



EXTRAORDINARY
OFFICIAL GAZETTE
THE BAHAMAS
PUBLISHED BY AUTHORITY

NASSAU

16th July, 2014

MEDICAL ACT, 2014

Arrangement of Sections

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No. 29 of 2014

MEDICAL ACT, 2014

AN ACT TO REVISE THE REGULATION OF MEDICAL PRACTICE
IN THE BAHAMAS; TO PROVIDE FOR THE CONTINUANCE OF THE
BAHAMAS MEDICAL COUNCIL; AND THE REGISTRATION AND
LICENSING OF MEDICAL PRACTITIONERS AND FOR
CONNECTED PURPOSES

[Date of Assent - 16th July, 2014]

Enacted by the Parliament of The Bahamas

PART I - PRELIMINARY

1. Short title and commencement.

- (1) This Act may be cited as the Medical Act, 2014.
- (2) This Act shall come into force on such date as the Minister may appoint by Notice, published in the *Gazette*.

2. Interpretation.

- (1) In this Act —
 - “**Association**” means the Medical Association of The Bahamas;
 - “**certificate of registration**” means a certificate of registration referred to under section 28;
 - “**Chairman**” means the Chairman of the Council;
 - “**Council**” means The Bahamas Medical Council referred to under section 4;
 - “**licence**” means a licence granted by the Council under section 29;
 - “**medical practitioner**” means a person who is registered to practice medicine or surgery under this Act and who possesses the qualifications under section 16;

"Minister" means the Minister responsible for Health;

"register" means the General Medical Register;

"Registrar" means the Registrar of the Council appointed under section 8;

"specialist" means a medical practitioner who has special training, experience and qualifications approved by the Council in the areas determined by the Council;

"specialist register" means a register of specialists;

"Standards of Professional Conduct" means The Bahamas Medical Council Standards of Professional Conduct in the Practice of Medicine.

- (2) Any reference to a "legally qualified medical practitioner", a "registered medical practitioner" or any expression importing a person recognized by law as a medical practitioner, in any enactment prior to, or after the commencement of this Act, shall be construed to mean a "fully licensed medical practitioner" or a "medical practitioner" under this Act.

3. Practising medicine.

- (1) Without restricting the generality of the definition of the practice of medicine, a person shall be deemed to be practising medicine within the meaning of this Act who —
- (a) by advertisement, sign, or statement of any kind, written or oral, alleges or implies or states that he is, or holds himself out as being, qualified, able, or willing, to diagnose, prescribe for, prevent, or treat, any human disease, ailment, deformity, defect, or injury, or to perform any operation or surgery to remedy any human disease, ailment, deformity, defect, or injury, or to examine or advise upon the physical or mental condition of any person;
 - (b) diagnoses, or offers to diagnose, or attempts by any means whatsoever to diagnose, any human disease, ailment, deformity, defect, or injury, or who examines or advises upon, or offers to examine or advise upon, the physical or mental condition of any person;
 - (c) prescribes or administers any drugs, serum, medicine, or any substance or remedy, whether for the cure, treatment, or prevention, of any human disease, ailment, deformity, defect, or injury; or
 - (d) prescribes or administers any treatment, or performs any operation or manipulation, or applies any apparatus or appliance, for the cure, treatment, or prevention, of any human disease, ailment, deformity, defect, or injury.

- (2) The practice of medicine referred to under subsection (1) shall not apply to —
 - (a) the practice of dentistry or pharmacy, or to the vendors of dental or surgical instruments, apparatus, or appliances;
 - (b) a podiatrist;
 - (c) a chiropractor;
 - (d) a midwife;
 - (e) an optician;
 - (f) an optometrist;
 - (g) a physiotherapist; or
 - (h) a psychologist.
- (3) The Minister may, by Order published in the *Gazette*, limit or extend the categories of professionals mentioned under subsection (2).

PART II – CONTINUANCE OF THE BAHAMAS MEDICAL COUNCIL

4. Continuance of the Council.

- (1) The body known and existing as The Bahamas Medical Council immediately before the coming into operation of this Act, is hereby continued as a body corporate by that name with perpetual succession and a common seal, with power to acquire, hold and dispose of land and other property of whatever kind, and to sue and be sued.
- (2) Notwithstanding subsection (1), the Council may not dispose of any land without the prior approval of the House of Assembly signified by resolution thereof.
- (3) The First Schedule shall have effect with respect to the constitution and procedure of the Council.

5. Common seal.

- (1) The common seal of the Council shall be kept in the custody of the Registrar or the Chairman, and shall not be used except as authorised by the Council.
- (2) The common seal of the Council shall be authenticated by the signatures of the Chairman or any other member of the Council authorised by the Council in that behalf, and of the Registrar.
- (3) The common seal of the Council when affixed to any document and authenticated under this section shall be judicially and officially noticed,

and, until the contrary is proved, any necessary order or authorisation of the Council shall be presumed to have been given.

6. Functions of the Council.

The functions of the Council are to —

- (a) register and licence persons who satisfy the requirements under this Act;
- (b) regulate the standards of medical practice;
- (c) establish and maintain a system of ongoing assessment of —
 - (i) the level and adequacy of training of medical practitioners to ensure conformity with established national and international standards;
 - (ii) the ability and competency of a medical practitioner with respect to the proper provision of medical services;
- (d) ensure that the Standards of Professional Conduct are adhered to by medical practitioners;
- (e) issue certificates of good standing to medical practitioners on written application and payment of the fees specified in the Seventh Schedule;
- (f) determine continuing medical education credits and requirements;
- (g) investigate the professional conduct or the capability of medical practitioners or specialists to practice medicine;
- (h) prescribe codes for the guidance of medical practitioners;
- (i) prescribe standards relating to the practice of medicine;
- (j) initiate, promote, support or recommend participation in programmes that the Council considers will improve the ability of medical practitioners to practice medicine;
- (k) advise the Minister on any matter relating to medical practice; and
- (l) carry out any other function conferred on the Council under this Act.

7. Duties and powers of the Council.

- (1) The Council shall, after consultation with the Minister, establish and carry out the policy of the Council.
- (2) The Council shall, after consultation with the Association, develop —
 - (a) codes for the guidance of medical practitioners or specialists; and
 - (b) standards relating to the practice of medicine.
- (3) The Council shall ensure that medical practitioners and specialists have access to the Standards of Professional Conduct.

- (4) The Council shall have such powers that are necessary to perform its functions under this Act.

PART III – ADMINISTRATIVE PROVISIONS

8. Appointment of Registrar and other staff.

- (1) The Minister may appoint a Registrar who shall be responsible for the management of the Council.
- (2) Where the Registrar is absent, or for any reason unable to perform the functions of his office, the Minister may appoint a person to act as Registrar.
- (3) The Council may appoint such other staff at such remuneration and on such terms and conditions; and engage under a contract of service such professional, technical and other assistance, as the Council considers necessary to carry out its functions.

9. Duties of the Registrar.

The duties of the Registrar are to —

- (a) issue certificates of registration;
- (b) amend the register or specialist register to reflect changes in addresses, qualifications or other particulars relating to registered persons;
- (c) remove from the register or specialist register the name of any registered person who —
 - (i) is deceased, or
 - (ii) is no longer qualified to practice medicine or surgery in The Bahamas;
- (d) issue licenses;
- (e) keep a record of persons licensed to practice medicine or surgery in The Bahamas;
- (f) carry out any other duty conferred on the Registrar under this Act.

10. General Medical Register.

- (1) The Council shall cause the Registrar to keep a register, to be known as the General Medical Register.
- (2) The register shall contain the following particulars relating to a medical practitioner —
 - (a) his full name;

- (b) his date of birth and national registration number;
 - (c) his personal address;
 - (d) his business address;
 - (e) the date of his registration;
 - (f) a description and the date of the qualifications which he possesses on the date of registration; and
 - (g) such other particulars as the Council may determine.
- (3) The register referred to under subsection (2) shall be available for inspection by the public during business hours.
- (4) A medical practitioner registered under this Act shall inform the Registrar of any change in that medical practitioner's address or in any other particulars relating to him.
- (5) The Council shall cause to be published in the *Gazette* —
- (a) not later than the 30th day of April in each year, an alphabetical list of persons who on the 31st day of January in that year have been registered and licensed;
 - (b) not later than the 31st day of July in any year, the name of any person who has been registered and licensed as a medical practitioner after that date.
- (6) A copy of the *Gazette* containing the list published or the name of any person published pursuant to subsection (5), shall be *prima facie* evidence in any court, of the registration and qualifications or non registration of any person mentioned in the *Gazette*.

