Physicians Law of the PRC

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Chapter I — General Provisions

Article 1 — This Law is enacted for the purpose of safeguarding the lawful rights and interests of physicians, regulating the practice conduct of physicians, strengthening the building of the physician workforce, protecting the health of the people, and advancing the Healthy China initiative.

Article 2 — For the purposes of this Law, "physician" means professional medical personnel who have obtained physician qualifications in accordance with the law and, upon registration, practice in medical and health institutions, including licensed physicians and licensed assistant physicians.

Article 3 — Physicians shall put the people first and life first, carry forward the spirit of humanitarianism, promote the noble professional spirit of respecting life, saving the dying and healing the wounded, being

willing to contribute, and extending boundless love, strictly observe professional ethics, comply with practice norms, improve their level of practice, and perform the sacred duty of preventing and treating diseases and protecting the health of the people.

Physicians practicing in accordance with the law shall be protected by law. The personal dignity and personal safety of physicians shall not be violated.

Article 4 — The health administration department under the State Council shall be responsible for the administration of physicians nationwide. The relevant departments under the State Council, including those responsible for education, human resources and social security, and traditional Chinese medicine, shall be responsible for the relevant administration of physicians within their respective scope of duties.

The health administration department of a local people's government at or above the county level shall be responsible for the administration of physicians within its administrative region. The relevant departments of a local people's government at or above the county level, including those responsible for education, human resources and social security, and traditional Chinese medicine, shall be responsible for the relevant administration of physicians within their respective scope of duties.

Article 5 — August 19 of each year is China's Physicians' Day.

Physicians who have made outstanding contributions in medical and health service work shall be commended and rewarded in accordance with the relevant state regulations.

The whole society shall respect physicians. People's governments at all levels shall care for and cherish physicians, promote their exemplary deeds, strengthen professional training, support pioneering and innovation, help them solve difficulties, and promote the extensive formation throughout society of a favorable atmosphere of respecting physicians and valuing health.

Article 6 — The state shall establish and improve the system for setting, evaluating, and appointing physicians to medical professional and technical titles, take professional ethics, professional practice capability, and work performance as important conditions, and scientifically set the relevant evaluation and appointment standards.

Article 7 — Physicians may organize and participate in relevant industry organizations and professional academic bodies such as physicians' associations in accordance with the law.

Relevant industry organizations such as physicians' associations shall strengthen industry self-discipline and physician practice norms, safeguard the lawful rights and interests of physicians, and assist the health administration departments and other relevant departments in carrying out relevant work.

Chapter II — Examination and Registration

Article 8 — The state implements a physician qualification examination system.

The physician qualification examination is divided into the licensed physician qualification examination and the licensed assistant physician qualification examination. The physician qualification examination shall be organized and implemented by the health administration departments of the people's governments at or above the provincial level.

The categories and specific measures for the physician qualification examination shall be formulated by the health administration department under the State Council.

Article 9 — A person who meets any of the following conditions may take the licensed physician qualification examination:

(1) has a bachelor's degree or above in a relevant medical specialty from an institution of higher learning and has completed one full year of medical specialty work practice in a medical and health institution under the

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guidance of a licensed physician;

(2) has a specialized degree in a relevant medical specialty from an institution of higher learning and, after obtaining a licensed assistant physician practice certificate, has practiced in a medical and health institution for two full years.

Article 10 — A person who has a specialized degree or above in a relevant medical specialty from an institution of higher learning and has completed one full year of medical specialty work practice in a medical and health institution under the guidance of a licensed physician may take the licensed assistant physician qualification examination.

Article 11 — A person who has studied traditional Chinese medicine by apprenticeship for three full years, or who has genuinely distinctive medical skills through years of practice, and has passed the assessment by and been recommended by a traditional Chinese medicine professional organization or a medical and health institution entrusted by the health administration department of the people's government at or above the county level, may take the traditional Chinese medicine physician qualification examination.

