



CODE OF ETHICS OF THE
AMERICAN COLLEGE OF RHEUMATOLOGY, INC.
FEBRUARY 2026

Preamble

The Code of Ethics of the American College of Rheumatology, Inc. (the “ACR”) applies to the entire ACR, including its Fellows, Members and Staff, and is enforceable solely by the ACR.

The ACR can succeed in its mission to empower rheumatology professionals to excel in their specialty only if it maintains its reputation in scientific and medical communities, and with the general public, as a credible, objective and unbiased force whose statements, activities and relationships are beyond reproach.

It is the purpose of this Code to provide guidelines which will ensure this reputation be maintained. The ACR has not attempted in this Code to set forth a position regarding all ethical issues which its members may face in their day-to-day professional activities.

As used in this Code of Ethics, the term “Member” means any Fellow or Member of the ACR in any class of membership, except as otherwise noted.

I. Organizational Ethics

Medicine is, in essence, a moral enterprise, and its professional associations should therefore be built on ethically sound foundations and should promote the interests of those they serve.

1. The ACR mission shall be consonant with that of the medical profession; members should associate to improve the care and advance the health of our patients, advance medical knowledge, and to ensure that its members practice the highest standards of professionalism.
2. The ACR shall ensure that its scientific meetings are of the highest caliber and free of external influence.
3. The ACR shall ensure the editorial independence of its publications and journals.

4. ACR leadership shall be fully accountable to its members and all policies should be publicly disclosed.

II. General Principles of Professional Conduct

These general principles represent generally accepted standards of professional conduct which members should strive to attain. These principles aim to ensure that every patient receives the highest standard of care, tailored to their specific medical predicament, and grounded in compassion, respect, and the latest scientific knowledge. The following Principles of Professional Conduct have been adopted as standards of honorable behavior which each member of the ACR is expected to follow in his or her relationship with patients, colleagues and the public.

1. Members shall be dedicated to providing competent, appropriate and medically necessary medical care with compassion and respect for human dignity and rights, and shall regard responsibility to the patient as paramount. Members' clinical judgment should not be inappropriately influenced by economic interest.
2. Members shall uphold the standards of professionalism, be honest in all professional interactions, and report physicians or health care professionals deficient in competence, or engaging in fraud or deception, to appropriate entities at the organization where the reported misconduct occurred and/or to external regulatory bodies as required by the law.
3. Members shall respect the law and also recognize a responsibility to seek changes in those requirements which are contrary to the best interests of the patient.
4. Members shall respect the rights of their patients and shall, within the constraints of the law, protect patient privacy, and safeguard the confidentiality of the clinician/patient relationship.
5. Members shall continue to study, apply, and advance scientific knowledge, maintain a commitment to medical education, and make useful information available to their patients, colleagues, and the public, while engaging in ongoing learning about the most up-to-date and relevant care practices to ensure the best interests of their patients.
6. Members should employ clinical judgment when applying recommendations arising from the use of Artificial Intelligence (AI)
7. Members may choose whom they will serve. In an emergency, however, members should render service to the best of their ability. Having undertaken the care of a patient, a member may not neglect the patient unless the patient

has been discharged and may discontinue medical service only after giving adequate notice to the patient.

8. A member's responsibility extends to community and society, and members should participate in civic and community activities contributing to an improved society.
9. Members shall advocate for a fair, respectful, safe, professional working environment for all healthcare team members.
10. Members shall support access to rheumatologic care for all people.
11. In the practice of medicine, fees should be commensurate with services rendered, whether actually rendered by them or to the patients under their supervision when they are personally and identifiably responsible for the service. Members shall neither pay nor receive commissions for the referral of patients.
12. Members shall prioritize the well-being of the individual patients regardless of race, ethnicity, color, religion, sex (gender identity, sexual orientation, pregnancy), national origin, age, disability, genetic information, or political convictions.
13. Members' medical decisions and actions should be guided by the unique medical needs and circumstances of each patient and not influenced by the revenue generated, the interests of the healthcare network, the stipulations of insurance plans, or the demands of research protocols.
14. Members shall not dispense or supply drugs, remedies, or appliances unless it is in the best interest of their patients.
15. Members should seek consultation upon request in doubtful or difficult cases, whenever it appears that the quality of medical service may be thereby enhanced.
16. Members should provide to patients information necessary to determine that the member is a qualified health care provider for their condition.
17. Members shall not engage in advertising or any other form of public communication, including electronic communication, which is false, fraudulent, deceptive, or misleading.
18. All research performed by Members shall adhere to the highest ethical standards. To fulfill these obligations, Members involved in research shall:

