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NAAC Criterion 7: Institutional Values and Best Practices

7.1 Institutional Values and Social Responsibilities

7.1.9:Code of conduct handbook exists for students, teachers and academic and administrative staff including the Dean / Principal /Officials and support staff.

CODE OF CONDUCT

PRINCIPAL/DEAN

TEACHERS

STUDENTS

NON-TEACHING

ADMINISTRATORS

College & Hospital: **Vision:**

"To achieve 'Global Excellence' in experiential and technology driven medical education, transformative research, patient scentered clinical care, promotional and preventive health care services, through creative medical professionals, leading to nation a land global development."

Mission:

- To create a new generation of doctors with quality medical knowledge, highest levels of skill and competence, committed to excellence, guided by professional ethics, moral and social values, ready to serve and lead the world for a better tomorrow.
- To provide excellent and comprehensive medical education and hands-on training to undergraduate and postgraduate students for advancement of medical knowledge, skills, competencies and research, in order to make significant contribution to the health standards of all the citizen of our nation and across the globe.
- To extend and share the knowledge acquired and new knowledge generated for the development of the society in health management, through collaborative research, extension and outreach activities.
- To provide primary, secondary and tertiary healthcare and service of global standards to the needy population, especially the rural and marginalized sections of society.
- To promote the highest standards of quality and ethical values among the students and staff inpatient care, medical education, training and research, leading to excellent performance in diverse professional and cultural settings of our country.
- To promote integrated sustainable development, environmental conservation, protection and preservation of culture, heritage, fundamental duties, human rights, gender sensitization, tolerance, harmony and national integrity among all the stakeholders towards a humane society.

Preamble

PES Institute of medical sciences Kuppam is dedicated to improving the quality of life for individuals and society by promoting health, preventing and curing disease as well as caring for those who have illness, advancing biomedical research and educating tomorrow's physicians and scientists. The School is also committed to promoting and ensuring a safe and respectful educational and working environment for its faculty, staff and students, that is free of harassment, and that maintains academic freedom. The purpose of this code is to set forth with more clarity the School's expectations for the professional conduct of its faculty. This is being done to create an environment that is characterized by civility and respect for all the members of the community, that supports the mission of the School, and that is free of behaviors that undermine the Institute's mission.

This Code is not intended to supplant any policy in place, but rather to provide clear guidelines for faculty of PES Institute of medical sciences Kuppam

Code of Professional Conduct:

In daily professional interactions, we expect that all faculty members will do the following-

1. Treat everyone (including, but not limited to, faculty, staff, trainees, volunteers, patients and their families, research participants and their families, and other health care professionals) with respect, civility and fairness, and without bias or discrimination based on age, gender, race, ethnicity, national origin, religion, disability, sexual orientation, or gender identity.
2. Teach, conduct research, and care for patients with competence, honesty and the highest ethical standards.
3. Teach, conduct research and care for patients with competence, honesty and the highest ethical standards.
4. When in a supervisory role, provide clear direction and timely feedback as well as constructive suggestions and opportunities for improvement or remediation.
5. Resolve conflicts and counsel colleagues and subordinates in a non-threatening, constructive and private manner, when possible, and when not in conflict with other USC policies.
6. BecomefamiliarwithandfollowUniversityandSchoolofMedicinepolicies and promptly address violations of institutional policies by cooperating with investigations and audits as called upon.
7. Abide strictly by USC's conflict of personal and professional interest policies.
8. Faculty must not make provision of clinical care contingent up on personal business relationships with patients, research subjects, or their families.
9. Clinicians will provide high quality, kind, and considerate patient care through exhibiting excellence in all that we do, incorporating sound judgment in our decisions, and practicing civility in our interactions with respect to patients, families, and co-workers.

Code of Professional Conduct:

Thus, all faculty members are expected to-

1. Meet all professional responsibilities and obligations, and assuring personal account ability for achieving performance expectations.
2. Maintain all licenses and certifications required for their positions, participateineducationandtrainingasnecessarytomaintainprofessional competence, and be fit for duty during work time, including on-call responsibilities.
3. Complete all required university and clinically (as required) mandated training (including, but not limited to, harassment prevention training, continuing medical education units, electronic health record training, the Institutional Animal Care and Use Committee training, and/or Bio safety training)as appropriate for their job duties, and in a timely manner.
4. Disclose all conflicts of personal, professional and financial interest, as required by University policy, in a timely manner.
5. Use University and School of Medicine facilities, equipment, supplies and resources (including telecommunications and information technology resources) responsibly and for legitimate University business.
6. Establishcollaborativeandsafeenvironmentsforco-workers,patients,and familiesthatpromotesafeclinicalcareandinter-professionalcollaboration throughbeingrespectfulandreceptivetonewideas,providingconstructive feedback, and active listening,
7. Commit to respectful interactions with colleagues, patients, and families through being courteous, mindful of language and tone.

Code of Professional Conduct:

For highest degree of professionalism, faculty must refrain from-

- Disrespectful behavior towards co-workers, patients, and families.
- Loss of civility that interferes with the working and learning environment (for example shouting, personal attacks or insults, throwing objects or other display of temper)
- Unprofessional interpersonal interactions, including requesting that professional colleagues, staff or students perform personal favors or do things that either violate policy or compliance standards.
- Unwanted physical contact with others or threats of such contact.
- Sexual harassment, as outlined in the Faculty Hand book, or harassment based on age, gender, race, ethnicity, national origin, religion, disability, sexual orientation, or gender identity.
- Mistreatment of faculty, staff, students, residents and fellows, including, but not limited to, making remarks with the intent to cause offense, public embarrassment or humiliation, denying reasonable opportunities for training or advancement, or giving lower evaluations than earned.
- Faculty who breach this code of professionalism may be subject to disciplinary action, as appropriate, and as specified by the Faculty Handbook, as revised from time to time.
- This Code of Professional Conduct for Faculty will be periodically reviewed, and amended as needed.

Code of Conduct for Principal / Dean

All authorities in the Academic line, Dean will be considered as teaching staff irrespective of class allotment or teaching hours for them. Hence, the rules which are applicable for the teaching staff members are equally applicable to Dean also. In addition to these responsibilities, the following are the additional responsibilities of the Deans as allocated below:

1. Dean will be responsible for order, discipline & efficient management of the college & Hospital, subject to the control, carryout the executive duties connected with the administration of the college and Hospital. He will be responsible for all the correspondence in connection with the college &hospital.
2. Dean will arrange in consultation with the staff of the College & Hospital, the daily order of Lecturers & practical work for each term of the college & to submit the arrangement thus made for confirmation to the college council.
3. He will preside over the college council meeting & bring before the council for consideration any question or matter according to the procedure laid down in the rules of the college council.
4. He will sign all the certificates required by the students for examinations, also all notices, orders, etc. relating to the delivery of Lecturers etc.
5. He will check the dead stock, Kitchen, Clothing, Medical stores, Instruments, Library & other miscellaneous tock of the College & Hospital periodically & condemn such of the clothing, instruments & other articles of dead stock as are unserviceable.
6. He will be responsible for the discipline of the students in the Hostels & in connection with their work in the college & in the attached hospitals.
7. Dean will be responsible for the finances of the college & hospital, the preparation of Budget & indents & purchase of supplies, etc.
8. He will refer the question regarding acceptance & disposal of request & donations to the college & Hospital to the management.
9. He will be in charge of the student's hostels & will be responsible for their management, maintenance of discipline in them.
10. He will be incharge of all apparatus which are on the college & hospital premises & will be responsible for their maintenance in proper condition.
11. He will act as Secretary of the Board of Visitors of the Hospital.

Code of Conduct for Principal / Dean

Dean is responsible and accountable for the academic administration of the departments under his control.

- The Dean should have a thorough knowledge of the curriculum and syllabi. He should spearhead the introduction of innovative features in the curriculum and initiatives for the periodic revision of the curriculum befitting the current trends and demands of the industry and the employment market.
- Dean should act as a true Academic leader, motivate and train the newly recruited members of the faculty. He should oversee and monitor the faculty during the lecture hours and give constructive suggestions for their improvement.
- Dean should be fully aware of the various requirements of different courses as per the MUHS, Nasik University guidelines and ensure that such norms are fulfilled whenever inspection commissions of the university or other agencies visit the college.
- The Dean is expected to interact with students periodically, review the student performance in the internal and end semester examinations, regularity in attendance, and monitor general discipline of the students inside the campus and take appropriate corrective or disciplinary action in consultation with HODs.
- Dean should monitor the functioning of each department under his control, and help in implementing policies and programs formulated from time to time for improving the quality and effectiveness of teaching – learning process.
- Deans should take all possible steps for enriching the quality of academic life by organizing guest lectures, seminars, conferences, industry visits, and encourage the staff to bring out publications, and participation in seminars, conferences, and workshops by tapping funding from various sources.
- The Dean academic affairs has a key role to play in all academic matters to tone up the academic performance of all the departments and the overall quality and standards of students and enriching the teaching faculty with teaching skill, better communication, and with comprehensive and updated knowledge through periodic FDPs, faculty assessments, and counseling.

Code of Conduct for Principal / Dean

- He/she shall have the right to voice his/her view or opinion in all matters of academic interest as and discussions take place at a higher level.
- It shall be the duty of the Dean to look into all publications and hand outs brought out by the institution.
- The Dean has to help the departments in organizing seminars, workshops, symposium, guest lectures, etc.,

The Dean academic affairs shall also take care of the following

- Shall organize students' feedback and staff appraisal periodically.
- To be the organizer of Ethics and Culture Program.
- To organize FDPs for the faculty, other than those exclusively meant for the domain area.
- To perform any other duty that may be assigned by the management then and there and involve in all the developmental activities of the institution.

For carrying out the above responsibilities, the Deans shall have the following powers.

- Create and sign all internal and external correspondence relating to academic matters of the departments under his control excepting communication to University, Government Authorities, NMC and affiliated university.
- Shall have authority to request for any service from computer lab, library, office or other service centers of the college.
- Shall have the right to recommend OD and Leave to the staff in consultation with respective HODs for all eligible examination and other purposes as per College Policy.
- Shall have the power to indent stationary requirements of the departments within the sanctioned limit.
- Initiateandsignallcircularsandannouncementsrelatingexclusivelytothe Department as per the guidelines.
- All instruction to staff members by the Principal shall be routed through the Dean.
- In the event of his/her absence in the campus, Deanisauthorized to depute a HOD to attend the Dean's meeting.

Code of Conduct for Principal / Dean

Other Important points to be take note of

- All formal communications, applications or representations made by the staff members shall be routed through the HODs and Deans as the case may be.
- Once a letter is submitted by a subordinate/student, it becomes official and he/she cannot reclaim the letter and should not request the dean not to take action on the letter submitted.
- All applications and letters submitted shall bear the written official reasons for the recommendation or refusal by the head of the department or dean.
- In the absence of or on duty of the head of the department, the second in charge of department will discharge such duties carried out by the head of the department.
- If applied for leave, the head of the department shall make suitable arrangements with these conditions and get signature for his leave.
- Exercises of powers given to Dean-The Deans are expected to use the powers vested with them cautiously. They shall keep in mind the interest of the Institution and the students and the staff members in taking any decisions. There shall be no personal considerations or prejudicial in any type of official decisions taken.

In short-

- The Principal/Dean should over see and monitor the administration of the academic programmers and general administration of the Institute to ensure efficiency and effectiveness in the overall administrative tasks and assignments.
- The Principal/Dean should plan the budget ary provisions and go through the financial audited statements of the Institute.
- The Principal/Dean has authority to take all the necessary actions as and when required to maintain discipline in the Institute.
- The Principal/ Dean should form various college level committees which are necessary for the development of the Institute.
- The Principal/ Dean should encourage Faculty Members to update their knowledge by attending seminars/workshops/conference.

