**The World Medical Association, Inc.  
Revised draft of International Code of Medical ethics**

**Revised ICoME draft as approved by the WMA Medical Ethics Committee (April 2022)**

**and editorially revised by the ICoME workgroup (approved by WMA ExCo in June 2022)**

**WITH AMENDMENTS FROM REGIONAL MEETINGS AND**

**EXPERT MEETING ON 12 AUGUST 2022**

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| **Document no:** | **MEC 221/ICoME REV3/Oct2022** | Original:  English |
| **Title:** | **Draft WMA International Code of Medical Ethics**  **With amendments following regional meetings and expert meeting on 12 August 2022** |
| Destination: | Medical Ethics Committee  221st General Assembly  Ritz-Carlton Hotel  Berlin, Germany  5-8 October 2022 | Action(s) required:  **For comment** |
| Note: | Following the WMA sessions in April 2022, members of the International Code of Medical Ethics (ICoME) revision workgroup held a meeting in May to review the latest draft as approved in April 2022 by the Medical Ethics Committee (MEC) for use in the remaining regional meetings in Bangkok, Thailand, and Abuja, Nigeria, along with the dedicated meeting on physician conscientious objection in Jakarta, Indonesia, and a final expert meeting in Washington, DC, USA. The workgroup incorporated several editorial changes and requested the approval of the WMA Executive Committee to use the slightly revised draft as the basis for discussion in the aforementioned meetings. The chair thanks the Medical Association of Thailand, the Nigerian Medical Association, the Indonesian Medical Association, and the American Medical Association for co-hosting these fruitful meetings and for their hospitality. The workgroup met virtually and in-person prior to the final expert meeting in Washington, DC, to discuss feedback received during the regional meetings and to amend the draft accordingly. The resulting draft was then shared with top experts in the field of medical ethics for a final reality check. These experts presented their thoughts and recommendations during the final expert meeting in Washington, DC, on August 11th and 12th.  In the middle column below, you will find the latest draft of the ICoME as revised by the workgroup with input from participants in the final expert meeting.  Following an intense three-year revision process, highlighted by regular workgroup meetings with around 20 active constituent members and observers, meetings in Kuwait, Brazil, Thailand, Nigeria, Indonesia, the USA, and a global public consultation, the draft is now being submitted to the MEC with the request to circulate it for comments prior to the General Assembly in October 2022. If approved by the MEC in October 2022, the draft will be forwarded to the Council and then, if approved, to the General Assembly for adoption. | |

|  | **Current revised text (as approved by the WMA Medical Ethics Committee in April 2022) with editorial amendments from ICoME workgroup (approved by the WMA Executive Committee in June 2022).** | **Revised draft following ICoME regional meetings and final expert meeting on 11-12 August 2022** | **Comments** |
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|  | **WMA INTERNATIONAL CODE OF MEDICAL ETHICS** | **WMA INTERNATIONAL CODE OF MEDICAL ETHICS** |  |
|  | **Preamble** | **Preamble** |  |
| **1** | The World Medical Association (WMA) has developed the International Code of Medical Ethics as a canon of ethical principles for the members of the medical profession worldwide. In concordance with the WMA Declaration of Geneva: The Physician’s Pledge and the WMA’s entire body of policies, it defines and elucidates the professional duties of physicians toward their patients, other physicians and health professionals, themselves, and society as a whole.  The physician must be aware of applicable national ethical, legal, and regulatory norms and standards, as well as relevant international norms and standards. Such norms and standards must not reduce the physician’s commitment to the ethical principles set forth in this Code.  The International Code of Medical Ethics should be read as a whole and each of its constituent paragraphs should be applied with consideration of all other relevant paragraphs. Consistent with the mandate of the WMA, the Code is addressed to physicians. The WMA encourages others who are involved in healthcare to adopt these ethical principles. | The World Medical Association (WMA) has developed the International Code of Medical Ethics as a canon of ethical principles for the members of the medical profession worldwide. In concordance with the WMA Declaration of Geneva: The Physician’s Pledge and the WMA’s entire body of policies, it defines and elucidates the professional duties of physicians toward their patients, other physicians and health professionals, themselves, and society as a whole.  The physician must be aware of applicable national ethical, legal, and regulatory norms and standards, as well as relevant international norms and standards.  Such norms and standards must not reduce the physician’s commitment to the ethical principles set forth in this Code.  The International Code of Medical Ethics should be read as a whole and each of its constituent paragraphs should be applied with consideration of all other relevant paragraphs. Consistent with the mandate of the WMA, the Code is addressed to physicians. The WMA encourages others who are involved in healthcare to adopt these ethical principles. |  |