PART IV - FINANCIAL PROVISIONS

11. Funds and resources.

The funds and resources of the Council shall consist of —

- (a) such sums as may be provided by Parliament;
- (b) all fees and charges payable to the Council;
- (c) all other sums or property which may in any manner become payable to or vested in the Council in respect of any matter incidental to its functions.

12. Bank account.

- (1) The Council shall open and maintain a bank account.
- (2) The Council shall assign the Chairman, the Registrar and any other member of the Council authorised by the Council in that behalf, as

signatories on the bank account and any two of the three signatories assigned may sign off on any withdrawal from the bank account.

- (3) The Council shall ensure that all sums received by, or on behalf of, the Council are deposited to the bank account, as soon as practicable, upon receipt.

13. Accounts and audit.

- (1) The Council shall keep proper accounts and records in relation to the accounts, and shall prepare in respect of each financial year, a statement of accounts.
- (2) The accounts of the Council for each financial year shall be audited annually by auditors appointed by the Council with the approval of the Minister from among members of The Bahamas Institute of Chartered Accountants.
- (3) Three months after the end of each financial year, the Council shall submit a copy of the audited accounts to the Minister, together with a copy of the report made by the auditor.
- (4) The Minister shall cause a copy of the annual financial statement of accounts together with the auditor's report to be laid before both chambers of Parliament.

14. Budget estimates and annual report.

- (1) The Council shall prepare for each financial year an annual budget of revenue and expenditure.
- (2) The annual budget under subsection (1), shall be submitted to the Minister two months before the beginning of the financial year.
- (3) Three months after the end of each financial year, the Council shall submit to the Minister a report of its activities, accompanied by a statement of its expenditure and revenue.
- (4) The Minister shall cause a copy of the report of the Council to be laid before both chambers of Parliament.

PART V - REGISTRATION AND LICENSING

15. Registration.

- (1) No person shall practice medicine or surgery unless he is registered by the Council under this Act.
- (2) A person who desires to be registered by the Council to practice medicine or surgery shall apply to the Council.

- (3) An application for registration referred to under subsection (2) shall be —
 - (a) made to the Council;
 - (b) in Form A in the Second Schedule; and
 - (c) accompanied by the application fee specified in the Seventh Schedule;
- (4) An applicant shall submit together with the applicant's application referred to under subsection (2) —
 - (a) evidence of his qualifications;
 - (b) proof of his identity;
 - (c) proof that he is of good character;
 - (d) a certificate of good standing from the applicant's previous registering body, if applicable; and
 - (e) such other particulars as determined by the Council.
- (5) Where the Council receives an application referred to under subsection (2) and is satisfied that an applicant is qualified pursuant to section 16 to be registered as a medical practitioner, the Council, upon the applicant making payment of the fee specified in the Seventh Schedule, may —
 - (a) register the applicant in the relevant section of the register, subject to such restrictions and conditions, if any, as the Council considers necessary; and
 - (b) grant a certificate of registration to the applicant as set out in Form B in the Second Schedule.
- (6) An application made under subsection (2) by a person who is not either —
 - (a) a public officer; or
 - (b) a citizen of The Bahamas,shall not be granted without the concurrence of the Minister responsible for Immigration.

16. Qualifications.

A person is qualified to be registered as a medical practitioner where that person —

- (a) holds a medical degree, certificate or other form of qualification granted by a University, College or other institute of learning recognized by the Council as a body empowered to confer authority to practice medicine by the law of the country or place where it is granted, and which in the opinion of the Council is evidence of satisfactory medical training; and
- (b) satisfies the Council that —

- (i) he has successfully completed the required period of internship with a hospital or medical institution approved by the Council;
- (ii) he has completed two years of supervised rotational medical practice or has special training, experience and qualifications, approved by the Council;
- (iii) he can read, write, speak and understand the English Language; and
- (iv) he is a fit and proper person to practice medicine in The Bahamas.

17. Examination of applicant.

- (1) The Council may require the applicant to sit an examination in such subject matters as the Council considers necessary, where, in relation to an application for registration as a medical practitioner —
 - (a) the Council is satisfied with the applicant's qualifications under section 16(b), but is not satisfied that the applicant's qualifications under section 16(a) is evidence of satisfactory medical training; or
 - (b) the Council is not satisfied with the applicant's qualifications under section 16.
- (2) For the purposes of subsection (1), the Council shall either —
 - (a) appoint a body to be called the Board of Examiners ("the Board") consisting of three medical practitioners; or
 - (b) designate the Caribbean Association of Medical Councils as the Board or an equivalent national, regional or international Board, to set and conduct examinations in such subject matters as the Council may determine.
- (3) The Board shall fix a time and place for holding an examination and shall notify the applicant of that time and place.
- (4) The applicant, upon payment of the fee specified in the Seventh Schedule, shall be permitted to take the examination referred to under subsection (1).
- (5) The Board shall, as soon as practicable after the examination, submit a report of the results of the examination to the Council.

18. Registration after Board's examination.

- (1) Where the report of the Board indicates that an applicant is sufficiently informed and skilled in the subject matters in which the applicant was examined, the applicant may be regarded as having satisfied the Council that he is qualified to be registered as a medical practitioner.

- (2) Where the Board reports to the Council that an applicant was unsuccessful in the examination, the Council shall not permit the Board to conduct any further examination of the applicant until —
 - (a) the expiration of six months from the date of the examination in which the applicant was unsuccessful; and
 - (b) the applicant has complied with such conditions as the Council may determine.
- (3) Notwithstanding subsection (2)(a), where the applicant has complied with the conditions referred to under subsection (2)(b), the Council, upon the recommendation of the Board, may permit the Board to conduct an examination of the applicant prior to the expiration of the time specified in subsection (2)(a).
- (4) Where the Board conducts an examination pursuant to subsection (3), section 17(3), (4) and (5) shall apply, *mutatis mutandis*, in relation to the examination.

19. Refusal to grant registration and termination of registration.

- (1) The Council may refuse to grant registration to an applicant on the grounds that —
 - (a) the applicant does not qualify for registration in accordance with sections 15 and 16;
 - (b) the conduct of the applicant is such that it would not be in the public interest to allow the applicant to practice as a medical practitioner;
 - (c) the applicant has a physical or mental condition, which significantly impairs his ability to practice as a medical practitioner; or
 - (d) the applicant was previously registered as a medical practitioner in another country and the registration was cancelled on grounds that would justify cancellation in The Bahamas.
- (2) The Council may terminate the registration of a medical practitioner where the Council is satisfied that the medical practitioner does not qualify for registration or is disqualified from registration by virtue of any of the grounds referred to under subsection (1) (b), (c) or (d).
- (3) Subject to subsections (2) and (4), where the Council determines that an applicant does not qualify for registration in accordance with sections 15 and 16, the Council shall notify the applicant and state the reasons for the Council's decision, in writing, within sixty days after receipt of the application and the accompanying documents referred to under section 15.
- (4) Where the Council requires further information from an applicant in order to make a determination with respect to registration, the Council shall,

immediately, in writing, request the information required to make the determination.

- (5) The Council shall make a determination relating to the applicant's qualification for registration and notify the applicant, in writing, of that determination —
 - (a) within sixty days of the submission to the Council by the applicant of the requested information; or
 - (b) immediately after the expiration of sixty days from the date when the request was made, in the case where the Council has not received the requested information.

20. Application for reconsideration.

- (1) Where the Council refuses to register an applicant, the applicant may, within three months of the receipt of the notice of refusal, apply to the Council in writing for a reconsideration of its decision.
- (2) The Council may allow or deny the application for reconsideration and, where the Council allows the application for reconsideration, the Council may —
 - (a) refer the matter for review by a panel appointed by the Minister after consultation with the Council;
 - (b) refuse registration; or
 - (c) register the applicant as a medical practitioner.

21. Appeal against refusal to register and termination of registration.

- (1) Where —
 - (a) an applicant is aggrieved by the refusal of the Council to register the applicant as a medical practitioner; or
 - (b) the Council has terminated the registration of a medical practitioner in accordance with section 19(2),the applicant or medical practitioner may, within three months of the date of the notice of refusal or termination, appeal to the Supreme Court against the decision of the Council.
- (2) The Judge, at the hearing of the appeal, may —
 - (a) dismiss the appeal;
 - (b) on the basis of a finding of procedural irregularity, direct the Council to reconsider the application; or
 - (c) allow the appeal and direct the Council to register the applicant.

