

Title: Code of Ethics for the American Association of Physicists in Medicine (Revised):
Report of Task Group 109

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Abstract:

The American Association of Physicists in Medicine (AAPM) has established a comprehensive Code of Ethics for its members. The Code is a formal part of AAPM governance, maintained as Professional Policy 24, and includes both principles of ethical practice and the rules by which a complaint will be adjudicated. The structure and content of the Code have been crafted to also serve the much broader purpose of giving practical ethical guidance to AAPM members for making sound decisions in their professional lives.

The Code is structured in four major sections: a Preamble, a set of ten guiding Principles, Guidelines that elucidate the application of the Principles in various practice settings, and the formal Complaint process. Guidelines have been included to address evolving social and cultural norms, such as the use of social media and the broadening scope of considerations important in an evolving workplace.

The document presented here is the first major revision of the AAPM Code of Ethics since 2008. This revision was approved by the Board of Directors to become effective 1 January 2019.

Keywords: Code of Ethics, AAPM, Task Group Report, TG109, Medical Physics, Professionalism

AAPM Code of Ethics

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HOW TO USE THIS DOCUMENT

This document is organized into four sections.

Section 1 is a Preamble.

Section 2 contains the Principles; these establish the framework for the Members' ethical conduct. The ten Principles in the AAPM Code of Ethics are based on core values drawn from the Medical Ethics community such as beneficence, autonomy, justice, prudence, and honesty. Every Member's professional conduct should be consistent with these Principles. The Principles are equal in significance and are ordered to follow a logical progression from consideration of the patient, to relationships with colleagues, to conduct within the broader profession.

Section 3 contains Guidelines for how to interpret the Principles in the Member's professional activities. This section provides guidance, and should not be perceived as a set of rules. The guidance is organized in subsections by relevance to specific professional settings. Subsection I applies to all Members regardless of practice setting and should be read and internalized by all Members. Subsections II through V provide additional guidance applicable to specific settings.

Section 4 provides details of a structured process for the submission and adjudication of an ethics complaint regarding a Member's conduct. Any individual who considers filing an ethics complaint regarding a Member should consult this Section.

Every Member should be familiar with the Principles, and should at a minimum review the first subsection of Section 3. When faced with an ethical challenge, the context-relevant guidance in Section 3 can provide assistance in managing the ethical challenge. If the ethical challenge involves the conduct of another Member and good-faith efforts have proven insufficient to address the ethical concern, the Member should consult the Complaint Procedure in Section 4 to engage the assistance of the Ethics Committee.

The following terms are used in this document:

- “Must” and “must not”: Used to indicate that adherence to the recommendation is considered necessary to conform to this Code of Ethics.
- “Should” and “should not”: Used to indicate a prudent practice to which exceptions may occasionally be made in appropriate circumstances.

AAPM Code of Ethics

SECTION 1. PREAMBLE

The American Association of Physicists in Medicine (AAPM) is a U.S.-based organization in medical physics, a broadly based scientific and professional discipline encompassing physics principles and their application in biology and medicine. AAPM's mission is to advance medicine through excellence in the science, education, and professional practice of medical physics. The AAPM represents over 8,500 medical physicist Members involved in therapeutic radiation oncology, diagnostic radiology, nuclear medicine, academia, research, industry, and federal and state regulatory activities.

The professionals represented by AAPM play a key role in the development and use of advanced technologies for safe and effective patient care. This places on each Member a particular responsibility to conduct all of their work with integrity and high quality. Furthermore, every AAPM Member influences the way the profession is presented to the public and to the organizations we serve. The quality of our work and the way we behave determine how the public perceives the medical physics profession. As such, AAPM Members should conform to high standards of ethical, legal, and professional conduct. Any activity that fails to conform to these standards compromises the Member's personal integrity and reflects poorly on the AAPM, the field of medical physics, and healthcare in general.

The following Professional Policy of the AAPM articulates a set of core values intended to aid all Members and those conducting business with the AAPM (Corporate Affiliates) in the ethical conduct of their professional affairs. The Principles, augmented by the more situation-specific Guidelines, are not a rigid set of laws but rather are meant to provide to Members and Corporate Affiliates a framework for making ethically informed choices as to how they conduct themselves in relationship to patients, colleagues, and the public. This document also sets forth the Procedure by which complaints are evaluated and resolved by the AAPM.

All Members of the AAPM are expected to adhere to this Code of Ethics. There may be other codes of conduct to which the Member is bound. The Member bears the responsibility to harmonize these obligations. Members and Corporate Affiliates alike are reminded that they have a civic duty and moral obligation to report suspected illegal activity to the appropriate authorities.

SECTION 2. PRINCIPLES

- I. Members must hold as paramount the best interests of the patient under all circumstances.
- II. Members must strive to provide the best quality patient care and ensure the safety, privacy, and confidentiality of patients and research participants.
- III. Members must act with integrity in all aspects of their work.
- IV. Members must interact in an open, collegial, and respectful manner amongst themselves and in relation to other professionals, including those in training, and safeguard their confidences and privacy.
- V. Members must strive to be impartial in all professional interactions, and must disclose and formally manage any real, potential, or perceived conflicts of interest.
- VI. Members must strive to continuously maintain and improve their knowledge and skills while encouraging the professional development of their colleagues and of those under their supervision.
- VII. Members must operate within the limits of their knowledge, skills, and available resources in the provision of healthcare. Members must enable practices in which patients are provided the levels of medical physicist expertise and case-specific attention as appropriately supports the modalities of their care.
- VIII. Members must adhere to the legal and regulatory requirements that apply to the practice of their profession.
- IX. Members must support the ideals of justice and fairness in the provision of healthcare and allocation of limited healthcare resources.

- X. Members are professionally responsible and accountable for their practice, attitudes, and actions, including inactions and omissions.

