

## Ethics in Massage Therapy

### Ethics in Massage Therapy

#### Goals & Objectives

##### Course Description

"Ethics in Massage Therapy" is an asynchronous online text-based continuing education program for massage therapy professionals. The course focuses on defining and applying massage therapy ethical principles. Information presented includes sections on the theoretical basis for ethical decision-making, the Massage Therapy Code of Ethics and Standards of Practice, and legal standards of behavior. This course meets the requirements of Florida statute F64B7-28.009(3)(b) and is approved by the Florida Board of Massage Therapy.

##### Course Rationale

This course was developed to promote and facilitate ethical behavior among therapists and other healthcare professionals in the rehabilitation setting.

##### Course Goals

At the end of this course, the participants will be able to:

1. define the meaning of Ethics and explain the various theories that promote ethical behavior.
2. apply a systemic approach to ethical decision-making.
3. define the parameters of informed consent
4. differentiate between appropriate and inappropriate relationships
5. define the parameters of conflict of interest
6. define the principles of patient confidentiality
7. recognize the principles of massage therapy Code of Ethics
8. recognize the principles of massage therapy Standards of Practice
9. identify the basic rights of the patient under Florida statutes.

##### Course Instructor - Michael Niss DPT

Dr. Michael Niss is an accomplished physical therapist, educator, and evidence-based researcher/writer. His clinical background includes more than 25 years of experience in acute care, geriatrics, orthopedics, and sports medicine. To date, Dr. Niss has authored more than 50 asynchronous home study CE courses for healthcare professionals totaling more than 140 instructional hours. He is also a nationally recognized speaker who has presented more than 125 live continuing education programs totaling more than 1000 CE instructional hours. In addition, Dr. Niss has held a full-time faculty position at Broward Community College, and has also served as Regional Regulatory Compliance Officer with a Fortune 500 health care company.

**Methods of Instruction** – Text-based online home study course

**Target Audience** – Massage Therapists

**Course Educational Level** - This course is applicable for introductory learners.

**Course Prerequisites** - None

**Criteria for Issuance of Continuing Education Credits** - score of 70% or greater on the written post-test

**Continuing Education Credits** - Two (2) hours of continuing education credit

**Course Price** - \$9.95

**Refund Policy** – 100% unrestricted refund upon request

Innovative Educational services

To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

## Ethics in Massage Therapy

### Ethics in Massage Therapy

#### Course Outline

	Page
Goals and Objectives	1
Outline	2
Ethics Overview	3
Ethics Theories	3-5
Model for Ethical Decision Making	5-6
Informed Consent	6-9
Relationships	9-11
Gifts & Conflicts of Interest	11-13
Confidentiality	13
Code of Ethics	14-16
NCBTMB	14-15
AMTA	15-16
Principles of Ethics	16
Rules of Ethics	16
Standards of Practice	16-23
NCBTMB	16-21
Professionalism	16-18
Legal and Ethical	18
Confidentiality	18-19
Business Practices	20
Roles & Boundaries	19-20
Sexual Misconduct	20-21
AMTA	21-23
Conduct	21
Sanitation, Hygiene, & Safety	21-22
Relationships with Clients	22
Relationships with Other Professionals	22
Records	22-23
Marketing	23
Legal	23
Research	23
Florida's Patient Bill of Rights	23-25
Supplemental Information	25
References	26
Post-Test	27-28

Innovative Educational services

To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

### Ethics Overview

The word “ethics” is derived from the Greek word *ethos* (character). In philosophy, ethics defines what is good for the individual and for society and establishes the nature of duties that people owe themselves and one another. Ethics is also a field of human inquiry (“science” according to some definitions) that examines the bases of human goals and the foundations of “right” and “wrong” human actions that further or hinder these goals.

Ethics are important on several levels.

- People feel better about themselves and their profession when they work in an ethical manner.
- Professions recognize that their credibility rests not only on technical competence, but also on public trust.
- At the organizational level, ethics is good business. Several studies have shown that over the long run ethical businesses perform better than unethical businesses.

### Ethics vs. Morals

Although the terms “ethics” and “morals” are often used interchangeably, they are not identical. Morals usually refer to practices; ethics refers to the rationale that may or may not support such practices. Morals refer to actions, ethics to the reasoning behind such actions. Ethics is an examined and carefully considered structure that includes both practice and theory. Morals include ethically examined practices, but may also include practices that have not been ethically analyzed, such as social customs, emotional responses to breaches of socially accepted practices and social prejudices. Ethics is usually at a higher intellectual level, more universal, and more dispassionate than morals. Some philosophers, however, use the term “morals” to describe a publicly agreed-upon set of rules for responding to ethical problems.

### Ethical Questions

Ethical questions involve 1) responsibilities to the welfare of others or to the human community; or 2) conflicts among loyalties to different persons or groups, among responsibilities associated with one’s role (e.g. as consumer or provider), or among principles. Ethical questions include (or imply) the words “ought” or “should”.

### Ethics Theories

Throughout history, mankind has attempted to determine the philosophical basis from which to define right and wrong. Here are some of the more commonly accepted theories that have been proposed.

## Ethics in Massage Therapy

### **Utilitarianism**

This philosophical theory develops from the work of Jeremy Bentham and John Stewart Mill. Simply put, utilitarianism is the theory that right and wrong is determined by the consequences. The basic tool of measurement is pleasure (Bentham) or happiness (Mill). A morally correct rule was the one that provided the greatest good to the greatest number of people.

### **Social Contract Theory**

Social contract theory is attributed to Thomas Hobbes, John Locke, and from the twentieth century, John Rawls. Social contract theories believe that the moral code is created by the people who form societies. These people come together to create society for the purpose of protection and gaining other benefits of social cooperation. These persons agree to regulate and restrict their conduct to achieve this end.

### **Deontological or Duty Theory**

Under this theory you determine if an act or rule is morally right or wrong if it meets a moral standard. The morally important thing is not consequences but the way choosers think while they make choices. One famous philosopher who developed such a theory was Immanuel Kant (1724-1804).

### **Ethical Intuitionism**

Under this view an act or rule is determined to be right or wrong by appeal to the common intuition of a person. This intuition is sometimes referred to as your conscience. For example- anyone with a normal conscience will know that it is wrong to kill an innocent person.

### **Ethical Egoism**

This view is based on the theory that each person should do whatever promotes their own best interests; this becomes the basis for moral choices.

### **Natural Law Theory**

This is a moral theory which claims that just as there are physical laws of nature, there are moral laws of nature that are discoverable. This theory is largely associated with Aristotle and Thomas Aquinas, who advocated that each thing has its own inherent nature, i.e. characteristic ways of behavior that belong to all members of its species and are appropriate to it. This nature determines what is good or bad for that thing. In the case of human beings, the moral laws of nature stem from our unique capacity for reason. When we act against our own reason, we are violating our nature, and therefore acting immorally.