22. Temporary, provisional and special registrations.

- (1) The Council or the Registrar may register, temporarily, for a period not exceeding six months, on payment of the fee specified in the Seventh Schedule, a person who —
 - (a) applies to the Council for temporary registration; and
 - (b) satisfies the Council that he is residing temporarily in The Bahamas and would otherwise qualify for registration under this Act.
- (2) The Council or the Registrar may register, provisionally, a person who —
 - (a) has complied with section 15;
 - (b) has satisfied the qualification requirements referred to under section 16; and
 - (c) has been offered employment for a period of internship in a hospital in The Bahamas.
- (3) The Council or the Registrar may specially register a person who satisfies the Council that he is qualified to practice medicine under this Act, and in any country or place and that —
 - (a) he is doing special work in the field of public health or research and is sponsored in respect of such work by the University of the West Indies, the World Health Organisation, the Pan-American Health Organisation, or such other inter-governmental organisation or body approved by the Minister, after consultation with the Council;
 - (b) he is a medical practitioner, who is employed, on a full-time basis by an international organisation that has an office in The Bahamas, to render medical services exclusively and without a fee to members of that organisation;
 - (c) he is employed on a full-time basis in the public service; or
 - (d) he is employed on a full-time basis with the Public Hospitals Authority under the supervision of a consultant or specialist.
- (4) The Council or the Registrar may specially register a person who is required to give medical aid in cases of emergency, for a period not exceeding seven days, where the Chief Medical Officer is satisfied that, that person possesses the requisite qualifications to be registered under this Act.
- (5) Where the Council is satisfied that a person —
 - (a) is qualified to practice medicine; and
 - (b) meets the prescribed core standards,the Council may register that person for special purposes including telemedicine, alternative medicine, stem cell therapy and research and

advanced medical therapy and research and grant certificates of registration as set out in Forms D, E and F in the Second Schedule.

- (6) Subject to subsection (7), a person who is registered under subsections (3) and (5) shall be registered for a period not exceeding three years.
- (7) Where the Council is satisfied that the registration of a person referred to in this section should be renewed, the Council may renew the registration for such further period as may be determined by the Council.
- (8) A person who is registered under subsection 3(a) or (b) shall not pay the fee in accordance with section 15.

23. Duration of registration.

The registration of a medical practitioner under section 15 shall continue in force unless the registration has been suspended or terminated under this Act.

24. Renewal of registration suspended or terminated.

- (1) Except where the registration of a medical practitioner was suspended or terminated on the basis of non renewal of licence for a period exceeding two years, the registration of a medical practitioner that was suspended or terminated may be renewed by the Council upon payment of the fee specified in the Seventh Schedule.
- (2) Notwithstanding subsection (1), the Council shall require as a condition precedent of the renewal of registration under this section, evidence that a registered medical practitioner —
 - (a) has participated in post-graduate training, or in symposia or other approved activities that provide information or training relating to new developments in the medical profession;
 - (b) has been exposed to new techniques or procedures in the practice of medicine;
 - (c) has completed the prescribed contact hours of continuing medical education for relicensure; or
 - (d) has completed a medical practitioners' re-entry program as approved by the Council.

25. Removal of name from register.

- (1) Where the name of a person is removed from the register, the Council shall —
 - (a) publish notice of such removal in the *Gazette*; and
 - (b) in writing, require the person to return to the Council his certificate of registration and licence within a reasonable period of time as determined by the Council.

- (2) Where the name of a medical practitioner has been removed from the register, the medical practitioner shall be required to comply with and satisfy the requirements under this Act in order that his registration may be restored.

26. Specialties and registration of specialists.

- (1) For the purposes of this Act, the Council recognizes —
- (a) as specialties, the areas of medical practice as specified in the Third Schedule; and
 - (b) in relation to each specialty —
 - (i) the institution or body whose certification shall be accepted as proof of qualification; and
 - (ii) the minimum periods of relevant post-graduate training and practice required as specified in the Third Schedule.
- (2) A medical practitioner shall be eligible to be registered as a specialist in the specialist register where the medical practitioner satisfies the Council that he has completed the required tuition and training in a specialty, and has obtained the relevant qualification from an institution or body recognized by the Council.
- (3) An application for registration as a specialist shall be made to the Council in Form A in the Second Schedule.
- (4) Where the Council receives an application referred to under subsection (3), and is satisfied that an applicant is qualified to be registered as a specialist, the Council shall, upon the applicant making payment of the fee specified in the Seventh Schedule, grant to the applicant a certificate of registration as set out in Form C in the Second Schedule.
- (5) The Council shall register, in a register to be called the specialist register, a medical practitioner who possesses the qualification relating to a specialty specified in the Third Schedule.
- (6) The specialist register shall indicate the specialty that each specialist's name is registered.
- (7) The Council shall require a medical practitioner who desires to be registered as a specialist, pursuant to subsection (5) and section 27(1), to submit to a review by the Assessment Committee.
- (8) Where a medical practitioner relies on qualification that is not granted by an institution set out in the Third Schedule, the Council may confirm that the qualification sought to be relied on is of equivalent standard as the qualification set out in the Third Schedule.
- (9) A medical practitioner who is not registered as a specialist and who —
- (a) engages in the practice of medicine as a specialist; or

- (b) represents that he is entitled to engage in the practice of medicine as a specialist,
shall be guilty of professional misconduct.

27. Registration of long standing medical practitioners as specialists.

Notwithstanding section 26(2) and (4), where on a date not later than the 31st day of December, 2014, a medical practitioner who has —

- (a) not completed formal training in a specialty and has not obtained the relevant certification in the specialty; or
- (b) not been registered as a specialist at the commencement of this Act,
but satisfies the Council that he has —
 - (i) engaged in practice in a specialty recognized by the Council for a continuous period of at least twenty-five years; and
 - (ii) the requisite experience, skill and competence in the specialty,

the Council may, on a case by case basis, regard the medical practitioner as eligible for registration as a specialist and the medical practitioner, in the appropriate case, and upon payment of the fee specified in the Seventh Schedule, shall be registered in the specialist register.

28. Certificate of registration.

- (1) A certificate of registration issued to a medical practitioner by the Registrar shall be valid for the period specified in the certificate.
- (2) Every holder of a certificate of registration shall display it in a prominent position in his place of business.
- (3) Where a certificate of registration has been lost, destroyed or mutilated it may be replaced by the Council upon the application of the holder and on the payment of the fee specified in the Seventh Schedule.

29. Licence.

- (1) A person registered under section 15 may, upon application and payment of the fee specified in the Seventh Schedule, be granted by the Council —
 - (a) a licence as a fully licensed medical practitioner, where he is registered in the relevant section of the register subject to such restrictions or conditions, if any, as the Council may determine;
 - (b) in any other case, a licence of a kind appropriate to the extent to which, and the conditions, if any, subject to which, he is registered authorising him to practice medicine or surgery or both to the extent specified in the licence.
- (2) An application made under section (1), by a person who is not —

- (a) a public officer; or
- (b) a citizen of The Bahamas,

shall not be granted without the concurrence of the Minister responsible for Immigration.

- (3) A licence shall take effect on the date specified in the licence and shall be valid for the year in which it is issued and shall expire on the 31st day of December of that year unless such licence was cancelled.
- (4) A holder of a licence, granted under subsection (1) and issued by the Registrar, shall display the licence in a conspicuous place in that holder's place of business.
- (5) The Council shall grant a provisional licence to a person who is registered under section 22(2) and that person shall not engage in services for a fee.
- (6) Where a licence has been lost, destroyed or mutilated, it may be replaced by the Council by the issue of a copy thereof upon application, in writing, by the holder of the licence and on payment of the fees specified in the Seventh Schedule.
- (7) The Council shall cause to be published annually in the *Gazette* after the 31st day of January a list of all medical practitioners licensed under this Act.
- (8) A person who practices medicine or surgery without a valid licence commits an offence and is liable on summary conviction to a fine not exceeding ten thousand dollars.

