

Law and Ethics in Medical Practice in Bangladesh: Issues & Impediments

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Abstract

Medical carelessness and misconduct are prevalent health concerns in Bangladesh. Individuals encounter diverse challenges within the healthcare industry in Bangladesh. Individuals receive services from both government hospitals and private hospitals and clinics, but the quality and adequacy of healthcare services and facilities still need improvement. The paper aims to examine the prevalence and nature of medical negligence and malpractice in Bangladesh, assess existing legal remedies, and identify policy measures to improve accountability and quality of care. This study employs a narrative review of existing literature, including academic publications, policy documents, legal frameworks, and relevant case reports on healthcare delivery and medical misconduct in Bangladesh. The review synthesizes evidence on systemic challenges, patterns of negligence, and the effectiveness of current legal and regulatory mechanisms. The review finds that patients in Bangladesh face significant deficiencies in both public and private healthcare systems, including inadequate service quality, limited accountability, and uneven access to care. Medical negligence and malpractice emerge as

persistent issues, driven by weak regulatory enforcement, lack of professional oversight, and insufficient patient protection mechanisms. Existing legal remedies are often underutilized or ineffective due to procedural complexity, low public awareness, and barriers to access. These challenges affect individuals across socioeconomic groups, highlighting systemic weaknesses in healthcare governance. Strengthening regulatory oversight, improving professional accountability, and enhancing patient rights protections are critical to addressing medical negligence in Bangladesh. Reforms should include clearer legal pathways for redress, increased public awareness of patient rights, standardized clinical protocols, and stronger monitoring of healthcare providers. Policy interventions aimed at transparency, training, and institutional accountability are essential to ensure equitable and quality healthcare delivery.

Keywords: Medical Law, Ethics, Professional, Implications, Implementation.

(*J Bangladesh Coll Phys Surg* 2026; 44: 127-134)

DOI: <https://doi.org/10.3329/jbcps.v44i2.89358>

Introduction

Ethics plays a crucial role in regulating human behavior, while law consists of rules and regulations that guide individuals on how to behave in specific situations¹. In the field of medicine, both medical law and professional ethics serve to regulate contentious practices and ensure accountability^{1,2}. Physicians often navigate the complex interplay between legal obligations and ethical

considerations³. The doctor-patient relationship must be based on trust and should not be exploited¹. Adherence to professional standards and ethical guidelines helps both physicians and patients avoid legal and moral conflicts¹.

By understanding and applying medical law and ethics, both doctors and patients can be better informed about their responsibilities and rights¹. It is essential that physicians act in accordance with both legal and ethical principles, always prioritizing the best interests of their patients^{1,3}.

In the context of Bangladesh, the statutory health system provides healthcare services to all citizens. However, significant challenges persist in the provision of adequate facilities and ethical governance⁴.

Ethical dilemmas frequently arise in medical procedures such as abortion, fertility treatments, organ

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Received: 30 June 2025

Accepted: 09 March, 2026

transplantation, and contraception due to inconsistencies between law and ethical norms⁵. Physicians may face undue pressure driven by financial incentives, fear of legal action, or coercion by unethical individuals which may compromise their professional integrity^{1,5}. Moreover, unethical practices surrounding organ donation and transplantation have occasionally led to corruption in the Bangladeshi healthcare sector⁵.

The public healthcare sector suffers from under-resourcing and poor service delivery, while private care remains unaffordable for much of the population⁴. There is also a persistent shortage of essential medical equipment, diagnostic tools, and drug availability⁴. Furthermore, there is a major imbalance in the distribution of healthcare professionals, with an overconcentration in urban areas, leaving rural populations under-served^{4, 5}.