### **Virtue Ethics**

This ethics theory proposes that ethical behavior is a result of developed or inherent character traits or virtues. A person will do what is morally right because they are a virtuous person. Aristotle was a famous exponent of this view. Aristotle

Innovative Educational services

To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

## Ethics in Massage Therapy

felt that virtue ethics was the way to attain true happiness. These are some of the commonly accepted virtues.

**Autonomy:** the duty to maximize the individual's right to make his or her own decisions.

**Beneficence:** the duty to do good.

**Confidentiality:** the duty to respect privacy of information.

**Finality:** the duty to take action that may override the demands of law, religion, and social customs.

**Justice:** the duty to treat all fairly, distributing the risks and benefits equally.

**Nonmaleficence:** the duty to cause no harm.

**Understanding/Tolerance:** the duty to understand and to accept other viewpoints if reason dictates.

**Respect for persons:** the duty to honor others, their rights, and their responsibilities.

**Universality:** the duty to take actions that hold for everyone, regardless of time, place, or people involved.

**Veracity:** the duty to tell the truth.

### Model for Ethical Decision Making

The foundation for making proper ethical decisions is rooted in an individual's ability to answer several fundamental questions concerning their actions.

#### **Are my actions legal?**

Weighing the legality of one's actions is a prudent way to begin the decision-making process. The laws of a geographic region are a written code of that region's accepted rules of conduct. This code of conduct usually defines clearly which actions are considered acceptable and which actions are unacceptable. However, a legitimate argument can be made that sometimes what is legal is not always moral, and that sometimes what is moral is not always legal. This idea is easily demonstrated by the following situation.

It is illegal for a pedestrian to cross a busy street anywhere other than at the designated crosswalk (jaywalking). A man is walking down a street and sees someone fall and injure themselves on the other side of the street. He immediately crosses the street outside of the crosswalk to attend to the injured person. Are his actions legal? Are they moral? What if by stepping into the street he causes a car to swerve and to strike another vehicle?

## Ethics in Massage Therapy

Admittedly, with the exception of policemen and attorneys, most people do not know all of the specific laws that govern their lives. However, it is assumed that most people are familiar with the fundamental virtues from which these laws are based, and that they will live their lives in accordance with these virtues.

### **Are my actions ethical?**

Professional ethical behavior, as it is defined in this context, relates to actions that are consistent with the normative standards practiced by others in the same profession. Nationally, massage therapy practitioners are represented by two large professional organizations; the National Certification Board for Therapeutic Massage & Bodywork (NCBTMB) and the American Massage Therapy Association (AMTA). Each of these organizations has published a Code of Ethics and a Standards of Practice that define acceptable practice for massage therapy professionals.

### **Are my actions fair?**

I think most people would agree that the concept of fairness is often highly subjective. However, for these purposes, we will define fairness as meaning deserved, equitable and unbiased. Fairness requires the decision-maker to have a complete understanding of benefits and liabilities to all parties affected by the decision. Decisions that result in capricious harm or arbitrary benefit cannot be considered fair. The goal of every decision should be an outcome of relative equity that reflects insightful thought and soundness of intent.

### **Would my actions be the same if they were transparent to others?**

This question presents as a true reflection of the other three. Legal, ethical, and fair are defined quite differently by most people when judged in the comfort of anonymity versus when it is examined before the forum of public opinion. Most often it is the incorrect assumption that “no one will ever find out about this” that leads people to commit acts of impropriety. How would your decisions change, if prior to taking any actions, you assumed just the opposite; “other people will definitely know what I have done”. One sure sign of a poor decision is debating the possible exposure of an action instead of examining the appropriateness of it.

## **Informed Consent**

Patients have a fundamental right to direct what happens to their bodies, grounded in the principles of autonomy and respect for persons. In turn, health care professionals have an ethical obligation to involve patients in a process of shared decision making and to seek patients’ informed consent for treatments and procedures. Good informed consent practices, thus, are an essential component of ethics quality in health care.

The goal of the informed consent process is to ensure that patients have an opportunity to be informed participants in decisions about their health care. To

Innovative Educational services

To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

## Ethics in Massage Therapy

achieve that goal practitioners must inform the patient (or authorized surrogate) about treatment options and alternatives, including the risks and benefits of each, providing the information that a “reasonable person” in similar circumstances would want to know in making the treatment decision. A key element of the process is that the practitioner must explain why he or she believes recommended treatments or procedures will be more beneficial than alternatives in the context of the patient’s diagnosis.

Informed consent must always be specific: to the individual patient, the clinical situation, and the recommended plan of care or recommended treatment(s) or procedure(s).

### **Consent for Multiple Treatments**

Although consent is always specific, it is not the same as saying that separate consent is always required for every episode of repeated treatment. When the plan of care for a given diagnosis involves repeated treatments or procedures—for example, a course of diagnostic tests or ongoing therapy—practitioners do not need to obtain consent for each individual episode.

### **Notification versus Consent**

Informed consent is also different from “notification,” that is, providing general information relevant to patients’ participation in health care. Notification informs patients not only about their rights, but also about organizational activities and processes that shape how care is delivered. Like informed consent, notification serves the goal of respecting patients as moral agents.

### **Refusing Treatment**

The right to refuse unwanted treatment, even potentially life-saving treatment, is central to health care ethics. Health care professionals are understandably concerned when patients refuse recommended treatments. How should practitioners respond when a patient declines an intervention that practitioners believe is appropriate and needed? The answer to that question depends on both the patient’s decision-making capacity and the particular circumstances of the treatment decision.

Practitioners should take care not to assume that a patient who refuses recommended treatment lacks decision-making capacity. A capacity assessment is appropriate if the practitioner has reason to believe the patient might lack one or more of the components of decision-making capacity. When decision-making capacity is not in question, practitioners must respect the patient’s decision to decline an intervention, even if they believe the decision is not the best one that could have been made. However, this does not mean that health care professionals should never question the patient’s decision, or never try to

Innovative Educational services

To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

## Ethics in Massage Therapy

persuade the patient to accept treatment. For example, by exploring the reasons for refusal with the patient, a practitioner might learn that the patient simply needs more information before deciding to proceed.

The professional ethical ideal of shared decision making calls for active, respectful engagement with the patient or surrogate. As a prelude to exploring a patient's refusal of recommended treatment, practitioners should clarify the patient's (and/or surrogate's) understanding of the clinical situation and elicit his or her expectations about the course of illness and care. Practitioners should clarify the goals of care with the patient or surrogate, address expectations for care that may be unrealistic, and work with the patient or surrogate to prioritize identified goals as the foundation for a plan of care.

Asking in a nonjudgmental way, "What leads you to this conclusion?" can then help the practitioner to understand the reasons for the patient's decision to decline recommended treatment. It can also help to identify concerns or fears the patient may have about the specific treatment that practitioners can address. The aim should be to negotiate a plan of care that promotes agreed on goals of care.