|  | **General principles** | **General principles** |  |
| **2** | The primary duty of the physician is to promote the health and well-being of individual patients by providing competent, timely, and compassionate care in accordance with good medical practice and professionalism.  The physician also has a responsibility to contribute to the health and well-being of the populations they serve and society as a whole, including future generations.  The physician must provide care with the utmost respect for human dignity and life. | The primary duty of the physician is to promote the health and well-being of individual patients by providing competent, timely, and compassionate care in accordance with good medical practice and professionalism.  The physician also has a responsibility to contribute to the health and well-being of the populations they serve and society as a whole, including future generations.  The physician must provide care with the utmost respect for human dignity and life. |  |
| **New** |  | **The physician must provide care in such a way that the dignity, autonomy, and rights of the patient are respected.** |  |
| **3** | The physician must practise with conscience, honesty, integrity, and accountability, while always exercising independent professional judgment and maintaining the highest standards of professional conduct. | *Former paragraph 5*  The physician must practise medicine fairly and justly and provide care **based on the patient’s health needs** without **bias or** engaging in discriminatory conduct ~~or bias~~ on the basis of age, disease or disability, creed, ethnic origin, gender, nationality, political affiliation, race, culture, sexual orientation, social standing or any other factor.  ~~Care should be provided based on the patient’s health needs.~~ |  |
| **4** | Physicians must not allow their individual professional judgement to be influenced by the possibility of benefit to themselves or their institution. The physician must recognise and avoid real or potential conflicts of interest. Where such conflicts are unavoidable, they must be declared in advance and properly managed. | *Former paragraph 6*  The physician must strive to use health care resources in a way that optimally benefits the patient, in keeping with fair, just, and prudent stewardship of the shared resources with which the physician is entrusted. |  |
| **5** | The physician must practise medicine fairly and justly and provide care without engaging in discriminatory conduct or bias on the basis of age, disease or disability, creed, ethnic origin, gender, nationality, political affiliation, race, culture, sexual orientation, social standing or any other factor.  Care should be provided based on the patient’s health needs. | *Former paragraph 3*  The physician must practise with conscience, honesty, integrity, and accountability, while always exercising independent professional judgment and maintaining the highest standards of professional conduct. |  |
| **6** | The physician must strive to use health care resources in a way that optimally benefits the patient, in keeping with fair, just, and prudent stewardship of the shared resources with which the physician is entrusted. | *Former paragraph 4*  Physicians must not allow their individual professional judgement to be influenced by the possibility of benefit to themselves or their institution. The physician must recognise and avoid real or potential conflicts of interest. Where such conflicts are unavoidable, they must be declared in advance and properly managed. |  |
| **7** | When providing professional certification, the physician must only certify what the physician has personally verified. | *Former paragraph 8*  Physicians must take responsibility for their individual medical decisions and must not alter their sound professional medical judgments on the basis of instructions contrary to medical considerations. |  |
| **8** | Physicians must take responsibility for their individual medical decisions and must not alter their sound professional medical judgments on the basis of instructions contrary to medical considerations. | *Former paragraph 9*  When medically necessary, the physician must collaborate with other physicians and health professionals who are involved in the care of the patient or who are qualified to assess or recommend care options. This communication must respect patient confidentiality and be confined to necessary information. |  |
| **9** | When medically necessary, the physician must collaborate with other physicians and health professionals who are involved in the care of the patient or who are qualified to assess or recommend care options. This communication must respect patient confidentiality and be confined to necessary information. | *Former paragraph 7*  When providing professional certification, the physician must only certify what the physician has personally verified. |  |