30. Renewal of licence.

- (1) Every medical practitioner registered under section 15 shall, prior to the 31st day of December each year, apply in writing to the Council for a renewal of licence.
- (2) An application for a renewal of licence shall be made by the holder thereof, in writing, to the Council.
- (3) The Council may renew the licence of a medical practitioner, where the Council is satisfied that the medical practitioner continues to meet the requirements under this Act and —
 - (a) where the medical practitioner provides proof of completion of continuing medical education requirements as prescribed;
 - (b) in relevant cases, where the medical practitioner provides proof of a valid work permit; and
 - (c) upon payment of the fees specified in the Seventh Schedule.

31. Cancellation of licence.

A licence may be cancelled by the Council or Registrar, if —

- (a) the application made under section 29(1), contains any material misrepresentation;
- (b) any information given in the application made under section 29(1) was materially incorrect so as to create a false impression of the applicant and his qualifications;
- (c) the medical practitioner is guilty of professional misconduct; or
- (d) the medical practitioner is convicted of any other offence under this Act.

PART VI - COMMITTEES OF THE COUNCIL

32. Establishment and appointment of Committees.

- (1) The Council shall establish —
 - (a) the Assessment Committee;
 - (b) the Complaints Committee; and
 - (c) the Disciplinary Committee.
- (2) The Council may —
 - (a) appoint such committees, other than those referred to under subsection (1), composed of members of the Council and medical practitioners, not being members of the Council, for the proper carrying out of the functions of the Council, as it considers necessary; and
 - (b) delegate to a committee referred to under paragraph (a) any function, other than a disciplinary function, qualification assessment function or the investigation of a complaint.

33. Assessment Committee.

- (1) The Assessment Committee shall consist of three members —
 - (a) the Chairman of the Council;
 - (b) one member of the Council who is a medical practitioner appointed by the Chairman;
 - (c) a medical practitioner, who is not a member of the Council and who has been registered for at least ten years appointed by the Chairman.
- (2) Where the Chairman is absent from a meeting, the Assessment Committee shall elect one of its members present to act as Chairman for that meeting.

- (3) The Assessment Committee shall meet at such times as the Chairman considers necessary.
- (4) The Assessment Committee shall —
 - (a) examine applications for registration and advise the Council on the adequacy of the qualifications of an applicant for registration and, in the relevant case, the additional qualifications that are required for registration;
 - (b) be responsible for the implementation and publication of the system of assessment;
 - (c) perform such other duties as are assigned to the Assessment Committee by the Council.

34. Complaints Committee.

- (1) The Complaints Committee shall consist of three members of the Council, one of whom shall be the chairman of the Complaints Committee, appointed by the Council, annually.
- (2) Where a vacancy occurs in the Complaints Committee or where any member is unable to attend meetings of the Complaints Committee or to participate in an investigation, the Chairman of the Council may designate any other member of the Council to fill the vacancy or replace the absent member.
- (3) The replacement of a member of the Complaints Committee shall not invalidate or in any respect affect the validity of an investigation.
- (4) The Complaints Committee shall conduct —
 - (a) preliminary investigations into any matter concerning —
 - (i) the ability of a medical practitioner to discharge, competently, his professional responsibilities; or
 - (ii) the professional misconduct of a medical practitioner; and
 - (b) investigations into any other complaint relating to the conduct of a medical practitioner,that is referred to the Complaints Committee by the Council.
- (5) The Complaints Committee, upon the conclusion of an investigation shall report, in writing, its findings and decision and the reasons for its decision to the Council and —
 - (a) in the case of a preliminary investigation, may recommend that —
 - (i) no further investigation shall be carried out; or
 - (ii) the matter be referred, in whole or in part, to the Disciplinary Committee; and

- (b) in any case other than a preliminary investigation, may direct that —
 - (i) the matter be referred, in whole or in part, to the Disciplinary Committee; or
 - (ii) such other steps be taken as it considers necessary;
- (c) where it is determined that the matter be referred to the Disciplinary Committee, and the matter is to be undertaken by way of a formal hearing, the Council may engage the services of a counsel and attorney of at least ten years standing to assist the Complaints Committee in preparing the referral.
- (6) The Fourth Schedule shall have effect with respect to the proceedings before the Complaints Committee.

35. Disciplinary Committee.

- (1) The Disciplinary Committee shall consist of three medical practitioners appointed by the Council, who have been registered as medical practitioners for a continuous period of ten years.
- (2) The Disciplinary Committee shall —
 - (a) hear and determine allegations of professional misconduct or incompetence made in relation to a medical practitioner;
 - (b) hear and determine other matters referred to the Disciplinary Committee by the Council;
 - (c) perform such other duties, related to disciplinary matters, as are assigned to the Disciplinary Committee by the Council; and
 - (d) upon the conclusion of a hearing or an investigation, report in writing, its findings and decision and the reasons for its decision to the Council.
- (3) The Disciplinary Committee shall conduct further investigations relating to —
 - (a) complaints referred to the Disciplinary Committee by the Council following a preliminary investigation by the Complaints Committee; and
 - (b) any allegation made that a medical practitioner is guilty of professional misconduct referred to under section 44 or 51.
- (4) Where the investigation by the Disciplinary Committee shall be undertaken by way of a formal hearing, the Council shall engage the services of a counsel and attorney of at least ten years standing to assist the Disciplinary Committee, where such assistance is necessary.
- (5) The Fifth Schedule shall have effect with respect to the proceedings before the Disciplinary Committee.

PART VII - PROFESSIONAL RESPONSIBILITY AND CONDUCT OF MEDICAL PRACTITIONERS AND SPECIALISTS

36. Professional responsibility of medical practitioners or specialists.

A medical practitioner or specialist shall —

- (a) provide such services as are medically necessary for the diagnosis and treatment of any physical or mental condition in human beings and where the diagnosis is cancer, report such diagnosis to the National Cancer Registry;
- (b) prescribe medication, prosthetic appliances and therapeutic devices as are necessary for such diagnosis and treatment;
- (c) where he is assisted by other persons in his practice, ensure that those persons are properly trained and certified as competent to render the required service;
- (d) in the discharge of his professional responsibilities, conduct himself in a manner that is in accordance with the Standards of Professional Conduct;
- (e) satisfy the National Ethics Committee, the National Stem Cell Ethics Committee and or any other national ethics committees, that he is qualified in his field of specialty; and
- (f) in the case of advanced medical therapies and non conventional treatments, satisfy the relevant national ethics committees that he is qualified in his field of specialty.

37. Prohibition of professional misconduct.

(1) A medical practitioner or specialist shall not —

- (a) do any act or thing that is contrary to the generally recognized duty and responsibility of a medical practitioner or specialist to his patient; or
- (b) engage in behaviour that is contrary to medical ethics.

(2) The behaviour referred to under subsection (1) includes —

- (a) the failure to do any act or thing with respect to a patient in accordance with generally recognized medical ethics;
- (b) improper conduct or association with a patient;
- (c) any form of advertising, canvassing or promotion, either directly or indirectly, for the purpose of obtaining patients or promoting his own professional advantage that is contrary to this Act or the regulations;

- (d) a wilful or reckless betrayal of a professional confidence;
 - (e) abandonment of a patient in danger without sufficient cause and without allowing the patient sufficient opportunity to retain the services of another medical practitioner or specialist;
 - (f) knowingly giving a certificate with respect to birth, death, state of health, vaccination or disinfection, or with respect to any matter relating to life, health or accidents, that the medical practitioner or specialist knows or ought to know is untrue, misleading or otherwise improper;
 - (g) the division, with any person who is not a partner or assistant, of any fees or profits resulting from consultations or other medical or surgical procedures without the patient's knowledge or consent;
 - (h) the abuse of intoxicating liquor or drugs;
 - (i) the impersonation of another medical practitioner or specialist;
 - (j) the association with unqualified or unregistered medical persons where such persons are enabled to practice medicine, dentistry or optometry;
 - (k) the holding out directly or indirectly by a medical practitioner to the public that he is a specialist or is specially qualified in any particular branch of medicine unless he has taken a special course in that branch of medicine or satisfied the requirements of section 27 and has been registered as a specialist in accordance with section 27;
 - (l) the commercialisation of a secret remedy;
 - (m) knowingly practising medicine or treating a patient, other than in a case of emergency, while suffering from a mental or physical condition or while under the influence of alcohol or drugs to such an extent as to constitute a danger to the public or a patient;
 - (n) the failure to provide to a patient or, in the appropriate circumstances, the next of kin of that patient or a person designated by the patient, a medical or surgical report within one month of a request being made for the report; and
 - (o) the doing of or failure to do any act or thing in connection with his professional practice which is in the opinion of the Council unprofessional or discreditable.
- (3) For the purposes of subsection (2)(d), any disclosure which is legally justifiable or required for the treatment of a patient shall not be deemed as a wilful or deliberate betrayal of a professional confidence.