Code of Conduct for Principal / Dean

- The Principal/ Dean should encourage Faculty Members to author text books and publish research papers in reputed International / Indian Journals/Magazines and Periodicals.
- The Principal/ Dean should provide leadership, direction and co-ordination with in the Institute.
- The Principal/Dean should periodically review this Code of Conduct, as it deems necessary to ensure that this Code of Conduct conforms to applicable Laws met.
- The Principal/ Dean is responsible for the development of academic programmes of the Institute.
- The Principal / Dean should convene meetings of any of the authorities, bodies or committees, as and when required.
- The Principal/ Dean should ensure that directions issued by the management are strictly complied with or, as the case may be, implemented.
- The Principal/Dean should ensure that quality in education and academic services is maintained for continuous improvement and turn the students in to better individuals and responsible citizens of the country.
- The Principal / Dean should ensure that the long-term and short-term development plans of the Institute in their academic programmes are duly processed and implemented through relevant authorities, bodies, committees and its members.
- ThePrincipal/Deanshouldforwardconfidentialreportofallstaffmembers of the Institute and submit it to the Management.
- The Principal/Dean shall be responsible for submission of an annual report on the progress achieved in different developmental and collaborative programmes to the various committees and Management.

Code of Conduct for Head of Department

- Thework load (teaching and departmental) of all the staff should be fixed by the Head of the department.
- The Head of the Department should be responsible for academic planning and academic audit of the department and implementation of academic policies approved by the Principal/ Dean.
- The teaching load should be allotted by the HOD after taking into account of the Faculty Member's interests/choices.
- The Head of the Department should arrange the weekly meetings of the staff to appraise the progress of academic and administrative work.
- The Head of the Department should encourage Faculty Members to update their knowledge by attending seminars/workshops/conference.
- The Head of the Department should encourage Faculty Members to author textbooks and publish research papers in reputed International / Indian Journals / Conferences. The Head of the Department should arrange for feedback responses from the students and the parents on quality-related department processes.
- The Head of the Department should write confidential report for all staff members of his/her department and submit it to the Principal.

Code of Conduct for Teachers

- Treat everyone (including, but not limited to, faculty, staff, trainees, volunteers, patients and their families, research participants and their families, and other health care professionals) with respect, civility and fairness, and without bias or discrimination based on age, gender, race, ethnicity, national origin, religion, disability, sexual orientation, or gender identity.
- Teach, conduct research, and care for patients with competence, honesty and the highest ethical standards.
- Respect the privacy of all individuals and the confidentiality of information entrusted to them regarding individuals, The Keck School of Medicine, or The University of Southern California.
- When in a supervisory role, provide clear direction and timely feedback as well as constructive suggestions and opportunities for improvement or remediation.
- Resolve conflicts and counsel colleagues and subordinates in a non-threatening, constructive and private manner, when possible, and when not in conflict with other USC policies.
- Become familiar with and follow University and School of Medicine policies and promptly address violations of institutional policies by cooperating with investigations and audits as called upon.
- Abides strictly by USC's conflict of personal and professional interest policies
- Faculty must not make provision of clinical care contingent upon personal business relationships with patients, research subjects, or their families.
- Clinicians will provide high quality, kind, and considerate patient care through exhibiting excellence in all that we do, incorporating sound judgment in our decisions, and practicing civility in our interactions with respect to patients, families, and co-workers.

Code of Conduct for Teachers

- **Professional accountability-:**
- Meet all professional responsibilities and obligations, and assuring personal accountability for achieving performance expectations·
- Maintain all licenses and certifications required for their positions, participate in education and training as necessary to maintain professional competence, and be fit for duty during work time, including on-call responsibilities.
- Complete all required university and clinically (as required) mandated training (including, but not limited to, harassment prevention training, continuing medical education units, electronic health record training, the Institutional Animal Care and Use Committee training, and/or Bio safety training) as appropriate for their job duties, and in a timely manner.
- ·Disclose all conflicts of personal, professional and financial interest, as required by University policy, inatimely manner.
- ·Use University and School of Medicine facilities, equipment, supplies and resources (including telecommunications and information technology resources) responsibly and for legitimate University business.
- · Establish collaborative and safe environments for co-workers, patients, and families that promote safe clinical care and inter-professional collaboration through being respectful and receptive to new ideas, providing constructive feedback, and active listening.
- ·Commit to respectful interactions with colleagues, patients, and families through being courteous, mindful of language and tone.
- ·Every Teacher shall discharge his/her duties efficiently and diligently to match with the academic standards and performance norms laid down by the College Management from time to time.
- · Every teacher shall update his/her knowledge and skills to equip himself/herself professionally for the proper discharge of duties assigned to him/her.
- ·Every Teacher shall conduct himself/herself with absolute dignity and decorum in his/her dealing with the superiors, colleagues and students every time.

Code of Conduct for Teachers

- No teacher shall absent himself/herself from duties at any time without prior permission from higher-ups.
- No teacher shall accept any honorary or other assignment given to him/her by any external agency without the prior permission of the College Management.
- No teacher shall associate with any political party or take part in any other organizational activity, which is not in line with the duties and ethics of the teaching profession.
- No teacher shall attempt to bring any political or outside pressure on his/her superior authorities in respect of service matters.
- No teacher shall participate in any strike or demonstration and/or indulge in any criticism of College Management policy or of the Government for any reason whatsoever.
- No teacher shall act in any manner that violates the norms of decency or morality in his/her conduct or behave our inside and outside the College Campus.
- No teacher shall incite, provoke or instigate any students or any other member of the staff in to any form of action against the College Management, or that seeks to disrupt the academic activities of the College.
- No teacher shall by actor deed degrade, harass or insult any other person for any reason whatsoever or act in a manner unbecoming of the teaching profession.
- Every teacher in the service of the College shall at all the time strive for academic excellence in the discharge of his/her duties and conduct himself/herself in the masnner of a perfect role model for other stoemulate.
- The College Management may, however, at its sole discretion provide an opportunity to the teaching staff for presenting his/her case through a personal hearing before taking a final decision. The decision of the College Management will be final and binding and will not be subject to any appeal to any individual or forum.

Code of Conduct for Teachers

Leave for teaching staff:

Casual leave-

- The total number of casual leave allowed to employees in an academic year is 12 days.
- Casual leave can be combined with any other leave or notified holidays/authorized holidays.
- Casual leave taken along with any other leave or notified holidays shall not exceed 5 days at a time.
- The period of absence under casual leave will be treated as "ON DUTY" for all purposes.
- Application for casual leave must contain the purpose for which the leave is requested/availed.
- Application for casual leave must invariably be submitted and the sanction obtained before availing the leave. If, however, due to unavoidable circumstances, it is not possible, the leave application must be submitted immediately after rejoining the duty.
- Casual leave cannot be claimed as a matter of right and the sanction is linked to the exigencies of service.
- The sanctioning authority has the discretion to refuse or postpone leave of any kind on grounds of exigencies of service.
- The number of days of casual leave remaining unveiled, under casual leave at the end of the calendar year will lapse and cannot be carried over to the next calendar year. The eligibility of casual leave will be calculated with reference to the period of duty of the employee in the commencing year of service, at the rate of 1 day casual leave for every month served.

Maternity leave-

- Every confirmed female teaching staff will be eligible for maternity leave of a maximum of 60 days during her entire period of service for any one of the first two babies.
- Maternity leave under this category must be supported by adequate documentary evidence to the satisfaction of the management.
- The leave is subject to the discretion of the management and exigencies of service and` cannot be claimed/allowed as a mattero fright.
- If the academic exigencies of the College warrant an appointment of a substitute teaching faculty, the management shall have the discretion to sanction the leave either on loss of pay or on half pay and allowances. The evaluation of exigency will be at the sole discretion of the management.

Special leave-

- Every permanent employee in the College shall, hereafter earn a special leave of 9 days for every completed year of service for the enhancement of their Academic quality only.
- This shall not have any retrospective effect. The leave earned by the employee can neither be encashed nor accumulated.
- But requests for availing such leave shall be only for valid reasons with necessary documentary proof.

General conditions regarding leave-

- No leave under any category can be claimed as a matter of right and must always be invariably applied for in advance and sanction obtained.
- Thestaffshallmakethemselvesavailableforduty/otherworkifrequiredby the management on notified/ Government/Weekly holidays.
- Leave on Loss of pay shall not exceed 15 days in total during an academic year and prior sanction must be obtained before availing the same. Loss of pay will be accounted then and there and it will not be allowed to be adjusted or carried forward against future pay and allowances.
- All leave applications shall be supported by documentary evidences (when availing Maternity leave under special leave) and shall be submitted for sanctions by the competent authority well in time. The teaching staff shall always furnish his/her leave address and contact phone number at the time of availing leave

Code of Conduct for Medical Practitioners

General principles:

- The medical profession is at the service of mankind and society. Respecting human life, dignity, and health care of the individual and the community are the primary duties of the physician.
- The physician must meet with the same diligence and application all patients without discrimination.
- The primary loyalty of the doctor is the one to his/her patient's health and it must come before any other convenience. The doctor cannot refuse assistance for fear that the disease or the patient's circumstances could pose a personal risk.
- The doctor must never intentionally hurt the patient. He/she will assist the patient with care and competence, avoiding any undue delay in attendance.
- All physicians, whatever their specialty or type of exercise, should provide emergency aid to the sick or injured.
- Doctors will not abandon any patient requiring their care, even in situations of disaster or epidemic, unless forced to do so by the competent authority or an imminent and in evitable life-threatening risk for them. They will volunteer to collaborate in medical aid.
- Doctors who legally avail themselves of the right to strike are not exempt from professional obligations to their patients, to whom they must ensure urgent and pressing care.
- It is under stood by medical act any lawful activity, developed by a medical professional legitimately trained, either in the welfare, educational, research, expert or any other aspect, aimed at curing a disease, alleviating a disease or comprehensive health promotion. Diagnosis, treatment or alleviation of suffering acts and the preservation and promotion of health, by direct and indirect means are included.
- Doctors, principal agents of health preservation, should ensure the quality and efficiency of their practice, the main instrument for the promotion, protection and restoration of health.
- The continuing medical education is an ethical duty, a right and a responsibility of all physicians throughout their profession al lives

Code of Conduct for Medical Practitioners

- Physicians must be aware of their professional duties to the community. It is required to seek the highest efficiency of their work and optimal performance of the means offered by society.
- As the health system is the main instrument of society for care and health promotion, doctors must ensure quality requirements, adequacy of care and maintenance of ethical principles in the system. They are obliged to report deficiencies, as they can affect the proper care of patients.
- Doctors should take care of their attitude, language, manners, and image and, in general, their behavior to promote the full confidence of the patient.
- The medical care requires a full relationship of understanding and trust between doctor and patient. This presupposes respect for the patient's right to choose or change doctor or health center. Individually, doctors have to facilitate the exercise of this right, and institutionally, they must seek to harmonize it with the provisions and requirements arising from health management.
- Physicians shall respect the convictions of their patients and refrain from imposing their own.
- In the exercise of their profession, doctors will act correctly and delicately, respecting the privacy of the patient.
- Doctor and patient have the right to the presence of a companion or partner when the intimate character of the history or examination requires it.
- An essential element of information is to let know patients or their relatives the identity of the physician responsible for their care process, as well as the ones assisting them at all times.
- Doctors may only suspend assistance to patients if they are persuaded that there is no the necessary confidence in them. They shall inform patients or their legal representatives in due time and will provide another doctor to take over the care process, transmitting the information necessary to preserve the continuity of treatment.
- Physicians shall respect the patient's right to freely decide, after receiving adequate information about clinical options available. It is a duty of the physician to respect the patient's right to be informed at each and every stage of the care process. As a general rule, the information is sufficient and necessary for the patient to make decisions.

Code of Conduct for Medical Practitioners

- The physician shall respect the patient's refusal, in whole or in part, to a diagnostic test or treatment. He/she must inform in an under standable and accurate way of the possible consequences of persisting in his/her refusal, noting this in the medical record. If the patient were to require a medical procedure that the doctor, for scientific or ethical reasons, judges in adequate or unacceptable, the doctor, after adequately informing, shall be excused from acting.
- When a doctor treats a person on hunger strike, he/she will inform the patient about the consequences of rejecting food and the foreseeable development and prognosis. He/she will respect the freedom of those who choose to consciously and freely make hunger strike, including persons deprived of liberty; they are eligible for conscientious objection if forced to counteract this freedom.
- When doctors treat patients who are legally incapacitated or unable to understand information, decide or give valid consent, they must inform their legal representative or families.
- The physician should be particularly careful so that these patients are involved in the care process as much as their ability allows it.
- Doctors will take the decisions they deem appropriate when a serious immediate risk to the physical or mental integrity of patients arises and they are not able to get their consent.
- The physician should encourage and promote comprehensive care for mental health problems to avoid stigmatizing psychiatric patients and permanent confinement as a therapeutic measure.
- The age of 16 is considered as qualified to make decisions about common welfare actions.
- The opinion of minors under 16 will be more or less critical depending on their age & maturity; this evaluation is an ethical responsibility of the doctor.
- In cases of actions with serious risk to the health of minors under 16, the doctor is obliged to always inform the parents and get their consent. Between 16 and 18 parents will be informed and their opinion will be taken into account.