Existing studies on medical negligence in Bangladesh largely focus on legal provisions or ethical principles in isolation, with limited integrated analysis of how law and ethics interact in actual medical practice. There is also a lack of empirical and policy-oriented research examining enforcement gaps, institutional barriers, and patient experiences within both public and private healthcare systems. Given the rising concerns over medical misconduct, weak accountability, and patient rights violations, a combined legal and ethical analysis is essential to understand systemic shortcomings. Exploring these dimensions together can inform more effective regulatory reforms and promote responsible medical practice in Bangladesh.

Despite the presence of legal frameworks and ethical guidelines, medical practice in Bangladesh continues to face significant issues of negligence, malpractice, and lack of accountability. The gap between law, ethical standards, and their implementation creates barriers to quality healthcare and justice for patients, necessitating a critical examination of existing impediments and reform needs.

Institutional reforms in healthcare must prioritize the enforcement of medical law and ethical practice throughout Bangladesh's healthcare system. Strengthening these frameworks can significantly improve healthcare delivery and promote equal access to quality medical services across all social strata^{1,4}. Therefore, this narrative review aims to discuss on health

challenges and legal solutions in health services thus to make some recommendation as policy proposals for managing medical negligence and malpractice in Bangladesh.

Origin and Development

Medical Jurisprudence, also known as Forensic Medicine, has a deep-rooted history dating back to ancient civilizations. It was initially practiced in China, Babylon, and Egypt around 2000 BC, where rudimentary legal procedures involving medical examination were observed⁶. Despite this early beginning, the development of Medical Jurisprudence in Bangladesh has lagged significantly behind its development in countries like Britain and Italy.

During the British colonial period and later during the Pakistan era (1947–1971), the medico-legal responsibilities in the Indian subcontinent including Bangladesh were largely managed by general medical practitioners without specialized training in forensic sciences.⁷

Over time, particularly after the independence of Bangladesh, forensic pathology and clinical forensic medicine began to be recognized as distinct fields. These areas were incorporated into medical practice through a medico-legal system modeled after British legal and medical structures.⁸

A forensic medical expert in Bangladesh is typically responsible for certifying cases, attending accident or crime scenes when required, and collecting relevant evidence. However, unlike developed countries, the lack of infrastructure and training still limits the efficiency of such practices.⁹ Books like *Toxicology and Medical Law in India* have provided foundational knowledge for practitioners in South Asia, offering insights into both theoretical and practical aspects of Medical Jurisprudence.¹⁰

In 1948, the World Medical Association (WMA) proposed the Declaration of Geneva at its 3rd General Assembly in Geneva, presenting a modern version of the Hippocratic Oath¹¹. This declaration emphasized several ethical principles: the duty to serve humanity, respect for teachers, professional conscience, prioritizing patient welfare, maintaining confidentiality, honoring the medical profession, and avoiding discrimination based on religion, nationality, race,

political affiliation, or social status¹¹. This ethical code has since been globally endorsed and implemented as a cornerstone of modern medical ethics.

In Bangladesh, the Bangladesh Medical and Dental Council (BMDC) serves as the statutory body responsible for overseeing the ethical conduct, educational standards, and licensing of healthcare professionals. The BMDC ensures compliance with medical ethics and monitors both undergraduate and postgraduate medical education to align with global standards¹².

Medical Jurisprudence has its roots in early civilizations such as China, Babylon, and Egypt, dating back to around 2000 BC. Despite this ancient origin, the development of Medical Jurisprudence in Bangladesh has been comparatively slower than in countries like Britain and Italy. The current medico-legal structure in Bangladesh is largely derived from the British system.

Medical experts, particularly forensic pathologists, are authorized to attend accident scenes, collect evidence, and provide professional assessments. In India, medical jurisprudence including toxicology and medical law has developed into a well-established discipline encompassing both theoretical and practical dimensions. The declaration outlines several ethical principles, including service to humanity, respect for teachers, professional integrity, prioritization of patient health, maintenance of confidentiality, non-discrimination, and the prohibition of using medical knowledge against the principles of humanity.¹³

In Bangladesh, the Bangladesh Medical and Dental Council (BMDC) is the statutory body that regulates the conduct of healthcare professionals. It sets and maintains medical and dental education standards, monitors the behavior of practitioners, and ensures public engagement with healthcare systems.