38. Notice of establishment of medical practice.

- (1) A medical practitioner or specialist shall inform the Council, and may publish a notice in any local newspaper, of his intention to establish a medical practice.
- (2) The notice referred to under subsection (1) shall contain the following particulars in relation to the medical practitioner or specialist —
 - (a) full name;
 - (b) qualifications and area of practice of the medical practitioner or specialty, in the case of a specialist;
 - (c) office address;
 - (d) commencement date of medical practice;
 - (e) telephone number, where one is available; and
 - (f) such other information as the Council may determine in accordance with the provisions under this Act.

39. Restrictions on certain advertisement.

A medical practitioner or specialist shall not —

- (a) advertise the services to be provided by him or by any group or organisation with which that medical practitioner or specialist is directly or indirectly associated;
- (b) make any representation, graphically or otherwise, or engage in or permit any act or behaviour, that may or is intended to attract business unfairly or that can reasonably be regarded as advertising or canvassing; or
- (c) allow persons working in his office to engage in unethical practices, that may or are intended to attract business unfairly or that can reasonably be regarded as advertising or canvassing.

40. Notice of change of address.

- (1) Where a medical practitioner or specialist plans to change the office address of his medical practice, the medical practitioner or specialist shall inform the Registrar of his intention to change the office address of his medical practice.
- (2) Where a medical practitioner or specialist has changed the office address of his medical practice he may post a sign outside the premises of the former office for a period of three months.

41. Permitted use of circulars.

A medical practitioner or specialist may use a circular to inform another medical practitioner or specialist and patients of —

- (a) his intention to go on leave and any relevant arrangements relating to the operation of his medical practice; and
- (b) the addition of any medical practitioner or specialist to his medical practice provided that the circular contains only the name and qualifications of that medical practitioner or specialist.

42. Restriction on use of professional standing.

A medical practitioner or specialist shall not permit his professional standing to be used for the purpose of advertising any particular product, service or organisation.

43. Permitted conduct relating to advertisement.

- (1) A medical practitioner or specialist may permit limited and dignified identification of him as a medical practitioner —
 - (a) in public notices where the announcement of his professional status is required or authorised by law or is reasonably necessary for a purpose other than the attraction of patients;
 - (b) in reports and announcements of a *bona fide* commercial, civic, professional, social or political organisation in which he serves as a director or officer;
 - (c) in or in connection with medical textbooks, articles or professional journals and other medical publications and in dignified and restrained advertisements thereof;
 - (d) in announcements of any public address, lecture or publication by him on medical topics, provided that such announcements do not emphasize his own professional competence and are not regarded as being concerned with the giving of advice by him to any particular person or group of persons.
- (2) A medical practitioner or specialist may speak in public or write for a publication on medical topics provided that he does not emphasize his own professional competence or make reference to the professional competence of another medical practitioner or specialist.

44. Compliance with regulations relating to advertisement.

- (1) An advertisement by a medical practitioner or specialist shall comply with the requirements under this Act and the regulations.
- (2) A medical practitioner or specialist whose advertisement does not comply with the requirements under this Act or the regulations is guilty of professional misconduct.

45. Capacity of aggrieved by advertisement to make complaint.

- (1) A person who alleges that he is aggrieved by an advertisement by a medical practitioner or specialist may, in writing, make a complaint to the Council.
- (2) Nothing in this section shall prevent the client, patient or other person who alleges that he is aggrieved by the advertisement of a medical practitioner or specialist, from availing himself of such remedies as are available in law.

**PART VIII – INVESTIGATIONS AND DETERMINATION OF
THE COUNCIL**

46. Complaint.

- (1) For the purpose of this Part, "complaint" means a complaint made to the Council alleging professional misconduct on the part of a medical practitioner or a specialist.
- (2) A complaint made to the Council shall —
 - (a) be in writing;
 - (b) be signed and dated by the person making the complaint; and
 - (c) have the person's name on the complaint.
- (3) The Registrar shall notify the person against whom the complaint is made, of the nature of the complaint and request that the person state in writing, within fourteen days or such longer period as the Council may determine, an explanation or a representation of the complaint.

47. Investigation by Council.

- (1) The Council shall investigate any matter concerning the practice of medicine or the conduct of a medical practitioner or specialist, where the Council determines that such an investigation is necessary in the public interest and in the interest of maintaining the standards and dignity of the profession.
- (2) The Council may conduct —
 - (a) a formal hearing into the ability of a medical practitioner to practice medicine or a specialist to practice in the area of medicine in respect of which he is registered as a specialist; or
 - (b) an informal or formal hearing into the professional conduct of a medical practitioner or specialist.
- (3) The Council may investigate —

- (a) any representation, allegation or complaint made by a medical practitioner or specialist relating to the conduct or competence of any other medical practitioner or specialist; or
- (b) any allegation or complaint made, in writing, by a person other than a medical practitioner or specialist, relating to the matter of professional misconduct referred to under section 37 or an advertisement referred to under section 44,

unless the Council has determined that the allegation is frivolous or vexatious.

- (4) The Council may investigate any allegation or complaint made by a person on any matter relating to the provision of medical services by an intern, a medical practitioner or a specialist.

48. Form and conduct of investigation.

- (1) An investigation by the Council may be in the form of—
 - (a) a preliminary investigation;
 - (b) a review;
 - (c) an informal hearing; or
 - (d) a formal hearing.
- (2) Subject to subsection (3), an investigation shall be conducted by the Complaints Committee, Disciplinary Committee or a Special Review Committee, as necessary.
- (3) Where the Council determines, in relation to an investigation, that special expertise is required, the Council may appoint a person or a panel that possesses the requisite skills or expertise to conduct the investigation.

49. Referral of investigation.

- (1) Where the Council determines that an investigation other than an assessment of qualification should be carried out in respect of the conduct, capability or competence of a medical practitioner or specialist, the Council shall refer the matter to —
 - (a) the Complaints Committee;
 - (b) the Special Review Committee; or
 - (c) a person or panel appointed pursuant to section 48(3).
- (2) The Council shall give reasonable notice of the referral, in writing, to the medical practitioner or specialist in respect of whom the investigation may be conducted.

- (3) A notice required to be given to a medical practitioner or specialist where a preliminary or other investigation shall be conducted relating to him shall —
- (a) be served personally, or by pre-paid registered post on the medical practitioner or specialist as soon as possible after the Council has decided to conduct the investigation;
 - (b) advise the medical practitioner or specialist of the nature of the matter to be investigated;
 - (c) advise the medical practitioner or specialist of his right to provide such information as is relevant to the matter;
 - (d) advise the medical practitioner or specialist of the procedures that may be taken in respect of the matter;
 - (e) advise the medical practitioner or specialist of the possibility of being asked to submit to a medical examination or other specified assessment; and
 - (f) where a medical practitioner or specialist has been asked to undergo a medical examination or assessment referred to under paragraph (e), invite the medical practitioner or specialist to indicate his willingness to submit to the examination or assessment.

50. Report relating to investigation.

The Committee, panel or person responsible for the conduct of an investigation under this Act shall submit to the Council, not later than twenty-eight days following the conclusion of the investigation, a report, in writing, that includes the findings of the Committee, panel or person, the decision and reasons therefor and the recommendations of the Committee, panel or person, relating to the matter.

51. Determination of Council.

- (1) Subject to subsection (2), upon the receipt of a report relating to an investigation referred to under section 50, the Council shall —
 - (a) immediately, make a determination relating to the matter, taking into account the report submitted; and
 - (b) take such action as it considers fair and appropriate in the circumstances.
- (2) The Council, where it considers it necessary, may invite the medical practitioner or specialist to appear before the Council or to provide, in writing, an explanation relating to the matter.
- (3) Where, in the case of a preliminary investigation, the Council accepts the recommendation of the Complaints Committee that a matter be referred to the Disciplinary Committee, the Council shall —

- (a) inform the medical practitioner or specialist, in writing, of the conclusion of the preliminary investigation; and
 - (b) cause to be served on the medical practitioner or specialist and the complainant in the matter, a copy of the decision and reasons for the decision.
- (4) The Council shall, in relation to any other investigation, within twenty-eight days of—
- (a) receiving the report of the Committee, person or panel that conducted the investigation; or
 - (b) the conclusion of the matter after an appearance or submission by the medical practitioner or specialist referred to under subsection (2),
- notify, in writing, the medical practitioner or specialist, who is the subject of the investigation, of its decision and
- (i) that no further action is to be taken by the Council relating to the matter;
 - (ii) that the matter is to be referred to the Disciplinary Committee for the conduct of an informal or formal hearing; or
 - (iii) of the disciplinary measures to be taken by the Council.
- (5) Where the report of an investigation by the Disciplinary Committee indicates that a medical practitioner or specialist was engaged in conduct that constitutes a criminal offence, the Council shall submit a copy of the report to the Attorney-General.

