

EDYTA MUCHA<sup>1</sup>

ORCID: 0000-0003-2629-8936

## OBLIGATION TO DENOUNCE IN THE CONTEXT OF MEDICAL CONFIDENTIALITY

### Introduction

The issue of medical confidentiality is one of the most important and oldest limitations of disclosure. The original norms concerning this matter are in the Hippocratic Oath, which indicated that all information obtained during the treatment is to be kept secret<sup>2</sup>. However, they were only a moral obligation and were not legally sanctioned. At present, this institution guarantees the rights arising from the Constitution of the Republic of Poland of 2 April 1997<sup>3</sup>, acts of international law, and Polish legislation<sup>4</sup>. The literature rightly believes that medical confidentiality extends to all data obtained in connection with the exercise of the medical profession. It may be both information provided intentionally to a medical professional and information obtained accidentally by them in connection with their profession<sup>5</sup>.

The basic regulations related to the confidentiality of medical professions were included in the Act of 6 November 2008 on Patient's Rights and the Patient Ombudsman<sup>6</sup>, where Article 14 contains provisions concerning

---

<sup>1</sup> SSgt. Edyta Mucha, Ph.D. — assistant lecturer at the Legal Sciences Institute of the Faculty of Security and Legal Sciences at the Police Academy in Szczytno. She has participated in many national scientific conferences and is the author of scientific publications on criminal law and forensics.

*Contact with the author via the editorial office.*

<sup>2</sup> Rydlichowska D, Tajemnica lekarska w postępowaniu karnym. *Prokuratura i Prawo*, 2015, issue 9, p. 37.

<sup>3</sup> DzU z 1997 r., nr 78, poz. 483 ze zm.

<sup>4</sup> Świtała K, Tajemnice zawodów medycznych — podstawowa charakterystyka. *Monitor Prawniczy*, 2014, nr 11, p. 603.

<sup>5</sup> Wąsik D, Tajemnica lekarska w procesie karnym. *Prokuratura i Prawo*, 2018, issue 1, p. 126–127.

<sup>6</sup> Consolidated text DzU z 2019 r., poz. 1127 ze zm.; hereinafter referred to as: ustawa o prawach pacjenta i rzeczniku praw pacjenta.

confidentiality of information related to the patient. Nevertheless, most legal acts regulating the rules of exercising particular medical professions have their own detailed regulations relating to professional secrets, among which we can distinguish<sup>7</sup>:

- Article 40 of the Act of 5 December 1996 on the professions of doctor and dentist<sup>8</sup>, referring to the professions of doctor and dentist,
- Article 17 of the Act of 15 July 2011 on the professions of nurse and midwife<sup>9</sup>, referring to the professions of nurse and midwife,
- Article 7 of the Act of 20 July 1950 on the profession of a medical assistant<sup>10</sup>, referring to the profession of medical assistant,
- Article 29 of the Act of 27 July 2001 on laboratory diagnosis<sup>11</sup>, referring to the profession of laboratory diagnostician,
- Article 21, section 2 of the Act of 19 April 1991 on Chambers of Pharmacies<sup>12</sup>, referring to the profession of pharmacist,
- Article 14 of the Act of 8 June 2001 on the profession of psychologist and professional self-government of psychologists<sup>13</sup>, referring to the profession of psychologist.

In the case of medical professions which do not have their own statutory regulations, the standards included in the Act on Patient's Rights and the Patient Ombudsman apply directly. An example of a profession in which no detailed provisions on professional secrecy have been codified is the profession of paramedic<sup>14</sup>.

Medical employees, in the course of providing health services, may come into possession of information indicating that a prohibited act has been committed. However, this information is often subject to medical confidentiality. Therefore, there is a conflict of interest between the discretion of medical employees and the interest of the administration of justice. It seems that this conflict is particularly evident when the perpetrator of a crime is detected and brought to justice. In order to achieve material truth, it may be necessary to use personal sources of evidence, such as medical staff. An important issue is therefore the answer to the question in which situations medical professionals can or should notify law enforcement authorities of the fact that a crime has been committed<sup>15</sup>. Therefore, the obligation to denounce specified in procedural and material regulations requires special attention<sup>16</sup>.

---

<sup>7</sup> Świtła K, *Tajemnice...*, *op. cit.*

<sup>8</sup> Consolidated text DzU z 2019, poz. 537 ze zm.

<sup>9</sup> Consolidated text DzU z 2019 r., poz. 576 ze zm.

