Tip #19: Treating Patients with Whom You Have a Close Relationship

The Risk: Physicians are often asked by close friends, relatives, or colleagues for medical advice, treatment, or prescriptions both inside and outside of the office. At times, these individuals may be seen by you as a courtesy and/or at no charge. Although the American Medical Association advises physicians not to treat immediate family members except in cases of emergency or when no one else is available, this practice continues to occur.

Over the years, we have seen a number of lawsuits filed against physicians by close friends, colleagues, and even their own family members because of care provided by our insureds. The defense of these suits is frequently hampered by the fact that there are often sparse or entirely non-existent medical records for the patient. The failure to maintain a medical record for every patient is defined as professional medical misconduct by Education Law § 6530(32). Providing care under these circumstances may pose unique risks. Here are some recommendations about how to handle these situations.

Recommendations:

1. Always create a medical record for friends, relatives, and colleagues for whom you provide care of any kind.

2. All patient encounters must be documented in the medical record, including those that occur outside the medical office.

3. Take a complete medical history when seeing friends, relatives, or colleagues as patients. If indicated, this should include issues that may be uncomfortable to discuss, such as the use of psychotropic medications or sexual history.

4. A thorough medication history should be obtained from the patient to avoid potential drug interactions. Identify any contraindications when prescribing medication.

5. Perform a thorough physical examination. Sensitive portions of a physical examination should not be deferred when pertinent to the patient's complaints. These may include breast, pelvic, or rectal examinations. A chaperone should be used for those portions of the examination.

6. Do not write prescriptions, especially for controlled substances, for individuals with whom you do not have an established professional relationship. Always document the reasons for prescribing medications along with the dose. If narcotics are prescribed, consult the Prescription Monitoring Program (I-STOP) registry and document that in the medical record.

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7. When a surgical procedure is to be performed:
    - a signed informed consent form must be obtained and placed in the medical record; and
    - the medical record must contain documentation that the informed consent conversation with the patient has occurred and that the patient consented to the procedure.