ETHICAL AND PROFESSIONAL RULES

Practice as a health care professional is based on a relationship of mutual trust between patients and health care practitioners. The term “profession” means “a dedication, promise or commitment publicly made”.\(^1\) To be a good health care practitioner, requires a life-long commitment to sound professional and ethical practices and an overriding dedication to the interests of one’s fellow human beings and society.

In the course of their professional work health care practitioners are required to subscribe to certain rules of conduct. To this end the Health Professional Council of South Africa has formulated a set of rules regarding professional conduct against which complaints of professional misconduct will be evaluated. These rules are reproduced in this booklet.

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ETHICAL AND PROFESSIONAL RULES OF THE HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA

NOTE

This Booklet contains the Draft Regulations concerning the ethical and professional rules that the Health Professions Council of South Africa (HPCSA) has recommended to the Minister of Health.

Health care practitioners who decide not to follow the guidance in this Booklet (including the Annexure), must be prepared to explain and justify their actions and decisions to patients and their families, their colleagues and, if necessary, to the courts and the HPCSA.
GOVERNMENT NOTICE
DEPARTMENT OF HEALTH

No. R. 717

4 August 2006


HEALTH PROFESSIONS ACT, 1974 (ACT NO. 56 OF 1974)

ETHICAL RULES OF CONDUCT FOR PRACTITIONERS REGISTERED UNDER THE
HEALTH PROFESSIONS ACT, 1974

The Health Professions Council of South Africa, in consultation with the professional boards and with the approval of the Minister of Health, has, under section 49 read with section 61(2) and 61A(2) of the Health Professions Act, 1974 (Act No. 56 of 1974), made the rules in the Schedule.

SCHEDULE

Definitions

1. In these rules, any word or expression to which a meaning has been assigned in the Act shall bear such meaning and, unless the context indicates otherwise -

   “Act” means the Health Professions Act, 1974 (Act No. 56 of 1974);
   “annexure” means an annexure to these rules;
   “association” means a form of practising where two or more practitioners practise for their own account, but share communal assets or facilities;
   “board” means a professional board established in terms of section 15 of the Act;
   “canvassing” means conduct which draws attention, either verbally or by means of printed or electronic media, to one’s personal qualities, superior knowledge, quality of service, professional guarantees or best practice;
   “close collaboration” means consultation by a practitioner at one stage or another in the treatment of a patient with another practitioner and the furnishing by the latter practitioner, at the end of such treatment, of a report on the treatment to the practitioner whom he or she consulted;
   “dental specialist” means a dentist who has been registered as a specialist in a speciality or subspeciality in dentistry in terms of the Regulations relating to the Specialities and Subspecialities in Medicine and Dentistry, published under Government Notice No. R. 590 of 29 June 2001;
“dispensing optician” means a person registered as such in terms of the Act and the Rules for the registration of Dispensing Opticians, published under Government Notice No. R. 2339 of 3 December 1976;

“impairment” means a mental or physical condition which affects the competence, attitude, judgement or performance of professional acts by a registered practitioner;

“independent practice” means a practice where a registered health profession is conducted by a health practitioner without the supervision of another health practitioner;

“itinerant practice” means a practice which a practitioner conducts on a regular basis at a location other than at his or her resident practice address;

“medical device” means a medical device as defined in section 1 of the Medicines and Related Substances Act, 1965 (Act No. 101 of 1965);

“medical scientist” means a person registered under the Act as a biomedical engineer, clinical biochemist, genetic counsellor, medical biological scientist or medical physicist;

“medical specialist” means a medical practitioner who has been registered as a specialist in a speciality or subspeciality in medicine in terms of the Regulations relating to the Specialities and Subspecialities in Medicine and Dentistry, published under Government Notice No. R. 590 of 29 June 2001;

“optometrist” means a person registered as such under the Act;

“pharmaceutical concern” means a company registered as such under the Pharmacy Act, 1974 (Act No. 53 of 1974);

“practitioner” means a person registered as such under the Act and, in the application of rules 5, 6 and 9 of these rules, also a juristic person exempted from registration in terms of section 54A of the Act;

“private practice” means the practice of a health practitioner who practises for his or her own account, either in solus practice, or as a partner in a partnership, or as an associate in an association with other practitioners, or as a director of a company established in terms of section 54A of the Act;

“public company” means a company registered as such under the Companies Act, 1973 (Act No. 61 of 1973);

“public service” means a service rendered by the state at the national, provincial or local level of government and includes organizations which function under its auspices or are largely subsidized by the state or recognized by a board for the purposes of these rules;

“resident practice” means a place where a registered health practitioner conducts his or her practice on a daily basis;
"rooms" means a physical structure, with an exclusive entrance and walled all round for the privacy of patients, the preservation of their confidentiality and the safe keeping of records, where a practitioner conducts his or her practice;

“section” means a section of the Act;

“specialist” means a practitioner who is registered as a specialist in a speciality or subspeciality (if any) in terms of the Regulations relating to the Specialities and Subspecialities in Medicine and Dentistry, published under Government Notice No. R. 590 of 29 June 2001, and who confines his or her practice to such speciality or subspeciality;

“supervision” means the acceptance of liability by a supervising practitioner for the acts of another practitioner; and

“touting” means conduct which draws attention, either verbally or by means of printed or electronic media, to one’s offers, guarantees or material benefits that do not fall in the categories of professional services or items, but are linked to the rendering of a professional service or designed to entice the public to the professional practice.

Interpretation and application

2. (1) Failure by a practitioner to comply with any conduct determined in these rules or an annexure to these rules shall constitute an act or omission in respect of which the board concerned may take disciplinary steps in terms of Chapter IV of the Act.

(2) Conduct determined in these rules or an annexure to these rules shall not be deemed to constitute a complete list of conduct and the board concerned may therefore inquire into and deal with any complaint of unprofessional conduct which may be brought before such board.

(3) At an inquiry referred to in subrule (2) the board concerned shall be guided by these rules, annexures to these rules, ethical rulings or guidelines and policy statements which the board concerned or council makes from time to time.

Advertising and canvassing or touting

3. (1) A practitioner shall be allowed to advertise his or her services or permit, sanction or acquiesce to such advertisement: Provided that the advertisement is not unprofessional, untruthful, deceptive or misleading or causes consumers unwarranted anxiety that they may be suffering from any health condition.

(2) A practitioner shall not canvass or tout or allow canvassing or touting to be done for patients on his or her behalf.

Information on professional stationery

4. (1) A practitioner shall print or have printed on letterheads, account forms and electronic stationery information pertaining only to such practitioner’s –
(a) name;
(b) profession;
(c) registered category;
(d) speciality or subspeciality or field of professional practice (if any);
(e) registered qualifications or other academic qualifications or honorary
degrees in abbreviated form;
(f) registration number;
(g) addresses (including email address);
(h) telephone and fax numbers;
(i) practice or consultation hours;
(j) practice code number; and
(k) dispensing licence number (if any).

(2) A group of practitioners practising as a juristic person which is exempted from
registration in terms of section 54A of the Act or a group of practitioners
practising in partnership, shall print or have printed on letterheads, account
forms and electronic stationery information pertaining only to such juristic
person or partnership practitioners’-

(a) name;
(b) profession;
(c) registered category;
(d) speciality or subspeciality or field of professional practice (if any);
(e) registered qualifications or other academic qualifications or honorary
degrees in abbreviated form;
(f) registration number;
(g) addresses (including email address);
(h) telephone and fax numbers;
(i) business hours;
(j) practice code number;
(k) exemption from registration in terms of section 54A of the Act; and
(l) dispensing licence number (if any).

(3) A practitioner shall not use prescription forms or envelopes on which the name
or address of a pharmacist is printed.

Naming of a practice

5. (1) A practitioner shall use his or her own name or the name of a registered
practitioner or practitioners with whom he or she is in partnership or with
whom he or she practises as a juristic person, as a name for his or her private
practice.

(2) A practitioner referred to in subrule (1) may retain the name of such private
practice even if another practitioner, partner of such partnership or member of
such juristic person is no longer part of such private practice: Provided that the
express consent of the past practitioner or, in the case of a deceased
practitioner the consent of the executor of his or her estate or his or her next-
of-kin, has been obtained.