- When the legal representatives make a decision that, at the discretion of the physician, is contrary to the interests represented, the doctor will request judicial intervention.
- The physician will inform the patient understandably, truthfully, with deliberation and prudence. In case the information includes gravity data or poor prognosis he/she will endeavor to transmit it gently so that it does not harm the patient.
- The information is to be transmitted directly to the patient, persons designated by him or his/her legal representative. The physician shall respect the patient's right not to be informed, noting this in the medical record.
- Informing the patient is not a bureaucratic act but a clinical act. It must be undertaken directly by the physician responsible for the care process, after reaching a precise clinical judgment
- Consent is usually expressed verbally and noted in the medical history. When the proposed measures are likely to cause a significant risk, the patient's written consent is obtained.
- Physicians should bear the negative consequences of their actions and mistakes, offering a clear, honest, constructive, and adequate explanation.
- Complaints of a patient should not adversely affect the doctor-patient relationship or the quality of care given.
- The place where the healthcare is provided shall be consistent with the dignity and respect the patient deserves and it will have the adequate means for the goals that must be fulfilled.
- Medical acts will be recorded in the corresponding medical record. The doctor has the duty and the right to write it. The medical history will incorporate the information considered relevant to the knowledge of the patient's health in order to facilitate healthcare.
- The history is written and preserved for patient care. It is according to the medical ethics the use of the content of medical records for scientific, statistical, and educational purposes and research analysis, provided that the confidentiality of patients and the remaining provisions of this Code are strictly respected.

Code of Conduct for Medical Practitioners

- Doctors and, when appropriate, the institution for which they work, are obliged to keep medical histories and diagnostic material while considered favorable for the patient and, in any case, during the time established by State and regional legislation. It is highly recommended that the responsible for the clinical documentation service is a doctor.
- When a doctor stops his/her private practice, medical records will be made available to patients who request them to deliver them to their new doctor. In case of doubt, they should consult with their local medical association.
- The physician has a duty to facilitate the patient who requests it the information contained in his/her medical history and diagnostic tests. This patient's right would be limited if damage to third parties who provided data confidentially in the interest of the patient is presumed. Subjective annotations that the doctor entered in the medical record are his/her exclusive property.
- Access to medical records of deceased patients will be allowed only to people with family ties with the patient, provided the patient did not expressly forbid it. It is the duty of the physician, if the patient requests it, to provide other colleagues with the necessary data to complete the diagnosis or treatment, as well as to facilitate the review of the tests.
- The ethical duty to collaborate in studies of economic audits and management does not require the physician to submit to medical insurers a patient's clinical report.
- The electronic medical record is only ethical when it assures the confidentiality of the patient, being desirable records in decentralized basis.
- When appropriate or when the patient requests it, it is the doctor’s duty to provide a report or a certificate on assistance data or medical history. Its content must be authentic and truthful and it will be delivered only to the patient, the person authorized by him/her or his/her legal representative.
- It is not desirable that the doctor issues a certificate to family members or persons under their civil dependence.
- Medical certificates containing false information are ethically prohibited.

- The physician has a duty to provide all patients with medical care of human and scientific quality.
- Medical acts will be recorded in the corresponding medical record. The doctor has the duty and the right to write it. The medical history will incorporate the information considered relevant to the knowledge of the patient's health in order to facilitate healthcare.
- The history is written and preserved for patient care. It is according to the medical ethics the use of the content of medical records for scientific, statistical and educational purposes and research analysis, provided that the confidentiality of patients and the remaining provisions of this Code are strictly respected.

Complementary examinations should not be performed routinely, indiscriminately or abusively. Defensive medicine is contrary to medical ethics.

1. The time required for each medical act must be determined by the professional judgment of physicians, taking into account the individual needs of each patient and the obligation to ensure greater effectiveness and efficiency in their work.
1. Physicians must refrain from actions that exceed their capacity. In this case, they will suggest the patient to resort to another competent colleague in that field.
2. If a doctor observes that because of age, illness, or other causes, his/her judgment or technical ability are impaired, he/she should seek advice immediately from a colleague he/she trusts to help to decide whether to suspend or modify temporarily or permanently his/her professional activity.
3. If the doctor is not aware of these deficiencies and he/she is warned by another colleague, the colleague is obliged to inform the doctor and, if necessary, the College of Physicians, objectively and with due discretion. This action does not involve failing in his/her duty of fellowship, for the good of patients is always a priority.
4. The doctor must have freedom of prescription, respecting scientific evidence and authorized indications enabling him/her to act independently and ensuring quality.
5. Collaboration with the pharmaceutical industry is necessary and convenient in research, development, and drug safety. It is contrary to medical ethics to solicit or accept gifts in exchange for prescribing a medication or using a medical device.

- The incentives linked to prescription aimed at alleviating health spending should improve efficiency while safeguarding the quality of care and the freedom of prescription.
- Doctors with responsibilities in management and resource management will act always guided by the common good and equity. They have an ethical duty of honesty and exemplary behavior.
- The doctor cannot accept remuneration based on standards of productivity, schedule performance, or any other provision that objectively threatens the quality of care.
- The prescription is the corollary of the medical act; therefore, the doctor is responsible for the prescription. If the prescription is modified in any of its contents in a way that could affect the treatment, the ethical responsibility of the physician will cease.

Code of Conduct for Medical Practitioners

- When developing scientific and educational activities funded by for-profit entities, the nature and scope of the sponsorship shall be clearly and transparently explained. The organizers of the medical activity guarantee the independence of content and freedom of the speakers.
- It is the duty of the physician sponsored by the pharmaceutical industry to inform both scientific circles and general media of his/her links with this industry by the appropriate declaration of interests.
- When a doctor is involved in scientific research sponsored by a pharmaceutical company, he/she should condition his/her participation to have full freedom for publication, regardless of whether the results are favorable or not from the perspective of the sponsoring company.
- The physician who, as an expert, makes recommendations for a specific product, both in scientific circles and general media, must communicate his/her links to the healthcare industry, if any, by the appropriate declaration of interests.
- Specialized medical acts should be reserved for physicians who possess the appropriate title, without prejudice to any person holding a degree in medicine who may occasionally perform them. No doctor, if they have the skill and knowledge necessary to the level of use required, can be prevented from applying them for the benefit of their patients. In no case do doctors may attribute themselves the condition of specialists in this technique or field.
- All physicians, whatever their professional activity, must also address preventive and educational aspects. In promoting healthy lifestyles, they will collaborate with the health authorities, the media, families, and educational institutions.
- The physician should provide loyal and competent advice to patients so that they assume their responsibilities in health, including health promotion and preventive activities of proven value. The doctor will inform of the risk that certain habits can mean for health.
- The promotion of preventive activities is correct deontological only when they have proven scientific value.
- Physicians have a duty to promote health education of patients, this being an important component of quality medical practice.
- The physician should preferably use procedures and prescribe drugs whose effectiveness has been scientifically proven.

Code of Conduct for Medical Practitioners

- Practices inspired by quackery, those lacking scientific basis that promise healing the sick, illusory or insufficiently tested procedures proposed as effective, simulating medical treatment or surgery and use of products whose composition is not known are not ethical.
- The clinical practice of medicine through consultation exclusively by letter, telephone, radio, newspapers or the Internet, is contrary to the ethical standards. The correct action inevitably involves personal and direct contact between doctor and patient.
- It is ethically acceptable, in the case of a second opinion and medical examinations, the use of email or other means of virtual communication and telemedicine, whenever clear mutual identification and privacy are ensured.
- Patient guidance systems through telemedicine or telephone consultation are consistent with medical ethics when used solely as an aid in decision-making.
- The rules of confidentiality, security and secrecy shall apply to telemedicine in the manner prescribed in this Code.
- Doctors must not facilitate or permit the use of their office or somehow cover someone engaged in the illegal practice of the profession.
- The doctor has the duty to report to the College whoever, not being a doctor, exercises medical activities and doctors who do not possess the appropriate qualifications for their usual practice. Doctors should never collaborate or hire professionals who do not have adequate qualifications.
- The doctor should never participate, second or admit acts of torture or ill-treatment, whatever the arguments invoked. He/she is obliged to report them to the competent authority.
- The doctor shall not engage in any activity that means a manipulation of the mind or the consciousness.

Medical Secrecy

1. Medical secrecy is one of the pillars on which the doctor-patient relationship and mutual trust is based, whatever the mode of practice.
2. For doctors, the secret implies the obligation to maintain reserve and confidentiality about everything revealed by the patient, what they have seen and deducted as a result of their work related to the health and privacy of the patient, including the contents of the medical record.
3. Being a doctor does not authorize to obtain confidential information about another doctor's patient.
4. In health institutions with computerized records, medical managers shall ensure a clear separation between clinical and administrative documentation.
5. Doctors cannot collaborate in any health database if the preservation of the confidentiality of the information stored in it is not guaranteed.
6. The doctor may cooperate in epidemiological, economics, management studies, etc., with the express condition that the information used does not identify directly or indirectly, any patient.
7. The doctor will preserve the confidentiality of patients in their social life, work, and family.
8. The medical director of a health center or service shall ensure the establishment of the necessary controls for privacy and confidentiality of patients and their related documentation.
9. The doctor will ensure that the public presentation of medical documentation in any format, does not include any data to facilitate patient identification.
10. It is permitted the presentation of medical cases that have been photographed or filmed for teaching or scientific disclosure purposes after obtaining explicit authorization to do so or preserving anonymity.
11. When a health problem occurs with people of public notoriety, the doctor responsible for the assistance or specifically designated for it, may provide information with the authorization of the person concerned or responsible for him/her. In any case, the doctor should have extreme caution in his/her informative task.
12. The patient's death does not relieve the physician from the duty of professional secrecy.

Medical Secrecy

1. Doctors should require from their health and non-health collaborators absolute discretion and scrupulous observance of professional secrecy.
2. In the exercise of team medicine, each physician has a duty and responsibility to preserve the confidentiality of all known patient data.
3. The doctor should have a reasonable justification for communicating to another physician any confidential patient information.
4. Professional secrecy should be the rule. However, the doctor may reveal the secret exclusively to whom he/she has to, within reasonable limits, with the advice of the College, if necessary, in the following cases:

   a. Notifiable diseases.

   b. Certificates of birth and death.

   c. If silence could result in injury for the patient or for others or in collective danger.

   d. When the doctor is unfairly harmed by secrecy and the patient allows such a situation.

   e. In case of abuse, especially in children, the elderly and mentally disabled or sexual assault.

   f. When the doctor is called by the College to testify in disciplinary matters.

   g. Although the patient authorizes it, the doctor will try to keep the secret due to the importance of the confidence of society in professional confidentiality.

   h. By law:

   1. In the part of injuries, every doctor is obliged to send to the judge when attending an injured.
   2. When acting as expert, inspector, medical examiner, coroner, or the like.
   3. Upon the request on trial for alleged offense, which needs the contribution of the patient's medical history, the doctor will inform the judge who is ethically obligated to professional secrecy and he/she will only provide the necessary data for that specific case.
   4. The results of the medical examinations required by law must be explained to the patient. Only the company or relevant institution shall be informed regarding work competence or limitations or risks to job assignment.
   5. The results of the tests performed as part of health monitoring will be communicated exclusively to the person concerned. However, the doctor of a center of preventive medicine or occupational medicine should convey any results that are useful for the patient, with his/her consent, to his/her physician.

