If you’ve been an AMWA member for any period of time, you may have noticed that professional ethics pervades our organizational culture. Nowhere is this more evident than on the AMWA website (Table 1), where a foundational document—the “AMWA-EMWA-ISMPP Joint Position Statement on the Role of Professional Medical Writers”—can be found. The Statement begins, “Professional medical writing support helps authors and sponsors to disclose their research in peer-reviewed journals and scientific congresses in an ethical, accurate, and timely manner, with the ultimate aim of advancing patient care.”

AMWA’s ethical backbone, the Code of Ethics, sits beneath the Joint Statement. Nearly every component of AMWA’s extensive education program incorporates ethics in some fashion, including Workshops, Essential Skills, Online Learning, and Self-Study Workbooks. Members can draw attention to their own ethical savvy in their Personal Profile or Freelance Directory listing. In addition, the Medical Writing Certified® credentialing examination includes ethics in the outline used to prepare potential test takers, and ethics is frequently a topic of conversation on Engage, AMWA’s online community. A search of AMWA’s website using “ethic” as the search term delivered 166 hits, 81 of which were Journal entries. With all of these resources, you may be wondering, “Why on earth do we need an Ethics Column? What more could possibly be said?” I believe that ethics is not simply a list of facts or guidelines to be memorized; rather, ethics is the embodiment of core values that manifest our beliefs and guide our actions. As such, ethics is a living, evolving part of who we are as individuals, professionals, and members of the larger community. Thus, it warrants our continued attention and ongoing exploration.

AMWA has a long history of commitment to professional ethics (Figure 1). It began in 1973 when—after being urged for a decade to do so—the AMWA Board of Directors approved the Code for Medical Communicators proposed by Eric Martin, PhD. Throughout the 1980s, the use of medical communicators was a subject of considerable debate. Advocates felt that communicators improved the quality of documents and the efficiency with which they were produced, while opponents felt that their use encouraged bias, especially when a communicator’s contribution went unacknowledged or their financial relationship to industry was not disclosed—practices that were unfortunately common at that time. In 1991, the US Food and Drug Administration (FDA) drafted career-threatening guidelines that imposed severe limitations on the use of industry-sponsored communicators; AMWA responded vigorously. For AMWA, the conflict ultimately resulted in a review of what has now become the AMWA Code of Ethics and an energetic expansion of the topic that informs the details of its practice in the educational program. Workshops on ethics proliferated, presentations on ethics were included in the Annual Conference, and Workshop leaders were encouraged to include consideration of professional ethics in all of their presentations. The Code was added to the AMWA membership and renewal form in 2009. Although

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**Table 1. Ethics-Related Resources from the AMWA website**

| AMWA-EMWA-ISMPP Joint Position Statement on the Role of Professional Medical Writers |
| Education Program |
| Workshops |
| Essential Skills |
| Online Learning |
| Self-Study Workbooks |
| Medical Writing Certificate Outline |
| Opportunities to Highlight Ethics Knowledge |
| Personal Profile |
| Freelance Directory |

**AMWA Journal**

**Engage**
membership awareness has improved, there remains much to be done. This column aspires to be a continuation of AMWA’s focus on professional ethics.

“A profession is a disciplined group of individuals who adhere to ethical standards. This group positions itself as possessing special knowledge and skills in a widely recognized body of learning derived from research, education and training at a high level, and is recognised by the public as such.”

People with extensive training often wish to be recognized as professionals engaging in a profession rather than as technicians providing a service or workers doing a job. The crucial element that transforms an occupation into a profession is a shared ethic. Thus, medical communicators need a solid understanding of basic ethics and a maturing awareness of its nuances, not in the least due to the strong link between ethics and professionalism.

This ethic is often expressed as a Code of Ethics (Code) that sets the minimal acceptable moral behavior for that profession. Codes can be used to teach or remind members of professional ethical norms and become a liability for the company. Further, advocating for our job longevity, professionalism may enhance our employability and increase our job longevity.

Though it reflects essential truths of our profession, AMWA’s Code is not a static collection of statements. It is subject to review and modification and can be revised in response to a change in industry standards, innovation in science and technology, evolution of the media used to communicate the message, and shifts in societal norms or the political atmosphere. Since its introduction in 1976, the AMWA Code has been reviewed and modified 3 times (1989, 1994, 2008), with the greatest change occurring in 1994 when “scientific rigor” and “fair balance” were added to Principle 2 in response to changes in emphasis at the FDA. Other changes were editorial in nature.

When communicators execute their duties with ethics in mind, there are advantages for everyone. First, there is an increased trust when an employer knows that through an organization like AMWA, the potential employee has had exposure to professional ethics. This is especially important at this time, when employers can be overwhelmed by the endless parade of service providers on the internet. Employers need a filter to distinguish between those who may or may not violate professional ethical norms and become a liability for the company. Today’s economy is increasingly driven by the transfer of specialized knowledge, and this is accomplished most efficiently when governed by a code of ethics. Further, advocating for our professionalism may enhance our employability and increase our job longevity.

As part of agreeing to the Code, AMWA members pledge to “expand and perfect their professional knowledge and communications skills” (see Principle #5; Figure 2). AMWA membership makes it more likely that we meet our continued education goals. When members gather at an annual conference or chapter event, it affords them the opportunity to connect with like-minded individuals who share their work and a place to turn for professional advice. And when we behave
EVERYDAY ETHICS

AMWA CODE OF ETHICS

Preamble
The American Medical Writers Association (AMWA) is an educational organization that promotes excellence in medical communication and recommends principles of conduct for its members. These principles take into account the important role of medical communicators in writing, editing, and developing materials in various media and the potential of the products of their efforts to inform, educate, and influence audiences. To uphold the dignity and honor of their profession and of AMWA, medical communicators should accept these ethical principles and engage only in activities that bring credit to their profession, to AMWA, and to themselves.