<sup>10</sup> Consolidated text DzU z 2018 r., poz. 2150.

<sup>11</sup> Consolidated text DzU z 2019 r., poz. 849.

<sup>12</sup> Consolidated text DzU z 2019 r., poz. 1419.

<sup>13</sup> Consolidated text DzU z 2019 r., poz. 1026.

<sup>14</sup> Świtła K, *Tajemnice...*, *op. cit.*

<sup>15</sup> Kubiak R, *Tajemnica medyczna*. Warsaw, 2015, pp. 113, 140.

<sup>16</sup> Michalak K, *Tajemnica lekarska i psychiatryczna a polski proces karny*. Kracow, 2018, p. 206.

## Legal obligation to denounce

The legislator, in Article 240(1) of the Penal Code<sup>17</sup>, introduces a legal obligation to notify an authority in charge of prosecuting crimes about the commission of the following acts:

- genocide (Article 118 of the Penal Code),
- crimes against humanity (Article 118a of the Penal Code),
- war crimes (Articles 120–124 of the Penal Code),
- a coup (Article 127 of the Penal Code),
- an attack on the constitutional organ of the Republic of Poland (Article 128 of the Penal Code),
- espionage (Article 130 of the Penal Code),
- an assassination attempt on the President of the Republic of Poland (Article 134 of the Penal Code)<sup>18</sup>,
- a sudden assault on an armed forces unit (Article 140 of the Penal Code)<sup>19</sup>,
- murder (Article 148 of the Penal Code)<sup>20</sup>,
- causing grievous bodily harm (Article 156 of the Penal Code),
- causing a broadly understood dangerous incident (Article 163 of the Penal Code),
- taking control of a vessel or aircraft (Article 166 of the Penal Code),
- deprivation of liberty (Article 189 of the Penal Code)<sup>21</sup>,
- qualified types of rape (Article 197(3) and (4) of the Penal Code),
- exploitation of vulnerability (Article 198 of the Penal Code)<sup>22</sup>,
- engaging into sexual activity with a minor (Article 200 of the Penal Code)<sup>23</sup>,
- taking a hostage (Article 252 of the Penal Code),
- terrorist offences (Article 115(20) of the Penal Code)<sup>24</sup>.

---

<sup>17</sup> Ustawa z 6 czerwca 1997 — Kodeks karny (tekst jedn. DzU z 2019, poz. 1950).

<sup>18</sup> Tyszkiewicz L, *Przestępstwa przeciwko wymiarowi sprawiedliwości* [in:] Filar M (Ed.), *Kodeks karny. Komentarz*. Warsaw, 2016, p. 1411.

<sup>19</sup> Kulik M, *Obowiązek lekarza zawiadomienia o przestępstwie* [in:] Kruk E, Wołoszyn-Cichocka A, Zdyb M (Eds), *Odpowiedzialność w ochronie zdrowia*. Warsaw, 2018, pp. 305–306.

<sup>20</sup> Wrześniewska-Wal I, *Lekarski obowiązek zawiadamiania o przestępstwie a bezpieczeństwo państwa* [in:] Marek H, Górecka K (Eds), *Bezpieczeństwo — wielorakie perspektywy. Racjonalność a bezpieczeństwo organizacji*. Poznań 2016, p. 344.

<sup>21</sup> Wiak K, *Przestępstwa przeciwko wymiarowi sprawiedliwości* [in:] Grześko-wiak A, Wiak K (Eds), *Kodeks karny. Komentarz*. Warsaw, 2019, pp. 1234–1235.

<sup>22</sup> Szeroczyńska M, *Zwolnienie z tajemnicy lekarskiej na kanwie artykułu A. Jaskuły i K. Płończyk. Prokuratura i Prawo*, 2017, issue 9, p. 27.

<sup>23</sup> Herzog A, *Przestępstwa przeciwko wymiarowi sprawiedliwości* [in:] Stefański R.E (Ed.), *Kodeks karny. Komentarz*, Warsaw, 2018, p. 1592.

<sup>24</sup> Wojtaszczyk A, Wróbel W, Zontek W, *Przestępstwa przeciwko wymiarowi sprawiedliwości* [in:] Gardocki L (Ed.), *Przestępstwa przeciwko państwu i do-brom zbiorowym*. Warsaw, 2018, p. 717.

From the point of view of the issues raised, only two acts are relevant: murder and deprivation of liberty<sup>25</sup>. In the case of murder, the obligation to notify concerns only the basic type of murder, its qualified types and one graded type (murder under the influence of strong agitation justified by the circumstances).