| **10** | The physician must offer help in medical emergencies, while considering the physician’s own safety and competence, and the availability of other viable options for care. | The physician ~~must~~ ~~offer~~  **should** **provide** help in medical emergencies, while considering the physician’s own safety and competence, and the availability of other viable options for care. |  |
| **11** | The physician must never participate in or facilitate acts of torture or other cruel, inhuman or degrading treatment or punishment. | The physician must never participate in or facilitate acts of torture**, punishment** or other cruel, inhuman or degrading **practices** ~~treatment, or~~ ~~punishment~~. |  |
| **12** | The physician must engage in continuous learning throughout professional life in order to maintain and develop professional knowledge and skills. | The physician must engage in continuous learning throughout professional life in order to maintain and develop professional knowledge and skills. |  |
| **13** | The physician should strive to practise medicine in ways that are environmentally sustainable with a view to minimising environmental health risks to current and future generations. | The physician should strive to practise medicine in ways that are environmentally sustainable with a view to minimising environmental health risks to current and future generations. |  |
|  | **Duties to the patient** | **Duties to the patient** |  |
| **14** | In providing medical care, the physician must respect the dignity, autonomy, and rights of the patient.  The physician must respect the patient’s right to freely accept or refuse care in keeping with the patient’s values and preferences. | In providing medical care, the physician must respect the dignity, autonomy, and rights of the patient.  The physician must respect the patient’s right to freely accept or refuse care in keeping with the patient’s values and preferences. |  |
| **15** | The physician must commit to the primacy of patient health and well-being and must offer care in the patient’s best interest. In doing so, the physician must strive to prevent or minimise harm for the patient and seek a positive balance between the intended benefit to the patient and any potential harm. | The physician must commit to the primacy of patient health and well-being and must offer care in the patient’s best interest. In doing so, the physician must strive to prevent or minimise harm for the patient and seek a positive balance between the intended benefit to the patient and any potential harm. |  |
| **16** | The physician must respect the patient’s right to be informed in every phase of the care process. The physician must obtain the patient’s voluntary informed consent prior to any medical care provided, ensuring that the patient receives and understands the information needed to make an independent, well-informed decision about the proposed care. The physician must respect the patient’s decision to withhold or withdraw consent at any time and for any reason*.* | The physician must respect the patient’s right to be informed in every phase of the care process. The physician must obtain the patient’s voluntary informed consent prior to any medical care provided, ensuring that the patient receives and understands the information needed to make an independent, ~~well-~~informed decision about the proposed care. The physician must respect the patient’s decision to withhold or withdraw consent at any time and for any reason. |  |
| **17** | When a patient has substantially limited, undeveloped, impaired, or fluctuating decision-making capacity, the physician must work with the patient’s trusted representative, if available, to make decisions in keeping with the patient’s preferences, when those are known or can reasonably be inferred. When the patient’s preferences cannot be determined, the physician must make decisions in the patient’s best interests. All decisions must be made in keeping with the principles set forth in this Code. | When a patient has substantially limited, und**erd**eveloped, impaired, or fluctuating decision-making capacity, the physician must **involve the patient as much as possible in medical decisions. In addition, the physician** must work with the patient’s trusted representative, if available, to make decisions in keeping with the patient’s preferences, when those are known or can reasonably be inferred. When the patient’s preferences cannot be determined, the physician must make decisions in the patient’s best interests. All decisions must be made in keeping with the principles set forth in this Code. |  |
