Law no. 240 dated October 22, 2012
Amending Law No. 288 of February 22, 1994

Code of Medical Ethics

Free translation from Arabic

CHAPTER I
GENERAL PROVISIONS

Article 1:
All Physicians registered at [one of] the two Lebanese Orders of Physicians shall be subject to the provisions of this Law.

Article 2:
A Physician’s mission is to maintain the physical and mental health of human beings, in terms of precautions to be taken and treatments to be undergone, to rehabilitate and relieve the pain of such human beings, as well as to improve the general standards of health.

Article 3:
1- A Physician shall, relying on his/her professional conscience, provide medical care to any patient, either in times of war or peace, no matter what the financial or social standing of this patient is and regardless of such patient’s race, nationality, belief, political views, feelings or reputation.

2- The patient’s will must be respected in every medical intervention. In the event it is impossible to obtain a patient’s consent, the Physician must be granted the consent of the patient’s family starting with the first degree, or the consent of the person of trust designated in writing by the patient, or the consent of the patient’s legal representative in case the patient is a minor or mentally disabled, except in cases of emergency or impossibility.

3- A Physician, whether in times of peace or war, and even under threat, shall not use his/her professional qualifications in order to assist to, participate in, or accept, any inhuman
treatment. In the event a Physician is asked to provide medical care to or examine an incapacitated person and it appeared to the Physician that such person was tortured, the Physician must forthwith inform the judicial authorities and the Order of Physicians.

**Article 4:**
1- A Physician must keep acquiring continuing medical education in order to develop his/her medical knowledge and technical skills, in order to stay up-to-date with the modern scientific data according to the Continuing Medical Education program (CME), adopted by the Order of Physicians.
In the event a Physician fails to fulfill such obligation, the Order of Physicians must take disciplinary measures against him/her and report such failure to the public insurance institutions.

2- A Physician must equip his/her clinic, appropriately and with the technical installations which are sufficient for providing his/her medical services.
The sanitary and technical conditions for the equipment of medical clinics are determined by the Ministry of Public Health after consulting with the two Orders of Physicians in Lebanon.

3- A Physician must be attentive not to exercise his/her profession under circumstances and conditions that would damage his/her dignity or the quality of the treatment he/she prescribes.

**Article 5:**
1- A Physician, regardless of his/her scope of intervention or specialty, if he/she found himself/herself in front of a seriously sick or injured person, or was notified about the existence of a seriously sick or injured person, must help this sick or injured person or make sure he/she obtained the necessary first aids, except in a situation of force majeure.

2- A Physician must not fail to respond to an emergency call unless he/she made sure that the patient’s life is not in imminent danger or if the physician is retained due to an unpredicted cause that is as important as such patient’s case. The Physician must in the two cases respond, without delay, that he/she will not be available and state the reason thereof.
Article 6:
In the event of epidemics or disasters, except in the event of a force majeure, a Physician must:
a- not abandon the patients for whom he/she is providing care, except after ensuring the continuing treatment to them, by the best possible means.

b- respond to the call of the Order of Physicians and health officials, for voluntary participation in public vaccination campaigns and aid of those affected by disasters.

c- comply with the laws and regulations related to the infectious diseases and environmental hazards, report them to the Ministry of Public Health and take the necessary precautionary measures in accordance with the instructions of the Ministry of Public Health.

Professional Secrecy

Article 7:
The professional secrecy which binds Physicians is a matter of Public Policy. A Physician must be bound by this secrecy, under all circumstances in which he/she is called to provide care to a patient or to provide a consultation, subject to the exceptions prescribed by public safety, by laws, regulations and agreements.

This secrecy includes the information disclosed by the patient and what is seen, known, discovered, or found out by a Physician in the course of his/her professional practice or as a result of the examinations he/she carried out. Therefore:

1- It is not enough for a Physician to have the patient’s exemption from such professional secrecy in order for said Physician to be freed from such obligation, because a Physician remains bound by safeguarding the patient’s interest and fulfilling the requirements of Public Policy.
2- A physician must personally deliver to the patient or patient’s representative, in writing, and upon request, a report about said patient’s health situation. A Physician has the right not to include in this report, information which disclosure is, according to the Physician, not found to be in the interest of the patient.

3- If the patient asks for a report for the purpose of obtaining social benefits, the Physician may refer such report directly to the Physician of the institution which provides such benefits, this being coupled with the written consent of the patient or one of his/her relatives, if necessary, subject to the provisions of the above-mentioned clause 2.

4- A Physician, when summoned by the judicial police, for providing a witness statement including facts falling within the duty of professional secrecy, may keep secret some of the information he/she knows, and must disclose the entire information he/she knows before the criminal judiciary, when requested to do so, after taking the oath.

5- A physician shall not report a crime by a patient who confessed to him/her having committed said crime. In the event the Physician discovered a crime during a patient’s examination, he/she must report this crime to the public prosecution, also when he/she is convinced that reporting will prevent the concerned person from committing other crimes.