Methods

Methodology

This study adopts a qualitative, doctrinal, and narrative review approach to examine the intersection of law and ethics in medical practice in Bangladesh. The research primarily relies on secondary data collected from academic literature, statutory laws, case law, policy documents, reports from health organizations, and relevant international guidelines on medical ethics and malpractice.

The study conducts a legal analysis is conducted to review existing legal frameworks governing medical practice in Bangladesh, including laws related to negligence, patient rights, and professional accountability. In parallel, a thematic analysis explores key ethical principles such as duty of care, informed consent, and professional responsibility and how they are applied or neglected in practice.

The study also incorporates a comparative perspective by briefly examining selected international standards to identify gaps and best practices relevant to Bangladesh. Sources are selected based on relevance, and credibility to ensure a comprehensive understanding of current challenges.

Data are synthesized to identify recurring themes, institutional limitations, and enforcement gaps, allowing the development of practical recommendations aimed at strengthening both legal and ethical compliance in the healthcare system.

Conceptual Framework

Medical law, a specialized branch of legal studies, governs the rights and obligations of medical practitioners while safeguarding the privileges of patients. It encompasses focused areas such as tort law particularly medical malpractice and criminal law associated with medical treatment and practices. Ethical conduct in medical practice is also emerging as a pivotal concern within this field. Many incidents of negligence go unreported or unlitigated, mainly due to lack of legal awareness, fear of retaliation, and procedural barriers.¹⁴

In the context of Bangladesh, several structural and administrative challenges hinder the effective implementation of medical law. These include an inadequate institutional mechanism and an ineffective management system within the Ministry of Health and Family Welfare (MoHFW), as well as a deficient regulatory and governance framework. Additional contributing factors involve unregulated private healthcare services, inconsistent public service delivery, and poorly formulated policies concerning health infrastructure and medical instruments.¹⁵

Medical jurisprudence has progressively integrated ethical principles into legal procedures to promote the welfare of both healthcare providers and patients. A wide range of death-related cases such as suicides,

poisonings, abortions, deaths due to industrial illnesses or medical procedures, and deaths in custody are reported by medical professionals, law enforcement authorities, and the general public. Some cases involve allegations of negligence against healthcare staff or ambiguities in death certification. Medical negligence and malpractice remain persistent and increasing concerns in Bangladesh, largely due to weak regulatory enforcement and absence of a comprehensive legal framework.¹⁶

In Bangladesh, all cases of unnatural death must be reported to law enforcement agencies, where the forensic department is authorized to conduct investigations. Government medical colleges and hospitals are equipped with postmortem facilities to assist in forensic analysis. Complex and ethically sensitive issues, such as abortion, selective neonatal treatment, organ and tissue donation, transplantation, fertility management, maternity and terminal care, euthanasia, contraception, and family planning, continue to pose significant legal, ethical, and moral challenges.

Discussion

Medical Laws and Practices in Bangladesh

Bangladesh has established several key legal frameworks to regulate the practice of medicine, healthcare, and related fields. Notable among these are the *Bangladesh Medical Council Act No. XXX, 1973*¹⁷, the *Bangladesh Medical Dental Council Act, 2010*¹⁸, and the *Medical and Dental Act, 1980 (Act No. XVI)*¹⁹. These acts set the standard for basic and higher qualifications in medicine, dentistry, and healthcare. Additional significant laws include the *Bangladesh Nursing Council Ordinance, No. LXI, 1983*²⁰, the *Mental Health Act, 2018*²¹, and the *Public Health (Emergency Provisions) Ordinance, 1944*²², alongside others such as the *Epidemic Diseases Act, 1897*²³, the *Drugs Act, 1940*²⁴, and the *Pharmacy Ordinance, 1776*²⁵. These laws provide the foundation for medical practices and standards in Bangladesh, including regulation of private clinics and the handling of medical services in emergencies.

