



## P015 - Code of Ethics & Professional Behaviour

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### Preamble

The objective of the Australasian College of Sport and Exercise Physicians (ACSEP) Code of Ethics and Professional Behaviour is to provide a comprehensive set of guidelines for the professional behaviour expected of Fellows and Registrars of ACSEP (“the College”). It is based on longstanding ethical and professional principles of medicine and considers the many aspects of the Sport and Exercise Physicians’ professional life, as well as addressing areas of concern that have been identified in the sports medicine literature over recent years.

The Code recognises that, in addition to medical knowledge and technical expertise, excellent medical care in the area of sport and exercise may require co-operation with others including sports management and collaboration with colleagues and other health professionals, while maintaining a clear understanding of the primacy of the health, wellbeing and autonomy of the patient. This Code is not intended to be exhaustive; as such, in situations that are not covered in the Code, the first priority of Fellows and Registrars should always be the care of their patient.

Each area of work the clinician finds themselves in raises particular ethical concerns. For example, Sport and Exercise Physicians (SEP) and Registrars employed as team physicians may experience



divided loyalties between the needs of their patient and the demands of their employer. This code covers ethical concerns for SEPs and Registrars working in all areas.

It is the responsibility of all SEPs and Registrars to be familiar with this Code of Ethics & Professional Behaviour and any updates to the Code that may occur, which will be appropriately communicated by the College to its members. Accredited Training Practices of the ACSEP should also ensure a copy of this Code is kept on record and is accessible to SEPs or Registrars.

This Code should be read in conjunction with *P001 – Bullying, Harassment and Discrimination Policy* and *P002 - Grievance Policy and Procedure*.

### **Legal Obligations**

This Code should be read in conjunction with legislation in the country of practice. The ACSEP Code of Ethics and Professional Behaviour is not intended to vary the legal obligations and duties of Sport and Exercise Physicians in Australia and New Zealand. Legislation varies between Australia and New Zealand. It is the responsibility of the physician to identify and remain up-to-date with the particular legal obligations and responsibilities applicable in their own jurisdiction.

### **Relationships with other codes of ethics**

SEPs and Registrars have a professional responsibility to comply with the relevant codes and guidelines for medical practice in their jurisdiction. As such, this code should be read in conjunction with the following codes/standards:

- Code of Ethics - Australian Medical Association (AMA)
- *Good Medical Practice* - Medical Council of New Zealand
- *Good medical practice: a code of conduct for doctors in Australia* - Medical Board of Australia

This Code does not seek to alter these codes/standards, but seeks to supplement, explain and interpret concepts identified in the AMA and NZMA Codes as they pertain to Sport and Exercise Medicine.

### **Format and style**



The term 'must' is used to indicate that the associated statement sets a minimum standard that all Sport and Exercise Physicians and Registrars must achieve. The term 'should' reflects a standard that the ACSEP aims to promote and nurture. A Glossary of Terms can be found in Appendix A.



# Code of Ethics and Professional Behaviour for ACSEP Fellows and Registrars

## 1. Good patient care

Good patient care requires a range of clinical, interpersonal and management skills. The nature of the physician-patient relationship is critical to quality of care and achieving positive outcomes. SEPs and Registrars must pay attention to all aspects of this relationship, and must also be familiar with legislation and guidelines within their jurisdictions. SEPs and Registrars must also pay attention to any employment relationship that may affect the ability to provide care.

### 1.1 Standard of clinical practice

*The SEP and Registrar must:*

- i. Provide a specialist standard of clinical care, consistent with the prevailing standards of sport and exercise medicine, within the constraints of systems and resources.
- ii. Treat all patients according to medical need, without discrimination on the grounds of age, gender, ethnicity, disability, religion, lifestyle, beliefs, culture or sexual preference.
- iii. Insist upon professional autonomy and responsibility for all medical decisions.
- iv. Work within the scope of their competence, and refer on to an appropriately qualified practitioner where appropriate.
- v. Not permit clinical judgement and practice to be affected by commercial interests.

*The SEP and Registrar should:*

- vi. Care for patients using the best available evidence.
- vii. Work collaboratively with other professionals and organisations in optimising patient care.
- viii. Be willing to facilitate a second opinion for the patient.
- ix. Be willing to provide an honest and balanced second opinion when it is sought.

