



Series in Professional Ethics

# Issuance of Medical Certificates (MCs)

SMC would like to remind all registered medical practitioners to adhere to the 2016 ECEG section B4 when issuing MCs to patients. Doctors may also refer to the 2016 Handbook on Medical Ethics for further guidance.

## 2016 SMC ECEG

### B4. Medical certificates

The community places trust in doctors and authorises you to certify illnesses or disability through medical certificates. Good practice in writing medical certificates means:

- 1 Medical certificates must be issued to patients only on proper medical grounds arrived at through good clinical assessment. You must not take into consideration extraneous factors such as who pays for the consultation, what benefits the patients may receive or what employers' preferences may be.

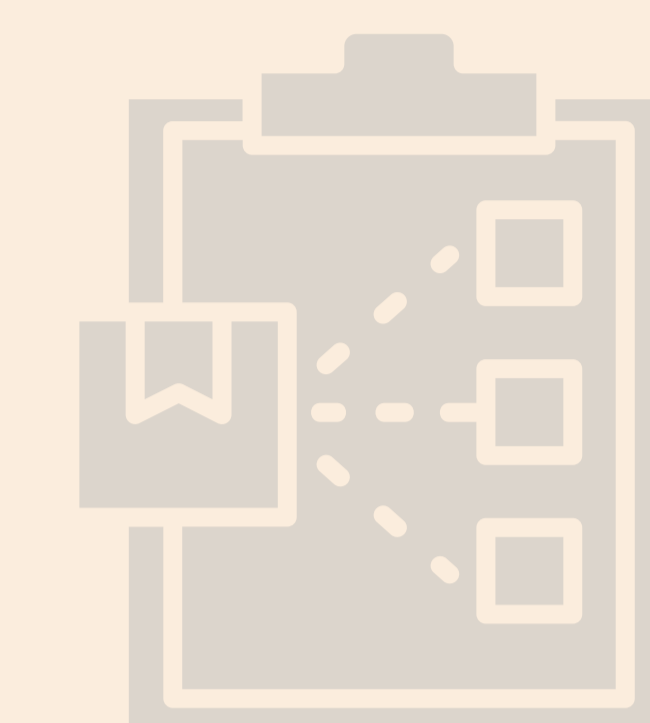




2 Where possible, medical certificates must be handed over only to patients themselves. When patients request or consent to it, you may send the medical certificates directly to employers.



3 Medical certificates must be written objectively, accurately and in good faith, must cover an appropriate duration and where relevant, must provide an accurate account of patients' limitations during the periods covered.



4 If you are certifying that the patients are fit to return to work but with limitations on their level of activity at work, you must first ensure that the patients' work conditions allow this and, to the best of your ability, ensure that appropriate light duties are in fact available to the patients at their place of work.



5 You must not post-date or back-date the date of issue of your medical certificates. The date of issue must be that of the day of consultation or treatment. The date you begin coverage may be before the date of issue only if it is clear to you that the patients' absence from work prior to the date of issue is consistent with their clinical presentation.



6 You must not amend the particulars on medical certificates issued by other doctors. If you disagree with the provisions of other doctors' medical certificates, you may issue new medical certificates. However, you must only do this after assessing the patients yourself to determine that this is justified on medical grounds and where appropriate and possible, consulting the other doctors before you do so.



7 Diagnoses must not be stated on the medical certificates unless patients have consented to this.



8 As medical certificates are documents that carry professional and legal implications, you must sign the certificates personally at the time of consultation and if another person has filled in the details on your behalf, you must satisfy yourself that the details are correct before signing.



9 When medical certificates are generated electronically and where you are in control of the systems, you must ensure that there are security protocols to prevent fraudulent issuance of the certificates. If you are not in control of the systems, you must use the systems responsibly and abide by the security protocols in place.







# 2016 SMC HME

## B4. Medical certificates

- 1 The issuance of medical certificates is a clinical decision. Hence, you are responsible for ensuring that any medical certificates you issue to patients are justified on proper medical grounds and that you had arrived at your decision through good clinical assessment.**



Medical certificates are issued either to promote patients' recovery from medical conditions, or to protect third parties against possible harm from the patients' medical conditions. Unless there are clinical reasons for issuing medical certificates, well patients who consult you in your clinic should only be given certificates of attendance for their employers.



**2 The issuance or contents of a medical certificate ought not to be influenced by extraneous considerations such as the individual or organisation which initiated the request, who pays for the consultation, the benefits the patients may receive, employers' preferences or any other factors outside of medical considerations.**



It is inappropriate to issue medical certificates to patients of durations that are too short for the illnesses or injuries suffered. Sometimes doctors limit their medical certificates for workers according to requirements of the Ministry of Manpower for employers to report injuries, so that the employers do not have to report.

Considering employers' preferences in such situations is wrong. Even if you arrange for reviews at short intervals, you should consider that having patients come back frequently when not clinically necessary would not be in the best interests of the patients.

