Introduction

In realization of the Egyptian Medical Syndicate to the fact that the medical profession is a humanitarian and ethical profession basically built on science, a profession which makes it inevitable upon whoever practices it to be acquainted therewith, adequately trained to practice it and to respect the humanitarian personality in all circumstances and conditions.

And in emphasis to the fact that each medical work aims at the absolute interest of the patient, having the necessity that justifies it.

And in the belief that medical care is one of the basic human rights which the community seeks to provide to all its citizens;

And pursuant to the resolutions of the Syndicate Council and the General Assembly of the Egyptian Physicians, these regulations have been issued by virtue of resolution no. 238/2003 on Sept. 5, 2003 by

The Minister of Health & Population
In Amendment to the Previous Regulations
Issued in 1974
Part One
Physicians Section

Article 1:

Each physician must take the following oath prior to practicing the profession before the President of the Medical Syndicate or whoever acts on his behalf:

“I hereby swear by God Almighty to observe God in my profession, to safeguard the life of the human being in all its stages in all conditions and circumstances exerting my best effort to save it from destruction, sickness, pain and anxiety; to preserve to people their dignity, not to reveal their private parts and keep their secret, and to be always among the means of God’s mercy, rendering my medical care to the close and the distant, to the virtuous and the sinner, the friend and the enemy; to devote myself to seeking knowledge and subjugating it for the benefit of the human being and not to his harm; to honor whoever had taught me and to teach those who are younger than me; to be a brother to each colleague of mine in the medical profession cooperating on piety and the fear of God; that my life would be a confirmation to my belief secretly and openly, pure from whatever disgraces it towards God, his messengers and the believers, May God Be my Witness”.

Part Two
Duties of the Physician

First : Duties of the Physician Towards the Community

Article 2:

The physician shall comply with keeping his work at his office or private practice purely to please God and the service of the community in which he lives with all his capabilities and potentials in peace and in war, and in all circumstances.

Article 3:
It shall be imperative upon the physician to be a good example in the community through his compliance with the principles and ideals, sincere in the rights of citizens in the obtainment of the due medical care, above all forms of exploitation of his patients, colleagues or pupils.

Article 4 :
It shall be imperative upon the physician to participate in studying the means of solving the medical problems of the community and to support the role of the syndicate in consolidating and developing the medical policy, advancing it for the public interest and to be cooperative with the competent bodies of the State as regards the data requested needed for laying down health plans and policies.

Article 5 :
It shall be imperative upon the physician to report to the competent medical authorities any suspicion of an epidemic so that the preventative measures for protecting the community would be taken.

Second : Duties of the Physician Towards the Profession

Article 6 :
It shall be imperative upon the physician to observe honesty and accuracy in all his actions and to comply with the right behavior, maintain his dignity and the dignity of the profession from what disgraces it pursuant to what is mentioned in the physicians’ oath and in these regulations.

Article 7 :
The physician may not draw up a medical report nor testify in any matter that is not in his specialization nor different from the fact which he reached from the personal examination of the patient.

Article 8 :
The physician may not carry out any of the following acts :
A. Seek the assistance of mediators in practicing the profession, whether with or without pay.

B. Allow the use of his name in the promotion of drugs, medication or different kinds of treatment, or for commercial purposes of any form.

C. Request or accept remuneration or fees of any kind in return for an undertaking, prescribing drugs or specific equipment for patients or sending them to a hospital, therapeutic sanitarium, nursing home, drug store or any place specified for carrying out examinations and medical tests or for the sale of medical requirements or aids.

D. Carry out medical consultations in stores or their annexes that are designated for the sale of drugs, medical equipment or preparations whether for free or in return for a fee or remuneration.

E. Carry out medical consultations through communication companies.

F. Sell any drugs, prescriptions, medical equipment or preparations in his clinic - or during practicing the profession - with the purpose of trade.

G. To share his fee with any of his colleagues except if he had actually taken part with him in the treatment, or to work as a mediator to another physician or hospital in any form.

Article 9:

The physician may not apply a new way for diagnosis or treatment if he had not completed its testing by the right scientific and moral method, published in accredited medical fields, its validity proven and licensed by the competent medical quarters. He may not also unduly attribute to himself any scientific discovery or allege it to be his own.

Article 10:
The physician may not advertise for himself in any form whether through publication, the radio, the television, across the Internet or any other way of advertisement.