The *Mental Health Act, 2018* has been particularly significant in protecting the rights of those with mental disorders, offering provisions for health and rehabilitative services. Under this act, if a medical practitioner provides a false certificate related to mental

illness or violates other sections of the medical law, they can face a fine of Tk. 1 lakh, imprisonment for up to six months, or both.

Regarding medico-legal practices, the Bangladesh Police is responsible for transporting deceased bodies showing signs of unnatural death to the mortuary. The Government Medical College collaborates with the police, judges, magistrates, lawyers, and the forensic department to conduct postmortem examinations. These examinations are crucial in identifying discrepancies between the physical condition of a deceased body and the findings in the autopsy report, which are vital for legal proceedings. Medical Jurisprudence in Bangladesh covers a wide range of topics such as postmortem examinations, sexual offenses, abortions, and mental health-related legal issues. The *Transplantation of Human Organs Bill, 2018*²⁶ has provisions for penalties, including up to three years of imprisonment and fines up to Tk. 10 lakh, for those involved in the illegal trade of human organs.

The *Penal Code* of Bangladesh includes clauses related to medical laws, including sections 304 (A), 314, and 323-326²⁷, which pertain to offenses such as medical negligence, death due to negligence, miscarriage, bodily harm, and serious bodily injury. Section 336-338 specifically addresses punishment for incidents involving medical carelessness. If a medical official is suspected of a criminal offense, their medical license may be revoked. The National Health Policy of Bangladesh emphasizes that every citizen has the right to adequate healthcare, aligning with the Constitutional provisions that prioritize public health and nutrition.^{28, 29}

In cases of medical negligence, individuals can seek remedy through the courts, which may handle cases under criminal law, civil law, constitutional law, or all of these, depending on the circumstances. Expert opinions in the field of science, including medical law, are also recognized and authorized in the *Evidence Act*³⁰.

Problems and Challenges of Implementation of Medical Law and Professional Ethics in Bangladesh

In Bangladesh, one of the primary issues concerning medical law and professional ethics is misconduct and malpractice. The Bangladesh Medical and Dental Council (BMDC) has the authority to revoke a doctor's professional certificate, either temporarily or permanently, if the doctor breaches ethical codes or

engages in malpractice. This serves as the most severe punishment for such violations.

Medical negligence, incorrect treatment, and refusal of medical care are increasing concerns. However, medical negligence is not governed by specific codified legislation in the legal framework. According to a report by Ain O Shalish Kendro, between June 1995 and September 2008, the media documented at least 504 instances of medical negligence.³¹ Medical negligence often arises from a lack of accountability. Doctors are obligated to fulfill their moral duties and ensure the health and safety of their patients. They should not withhold information about treatment procedures from their patients.

Several ethical challenges plague the healthcare system in Bangladesh. These include self-advertisement, overcharging, indiscriminate use of medicines, unnecessary surgeries, overloading physicians with too many patients, providing false information by employment agents, and the issuance of fabricated medical certificates. As the number of physicians increases, many encounters ethical dilemmas regarding optimal treatment and patient care. Furthermore, weak supervision and a lack of firm enforcement policies exacerbate these challenges. Although many medical officers are posted in rural areas, they are often overwhelmed by their workload. Additionally, public hospitals often do not operate full-time, further hindering effective healthcare delivery.

The absence of specific legislation governing medical matters contributes to confusion and difficulty for victims attempting to navigate the legal process when filing complaints against medical professionals. The legal framework is insufficiently equipped to handle healthcare-related legal disputes, leading to frustration and ambiguity. Furthermore, the lack of medical jurisprudence in the curricula of several universities and law institutes in Bangladesh is a significant gap. The failure to incorporate and develop medical jurisprudence contributes to the challenges in understanding and implementing medical law in the country.