Another example of the wrong use of medical certification is to indicate a longer duration on a medical certificate than is necessary, or when they are not strictly necessary at all, simply because patients may wish to avoid National Service fitness tests or recalls.



### 3 **Medical certificates ought to be given directly to patients themselves.**



This is because your responsibility is to your patients and no other party. It is the patients' responsibility to hand the medical certificates to the appropriate persons at their places of work or study. Only if patients specifically request, or consent to it, should you send medical certificates to their employers.

The medical certificate which is issued should specify the expected period of illness being covered and, where necessary, whether the severity of the illness renders the person unfit to attend court.





- 4 **If you are certifying that the patients are fit to return to work but with limitations on their level of activity at work, to the best of your ability you need to be assured that the patients' work conditions allow this and that duties appropriate to their limitations are in fact available.**



If you are certifying a limitation of activity at work, the description of the limitations should be as detailed as possible (beyond merely the use of overly-broad short phrases such as “light duties”) so as to help the employers understand the constraints faced by your patients. You need to establish within your ability, that the limited work you recommend is actually available at the workplace for your recommendations to be meaningful. There being a wide range of “light duties”, it is possible that even if the employers are trying to be helpful, the lightest work available for the patients is beyond their limited capabilities while they are ill or injured. This could be harmful to them. A typical example is a construction site worker for whom the lightest duty available may be to push a wheelbarrow of materials rather than to actually do climbing and building. While this may seem reasonable to the employer, if an injury to a limb is significant, this activity may be completely inappropriate and could aggravate the patients' conditions. Hence, if you know that appropriate “light duty” is not available, you should order complete rest.



**5 The date of issue of medical certificates has to be the day of consultation or medical treatment. Post or back-dating the day of issue is not allowed.**



For the period of coverage, generally the start date is the day of issue. However, the date you begin coverage may be before the date of issue where it is clear that the patients' absence from work prior to the date of issue is consistent with their clinical presentation.

The period of coverage of medical certificates should generally not begin after the date of issue. The principle is that coverage should not be "anticipatory" in nature. Although coverage ought to start at least from the date of issue of the medical certificate, there may be sensible reasons for you to post-date the start of coverage, such as when patients see you after work on the day of issue, thus not requiring coverage on that day, or seeing you at the start of a weekend or public holiday, when coverage is also not necessary. If you post-date the coverage of a medical certificate, you should document your reasons for doing so.



**6 You must not amend the particulars on medical certificates issued by other doctors. If you disagree with the provisions of other doctors' medical certificates, you may issue new medical certificates. However, you must only do this after assessing the patients yourself to determine that this is justified on medical grounds and, where appropriate and possible, consulting the other doctors before you do so.**



There may be instances where you are asked to review patients who bear medical certificates issued by other doctors but you disagree with the provisions of the medical certificates. Your disagreement should not be based on suspicion (for example, suspicion that a national serviceman has feigned an illness and is malingering) but ought to be based on your own clinical assessment of the patients.

It is often helpful for you to discuss the cases with the doctors who issued the original certificates, provided you are able to contact them, in order to understand their rationale for the certificates they provided. Sometimes they may have information or a perspective that is not obvious to you that would justify the original certificates. On the other hand, having heard your current assessment of the patients, the doctors may agree that your proposed changes are justified and agree with you.



Sometimes patients may have obtained the medical certificates while abroad, in which case there may be practical difficulties in contacting the doctors. How much effort you should make to contact the original doctors depends on how likely it is that they have information that would be material to your current assessment of the patients.

Once you determine that changes in the provisions of the medical certificates are medically justified, you may issue new medical certificates. You should not simply amend the provisions on the original certificates as they were not issued by you and you do not have the right to alter any detail on them.

**7 For medical confidentiality you ought not to disclose the patients' diagnoses on their medical certificates unless patients have consented to this.**



In general, the persons to whom patients hand their medical certificates at their places of work or study do not have an automatic right to know their staff or students' confidential medical information. As with all third party disclosures, patients need to consent to the disclosures.

Sometimes employers will contact doctors to try to find out more about the patients' medical conditions that are revealed on the medical certificates. Again, unless you have patients' consent, such information cannot be revealed.





- 8 **You need to sign medical certificates personally. If someone has filled in the details on your behalf, you need to be satisfied that the details are correct before signing.**



Medical certificates are documents that carry professional and legal implications. Hence you have to sign them personally and not allow someone else to sign them on your behalf. If you signed a medical certificate with incorrect details written on your behalf, you would still be responsible for the information filled in.



9 **You have to ensure that however medical certificates are generated, there are security measures and protocols to prevent fraudulent issuance of the certificates.**



Medical certificates may be generated entirely on paper or electronically. The risk of fraudulent use may be higher when they are input into a computer system to be printed out elsewhere. Where you are in a position to control the systems in use, you need to ensure that no one can issue medical certificates without your knowledge. If you are not in control of the systems, your responsibility would be to abide by the security protocols in place so that you do not inadvertently provide an unauthorised person access to the system.