

**CODE OF MEDICAL PRACTICE AND BYLAWS
ASSOCIATION OF AMERICAN PHYSICIANS AND SURGEONS**

THE PRINCIPLES OF MEDICAL ETHICS OF THE ASSOCIATION OF AMERICAN PHYSICIANS AND SURGEONS

PREAMBLE: Being aware that a physician's religious and moral principles are the source of his ethical behavior, this Association adopts the following statement of principles of professional conduct. The principal objective of the ethical physician in his practice is to treat human illness while maintaining the highest respect for the dignity of his patient.

- (1) The physician's first professional obligation is to his patient, then to his profession. His ethical obligation to his community is the same as that of any other citizen.
- (2) The physician should conduct himself at all times with dignity, integrity, honesty and diligence in the practice of his profession so that he will engender the confidence of his patients and respect of his colleagues.
- (3) The physician should not condone the taking of human life in the practice of his profession, but at all times respect the sanctity of human life and seek to preserve or improve the quality of life.
- (4) The physician should not dispose of his services under terms or conditions which tend to interfere with or impair the free and complete exercise of his medical judgment and skill or tend to cause a deterioration of the quality of medical care.
- (5) The physician may choose whom he will treat, but having undertaken the care of a patient, he should not discontinue his care without adequate notice.
- (6) The physician should limit the source of his professional income to medical services actually rendered by him, or under his supervision, to his patients. He should neither pay nor receive a commission for referral of patients. The value of professional services should be determined only by mutual agreement between the physician and patient, and in no other way.
- (7) The physician should personally counsel another practitioner who behaves incompetently or unethically and report persistence of that conduct to the proper authority.
- (8) The physician should seek advice and consultation with ethical colleagues whenever the quality of medical care may be enhanced or whenever consultation is requested by the patient.
- (9) The special importance of the patient's privacy in medical matters requires that the physician never reveal either the confidences entrusted to him in the course of medical attendance, or deficiencies he may observe in the character of the patient, releasing information only with the consent of the patient and with due consideration of the mandate of law.
- (10) The physician should constantly seek factual and reliable information that will assist him in the treatment of illness.
- (11) Professional reputation is the major source of patient referral. The physician should be circumspect and restrained in dealing with the communication media, always avoiding self-aggrandizement.

CODE OF MEDICAL PRACTICE

The members of this Association stand united in their conviction:

- a. That medical care can never be without cost to someone inasmuch as nothing is available to man in inexhaustible supply, and resources of time, energy, and material devoted to medical use cannot be used for other purposes;
- b. That health, like happiness, is by its nature personal and is primarily an interest of the individual (as contrasted with environmental factors bearing on health, some of which may be primary interests of society);
- c. That responsibility and control are by their nature inseparable, and that every right or privilege carries with it a corresponding obligation or responsibility;
- d. That certain modes of providing medical services to the individual are inimical to the interests of the patient and the public, detrimental to the quality of the service, and destructive to the professional nature of medical practice. Such objectionable modes include:
 1. Any method that (a) implies that health or physical well-being **can** be sold, provided, conferred, or otherwise obtained without **primary** responsibility of the individual to achieve it through his own adjustment to situation and circumstance, his own effort, and his own bodily processes; or (b) promises or pretends to shift such primary responsibility to any other person or agency, or (c) implies that professional medical care **can** be substituted for, or be effective in the absence of, the basic natural necessities of life;
 2. Any method that implies that professional medical services can be standardized or mass-produced, or that the medical needs of any individual can be determined "scientifically" or otherwise without primary regard to his unique personal capacities and limitations (physical, psychological, educational, social and economic) and his personal preferences;

3. Any method that involves financial transactions wherein:

(a) Price-fixing is encouraged,

(b) Professional services are evaluated in terms of the technical procedures that are involved, or

(c) The value of a doctor's professional service to his patient is determined, or his fees dictated, by any process except mutual agreement between him and his patient, subject to legal proceedings in case of dispute;