Article 11:

The physician may, at the time of opening a clinic or moving it, advertise the foregoing in the newspapers within the limits of three times. If he absents himself from his clinic for more than two weeks he may publish two advertisements, one before his absence and the second after his return.

Article 12:

In preparing the billboards, printed matters, medical prescriptions and the like the physician must comply with the legislation, laws and regulations organizing the foregoing.

Article 13:

The physician may not use his job with the intent of achieving a personal benefit or material gain from the patient. He is also not allowed to get paid a fee from the patient for work that is included in the competency of his original job for which he is hired.

Article 14:

It shall be imperative upon the physician to seize each opportunity to educate his patient medically and to get him acquainted with the patterns of the healthy life, to constantly and continuously pursue medical education and training and to maintain his scientific and skillful efficiency which qualifies for practicing the profession.

Article 15:

The physician may not assert the diagnosis of a disease or recommend some kind of treatment through verbal, written or visual data without personally examining the patient.

Article 16:

The physician may participate in exchange of scientific opinion seminars, the parties of which are specialist
physicians. He may also participate in the transfer of medical information from one colleague to another whether in writing or across the other communication media.

Article 17:

If there is a communication or consultation between one physician and another in connection with any treatment or diagnosis of a patient, the full responsibility will attach to the physician who is attending the patient in treatment and diagnosis.

Article 18:

The physician must refrain from expressing any advice, written or verbal medical or scientific opinion upon discussing a matter which entails a personal interest or yield a material benefit to him outside the framework of his practice to the medical profession.

Article 19:

Upon addressing the public in medical subject matters across the mass media, the physician shall comply with the following rules:

A. The avoidance of mentioning his work place, the means of communicating him, praising his scientific experiences or achievements. He shall only suffice with mentioning his medical capacity and his field of specialization.
B. The address shall be in a simplified manner that suits the layman listener or viewer.
C. The avoidance of mentioning unconfirmed or unauthenticated scientific opinions or deal with disputable subject matters that are only to be discussed in private scientific sessions which are unaddressed to the public.

Third: Duties of the Physician Towards the Patients

Article 20:

It shall be imperative upon the physician to exert his best effort for the treatment of his patients, to seek alleviating
their pains, treat them well and to care for them equally without distinction.

**Article 21**:

It shall be imperative upon the physician to provide for his patient the information related to his medical condition in a simplified and understandable way.

The physician may, for humanitarian reasons, conceal from the patient the critical consequences of the sickness, in which case he should inform his family in a humanitarian appropriate way the seriousness of the disease and its dangerous consequences, unless the patient expresses his desire to conceal his case from everyone or determine specific persons to be informed thereof and this did not constitute danger to those around him.

**Article 22**:

It shall be imperative upon the physician to comply with the limits of his professional skills and to seek the experience of those physicians who are more efficient than him in examining and treating his patient when necessary.

**Article 23**:

It shall be imperative upon the physician to observe the following:

A. Not to exaggerate in estimating his fees and to consider the financial and social condition of the patient.
B. To comply with the necessary drugs, taking into consideration that the priority would be to the national and less price drug, provided that it would be effective and safe.
C. Confine to request laboratory tests or the necessary diagnostic methods.

**Article 24**:

In non-emergency cases the physician may apologize for not treating any patient at the beginning or at any phase for
personal reasons or for reasons related to the profession. However, in emergency cases, the physician may not apologize.

Article 25:

The specialist physician may not reject the treatment of a patient if he was called to do so by a general practitioner and there was no other specialist physician.

Article 26:

If a physician ceases to treat one of his patients for any reason, he must furnish the physician substituting him with the right information which he believes to be essential for continuing the treatment, in writing or verbally.

Article 27:

It shall be imperative upon the physician to draw the attention of the patient and his companions to take the means of protection, to guide them thereto and to warn them of the consequences of not observing them. He may request their signature on a written declaration from them to the effect of knowing the foregoing in some cases which necessitate so.

Article 28:

The physician may not carry out the medical examination of the patient or his treatment without an approval (built on knowledge) from the patient or whoever legally acts on his behalf if he was not fit to do so. The visit of the patient to the physician at his work place is considered an implicit approval to the foregoing. In case of surgical or semi-surgical intervention an approval (built on the knowledge) must be obtained from the patient or whoever acts on his behalf in writing except in cases of life saving.

It shall be imperative upon the physician who is called in to visit a minor, an incapacitated person or an unconscious patient who is in a dangerous condition to exert his best effort to save him even if it was not possible to obtain an approval (built on knowledge) in the right time from his guardian, curator or custodian. He must also not retire from
his treatment except if the danger ceases to exist or if the patient was entrusted to another physician.

