



MEDICAL AND DENTAL PROFESSIONS BOARD

**GUIDELINES FOR GOOD PRACTICE IN MEDICINE, DENTISTRY AND
THE MEDICAL SCIENCES**

**GUIDELINES FOR MAKING PROFESSIONAL SERVICES
KNOWN**

BOOKLET 5

**PRETORIA
JULY 2002**

Health Professions Council of South Africa
Post Office Box 205
Pretoria 0001

Telephone: (012) 338 9300
Fax: (012) 328 4863

Email: hpcsah@hpcsah.co.za

Website: <http://www.hpcsah.co.za>

THE SPIRIT OF PROFESSIONAL GUIDELINES

Medicine, dentistry and the medical sciences are professions based on a relationship of trust with patients. The term "profession" means "a dedication, promise or commitment publicly made".¹ To be a good doctor, dentist or medical scientist requires a life-long commitment to good professional and ethical practices and an overriding dedication to the good of one's fellow humans and society. In essence, the practice of medicine, dentistry and the medical sciences is a moral enterprise. In this spirit the Medical and Dental Professions Board presents the following ethical guidelines.

¹ Pellegrino, ED. Medical professionalism: Can it, should it survive? *J Am Board Fam Pract* 2000; **13**(2):147-149 (quotation on p. 148).

TABLE OF CONTENTS

1.	INTRODUCTION.....	1
2.	GUIDING PRINCIPLES	1
3.	INFORMATION THAT MAY BE INCLUDED IN NOTIFICATIONS	2
4.	ADVERTISING OF MEDICAL AND DENTAL EMPLOYMENT OPPORTUNITIES	3
5.	DUTY OF HEALTH CARE PROFESSIONAL IN RELATIONSHIP WITH OR EMPLOY OF AN INDEPENDENT ORGANISATION	3
6.	PRACTICE NOTICES TO PATIENTS	4
7.	COMMUNICATION WITH COLLEAGUES.....	4
8.	DIRECTORIES AND PUBLIC LISTS	4
9.	INFORMATION ON PROFESSIONAL STATIONERY	4
10.	OUTSIDE SIGNS AND NAMEPLATES	5
11.	PRACTICE NAMES.....	6
12.	HEALTH CARE PROFESSIONALS AS AUTHORS.....	7
13.	GENERAL.....	7

GUIDELINES FOR MAKING PROFESSIONAL SERVICES KNOWN

1. INTRODUCTION

- 1.1 Health professions in this country have long accepted the convention that health care professionals should refrain from self-promotion, not least because the health care professional who is most successful at getting publicity may not necessarily be the most appropriate one to treat a patient. Furthermore, patients (and their families) experiencing health problems are often particularly vulnerable to persuasive influences such as *via* unprofessional advertising.
- 1.2 It is primarily to protect the fundamental rights of patients, and health care professionals themselves, that governance of notifications and advertisements is imperative.
- 1.3 Health care professionals are encouraged to approach their professional association or society for guidance if they have doubts as to the appropriateness and/or acceptability of an advertisement or notification.

2. GUIDING PRINCIPLES

- 2.1 Patients are entitled to expect that health care professionals will give them comprehensive professional advice and guidance on alternative treatments and second opinions, where appropriate. Failure to respect these rights of a patients can erode the doctor/patient relationship on which good professional practice depends.
- 2.2 A health care professional is at all times responsible for his or her own professional conduct.
- 2.3 Patients are entitled to protection from misleading promotional, advertising or improper competitive activities among health care professionals. Publications improperly drawing attention to the titles or professional attainments or personal qualities or superior knowledge or quality of service of a particular health care professional, or improperly drawing attention to his or her practice or best prices offered, may be construed as unprofessional conduct. In such cases account will be taken of -
 - 2.3.1 the motive of the health care professional concerned in arranging for or agreeing to such publication;
 - 2.3.2 the nature, content and presentation of the material;
 - 2.3.3 whether the material seeks to suggest the health care professional has particular abilities as compared with other practitioners;
 - 2.3.4 whether the material is published in a manner likely to attract patients to the health care professional, or to promote his or her professional advantage or financial benefit; or
 - 2.3.5 whether the material is likely to encourage patients to refer themselves directly to a particular health care professional or organisation.
- 2.4 Advertising in an unprofessional manner or canvassing and touting for patients are regarded as unethical behaviour, and would constitute a breach of professional conduct.