### 1.2 Continuity of care

*The Sport and Exercise Physician and Registrar must:*



- i. In a competitive sporting situation and in an emergency, be prepared to assist in the care of patients of other health professionals.
- ii. Ensure that arrangements are made for appropriate hand-over when care of patient is transferred.

*The Sport and Exercise Physician and Registrar should:*

- iii. Facilitate appropriate post-discharge care.

## **1. 3 Relationships with patients**

*The Sport and Exercise Physician and Registrar must:*

- i. Attend to, and consider the views of patients (including parents/legal guardians where the patient is a minor) whilst remembering that the best interests of the patient should guide management.
- ii. Communicate with patients with empathy, honesty and respect (including parents/legal guardians where the patient is a minor).
- iii. Not exploit any patient/client, whether physically, sexually, emotionally, or financially. Sexual contact of any kind with any patients/clients is unacceptable. If an SEP or Registrar has an existing relationship with an athlete or team management prior to taking on the role, they should be aware that this relationship creates a conflict of interest.
- iv. Act in a considered and professional manner during all work or sporting team social activities, especially where alcohol is consumed.

**Commentary:** A SEP or Registrar is part of a sports team by virtue of their professional role. As a health professional within that team, the SEP should consider how their individual actions in a team social setting and as a leader reflects on themselves and on the ACSEP, and impacts on future physician-patient relationships and may endorse particular team behaviours. Insofar as an SEP has a role in ensuring patient health and welfare, the abuse of substances should be discouraged.

### **1.5 Caring for children**

*The SEP or Registrar must:*



- i. Hold a valid and current Working with Children Check (Australian states and territories) or Children's Worker Safety Check (New Zealand) if engaged in child-related work, and provide verification of this Check to their employer upon request.
- ii. Familiarise themselves with the College's *P042 – Working With Children Safety Policy* which provides a set of principles intended to provide a safe environment for children involved in the activities of ACSEP.
- iii. Place the interests and wellbeing of the child person first, recognising the particular vulnerability of children in sport.
- iv. Be aware of the effects of sport on children with health issues.
- v. Consider the short and long-term health risks (physical and psychological) of training regimes and competition on a child.
- vi. Obtain informed consent from a legally appropriate adult for any proposed treatment of a child. Be aware that legal requirements may vary between jurisdictions.
- vii. Involve the child in decisions about treatment and seek informed consent from the child to any proposed treatment on a developmentally-appropriate basis.

*The SEP or Registrar should:*

- viii. Educate the child/parents/caregivers/coaches of short and long-term health risks (physical and psychological) of training regimes and competition on children;
- ix. Take particular care to identify children who are being required to undertake severe training regimes and competition (this may require speaking to the child in private);
- x. Advocate for children who are being required to undertake severe training regimes and competition or competition against their wishes;
- xi. Be aware of the possibility of non-accidental injury or risk of harm to a child and report this to the appropriate authority within the legal framework of the jurisdiction in which the SEP or Registrar is working (as legal requirements vary between jurisdictions).

## **1.6 Consent**

*The Sport and Exercise Physician or Registrar must:*

- i. Obtain informed consent from the patient prior to providing each medical intervention.



- ii. Be aware of legal, professional and institutional requirements for gaining informed consent from patients (including minors, or those who may be compromised in their ability to consent). Be aware that competent people have the right to refuse treatment.
- iii. Document appropriately all matters relevant to the consent process.

*The Sport and Exercise Physician or Registrar should:*

- iv. Discuss with the patient the problems associated with getting informed consent in high pressure situations of competition.



## 2. Respect, honesty and integrity

### 2.1 Treating patients with respect, honest and integrity

*The Sport and Exercise Physician or Registrar must:*

- i. Respect patient dignity.
- ii. Act with honesty and integrity when dealing with patients.
- iii. Be aware that they are not obliged to provide treatment where it is their professional judgement that the treatment would be either of no benefit or may harm the patient, or is considered unethical.
- iv. Be sensitive to and respect the cultural values of all patients, particularly those of Aboriginal & Torres Strait Islanders, Maori, and Pacific peoples.
- v. Refrain from unethical relationships with patients (sexual, financial and other), as per Section 1.3 (iii).
- vi. Provide care in a manner that respects the privacy of the patient, especially where carrying out assessment or treatment in shared facilities. Where assessment or treatment must be carried out in a public environment, patient privacy will be maintained to the level it can be reasonably achieved.