Medical Relations between Themselves and Other Health Professionals

1. Fellowship among physicians is a primary duty and it only takes precedence to patient rights.
2. Physicians should treat each other with due deference, respect, loyalty, whatever the hierarchical relationship between them. They have an obligation to defend a colleague who is under attack or unfair complaints.
3. Doctors shall refrain from criticizing the actions of their colleagues. Doing so in front of their patients, their relatives, or others is an aggravating circumstance.
4. Doctors will share their scientific knowledge for the benefit of patients.
5. Doctors who share the responsibility for a patient care will provide the necessary information in a clear and understandable manner, avoiding acronyms and unusual terminology. Illegible handwriting is never acceptable.
6. Discrepancies between physicians are not to encourage their public disrepute. Damage or scandal should be avoided. Injuries to a colleague will never be justified. Public polemics should be avoided; differences will be resolved at professional or collegial level.
7. Doctors notifying discreetly to their College violations of their colleagues against the rules of medical ethics or professional practice is not a failing of the fellowship duty.
8. The doctor shall not interfere in the assistance being provided by another colleague. Urgent care or free consultation by the patient to another doctor is not considered interference, but the patient should be warned of the prejudice of multiple non-consensual medical care.
9. When the doctor needs a second opinion, he/she may propose the most appropriate colleague as a consultant or accept the one chosen by the patient. If their opinions differ substantially and the patient or his/her family decide to follow the opinion of the consultant, the doctor who has been treating the patient is released from continuing assistance.
10. The practice of team medicine should not lead to excessive medical actions.

Medical Relations between Themselves and Other Health Professionals

1. The ethical responsibility of the physician does disappear or dissolves because of teamwork.
2. The hierarchy of the medical team shall be respected, but it can never be an instrument of domination or personal aggrandizement. Whoever is in command will take care that there is an atmosphere of ethical demand and tolerance for the diversity of professional opinions.
3. The physician should maintain good relations with other healthcare professionals and take into consideration their views about patient care.
4. The physician shall respect the sphere of competence of his/her collaborators and shall ensure that each member of the team meets their specific obligations correctly.
5. Physicians who hold management positions are required to promote the common interest of the medical profession. Their behavior will never mean favoritism or abuse of power.
6. If a doctor becomes aware that another colleague is being subjected to harassment or coercion in his/her professional practice, he/she shall inform the College.

Relations with Medical Colleges

1. Doctors, whatever their professional or hierarchical position, have a duty to appear at the request of the College.
2. It is the duty of registered doctors to participate in collegiate activities and contribute to the corresponding financial burdens.
3. Health institutions shall facilitate the process of updating knowledge and improving professionally that is required of doctors. The College of Physicians shall ensure this.
4. The directors of the Medical Association (Boards of Colleges, of Regional Councils, and the General Council) are required to maintain the ethical unity of the whole professional association and must adjust their decisions to the statutory and ethical standards.
5. The directors of the Medical Association shall ensure the right to privacy and anonymity of doctors involved in a trial whose guilt is not proven.
6. The Medical Association shall defend members who are harmed because of compliance with this Code.
7. Given obviously serious medical behaviors that violate the rules of this Code, the Medical Colleges should act ex officio instituting the corresponding file.
8. Members of the Ethics Committees and the directors of the Medical Association have a duty to preserve secret information and documentation related to the ethical issues of their members.
9. The directors of the Medical Association have a duty to ensure the quality of Medicine teaching, which should not miss Medical Ethics teaching.
10. The directors of the Medical Association have a duty to intervene in health organization and all aspects that may affect the health of the population.
11. The doctor elected to institutional organs of the Medical Association shall fulfill the task with diligence and impartiality in the interest of the collective, observe caution and reserve in the development of his/her own duties and not disappoint the expectations of voters.
12. These positions should not be used for purposes other than institutional interest; it is required to account for management to the corresponding General Assemblies.
13. The Medical Association directors will respect the legitimate activities of the Boards or Assemblies and the responsible exercise of their right to decide matters by voting. They will take into account and be respectful of the opinions of college minorities.

Medical Experts

1. The physician has a duty to attend the call from judges and courts; he/she shall assist public administration in those matters which, within his/her authority, redound to the common good.
2. Cooperation with justice and public administration should not mean undermining the rights of the patient. The medical expert shall respect professional confidentiality with the only exceptions detailed in this Code.
3. The doctor called as a witness by a judge is required to appear. He/she will present facts seen or heard as a doctor and that are relevant to the case. He/she will preserve medical confidentiality as far as possible and only reveal what is strictly necessary for the resolution of the court case. In civil lawsuits he/she may not give privileged information obtained confidentially for being a doctor.
4. The physician should not accept medical expertise for which he/she has no professional training or if unwilling to defend it at the trial. If required to do so, he/she will be entitled to invoke the objection of science.
5. The position of expert is incompatible with having acted as a doctor of the person in question.
6. If the medical expertise requires a medical examination, experts will communicate their personal and professional identification, who appointed them, the mission that has been entrusted to them, by whom, for what purpose, and that their manifestations can be reflected in the report and made public. If the patient refuses to be examined, the expert will inform the person in charge.
7. Ethical rules for patients to preserve their privacy and modesty are extremely rigorous, since patients, by their legal status, are at a disadvantage against the expert.
8. The physician should not act as a witness-expert.
9. If, in the course of his/her performance, the expert doctor discovers any fact or circumstance involving a significant risk to the life or health of the patient or of third parties he/she shall notify the person concerned first and eventually the appropriate authority.

Medical Teaching

1. Medical students should know and practice the ethical standards of this Code and should be treated with respect and dignity by their teachers.
2. The teacher should take advantage of any circumstance in the course of medical practice to inculcate students with the ethical values and knowledge of this Code. He/she should be aware of the educational value of his/her example and of the fact that every medical act has an ethical component.
3. Doctors in training can perform their formative tasks under the supervision of their teachers.
4. The teacher should not be corrected in the presence of patients or medical staff regarding medical practice.
5. Those responsible for clinical teaching shall ensure that teaching and learning processes are developed minimizing inconveniences to patients.

Professional Publications

1. The physician has a duty to communicate discoveries made or conclusions drawn from scientific studies, whatever their results, to professional circles in the first place.
2. The doctor cannot use any data enabling the identification of the patient in written, oral, or visual scientific publications. When this possibility of identification cannot be avoided, the doctor must have the explicit consent of the person concerned or his/her legal representative.
3. The following behaviors are against medical ethics:

a. Introducing prematurely or sensationalistic ally procedures whose efficacy is unproven yet or exaggerate it.
b. Falsifying or fabricating data.
c. Plagiarism of research published by other authors.
d. Being included as an author without having contributed substantially to the design and performance of the research.
e. Not mentioning all funding sources supporting the publication.
f. Publishing repetitive publications.
g. Covert misleading advertising or promotion of a product without sufficient scientific support or insufficient information.

Medical Advertising

1. The medical profession has the right to use advertising. Advertisement must pursue the balance between publicizing the services that a doctor is trained to provide and the information a patient or user must have to choose their healthcare.
2. Advertising is reserved for spaces and resources specifically dedicated to this purpose. The citizen must see clearly that it is an advertising message. An advertising message should be clearly differentiated from a communication of scientific progress.
3. Medical advertising must be objective, prudent, and truthful, so as not to raise false hopes or spread unfounded concepts. The doctor may give information about his/her professional activities to the press and other general media.
4. It is unethical for physicians to provide their services as a prize of a contest or business promotion of any kind.
5. The doctor will not use advertising to promote deceptive healing hope nor to promote false health-related needs.
6. The doctor will not use advertising messages demeaning the dignity of the medical profession.
7. When doctors offer their services through ads, they will have an informative character, including their identity and the specialty under which they are registered in their college.

Indian Medical Council
(Professional Conduct, Etiquette and Ethics) Regulations, 2002

(Published in Part III, Section 4 of the Gazette of India, dated 6th April, 2002)

MEDICAL COUNCIL OF INDIA

NOTIFICATION

No. MCI-211(2)/2001/Registration. In exercise of the powers conferred under section 20A read with section 33(m) of the Indian Medical Council Act, 1956 (102 of 1956), the Medical Council of India, with the previous approval of the Central Government, hereby makes the following regulations relating to the Professional Conduct, Etiquette and Ethics for registered medical practitioners, namely:-

Short Title and Commencement:

(1) These Regulations may be called the Indian Medical Council (Professional conduct, Etiquette and Ethics) Regulations, 2002.

(2) They shall come into force on the date of their publication in the Official Gazette.

CHAPTER I

1. CODE OF MEDICAL ETHICS

A. Declaration:

Each applicant, at the time of making an application for registration under the provisions of the Act, shall be provided a copy of the declaration and shall submit a duly signed Declaration as provided in Appendix 1. The applicant shall also certify that he/she had read and agreed to abide by the same.

CHAPTER I

B. Duties and responsibilities of the Physician in general:

Character of Physician(Doctors with qualification of MBBS or MBBS with post graduate degree/ diploma or with equivalent qualification in any medical discipline):

physician shall up hold the dignity and honour of his profession

The prime object of the medical profession is to render service to humanity; reward or financial gain is a subordinate consideration. Who- so-ever chooses his profession, assumes the obligation to conduct himself in accordance with its ideals. A physician should be an upright man, instructed in the art of healings. He shall keep himself pure in character and be diligent in caring for the sick; he should be modest, sober, patient, prompt in discharging his duty without anxiety; conducting himself with propriety in his profession and in all the actions of his life.

No person other than a doctor having qualification recognized by Medical Council of India and registered with Medical Council of India/State Medical Council(s) is allowed to practice Modern system of Medicine or Surgery. A person obtaining qualification in any other system of Medicine is not allowed to practice Modern system of Medicine in any form.

Maintaining good medical practice:

The principal objective of the medical profession is to render service to humanity with full respect for the dignity of profession and man. Physicians should merit the confidence of patients entrusted to their care, rendering to each a full measure of service and devotion. Physicians should try continuously to improve medical knowledge and skills and should make available to their patients and colleagues the benefits of their professional attainments. The physician should practice methods of healing founded on scientific basis and should not associate professionally with anyone who violates this principle. The honored ideals of the medical profession imply that the responsibilities of the physician extend not only to individuals but also to society.

CHAPTER I

Membership in Medical Society: For the advancement of his profession, a physician should affiliate with associations and societies of allopathic medical professions and involve actively in the functioning of such bodies. A physician should participate in professional meetings as part of Continuing Medical Education programs, for at least 30 hours every five years, organized by reputed professional academic bodies or any other authorized organizations. The compliance of this requirement shall be informed regularly to the Medical Council of India or the State Medical Councils as the case may be.

Maintenance of medical records:

Every physician shall maintain the medical records pertaining to his/her indoor patients for a period of 3 years from the date of commencement of the treatment in a standard pro forma laid down by the Medical Council of India and attached as Appendix 3.

1.3.2. If any request is made for medical records either by the patients / authorized attendant or legal authorities involved, the same may be duly acknowledged and documents shall be issued within the period of 72 hours.

A Registered medical practitioner shall maintain a Register of Medical Certificates giving full details of certificates issued. When issuing a medical certificate he / she shall always enter the identification marks of the patient and keep a copy of the certificate. He / She shall not omit to record the signature and/or thumb mark, address and at least one identification mark of the patient on the medical certificates or report. The medical certificate shall be prepared as in Appendix 2.

Efforts shall be made to computerize medical records for quick retrieval.

CHAPTER I

Display of registration numbers:

Every physician shall display the registration number accorded to him by the State Medical Council/Medical Council of India in his clinic and in all his prescriptions, certificates, money receipts given to his patients. Physicians shall display as suffix to their names only recognized medical degrees or such certificates/diplomas and memberships/honors which confer professional knowledge or recognize any exemplary qualification/achievements.

Use of Generic names of drugs:

Every physician should, as far as possible, prescribe drugs with generic names and he/she shall ensure that there is a rational prescription and use of drugs.

The above Clause–1.5 Is substituted in terms of Notification published in the Gazette of India on 08.10.2016 as under.

"Every physician should prescribe drugs with generic names legibly and preferably in capital letters and he/she shall ensure that there is a rational prescription and use of drugs."

Highest Quality Assurance in patient care: Every physician should aid in safeguarding the profession against admission to it of those who are deficient in moral character or education. Physician shall not employ in connection with his professional practice any attendant who is neither registered nor enlisted under the Medical Acts in force and shall not permit such persons to attend, treat or perform operations upon patients wherever professional discretion or skill is required.

Exposure of Unethical Conduct: A Physician should expose, without fear or favor, in competent or corrupt, dishonest or unethical conduct on the part of members of the profession.

CHAPTER I

Payment of Professional Services:

The physician, engaged in the practice of medicine shall give priority to the interests of patients. The personal financial interests of a physician should not conflict with the medical interests of patients. A physician should announce his fees before rendering service and not after the operation or treatment is underway. Remuneration received for such services should be in the form and amount specifically announced to the patient at the time the service is rendered. It is unethical to enter into a contract of "no cure no payment." Physician rendering service on behalf of the state shall refrain from anticipating or accepting any consideration.

