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## Clinical Staff –Standards of Practice

CS-SOP-01.21

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**SUBJECT/TITLE:** SELF TREATMENT AND TREATMENT OF FAMILY MEMBERS

**PURPOSE:** To define the policy for self-treatment and treatment of family members.

**DEFINITION:** **University of Iowa Hospitals and Clinics (UIHC) staff and faculty:** includes all individuals involved in the care of patients at UIHC, including UIHC staff, the University of Iowa College of Medicine staff, and all health science students.

**Family Member:** an individual with whom a healthcare provider has a personal or close relationship, where the relationship is of such a nature that it could reasonably affect his or her professional judgment. This includes, but is not limited to:

- Spouse or partner
- Parent, child, or sibling
- Grandparents or grandchildren
- Stepparent, stepchild, stepbrother, or stepsister
- Any other individual to whom the provider has personal or emotional involvement that may render the provider unable to exercise objective professional judgment in reaching diagnostic or therapeutic decisions.

**Staff member:** any hospital employee, physician, advanced practice provider, trainee, student, or volunteer.

**Treatment:** The performance of any controlled act including ordering and performing tests, providing a course of treatment, plan of treatment, making and communicating a diagnosis, and prescribing medications.

**Licensed Independent Practitioners (LIP):** Physician, Dentist, Physician Assistant, Advanced Registered Nurse Practitioner, or other LIP privileged through the medical staff process.

## POLICY:

Health care providers may not treat themselves or members of their families, except in emergencies and isolated settings where there is no other qualified provider available until another provider becomes available.

Except in emergencies, LIP may not write prescriptions for themselves or immediate family members.

**PROCEDURE:**

A. Staff members and LIPs should not diagnose, treat, prescribe, or pend medications or orders for themselves or family members except as noted below:

- a. Emergency situation or isolated situation where no other staff member or LIP is available
  - i. When an individual is experiencing severe suffering, or is at risk of sustaining serious bodily harm if medical intervention is not promptly provided and no other proper medical care is available.
  - ii. Providing care includes but is not limited to: documenting examination of a patient, ordering tests, interpreting results, making a diagnosis, communicating a diagnosis, prescribing medications, pending orders, placing appointments into the EHR, and documenting assessments.
  - iii. Documentation of the emergency encounters should be included in the patient's medical records.
- b. For short- term, minor problems:

B. A provider should not charge or make a claim for, or receive compensation for such service.

**References:**

American Medical Association. Code of Medical Ethics Opinion 1.2.1 –Treating Self or Family (1 December 2017) retrieved from <https://www.ama-assn.org/delivering-care/treating-self-or-family>

Medicare Benefit Policy Manual, Chapter 16 - General Exclusions From Coverage (Section 130) - [Medicare Benefit Policy Manual](#)

[Iowa Administrative Code - Medicine Board - Chapter 23](#)

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