**Commentary:** Where a doctor is employed to care for team members, those athletes are to be considered patients whether they have currently received medical attention or not.

### 2.3 Discrimination, bullying and sexual harassment

*The Sport and Exercise Physician or Registrar must:*

- i. Contribute to achieving a workplace and training environment free from all forms of discrimination, bullying and harassment.
- ii. Not engage in any form of unlawful or indirect discrimination, harassment (including verbal, written, physical or sexual harassment), vilification or bullying, as described in *P001 – Bullying, Discrimination, Harassment and Unacceptable Behaviour Policy*.
- iii. Take some form of supportive positive action when witnessing any form of harassment, bullying or discrimination, and report such incidents of inappropriate workplace behaviour to





the appropriate authority as detailed in *P001 – Bullying, Discrimination, Harassment and Unacceptable Behaviour Policy*.



### 3. Confidentiality and privacy

**Commentary:** Confidentiality of health information about patients is an issue for all SEPs and Registrars. However, this is likely to be more problematic when a SEP or Registrar is employed by a team or sporting franchise. Here the SEP or Registrar is often faced with a divided loyalty dilemma, that is, either share health information in line with contractual obligations (and employer expectations) but against the wishes of the patient, or, respecting the wishes of the patient, but breaching contractual obligations (and employer expectations). SEPs or Registrars employed by teams or sporting bodies are advised to read this section in conjunction with Section 4 - Employment structure and relationships.

**General statement:** Failure to respect confidentiality of personal health information about a patient may result in a patient choosing not to confide in the SEP or Registrar, resulting in unnecessary risk to the health of the individual patient or others.

#### 3.1 Maintaining patient confidentiality and privacy

*The SEP or Registrar must:*

- i. Maintain the patient's confidentiality, except where legal requirements direct otherwise, or a strong ethical justification exists and such disclosure is permitted under the law.
- ii. Seek permission from the patient prior to each disclosure of health information to a third party.
- iii. Ensure that their use of digital communication (including social media) is consistent with ethical and legal obligations to protect patient confidentiality and privacy, as described in the relevant codes for their jurisdiction.

**Commentary:** It is recognised that some sports teams or sporting bodies require athletes to sign a health information release form at the beginning of the season or on joining a team. This may or may not specify who the information is to be released to, however at the point of signing no one can predict that injuries or illnesses might occur, or the implications of this information. A health information release form signed by an athlete at the beginning of the season or upon joining a team does not discharge the SEP or Registrar from the responsibility of seeking permission for each disclosure of health information about the patient to a third party.



*The SEP or Registrar should:*

- iv. Where necessary, educate coaches, trainers, team management and sports governing bodies of the need for confidentiality between a SEP or Registrar and a patient.
- v. Inform patients of the advantages of sharing health information with coaches and team management to effective patient management.

*In situations where a SEP or Registrar is employed for one-off **assessment** purposes only, the SEP or Registrar must:*

- vi. Inform the patient that relevant health information gathered during **the assessment** will be passed to the specified third party only. In such situations, the SEP or Registrar must document the following:
  - That the patient was informed that relevant health information will be passed to the specified third party.
  - That the patient agreed to the assessment under these conditions.
- vii. Recognise the commercial and media sensitivity of personal health information about athletes who are the patients of an SEP or Registrar.

### 3.2 Record keeping

*The Sport and Exercise Physician or Registrar must:*

- i. Ensure maintenance of contemporaneous records and be aware of legal requirements about the collection, storage, and dissemination of personal health information about patients.



## 4. Patient safety and risk minimisation

### 4.1 Patient risk minimisation

*The SEP or Registrar must:*

- i. Acknowledge that risk-taking is necessarily the responsibility of the patient where that patient has capacity to make the decision and the decision is informed and made freely.
- ii. Ensure that a decision to participate in sport/exercise when that participation involves high levels of risk-taking is freely made by the patient.
- iii. Advocate for the patient (with the patient's informed consent) where it is thought the patient is subject to pressure from others to assume a high level of risk.

*The SEP or Registrar should:*

- iv. Inform the patient (or direct to someone who can) of protective gear that may be worn to reduce further injury.
- v. Work with sporting organisations to reduce injury risks to athletes.
- vi. Be able to refuse to attend a sports event which they consider has an unacceptably high risk of a severe outcome, and/or where they consider their presence is being misused.