### **Resisting Treatment**

Health care professionals face different concerns when patients who lack decision-making capacity resist treatment for which their authorized surrogates have given consent. When a surrogate consents to treatment on behalf of a patient who lacks decision-making capacity, practitioners are authorized to carry out the treatment or procedure even if the patient actively resists. In such cases, treatment is not being administered over the patient's refusal because the surrogate has taken the patient's place in the process of shared decision making and exercised the patient's decision-making rights. However, practitioners should still be sensitive to patients who resist treatment. They should try to understand the patient's actions and their implications for treatment. Practitioners should ask themselves why, for example, a patient repeatedly tries to pull out a feeding tube. Is the tube causing physical discomfort? Is the patient distressed because he or she does not understand what is happening?

Resistance to treatment should prompt practitioners to reflect on whether the treatment is truly necessary in light of the established goals of care for the patient, or whether it could be modified to minimize the discomfort or distress it causes. For instance, a patient may resist treatment via one route of administration but not another.

Practitioners should also be alert to the implications of the patient's resistance for the judgment that he or she lacks decision-making capacity. In some cases, resistance to treatment may be an expression of the patient's authentic wishes. Decision-making capacity is not an "all or nothing" proposition. Rather, decision-making capacity is task specific. It rests on being able to receive, evaluate,

Innovative Educational services

To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

## Ethics in Massage Therapy

deliberate about and manipulate information, and communicate a decision, which can vary considerably with the decision to be made. A patient may have capacity to make a simple decision but not a more complex one.

When a patient resists, surrogates, family members, or friends may be able to shed light on the patient's actions and help practitioners identify ways to provide treatment that are less upsetting for the patient. For patients with fluctuating capacity, it may be possible to explore concerns directly with the patient during lucid moments.

Patients who resist treatment present unique challenges for health care practitioners. The root cause of the resistance should be explored, as well as other clinically acceptable alternatives to the proposed treatment.

### Relationships

Boundaries define the limits of appropriate behavior by a professional toward his or her clients. By establishing boundaries, a health care professional creates a safe space for the therapeutic relationship to occur. Health care professionals need guidance if they are to avoid engaging in interactions with their patients that may prove ethically problematic.

### Professionalism

The notion of boundaries in the health care setting is rooted in the concept of a "profession". While this concept is understood in several different ways in the medical and sociological literature, there is consensus regarding one of the defining characteristics of professions and professionals: commitment to serve the profession's clients. That is, professionals are expected to make a fiduciary commitment to place their clients' interests ahead of their own. In exchange for faithfully applying their unique knowledge and skills on behalf of their clients, members of a profession are granted the freedom to practice and to regulate themselves.

Patients who come to health care professionals when they are ill and vulnerable bring with them expectations about this interaction and how clinicians should behave toward them as health care professionals, though patients are not always able to articulate those expectations clearly. Patients should be able to trust that their interests and welfare will be placed above those of the health care professional, just as they should be confident they will be treated with respect, and be informed so that they can make their own health care decisions to the greatest extent possible. Professionals, as such, are held to different standards of conduct from other persons. Relationships and interactions that may be ethically unproblematic among nonprofessionals may be unacceptable when one of the parties is a professional. An individual may have a personal interest that is

Innovative Educational services

To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

## Ethics in Massage Therapy

perfectly acceptable in itself, but conflicts with an obligation the same individual has as a health care professional.

For example, under circumstances in which it would normally be acceptable for one person to ask another individual for a date, it may not be acceptable for a health care professional to ask a patient for a date, because doing so might compromise the professional's fiduciary commitment to the patient's welfare. The nature of professions is such that the human needs the professions address and the human relationships peculiar to them are sufficiently distinct to warrant, indeed to demand, expectations of a higher morality and a greater commitment to the good of others than in most other human activities.

### **Boundaries**

Boundaries define the professional relationship as fundamentally respectful and protective of the patient and as dedicated to the patient's well-being and best interests. A boundary violation occurs when a health care professional's behavior goes beyond appropriate professional limits. Boundary violations generally arise when the interaction between parties blurs their roles vis-à-vis one another. This creates what is known as a "double bind situation". That is a circumstance in which a personal interest displaces the professional's primary commitment to the patient's welfare in ways that harm—or appear to harm—the patient or the patient-clinician relationship, or might reasonably be expected to do so.

### **Legal Aspects**

Various legal and regulatory requirements address boundaries in patient-professional interactions. Clinicians are subject to guidelines for professional conduct in health care promulgated by state licensing boards. Most state professional licensing boards have addressed specific boundary issues. For example, "engaging in any conduct with a patient that is sexual or may be reasonably interpreted as sexual ... [or] behavior, gestures, or expressions that are seductive, sexually suggestive, or sexually demeaning to a patient."

Some state board guidelines offer specific guidance to help clinicians avoid inappropriate conduct, such as recommending that professionals restrict contact with patients to appropriate times and places for the therapy to be given. Violations of these guidelines could result in probation, limitation of practice, and suspension or revocation of licensure. Clinicians should be aware; moreover, that inappropriate sexual or physical contact can result in patients suing clinicians for battery and malpractice, and in several states sexual exploitation of a patient is considered a felony.

### **Other Problematic Relationships**

Many kinds of interaction potentially interfere with the primary clinical relationship between practitioner and patient and pose concerns about acceptable conduct for health care professionals. Becoming socially involved or entering into a business relationship with a patient, for example, can impair, or appear to impair, the professional's objectivity. Accepting a gift is sometimes an appropriate way to allow a patient to express his or her gratitude, and at other times is problematic. Showing favoritism—by giving a particular patient extra attention, time, or priority in scheduling appointments, for example—can cross the boundary between action that is appropriate advocacy on behalf of a particular patient and action that is unfair to others.

Such interactions or activities are ethically problematic when they can reasonably be expected to affect the care received by the individual or by other patients or the practitioner's relationships with his or her colleagues, or when they give the appearance of doing so. Yet not all behavior that might be considered inappropriate necessarily violates professional obligations.

Health care professionals should be alert to situations in which they may be likely to be motivated to behave in ways that violate accepted ethical standards. Ambiguous interactions and relationships, for example, have the potential both to impair the professional's objectivity and compromise his or her judgment, and to give rise to conflicting expectations on the patient's part, which can contaminate the therapeutic relationship and potentially undermine the patient's trust.

### **Gifts and Conflict of Interest**

Because gifts create relationships, health care professionals' acceptance of gifts from commercial vendors can be ethically problematic in several ways. Accepting gifts risks undermining trust. It may bias clinicians' judgments about the relative merits of different treatments. And it may affect treatment patterns in ways that increase costs and adversely affect access to care.

Health care professionals' fiduciary, or trust-based, relationship with patients requires that practitioners explain the reasons for treatment decisions and disclose any potential conflicts of interest, including the influence of gifts.

