

Good medical practice 2024 – what’s new in each domain?

We’ve listed the updated paragraphs from *Good medical practice* 2024, and included the wording from *Good medical practice* 2013 where these have changed.

Domain 1 - Knowledge, skills and development					
Being competent	Paragraph number from 2024 version	<i>Good medical practice</i> 2024 text	Paragraph number from 2013 version	<i>Good medical practice</i> 2013 text	Change
	1	You must be competent in all aspects of your work including, where applicable, formal leadership or management roles, research and teaching.	7	You must be competent in all aspects of your work, including management, research and teaching	Formal leadership added to increase its visibility in the standards.
	2	You must recognise and work within the limits of your competence.	14	You must recognise and work within the limits of your competence	Unchanged.
	3	You must keep up to date with guidelines and developments that affect your work.	11	You must be familiar with guidelines and developments that affect your work	Changed ‘be familiar with’ to ‘keep up to date with’ to make it more action focused.
	4	You must follow the law, our guidance on professional	12	You must keep up to date with, and follow, the law, our	To be more precise, added ‘on professional standards’.

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	4	standards, and other regulations relevant to your work.	12	guidance and other regulations relevant to your work	
	5	You must have the necessary knowledge of the English language to provide a good standard of practice and care in the UK	14a	You must have the necessary knowledge of the English language to provide a good standard of practice and care in the UK	Unchanged.
Providing good clinical care	6	You must provide a good standard of practice and care. If you assess, diagnose, or treat patients, you must work in partnership with them to assess their needs and priorities. The investigation or treatment you propose, provide or arrange must be based on this assessment, and on your clinical judgement about the likely effectiveness of the treatment options.	15, 57	15 You must provide a good standard of practice and care. If you assess, diagnose or treat patients, you must: <ul style="list-style-type: none"> a. adequately assess the patient’s conditions, taking account of their history (including the symptoms and psychological, spiritual, social and cultural factors), their views and values; where necessary, 	Merged <i>Good medical practice</i> 2013 paragraphs 15 and 57. Added ‘work in partnership with them to assess their needs and priorities’ to increase the focus on partnership-working in line with <i>Decision making and consent</i> .

	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
Providing good clinical care	6		15, 57	<p>examine the patient</p> <p>b. promptly provide or arrange suitable advice, investigations or treatment where necessary</p> <p>c. refer a patient to another practitioner when this serves the patient's needs</p> <p>57. The investigations or treatment you provide or arrange must be based on the assessment you and your patient make of their needs and priorities, and on your clinical judgement about the likely effectiveness of the treatment options.</p>	<p>Added 'propose', to 'provide or arrange', to emphasise patient choice.</p> <p>Moved the sub-paragraphs of <i>Good medical practice 2013</i> paragraph 15 to paragraph 7.</p>

	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
Providing good clinical care	7	<p>In providing clinical care you must:</p> <ul style="list-style-type: none"> a. adequately assess a patient’s condition(s), taking account of their history, including <ul style="list-style-type: none"> i. symptoms ii. relevant psychological, spiritual, social, economic, and cultural factors iii. the patient’s views, needs, and values b. carry out a physical examination where necessary c. promptly provide (or arrange) suitable advice, investigation or treatment where necessary 	15, 16	<p>15. ... you must:</p> <ul style="list-style-type: none"> a. adequately assess the patient’s conditions, taking account of their history (including the symptoms and psychological, spiritual, social and cultural factors), their views and values; where necessary, examine the patient b. promptly provide or arrange suitable advice, investigations or treatment where necessary c. refer a patient to another practitioner when this serves the patient’s needs 	<p>Merged paragraphs 15 and 16 of <i>Good medical practice 2013</i>.</p> <p>7a added ‘taking account of patients’ needs’, as well as ‘economic factors’, to capture considering the socio-economic determinants of health.</p> <p>7d, e and g added ‘propose, provide’ and ‘seek advice from your supervising physician’.</p> <p>7h includes reference to a ‘suitably qualified’ practitioner to emphasise that referrals must serve the patient’s needs.</p>

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Providing good clinical care	7	<ul style="list-style-type: none"> d. propose, provide or prescribe drugs or treatment (including repeat prescriptions) only when you have adequate knowledge of the patient’s health and are satisfied that the drugs or treatment will meet their needs e. propose, provide or prescribe effective treatment based on the best available evidence f. follow our more detailed guidance on professional standards, <i>Good practice in prescribing and managing medicines and devices</i>, if you prescribe g. consult colleagues or seek advice from your 	15, 16	<p>16. In providing clinical care you must:</p> <ul style="list-style-type: none"> a. prescribe drugs or treatment, including repeat prescriptions, only when you have adequate knowledge of the patient’s health and are satisfied that the drugs or treatment serve the patient’s needs b. provide effective treatments based on the best available evidence c. take all possible steps to alleviate pain and distress whether or not cure may be possible d. consult colleagues where appropriate e. respect the patient’s right to seek a second opinion 	<p>Other minor textual changes but meaning unchanged.</p> <p>16c <i>Good medical practice 2013</i> moved to paragraph 23f (Treating patients with kindness, courtesy and respect).</p> <p>16e <i>Good medical practice 2013</i> moved to paragraph 18 (Treating patients fairly and respecting their rights).</p> <p>16f <i>Good medical practice 2013</i> moved to paragraph 39 (Caring for the whole patient).</p> <p>16g <i>Good medical practice 2013</i> moved to paragraph</p>

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Providing good clinical care	7	<p>supervising clinician, where appropriate</p> <p>h. refer a patient to another suitably qualified practitioner when this serves their needs.</p>	15, 16	<p>f. check that the care or treatment you provide for each patient is compatible with any other treatments the patient is receiving, including (where possible) self-prescribed over-the-counter medications</p> <p>g. wherever possible, avoid providing medical care to yourself or anyone with whom you have a close personal relationship</p>	97 (Managing conflicts of interest).
	8	If relevant to your area of practice, you must follow our <i>Guidance for doctors who offer cosmetic interventions</i> .			New. To draw attention to existing more detailed guidance.

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Offering remote consultations	9	You must provide safe and effective clinical care whether face to face, or through remote consultations via telephone, video link, or other online services. If you can't provide safe care through the mode of consultation you're using, you should offer an alternative if available, or signpost to other services.			New. To respond to the growth in remote care since 2013. The paragraph has been brought in from existing guidance on prescribing, paragraph 21, to encourage medical professionals to use the method of consultation necessary to provide safe and effective care.
Considering research opportunities	10	Research is vital in improving our understanding of health conditions, and increasing the availability of options for effective prevention, treatment, and care. You should consider opportunities to conduct or participate in research that may benefit current and/or future patients, and help to improve the health of the population.			Restored to <i>Good medical practice</i> to give greater prominence to research in the standards. It was reintroduced from <i>Good medical practice 2006</i> , and a new duty added to tell patients about opportunities to participate in research.