SECTION 3. GUIDELINES

These Guidelines are intended to assist Members and Corporate Affiliates in interpreting and implementing the Principles outlined above. The Code of Ethics does not aim to provide specific actions for any specific or potential ethical dilemma; rather, it describes the ethical environment in which such actions and moral judgments can be fostered. The section on General Guidelines applies to all practice environments. Specific guidelines and clarifications as they might apply to various professional practice settings are offered in the subsequent sections.

I. General Guidelines for Professional Conduct

Professional work practice depends on the Members working together with patients and colleagues toward shared aims and with mutual respect to foster an environment where best work can flourish. This section outlines the core responsibilities and personal behavior standards expected by the AAPM Members and Corporate Affiliates to achieve professional work practice.

A. Responsibilities

a. Responsibility to Peers and to the Profession

Members have a responsibility to:

- support the profession and contribute to the knowledge and capability of the medical physics profession as a whole;

- improve public understanding of the role, function, and responsibilities of a medical physicist;
- establish the best possible practice environment;
- remain cognizant that their actions and inactions have effect not just in the present but may also carry weight as established precedent, with impact on both future patients and future colleagues; and
- conduct all their work with diligence and integrity .

b. Responsibility to the Public

Members must strive to improve the public welfare through:

- disseminating scientific knowledge in a fair and unbiased manner;
- supporting fair and just allocation of healthcare resources; and
- maintaining standards of privacy and confidentiality in all environments, including online communication.

c. Responsibility to the Employer

With any verbal or written contractual agreement, Members have the responsibility to understand the mission, philosophy, and goals of the organization with which the contract is made. Often, important aspects of an organization's culture can be ascertained by a critical assessment of the

organization's professional reporting structure, its staffing levels, the state and scope of its equipment and facilities, as well as other aspects of the organizational commitment of resources to quality.

Members and Corporate Affiliates must carefully weigh their employment decisions to ensure that they agree with and can ethically align themselves with the organizational viewpoint before entering into the contract. Once having entered into a contractual arrangement, Members and Corporate Affiliates must respect the organization's cultures, policies, and procedures. That respect must be balanced with ongoing adherence to the Principles. The onus is on each Member at all times to monitor whether the workplace is making demands of unacceptable personal behavior, and if so to take appropriate personal action to resolve the conflict.

B. Personal Behavior

Each Member's behavior reflects on the profession as a whole. Trust in the fidelity of the work and in the person performing the work is essential to the regard of the profession.

Members must:

- honestly represent their activities, services, and products delivered;
- truthfully and accurately document and report their academic and professional credentials;

- be mindful of how their online behavior may reflect on themselves and the profession and use social media in a professional manner;
- claim credit only for continuing education courses, programs, and sessions attended and completed; and
- claim recognition, credit, or remuneration only for services rendered or products delivered.

C. Work Environment

A culture of safety and inclusivity, fostered by an environment free of political, ideological, or religious pressures or constraints, contributes to a positive workplace where diverse perspectives, backgrounds, and experience are valued.

a. Diversity

Members should acknowledge that each individual is unique and respect individual differences. These differences include race, ethnicity, gender, sexual orientation, socio-economic status, age, education, physical abilities, religious beliefs, political beliefs, or other ideologies. A work environment that embraces diverse perspectives can lead to an increase in creativity and productivity.

b. Inclusivity

Members should strive to promote an environment where all parties, including those traditionally marginalized or excluded, feel a sense of belonging and are empowered to participate in the majority culture as full and valued members of the community. Members should use constructive and supportive language and maintain a respectful demeanor when interacting with all members of the professional community, including patients, research subjects, patients' family members, and other caregivers.

c. Discrimination

When acting in roles that carry management authority, Members must treat fairly and with respect all those with whom they have professional relationships, evaluating others based on professional merit alone. To prevent favoritism and discrimination it is essential to set appropriate criteria when assessing individuals for professional opportunities. Members must acknowledge and minimize bias to eliminate discrimination and promote fairness.

d. Harassment

Any behavior that contributes to a hostile, intimidating, and/or unwelcoming environment is a form of harassment and is unacceptable. Examples of harassment include verbal or physical abuse, bullying, demeaning comments, or any conduct that directly or indirectly contributes to a demeaning, threatening, or offensive environment.

e. Sexual Harassment

Any unwanted verbal or physical conduct of sexual nature is sexual harassment and is unacceptable, regardless of either party's gender or sexual orientation. Sexual harassment includes unwelcome sexual advances, requests for sexual favors, or other unwelcome verbal, visual, or physical conduct of a sexual nature.

f. Exploitative Relationships

Members must not exploit any person with whom they have a professional relationship, including relationships between educators and students or trainees. Exploitation can be, but is not limited to, coercing a person to perform work without equitable compensation, forcing a person to act against their will or consent, or creating working conditions where some person(s) is treated unfairly for the benefit of others.

D. General Workplace Ethics

The development of good professional practice depends upon high personal standards of conduct. Such standards rely on personal and professional integrity, professional responsibility and accountability, respect for professional boundaries, and advocacy.

a. Professional Relationships

All interactions with colleagues should be fair, honest, and respectful. Where appropriate, Members should strive to share their skill and experience, and to assist with the professional development of colleagues. Those who are in a supervisory position have an obligation to guide their associates.

