

# Measures for the Administration of Medical Representatives<sup>1</sup>

**Authorities: National Medical Products Administration, Ministry of Public Security, National Health Commission, State Administration for Market Regulation, National Healthcare Security Administration, National Administration of Traditional Chinese Medicine, National Disease Control and Prevention Administration.**

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## Chapter I General Provisions

### Article 1

These Measures are formulated in accordance with the *Drug Administration Law of the People's Republic of China*, the *Physicians Law of the People's Republic of China*, the *Regulations on the Supervision and Administration of the Use of Healthcare Security Funds*, and other relevant laws and administrative regulations, for the purposes of regulating the professional conduct of medical representatives, ensuring the orderly and compliant conduct of pharmaceutical academic promotion activities, and promoting the high-quality development of the pharmaceutical industry.

### Article 2

These Measures shall apply to the qualifications for practice, professional conduct, and administration of medical representatives within the territory of the People's Republic of China.

### Article 3

For the purposes of these Measures, "medical representatives" refer to personnel who are employed or authorized by marketing authorization holders for pharmaceuticals to transmit, communicate, and provide feedback on drug-related information to medical and health institutions (including traditional Chinese medicine medical institutions and disease prevention

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<sup>1</sup>Translated by Health Law Asia – Pharmaceutical, Medical Device, and Cosmetics Law



and control institutions, the same hereinafter) and their staff, and who engage in pharmaceutical academic promotion activities.

#### Article 4

Marketing authorization holders for pharmaceuticals shall be responsible for the administration of medical representatives employed or authorized by them, shall strictly regulate the conduct of medical representatives, and shall bear primary responsibility for the pharmaceutical academic promotion activities conducted by medical representatives.

Where the marketing authorization holder is established outside the territory of China, its designated domestic responsible person shall perform the corresponding responsibilities.

#### Article 5

Medical and health institutions shall be responsible for regulating and constraining the conduct of their personnel participating in pharmaceutical academic promotion activities, and for strengthening the administration of the reception of medical representatives by their personnel.

#### Article 6


For the purposes of these Measures, “staff of medical and health institutions” includes health professional and technical personnel, managerial personnel, logistics personnel, and other social service personnel who provide services within medical and health institutions and are subject to the administration of such institutions.

#### Article 7

The drug regulatory department under the State Council shall be responsible for establishing a record-filing system for medical representatives, organizing the construction of a record-filing platform for medical representatives, and strengthening the administration of record-filing and information relating to medical representatives.

The health authorities under the State Council shall be responsible for guiding medical and health institutions in establishing systems for the administration of pharmaceutical academic promotion activities conducted by medical representatives, strengthening the administration of the reception of medical representatives by staff of medical and health institutions and of pharmaceutical academic promotion activities conducted by medical representatives, and investigating and punishing acts whereby staff of medical and health institutions accept improper benefits.





The traditional Chinese medicine authorities under the State Council shall be responsible for guiding the administration of the reception of medical representatives and pharmaceutical academic promotion activities by traditional Chinese medicine medical institutions and their staff, and for guiding and coordinating the investigation and punishment of acts whereby staff of traditional Chinese medicine medical institutions accept improper benefits.

The disease prevention and control authorities under the State Council shall be responsible for guiding the administration of the reception of medical representatives and pharmaceutical academic promotion activities by disease prevention and control institutions, and for guiding disease prevention and control institutions, in accordance with cadre management authority, in investigating and punishing acts whereby staff members accept improper benefits.

The public security authorities under the State Council shall be responsible for combating illegal and criminal activities under the jurisdiction of public security authorities, including commercial bribery and fraud, in pharmaceutical procurement and sales and in medical services.

The market supervision and administration authorities under the State Council shall be responsible for organizing the investigation and punishment of commercial bribery in pharmaceutical procurement and sales and in medical services.

The healthcare security administrative authorities under the State Council shall be responsible for establishing a credit evaluation system for pharmaceutical pricing and centralized procurement, and for implementing credit ratings and graded administrative measures with respect to commercial bribery in the healthcare sector.