6- A Physician must give his/her witness statement before the courts when giving said statement would prevent the condemnation of an innocent person.

7- A Physician is exempted from the duty of professional secrecy when he/she is summoned by the Court in his/her capacity as expert for the examination of a patient or for reviewing such patient’s file, within the limits of the mission he/she is entrusted with.

8- A Physician must issue and sign a birth certificate within three working days from every birth he/she operates.
9- A Physician must notify the Ministry of Public Health of venereal diseases that must be officially reported, to prevent the spread of the disease in society, and as he/she must indicate in the report the patient’s acceptance or refusal of receiving the necessary medical care.

10- A Physician must, in case of his/her patient’s death, issue a death certificate, which includes the patient’s name, age, date and cause of death. If the death took place outside a hospital, the Physician must report this to the competent authorities. If a Physician could not identify the cause of death, he/she must request from the parents that an autopsy examination be performed and must write this on the death certificate.

11- A Physician, in case of his/her patient’s death because of a disease that must be officially reported, must submit to the appropriate authorities a death certificate which includes the patient’s name, age and date of death.

12- If the family of a patient suffering from serious mental or neurological disorders requests the confinement of said patient by the appropriate authorities for protective purposes, the Physician who examines him/her must issue a report determining the disorders symptoms, together with a clarification indicating that the patient is a danger to himself/herself or to others.

13- If, in the course of his/her profession practice, a Physician found out cases of rape and offenses against the honor, he/she must report such cases to the Public Prosecutor, provided the victim gives a written consent thereto.

14- If a Physician notices, in the course of his/her profession practice, an incapacitated or minor person’s abusive confinement, mistreatment, deprivation, rape or sexual assault, he/she must report it to the appropriate authorities.

15- If a Physician notices in the course of his/her profession practice, a minor’s abusive confinement, mistreatment or deprivation, he/she must report it to the appropriate authorities.
16- If a Physician is being sued in the context of a liability lawsuit filed by a patient or a patient’s family, said Physician has the right to reveal the facts necessary for evidencing the truth, in order to defend himself/herself.

17- A Physician accused before the Order Disciplinary Board may not allege professional secrecy.

18- A Physician shall ensure the fulfillment of the professional secrecy obligation by his/her assistants.

The Physicians’ Fees

Article 8:
1- A patient’s freedom to choose his/her Physician and to ask for consultation from other physicians must be respected.

2- The Physician’s freedom to provide his/her patients with medical advice may not be limited. A physician shall be totally free to choose the suitable medical care according to the best applicable medical practices.

3- The Physician’s fees are determined in direct agreement with the patient unless there are uniform fee schedules, determined by the Ministry of Public Health with regards to the insured patients of public insurance institutions, and in agreement with these institutions and the two Orders of Physicians. The Physician must provide the patient with the necessary clarifications about the billing of his/her fees and he/she may not impose the methods of payment or charge an additional fixed fee in return for confirming the patient’s recovery.

4- A patient, or the patient’s agent or representative to the contract with the Physician must settle the fees that are due directly to such Physician.
5- Hospitals must issue the Physician’s fee bill separately from the hospitalisation bill, and settle to the Physician his/her due total fees which are paid to the hospital through the hospital cashier’s desk.

6- A patient or the patient’s agent or representative to the contract with the Physician must pay the fees that are due directly to such Physician.

7- The public and private insurance organizations must pay the fees directly to the Physicians.

**Article 9:**
1- When determining the Physician’s fees, the patient’s financial situation and the specific conditions of each case must be taken into account, with emphasis on the fact that the Physician’s mission prescribes that he/she deals with the patient in a human manner.

2- If several physicians cooperated to carry out the diagnosis or give treatment, and their cooperation was scientifically warranted, and they agreed to collective fees, then the fees of each of them must be separately specified.

3- The Physician is bound by the rate applied by the institution under the contracts made with private insurance institutions, upon written approval of the Medical Committee which must observe the directives of the two Orders of Physicians in this regard.

**Article 10:**
A Physician may not, for the purpose of competition, reduce his/her fees to less than the minimum rate determined by the Order of Physicians in agreement with the Ministry of Public Health.

A Physician may provide free care to the patient if he/she deems so appropriate. The fees must not be paid in advance. Moreover, agreements on a fixed fee with a guarantee of recovery are prohibited.

The provisions of general laws and humanity principles must be observed in each case.
Article 11:
- Subject to the rules of cooperation between Physicians who are of the same specialty, it is strictly forbidden to have the fees shared between the treating Physician, the consulting physician, the surgeon or the specialist, during the consultation or the surgical operation.
- When a comprehensive statement of fees is given to the patient, it must include the fees of each single Physician who participated in the treatment.

Article 12:
The statement of fees related to the surgeries into which more than one Physician participated, including the anesthetist, must detail the share of each of Physician.

Article 13:
If a Physician attended a surgical operation at the request of the patient or those responsible for him/her, he/she has the right to request a fee for himself.