3. INFORMATION THAT MAY BE INCLUDED IN NOTIFICATIONS

- 3.1 A health care professional may make information about his or her practice known by publishing notices in any medium, printed or electronic, including the Internet and television, provided that they comply with all the provisions of these guidelines.
- 3.2 There are no limitations on the size or number of times a notice may be published.
- 3.3 Direct mailing of pamphlets is permissible, i.e. mailing to post boxes or direct delivery to home owners.
- 3.4 Bulk pamphlets may be made available for issue individually to existing patients at the rooms of health care professionals and also at local information centres such as libraries and museums to persons enquiring about a health care professional's practice or available services.
- 3.5 Bulk distribution of pamphlets, for example at shopping malls and to passing motorists, is not permissible.
- 3.6 The use of photographs on notifications is not permissible.
- 3.7 The following information may appear on notifications namely -
- 3.7.1 first name(s) and surname;
- 3.7.2 profession (only the practitioner's profession, as registered with Council, may be specified: Descriptive names, such as "nose surgeon" or "family dentist" or "eye specialist" are not permissible);
- 3.7.3 registered qualifications;
- 3.7.4 registration category and registration number with Council under the Health Professions Act, 1974 (Act No. 56 of 1974);
- 3.7.5 professional category registered with Council under the said Act;
- 3.7.6 practice address and, where necessary, a map with regard thereto;
- 3.7.7 consulting hours;
- 3.7.8 telephone number(s);
- 3.7.9 field(s) of practice: If a health care professional chooses to make known that he or she practises in a specific field, the health care professional assumes a legal and ethical responsibility for having acquired a level of professional competence within that field of expertise which must be demonstrable and acceptable to his or her peers. Note that "field of practice" is not the same as "field of interest" and that an indication of a field of practice is only permissible if a practitioner limits, or for the most part, limits his or her practice to that field of practice;
- 3.7.10 information on financial arrangements: Such information must be limited to statements relating to formal arrangements, e.g "credit cards acceptable", "cash only", etc. Reference may not be made to discounts or *quantum* of fees.
- 3.8 The aim of publication of notices is to inform patients of the whereabouts of practitioners. It is not intended to be an instrument for promoting individual practices.

4. ADVERTISING OF EMPLOYMENT OPPORTUNITIES

It is permissible to advertise an employment opportunity in medicine, dentistry or medical science in relevant professional journals, as well as in daily and weekend newspapers.

5. DUTY OF HEALTH CARE PROFESSIONAL IN RELATIONSHIP WITH OR EMPLOY OF AN INDEPENDENT ORGANISATION

- 5.1 The duty of a health care professional who is in relationship with or employ of independent organisations offering or advertising clinical, diagnostic or medical advisory services such as a private hospital, clinic, screening centre, nursing home or advisory bureau or agency or who intends to enter into such relationship or employment -
- 5.1.1 can only do so on the basis of a written contract or agreement that should be available to the Board on request;
- 5.1.2 must satisfy himself or herself before entering into a contract or written agreement with such organisation that -
- a. the advertisements of or promotional activities of the organisation concerned are factual;
 - b. such advertisements do not promote the personal qualities or services of individual health care professionals connected with it;
 - c. such advertisements do not make invidious comparisons with the services of the state or with those of other organisations or health care professionals;
 - d. the organisation discourages patients from approaching it without first consulting their own practitioners;
 - e. patients referred to him or her are not likely to be attracted by misleading or promotional advertisements issued by the organisation or by counselling centres or other agents;
 - f. no commission or other payment has been made or will be made on behalf of the organisation for the referral of such patients;
- 5.2 should avoid personal involvement in promoting the services of such an organisation, for example by public speaking, broadcasting, writing articles or signing circulars;
- 5.3 should not permit his or her qualifications and status to be used in the organisation's promotional activities;
- 5.4 should not allow his or her personal address or telephone number(s) or other electronic contact details to be used as an enquiry point on behalf of such organisation;
- 5.5 should satisfy himself or herself that organisations that provide specialist services with regard to the services referred to in item 5. should also observe these guidelines;
- 5.6 should ensure that his or her name and qualifications are not used on reports, notices, notepaper or other stationery of such organisation.

