

## **PHYSICIAN-PATIENT RELATIONSHIP**

## TREATING PATIENTS WITH WHOM YOU HAVE A CLOSE RELATIONSHIP

Physicians are often asked by close friends, relatives, or colleagues for medical advice, treatment, or prescriptions both inside and outside of the office. At times, these individuals may be seen by you as a courtesy and/or at no charge. Although the American Medical Association advises physicians not to treat immediate family members except in cases of emergency or when no one else is available, this practice continues to occur.

Over the years, we have seen a number of lawsuits filed against physicians by close friends, colleagues, and even their own family members because of care provided by our insureds. The defense of these suits is frequently hampered by the fact that there are often sparse or entirely non-existent medical records for the patient. The failure to maintain a medical record for every patient is defined as professional medical misconduct by Education Law §6530(32). Providing care under these circumstances may pose unique risks.

		YES	NO
1.	A medical record is always created for friends, relatives, and colleagues when care of any kind is provided.		
2.	All patient encounters are documented in the medical record, including those that occur outside the medical office.		
3.	A complete medical history is taken when seeing friends, relatives, or colleagues as patients. If indicated, this includes issues that may be uncomfortable to discuss, such as the use of psychotropic medications or sexual history.		
4.	A thorough medication history is obtained from the patient to avoid potential drug interactions. Any contraindications are identified when prescribing medication.		
5.	A thorough physical examination is performed. Sensitive portions of the physical examination are not deferred when pertinent to the patient's complaints. These may include breast, pelvic, or rectal examinations. A chaperone is used for those portions of the examination.		
6.	Prescriptions are not written, especially for controlled substances, for individuals with whom you do not have an established professional relationship. Always document the reasons for prescribing medications along with the dose. If narcotics are prescribed, the Prescription Monitoring Program (I-STOP) registry is consulted and is documented in the medical record.		

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## CHECKLIST #2



TREATING PATIENTS WITH WHOM YOU HAVE A CLOSE RELATIONSHIP (continued)		
<ul> <li>7. When a surgical procedure is to be performed: <ul> <li>a signed informed consent form is obtained and placed in the medical record</li> <li>the medical record contains documentation that the informed consent conversation with the patient has occurred and that the patient consented to the procedure.</li> </ul> </li> </ul>		