Professional Independence

Article 14:
A Physician may not waive his/her right to professional freedom when providing treatment to the patient and when providing the necessary care for his/her recovery and for reducing his/her pain.
A Physician must in the course of his/her medical practice refuse any pressure that would affect his/her decisions.

Article 15:
A Physician may not engage in any other business, in addition to his/her profession, that is contrary to such profession’s integrity and ethics, or diminishes its standing or that is in conflict with the Physician’s professional independence.
Article 16:
Medical practice may not be exploited for a commercial purpose.

1- Save for participation to medical conferences supervised by the Order’s Scientific Committee, a Physician shall not participate in any educational professional activities in any written press or audiovisual media, without at least a three-day prior notice to be registered in the Registry of the Order of Physicians. In this case, the Physician must restrict himself/herself to the medical data that is scientifically documented. He/she must also be cautious and attentive to the influence of his/her statements on the public opinion.

2- A Physician may participate in public scientific debates, upon prior notice thereof to the Board of the Order of Physicians.

3- A Physician may not have recourse to direct and indirect advertising.

4- A Physician may only announce, for a maximum one week-period, the start of his/her medical practice, the relocation of his/her clinic, the date of his/her travel departure and the date of return.

5- A Physician shall not make any direct or indirect publicity, in his/her own interest, or in the interest of the institution he/she belongs to, or where he/she works, or in which he/she owns a share.

Article 17:
A Physician may indicate on his/her personal papers and on his/her clinic signage only the following:
1- the information that makes easier for the patients to contact him/her.

2- the specialty recognized by the Ministry of Public Health and the Order of Physicians.
3- the titles conferred upon the Physician by the State and academic institutions with the determination of their source and the duties he/she is entrusted with.

This information must be mentioned in such manner that is devoid of any publicity.

Medical Liability

Article 18:
Every Physician is liable for his/her professional medical actions.

Article 19:
Subject to the bylaws of the institution he/she is contracting with and the provisions of the contract:
- A Physician may not be replaced in providing his/her medical activities and for a limited period of time, except by his/her colleague registered at the Order of Physicians.

- An alternate Physician acts on his/her own responsibility and in the name of the main Physician. The alternate Physician shall give treatment prescriptions in his/her name and under his/her own signature.

- The qualified specialist Physician may not replace his/her colleague unless this latter is of the same specialty.

Article 20:
A Physician shall not:
1- provide any medical service that would generate to his/her patient an illegal financial benefit or a benefit to which there is no entitlement.

2- pay any allowances to whoever and in any manner whatsoever in order to solicit clients, keep them under treatment in the hospital or obtain any personal benefit.
3- accept allowances in consideration for laboratory tests and radiographs, or in consideration for the prescription of specific medicines or the use of specific medical equipment.

4- accept allowances from hospitals or health facilities in consideration for the patient’s admission to said hospitals and health facilities.

**Article 21:**
A Physician shall not facilitate the illegal practice of medicine, and such a practice which comes to the Physician’s knowledge must be reported by said Physician to the Order of Physicians.

**Article 22:**
1- Financial sharing between Physicians or between them and any other person is strictly forbidden.

2- A Physician shall not proceed with examinations in stores and related buildings, where drugs and medical equipment are displayed, in pharmacies and laboratories, except in emergency cases which require providing urgent medical care to a wounded or sick person.

**Article 23:**
If the Physician is engaged in a governmental employ, or was elected for an actual administrative mission, he/she shall not use his/her position in his/her medical profession, for personal benefit and for the purpose of attracting clients.

**Article 24:**
Any media publicity for any new method of diagnosis or treatment in order to induce the patients or colleagues to use such method is deemed as a fault for which the Physician shall be held liable, especially when the publicity lacks a warning to the patients or colleagues about the risks that would arise when using the advertised method.

**Article 25:**
Every report, certificate or document issued by a Physician must bear his/her signature, his/her membership number in the Order, according to the adopted form exclusively distributed by the Order of Physicians for which the Order’s stamp duties have been paid.

Article 26:
A Physician shall not give incorrect reports or courtesy certificates.

Chapter II
Physicians’ Duties to Patients
General Provisions

Article 27:
1- A Physician, when providing medical care to a patient, must treat him/her with humanity, compassion and integrity, and take good care of, and give attention to, the patient.

2- If a Physician accepted to provide medical care to a patient, he/she must ensure his/her continuing treatment, either himself/herself or in collaboration with a qualified person, in a fully careful manner and with live conscience, according to the most recent scientific findings the development of which should be followed-up by the Physician.

3- A Physician shall not in the course of his/her practice, seek any interest other than the patient’s interest or exploit in any way whatsoever his/her information in order to achieve personal goals.

4- A Physician shall always respect the patient’s will. If the situation of this patient does not allow him/her to express his/her will, the Physician shall notify said patient’s relatives thereof, except in cases of urgency or impossibility.

