Globethics Repository



The American Board of Plastic Surgery Code of Ethics

This page was generated automatically upon download from the Globethics Repository. More information on Globethics see https://www.globethics.net. Data and content policy of Globethics Repository see https://repository.globethics.net/pages/policy.

Item Type	Preprint
Authors	American Society of Plastic Surgeons (ASPS)
Publisher	American Society of Plastic Surgeons (ASPS)
Rights	With permission of the license/copyright holder
Download date	2026-11-10 18:28:00
Link to Item	http://hdl.handle.net/20.500.12424/209876

The American Board of Plastic Surgery, Inc.

CODE OF ETHICS

Section 1. Preamble

Ethical competence is fostered by the adoption and enforcement of a *Code of Ethics*.

The Board adopted a Code of Ethics to require ethical and legal behavior of the candidates, examiners, consultants (question writers) and directors of the Board in fulfilling their professional responsibilities to patients, colleagues, and the public. Unethical or illegal physician behavior that comes to the attention of the Board through external or internal sources will be subject to review and judgment about the compliance with these standards. If a violation has been judged to occur, then the individual will be afforded the benefit of the appeals process of the Board. With the exception of private letters of reprimand, disciplinary actions of the Board, including delay in progression through the examination process, suspension or revocation of certification will be placed in the public domain.

Candidates and diplomates of the Board are expected to act in accord with the *General and Specific Principles of the Code of Ethics* in all contacts with patients, peers and the general public. Further, candidates and diplomates are individually responsible and accountable for their actions and words, as well as the use of their names by any individual or entity. Candidates and diplomates shall be subject to disciplinary action, if words, deeds or actions are deemed not in accord with these principles.

I. The purposes of the Board:

The purposes for which The American Board of Plastic Surgery, Inc.®, was founded and for which this Board is organized are:

A. To establish requirements for the qualification of applicants who request a certificate of their knowledge in the field of Plastic Surgery in its broadest sense.

B. To conduct qualifying examinations of approved candidates who seek certification by the Board.

C. To issue certificates of qualification to those who meet the Board's requirements and pass the respective examinations.

D. To protect the independence and integrity of the Board.

E. To do and engage in any and all lawful activities that may be incidental or reasonably related to any of the foregoing purposes, and to have and exercise all powers and authority now or hereafter conferred upon not for profit corporations under the laws of the State of Illinois.

II. The mission statement of the Board:

The mission of The American Board of Plastic Surgery, Inc. is to promote safe, ethical, efficacious plastic surgery to the public by maintaining high standards for the education, examination, certification and recertification of plastic surgeons as specialists and subspecialists.

Section 2. General Principles

I. The principal objective of the medical profession is to render services to humanity with full respect for human dignity. Physicians should merit the confidence of patients entrusted to their care, rendering to each a full measure of service and devotion.

II. Physicians should strive continually to improve medical knowledge and skill, and must make available to their patients and colleagues the benefits of their professional attainments. Physicians have an affirmative duty to disclose new medical advances to patients and colleagues.

III. The honored ideals of the medical profession imply that the responsibilities of the physician extend not only to the individual but also to society. Activities, which have the purpose of improving both the health and well being of the individual and the community, deserve the interest and participation of the physician.

IV. Plastic surgeons are expected to provide competent and scientifically sound medical and surgical services with compassion and respect for human dignity as well as the rights and privacy of their patients.

V. Plastic surgeons are expected to behave honestly and to bring to the attention of the Board those colleagues deficient in character or competence, or who engage in fraud, deception, or other unethical behavior.

VI. Plastic surgeons are expected to obey the civil law and work within the community to safeguard the best interests of their patients.

Section 3. Specific Principles

Preamble

Candidates applying for examination by The American Board of Plastic Surgery, Inc ®. pledge themselves to the highest ethical standards in the practice of medicine and plastic surgery and attest by a signature on the Application for Examination and Certification that they are in good ethical standing in their community. Candidates also attest by signature that they understand and agree that in the consideration of an application that their ethical and professional qualifications will be reviewed and assessed by the Board; that the Board may make inquiry of the persons named in the application and of such other persons as the Board deems appropriate with respect to their ethical and professional qualifications; that if information is received which could adversely affect the application, they will be advised and given an opportunity to rebut such allegations, but will not be advised as to the identity of the individuals who have furnished adverse information concerning the candidate. All statements and other information furnished to the Board in connection with such inquiry, the application or a candidate's admissibility to the examinations shall be confidential and not subject to examination by the candidate or by anyone acting on the candidate's behalf.

