

Statement of Purpose

The Society of Neurointerventional Surgery (The Society) has established a Code of Ethics (The Code) primarily for the benefit of patients. The Code is also a statement of responsibilities to fellow physicians, other health care professionals, society at large, and to self. Adherence to The Code is one measure used to evaluate a member's entrance into and good standing within the Society.

Patient Care:

- 1) The neurointerventional physician shall be dedicated to the principle of providing the best patient care possible with available resources
- 2) The neurointerventional physician shall not participate in any clinical activity which is not first and foremost in the best interest of patients.
- 3) The neurointerventional physician shall restrict his or her practice to that which he or she is competent to deliver by training, experience, and resources, and refer patients to other qualified physicians or other institutions when needed, always keeping the best interest of the patient as first priority.
- 4) The neurointerventional physician always respects patient privacy and confidentiality.

Continuing Education and Research:

- 1) The neurointerventional physician shall maintain a lifelong habit of learning, including formal continuing medical education, participation in hospital conferences with colleagues, and study of the literature in order to remain current in the field.
- 2) The neurointerventional physician who conducts research shall do so for the primary purpose of advancing the care of patients, never placing financial or any other secondary considerations above the welfare of patients.
- 3) The neurointerventional physician shall perform research with integrity and report results honestly. No claim shall be made to research or intellectual property conducted or created by others.

Professional and Social Responsibility:

- 1) The neurointerventional physician shall guard against addiction to alcohol, drugs, or any other vice which may impair his or her professionalism.
- 2) The neurointerventional physician shall never take advantage of a patient, nor allow anyone within his or her control to take advantage of a patient, in such a way as to result in physical, emotional, or sexual harm to the patient.

- 3) The neurointerventional physician shall not engage in activities that are illegal or otherwise bring disgrace to himself and the Society
- 4) The impaired neurointerventional physician shall submit voluntarily to treatment and should accept recommendations of those in authority regarding such treatment.
- 5) The neurointerventional physician shall always deal honestly with colleagues, other health care professionals, patients and their families.
- 6) The neurointerventional physician who chooses to provide expert testimony in legal cases shall be objective and not accept a contingency fee for his/her services or other compensation that is linked to the outcome of the case. An expert should be appropriately qualified, both by training and active clinical practice, and thoroughly prepared with relevant facts in order to provide the court with opinions that are accurate and based only on factual information. The primary purpose of expert testimony is to educate the court. Expert testimony should promote the truth, not the cause of either party, and should reflect the community standard and not the expert's personal views.
- 7) The neurointerventional physician shall not use any forum or medium of public communication to advertise himself/herself through deceptive, misleading or untruthful information.

Administrative and Financial Matters:

- 1) The neurointerventional physician shall charge only for services he or she provides or directly supervises in the case of a trainee.
- 2) The neurointerventional physician shall be honest in financial dealings with patients and insurance/health care financing agencies. He or she shall provide accurate, complete and timely information to those parties when requested.
- 3) The neurointerventional physician shall fulfill all of the obligations reasonably expected of physician staff according to the by-laws of his or her institution of practice.

Disciplinary Procedures

A member of the Society may be disciplined or expelled for conduct which the Society considers unprofessional or unethical, and therefore contrary to the dignity and best interests of the Society.

A complaint about a member may be brought to the Ethics Committee by any member of the Society, or any person with knowledge of a substantial breach of the Bylaws or the Code as set forth above. Members of the Society have an obligation to report a breach of the Code to the Society whenever the member believes that such a breach may endanger the dignity or be contrary to the best interests of the Society. Should the member also believe that such a breach

may endanger the safety of a patient or the public, the member has an obligation to report the breach both to the Society and any relevant government agency.

Disciplinary action may be initiated by any one or more violations of the Bylaws or the Code of the Society. The following shall automatically be considered not in the best interest or inconsistent with the purposes of the Society and subject to disciplinary action by the Society:

1) Suspension, revocation or other restriction of any license to practice medicine in any state, province or country by reason of a violation of a medical practice act, statute or government regulation.

2) Conviction of a felony relating to or arising out of the practice of medicine or of moral turpitude.

If the event the Society Board of Directors (the Board) receives credible, verifiable evidence that a member has been involved in either of the two situations above, such constitutes grounds for automatic suspension or expulsion from Society membership without the need for the disciplinary hearing procedures outlined below.

Disciplinary Options

The following disciplinary options may be applied to any member for due cause. Disciplinary proceedings shall be considered confidential. The following levels of disciplinary action are available, enacted by recommendation of the Ethics Committee and a majority vote of the Board, and defined as follows:

No Action Indicated: After careful consideration of a complaint, the Ethics Committee may decide that no action is necessary. A letter from the Chair of the Ethics Committee will be sent to the member by certified mail, summarizing the complaint and findings of the Ethics Committee, and outlining concerns, if any.

Censure: Censure is a written reprimand of the fellow or member from the president of the Society with no loss of fellowship or membership. Such censure is made part of the membership file of the fellow or member.