**Commentary:** Where a choice to participate in sport/exercise is freely made and the patient has capacity to make the decision to participate, then the patient should be informed of the potential consequences of their action and left to exercise their choice. Where a choice to participate in sport/exercise is highly likely to result in a severe outcome due to the patient's condition, then this action should be actively discouraged. This is not an attempt to place doctors in opposition to any particular sporting activity (e.g., boxing, motor racing and parachuting) where the risks for a catastrophic event exist, but are unlikely when undertaken with standard precautions by a well individual. However, it could include these sports if some other consideration exists in the individual, such as a motor racing driver with untreated epilepsy, or a boxer with a detached retina.

### 4.2 Advising patients on return to sport and exercise following injury

*The SEP or Registrar must:*

- i. Assess the likelihood and severity of risk to the patient from returning to sport/exercise following injury.



- ii. Inform the patient (where possible) of the potential for harms associated with returning to sport/exercise following injury, including the likelihood and severity of injury or further injury, the patho-physiology of injury, and the implications of injury on quality of life and future career.
- iii. When advising patients about return to sport/exercise following an injury, discourage choices to participate in forms of sport/exercise where a patient's condition creates a high likelihood of a severe outcome (loss of life or severe incapacity).
- iv. Use caution when providing assistance including, but not restricted to, pain-masking injections, medication, or other clinical interventions, to return a patient to sport/exercise following injury.
- v. When providing assistance (including but not restricted to pain-masking injections, medication, or other clinical interventions) to return a patient to sport/exercise following injury, inform the patient of the risks involved. Note that such discussion should be documented.
- vi. Be aware that they are under no obligation to assist a patient to return to sport/exercise following an injury if they consider the risks are unacceptable.

**Commentary:** When assisting an athlete to return to sport/exercise following an injury, the SEP or Registrar may feel some degree of responsibility for further injury or exacerbation of an injury. The SEP must feel able to refuse to assist if they consider that the potential for injury is unacceptably high. SEPs or Registrars may wish to factor into their decision-making the risks associated with the patient participating in sport/exercise without medical assistance, but should not feel pressured into assisting against their better judgement.

#### 4.3 Ensuring a safe, fair and healthy sporting environment

*The SEP or Registrar must:*

- i. Be aware of and work within the current regulations regarding the use of banned performance-enhancing substances of the governing body of the sport the athlete is involved in.
- ii. Not engage in any activity that encourages or enables the use or administration of any prohibited substance or doping method (as defined by the World Anti-Doping Code) unless an athlete has a current Therapeutic Use Exemption (TUE).



- iii. Cooperate fully with the athlete testing program and not impede doping control officials, or encourage/assist athletes to impede or evade doping control procedures and processes.
- iv. Not engage in or promote any form of competition manipulation, match fixing or sport wagering.
- v. Report any form of prohibited conduct to the relevant national sporting organisation or sport integrity body.

*The SEP or Registrar should:*

- vi. Be familiar with the National Integrity Framework Policies of Sport Integrity Australia and/or the Integrity Framework of Sport New Zealand.
- vii. Educate patients, teams, coaches, trainers, other health professionals and the general public about the risks of performance-enhancing substances. Discourage the potential use of banned performance-enhancing substances and banned doping methods.



## 5. Professional behaviour

SEPs and Registrars are expected to maintain a standard of conduct and work performance and demonstrate professionalism and courtesy in dealing with other members, employees, students or applicants, contractors, visitors and members of the public.

### 5.1 Employment structure and relationships

**Commentary:** When an SEP or Registrar is employed by a team or sport's governing body, SEPs or Registrars may have multiple responsibilities to others including: individual patients, a team, coaches and team management, the governing body, the medical profession and the general public. Some responsibilities are laid down specifically within an employment contract, while others rely on time-honoured understandings and relationships. At times, conflicting responsibilities may lead to divided loyalties or competing obligations, where to meet one obligation will require the neglect of the other. For SEPs or Registrars, the most common divided loyalty is that between the employer and the patient. Problems are more likely when the potential for conflict is not recognised, and one party is not aware that the SEP or Registrar has other competing obligations. This section is designed to assist SEPs or Registrar in situations where the aims of the employer place demands on the SEP or Registrar, via the employment contract, that have the potential to undermine the ability to provide effective care for patients.

**General statement:** A SEP or Registrar as an employee should not be asked within an employment contract to;

- act outside the law
- act contrary to a code of ethics of the professional group to which they belong.

