

January 27, 2025

CPSO Treatment of Self, Family Members, and Others Close to You Policy

Statement from the OMA Section on Plastic Surgery

The OMA Section on Plastic Surgery appreciates the opportunity to provide feedback on the CPSO draft policy '*Treatment of Self, Family Members, and Others Close to You*' and the accompanying '*Advice to the Profession*' document. We commend the College for its efforts to provide further clarity on the issues surrounding the treatment of family members and close contacts by physicians in the province of Ontario.

Our Section is generally in agreement with the CPSO policy's intent and direction. However, we believe that clarification would enhance the policy's clarity and intent.

1. Definition of "Others Close to Them" (Line 21)

The policy defines *Others Close to Them* as "individuals who have a close or personal relationship with the physician where the nature of the relationship could reasonably affect the physician's professional judgment as set out in Provision 1a.

- 1. There are barriers to or discomfort in sharing or hearing sensitive information;
- 2. There are factors that may affect the decision-making of the physician or the individual receiving treatment, for example, an individual receiving treatment feeling obligated to accept a physician's recommendations about treatment decisions;
- 3. The physician may be hesitant to make mandatory reports about the individual receiving care;
- 4. The individual receiving treatment may be hesitant to voice concerns about the treatment provided or pursue legal options; or Any other factors that could cause a physician to lose objectivity or fail to meet the standard of care."

This is very broadly defined, as it is written as 'close **or** personal relationship', not close personal relationship. Personal relationship is a term that can easily be misinterpreted. Some may interpret this as 'interpersonal relationship' meaning a social association, connection, or affiliations, while others may read this as a 'personal relationship' wherein there is some sort of emotional bond between the two parties. For example, if a physician has played tennis with an individual intermittently in the past, but has no





association outside of this interaction, where does that fall in the wording of this policy. More clarity is needed. Updating this to 'close personal relationship' would be helpful.

Furthermore, the policy is asking physicians to interpret how the individual in question will feel after the interaction. In most of these situations, the individual is the one seeking out care from the physician... they are the one to initiate the interaction. This demonstrates (in many cases) that the patient is willing to share personal or sensitive information. Certainly, this can be impacted by the nature of the issue/presentation (a torn earlobe assessment may be vastly different than a sexually transmitted infection assessment). While the policy mentions 'minor conditions' in consideration of this issue, it is then constrained by the definition of 'readily available'. Many specialists have wait times that exceed 6-12 months. Just because there are specialists in the geographic area, does not mean that patients can easily get in to see these providers.

Furthermore, while a physician may feel that they are objective in an interaction, it is hard to fully know how *any* other human being is feeling. Any patient may feel hesitancy to voice concerns to their physician for a myriad of reasons, not just a personal contact. Placing the burden on the physician to determine whether a patient (any patient) will feel hesitant to voice concerns about treatment is unfair to lay fully on the physicians' shoulders.

Further guidance and clarification on the 'Others Close to Them' group would be very helpful for our section.

Thank you for considering these points as you refine the policy. We believe that these clarifications will enhance the effectiveness of the policy and support physicians in their decision-making process.

If any further clarification is required, we would be happy to discuss this at further length.

Sincerely,

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Source Association