When a Member assigns tasks within their scope of practice to support staff under the Member's supervision, such assignment does not absolve the Member of legal, ethical, or other professional responsibility for the quality of the practice or deliverables. The assigned task is in all ways the responsibility of the supervisor.

b. Competence

Members must:

- undertake only work that they are qualified to perform;
- be respectful and transparent about the limitations of their knowledge, skill, and experience; and
- seek additional education, training, or consultation before performing tasks for which they have not acquired competency.

c. Maintenance of Knowledge and Skills

Members must strive to improve their professional knowledge and skills, including but not limited to participation in relevant continuing education activities. Members should offer to share pertinent knowledge and skills with their colleagues as appropriate.

d. Resources

Members must act as responsible stewards of the healthcare resources entrusted to them by endeavoring to maintain an efficient and effective practice.

e. Response to Impaired or Incompetent Colleagues

Members should intercede to ensure the safety of any individual (public, patient, or colleague) if a colleague appears impaired or incompetent and it

is perceived that continued involvement by that colleague would jeopardize an individual's welfare. In some jurisdictions, reporting of an impaired colleague may be mandatory.

f. Communicating Incidents

In some jurisdictions, the reporting of certain adverse incidents is mandatory and, depending on the Member's role in the organization, the Member may bear responsibility for making that report in a timely manner. Situations can arise wherein the organization or powerful individuals within the organization forbid the mandatory reporting. This does not absolve the Member of the responsibility.

Members should encourage and support other healthcare professionals to report incidents. Lessons learned from incidents are critically important in minimizing the risk of future similar events. The success of this process relies on Members communicating unwanted or unexpected changes from normal that cause or have the potential to cause an adverse effect to a person or equipment.

g. Relationship with Regulators

Members must assist and cooperate with regulators in the performance of their duties in an honest and respectful manner. Members should embrace opportunities to collaborate with regulatory bodies in drafting regulations. Members must comply fully with regulatory requirements for which they bear responsibility by way of their role in an organization.

h. Whistleblower Protection

Members must respect the right of an individual (whistleblower) to report an unethical, fraudulent, or unacceptable behavior or practice. Members must not participate in or take punitive or retaliatory action against individuals who file such reports.

i. Peer Review

Members participating in any review process of an individual's or a group's work must ensure that the process is constructive for the reviewed professional and that it results in insight and recommendations that can directly contribute to assessing and potentially improving the reviewed professional's practice. The reviewer's primary professional obligation is to help the reviewed professional recognize how to improve their professional practice.

Members must be very clear when accepting a request to perform a review outside either a peer-to-peer request or the standard practices of a shared employer as to the structure and ground rules of the review. Members who contract or otherwise agree to perform such a third party review must be clear from the outset of the review process to whom the report will be made and to what extent the reviewed peer is engaged in the process. It is always preferable that the report be made privately to the peer physicist and shared with the third party only at the reviewed peer's discretion. If the report is to be made directly to third parties, the reviewer should not proceed without establishing appropriate ground rules of trust with the reviewed peer.

All information used to judge a reviewed professional's performance must be substantiated and used in good faith to help the reviewed professional; opinions based on reports other than what the reviewer has directly observed or experienced (hearsay), or opinions not supported by clear evidence must be disregarded.

j. Conflicts of Interest

A conflict of interest is a situation in which one's position of trust with a party is actually, or potentially, compromised by virtue of relationships with other parties and/or by self-interest. Conflict of interest is not inherently

unethical, but there is a risk that unethical behaviors can arise from incentives inherent in the conflict of interest. Conflicts may exist within an organization, a regulatory or accrediting body, an educational setting, in industry, or in clinical practice environments and may consist of financial, political, or personal interests. Conflicts of interest can be difficult for the conflicted individual to recognize, and for that reason it is useful to seek independent assessment of a situation in which decision-making affects multiple parties with whom the individual has authority.

While not all conflicts of interest must be avoided, Members must disclose conflicts of interest to any involved party and resolve or manage them appropriately. Many conflicts of interest can be mitigated by establishing well defined roles and boundaries or by having a conflict of interest management plan that is administered by an uninvolved party. When the conflicts of interest cannot be otherwise managed, the Members must recuse themselves from the specific activities. Where explicit procedures are in place for conflict of interest management, the Member must abide by them.

To ensure fairness and equity, Members should not participate in supervision, employment actions, evaluation, or the direct setting of salary or wages for an individual for whom the Member cannot be assured of

having reasonable objectivity because of a current or prior close personal relationship.

Regardless of how the conflict of interest is disclosed or managed, the responsibility remains with the Member to act in accordance with the AAPM Code of Ethics in all matters.

II. Clinical Ethics

Members who practice in a healthcare environment find themselves in a position to directly affect patient outcome and share the responsibility of the overall quality of the patient's diagnostic examination or treatment while under the medical facility's care. As such, they are ethically obliged to embrace patient welfare as their primary professional responsibility and place it above their own personal interests.

A. Responsibility to the Patients

- Members must respect the autonomy and dignity of all patients.
- Members should be cognizant of standards of patient privacy and confidentiality that must be maintained in all environments, including online. Where formal requirements exist, they must be honored. The absence of formal requirements does not constitute permission by omission.

- Members communicating to the media or public via any means should clearly state whether the information provided is based upon scientific studies, expert consensus, professional experience, or personal opinion.
- Members must engage in appropriate continuing medical physics education activities to maintain the knowledge and skills necessary to provide high quality care for patients.
- Members must regard patient interests as paramount when engaged in any education, research, or other activity.

B. Relationship with Caregivers and Other Healthcare Providers

Members must interact with caregivers and other healthcare professionals to achieve the primary goal of benefitting patients. Channels of communication must remain open to optimize patient outcome. Members should support the development and implementation of systems that facilitate communications with other disciplines involved in patient care.

C. Resources

Members should not routinely take upon themselves more work than can be sustainably performed by a single individual. Accepting responsibility for more work than the Member can safely perform may deprive patients of the medical physics services to which they are due. Members who are managers must respect the personal limitations of those they manage.

Members should not forgo proper testing and quality assurance due to inadequate provision of time or equipment. In situations where the hospital or supervisor will not provide the necessary resources of expertise, time, and equipment for a patient's care, it is incumbent on the Member to accurately represent the scope of work actually performed and be explicit about work that could not be performed. The Member's further responsibility is to advocate for structural changes which result in allocation of the required resources or, alternatively, recommend consideration of referral to a properly supported facility.