### Trust in the SEP/Registrar-patient relationship

**Commentary:** The doctor-patient relationship is a structure that lies at the heart of any medical encounter where care is offered. It is through the doctor-patient relationship that the patient receives attention for their concerns and the SEP or Registrar is able to use their professional skills. The patient is vulnerable for a number of reasons including the presence of injury or illness that they themselves are unable to correct. The patient commonly reveals extensive health and personal information to the



SEP or Registrar in order for the SEP or Registrar to diagnose and offer treatment. A patient usually has a lesser degree of knowledge about the body and medical concepts and, because of the highly technical nature of medicine, patients are generally unable to assess the adequacy of treatment. Therefore, a patient must place a great deal of trust in their SEP or Registrar to do the very best for them. SEPs or Registrars are obliged to respect that trust and avoid situations or demands that may undermine it. Anything that undermines trust will inevitably impact negatively on the ability to provide the patient with the care required.

## 5.2 Divided loyalties and contractual obligations

**Commentary:** Here a distinction is made between a *therapeutic role* and an *assessment-only role*.

### Therapeutic role

The SEP or Registrar is employed in a therapeutic role for the patient or team, and in this situation a physician-patient relationship exists.

### Assessment-only role

There are times when a SEP or Registrar is employed solely for one-off assessment purposes of patients and is not involved in care. The most common example of this is when a patient is transferring between clubs and a medical assessment has to be completed, or if a patient has been selected for a tour or event subject to passing a medical/fitness assessment. Here the relationship between the SEP or Registrar and the patient is different than a therapeutic relationship. In assessment-only situations the patient must be fully informed of the role of the SEP or Registrar and that relevant information will be shared with sports management. (This can be compared to a doctor carrying out a one off insurance assessment).

## 5.3 When signing an employment contract

*The SEP or Registrar must:*

- i. Act in good faith with their employer.
- ii. Inform the employer where there are elements of a contract that forces a SEP or Registrar to breach ethical or legal obligations.

*The SEP or Registrar should:*





- iii. Seek legal advice prior to signing

### 5.3.1 When employed in a therapeutic role

*The SEP or Registrar must:*

- iv. Recognise their duty and commitment to the patient as the first concern.

### 5.3.2 When employed in an assessment role

*The SEP or Registrar must:*

- v. Inform the patient of the SEP's role prior to the assessment.

*The SEP or Registrar should:*

- vi. Consider whether the separation of an assessment role from a therapeutic role is appropriate. Although, it is recognised that this may be the most practical option in some situations.

## 5.4 Sponsorship

*The SEP or Registrar must:*

- i. Not endorse any product that brings the ACSEP into disrepute. (Note that product endorsement may be prohibited in some jurisdictions).
- ii. Not use testimonials to endorse a product or service.

*The SEP or Registrar should:*

- iii. Ensure that decisions regarding the supply of health products to the patient or team are supported by good quality evidence.
- iv. When a patient is sponsored by a product, advocate for the patient (with that patient's informed consent) where the sponsor's product or obligations to promote this product may negatively affect the health of the patient.

## 5.5 Relationship with industry

*The SEP or Registrar must:*

- i. Be cautious when accepting offers of industry sponsorship to attend conferences and scientific meetings. Acceptance usually should be restricted to those in which they are to



make a formal contribution. In such instances, a clear and public declaration of such support should be made.

- ii. Not obtain benefit from the sale of a medical device to one's own patients.
- iii. Not accept a fee or equivalent consideration from representatives of industry for seeing them in a promotional capacity.
- iv. Declare any relationship with industry when presenting at conferences and scientific meetings, and in publications.

*The SEP or Registrar should:*

## **5.6 Dealing with the Media (including print, radio, television, online media and social media platforms)**

*The SEP or Registrar must:*

- i. Not provide personal health information about a patient to the media without the informed consent of the patient.
- ii. Not violate the privacy, breach the security or harm the reputations of other SEPs, Registrars, members, employees and/or the College, either in a professional or personal capacity, in their interactions with the media.
- iii. Comply with the ACSEP's *P014 – Media Policy and Procedure* in relation to direct contact with the print, radio, television and online media.
- iv. Comply with the social media policy of the Australian Health Practitioner Regulation Agency (AHPRA) and/or the Medical Board of Australia's Code of Conduct, and/or the Medical Council of New Zealand (MCNZ) statement on the use of the internet and electronic communication.