PART IX - INVESTIGATIONS INTO COMPETENCE AND ABILITY TO PRACTICE MEDICINE

52. Investigation by Special Review Committee.

- (1) Where the Council determines that an investigation into the competence and ability of a medical practitioner or specialist to practice medicine is necessary, the Council shall appoint a committee to be called a Special Review Committee to conduct an investigation.
- (2) An investigation referred to under subsection (1), shall be conducted in accordance with the procedures set out in the Sixth Schedule.
- (3) The Special Review Committee shall give at least thirty days notice, prior to the commencement of the investigation, to the medical practitioner or specialist who is the subject of the investigation and the notice shall be in accordance with section 53(3).

- (4) The Special Review Committee shall make such inquiries as it considers necessary.
- (5) The Special Review Committee may find a medical practitioner or specialist to be incompetent, where the committee has reasonable grounds for believing that, the medical practitioner or specialist has displayed in his professional care of a patient —
 - (a) a lack of knowledge, skill or judgement; or
 - (b) a disregard for the welfare of the patient,of a nature or to an extent that demonstrates he is unfit to continue in the practice of medicine.
- (6) Where the Special Review Committee has evidence that the inability of the medical practitioner or specialist to discharge his professional responsibilities is the result of impairment in —
 - (a) the state of his physical or mental health;
 - (b) the dependence on drugs or alcohol; or
 - (c) the existence of an incapacity,the Special Review Committee may require the medical practitioner or specialist —
 - (i) to submit to physical or medical examinations or tests by such qualified persons as the Special Review Committee designates; and
 - (ii) to undergo such clinical or other examinations as the Special Review Committee designates to determine whether the medical practitioner has adequate skills and knowledge to practice medicine.
- (7) Where a medical practitioner or specialist refuses to submit to an examination or test referred to under subsection (6), but the Special Review Committee is satisfied, on the strength of other evidence including the conduct and demeanour of the medical practitioner or specialist, that his professional conduct may —
 - (a) cause harm to his patients or to himself; or
 - (b) bring the profession into disrepute,the Special Review Committee may conclude that the medical practitioner or specialist is incompetent.
- (8) The Special Review Committee, on the completion of the investigation, shall submit a report of its findings, recommendations and advice to the Council within thirty days of the completion of the investigation.

- (9) Where the Special Review Committee concludes that a medical practitioner or specialist is incompetent or unable to perform his duties, the Special Review Committee may—
- (a) recommend to the Council that —
 - (i) the certificate of the medical practitioner or specialist be revoked and that his name be struck from the register in which it is entered;
 - (ii) the certificate of the medical practitioner or specialist be suspended for a fixed period or for an indefinite period until the occurrence of some specified future event;
 - (iii) restrictions be imposed on the certificate of the medical practitioner or specialist for such period and subject to such conditions as the Special Review Committee considers necessary; and
 - (iv) the medical practitioner or specialist undergo such treatment or re-training as the Special Review Committee considers necessary; and
 - (b) advise the Council regarding any other appropriate measure that may be taken in the circumstances.

53. Direction of matters by Council to Special Review Committee or Assessment Committee.

- (1) The Council may direct —
 - (a) the Assessment Committee to conduct an evaluation of the qualifications or capability of a medical practitioner or specialist; or
 - (b) a Special Review Committee to conduct a review of the professional performance of a medical practitioner or specialist, where the capability, competence or professional performance is an issue in any matter under this Act.
- (2) The Assessment Committee shall submit a report of its findings, in writing, to the Council.
- (3) The conduct of the evaluation or review of a medical practitioner or specialist by the Assessment Committee or Special Review Committee under this section shall be in accordance with regulations made under this Act.

54. Disciplinary measures.

- (1) Where a medical practitioner or specialist is convicted of an offence —
 - (a) that is punishable on indictment in The Bahamas; or

- (b) in a country or place referred to under section 16, and that act or omission constitute an offence, or the equivalent act or omission, would constitute an offence punishable on indictment, if it took place in The Bahamas,
the Council may, by order —
 - (i) suspend the registration of a medical practitioner or specialist for such fixed period as the Council considers necessary;
 - (ii) terminate the medical practitioner or specialist registration or remove the medical practitioner or specialist name from the register or specialist register and revoke his certificate.
- (2) Where, following an investigation by the Disciplinary Committee, the Council determines that a medical practitioner or specialist is guilty of professional misconduct, the Council may —
 - (a) in writing —
 - (i) censure the medical practitioner or specialist;
 - (ii) reprimand the medical practitioner or specialist and may enter the facts of the reprimand in the register or specialist register in which his name is entered;
 - (b) by order —
 - (i) suspend the registration of a medical practitioner or specialist for such fixed period as the Council considers necessary;
 - (ii) suspend the registration of the medical practitioner or specialist for an indefinite period until the occurrence of some specified future event; or
 - (iii) terminate the registration of the medical practitioner or specialist, remove his name from the register or specialist register and revoke his certificate.
- (3) Where the medical practitioner or specialist is found to be incompetent, incapacitated or unable to perform his duties, the Council may, where subsection (1) or (2) does not apply in relation to the conduct of a medical practitioner or specialist —
 - (a) suspend his registration for such fixed period as the Council considers necessary;
 - (b) terminate his registration and remove his name from the register and revoke his certificate; or
 - (c) impose as a pre-condition of the renewal of the registration and certification of the medical practitioner or specialist who is suspended, such conditions as the Council considers necessary; and
 - (d) direct that the medical practitioner or specialist undergoes such treatment or re-training as the Council considers necessary.

- (4) The Council may censure or reprimand the medical practitioner or specialist and such reprimand may be recorded in the register or specialist register.
- (5) Notwithstanding subsections (1) to (4), the Council may take such further action as the Council considers necessary, in the interest of maintaining the standards and integrity of the medical profession.
- (6) Where the Council makes an order in accordance with this section the Council shall give, in writing, to —
 - (a) the medical practitioner or specialist; and
 - (b) the complainant or any other person concerned in the matter, a copy of the order and reasons for the decision of the Council.
- (7) Subject to subsection (8), the order of the Council has effect immediately on the service thereof on the medical practitioner or specialist or from such time as the order may direct.
- (8) The Supreme Court or any judge thereof may stay the order of the Council, upon good cause shown, pending an appeal from the order to the Supreme Court.
- (9) Notwithstanding subsection (8), where an order of the Council is made in respect of a matter referred to under subsection (3), the court may impose such restriction in respect of the practice of medicine, upon the medical practitioner or specialist, as the court considers necessary in the interest of the public and the profession.

55. Appeal against disciplinary measures.

- (1) A medical practitioner or specialist who is aggrieved by the decision of the Council to —
 - (a) censure him; or
 - (b) suspend his registration or terminate his registration and cause his name to be removed from the register;may, within three months of the receipt of any such notification, in writing, appeal against the decision of the Council to the Supreme Court.
- (2) The Council may, pending the hearing of an appeal, referred to in subsection (1), on the application of that medical practitioner or specialist, withhold the decision until the determination of the appeal.

56. Restoration of name to register.

- (1) Where a medical practitioner or specialist whose name has been removed from the register or specialist register, has satisfied the Council that —
 - (a) any conduct that had been the cause of the suspension or termination has ceased;

- (b) any fee that was to be paid has been paid in full;
- (c) any condition imposed by the Council to cause a restoration of the registration has been discharged;
- (d) the person has satisfied all of the requirements for registration under the Act,

the Council shall immediately restore the name of that medical practitioner or specialist to the register or specialist register.

- (2) Notwithstanding subsection (1), the Council shall not restore the name of a medical practitioner or specialist to the register or specialist register where the Council is engaged in conducting any other investigation, in relation to the medical practitioner or specialist, the result of which may be a suspension or termination of registration.