Given the ways in which gift giving differs from entering into a contractual relationship, gifts to health care professionals can blur the distinction between formal business exchanges and informal, interpersonal exchanges. Industry gifts to health care professionals create potential conflicts of interest that can affect practitioners' judgment—without their knowledge and even contrary to their intent—thereby placing professional objectivity at risk and possibly compromising patient care.

## Ethics in Massage Therapy

If accepting gifts is ethically problematic in these ways, why do health care professionals continue to take the gifts they are offered? One explanation is that accepting a gift is a natural, socially expected reaction motivated by a combination of self-interest and politeness. But it is also argued that health care professionals have come to expect gifts as part of a “culture of entitlement” that has evolved over many years. Gifts have become a familiar part of many health care workplace cultures and established patterns of behavior often resist change. Other rationales are that inducements such as free lunches are needed to induce attendance at educational sessions (and may help offset the costs of such programs), and that they help boost employee morale. Some even claim that accepting gifts results in economic savings for health care institutions, because the industry provides for free items that the institutions would otherwise have to buy. Finally, apathy on the part of professional bodies allows the “tradition” of accepting gifts to continue.

Failure to enforce ethical standards consistently has made it easier simply not to notice, or not to be concerned about, the fact that accepting gifts creates ethical risks. None of these arguments, however, is compelling enough to allow an ethically problematic practice to continue. While habit and self-interest can be powerful motivators, ethical standards explicitly require health care professionals to place patient interests above their own.

In recent years, many prominent organizations and associations have established ethical guidelines for health care professionals about accepting gifts from industry representatives. These guidelines do not prohibit all gifts from industry, but there is general agreement that gifts from companies to health care professionals are acceptable only when the primary purpose is the enhancement of patient care and medical knowledge. The acceptance of individual gifts, hospitality, trips, and subsidies of all types from industry by an individual is strongly discouraged. Practitioners should not accept gifts, hospitality, services, and subsidies from industry if acceptance might diminish, or appear to others to diminish, the objectivity of professional judgment.

Professional guidelines seek to establish thresholds for what kinds of gifts and gift relationships are acceptable. In general, gifts to individual practitioners are discouraged unless they are of minimal value and related to the practitioner’s work—such as pads, pens, or calendars for office use.

The social dynamics of the gift relationship, the potential for gifts subtly to bias health care professionals’ prescribing practices and clinical decisions, and the obligation of health care professionals to avoid acting in ways that might undermine public trust all argue for the adoption of clear, robust policies regarding the acceptance of gifts from companies. Creating a workplace in which professionals no longer routinely expect or accept gifts from industry is a challenging task that calls for professional role modeling and sustained,

Innovative Educational services

To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

## Ethics in Massage Therapy

coordinated efforts on the part of clinical and administrative leaders, as well as development and careful implementation of clear, well-considered policy.

### Confidentiality

The obligation to ensure patient privacy is rooted in the ethical principle of respect for persons. Health care providers convey that respect in a few ways with regard to privacy. They respect patient's informational privacy by limiting access to patient information to those authorized health care providers who need it to perform their duties. The obligation to ensure patient privacy is also justified by the obligation of harm prevention. Sometimes maintaining patient privacy is a way of keeping the patient safe, for example, by minimizing the risk of identity theft.

Confidentiality is mandated by HIPAA laws, specifically the Privacy Rule. The Privacy Rule protects all individually identifiable health information held or transmitted by a covered entity or its business associate, in any form or media, whether electronic, paper, or oral.

"Individually identifiable health information" is information, including demographic data, that relates to:

- the individual's past, present or future physical or mental health or condition,
- the provision of health care to the individual, or
- the past, present, or future payment for the provision of health care to the individual, and that identifies the individual or for which there is a reasonable basis to believe it can be used to identify the individual.

Individually identifiable health information includes many common identifiers (e.g., name, address, birth date, Social Security Number).

Health care providers must make reasonable efforts to use, disclose, and request only the minimum amount of protected health information needed to accomplish the intended purpose of the use, disclosure, or request. They must also develop and implement policies and procedures to reasonably limit uses and disclosures to the minimum necessary. When the minimum necessary standard applies to a use or disclosure, a covered entity may not use, disclose, or request the entire medical record for a particular purpose, unless it can specifically justify the whole record as the amount reasonably needed for the purpose.

## Ethics in Massage Therapy

### Code of Ethics

#### **National Certification Board for Therapeutic Massage & Bodywork (NCBTMB)**

National Certification Board for Therapeutic Massage & Bodywork Code of Ethics. Available at: <http://www.ncbtmb.org/code-ethics>

NCBTMB certificants and applicants for certification shall act in a manner that justifies public trust and confidence, enhances the reputation of the profession, and safeguards the interest of individual clients. Certificants and applicants for certification will:

- I. Have a sincere commitment to provide the highest quality of care to those who seek their professional services.
- II. Represent their qualifications honestly, including education and professional affiliations, and provide only those services that they are qualified to perform.
- III. Accurately inform clients, other health care practitioners, and the public of the scope and limitations of their discipline.
- IV. Acknowledge the limitations of and contraindications for massage and bodywork and refer clients to appropriate health professionals.
- V. Provide treatment only where there is reasonable expectation that it will be advantageous to the client.
- VI. Consistently maintain and improve professional knowledge and competence, striving for professional excellence through regular assessment of personal and professional strengths and weaknesses and through continued education training.
- VII. Conduct their business and professional activities with honesty and integrity, and respect the inherent worth of all persons.
- VIII. Refuse to unjustly discriminate against clients and/or health professionals.
- IX. Safeguard the confidentiality of all client information, unless disclosure is requested by the client in writing, is medically necessary, is required by law, or necessary for the protection of the public.
- X. Respect the client's right to treatment with informed and voluntary consent. The certified practitioner will obtain and record the informed consent of the client, or client's advocate, before providing treatment. This consent may be written or verbal.
- XI. Respect the client's right to refuse, modify or terminate treatment regardless of prior consent given.
- XII. Provide draping and treatment in a way that ensures the safety, comfort and privacy of the client.
- XIII. Exercise the right to refuse to treat any person or part of the body for just and reasonable cause.

Innovative Educational services

To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

## Ethics in Massage Therapy

- XIV. Refrain, under all circumstances, from initiating or engaging in any sexual conduct, sexual activities, or sexualizing behavior involving a client, even if the client attempts to sexualize the relationship unless a pre-existing relationship exists between an applicant or a practitioner and the client prior to the applicant or practitioner applying to be certified by NCBTMB.
- XV. Avoid any interest, activity or influence which might be in conflict with the practitioner's obligation to act in the best interests of the client or the profession.
- XVI. Respect the client's boundaries with regard to privacy, disclosure, exposure, emotional expression, beliefs and the client's reasonable expectations of professional behavior. Practitioners will respect the client's autonomy.
- XVII. Refuse any gifts or benefits that are intended to influence a referral, decision or treatment, or that are purely for personal gain and not for the good of the client.
- XVIII. Follow the NCBTMB Standards of Practice, this Code of Ethics, and all policies, procedures, guidelines, regulations, codes, and requirements promulgated by the National Certification Board for Therapeutic Massage & Bodywork.

