HPCSA Guidelines Made Easy

Section 1: The Red Lines — What You Can NEVER Say

HPCSA Rule 23 (Booklet 10) sets strict limits on medical advertising. These are not negotiation points. If your marketing contains any of the following, you are at risk of a complaint.

Instead of This...	Say This...
Best audiologist in Pretoria	Registered audiologist with 15 years of experience
We guarantee results	We develop personalised treatment plans for each patient
Read what our patients say about us	Learn more about our approach to [procedure]
98% success rate	Outcomes depend on individual patient factors and medical history
Don't ignore these symptoms — they could kill you	Here are the early signs of [condition]. Speak to your doctor if you experience any of these.
Pain-free procedure guaranteed	We use [specific techniques] to maximise patient comfort during treatment
Limited spots available — book now before they're gone	New patient consultations available from [date]. Contact us to schedule.
Free coffee and Wi-Fi with every appointment	Conveniently located in [area] with easy parking

The Rule of Thumb:

If a statement compares, guarantees, pressures, or self-promotes beyond factual description, it is likely prohibited. Stick to verifiable facts about your qualifications, experience, and approach.

Section 2: Testimonials — Why You Can't

You have seen other practices post patient reviews. It looks normal. It feels like social proof. So when the HPCSA says "no testimonials," it feels arbitrary.

It is not arbitrary. Here is why — and what you can do instead.

What the HPCSA rule says

Patient testimonials and endorsements relating to professional services are prohibited. This includes written reviews, video testimonials, star ratings in ads, and quoting patients on your website or social media. The restriction comes from Rule 23 of HPCSA Booklet 10 and is one of the most common compliance failures in practice marketing.

Why the rule exists

Testimonials exploit the patient-practitioner power imbalance. Patients cannot objectively evaluate medical competence — they can only judge bedside manner. A practitioner with great reviews might be dangerous; one with no reviews might be excellent. The rule protects patients from making healthcare decisions based on marketing rather than qualifications.

Can / Cannot: quick-reference table

Cannot	Can
Publish patient reviews on your website	Point prospects to your HPCSA registration, qualifications, and experience
Quote reviews in social media posts or ads	Share educational content that demonstrates expertise
Use video testimonials from patients	Use a generic testimonial disclaimer on your website
Claim "5-star rated" in advertising	Let Google reviews stay on Google (you cannot control third-party platforms)
Solicit or incentivise reviews	Respond with a generic "thank you" only — no further engagement
Repost Google reviews to your social media	Build trust through professional memberships and verified credentials
Display star ratings in paid ads	Offer case studies (with consent) presented as educational content, not endorsements

Educational Case Studies — The **Compliant** Alternative

Patient endorsements are banned — but educational case studies that demonstrate your clinical expertise are perfectly acceptable, subject to strict conditions.

You need:

- Written patient consent.
- Full anonymisation (no names, dates, locations, or any identifying details).
- A purely educational framing .
- No expressions of patient satisfaction.
- No patient quotes.
- No suggestion that the outcome was exceptional.

"here is how we approach treating X condition" rather than "here is what we did for Mr. Smith." Crucially, the case study must not imply endorsement.

Framed correctly, these function as clinical education for prospective patients and are a legitimate workaround that builds trust without violating Rule 23.

The "but everyone else does it" trap

Other practices posting testimonials are breaking the rules. The HPCSA does investigate. Inconsistent enforcement does not make it legal — one complaint from a competitor is all it takes.

Section 3: The Grey Areas — What You CAN Do (With Care)

These are areas where compliance depends on **how** you present the information. Proceed with caution.

- Before-and-after photos are permitted only with written patient consent, unmanipulated images, a disclaimer that results vary by patient, and no implied guarantee of similar outcomes.

- Patient reviews on Google may be posted independently by patients, but you cannot solicit or incentivise reviews, display them on your website, or quote them in ads or social media.

- Pricing information may include fee ranges and medical aid rates accepted, but discount offers, "cheapest" claims, and price comparisons with other practices are not permitted.

- Social media interaction with patients is prohibited — you cannot engage in clinical dialogue, respond to medical queries, or maintain ongoing conversations on social platforms. All enquiries must be redirected to formal consultation channels.

- Educational content (explaining conditions, treatments, procedures) is generally acceptable. The line is crossed when it becomes promotional. Test: would a neutral health information site publish this unchanged?

- AI-generated marketing content is your responsibility. Any AI output published under your name must be fact-checked by a human and reviewed for HPCSA compliance.

Section 4: AI in Your Marketing — What the HPCSA Says

HPCSA Booklet 20 (September 2025) applies to all use of AI by health practitioners — including marketing.

Key rules for your practice:

- You are responsible for every word AI produces.

Booklet 20 is clear: the practitioner is ultimately accountable for any AI-generated content published under their name. AI is assistive, not a replacement for human judgment.

- Patients must be told if AI was involved in their care.

This includes AI-generated communications, chatbots, or automated responses on your website or social media.

- Never put patient data into public AI tools.

Inputting patient information into ChatGPT, Gemini, or similar free-tier tools may expose personal data to model training. This violates both HPCSA rules and POPIA.

- AI-generated health information must be fact-checked by a human.

AI models can produce outdated, inaccurate, or biased information. Every claim must be verified against current authoritative sources before publication.

Section 5: Quick Self-Audit — 10 Questions

Can you answer YES to all 10? If not, your marketing may be at risk.

	Question	Yes	No
1.	Does your website avoid superlatives like "best", "leading", "top", or "number one"?		
2.	Does your marketing avoid any claim that guarantees or promises treatment outcomes?		
3.	Is your website and social media free of patient testimonials or endorsements?		
4.	Does your content avoid fear-based messaging, false urgency, or pressure tactics?		
5.	Can you confirm no content compares your practice to another practitioner (directly or by implication)?		
6.	Are all health claims backed by accepted medical science?		
7.	If you use before-and-after images, do you have written patient consent and appropriate disclaimers for every single one?		
8.	Is your Google Business Profile description factual — no superlatives, no testimonials, no promotional language?		
9.	Does your social media avoid clinical dialogue with patients (all enquiries redirected to formal channels)?		
10.	Are you aware of what AI tools are being used in your marketing, and have you reviewed their output before publication?		

Any "No" means you have a compliance gap.

The most common violations come from superlatives (Q1), testimonials (Q3), and comparative claims (Q5) — these are also the easiest to miss.

Section 6: What's at Stake

An HPCSA complaint can begin with a single social media post or a line on your website. The process typically involves a preliminary investigation and a formal disciplinary hearing. Penalties range from a formal warning to fines of up to **R100,000 per violation,** suspension from the register, or being struck off entirely. Beyond the financial cost, a published finding damages patient trust — often irreversibly.

Compliance is not about fear. It is about building a practice that communicates its value within the rules that protect both you and your patients.

Want a free 15-minute compliance scan of your current marketing?

Email us at info@ever-social.com or visit ever-social.com

Note:

This guide is for informational purposes and does not constitute legal advice. Final compliance responsibility rests with the registered practitioner.