Introduction

In June, 1957, at its Annual Session in New York City, the House of Delegates of the American Medical Association adopted a revision of the Principles of Medical Ethics.

Where formerly the Principles consisted of a preamble and forty-seven sections (1955 edition), they now consist of a preamble and ten sections. In this compilation the Preamble and the Principles are quoted, and are followed by:

(1) Those sections of the 1955 edition of the Principles which, in the opinion of the Judicial Council are included within the spirit and intent of the language of the 1957 edition; and
(2) Abstracts of interpretations of ethical principles made by the Judicial Council since 1900.*

The House of Delegates was assured by the Council on Constitution and Bylaws, which drafted the new Principles, that no basic ethical principle was deleted nor any traditional concept added or abrogated in the shorter version. This abstract of reports and opinions of the Judicial Council supports the assurance of the Council on Constitution and Bylaws. These opinions and reports, in the opinion of the Judicial Council, are consistent with the 1957 edition of the Principles and are interpretive of it.

During half a century the Council has had occasion to make many pronouncements concerning interpretations of the Principles of Medical Ethics. In the main these consisted of reports to the House of Delegates. It is clear that not all of these reports need to be included in this body of precedents. The Council has, therefore, abstracted the essence of the pertinent reports under appropriate titles to serve as a practical usable reference document for guidance of the profession.

This compilation is presented by the Council as a guide to all who wish to use it.

* This document is recreated from the 1958 publication of the Principles of Medical Ethics. The opinions, abstracts, and interpretations of the Judicial Council are not reproduced here, but copies may be purchased by calling 312-464-4823.
Preamble

These principles are intended to aid physicians individually and collectively in maintaining a high level of ethical conduct. They are not laws but standards by which a physician may determine the propriety of his conduct in his relationship with patients, with colleagues, with members of allied professions, and with the public.

Section 1

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

Section 2

Physicians should strive continually to improve medical knowledge and skill, and should make available to their patients and colleagues the benefits of their professional attainments.

Section 3

A physician should practice a method of healing founded on a scientific basis; and he should not voluntarily associate professionally with anyone who violates this principle.

Section 4

The medical profession should safeguard the public and itself against physicians deficient in moral character or professional competence. Physicians should observe all laws, uphold the dignity and honor of the profession and accept its self-imposed disciplines. They should expose, without hesitation, illegal or unethical conduct of fellow members of the profession.

Section 5

A physician may choose whom he will serve. In an emergency, however, he should render service to the best of his ability. Having undertaken the care of a patient, he may not neglect him; and unless he has been discharged he may discontinue his service only after giving adequate notice. He should not solicit patients.

Section 6

A physician should not dispose of his services under terms or conditions which tend to interfere with or impair the free and complete exercise of his medical judgement and skill or tend to cause a deterioration of the quality of medical care.
Section 7

In the practice of medicine a physician should limit the source of his professional income to medical services actually rendered by him, or under his supervision, to his patients. His fee should be commensurate with the services rendered and the patient’s ability to pay. He should neither pay nor receive a commission for referral of patients. Drugs, remedies or appliances may be dispensed or supplied by the physician provided it is in the best interests of the patient.

Section 8

A physician should seek consultation upon request; in doubtful or difficult cases; or whenever it appears that the quality of medical service may be enhanced thereby.

Section 9

A physician may not reveal the confidences entrusted to him in the course of medical attendance, or the deficiencies he may observe in the character of patients, unless he is required to do so by law or unless it becomes necessary in order to protect the welfare of the individual or of the community.

Section 10

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