

Treating Oneself, Family, or Other Close Individuals

Question

What are the implications regarding treating and/or prescribing drugs to myself, my family members, or other individuals with whom I am close?

Answer

It is not uncommon for healthcare providers to treat themselves, family members, or friends — and some may consider it their right to do so.¹ However, in Opinion 1.2.1 of the *Code of Medical Ethics*, the American Medical Association (AMA) indicates that physicians should *not* treat themselves or family members.² Exceptions include short-term, minor problems and emergency or isolated settings in which no other qualified physician is present. AMA advises that if no other qualified physician is present, then physicians should treat themselves or family members until another physician arrives.

AMA cites many reasons not to treat oneself or family members, including the potential to compromise professional objectivity as well as the potential for the providers' personal feelings to adversely affect their clinical judgment. Additionally, healthcare providers may not investigate sensitive areas or conduct intimate parts of a physical examination.³

In addition to oneself and family members, the American College of Physicians (ACP) also cautions against treating close friends or employees. ACP notes numerous potential pitfalls, including issues maintaining clinical objectivity, practicing beyond scope, inadequate history-taking or physical examination, overtesting, inappropriate prescribing, incomplete counseling on sensitive issues, and failure to keep appropriate medical records.⁴

Advice against treating and prescribing for oneself, family members, close friends, or employees also extends to advanced practice providers (APPs), including physician assistants and advanced practice registered nurses (APRNs). Many states address this issue in position statements or advisory opinions. For example, the Arizona State Board of Nursing specifies that “The standard of care

requires, absent an emergency or under limited circumstances, the APRN to treat only those patients for whom the APRN has and maintains clinical objectivity.”⁵ Similarly, the Texas Board of Nursing notes that “when APRNs provide medical aspects of care for individuals with whom they have a close personal relationship, the APRNs risk allowing their personal feelings to cloud their professional judgment. Thus APRNs should not provide medical treatment or prescribe medications for individuals with whom they have a close personal relationship.”⁶

Healthcare providers need to be cognizant of navigating the legal and ethical issues related to treating oneself, family, friends, and employees. When care is provided, they must follow accepted standards and protocols, including taking a complete history, conducting a physical examination, documenting the care in the patient’s health record, and informing the patient’s primary care physician.⁷ Providers should also consider the following guidance from AMA:

- Avoid conducting sensitive or intimate examinations, especially for a minor patient.
- Encourage family members to find alternative providers when possible. Family members may hesitate to ask for someone else because they may be afraid of offending the provider.
- Be aware that tensions may arise when treating a family member, and this may affect the personal relationship.⁸

Healthcare providers also may prescribe medications for themselves or family members, but this can put them at risk. Federal laws do *not* prohibit healthcare providers from self-prescribing medications, but some state laws do prohibit it. Thus, providers should check their state licensing requirements for any prescribing rules. Providers also are required to comply with Drug Enforcement Administration (DEA) requirements when prescribing controlled substances.⁹

If they choose to prescribe drugs to family members, friends, or employees, healthcare providers also should adhere to these recommendations:

- Conduct an appropriate examination of the patient in compliance with state law.
- Document what was done to treat the patient and the basis for a prescription in a health record that is maintained in a HIPAA-compliant manner. This will help support the existence of a physician–patient relationship, and insurance may require this documentation.

- Do not prescribe outside of your expertise. Be informed about the medication that you're prescribing and its possible drug interactions and side effects.
- Hand any prescriptions for controlled substances directly to the patient or have the patient pick it up directly from a pharmacy.¹⁰

Resources

- [AMA Journal of Ethics: A Friend's Request for Treatment](#)
- [American Medical Association: Code of Medical Ethics Opinion 1.2.1: Treating Self or Family](#)
- [Annals of Internal Medicine: American College of Physicians Ethics Manual \(Seventh Edition\)](#)
- [Federation of State Medical Boards: Position Statement: Treatment of Self, Family Members and Close Relations](#)

Endnotes

¹ Ooi, K. (2018). A doctor in the house: Ethical and practical issues when doctors treat themselves and those they are close to. *Asian Bioethics Review*, 10(1), 3–19. doi: <https://doi.org/10.1007/s41649-018-0043-2>

² American Medical Association. (n.d.). Opinion 1.2.1: Treating self or family. In *AMA Code of Ethics*. Retrieved from <https://code-medical-ethics.ama-assn.org/ethics-opinions/treating-self-or-family>

³ Adler, E. L. (2019, January 18). The dangers of self-prescribing. *Physicians Practice*. Retrieved from www.physicianspractice.com/view/dangers-self-prescribing

⁴ Sulmasy, L. S., Bledsoe, T. A., & ACP Ethics, Professionalism and Human Rights Committee. (2019). American College of Physicians ethics manual: Seventh edition. *Annals of Internal Medicine*, 170(2_Suppl), S1–S32. doi: <https://doi.org/10.7326/M18-2160>

⁵ Arizona State Board of Nursing. (n.d.). *Role of the advance practice registered nurse: Treating and prescribing of medication to self and/or family*. Retrieved from www.azbn.gov/sites/default/files/advisory-opinions/ao-role-of-the-aprn-treating-prescribing-medications-to-self-and-or-family-03272015.pdf

⁶ Texas Board of Nursing. (2023, January [last revised]). *Texas Board of Nursing Position Statement 15.22: APRNs providing medical aspects of care for individuals with whom there is a close personal relationship*. Retrieved from www.bon.texas.gov/practice_bon_position_statements.asp.html

⁷ Federation of State Medical Boards. (n.d.). *Position statement: Treatment of self, family members and close relations*. Retrieved from www.fsmb.org/siteassets/advocacy/policies/position-statement-treatment-of-self-and-family-members-and-close-relations.pdf

⁸ American Medical Association, Opinion 1.2.1: Treating self or family.

⁹ ECRI. (2019, November 13). *Ask HRC: Providers who self-prescribe medication*. Retrieved from www.ecri.org/components/HRC/Pages/AskHRC111219.aspx

¹⁰ Adler, The dangers of self-prescribing.

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