

## Professional code of conduct

**1- Standards for confidential communications:** I will ensure to maintain client's privacy and confidentiality. I will never provide any information concerning the identity, condition or any services rendered to another client or person other than the client or his or her authorized representative except with the consent of the patient or his or her authorized representative or as required by law.

If I ever become aware that a client is in danger or is a danger to the public or to her or himself, I will take reasonable steps to advise appropriate public officials or agencies of the potential danger, within the guidelines of applicable laws.

**2- Conflict of interest:** I will refer clients to their medical practitioner or appropriate therapist if their health concerns are outside of my scope of practice and training. I will recognize and disclose conflicts of interest that arise in the course of professional duties and activities, and resolve them in the best interest of the client.

**3- Professional skills and knowledge required:** I will provide care that respects the client's needs, values and dignity, and does not discriminate on any grounds, including on the basis of race, ancestry, place of origin, color ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, marital status, family status or disability. I will teach my clients to accept responsibility for his/her own health choices and actions.

**4- Appropriate behavior toward clients:** I will provide services and therapies only within my scope of training and qualifications. I will respect the rights, values and dignity of my clients. I will ensure clients safety, confidentiality, comfort and privacy during his/her session.

**5- Ethical business practices:** I will conduct myself in an honest manner, maintain the highest standard of professional competence. Be empathetic to my client's needs and take all reasonable care for their health and wellbeing. I will Inform my clients of the different types of therapies, fees, duration, benefits, indication, and contraindication.

**6- Professional development:** I will maintain proficiency and competence and be diligent in the provision and administration of my client's care. I will always exercise professional judgment within the limits of my qualifications and collaborate with others or make referral as appropriate. As a professional I will always pursue the appropriate advanced education and training.

Name of Client or Guardian \_\_\_\_\_

Address \_\_\_\_\_

State/Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_