



Federation of State Physician Health Program Statement on Sexual Misconduct in the Medical Profession

Professional sexual misconduct with patients is always wrong, violates ethical standards of the medical profession, and constitutes patient harm. It is the physician's responsibility to prevent such occurrences, even when the patient initiates intimate overtures. Sexual conduct involving a physician and a patient can never be consensual, based on the disparity in power and the position of trust patients must have to seek medical care. The American Medical Association, the American Osteopathic Association, the American Psychiatric Association and other professional medical entities uniformly condemn sexual contact between physicians and their patients recognizing the potential harm to patients. State medical boards are a resource for the public regarding sexual misconduct and the procedures for reporting such misconduct. Knowledge of sexual misconduct should always be reported to the state medical board. Other elements of the civil and criminal justice system may also get involved.

Physicians have both an ethical and often statutory responsibility to report knowledge of professional sexual misconduct to their state's medical board. State medical boards have the authority to investigate allegations of sexual misconduct and issue formal discipline, including licensure suspension and revocation.

A core function of PHPs is to provide a therapeutic alternative to discipline for physicians with health conditions that may adversely impact practice performance. However, PHPs cannot function as an alternative to discipline in these situations. The FSPHP member Physician Health Programs (PHPs) are available to assist professionals with potentially impairing conditions depending on the circumstances, but the jurisdiction, discipline, and legal consequences of professional sexual misconduct are ultimately determined by the legal system and respective state medical boards.

In instances involving physician illness concurrent to the sexual misconduct, such as substance use and mental health disorders, PHPs may be asked to coordinate comprehensive, multidisciplinary assessments or forensic evaluations to identify any treatable conditions which may have contributed to poor judgment, or to assist with determination of fitness for duty with appropriate restrictions, if necessary.

PHPs that elect to assist with cases involving sexual misconduct should have the experience and expertise for this scope of activities in this area. Assisting state medical boards in the assessment and monitoring of professional sexual misconduct requires specialized experience and expertise. Specific to sexual misconduct, PHP involvement is not as an alternative to discipline but to support and assist a state medical board's responsibility to the public.

FSPHP supports the Federation of State Medical Board's policy "Addressing Sexual Boundaries: Guidelines for State Medical Boards" on this topic which calls for absolute intolerance of sexual misconduct in any form and prompt and decisive action against any licensee found to have participated in such misconduct.

Education is critical and an effective way to prevent sexual misconduct. The FSPHP and FSMB strongly support that medical schools, residency programs, and medical societies at state and national levels repeatedly emphasize the importance of professional boundaries and provide education through classes, grand round presentations and mentoring about the importance of maintaining objectivity in the doctor-patient relationship, which precludes even romantic involvement.

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Prepared by the FSPHP Public Policy Committee – Approved by the FSPHP Board of Directors

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Updated August 2024

Approved by FSPHP Board of Directors: 11/13/24