2.1.6 Substitution of Surgeon

Patients are entitled to choose their own physicians, which includes being permitted to accept or refuse having an intervention performed by a substitute. A surgeon who allows a substitute to conduct a medical procedure on his or her patient without the patient’s knowledge or consent risks compromising the trust-based relationship of patient and physician.

When one or more other appropriately trained health care professionals will participate in performing a surgical intervention, the surgeon has an ethical responsibility to:

(a) Notify the patient (or surrogate if the patient lacks decision-making capacity) that others will participate, including whether they will do so under the physician’s personal supervision or not.

(b) Obtain the patient’s or surrogate’s informed consent for the intervention, in keeping with ethical and legal guidelines.

AMA Principles of Medical Ethics: I,II,IV,V

Background report(s):

CEJA Report 8-A-08 Substitution of Surgeon

Original opinion issued prior to 1977 without background report.
At its 2007 Annual Meeting, the American Medical Association (AMA) House of Delegates adopted Resolution 16, “Surgeons’ Attendance During Surgery.” This resolution asks that the AMA design policy that requires operating surgeons to “post their surgical cases so that they are actually physically present in the operating room performing or supervising their surgical cases during the majority of the case and during all crucial or essential phases of the surgical procedure.”

After discussion with the sponsors of the resolution (the District of Columbia Delegation) and for reasons set forth below, the Council on Ethical and Judicial Affairs (CEJA) has decided that its current policy addresses the issues raised by the resolution.

The resolution is primarily concerned with the effect on the patient-physician relationship when a physician has 2 or more cases posted at the same time. Clearly, the physician cannot be present for the entirety of both cases. The absence of the surgeon from portions or all of a procedure without a patient’s knowledge and consent may have a negative impact on patient trust as well as safety.

However, current CEJA Opinion E-8.16, “Substitution of Surgeon without Patient’s Knowledge or Consent,” addresses these concerns. This policy states that “a surgeon who allows a substitute to operate on his or her patient without the patient’s knowledge and consent is deceitful.” In general, a physician should provide participatory supervision if aspects of the procedure are delegated to residents or other physicians. If a resident or other physician performs the procedure under non-participatory supervision, the patient should be fully informed of this fact.

It is unethical for physicians to post 2 or more cases (ie, not fully participate in any of the cases) without the informed consent of the patient. The Council believes that this Opinion fully answers the directive of the resolution and sees no need for additional ethics policy on this matter.