A person who has studied traditional Chinese medicine by apprenticeship or through years of practice and has genuinely distinctive medical skills may, upon recommendation by at least two traditional Chinese medicine physicians and after passing the practical skills and effect assessment organized by the traditional Chinese medicine administration department of the people's government at the provincial level, obtain the traditional Chinese medicine physician qualification and the corresponding qualification certificate.

The relevant examination and assessment measures prescribed in this Article shall be drafted by the traditional Chinese medicine administration department under the State Council and submitted to the health administration department under the State Council for review and publication.

Article 12 — A person who passes the physician qualification examination and obtains the licensed physician qualification or the licensed assistant physician qualification shall be issued a physician qualification certificate.

Article 13 — The state implements a physician practice registration system.

A person who has obtained physician qualifications may apply for registration with the health administration department of the local people's government at or above the county level at his or her location. A medical and health institution may collectively handle registration procedures for the applicants within the institution.

Except for the circumstances in which registration shall not be granted as provided by this Law, the health administration department shall grant registration within 20 working days from the date of accepting the application, enter the registration information into the national information platform, and issue the physician practice certificate.

A person who has not registered and obtained a physician practice certificate shall not engage in physician practice activities.

The specific measures for the administration of physician practice registration shall be formulated by the health administration department under the State Council.

Article 14 — After registration, a physician may practice in a medical and health institution in accordance with the registered place of practice, category of practice, and scope of practice, and engage in the corresponding medical and health services.

Traditional Chinese medicine physicians and integrated traditional Chinese and Western medicine physicians may practice in the traditional Chinese medicine department, the integrated traditional Chinese and Western medicine department, or other clinical departments of a medical institution in accordance with the registered category and scope of practice.

A physician who has passed the relevant professional training and assessment may expand his or her scope of practice. Where laws or administrative regulations provide for the qualification conditions for physicians engaging in practice activities within a specific scope, such provisions shall prevail.

A traditional Chinese medicine physician who has obtained physician qualifications through examination may, in accordance with the relevant state regulations and after passing training and assessment, adopt Western medicine technical methods related to his or her specialty in practice activities. A Western medicine physician may, in accordance with the relevant state regulations and after passing training and assessment, adopt traditional Chinese medicine technical methods related to his or her specialty in practice activities.

Article 15 — Where a physician practices regularly in two or more medical and health institutions, he or she shall take one medical and health institution as the primary one and complete the relevant procedures in accordance with the relevant state regulations. The state encourages physicians to provide medical and health services at fixed locations on a regular basis in medical and health institutions at or below the county level, including township health centers, village clinics, and community health service centers, and the primary practice institution shall provide support and convenience.

The health administration departments and medical and health institutions shall strengthen supervision and administration over the relevant physicians, regulate their practice conduct, and ensure the quality of medical and health services.

Article 16 — Registration shall not be granted under any of the following circumstances:

(1) having no capacity for civil conduct or having limited capacity for civil conduct;

(2) having received a criminal penalty, where less than two years have elapsed since completion of the execution of the penalty or the period of being prohibited from engaging in the physician profession in accordance with the law has not yet expired;

(3) less than two years have elapsed since the physician practice certificate was revoked;

(4) less than one year has elapsed since registration was cancelled due to failure in the regular assessment of physicians;

(5) other circumstances in which engaging in medical and health services is not permitted as prescribed by laws and administrative regulations.

The health administration department that accepts the application shall, where registration is not granted, notify the applicant and the medical and health institution where the applicant works in writing within 20 working days from the date of accepting the application, and state the reasons.

Article 17 — Where a physician, after registration, falls under any of the following circumstances, the registration shall be cancelled and the physician practice certificate invalidated:

(1) death;

(2) having received a criminal penalty;

(3) having had the physician practice certificate revoked;

(4) failing the regular assessment of physicians, where after the suspension of practice activities expires, a re-assessment is still failed;

(5) having suspended physician practice activities for two full years;

(6) other circumstances in which engaging in medical and health services is not permitted or cancellation procedures shall be completed as prescribed by laws and administrative regulations.

