



College of Physicians and Surgeons of British Columbia

Practice Standard

Treating Self, Family Members and Those with Whom You Have a Non-professional Relationship

Effective:	January 2013
Last revised:	October 5, 2017
Version:	2.0
Next review:	October 2020
Related topic(s):	Conflict of Interest , Boundary Violations in the Patient-Physician Relationship

A **practice standard** reflects the minimum standard of professional behaviour and ethical conduct on a specific topic or issue expected by the College of all physicians in British Columbia. Standards also reflect relevant legal requirements and are enforceable under the [Health Professions Act](#), RSBC 1996, c.183 (*HPA*) and College [Bylaws](#) under the *HPA*.

Registrants may seek advice on these issues by contacting the College and asking to speak with a member of the registrar staff, or by seeking medical legal advice from the CMPA.

PREAMBLE

This document is a standard of the Board of the College of Physicians and Surgeons of British Columbia. It also offers some broader guidance on this issue, which physicians should consider before they provide medical treatment to themselves or someone with whom they have a personal or non-professional relationship.

This document must be read in conjunction with the standard on [Conflict of Interest](#).

COLLEGE'S POSITION

Most physicians will at some time be asked to provide medical treatment to an individual with whom they have a personal or non-professional relationship. This may be in the context of a family member, but may also include friends, co-workers, medical trainees or other staff. Many physicians will also encounter situations where self-treatment would provide a convenient option over seeking treatment from another physician.

Treatment in this context refers to all aspects of medical care such as history-taking, physical examination, ordering of diagnostic tests and provision of medical treatment including prescribing of medications. It does not include the routine monitoring of health conditions that can be performed by non-physicians.

Providing appropriate medical care in the context of a personal or non-professional relationship may be problematic because of the difficulty in defining the boundary between the two relationships. Without an appropriate therapeutic relationship it may be difficult to obtain a sufficiently detailed history, conduct sensitive examinations or fully explain treatment options.

Conversely, patients accepting treatment from a physician with whom they have another relationship may not give an accurate history, pursue alternate treatments or obtain second opinions, on account of that other relationship. There is obviously potential in these situations for a patient to receive inappropriate medical care.

Physicians must therefore exercise sound professional judgement and avoid treating anyone with whom they have another relationship, which may affect the objectivity of the medical care they provide.

Physicians must avoid self-treatment for the same reasons.

However, exceptions may be made when:

- the medical condition is minor or emergent; **and**
- no other physician is readily available.

The College considers “minor conditions” as those which are non-urgent, require only short-term treatment and are not indicative of a more serious condition.

Physicians must not prescribe narcotic or psychoactive medications to themselves or family members.

The Medical Services Commission of BC does not provide payment for services to a physician's family/household members, who are defined as:

- the spouse, child (step-child), parent (step-parent or parent-in-law), grandparent, grandchild, sibling or spouses of any of these, or
- any person who is a member of the physician's household.

(The above definition is made only for billing purposes and is not reflective of the broader scope of this document.)

CONCLUSION

- Physicians must not prescribe narcotic or psychoactive medications to themselves or family members.
- Physicians must avoid treating themselves or family members unless the medical condition is minor or emergent **and** no other physician is readily available.
- Physicians must exercise sound professional judgement and avoid treating anyone with whom they have another relationship, which may affect the objectivity of the medical care they provide.

Physicians may seek advice on this issue by contacting the College and asking to speak with a member of the registrar staff.

GUIDING ETHICAL PRINCIPLES

CMA Code of Ethics

Fundamental Responsibilities

1. Consider first the well-being of the patient.

Responsibilities to the Patient

18. Provide whatever appropriate assistance you can to any person with an urgent need for medical care.
20. Limit treatment of yourself or members of your immediate family to minor or emergency services and only when another physician is not readily available; there should be no fee for such treatment.