III. Research Ethics

Research has its own set of ethical obligations contained in federal, institutional, and professional guidelines. These obligations arise in the design and conduct of the research, collection and interpretation of the resulting data, confidentiality of records, publication of the results, management of intellectual property emanating from the research, and relationships between the research team and the financial sponsors.

A. Research Team

Members must:

- openly discuss the roles of individuals in the research team, as well as responsibilities and expectations for these individuals;
- discuss changes in roles or expectations and deal with these changes in an open and respectful manner;

- ensure that all data collected during a study are real and that the results are not fabricated, falsified, or plagiarized;
- ensure that experiments are adequately powered to support the conclusions;
- respect the confidentiality of research data; and
- obtain consent of the research team members prior to initiating processes for disclosure or dissemination of data to others.

B. Research Involving Human Participants

Members must:

- seek approval from the appropriate institutional review board for research performed with human participants;
- adhere to the applicable institutional rules for such research, the Helsinki Declaration¹ and the Belmont Report²; and
- protect the rights and welfare of the human subjects.

C. Research Involving Animal Participants

Members must:

- seek approval from the appropriate institutional animal care and use committee for research performed with animals;

¹World Medical Association Declaration of Helsinki: ethical principles for medical research involving human subjects. *JAMA*. 2013 Nov 27;310(20):2191-4.

²The Belmont Report: Ethical Principles and Guidelines for the Protection of Human Subjects of Research. Bethesda, Md.: The Commission, 1978.

- adhere to the Principles of Humane Experimental Technique³; and
- treat animal subjects humanely and with consideration for all aspects of their welfare.

D. Publication Ethics

Members who find themselves involved in any aspect of publishing (commercial, newsletter, editorial, or academic; as authors, reviewers, or editors) are expected to represent themselves and their subject matter with honesty and transparency. When Members are listing their published work, transparency requires disclosure of the existence and nature of the review process for the published work.

a. Authorship

- Members must adhere to the requirements of the publication to which they are submitting. Members should reserve authorship only for those who:
 - have contributed substantially to the conception and design, and/or acquisition of data, and/or analysis and interpretation of data;
 - were directly involved in the drafting and/or revising of the publication; and

³Russell, W M. S, and Rex L. Burch. The Principles of Humane Experimental Technique. London: Methuen, 1959

- have given final approval of the version to be submitted for review.
- Members must not plagiarize the work of others.
- Members must not self-plagiarize, or submit for publication with substantially similar material to two or more journals, unless the manuscript was rejected or the editors of all involved journals grant permission.
- Members should respect the peer review process by considering the concerns raised by previous reviewers before resubmitting their manuscript to another journal.

b. Declaration of Interests

- Members must explicitly declare all financial interests with respect to business or corporate entities when submitting manuscripts or giving presentations, even if such arrangements are tangential to the subject matter of the work. Such financial interests may include sponsorship, travel reimbursement, performance-based bonus incentives, or stock ownership.

c. Editorship and Peer Review

- Members acting as editors or reviewers:
 - should be aware of potential bias or conflict of interest and strive to deliver an impartial assessment of the work based on merit alone;
 - must declare and manage any conflicts of interest that could compromise their objectivity;
 - should ensure that the peer review process is objective, fair, and confidential;
 - are responsible for maintaining the dialogue, and any communication among participants, at a professional and respectful level throughout the review process;
 - must not use the unpublished results to benefit their own work or advancement; and
 - must not prevent publication of results in order to benefit their own work or advancement.

- Members acting as editors of non-peer reviewed publications must not knowingly publish falsified or plagiarized data.

E. Intellectual Property

Intellectual property describes the set of tangible and intangible assets owned by a person, company, or agency, and consists of patents, trade

secrets, copyrights, trademarks, industrial designs, algorithms, source code, know-how, or simply ideas.

Creative influence is the cornerstone of creativity and innovation. Without the appropriate citation or acknowledgment of the work of others, imitation of the work of others can result in plagiarism. All forms of plagiarism, including self-plagiarism, are dishonest and must be avoided.

Members must:

- be respectful and follow confidentiality agreements that protect intellectual property;
- be forthright in their reporting of public disclosures;
- abide by the contracts under which they developed intellectual property;
- properly designate all inventors when registering intellectual property; and
- provide truthful information on the associated patent applications.

IV. Education Ethics

Formal and informal educational settings present an environment in which the student or trainee will have the opportunity to absorb the intellectual and ethical atmosphere of the institution and its educators. It is therefore of paramount importance that educators exhibit the highest ethical standards and students or trainees begin the practice of ethical behavior that will guide them for the remainder of their careers.

In this Education Ethics section, the following definitions apply

- “Student or Trainee” refers to a person engaged in any educational or training program.
- “Educator” refers to any person responsible for the education or supervision of a Student or Trainee.

A. Educators

Educators have an obligation to contribute to the intellectual development of Students or Trainees and to support them in achieving their educational goals. They must guide Students or Trainees toward an efficient path to reaching these goals. Students or Trainees entrust their educational outcome in their Educators, advisers, and mentors.

a. Safe Environment

Educators must promote a safe environment for learning and must educate Students or Trainees regarding the hazards and methods to control and minimize potential risks.

b. Respect for Students or Trainees

Educators must interact with Students or Trainees in a supportive manner. Their verbal, nonverbal, and written communication with Students or Trainees should be constructive and reasoned, having the intent to enhance the education experience. Educators must support all Students' or Trainees' participation and foster an environment conducive to freedom of expression. Educators must give appropriate credit to Students or Trainees for their work and involvement in academic, research, or clinical accomplishments.

c. Equal Opportunity

Educators must fairly consider all Students or Trainees for participation in any program or for any benefits that may aid the Student or Trainee, including, but not limited to, attendance at scientific meetings or training programs, research projects, internships, and scholarships. Consideration must be free of discrimination and opportunities should be awarded based on academic and professional merit alone.

d. Student or Trainee Confidentiality

Educators must maintain appropriate confidentiality of Student or Trainee information, whether verbal or written.

e. Intimate Relationships Between Educators and Students or Trainees

Educators are accountable for ensuring that effective and appropriate relationships are maintained or managed so as not to impair objectivity, competence, or effectiveness in performing their function as Educators. This may involve disclosure of the relationship, re-arrangement of roles and responsibilities, or other steps. Educators should bear in mind that an intimate relationship with their Students or Trainees presents a conflict of interest.

f. Student or Trainee Program Completion

- Educators should encourage Students or Trainees to excel and provide the support necessary for successful completion of their program of study.