Probation: Probation is for a stated period of time, and causes the fellow or member to lose the right to hold office, serve on committees, or participate in Society-sponsored programs as a presenter, moderator, or panelist. The individual shall retain any other rights, privileges and obligations of membership. During this period, the individual shall be monitored by the Society, and will be eligible for reinstatement to full membership privileges by the Ethics Committee at the end of the stated term if the member complies with all conditions of the probation.

Suspension: Suspension shall cause the fellow or member to lose all membership benefits for a minimum of one year, or longer. At the end of the determined suspension period, the Ethics Committee may consider a petition for reinstatement if the individual can show that during his/her suspension he/she has demonstrated the necessary modifications to his/her behavior and

has adhered to the Code of the Society. Provided the individual meets the membership criteria then in force, he/she may be fully reinstated as a member upon review by the Executive Committee of a favorable Ethics Committee recommendation.

Expulsion: An expelled member shall no longer be a member of the Society and will be removed from the membership roster. He/she will not be entitled to the benefits of Society membership and shall return to the Society all certificates of membership awarded by the Society. Grounds for expulsion are not limited to the two situations outlined above, but may also be invoked by the Executive Committee, on recommendation of the Ethics Committee, where violations of the Society's Bylaws or Code of Ethics have occurred. Expulsion from the Society shall be considered permanent.

Disciplinary Process

Ethics Committee Evaluation: Complaints of ethical misconduct by a member of the Society shall be filed in writing with the chairman of the Ethics Committee. The chair of the Ethics Committee, President of the Society and the Executive Director shall evaluate the merits of the complaint and decide whether any further action is necessary. If the Ethics Committee finds that there is merit to the complaint, it will schedule a hearing on the matter. Written notice of the complaint and hearing shall be sent to the accused physician and the complainant not less than forty-five (45) days prior to the hearing before the Ethics Committee. Such notification shall require proof of delivery to the physician.

The notice shall state:

1. The time and place of the hearing,
2. The nature of the charges against him/her and any witnesses that are expected to testify against him/her,
3. That the physician may appear in person either alone or accompanied or represented by another person including legal counsel, if, and only if, he/she appears in person before the Ethics Committee,
4. That he/she may submit such evidence determined to be relevant by the Chair of the Ethics committee, regardless of its admissibility in a court of law,
5. That he/she may call, examine, and cross-examine witnesses (subject to reasonable limits set by the Chair of the Ethics Committee),
6. That the physician may have a record made of the proceedings, copies of which may be obtained by the physician upon payment of any reasonable charges associated with the preparation thereof, and
7. That he/she may submit a written statement at the close of the hearing.

A copy of these guidelines will be included with the notice.

A member of the Ethics Committee who has a personal, economic or professional conflict will voluntarily recuse himself and either the Chair of the Ethics Committee or the Society President will appoint an alternate. The parties will bear their own expenses with respect to the Ethics Committee hearing, as well as any other aspect of this disciplinary process. The hearing will be

conducted by the Chair of the Ethics Committee with the assistance of the Society's legal counsel, and must be held in executive session as an in-person meeting. If the member or fellow fails to appear at the hearing, he/she will be deemed to have waived his/her right to a hearing before the Ethics Committee, and the Ethics Committee may proceed to consider the charges based on the written evidence and other testimony received, or the Chair of the Ethics Committee may reschedule the hearing for good cause. After careful deliberations by the Ethics Committee, the Ethics Committee shall, within 30 days after the date of the hearing, inform the accused member and the Board in writing of its findings and recommendations. Such notification shall require proof of delivery to the physician and shall include the justification for the Ethics Committee's proposed action. Enactment of the recommendation of the Ethics Committee requires a majority vote of the Board. Board members with any real or perceived conflict will voluntarily recuse themselves. If the required majority vote is not reached, the Board may reverse the disciplinary action, may remand the issue in whole or in part for further proceedings before the Ethics Committee, and/or may dismiss the matter in whole or in part.

Appeal: If a member desires to appeal the decision of the Board, the member must notify the Board in writing by certified mail within 30 days of receiving the Board decision. Failure to do so constitutes waiver of the appeals process and the decision of the Board is final. In the event the member requests an appeal of the Board decision, a hearing before the senior membership will be scheduled at the following annual business meeting of the Society, and the member must appear in person. The Society senior members present at the meeting will constitute a quorum. The appeals process will be moderated by the president of the Society. The chair of the Ethics Committee will initially summarize the complaint against the member, the findings of the inquiry, and the decision of the Board. The member will then have the right to address the Society membership, with reasonable time given by the president, and reasonable time given for questions from the membership. The membership will then vote on the Board decision. A simple majority is required to uphold the Board decision. Failure to obtain a majority reverses the decision of the Board.

Reporting the Decision: Where appropriate, the Society shall report its decision to the National Practitioner Data Bank and any relevant state or national medical licensing body. The decision may also be reported to the American Board of Radiology, American Board of Neurosurgery, American Board of Neurology and/or state or local radiology, neurosurgery or neurology societies if the circumstances so warrant.