Under the guidance of their respective superior authorities, the local drug regulatory departments, health authorities, traditional Chinese medicine authorities, disease prevention and control authorities, market supervision and administration authorities, and healthcare security administrative authorities at or above the county level shall, in accordance with their respective duties, be responsible for the supervision and administration of the professional conduct of medical representatives, and shall investigate and punish in accordance with law commercial bribery and other unlawful acts committed by pharmaceutical marketing authorization holders, medical representatives, medical and health institutions, and their staff in pharmaceutical procurement and sales and in medical services; public security authorities shall, in accordance with law, combat relevant criminal activities.

## **Chapter II Administration of Marketing Authorization Holders for Pharmaceuticals**

### **Article 8**

In accordance with the characteristics of medicinal products and clinical needs, where marketing authorization holders for pharmaceuticals conduct pharmaceutical academic promotion activities, they shall employ or authorize medical representatives. The number and professional





competence of medical representatives shall be reasonably matched with the utilization status of the relevant medicines and the scale of promotional activities.

Where a marketing authorization holder entrusts a professional organization to carry out pharmaceutical academic promotion activities, it shall assess the capability of the entrusted party, agree upon compliance requirements and liabilities for violations, and enter into a medical representative management agreement. At the same time, it shall issue letters of authorization to medical representatives engaged in pharmaceutical academic promotion activities on its behalf.

## Article 9

Marketing authorization holders for pharmaceuticals shall establish a management system for medical representatives, and standardize and regulate their employment, authorization, record-filing, training and assessment, and pharmaceutical academic promotion activities, thereby strengthening whole-process administration of the professional conduct of medical representatives.

## Article 10

Medical representatives shall meet the following requirements:

- (1) Possess a junior college degree or higher in medicine, pharmacy, or a related discipline;
- (2) Have knowledge of the pharmacological and toxicological properties, indications or functions and indications, combination drug use, adverse reactions, contraindications, and precautions of the medicines being promoted;
- (3) Have completed training and passed assessment organized by the marketing authorization holder for pharmaceuticals.

## Article 11

Marketing authorization holders for pharmaceuticals shall not engage in any of the following conduct:

- (1) Employing or authorizing medical representatives who do not meet the required qualifications or who have records of commercial bribery;
- (2) Instigating or condoning medical representatives to engage in unlawful activities;



- (3) Allocating drug sales targets to medical representatives, or requiring them to engage in sales activities such as payment collection or handling of purchase and sale invoices;
- (4) Other conduct prohibited by laws and administrative regulations.

## Article 12

Professional organizations entrusted by marketing authorization holders for pharmaceuticals shall not engage in any of the following conduct:

- (1) Employing medical representatives who do not meet the required qualifications or who have records of commercial bribery;
- (2) Instigating or condoning medical representatives to engage in unlawful and criminal activities such as commercial bribery or fraud;
- (3) Instigating or condoning medical representatives to conduct pharmaceutical academic promotion activities in violation of regulations;
- (4) Other conduct prohibited by laws and administrative regulations.

## Chapter III Record-Filing Administration of Medical Representatives

### Article 13


The drug regulatory authority under the State Council shall establish a unified national record-filing platform for medical representatives, which shall provide services for the filing, verification, and cross-checking of information on medical representatives, publicly disclose relevant unlawful information concerning marketing authorization holders for pharmaceuticals or medical representatives, and publish relevant work notices, announcements, policies, and regulations.

### Article 14

Marketing authorization holders for pharmaceuticals shall file information on medical representatives through the record-filing platform, and shall promptly maintain such filed information by entering, confirming, and updating the relevant information of their medical representatives as required.

### Article 15





Marketing authorization holders for pharmaceuticals shall submit the following information on the record-filing platform:

- (1) The name, unified social credit code, registered address, license number, and contact information of the marketing authorization holder for pharmaceuticals;
- (2) The name, gender, and photograph of the medical representative;
- (3) The type and number of the identity document of the medical representative, as well as their field of study and educational background;
- (4) The commencement and termination dates of the labor contract or authorization letter of the medical representative;
- (5) The categories of medicines and therapeutic areas for which the medical representative is responsible for promotion;
- (6) The geographical area (province or specified region) for which the medical representative is responsible for promotion;
- (7) A declaration by the marketing authorization holder affirming the authenticity of the filed information;
- (8) A compliance commitment letter signed between the marketing authorization holder and the medical representative.