- Educators must document the Students' or Trainees' performance to support any decision for delay or failure for timely completion of the program as they are accountable for their progress.
- Educators must make fair evaluations of Students' or Trainees' efforts and document those evaluations in the Students' or Trainees' record when appropriate.
- The overall progress or advancement of the Students or Trainees supersedes any personal interest of the Educator or institution.

B. Students or Trainees

Students or Trainees in an educational or training program are in the privileged position of being supported in their professional and personal growth. To support their own success, they must be their own advocates and act with integrity and respect towards their Educators and their learning institution.

a. Respect for Educators and Fellow Students or Trainees

Students or Trainees must interact in a respectful manner to promote an educational environment conducive to freedom of expression and equal participation.

b. Respect for Institutional Property

Students or Trainees must obtain permission to use an Educator's or institution's information, data, or intellectual or physical property for their personal or professional use.

c. Acknowledgment of the Work of Others

Students or Trainees must represent their work truthfully by acknowledging outside contributions.

d. Intimate Relationships Between Students or Trainees and Educators

Students or Trainees should bear in mind that an intimate relationship with their Educators presents a conflict of interest.

V. Business/Government Ethics

Professional advancement often requires Members to change employers or collaborators. These include large and small private corporations, government organizations and agencies, and academic institutions. Members may also act as

entrepreneurs or be self-employed. The processes that Members engage in while navigating their professional paths must be governed by ethical personal and professional behavior.

A. Employment Ethics

a. Seeking or Changing Jobs

When seeking employment, Members must:

- act with respect and consideration for any existing parties and of their relationship(s) with the potential employer when considering a potential job opportunity;
- not intentionally undermine the employment of another person;
- seek positions only with the reasonable expectation of accepting a satisfactory offer, should one be made; and
- respond to and negotiate any offers made within a mutually agreed upon time frame.

Members should honor the mutual commitments they have made under the terms of their agreement once accepting an offer for employment.

b. Vacating a Position

Members are expected to give appropriate notice when vacating a position.

Members must leave all information for which compensation was made and must make a reasonable effort to facilitate an orderly transition of services upon leaving a position. Documentation must be left in an intelligible, legible order, in hard copy or digital format. All materials generated, as well as any related notes derived from that work may be the property of the paying entity. If that is the case, such materials must be left in the possession of the organization's management, unless other arrangements have been mutually agreed upon by all parties.

Members must disclose any ongoing regulatory violations or investigations pertaining to the position and be forthcoming with pertinent details.

c. Relationship with Recruiters

Members who are job candidates must communicate with recruiters openly, honestly, and with transparency.

Members who are recruiters must:

- faithfully and honestly represent job candidates to employers and employers to job candidates;

- receive permission from a job candidate for release of their resume (curriculum vitae) to each and every potential employer client; and
- maintain the confidentiality of a job search in each and every instance unless specifically released in writing from such confidentiality by the job candidate.

d. Hiring Employees

Members who are employers must:

- faithfully and honestly represent open positions;
- disclose pertinent information regarding open positions; and
- be open and honest about their requirements and expectations.

Confidentiality of the candidate must be respected.

Employers extending offers must provide the candidate a reasonable and clear amount of time to respond. By extending an offer, employers must suspend their recruitment activities by withholding offers to any competing candidates until their business with the first candidate is completed.

Employers must honor the terms of the agreement once an offer is accepted.

B. Member Interactions with Vendors

a. Purchasing of Equipment or Services

Members must base the purchase of a product or service on its merits and not be influenced by personal inducements. Promotional items, educational items, and modest gifts of a nominal value may be offered by a Vendor and accepted by a Member as a courtesy of business. Where legal or other restrictions on such exchanges exist within an organization that the Member represents (including government agencies), the Member must be aware of them and comply fully.

Consultation arrangements, gifts, grants, or other considerations in exchange for a sales transaction, constitute an inducement or the appearance of an inducement. Participation in such arrangements is unethical. Members must avoid being a party to such exchanges.

b. Accepting Gifts from Vendors

Members must be conscious of the potential appearance of their action when accepting promotional items, educational items, and modest gifts of a nominal value offered as a courtesy of business.

Where legal or other restrictions on such exchanges exist within an organization that the Member represents (including government agencies), the Member must be aware of them and comply fully.

c. Respecting Proprietary Information

Members must respect and hold confidential any corporate proprietary information. Where a formal nondisclosure agreement is in place, the Member must honor it.

d. Sponsorship of Investigator Research

Members must keep discussions for funding of research separate from discussions for purchase of services or equipment so that there is no real or perceived bias in obtaining research funds or making purchase decisions. Sponsorship of research must be acknowledged and disclosed in presentations and publications.

e. Contracted Work Arrangements Between Vendors and Members

Members entering into business agreements with vendors must delineate the scope and deliverable(s) of the work. Compensation (including honoraria) must be based on fair value for the work contracted.

Members must disclose affiliations and sponsorships when presenting or reporting on behalf of a vendor or agency. Any claims about a product must be objective and supported with data. The Member should make the extent of their involvement with the product or project clear.

f. Releasing Patient Information

Members must avoid disclosing identifiable patient information to vendors or agencies. Members must ensure compliance with patient privacy laws. Members must disclose when confidential patient information has not been removed prior to disseminating information. Vendors or agencies receiving confidential patient information must take measures to protect the confidentiality of all patient information and ensure compliance with patient privacy laws.