I. Candidates applying for examination by The American Board of Plastic Surgery, Inc ®. attest by signature on the Application for Examination and Certification that they understand and agree that:

A. Falsification of any part of the Application or the Request for Evaluation of Training Form; or

B. The submission of any falsified documents or information to the Board; or

C. The use of any falsified Board documents or the submission of any such documents to other persons; or

D. The giving or receiving of aid in the examinations as evidenced either by observation at the time of the examination or by analysis of answers and those of one or more other participants in that examination; or

E. The unauthorized possession, reproduction, or disclosure of any material, including, but not limited to examination questions or answers before, during, or after the examination; or

F. The offer of any financial or other benefit to any director, officer, employee, proctor, or other agent or representative of the Board in return for any right, privilege or benefit which is not usually granted by the Board to other similarly situated candidates or per sons;

May be sufficient cause for the Board to bar the candidate permanently from all future examinations, to terminate the candidate's participation in the examination, to invalidate the results of the candidate's examination, to withhold the candidate's scores or certificate, to revoke the candidate's or diplomate's certificate or to take other appropriate actions.

II. Any diplomate (or candidate, where applicable) of the Board will be subject to disciplinary action including suspension and revocation of certification if at any time the Board determines, in its sole judgment, that the diplomate holding the certificate was not properly qualified to receive it, or for other just and sufficient reasons, including, but not limited to:

A. Conviction of a felony;

B. The diplomate did not possess the necessary qualifications and requirements to receive the certificate at the time it was issued;

C. The diplomate misrepresented his or her status with regard to Board Certification, including any misstatement of fact about being Board Certified in any specialty or subspecialty;

D. The diplomate engaged in conduct resulting in discipline by any medical licensing authority or in a revocation, suspension, qualification or other limitation of his or her license to practice medicine in any jurisdiction;

E. The diplomate engaged in conduct resulting in the expulsion, suspension, disqualification or other limitation from membership in a local, regional, national or other organization of his or her professional peers;

F. Resignation from any organization while under investigation by that organization for unethical behavior.

G. The candidate's or diplomate's right to practice medicine is limited, suspended, terminated, or otherwise affected in any state, province, or country for violation of a medical practice act or other statute or governmental regulation; or the candidate or diplomate is disciplined by any medical licensing authority or by any Plastic Surgical Specialty Society.

H. The candidate or diplomate fails to inform the Board that the individual's right to practice medicine has been limited, suspended, terminated, or otherwise affected in any state, province, or country for violation of a medical practice act, other statute or governmental regulation or, the candidate or diplomate has been disciplined by any medical licensing authority, professional organization or by an Plastic Surgical Specialty Society..

I. The candidate or diplomate exhibits gross medical incompetence.

J. The candidate or diplomate engages in sexual misconduct in the practice of medicine, which has resulted in a state medical board sanction.

K. The candidate or diplomate fails to respond to or comply fully and openly with requests for information from the Board.

L. The candidate or diplomate, either personally or through a partner or associate or any physician or other affiliated health care provider, uses or participates in the use of any form of public or private communication (including computer imaging and electronic communications) containing a false, fraudulent, deceptive, or misleading statement or claim:

1. Contains a misrepresentation of fact, or omits to state any material fact necessary to make the statement, considered as a whole, nodeceptive or misleading.
2. Contains photographs, images, or facsimiles of persons that falsely or deceptively portray a physical or medical condition, injury, disease, including obesity, or recovery of relief there from.
3. States or implies that a candidate or diplomate is a board certified specialist unless the individual is certified by a board recognized by the American Board of Medical Specialties.
4. Concerns illegal transactions.

M. The candidate or diplomate participates in a charity raffle, fund raising event, contest or other promotion in which the prize is any procedure.

N. The candidate or diplomate otherwise exhibits unprofessional or unethical conduct.

Section 4. Specific Offenses

A. Advertising

I. Candidates may not advertise any status with the Board until passing the Board's Examination and receiving the Board's Certificate. This includes, but is not limited to, statements, forms or images that express or imply that one is a candidate, admissible, eligible, qualified, or affiliated of or with the Board prior to achieving certification.