4. Any method that requires any individual to pay brokerage on medical services, or permits any third party to derive a profit from the financial transactions between a patient and his doctor;

5. Any method whereby any person is required, through taxation or otherwise, (a) to give involuntary financial support to any system of practice or to any practitioner whose services he does not use, or (b) to pay for services unrelated to his complaint as a condition to obtaining the services he desires;

6. Any method that implies that truth or scientific validity can be established by fiat or by governmental edict:

(a) By limiting academic freedom,

(b) By governmental discrimination, upholding any health doctrine or system of practice, or

(c) By giving to any medical or scientific dictum the force of law except insofar as may be unavoidable in protecting persons who take reasonable precautions of self-protection against manifest danger from communicable disease;

7. Any method that degrades the standards of medical care by permitting anyone having lesser qualifications than are required for licensure to practice medicine:

(a) To assume responsibility for, or control over, any investigation made for purposes of diagnosis, or upon which decisions regarding treatment will be based, or

(b) To assume responsibility for the direction of treatment;

8. Any method that infringes the patient's right to the complete fidelity and undivided loyalty of the practitioner to whom he entrusts his welfare in anyway, for example:

(a) By permitting any third party, by reason of financial interest or otherwise, to influence what the doctor does for his patient, or to interfere in the free exercise of the doctor's best professional judgment in the patient's behalf,

(b) By making the doctor responsible as agent or otherwise, to any person or agency other than the patient or to one who stands **in loco parentis** to the patient, except to such minimum degree as may be necessary in controlling contagious disease, or

(c) By limiting the doctor's freedom to withdraw whenever he is asked to assume or to share responsibility for anything he thinks contrary to the patient's interest.

9. Any method that infringes the inalienable right of any individual to personal privacy and to seek health in his own way (subject only to the authority of the government to take such reasonable additional steps as may be necessary in protecting others who take reasonable precautions of self-protection against manifest danger from communicable disease or intolerable social maladjustment):

(a) By subjecting him to assault or to uninvited investigation in the name of medical care,

(b) By subjecting him to pressure to accept medical care he does not want,

(c) By impairment or prejudice of his freedom to select at the time he wants medical help, the particular practitioner to whom he will entrust his welfare,

(d) By impairment or prejudice of his freedom to decide when, to what extent, and for how long he will follow the advice or accept the help of any practitioner, or

(e) In any other way.

ARTICLE I NAME AND OBJECTIVES

Section 1.

THE NAME OF THIS ORGANIZATION SHALL BE THE ASSOCIATION OF AMERICAN PHYSICIANS AND SURGEONS.

PREAMBLE: The purpose of this Association is to analyze the medical profession's problems, formulate actions to improve medical care for all Americans, preserve freedom of choice for patient and doctor, protect the practice of private medicine, and educate physicians and the public to recognize and to resist schemes that would weaken our free-choice system of medical care.

ARTICLE II MEMBERSHIP

Section 1. Types of Membership

(A) **REGULAR MEMBER.** Any physician who holds the degree of Doctor of Medicine or Doctor of Osteopathy may apply for Regular membership.

(B) **EMERITUS MEMBER.** Any member who has attained the age of 72 years or who, for reasons beyond his control, has been forced to retire or substantially curtail his practice, may, upon approval of the Board of Directors, be granted Emeritus membership providing that he was a member in good standing for the five years immediately preceding, or less, at the discretion of the Board.

(C) **INTERN AND RESIDENT MEMBER.** Any physician in a recognized hospital training program who holds an M.D. or D.O. degree may apply for an Intern or Resident membership.

(D) **STUDENT MEMBER.** A student matriculated in, and currently attending an approved medical or osteopathic school, may apply for a Student membership, without vote in Assembly.

(E) **LIFE MEMBER.** Any regular or Emeritus member in good standing, upon payment within any five consecutive years of such sum as may be established by the Assembly may become a Life member of this Association. Life members shall enjoy all privileges of regular members including voice and vote at meetings, and eligibility for election to any office in the Association, but shall no longer be required to pay the annual dues of regular membership.