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Considering research opportunities	10	You should tell patients if you're aware of opportunities for them to participate in appropriate research			
Maintaining, developing and improving your performance	11	You must keep your professional knowledge and skills up to date	8	You must keep your professional knowledge and skills up to date	Unchanged.
	12	When you join an organisation, or when your role changes significantly throughout your career, you should be willing to find and take part in structured support opportunities offered by your employer or contracting body, such as mentoring or coaching schemes	10	You should be willing to find and take part in structured support opportunities offered by your employer or contracting body (for example, mentoring). You should do this when you join an organisation and whenever your role changes significantly throughout your career.	Sentences reordered, and 'coaching' added as another method to encourage a culture of continuing professional development.
	13	You must take steps to monitor, maintain, develop, and improve your performance and the quality	9, 13, 22b, 22c	9. You must regularly take part in activities that maintain and develop your competence and performance	Merged paragraphs 9, 13 and 22 from <i>Good medical practice 2013</i> .

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Maintaining, developing and improving your performance	13	<p>of your work, including taking part in systems of quality assurance and quality improvement to promote patient safety across the whole scope of your practice.</p> <p>This includes:</p> <ul style="list-style-type: none"> a. contributing to discussions and decisions about improving the quality of services and outcomes b. taking part in regular reviews and audits of your work, and your team’s work, and responding constructively to the outcomes, taking steps to address problems, and carrying out further training where necessary 	9, 13, 22b, 22c	<p>13. You must take steps to monitor and improve the quality of your work</p> <p>22 You must take part in systems of quality assurance and quality improvement to promote patient safety. This includes:</p> <ul style="list-style-type: none"> a. taking part in regular reviews and audits of your work and that of your team, responding constructively to the outcomes, taking steps to address any problems and carrying out further training where necessary b. regularly reflecting on your standards of practice and the care you provide 	<p>13a – brought in from <i>Leadership and management</i> paragraph 2b to encourage positive engagement with quality improvement.</p> <p>13b – was paragraph 22a <i>Good medical practice 2013</i>.</p> <p>13c – was paragraph 9 <i>Good medical practice 2013</i>.</p> <p>13d – was 22b and c <i>Good medical practice 2013</i> – expanded to widen the sources of feedback, and include consideration of own life experience, culture and beliefs. This is to help address the impacts that</p>

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Maintaining, developing and improving your performance	13	<p>c. regularly taking part in training and/or continuing professional development</p> <p>d. regularly reflecting on your standards of practice and the care you provide, including:</p> <p style="padding-left: 40px;">i. reflecting on any constructive feedback available to you</p> <p>considering how your life experience, culture and beliefs influence your interactions with others and may impact on the decisions you make and the care you provide.</p>	9, 13, 22b, 22c	c. reviewing patient feedback where it is available.	(perhaps unknown) biases can have on colleagues (as potential contributors to differential outcomes in education and career development) and patients (as potential contributors to health inequalities).
Managing resources effectively and sustainably	14	You must make good use of the resources available to you, and provide the best service possible, taking account of your	18	You must make good use of the resources available to you.	Added 'taking account of responsibilities to patients and wider population', to acknowledge the tensions that can arise between the

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14	responsibilities to patients and the wider population	18		needs and expectations of individual patients and the interests of the wider population.
15	You should choose sustainable solutions when you're able to, provided these don't compromise care standards. You should consider supporting initiatives to reduce the environmental impact of healthcare.			New. Added to address sustainability explicitly, in recognition of the risk to public health from climate change.

Domain 2 - Patients, partnership and communication					
Treating patients fairly and respect their rights	Paragraph number from 2024 version	<i>Good medical practice</i> 2024 text	Paragraph number from 2013 version	<i>Good medical practice</i> 2013 text	Change
	16	You must recognise and respect every patient's dignity and right to privacy.	47	You must treat patients as individuals and respect their dignity and privacy	Redrafted but meaning unchanged. Moved 'treat patients as individuals' to paragraph 34.
	17	If you carry out intimate examinations you must follow our more detailed guidance on <i>Intimate examinations and chaperones</i> .			New. To draw attention to existing more detailed guidance.
	18	You must recognise a patient's right to choose whether to accept your advice, and respect their right to seek a second opinion.	16e	... respect the patient's right to seek a second opinion	First part of this paragraph brought in from <i>Decision making and consent, to emphasise patient choice</i> .
	19	You must treat patients fairly. You must not discriminate against them or allow your personal views to affect your relationship with them, or the treatment you provide or arrange. You must not refuse	48, 57, 59	48. You must treat patients fairly and with respect whatever their life choices and beliefs. 57. You must not refuse or delay treatment	Merged paragraphs 48, 57 and 59 of <i>Good medical practice</i> 2013, and separated out patients and colleagues, in line with the restructure of the updated standards.

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	19	or delay treatment because you believe that a patient's actions or choices contributed to their condition	48, 57, 59	<p>because you believe that a patient's actions or lifestyle have contributed to their condition</p> <p>59. You must not unfairly discriminate against patients or colleagues by allowing your personal views to affect your professional relationships or the treatment you provide or arrange. You should challenge colleagues if their behaviour does not comply with this guidance, and follow the guidance in paragraph 25c if the behaviour amounts to abuse or denial of a patient's or colleague's rights.</p>	<p>Changed 'life choices' to 'choices' in response to feedback that the former sounds judgemental.</p> <p>Removed 'unfairly' (previously 'you must not unfairly discriminate') as the first sentence sets clear expectations in terms of treating patients fairly.</p> <p>Treating patients with respect is now at paragraph 23.</p> <p>Discrimination against colleagues is now included in paragraph 56.</p> <p>Challenging discriminatory behaviour is now at paragraph 57.</p>

Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
20	You must give priority to patients based on their clinical need if these decisions are within your power. If inadequate resources, policies, or systems prevent you from doing this – and patient safety or dignity may be seriously compromised as a result – you must follow the guidance in paragraph 75.	56	You must give priority to patients on the basis of their clinical need if these decisions are within your power. If inadequate resources, policies or systems prevent you from doing this, and patient safety, dignity or comfort may be seriously compromised, you must follow the guidance in paragraph 25b	Minor textual changes but expectation unchanged. Deleted ‘comfort’ to avoid setting too low a bar for raising concerns.
21	If you have a conscientious objection to a particular procedure, you must make sure that the way you manage this doesn’t act as a barrier to a patient’s access to appropriate care to meet their needs. You must follow the guidance in paragraph 88 and our more detailed guidance on	52	You must explain to patients if you have a conscientious objection to a particular procedure. You must tell them about their right to see another doctor and make sure they have enough information to exercise that right.	Changed emphasis from explaining conscientious objection to patients, to making sure they don’t act as a barrier to care. Reduced level of detail and referred to existing more detailed guidance.

Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
21	Personal beliefs and medical practice.	52	In providing this information you must not imply or express disapproval of the patient's lifestyle, choices or beliefs. If it is not practical for a patient to arrange to see another doctor, you must make sure that arrangements are made for another suitably qualified colleague to take over your role	
22	You must treat information about patients as confidential, including after a patient has died. You must follow our more detailed guidance on <i>Confidentiality: good practice in handling patient information</i> .	50	You must treat information about patients as confidential. This includes after a patient has died.	Minor textual changes but expectation unchanged.

