

MC through teleconsultation: ethics, patient safety must remain at core – Malaysian Medical Association (MMA)

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KUALA LUMPUR – Ethical digitalisation and firm governance must remain at the core of Malaysia’s healthcare transformation to ensure rapid technological adoption does not compromise patient safety and medical autonomy, says MMA president Datuk Dr Thirunavukarasu Rajoo.

He said the Malaysian Medical Council’s (MMC) decision to bar the issuance of medical sick certificates (MCs) after teleconsultations should be regarded as a necessary enforcement step to remind all registered medical practitioners (RMPs) that their duty of care is personal, non-transferable and must not be compromised by commercial pressures from employers, insurers or digital health platforms.

According to Dr Thirunavukarasu, the rapid expansion of corporatised telehealth services has created a “disturbing trend” in which clinical decisions are increasingly influenced by non-medical administrators who prioritise cost containment over patient welfare.

“The professional accountability remains squarely with the doctor, regardless of who employs or engages them. The patient-doctor relationship, and its associated duty of care, remains sacred and

legally enforceable. RMPs must exercise independent clinical judgement at all times and ensure proper documentation of decisions, especially in situations involving teleconsultations, insurer-driven care models or company-led medical policies,” he said.

Recently, the MMC decided that the issuance of an MC solely following a virtual consultation (teleconsultation) is not allowed, and failure to comply with the directive could result in RMPs being subject to disciplinary procedures by the MMC.

Dr Thirunavukarasu reminded practitioners that under Section 29 of the Medical Act 1971, the MMC holds full authority to take disciplinary action for “infamous conduct in a professional respect,” including removal from the medical register, suspension, fines or formal censure.

He said “infamous conduct” refers to serious professional misconduct such as gross negligence, unethical practices, allowing non-clinical interference in medical decisions, falsifying documents or failing to act in the best interests of the patient.

Meanwhile, medical lecturer at the Department of Medical Ethics and Law, Universiti Teknologi MARA (UiTM), Dr Muhamad Zaid Muuti, said the policy prohibiting the issuance of MCs through teleconsultation was appropriate, because physical examination is a mandatory requirement under MMC guidelines.

He said patients who are unable to be present physically at clinics or hospitals could opt for house-call services, where a doctor or other healthcare professional visits a patient at their home.

“This policy does not prevent patients living far from obtaining treatment as they may still receive teleconsultations for advice, early treatment, follow-up and certain prescriptions. An MC may only be issued after an adequate physical examination and applies to all forms of consultation, including teleconsultations and in-person consultations, to ensure an MC is issued based on a valid, complete and accountable clinical assessment,” he said.

Dr Muhamad Zaid said most clinics and hospitals today are equipped with basic facilities including ICT (information and communication technology), video calls and electronic medical records that enable teleconsultations to run smoothly.

“This policy only limits the issuance of MCs, not the use of teleconsultation as a whole. Teleconsultation remains relevant for providing medical advice, early treatment, follow-up care and chronic disease monitoring, and it continues to be an essential component of modern healthcare services.”

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