Evasion of Legal Restrictions: The physician shall observe the laws of the country in regulating the practice of medicine and shall also not assist others to evade such laws. He should be cooperative in observance and enforcement of sanitary laws and regulations in the interest of public health. A physician should observe the provisions of the State Acts like Drugs and Cosmetics Act, 1940; Pharmacy Act, 1948; Narcotic Drugs and Psychotropic Substances Act, 1985; Medical Termination of Pregnancy Act, 1971; Transplantation of Human Organ Act, 1994; Mental Health Act, 1987; Environmental Protection Act, 1986; Pre–natal Sex Determination Test Act, 1994; Drugs and Magic Remedies (Objectionable Advertisement) Act, 1954; Persons with Disabilities (Equal Opportunities and Full Participation) Act, 1995 and Bio-Medical Waste (Management and Handling) Rules, 1998 and such other Acts, Rules, Regulations made by the Central/State Governments or local Administrative Bodies or any other relevant Act relating to the protection and promotion of public health.

CHAPTER 2

2. DUTIES OF PHYSICIANS TO THEIR PATIENTS

Obligations to the Sick

Though a physician is not bound to treat each and every person asking his services, he should not only be ever ready to respond to the calls of the sick and the injured, but should be mindful of the high character of his mission and the responsibility he discharges in the course of his professional duties. In his treatment, he should never forget that the health and the lives of those entrusted to his care depend on his skill and attention. A physician should endeavor to add to the comfort of the sick by making his visits at the hour indicated to the patients. A physician advising a patient to seek service of another physician is acceptable; however, in case of emergency, a physician must treat the patient. No physician shall arbitrarily refuse treatment to a patient. However, for good reason, when a patient is suffering from an ailment which is not within the range of experience of the treating physician, the physician may refuse treatment and refer the patient to another physician.

Medical practitioner having any incapacity detrimental to the patient or which can affect his performance vis-à-vis the patient is not permitted to practice his profession.

Patience, Delicacy and Secrecy: Patience and delicacy should characterize the physician. Confidences concerning individual or domestic life entrusted by patients to a physician and defects in the disposition or character of patients observed during medical attendance should never be revealed unless their revelation is required by the laws of the State. Sometimes, however, a physician must determine whether his duty to society requires him to employ knowledge, obtained through confidence as a physician, to protect a healthy person against a communicable disease to which he is about to be exposed. In such instance, the physician should act as he would wish another to act toward one of his own family in like circumstances.

CHAPTER 2

Prognosis: The physician should neither exaggerate nor minimize the gravity of a patient's condition. He should ensure himself that the patient, his relatives, or his responsible friends have such knowledge of the patient's condition as will serve the best interests of the patient and the family.

The Patient must not be neglected: A physician is free to choose whom he will serve. He should, however, respond to any request for his assistance in an emergency. Once having undertaken a case, the physician should not neglect the patient, nor should he withdraw from the case without giving adequate notice to the patient and his family. Provisionally or fully registered medical practitioners shall not willfully commit an act of negligence that may deprive his patient or patients of necessary medical care.

Engagement for an Obstetric case: When a physician who has been engaged to attend an obstetric case is absent and another is sent for and delivery accomplished, the acting physician is entitled to his professional fees, but should secure the patient's consent to resign on the arrival of the physician engaged.

CHAPTER 3

3. DUTIES OF PHYSICIAN IN CONSULTATION

Unnecessary consultations should be avoided:

However, in case of serious illness and in doubtful or difficult conditions, the physician should request consultation, but under any circumstances such consultation should be justifiable and in the interest of the patient only and not for any other consideration. Consulting pathologists/radiologists or asking for any other diagnostic lab investigations should be done judiciously and not in a routine manner.

Consultation for Patient's Benefit: In every consultation, the benefit to the patient is of foremost importance. All physicians engaged in the case should be frank with the patient and his attendants.

CHAPTER 3

Punctuality in Consultation: Utmost punctuality should be observed by a physician in making themselves available for consultations.

Statement to Patient after Consultation:

All statements to the patient or his representatives should take place in the presence of the consulting physicians, except as otherwise agreed. The disclosure of the opinion on the patient or his relatives or friends shall rest with the medical attendant.

Differences of opinion should not be divulged unnecessarily, but when there is irreconcilable difference of opinion, the circumstances should be frankly and impartially explained to the patient or his relatives or friends. It would be opened to them to seek further advice as they so desire. **Treatment after Consultation:** No decision should restrain the attending physician from making such subsequent variations in the treatment if any unexpected change occurs, but at the next consultation, reasons for the variations should be discussed/explained. The same privilege, with its obligations, belongs to the consultant when sent for in an emergency during the absence of attending physician. The attending physician may prescribe medicine at any time for the patient, whereas the consultant may prescribe only in case of emergency or as an expert when called for.

Patients Referred to Specialists: When a patient is referred to a specialist by the attending physician, a case summary of the patient should be given to the specialist, who should communicate his opinion in writing to the attending physician.

Fees and other charges:

A physician shall clearly display his fees and other charges on the board of his chamber and/or the hospitals he is visiting. Prescription should also make clear if the Physician himself dispensed any medicine.

A physician shall write his name and designation in full along with registration particulars in his prescription letterhead.

Note: In Government hospital where the patient–load is heavy, the name of the prescribing doctor must be written below his/her signature.

CHAPTER 4

RESPONSIBILITIES OF PHYSICIANS TO EACH OTHER

Dependence of Physicians on each other: A physician should consider it as a pleasure and privilege to render gratuitous service to all physicians and their immediate family dependents.

Conduct in consultation: In consultations, no insincerity, rivalry or envy should be indulged in. All due respect should be observed towards the physician in-charge of the case and no statement or remark be made, which would impair the confidence reposed in him. For this purpose no discussion should be carried on in the presence of the patient or his representatives.

Consultant not to take charge of the case: When a physician has been called for consultation, the Consultant should normally not take charge of the case, especially on the solicitation of the patient or friends. The Consultantshallnotcriticizethereferringphysician.He/sheshalldiscuss the diagnosis treatment plan with the referring physician.

Appointment of Substitute: Whenever a physician requests another physician to attend his patients during his temporary absence from his practice, professional courtesy requires the acceptance of such appointment only when he has the capacity to discharge the additional responsibilityalongwithhis/herotherduties.Thephysicianactingunder such an appointment should give the utmost consideration to the interests and reputation of the absent physician and all such patients should be restored to the care of the latter upon his/her return.

Visiting another Physician's Case: When it becomes the duty of a physician occupying an official position to see and report upon an illness or injury, he should communicate to the physician in attendance so as to give him an option of being present. The medical officer/physician occupying an official position should avoid remarks upon the diagnosis or the treatment

CHAPTER 5

5 DUTIES OF PHYSICIAN TO THE PUBLIC AND TO THE PARAMEDICAL PROFESSION

Physicians as Citizens: Physicians, as good citizens, possessed of special training, should disseminate advice on public health issues. They should play their part in enforcing the laws of the community and in sustaining the institutions that advance the interests of humanity. They should particularly co-operate with the authorities in the administration of sanitary/public health laws and regulations.

Public and Community Health:

Physicians, especially those engaged in public health work, should enlighten the public concerning quarantine regulations and measures for the prevention of epidemic and communicable diseases. At all times, the physician should notify the constituted public health authorities of every case of communicable disease under his care, in accordance with the laws, rules, and regulations of the health authorities. When an epidemic occurs, a physician should not abandon his duty for fear of contracting the disease himself.

Pharmacists / Nurses:

6 Physicians should recognize and promote the practice of different paramedical services such as pharmacy and nursing as professions and should seek their cooperation wherever required.

CHAPTER 6

6. **UNETHICAL ACTS** :A physician shall not aid or abet or commit any of the following acts which shall be construed as unethical-

Advertising:

Soliciting of patients directly or indirectly, by a physician, by a group of physicians or by institutions or organizations is unethical. A physician shall not make use of him / her (or his / her name) as subject of any form or manner of advertising or publicity through any mode either alone or in conjunction with others which is of such a character as to invite attention to him or to his professional position, skill, qualification, achievements, attainments, specialties, appointments, associations, affiliations or honours and/or of such character as would ordinarily result in his self-aggrandizement. A physician shall not give to any person, whether for compensation or otherwise, any approval, recommendation, endorsement, certificate, report or statement with respect to any drug, medicine, nostrum remedy, surgical, or therapeutic article, apparatus or appliance or any commercial product or article with respect to any property, quality or use thereof for any test, demonstration or trial thereof, for use in connection with his name, signature, or photograph in any form or manner of advertising through any mode, nor shall he boast of cases, operations, cures or remedies or permit the publication of report thereof through any mode. A medical practitioner is however permitted to make a formal announcement in press regarding the following:

(1) On starting practice.
(2) On change of type of practice.
(3) On changing address.
(4) On temporary absence from duty.
(5) On resumption of another practice.
(6) On succeeding to another practice.
(7) Public declaration of charges.

CHAPTER 6

Printing of self photograph, or any such material of publicity in the letter head or on sign board of the consulting room or any such clinical establishment shall be regarded as acts of self advertisement and unethical conduct on the part of the physician. However, printing of sketches, diagrams, picture of human system shall not be treated as unethical.

Patent and Copy rights: A physician may patent surgical instruments, appliances, and medicine or copyright applications, methods, and procedures. However, it shall be unethical if the benefits of such patents or copyrights are not made available in situations where the interest of a large population is involved.

Running an open shop (Dispensing of Drugs and Appliances by Physicians): A physician should not run an open shop for sale of medicine for dispensing prescriptions prescribed by doctors other than himself or for sale of medical or surgical appliances. It is not unethical for a physician to prescribe or supply drugs, remedies, or appliances as long as there is no exploitation of the patient. Drugs prescribed by a physician or brought from the market for a patient should explicitly state the proprietary formulae as well as the generic name of the drug.

Rebates and Commission:

A physician shall not give, solicit, or receive, nor shall he offer to give, solicit, or receive, any gift, gratuity, commission, or bonus in consideration of or return for the referring, recommending, or procuring of any patient for medical, surgical, or other treatment. A physician shall not directly or indirectly participate in or be a party to any act of division, transference, assignment, subordination, rebating, splitting, or refunding of any fee for medical, surgical, or other treatment.

Provisions of para 6.4.1 shall apply with equal force to the referring, recommending, or procuring by a physician or any person, specimen, or material for diagnostic purposes or other study/work. Nothing in this section, however, shall prohibit payment of salaries by a qualified physician to other duly qualified person rendering medical care under his supervision.

Secret Remedies: The prescribing or dispensing by a physician of secret remedial agents of which he does not know the composition, or the manufacture or promotion of their use is unethical and as such prohibited. All the drugs prescribed by a physician should always carry a proprietary formula and clear name.

Human Rights: The physician shall not aid or abet torture nor shall he be a party to either infliction of mental or physical trauma or concealment of torture inflicted by some other person or agency in clear violation of human rights.

Euthanasia: Practicing euthanasia shall constitute unethical conduct. However, on specific occasions, the question of withdrawing supporting devices to sustain cardio-pulmonary function even after brain death shall be decided only by a team of doctors and not merely by the treating physician alone. A team of doctors shall declare withdrawal of support. System. Such team shall consist of the doctor in charge of the patient, Chief Medical Officer / Medical Officer in charge of the hospital, and a doctor nominated by the in-charge of the hospital from the hospital staff or in accordance with the provisions of the Transplantation of Human Organ Act, 1994.

CHAPTER 6

The Clause No. 6.8, as under, is included in terms of Notification published on 14.12.2009 in Gazette of India. **"6.8 Code of Conduct for doctors and professional association of doctors in**

Their relationship with pharmaceutical and allied health sector Industry.

In dealing with Pharmaceutical and allied health sector industry, a medical practitioner shall follow and adhere to the stipulations given below:-

a) Gifts: A medical practitioner shall not receive any gift from any pharmaceutical or allied health care industry and their sales people or representatives.

b) Travel facilities: A medical practitioner shall not accept any travel facility inside the country or outside, including rail, air, ship, cruise tickets, paid vacations etc. from any pharmaceutical or allied healthcare industry or their representatives for self and family members for vacation or for attending conferences, seminars, workshops, CME programme etc as a delegate.

c) Hospitality: A medical practitioner shall not accept individually any hospitality like hotel accommodation for self and family member sunder any pretext.

d) Cash or monetary grants: A medical practitioner shall not receive any cash or monetary grants from any pharmaceutical and allied healthcare industry for individual purpose in individual capacity under any pretext. Funding for medical research, study etc. can only be received through approved institutions by modalities laid down by law/rules/guidelines adopted by such approved institutions, in a transparent manner. It shall always be fully disclosed.