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Treating patients with kindness, courtesy and respect	23	You must treat patients with kindness, courtesy and respect. This doesn't mean agreeing to every request (see paragraph 7d) or withholding relevant information that may be upsetting or unwelcome (see paragraph 28). It means: <ul style="list-style-type: none"> a. communicating sensitively and considerately, particularly when you're sharing potentially distressing issues about the patient's prognosis and care b. listening to patients, recognising their knowledge and experience of their health, and acknowledging their concerns c. trying not to make assumptions about what a 	31, 46	31 You must listen to patients, take account of their views, and respond honestly to their questions. 46 You must be polite and considerate. 16c take all possible steps to alleviate pain and distress whether or not a cure may be possible	Merged two paragraphs, and replaced 'polite and considerate' with 'kindness, courtesy and respect'. To address feedback about the word kindness being subjective, we've added explanations of what it does/doesn't mean. 23a-f have been brought together from existing guidance to reflect patient feedback on what kindness means to them. 23a – taken from <i>Treatment and care at the end of life</i> . 23 b-d – taken from <i>Decision making and consent</i> .

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Treating patients with kindness, courtesy and respect		<p>patient will consider significant or the importance they will attach to different outcomes</p> <p>d. being willing to explain your reasons for the options you offer (and the options you don't) and any recommendations you make</p> <p>e. recognising that patients may be vulnerable, even if they don't seem it</p> <p>f. being alert to signs of pain or distress, and taking steps to alleviate pain and distress whether or not a cure may be possible.</p>			<p>23e – new observation to reflect patient feedback.</p> <p>23f – added 'being alert to signs of pain or distress'. The rest of the text ('taking steps...') was at 16c <i>Good medical practice 2013</i>, with 'all possible' removed. This was to avoid this paragraph being used to put doctors under pressure to prescribe pain relief unsafely and to align with more detailed guidance on <i>Treatment and care at the end of life</i>.</p>
Supporting patients to make decisions about	24	All patients have the right to be involved in decisions about their treatment and care, and be supported to make informed decisions if they are			New to <i>Good medical practice</i> , but drawn in from <i>Decision making and consent</i>

treatment and care	Paragraph number from 2024 version	<i>Good medical practice</i> 2024 text	Paragraph number from 2013 version	<i>Good medical practice</i> 2013 text	Change
	24	able to. You must start from the presumption that all adult patients have capacity to make decisions about their treatment and care			
	25	You must be satisfied that you have consent or other valid authority before examining or treating patients, or involving patients or volunteers in teaching or research. More detail about this is given in our guidance <i>on Decision making and consent</i> which you must follow. If relevant to your practice, you must also follow our guidance on <i>Making and using visual and audio recordings of patients</i> .	17	You must be satisfied that you have consent or other valid authority before you carry out any examination or investigation, provide treatment or involve patients or volunteers in teaching or research	Redrafted to add in references to relevant pieces of guidance, but expectations unchanged.
	26	You must be aware of your legal and ethical duties relating to consent and capacity. This means you must:			New. To emphasise the importance of medical professionals specifically being

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		<ul style="list-style-type: none"> a. be aware of the relevant law on capacity and mental health b. have regard to relevant codes of practice c. follow our guidance on <i>Decision making and consent</i>. 			aware of mental capacity and mental health frameworks.
	27	When treating patients coming to the end of their lives, you must follow our more detailed guidance on <i>Treatment and care towards the end of life: good practice in decision making</i> .			New. To draw attention to existing more detailed guidance on professional standards.
Sharing information with patients	28	The exchange of information between medical professionals and patients is central to good decision making. You must give patients the information they want or need in a way they can understand. This includes information about:	32, 49	32 You must give patients the information they want or need to know in a way they can understand. You should make sure that arrangements are made, wherever possible, to meet	To highlight the responsibility of medical professionals to facilitate patients' rights to make decisions for themselves and to be supported to do so, we've incorporated several principles from our more

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28	<ul style="list-style-type: none"> a. their condition(s), likely progression, and any uncertainties about diagnosis and prognosis b. the options for treating or managing the condition(s), including the option to take no action c. the potential benefits, risks of harm, uncertainties about, and likelihood of success for each option. 	32, 49	<p>patients' language and communication needs</p> <p>49 You must work in partnership with patients, sharing with them the information they will need to make decisions about their care, including:</p> <ul style="list-style-type: none"> a. their condition, its likely progression and the options for treatment, including associated risks and uncertainties b. the progress of their care, and your role and responsibilities in the team c. who is responsible for each aspect of patient care, and how information is shared within teams and 	<p>detailed guidance on <i>Decision making and consent</i>.</p> <p>Merged parts of paragraphs 32 and 49 <i>Good medical practice</i> 2013. The first part of paragraph 28 has been redrafted but the meaning is unchanged. Meeting communication needs is now at paragraph 32.</p> <p>49a <i>Good medical practice</i> 2013– redrafted and included option to take no action. Text on risk redrafted in line with <i>Decision making and consent</i> guidance.</p> <p>49b and c <i>Good medical practice</i> 2013 – moved to 65b (Contributing to continuity of care).</p>

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28		32, 49	among those who will be providing their care	
29	You must listen to patients and encourage an open dialogue about their health, asking questions to allow them to express what matters to them, and responding honestly to their questions.	31	You must listen to patients, take account of their views, and respond honestly to their questions	Expanded to include open dialogue and asking questions, in line with <i>Decision making and consent</i> guidance.
30	You must make sure that the information you give patients is clear, accurate and up to date, and based on the best available evidence.			New. Drawn from paragraph 21 in <i>Decision making and consent</i> guidance.
31	You should check patients' understanding of the information they've been given, and do your best to make sure they have the time and support they need to make informed decisions if they are able to.			New. Drawn from paragraphs 27 and 30 in <i>Decision making and consent</i> guidance.

Sharing information with patients	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	32	You must take steps to meet patients' language and communication needs, so you can support them to engage in meaningful dialogue and make informed decisions about their care. The steps you take should be proportionate to the circumstances, including the patient's needs and the seriousness of their condition(s), the urgency of the situation and the availability of resources.	32	You should make sure that arrangements are made, wherever possible, to meet patients' language and communication needs	We made this a 'must' duty as meeting patients' language and communication needs is critical for good decision-making. To address concerns about time and resources available to implement these, we added reference to proportionality, which includes urgency, seriousness and the availability of options.
	33	You must consider and respond to the needs of patients with impairments or disabilities. Not all impairments and disabilities are easy to identify so you should ask patients what support they need, and offer reasonable adjustments that	60	You must consider and respond to the needs of disabled patients and should make reasonable adjustments to your practice so they can receive care to meet their needs	Added 'impairments' to broaden out the consideration of factors that may need to be addressed. We've also added a reference to proportionality to distinguish between individual and system responsibilities.