II. Candidates also may not represent themselves as members of the American Society of Plastic Surgeons (ASPS) by statements or use of the Society Symbol as the public may regard this as evidence of certification by the Board. The Board recommends that candidates and/or their senior partners contact the marketing department of ASPS to determine adherence to the Society's policies before placing practice

advertisements in print. If other certified members of the candidate's practice group are recognized on the business letterhead, and the ASPS Symbol is used, the non-member candidate must be identified by asterisk, etc. indication that he or she is not a member of the Society and not Board Certified.

III. A diplomate may advertise through public communications media such as professional announcement, telephone and medical directories, computer bulletin boards, Internet web pages, broadcast and other electronic media. The plastic surgeon is personally responsible for such communications even though these may be placed by a partner, a surrogate, or other healthcare entity.

IV. A candidate or diplomate shall not compensate or give anything of value, including operative services, directly or indirectly to a representative of the press, radio, television, or other communication medium in anticipation of or return for recommending the candidate or diplomate services or for professional publicity. A candidate or diplomate may pay the reasonable cost of advertising permitted by this Code. A candidate or diplomate shall approve all advertisements before dissemination or transmission, and shall retain a copy or record of all such advertisements in their entirety for one year after its dissemination. A candidate or diplomate shall be held personally responsible for any violation of the Code of Ethics incurred by a public relations, advertising or similar firm which he or she retains, or any entity that advertises on the candidate's or diplomate's behalf.

V. A candidate or diplomate may use photographs of models in his or her advertisements. If photographs of models who have not received the services advertised are displayed in a manner, including digitally altered images, that would suggest the model received the services advertised, the advertisement shall clearly and noticeably state that the model has not received the advertised services.

B. Solicitation

I. Solicitation means initiating in-person communication to specific individuals to entice or attract them as patients.

A. A candidate or diplomate shall refrain from engaging in systematic verbal solicitation of patients in person, by telephone, or through agents

B. A candidate or diplomate shall not initiate contact with a prospective patient knowing that the physical, emotional, or mental state or degree of education of the person solicited is such that the person could not exercise reasonable judgment in employing a plastic surgeon

C A candidate or diplomate who has given unsolicited, in-person advice to a layperson that the individual should have medical or health care shall not accept a health care relationship resulting from that advice if:

1. The advice embodies or implies a statement or claim that is false, fraudulent, deceptive or misleading within the meaning of Article I, Section G.
2. The advice involves the use by the candidate or diplomate of undue influence, coercion, duress, harassment, intimidation, unwarranted promises of benefits, over-persuasion, overreaching, or pressure for immediate response.
3. The candidate or diplomate has been given notice that the individual non-patient does not want to receive communication from the candidate or diplomate.

C. Expert Testimony

I. It is in the public interest that medical expert testimony be readily available, objective and unbiased. Candidates or diplomates have an obligation to testify as expert witnesses when appropriate. However, candidates or diplomates whose testimony, including testimony as to credentials or qualifications, is false, deceptive, or misleading may be subject to disciplinary action.

Further to help limit possibly misleading testimony, candidates or diplomates serving as expert witnesses should:

A. Have experience in the area in which they testify,

B. Thoroughly review the medical facts and testify to their content fairly, honestly and impartially,

C. Be familiar with the standards of practice prevailing at the time of the occurrence,

D. Neither condemn performance that clearly falls within generally accepted practice standards nor endorse or condone performance that clearly falls outside of such standards.

Section 5. Conflicts of Interest

I. A physician's clinical judgment and practice must not be affected by economic interest in, commitment to, or benefit from professionally-related commercial enterprises or other actual or potential conflicts of interest. Disclosure of professionally-related commercial interests and any other interests that may influence clinical decision-making is required in communications to patients, the public, and colleagues. When a physician's interest conflicts so greatly with the patient's interest as to be incompatible, the physician should make alternative arrangements for the care of the patient.

II. In the context of physician ownership interest in a commercial venture, the physician has an obligation to disclose the ownership interest to the patient or referring colleagues prior to utilization; the physician's activities must be in strict conformance with the law; and the patient should have free choice to use the physician's facility or therapy or to seek the needed services elsewhere.

III. A conflict of interest may arise when a Director or Board Examiner has family relationships or other interests that could influence the Directors' or Board Examiners' judgment.:

IV. Where a Director or Board Examiner has a conflict of interest, the Director or Board Examiner shall abstain from any vote or other participation in the decision making process related to that conflict of interest. If the conflict of interest relates to a decision by the Board regarding a contract to which a Director or Board Examiner, or any related party, or any entity in which the Director or Board Examiner has a material financial interest or of which the Director or Board Examiner is an officer, director or partner shall be a party, then the Director's or Board Examiner's interest or relationship must be disclosed to the Board. No director or Board Examiner shall participate in the examination or certification, whether directly or indirectly, of any related party.