Article 29:

The physician may not perform an abortion operation except for medical reasons that threaten the health of the mother. This shall be carried out by a written certificate from two specialist physicians. In emergency cases in which the operation is performed to save life, the treating physician must draw up a detailed report on the case to be enclosed with the treatment prescription.

Article 30:

The physician shall not be allowed to disclose the secrets of his patient to which he had access by virtue of his job except if this was pursuant to a judicial decision, in case of the possibility of the occurrence of grave and certain harm afflicting third party or in other cases that are determined by the law.

Article 31:

The physician may not use his relation to the patient and his family for purposes that disagree with the dignity of the profession.

Article 32:

If the patient passes away inside the private medical facility, the physician in charge shall inform the competent quarters considering him a informer for the death.

Article 33:

The physician must inform the competent quarters of the injuries and accidents of criminal suspicions such as the case of injury by gunshot, cutting or stab wounds or others, together with writing a detailed medical report on the case at the time of being put forward before him. The physician may
invite another colleague to participate in examining the case and writing the report.

Article 34:

The physician may notify the Public Prosecution of any assault on him as a result of performing his profession. At the same time it shall be imperative upon him to notify his subsidiary syndicate as soon as possible in order that it can interfere in the matter jointly with the physician.

Article 35:

It shall be imperative upon the physician entrusted with the medical care of those whose freedom is restricted to provide them with medical care of the same quality and standard available for those whose freedom is not restricted. He shall be prohibited from carrying out positively or negatively any acts that constitute participation in the torture operations and other kinds of cruel or inhumane treatment nor collude or instigate these acts. He shall also be prohibited from using his professional skills and information to assist in questioning those whose freedom is restricted in a manner that harms their health, physical or mental condition, nor take part in any measure to restrict the movement of those whose freedom is restricted unless this is decided pursuant to pure medical criteria in order to protect their physical or mental health.

Article 36:

The physician shall be prohibited from taking life on the pretext of petty or mercy.

Fourth: Duties of the Physician Towards the Colleagues

Article 37:

It shall be imperative upon the physician to settle any dispute that may arise between him and one of his colleagues as a result of the profession, amicably. If the dispute is not settled, the matter shall be reported to the council of the competent subsidiary syndicate to resolve it by a decision issued by the council of the subsidiary syndicate. If either
party complains of the decision, the matter shall be put forward before the council of the general syndicate.

**Article 38**

The physician may not seek to compete with one of his colleagues in a dishonorable way in any work related to the profession or the treatment of a patient.

**Article 39**

The physician shall not be allowed to diminish the capabilities of his colleagues, and if there was something which necessitated the criticism of his colleague professionally this is to be carried out before a neutral scientific committee.

**Article 40**

If a physician replaces one of his colleagues in his clinic temporarily, it shall be imperative upon him not to use this situation to his personal interest. He must also notify the patient prior to the examination of his capacity and that he is a temporary replacement to the physician who owns the clinic.

**Article 41**

If a physician was invited to visit a patient who is being treated by another physician who could not be called in, it shall be imperative upon him to leave the completion of the treatment to his colleague as soon as he returns and to inform him of the procedures taken, unless the patient or his family deems his continuation of the treatment.

**Article 42**

If more than one physician participate in the treatment of a patient:

A. The physician may not examine nor treat a patient who is being treated by a colleague of his in a hospital except if he is called to do so by the treating physician or the management of the hospital.

B. The patient or his family may invite another physician or more for consultation after notifying the treating
The physician may apologize for not continuing to treat the case if the patient or his family insist on consulting someone whom he does not accept without expressing the reasons.

C. If the treating physician refuses to treat the patient pursuant to what is decided by the consultant physicians, he may withdraw leaving the assumption of his treatment to one of those consultant physicians.

Part Three

Medical Interventions of Special Nature

First: Gender Correction Procedure

Article 43:

The physician shall be prohibited from carrying out gender change operations. As regards gender correction operations, it
is conditional that the approval of the competent committee at the syndicate would be obtained. The correction operations shall be carried out after carrying out the hormonal analyses and inspecting the chromosomal map after spending the accompanying psychiatric and hormonal treatment for a period not less than two years.