Sharing information with patients	Paragraph number from 2024 version	<i>Good medical practice</i> 2024 text	Paragraph number from 2013 version	<i>Good medical practice</i> 2013 text	Change
	33	are proportionate to the circumstances.	60		
	34	You must treat each patient as an individual. You must not rely on assumptions about the treatment options or outcomes a patient will prefer, or the factors they will consider significant.	47	You must treat patients as individuals and respect their dignity and privacy.	Opening sentence is the first half of <i>Good medical practice</i> 2023 paragraph 47 and includes paragraph 22. The second sentence is drawn from paragraph 12 of <i>Decision making and consent</i> guidance.
	35	If patients are asked to agree to be involved in teaching or research, you must share any information they'll need to make a decision and follow the guidance in paragraph 86 and our more detailed guidance on <i>Good practice in research</i> .	49d	... any other information patients need if they are asked to agree to be involved in teaching or research	Unchanged but moved to its own paragraph.
	36	You must be open and honest with patients about any interests you have that may affect (or could be seen to affect) the way you propose,	78	You must not allow any interests you have to affect the way you prescribe for, treat, refer or commission services for patients	Recent reviews and inquiries, including the Independent Medicines and Medical Devices Safety review, recommended transparency

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Sharing information with patients	36	provide or prescribe treatments, or refer patients. You must follow our more detailed guidance on <i>Financial and commercial arrangements and conflicts of interest</i> .	78		about conflicts of interest as a necessary part of the consent discussion with patients. We've included this here, and in Domain four, to emphasise the importance of openness and honesty with patients about relevant interests.
Communicating with those close to the patient	37	You must be considerate and compassionate to those close to a patient and be sensitive and responsive in giving them support and information. You must follow our more detailed guidance on <i>Confidentiality: good practice in handling patient information</i> .	33	You must be considerate to those close to the patient and be sensitive and responsive in giving them information and support	Added references to compassion and confidentiality.
Caring for the whole patient	38	You must support patients in caring for themselves and empower them to improve and maintain their health. This may include:	51	You must support patients in caring for themselves to empower them to improve and maintain their health. This may, for example, include:	Examples reframed to include a more positive approach to patient self-management.

Caring for the whole patient	Paragraph number from 2024 version	<i>Good medical practice</i> 2024 text	Paragraph number from 2013 version	<i>Good medical practice</i> 2013 text	Change
	38	<ul style="list-style-type: none"> a. helping them to access information and support to manage their health successfully b. supporting them to make decisions that improve their health and wellbeing. 	51	<ul style="list-style-type: none"> a. advising patients on the effects of their life choices and lifestyle on their health and well-being b. supporting patients to make lifestyle changes where appropriate 	
	39	You should ask patients about any other care or treatment they are receiving – including over-the-counter medications – and check that any care or treatment you propose, provide or prescribe is compatible.	16f check that the care or treatment you provide for each patient is compatible with any other treatments the patient is receiving, including (where possible) self-prescribed over-the-counter medications	Expectation unchanged.
	40	If a patient is taking multiple medications, you should discuss the importance of regular reviews to check that the medications continue to meet the patient’s needs and			New duty to tackle risk (and resource issue) of using multiple medicines.

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Caring for the whole patient	40	are optimised for them. You should consider the overall impact of the patient’s treatments, and whether the benefits outweigh any risk of harm.			
Safeguarding children and adults who are at risk of harm	41	You must consider the needs and welfare of people (adults, children and young people) who may be vulnerable, and offer them help if you think their rights are being abused or denied. You must follow our more detailed guidance on <i>Protecting children and young people and 0-18 years: guidance for all doctors.</i>	27	Whether or not you have vulnerable adults or children and young people as patients, you should consider their needs and welfare and offer them help if you think their rights have been abused or denied	Paragraph redrafted but meaning unchanged.
	42	You must act promptly on any concerns you have about a patient – or someone close to them – who may be at risk of abuse or neglect, or is being abused or neglected.			New. To make clear medical professionals’ responsibilities to take action to protect children and vulnerable adults who may be at risk of harm.

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Helping in emergencies	43	You must offer help in an emergency, taking account of your own safety, your competence, and the availability of other options for care	26	You must offer help if emergencies arise in clinical settings or in the community, taking account of your own safety, your competence and the availability of other options for care.	Paragraph redrafted but meaning unchanged.
Making sure patients who pose a risk of harm to others can access appropriate care	44	Patients must not be denied care because their condition puts others at risk. If a patient poses a risk to your health or safety, you should take all available steps to minimise the risk before either providing treatment yourself, or making alternative arrangements for the patient to access care to meet their needs.	58	You must not deny treatment to patients because their medical condition may put you at risk. If a patient poses a risk to your health or safety, you should take all available steps to minimise the risk before providing treatment or making other suitable alternative arrangements for providing treatment.	Updated opening sentence to avoid placing an unreasonable demand on individual clinicians to provide care to patients regardless of the risks to themselves.
Being open if things go	45	You must be open and honest with patients if things go	55	You must be open and honest with patients if	Added that an apology is not an admission of liability, and

	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
wrong	45	wrong. If a patient under your care has suffered harm or distress, you should: <ul style="list-style-type: none"> a. put matters right, if possible b. apologise (apologising does not, of itself, mean that you are admitting legal liability for what's happened) c. explain fully and promptly what has happened and the likely short-term and long-term effects d. report the incident in line with your organisation's policy so it can be reviewed or investigated as appropriate – and lessons can be learnt and patients protected from harm in the future. <i>Openness and honesty when things go</i> 	55	things go wrong. If a patient under your care has suffered harm or distress, you should: <ul style="list-style-type: none"> a. put matters right (if that is possible) b. offer an apology c. explain fully and promptly what has happened and the likely short-term and long-term effects. 	that the incident should be reported in line with local policies to help avoid recurrence.

Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
45	<i>wrong: the professional duty of candour.</i>	55		
46	You must respond promptly, fully and honestly to complaints. You must not allow a patient’s complaint to adversely affect the care or treatment you provide or arrange.	61	You must respond promptly, fully and honestly to complaints and apologise when appropriate. You must not allow a patient’s complaint to adversely affect the care or treatment you provide or arrange	Deleted ‘apologise where appropriate’. This is now at paragraph 46.
47	You should only end a professional relationship with a patient when the breakdown of trust between you and the patient means you can’t continue to provide good clinical care to them. You must follow our more detailed guidance on <i>Ending your professional relationship with a patient.</i>	62	You should end a professional relationship with a patient only when the breakdown of trust between you and the patient means you cannot provide good clinical care to the patient	Paragraph redrafted but meaning unchanged.

Domain 3 - Colleagues, culture and safety					
Treating colleagues with kindness, courtesy and respect	Paragraph number from 2024 version	<i>Good medical practice</i> 2024 text	Paragraph number from 2013 version	<i>Good medical practice</i> 2013 text	Change
	48	You must treat colleagues with kindness, courtesy and respect.	36	You must treat colleagues fairly and with respect	Added kindness to mirror expectations in relation to patients, and in line with evidence on the positive impact of being civil and compassionate on medical professionals' wellbeing and patient care.
	49	To develop and maintain effective teamworking and interpersonal relationships you must: <ul style="list-style-type: none"> a. listen to colleagues b. communicate clearly, politely and considerately c. recognise and show respect for colleagues' skills and contributions d. work collaboratively with colleagues and be willing 	35	You must work collaboratively with colleagues, respecting their skills and contributions	Expanded paragraph to include communicating, listening, leadership and followership as elements of effective teamworking and interpersonal relationships.