(3) A practitioner shall not use, in the name of his or her private practice, the
expression “hospital”, “clinic” or “institute” or any other expression which may
give the impression that such private practice forms part of, or is in association with, a hospital, clinic or institute.

Itinerant practice

6. A practitioner may conduct a regularly recurring itinerant practice at a place where another practitioner is established if, in such itinerant practice, such practitioner renders the same level of service to patients, at the same fee as the service which he or she would render in the area in which he or she is conducting a resident practice.

Fees and commission

7. (1) A practitioner shall not accept commission or any material consideration, (monetary or otherwise) from a person or from another practitioner or institution in return for the purchase, sale or supply of any goods, substances or materials used by him or her in the conduct of his or her professional practice.

(2) A practitioner shall not pay commission or offer any material consideration, (monetary or otherwise) to any person for recommending patients.

(3) A practitioner shall not offer or accept any payment, benefit or material consideration (monetary or otherwise) which is calculated to induce him or her to act or not to act in a particular way not scientifically, professionally or medically indicated or to under-service, over-service or over-charge patients.

(4) A practitioner shall not share fees with any person or with another practitioner who has not taken a commensurate part in the services for which such fees are charged.

(5) A practitioner shall not charge or receive fees for services not personally rendered, except for services rendered by another practitioner in his or her employment or with whom he or she is associated as a partner, shareholder or locum tenens.

Partnership and juristic persons

8. (1) A practitioner may practise in partnership or association with or employ only a practitioner who is registered under the Act and who is not prohibited under any of the annexures to these rules or any ethical rulings from entering into such partnership or association or being so employed: Provided that, in the case of employment, the practitioner so employed either provides a supportive health care service to complete or supplement the employing practitioner's healthcare or treatment intervention or is in the same professional category as the employing practitioner.

(2) A practitioner shall practise in or as a juristic person who is exempted from registration in terms of section 54A of the Act only if such juristic person complies with the conditions of such exemption.
(3) A practitioner shall practise in a partnership, association or as a juristic person only within the scope of the profession in respect of which he or she is registered under the Act.

(4) A practitioner shall not practise in any other form of practice which has inherent requirements or conditions that violate or potentially may violate one or more of these rules or an annexure to these rules.

Sharing of Rooms

8A. A practitioner shall not share his or her rooms with a person or entity not registered in terms of the Act.

Covering

9. (1) A practitioner shall employ as a professional assistant or locum tenens, or in any other contractual capacity and, in the case of locum tenens for a period not exceeding six months, only a person:
   (a) who is registered under the Act to practise in independent practice;
   (b) whose name currently appears on the register kept by the registrar in terms of section 18 of the Act; and
   (c) who is not suspended from practising his or her profession.

   (2) A practitioner shall help or support only a person registered under the Act, the Pharmacy Act, 1974 (Act No. 53 of 1974), the Nursing Act, 1978 (Act No. 50 of 1978), the Social Service Professions Act, 1978 (Act No. 110 of 1978), the Dental Technicians Act, 1979 (Act No. 19 of 1979), or the Allied Health Professions Act, 1982 (Act No. 63 of 1982), if the professional practice or conduct of such person is legal and within the scope of his or her profession.

Supersession

10. A practitioner shall not supersede or take over a patient from another practitioner if he or she is aware that such patient is in active treatment of another practitioner, unless he or she –

   (a) takes reasonable steps to inform the other practitioner that he or she has taken over the patient at such patient’s request; and

   (b) establishes from the other practitioner what treatment such patient previously received, especially what medication, if any, was prescribed to such patient and in such case the other practitioner shall be obliged to provide such required information.

Impeding a patient

11. A practitioner shall not impede a patient, or in the case of a minor, the parent or guardian of such minor, from obtaining the opinion of another practitioner or from being treated by another practitioner.
Professional reputation of colleagues

12. A practitioner shall not cast reflections on the probity, professional reputation or skill of another person registered under the Act or any other Health Act.

Professional confidentiality

13. (1) A practitioner shall divulge verbally or in writing information regarding a patient which he or she ought to divulge only -
   (a) in terms of a statutory provision;
   (b) at the instruction of a court of law; or
   (c) where justified in the public interest.

(2) Any information other than the information referred to in subrule (1) shall be divulged by a practitioner only –

   (a) with the express consent of the patient;

   (b) in the case of a minor under the age of 12 years, with the written consent of his or her parent or guardian; or

   (c) in the case of a deceased patient, with the written consent of his or her next-of-kin or the executor of such deceased patient’s estate.

Retention of human organs

14. (1) A practitioner shall only for research, educational, training or prescribed purposes retain the organs of a deceased person during an autopsy.

(2) The retention of organs referred to in subrule (1) shall be subject –

   (a) to the express written consent given by the patient concerned during his or her lifetime;

   (b) in the case of a minor under the age of 14 years, to the written consent of such minor’s parent or guardian; or

   (c) in the case of a deceased patient who had not previously given such written consent, to the written consent of his or her next-of-kin or the executor of his or her estate.

Signing of official documents

15. A student, intern or practitioner who, in the execution of his or her professional duties, signs official documents relating to patient care, such as prescriptions, certificates (excluding death certificates), patient records, hospital or other reports,
shall do so by signing such document next to his or her initials and surname printed in block letters.

Certificates and reports

16. (1) A practitioner shall grant a certificate of illness only if such certificate contains the following information –

(a) the name, address and qualification of such practitioner;
(b) the name of the patient;
(c) the employment number of the patient (if applicable);
(d) the date and time of the examination;
(e) whether the certificate is being issued as a result of personal observations by such practitioner during an examination, or as a result of information which has been received from the patient and which is based on acceptable medical grounds;
(f) a description of the illness, disorder or malady in layman’s terminology with the informed consent of the patient: Provided that if such patient is not prepared to give such consent, the practitioner shall merely specify that, in his or her opinion based on an examination of such patient, such patient is unfit to work;
(g) whether the patient is totally indisposed for duty or whether such patient is able to perform less strenuous duties in the work situation;
(h) the exact period of recommended sick leave;
(i) the date of issue of the certificate of illness; and
(j) the initial and surname in block letters and the registration number of the practitioner who issued the certificate.

(2) A certificate of illness referred to in subrule (1) shall be signed by a practitioner next to his or her initials and surname printed in block letters.

(3) If preprinted stationery is used, a practitioner shall delete words which are not applicable.

(4) A practitioner shall issue a brief factual report to a patient where such patient requires information concerning himself or herself.

Issuing of prescriptions

17. (1) A practitioner authorized in terms of the Medicines and Related Substances Act, 1965 (Act No. 101 of 1965), to prescribe medicines shall issue typewritten, handwritten, computer-generated, pre-typed, pre-printed or standardized prescriptions for medicine scheduled in Schedules I, 2, 3 and 4.
of the Medicines and Related Substances Act, 1965 (Act No. 101 of 1965), subject thereto that such prescriptions may be issued only under his or her personal and original signature.

(2) A practitioner authorized in terms of the Medicines and Related Substances Act, 1965 (Act No. 101 of 1965), to prescribe medicines shall issue handwritten prescriptions for medicine scheduled in Schedules 5, 6, 7 and 8 of the Medicines and Related Substances Act, 1965 (Act No. 101 of 1965), under his or her personal and original signature.

Professional appointments

18. (1) A practitioner shall accept a professional appointment or employment from employers approved by the council only in accordance with a written contract of appointment or employment which is drawn up on a basis which is in the interest of the public and the profession.

(2) A written contract of appointment or employment referred to in subrule (1) shall be made available to the council at its request.

Secret remedies

19. A practitioner shall in the conduct and scope of his or her practice, use only –
(a) a form of treatment, apparatus or health technology which is not secret and which is not claimed to be secret; and
(b) an apparatus or health technology which proves upon investigation to be capable of fulfilling the claims made in regard to it.