C. Corporate Affiliates and Members Employed by Vendors

a. Offering Gifts

Corporate Affiliates and Members involved in selling products must avoid offering consultation arrangements, gifts, or grants to an individual or organization that could be considered inducements to purchase a particular

product. Industry codes of ethics (e.g. ADVAMed⁴) should be carefully reviewed by Corporate Affiliates and Members for additional guidance.

When discussing products, Corporate Affiliates and Members should strive to be objective and to be able to support product claims with data.

b. Product or Service Marketing

Corporate Affiliates and Members must truthfully describe the product or service when engaging in sales communications and advertisements. They must honestly represent the performance of the product or service, including any known deficiencies. If a product is in development or not yet ready for clinical use, that information must be clearly stated.

c. Sponsorship of Research

Corporate Affiliates and Members involved in the sponsorship of external investigator research must keep discussions about research and educational grants separate from purchase of equipment or services.

⁴ Advanced Medical Technology Association <https://www.advamed.org/resource-center/advamed-code-ethics-interactions-health-care-professionals> (July 2010)

All grant submissions must be treated with an equal review process, independent from considerations of sales deals or other business transactions.

D. Members who are Self-Employed

In this Ethics of Self-Employment section, the following definitions apply:

- “Self-employment” refers broadly to all forms of employment or provision of services in which the Member has an ownership stake. In most cases the self-employed Member will do business as either a Contractor or a Consultant.
- “Contractor” refers to a Member who enters into a formal or informal arrangement with a client to provide routine services to the client in exchange for compensation. In this capacity the Contractor, as well as any employee(s) of the Contractor, interacts in the workplace in a way that is functionally identical to an employee of the client and all of the guidance relevant to employed practice in this Code applies.
- “Consultant” refers to a Member who provides a client with domain expertise and advice in exchange for compensation. Typically, Consultants are engaged by an organization to provide expert guidance in the making of decisions that can have broad impact on the structure, investments, and strategic priorities of the organization.

a. Contractor Ethics

The Contractor:

- should establish in cooperation with the client a framework for assuring that all contracted work is performed in a manner consistent with the client's employee policies and practices; and
- bears responsibility to establish formal means for avoiding conflicts of interest that might arise as a consequence of the Contractor's relationship with individuals or organizations with which the client may also have a relationship.

b. Consultant Ethics

The Consultant:

- bears responsibility to provide professional objectivity to the client;
and
- should be cognizant of the context in which a consultation is requested and take all necessary precautions in rendering advice that is in line with the Principles outlined in this Code of Ethics.

c. Moonlighting

Moonlighting, which is the practice of contracting for services while simultaneously holding a position as an employee of a different agency or company, presents an additional layer of ethical challenge. It is important to closely examine both actual and perceived conflicts of interest, as well as manage the practical limitations of available resources such as time and attention.

Moonlighting must adhere to the employer restrictions if these have been explicitly stated in a contractual agreement.

d. Seeking and Fulfilling Contracts for Self-employment

i. Personal Behavior

Members must respect the client policies that govern employee conduct at any facility or institute they may visit or where they may do business. They must respect the client's code of ethics and personnel policies while on the premises and in any business dealings.

Members must communicate and collaborate respectfully with employees of a particular facility. They should be forthcoming with data and reports regarding the work performed. Members must accurately

and respectfully reflect the work product of others in the course of providing contract services.

When approaching new clients, Members must consider the impact their solicitation may have on other contracted or employed physicists. To the extent feasible, direct respectful communication with an incumbent who might be displaced should be made in a timely manner.

ii. Advertising of Business

Members must represent faithfully and honestly their business and the abilities of any employed staff in any advertisement. They must be forthcoming regarding known limitations of their expertise and resources.

iii. Hiring and Recruiting

Members who hire others (including other medical physicists) to fulfill private contracts must be mindful of guidance elsewhere in this document regarding hiring and recruiting practices.

iv. Training

Members who hire others to fulfill private contracts must take responsibility for providing adequate training, supervision, and mentoring of their employees, especially those early in their careers.

v. Communication

Clear communication is essential to providing high quality patient care. Members must communicate their work in a clear, concise, complete, and legible manner to their clients, so that the clients may successfully address clinical and regulatory needs.

vi. Completion of Work

Members who perform any work (including equipment inspections) under contract must provide truthful data and conclusions. It is imperative for the safety of patients that true, accurate results be presented to clients.

SECTION 4. COMPLAINT PROCEDURE

Any allegation of ethical misconduct by a Member or Corporate Affiliate reported to the Ethics Committee will be carefully considered in a fair and impartial manner. It is the

strong preference of the AAPM Ethics Committee to encourage and promote good ethical behavior, rather than punish poor behavior. The Ethics Committee is a resource available

to Members to assist them in resolving questionable ethical situations when possible, without resorting to filing an official complaint.

This Code of Ethics does not replace the legal obligations of Members. All suspected unlawful behavior must be reported to the appropriate authorities.

In this Complaint Procedure section, the following definitions apply:

- “Complainant” refers to any individual or entity who has initiated an official complaint with the Ethics Committee.
- “Respondent” refers to a Member who is the subject of an official complaint initiated by a Complainant.
- “Appellant” refers to any individual or entity who applies for a reversal of the decision of the Ethics Committee.

I. Submitting a Complaint

A. Any person may file a written complaint against an AAPM Member. The Committee will neither accept nor act on complaints against non-AAPM members.

