

6 *The Ethics Committee and the Code of Professional Conduct*

- 6.1 The Ethics Committee (EC) is established by the Council and its functions include:-
- (a) to study and review any case relating to medical ethics or professional conduct, either on its own motion or at the request in writing of not less than 20 registered medical practitioners;
 - (b) to advise and make recommendations to the Council on matters about medical ethics and professional conduct generally.
- 6.2 The membership of the EC (as at 31 December 2009) was as follows:-
- Dr TSE Hung-hing (Chairman)
 - Dr CHAN Chok-wan
 - Dr CHAN Yee-shing
 - Dr CHENG Chi-man (from 8 February 2009 onwards)
 - Ms CHEUNG Jasminia Kristine*
 - Dr David FANG, SBS, JP
 - Dr LAI Cham-fai
 - Professor LEUNG Ping-chung, SBS, OBE, JP
 - Dr LI Kwok-tung, Donald, JP
 - Mrs LING LEE Ching-man, Eleanor, SBS, OBE, JP**
 - Dr SHIH Tai-cho, Louis, JP
 - Professor TAO LAI Po-wah, Julia***
- * *lay person who is re-appointed for a term of three years with effect from 1 March 2009.*
- ** *lay person who is re-appointed for a term of three years with effect from 25 March 2008.*
- *** *lay person who is re-appointed for a term of three years with effect from 12 February 2007.*
- 6.3 Since January 2005, the EC has been updating the Professional Code and Conduct issued in November 2000 to incorporate previously approved changes, to improve clarity and remove ambiguities, and to re-arrange the provisions in a more systematic manner. With the endorsement of the Council, the Professional Code and Conduct was renamed as the “Code of Professional Conduct” (the Code) upon promulgation in January 2009.



- 6.4 The EC continued to review section 2 of the Code about “Consent to medical treatment” in 2009. During discussion, the question of consent to treatment for child patients was raised. A Task Force was formed to look into the matter and some guiding principles on consent to treatment for child patients were proposed for incorporation into the Code. The revision of section 2 would continue in 2010.
- 6.5 The EC noted that a hospital performed two simultaneous liver transplantations in January 2009 in which liver from each donor was transplanted to a family member of the other donor. The reason was that each donor’s blood group was compatible with the other donor’s family member but not her own family member. Both donors were willing donors whose original intention was to donate to their own family members, and the cross-donation was suggested and arranged by the hospital. It was understood that the hospital was planning a cross-family matching system in order to save more lives. In anticipation of an increase in similar cases in future, the matter was discussed by the EC to see whether there were any ethical issues in the matching system.
- 6.6 The EC invited the hospital involved and the Human Organ Transplant Board to provide relevant information on the cross-donation matching system to facilitate the EC’s discussion. Having taken into account the information provided by the two parties, the EC was of the view that there was no ethical issue arisen from the mechanism of cross-family liver matching and transplant arrangement. The views of the EC were endorsed by the Council.
- 6.7 The EC had considered an application from the New Territories East Cluster of the Hospital Authority for permission to publish doctors’ service information in the posters of a One-Citizen-One-Doctor Campaign. The EC considered that dissemination of doctors’ information in posters was not permitted under section 5.2.3 of the Code and an exemption from the Code would be required for the Campaign. Given that the Campaign would not involve commercial promotion of individual doctors and was in line with the Government’s initiative to promote the family doctors concept, the EC recommended and the Council agreed that an exemption from section 5.2.3 of the Code be granted for the Campaign with some conditions.
- 6.8 Subsequent to a disciplinary inquiry concerning charging a patient excessive fees for laboratory tests, the EC discussed the principles on “excessive fees” and “rebates”. The EC was of the view that doctors are not allowed to receive rebates from laboratories for referring patients. The principles governing “excessive fees” and “rebates” were adequately and properly set out in sections 12.3 and 14.1 of the Code respectively. The EC would continue to consider the matter in 2010.