Defeating or obstructing the council or board in the performance of its duties

20. A practitioner shall at all times cooperate and comply with any lawful instruction, directive or process of the council, a board, a committee of such board or an official of council and in particular, shall be required, where so directed to –

(a) respond to correspondence and instructions from the council, such board, a committee of such board or an official of council within the stipulated time frames; and

(b) attend consultation at the time and place stipulated by the council, such board, a committee of such board or an official of council.

Performance of professional acts

21. A practitioner shall perform, except in an emergency, only a professional act -
(a) for which he or she is adequately educated, trained and sufficiently experienced; and

(b) under proper conditions and in appropriate surroundings.
Exploitation

22. A practitioner shall not permit himself or herself to be exploited in any manner.

Medicine and medical devices

23. (1) A practitioner shall not participate in the manufacture for commercial purposes, or in the sale, advertising or promotion of any medicine or medical device or in any other activity that amounts to selling medicine or medical devices to the public or keeping an open shop or pharmacy.

(2) A practitioner shall not engage in or advocate the preferential use or prescription of any medicine or medical device which, save for the valuable consideration he or she may derive from such preferential use or prescription, would not be clinically appropriate or the most cost-effective option.

(3) The provisions of subrules (1) and (2) shall not prohibit a practitioner from -

(a) owning shares in a listed company;

(b) manufacturing or marketing medicines whilst employed by a pharmaceutical concern;

(c) whilst employed by a pharmaceutical concern in any particular capacity, performing such duties as are normally in accordance with such employment; or

(d) dispensing in terms of a licence issued in terms of the Medicines and Related Substances Act, 1965.

(4) A practitioner referred to in subrule (3) shall display a conspicuous notice in his or her waiting room and also duly inform his or her patient about the fact that he or she -

(a) owns shares or has a financial interest in a listed public company that manufactures or markets the medicine or medical device prescribed for that patient; or

(b) is in the employ of or contractually engaged by the pharmaceutical or medical device company that manufactures such medicine or medical device, and shall, subject to subrule (5), obtain the patient's informed written consent prior to prescribing such medicine or medical device for that patient."; and

(5) A practitioner may prescribe or supply medicine or a medical device to a patient: Provided that such practitioner has ascertained the diagnosis of the patient concerned through a personal examination of the patient or by virtue of a report by another practitioner under whose treatment the patient is or has
been and such medicine or medical device is clinically indicated, taking into account the diagnosis and the individual prognosis of the patient, and affords the best possible care at a cost-effective rate compared to other available medicines or medical devices and the patient is informed of such other available medicines or medical devices.

(6) In the case of a patient with a chronic disease the provision of subrule (5) shall not apply.

Financial interests in hospitals

23A. A practitioner may have a direct or indirect financial interest or shares in a hospital or any other health care institution: Provided that -

(a) such interests or shares are purchased at market-related prices in arm's length transactions;

(b) the purchase transaction or ownership of such interest or shares does not impose conditions or terms upon the practitioner that will detract from the good, ethical and safe practice of his or her profession;

(c) the returns on investment or payment of dividends is not based on patient admissions or meeting particular targets in terms of servicing patients;

(d) such practitioner does not over-service patients and to this end establishes appropriate peer review and clinical governance procedures for the treatment and servicing of his or her patients at such hospital or health care institution;

(e) such practitioner does not participate in the advertising or promotion of the hospital or health care institution, or in any other activity that amounts to such advertising or promotion;

(f) such practitioner does not engage in or advocate the preferential use of such hospital or health care institution;

(g) the purchase agreement is approved by the council based on the criteria listed in paragraphs (a) to (f) above; and

(h) such practitioner annually submit a report to the council indicating the number of patients referred by him or her or his or her associates or partners to such hospital or health care institution and the number of patients referred to other hospitals in which he or she or his or her associates or partners hold no shares.
Referral of patients to hospitals

24. (1) A practitioner who has a direct or indirect financial interest or shares in a private clinic or hospital shall refer a patient to such clinic or hospital only if a conspicuous notice is displayed in his or her waiting room indicating that he or she has a financial interest or shares in that clinic or hospital and the patient is duly informed about the fact that the practitioner has an interest or shares in the clinic or hospital to which the patient is referred and the patient's informed written consent is obtained prior to such referral.

(2) Deleted

(3) Deleted

(4) Deleted

(5) Deleted

(6) A practitioner may admit a patient to such private clinic or hospital: Provided that such practitioner -

   (a) has ascertained the diagnosis of the patient concerned through a personal examination of such patient or by virtue of a report by another practitioner under whose treatment such patient is or has been;

   (a) has informed such patient that such admission in such private clinic or hospital was necessary for his or her treatment; and

   (b) has obtained such patient's consent for admission to such private clinic or hospital.

Reporting of impairment or of unprofessional, illegal or unethical conduct

25. (1) A student, intern or practitioner shall -

   (a) report impairment in another student, intern or practitioner to the board if he or she is convinced that such student, intern or practitioner is impaired;

   (b) report his or her own impairment or suspected impairment to the board concerned if he or she is aware of his or her own impairment or has been publicly informed, or has been seriously advised by a colleague to act appropriately to obtain help in view of an alleged or established impairment, and

   (c) report any unprofessional, illegal or unethical conduct on the part of another student, intern or practitioner.
Research, development and use of chemical, biological and nuclear capabilities

26. (1) A practitioner who is or becomes involved in research, development or use of defensive chemical, biological or nuclear capabilities shall obtain prior written approval from the board concerned to conduct such research, development or use.

(2) In applying for written approval referred to in subrule (1), such practitioner shall provide the following information to the board concerned:

(a) Full particulars of the nature and scope of such research, development or use;

(b) whether the clinical trials pertaining to such research have been passed by a professionally recognized research ethics committee;

(c) that such research, development or use is permitted in terms of the provisions of the World Medical Association’s Declaration on Chemical and Biological Weapons; and

(d) that such research, development or use is permitted in terms of the provisions of the applicable international treaties or conventions to which South Africa is a signatory.

Dual registration

27. A health practitioner who holds registration with more than one statutory council or professional board shall at all times ensure that -

(a) no conflict of interest arises from such dual registration in the rendering of health services to patients;

(b) patients are clearly informed at the start of the consultation of the profession in which the practitioner is acting;

(c) informed consent regarding the profession referred to in paragraph (b) is obtained from the said patient;

(d) patients are not consulted in a dual capacity or charged fees based on such dual consultation; and

(e) the ethical rules applicable at a given moment to the profession in which the practitioner is acting, are strictly adhered to.
Main responsibilities of health practitioners

27A. A practitioner shall at all times

(a) act in the best interests of his or her patients;

(b) respect patient confidentiality, privacy, choices and dignity;

(c) maintain the highest standards of personal conduct and integrity;

(d) provide adequate information about the patient's diagnosis, treatment options and alternatives, costs associated with each such alternative and any other pertinent information to enable the patient to exercise a choice in terms of treatment and informed decision-making pertaining to his or her health and that of others;

(e) keep his or her professional knowledge and skills up to date;

(f) maintain proper and effective communication with his or her patients and other professionals;

(g) except in an emergency, obtain informed consent from a patient or, in the event that the patient is unable to provide consent for treatment himself or herself, from his or her next of kin; and

(h) keep accurate patient records.

Repeal


ME TSHABALALA-MSIMANG
MINISTER OF HEALTH
ANNEXURES

ANNEXURE 1

PROFESSIONAL BOARD FOR DENTAL THERAPY AND ORAL HYGIENE

RULES OF CONDUCT PERTAINING SPECIFICALLY TO THE PROFESSIONS OF
DENTAL THERAPY,
ORAL HYGIENE AND DENTAL ASSISTANTS

A dental therapist, student in dental therapy, an oral hygienist, a student in oral hygiene
and a dental assistant shall adhere to the following rules of conduct in addition to the rules
of conduct referred to in rules 2 to 27. Failure by such dental therapist, student in dental
therapy, oral hygienist and student in oral hygiene to comply with the rules of conduct
listed herein shall constitute an act or omission in respect of which the board may take
disciplinary steps in terms of Chapter IV of the Act.