Principle 1. Medical communicators should recognize and observe statutes and regulations pertaining to the materials they write, edit, or otherwise develop.

Principle 2. Medical communicators should apply objectivity, scientific accuracy and rigor, and fair balance while conveying pertinent information in all media.

Principle 3. Medical communicators should write, edit, or participate in the development of information that meets the highest professional standards, whether or not such materials come under the purview of any regulatory agency. They should attempt to prevent the perpetuation of incorrect information. Medical communicators should accept assignments only when working in collaboration with a qualified specialist in the area, or when they are adequately prepared to undertake the assignments by training, experience, or ongoing study.

Principle 4. Medical communicators should work only under conditions or terms that allow proper application of their judgment and skills. They should refuse to participate in assignments that require unethical or questionable practices.

Principle 5. Medical communicators should expand and perfect their professional knowledge and communications skills.

Principle 6. Medical communicators should respect the confidential nature of materials provided to them. They should not divulge, without permission, any patent, proprietary, patient, or otherwise confidential information.

Principle 7. Medical communicators should expect and accept fair and reasonable remuneration and acknowledgment for their services. They should honor the terms of any contract or agreements into which they enter.

Principle 8. Medical communicators should consider their membership in AMWA an honor and a trust. They should conduct themselves accordingly in their professional interactions.

Original: Eric W. Martin, PhD, 1973
First revision: June 1989
Second revision: April 1994
Third revision: June 2008

As we have transformed medical communications into a true profession, talented people have been attracted to it as a viable career option, which has resulted in an influx of new members over the years 2014-2016 (written communication, Sharon L. Ruckdeschel, AMWA Director of Membership & Systems). It is especially important, and some would contend that it is our collective responsibility, to introduce the Code to new members early in their careers. How are they to know what professional behaviors are expected of them if they are not provided a guide? Unsurprisingly, a 2005 AMWA survey revealed that member familiarity with guidelines was associated with compliance with those guidelines. Therefore, members exposed to the Code may take action consistent with the Code, perhaps resulting in increased respect for our profession. Through this column, I seek, in part, to expose newcomers to ethics-related concepts and remind established members that the principles stand, ready to serve as their professional moral compass when needed.

Ethical conundrums occur with disquieting frequency, many would say every day. Some situations are big, some not so big. We can hope to take appropriate ethical action based on instinct and experience, or we can prepare ourselves to meet these challenges by using a more systematic approach. I propose that we explore the experience of our colleagues through the lens of the RIGHT model. This model for dealing with ethical situations was developed by AMWA workshop leaders who taught ethics, has been experienced by many AMWA members, and was presented in an excellent article published in a 2012 issue of the *AMWA Journal*[^14] (http://c.ymccdn.com/sites/www.amwa.org/resource/resmgr/journal/Issues/2012/2012v27n1_online.pdf).

The 5-step RIGHT model was designed to be simple and, thus, memorable, and to be applicable to most, if not all, possible ethical situations our diverse membership might encounter (Figure 3).[^14] R is recognizing the ethical situation, which includes naming the issue, identifying who is directly involved, and listing all stakeholders (those who could possibly be affected by the final decision). I is investigating the facts and assumptions, which includes identifying relevant ethical codes, statutes, regulations, and laws that may apply and taking stock of your own competencies and biases, and considering potential conflicts of interest. G is gauging the situation, which is the step in which decisions are made. Communicators list every potential action and the likely effect on each stakeholder. The best decisions maximize benefit and minimize cost and risk. H is handling the situation. Now that the What and Why have been determined, communicators need to consider Who, When, Where, and How the decision will be implemented. T is tailoring the decision, which involves a backward look at the RIGHT model experience to determine whether there are lessons to be learned moving forward.

Ethical thinking compels us to be guided by, but not shackled by, the Code. Proper use of the Code involves careful consideration of the unique situation in question. A benefit of AMWA membership is being an active participant in a community of peers who are

Figure 2. AMWA Code of Ethics[^10]
uniquely willing to share their knowledge and experience for the betterment of each other, the association, and the profession. With that in mind, I encourage members to share with each other ethical situations they have experienced. Please send essential details of the situation, a list of stakeholders, proposed solutions, and, if the situation has been handled, how it was handled and the follow-up results. Please consider following the RIGHT model. Both newcomers and seasoned AMWA members are encouraged to submit thoroughly anonymized “cases” that may serve as a springboard for discussion in this column. An interactive ethics column is a new way of exercising our ethical muscle at AMWA, and the discussion may generate a renewed awareness of the ethical principles that govern our profession. Please send cases to tballmd@gmail.com. I may not be able to publish all cases, but I will eventually return your message.

Cheers!

References
4. Food and Drug Administration. Regulation of drug-company sponsored activities in scientific or educational contexts (draft proposed policy, October 8, 1991). Division of Drug Marketing, Advertising, and Communications (HFHD-240), Rockville, MD.

Summary and Conclusion
The phenomenon of missing data is ubiquitous in clinical studies. Both the extent of missing data and the structure of missing data can introduce bias into study results and lead to wrong conclusions. The traditionally used LOCF method to fill data gaps is problematic in many ways. It is better to employ a method that reduces bias, such as MI or MMRM, to account for missing data. Medical writers should be aware of the extent of missing data and should describe the methods that have been used to deal with this issue.

Additional Reading
## Supplemental Table 1. Links to Ethics-Related Resources from the AMWA Website

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