CHAPTER 6

e) Medical Research: A medical practitioner may carryout, participate in, and work in research projects funded by pharmaceutical and allied healthcare industries. A medical practitioner is obliged to know that the fulfillment of the following items (i) to (vii) will be an imperative for undertaking any research assignment / project funded by industry – for being proper and ethical. Thus, in accepting such a position a medical practitioner shall:-

(I) Ensure that the particular research proposal(s) has the due permission from the competent concerned authorities.

(ii) Ensure that such a research project(s) has the clearance of national/ state / institutional ethics committees /bodies.

(iii) Ensure that it fulfils all the legal requirements prescribed for medical research.

(iv) Ensure that the source and amount of funding is publicly disclosed at the beginning itself.

(v) Ensure that proper care and facilities are provided to human volunteers, if they are necessary for the research project(s).

(vi) Ensure that undue animal experimentations are not done and when these are necessary they are d one in a scientific and a humane way.

(vii) Ensure that while accepting such an assignment a medical practitioner shall have the freedom to publish the results of the research in the greater interest of the society by inserting such a clause in the MoU or any other document / agreement for any such assignment.

f) Maintaining Professional Autonomy: In dealing with pharmaceutical and allied health care industry a medical practitioner shall always ensure that there shall never be any compromise either with his/her own professional autonomy and / or with the autonomy and freedom of the medical institution.

g) Affiliation: A medical practitioner may work for pharmaceutical and allied healthcare industries in advisory capacities, as consultants, as researchers, as treating doctors or in any other professional capacity. In doing so, a medical practitioner shall always:

(i) Ensure that his professional integrity and freedom are maintained.

(ii) Ensure that patient's interest are not compromised in anyway.

(iii) Ensure that such affiliations are within the law.

(iv) Ensure that such affiliations/employments are fully transparent and disclosed.

h) Endorsement: A medical practitioner shall not endorse any drug or product of the industry publically. Any study conducted on the efficacy or otherwise of such products shall be presented to and / or through appropriate scientific bodies or published in appropriate scientific journals in a proper way".

SECTION	ACTION
6.8.1Indealing with Pharmaceutical and allied health sector industry, a medical practitioner shall follow and adhere to the stipulations given below:-	
a) Gifts: A medical practitioner shall not receive any gift from any pharmaceutical or allied health care industry and their sales people or representatives.	***Gifts*** *more than Rs.1,000/-uptoRs.5,000/-:* Censure ***Gifts*** *more than Rs. 5,000/- up to Rs. 10,000/-:* Removal from Indian Medical Register or State Medical Register for 3(three) months. *GiftsmorethanRs.10,000/-toRs.50,000/-:* Removal from Indian Medical Register or State Medical Register for 6(six) months. *GiftsmorethanRs.50,000/-toRs.1,00,000/-:* Removal from Indian Medical Register or State Medical Register for 1(one) year. *GiftsmorethanRs.1,00,000/-:*Removal for a Period of more than 1 (one) year from Indian Medical Register or State Medical Register.

CHAPTER 6

SECTION	ACTION
b) Travel facilities: A medical practitioner shall not accept any travel facility inside the country or outside, including rail, road, air, ship, cruise tickets, paid vacations etc. from any pharmaceutical or allied healthcare industry or their representatives for self and family members for vacation or for attending conferences, seminars, workshops, CME program me etc .as a delegate.	ExpensesfortravelfacilitiesmorethanRs.1,000/-up toRs.5,000/- :CensureExpensesfortravelfacilitiesmorethanRs.5,000/-up toRs.10,000/-:Removal from Indian Medical RegisterorStateMedicalRegisterfor3(three) months. ExpensesfortravelfacilitiesmorethanRs.10,000/-to Rs. 50,000/-: Removal from Indian Medical Register or State medical Register for 6(six) months. Expenses fortravelfacilitiesmorethanmorethan Rs.50,000/- to Rs. 1,00,000/-:Removal from Indian Medical Register or State Medical Register for 1 (one) year. ExpensesfortravelfacilitiesmorethanRs.1,00,000/-: Removalforaperiodofmorethan1(one)year from Indian Medical Register or State Medical Register.
c) Hospitality: A medical practitioner shall not accept individually any hospitality like hotel accommodation for self and family members under any pretext.	Expenses for Hospitality more than Rs. 1,000/- upto Rs.5,000/-:Censure ExpensesforHospitalitymorethanRs.5,000/-upto Rs. 10,000/-: Removal from Indian Medical Register or State Medical Register for 3 (three) months. ExpensesforHospitalitymorethanRs.10,000/-to Rs. 50,000/-: Removal from Indian Medical RegisterorStatemedicalRegisterfor6(six)months. Expenses for Hospitality more than more than Rs. 50,000/- to Rs. 1,00,000/: Removal from Indian Medical RegisterorStateMedicalRegisterfor1(one) year. Expenses for Hospitality more than Rs.1,00,000/-: Removal for a period of more than 1 (one)year from Indian Medical Register or State Medical Register.

CHAPTER 6

SECTION	ACTION
d) Cash or monetary grants:- A medical practitioner shall not receive any cash or monetary grants from any pharmaceutical and allied healthcare industry for individual purpose in individual capacity under any pretext. Funding for medical research, study etc. can only be received through approved institutions by modalities laid down by law/rules / Guidelines adopted by such approved in situations, in a transparent manner. It shall always be fully disclosed.	Cash or monetary grants more than Rs. 1,000/- up to Rs. 5,000/-: Censure Cash or monetary grants more than Rs. 5,000/-uptoRs.10,000/-:Removal from Indian Medical Register or State Medical Register for 3(three) months. Cash or monetary grants more than Rs. 10,000/- to Rs. 50,000/-: Removal from Indian Medical Register or State Medical Register for 6(six)months. Cash or monetary grants more than more than Rs. 50,000/- to Rs. 1,00,000/- : Removal from Indian Medical Register orStateMedicalRegisterfor1(one)year. Cash or monetary grants more than Rs.1,00,000/-: Removal for a period of more than 1 (one) year from Indian Medical Register or State Medical Register.

CHAPTER 6

SECTION	ACTION
e) Medical Research: A medical practitioner may carry out, participate in, and work in research projects funded by pharmaceutical and allied healthcare industries. A medical practitioner is obliged to know that the fulfillment of the following items (i) to (vii) will be an imperative for undertaking any research assignment/project funded by industry – for being proper and ethical. Thus, in accepting such a position a medical practitioner shall:-First time censure, and thereafter removal of name from Indian Medical Register or State Medical Register for a period depending upon the violation of the clause (i) Ensure that the particular research proposal(s) has the due permission from the competent concern authorities. (ii) Ensure that such are search project(s)has the Clearance of national/state/institution alethic committees/bodies. (iii) Ensure that it fulfils all the legal requirements Prescribed for medical research. (iv) Ensure that the source and amount off funding is publicly disclosed at the beginning itself. (v) Ensure that proper care and facilities are Provided to human volunteers, if they are necessary for their search project(s). (vi) Ensure that undue animal experimentations are Not done and when these are necessary they are done in a scientific and a humane way. (vii) Ensure that while accepting such an assignment A medical practitioner shall have the freedom to publish the results of the research in the greater interest of the society by inserting such a clause in the MoU or any other documents/agreement for any such assignment.	First time censure, and thereafter removal of name from Indian Medical Register or State Medical Register for a period depending upon the violation of the clause.

CHAPTER 6

SECTION	ACTION
f) Maintaining Professional Autonomy :- In dealing with pharmaceutical an dallied healthcare industry a medical practitioner shall always ensure that there shall never be any compromise either with his/her own professional autonomy and/or with the autonomy and freedom of the medical institution.	First time censure, and thereafter removal of name from Indian Medical Register or State Medical Register. Cash or monetary grants more than Rs.1,00,000/-:Removal for a period of more than 1 (one) year from Indian Medical Register or State Medical Register.
g) Affiliation:-A medical practitioner may work for pharmaceutical and allied healthcare industries in advisory capacities, as consultants, as researchers, as treating doctors or in any other professional capacity. In doing so, a medical practitioner shall always:- (i) Ensure that his professional integrity and Freedom are maintained. (ii) Ensure that patient's interest are not compromised in anyway. (iii) Ensure that such affiliations are with in the law. (iv) Ensure that such affiliations/employments are fully transparent and disclosed.	First time censure, and thereafter removal of name from Indian Medical Register or State Medical Register for a period depending up on the violation of the clause.
h) Endorsement:- A medical practitioner shall notendorseanydrugorproductoftheindustrypublically.Anystudyconductedontheefficacy or otherwise of such products shall be presented to and/or through appropriate scientific bodies or published in appropriate scientific journals in a proper way.	First time censure, and thereafter removal of name from Indian Medical Register or State Medical Register.

CHAPTER 7

7. **MISCONDUCT:** The following acts of commission or mission on the part of a physician shall constitute professional misconduct rendering him/her liable for disciplinary action

Violation of the Regulations: If he/she commits any violation of these Regulations.

If he/she does not maintain the medical records of his/her indoor patients .foraperiodofthreeyearsasperregulation1.3andrefusestoprovidethe same within72 hours when the patient or his/her authorized representative makes a request for it as per the regulation1.3.2.

If he/she does not display the registration number accorded to him/her by the State Medical Council or the Medical Council of India in his clinic, prescriptions and certificates etc. issued by him or violates the provisions of regulation1.4.2.

Adultery or Improper Conduct: Abuse of professional position by committing adultery or improper conduct with a patient or by maintaining an improper association with a patient will render a Physician liable for disciplinary action as provided under the Indian Medical Council Act, 1956 or the concerned State Medical Council Act.

Conviction by Court of Law: Conviction by a Court of Law for offences involving moral turpitude / Criminal acts.

Sex Determination Tests: On no account sex determination test shall be undertaken with the intent to terminate the life of a female foetus developing in her mother's womb, unless there are other absolute indications for termination of pregnancy as specified in the Medical Termination of Pregnancy Act, 1971. Any act of termination of pregnancy of normal female foetus amounting to female foeticide shall be regarded as professional misconduct on the part of the physician leading to penal erasure besides rendering him liable to criminal proceedings as per the provisions of this Act.

CHAPTER 7

Signing Professional Certificates, Reports and other Documents: Registered medical practitioners are in certain cases bound by law to give, or may from time to time be called upon or requested to give certificates, notification, reports and other documents of similar character signed by the min their professional capacity for subsequent use in the courts or for administrative purposes etc. Such documents, among others, include the ones given at Appendix–4.Anyregisteredpractitionerwhoisshowntohavesignedor given under his name and authority any such certificate, notification, report or document of a similar character which is untrue, misleading or improper, is liable to have his name deleted from the Register.

A registered medical practitioner shall not contravene the provisions of the Drugs and Cosmetics Act and regulations made there under. Accordingly,

a) Prescribing steroids/ psychotropic drugs when there is no absolute medical indication;

b) Selling Schedule 'H'&'L' drugs and poisons to the public except to his patient;

in contravention of the above provisions shall constitute gross professional misconduct on the part of the physician.

Performing or enabling unqualified person to perform an abortion or any illegal operation for which there is no medical, surgical or psychological indication.

A registered medical practitioner shall not issue certificates of efficiency in modern medicine to unqualified or non-medical person.

(Note: The foregoing does not restrict the proper training and instruction of bonafide students, midwives, dispensers, surgical attendants, or skilled mechanical and technical assistants and therapy assistants under the personal supervision of physicians.)

CHAPTER 7

A physician should not contribute to the lay press articles and give interviews regarding diseases and treatments which may have the effect of advertising himself or soliciting practices; but is open to write to the lay press under his own name on matters of public health, hygienic living or to deliver public lectures, give talks on the radio/TV/internet chat for the same purpose and send announcement of the same to lay press.