| **18** | In emergencies, where the patient is not able to participate in decision making and no representative is readily available, the physician may initiate an intervention without prior informed consent in the best interests of the patient and with respect for the patient’s preferences, where known. | In emergencies, where the patient is not able to participate in decision making and no representative is readily available, the physician may initiate an intervention without prior informed consent in the best interests of the patient and with respect for the patient’s preferences, where known. |  |
| **19** | If the patient regains decision-making capacity, the physician must obtain informed consent for further intervention. | If the patient regains decision-making capacity, the physician must obtain informed consent for further intervention. |  |
| **20** | The physician should be considerate of and communicate with others, where available, who are close to the patient, in keeping with the patient’s preferences and best interest and with due regard for patient confidentiality. | The physician should be considerate of and communicate with others, where available, who are close to the patient, in keeping with the patient’s preferences and best interest and with due regard for patient confidentiality. |  |
| **21** | If any aspect of caring for the patient is beyond the capacity of a physician, the physician must consult with or refer the patient to another physician or health professional who has the necessary capacity. | If any aspect of caring for the patient is beyond the capacity of a physician, the physician must consult with or refer the patient to another physician or health professional who has the necessary capacity. |  |
| **22** | The physician must maintain accurate, secure, and up-to-date medical records. | The physician **must** **ensure accurate and timely medical documentation** ~~maintain accurate, secure, and up-to-date medical records~~. |  |
| **23** | The physician must respect the patient’s privacy and confidentiality, even after the patient has died. A physician may disclose confidential information if the patient provides voluntary informed consent or, in exceptional cases, when disclosure is necessary to safeguard a significant and overriding ethical obligation to which all other possible solutions have been exhausted, even when the patient does not or cannot consent to it.  This disclosure must be limited to the minimal necessary information, recipients, and duration. | The physician must respect the patient’s privacy and confidentiality, even after the patient has died. A physician may disclose confidential information if the patient provides voluntary informed consent or, in exceptional cases, when disclosure is necessary to safeguard a significant and overriding ethical obligation to which all other possible solutions have been exhausted, even when the patient does not or cannot consent to it.  This disclosure must be limited to the minimal necessary information, recipients, and duration. |  |
| **24** | If a physician is acting on behalf of or reporting to any third parties with respect to the care of a patient, the physician must inform the patient accordingly at the outset and, where appropriate, during the course of any interactions.  At the outset and, where appropriate, during the course of any interactions, the physician must disclose to the patient the nature and extent of those commitments and must obtain consent for the interaction. | If a physician is acting on behalf of or reporting to any third parties with respect to the care of a patient, the physician must inform the patient accordingly at the outset and, where appropriate, during the course of any interactions. ~~At the outset and, where appropriate, during the course of any interactions,~~ ~~t~~**T**he physician must disclose to the patient the nature and extent of those commitments and must obtain consent for the interaction. |  |
| **25** | The physician must refrain from intrusive or otherwise inappropriate advertising and marketing and ensure that all information used by the physician in advertising and marketing is factual and not misleading. | The physician must refrain from intrusive or otherwise inappropriate advertising and marketing and ensure that all information used by the physician in advertising and marketing is factual and not misleading. |  |
| **26** | The physician must not allow commercial**,** financial, or other conflicting interests to affect the physician’s professional judgement. | The physician must not allow commercial**,** financial, or other conflicting interests to affect the physician’s professional judgement. |  |
| **27** | When providing medical care remotely, the physician must ensure that this form of communication is medically justifiable and that the necessary medical care is provided. The physician must also inform the patient about the benefits and limitations of receiving medical care remotely, obtain the patient’s consent, and ensure patient confidentiality is upheld. Wherever medically appropriate, the physician must aim to provide care to the patient through direct, personal contact. | When providing medical care remotely, the physician must ensure that this form of communication is medically justifiable and that the necessary medical care is provided. The physician must also inform the patient about the benefits and limitations of receiving medical care remotely, obtain the patient’s consent, and ensure **that** patient confidentiality is upheld. Wherever medically appropriate, the physician must aim to provide care to the patient through direct, personal contact. |  |