#### Article 16

After submission of the filing information, the marketing authorization holder for pharmaceuticals shall obtain a medical representative filing information certificate with a unique filing number.

The filing information certificate for medical representatives shall include the filing number, the name and contact information of the marketing authorization holder for pharmaceuticals, the name and photograph of the medical representative, the categories of medicines and therapeutic areas for academic promotion, the designated promotional regions, and the term of the contract or authorization period, among other information.

#### Article 17

Where there are any changes to filed information concerning a medical representative, the marketing authorization holder for pharmaceuticals shall complete the modification of the filing information within 30 days.

Where a foreign marketing authorization holder for pharmaceuticals changes its designated domestic responsible person, the newly designated domestic responsible person shall update



the relevant information on the filing platform within 30 days and reconfirm the filed information of all medical representatives under its name.

Where a medical representative ceases to engage in relevant work or their authorization is terminated, the marketing authorization holder for pharmaceuticals shall delete their filing information within 30 days.

#### Article 18

Where the marketing authorization holder for pharmaceuticals has its drug approval certificates or its *Pharmaceutical Production License* revoked, withdrawn, or cancelled, the provincial drug regulatory authority at the place where it is located shall, within 30 days after the administrative penalty decision or administrative decision is made, supervise the enterprise in updating or deleting the filed information of its medical representatives.

### **Chapter IV Administration of Pharmaceutical Academic Promotion Activities by Medical Representatives**

#### Article 19

Medical and health institutions shall establish systems for the administration of pharmaceutical academic promotion activities conducted by medical representatives, and shall standardize and regulate the conduct of their staff participating in such activities. They shall also provide appropriate notices and reminders in appropriate locations and forms.

#### Article 20


Medical representatives engaging in pharmaceutical academic promotion activities shall strictly comply with relevant compliance guidelines and codes of conduct, and shall be strictly prohibited from engaging in commercial bribery.

When conducting pharmaceutical academic promotion activities for staff of medical and health institutions, medical representatives shall comply with the relevant provisions of competent authorities for health, traditional Chinese medicine, and disease prevention and control.

Medical representatives shall obtain the consent of medical and health institutions before conducting pharmaceutical academic promotion activities within such institutions.

#### Article 21





The principal activities of medical representatives in conducting pharmaceutical academic promotion activities shall include:

- (1) Transmitting drug-related information to staff of medical and health institutions;
- (2) Communicating with staff of medical and health institutions and assisting in the rational use of pharmaceuticals;
- (3) Collecting and providing feedback on clinical use of drugs, adverse drug reactions, and clinical needs.

## Article 22

Medical and health institutions shall designate an internal department to be uniformly responsible for the registration and administration of pharmaceutical academic promotion activities conducted by medical representatives within their institutions, and shall establish registries and activity logs for medical representatives.

Where a medical representative conducts pharmaceutical academic promotion activities in a medical and health institution for the first time, registration shall be completed in accordance with the relevant provisions of the competent authorities for health, traditional Chinese medicine, and disease prevention and control, and relevant supporting documentation shall be provided. Medical representatives who have not been registered with the medical and health institution shall not be permitted to engage in pharmaceutical academic promotion activities.

## Article 23


Medical and health institutions shall verify the identity information of medical representatives through the medical representative record-filing platform and retain relevant materials for future reference.

Where identity information does not correspond with the filed information of the medical representative, the institution shall not receive the individual concerned.