### **American Massage Therapy Association (AMTA)**

© 2013 American Massage Therapy Association. All rights reserved.  
Available at: <http://www.amtamassage.org/About-AMTA/Core-Documents/Code-of-Ethics.html>

This Code of Ethics is a summary statement of the standards of conduct that define ethical behavior for the massage therapist. Adherence to the Code is a prerequisite for admission to and continued membership in the American Massage Therapy Association (AMTA).

**Principles of Ethics.** The Principles of Ethics form the first part of the Code of Ethics. They are aspirational and inspirational model standards of exemplary professional conduct for all members of the association. These Principles should not be regarded as limitations or restrictions, but as goals for which members should constantly strive.

### **Massage therapists/practitioners shall:**

1. Demonstrate commitment to provide the highest quality massage therapy/bodywork to those who seek their professional service.
2. Acknowledge the inherent worth and individuality of each person by not discriminating or behaving in any prejudicial manner with clients and/or colleagues.
3. Demonstrate professional excellence through regular self-assessment of strengths, limitations, and effectiveness by continued education and training.

Innovative Educational services  
To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

## Ethics in Massage Therapy

4. Acknowledge the confidential nature of the professional relationship with clients and respect each client's right to privacy within the constraints of the law.
5. Project a professional image and uphold the highest standards of professionalism.
6. Accept responsibility to do no harm to the physical, mental and emotional well-being of self, clients, and associates.

**Rules of Ethics.** The Rules of Ethics are mandatory and direct specific standards of minimally-acceptable professional conduct for all members of the association. The Rules of Ethics are enforceable for all association members, and any members who violate this Code shall be subject to disciplinary action.

### **Massage therapists/practitioners shall:**

1. Conduct all business and professional activities within their scope of practice and all applicable legal and regulatory requirements.
2. Refrain from engaging in any sexual conduct or sexual activities involving their clients in the course of a massage therapy session.
3. Be truthful in advertising and marketing, and refrain from misrepresenting his or her services, charges for services, credentials, training, experience, ability or results.
4. Refrain from using AMTA membership, including the AMTA name, logo or other intellectual property, or the member's position, in any way that is unauthorized, improper or misleading.
5. Refrain from engaging in any activity which would violate confidentiality commitments and/or proprietary rights of AMTA or any other person or organization.

## **Standards of Practice**

### **National Certification Board for Therapeutic Massage & Bodywork (NCBTMB)**

National Certification Board for Therapeutic Massage & Bodywork Available at: <http://www.ncbtmb.org/standards-practice>

#### **Standard I: Professionalism**

The certificant or applicant for certification must provide optimal levels of professional therapeutic massage and bodywork services and demonstrate excellence in practice by promoting healing and well-being through responsible, compassionate and respectful touch. In his/her professional role the certificant or applicant for certification shall:

- a. adhere to the NCBTMB Code of Ethics, Standards of Practice, policies and procedures

Innovative Educational services

To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

## Ethics in Massage Therapy

- b. comply with the peer review process conducted by the NCBTMB Ethics and Standards Committee regarding any alleged violations of the NCBTMB Code of Ethics and Standards of Practice
- c. treat each client with respect, dignity and worth
- d. use professional verbal, nonverbal and written communications
- e. provide an environment that is safe and comfortable for the client and which, at a minimum, meets all legal requirements for health and safety
- f. use standard precautions to insure professional hygienic practices and maintain a level of personal hygiene appropriate for practitioners in the therapeutic setting
- g. wear clothing that is clean, modest, and professional
- h. obtain voluntary and informed consent from the client prior to initiating the session
- i. if applicable, conduct an accurate needs assessment, develop a plan of care with the client, and update the plan as needed
- j. use appropriate draping to protect the client's physical and emotional privacy
- k. be knowledgeable of his/her scope of practice and practice only within these limitations
- l. refer to other professionals when in the best interest of the client and practitioner
- m. seek other professional advice when needed
- n. respect the traditions and practices of other professionals and foster collegial relationships
- o. not falsely impugn the reputation of any colleague
- p. use the initials NCTMB only to designate his/her professional ability and competency to practice therapeutic massage and bodywork, or the initials NCTM only to designate his/her professional ability and competency to practice therapeutic massage
- q. remain in good standing with NCBTMB
- r. understand that the NCBTMB certificate may be displayed prominently in the certificant's principal place of practice
- s. use the NCBTMB logo and certification number on business cards, brochures, advertisements, and stationery only in a manner that is within established NCBTMB guidelines
- t. not duplicate the NCBTMB certificate for purposes other than verification of the practitioner's credentials
- u. immediately return the certificate to NCBTMB if certification is revoked

## Ethics in Massage Therapy

v. inform NCBTMB of any changes or additions to information included in his/her application for NCBTMB certification or recertification

### **Standard II: Legal and Ethical Requirements**

The certificant or applicant for certification must comply with all the legal requirements in applicable jurisdictions regulating the profession of therapeutic massage and bodywork. In his/her professional role the certificant or applicant for certification shall:

- a. obey all applicable local, state, and federal laws
- b. refrain from any behavior that results in illegal, discriminatory, or unethical actions
- c. accept responsibility for his/her own actions
- d. report to the proper authorities any alleged violations of the law by other certificants or applicants for certification
- e. maintain accurate and truthful records
- f. report to NCBTMB any criminal conviction of, or plea of guilty, nolo contendere, or no contest to, a crime in any jurisdiction (other than a minor traffic offense) by him/herself and by other certificants or applicants for certification
- g. report to NCBTMB any pending litigation and resulting resolution related to the certificant or applicant for certification's professional practice and the professional practice of other certificants or applicants for certification
- h. report to NCBTMB any pending complaints in any state or local government or quasigovernment board or agency against his/her professional conduct or competence, or that of another certificant, and the resulting resolution of such complaint
- i. respect existing publishing rights and copyright laws, including, but not limited to, those that apply to NCBTMB's copyright-protected examinations

### **Standard III: Confidentiality**

The certificant or applicant for certification shall respect the confidentiality of client information and safeguard all records. In his/her professional role the certificant or applicant for certification shall:

- a. protect the confidentiality of the client's identity in conversations, all advertisements, and any and all other matters unless disclosure of identifiable information is requested by the client in writing, is medically necessary, is required by law or for purposes of public protection
- b. protect the interests of clients who are minors or clients who are unable to give voluntary and informed consent by securing permission from an appropriate third party or guardian
- c. solicit only information that is relevant to the professional client/therapist relationship

Innovative Educational services

To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

## Ethics in Massage Therapy

- d. share pertinent information about the client with third parties when required by law or for purposes of public protection
- e. maintain the client files for a minimum period of four years
- f. store and dispose of client files in a secure manner