Treating colleagues with kindness, courtesy and respect	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	49	to lead or follow as the circumstances require.	35		
	50	When you are on duty you must be accessible to colleagues seeking information, advice, or support.	34	When you are on duty you must be readily accessible to patients and colleagues seeking information, advice or support	Refocused this duty towards colleagues as paragraphs on communicating with patients have expanded. Removed 'readily' as medical professionals will often need to prioritise between multiple requests.
	51	You must be compassionate towards colleagues who have problems with their performance or health. But you must put patient safety first at all times.	43	You must support colleagues who have problems with their performance or health. But you must put patient safety first at all times	Changed 'support' to 'be compassionate' in line with tonal changes throughout the guidance to encourage compassionate working cultures.
Contributing to a positive working and training environment	52	You must help to create a culture that is respectful, fair, supportive, and compassionate by role modelling behaviours consistent with these values.			New. To reflect that culture is created by the shared values and behaviours of a group of people. And to encourage working and training environments that

Contributing to a positive working and training environment	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	52				are fair, free from discrimination, and where people are respected and valued as individuals.
	53	You should be aware of how your behaviour may influence others within and outside the team.	37	You must be aware of how your behaviour may influence others within and outside the team.	Changed duty from ‘must’ to ‘should’ recognising that not all medical professionals (including those with neurodiversity) will automatically be aware of something.
	54	You should be aware of the risk of bias, and consider how your own life experience, culture and beliefs influence your interactions with others, and may impact on your decisions and actions.			New. To help address the impacts of biases (which may not initially be known), and the impact that these may have on colleagues (as potential contributors to differential outcomes in education and career development) and patients (as potential contributors to health inequalities).

Contributing to a positive working and training environment	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	55	You must show respect for, and sensitivity towards, others' life experience, cultures and beliefs.			New. To encourage working and training environments that are fair, free from discrimination, and where people are respected and valued as individuals.
	56	You must not abuse, discriminate against, bully, or harass anyone based on their personal characteristics, or for any other reason. By 'personal characteristics' we mean someone's appearance, lifestyle, culture, their social or economic status, or any of the characteristics protected by legislation – age, disability, gender reassignment, race, marriage and civil partnership, pregnancy and maternity, religion or belief, sex and sexual orientation	59	You must not unfairly discriminate against patients or colleagues by allowing your personal views to affect your professional relationships or the treatment you provide or arrange colleague's rights.	Added abuse, bully and harass from paragraph 7 <i>Leadership and management</i> . Added explanation of 'personal characteristics' from <i>Good medical practice 2013</i> . Discrimination against patients is addressed at paragraph 19.

Contributing to a positive working and training environment	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	57	You must not act in a sexual way towards colleagues with the effect or purpose of causing offence, embarrassment, humiliation or distress. What we mean by acting ‘in a sexual way’ can include – but isn’t limited to – verbal or written comments, displaying or sharing images, as well as unwelcome physical contact. You must follow our more detailed guidance on Maintaining personal and professional boundaries.			New. Added in response to feedback that <i>Good medical practice 2013</i> doesn’t sufficiently address sexual harassment in the medical profession.
	58	If you witness any of the behaviours described in paragraphs 56 or 57 you should act, taking account of the specific circumstances. For example, you could: <ul style="list-style-type: none"> a. check in and offer support to anyone targeted or affected 	59	You should challenge colleagues if their behaviour does not comply with this guidance, and follow the guidance in paragraph 25c (see section Domain 2: Safety and quality) if the behaviour amounts to abuse	Changed ‘challenge colleagues’ to ‘act’ and added more specifics on the kinds of action that can be taken. Added recognition of the limits of individuals’ power

Contributing to a positive working and training environment	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	58	<p>by the behaviour, and/or let them know that you feel that the behaviour you witnessed is unacceptable</p> <p>b. challenge the behaviour by speaking to the person responsible – either at the time, if safe to do so, or at an appropriate time and place</p> <p>c. speak to a colleague and/or consider reporting the behaviour in line with your workplace policy and our more detailed guidance on <i>Raising and acting on concerns about patient safety</i>. Before you report the behaviour you witnessed, try and make sure that the person who was targeted is</p>	59	or denial of a patient’s or colleague’s rights	and scope of action, but also emphasised the collective responsibility in addressing these behaviours.

Contributing to a positive working and training environment	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	58	aware of, and supports, your intention to report it. We recognise some people may find it harder than others to speak up but everyone has a responsibility – to themselves and their colleagues – to do something to prevent these behaviours continuing and contributing to a negative, unsafe environment.	59		
	59	If you have a formal leadership or management role and you witness – or are made aware of – any of the behaviours described in paragraphs 56 or 57, you must act. You must: <ul style="list-style-type: none"> a. make sure such behaviours are adequately addressed 			New. To emphasise the important role of medical professionals in leadership and management positions in addressing damaging behaviours. This duty is a ‘must’ for leaders whereas the duty for all medical professionals is a ‘should’.

Contributing to a positive working and training environment	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	59	b. make sure people are supported where necessary, and c. make sure concerns are dealt with promptly, being escalated where necessary.			
Demonstrating leadership behaviours	60	You must follow our more detailed guidance on <i>Leadership and management for all doctors</i> .			New. To draw attention to existing more detailed guidance.
	61	You must make sure that all staff whose work you are overseeing have appropriate supervision.	40	You must make sure that all staff you manage have appropriate supervision.	Changed ‘manage’ to ‘whose work you are overseeing’ in response to feedback that this is a more accurate description of relationships in healthcare teams.
	62	You must be accurate, fair and objective when writing references, and when appraising or assessing the performance of colleagues, including locums and students. You should not leave out any information relevant to		You must be honest and objective when writing references, and when appraising or assessing the performance of colleagues, including locums and students.	Changed ‘honest’ to ‘accurate, fair’ to be more specific about the standards expected. Changed ‘references must include’ to ‘you should not

Demonstrating leadership behaviours	Paragraph number from 2024 version	<i>Good medical practice</i> 2024 text	Paragraph number from 2013 version	<i>Good medical practice</i> 2013 text	Change
	62	your colleagues' competence, performance, and conduct.	41	References must include all information relevant to your colleagues' competence, performance and conduct.	leave out' to avoid the impression we're setting standards about the content of references, rather than the actions of individuals.
	63	d. You should be willing to offer professional support to colleagues, including students, for example through mentoring, coaching, teaching or training. This type of support is especially important for those new to practice in the UK, those returning from a period away from practice, and those who cannot easily access support.	39, 42	39 You should be prepared to contribute to teaching and training doctors and students. 42 You should be willing to take on a mentoring role for more junior doctors and other healthcare professionals	Merged paragraphs 39 and 42 to bring together teaching, training, mentoring and other professional support. And added who this might be important for, to encourage a fairer access to opportunities for groups that may be more likely to face barriers to professional development.
	64	If part of your role is helping staff access training, development and employment			New. Added to reflect that some individuals (who may share protected

	Paragraph number from 2024 version	<i>Good medical practice</i> 2024 text	Paragraph number from 2013 version	<i>Good medical practice</i> 2013 text	Change
	64	opportunities, you should do this fairly			characteristics) are more likely to face discrimination or lack of fair opportunity when accessing training and development.
Contributing to continuity of care	65	Continuity of care is important for all patients, but especially those who may struggle to navigate their healthcare journey or advocate for themselves. Continuity is particularly important when care is shared between teams, between different members of the same team, or when patients are transferred between care providers. To contribute to continuity of care you must: <ul style="list-style-type: none"> a. promptly share all relevant information about patients (including any reasonable 	44, 49b and c	44 You must contribute to the safe transfer of patients between healthcare providers and between health and social care providers. This means you must: <ul style="list-style-type: none"> a. share all relevant information with colleagues involved in your patients' care within and outside the team, including when you hand over care as you go off duty, and when you delegate care or refer patients to other 	Added more explanation of why continuity of care is important. <p>65a drawn from 44a <i>Good medical practice</i> 2013.</p> <p>65b drawn from 49b and c <i>Good medical practice</i> 2013.</p> <p>65c and d drawn from 44a and b <i>Good medical practice</i> 2013.</p>