6. PRACTICE NOTICES TO PATIENTS

- 6.1 Health care professionals may communicate with their *bone fide* patients via practice notices, but such communications may not be distributed to the public at large.
- 6.2 These notices may include information about the health care professional's own practice arrangements (e.g. new partners), health care information (e.g. flu vaccinations) and changes in tariff structures.

7. COMMUNICATION WITH COLLEAGUES

- 7.1 It is permissible, common practice and should be encouraged amongst health care professionals to communicate the setting up of a practice or practice address changes to colleagues.
- 7.2 Despite the limitation on the information that should be included in notifications and advertisement as stated above communications to colleagues may include information on field of practice, e.g. "treatment of AIDS patients".

8. DIRECTORIES AND PUBLIC LISTS

- 8.1 Prospective patients and other health care professionals should have ready access to accurate, comprehensive, and well-presented information about the health care professionals practising in their area in order to make informed choices.
- 8.2 Directories and public lists with the names of health care professionals and their practice details, including other factual information as specified under item 3, may be distributed for the benefit of members of the public and peers.
- 8.3 All health care professionals in a specific area should be eligible for inclusion in such directories or public lists.
- 8.4 The names and particulars of health care professionals listed in such directories and public lists should be of the same size and format.

9. INFORMATION ON PROFESSIONAL STATIONERY

- 9.1 Professional stationery may contain the following information, namely -
- 9.1.1 names (including references to an incorporated company (e.g. "Dr XYZ Incorporated"), a partnership (e.g. "Dr XYZ and Partners");
- 9.1.2 profession;
- 9.1.3 registration category and registration number, registered professional category and speciality (if applicable);
- 9.1.4 registered professional qualifications;
- 9.1.5 academic qualifications (other than professional qualifications) and honorary degrees in abbreviated form;

- 9.1.6 address(es);
- 9.1.7 telephone numbers;
- 9.1.8 hours of consultation; and
- 9.1.9 practice code numbers.
- 9.2 A health care professional who is a director of a company may include his or her title, name and qualifications, or as otherwise directed by statute, on the company's official documentation. This also applies to stationery used in a non-professional capacity. A practitioner may also make mention of associates and assistants affiliated to his or her practice.
- 9.3 Reference to a health care professional's achievements is not allowed.
- 9.4 The use of business or appointment cards is permissible.
- 9.5 Logos on professional stationery may be used, but graphics or pictures may not depict anatomical structures.
- 9.6 The expression anatomical structure means -
 - 9.6.1 a structure which forms part of the body; but
 - 9.6.2 a picture or drawing, for example of a sprinting athlete, would be considered a picture or a drawing of a human being and not to be an anatomical structure;
- 9.7 Logos and/or graphics should not be misleading, and may not be used on outside signs.
- 9.8 In addition to the title "doctor", a person who is permitted to use the title "professor" (even after retirement) may use it on his or her stationery, but such reference shall not be allowed on other notices or outside signs.