(F) **ASSOCIATE MEMBER.** (1) Any person working in the medical care industry (other than an M.D. or D.O.) may apply for membership as a Professional Associate member. (2) Any person who shares the beliefs and principles of the Association may apply for membership as an Associate member.

Section 2. Application for Membership

Application for membership shall be made in writing on such form as shall be prescribed by the Board of Directors. Every applicant shall agree to abide by the Code of Medical Practice, Principles of Medical Ethics, and Bylaws of the Association.

Section 3. Dues

Membership dues in the Association, which includes subscription to the official publications, shall be payable with the application, and annually thereafter on the anniversary of the first payment. Dues shall be established by the Board of Directors. Failure to pay dues within ninety days after the due date shall be cause for termination of membership. Add: Voting Privileges. All members with the exception of Student, Professional Associate, and Associate members shall have full voting privileges at all meetings of the Assembly.

Section 4. Discipline of Members

Members shall be subject to suspension, expulsion, or other disciplinary measure, in proper cases. Charges against a member shall be made in writing to the Committee on Ethical Conduct of this Association. A copy of the charges shall be forthwith served on the member, and the time set for hearing shall be not later than the next regular meeting of the Committee.

The decision of the Committee shall be made and reported to all interested parties within five days after the hearing is closed, and the decision and recommendation shall be reported to the membership of the Association at its next regular meeting. Any involved party has a right to appeal the decision of the Committee to the Board of Directors.

ARTICLE III OFFICERS

Section 1. Officers

The officers of this Association shall be the President, President-Elect, Secretary and Treasurer. All officers shall be members in good standing. Officers shall be elected by and represent the membership at large.

Section 2. President

The President shall be the Chief Executive Officer of the Association. He shall preside at all meetings of its members, and at all meetings of the Board of Directors.

Section 3. President-Elect

The President-Elect shall, in the absence of the President, discharge the duties of the office of President, and upon completion of his term assume the office of President.

Section 4. Secretary

The Secretary shall record, file and store in a prudent and safe manner, the minutes and proceedings of all duly called and official meetings; also, all other corporate records necessary to the operation of and of historical value to the Association. He shall attend to the giving of all notices required to be given.

Section 5. Treasurer

The Treasurer shall be charged with responsibility for the funds of the Association. He shall deposit them in such bank or banks as directed by the Board of Directors. He shall require indemnity for deposits of funds where, in his judgment or that of the Board of Directors, it is advisable to do so. He shall invest the funds of the Association if and as directed by the Board of Directors. He shall keep a record of all dues and other monies paid by members, and at all times have available to the officers and members of the Association such records as show the standing of each and every member and the financial condition of the Association and shall present the Assembly a financial statement in writing. He shall give a bond in amount and with such sureties as shall be determined by the Board of Directors.

Section 6. Term and Tenure

The term of all officers shall be for one year or until their successors are elected and qualified.

Section 7. Vacancies

A vacancy in any office shall be filled by the Board of Directors for the unexpired term, except as herein otherwise provided.

Section 8. Nomination and Election

A Nominating Committee appointed by the President and approved by the Board of Directors shall report in the official publication of the Association, not less than 60 days prior to the annual meeting, a slate of nominees for the offices of President-Elect, Secretary, and Treasurer. The minimal requirements for all nominees, including nominations from the floor, for officers and board members (see Article VI, Section 2) shall be: (1) Membership in AAPS for at least four (4) years; and (2) Attendance at a minimum of three (3) annual meetings of the assembly; and (3) Stated support of the AAPS Principles of Medical Ethics. Other nominations of qualified members willing to serve the Association if elected, may be presented from the floor at the annual meeting.

ARTICLE IV ANNUAL MEETING

Section 1. The Time of Meeting

The Board of Directors shall fix the time and place of the annual meeting.