Where any circumstance prescribed in the preceding paragraph exists, the medical and health institution where the physician works shall report it to the health administration department that granted the registration

within 30 days; where the health administration department discovers, in the course of performing its functions, that a physician falls under any circumstance prescribed in the preceding paragraph, it shall promptly notify the health administration department that granted the registration. The health administration department that granted the registration shall promptly cancel the registration and invalidate the physician practice certificate.

Article 18 — Where a physician changes registered items such as the place of practice, category of practice, or scope of practice, he or she shall complete the change-of-registration procedures with the health administration department that granted the registration in accordance with this Law.

A physician engaging in the following activities may be exempted from completing the relevant change-of-registration procedures:

(1) participating in standardized training, advanced study, paired assistance, consultation, emergency medical rescue for emergencies, charitable or other public-welfare medical services, or free clinics;

(2) undertaking state tasks or participating in important activities organized by the government, etc.;

(3) practicing in medical institutions within a medical consortium.

Article 19 — Where a physician who has suspended physician practice activities for two years or more, or where the circumstances under which registration shall not be granted as prescribed by this Law have disappeared, applies to resume practice, he or she shall pass an assessment conducted by the health administration department of the people's government at or above the county level or a medical and health institution or industry organization entrusted by it, and be re-registered in accordance with this Law.

Article 20 — A physician practicing medicine individually shall complete the approval or filing procedures in accordance with the law.

A licensed physician practicing medicine individually shall have practiced in a medical and health institution for five full years after registration; however, a person who has obtained the traditional Chinese medicine physician qualification in accordance with the provisions of paragraph 2 of Article 11 of this Law may practice medicine individually within the registered scope of practice after completing practice registration in accordance with the assessment content.

The health administration department of a local people's government at or above the county level shall, in accordance with the relevant state regulations, exercise supervision and inspection over physicians practicing medicine individually, and where any circumstance for cancellation of registration as prescribed by this Law is discovered, shall promptly cancel the registration and invalidate the physician practice certificate.

Article 21 — The health administration department of a local people's government at or above the county level shall promptly publicize the list of persons whose registration has been granted or cancelled; the list shall be summarized by the health administration department of the people's government at the provincial level, reported to the health administration department under the State Council for filing, and physician registration information inquiry services shall be provided through websites in accordance with regulations.

Chapter III — Practice Rules

Article 22 — A physician shall enjoy the following rights in practice activities:

(1) within the registered scope of practice, conducting medical examinations, disease investigations, and medical treatment in accordance with the relevant norms, issuing the corresponding medical certification documents, and selecting reasonable medical, preventive, and health care plans;

(2) obtaining remuneration for labor, enjoying the welfare benefits prescribed by the state, participating in social insurance in accordance with regulations, and enjoying the corresponding benefits;

(3) obtaining the basic practice conditions and occupational protective equipment that meet the standards prescribed by the state;

(4) engaging in medical education, research, and academic exchange;

(5) participating in professional training and receiving continuing medical education;

(6) offering opinions and suggestions on the work of the medical and health institution where he or she works and of the health administration departments, and participating in the democratic management of the institution where he or she works in accordance with the law;

(7) other rights prescribed by laws and regulations.

Article 23 — A physician shall perform the following obligations in practice activities:

(1) fostering a spirit of dedication, strictly observing professional ethics, performing physician duties, treating patients with due diligence, and implementing public health measures such as epidemic prevention and control;

(2) following clinical diagnosis and treatment guidelines and complying with clinical technical operation norms and medical ethics norms, etc.;

(3) respecting, caring for, and cherishing patients, and protecting patient privacy and personal information in accordance with the law;

(4) diligently studying the profession, updating knowledge, improving medical professional and technical capabilities and levels, and enhancing the quality of medical and health services;

(5) publicizing and promoting health science knowledge appropriate to his or her post, and providing health education and health guidance to patients and the public;

(6) other obligations prescribed by laws and regulations.