## Article 24

Medical representatives shall conduct pharmaceutical academic promotion activities strictly within the scope of the categories of medicines, therapeutic areas, and regions authorized by the marketing authorization holder for pharmaceuticals, and shall not engage in any of the following acts:



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- (1) Engaging in pharmaceutical academic promotion activities without filing or registration;
  - (2) Conducting pharmaceutical academic promotion activities without the consent of the medical and health institution;
  - (3) Undertaking drug sales tasks, or engaging in sales activities such as payment collection or handling of purchase and sales invoices;
  - (4) Participating in, or commissioning staff of medical and health institutions to participate in, the statistical tracking of the number of prescriptions issued by individual physicians;
  - (5) Providing donations, grants, or sponsorships to medical and health institutions on the condition of drug sales volume or value, or providing disguised benefits under the guise of donations, grants, or sponsorships, or giving gifts, cash, consumer cards (vouchers), negotiable securities, equity interests, or other financial products or property;
  - (6) Providing rebates, donations, grants, sponsorships, or any gifts, cash, consumer cards (vouchers), negotiable securities, equity interests, or other financial products or property, in any name or form, to staff of medical and health institutions, their spouses, children and their spouses, or other closely related persons;
  - (7) Misleading physicians in drug use, exaggerating or misleading therapeutic efficacy, concealing known adverse reaction information or physician-reported adverse reactions, or otherwise interfering with or influencing the rational clinical use of drugs;
  - (8) Illegally collecting, using, or disseminating patient information or internal information of medical and health institutions;
  - (9) Conducting pharmaceutical academic promotion activities for drugs beyond the scope authorized by the marketing authorization holder for pharmaceuticals.

## Article 25

Medical and health institutions and their staff shall not engage in any of the following acts:

- (1) Conducting pharmaceutical academic promotion activities with medical representatives who have not completed filing or registration;
- (2) In violation of the regulations of the competent health authorities, traditional Chinese medicine authorities, disease prevention and control authorities, or medical and health institutions, compiling statistics on the use volume of pharmaceuticals;
- (3) A medical and health institution accepting donations, grants, or sponsorships provided on the condition of drug sales volume or quantity, or disguised benefits provided in the name of donations, grants, or sponsorships, or accepting property such as gifts, cash, consumer cards (vouchers), negotiable securities, equity interests, or other financial products;



- (4) Staff of medical and health institutions, their spouses, children and their spouses, or other closely related persons, accepting in any name or form rebates from medical representatives, or donations, grants, sponsorships, or gifts, cash, consumer cards (vouchers), negotiable securities, equity interests, or other financial products or property; or participating in banquets, travel, fitness, entertainment, or other activities arranged or paid for by medical representatives;
- (5) Other acts prohibited by laws and administrative regulations.

## Article 26

Where a medical representative engages in any conduct set out in Article 24 of these Measures, the marketing authorization holder for pharmaceuticals shall promptly correct such conduct. Where the circumstances are serious, the authorization for pharmaceutical academic promotion activities shall be terminated, the medical representative's record-filing information shall be deleted, and the reasons for such deletion shall be publicly disclosed on the filing platform. At the same time, liability shall be pursued in accordance with the relevant labor contract or entrustment contract in accordance with law, including termination of the contract with the medical representative or the professional organization.

Where a medical and health institution discovers that a medical representative has engaged in any conduct specified in Article 24 of these Measures, it may report the matter through the record-filing platform. The platform shall, based on the nature of the reported issue, transfer the report to the relevant competent authorities for handling.

## Chapter V Supervision and Administration

### Article 27

The drug regulatory authority under the State Council, the competent health authorities, traditional Chinese medicine authorities, disease prevention and control authorities, public security authorities, market supervision and administration authorities, and healthcare security administrative authorities shall strengthen coordination and cooperation, and shall establish and improve working mechanisms for information sharing, transfer of leads, case notification, and linkage between administrative enforcement and criminal justice in areas including routine administration, supervisory inspections, and complaint and reporting handling.

Where it is discovered that a marketing authorization holder for pharmaceuticals has failed to comply with relevant provisions on the administration of medical representatives, the matter shall be promptly reported to the drug regulatory authority. Where acts involving medical and health institutions and their staff receiving improper benefits are identified, the matter shall be promptly reported to the relevant competent health authorities, traditional Chinese medicine authorities, or disease prevention and control authorities. Where commercial bribery is involved, the matter shall be promptly reported to the market supervision and administration authorities.



Where unlawful use of healthcare security funds is involved, the matter shall be promptly reported to the healthcare security administrative authorities.

## Article 28

Relevant authorities shall, in accordance with their respective duties, investigate and punish unlawful and criminal acts such as commercial bribery committed by marketing authorization holders for pharmaceuticals and their entrusted professional organizations, and shall notify the drug regulatory authority at the same level of any medical representatives involved in such cases.