Section 2. Notice of Meeting

Notice of the time and place of the annual meeting shall be given in the official publication of the Association not less than 60 days prior thereto. If there be no official publication, then the notice shall be given by mail addressed to each member.

ARTICLE V ASSEMBLY

Section 1. Membership

The Assembly shall consist of all regular, life, emeritus, intern and resident members in good standing in attendance at the annual meeting.

Section 2. Meetings

The Assembly shall meet at the time and place of the annual meeting.

Section 3. Quorum

More than 50% of the members registering for the annual meeting shall constitute a quorum of the Assembly.

Section 4. Resolutions

Any member may submit a resolution for consideration and action by the Assembly according to procedures determined by a standing committee, the Resolutions Committee. Its Chairman will announce rules for submission subject to approval of the Assembly, and at least six months in advance of any meeting of the Assembly.

Section 5. Referendum

A referendum shall be directed by the Board of Directors at the first meeting thereof, following the filing with the Secretary of a written request, signed by at least 10% of the members of the Association entitled to vote, representing at least five states.

ARTICLE VI BOARD OF DIRECTORS

Section 1. Members

The Board of Directors shall consist of the President, the President-Elect, the Secretary, the Treasurer, the Immediate Past-President, and twelve (12) members of the Assembly.

Section 2. Election

(1) At the annual meeting, the Assembly shall elect from their membership at large twelve (12) members to the Board of Directors. These members of the Board of Directors shall be elected for three year terms (no Director shall serve more than two consecutive terms) to the end that substantially one-third of the Board of Directors chosen from said body shall be elected each year. Election shall be by majority vote.

(2) Proper tally sheets shall be provided by the Secretary. Following an election the Secretary shall preserve all tally sheets until such time as the elected members accept or decline. In event an elected member declines to serve, then the nominee receiving the next highest number of votes shall be declared elected.

Section 3. Meetings

The Board of Directors shall meet upon the call of the President, or upon written call by three Directors, at such time and place as may be designated, and shall meet in regular session at the time and place of the annual meeting.

Section 4. Powers and Duties

The Board of Directors shall administer the affairs of the Association, subject at all times to the control of the Assembly as may be provided by the ByLaws, and shall have such other powers and duties as are from time to time designated to it by the authority of the Assembly.

Section 5. Referendum

The Board may submit by referendum to the membership at large any question within its jurisdiction affecting the affairs and management of this Association.

Section 6. Vacancies

A vacancy in the Assembly membership of the Board of Directors shall be filled by appointment by the Board. One appointed to fill a vacancy in the Board of Directors shall have like qualifications and eligibility as the member whom he succeeds, and shall fill out the unexpired term for which his predecessor was elected.

ARTICLE VII EXECUTIVE COMMITTEE

Section 1. Members

The Executive Committee shall consist of the President, the President-Elect, the Immediate Past President, the Secretary, the Treasurer, and two (2) members from the Board, elected by the Board.

Section 2. Meetings

The Executive Committee shall meet in person or by telephone conference upon the call of the President at such time and place as he may designate.

Section 3. Powers and Duties

The Executive Committee shall administer the affairs of the Association in the interim between meetings of the Board of Directors, and shall have such other powers as may be from time to time conferred upon it.

Section 4. Quorum

A quorum shall be four (4) members. A majority vote of the entire committee shall be required to adopt a motion.

ARTICLE VIII COMMITTEES

Section 1. Authorization

The Assembly or Board of Directors of this Association shall from time to time authorize and provide for such standing and special committees as is deemed necessary. The promulgating authority shall fix terms and tenure; establish duty and authority; require reports; make disposition of reports and recommendations; and dismiss or terminate committees upon their own motion. The Secretary shall keep a list of committees, their duties and their membership.

Section 2. Appointment

The President, with the advice and approval of the Board of Directors, shall appoint all standing and special committees. The President may serve on any committee as an ex-officio member except the Nominating Committee. No standing or special committee except the Nominating Committee shall have authority to take final action on any matter without approval and due concurrence of the Board of Directors.