Article 24 — When implementing medical, preventive, and health care measures or signing relevant medical certification documents, a physician shall conduct examination and investigation in person and promptly complete medical records and other medical documents in accordance with regulations, and shall not conceal, forge, tamper with, or destroy medical records and other medical documents or relevant materials without authorization.

A physician shall not issue false medical certification documents, or medical certification documents unrelated to his or her scope of practice or inconsistent with his or her category of practice.

Article 25 — In diagnosis and treatment activities, a physician shall explain to the patient the illness, the medical measures, and other matters that need to be notified. Where surgery, special examination, or special treatment needs to be performed, the physician shall promptly explain to the patient in detail the medical risks, alternative treatment plans, and other circumstances, and obtain the patient's explicit consent; where it is impossible or inappropriate to explain to the patient, the physician shall explain to the patient's close relatives and obtain their explicit consent.

Article 26 — When carrying out clinical trials of drugs and medical devices and other medical clinical research, a physician shall comply with the relevant state regulations, observe medical ethics norms, pass ethical review in accordance with the law, and obtain written informed consent.

Article 27 — For a patient in need of emergency treatment, a physician shall adopt emergency measures for diagnosis and treatment and shall not refuse emergency treatment.

Where, in an emergency such as rescuing a patient whose life is in critical danger, the opinion of the patient or his or her close relatives cannot be obtained, the corresponding medical measures may be implemented immediately upon approval by the person in charge of the medical institution or an authorized person in

charge.

The state encourages physicians to actively participate in emergency rescue services in public places such as public transport; where a physician voluntarily performs emergency rescue and causes harm to the assisted person, the physician shall not bear civil liability.

Article 28 — A physician shall use drugs, disinfectants, and medical devices that have been approved or filed in accordance with the law, and adopt lawful, compliant, and scientific diagnosis and treatment methods.

Except for use in diagnosis and treatment in accordance with norms, narcotic drugs, toxic drugs for medical use, psychotropic drugs, radioactive drugs, and the like shall not be used.

Article 29 — A physician shall adhere to the principle of safe, effective, economical, and rational medication, and use drugs rationally in accordance with the guiding principles for the clinical application of drugs, clinical diagnosis and treatment guidelines, and drug instructions.

Under special circumstances such as the absence of effective or better treatment methods, a physician may, after obtaining the patient's explicit informed consent, implement treatment using drug usages not expressly stated in the drug instructions but supported by evidence-based medical evidence. Medical institutions shall establish management systems to review the appropriateness of physician prescriptions and medication orders, and strictly regulate physician medication conduct.

Article 30 — A licensed physician may, in accordance with the relevant state regulations and with the consent of the medical and health institution where he or she works, provide appropriate medical and health services such as follow-up consultations for certain common and chronic diseases through information technologies such as the internet. The state supports medical and health institutions in using information technologies such as the internet to carry out telemedicine cooperation.

Article 31 — A physician shall not take advantage of his or her position to demand or illegally accept property or seek other improper benefits; and shall not perform unnecessary examinations or treatment on patients.

Article 32 — In the event of natural disasters, accident calamities, public health incidents, social security incidents, and other emergencies that seriously threaten the life and health of the people, the health administration department of the people's government at or above the county level shall organize physicians to participate in health emergency response and medical rescue as needed, and physicians shall obey the dispatch.

Article 33 — Under any of the following circumstances in practice activities, a physician shall promptly report to the medical and health institution where he or she works or to the relevant departments or institutions in accordance with regulations:

(1) discovering an infectious disease, a sudden disease of unknown cause, or an abnormal health event;

(2) the occurrence or discovery of a medical accident;

(3) discovering an adverse reaction or adverse event that may be related to drugs or medical devices;

(4) discovering counterfeit or inferior drugs;

(5) discovering that a patient is suspected of being involved in an injury event or an unnatural death;

(6) other circumstances prescribed by laws and regulations.

Article 34 — A licensed assistant physician shall practice under the guidance of a licensed physician in a medical and health institution in accordance with the registered category and scope of practice.