5- When the patient loses his/her freedom of action, this should not negatively affect the patient-physician relationship.
6- A prisoner may accept or refuse a medical treatment, unless this endangers his/her safety or the others’ safety according to the Physician’s report. The appropriate Public Prosecutor may take the appropriate measures in this regard.

7- In the event a patient goes on a hunger strike, the Physician shall intervene to convince him/her to put an end to his/her strike. In case of impossibility, and in the event the patient’s situation becomes exposed to an imminent danger, the Physician shall request transferring the patient to the hospital.

8- If those whose beliefs prohibit them from having the vaccinations required by the appropriate health authorities, refuse such vaccinations, the Physician must advise them of their responsibility and report this to such authorities.

9- If those whose beliefs prohibit them from transfusing blood, refuse blood transfusion, the Physician must respect their will, except when there is permanent danger, in which case the Physician shall, after obtaining the authorization of the appropriate judicial authorities, act according to his/her professional conscience, bearing his full responsibility.

10- In the event a mentally retarded person refuses to take the suggested treatments, his/her relatives or legal representative as well as the Physician are allowed to dispense with his/her prior consent. If a patient suffers from insanity or dementia or is a danger to others, the Physician shall ensure the possible medical care for him/her in a hospital, and the hospital administration must notify the appropriate health or judicial authorities thereof.

11- A Physician may not put an end to the life of a patient due to compassion even if the patient required him to do so, that is euthanasia.

If a Patient suffers from a disease from which there is no hope of recovery, the Physician’s mission shall be limited to reducing his/her physical and mental pains and giving him/her the appropriate treatments for protecting as much as possible his/her life. It is better not to have recourse to technical means and to excessive treatment upon the consent of the parents.
according to a joint report of the treating Physician and the Head of the concerned department. It remains necessary to help the patient until the end, in a manner that preserves the patient’s dignity.

12- In case of a Physicians’ collective suspension of work, the Physician remains responsible for his/her duties towards his/her patients and for ensuring the continuous treatment to them and to any other new patient.

13- A Physician must leave to the patient the freedom to choose the consulting Physician, the anesthetist and the surgeon. This latter may refuse any decision to perform a surgery if such decision is not sufficiently justified, or for any other valid reason.

14- A surgeon shall, when necessary, seek the help of two assistant surgeons from the hospital, if they are available, in order to ensure the best care to his/her patient.

15- The doctor specializing in the administration of anesthetics and recovery shall, prior to any surgery, examine the patient, review his/her medical file, obtain from the surgeon all useful information, write down all his/her information in the medical file, and he/she shall in the post-operative phase write down in the medical file any additional information related to anesthetics and recovery during and after the operation, until the patient is discharged from the operating room.

He/she shall be responsible for monitoring the patient from the moment of anesthesia until full recovery. He/she may choose on his/her own responsibility the necessary equipment available in the hospital and choose his/her assistants from the emergency physicians in the hospital according to the bylaws of the hospital where he/she works, if any.

No surgery of any type whatsoever requiring anesthesia may be operated except under the supervision and in the presence of the anesthetist physician during all the phases of surgery, except for small surgeries which take place in the emergency rooms.

**Article 28:**
A Physician must not be bound by an obligation as to the outcome of the patient’s treatment, yet he/she must be bound by the obligation to ensure the best appropriate treatment for the patient.

In the light of the foregoing, a Physician shall fulfill the following duties:

1- A Physician shall provide the necessary diagnosis and treatment, if need be in collaboration with qualified assistants, and according to the most recent scientific findings.

2- After providing and identifying the required medical treatment, a Physician shall ensure the implementation’s follow-up.

3- If a patient refuses a treatment, a Physician may stop providing medical care to said patient. If it appears to the Physician that the patient is in danger, he/she must deploy efforts to convince him/her of undergoing the treatment, and if necessary consult with one or more other Physician(s) for this purpose.

**The Medical File**

**Article 29:**
1- Every Physician shall keep a specific medical file to each of his/her patients in his/her clinic, and he/she shall be responsible for his conservation. The Physician shall deliver a copy of the file to the patient at the request if this latter, provided it includes a report with all the information that is necessary for the completion of the diagnosis or the continuation of the treatment.

2- In the event a Physician dies or stops working, his/her alternate physician or the legal successor to his clinic shall, at the request of the patients, transfer said patients’ files to the physicians that are in charge of their treatment. In the event of absence of an alternate physician or heirs, the files must be delivered to the Order’s Board for conservation.
3- If the files were made by several Physicians and are limited to one institution, the treating physicians, researchers-physicians and monitoring physicians at the social security institutions may review them.

4- The medical files of hospital departments shall remain the responsibility of the Administration in charge of their preservation and safety. The patient or his/her legal representative appointed according to a power of attorney expressly authorizing him/her to do so, has the right to obtain from the hospital a copy of his/her medical file.

5- No Physician has the right to review the medical file of the patient except at the request of this latter or his/her legal representative and after informing the treating physician, except in urgent cases.

6- The treating physician, researcher-physician or health authorities may benefit from the medical files for the service of the scientific development provided the names of the patients are not disclosed and the professional secrecy is observed.