Medical Service vs. Quality in Bangladesh's Healthcare System

Bangladesh, a densely populated developing nation, has established a comprehensive healthcare network aimed at ensuring equitable healthcare for all its

inhabitants. The healthcare system is structured into three key components: medical universities, medical college hospitals, and tertiary-level hospitals. The healthcare infrastructure includes around 64 district hospitals, 425 upazila health complexes, 3,827 union health and family welfare centers, and 12,815 community clinics. Despite these efforts, Bangladesh faces significant challenges in developing a robust health policy to strengthen its healthcare system.

The country has 90 officially recognized medical colleges, 36 of which are public, while the remaining 54 are private. The government has implemented primary health care programs and free medical services at the community level through government-funded, permanent healthcare professionals at various public health institutions. According to the World Bank's collection of development indicators, in 2015, there were approximately 0.472 physicians per 1,000 people and 1.07 nurses per 10,000 people in Bangladesh. Additionally, there are around 5,816 hospitals in the country.³²

However, despite the large number of medical institutions, the provision of high-quality healthcare services in both the public and private sectors remains inadequate, leading to significant public dissatisfaction. Many citizens have lost trust in the healthcare system, prompting them to seek medical care in other countries that meet their expectations. This growing discontent is exacerbated by several systemic issues, including the service orientation of doctors, which is crucial for patient satisfaction. A major concern is the limited time doctors and nurses spend with patients—averaging only 2-3 minutes per patient. Additionally, there is a lack of privacy in most doctor's chambers, and vacant medical officer positions in rural areas remain unfilled due to lengthy recruitment processes. Furthermore, the government budget for local health remains insufficient.

There are also reports of resource mismanagement within the healthcare system. Patients express dissatisfaction over the unavailability of medicine and the inoperative status of many upazila health complexes. Instances of misconduct, such as the sale of medicine at inflated prices or the importation of raw pharmaceutical materials at a high cost, are subject to penalties under medical law. These violations are addressed by the Drug Court, which was implemented under the Drug

Ordinance to oversee and regulate the pharmaceutical industry in Bangladesh.

Medical professionals, particularly in government hospitals, often fail to provide adequate care. On the other hand, staff in private hospitals are overwhelmed, which affects their ability to deliver high-quality services. The Bangladesh Government has taken several initiatives to improve the healthcare sector by addressing workforce issues, medical education, healthcare financing, health education, infectious disease management, disease surveillance, and research. The government also aims to improve nutrition and food safety, as well as focus on non-communicable diseases.

A key initiative was the establishment of the National Health Development Council, which includes 16 principles, and 38 working strategies aimed at improving inter-ministerial coordination and health system implementation. Moreover, the Health Population and Nutrition Sector Development Program (HPNSDP) was enacted from 2011 to 2016, with a focus on quality assurance, medical auditing, accreditation, and the legislative framework. This program also emphasizes

coordinating governmental, NGO, and private sector efforts to improve healthcare service coverage. Continuous training for service providers is part of the strategy to enhance their skills and capacity.

Results

Recommendations

Medical ethical guidelines should be legislated to ensure a structured approach to healthcare practice. Universal Health Coverage (UHC) in Bangladesh prioritizes the delivery of high-quality healthcare services that address individual needs without causing financial strain. However, there are gaps in service and financial coverage, leading to an imbalanced social situation. Medical ethics should be incorporated into the curriculum, ensuring that ethical principles are ingrained in therapeutic practice. A practical framework for creating, implementing, and evaluating a medical ethics curriculum should be established for four-year medical programs.