A licensed assistant physician practicing in medical and health institutions in townships, ethnic townships, towns, and villages, and in county-level medical and health institutions in remote and hardship areas, may

independently engage in general practice activities based on the medical and health service situation and his or her own practical experience.

Article 35 — Medical students participating in clinical teaching practice and medical graduates who have not yet obtained a physician practice certificate and are participating in medical specialty work practice in a medical and health institution shall participate in clinical diagnosis and treatment activities under the supervision and guidance of a licensed physician. Medical and health institutions shall provide the necessary conditions for the relevant medical students and medical graduates to participate in clinical diagnosis and treatment activities.

Article 36 — Relevant industry organizations, medical and health institutions, and medical schools shall strengthen education on the medical ethics and conduct of physicians.

Medical and health institutions shall establish and improve systems such as physician post responsibility, internal supervision, and complaint handling, and strengthen administration over physicians.

Chapter IV — Training and Assessment

Article 37 — The state shall formulate physician training plans, establish a physician training and supply-demand balance mechanism suited to the characteristics of the industry and social needs, coordinate the demand for various types of medical talent, and strengthen the training of personnel in scarce specialties such as general practice, pediatrics, psychiatry, and geriatric medicine.

The state shall take measures to strengthen the coordination between medicine and education and improve the systems of medical school education, post-graduation education, and continuing education.

The state shall, through multiple channels, strengthen the training and allocation of primary-level medical and health personnel, with general practitioners as the focus.

The state shall take measures to improve the education system for mutual learning between traditional Chinese medicine and Western medicine, and train high-level integrated traditional Chinese and Western medicine personnel and general practitioners capable of providing integrated traditional Chinese and Western medicine services.

Article 38 — The state shall establish and improve the standardized training system for resident physicians, improve the incentive mechanism for clinical teaching, safeguard the benefits of resident physicians during training, and strictly manage the training process and completion assessment.

The state shall establish and improve the standardized training system for specialist physicians, and continuously improve the specialized diagnosis and treatment level of clinical physicians.

Article 39 — The health administration departments of the people's governments at or above the county level and other relevant departments shall formulate physician training plans, adopt multiple forms to provide graded and categorized training for physicians, and provide conditions for physicians to receive continuing medical education.

The people's governments at or above the county level shall take effective measures to give priority to ensuring that medical and health personnel in primary-level, underdeveloped, and ethnic-minority areas receive continuing medical education.

Article 40 — Medical and health institutions shall rationally allocate human resources and ensure, in accordance with regulations and plans, that physicians of the institution receive continuing medical education.

The health administration department of the people's government at or above the county level shall organize and coordinate, in a planned manner, medical and health institutions at or above the county level to carry out training for medical and health personnel in primary-level medical and health institutions such as township

health centers, village clinics, and community health service centers, so as to improve their medical professional and technical capabilities and levels.

Relevant industry organizations shall provide services and create conditions for physicians to receive continuing medical education, and strengthen the organization and administration of continuing medical education.

Article 41 — The state shall, in the annual medical specialty enrollment plans and education and training plans, verify and allocate a certain proportion for targeted training and entrusted training, and strengthen the building of the physician workforce in primary-level and remote hardship areas.

Relevant departments and medical and health institutions shall sign agreements with persons receiving targeted training or entrusted training, stipulating matters such as the relevant benefits, years of service, and liability for breach of contract, and the relevant persons shall perform the obligations stipulated in the agreements. The relevant departments of the people's governments at or above the county level shall take measures to strengthen performance management. Where any party to an agreement breaches the agreement, it shall bear liability for breach of contract.

Article 42 — The state implements a regular assessment system for physicians.

The health administration department of the people's government at or above the county level or a medical and health institution or industry organization entrusted by it shall assess physicians' professional competence, work performance, and professional ethics in accordance with physician practice standards, with an assessment cycle of three years. For physicians with long years of practice experience and no record of misconduct, the assessment procedures may be simplified.