However, the discussed obligation does not include other types of graded murders (infanticide and euthanasia) or manslaughter (Article 155 of the Penal Code), or acts hurting other interests which result in the death of a human being (Article 154 of the Penal Code, Article 158(3) of the Penal Code, Article 163(3) and (4) of the Penal Code, Article 177(2) of the Penal Code). Doubts arise as to whether it is appropriate to include only certain forms of murder in the obligation to denounce. First and foremost, the question is whether to omit infanticide and euthanasia<sup>26</sup>.

It is worth noting that the obligation resulting from Article 240 of the Penal Code extends to all punishable forms of the acts listed therein (including both perpetration and attempt, as well as preparation). This is important in view of, *inter alia*, protection of minors. One example may be a situation where a medical employee, while inspecting a child's body, recognises significant injuries that may indicate the possibility of attempted murder. In such a case, the person providing health care services is legally obliged to notify the law enforcement authorities about this<sup>27</sup>.

From the point of view of medical practice, Article 189(3) of the Penal Code, which provides for a qualified type due to the particular torment of a person deprived of liberty, is also important. In the doctrine, examples of particular anguish include starvation of the victim, keeping the victim in a dark cellar, painful tying, locking the victim in a box, which might result in suffocation, and denying medicines to a person deprived of liberty<sup>28</sup>. Taking this interpretation into account, it can be concluded that the obligation to denounce will also arise in the event when a medical employee discovers a minor during a home visit who has been deprived of care and food and is locked in a cellar or other room<sup>29</sup>.

A medical employee who does not notify law enforcement authorities because they have a reason to believe that this authority knows about the crime, or prevents the commission or attempted commission of these prohibited acts, will be exempted from criminal liability for failure to comply with the general obligation to denounce (Article 240(2) of the Penal Code)<sup>30</sup>. A medical employee who does not fulfil this obligation for fear

---

<sup>25</sup> Kubiak R, Tajemnica..., *op. cit.*, p. 115.

<sup>26</sup> Huk A, Tajemnica zawodowa lekarza w polskim procesie karnym. Warsaw, 2006, pp. 123-124.

<sup>27</sup> Kubiak R, Tajemnica..., *op. cit.* pp. 115-116.

<sup>28</sup> Kosonoga J, Art. 189 k.k. [in:] Stefański R.A (Ed.), Kodeks karny. Komentarz..., *op. cit.*, p. 1160.

<sup>29</sup> Kubiak R, Tajemnica..., *op. cit.*, p. 118.

<sup>30</sup> Huk A, Tajemnica zawodowa lekarza a obowiązek zawiadomienia o pełnym przestępstwie [in:] Nowikowski I (Ed.), Problemy stosowania prawa sądowego. Księga ofiarowana Profesorowi Edwardowi Skrętowiczowi Lublin, 2007, p. 204.

of criminal liability arising for themselves or for a person closest to them (Article 240(3) of the Penal Code)<sup>31</sup> is also not liable for punishment.

The obligation to notify arises as soon as reliable information about the commission of a criminal offence is obtained<sup>32</sup>. The reliability of the information about a crime does not require certainty, however it is important that the degree of certainty indicates a justified suspicion of the existence of a crime<sup>33</sup>. The denouncer should inform the law enforcement authorities immediately, but may delay the action if justified by a serious obstacle, such as the obligation to give priority to medical attention to the patient. It is only after the necessary steps have been taken that the medical officer must notify the authorities of the act<sup>34</sup>. The Act does not specify the form in which the notification of a crime is to be made. The notification may be made in writing or orally to a police officer<sup>35</sup>. The penalty for failure to fulfil the obligation under Article 240(1) of the Penal Code is the penalty of deprivation of liberty for up to 3 years<sup>36</sup>.

It is worth noting that the legislator, in Article 240(1) of the Penal Code, introduces the obligation of denunciation both when the perpetrator of an act is capable of incurring criminal liability, and when it cannot be attributed to them, e.g. due to insanity or juvenile delinquency<sup>37</sup>.