For marketing authorization holders of pharmaceuticals, medical and health institutions, and other entities that engage in commercial bribery, fraud, or other unlawful and criminal conduct, measures may be adopted including publicly disclosing unlawful information, listing them as key subjects of supervision, restricting participation in relevant pharmaceutical procurement activities, and restricting the signing of designated healthcare security service agreements.

For medical representatives involved in commercial bribery, fraud, or other unlawful and criminal conduct, measures such as public disclosure on the enterprise's website and public disclosure on the record-filing platform by the drug regulatory authority may be adopted.

Where there are serious violations of the provisions of these Measures, the market supervision and administration authorities shall, in accordance with law and regulations, include the relevant entities in the list of seriously illegal and dishonest market entities. For such seriously illegal and dishonest entities, relevant departments shall, in accordance with law and regulations, adopt measures such as market and industry access restrictions.

## Article 29

Where drug regulatory authorities, health authorities, traditional Chinese medicine authorities, disease prevention and control authorities, market supervision and administration authorities, or healthcare security administrative authorities discover clues relating to disciplinary violations by Party members or job-related violations and crimes by public officials in the conduct of marketing authorization holders for pharmaceuticals and their entrusted professional organizations, medical representatives, or medical and health institutions and their staff, such clues shall be transferred to the competent discipline inspection and supervisory authorities.

Where these authorities discover suspected commercial bribery or fraud crimes under the jurisdiction of public security authorities committed in pharmaceutical procurement and sales or medical services by marketing authorization holders for pharmaceuticals and their entrusted professional organizations, medical representatives, or medical and health institutions and their staff, such cases shall be transferred to the competent public security authorities in accordance





with the *Provisions on the Transfer of Suspected Criminal Cases by Administrative Law Enforcement Authorities*.

#### Article 30

Citizens, legal persons, and other organizations are encouraged to exercise supervision over the conduct of medical representatives and to report unlawful acts by marketing authorization holders for pharmaceuticals and their entrusted professional organizations, medical representatives, medical and health institutions, and their staff.

#### Article 31

Industry associations shall actively play a role in industry supervision and self-regulation, formulate industry standards and codes of conduct for medical representatives, and guide medical representatives in conducting academic promotion activities in accordance with law.

#### Article 32

Drug regulatory authorities, health authorities, traditional Chinese medicine authorities, disease prevention and control authorities, market supervision and administration authorities, and healthcare security administrative authorities shall disclose, in accordance with law, administrative penalty decisions imposed on marketing authorization holders for pharmaceuticals and their entrusted professional organizations, medical representatives, medical and health institutions, and their staff who have committed violations.


#### Article 33

Where a marketing authorization holder for pharmaceuticals engages in any conduct specified in Article 11 of these Measures, or where a medical representative engages in any conduct specified in Article 24 of these Measures, the drug regulatory authorities, competent health authorities, traditional Chinese medicine authorities, disease prevention and control authorities, market supervision and administration authorities, and healthcare security administrative authorities shall, in accordance with their respective functions and duties, handle such matters accordingly.

The drug regulatory authority may adopt measures such as restricting the pharmaceutical academic promotion activities of the marketing authorization holder, and issuing public notices on the medical representative record-filing platform.

The competent health authorities, traditional Chinese medicine authorities, and disease prevention and control authorities may adopt measures such as restricting the time during





which medical representatives may conduct pharmaceutical academic promotion activities within medical and health institutions, and restricting the entry of the marketing authorization holder's pharmaceuticals into medical and health institutions.

The healthcare security administrative authorities may implement credit evaluation mechanisms for pharmaceutical pricing and centralized procurement, and accordingly adopt measures such as risk warnings and restricting online listing and procurement. They may also conduct penetrative credit evaluations of marketing authorization holders involved in bribery.

Relevant authorities shall, through effective information technology means, provide administrative penalty and other information generated in the course of performing their statutory duties to the market supervision and administration authorities, which shall incorporate such information into the national enterprise credit information publicity system under the name of the enterprise and make it publicly available.