The entrusted institution or organization shall report the physician assessment results to the health administration department that granted the registration for filing.

For a physician who fails the assessment, the health administration department of the people's government at or above the county level shall order him or her to suspend practice activities for three to six months and receive relevant professional training. Upon expiration of the suspension of practice activities, a re-assessment shall be conducted; those who pass the re-assessment shall be permitted to continue practicing.

Article 43 — The health administration departments of the people's governments at or above the provincial level shall be responsible for guiding, inspecting, and supervising physician assessment work.

Chapter V — Safeguards

Article 44 — The state shall establish and improve personnel, remuneration, professional title, and reward systems that reflect the professional characteristics of physicians and the value of their technical labor.

Physicians engaged in the prevention and treatment of infectious diseases, radiological medicine, and mental health work, as well as physicians in other special posts, shall be granted appropriate allowances in accordance with the relevant state regulations. The allowance standards shall be adjusted on a regular basis.

Physicians working in primary-level and remote hardship areas shall enjoy allowance and subsidy policies in accordance with the relevant state regulations, and shall enjoy preferential treatment in professional title evaluation, career development, education and training, and commendation and rewards.

Article 45 — The state shall strengthen the building of the disease prevention and control talent workforce and establish a physician training and use mechanism suited to a modern disease prevention and control system.

Disease prevention and control institutions, medical institutions at or above Grade II, and primary-level medical and health institutions such as township health centers and community health service centers shall be staffed with a certain number of public health physicians to engage in public health work such as monitoring disease and hazard factors in the population, risk assessment and analysis, monitoring and early warning, epidemiological investigation, immunization program administration, and occupational health management. Medical institutions shall establish and improve management systems and strictly implement nosocomial infection prevention and control measures.

The state shall establish a talent training mechanism combining public health and clinical medicine, provide clinical physicians with operational training in disease prevention and control, response to public health emergencies, and other aspects through multiple channels, provide public health physicians with clinical medicine operational training, and improve the systems and mechanisms for integrating prevention and treatment and for coordinated prevention and treatment through traditional Chinese and Western medicine.

Article 46 — The state shall take measures to coordinate urban and rural resources, strengthen the building of the primary-level medical and health workforce and service capacity, establish a career development mechanism linking county, township, and village levels for rural medical and health personnel, and incorporate rural medical and health personnel into the management of county-level medical and health personnel through methods such as county-managed township-use and township-recruited village-use.

A licensed physician applying for promotion to a deputy senior technical title shall have experience of providing medical and health services in a medical and health institution at or below the county level or a paired-assistance medical and health institution for a cumulative total of one year or more; a licensed physician who, after promotion to a deputy senior technical title, has provided medical and health services in a medical and health institution at or below the county level or a paired-assistance medical and health institution for a cumulative total of one year or more shall be given priority in promotion to a full senior technical title under equal conditions.

The state shall take measures to encourage persons who have obtained the licensed physician qualification or the licensed assistant physician qualification to establish village-level medical and health institutions in accordance with the law or to provide medical and health services in village-level medical and health institutions.

Article 47 — The state shall encourage rural doctors who provide preventive, health care, and general medical services to villagers in village-level medical and health institutions to obtain medical specialty academic qualifications through medical education; and encourage rural doctors who meet the conditions to take the physician qualification examination and obtain physician qualifications in accordance with the law.

The state shall take measures to help rural doctors improve their medical technical capabilities and levels through information technology and intelligent means, and further improve the multi-channel subsidy mechanism for rural doctors' service income and policies such as old-age support.

The specific measures for the administration of rural doctors shall be formulated by the State Council.

Article 48 — A physician who falls under any of the following circumstances shall be commended and rewarded in accordance with the relevant state regulations:

(1) having noble medical ethics and outstanding deeds in practice activities;

(2) having made pioneering innovations in medical research and education, with major breakthroughs in medical professional techniques and significant contributions;

(3) having performed outstandingly in prevention, early warning, and saving the dying and healing the wounded when facing emergencies;

(4) having worked diligently for a long time in medical and health institutions at or below the county level in remote hardship areas;

(5) having made outstanding contributions in disease prevention and control and health promotion;

(6) other circumstances prescribed by laws and regulations.