| **28** | *Current draft as approved by the MEC for use as a basis for discussion at the dedicated conference in 2022.*  The physician has an ethical obligation to minimise disruption to patient care. Conscientious objection must only be exercised if the individual patient is not discriminated against or disadvantaged and the patient’s health is not endangered.  If a physician intends to exercise a conscientious objection to a specific treatment or procedure, the physician must inform the patient of this objection. If it is not practicable for the patient to see another physician who will perform the treatment or procedure, the physician must initiate, without delay, arrangements for the patient to consult with a suitably qualified physician or authorised health care professional who does not object to the treatment or procedure.  The physician must minimise distress for the patient and must not disrespect the patient on the grounds of the patient’s conviction. The physician must respect other physicians’ and health professionals’ conscientious objections provided they are in line with this Code. | *Former paragraph 29*  The physician must maintain appropriate professional boundaries. The physician must never engage in abusive, exploitative or other inappropriate relationships or behaviour with a patient and must not engage in a sexual relationship with a current patient. |  |
| **29** | The physician must maintain appropriate professional boundaries. The physician must never engage in abusive, exploitative or other inappropriate relationships or behaviour with a patient and must not engage in a sexual relationship with a current patient. | *Former paragraph 30*  In order to provide care of the highest standards, physicians must attend to their own health, well-being and abilities. This includes seeking appropriate care to ensure that they are able to practise safely. |  |
| **30** | In order to provide care of the highest standards, physicians must attend to their own health, well-being and abilities. This includes seeking appropriate care to ensure that they are able to practise safely. | *Former paragraph 28* This Code represents the physician’s ethical duties. However, on some issues there are profound moral dilemmas concerning which physicians and patients may hold deeply considered but conflicting conscientious beliefs.  The physician has an ethical obligation to minimise disruption to patient care. Physician conscientious objection to provision of any lawful medical interventions may only be exercised if the individual patient is not harmed or discriminated against and if the patient’s health is not endangered.  The physician must immediately and respectfully inform the patient of this objection and of the patient’s right to consult another qualified physician and provide sufficient information to enable the patient to initiate such a consultation in a timely manner. |  |
|  | **Duties to other physicians and health professionals** | **Duties to other physicians ~~and~~ health professionals, students and other personnel** |  |
| **31** | The physician must engage with other physicians and health professionals in a respectful and collaborative manner without engaging in harassment, discriminatory conduct or bias. The physician must also ensure that ethical principles are upheld when working in teams. | The physician must engage with other physicians**,** ~~and~~ health **professionals and** **other personnel** ~~professionals~~ in a respectful and collaborative manner without **bias,** engaging in harassment~~,~~ **or** discriminatory conduct ~~or bias~~. The physician must also ensure that ethical principles are upheld when working in teams. |  |
| **32** | The physician should respect colleagues’ patient-physician relationships and not intervene unless needed to protect the patient from harm. This should not prevent the physician from recommending alternative courses of action considered to be in the patient’s best interests. | The physician should respect colleagues’ patient-physician relationships and not intervene unless needed to protect the patient from harm. This should not prevent the physician from recommending alternative courses of action considered to be in the patient’s best interests. |  |
| **33** | The physician should report to the appropriate authorities conditions or circumstances which impede the physician or another physician from providing care of the highest standards or from upholding the principles of this Code. This includes any form of abuse or violence against physicians and other health personnel, inappropriate working conditions, and any other unsustainable stress factors. | The physician should report to the appropriate authorities conditions or circumstances which impede the physician or ~~an~~other ~~physician~~ **health professionals** from providing care of the highest standards or from upholding the principles of this Code. This includes any form of abuse or violence against physicians and other health personnel, inappropriate working conditions, ~~and any~~ **or** other ~~unsustainable stress factors~~ **circumstances that produce excessive and sustained levels of stress**. |  |