10. OUTSIDE SIGNS AND NAMEPLATES

- 10.1 Signs and nameplates may not be larger than 1 m x 0.5 m and may contain some or all of the following information, but nothing more, namely -
 - 10.1.1 names (initials) and surname of the health care professional;
 - 10.1.2 profession (e.g. medical doctor, dentist);
 - 10.1.3 an indication of the location of the practice (e.g. room number, street number, name of the building);
 - 10.1.4 telephone number(s);
 - 10.1.5 consulting hours;
 - 10.1.6 the "red cross" symbol may not be used by medical practitioners: This emblem was adopted by the International Federation of Red Cross and Red Crescent Societies and may only be used as authorised in terms of the *1991 Regulations on the use of the Emblem*.
- 10.2 Logos may not be used on outside signs and nameplates.

- 10.3 Only one outside sign may be used, except in the case of a large complex with more than one entrance where a sign may be placed at each entrance. The sign should be placed on the premises where the practice is situated, or, at most, at the street corner closest to the premises.
- 10.4 A nameplate may be used on the door of the consulting room.
- 10.5 In the case of occupants of large complexes where special provision is made in the entrance hall and on the various floors to indicate the tenants, it shall be permissible to make use of such provision.
- 10.6 If necessary, in large complexes, a nameplate with the name of the health care professional only, may be used in the corridor for the direction of the patients.
- 10.7 An outside sign indicating "PRIVATE PARKING FOR" (indicating the street name and number only) will be permissible (for example PRIVATE PARKING FOR 23 FORD STREET).
- 10.8 In the event of a change in the membership of a company, partnership, or association, the original nameplate may be displayed for a period of six months whereafter a nameplate with the correct information should be displayed. Should a practice move to other premises, the name of the practice and the new address may also be displayed at the vacated address for six months.
- 10.9 If an illuminated sign is used, the only sources of illumination may be a constant white light.
- 10.10 Only two colours of own choice may be used on outside signs, one for background and one for lettering.

11. PRACTICE NAMES

- 11.1 Health care professionals may use as the name of a practice, their own names and/or the names of their partners, directors or associates or the name of one or of certain partners or associates or directors, together with the words "and partners", "incorporated" or "and associates", as the case may be.
- 11.2 In June 2001 the Executive Committee of the Medical and Dental Professions Board resolved that -
- 11.2.1 descriptive trade names for the practices of medical practitioners and dentists in solus practices, partnerships, associations and incorporated practices may not be used;
- 11.2.2 medical practitioners and dentists in any of the types of practices referred to above would, however, be permitted to name such practices after their own name or the names of their associates or partners, without limitation on the duration thereof, for example the name or names of a partner or associate could be retained by the practice even after the death of such a partner or associate.
- 11.3 The use of an expression such as "hospital", "clinic" or "institute" or any other special term which could create the impression that a practice forms part of, or is in association with a hospital, clinic or similar institution, may not be used.
- 11.4 A building occupied by health care professionals who are registered with the Health Professions Council of South Africa may have a name indicating the profession of the

occupants only if there are at least two such independent professional practices in the building. Should only one such professional practice (e.g. a medical practitioner, psychologist, optometrist) be conducted in the building and the name of the building refers to that profession (e.g. medical centre, psychology centre, optometry centre) the impression may be created that that single practice is more important than other individual practices. In the case of registered health care professionals of different professions such as a medical practitioner, psychologist and optometrist practicing in the same building, the name "Health Centre", however, may be used.

- 11.5 "Section 54A companies" and partnerships falling in the same category may not be indicated as "practising as" or "trading as".

12. HEALTH CARE PROFESSIONALS AS AUTHORS

- 12.1 A health care professional who is the author or co-author of books or articles may mention his or her own name as author or co-author, as the case may be, and indicate his or her professional standing as this promotes the profession's duty to disseminate information about advances in medical and dental science.
- 12.2 Health care professionals with the necessary knowledge and skills may participate in the presentation and discussion of health topics by means of public addresses or through the printed or electronic media to lay audiences, provided that no information about their standing is given which may imply that a practitioner is the only, the best, or the most experienced in his or her particular field.
- 12.3 Health care professionals should not divulge details of their practices when participating in the aforementioned presentations or discussions as this may be construed as touting or canvassing for patients.
- 12.4 Health care professionals should preferably remain anonymous or use a pseudonym when participating in radio, television or Internet programmes. Health care professionals acting as spokespersons for an organisation or institution may be named. It should also be stated explicitly that health care professionals cannot offer individual advice or see patients who heard or read the programme or article.