Article 49 — The people's governments at or above the county level and their relevant departments shall incorporate the prevention and handling of medical disputes into the comprehensive social security governance system, strengthen comprehensive security governance of medical and health institutions and their surrounding areas, maintain a favorable practice environment for medical and health institutions, effectively prevent and combat crimes involving medical care in accordance with the law, and protect the lawful rights and interests of both doctors and patients.

Medical and health institutions shall improve security and protection measures, maintain good medical order, promptly and proactively resolve medical disputes, and ensure the safety of physician practice.

Any organization or individual is prohibited from obstructing physicians' lawful practice or interfering with physicians' normal work and life; and is prohibited from infringing upon the personal dignity and personal safety of physicians through insults, defamation, threats, assault, and other means.

Article 50 — Medical and health institutions shall provide physicians with occupational safety and health protective supplies, and adopt effective health protection and medical care measures.

Where a physician suffers an injury in an accident or suffers illness or death caused by exposure to toxic or harmful factors in occupational activities, he or she shall enjoy work-related injury insurance benefits in accordance with the provisions of the relevant laws and administrative regulations.

Article 51 — Medical and health institutions shall reasonably arrange working hours for physicians, implement the paid leave system, and regularly carry out health examinations.

Article 52 — The state shall establish and improve the medical risk sharing mechanism. Medical institutions shall participate in medical liability insurance or establish or participate in medical risk funds. Patients shall be encouraged to participate in medical accident insurance.

Article 53 — News media shall carry out public-interest publicity on medical and health laws and regulations and on medical and health knowledge, promote the exemplary deeds of physicians, and guide the public to respect physicians and rationally deal with medical and health risks.

Chapter VI — Legal Liability

Article 54 — Where a person commits conduct such as violating examination discipline in the physician qualification examination and the circumstances are serious, he or she shall be prohibited from taking the physician qualification examination for one to three years.

Where a person obtains a physician qualification certificate or physician practice certificate by improper means, the certificate shall be revoked by the health administration department that issued it, and the corresponding application shall not be accepted within three years.

Where a person forges, alters, buys, sells, leases, or lends a physician practice certificate, the health administration department of the people's government at or above the county level shall order correction, confiscate the illegal gains, and impose a fine of not less than two times but not more than five times the illegal gains, or, where the illegal gains are less than 10,000 yuan, a fine calculated on the basis of 10,000 yuan; where the circumstances are serious, the physician practice certificate shall be revoked.

Article 55 — Where a physician, in violation of this Law, commits any of the following acts in practice activities, the health administration department of the people's government at or above the county level shall

order correction and give a warning; where the circumstances are serious, it shall order suspension of practice activities for not less than six months but not more than one year, up to revocation of the physician practice certificate:

(1) failing to perform the duty of notification or obtain informed consent in accordance with regulations in providing medical and health services or carrying out medical clinical research;

(2) refusing emergency treatment for a patient in need of emergency treatment, or delaying diagnosis and treatment due to irresponsibility;

(3) failing to obey the dispatch of the health administration department in the event of natural disasters, accident calamities, public health incidents, social security incidents, and other emergencies that seriously threaten the life and health of the people;

(4) failing to report the relevant circumstances in accordance with regulations;

(5) violating laws, regulations, rules, or practice norms, causing a medical accident or other serious consequences.