#### Article 34

Where, in the course of pharmaceutical procurement and sales, a marketing authorization holder for pharmaceuticals or a medical and health institution gives or accepts rebates or other improper benefits, or where a marketing authorization holder or medical representative provides money, property, or other improper benefits to relevant personnel using its pharmaceuticals, such conduct shall be handled in accordance with the *Drug Administration Law of the People's Republic of China* and other relevant laws and regulations.

### Chapter VI Supplementary Provisions

#### Article 35

These Measures shall come into force on August 1, 2026. Upon their implementation, the *Measures for the Record-Filing Administration of Medical Representatives (Trial)* shall be repealed simultaneously.



## Policy Interpretation of the Measures for the Administration of Medical Representatives

### I. What are the background and objectives behind the revision of the Measures for the Administration of Medical Representatives?

In order to regulate pharmaceutical academic promotion activities and foster the sound and orderly development of the pharmaceutical industry, the National Medical Products Administration (“NMPA”) promulgated the Measures for the Record-Filing Administration of Medical Representatives (Trial) in September 2020, establishing a record-filing system for medical representatives, which came into effect in December 2020. To date, more than 2,000 Marketing Authorization Holders (“MAHs”) have completed registration on the medical representative filing platform, with approximately 116,000 medical representatives recorded, thereby achieving, in principle, unified information management of medical representatives nationwide.

However, a small number of medical representatives have exceeded the scope of legitimate academic exchange activities by engaging in pharmaceutical sales promotion and even participating in bribery, seriously disrupting fair market competition, undermining the healthy development of the pharmaceutical industry, and contributing to improper practices and unhealthy trends within the healthcare sector.

To further strengthen the administration of medical representatives, rectify and purify industry order and professional conduct, and improve the regulatory framework governing personnel management, inter-agency coordination, and penalties for violations, the NMPA, together with the Ministry of Public Security, the National Health Commission, the State Administration for Market Regulation, the National Healthcare Security Administration, the National Administration of Traditional Chinese Medicine, and the National Disease Control and Prevention Administration, revised the Measures for the Record-Filing Administration of Medical Representatives (Trial).

The revision aims to reinforce the binding force of the regulatory framework, comprehensively consolidate the primary responsibilities of enterprises, clarify the respective duties of regulatory authorities, strengthen coordination and enforcement mechanisms among relevant departments, and ultimately achieve the objectives of education, deterrence, standardization, and industry enhancement.

### II. What are the principal amendments introduced in the *Measures for the Administration of Medical Representatives*?

The revised *Measures for the Administration of Medical Representatives* consist of six chapters and thirty-five articles, namely: General Provisions, Administration of Marketing Authorization



Holder, Record-Filing Administration of Medical Representatives, Administration of Academic Promotion Activities Conducted by Medical Representatives, Supervision and Administration, and Supplementary Provisions.

The revised Measures primarily clarify: the responsibilities of Marketing Authorization Holders (“MAHs”) with respect to the admission, filing, and conduct management of medical representatives; the administration by medical and healthcare institutions of academic promotion activities conducted by medical representatives; and the respective regulatory responsibilities of the relevant authorities.

### 1. Clarifying the Professional Role of Medical Representatives

Medical representatives are defined as professionals who engage in pharmaceutical academic promotion activities on behalf of MAHs. The *Measures for the Administration of Medical Representatives* regulate key aspects including qualification requirements, record-filing, academic promotion activities, and disqualification mechanisms.

At the admission stage, medical representatives are required to possess at least a junior college diploma in medicine, pharmacy, or a related discipline, and to have relevant clinical and pharmaceutical knowledge.

At the filing stage, medical representatives must specify the regions for which they are responsible and submit compliance undertakings.

With respect to academic promotion activities, the Measures expressly set forth nine categories of prohibited conduct for medical representatives, with a view to strictly preventing commercial bribery.

Regarding disqualification, MAHs are prohibited from employing or authorizing medical representatives involved in commercial bribery and are required to pursue liability against the relevant individuals and professional organizations in accordance with contractual arrangements.