- a. Ensure that voluntary and informed consent has been obtained from each human participant or from the participant's legally authorized representative if the participant lacks the capacity to consent.
- b. Ensure that the research protocol is scientifically sound and meets ethical guidelines for research with human participants.
- c. Demonstrate the same care and concern for the well-being of research participants that they would for patients to whom they provide clinical care in a therapeutic relationship.
- d. Ensure protection of human subjects in clinical research and humane treatment of animals in basic research.
- e. Avoid or mitigate actual or potential conflicts of interest in research.
- f. Adhere to rigorous scientific and ethical standards in conducting, supervising, publishing, and disseminating results of the research
- g. Adhere to evolving rigorous scientific and ethical standards in the use of artificial intelligence in designing, conducting, supervising, publishing, and disseminating results of the research.

III. Specific Principles

The Rules and Policies of Ethics set forth below are mandatory standards of conduct for all Members of the ACR in any class of membership.

A. Rules and Policies Pertaining to the Individual

1. Members shall comply with all ACR policies including but not limited to ACR bylaws and Code of Ethics, as well as all laws, government regulations and requirements of other bodies governing the member on account of their professional status.
2. Members shall ensure that public communications and statements to the press preserve patient privacy and confidentiality and are truthful and not deceptive or misleading.
3. Members shall not use the imprimatur of the ACR, its name or logo to create the impression that the members speak for the ACR, or that the ACR has endorsed any product, service, person, or idea without the ACR's consent.
4. Members shall not deliberately engage in conduct that adversely affects the ACR or its reputation.

5. A member's clinical judgment and practice must not be affected by economic interest in, or commitment to, commercial entities, or other actual or potential conflicts of interest. Disclosure of professionally related commercial interests, and any other interests that influence or could be perceived as influencing clinical decision-making is required in communications to patients, the public and colleagues. When a member's interest conflicts with the patient's interest, the member should make alternative arrangements for the care of the patient.
6. In the context of ownership interest in a commercial venture, the member has an obligation to disclose the ownership interest to the patient and referring colleagues prior to utilization; the member's activities must be in strict conformance with the law; and the patient should have free choice to use the member's services or to seek the needed services elsewhere.

B. Rules and Policies Pertaining to Volunteers and Staff

1. Volunteer members and staff shall act in the best interests of the ACR in carrying out responsibilities in good faith and with reasonable care, honesty and due diligence.
2. Volunteer members and staff shall give individual allegiance to the ACR when making decisions affecting the ACR.
3. Volunteer members and staff shall avoid self-dealing including transactions with the organization when they have a personal or business interest beyond their interest as a representative of the ACR.
4. Volunteer members and staff shall not use their position within the ACR for individual advantage, or for the advantage of another person or entity to which they are related or obligated.
5. Volunteer members and staff shall not engage in unauthorized activities, i.e. activities that are not in accordance with ACR bylaws and policies.
6. Volunteer members and staff shall maintain the confidences of the ACR.
7. Volunteer members and staff shall discharge responsibilities with fidelity to the ACR and make decisions that are in the best interests of the organization.
8. Volunteer members and staff should endeavor to avoid conflicts of interest and the appearance of conflicts of interest.

9. Volunteer members and staff shall disclose any relationships that pose or could be construed to pose a potential conflict of interest which may affect or appear to affect ACR activities and decisions.