B. All complaints must be made in the atmosphere of mutual respect and must have merit.

- C. The complaint must be filed within two (2) years of the date of the alleged incident(s) giving rise to the complaint. If the Complainant is, or was, a Student or Trainee at the date of the alleged incident(s) giving rise to the complaint, the Complainant may ask the Ethics Committee to extend the two-year deadline to begin on the date of the Student or Trainee Complainant's completion of their education/training program.
- D. The complaint must be sent directly to the Chair of the Ethics Committee to maintain confidentiality of the initial communication. The point of contact will be the Chair of the Professional Council in the case where the Chair is unavailable for an extended period, or is the Respondent, or needs to recuse oneself, or if the Complainant perceives a conflict. Whenever possible, the complaint should specify the violation(s) of the AAPM Code of Ethics of which the Member is accused. The complaint must describe specific events, provide available evidence, and be as specific as possible as to times, places, conduct, and persons involved.
- E. Upon receipt of a complaint, the Ethics Committee Chair may attempt to mediate the dispute between the parties in an effort to resolve the matter prior to referral to the Ethics Committee and the initiation of a formal AAPM Ethics Proceeding.

II. Accepting a Complaint

- A.** All complaints will be treated confidentially.
- B.** The AAPM and/or the Ethics Committee may choose to defer any action if there is any civil or criminal legal action, or if other administrative action has been filed, or if any such action is anticipated as a result of actions giving rise to the complaint. The Complainant and the Respondent must report to the Chair if any civil or criminal legal action is initiated. If the complaint procedure has been initiated before the beginning of any legal action, the AAPM proceeding may be stayed until the legal and/or administrative action has been resolved.
- C.** Within 30 days of receipt of the complaint, the Chair must thoroughly review the complaint and distribute copies, redacted for anonymity, of the complaint to all members of the Ethics Committee for review. If the Chair has elected to mediate the dispute between the parties pursuant to section I.E., the 30-day time period may be extended at the Chair's discretion. However, the Chair must, within 30 days of receipt of the complaint, notify the Committee members that a complaint has been received and that it is being mediated.
- D.** Prior to distribution of copies of the complaint to the Ethics Committee for review, the Chair will remove any and all proper names, addresses, and information that may identify the parties involved in the underlying matter or persons referenced as witnesses in the allegations of the complaint. The removal of identifiers is necessary to ensure the confidentiality and anonymity of the

Complainant and the Respondent during deliberation for acceptance. The anonymized complaint will then be distributed to all members of the Committee and be reviewed by the Committee. Where the facts of the case are adequate to reveal the identity of the parties involved, the members of the Committee must treat the information with utmost confidentiality. The Committee will determine whether to accept the complaint. Legal counsel may be requested to review the anonymous complaint and advise the Committee of its opinion with respect to the allegations contained therein.

- E.** A complaint will be accepted if it appears to be a clear violation(s) of the AAPM Code of Ethics based on materials presented by the Complainant.

- F.** Acceptance of the complaint by the Committee is not a decision in favor of the Complainant. No decision can be reached until the Respondent has received the complaint and its associated evidence, had an adequate time to review the complaint, and is given the opportunity to dispute the complaint and present materials to the Committee.

- G.** A two-thirds (2/3) majority of the Ethics Committee members participating in the vote is required to accept a complaint. A quorum of at least three (3) Committee members is required for a vote. The vote may be conducted at the Ethics Committee's discretion either: a) face to face; b) by phone or video

teleconference; c) via Web conference; d) or in another venue deemed appropriate by the Committee.

- H.** To vote in favor of accepting a complaint, the Committee members should be convinced that the allegations and supporting evidence have created a reasonable probability that a violation of the AAPM Code of Ethics has taken place.
- I.** Following review, if the Committee decides to take no further action, the Chair will notify both the Complainant and the Respondent and the case will be closed.

III. Reviewing a Complaint

- A.** Members of the Committee reviewing a complaint at any stage must be able to perform in a disinterested and objective manner. If unable to do so, members of the Committee must recuse themselves.
- B.** If the Committee accepts a complaint, then the Chair will notify the Complainant and the Respondent and may notify legal counsel at the Committee's discretion. The notification must include a copy of the complaint, along with an explanation of options available to the Respondent.

- C. In the case where three (3) unsuccessful attempts have been made by the Chair to engage with the Respondent, the Committee reserves the right to proceed to its deliberations in the absence of input from the Respondent.
- D. The Respondent must respond to the complaint within thirty (30) days of receipt of notification and complaint. In this response, the Respondent may dispute the allegations and/or challenge any Committee member for conflict of interest. The Respondent may also request a hearing. The response deadline may be relaxed at the Chair's discretion with a show of good cause.
- E. Failure to respond within the described timeframe is understood as permission to the Committee to proceed with its deliberations based on the material at hand.

IV. Deciding on a Complaint

- A. If the Respondent disputes the allegations contained within the complaint, but does not request a hearing, the Respondent may submit a written response to all the allegations set forth within the complaint, as well as any relevant evidence and/or documents in support of their response. The Committee will then decide the matter on the basis of the complaint, the response, and any evidence submitted by the involved parties. In the absence of a hearing, the Committee will make its decision on the basis of materials received from the interested

parties. The Committee's decision must be rendered under the same standards as are applied at a hearing, as set forth in section IV-D of this policy.

B. If the Respondent admits to having committed an ethical violation, the Committee will decide the appropriate action, which may include sanctions (section V). If the Respondent fails to respond within the 30-day time period, the Committee will make its determination on the basis of the complaint and any other relevant materials the Committee may have acquired.

C. Hearing Procedure

- a. If a hearing is requested, the Chair will set the date, time, and place in conjunction with the Committee and legal counsel, and must notify the Respondent and Complainant in writing at least thirty (30) days in advance, unless waived by the parties. The Notice of Hearing will be sent via certified mail to both parties, with return receipt requested or by other method at the discretion of the Chair. The hearing may be conducted at the Ethics Committee's discretion either: a) face to face; b) by phone or video teleconference; c) via Web conference; d) or in another venue deemed appropriate by the Committee.

- b. The hearing panel will consist of at least three (3) voting members of the Ethics Committee.

