

Summary of Amendments to the ASPS Code of Ethics Between 2012 and 2017

Over the last couple of years, in two separate votes, ASPS Active and Life Active Members have approved modifications to the Code of Ethics ("Code"). Prior to 2016, the last modifications to the Code had been approved in March 2012. Many of the modifications are summarized below, but this is not an exhaustive account.

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- Incorporates standards of professionalism and decorum among colleagues (see paragraph one of the preamble and Section 1, Article XI);
- Updates references and definitions to reflect modern means of communication (see definitions of Electronic Media, Public Communication, and Public Communications Media in the Glossary);
- Clarifies that a violation of the General Principles is a violation of the Code (see Section 2, Article I(K));
- Prohibits the raffle or giving away of devices or components integral to a procedure (see Section 2, Article I(I));
- Updates advertising guidelines to include additional media forms (see Section 2, Article I(F) and Section 2, Article II);
- Addresses facility fee charges within the scope of exorbitant fee prohibition and clarify accountability for facility billing practices (see Section 2, Article I(E));
- Provides additional clarity on the qualifications for expert witnesses (see definition of "recent and substantive" in the Glossary) and to address conflicts of interest when providing testimony (see Section 2, Article IV);
- Includes off-label uses or treatments in the Statement of Principle of Informed Consent, consistent with best practices;
- Eliminates outdated or impractical references (deleted restrictions on sources of income in the General Principles, references to medical incompetence, illegal transactions, fee arrangements, and false trade names under the Specific Principles); and
- Maintains consistency in terminology and definitions (changed "physician" to "Member" throughout, and "individual" to "patient").

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Section 1 General Principles, Article XI was updated as indicated by the redlining: In their public and private communications with <u>or concerning</u> patients and colleagues made in a professional capacity or environment, Members shall strive to use accurate and respectful language <u>and images</u>.