7- The Investigation Judge or judicial police may search a Physician’s clinic or medical department and take hold of medical documents, in the presence of the physician and one of the members of the Order’s Board. Then, the Physician may not raise an objection against the search procedures.

8- The judicial and health authorities as well as the Order of Physicians may obtain a copy of any medical file which is the subject of a complaint and investigation.

9- Physicians and the health institutions shall keep the medical files for a period of at least ten years, except if the patient’s interest requires the extension of said timeline.

Human Experiments, Transplants, Artificial Insemination and Abortion
Article 30: The Human Experiments and the Clinical Research:
1- A Physician may not prescribe any medication or use any experimental treatment except under the following conditions:
- Abundant, safe and case-by-case scientific studies and research must be conducted at a specialized university medical center under the supervision of the Medicine School of the center concerned.

- The Ethics Committee at the university medical center must grant its approval for prescribing the medication or using the treatment and send a prior notice thereof to the Order of Physicians.

- The treatment must be duly registered in a register intended for the experimental treatments at the Ministry of Public Health.

- The patient must have given his/her prior consent.

- The consent of the parents or legal representative must be mandatory and in writing as far as the minors or incapacitated persons are concerned.

- The treatment must be free of charge.

2- The creation of Ethics Committees for the follow-up of the medical research and clinical experiments in the hospitals, their tasks, their targets, the principles they are subject to, the methods of their designation, and the means of their control shall be determined by a decree issued by the Cabinet, upon the proposal of the Minister of Public Health.

Organ Donation and Transplantation:
3- The trade of human organs is strictly forbidden.
4- Organs may be removed from dead bodies provided the deceased persons made a will in this respect or after obtaining a written consent from their families of the first degree, for treatment or scientific purposes in accordance with the applicable legal procedures.

5- The organ transplantation and donation from dead and living donors must be done in conformity with scientific progress, the requirements of modern medicine, scientific decisions for organizing the organ donation and transplantation, and the principles of medical ethics. Human organs and tissues may not be removed from the body of living or dead persons for curing a disease or wounds of another person, except after obtaining the consent of the Lebanese National Committee for Organ and Tissues Donation and Transplantation according to the conditions and principles determined by decrees issued by the Cabinet, upon proposal of the Minister of Public Health, after consulting with the two Orders of Physicians, which include:

* the general conditions and principles of organ donation and transplantation.
* the role of the specialist physician and assistant medical team.
* the consents methods and procedures.
* the role of the appropriate authorities in controlling the organ donation methods.
* the measures in the event of violation of the organ donation and transplantation conditions and methods.

The applied methods and the establishment of the organizations in charge, including the Lebanese National Committee for Organ and Tissues Donation and Transplantation, their tasks and the conditions for licensing the organ transplantation and donation centers, the responsible medical team, the delegated judge from the Ministry of Justice, the procedures of action, the notifications about the deaths, the national registers, and other matters related to organ transplantation and donation shall be determined by decrees issued by the Cabinet, upon proposal of the Minister of Public Health and after consulting with the two Orders of Physicians.

The Assisted Reproductive Technology (ART):
6- Artificial insemination or pregnancy through assisted reproductive technology may be used for the spouses, with their written consent, subject to the applicable laws of the civil, Muslim, Christian and religious courts.

7- The assisted reproductive technology, the possibility of having recourse to it, the medical ethics applicable when using such technology, the specific conditions for licensing the centers for assisted reproduction, the conditions of their operation and other procedural provisions governing such technology, the conditions of the embryos storage unit, and their disposal, as well as the procedures taken at the moment of breach, shall be determined by a decree issued by the Cabinet, upon proposal of the Minister of Public Health after consulting with the National Advisory Committee for the Ethics of Health and Life Sciences.

8- The targets, conditions and procedures of research on the fetus, the ethics of research, the authorization to use the embryo cells, the use of the frozen embryos for research, or their disposal shall be determined by a decree issued by the Cabinet, upon proposal of the Minister of Public Health after consulting with the National Advisory Committee for the Ethics Health and Life Sciences.

**The Urgent Cases of Disfigurement**

9- No medical action that would lead to the patient’s disfigurement may be taken except in cases of emergency and in case of dire necessity, and otherwise by a decision of at least two specialist Physicians, with the consent of the patient or consent of patient’s family of the first degree or the legal representative, if he/she was not able to decide.

10- The surgeon alone may decide, during an urgent treatment, to perform an operation that leads to a disfigurement, provided he/she obtains the patient’s consent thereto if he/she was conscious and aware, or the written consent of his/her family of the first degree, if any, or his/her legal representative.

11- Every medical or surgical treatment that leads to a sex change and affects the patient’s future shall be deemed as a disfigurement.
**Stem Cells**
The stem cell culture techniques may be used for therapeutic purposes under the following conditions:

12- The necessary scientific research must be conducted as per the requirements of the modern medicine, scientific progress and the principles of medical ethics.

