ROYAL AUSTRALASIAN COLLEGE OF SURGEONS

Patron: H.R.H. The Prince of Wales



College Vice President Telephone: C/- +61 3 9276 7429 Facsimile: C/- +61 3 9276 7483 Email: college.vp@surgeons.org

18 May 2012

Dr Joanne Katsoris Executive Officer Medical, Australian Health Practitioner Regulation Authority GPO Box 9958 Melbourne VIC 3001

Dear Dr Katsoris,

RE: Draft supplementary guidelines on cosmetic medical and surgical procedures for 'Good Medical Practice: A code of conduct for doctors in Australia'

The Royal Australasian College of Surgeons (RACS) notes that the Medical Board of Australia (MBA) has received a referral from the Australian Health Workforce Ministerial Council about the report titled *Cosmetic Medical and Surgical Procedures – A National Framework*, which has been commissioned and subsequently endorsed by the Australian Health Ministers' Conference (AHMC). The report proposes various amendments to the MBA's code of conduct for Australian doctors, *Good Medical Practice*.

RACS supports the amendments as far as they go but is disappointed that patient choice and indeed patient protection is potentially compromised by two major deficiencies in the amendments. These deficiencies were also identified by the Australian Society of Plastic Surgeons (ASPS), a specialist surgical society affiliated with RACS. RACS is aware of the ASPS submission on this matter and fully supports that submission.

The deficiencies relate to:

- 1) the failure to require accurate, non-misleading information with respect to the qualifications of practitioners; and
- 2) ensuring the safety of office-based procedures.

The community belief is that a practitioner who advertises themselves as a surgeon is someone who holds a recognised postgraduate qualification in surgery. In Australia, this equates to holding a FRACS qualification. Cosmetic "surgeons" do not hold a FRACS qualification yet this is never revealed.

Obtaining and continuing to hold a FRACS qualification requires an individual to achieve and maintain certain standards of behaviour, knowledge and performance. Over time this has ensured great community trust in surgeons. Non specialist surgeons have sought to capitalise on this hard earned prestige and mislead patients by not disclosing that they have not achieved specialist surgical recognition, i.e. they do not hold a FRACS qualification. RACS believes that deception by omission is just as misleading as deception by commission and should accordingly be addressed in the proposed amendments.

Surgical procedures performed in hospitals are highly regulated and continually evolving, in order to enhance the safety of patients. RACS supports these important safety measures. The failure to thus far extend these important safety regulations to office-based procedures is regrettable and potentially dangerous for patients. The failure to address this in the amendments is regarded by RACS as an opportunity lost.

The RACS submission is that the proposed amendments are deficient and these deficiencies should be addressed to better protect patients.

Yours sincerely,

PROFESSOR MICHAEL GRIGG COLLEGE VICE PRESIDENT