Performance of professional acts by dental therapist

1. A dental therapist –
   (a) shall confine himself or herself to clinical diagnosis and practice in the field of
dental therapy in which he or she was educated and trained and in which he or
she has gained experience, regard being had to both the extent and the limits
of his or her professional expertise;
   (b) shall communicate and co-operate with dentists, dental specialists, dental
therapists and other registered practitioners in the diagnosis and treatment of a
patient;
   (c) shall not conduct a private practice unless he or she has met the requirements
of the board and practised for at least one year under the control and
supervision of a dentist or another dental therapist approved by the board;
   (d) shall refer the following cases to a dentist or dental specialist for treatment:
      (i) Pulpal exposure, excluding the emergency treatment thereof;
      (ii) impacted teeth; and
(iii) oral diseases and dental abnormalities, such as tumours, mucosal diseases, developmental defects and infections;

(e) shall not remove the roots of teeth by any way other than the use of hand instruments or make any incision into the soft tissues during such removal; and

(f) shall not manufacture or repair dentures or other dental appliances which involve the taking of impressions.

Performance of professional acts by oral hygienist

2. An oral hygienist –

(a) shall confine himself or herself to clinical practice in the field of oral hygiene in which he or she was educated and trained and in which he or she has gained experience, regard being had to both the extent and the limits of his or her professional expertise;

(b) shall communicate and cooperate with dentists, dental therapists and other registered practitioners in the treatment of a patient; and

(c) shall not conduct a private practice unless he or she has met the requirements of the board.

Performance of professional acts by dental assistant

3. A dental assistant shall perform professional acts only under the supervision of a registered practitioner and shall limit such acts to acts directly related to his or her education and training in dental assistance.

Performance of professional acts by student in dental therapy

4. A student in dental therapy shall perform professional acts only under the supervision of a registered practitioner and shall limit such acts to acts directly related to his or her education and training in dental therapy.

Performance of professional acts by student in oral hygiene
5. A student in oral hygiene shall perform professional acts only under the supervision of a dentist, dental therapist, an oral hygienist or other registered practitioner and shall limit such acts to acts directly related to his or her education and training in oral hygiene.
ANNEXURE 2

PROFESSIONAL BOARD FOR DIETETICS

RULES OF CONDUCT PERTAINING SPECIFICALLY TO THE PROFESSION OF DIETETICS

A dietitian, food service manager, nutritionist, student in dietetics, student in food service management and student in nutrition shall adhere to the following rules of conduct in addition to the rules of conduct referred to in rules 2 to 27. Failure by such dietitian, food service manager, nutritionist, student in dietetics, student in food service management and student in nutrition to comply with the rules of conduct listed herein shall constitute an act or omission in respect of which the board may take disciplinary steps in terms of Chapter IV of the Act.

Performance of professional acts by a dietitian

1. A dietitian –
   (a) shall confine himself or herself to the performance of professional acts in the field of dietetics in which he or she was educated and trained and in which he or she has gained experience; and
   (b) shall not fail to communicate and cooperate with other registered practitioners in the treatment of a patient.

Performance of professional acts by assistant dietitian

2. An assistant dietitian -
   (a) shall perform professional acts in dietetics only under the supervision of a dietitian or nutritionist;
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in dietetics; and
   (c) shall not conduct a private practice.

Performance of professional acts by food service manager
3. A food service manager shall confine himself or herself to the performance of professional acts in the field of food service management in which he or she was educated and trained and in which he or she has gained experience.

**Performance of professional acts by nutritionist**

4. A nutritionist –
   (a) shall perform professional acts only under the supervision of a registered practitioner and shall limit such acts to acts directly related to his or her education and training; and
   (b) shall not conduct a therapeutic private practice.

**Performance of professional acts by assistant nutritionist**

5. An assistant nutritionist -
   (a) shall perform professional acts in nutrition only under the supervision of a nutritionist or dietitian;
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training; and
   (c) shall not conduct a private practice.

**Performance of professional acts by student in dietetics**

6. A student in dietetics shall perform professional acts only under the supervision of a registered practitioner and shall limit such acts to acts directly related to his or her education and training.

**Performance of professional acts by student in food service management**

7. A student in food service management shall perform professional acts only under the supervision of a registered practitioner and shall limit such acts to acts directly related to his or her education and training.
Performance of professional acts by student in nutrition

8. A student in nutrition shall perform professional acts only under the supervision of a registered practitioner and shall limit such acts to acts directly related to his or her education and training.
ANNEXURE 3

PROFESSIONAL BOARD FOR EMERGENCY CARE PRACTITIONERS

RULES OF CONDUCT PERTAINING SPECIFICALLY TO THE PROFESSION OF EMERGENCY CARE

A basic ambulance assistant, an emergency care assistant, ambulance emergency assistant, operational emergency orderly, a paramedic student basic ambulance assistant, student emergency care assistant, student ambulance emergency assistant or student paramedic shall adhere to the following rules of conduct in addition to the rules of conduct referred to in rules 2 to 27. Failure by such basic ambulance assistant, emergency care assistant, ambulance emergency assistant, operational emergency orderly and paramedic or student basic ambulance assistant, student emergency care assistant, student ambulance emergency assistant, student operational emergency orderly or student paramedic to comply with the additional rules of conduct listed herein shall constitute an act or omission in respect of which the board may take disciplinary steps in terms of Chapter IV of the Act.

Performance of professional acts by basic ambulance assistant, emergency care assistant, ambulance emergency assistant, operational emergency orderly or paramedic

1. Notwithstanding the provisions of rule 21, a basic ambulance assistant, an emergency care assistant, ambulance emergency assistant, operational emergency orderly or a paramedic –
   (a) shall not perform any professional act or exercise any capability in respect of any incident, other than the acts set out in the relevant protocol or annexure to such protocol approved by the board; and
   (b) shall not hand over the responsibility for the treatment of a patient to any person who is less qualified or experienced than himself or herself, unless such basic ambulance assistant, emergency care assistant, ambulance emergency assistant, operational emergency care orderly or paramedic assumes full responsibility for the acts falling within his or her scope of practice.
Performance of professional acts by student basic ambulance assistant, student emergency care assistant, student ambulance emergency assistant or student paramedic

2. A student basic ambulance assistant shall perform professional acts only under the supervision of a registered emergency care assistant and, in the case of a student emergency care assistant, student ambulance emergency assistant, student operational emergency care orderly or student paramedic only under the supervision of a medical practitioner or a paramedic and shall limit such acts to acts directly related to his or her education and training.
ANNEXURE 4
PROFESSIONAL BOARD FOR ENVIRONMENTAL HEALTH PRACTITIONERS
RULES OF CONDUCT PERTAINING SPECIFICALLY TO THE PROFESSION OF ENVIRONMENTAL HEALTH

An environmental health practitioner, environmental health assistant, a food inspector and a student in environmental health shall adhere to the following rules of conduct in addition to the rules of conduct referred to in rules 2 to 27. Failure by such environmental health practitioner, environmental health assistant, food inspector and student in environmental health to comply with the rules of conduct listed herein shall constitute an act or omission in respect of which the board may take disciplinary steps in terms of Chapter IV of the Act.

Performance of professional acts by environmental health practitioner

1. An environmental health practitioner –
   (a) shall confine himself or herself to practising in the field of environmental health in which he or she was educated and trained; and
   (b) shall not conduct a private practice without meeting the requirements of the board.

Performance of professional acts by environmental health assistant

2. An environmental health assistant –
   (a) shall perform professional acts only under supervision of an environmental health practitioner;
   (b) shall confine himself or herself to practising in the field of environmental health in which he or she was educated and trained; and
   (c) shall not conduct a private practice.

Performance of professional acts by food inspector
3. A food inspector –
   (a) shall perform professional acts only under the supervision of an environmental health practitioner;
   (b) shall confine himself or herself to practising in the field of environmental health in which he or she was educated and trained; and
   (c) shall not conduct a private practice.