### 2. Defining the Responsibilities of MAHs and Medical and Healthcare Institutions

The *Measures for the Administration of Medical Representatives* strengthen full-process management requirements for medical representatives by adding dedicated chapters on “Administration of Marketing Authorization Holders” and “Administration of Academic Promotion Activities Conducted by Medical Representatives.” These chapters further reinforce management responsibilities from the perspectives of both MAHs and medical and healthcare institutions.

For MAHs, in light of their responsibility for the full lifecycle quality and safety management of pharmaceuticals, the Measures expressly provide that MAHs bear primary responsibility for the conduct of medical representatives. MAHs are responsible for the recruitment, authorization, filing, and management of their medical representatives, including circumstances in which academic promotion activities are entrusted to professional organizations.



For medical and healthcare institutions, the Measures require them to oversee and manage academic promotion activities conducted within their institutions by medical representatives. Such institutions are further required to establish internal management systems governing these activities so as to regulate and restrain the conduct of both institutional personnel and medical representatives.

In addition, the Measures set forth a list of twenty-two prohibited acts applicable to MAHs, entrusted professional organizations, medical representatives, and personnel of medical and healthcare institutions.

### 3. Strengthening Interdepartmental Coordination and Cooperation

To further enhance the effectiveness, operability, and enforceability of medical representative regulation, the Measures clearly define the respective responsibilities of the National Medical Products Administration, the National Health Commission, the National Administration of Traditional Chinese Medicine, the National Disease Control and Prevention Administration, the Ministry of Public Security, the State Administration for Market Regulation, and the National Healthcare Security Administration, thereby eliminating regulatory blind spots.

The Measures also introduce requirements relating to information sharing, transfer of investigative leads, case notification, and coordination between administrative enforcement and criminal justice authorities. They emphasize that, in the course of routine administration, inspections, complaint handling, or whistleblower investigations, any matter involving the responsibilities of another authority shall be promptly communicated to the relevant department.


Furthermore, the Measures require the lawful public disclosure of administrative penalties imposed on violating MAHs, entrusted professional organizations, medical representatives, medical and healthcare institutions, and their personnel, thereby promoting public oversight.

### 4. Establishing Joint Disciplinary Measures for Violations by Medical Representatives

Based on the respective responsibilities of different authorities, the *Measures for the Administration of Medical Representatives* integrate regulatory measures across departments to establish a coordinated disciplinary framework. Through internal management by MAHs and coordinated interdepartmental enforcement, sanctions may include public disclosure of unlawful conduct, increased inspection frequency, restrictions on participation in pharmaceutical procurement activities, and limitations on the execution of designated medical insurance service agreements.

Relevant authorities may also adopt risk-control measures within their respective jurisdictions, such as restricting the timing of academic promotion activities conducted by medical representatives in medical institutions, issuing procurement and tendering credit risk warnings, and incorporating records of unlawful conduct into the National Enterprise Credit Information Publicity System. These measures collectively provide multidimensional regulation of medical representatives.





At the same time, the Measures encourage industry associations and similar organizations to actively perform supervisory and self-regulatory functions, thereby fostering a governance framework combining government regulation, industry self-discipline, and broad social participation.

### **III. What Conduct Is Prohibited for MAHs, Medical Representatives, Medical and Healthcare Institutions, and Their Personnel in Pharmaceutical Academic Promotion Activities?**

Article 11 of the *Measures for the Administration of Medical Representatives* provides that a Marketing Authorization Holder (“MAH”) shall not engage in any of the following conduct: employing or authorizing medical representatives who fail to meet the prescribed qualifications or who have records of commercial bribery; instructing or tolerating medical representatives to engage in unlawful activities; assigning pharmaceutical sales targets to medical representatives or requiring them to engage in sales-related activities such as collecting payments or handling sales and purchase invoices; or any other conduct prohibited by laws or administrative regulations.

Article 12 further provides that professional organizations entrusted by MAHs shall not engage in any of the following conduct: employing medical representatives who fail to meet the prescribed qualifications or who have records of commercial bribery; instructing or tolerating medical representatives to commit illegal or criminal acts such as commercial bribery or fraud; instructing or tolerating medical representatives to conduct pharmaceutical academic promotion activities in violation of regulations; or any other conduct prohibited by laws or administrative regulations.