### **Standard IV: Business Practices**

The certificant or applicant for certification shall practice with honesty, integrity, and lawfulness in the business of therapeutic massage and bodywork. In his/her professional role the certificant or applicant for certification shall:

- a. provide a physical setting that is safe and meets all applicable legal requirements for health and safety
- b. maintain adequate and customary liability insurance
- c. maintain adequate progress notes for each client session, if applicable
- d. accurately and truthfully inform the public of services provided
- e. honestly represent all professional qualifications and affiliations
- f. promote his/her business with integrity and avoid potential and actual conflicts of interest
- g. advertise in a manner that is honest, dignified, accurate and representative of services that can be delivered and remains consistent with the NCBTMB Code of Ethics and Standards of Practice
- h. advertise in a manner that is not misleading to the public and shall not use sensational, sexual or provocative language and/or pictures to promote business
- i. comply with all laws regarding sexual harassment
- j. not exploit the trust and dependency of others, including clients and employees/coworkers
- k. display/discuss a schedule of fees in advance of the session that is clearly understood by the client or potential client
- l. make financial arrangements in advance that are clearly understood by and safeguard the best interests of the client or consumer
- m. follow acceptable accounting practices
- n. file all applicable municipal, state and federal taxes
- o. maintain accurate financial records, contracts and legal obligations, appointment records, tax reports and receipts for at least four years

### **Standard V: Roles and Boundaries**

The certificant or applicant for certification shall adhere to ethical boundaries and perform the professional roles designed to protect both the client and the practitioner, and safeguard the therapeutic value of the relationship. In his/her professional role the certificant or applicant for certification shall:

Innovative Educational services

To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

## Ethics in Massage Therapy

- a. recognize his/her personal limitations and practice only within these limitations
- b. recognize his/her influential position with the client and not exploit the relationship for personal or other gain
- c. recognize and limit the impact of transference and counter-transference between the client and the certificant
- d. avoid dual or multidimensional relationships that could impair professional judgment or result in exploitation of the client or employees and/or coworkers
- e. not engage in any sexual activity with a client
- f. acknowledge and respect the client's freedom of choice in the therapeutic session
- g. respect the client's right to refuse the therapeutic session or any part of the therapeutic session
- h. refrain from practicing under the influence of alcohol, drugs, or any illegal substances (with the exception of a prescribed dosage of prescription medication which does not impair the certificant)
- i. have the right to refuse and/or terminate the service to a client who is abusive or under the influence of alcohol, drugs, or any illegal substance

### **Standard VI: Prevention of Sexual Misconduct**

The certificant or applicant for certification shall refrain from any behavior that sexualizes, or appears to sexualize, the client/therapist relationship. The certificant or applicant for certification recognizes the intimacy of the therapeutic relationship may activate practitioner and/or client needs and/or desires that weaken objectivity and may lead to sexualizing the therapeutic relationship. In his/her professional role the certificant or applicant for certification shall:

- a. refrain from participating in a sexual relationship or sexual conduct with the client, whether consensual or otherwise, from the beginning of the client/therapist relationship and for a minimum of six months after the termination of the client/therapist relationship unless a pre-existing relationship exists between a certificant or applicant for certification and client prior to the certificant or applicant for certification applying to be certified by NCBTMB
- b. in the event that the client initiates sexual behavior, clarify the purpose of the therapeutic session, and, if such conduct does not cease, terminate or refuse the session
- c. recognize that sexual activity with clients, students, employees, supervisors, or trainees is prohibited even if consensual
- d. not touch the genitalia
- e. only perform therapeutic treatments beyond the normal narrowing of the ear canal and normal narrowing of the nasal passages as indicated in the plan of care and only after receiving informed voluntary written consent

Innovative Educational services

To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

## Ethics in Massage Therapy

- f. only perform therapeutic treatments in the oropharynx as indicated in the plan of care and only after receiving informed voluntary consent
- g. only perform therapeutic treatments into the anal canal as indicated in the plan of care and only after receiving informed voluntary written consent
- h. only provide therapeutic breast massage as indicated in the plan of care and only after receiving informed voluntary written consent from the client

### **American Massage Therapy Association (AMTA)**

© 2013 American Massage Therapy Association. All rights reserved.  
Available at: <http://www.amtamassage.org/About-AMTA/standards.html>

**Purpose Statement:** These American Massage Therapy Association (AMTA) Standards of Practice were developed to assist the professional massage therapist to:

- provide safe, consistent care
- determine the quality of care provided
- provide a common base to develop a practice
- support/preserve the basic rights of the client and professional massage therapist
- assist the public to understand what to expect from a professional massage therapist

This document allows the professional massage therapist to evaluate and adapt performance in his/her massage/bodywork practice. The professional massage therapist can evaluate the quality of his/her practice by utilizing the Standards of Practice in conjunction with the Code of Ethics, the Bylaws and Policies of AMTA, and precedents set by the AMTA Grievance, Standards and Bylaws Committees.

### **1. Conduct of the Professional Massage Therapist or Practitioner, hereinafter referred to as "Practitioner"**

- 1.1 AMTA members must meet and maintain appropriate membership requirements.
- 1.2 Individual AMTA members who engage in the practice of professional massage/bodywork, shall adhere to standards of professional conduct, including the AMTA Code of Ethics.
- 1.3 The Practitioner follows consistent standards in all settings.
- 1.4 The Practitioner seeks professional supervision/consultation consistent with promoting and maintaining appropriate application of skills and knowledge.

### **2. Sanitation, Hygiene and Safety**

- 2.1 Practitioner provides an environment consistent with accepted standards of sanitation, hygiene, safety and universal precautions.

Innovative Educational services  
To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

## Ethics in Massage Therapy

### 2.2 Pathophysiology (Contraindications)

2.2.1 The Practitioner maintains current knowledge and skills of pathophysiology and the appropriate application of massage/bodywork.

2.2.2 The Practitioner monitors feedback from the client throughout a session.

2.2.3 The Practitioner makes appropriate referrals to other reputable healthcare providers.

### 3. Professional Relationships with Clients

3.1 The Practitioner relates to the client in a manner consistent with accepted standards and ethics.

3.2 The Practitioner maintains appropriate professional standards of confidentiality.

3.3 The Practitioner relates to the client in a manner which respects the integrity of the client and practitioner.

3.4 The Practitioner ensures that representations of his/her professional services, policies, and procedures are accurately communicated to the client prior to the initial application of massage/bodywork.

3.5 The Practitioner elicits participation and feedback from the client.

### 4. Professional Relationships with Other Professionals

4.1 The Practitioner relates to other reputable professionals with appropriate respect and within the parameters of accepted ethical standards.

4.2 The Practitioner's referrals to other professionals are only made in the interest of the client.

4.3 The Practitioner's communication with other professionals regarding clients is in compliance with accepted standards and ethics.