Performance of professional acts by student in environmental health

4. A student in environmental health shall perform professional acts only under the supervision of an environmental health practitioner.
ANNEXURE 5

PROFESSIONAL BOARD FOR MEDICAL TECHNOLOGY

RULES OF CONDUCT PERTAINING SPECIFICALLY TO THE PROFESSION OF MEDICAL TECHNOLOGY

A medical technologist, medical technician, an intern medical technologist and a student in biomedical technology shall adhere to the following rules of conduct in addition to the rules of conduct referred to in rules 2 to 27. Failure by such medical technologist, medical technician, intern medical technologist and student in biomedical technology to comply with the rules of conduct listed herein shall constitute an act or omission in respect of which the board may take disciplinary steps in terms of Chapter IV of the Act.

Performance of professional acts by medical technologist

1. A medical technologist –
   (a) shall confine himself or herself to practising in the specific discipline of medical technology in which he or she was educated, trained and registered;
   (b) shall not conduct a private practice without obtaining -
       (i) postgraduate experience of at least two years; and
       (ii) prior written approval from the board; and
   (c) shall, if he or she does not comply with the provisions of paragraph (b), perform professional acts only under the direction of a medical practitioner or medical scientist who is registered in the relevant discipline: Provided that this prohibition shall apply only to acts excluded, as determined by the board.

Performance of professional acts by medical technician

2. A medical technician –
   (a) shall confine himself or herself to practising in the specific discipline of medical technology in which he or she was educated, trained and registered;
   (b) shall perform professional acts only under the supervision of a medical practitioner or medical technologist who is registered in the relevant discipline; and
(c) shall not conduct a private practice.

**Performance of professional acts by intern medical technologist**

3. An intern medical technologist –
   (a) shall perform professional acts only under the supervision of a practitioner who is registered in the relevant discipline;
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training as part of the formal internship in his or her discipline of study;
   (c) shall not conduct a private practice; and
   (d) if he or she has completed his or her internship, shall not perform any professional acts until he or she has satisfied all the academic requirements for registration as a medical technologist and has been registered as such.

**Performance of professional acts by student in medical technology**

4. A student in medical technology –
   (a) shall perform professional acts only under the supervision of a practitioner who is registered in the relevant discipline; and
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in his or her discipline of study.

**Performance of professional acts by laboratory assistant**

5. A laboratory assistant –
   (a) shall confine himself or herself to performing acts in the specific discipline of medical technology in which he or she is educated, trained and registered;
   (b) shall perform professional acts only under the supervision of a medical practitioner or medical technologist who is registered in the relevant discipline; and
   (c) shall not conduct a private practice.
ANNEXURE 6

MEDICAL AND DENTAL PROFESSIONS BOARD

RULES OF CONDUCT PERTAINING SPECIFICALLY TO THE MEDICAL AND
DENTAL PROFESSIONS

A medical practitioner, dentist, medical specialist, dental specialist, biomedical engineer, clinical biochemist, genetic counsellor, medical biological scientist, medical physicist, an intern in biomedical engineering, intern in clinical biochemistry, intern in genetic counselling, intern in medical biological science and intern in medical physics shall adhere to the following rules of conduct in addition to the rules of conduct referred to in rules 2 to 27. Failure by such medical practitioner, dentist, medical specialist, dental specialist, biomedical engineer, clinical biochemist, genetic counsellor, medical biological scientist, medical physicist, intern in biomedical engineering, intern in clinical biochemistry, intern in genetic counselling, intern in medical biological science and intern in medical physics to comply with the rules of conduct listed herein shall constitute an act or omission in respect of which the board may take disciplinary steps in terms of Chapter IV of the Act.

Performance of professional acts by medical practitioner or medical specialist

1. A medical practitioner or medical specialist -
   (a) shall perform professional acts only in the field of medicine in which he or she was educated and trained and in which he or she has gained experience, regard being had to both the extent and the limits of his or her professional expertise;
   (b) shall not fail to communicate and cooperate with medical practitioners, medical specialists and other health practitioners in the diagnosis and treatment of a patient; and
   (c) shall not sign official documents such as reports, certificates or prescriptions unless his or her name is printed next to his or her signature.

Performance of professional acts by dentist or dental specialist

2. A dentist or dental specialist –
(a) shall perform professional acts only in the field of dentistry in which he or she was educated and trained and in which he or she has gained experience, regard being had to both the extent and the limits of his or her professional expertise;
(b) shall not fail to communicate and cooperate with dentists, dental specialists and other health practitioners in the diagnosis and treatment of a patient; and
(c) shall not sign official documents such as reports, certificates or prescriptions unless his or her name is printed next to his or her signature.

Partnerships and juristic persons

3. (1) Where a patient is seen -
(a) by both a medical specialist or a dental specialist and a medical practitioner or a dentist practising as specified in rule 8(3), such specialist and medical practitioner or dentist shall charge the fees applicable to either the medical practitioner or the dentist and not those applicable to a medical specialist or a dental specialist; and
(b) by a medical specialist or a dental specialist only, the fees applicable to such specialist may be charged.

(2) The provisions in rule 8(3) shall be limited in that -
(a) a medical specialist who practises in one of the prescribed related specialities in medical pathology shall be excluded from the concession to form an incorporated practice in terms of section 54A, or to form a partnership or association with a medical practitioner, a medical specialist or another practitioner who does not practise in one of the related specialities in medical pathology;
(b) a medical specialist who practises in diagnostic radiology shall be excluded from the concession to form an incorporated practice in terms of section 54A, or to form a partnership or association with a medical practitioner, medical specialist or another practitioner who does not practise in the speciality diagnostic radiology;
(c) the only exception to the restriction pertaining to specialities in medical
pathology referred to in paragraph (a) hereof shall be that a pathologist shall be permitted to form an incorporated practice, partnership or association with a medical technologist registered in the relevant discipline in view of the fact that the said two professions are related to each other in terms of the nature of the field of professional practice; and

(d) the only exception to the restriction pertaining to radiology referred to in paragraph (b) hereof shall be that a radiologist shall be permitted to form an incorporated practice, partnership or association with a nuclear physician or a radiographer registered in the relevant discipline in view of the fact that the said two medical professions are related to each other in terms of the nature of their field of professional practice.

Medical specialist and dental specialist


Performance of professional acts by biomedical engineer, clinical biochemist, genetic counsellor, medical biological scientist, medical physicist

5. A biomedical engineer, a clinical biochemist, a genetic counsellor, a medical biological scientist and a medical physicist –

(a) shall perform professional acts only at the request of and in consultation with a medical practitioner or dentist;
(b) shall perform professional acts directly related to the treatment or diagnosis of a patient, in close cooperation with the medical practitioner or dentist concerned with the diagnosis or treatment of such patient; and
(c) shall not sign official documents such as reports, certificates or prescriptions, unless his or her name is printed next to his or her signature.

Performance of professional acts by intern in medicine

6. An intern in medicine -
(a) shall perform acts as part of a structured internship training programme at an approved facility only under the supervision of a medical practitioner as prescribed for this purpose and in accordance with the guidelines of the board;
(b) shall limit acts referred to in (a) to acts related to his or her education and training as part of a structured internship programme;
(c) shall not conduct a private practice;
(d) shall not act as a locum or perform professional acts in a private practice;
(e) if he or she has completed his or her internship, shall not perform any professional act until he or she has satisfied all the academic requirements for registration as a medical practitioner and has been registered as such; and
(f) shall not sign official documents such as reports, certificates or prescriptions, unless his or her name is printed next to his or her signature.

Performance of professional acts by interns in biomedical engineering, clinical biochemistry, genetic counselling, medical biological science or medical physics

7. An intern in biomedical engineering, clinical biochemistry, genetic counselling, medical biological science or medical physics –
(a) shall perform professional acts as part of a structured internship training programme at an approved facility only under the supervision of a practitioner as prescribed for this purpose and in accordance with the guidelines of the board;
(b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training as part of a structured internship programme in his or her discipline of study;

(c) shall not conduct a private practice;

(d) shall not act as a locum or perform professional acts in a private practice;

(e) if he or she has completed his or her internship, shall not perform any professional act until he or she has satisfied all the academic requirements for registration as a medical scientist and has been registered as such; and

(f) shall not sign official documents such as reports, certificates or prescriptions, unless his or her name is printed next to his or her signature.