C. Disclosure Processes

The purpose of the ACR's Disclosure Process is identification of relationships which may pose actual or potential conflicts. These actual or potential conflicts can then be evaluated by the ACR so that adjustments can be made which will avoid any undue influence. These processes include:

1. Annual submission of a disclosure statement, by officers, board members, journal and publication editors and other publication editors, committee chairs, committee and task force members, and senior staff in order to disclose relationships which may pose actual or potential conflicts of interest, in alignment with the Conflict of Interest Policy of the American College of Rheumatology
2. A process for giving notice of an actual or potential conflict, and for abstaining from participation in any item of business which comes before a board, committee, or other meeting. Conflicts of interest and any management of the conflict (actual, perceived, or potential), including abstentions, are documented in the meeting minutes.
3. A process for participants in board meetings, committee meetings and similar meetings where ACR business is being conducted to disclose any significant relationships which may actually or potentially influence the participant's views.
4. A process for speakers at scientific meetings, symposia, or other conferences conducted under ACR auspices to inform members of any relationships which may actually or potentially have an influence on the speaker.
5. A process for authors and reviewers of manuscripts submitted to the ACR for publication to disclose financial support received by the author or reviewer, or any other interest that the author or reviewer may have, which may affect their work.

IV. Administrative Procedures

This part of the Code of Ethics sets forth the structure and operation of ACR's Committee on Ethics and Conflict of Interest and the procedure for the Committee, the Special Judiciary Committee and the Board of Directors to handle the challenges raised under the Code of Ethics.

A. The Committee on Ethics & Conflict of Interest

The Committee on Ethics & Conflict of Interest, a standing committee of the ACR, consists of ACR members who are responsible for reviewing and making recommendations regarding ethics and professionalism of the ACR and its members, educating the membership regarding the Code of Ethics, responding to inquiries thereunder, and investigating and recommending action with respect to challenges under the Code of Ethics.

B. Member Misconduct

A member may be disciplined for professional misconduct, including, but not limited to, a violation of the ACR's Code of Ethics, bylaws, or policies, any unauthorized use of the ACR's name, and any adverse action taken against him or her with respect to his or her license to practice. Any report of an action by a member for professional misconduct can be directed in writing to the Committee on Ethics & Conflict of Interest for a preliminary review. Charges not in the public domain cannot be investigated by the ACR.

If after a preliminary review, the Committee on Ethics & Conflict of Interest determines further investigation is warranted, the Committee shall conduct such further investigations to determine whether to ask the President that a Special Judiciary Committee be appointed to determine whether or not to recommend to the Board of Directors that disciplinary action be taken against the member. If the Committee determines that there is insufficient basis to justify or require action by the College, but has sufficient reservations about the member's conduct, a letter to the member outlining the Committee's concerns and recommendations is warranted.

C. Special Judiciary Committee

The Special Judiciary Committee shall consist of five (5) voting members of the ACR, excluding members of the Board of Directors, appointed by the President. The Special Judiciary Committee shall not make a recommendation for disciplinary action with respect to a member unless written notice shall have been sent by registered or certified mail to the member not less than thirty (30) days prior to a meeting of the Special Judiciary Committee

- a. stating the time and place of such meeting;
- b. informing the member of the alleged misconduct and that disciplinary action against him or her will be considered at such meeting; and

- c. that he or she may appear in person with his or her counsel, if he or she so elects, and submit such evidence as he or she deems proper.

A written report including the recommendation of the Special Judiciary Committee and the rationale for any disciplinary action, including, but not limited to, censure, probation, suspension, or expulsion shall be prepared. Any recommendation shall require an affirmative vote of a majority of the members of the Special Judiciary Committee. If the Special Judiciary Committee finds no disciplinary action is warranted, the matter is closed.

D. Board Action

Before final action is taken by the Board of Directors upon a recommendation of the Special Judiciary Committee for disciplinary action against a member, written notice shall be sent by registered or certified mail to such member not less than thirty (30) days prior to a meeting of the Board of Directors (a) advising the member of the recommendation of the Special Judiciary Committee and (b) informing him or her that he or she may, if he or she so elects, submit a written statement to the Board stating his or her objections to the recommendation of the Special Judiciary Committee.

A copy of the report including the underlying rationale and recommendation of the Special Judiciary Committee shall be included with such notice. The Board shall review the report of the Special Judiciary Committee and the written statement, if any, submitted by the member, and determine whether to uphold, modify, or reject the recommendation of the Special Judiciary Committee. The decision of the Board of Directors shall be final. The Board of Directors may adopt procedural rules more specifically governing the conduct of the foregoing investigations and hearings. As appropriate and consistent with law, any disciplinary action will be reported to the National Practitioner Data Bank, state licensing boards, state medical societies, and other organizations.