegiality.

3.3 The profession upholds a commitment to:

- teaching and mentoring,
- participating in and promoting medical research,
- collaborating with colleagues and other health professionals, and
- advocating for social justice and the public health.

3.4 Doctors are also expected to commit to the highest ethical and professional standards of conduct and performance. This involves continuing self-appraisal, ongoing professional development, taking responsibility for one's own health and well-being, supporting impaired colleagues, and protecting patient safety.

4. Challenges to putting patients first

4.1 Within the health care system, there are factors outside the profession as well as within the profession that may challenge and even compromise the primacy of patient care.

4.2 When responding to these challenges, the medical profession and its individual members have a duty to advocate that the health care environment remains patient-centred at all times and a responsibility to ensure that the health needs of patients remains the doctor's primary duty.

External challenges

4.3 These may include:

- undue influence and constraints on medical practice by third parties such as governments, insurers, the legal system, employers, and fundholders; for example, where unreasonable resource constraints compromise patient access to health care;
- private enterprises' promotion of health products directly to the public either by advertising or via the internet including presentations labelled as "information";
- shifting societal attitudes to health care, including a greater emphasis on consumerism and self-medication, where many patients risk their health by self-diagnosing and self-medicating instead of seeking timely medical advice (or delaying medical advice);
- inappropriate workforce substitution; for example, where allied health professionals are used to perform medical duties outside their scope of expertise, risking patient safety.

Internal challenges

4.4 These may include:



- potential for a doctor's commercial interest conflicting with the interests of the patient;
- responding to a colleagues' unprofessional conduct or performance; and
- dual loyalties that conflict; for example where the interests of the doctor's employer is not consistent with patients' interests.

5. Conclusion

5.1 The AMA believes that by adhering to the core values and professional commitments of medical professionalism, doctors can meet the challenges of a rapidly changing health care environment and continue to ensure that patients are their primary interest and that patients and patient care remain central to the health care system.

See also:

AMA Code of Ethics 2004. Editorially Revised 2006

References

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