*The SEP or Registrar should:*

- v. Be aware that they have no duty to provide personal health information about patients to the media.
- vi. Not provide untruthful medical reports to the media.

## **5.7 Community role**

*The SEP or Registrar should:*



- i. Use their knowledge of sport and exercise to promote individual and public health.

## 5.8 Maintenance of professional standards

*The SEP or Registrar must:*

- i. Comply with the Continuing Professional Development (CPD) program requirements specified by the ACSEP and be diligent in the documentation of such compliance.

*The SEP or Registrar should:*

- ii. Take an appropriate leadership role in planning, undertaking and measuring practice improvement activities, including using the principles of evidence-based practice and continuous practice improvement.
- iii. Not undertake treatments or procedures beyond their current training.



## 6. Relationships with other health professionals

### 6.1 General practitioners

**Commentary:** The relationship between a SEP or Registrar and the patient's general practitioner is centrally important to effective patient care. The general practitioner coordinates the health requirements of the patient, referring the patient to the SEP or Registrar where necessary, and often directing any follow-up care that is necessary. It is therefore important to keep the general practitioner informed of any findings on assessment and care provided.

*The SEP or Registrar should:*

- i. Maintain good working relationships with a patient's general practitioner.
- ii. Inform the referring general practitioner, with the patient's informed consent, of the assessment findings, any treatment provided, and any ongoing care that may be necessary.
- iii. When employed as a team physician, liaise with the patient's general practitioner and provide a discharge summary at the end of the season, and where a patient leaves the team prior to the end of the season.

### 6.2 Other SEPs or Registrars

*The SEP or Registrar must:*

- i. Respect another SEP's or Registrar's training, knowledge, experience and culture.
- ii. Avoid impugning the reputations of other SEPs or Registrars with patients, coaches, team management and others.

**Commentary:** Having a high-profile patient can bring standing within the sporting community and raise the profile of a sports health provider. Impugning the reputation of another medical provider is not an acceptable means of gaining patients.

*The SEP or Registrar should:*

- iii. Work closely with and co-operate with other SEPs or Registrars.



### 6.2.1 Registrars

*The SEP must:*

- i. Provide appropriate supervision of Registrars to minimise risks to the patient and accept responsibility for the welfare of the patient.
- ii. Be honest and fair in all dealings with Registrars.
- iii. Refrain from negative behaviour towards learners.

*The SEP should*

- iv. Acknowledge a responsibility to encourage and train future SEPs.

### 6.2.2 Other members of the sports health team

*The SEP or Registrar must:*

- i. Work in a spirit of collaboration and co-operation with other health professionals as a team member, respecting the contribution of all members of the sports health team to patient care.
- ii. Provide support to other health professionals as appropriate.

## 6.3 The College

*The SEP or Registrar must:*

- i. Comply with the standards of conduct expressed in the Code of Ethics and Professional Behaviour at all times.
- ii. Comply with any applicable ACSEP policies and procedures.
- iii. Communicate any grievances or concerns as per *P002 – Grievance Policy and Procedure*.
- iv. Respect and co-operate with the College's disciplinary proceedings.

## 6.4 Research

*The SEP or Registrar must:*

- i. Perform all research with approval of an appropriate research ethics committee.
- ii. Ensure that all research meets the ethical standards that would be applied by an accredited research ethics committee.



- iii. Declare to research participants and proposed publishers of research results where research has been funded by industry.

*The SEP or Registrar should:*

- iv. Ensure that financial compensation for participating as an investigator in a clinical trial is commensurate with work performed.
- v. Make publicly available all results of research, negative as well as positive, wherever possible.



## APPENDIX A - GLOSSARY OF TERMS

**ACSEP:** Australasian College of Sport and Exercise Physicians

**Employment contract:** The contractual relationship between employer and employee. In this document this refers to the SEP or Registrar as employee and the sports governing body or sporting franchise as the employer.

**Must:** Implies that the associated statement sets a minimum standard that all SEPs/Registrars must achieve.

**Should:** Implies that the associated statement reflects a standard that the College aims to nurture among its Fellows and Registrars.

**Sports governing body:** The management of the sport at a regional, national, or international level.

**SEP:** Sport and Exercise Physician

**Team management:** Includes coaches, team managers, or other office bearers within the sporting franchise or sports governing body.

**Registrar:** Trainee of the Australasian College of Sport and Exercise Physicians.