Performance of professional acts by student in medicine or dentistry

8. A student in medicine or dentistry -

(a) shall perform professional acts only under the supervision of a practitioner approved for this purpose by the board;

(b) shall limit acts referred to in (a) to acts related to his or her education and training;

(c) shall not conduct a private practice; and

(d) shall not act as a locum or perform professional acts in a private practice.
ANNEXURE 7

PROFESSIONAL BOARD FOR OCCUPATIONAL THERAPY AND MEDICAL ORTHOTICS OR PROSTHETICS

RULES OF CONDUCT PERTAINING SPECIFICALLY TO THE PROFESSION OF OCCUPATIONAL THERAPY AND MEDICAL ORTHOTICS OR PROSTHETICS

An occupational therapist, occupational therapy assistant, occupational therapy technician, a student in occupational therapy, an arts therapist, student in arts therapy, medical orthotist or prosthetist, an orthopaedic footwear technician, assistant medical orthotist or prosthetist, leatherworker and student in medical orthotics or prosthetics shall adhere to the following rules of conduct in addition to the rules of conduct referred to in rules 2 to 27. Failure by such occupational therapist, occupational therapy assistant, occupational therapy technician, student in occupational therapy, arts therapist, student in arts therapy, medical orthotist or prosthetist, orthopaedic footwear technician, assistant medical orthotist or prosthetist, leatherworker and student in medical orthotics or prosthetics to comply with the rules of conduct listed herein shall constitute an act or omission in respect of which the board may take disciplinary steps in terms of Chapter IV of the Act.

Performance of professional acts by an occupational therapist

1. An occupational therapist –
   (a) shall perform professional acts only in the field of occupational therapy in which he or she was educated and trained and in which he or she has gained experience, regard being had to both the extent and the limits of his or her professional expertise;
   (b) shall communicate and cooperate with medical practitioners and other registered health practitioners in the diagnosis and treatment of a patient; and
   (c) in private practice may not employ any person as an occupational therapy assistant or an occupational therapy technician without the prior written approval of the board: Provided that this prohibition shall not apply in the case of a full-time or part-time appointment in the public service.
Performance of professional acts by occupational therapy assistant

2. An occupational therapy assistant –
   (a) shall perform professional acts only under the supervision of an occupational therapist or appropriately qualified registered practitioner: Provided that in the case of supervision under an appropriately qualified registered practitioner, such supervision shall not extend for a period of more than six months;
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in his or her discipline of study;
   (c) shall not accept employment without the prior written approval of the board: Provided that this prohibition shall not apply in the case of a full-time or part-time appointment in the public service; and
   (d) shall not conduct a private practice.

Performance of professional acts by occupational therapy technician

3. An occupational therapy technician –
   (a) shall perform professional acts only under the supervision of an occupational therapist or an appropriately qualified registered practitioner: Provided that in the case of supervision under an appropriately qualified registered practitioner, such supervision shall not extend for a period of more than six months;
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in his or her discipline of study;
   (c) shall not accept an appointment without the prior written approval of the board: Provided that this prohibition shall not apply in the case of a full-time or part-time appointment in the public service; and
   (d) shall not conduct a private practice.
Performance of professional acts by student in occupational therapy

4. A student in occupational therapy –
   (a) shall perform professional acts only under the supervision of an occupational therapist or appropriately qualified registered practitioner: Provided that in the case of supervision under an appropriately qualified registered practitioner, such supervision shall not extend for a period of more than six months; and
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in occupational therapy.

Performance of professional acts by arts therapist

5. An arts therapist –
   (a) shall perform professional acts only in the specific registered category of arts therapy;
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in which he or she has gained experience, regard being had to both the extent and the limits of his or her professional expertise;
   (c) shall not fail to communicate and cooperate, where appropriate, with medical practitioners and other registered health practitioners in the diagnosis and treatment of a patient; and
   (d) shall not employ an occupational therapy assistant or an occupational therapy technician without the prior written approval of the board: Provided that this prohibition shall not apply in the case of a full-time or part-time appointment in the public service.

Performance of professional acts by student in arts therapy

6. A student in arts therapy –
   (a) shall perform professional acts only under the supervision of an arts therapist; and
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in the specific category of arts therapy.
Performance of professional acts by medical orthotist or prosthetist

7. **A medical orthotist or prosthetist** –
   (a) shall perform professional acts only in the field of medical orthotics or prosthetics;
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in which he or she has gained experience, regard being had to both the extent and the limits of his or her professional expertise;
   (c) shall not fail to communicate and cooperate, where appropriate, with medical practitioners and other registered health practitioners in the diagnosis and treatment of a patient; and
   (d) shall not give any treatment in connection with or advice or assistance preparatory to or for the purpose of the manufacture, repair, supply, fitting or fixing of artificial limbs or other similar assistive devices, whether for gain or not, where such devices are supplied or are to be supplied to the patient by a person who is not a medical orthotist or prosthetist.

Performance of professional acts by orthopaedic footwear technician

8. **An orthopaedic footwear technician** –
   (a) shall perform professional acts only under the supervision of a medical orthotist or prosthetist;
   (b) shall not conduct a private practice; and
   (c) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in his or her discipline of study.

Performance of professional acts by assistant medical orthotist or prosthetist and leatherworker
9. **An assistant medical orthotist or prosthetist and leatherworker** –
   (a) shall perform professional acts only under the supervision of a medical orthotist or prosthetist;
   (b) shall not conduct a private practice; and
   (c) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in his or her discipline of study

**Performance of professional acts by student in medical orthotics or prosthetics**

10. A student in medical orthotics or prosthetics –
   (a) shall perform professional acts only under the supervision of a medical orthotist or prosthetist; and
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in medical orthotics or prosthetics.
ANNEXURE 8

PROFESSIONAL BOARD FOR OPTOMETRY AND DISPENSING OPTICIANS

RULES OF CONDUCT PERTAINING SPECIFICALLY TO THE PROFESSION OF
OPTOMETRY AND DISPENSING OPTICIANS

An optometrist, a student in optometry, dispensing optician and dispensing optician student shall adhere to the following rules of conduct in addition to the rules of conduct referred to in rules 2 to 27. Failure by such optometrist, student in optometry, dispensing optician and dispensing optician student to comply with the rules of conduct listed herein shall constitute an act or omission in respect of which the board may take disciplinary steps in terms of Chapter IV of the Act.

Performance of professional acts by optometrist

1. (1) An optometrist –
   (a) shall provide only optometric services, including the prescription of spectacle lenses, contact lenses and visual aids or appliances. In cases where pathology of the visual system is detected or suspected, or where the patient cannot attain normal single or binocular vision with the aid of corrective lenses or other methods of correction, the optometrist should work in close collaboration with a medical practitioner who has received adequate education and training as approved by the board for this purpose; and
   (b) shall, only in the treatment of a patient, use a scheduled substance subject to the Medicines and Related Substances Act, 1965 (Act No. 101 of 1965).

   (2) Notwithstanding the requirements relating to the naming of practices referred to in rule 5, an optometrist may make use of a practice name: Provided that -
   (a) he or she obtains prior approval for the use of the practice name from the board;
   (b) such name or the use thereof is not indecent, misleading or deceptive and is in keeping with the professional image or dignity of the profession and that such practice name does not claim prominence for a registered optometrist; and
(c) the names of the responsible practitioners are displayed together with or alongside the practice name.

Performance of professional acts by student in optometry

2. **A student in optometry** –
   (a) shall perform professional acts only under the supervision of an optometrist or medical practitioner; and
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in optometry.

Performance of professional acts by dispensing optician

3. A dispensing optician shall not dispense in any way spectacles to any person except on a prescription written and signed by a medical practitioner or an optometrist: Provided that this rule shall not apply to the repair or replacement of such spectacles or lenses or frames for such spectacles.