The capacity of the medical council should be strengthened to enforce the Bangladesh Health Policy of 2018 effectively. According to the Constitution of

Table 1

Key Recommendations

Issue	Details
Misconduct and Malpractice	The Bangladesh Medical and Dental Council (BMDC) can revoke a doctor's professional certificate temporarily or permanently for breaches of ethical codes or malpractice.
Medical Negligence	Increasing concerns include medical negligence, incorrect treatment, and refusal of medical care. Medical negligence is not governed by specific codified legislation.
Ethical Challenges	Ethical challenges include self-advertisement, overcharging, indiscriminate use of medicines, unnecessary surgeries, overloading physicians with too many patients, providing false information by employment agents, and issuing fabricated medical certificates.
Healthcare System Issues	Weak supervision and lack of firm enforcement policies exacerbate challenges. Medical officers in rural areas are often overwhelmed by their workload. Public hospitals often do not operate full-time, hindering effective healthcare delivery.
Legal Framework	Absence of specific legislation governing medical matters leads to confusion and difficulty for victims navigating the legal process when filing complaints against medical professionals. The legal framework is insufficiently equipped to handle healthcare-related legal disputes.
Medical Jurisprudence	Lack of medical jurisprudence in the curricula of several universities and law institutes in Bangladesh contributes to challenges in understanding and implementing medical law in the country.

Bangladesh, the government is obligated to provide secure medical services to all citizens. The World Health Organization recommends that governments allocate at least 15 percent of their total expenditure to healthcare.

Specific legislation must be introduced to address medical negligence and malpractice. This should include raising awareness among physicians and providing financial reparations for mistreatment and negligence. Compensation for bodily harm due to medical negligence should account for the severity of the damage to different body parts. Additionally, the legislation and ethical guidelines for physicians should be enhanced. Health is not merely the absence of disease but a state of complete physical, mental, and social well-being. Physicians should attend foreign medical programs to gain knowledge and improve their practice.

Service delivery should involve collaboration between the public, non-governmental organizations (NGOs), and the private sectors, alongside institutional policy reforms. Ongoing training in skill development is essential for healthcare providers. The implementation of medical negligence laws is vital to regulate and reduce medical malpractice. In cases of medical negligence, complaints should be addressed to the Bangladesh Medical and Dental Council (BMDC), which will establish a committee to investigate. If negligence is confirmed, the BMDC will take appropriate actions, such as issuing warnings or revoking the doctor's registration. The punishment severity will depend on the seriousness of the offense, as outlined by the Medical and Dental Council Act 2010.

Medical ethics education, including a compulsory course on "Moral and Ethics in the Medical Sector," should be integrated into the medical syllabus for all undergraduates in Bangladesh. This will equip students with the necessary ethical and moral knowledge in the medical field.

Conclusion

Medical law and professional ethics are crucial for safeguarding public interests and ensuring the well-being of patients. These principles prevent harm and govern the behavior of healthcare professionals. While compliance with laws, regulations, and patient safety is vital, medical care should encompass broader moral and social values, such as social responsibility, human rights, and patient welfare.

For improving the medical sector in Bangladesh, a comprehensive health policy supported by enacted laws is essential. This framework will facilitate the implementation of necessary reforms and improvements. The introduction of a national health insurance scheme and a health financing strategy will expand financial protection for healthcare services, ensuring that individuals have access to affordable and quality medical care, thus reducing financial burdens on patients and families.

Professional ethics serve as a foundation for doctors to uphold their conduct and fulfill their responsibilities towards patients. These ethics include maintaining confidentiality, obtaining informed consent, and adhering to professional best practices. By following these standards, doctors can foster trust with patients, strengthening the doctor-patient relationship.

Reforming and enacting medical law and professional ethics, in alignment with national policy frameworks, is essential for ensuring the delivery of reliable, high-quality medical services in Bangladesh. Continuous evaluation and policy improvement are necessary to address the evolving needs and challenges of the healthcare sector.

In fine, the implementation of strong medical law and ethics is vital for protecting the public interest and advancing the medical sector in Bangladesh. By prioritizing patient welfare, strengthening financial protection, and upholding professional ethics, the healthcare system can provide accessible and improved services to all individuals in the country.

Conflict of interest: None

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