PROTECTING PATIENTS FROM SEXUAL MISCONDUCT

Under state law the North Carolina Medical Board has the authority to:

- Deny licensure to any physician, physician assistant or other provider licensed by NCMB if that individual has been convicted of a felony sex crime or revoke the license of any currently licensed professional who is convicted of one.
- Investigate allegations of sexual misconduct and, provided sufficient evidence is obtained, suspend or restrict the provider’s authority to practice.

DUTY TO REPORT

North Carolina’s “Duty to Report” law requires physicians and PAs to notify NCMB if they are aware that another licensed medical professional has engaged in sexual activities with patients.

- Professionals making a report are not required to have absolute proof of the sexual misconduct.
- A report should be made if a medical professional “reasonably believes” that misconduct has occurred.
- Belief that misconduct has occurred may be based on the medical professional’s own observations, or on reports from office staff or others.

REPORTING MISCONDUCT

Patients are strongly encouraged to report sexual misconduct by a medical provider. Filing a complaint with NCMB gives the medical board the opportunity to hold the provider accountable.

Some of the behaviors described in the brochure may be unlawful as well as unethical. Patients should also consider reporting to local law enforcement.

Submit a complaint to NCMB at: ncmedboard.org/complaints
SEX AND MEDICAL CARE NEVER GO TOGETHER

It is inappropriate and unethical for a medical professional to initiate sexual contact under the pretext of providing medical care.

THIS INCLUDES:

- Suggesting to the patient that sexual contact is necessary or will benefit the patient’s health
- Sexual contact that occurs while a patient is incapacitated

PATIENTS CANNOT “CONSENT”

Sexual activity with a medical professional is never appropriate. This is true even if the patient suggests starting a sexual relationship or accepts a provider’s invitation to begin one.

A medical professional is always in a position of power when interacting with a patient. As a result, a patient cannot give true consent.

RECOGNIZING MISCONDUCT

It is not always easy to tell if a medical professional is behaving inappropriately. He or she may start by crossing over relatively minor boundaries to test how a patient might respond to sexual advances.

SOME EXAMPLES OF “RED FLAG” BEHAVIORS BY A MEDICAL PROFESSIONAL INCLUDE:

- Telling sexual jokes to patients
- Leering at patients’ breasts or other sexual body parts
- Invading patients’ personal space or “accidentally” brushing against patients’ bodies
- Telling patients about the provider’s own love life or sexual preferences
- Offering patients gifts or personal favors
- Contacting patients for non-medical reasons
- Suggesting that medical appointments be scheduled outside of typical office hours, or away from the practice
- Inviting patients to lunch, dinner or other “date-like” activities

MORE SERIOUS EXAMPLES INCLUDE:

- Asking for details of patients’ sexual experiences and preferences when there is no valid medical reason
- Performing a genital examination without the use of gloves
- Performing an intimate examination (genitals, breasts) when there is no medical need
- Touching a patient in a way that seems sexual. This includes:
  - Groping and touching of the breasts, buttocks or genitals
  - Kissing
  - Oral to genital contact
  - Penetrative sexual contact

NCMB provides assistance to victims of sexual assault. Learn more at: ncmedboard.org/victimservices
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