V. Any information disclosed to the Board shall be maintained by the Secretary or Executive Director of the Board and shall be kept

confidential except for review by the Chair of the Board, and Chairs of relevant committees. Such persons shall maintain the confidentiality of the information reported by any Director or Board Examiner, but shall privately discuss with any Director or Board Examiner the policy's provisions regarding abstention and non-participation in the decision- making process of Directors or Board Examiners who have conflicts of interest, if necessary to ensure the integrity of the professional judgments made by Directors or Board Examiners.

Section 6. Officers, Directors, Advisory Council Members, Consultants and Examiners for the Oral Examination, Recertification Process and Maintenance of Certification

I. Failure to abide by the following principles may prohibit participation in any of the above listed activities for a period of time to be determined by the Board:

A. Participation in Board examination preparation courses that simulate the examination process is prohibited.

B. Participation in the selection of examination questions and materials disqualifies all participants from taking the Hand Surgery Subcertification and Recertification Cognitive examinations for a period of three years.

C. The proceedings of the Board and the integrity of the examination process are to be maintained in strict confidentiality.

D. Personal, collegial or financial relationships that might influence the examination process or decisions by the Board must be disclosed.

E. Participation in the MOC process for the cognitive examination does not preclude taking the examination as the National Board of Medical Examiners will select all final questions and all questions on the examination will be in the public domain.

II. Code of Board Examiner and Question Writers Conduct

A. General Principles

1. An examiner and question writer shall engage in conduct at all times in a manner that promotes public confidence in the examination process of The American Board of Plastic Surgery, Inc.

2. The public's confidence in The American Board of Plastic Surgery, Inc. is eroded by the improper conduct of its examiners or question writers. An examiner or question writer therefore should avoid not only improper conduct but also the appearance of impropriety in all activities. An examiner or question writer should expect to be the subject of public scrutiny and must therefore accept restrictions on conduct that might be viewed as burdensome by ordinary citizens. Examiners or question writers should observe all laws, uphold the dignity and honor of the profession, and accept the Board's self-imposed disciplines.

B. Disqualification

1. An examiner or question writer should voluntarily request disqualification whenever that person's participation in an examination and impartiality might reasonably be questioned, including but not limited to, instances where he/she has a personal bias or prejudice concerning a candidate and where the examiner or question writer is under investigation for an offense which might reasonably lead to questions concerning that person's impartiality.

2. An examiner or question writer should not allow family, social or other relationships to influence that person's conduct or judgement during the examination process. The examiner or question writer should not convey or knowingly permit others to convey the impression that they are in a special position to influence him/her.

C. Enforcement. Any examiner or question writer who violates any of the above rules may be subject to discipline.

Section 7. Enforcement

Any candidate, diplomate, board member, examiner and question writer charged with a violation of any ethical standard set forth herein may be subject to disciplinary measures, as defined by The American Board of Plastic Surgery, Inc. including revocation of certification.

Section 8. Glossary

I. For purposes of this Code and unless the context otherwise requires,

A. "Material fact" is one of which a member of the public should be reasonably informed of before selecting a qualified plastic surgeon.

B. "Private communication" includes any information, written or otherwise, that is disseminated by a physician and not made known to the general public.

C. "Procedure" includes any medical service that requires a primary consultation on the part of a physician, and an informed consent on the part of a patient.

D. "Public communication" includes any information transmitted orally, in writing, or through electronic media, the primary purpose of which is to notify the public, including a segment thereof, or a person, of the availability of a candidate or diplomate or any other health care provider affiliated with a candidate or diplomate or his organization, to practice medicine.

E. "Public communications media" includes, but is not limited to, television, radio, motion picture, computer bulletin boards, Internet web pages, telephone, telegram, letter, handbill, circular, newspaper, magazine, book, list, directory, business card, professional announcement card, office sign, letterhead, telephone directory listing or professional notice.

F. "Solicitation" is an in-person communication to a specific individual to attract him or her as a patient.

References: The American Society of Plastic Surgeons
The American Medical Association

Approved: November 17, 2002
Revised: November, 2003