

General Medical Council, (March 2013):

Personal Beliefs and Medical Practice

Procedures provided for mainly religious or cultural reasons

18 If patients (or those with parental responsibility for them) ask for a procedure, such as circumcision of male children, for mainly religious or cultural reasons, you should discuss with them the benefits, risks and side effects of the procedure. You should usually provide procedures* that patients request and that you assess to be of overall benefit to the patient. If the patient is a child, you should usually provide a procedure or treatment that you assess to be in their best interests. In all circumstances, you will also need the patient's or parental consent.

19 In assessing what is of overall benefit to adult patients, you must take into account their cultural, religious or other beliefs and values. For further advice on assessing overall benefit, see our guidance Consent: patients and doctors making decisions together† and Treatment and care towards the end of life: good practice in decision making‡

20 If the patient is a child, you must proceed on the basis of the best interests of the child and with consent. Assessing best interests will include the child's and/or the parents'§ cultural, religious or other beliefs and values. You should get the child's consent if they have the maturity and understanding to give it. If not, you should get consent from all those with parental responsibility. If you cannot get consent for a procedure, for example, because the parents cannot agree and disputes cannot be resolved informally, you should inform the child's parents that you cannot provide the service unless you have authorisation from the court and advise the child's parents to seek legal advice on applying to the court.

21 If you judge that a procedure is not in the best interests of a child, you must explain this to the child (if he or she can understand) and to their parents. If you do not believe that the procedure is of overall benefit to an adult patient, you must explain this to them. You are not obliged to provide treatments in such cases. If you hold objections to the procedure as a result of your religious or moral beliefs, you should follow our advice on conscientious objection (paragraphs 8–16).

22 If you agree to perform any procedure for religious or cultural reasons, you must meet the same standards of practice required for performing therapeutic procedures including having the necessary skills and experience to perform the procedure using appropriate measures, including anaesthesia, to minimise pain and discomfort both during and after the procedure
keeping your knowledge and skills up to date
ensuring conditions are hygienic
providing appropriate aftercare.

23 If you are carrying out circumcision, or another procedure, for religious reasons, you should explain to the patient (or, in the case of children, their parents) that they may invite their religious adviser to be present during the procedure to give advice on how it should be performed to meet the requirements of their faith.

* Where you have the knowledge, skills and experience to do so safely.

† General Medical Council (2008) Consent: patients and doctors making decisions together London, GMC.

‡ General Medical Council (2010) Treatment and care towards the end of life: good practice in decision making London, GMC. See paragraphs 13 and 40–46.

§ 'Parents' here means all those with parental responsibility for the child.

¶¶ You must also follow our guidance on treating patients aged 0–18 years. General Medical Council paragraphs 34 and 35