An institution run by a physician for a particular purpose such as a maternity home, nursing home, private hospital, rehabilitation centre or any type of training institution etc. may bead vertied in the lay press, but such advertisements should not contain any thing more than the name of the institution, type of patients admitted, type of training and other facilities offer end and the fees.

It is improper fora physician not you seen unusually large sign board and write on it anything other than his name, qualifications obtained from a University or a statutory body, titles and name of his specialty, registration number including the name of the State Medical Council under which registered. The same should be the contents of his prescription papers. It is improper to affix a sign-board on a chemist's shop or in places where he does not reside or work.

The registered medical practitioner shall not disclose the secrets of a patient that have been learnt in the exercise of his/her profession except–

i) In a court of law under orders of the Presiding Judge;

ii) In circumstances where there is serious and identified is specific person and / or community; and

iii) Not if able diseases.

In case of communicable/not if able diseases, concerned public health authorities should be in formed immediately.

CHAPTER 7

Theregisteredmedicalpractitionershallnotrefuseonreligiousgrounds alone to give assistance in or conduct of sterility, birth control, circumcision and medical termination of Pregnancy when there is medicalindication,unlessthemedicalpractitionerfeelshimself/herself in competent to do so.

Before performing an operation the physician should obtain in writing the consent from the husband or wife, parent or guardian in the case of minor, or the patient himself as the case may be. In an operation which may result in sterility the con sent of both husband and wife Is needed.

A registered medical practitioner shall not publish photographs or case reports of his / her patients without their permission, in any medical or other journal in a manner by which their identity could be made out. It he identity is not to be disclosed, the consent is not needed.

In the case of running of a nursing home by a physician and employing assistants to help him / her, the ultimate responsibility rests on the physician.

A Physician shall not use outs or agents for procuring patients.

A Physician shall not claim to be specialist unless he has a special qualification in that branch.

Noactofinvitrofertilizationorartificialinseminationshallbeundertaken without the informed consent of the female patient and her spouse as well as the donor. Such consent shall be obtained in writing only after the patient is provided, at her own level of comprehension, with sufficient information about the purpose, methods, risks, inconveniences, disappointments of the procedure and possible is sand hazards.

CHAPTER 7

Research: Clinical drug trials or other research involving patients or volunteers as per the guidelines of ICMR can be undertaken, provided ethical considerations are borne in mind. Violation of existing ICMR guidelinesinthisregardshallconstitutemisconduct.Consenttakenfrom the patient for trial of drug or therapy which is not as per the guidelines shall also be construed as misconduct.

The following Clause No. 7.23 & 7.24 are deleted in terms of Notification published on 22.02.2003 in Gazette of India.

If a physician posted in rural area is found absent on more than two occasionsduringinspectionbytheHeadoftheDistrictHealthAuthorityor the Chairman, Zila Parishad, the same shall be construeasam is conduct if it is recommended to the Medical Council of India/State Medical Council by the State Government for action under these Regulations.

If a physician posted in a medical college/institution both as teaching faculty or otherwise shall remain in hospital/college during the assigned duty hours. If they are found absent on more than two occasions during this period, the same shall be construedasam is conduct if it is certified by the Principal/Medical Superintendent and forwarded through the State Government to Medical Council of India/State Medical Council for action under these Regulations.

CHAPTER 8

8. PUNISHMENT AND DISCIPLINARY ACTION

It must be clearly understood that the instances of offences and of Professional misconduct which are given above do not constitute and are not intended to constitute a complete list of the infamous acts which calls for disciplinary action, and that by issuing this notice the Medical Council of India and or State Medical Councils are in no way precluded from considering and dealing with any other form of professional misconduct on the part of a registered practitioner. Circumstances may and do arise from time to time in relation to which there may occur questions of professional misconduct which do not come within any of these categories. Every care should be taken that the code is not violated in letter or spirit. In such instances as in all others, the Medical Council of India and/or State Medical Councils have to consider and decide upon the facts brought before the Medical Council of India and/or State Medical Councils.

It is made clear that any complaint with regard to professional misconduct can be brought before the appropriate Medical Council for disciplinary action. Upon receipt of any complaint of professional misconduct, the appropriate Medical Council would hold an enquiry and give opportunity to the registered medical practitioner to be heard in person or by pleader. If the medical practitioner is found to be guilty of committing professional misconduct, the appropriate Medical Council may award such punishment as deemed necessary or may direct the removal altogether or for a specified period, from the register of the name of the delinquent registered practitioner. Deletion from the Register shall be widely publicized in local press as well as in the publications of different Medical Associations/ Societies/Bodies.

In case the punishment of removal from the register is for a limited period, the appropriate Council may also direct that the name so removed shall be restored in the register after the expiry of the period for which the name was ordered to be removed.

CHAPTER 8

Decision on complaint against delinquent physician shall be taken within a time limit of 6 months.

During the pendency of the complaint, the appropriate Council may restrain the physician from performing the procedure or practice which is under scrutiny.

Professional incompetence shall be judged by a peer group as per guidelines prescribed by the Medical Council of India.

The following Clause No. 8.7 & 8.8 are included in terms of Notification published on 27.05.2004 in Gazette of India.

8.7 Where either on a request or otherwise the Medical Council of India is informed that any complaint against a delinquent physician has not been decided by a State Medical Council within a period of six months from the date of receipt of complaint by it, and further the MCI has reason to believe that there is no justified reason for not deciding the complaint within the said prescribed period, the Medical Council of India may.

(I)Impress upon the concerned State Medical council to conclude and decide the complaint within a time bound schedule;

(ii) May decide to withdraw the said complaint pending with the concerned State Medical Council straight away or after the expiry of the period which had been stipulated by the MCI in accordance with para (i) above, to itself and refer the same to the Ethical Committee of the Council for its expeditious disposal in a period of not more than six months from the receipt of the complaint in the office of the Medical Council of India."

Any person aggrieved by the decision of the State Medical Council on any complaint against a delinquent physician, shall have the right to file an appeal to the MCI within a period of 60 days from the date of receipt of the order passed by the said Medical Council:

Provided that the MCI may, if it is satisfied that the appellant was prevented by sufficient cause from presenting the appeal within the aforesaid period of 60 days, allow it to be presented within a further period of 60 days.

CHAPTER 8

APPENDIX-1

A.DECLARATION

1) At the time of registration, each applicant shall be given a copy of the following declaration by the Registrar concerned and the applicant shall read and agree to abide by the same:
2) I solemnly pledge myself to consecrate my life to service of humanity. Even under threat, I will not use my medical knowledge contrary to the laws of Humanity.
3) I will maintain the utmost respect for human life from the time of conception.
4) I will not permit considerations of religion, nationality, race, party politics, or social standing to intervene between my duty and my patient
5) I will practice my profession with conscience and dignity.
6) The health of my patient will be my first consideration.
7) I will respect these secrets which are confined in me.
8) I will give to my teachers the respect and gratitude which is their due.
9) I will maintain by all means in my power, the honour and noble traditions of the medical profession.
10) I will treat my colleagues with all respect and dignity.
11) I shall abide by the code of medical ethics as enunciated in the Indian Medical Council (Professional Conduct, Etiquette and Ethics) Regulations 2002.

I make the sepromises solemnly, freely and upon my honour.

Signature…… Date……

Name……Place……

……

Address……

…

CHAPTER 8

Some common breaches of ethics

- Having inappropriate relationships with students (sexual, business partnerships, drinking, etc.)
- Violation of institute related policies and educational procedures
- Failing to perform duties assigned
- Imposing personal views on students unrelated to the subject (political or religious views or views on controversial social issues)
- Improper grading, partiality, and lack of fairness
- Exposing students to embarrassment or ridicule (emotional or psychological harassment)
- Engaging students in unethical behavior
- Accepting gifts and favors from students
- Deceiving students and their parents
- Invading students' privacy
- Disrespectful behaviors and unprofessional interpersonal behavior that interferes with the working and learning environment
- Loss of civility that interferes with the working and learning environment (for example shouts, insults, throwing objects or other displays of temper)
- Discrimination on the basis of age, gender, race, religion, disability, or sexual orientation
- Misusing institutional property for personal business

Code of Conduct : Students

- Students are required to collect all the information prior to taking admission to the respective course.
- To help weak students, the institute may arrange remedial classes.
- The college enforces healthy policies and practices maintaining best academic standards for the benefit of students. Students should meticulously follow the requirements of internal examinations, test performance, assignments, class work and any other work assigned by the teachers. Any of the students who fails to complete work in time, will not be allowed to appear for the university examinations.
- It is required that the students make themselves aware about the time table, progress on the studies in various subjects, schedule of examinations, tutorials, class work, assignments and any other work assignments by the teachers. It is the responsibility of the students to attend the college regularly and be updated about all the academics and their requirements throughout the year.
- Students are required to check their eligibility before application and admission. The college will not be held responsible if students are found ineligible during admission.
- As per university rules, candidate must have minimum 80% attendance to appear for university examination.
- Students who will be given posting in various hospitals must attend them and will have to report in time. If fail to do so, will be punished or dismissed or have to pay penalty.
- During posting to various hospitals, students have to compulsorily fill log book of work undertaken and get it signed by concerned HOD/Medical Officer.
- Ragging of students or any such activity is strictly prohibited.
- Smoking, consumption of pan-masala/tobacco will be considered breach of discipline and liable for penalty. Private parties with college students for a cause (welcome, farewell, etc.) are prohibited.
- The behaviour of the student with one and all should be courteous, polite and as per the rules and regulations of university. The HOD reserves the right to penalize or dismiss any student violating this code of conduct.

Code of Conduct: Administrative Staff

- Administrative staff are expected to proceed in their daily duties in a manner that upholds the dignity of their profession; to honour the terms and intent of the collective agreements that have been entered into with faculty and support staff and the terms and conditions of employment for administrative staff; and to exhibit a commitment to excellence in learning and teaching and a concern for the well-being of students, faculty, support staff, colleagues, the College, and the broader society in which all exist.
- All administrators in its employ to conform to the explicit standards of professionalism defined in this document.
- Administrators who demonstrate behavior that does not comply with or that is inconsistent with the minimal standards of professionalism contained in this document may be subject to the range of disciplinary actions specified in the College's Discipline Policy.
- The term "professionalism" is used to describe adherence by administrative staff to an acceptable standard in the method, manner, and spirit in which they perform their duties.
- The College also expects that administrative staff will:

  - ✓ Familiarize themselves with College policies that are relevant to their responsibilities,
  - ✓ Adhere to those policies to the best of their ability;
  - ✓ Assist and encourage others to adhere to the policies, for example, by directing a student to the appropriate channels for appeal;
  - ✓ Draw perceived problems with the policies to the attention of the Office.
  - ✓ familiarize themselves with and adhere to the relevant provisions of the Ontario Human Rights Code and the College Prevention of Discrimination and Harassment policy;
  - ✓ Familiarize themselves with and adhere to the policies regarding Intellectual Property, and Academic Freedom and Academic Dishonesty.

Code of Conduct: Administrative Staff

- Un acceptable Behaviors –
  - ✓ Administrative staff will not use the workplace or online environment to:
  - ✓ use scurrilous, profane, or obscene language;
  - ✓ make remarks or engage in behavior that could reasonably be considered racist, sexist, or discriminatory according to the Ontario Human Rights Code and will intervene if they witness such behaviour;
  - ✓ engage in behaviour or make remarks that could reasonably be interpreted as threatening and will intervene if they witness such behaviour;
  - ✓ intimidate any employee or student verbally, while they themselves strive actively to prevent others from engaging in such behaviour; or encourage, by inaction or innuendo, the development of an environment that is fractious, disrespectful of others, or intolerant of order and good manners;
  - ✓ Promote their personal, religious, political, social, or business agendas. In addition, administrators will avoid attempts to use their authority as managers or the reputation of the College to forward any personal or political agendas.

- Online Environment/Communication Facilities-
  - ✓ All staff must apply professional and ethical standards at all times when accessing, using, and distributing information and materials through use of learning technologies.
  - ✓ Staff must use computing and communication facilities and services only for the purposes for which they are authorized.
  - ✓ Technologies must not be used to access, use, or distribute materials that are obscene, vulgar, or pornographic, or that might be perceived by others as harassment or intimidation.
  - ✓ The College believes that every user bears the primary responsibility for the materials he/she chooses to access, send, or display.
  - ✓ All policies regarding academic staff conduct and responsibilities also apply to the online teaching environment.