Second: Assisted Reproductive Operations

Article 44:

The assisted reproductive operations for the wife’s ovum from the husband’s sperm inside or outside the wife’s body (laboratory reproductive techniques or intra cytoplasmic sperm injection) shall be subject to the moral guidelines which aim at preserving the human race and treating infertility, while observing the purity of lineages and the legal criteria issued by the competent quarters.

Article 45:

It shall be unallowable to carry out the assisted reproductive operations inside or outside the body of the wife except by using her husband’s sperm if there is consummation of marriage between them.

It shall also be unallowable to transfer fertilized ova to transplant them in the uteruses of women other than the legitimate mother of these ova.

Article 46:

It shall be unallowable to establish ovum, spermatozoon or embryo banks.

Article 47:

It shall not be authorized to practice the assisted reproductive operations except in equipped centers licenced to practice such operations.

Article 48:
The center must keep a detailed register for each case containing all the data separately for a period that is not less than ten years. The file must include the contract and a declaration from both spouses.

Third : Human Organs & Tissues Removal and Transplant

Article 49 :

The human organs and tissues transplant operations shall be subject to the moral criteria and guidelines stipulated in the legislation and regulations organizing the foregoing.

Article 50 :

It shall be imperative upon the physician prior to carrying out an organ transplant operation, pursuant to the legislation organizing the foregoing, to notify the donor of the medical consequences and the risks to which he may be exposed as a result of the transplant operation and to take the necessary declarations which state his knowledge of all the consequences in this concern prior to carrying out the operation.

Article 51 :

It shall be prohibited to trade in the human organs, tissues and cells, and human embryos. Under no circumstance shall the physician be allowed to take part in these operations, otherwise he shall be subject to disciplinary accountability.

Part Four
Conducting Medical Research & Experiments
On Human Beings
First : General Provisions

Article 52 :

The physician shall comply with observing the implementation of all moral criteria and guidelines as well as the social and religious values laid down by the competent authority for conducting medical research on human beings.

Article 53 :

The physician shall be prohibited from conducting any experiments for drugs and techniques on human beings prior to being endorsed by the competent quarters.

Second : Procedures that Must be Taken Prior to Conducting any Research on Human Beings

Article 54 :

Taking into consideration the provisions of the two previous articles, the researcher physician shall comply prior to conducting any medical research on human beings with acquiring a detailed study of the risks and burdens to which the individual or the group will be exposed and comparing them with the benefits expected to be obtained from the research. Conducting such research shall be confined to the specialists scientifically qualified to conduct them under the supervision of a highly efficient and specialized physician.

The responsibility of the health protection of the volunteers for conducting the research shall be attached to the physician supervising him.

Article 55 :

The researcher shall comply with fully informing the volunteers in a clear way of the targets of the research, the research approaches which will be used in it, the benefits expected therefrom, the probable risks and the extent of their effect on the volunteers. The volunteers must also be informed of the sources of financing the research, the identity of the researcher in charge and his institutional belonging. The right of the volunteer to cease his voluntariness to conduct the experiments and research or the full withdrawal
from the research without sustaining any negative consequences as a result of his cessation or withdrawal must be emphasized.

**Article 56 :**

The researcher physician shall comply with obtaining a written consent (built on knowledge) from the volunteer to conduct the research on him officially in the presence of a prosecution witness. If the volunteer is a minor, a retarded or incapacitated person the approval of the official guardian or curator must be obtained, in which case it is conditional that the research would pertain to his sick condition.

**Article 57 :**

The researcher shall comply with preparing a detailed and clear report on the targets of the research and the justifications for conducting it on human beings. This report shall be submitted to the quarter legally competent with approving to conduct the research in order to obtain such approval.

Third : Procedures that Must be Taken During & After Conducting the Research on Human Beings

**Article 58 :**

The researcher shall comply with immediately ceasing to complete any experiments on human beings if it was established that the accompanying risks exceed the benefits expected of the research.

It is necessary to guarantee the privacy of the individuals, the secrecy of the results and keeping them as well as minimizing the negative effects on the physical, mental and psychological safety of the volunteers.

**Article 59 :**

The researcher shall comply with ensuring the availability of all preventative, diagnostic and therapeutic methods for each patient for conducting the study.
Article 60 :

The researcher shall be prohibited from conducting researches and practices that involve the suspicion of mixing lineages, or participating in them in any way. He shall also be prohibited from carrying out or participating in medical research which aim at cloning the human being.

Article 61 :

The physician shall comply with taking the required undertaking from the quarter financing the research to the effect of supplying the drug - which is being experimented on patients and which has been proven to be effective - till the end of the treatment program, free of charge.