Contributing to continuity of care	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	65	<p>adjustments and communication support preferences) with others involved in their care, within and across teams, as required</p> <p>b. share information with patients about;</p> <ul style="list-style-type: none"> i. the progress of their care ii. who is responsible for which aspect of their care iii. the name of the lead clinician or team with overall responsibility for their care <p>c. be confident that information necessary for ongoing care has been shared;</p>	44, 49b and c	<p>health or social care providers</p> <p>b. check, where practical, that a named clinician or team has taken over responsibility when your role in providing a patient’s care has ended. This may be particularly important for patients with impaired capacity or who are vulnerable for other reasons</p> <p>49 You must work in partnership with patients, sharing with them the information they will need to make decisions about their care, including:</p>	

Contributing to continuity of care	Paragraph number from 2024 version	<i>Good medical practice</i> 2024 text	Paragraph number from 2013 version	<i>Good medical practice</i> 2013 text	Change
	65	<ul style="list-style-type: none"> i. before you go off duty ii. before you delegate care, or iii. before you refer the patient to another health or social care provider d. check, where practical, that a named clinician or team has taken over responsibility when your role in a patient’s care has ended. 	44, 49b and c	<ul style="list-style-type: none"> b the progress of their care, and your role and responsibilities in the team c who is responsible for each aspect of patient care, and how information is shared within teams and among those who will be providing their care. 	

Delegating safely and appropriately	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	66	You must be confident that any person you delegate to has the necessary knowledge, skills and training to carry out the task you're delegating. You must give them clear instructions and encourage them to ask questions and seek support or supervision if they need it.	45	When you do not provide your patients' care yourself, for example when you are off duty, or you delegate the care of a patient to a colleague, you must be satisfied that the person providing care has the appropriate qualifications, skills and experience to provide safe care for the patient	<p>Changed 'satisfied' to 'confident' and changed 'appropriate qualifications, skills and experience' to 'knowledge, skills and training'.</p> <p>'You must give clear instructions and encourage them to ask questions and seek support or supervision if they need it' added in response to feedback that medical professionals being delegated to don't always feel able to ask for these things.</p>
	67	If a task is delegated to you by a colleague but you're not confident you have the necessary knowledge, skills or training to carry it out safely, you must prioritise patient			New. Following feedback to address the responsibilities of medical professionals who are being delegated to, and empower them to prioritise patient safety.

	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
Delegating safely and appropriately	67	safety and seek help, even if you've already agreed to carry out the task independently.			
	68	You must follow our more detailed guidance on <i>Delegation and referral</i> .			New. To draw attention to existing more detailed guidance.
Recording your work clearly, accurately, and legibly	69	You must make sure that formal records of your work (including patients' records) are clear, accurate, contemporaneous and legible.	19	Documents you make (including clinical records) to formally record your work must be clear, accurate and legible. You should make records at the same time as the events you are recording or as soon as possible afterwards	Redrafted but meaning unchanged. Pop-up definition of 'contemporaneous'.
	70	You should take a proportionate approach to the level of detail but patients' records should usually include: a. relevant clinical findings b. drugs, investigations or treatments proposed, provided or prescribed	21	Clinical records should include: a. relevant clinical findings b. the decisions made and actions agreed, and who is making the decisions and agreeing the actions	Expanded to include patient preferences/concerns and information about reasonable adjustments and communication support preferences, in line with <i>Decision making and consent</i> .

Recording your work clearly, accurately, and legibly	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	70	<ul style="list-style-type: none"> c. the information shared with patients d. concerns or preferences expressed by the patient that might be relevant to their ongoing care, and whether these were addressed e. information about any reasonable adjustments and communication support preferences f. decisions made, actions agreed (including decisions to take no action) and when/whether decisions should be reviewed g. who is creating the record and when. 	21	<ul style="list-style-type: none"> c. the information given to patients d. any drugs prescribed or other investigation or treatment e. who is making the record and when 	Reference to proportionality added.
	71	You must keep records that contain personal information about patients, colleagues or others securely, and in line with	20	You must keep records that contain personal information about patients, colleagues or others	Added reference to our confidentiality guidance.

Recording your work clearly, accurately, and legibly	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	71	any data protection law requirements and our guidance on <i>Confidentiality: good practice in handling patient information</i> .	20	securely, and in line with any data protection law requirements	
	72	You should be familiar with, and use, the clinical governance and risk management structures and processes in any organisation that you work for or are contracted to.			New. Brought in from <i>Leadership and management</i> guidance paragraph 26.
	73	To help keep patients safe you must: a. contribute to confidential inquiries b. contribute to adverse event recognition c. report adverse incidents involving medical devices (including software, diagnostic tests, and digital tools) that put the safety of a patient or another person	23	To help keep patients safe you must: a. contribute to confidential inquiries b. contribute to adverse event recognition c. report adverse incidents involving medical devices that put or have the potential to put the safety of a patient, or another person, at risk	Added explicit mention of software, diagnostic tests, and digital tools to make clear these are included in the term 'medical devices'. Added 'contribute to incident reviews and/or investigations' to make clear that actively engaging in reviews of adverse events/incidents is important and expected.

Recording your work clearly, accurately, and legibly	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
		<p>at risk, or have the potential to do so</p> <p>d. contribute to incident reviews and/or investigations</p> <p>e. report suspected adverse drug reactions</p> <p>f. respond to requests from organisations monitoring public health.</p> <p>When providing information for these purposes you must follow our guidance on <i>Confidentiality: good practice in handling patient information</i>.</p>		<p>d. report suspected adverse drug reactions</p> <p>respond to requests from organisations monitoring public health</p>	
	74	You must take up any post you have accepted, work any shift you have agreed to, and work your contractual notice period before leaving a job, unless the employer has reasonable time to make other arrangements or	38	Patient safety may be affected if there is not enough medical cover. So you must take up any post you have formally accepted, and work your contractual notice period before leaving	Added references to personal circumstances and included agreeing to work a shift (not just taking up a post).