Code of Conduct: Administrative Staff

- Copyright-
  - ✓ Administrative staff will abide by all copyright laws, which applies to the internet as well as paper.
  - ✓ Staff wishing to copy original work shall receive written permission from the copyright owner prior to copying.
  - ✓ Those who are not familiar with these laws may clarify their responsibilities with any College librarian.
  - ✓ The College will not provide assistance or protection relating to charges arising from violation of copyright law.
- Administrative staff are expected to
  - ✓ Demonstrate courtesy and respect in all dealings with students, academic employees, and support staff;
  - ✓ Be fully conversant with all aspects of the College's policies and procedures and will be prepared to implement them;
  - ✓ Demonstrate their respect for the professionalism of faculty and support staff;
  - ✓ Ensure that the work assigned to an employee meets the terms of the employee's job description and the collective agreements and that the duties are appropriate to the qualifications and skills of the employee;
  - ✓ Give faculty and support staff who agree to accept assignments currently outside their qualifications and skills but within their expected potential a commitment to provide the time or training needed to successfully perform these assignments;
  - ✓ Be clear and specific in communications with faculty and staff so that all concerned will know precisely what behaviour is expected of them;

Code of Conduct: Administrative Staff

- Administrative staff will:
    - ✓ Clearly communicate these priorities to everyone in their department;
    - ✓ Ensure that no activity in the department is running counter to those priorities;
    - ✓ Articulate departmental goals that further those priorities; and
    - ✓ Seek training in those areas where they are not equipped to meet the priorities of the College.
- Administrators will demonstrate their understanding that the terms of their relationships with faculty and staff in their departments are governed by the terms of the collective agreements into which the College has entered with faculty and support staff.
- Administrators must understand that how they represent the College is vitally important to all members of the College community.
- Professionalism in the realm of public relations will be demonstrated by ensuring:
    - Public statements are accurate, and
    - Public statements do not misrepresent or distort the intentions of the College.
- Administrators are responsible for ensuring that the required statistical data provided for external agencies providing funds is accurate.
- Administrators will avoid attempts to use their authority as managers or the reputation of the College to forward any personal or political agendas.

Code of Conduct for Non-Teaching Staff

1. ***Rules regarding probation-***

- Any staff appointed shall be on probation for a period of one year from the date of joining duty.
- The College may, for reasons to be recorded in writing, extend the period of probation to a further period of one year.

2. ***Rules regarding leaving service/termination of services.***

- A staff who is on probation, desirous of leaving the college may do so either by giving the college one month's notice in writing or by paying the college one month's salary in lieu of such notice.
- A staff who has completed his/her probation, desirous of leaving the college may do so either by giving the college three months' notice in writing or by paying the college three months' salary in lieu of such notice.
- For terminating the service of a staff who is on probation, the college shall give one month's notice or one month's salary in lieu of such notice.
- For terminating the service of a staff who has completed his/her probation, the college shall give three months' notice or three months' salary in lieu of such notice.

3. ***Leave Rules-***

- A staff is eligible for 12 days casual leave in one calendar year.
- Any staff availing himself/herself of the casual leave facilities should do so with the prior permission of the Principal.

4. Every staff employed in the college shall discharge his/her duties efficiently and diligently and shall conform to the rules and regulations. 1(a) It shall be mandatory on the staff employed in the private college to do any work in connection with an examination conducted by the University or any college, which he/she is required to do by the Vice-Chancellor or the Registrar of the University/by the Principal of the College, as the case may be.

- No staff employed in a college shall absent himself from his/her duties without prior permission. In case of sickness or absence on medical grounds, a medical certificate to the satisfaction of the college authorities shall be produced within a week.

Code of Conduct for Non-Teaching Staff

5. No staff employed in a college shall engage directly or indirectly in any trade or business. In the case of remunerative work like private tuition etc., specific sanction of the college authorities in writing shall be abstained.
6. (a) No staff employed in the college shall send any application for employment under any other agency, except through the secretary.
   (b) The secretary shall not withhold any such application. It shall, however, be open to the committee to prescribe reasonable conditions for relieving him.
7. When a staff employed in a college seeks to accept honorary work without detriment to his/her duties, prior permission of the secretary in writing shall be obtained.
8. Any staff employed in a college when involved in criminal proceedings shall inform the committee of each proceeding.
9. No staff employed in a college shall engage himself/herself in any political activity. He/She shall not associate with any political party or any organization which takes part in politics or shall subscribe to, or assist in any other manner, any political movement.
10. No staff employed in a college shall contest or participate in or canvas for any candidate in any election.
11. No staff employed in a college shall bring or attempt to bring any political or other influence on his/her superior authority in respect of his/her individual service interests.
12. No staff employed in a college shall engage himself/herself or participate in any activity which is anti-secular or which tends to create disharmony in society or in any demonstration which is prejudicial to the interests of the sovereignty and integrity of India, the security of States, friendly relations with foreign States, public order, decency or morality or which involves contempt of court, defamation or incitement to an offence.
13. No staff employed in a college shall indulge in any criticism of the policies of the Government either directly or indirectly or participate in activities which bring disrepute to the Government.

Code of Conduct for Non-Teaching Staff

Also-

All staff of the Institute are responsible for protecting and taking reasonable steps to prevent the theft or misuse of, or damage to Institute assets including all kinds of physical assets, movable and immovable property.

- All the staff members should follow the rules and regulations of the Institution as prevalent from time to time.
- All the staff members should follow the rules and regulations of the Institution as prevalent from time to time.
- All staff shall devote their time and their best efforts for the progress of the Institute.
- Staff should contribute to the vision, mission, and goals of the Institute through engagement of working hours.
- Staff must be punctual, sincere, and regular in their approach.
- Staff must attend all functions of the college as per the instructions of coordinators and Head of the respective departments.
- Staff must refrain from any form of harassment or unlawful discrimination based on existing legislative requirements relating to:
- Gender/sexuality/age/marital status
- Pregnancy or likelihood of pregnancy of physical features, disability or impairment (physical disability or medical status)
- Staff should work in cooperation and collaborative manner with others through academic and administrative activities to achieve Institutional goals.
- Every staff member should maintain the confidentiality regarding the College's affairs and the affairs of its constituents and should not divulge, directly or indirectly, any information of confidential nature either to a member of the public or of the College's staff, unless compelled to do so by a judicial or other authority or unless instructed to do so by a superior officer in the discharge of his/her duties.
- The Faculty Member should show no partiality to any segment/individual student.
- Staff shall get casual leaves, medical leaves, earned leaves, and vacations as per Rules.

Code of Conduct for Supporting Staff

- Confidential report of the department should be part of personal file of that employee and should be kept confidential by staff members working with this Department.
- Staff should take additional responsibilities if required as assigned by Principal/Dean.

- **Accountant-**
  - ✓ Should prepare, examine, and analyze accounting records, financial statements, and other financial reports.
  - ✓ Accountant should prepare accounts, taxes, and tax returns, ensuring compliance with payment, reporting, and other tax requirements.
  - ✓ Accountant should establish tables of accounts and assign entries to proper accounts.
  - ✓ Accountant should report to the Principal/dean regarding the financial status of the college at regular intervals.
  - ✓ Accountant should assess accuracy, completeness, and conformance to reporting and procedural standards.
  - ✓ Accountant should provide all the necessary account statements and documents for various committees of the institute.
  - ✓ Accountant should provide all necessary accounting documents and financial statements for yearly account audits.
- **Student section–**
  - ✓ Student section should ensure the eligibility of the students and prepare related documents to submit them to University within prescribed time limit.
  - ✓ Ensure the student document verification by University with in time limit
  - ✓ Submit the student Prorates, eligibility and student insurance to University
  - ✓ Ensure timely submission of examination forms to University
  - ✓ Ensure caste certificate/caste validity from concern divisional office of provide all necessary student data to prepare various committee reports

Code of Conduct for Supporting Staff

- **Lab Assistant-**
  - ✓ Lab assistant should help the lab in-charge to carry out the lab related work.
  - ✓ Lab assistant should maintain attendance register Lab assistant should keep the setup ready before conduct of the practical.
  - ✓ Lab assistant should ensure the cleanliness of laboratories Lab attendant should help the lab assistant to carry out the lab related responsibilities.
  - ✓ Clerk should maintain service book of all staff of the Institute. Clerk should maintain college level/department level all document files.
- **Peon–**
  - ✓ He should report to the college half an hour before the college time.
  - ✓ Peon should maintain cleanliness of laboratories, class, and staff rooms.
  - ✓ Peon should do all the work assigned by the Head of the department and other staff members.
  - ✓ Peon should not leave the office until and unless the higher authority permits.
- **Professional Ethics Act-**

- ✓ With the highest standards of honesty and ethical conduct while working on the college premises and at offsite locations such as workshop, seminar and social events, or at any other place where the staff are representing the Institute.
- ✓ Avoid any activities that would involve stakeholders in any practice that is not in compliance with the Code of Conduct of the Institute.
- ✓ Staff must respect the person, privacy of students and other staff members of the Institute. Staff should treat students, parents and colleagues with courtesy and sensitivity to their rights, duties and aspirations.
- ✓ Staff should respect the dignity, rights and opinions of colleagues and students.
- ✓ Staff should respect cultural, ethnic and religious differences of colleagues and students.

Terms and Conditions of
Service Code of Conduct & Leave Rules

1. Dr._____(name of Teacher) is appointed on_____in the Department of
2. The teacher appointed in the college will be on probation for one year from the date of joining, subject to the approval of her/his qualifications by the MUHS, Nasik, University.
3. On completion of one year, the management may extend, if necessary, the probation for one more year after reviewing the performance of the teacher and his/her commitment to the vision, mission, and goals of the institution.
4. During the probationary period, if the teacher wants to leave the service at the end of an academic year, he/she should give one month's notice or one month's pay in lieu of the notice.
5. If a teacher wants to leave the service after the completion of the probationary period at the end of an academic year, he/she shall give three months' notice or three months' pay in lieu of notice.
6. Any teacher who wants to leave the service in the middle of an academic year shall pay three months' salary.
7. The teacher agrees to execute all the work assigned to him/her by the Head of the Institution and the Head of the Department from time to time honestly and sincerely and carry out all the orders of the superiors.
8. The teacher undertakes to fully abide by the leave rules and the code of conduct, copies of which have been linked to him/her and to which he/she is fully submitted as an integral part of the contract of employment with the College.
9. The college management has the full authority to terminate his/her services by virtue of its authority and discretion, after issuing one month's notice or one month's salary in lieu thereof in respect of confirmed teachers who are not found to be compatible with the mission of the college.
10. The teacher undertakes not to carry on any other trade, business, or activity which goes against the contract of employment with the college. He/she shall not accept any work outside the institution without the permission of the Secretary of the College, conduct any trade, business or like activity, raise/receive any money/donation without in any way tarnishing the name and goodwill of the college.

Terms and Conditions of
Service Code of Conduct & Leave Rules

11. The Teacher shall actively associate, involve, and participate herself in all the College activities and programmes irrespective of the Department he/she belongs to. He/She shall motivate his/her students likewise to actively involve, associate, and participate in the various programmes and activities of the college.
12. The Teacher shall not only confine his/her activities to the classroom teaching but involve himself/herself in all the efforts of the college in giving extra inputs to the students so as to make the students not only academically brilliant but a confident, competent, and fully developed personality.
13. The Teacher shall not indulge in any organized anti-institutional activity and shall not promote, abet, assist, or motivate any groupism or unhealthy activity.
14. The Teacher shall not directly apply for or seek another job except through the Secretary of the college.
15. The Teacher shall report to the management if there is any criminal complaint, action/proceeding lodged against him/her in any police station, court, or forum.
16. The Teacher shall not collect any money under any pretext from anyone, including students, except when he/she is specifically authorized by the Management in writing for any particular fundraising programme.
17. The Teacher shall not hold any money collected on behalf of the Institution for more than 24 hours. The teacher shall settle the advance taken from the Institution within 7 days of completion of the programme.
18. The Teacher shall abide by the Code of Conduct and leave rules enclosed with terms and conditions of service hereto.
19. The College may, at any time, terminate the services of any probationary or confirmed teacher if he/she is found guilty of any of the acts like professional incompetence, violation of the code of conduct, willful negligence of duty, failure to discharge any of the duties assigned to him/her, insubordination, any form of political/anti-institutional activity, and/or breach of the Code of Conduct, and/or does not abide by the leave rules