

## Basic Principles in Lecture 1

Don't give any identifying details about patients to whom are not authorized to know unless the patient agrees or asks for; some breaches of confidentiality require documented, written consent, depending on the case and its severity.

Don't not report any details about the patient unless indicated by the law, such as in cases of crime or anticipated harm or in cases of infectious diseases that pose threat to the patient's spouse or to society in general.

When reporting is indicated by law, such as the previous examples and in routine cases such as birth/death registries or cases of abortion, the physician's duty is to inform the authorities, and they are responsible to take further action.

The patient's spouse has the right to know if the patient has an STD, yet the responsibility of telling them is not on the physician. The physician must report to the authorities, and they will inform the spouse in the right way.

Child abuse, even if the child agrees on it, should always be reported, even if the physician is uncertain, to protect the child. A child is defined by law as < 18 years old.

Alcohol or substance abuse should be reported if associated with harm, or anticipated harm, to others. Otherwise, the physician is not required to report.

Don't check the patient in proximity to other people, even healthcare workers, who are not involved with the case. Keep the exposure of the patient's body as minimum as possible for the necessity that is required by the specific intervention.

All persons should exit the room when dealing with the patient, except for the physician, the patient and the chaperone, if needed, unless the patient wishes otherwise.

Have nearby a patient-same-sex chaperone when treating patients of opposite sex.

Major interventions and/or observations must have documented, written informed consent, especially those exposing private parts. This holds even if the examination is indicated by the law, and the patient has the right to refuse, and they should be informed of the consequences, such as losing their right in court.

Don't keep the patient in the room for unnecessary after finishing the procedure, and make sure the patient is treated in a respectful place and not in the corridors. Give the patient enough time to express their complaint, and don't rush the procedure.

In cases of emergency and absence of representatives, the physician may initiate therapy after consulting *المدعي العام*; and the intervention should be as minimal as possible to alleviate any risk to the patient's life; informed consent must be obtained for further intervention when the patient is cognitively able to do so.

Physicians should be aware of ethical aspects of their specialty and should ask for help if they are uncertain what to do. 'Not knowing' does not protect the physician from law.