57. Notification of civil action or criminal trial.

- (1) Where a civil action has been brought against a medical practitioner or specialist for —
 - (a) alleged negligence in the course of providing medical care; or
 - (b) failure to provide medical services in execution of an undertaking, the medical practitioner or specialist shall immediately notify the Council —
 - (i) of the action and the status of the action;
 - (ii) where the matter has been concluded by the Court, the decision and order of the Court; and
 - (iii) where the matter has been concluded by the Court by way of settlement, the terms of the settlement.
- (2) A medical practitioner or specialist shall immediately notify the Council, where possible, of his committal, conviction, discharge or acquittal, where the medical practitioner or specialist has been, in respect of an indictable offence —
 - (a) committed for trial;
 - (b) convicted of an offence;
 - (c) discharged or acquitted.
- (3) For the purpose of this section, "indictable offence" has the meaning assigned to it under the Penal Code (*Ch. 84*).

PART X - MISCELLANEOUS

58. Confidentiality.

- (1) A member of the Council or a committee of the Council, the Registrar or any person acting in their behalf shall preserve secrecy with regard to the information obtained by him in the course of his duties, employment, inquiry or investigation under this Act, and shall not disclose such information to any other person except —
 - (a) as may be required in connection with the administration of, or any proceedings under this Act and the regulations;
 - (b) to his counsel and attorney; or
 - (c) with the consent of the person to whom the information relates.
- (2) No person to whom subsection (1) applies shall be required to give testimony in any civil suit or proceeding with regard to information obtained by him in the course of his duties, employment, inquiry or investigation except —
 - (a) in a proceeding under this Act or the regulations; or
 - (b) upon the order of a Judge of the Supreme Court in a matter before that court.

59. Offences and penalties.

- (1) A person who —
 - (a) wilfully procures or attempts to procure registration under this Act for himself or for any other person; and
 - (b) makes or produces or causes to be made or produced any fraudulent representation or declaration, either verbally, in writing or otherwise,commits an offence and is liable on summary conviction to a fine not exceeding twenty thousand dollars or to imprisonment for a term not exceeding one year or to both such fine and imprisonment.
- (2) A person, not being a medical practitioner or specialist, who —
 - (a) uses any name, title, addition or other description implying or calculated to imply that he is a medical practitioner or specialist or that he is recognized by law as a person authorised and qualified to practice medicine;
 - (b) assumes or uses any title or prefix indicative of any occupational designation relating solely to the practice of medicine;
 - (c) advertises or holds himself out as a person authorised or qualified to practice medicine; or

- (d) engages in the practice of medicine, commits an offence and is liable on summary conviction to a fine not exceeding twenty-five thousand dollars or to imprisonment for a term not exceeding two years or to both such fine and imprisonment.

60. No restriction of rendering assistance or use of home remedies.

Nothing in this Act shall prevent any person from —

- (a) giving aid in cases of emergency without hire, gain or hope of reward; or
- (b) providing domestic administration of home remedies and treatment, in adherence with the accepted standard of care.

61. Regulations.

- (1) The Minister may, after consultation with the Council, make regulations generally for the proper carrying out of the provisions of this Act.
- (2) Without prejudice to the generality of subsection (1), the Minister may, after consultation with the Council, make regulations —
 - (a) prescribing the core standards;
 - (b) prescribing the Standards of Professional Conduct;
 - (c) respecting continuing medical education;
 - (d) determining the procedure for the conduct of examinations.

62. Amendment of Schedules.

The Minister may, by Order published in the *Gazette*, amend the Schedules.

63. Savings and Transitional.

- (1) On the commencement of this Act —
 - (a) all property, rights and liabilities which immediately before that date were property, rights and liabilities of the former Council shall, by virtue of this section, vest in the Council continued pursuant to section 4 and on or after that date any legal proceedings in respect of any such property, rights or liabilities may be commenced or continued by or against the Council so continued;
 - (b) any reference to the former Council in any other enactment is applicable to the Council;
 - (c) the Registrar and the members of the former Council shall become the Registrar and the members of the Council, and shall continue in office for the period for which they were appointed;

- (d) any document of the former Council, so far as it relates to any period on or after the commencement of this section, and if not inconsistent with the context or subject matter, shall be taken to be a document of the Council.
- (2) In the case of the activities of any medical practitioner which occurred before the commencement of this Act, the provisions set out in Part VIII apply insofar as there was power to conduct an inquiry under the former Act into those activities.
- (3) A determination or result of a hearing into activities referred to under subsection (2) shall be one which would have been available as a finding or decision in an inquiry by the former Council under the former Act.
- (4) Where an investigation or inquiry into the conduct or activities of a medical practitioner under the former Act has commenced but has not been completed before the commencement of this Act, that investigation or inquiry, or any appeal or other further proceedings which might have been taken in relation to that investigation or inquiry may be continued as if the Council was a party to those proceedings.
- (5) The Council shall give effect to a decision made on an inquiry, investigation or appeal to which subsection (4) applies as if it were a decision under this Act.
- (6) A person who was registered as a medical practitioner under the former Act immediately before the commencement of this Act, shall continue to be so registered for the duration of the period of registration.

64. Repeal of Ch. 224.

The Medical Act is repealed.

FIRST SCHEDULE

(section 4)

CONSTITUTION AND PROCEDURE OF THE COUNCIL

1. Constitution.

- (1) The Council shall consist of seven members, of whom —
 - (a) one shall be the Chief Medical Officer *ex officio*;
 - (b) two, of whom at least one shall be a fully licensed medical practitioner, shall be appointed by the Minister;
 - (c) two shall be appointed by the Minister acting in accordance with the advice of the Association; and
 - (d) two shall be appointed by the Minister acting with the concurrence of the Association.
- (2) A medical practitioner shall not be appointed under paragraph (1) (b), (c) or (d) except that medical practitioner has at least seven years actual, continuous experience of the practice of medicine in The Bahamas.
- (3) In the exercise of his powers of appointment under this paragraph the Minister shall ensure that the members of the Council shall not consist entirely of persons appointed to membership of the Council at the same time.
- (4) The Minister may appoint the Chairman and the Deputy Chairman of the Council.
- (5) A member, other than the Chief Medical Officer *ex officio*, of the Council shall hold office for a period not exceeding three years and shall be eligible for reappointment, but that member shall not hold office for more than six years.

2. Temporary membership.

- (1) Where membership of the Council is by virtue of an office and the holder of the office is absent or unable to act, then, the person acting in the office shall be a member of the Council for as long as he so acts.
- (2) If any member by reason of illness or other incapacity or absence from The Bahamas, is unable at any time to perform the duties of his position, or if the position of a member is at any time vacant, the Minister may make a temporary appointment of a qualified person to act in his place or in such position upon such terms and conditions and for such time as the Minister may determine.

3. Resignation.

- (1) A member of the Council other than the Chairman may at any time resign his office by instrument in writing addressed to the Minister and transmitted through the Chairman, and from the date of the receipt by the Minister of such instrument, such member shall cease to be a member of the Council.
- (2) The Chairman may at any time resign his office by instrument in writing addressed to the Minister and such resignation shall take effect as from the date of receipt by the Minister of such instrument.

4. Removal.

The Minister may, by instrument in writing, remove a member of the Council upon being satisfied that the member —

- (a) is an undischarged bankrupt;
- (b) is incapacitated by physical or mental illness;
- (c) has been absent, without leave of the Council, from three or more consecutive meetings of the Council;
- (d) has been convicted of an indictable offence; or
- (e) is otherwise unable or unfit to discharge the functions of a member of the Council.

5. Publication.

The names of all the members of the Council as first constituted and every change in membership thereof shall be published in the *Gazette*.

6. Remuneration.

The Council shall pay to the Registrar, the Chairman and other members of the Council and committees such remuneration and allowances as the Minister may determine.

7. Meetings.

- (1) The Council shall meet at least once each month or at such times as may be necessary or expedient for the transaction of its business and such meetings shall be held at such places and times as the Council may determine.
- (2) The Chairman may at any time call a special meeting of the Council within fourteen days of the receipt of a written request for that purpose addressed to him by any two members of the Council.
- (3) The Chairman shall preside at all meetings of the Council, and the Deputy Chairman shall preside in his absence.
- (4) Where the Chairman and the Deputy Chairman are absent from a meeting, the members present and constituting a quorum shall elect one of their number to preside at that meeting.