Article 24 of the *Measures for the Administration of Medical Representatives* provides that medical representatives shall conduct pharmaceutical academic promotion activities only within the scope of pharmaceutical categories, therapeutic areas, and geographical regions authorized by the MAH, and shall not engage in any of the following conduct: conducting pharmaceutical academic promotion activities without record-filing or registration; conducting pharmaceutical academic promotion activities without the consent of the relevant medical or healthcare institution; undertaking pharmaceutical sales tasks or engaging in sales-related activities such as collecting payments or handling sales and purchase invoices; participating in, or instructing personnel of medical and healthcare institutions to participate in, the compilation of statistics concerning the quantity of prescriptions issued by individual physicians; providing donations, funding, or sponsorships to medical and healthcare institutions subject to conditions linked to pharmaceutical sales volume or quantity, providing benefits in disguised form under the name of donations, funding, or sponsorships, or offering gifts, cash, prepaid cards or vouchers, securities, equity interests, or other financial products or valuables; providing rebates, donations, funding, sponsorships, gifts, cash, prepaid cards or vouchers, securities, equity interests, or other financial products or valuables, in any name or form, to personnel of medical and healthcare institutions, their spouses, children, children-in-law, or other relatives or persons having special relationships with them; misleading physicians in the use of pharmaceuticals,



exaggerating or misrepresenting therapeutic efficacy, concealing known adverse drug reactions or adverse reaction information reported by physicians, or otherwise interfering with or influencing the rational clinical use of pharmaceuticals; illegally collecting, using, or disseminating patient information or internal information of medical and healthcare institutions; or conducting academic promotion activities for pharmaceuticals beyond the scope authorized by the MAH.

Article 25 of the *Measures for the Administration of Medical Representatives* provides that medical and healthcare institutions and their personnel shall not engage in any of the following conduct: conducting pharmaceutical academic promotion activities with medical representatives who have not completed record-filing or registration; compiling statistics on pharmaceutical usage in violation of regulations issued by health authorities, traditional Chinese medicine authorities, disease prevention and control authorities, or the relevant medical and healthcare institution; accepting donations, funding, sponsorships, disguised benefits, gifts, cash, prepaid cards or vouchers, securities, equity interests, or other financial products or valuables that are linked to conditions concerning pharmaceutical sales amount or quantity; personnel of medical and healthcare institutions, as well as their spouses, children, children-in-law, relatives, or other persons having special relationships with them, accepting rebates, donations, funding, sponsorships, gifts, cash, prepaid cards or vouchers, securities, equity interests, or other financial products or valuables from medical representatives in any name or form, or participating in banquets, tourism, fitness, entertainment, or similar activities arranged or paid for by medical representatives; or any other conduct prohibited by laws or administrative regulations.


#### **IV. Once the *Measures for the Administration of Medical Representatives* Take Effect, Do Previously Registered Medical Representatives Need to Re-register?**

Pursuant to the principle of “existing arrangements for existing personnel, new arrangements for new personnel,” medical representative filing information that has already been confirmed on the medical representative filing platform prior to the formal implementation of the *Measures for the Administration of Medical Representatives* shall remain valid.

Following implementation of the Measures, MAHs are required to supplement and improve the filing information of previously registered medical representatives, and must file records for newly employed or newly authorized medical representatives in accordance with the revised requirements. All filed medical representatives are required to comply with the relevant regulations governing pharmaceutical academic promotion activities.

#### **V. What Are the Channels Through Which the Public May Inquire About Medical Representative Filing Information and Records of Non-Compliance?**





The National Medical Products Administration has established a Medical Representative Filing Platform. Beginning August 1, 2026, the public may access the “Public Inquiry” section on the platform homepage and search for confirmed and valid filing information of medical representatives by entering either: the medical representative filing number; or the name of the MAH together with the name of the medical representative.

The platform is available at: [Medical Representative Filing Platform](#)

Under the “Public Disclosure of Illegal and Non-Compliant Conduct” section on the homepage: for filed medical representatives, users may search for records of violations by entering the filing number, the MAH plus the representative’s name, or the representative’s identification number; and for unfiled medical representatives, users may search for records of violations by entering the representative’s identification number.