In addition, Article 304(2) of the Code of Criminal Procedure<sup>38</sup> provides that state and local government institutions which, in connection with their activities, become aware of an offence prosecuted *ex officio*, are obliged to immediately notify the prosecutor or the Police about the fact<sup>39</sup>. It is therefore legitimate to ask whether this provision also applies to health professionals. It is recognised in the doctrine that Art. 304(2) of the Code of Criminal Procedure does not apply to persons providing medical services. It seems that such a position is correct, because medical employees do not have the status of a public official within the meaning of Article 115(13) of the Code of Criminal Procedure. Therefore, they cannot be held liable for an act specified in Article 231 of the Code of Criminal Procedure<sup>40</sup>.

---

<sup>31</sup> Stachowiak S, Źródła informacji o popełnionym przestępstwie w polskim postępowaniu karnym, *Prokuratura i Prawo*, 2005, issue 2, p. 35.

<sup>32</sup> Mozgawa M, Kodeks karny. Komentarz. Warsaw, 2017, p. 44.

<sup>33</sup> Marek A, Konarska-Wrzošek V, *Prawo karne*. Warsaw, 2019, p. 667.

<sup>34</sup> Kubiak R, *Tajemnica...*, *op. cit.*, pp. 115–116.

<sup>35</sup> Brodzisz Z, *Postępowanie przygotowawcze* [in:] Skorupka J (Ed.), *Kodeks postępowania karnego. Komentarz*. Warsaw, 2018, p. 718.

<sup>36</sup> Kurowski M, *Postępowanie przygotowawcze* [in:] Świecki D (Ed.), *Kodeks postępowania karnego. Komentarz*. Warsaw, 2018, p. 1144.

<sup>37</sup> Huk A, *Tajemnica zawodowa lekarza w polskim procesie karnym*. Warsaw, 2006, p. 123.

<sup>38</sup> Ustawa z 6 czerwca 1997 r. — *Kodeks postępowania karnego* (tekst jedn. DzU z 2018 r., poz. 1987 ze zm.).

<sup>39</sup> Wiak K, *Przestępstwa...*, *op. cit.*, p. 1234.

<sup>40</sup> Kubiak R, *Tajemnica...*, *op. cit.*, pp. 122–123.

## Social obligation to denounce

The social obligation to notify law enforcement agencies of an offence prosecuted *ex officio* was introduced by Article 304(1) of the Code of Criminal Procedure.<sup>41</sup> This obligation is of a social nature, and therefore failure to fulfil it does not imply any legal sanction<sup>42</sup>. The social obligation to denounce does not cover offences prosecuted on private accusation or offences prosecuted on the request of the victim. It should be emphasised that the obligation under Article 304(1) of the Code of Criminal Procedure does not waive any of the medical secrets<sup>43</sup>. Therefore, a medical professional who becomes aware of a criminal offence in the course of their professional duties is not obliged to denounce it. Moreover, they are obliged to keep such information secret. Of course, there are derogations from this principle resulting from the legal obligation to report a crime committed<sup>44</sup>.

The notification of the commission of a criminal offence must be based on the explicit consent of the patient or their legal representative<sup>45</sup>, which may be expressed either in writing or orally<sup>46</sup>. It is important to stress that such consent is not an obligation on the part of the medical professional. When the patient has consented to the provision of information about the commission of a criminal offence, the medical professional may notify the law enforcement authorities of this fact<sup>47</sup>. It is also worth clarifying whether a medical professional, when notifying law enforcement authorities of a criminal offence, when a patient is unconscious or their state of health does not allow for an informed expression of will, does not expose themselves to liability for breach of professional secrecy. In such a situation, if the medical professional believes that the victim, being conscious, would agree to the law enforcement authorities being informed, this will not constitute a breach of medical confidentiality.

It may also happen that a medical professional will be tending to an unconscious perpetrator who has suffered injury during an assassination attempt on another person. In such a situation, the medical employee cannot accept the patient's presumed consent, so medical confidentiality is maintained (except in cases when the perpetrator commits any of the acts listed in Article 240(1) of the Penal Code). When a medical employee

---

<sup>41</sup> Wiak K, *Przestępstwa przeciwko wymiarowi...*, *op. cit.*, p. 1234; Górski A, *Lekarz w procesie karnym (wybrane zagadnienia)* [in:] Kardas P, Sroka T, Wróbel W (Eds), *Państwo Prawa i Prawo Karne. Księga jubileuszowa Profesora Andrzeja Zolla*. Warsaw, 2012, vol. II, p. 1591.

<sup>42</sup> Jasiński W, *Postępowanie przygotowawcze* [in:] Boratyńska K.T, Chojniak Ł, Jasiński W (Eds), *Postępowanie karne*. Warsaw, 2018, p. 428.

