

Duty of Treating Physicians and Physicians Working in the Context of a Physician Health Program to Report a Physician to the College

Related Standard of Practice: Duty of Treating Physicians and Physicians Working in the Context of a Physician Health Program to Report a Physician to the College

The College of Physicians & Surgeons of Alberta (CPSA) provides advice to the profession to support physicians in implementing the *CPSA Standards of Practice*. This advice does not define a standard of practice, nor should it be interpreted as legal advice.

Contents

Key Points	1
Advice.....	1
Other References.....	2

Key Points

- This standard only applies if your physician patient has not reported their medical condition to the College as required under the duty to self-report.
- Reporting is required if you feel the physician patient poses a risk of serious harm to others, including patients, research subjects, colleagues and learners.
- The physician patient should be notified of their own duty to report and be supported through this process.
- If you intend to report, the physician patient must be notified of this report.

Advice

Physicians who treat other physicians and physicians who work within a context of a provincial physician health program, such as the Physician and Family Support Program (PFSP), must balance the need to protect the confidentiality of their physician-patient with their responsibility to the public and the profession to ensure safe medical practice. The treating physician must also be aware of the nature of the physician-patient’s practice and the impact of the medical condition on the physician-patient’s medical practice¹.

1 Duty of Treating Physicians and Physicians Working in the Context of a Physician Health Program to Report a Physician to the College –

The duty to self-report and the duty of colleagues to report a physician are outlined in other standards. This draft standard applies only to situations in which a treating-physician of a physician-patient or a physician working within the context of a physician health program is aware that a physician-patient meets the standard to self-report and has not fully disclosed the nature of their medical condition to the College. As a treating physician of a physician-patient you must report your physician-patient to the College if there is a reasonably foreseeable² risk of serious harm³ to patients of the physician-patient.

This standard sets a higher threshold for reporting a medical condition to the College than that which exists in either Standard 33 Self Reporting to the College or Standard 34 Duty to Report a Colleague. This difference in threshold is intended to preserve the confidentiality of the physicians-patient relationship unless there is reasonably foreseeable risk of harm.

If a physician-patient's medical condition is well controlled, or if they are not currently engaged in any part of medical practice, the duty to report would NOT be met.

The physician patient must be notified of their own duty to report and be supported through this process as this can be a difficult task for some. If a self-report does not occur the physician patient must be notified that you intend to report as required by this standard.

Other References

¹The practice of medicine includes not only patient care but all activities, such as working with other health care workers, teaching, research and administrative work done in the context of medical practice.

² Reasonably foreseeable: The determination of what is reasonably foreseeable is based on what a reasonable physician would do given the same set of circumstances and requires a judgment call on the part of the physician. The following factors should be considered:

- (a) whether the physician's condition is being appropriately managed and harm would only be anticipated if such management was not maintained.
- (b) whether there is sufficient information available to make a judgment about the physician-patient's management of their health condition.
- (c) whether there is sufficient information to suggest that appropriate management will only occur with monitoring or oversight mechanisms in place.
- (d) whether the harm anticipated, if it materializes, would be irreversible; and/or whether the harm anticipated, if it materializes, would cause more than minimal pain (physical or psychological) or other injury.

³ Serious harm is defined as that which is either irreversible or would result in more than minor pain or injury (whether psychological or physical).