Recording your work clearly, accurately, and legibly	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	74	your personal circumstances prevent this.	38	a job, unless the employer has reasonable time to make other arrangements	
	75	<p>You must act promptly if you think that patient safety or dignity is, or may be, seriously compromised.</p> <p>a. If a patient is not receiving basic care to meet their needs, you must act to make sure the patient is cared for as soon as possible, for example by asking someone who delivers basic care to attend to the patient straight away.</p> <p>b. If patients are at risk because of inadequate premises, equipment or other resources, policies or systems, you should first protect patients and put the matter right if that's</p>	25	<p>You must take prompt action if you think that patient safety, dignity or comfort is or may be seriously compromised.</p> <p>a. If a patient is not receiving basic care to meet their needs, you must immediately tell someone who is in a position to act straight away.</p> <p>b. If patients are at risk because of inadequate premises, equipment or other resources, policies or systems, you should put the matter right if that is possible. You must raise your concern</p>	<p>Deleted reference to comfort, (in line with change at paragraph 20) to avoid setting too low a bar for raising concerns.</p> <p>Changed to allow for the medical professional to act immediately themselves as well as the option to tell someone else who could act immediately (in bullet point a).</p> <p>In bullet point b 'put the matter right' has been changed to 'first make the patient safe, comfortable and/or restore their dignity if that's possible. Then raise your concern...'</p>

Recording your work clearly, accurately, and legibly	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
		<p>c. possible. Then you must raise your concern in line with your workplace policy and our more detailed guidance on <i>Raising and acting on concerns about patient safety</i>.</p> <p>If you have concerns that a colleague may not be fit to practise and may be putting patients at risk, you must ask for advice from a colleague, your defence body, or us. If you are still concerned, you must report this, in line with your workplace policy and our more detailed guidance on Raising and acting on concerns about patient safety.</p>		<p>c. in line with our guidance and your workplace policy. You should also make a record of the steps you have taken.</p> <p>If you have concerns that a colleague may not be fit to practise and may be putting patients at risk, you must ask for advice from a colleague, your defence body or us. If you are still concerned you must report this, in line with our guidance and your workplace policy, and make a record of the steps you have taken</p>	
	76	If you have a formal leadership or management role, you must take active steps to create an environment in which people	24	You must promote and encourage a culture that allows all staff to raise concerns openly and safely	Expanded the existing duty, following feedback that it put the burden in the wrong place, if those in leadership

	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
Recording your work clearly, accurately, and legibly	76	can talk about errors and concerns safely. This includes making sure that any concerns raised with you are dealt with promptly and adequately, in line with your workplace policy and our more detailed guidance on <i>Raising and acting on concerns about patient safety</i> .	24		roles didn't also take responsibility for creating environments where concerns can be raised safely and for follow up on these.
Managing risks posed by your health	77	You should avoid seeking medical care from a family member or anyone you work closely with. If you are registered with a general practitioner this should be someone outside your family and your workplace.	30	You should be registered with a general practitioner outside your family	Amended to make clear that – while there's no duty to be registered with a GP - if a medical professional registers with one, it shouldn't be a family member or anyone they work closely with.
	78	You should try to take care of your own health and wellbeing, recognising if you may not be fit for work. You should seek independent professional advice about your fitness for work,			New. To recognise that medical professionals taking care of their own wellbeing is important. It's necessary to protect wellbeing to empower medical

Managing risks posed by your health	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	78	rather than relying on your own assessment.			professionals, and in the interests of patient safety.
	79	You must consult a suitably qualified professional and follow their advice about any changes to your practice they consider necessary if: <ul style="list-style-type: none"> a. you know or suspect that you have a serious condition that you could pass on to patients b. your judgement or performance could be affected by a condition or its treatment. d. You must not rely on your own assessment of the risk to patients. 	28	If you know or suspect that you have a serious condition that you could pass on to patients, or if your judgement or performance could be affected by a condition or its treatment, you must consult a suitably qualified colleague. You must follow their advice about any changes to your practice they consider necessary. You must not rely on your own assessment of the risk to patients	Restructured to make it clearer and changed 'colleague' to 'professional'.
	80	You should be immunised against common serious communicable diseases (unless contraindicated).	29	You should be immunised against common serious communicable diseases	Unchanged

				(unless otherwise contraindicated)	
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Domain 4 - Trust and professionalism					
Acting with honesty and integrity	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	81	You must make sure that your conduct justifies patients' trust in you and the public's trust in your profession.	65	You must make sure that your conduct justifies your patients' trust in you and the public's trust in the profession	Changed 'your patients' to 'patients'.
	82	You must always be honest about your experience, qualifications, and current role.	66	You must always be honest about your experience, qualifications and current role	Unchanged.
	83	If a patient, colleague, or anyone else you have contact with in your professional role asks for your registered name and/or GMC reference number, you must give this information to them.	64	If someone you have contact with in your professional role asks for your registered name and/or GMC reference number, you must give this information to them	Replaced 'someone' with the more specific 'a patient, colleague, or anyone else'.
	84	You must be honest in financial and commercial dealings with patients, employers, insurers,	77	You must be honest in financial and commercial dealings with patients,	Added 'indemnifiers'.

	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	84	indemnifiers and other organisations or individuals.	77	employers, insurers and other organisations or individuals	
Acting with honesty and integrity in research	85	When designing, organising or carrying out research, you must put the interests of participants first. You must act with honesty and integrity, and follow national research governance guidelines and our more detailed guidance on <i>Good practice in research</i> .	67	You must act with honesty and integrity when designing, organising or carrying out research, and follow national research governance guidelines and our guidance	Restructured and added duty to 'put the interests of participants first'.
Maintaining professional boundaries	86	You must not act in a sexual way towards patients or use your professional position to pursue a sexual or improper emotional relationship with a patient or someone close to them. You must follow our more detailed guidance on	53	You must not use your professional position to pursue a sexual or improper emotional relationship with a patient or someone close to them	Added 'act in a sexual way' to mirror the expectations for behaviour towards colleagues in paragraph 57.

	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
Maintaining professional boundaries	86	<i>Maintaining personal and professional boundaries.</i>	53		
	87	You must not express your personal beliefs (including political, religious and moral beliefs) to patients in ways that exploit their vulnerability or could reasonably cause them distress. You must follow our more detailed guidance on <i>Personal beliefs and medical practice</i> .	54	You must not express your personal beliefs (including political, religious and moral beliefs) to patients in ways that exploit their vulnerability or are likely to cause them distress	Changed 'are likely to cause distress' to 'could reasonably cause them distress'.
Communicating as a medical professional					
All professional communication	88	You must be honest and trustworthy, and maintain patient confidentiality in all your professional written, verbal and digital communications.	68, 69	68 You must be honest and trustworthy in all your communication with patients and colleagues.... 69 When communicating publicly, including	Added 'maintain patient confidentiality' (from <i>Good medical practice 2013</i> paragraph 69) and specified that this duty relates to all written, verbal and digital communications.

All professional communication	Paragraph number from 2024 version	<i>Good medical practice</i> 2024 text	Paragraph number from 2013 version	<i>Good medical practice</i> 2013 text	Change
	88		68, 69	speaking to or writing in the media, you must maintain patient confidentiality. You should remember when using social media that communications intended for friends or family may become more widely available.	
	89	You must make sure any information you communicate as a medical professional is accurate, not false or misleading. This means: <ul style="list-style-type: none"> a. you must take reasonable steps to check the information is accurate b. you must not deliberately leave out relevant information c. you must not minimise or trivialise risks of harm 	68, 71	68... This means you must make clear the limits of your knowledge and make reasonable checks to make sure any information you give is accurate 71 You must be honest and trustworthy when writing reports, and when completing or signing forms, reports and other	Merged existing paragraphs and added 'you must not minimise or trivialise risks of harm' and 'you must not present opinion as established fact'.