<sup>43</sup> Michalak K, *Tajemnica...*, *op. cit.*, p. 210–211.

<sup>44</sup> Huk A, *Tajemnica...*, *op. cit.*, p. 202.

<sup>45</sup> Wrześniewska-Wal I, *Lekarski...*, *op. cit.*, p. 345.

<sup>46</sup> Jaskuła A, Płończyk K, *Zwolnienie z tajemnicy lekarskiej w postępowaniu przygotowawczym*. *Prokuratura i Prawo*, 2017, issue 3, p. 85.

<sup>47</sup> Huk A, *Tajemnica...*, *op. cit.*

cannot determine whether they are dealing with the victim or the perpetrator, they should maintain medical confidentiality<sup>48</sup>.

The obligation to denounce does not apply either if the medical officer learns of the offence during their free time, e.g. during a conversation with a neighbour. Therefore, if they decide to notify the prosecutor or the Police of the criminal offence, they are not liable for a breach of the obligation to maintain medical confidentiality<sup>49</sup>.

In conclusion to the previous considerations, it should be stressed that denunciation is intended to provide the authorities with information for procedural use. In the context of medical confidentiality, the obligation for a health care professional to report a crime applies to the acts prohibited under Article 240(1) of the Penal Code. It is irrelevant whether the employee learns of this by or with no connection to their professional activities. In the case of other offences, they have a right rather than an obligation to report an offence. It should be noted, however, that a medical employee may notify about the commission of a prohibited act only if the patient or their statutory representative has consented to it, or if there are grounds for accepting presumed consent.

## References

### Publications

- Brodzisz Z, Postępowanie przygotowawcze [in:] Skorupka J (Ed.), Kodeks postępowania karnego. Komentarz. Warsaw, 2018.
- Górski A, Lekarz w procesie karnym (wybrane zagadnienia) [in:] Kardas P, Sroka T, Wróbel W (Eds), Państwo Prawa i Prawo Karne. Księga jubileuszowa Profesora Andrzeja Zolla, Vol. II. Warsaw, 2012.
- Herzog A, Przesłpstwa przeciwko wymiarowi sprawiedliwosci [in:] Stefański R.E (Ed.), Kodeks karny. Komentarz. Warsaw, 2018.
- Huk A, Tajemnica zawodowa lekarza a obowiazek zawiadomienia o popelnionym przestępcstwie [in:] Nowikowski I (Ed.), Problemy stosowania prawa sądowego. Księga ofiarowana Profesorowi Edwardowi Skrętowiczowi. Lublin, 2007.
- Huk A, Tajemnica zawodowa lekarza w polskim procesie karnym. Warsaw, 2006.
- Jasiński W, Postępowanie przygotowawcze [in:] Boratyńska K.T, Chojniak Ł, Jasiński W (Eds), Postępowanie karne. Warsaw, 2018.
- Jaskuła A, Płończyk K, Zwolnienie z tajemnicy lekarskiej w postępowaniu przygotowawczym. *Prokuratura i Prawo* 2017, No. 3.
- Kulik M, Obowiazek lekarza zawiadomienia o przestępcstwie [in:] Kruk E, Wołoszyn-Cichocka A, Zdyb M (Eds), Odpowiedzialność w ochronie zdrowia. Warsaw, 2018.

---

<sup>48</sup> *Ibid.*, p. 202–203.

<sup>49</sup> *Ibid.*, p. 119.