- c. If any parties can properly show good cause as to why they cannot participate at the hearing on the date and time set, the Chair may reset the time and date of hearing and promptly deliver notice of the new hearing date. The hearing will be completed in one (1) day. AAPM will be responsible for the costs of the hearing, including the attendance of the Ethics Committee panel members, transcription of the hearing, and the meeting facility. The Complainant and Respondent must cover their own individual expenses.

- d. The Chair of the Ethics Committee must preside over the hearing in an atmosphere of mutual respect for all parties involved. Appropriate documentation will be made of the proceedings. Each side will be allowed thirty (30) minutes to present their respective case. However, this time limit may be relaxed at the Chair's discretion with a show of good cause. Committee panel members may question all presenters and all parties must be provided the opportunity to question any witnesses presented by the opposing party. However, all questioning will be limited according to the discretion of the Chair in the interests of time and efficiency. All relevant evidence will be admissible. Evidence based on reports other than what the reviewer has directly observed or experienced can be admissible during the hearing. Any such reports will be available to both the Respondent and Complainant. Evidence that is admitted will be accorded whatever weight the Committee panel deems appropriate, taking into account the nature,

character, and scope of the evidence, the circumstances of its creation and production, and, generally, its reliability. At the end of the presentations and Ethics Committee panel questions, each side is given five (5) minutes for final statements and rebuttal of facts.

- D.** The Ethics Committee may consider only the evidence and testimony introduced in conjunction with the complaint process and submitted at the hearing. The Ethics Committee panel decision will be by two-thirds (2/3) majority vote of the voting members present at the hearing. The decision will be issued in writing within thirty (30) days of the hearing and will indicate which actions the panel deemed a violation of the AAPM Code of Ethics. Copies of the written decision will be delivered to the Complainant and the Respondent in a timely fashion.

V. Outcomes of a Complaint Procedure

- A.** After the Ethics Committee concludes the review of the complaint and response, sanctions against the Respondent are limited to one or more of the following options (a) through (e). A minimum quorum of three (3) members is required for a vote, with a 2/3 majority required for passage. The Ethics Committee may execute only sanction (a) on its own authority. Sanctions (b) through (e) must be forwarded to Professional Council for concurrence.

Professional Council may elect to refer the Ethics Committee recommendation to the Board of Directors for action.

(a) A written warning to the Respondent with a copy to the Complainant including a statement that the matter is strictly confidential among the parties and the Ethics Committee. The warning may stipulate that the Respondent, and when appropriate the Complainant, provide evidence back to the Ethics Committee that a corrective action has occurred to address the concern(s) of the Complainant. Public disclosure of the warning is prohibited. A warning is intended to be educational in nature and is not an affirmation of a violation of the code of ethics.

(b) The Respondent is excluded from future consideration for Fellow status in the AAPM. If the Respondent is already a Fellow, this status is revoked. The Awards and Honors Committee is informed in writing and is required to keep a list of individuals who have been excluded from Fellow status.

(c) The Respondent is excluded from holding any office in the AAPM, or Chapter office serving concurrently in a national AAPM office. Further, the Respondent is prohibited from speaking to the media or otherwise presenting themselves as a representative of the AAPM.

(d) The Respondent is expelled from membership or corporate affiliation in the AAPM. After a period of five years, the Respondent may reapply for membership, but any such application must be reviewed by the Ethics Committee. Approval of the Ethics Committee must occur in addition to other membership application and approval processes.

(e) If other censures are deemed appropriate by the Ethics Committee panel, such suggested censures must be brought to the Ethics Committee for approval (by majority vote) and these will then be reviewed by legal counsel prior to implementation.

B. If the Committee panel finds in favor of the Respondent, the case is closed unless the Complainant appeals the decision per section VI.

VI. Appealing the Decision of the Ethics Committee

The Complainant or Respondent may appeal the decision to the Chair of the Professional Council via the Ethics Committee Chair within thirty (30) days of the party's receipt of the Ethics Committee panel's decision. The appeal will be decided entirely on the record before the Ethics Committee, and no additional evidence may be submitted on appeal. The Appellant may attend the next scheduled Professional Council meeting and give a 15-minute presentation to explain why the Ethics

Committee's decision should be reversed. Only Professional Council members may question the Appellant. The Professional Council may not alter the Ethics Committee panel's decision absent an affirmative showing by the Appellant that the decision was against the weight of the evidence presented in the record. The Professional Council will vote on the appeal with three options: affirm the panel's decision, affirm the panel's decision but reduce the discipline, or reverse the panel's decision. The Professional Council's decision on the appeal will be based on a majority vote as defined by the Professional Council's voting rules, and the decision is final. Within thirty (30) days of the Professional Council meeting, the Respondent and Complainant will be notified in writing of the Professional Council's decision, which will be sent by certified mail, with return receipt requested.

VII. Records of Complaints

Records of Ethics Committee complaint proceedings, including all related documentation and written materials, will be kept in either paper or electronic form for at least two (2) years following the conclusion of all related proceedings and appeals. Chairs of the Ethics Committee purview to confidential information remain bound by this confidentiality clause following the completion of their term.

VIII. Process

This policy is intended to serve as a protection to Members of the AAPM, to assure that the Members have access to a fair and impartial process, and to serve as a guideline for the Ethics Committee. The Ethics Committee may determine the specific manner in which the provisions of this procedure are to be implemented, provided that fairness is protected. Any inadvertent omission or failure to conduct a proceeding in exact conformity with this policy will not invalidate the result of such proceeding, so long as a prudent and reasonable attempt has been made to assure a full and fair process according to the general steps set forth in this policy.

A full and fair process shall include the following:

- A.** The Respondent will be notified of the charges.

- B.** The Respondent will have an opportunity to be heard at a hearing in which witnesses may appear and may be questioned and at which evidence may be introduced.

- C.** An opportunity to appeal will be available.

- D.** Basic principles of fairness will govern.

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The authors have no relevant conflicts of interest to disclose.