	Paragraph number from 2024 version	<i>Good medical practice</i> 2024 text	Paragraph number from 2013 version	<i>Good medical practice</i> 2013 text	Change
All professional communication		d. you must not present opinion as established fact.		documents. You must make sure that any documents you write or sign are not false or misleading. a. You must take reasonable steps to check the information is correct. b. You must not deliberately leave out relevant information	
Public professional communication, including using social media, advertising, promotion, and endorsement	90	When communicating publicly as a medical professional – including using social media, advertising your services, and promoting or endorsing any services or products: a. you must follow the guidance in paragraph 89 and 90 b. you must declare any conflicts of interest	70	When advertising your services, you must make sure the information you publish is factual and can be checked, and does not exploit patients’ vulnerability or lack of medical knowledge	Expanded to apply to all public communication as a professional (not just advertising). Added reference to the general duty to ‘protect and promote the health of patients and the public’.

Public professional communication, including using social media, advertising, promotion, and endorsement	Paragraph number from 2024 version	<i>Good medical practice</i> 2024 text	Paragraph number from 2013 version	<i>Good medical practice</i> 2013 text	Change
		<ul style="list-style-type: none"> c. you must not exploit people’s vulnerability or lack of medical knowledge d. you must make sure what you communicate is in line with your duty to promote and protect the health of patients and the public. 			
	91	You must follow our more detailed guidance on <i>Doctors’ use of social media</i> .			New. To draw attention to existing more detailed guidance.
	92	When giving evidence or acting as a witness, you must follow the guidance in paragraphs 89 to 91 and our more detailed guidance on <i>Acting as a witness in legal proceedings</i> , and you must make clear the limits of your knowledge and expertise.	72, 74	<p>72 You must be honest and trustworthy when giving evidence to courts or tribunals. You must make sure that any evidence you give or documents you write or sign are not false or misleading.</p> <ul style="list-style-type: none"> a. You must take reasonable steps to 	Restructured to make it clearer and more concise. <i>Good medical practice</i> 2013 paragraphs 72a and b are now at paragraph 89.

	Paragraph number from 2024 version	<i>Good medical practice</i> 2024 text	Paragraph number from 2013 version	<i>Good medical practice</i> 2013 text	Change
Public professional communication, including using social media, advertising, promotion, and endorsement	92		72, 74	<p>check the information is correct.</p> <p>b. You must not deliberately leave out relevant information</p> <p>74 You must make clear the limits of your competence and knowledge when giving evidence or acting as a witness</p>	
Private communication	93	When communicating privately, including using instant messaging services, you should bear in mind that messages or other communications in private groups may become public.	69	When communicating publicly, including speaking to or writing in the media, you must maintain patient confidentiality. You should remember when using social media that communications intended for friends or family may	Redrafted. Reference to maintaining patient confidentiality at paragraph 88.

	Paragraph number from 2024 version	<i>Good medical practice</i> 2024 text	Paragraph number from 2013 version	<i>Good medical practice</i> 2013 text	Change
	93		69	become more widely available.	
Managing conflicts of interest	94	You must not allow any interests you have to affect, or be seen to affect the way you propose, provide or prescribe treatments, refer patients, or commission services.	78	You must not allow any interests you have to affect the way you prescribe for, treat, refer or commission services for patients	Redrafted and added 'or be seen to affect' to recognise that the appearance of a conflict can undermine confidence, whether or not there is one.
	95	If you are faced with a conflict of interest, you must be open about it with patients and employers, declare it in line with local and national arrangements, and be prepared to exclude yourself from decision making. You must follow our more detailed guidance in <i>Financial and commercial arrangements and conflicts of interest</i> .	79	If you are faced with a conflict of interest, you must be open about the conflict, declaring your interest formally, and you should be prepared to exclude yourself from decision making	Added 'patients and employers' to reflect changed expectations about openness and patient choice. Replaced 'declaring your interest formally' with 'declare it in line with local and national arrangements' to reflect wider system changes.

Managing conflicts of interest	Paragraph number from 2024 version	<i>Good medical practice</i> 2024 text	Paragraph number from 2013 version	<i>Good medical practice</i> 2013 text	Change
	96	You must not ask for or accept – from patients, colleagues or others – any incentive payments, gifts or hospitality that may affect or be seen to affect the way you propose, provide or prescribe treatments, refer or commission services for patients. You must not offer such incentives to others.	80	You must not ask for or accept – from patients, colleagues or others – any inducement, gift or hospitality that may affect or be seen to affect the way you prescribe for, treat or refer patients or commission services for patients. You must not offer these inducements	Redrafted but expectation unchanged.
	97	You must, wherever possible, avoid providing medical care to yourself or anyone with whom you have a close personal relationship. You must follow our more detailed guidance on <i>Good practice in prescribing and managing medicines and devices</i> .	16g	...wherever possible, avoid providing medical care to yourself or anyone with whom you have a close personal relationship	Unchanged.

Cooperating with legal and regulatory requirements	Paragraph number from 2024 version	<i>Good medical practice 2024</i> text	Paragraph number from 2013 version	<i>Good medical practice 2013</i> text	Change
	98	To maintain patient safety, you must cooperate with formal inquiries, patient safety investigations, and complaints procedures. You must provide all relevant information and be open and honest.	73	You must cooperate with formal inquiries and complaints procedures and must offer all relevant information while following the guidance in Confidentiality	Redrafted and added 'patient safety investigations'.
	99	<p>You must tell us without delay if, anywhere in the world:</p> <ul style="list-style-type: none"> a. you have accepted a caution (or equivalent) from a prosecuting authority b. you have been charged with a criminal offence in person or by post c. you have been found guilty of a criminal offence d. you have been criticised by an official inquiry 	75	<p>You must tell us without delay if, anywhere in the world:</p> <ul style="list-style-type: none"> a. you have accepted a caution from the police or been criticised by an official inquiry b. you have been charged with or found guilty of a criminal offence <p>another professional body has made a finding against your registration as a</p>	Redrafted and added 'or equivalents', 'in person or by post', and replaced 'police' for 'prosecuting authority'.

	Paragraph number from 2024 version	<i>Good medical practice</i> 2024 text	Paragraph number from 2013 version	<i>Good medical practice</i> 2013 text	Change
Cooperating with legal and regulatory requirements	99	<p>e. another professional body has made a finding against your registration as a result of fitness to practise procedures.</p> <p>See our guidance on <i>Reporting criminal and regulatory proceedings</i> for more detailed information.</p>	75	result of fitness to practise procedures	
	100	If you are suspended by an organisation from a healthcare role or post requiring professional registration, or have restrictions placed on your practice, you must, without delay, inform any organisations for which you carry out medical work, and any patients you see independently of these organisations.	76	If you are suspended by an organisation from a medical post, or have restrictions placed on your practice, you must, without delay, inform any other organisations you carry out medical work for and any patients you see independently	Changed ‘medical post’ to ‘healthcare role or post requiring professional registration’.

	101	You must make sure that you have appropriate and adequate insurance or indemnity that covers the full scope of your practice. You should keep your level of cover under regular review.	63	You must make sure you have adequate insurance or indemnity cover so that your patients will not be disadvantaged if they make a claim about the clinical care you have provided in the UK	Changed 'so that your patients will not be disadvantaged if they make a claim about the clinical care you have provided in the UK' to 'covers the full scope of your practice'. Added duty to 'keep your level of cover under review'.
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