Performance of professional acts by dispensing optician student

4. **A dispensing optician student** –
   (a) shall perform professional acts only under the supervision of a dispensing optician, optometrist or medical practitioner; and
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her training in optical dispensing.
ANNEXURE 9

PROFESSIONAL BOARD FOR PHYSIOTHERAPY, PODIATRY AND BIOKINETICS

RULES OF CONDUCT PERTAINING SPECIFICALLY TO THE PROFESSION OF PHYSIOTHERAPY, PODIATRY AND BIOKINETICS

A physiotherapist, physiotherapy assistant, student in physiotherapy, podiatrist, student in podiatry, biokineticist and student in biokinetics shall adhere to the following rules of conduct in addition to the rules of conduct referred to in rules 2 to 27. Failure by such physiotherapist, physiotherapy assistant, student in physiotherapy, podiatrist, student in podiatry, biokineticist and student in biokinetics to comply with the rules of conduct listed herein shall constitute an act or omission in respect of which the board may take disciplinary steps in terms of Chapter IV of the Act.

Performance of professional acts by physiotherapist

1. **A physiotherapist** –
   (a) shall confine himself or herself to clinical diagnoses and practising in the field of physiotherapy in which he or she was educated and trained and in which he or she has gained experience, regard being had to both the extent and the limits of his or her professional expertise;
   (b) shall not fail to communicate and cooperate, where appropriate with medical practitioners in the diagnosis and treatment of a patient;
   (c) shall refer a patient to a practitioner when the patient's problems and needs are beyond the scope of physiotherapy; and
   (d) shall not employ a physiotherapy assistant without the prior written approval of the council: Provided that this prohibition shall not apply in the case of full-time or part-time employment in the public service.

Performance of professional acts by physiotherapy assistant

2. A physiotherapy assistant shall not accept an appointment in private practice without the prior written approval of the council: Provided that this prohibition shall
not apply in the case of a full-time or part-time appointment in the public service.

**Performance of professional acts by physiotherapy technician**

3. A physiotherapy technician shall not accept an appointment in private practice without the prior written approval of the council: Provided that this prohibition shall not apply in the case of a full-time or part-time appointment in the public service.

**Performance of professional acts by student in physiotherapy**

4. **A student in physiotherapy** –
   (a) shall perform professional acts pertaining to physiotherapy only under the supervision of a physiotherapist or a medical practitioner; and
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in physiotherapy.

**Performance of professional acts by podiatrist**

5. **A podiatrist** –
   (a) shall investigate and treat only disorders which fall within the scope of the profession of podiatry;
   (b) shall, in the treatment of any person, use only medicines or surgery which have been specifically approved for that purpose by the board;
   (c) shall administer local anaesthetic only for the purpose of relieving pain, the specific medicine for which shall have been approved by the board and the regulatory authority on medicines; and
   (d) shall perform professional acts requiring general anaesthetic only in close collaboration with a medical practitioner.
Performance of professional acts by student in podiatry

6. A student in podiatry –
   (a) shall perform professional acts pertaining to podiatry only under the supervision of a podiatrist or a medical practitioner; and
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in podiatry.

Performance of professional acts by biokineticist

7. A biokineticist –
   (a) shall confine himself or herself to functional and clinical diagnoses, and practising in the field of biokinetics in which he or she was educated and trained and in which he or she has gained experience, regard being had to both the extent and the limits of his or her professional expertise;
   (b) shall not fail to communicate and cooperate, where appropriate, with medical practitioners and other practitioners in the diagnosis and treatment of a patient; and
   (c) shall refer a patient to a practitioner when the patient's problems and needs are beyond the scope of biokinetics.

Performance of professional acts by student in biokinetics

8. A student in biokinetics –
   (a) shall perform professional acts pertaining to biokinetics only under the supervision of a biokineticist or a medical practitioner; and
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in biokinetics.
ANNEXURE 10

PROFESSIONAL BOARD FOR RADIOGRAPHY AND CLINICAL TECHNOLOGY

RULES OF CONDUCT PERTAINING SPECIFICALLY TO THE PROFESSION OF RADIOGRAPHY AND CLINICAL TECHNOLOGY

A radiographer, an assistant radiographer, a radiation laboratory technologist, student in radiography, student radiation laboratory technologist, graduate clinical technologist or clinical technologist (registered prior to 1 April 2002), clinical technologist (registered after 31 March 2002), an assistant clinical technologist, electroencephalography technician, a student in clinical technology and a student electro-encephalography technician shall adhere to the following rules of conduct in addition to the rules of conduct referred to in rules 2 to 27. Failure by such radiographer, assistant radiographer, radiation laboratory technologist, student in radiography, student radiation laboratory technologist, graduate clinical technologist or clinical technologist (registered prior to 1 April 2002), clinical technologist (registered after 31 March 2002), assistant clinical technologist, electroencephalography technician, student in clinical technology and student electro-encephalography technician to comply with the rules of conduct listed herein shall constitute an act or omission in respect of which the board may take disciplinary steps in terms of Chapter IV of the Act.

Performance of professional acts by radiographer

1. A radiographer –
   (a) shall perform professional acts only at the written request and under the supervision of a practitioner approved by the board for such purpose: Provided that this prohibition shall not apply in respect of –
      (i) acts pertaining to the profession of radiography determined by the board for such purpose;
      (ii) a radiographer who complies with the conditions set by the board in this regard and who in the opinion of such board is competent to perform professional acts without supervision at the written request of such practitioner; and
(iii) a request from such practitioner which in the opinion of the radiographer was based on good and sufficient grounds: Provided that such request was in writing and signed by the person making the request;

(b) shall consult in regard to any work performed by him or her in his or her profession only with a practitioner approved by the board at whose instance such work was undertaken;

(c) shall not interpret radiographical investigations, report thereon or furnish information in regard to any work performed by him or her in his or her profession to any person other than a practitioner approved by the board at whose request such work was undertaken; and

(d) shall not in his or her practice exceed the limits of the category or categories in which he or she is registered.

Performance of professional acts by assistant radiographer

2. An assistant radiographer –

(a) shall perform professional acts in radiography only under the supervision of a registered practitioner approved by the board or radiographer;

(b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in radiography;

(c) shall not conduct a private practice; and

(d) shall not perform any diagnostic X-ray examination in any place other than a hospital or facility in the public service or operated by the South African Chamber of Mines or such other facility as may be approved by the board for a specific purpose.
Performance of professional acts by radiation laboratory technologist

3. **A radiation laboratory technologist** -
   (a) shall perform professional acts in radiation laboratory technology only under the supervision of a registered practitioner approved by the board or a radiographer;
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in radiation laboratory technology; and
   (c) shall not conduct a private practice.

Performance of professional acts by student in radiography

4. **A student in radiography** –
   (a) shall perform professional acts in radiography only under the supervision of a registered practitioner approved by the board or a radiographer; and
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in radiography.

Performance of professional acts by student radiation laboratory technologist

5. **A student radiation laboratory technologist** –
   (a) shall perform professional acts in radiation laboratory technology only under the supervision of a registered practitioner approved by the board or a radiographer; and
   (b) shall limit the acts referred to in paragraph (a) to acts directly related to his or her education and training in radiation laboratory technology.

Performance of professional acts by graduate clinical technologist or clinical technologist registered prior to 1 April 2002

6. **A graduate clinical technologist or clinical technologist registered prior to 1 April 2002** –
   (a) shall confine himself or herself to the performance of professional acts in the field of clinical technology in which he or she was educated and trained and in
which he or she has gained experience, regard being had to both the extent and the limits of his or her professional expertise;

(b) shall not fail to communicate and cooperate, where appropriate, with registered practitioners approved by the board in the treatment of a patient; and

(c) shall perform professional acts only in collaboration with a registered practitioner approved by the board or a specialist.

Performance of professional acts by clinical technologist qualified after 31 March 2002

7. A clinical technologist who qualified as such after 31 March 2002 –

(a) shall perform professional acts only under the supervision of or in collaboration with a registered practitioner approved by the board or a specialist;

(b) shall confine himself or herself to the performance of professional acts in the field of clinical technology in which he or she was educated and trained and in which he or she has gained experience, regard being had to both the extent and the limits of his or her professional expertise;

(c) shall not conduct a private practice; and

(d) shall not fail to communicate and cooperate, where appropriate, with registered practitioners approved by the board in the treatment of a patient.

