Members of the community of California Health Sciences University's ("University") College of Osteopathic Medicine ("COM") shall abide by the American Osteopathic Association's ("AOA") Code of Ethics ("AOA Code"), as that code may be change over time. The AOA Code is re-stated below. To the extent the AOA makes modifications to the AOA Code, such changes are to be deemed incorporated below. Nothing in this document is intended to modify the University's Code of Conduct applicable to all members of the University community, including those members who are part of the COM. All members of the COM community are also expected to abide by the University's Code of Ethical Conduct.

I. SECTION 1.
   A. The physician shall keep in confidence whatever she/he may learn about a patient in the discharge of professional duties. Information shall be divulged by the physician when required by law or when authorized by the patient.

II. SECTION 2.
   A. The physician shall give a candid account of the patient's condition to the patient or to those responsible for the patient's care.

III. SECTION 3.
   A. A physician-patient relationship must be founded on mutual trust, cooperation, and respect. The patient, therefore, must have complete freedom to choose her/his physician. The physician must have complete freedom to choose patients whom she/he will serve. However, the physician should not refuse to accept patients for reasons of discrimination, including, but not limited to, the patient's race, creed, color, sex, national origin, sexual orientation, gender identity, or disability. In emergencies, a physician should make her/his services available.

IV. SECTION 4.
   A. A physician is never justified in abandoning a patient. The physician shall give due notice to a patient or to those responsible for the patient's care when she/he withdraws from the case so that another physician may be engaged.
V.  SECTION 5.
A. A physician should make a reasonable effort to partner with patients to promote their health and shall practice in accordance with the body of systematized and scientific knowledge related to the healing arts. A physician shall maintain competence in such systematized and scientific knowledge through study and clinical applications.

VI.  SECTION 6.
A. The osteopathic medical profession has an obligation to society to maintain its high standards and, therefore, to continuously regulate itself. A substantial part of such regulation is due to the efforts and influence of the recognized local, state and national associations representing the osteopathic medical profession. A physician should maintain membership in and actively support such associations and abide by their rules and regulations.

VII.  SECTION 7.
A. Under the law a physician may advertise, but no physician shall advertise or solicit patients directly or indirectly through the use of matters or activities which are false or misleading.

VIII.  SECTION 8.
A. A physician shall not hold forth or indicate possession of any degree recognized as the basis for licensure to practice the healing arts unless he is actually licensed on the basis of that degree in the state or other jurisdiction in which she/he practices. A physician shall designate her/his professional degree in all professional uses of her/his name. Indications of specialty practice, membership in professional societies, and related matters shall be governed by rules promulgated by the American Osteopathic Association.

IX.  SECTION 9.
A. A physician should not hesitate to seek consultation whenever she/he believes it is in the best interest of the patient.

X.  SECTION 10.
A. In any dispute between or among physicians involving ethical or organizational matters, the matter in controversy should first be referred to the appropriate arbitrating bodies of the profession.

XI.  SECTION 11.
A. In any dispute between or among physicians regarding the diagnosis and treatment of a patient, the attending physician has the responsibility for final decisions, consistent with any applicable hospital rules or regulations.
XII. SECTION 12.
A. Any fee charged by a physician shall compensate the physician for services actually rendered. There shall be no division of professional fees for referrals of patients.

XIII. SECTION 13.
A. A physician shall respect the law. When necessary a physician shall attempt to help to formulate the law by all proper means in order to improve patient care and public health.

XIV. SECTION 14.
A. In addition to adhering to the foregoing ethical standards, a physician shall recognize a responsibility to participate in community activities and services.

XV. SECTION 15.
A. It is considered sexual misconduct for a physician to have sexual contact with any patient with whom a physician-patient relationship currently exists.

XVI. SECTION 16.
A. Sexual harassment by a physician is considered unethical. Sexual harassment is defined as physical or verbal intimation of a sexual nature involving a colleague or subordinate in the workplace or academic setting, when such conduct creates an unreasonable, intimidating, hostile or offensive workplace or academic setting.

XVII. SECTION 17.
A. From time to time, industry may provide some AOA members with gifts as an inducement to use their products or services. Members who use these products and services as a result of these gifts, rather than simply for the betterment of their patients and the improvement of the care rendered in their practices, shall be considered to have acted in an unethical manner.
XVIII. SECTION 18.
   A. A physician shall not intentionally misrepresent himself/herself or his/her research work in any way.

XIX. SECTION 19.
   A. When participating in research, a physician shall follow the current laws, regulations and standards of the United States or, if the research is conducted outside the United States, the laws, regulations and standards applicable to research in the nation where the research is conducted. This standard shall apply for physician involvement in research at any level and degree of responsibility, including, but not limited to, research, design, funding, participation either as examining and/or treating provider, supervision of other staff in their research, analysis of data and publication of results in any form for any purpose.

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