| **34** | Due respect should be accorded to teachers and students of medicine and other health professionals. | ~~Due respect should be accorded to~~ **The physician** ~~should /~~ **must** accord due respect to teachers and students ~~of medicine and other health professionals~~. |  |
|  | **Duties to society** | **Duties to society** |  |
| **35** | The physician must support fair and equitable provision of health care. This includes addressing inequities in health and care, the determinants of those inequities, as well as violations of the rights of both patients and health professionals. | The physician must support fair and equitable provision of health care. This includes addressing inequities in health and care, the determinants of those inequities, as well as violations of the rights of both patients and health professionals. |  |
| **36** | Physicians play an important role in matters relating to health, health education and health literacy. In fulfilling this responsibility, physicians should be prudent in discussing new discoveries, technologies, or treatments in non-professional, public venues and should ensure that their statements are scientifically accurate and understandable.  Physicians must indicate if their own personal opinions are contrary to evidence-based scientific information. | **The** physician~~s~~ play**s** an important role in matters relating to health, health education and health literacy. In fulfilling this responsibility, **the** physician~~s should~~ **must** be prudent in discussing new discoveries, technologies, or treatments in non-professional, public ~~venues~~ **settings**, **including social media** and should ensure that ~~their~~ statements are scientifically accurate and understandable.  **The** physician~~s~~ must indicate if ~~their own~~ ~~personal~~ opinions are contrary to evidence-based scientific information. |  |
| **37** | Physicians should avoid acting in such a way as to weaken public trust in the medical profession. To maintain that trust, physicians must hold themselves and fellow physicians to the highest standards of professional conduct and be prepared to report behaviour that conflicts with the principles of this Code. | *Former paragraph 39*  “**The physician** must support sound medical scientific research in keeping with the WMA Declaration of Helsinki and the WMA Declaration of Taipei. |  |
| **38** | Physicians should share their medical knowledge and expertise for the benefit of patients and the advancement of health care, and public and global health. | *Former paragraph 37*  ~~Physicians~~ **The physician** should avoid acting in such a way as to weaken public trust in the medical profession. To maintain that trust, **individual** physicians must hold themselves and fellow physicians to the highest standards of professional conduct and be prepared to report behaviour that conflicts with the principles of this Code. |  |
| **39** | Physicians must support sound medical scientific research in keeping with the WMA Declaration of Helsinki and the WMA Declaration of Taipei. | *Former paragraph 38*  ~~Physicians~~ **The physician** should share ~~their~~ medical knowledge and expertise for the benefit of patients and the advancement of health care, ~~and~~ **as well as** public and global health. |  |
|  | **Physician’s duties as a member of professional medical organisations** | **~~Physician’s duties as a member of professional medical organisations~~**  **Duties as a member of the medical profession** |  |
| **40** | As a member of professional medicalorganisations, the physician should follow, protect, and promote the ethical principles of this Code. The physician should help prevent national or international ethical, legal, or regulatory requirements that undermine any of the duties set forth in this Code. | ~~As a member of professional medical~~~~organisations, t~~ **T**he physician should follow, protect, and promote the ethical principles of this Code. The physician should help prevent national or international ethical, legal, **organisational** or regulatory requirements that undermine any of the duties set forth in this Code. |  |
| **41** | As a member of professional medicalorganisations, the physician should support fellow physicians in upholding the responsibilities set out in this Code and take measures to protect them from undue influence, abuse, exploitation, violence, or oppression. | ~~As a member of professional medical~~~~organisations, t~~ **T**he physician should support fellow physicians in upholding the responsibilities set out in this Code and take measures to protect them from undue influence, abuse, exploitation, violence, or oppression. |  |