Performance of professional acts by assistant clinical technologist

8. An assistant clinical technologist -

(a) shall perform professional acts only in collaboration with clinical technologists, specialists or practitioners approved by the board for such purpose;

(b) shall confine himself or herself to the performance of professional acts in the field of clinical technology in which he or she was educated and trained and in which he or she has gained experience, regard being had to both the extent and the limits of his or her professional expertise;

(c) shall not conduct a private practice; and
(d) shall not fail to communicate and cooperate, where appropriate, with registered practitioners approved by the board in the treatment of a patient.

Performance of professional acts by electroencephalography technician

9. An electroencephalography technician –
(a) shall perform professional acts only under the supervision of clinical technologists, specialists or practitioners approved by the board for such purpose;
(b) shall limit the acts referred to in paragraph (a) to acts related to his or her education and training in electroencephalography;
(c) shall not conduct a private practice; and
(d) shall not fail to communicate and cooperate, where appropriate, with registered practitioners approved by the board in the treatment of a patient.

Performance of professional acts by student in clinical technology

10. A student in clinical technology –
(a) shall perform professional acts only under the supervision of clinical technologists, specialists or practitioners approved by the board for such purpose; and
(b) shall limit the acts referred to in paragraph (a) to acts related to his or her education and training in clinical technology.

Performance of professional acts by student electroencephalography technician

11. A student electroencephalography technician –
(a) shall perform professional acts only under the supervision of clinical technologists, specialists or practitioners approved by the board for such purpose; and
(b) shall limit the acts referred to in paragraph (a) to acts related to his or her education and training in electroencephalography technology.
ANNEXURE 11

PROFESSIONAL BOARD FOR SPEECH, LANGUAGE AND HEARING PROFESSIONS

RULES OF CONDUCT PERTAINING SPECIFICALLY TO THE SPEECH, LANGUAGE AND HEARING PROFESSIONS

A speech therapist, an audiologist, an audiometrician, a hearing aid acoustician, speech and hearing correctionist, speech and hearing community worker, speech and hearing assistant, student in speech profession, student in language profession and student in hearing profession shall adhere to the following rules of conduct in addition to the rules of conduct referred to in rules 2 to 27. Failure by such speech therapist, audiologist, audiometrician, hearing aid acoustician, speech and hearing correctionist, speech and hearing community worker, speech and hearing assistant, student in speech profession, student in language profession and student in hearing profession to comply with the rules of conduct listed herein shall constitute an act or omission in respect of which the board may take disciplinary steps in terms of Chapter IV of the Act.

Performance of professional acts by speech therapist or audiologist

1. A speech therapist or an audiologist -
   (a) shall confine himself or herself to clinical diagnoses, and practising in the field of speech-language therapy or audiology in which he or she was educated and trained and in which he or she has gained experience, with due regard to both the extent and the limits of his or her professional expertise;
   (b) shall not fail to communicate and cooperate, where appropriate, with medical practitioners and other practitioners in the diagnosis and treatment of a patient; and
   (c) shall refer a patient to a practitioner or educational professional when the patient’s problems and needs are beyond the scope of speech-language therapy or audiology.
Performance of professional acts by audiometrician

2. An audiometrician -
   (a) shall practice only in the appropriate fields in which he or she has been trained and in which he or she has gained experience, with due regard to both the extent and the limits of his or her professional expertise; and
   (b) shall perform any work in audiometry only -
       (i) under the supervision of an audiologist; or
       (ii) with the prior written approval of the board, under the direction and supervision of a medical practitioner or other practitioners approved by the board.

Performance of professional acts by hearing aid acoustician

3. A hearing aid acoustician -
   (a) shall confine himself or herself to practising in the appropriate fields in which he or she has been trained and in which he or she has gained experience, with due regard to both the extent and the limits of his or her professional expertise;
   (b) shall refer a patient to a practitioner when the patient’s problem is beyond the scope of the practice of the hearing aid acoustician;
   (c) shall not diagnose a person's hearing ability;
   (d) shall not select and fit a hearing aid to children under the age of 10 years, or to persons with multiple handicaps; and
   (e) shall not affix his or her nameplate at the entrance of a pharmacy, unless he or she is also registered as a pharmacist.

Performance of professional acts by speech and hearing correctionist

4. A speech and hearing correctionist –
   (a) shall confine himself or herself to practising in the appropriate fields in which he or she has been trained and in which he or she has gained experience,
with due regard to both the extent and the limits of his or her professional expertise;

(b) shall not perform any speech or language therapy or audiology, except in a primary school, nursery school or school for the deaf or hearing impaired controlled by the government or the provincial Department of Education concerned or in such other institution as may be approved for this purpose by the board;

(c) shall not perform any speech or language therapy or audiology, in assessment and treatment clinics associated with education departments or other institutions, except under the direct supervision of a speech therapist or audiologist; and

(d) shall not conduct a private practice.

Performance of professional acts by speech and hearing community worker

5. A speech and hearing community worker –

(a) shall confine himself or herself to the appropriate fields in which he or she has been trained and in which he or she has gained experience, with due regard to both the extent and the limits of his or her professional expertise;

(b) shall not perform any speech or language and hearing community work, except when employed by an institution or establishment recognised by the board;

(c) shall not perform any speech or language and hearing community work in an institution or establishment where a speech therapist or audiologist is employed except under the direction of such speech therapist and/or audiologist;

(d) shall not perform any speech or language and hearing community work, except in consultation with a general medical practitioner or, in cases involving oral conditions, in consultation with a dentist;

(e) shall not perform any speech or language and hearing community work where supervision by a speech therapist and/or an audiologist is possible, or regard being had to geographical proximity where such supervision is not possible, in consultation with a speech therapist or an audiologist; and

(f) shall not conduct a private practice.

Performance of professional acts by speech and hearing assistant
6. A speech and hearing assistant –
   (a) shall confine himself or herself to practising in the appropriate fields in which he or she has been trained and in which he or she has gained experience, with due regard to both the extent and the limits of his or her professional expertise;
   (b) shall perform professional acts only-
      (i) under the direction and supervision or in the employment of a speech therapist or an audiologist in the health or education sectors; and
      (ii) with the approval of the board under the direction and supervision of a general medical practitioner or other practitioner registered with the board;
   (c) shall not accept employment without the prior written approval of the board: Provided that this prohibition shall not apply in the case of a full-time or part-time appointment in the health or education sectors in the public service; and
   (d) shall not conduct a private practice.

Performance of professional acts by student in the speech, language and hearing professions

7. A student in the speech, language and hearing professions –
   (a) shall perform professional acts only under supervision of a practitioner; and
   (b) shall limit the acts referred to in paragraph (a) to acts related to his or her education and training in the profession concerned.
Ethical guidelines for good practice in the health care professions

The following Booklets are separately available:

**Booklet 1:** General ethical guidelines for health care professions

**Booklet 2:** Ethical and professional rules of the health professions council of South Africa as promulgated in government gazette R717/2006

**Booklet 3:** National Patients’ Rights Charter

**Booklet 4:** Professional self-development

**Booklet 5:** Guidelines for making professional services known

**Booklet 6:** Guidelines on over servicing, perverse incentives and related matters

**Booklet 7:** General ethical guidelines for health researchers

**Booklet 8:** Ethical Guidelines for Biotechnology Research in South Africa

**Booklet 9:** Research, development and the use of the chemical, biological and nuclear capabilities of the State

**Booklet 10:** Seeking patients’ informed consent: The ethical considerations

**Booklet 11:** Confidentiality: Protecting and providing information

**Booklet 12:** Guidelines for the management of patients with HIV infection or AIDS

**Booklet 13:** Guidelines withholding and withdrawing treatment

**Booklet 14:** Guidelines on Reproductive Health management

**Booklet 15:** Guideline on Patient Records

**Booklet 16:** Canvassing of patients abroad

**Booklet 17:** Guidelines for the management of health care waste