13. GENERAL

- 13.1 Notifications about health care professionals who stand in a relationship with private hospitals, clinics, and the like, must in all respects conform to these guidelines.
- 13.2 Notifications about health care professionals with registered specialities must also conform to these guidelines.
- 13.3 It is not possible for the Professional Board to consider, on an individual basis, notifications to be published by health care professionals. Furthermore, it should be noted that the Professional Board retains the final authority for deciding on the acceptability or not of the content and format of notifications put out by health care professionals.
- 13.4 Disciplinary cases pertaining to health care professionals who are in breach of the guidelines for making professional services known, as contained in this document, will be dealt with in a manner that will result in the finalisation of these cases within the shortest possible period of time.
- 13.5 In the case of uncertainty about the application of these guidelines or in the case of intended promotional action or notifications that are not covered within these guidelines, health care

professionals should consult their professional associations for appropriate guidance. Professional associations should on their part, in the case of intended promotional actions or notifications not covered in these guidelines, make appropriate recommendations to the Board on how to deal with such matters.

- 13.6 The term “health care professional” as used in the context of these guidelines, refers to medical doctors, dentists and medical scientists.

EXAMPLE OF NOTIFICATION**NO RESTRICTION ON SIZE OR TYPESTYLE**

Dr A B SMITH	Name
MB BCh, Dip Med COG(SA) FRCOG	Registered qualifications
GYNAECOLOGIST & OBSTETRICIAN	Profession/speciality/professional category
INFERTILITY TREATMENT	Field of practice
CONSULTATION BY APPOINTMENT ONLY	
MON-FRI 08h00-13h00 MON-FRI 13h30-18h30	Hours of practice
104 WEST STREET SOUTH BUILDING	Practice address
JOHANNESBURG 120 KNEW ROAD (Opp Terri Park Hospital)	
TEL: (011) 666-6666 TEL: (011) 777-7777	Practice Tel Nos
EMERGENCY TEL: (011) 555-5555	Emergency hours Tel No
CREDIT CARDS ACCEPTED	Financial arrangements (no mention of discounts or quantum of fees to be made)
REGISTRATION NO: 000000000000	Health Professions Council registration no
PRACTICE NO: 00000000	Practice Number

Ethical guidelines for good practice in medicine, dentistry and the medical sciences

The Medical and Dental Professions Board of the Health Professions Council of South Africa has embarked on a project to bring together ethical and professional guidelines for doctors (medical practitioners), dentists, and medical scientists. The following Booklets are separately available:

- Booklet 1:** *General ethical guidelines for doctors, dentists and medical scientists*
- Booklet 2:** *General ethical guidelines for health researchers*
- Booklet 3:** *Ethical and professional rules of the Medical and Dental Professions Board*
- Booklet 4:** *Professional self-development*
- Booklet 5:** *Guidelines for making professional services known*
- Booklet 6:** *Guidelines for the management of health care waste*
- Booklet 7:** *Policy statement on perverse incentives*
- Booklet 8:** *Guidelines for the management of patients with HIV infection or AIDS*
- Booklet 9:** *Guidelines on research and clinical trials involving human subjects*
- Booklet 10:** *Research, development and use of the chemical, biological and nuclear capabilities of the State*
- Booklet 11:** *Guidelines on keeping of patient records*
- Booklet 12:** *Canvassing of patients abroad*
- Booklet 13:** *National Patients' Rights Charter*
- Booklet 14:** *Confidentiality: Protecting and providing information*
- Booklet 15:** *Seeking patients' consent: The ethical considerations*