13- These techniques must be made at a university medical center licensed by the Ministry of Public Health.

14- The Medical Ethics Committee at the university medical center must give its consent on a case-by-case basis.

15- The patient or the patient’s legal representative must give his/her written consent to the use of this technique.

16- The techniques of use of the stem cells, the possibility of having recourse to them, the health and technical conditions for their preservation, their disposal, the means of their control and other procedural matters shall be determined by decrees issued by the Cabinet, upon proposal of the Minister of Public Health.

**Article 31:**
A Physician called for providing medical care to a minor or an incapacitated person shall ensure that he/she obtained his/her relatives’ consent and he/she shall in urgent cases provide the necessary treatment, when it is impossible to obtain the consent of his/her legal representative.

**Article 32:**
Abortion is legally prohibited. However, therapeutic abortion, with dogmatic reservations, cannot be performed, except under the following conditions and reservations:
1- Such abortion must be the only way for saving the life of a mother exposed to a serious danger.

2- The treating physician or surgeon must necessarily consult with two physicians who issue jointly with him/her, a written approval in four copies, signed by hand, after medical examination and deliberation, on the fact that the mother’s life cannot be saved except through abortion. A copy of this Agreement must be delivered to the treating physician, a copy is to be kept with each of the two consulting physicians, and registered minutes about such fact, without including the patient’s name, must be sent to the Chairman of the Order of Physicians Board. However, abortion cannot be performed except with the consent of the pregnant woman who must have been informed of her situation. However, if she was in serious danger and unconscious and the therapeutic abortion was necessary for the safety of her life, the Physician must proceed with said abortion, even if her husband or parents refused that. If the Physician’s belief does not allow him/her to recommend abortion or to perform the abortion, he/she may withdraw, leaving the follow-up of the pregnant woman’s care to another specialist colleague.

Article 33:
In the event of difficult or abnormal birth, the Physician shall act according to what is required by the medical technique, in favor of the mother and child without being influenced by family considerations.

Chapter III
Duties of the Physicians in Social and Hospital Medicine
and the Physician-Hospital Relationship

Article 34:
A Physician shall cooperate with the appropriate authorities in order to safeguard public health, taking into consideration his/her health condition and the force majeure events.

Article 35:
A Physician shall comply with the provisions of Article 28 of this Law, irrespective of the party who entrusted him/her with the medical examination.

**Article 36:**
1- The Physician’s engagement in medical services at a hospital must be documented by a written agreement provided that its provisions are not in conflict with the provisions of this Law and the general regulations into force.

-A Physician, who was practicing his /her profession at the hospital before the publication of this Law, is deemed as a contracting party, especially that the Physician’s existing engagement by the hospital is governed by the contractual relationship.

2- The agreements between physicians’ and public administrations and institutions are subject to the provisions of this Law and the general laws and regulations.

3- Every hospital must have internal regulations which are not in conflict with the provisions of this Law.

4- The Physicians contracting with a hospital shall elect among themselves a medical committee in charge of the professional, scientific and moral matters, and the Physicians’ fees-related rights.

The Head and members of the Medical Committee must be elected under the supervision of the Order of Physicians, under terms and conditions which are in conformity with the internal regulations of the hospital and not in conflict with the provisions of this Law.

The representation of the different categories of the physicians contracting with the hospital must be observed upon the election of the Medical Committee.

5- The Committee shall fulfill the following tasks:
   a- to ensure the medical care ethics and dignity.
   b- to strive to uphold the standards of professionalism through the organization of general meetings for the Physicians at the hospital in order to discuss the professional matters with regards to the development and improvement of the professional services.
c- to bring together into one decision the opinions of the Physicians and preserve their rights and interests.

d- to help the Physicians collect their fees in coordination with the hospital Administration.

e- to seek to resolve the conflicts arising out between physicians in cooperation with the hospital Administration.

f- to promote the medical research and scientific prospecting in cooperation with the Scientific Committee of the Order of Physicians.

g- to give its opinion, in an advisory capacity, on the subjects that concern the hospital upon the request of the Administration.

h- to give the opinion in an advisory capacity, on the medical file of the Physician with whom the hospital Administration wishes to contract.

i- to cooperate with the hospital Administration in all common subjects that concern the medical body and relate to the hospital activities and therefore, to seek to resolve amicably the conflicts that would arise between the Physician and the hospital Administration.

With regards to professional matters, the Committee is subject to the supervision of the Order of Physicians in accordance with the applicable laws and regulations.

**Article 37:**
It is preferable that the scope of activity of the Physician in charge of preventive medicine in a given institution be limited to such mission and that he/she does not practice at the same time curative medicine, except in urgent cases required by public interest.

**Article 38:**
The controlling Physician of an insurance company must not be a treating physician of the patients insured by such company in any hospital whatsoever.

**Article 39:**
- A Physician in charge of the medical monitoring at a given department shall maintain professional confidentiality when reviewing the medical file, either in the presence of the treating physician or with his/her prior approval, and restrict himself/herself to giving the information that is relevant or administratively useful, without mentioning the medical reasons for this.