ARTICLE IX PROXY

No proxy vote shall be permitted in any meeting of the Association including committee meetings. This restriction may be waived by a two-thirds vote of the other members present at such meeting, but only for that meeting.

ARTICLE X COMPENSATION

If, in the judgment of the Board of Directors, a member or members are called upon to perform duties requiring such a portion of their time as should be compensated, the Board at its discretion shall so provide.

ARTICLE XI GENERAL AUTHORITY

Section 1.

Any matter proper for consideration of the Board of Directors, or the Assembly, the government and control of the Association, not herein specifically provided for or concerning which no procedure, control, or limitation is found herein or in the Articles of Incorporation or applicable law, may be considered, determined, and decided at the session at which such subject is presented. The intent of this provision is that it shall not be held that for want of an applicable Bylaw such subject may not be heard, considered, and determined.

Section 2.

No officer, agent or other representative of the Association shall have authority to bind it in any respect whatever except as such authority is directly conferred by the Articles of Incorporation and these Bylaws or is necessarily implied as an incident to the discharge of such functions, duties, and authority as are expressly conferred upon him.

ARTICLE XII OFFICIAL PUBLICATION

The Board of Directors may arrange for the publication of a journal or periodical to be the official periodical of the Association, and take such steps as may be necessary to carry it on as such.

ARTICLE XIII STATE BRANCHES

Section 1.

Interested members of the national organization may arrange a meeting to organize a state-wide branch. All AAPS members in the state shall be notified of such meeting and invited to attend. The state branch shall then be organized by eligible members under such constitution, rules, regulations, and Bylaws as they may adopt; provided, always, that they shall not be in conflict nor inconsistent with the provisions of the Articles of Incorporation, Bylaws, rules, and code of medical ethics of this Association. The state branch shall as a minimum elect a state chairman and a state membership chairman.

Section 2.

If there be no state branch, the President of the Association shall appoint a chairman and a membership chairman for each state with membership in the Association.

ARTICLE XIV AUXILIARY

There may be an Auxiliary to the Association of American Physicians and Surgeons. Spouses of members in good standing of the AAPS in any category are eligible to apply for membership. The Auxiliary shall draw up its own constitution and Bylaws, subject to the approval of the Board of Directors of AAPS.

One member of the Board of Directors of AAPS shall be appointed by the President of AAPS to act for purposes of official liaison with the Auxiliary.

The Auxiliary may designate a member for the purpose of liaison with the AAPS Board. This liaison officer, with other Auxiliary members, as desired, may attend the AAPS Board meetings and shall report the activities of the Auxiliary to the Board at the interim and Annual meetings.

ARTICLE XV FISCAL YEAR

The fiscal year of the Association shall begin on November 1 each year.

ARTICLE XVI SEAL

The Association shall have a seal, which shall consist of a circular disc within the circumference of which are the words, "Assn. Am. Physicians & Surgeons, Inc." and in the center of which shall appear the word "SEAL". The seal shall be in the custody of the Secretary and shall be affixed to the instruments and documents of the Association when appropriate and necessary.

ARTICLE XVII AMENDMENTS

These Bylaws may be amended, modified, or rescinded at the Annual meeting by a two-thirds affirmative vote of the Assembly. Notice of proposed amendments to be offered at the Annual meeting shall be published in the approved periodical of the Association, or, if there be none, by mail with a copy of the proposed amendments, at least 60 days before the meeting at which they are to be offered. Amendments may be proposed by written petition of 10 members, or by a motion of the Assembly.

ARTICLE XVIII RULES OF ORDER

Any order of business of the Association, or any procedural question arising in and out of its deliberations, not specifically covered by these Bylaws, shall be resolved by recourse to the latest available edition of "Standard Code of Parliamentary Procedure" by Sturgis.

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1601 N. Tucson, Blvd. / Suite 9, Tucson, AZ 85716
1-800-635-1196