4.4 A Practitioner possessing knowledge that another practitioner:

- (1) committed a criminal act that reflects adversely on the Practitioner's competence in massage therapy, trustworthiness or fitness to practice massage therapy in other respects;
- (2) engaged in an act or practice that significantly undermines the massage therapy profession; or
- (3) engaged in conduct that creates a risk of serious harm for the physical or emotional well being of a recipient of massage therapy; shall report such knowledge to the appropriate AMTA committee if such information is not protected or restricted by a confidentiality law.

### 5. Records

#### 5.1 Client Records

5.1.1 The Practitioner establishes and maintains appropriate client records.

Innovative Educational services

To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

## Ethics in Massage Therapy

### 5.2 Financial Records

5.2.1 The Practitioner establishes and maintains client financial accounts that follow accepted accounting practices.

### 6. Marketing

6.1 Marketing consists of, but is not limited to, advertising, public relations, promotion and publicity.

6.2 The Practitioner markets his/her practice in an accurate, truthful and ethical manner.

### 7. Legal Practice

7.1 American Massage Therapy Association members practice or collaborate with all others practicing professional massage/bodywork in a manner that is in compliance with national, state or local municipal law(s) pertaining to the practice of professional massage/bodywork.

### 8. Research

8.1 The Practitioner engaged in study and/or research is guided by the conventions and ethics of scholarly inquiry.

8.2 The Practitioner doing research avoids financial or political relationships that may limit objectivity or create conflict of interest.

### **Florida Patient's Bill of Rights and Responsibilities. (abridged)**

(4) Rights of the Patient.--Each health care facility or provider shall observe the following standards:

(a) *Individual dignity*--

1. The individual dignity of a patient must be respected at all times and upon all occasions.

2. Every patient who is provided health care services retains certain rights to privacy, which must be respected without regard to the patient's economic status or source of payment for his or her care. The patient's rights to privacy must be respected to the extent consistent with providing adequate medical care to the patient and with the efficient administration of the health care facility or provider's office. However, this subparagraph does not preclude necessary and discreet discussion of a patient's case or examination by appropriate medical personnel.

3. A patient has the right to a prompt and reasonable response to a question or request. A health care facility shall respond in a reasonable manner to the request of a patient's health care provider for medical services to the patient. The health care facility shall also respond in a reasonable manner to the patient's

Innovative Educational services

To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

## Ethics in Massage Therapy

request for other services customarily rendered by the health care facility to the extent such services do not require the approval of the patient's health care provider or are not inconsistent with the patient's treatment.

4. A patient in a health care facility has the right to retain and use personal clothing or possessions as space permits, unless for him or her to do so would infringe upon the right of another patient or is medically or programmatically contraindicated for documented medical, safety, or programmatic reasons.

### (b) *Information.--*

1. A patient has the right to know the name, function, and qualifications of each health care provider who is providing medical services to the patient. A patient may request such information from his or her responsible provider or the health care facility in which he or she is receiving medical services.

2. A patient in a health care facility has the right to know what patient support services are available in the facility.

3. A patient has the right to be given by his or her health care provider information concerning diagnosis, planned course of treatment, alternatives, risks, and prognosis, unless it is medically inadvisable or impossible to give this information to the patient, in which case the information must be given to the patient's guardian or a person designated as the patient's representative. A patient has the right to refuse this information.

4. A patient has the right to refuse any treatment based on information required by this paragraph, except as otherwise provided by law. The responsible provider shall document any such refusal.

5. A patient in a health care facility has the right to know what facility rules and regulations apply to patient conduct.

6. A patient has the right to express grievances to a health care provider, a health care facility, or the appropriate state licensing agency regarding alleged violations of patients' rights. A patient has the right to know the health care provider's or health care facility's procedures for expressing a grievance.

7. A patient in a health care facility who does not speak English has the right to be provided an interpreter when receiving medical services if the facility has a person readily available who can interpret on behalf of the patient.

### (c) *Financial information and disclosure.--*

1. A patient has the right to be given, upon request, by the responsible provider, his or her designee, or a representative of the health care facility full information and necessary counseling on the availability of known financial resources for the patient's health care.

2. A health care provider or a health care facility shall, upon request, disclose to each patient who is eligible for Medicare, in advance of treatment, whether the health care provider or the health care facility in which the patient is receiving

## Ethics in Massage Therapy

medical services accepts assignment under Medicare reimbursement as payment in full for medical services and treatment rendered in the health care provider's office or health care facility.

3. A health care provider or a health care facility shall, upon request, furnish a patient, prior to provision of medical services, a reasonable estimate of charges for such services. Such reasonable estimate shall not preclude the health care provider or health care facility from exceeding the estimate or making additional charges based on changes in the patient's condition or treatment needs.

4. A patient has the right to receive a copy of an itemized bill upon request. A patient has a right to be given an explanation of charges upon request.

(d) *Access to health care.*--

1. A patient has the right to impartial access to medical treatment or accommodations, regardless of race, national origin, religion, handicap, or source of payment.

2. A patient has the right to treatment for any emergency medical condition that will deteriorate from failure to provide such treatment.

3. A patient has the right to access any mode of treatment that is, in his or her own judgment and the judgment of his or her health care practitioner, in the best interests of the patient, including complementary or alternative health care treatments, in accordance with the provisions of s. 456.41.

(e) *Experimental research.*--In addition to the provisions of s. 766.103, a patient has the right to know if medical treatment is for purposes of experimental research and to consent prior to participation in such experimental research. For any patient, regardless of ability to pay or source of payment for his or her care, participation must be a voluntary matter; and a patient has the right to refuse to participate. The patient's consent or refusal must be documented in the patient's care record.

(f) *Patient's knowledge of rights and responsibilities.*--In receiving health care, patients have the right to know what their rights and responsibilities are.

### Supplemental Information

#### [Rethinking Autonomy and Consent in Healthcare Ethics](#)

Milligan, E., & Jones, J. (2016). Rethinking Autonomy and Consent in Healthcare Ethics. In *Bioethics-Medical, Ethical and Legal Perspectives*. InTech. CC BY 3.0

#### [Ethical Resources for the Clinician: Principles, Values and Other Theories.](#)

Donaldson, T. M. (2012). INTECH Open Access Publisher. CC BY 3.0

#### [Becoming Partners, Retaining Autonomy: Ethical Considerations on the Development of Precision Medicine.](#)

Blasimme, A., & Vayena, E. (2016). Becoming partners, retaining autonomy: ethical considerations on the development of precision medicine. *BMC Medical Ethics*, 17(1), 67. CC BY 4.0

#### [The Importance of Values in Evidence-Based Medicine](#)

Kelly, M. P., Heath, I., Howick, J., & Greenhalgh, T. (2015). The importance of values in evidence-based medicine. *BMC medical ethics*, 16(1), 69. CC BY 4.0

Innovative Educational services

To take the post-test for CE credit, go to: [www.cheapceus.com](http://www.cheapceus.com)

