

PRACTICE STANDARD

Advertising and Communication with the Public

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Version: 7.2

Related topic(s): [Conflict of Interest](#); [Promotion and Sale of Medical Supplies and Devices](#); [Sale and Dispensing of Drugs](#); [Social Media](#)

A **practice standard** reflects the minimum standard of professional behaviour and ethical conduct on a specific topic or issue expected by the College of its registrants (all physicians and surgeons who practise medicine in British Columbia). Standards also reflect relevant legal requirements and are enforceable under the [Health Professions Act](#), RSBC 1996, c.183 (*HPA*) and College [Bylaws](#) under the *HPA*.

Preamble

This document is a standard of the Board of the College of Physicians and Surgeons of British Columbia.

In this standard, “advertising” or an “advertisement” means any communication made orally, in print, through electronic media or via the internet by or on behalf of a registrant to the public where its substantial purpose is to promote the registrant, the registrant’s services, or the clinic or group where the registrant practises or with which the registrant is associated.

Registrants must be cautious when establishing business alliances that might limit their control on the content or placement of the advertisement and the promotion of their services. **Registrants are solely responsible for the content of any such advertising prepared by a marketing agency or third party and must ensure by contract that they are fully informed of all such communication with the public.** In the event of a complaint, the Inquiry Committee may not accept lack of awareness as a defence if that has not been secured in a written agreement.

The College does not pre-approve or endorse any advertisements or public communications.

College’s position

Any inducement, enticement or incentive to a patient may interfere with the patient’s autonomy and with the registrant’s fiduciary responsibility to the patient. Promotion of medical services is generally considered incompatible with a fiduciary relationship. A significant power and knowledge imbalance between a registrant and a prospective patient is assumed. Communication with the public must be limited to truthful information that assists the patient in making an informed decision.

Should a registrant choose to advertise, the advertisement must

- conform to the Canadian Medical Association’s [Code of Ethics and Professionalism](#),
- conform to the [Regulatory Requirements for Advertising](#) issued by Health Canada,
- conform to the [Canadian Code of Advertising Standards](#),
- be compatible with the best interest of the patient and uphold the reputation of the medical profession,
- include the name of at least one registrant who is responsible for the content (including when it is distributed on behalf of a registrant, partnership, group or professional association)
- comply with the [College Bylaws](#) namely, to reference the registrant’s proper name (unless written consent of the registrar is obtained),
- if it contains credentials, include those that have been verified by the College based on class of registration and licensure (see below for details),
- contain relevant information that is accurate, clear and explicitly states all important details to assist patients in making informed choices about their health and well-being,
- not be false, incomplete, misleading or deceptive, or reasonably capable of misleading or deceiving,

- not offer inducements, such as (but not limited to) prizes, gifts, gift certificates, card points, bonus points, discounts or time-limited benefits for medical services,
- not offer inducements, including alcoholic beverages, for attendance at informational sessions promoting medical interventions, cosmetic or otherwise,
- not include “before and after” photos, unless the registrant has obtained written consent from the patient to permit the use of their photographs in advertisements, which are available in the public domain (this consent must be available for the College to verify, if requested),
- include a disclaimer if a registrant uses photographs of models in an advertisement and those models have **not** received the services advertised by the registrant,
- not describe the registrant’s services in comparison to the services of others or imply any superiority over another regulated health-care professional,
- not create unreasonable expectations or guarantees or warranties about results, and
- specify clearly which services being offered are not publicly funded through the Medical Services Plan.

Use of the term “specialist”

As required in section 7-4(3) of the Bylaws, a registrant must not identify themselves as a specialist or subspecialist unless the registrant has been

- certified by the Royal College of Physicians and Surgeons of Canada (RCPSC) in a specialty or subspecialty, or equivalent approved by the board, or
- certified by the College of Family Physicians of Canada (CFPC) in family medicine or emergency medicine or an added competence in family medicine, or equivalent as approved by the board.

Nothing prevents a registrant who has certification from the CFPC from calling themselves a “specialist in family medicine” or a “family medicine specialist.” A registrant using the term “specialist” must clearly note whether this is a RCPSC or CFPC designation when communicating with the public.

As required in section 7-4(4) of the Bylaws, a registrant may refer to having a focused area of practice but when doing so must

- state their RCPSC specialty or subspecialty certification, or equivalent as approved by the board, or
- state their CFPC certification or subspecialty certification, or equivalent as approved by the board.

CFPC subspecialty certification is only applicable to the Certificates of Added Competence (CAC). The current approved CACs include: addiction medicine, care of the elderly, emergency medicine, enhanced surgical skills, family practice anesthesia, obstetrical surgical skills, palliative care and sports and exercise medicine.

All other CFPC certified registrants who practise in a specific area may provide a list of areas in which they practice (e.g. skin conditions), however this cannot imply certification, or any RCPSC specialties (e.g. dermatology). This is intended to ensure consistency in advertising

and promotional materials, and that descriptive terms are not mistaken for formal specialist or subspecialist qualifications.

RCPSC-certified registrants practising in a subspecialty discipline without subspecialty certification must state “certified specialist in [specialty] practising in [name of subspecialty area].” This is also to ensure consistency in advertising so descriptive terms are not mistaken for formal qualification. This does not include RCPSC- certified subspecialties, in which registrants can use the title of their subspecialty.

Additionally, registrants must not use the term “surgeon” in advertising for cosmetic procedures unless they are a RCPSC certified specialist in a relevant surgical discipline.

Office signage

Office location may be indicated by a sign of a nature and size to allow identification by a member of the public but must not constitute soliciting or importuning. Such information may include:

- the name of the registrant practising at a location,
- a focused area of practice or practice limitation of a registrant,
- office hours,
- whether an appointment is necessary, and
- factual information which might assist a member of the public to select a registrant may be placed at or about the entrance.