- Subject to the provisions of Article 7 of this Law, the controlling Physician shall not give the medical information recorded in the medical files to third parties or to any Administration except if the general laws so require or if patient concerned personally agreed to that.

**Article 40:**
- A Physician appointed as a sworn expert may not provide medical care to the same patient having requested him/her to draw up a report about his/her situation.

- Moreover, a Physician may not accept to perform his/her mission as an expert if the matter is related to one of his/her patients or relatives or if he/she has personal interest in the case that is the subject matter of the expertise mission.

**Article 41:**
A Physician in charge of the mission of expert shall advise the person whom he/she must examine, of his/her capacity and mission, before starting the examination.

**Article 42:**
A Physician in charge of the mission of expert shall immediately resign from the mission if he/she notices that the questions raised to him/her fall outside the scope of his/her medical
profession. He/she shall be limited in his/her report to answering the raised questions, and must not raise matters that may appear to him/her in the course of carrying out his/her mission, if they fall outside the scope of this mission, except if he/she sees that remaining silent about them would adversely affect the course of justice.

**Article 43:**
A Physician in charge of medical services in a given institution shall, when there is a serious illness, and except for the cases mentioned in Article 31, inform the patient’s parents and accept calling for any other Physician if this is useful for the patient.

**Article 44:**
A Physician shall notify the patient about the diagnosis outcome and may refrain from disclosing to him/her a dangerous diagnosis result, and not declare the diagnosis of inevitable death cases except in an exceptional manner, in a considerate manner, and may notify the family or the patient’s parents about it, except if the patient had previously requested not to reveal to his/her family the truth of his/her disease and determined the persons whom the Physician can keep informed thereof, in which case the Physician shall inform those persons.

**Article 45:**
A Physician may refuse to take care of a patient for professional or personal reasons, except in case of necessity and in the event he/she is deemed as violating his/her obligations of humanity.

**Article 46:**
A Physician may not interfere in the personal affairs of his/her patient’s family except if he/she is requested to do so. A Physician may not act as a supporter of a family or any person in order to influence the patient, except if this was in the medical interest of the patient.

**Article 47:**
a- The Physician must ask those intending to marry to undergo the medical tests required by the appropriate authorities, before the marriage, and show to each of them the results of the tests, advise them about the preventive measures and give them necessary health recommendations. The information remains confidential and kept in a file with the Physician. The Physician shall inform the party having the authority to perform the marriage ceremony that he/she did what was requested from him/her by a written certificate according to the form issued by the Order of Physicians.

b- The Physician shall, after verifying the health safety of the applicant for the driving license, fill out a medical certificate for obtaining the car driving license, on the form printed out according to a serial number, issued by the Order of Physicians.

Chapter IV
The Physician’s Duties Towards his/her Colleagues

Article 48:
1- A Physician shall ensure the establishment of the best fellowship relationships and mutual aid between colleagues subject to acting in the best interest of the patient.

2- A Physician shall not attack his/her colleague, or make slanderous statements against him/her, or launch defamatory rumors about him/her that would harm his/her professional practice.

3- The medical body is a united whole, under the banner of the Order of Physicians for the guarantee of the integrity and dignity of every member.

4- Every Physician must defend his/her colleague who is exposed to false accusations.

5- In the event professional disputes arise between Physicians, they must be amicably settled between them, and if this proves to be impossible, they must be settled through the Medical Committee, and otherwise through the Order’s Board which has jurisdiction to settle professional disputes.
6- Professional disputes between Physicians must not lead to a public debate. In the event of actions before the judiciary, the decision of permission or refusal of such actions must be issued by the Order’s Board within one month from the date of registration in writing of the application for permission at the Registry of the Order of Physicians. If this timeline expires and the decision was not taken, the permission is deemed as implicitly given.

7- In the event of termination of a Physician’s contract with a hospital or suspension of his/her professional activity, it is preferable for the Physician who wishes to fill out the vacant post to contact his/her colleague whose contract has been terminated or activity suspended and he/she must notify the Order’s Board to preserve the profession’s ethics and laws as well as the rights of the Physician and the patient.

**Article 49:**
A Physician must not charge fees to his/her colleague and his/her dependent family members, who are the spouse, the ascendants and descendants, except if a third party settled the fees.

**Article 50:**
- The medical profession must be practiced within the scope of honest competition between colleagues, and every solicitation, transfer or attempt to transfer the patients for the purpose of illegal benefit, and every illicit competition, sharing or monopoly, exposes the perpetrator of such act to disciplinary action before the Disciplinary Board.

- Physicians’ agreements must not turn into collusion to the detriment of the patient.

- The common fund managed by the Medical Committee must exclusively include the fees of the colleagues in the same specialty, with a technical cooperation with the hospital Administration.