Article 56 — Where a physician, in violation of this Law, commits any of the following acts in practice activities, the health administration department of the people's government at or above the county level shall order correction, give a warning, confiscate the illegal gains, and impose a fine of not less than 10,000 yuan but not more than 30,000 yuan; where the circumstances are serious, it shall order suspension of practice activities for not less than six months but not more than one year, up to revocation of the physician practice certificate:

(1) disclosing patient privacy or personal information;

(2) issuing false medical certification documents, or signing diagnosis, treatment, epidemiology, and other certification documents or certification documents concerning births, deaths, and the like without conducting examination or investigation in person;

(3) concealing, forging, tampering with, or destroying medical records and other medical documents and relevant materials without authorization;

(4) failing to use narcotic drugs, toxic drugs for medical use, psychotropic drugs, radioactive drugs, and the like in accordance with regulations;

(5) taking advantage of his or her position to demand or illegally accept property or seek other improper benefits, or performing unnecessary examinations or treatment on patients in violation of diagnosis and treatment norms, causing adverse consequences;

(6) carrying out prohibited clinical application of medical technology.

Article 57 — Where a physician, in violation of this Law, practices not in accordance with the registered place of practice, category of practice, or scope of practice, the health administration department or the traditional Chinese medicine administration department of the people's government at or above the county level shall order correction, give a warning, confiscate the illegal gains, and impose a fine of not less than 10,000 yuan but not more than 30,000 yuan; where the circumstances are serious, it shall order suspension of practice activities for not less than six months but not more than one year, up to revocation of the physician practice certificate.

Article 58 — Where a person seriously violates physician professional ethics or medical ethics norms, causing a grave adverse social impact, the health administration department of the people's government at or above the provincial level shall revoke the physician practice certificate or order the cessation of illegal practice activities, and prohibit the person from engaging in medical and health services or medical clinical research for five years up to life.

Article 59 — Where a non-physician practices medicine in violation of this Law, the health administration department of the people's government at or above the county level shall order the cessation of illegal practice activities, confiscate the illegal gains and the drugs and medical devices, and impose a fine of not less than two times but not more than ten times the illegal gains, or, where the illegal gains are less than 10,000 yuan, a fine calculated on the basis of 10,000 yuan.

Article 60 — Where a person, in violation of this Law, obstructs a physician's lawful practice, interferes with the physician's normal work and life, or infringes upon the physician's personal dignity or personal safety through insults, defamation, threats, assault, and other means, constituting a violation of public security administration, the person shall be given a public security administration punishment in accordance with the law.

Article 61 — Where a medical and health institution, in violation of this Law, fails to perform its reporting duty, causing serious consequences, the health administration department of the people's government at or above the county level shall give a warning, and the directly responsible persons in charge and other directly responsible persons shall be given sanctions in accordance with the law.

Article 62 — Where, in violation of this Law, staff members of the health administration departments and other relevant departments, or staff members of medical and health institutions, practice fraud, abuse power, neglect duty, or engage in malpractice for personal gain, they shall be given sanctions in accordance with the law.

Article 63 — Where a violation of this Law constitutes a crime, criminal liability shall be pursued in accordance with the law; where it causes personal or property damage, civil liability shall be borne in accordance with the law.

Chapter VII — Supplementary Provisions

Article 64 — The state shall take measures to encourage persons with academic qualifications in medical specialties from secondary specialized schools to improve their medical technical capabilities and levels through methods such as participating in higher-level academic education.

Persons who obtained academic qualifications in relevant medical specialties from secondary specialized schools before the implementation of this Law and within a certain period after the implementation of this Law may take the physician qualification examination. The specific measures shall be formulated by the health administration department under the State Council in conjunction with the education, traditional Chinese medicine, and other relevant departments under the State Council.

Article 65 — The specific measures for the implementation of this Law by the People's Liberation Army of China and the Chinese People's Armed Police Force shall be formulated by the State Council and the Central Military Commission in accordance with this Law.

Article 66 — The specific administrative measures for overseas personnel participating in the physician qualification examination, applying for registration, practicing, or engaging in activities such as clinical demonstration, clinical research, and clinical academic exchange shall be formulated by the health administration department under the State Council.

Article 67 — This Law shall come into force on March 1, 2022. The Law of the People's Republic of China on Licensed Physicians shall be repealed simultaneously.

Source: https://www.danyoungcpa.com/physicians-law-of-the-prc-2021/

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