- Kurowski M, Postępowanie przygotowawcze [in:] Świecki D (Ed.), Kodeks postępowania karnego. Komentarz. Warsaw, 2018.
- Marek A, Konarska-Wrzosek V, Prawo karne. Warsaw, 2019.
- Michalak K, Tajemnica lekarska i psychiatryczna a polski proces karny. Krakow, 2018.
- Mozgawa M, Kodeks karny. Komentarz. Warsaw, 2017.
- Rydlichowska D, Tajemnica lekarska w postępowaniu karnym, *Prokuratura i Prawo* 2015, No. 9.
- Stachowiak S, Źródła informacji o popełnionym przestępstwie w polskim postępowaniu karnym, *Prokuratura i Prawo* 2005, No. 2.
- Szeroczyńska M, Zwolnienie z tajemnicy lekarskiej na kanwie artykułu A. Jaskuły i K. Płończyk, *Prokuratura i Prawo* 2017, No. 9.
- Świtała K, Tajemnice zawodów medycznych — podstawowa charakterystyka, *Monitor Prawniczy* 2014, No. 11.
- Tyszkiewicz L, Przestępstwa przeciwko wymiarowi sprawiedliwości [in:] Filar M (Ed.), Kodeks karny. Komentarz. Warsaw, 2016.
- Wąsik D, Tajemnica lekarska w procesie karnym, *Prokuratura i Prawo* 2018, No. 1.
- Wiak K, Przestępstwa przeciwko wymiarowi sprawiedliwości [in:] Grześkowiak A, Wiak K (Ed.), Kodeks karny. Komentarz. Warsaw, 2019.
- Wojtaszczyk A, Wróbel W, Zontek W, Przestępstwa przeciwko wymiarowi sprawiedliwości [in:] Gardocki L (Ed.), Przestępstwa przeciwko państwu i dobrom zbiorowym. Warsaw, 2018.
- Wrześniewska-Wal I, Lekarski obowiązek zawiadomienia o przestępstwie a bezpieczeństwo państwa [in:] Marek H, Górecka K (Ed.), Bezpieczeństwo — wielorakie perspektywy. Racjonalność a bezpieczeństwo organizacji. Poznań, 2016.

## Legal acts

- Constitution of the Republic of Poland of 2 April 1997 (DzU z 1997, nr 78, poz. 483 ze zm.).
- Ustawa z 19 kwietnia 1991 o izbach aptekarskich (tekst jedn. DzU z 2019, poz. 1419).
- Ustawa z 5 grudnia 1996 o zawodach lekarza i lekarza dentystry (tekst jedn. DzU z 2019, poz. 537 ze zm.).
- Ustawa z 6 czerwca 1997 — Kodeks karny (tekst jedn. DzU z 2019, poz. 1950).
- Ustawa z 6 czerwca 1997 — Kodeks postępowania karnego (tekst jedn. DzU z 2018, poz. 1987 ze zm.).
- Ustawa z 8 czerwca 2001 o zawodzie psychologa i samorządzie zawodowym psychologów (tekst jedn. DzU z 2019, poz. 1026).
- Ustawa z 27 lipca 2001 o diagnostyce laboratoryjnej (tekst jedn. DzU z 2019, poz. 849).
- Ustawa z 6 listopada 2008 o prawach pacjenta i rzeczniku praw pacjenta (tekst jedn. DzU z 2019, poz. 1127 ze zm.).



Ustawa z 15 lipca 2011 o zawodach pielęgniarstwa i położnej (tekst jedn. DzU z 2019, poz. 576 ze zm.).

Ustawa z 20 lipca 1950 o zawodzie felczera (tekst jedn. DzU z 2018, poz. 2150).

**DOI: 10.5604/01.3001.0014.1138**

**<http://dx.doi.org/10.5604/01.3001.0014.1138>**

**Keywords:** denunciation obligation, medical confidentiality, medical workers, criminal proceedings, criminal law

**Summary:** The subject of the article is the issue of the obligation to notify about a crime in relation to medical confidentiality. Medical workers may obtain information indicating the commission of a criminal act while performing medical services. An important issue is whether, in such a situation, they can or should notify law enforcement authorities. In order to resolve these issues, the legislator defines the legal and social obligation to denounce. The legal obligation of a medical worker to notify about a crime relates to the offences specified in Art. 240 (1) of the Act of June 6, 1997 — Penal Code. Among the enumerated types of generic acts covered by denunciation, particularly important due to the issues raised, are the crime of murder (Article 148 of the Penal Code) and deprivation of liberty (Article 189 of the Penal Code). A medical worker having obtained reliable information about the commission of a criminal act is obliged to notify law enforcement authorities. It is irrelevant whether they learned about it while carrying out professional activities or without a connection with their performance. The criminal sanction for failure to comply with the obligation under Article 240 (1) of the Criminal Code is a prison sentence of up to 3 years. However, the social obligation to denounce is introduced by Art. 304 (1) of the Act of June 6, 1997 — Code of Criminal Procedure. Failure to fulfil obligations of this nature does not result in any criminal consequences. The social obligation to denounce does not include offences prosecuted on private accusation or on request of the victim. It is worth noting that this obligation does not repeal any of the laws regulating medical secrets. In this case, a medical worker who has learned of a crime in connection with the exercise of their profession has no obligation to denounce. It should be emphasised that a medical worker may fulfil the obligation to denounce only if the patient or their legal representative has consented to it, or if there are premises for presuming the consent.