**Article 51:**
If a Physician is called for providing medical care to a patient whose treatment is ensured by another colleague in a hospital, he/she must abide by the following rules:

1- If the patient is willing to dispense with his/her initial Physician, the new Physician must ask the patient or those responsible for him/her to inform the initial Physician thereof and put in writing their selection of the new Physician, and in this case, the initial Physician must provide the new Physician with the complete information related to the patient.

2- If the patient wishes to consult with any Physician other than the treating Physician, this latter shall meet his/her request, and in this case the consulting Physician shall leave to his/her colleague the result of his/her diagnosis and the treatment he/she suggests.
   - in the event the joint examination was impossible or inappropriate, the new Physician may examine the patient and leave to his/her colleague his/her diagnosis result and the treatment he/she suggests in writing.

3- If the treating Physician is absent and the patient called for his/her colleague, this latter shall provide the treatment and withdraw when the initial Physician is back, after showing him/her his findings.

4- A Physician may not provide medical care to the patients of a hospital having engaged a main Physician in charge of the treatment except after obtaining permission from this latter or in the cases allowed by the contract concluded with the main Physician or the regulations of the institution concerned.

   -In the event a dispute arises out between the two Physicians, such dispute must be referred to the Order’s Council.

Article 52:
A Physician may receive in his/her clinic patients that have their own treating Physician and may inform this latter and consult with him/her with the consent of the patient if this is in the patient’s interest.
Article 53:
The treating Physician, if need be, must suggest or accept a medical consultation, if requested by the patient or his/her legal representative in the event the patient was incapacitated, and he/she must in both cases give the name of the Physician he/she suggests taking into consideration the patient’s will, or accept the meeting with any suggested Physician registered in the Order’s register.

Article 54:
At the end of the consultation session, irrespective of the number of the participating Physicians, all physicians, individually or collectively, must prepare a written report, signed by them and setting out the different views.
In the event of disagreement, the treating Physician must notify the patient about all opinions and this latter or his/her representative if incapacitated, shall decide in writing on his/her own responsibility who will continue his/her treatment.

Article 55:
The patient himself/herself may request again the opinion of the consulting Physician with the approval of the treating Physician, during the illness period for which the consultation took place and if the treating Physician does not agree, the patient may decide as he/she sees appropriate.

Article 56:
Subject to the provisions of Article 19 of this Law, the Physician may not be replaced by his/her colleague in the treatment of his/her patients except temporarily and with their approval, in which case the fees are to be paid to the alternate Physician alone.
- A Physician prohibited pursuant to a judicial or disciplinary order from practicing the profession shall not be replaced by his/her colleague throughout the period of the penalty, and this does not exempt him/her from taking the necessary measures for ensuring the continuing care for his/her patients subject to treatment, when the penalty is imposed.
- The Order’s Board shall be notified of any decision of prohibition in order for it to take the necessary measures.
- The alternate Physician shall abandon his/her temporary mission when the continuing care is ensured.

**Article 57:**

1- The Physicians in the same specialty may establish a civil professional company with or without legal personality, provided every partnership agreement and its amendments are submitted to the prior approval of the Order’s Board.

2- The company includes its members’ medical services, and the fees are included in one statement and the practice shall be limited to the partners.

3- If a group of Physicians agrees to draw up a statement of fees, this team must only include the active physicians participating in the care and practicing the same specialty.

4- Physicians from different specialties may contribute to consolidating the necessary capabilities in order to facilitate the practice of each of them. The collaboration between them must be supported by a cooperation agreement or civil partnership having a legal personality, provided that the medical fees are totally independent from the company and are not in one statement, and provided this agreement is subject to the prior approval of the Order’s Board. Such a company may not be established in a hospital.

5- Every agreement of whatever type must comply with the professional rules, and a copy thereof must be communicated to the Order to ensure that it is consistent with the model agreement laid down by the Order.

6- No Physician or medicine student may work as an employee for another physician.

7- No matter what the type of partnership is, the profession practice remains personal, and every partner physician shall be responsible only for his/her work.

**Chapter V**
Physicians’ Duties to the Members of the Medical and Paramedical Professions and Medical Assistants

Article 58:
A Physician must avoid as much as possible causing harm to persons who are related to the medical field and particularly pharmacists, dentists, midwives, nurses and assistants when dealing with them in medical matters.

Article 59:
A Physician, when registering in the Order, must declare that he/she has had knowledge of this Law and swear and attest that he/she will comply with its provisions.
The President of the Order of Physicians draws up minutes thereof that are signed by the Physician and kept in this latter’s file.

Article 60:
Every Physician who has ceased practicing the profession in Lebanon shall notify the Order thereof.

Article 61:
Every violation of the provisions of this Law will expose its perpetrator to referral to the Disciplinary Board.

Article 62:
Legislative texts and all texts of decrees and decisions that are contrary to the provisions of this Law or inconsistent with its content are cancelled.

Article 63:
The minutes of implementation of the provisions of this Law, if necessary, are determined by decrees issued by the Cabinet upon the proposal of the Minister of Public Health.

Article 64:
This Law shall become into force immediately after its publication in the Official Gazette.