# Ethics in Massage Therapy

## References

- American Massage Therapy Association. Code of Ethics. 2010. Downloaded from <http://www.amtamassage.org/About-AMTA/Core-Documents/Code-of-Ethics.html> on May 10, 2017
- American Massage Therapy Association. Standards of Practice. Downloaded from <http://www.amtamassage.org/About-AMTA/standards.html> on May 10, 2017
- Atanelov, L., Stiens, S. A., & Young, M. A. (2015). History of Physical Medicine and Rehabilitation and Its Ethical Dimensions. *AMA journal of ethics*, 17(6), 568.
- Benjamin, B. E. (2003). The ethics of touch: The hands-on practitioner's guide to creating a professional, safe and enduring practice.
- Dahnke, M. D. (2014). Utilizing codes of ethics in health professions education. *Advances in Health Sciences Education*, 19(4), 611-623.
- Florida Department of Health. Patient's Bill of Rights and Responsibilities. April 2016. Accessed on May 10, 2017 at: <http://www.floridahealthfinder.gov/reports-guides/patient-bill-rights.aspx>
- Furniss, D. J., Randell, R., Taneva, S., Mentis, H., Wolstenholme, D., Dearden, A., ... & Blandford, A. (2015). Ethics, Governance, and Patient, Public Involvement in Healthcare. Morgan & Claypool Publishers.
- Hunt, M. R., Schwartz, L., Sinding, C., & Elit, L. (2014). The ethics of engaged presence: a framework for health professionals in humanitarian assistance and development work. *Developing world bioethics*, 14(1), 47-55.
- Kulju, K., Stolt, M., Suhonen, R., & Leino-Kilpi, H. (2015). Ethical competence a concept analysis. *Nursing ethics*, 0969733014567025.
- Marietta C. McGuire AL. Currents in contemporary ethics. *Journal of Law, Medicine & Ethics*. 37(2):369-74, 2009.
- National Center for Ethics in Health Care. Informed Consent Dos & Don't for Best Practice. In Focus, Aug 2006
- National Center for Ethics in Health Care. "Teach Back": A Tool for Improving Provider-Patient Communication. In Focus, April 2006
- National Center for Ethics in Health Care. When Patients Refuse Treatment. In Focus, Dec 2005
- National Center for Ethics in Health Care. Gifts to Health Care Professionals from the Pharmaceutical Industry. October 2003
- National Center for Ethics in Health Care. Ethical Boundaries in the Patient-Clinician Relationship. July 2003
- National Certification Board for Therapeutic Massage & Bodywork. Code of Ethics. 2008. Downloaded from <http://www.ncbtmb.org/code-ethics> on May 10, 2017
- National Certification Board for Therapeutic Massage & Bodywork. Standards of Practice 2009. Downloaded from <http://www.ncbtmb.org/standards-practice> on May 10, 2017
- Porcino, A. J., Page, S. A., Boon, H. S., & Verhoef, M. J. (2014). Negotiating consent: exploring ethical issues when therapeutic massage bodywork practitioners are trained in multiple therapies. *International journal of therapeutic massage & bodywork*, 7(4), 15-22.
- Polseno, D. (2005). Ethics Is A Verb: Are You Doing It?. *Massage Therapy Journal, Summer*, 43(2), 138-141.
- Raina, V. (2013). Investigators viewpoint on ethics, methods, and informed consent in clinical trials. *Perspectives in clinical research*, 4(1), 39.
- US Department of Health & Human Services. The Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy and Security Rules. <https://www.hhs.gov/hipaa/for-professionals/privacy/laws-regulations/> Accessed March 10, 2017
- Veterans Health Administration. VHA Handbook 1004.01: Informed Consent for Clinical Treatments and Procedures. August 2009

## Ethics in Massage Therapy

### Ethics in Massage Therapy

#### Post-Test

1. Which statement regarding ethics theories is CORRECT? (p. 4)
  - A. Utilitarianism is the theory that right and wrong is determined by consequence.
  - B. Social Contract Theory proposes that each person should do whatever promotes their own best interests.
  - C. Ethical Egoism is based on the theory that ethical behavior is a result of inherent character traits
  - D. Natural Law Theory proposes that moral code is created by the people who form societies.
2. Which of the following is considered the accepted standard of ethical conduct for a massage therapist? (p. 6)
  - A. State practice act
  - B. NCBTMB or AMTA Code of Ethics
  - C. Employer's policy and procedure manual
  - D. JCAHO
3. The goal of the informed consent process is to \_\_\_\_\_. (p. 6)
  - A. Provide protection for health care providers against litigation.
  - B. Ensure that individuals have an opportunity to be informed participants in decisions about their health care.
  - C. Improve efficiency and accuracy throughout the health care system.
  - D. Facilitate the practice of evidence based medicine.
4. Massage therapists are expected to make a fiduciary commitment to their clients. This means that they will \_\_\_\_\_. (p. 9)
  - A. Place the needs and interests of their clients before their own
  - B. Provide only evidence based care
  - C. Charge the patient based on their ability to pay
  - D. Provide pro bono services
5. Gifts from companies to massage therapists are acceptable only when \_\_\_\_\_. (p. 12)
  - A. The primary purpose is the enhancement of patient care and medical knowledge
  - B. Each professional in the field receives the same gift without regard to previous product usage
  - C. The company is introducing a new product or service to the market.
  - D. None of the above

## Ethics in Massage Therapy

6. Information relating to \_\_\_\_\_ is individually identifiable health information that is covered under the Privacy Rule of HIPAA. (p. 13)
- A. an individual's past, present or future physical or mental health or condition
  - B. the provision of health care to the individual
  - C. the past, present, or future payment for the provision of health care to the individual
  - D. All of the above
7. According to the AMTA, the Code of Ethics is a \_\_\_\_\_. (p. 15)
- A. listing of laws & rules that define legal massage therapy practice
  - B. framework of clinical protocols that is used to guide therapeutic care
  - C. summary statement of the standards of conduct that define ethical behavior
  - D. document that establishes professional qualifications for massage therapists.
8. Sexual activity with clients, students, employees, supervisors, or trainees is \_\_\_\_\_. (p. 20)
- A. situation dependent
  - B. strongly discouraged
  - C. prohibited unless it is consensual
  - D. prohibited even if consensual
9. Which of the following is not addressed in either the NCBTMB or AMTA Standards of Practice? (p. 16-23)
- A. Penalties for unlawful practice
  - B. Sanitation, Hygiene, and safety
  - C. Marketing
  - D. Research
10. Which of the following is NOT required under the Florida Patient's Bill of Rights? (p. 23-25)
- A. The individual dignity of a patient must be respected at all times and upon all occasions.
  - B. A patient has the right to know the name, function, and qualifications of each health care provider who is providing medical services to the patient.
  - C. A patient in a health care facility who does not speak English, must be provided with an interpreter free of charge within 6 hours of their request.
  - D. A patient has the right to receive a copy of an itemized bill upon request.

C51017g32315r51017f51017