- (5) The quorum of the Council shall consist of four of its members.
- (6) The decision of the Council shall be by a majority of votes, and in addition to an original vote the Chairman or other person presiding at a meeting shall have a casting vote in any case in which voting is equal.
- (7) Minutes in the proper form of each meeting of the Council shall be kept by the Registrar and shall be confirmed by the Council at the next meeting.
- (8) The validity of the proceedings of the Council shall not be affected by any vacancy.

8. Vacancies.

If any vacancy occurs in the membership of the Council, such vacancy, shall be filled by the appointment of another member who shall, subject to the provisions of this Schedule, hold office for the remainder of the period for which the previous member was appointed, and such appointment shall be made in the same manner and from the same category of persons, if any, as the appointment of the previous member.

9. Declaration.

A member of the Council or of any committee appointed by the Council who is directly or indirectly, interested in a contract or proposed contract or has any interest in a matter under consideration by the Council or any committee thereof shall disclose that fact at the next meeting of the Council or committee and shall not participate in the consideration of, or vote on, any question relating to that matter.

10. Protection of members.

- (1) Subject to subparagraph (2), no action, prosecution or other proceedings shall be brought or instituted personally against the Registrar, Chairman or any member of the Council or committee in respect of any act done *bona fide* in pursuance or execution or intended execution of the provisions of this Act.
- (2) Where the Registrar, Chairman or any member of the Council or committee is exempt from liability by reason only of subparagraph (1), the Council shall be liable to the extent that it would be if that member were a servant or agent of the Council.

SECOND SCHEDULE

(sections 15, 22 and 26)

FORMS

MEDICAL ACT

(Act No. of 2014)



FORM A

Application for Registration as a Medical Practitioner or Specialist

SECTION A- PERSONAL INFORMATION

1. -----
Surname First Name Middle Name
(Block letters) (Block letters) (Block letters)

a national of -----hereby apply

(a) to be registered as a:

- (i) medical practitioner ☐
 ☐ Fully ☐ Provisionally ☐ Temporarily
(ii) specialist ☐

(b) to be registered as a specially registered practitioner ☐

(c) for the renewal of registration as:

- (i) medical practitioner ☐
(ii) specialist ☐

2. National Registration Number: -----

3. Home Address: -----

Telephone Number: -----

4. Business Address: -----

E-mail Address: -----

Telephone Number: -----

5. Where applicant has been registered previously:

(a) registration number of medical practitioner: -----

(b) registration number of specialist: -----

6. Qualification	University/College Certifying Body	Date Obtained
-----	-----	-----
-----	-----	-----
-----	-----	-----

7. (1) Indicate:

(a) whether you are currently registered to practice medicine in
any jurisdiction other than The Bahamas:

Yes ☐ No ☐

(b) where the answer is "yes" state:

(i) the jurisdiction -----

(ii) the period of registration from -----/-----/-----
day month year

to -----/-----/-----
day month year

(c) form of registration:

(i) general practitioner -----

(ii) specialist in: -----
(specialty)

(2) Indicate:

(a) whether you have ever been disciplined for any medical breaches in any jurisdiction other than The Bahamas:

Yes ☐ No ☐

(b) where the answer is "yes" state the disciplinary measures taken:

(3) Indicate whether you have been convicted in The Bahamas or any other jurisdiction of an offence:

(a) relating to the misuse of drugs; or

(b) in respect of which a penalty is prescribed.

Note: Disclosure of a conviction expunged pursuant to the Rehabilitation of Offenders Act (*Ch. 100*) or similar legislation in any other relevant jurisdiction, is not required.

8. (1) Indicate:

(a) whether you have ever been suspended from practising medicine:

Yes ☐ No ☐

(b) where the answer is "yes" state the period of suspension:

from -----/-----/----- to -----/-----/-----
day month year day month year

(2) Indicate:

(a) whether your registration or licence to practice medicine in any jurisdiction other than The Bahamas has ever been terminated or revoked:

Yes ☐ No ☐

(b) where the answer is "yes" state the date of termination or revocation: -----

Instructions

Please write the information required in capital letters and ensure that all required documentation accompanies your application form.

Note: Post office box numbers may not be used for a home or business address.

Please submit with the application the following:

- (a) a certified copy of the certificate or other evidence of qualification upon which you are relying in order to be registered as a medical practitioner;
- (b) an application fee; and
- (c) such other particulars as determined by the Council in accordance with the Medical Act.

Where you have been registered as a medical practitioner or specialist in more than one jurisdiction, please list all jurisdictions. You may use separate sheets of paper for this purpose.

SECTION B - DECLARATION

I _____ hereby declare that the above information is true and correct to the best of my knowledge and information.

I acknowledge that the provision of any false statement or misleading statement may result in disciplinary proceedings and in the cancellation of any registration or licence granted as a result of this application.

Signature

Date

In the case of a re-registration indicate:

Date of Registration

Specialist Registration Number

Expiry Date of Registration

Instructions

Complete this Part if you have previously been registered as a Specialist.

MEDICAL ACT

(Act No. of 2014)



FORM B

Certificate of Registration to practice as a Medical Practitioner

The Bahamas Medical Council hereby certifies that:

Full Name

is registered to practice medicine as a medical practitioner in The Bahamas from
the ---- day of -----, ----- to the ---- day of -----, -----.

Chairman

Registrar

Date

Registration Number

MEDICAL ACT
(Act No. of 2014)



FORM C

Certificate of Registration to practice as a Specialist

The Bahamas Medical Council hereby certifies that:

Full Name

is registered to practice medicine as a specialist in -----* in The
Bahamas from the ----- day of -----, ---- to the ---- day of
-----, ----.

Chairman

Registrar

Date

Registration Number

*** Please insert specialty**

MEDICAL ACT
(Act No. of 2014)



FORM D

Certificate of Registration for Special Purpose Licence

The Bahamas Medical Council hereby certifies that:

Full Name

is registered to practice medicine as a specialist in -----* in The
Bahamas from the ----- day of -----, ----- to the ----- day of
-----, -----.

Chairman

Registrar

Date

Registration Number

*** Please insert specialty**

MEDICAL ACT
(Act No. of 2014)



FORM E

Certificate of Registration to Practice as an Alternative Medicine Practitioner

The Bahamas Medical Council hereby certifies that:

Full Name

is registered to practice medicine as a specialist in -----* in The
Bahamas from the ----- day of -----, ----- to the ----- day of
-----, -----.

Chairman

Registrar

Date

Registration Number

* Please insert specialty

MEDICAL ACT
(Act No. of 2014)



FORM F

**Certificate of Registration to Practice as a Specialist in Advanced Medical
Therapies**

The Bahamas Medical Council hereby certifies that:

Full Name

is registered to practice medicine as a specialist in -----* in The
Bahamas from the ----- day of -----, ----- to the ----- day of
-----, -----.

Chairman

Registrar

Date

Registration Number

*** Please insert specialty**

MEDICAL ACT
(Act No. of 2014)



FORM G

Licence to Practice

This is to certify that -----
who was registered in the Medical Register on -----
Registration No. ----- is hereby authorized to engage in
the practice of -----
at -----
for the period ending ----- 20 -----

Given under the Seal of the Council
this day of ,

Chairman

Registrar

THIRD SCHEDULE

(sections 26 and 27)

PART I

Institutions for Post-Graduate Training and Certification as Specialists

Institutions approved by the Minister on the recommendation of the Council for the provision of relevant post-graduate training and certification as specialists:

- (a) Surgery and its major subdivisions as recognized by the appropriate Royal Colleges of the United Kingdom (UK) and their equivalent bodies in the Commonwealth and the Diplomate Boards of the United States of America (USA);
- (b) Internal Medicine and its major subdivisions as recognized by the appropriate Royal Colleges of the UK and their equivalent bodies in the Commonwealth and the Diplomate Boards of the USA;
- (c) Obstetrics and Gynaecology and its major subdivisions as recognized by the appropriate Royal Colleges of the UK and their equivalent bodies in the Commonwealth and the Diplomate Boards of the USA;
- (d) Anaesthesia and its major subdivisions as recognized by the appropriate Royal Colleges of the UK and their equivalent bodies in the Commonwealth and the Diplomate Boards of the USA;
- (e) Psychiatry and its major subdivisions as recognized by the appropriate Royal Colleges of the UK and their equivalent bodies in the Commonwealth and the Diplomate Boards of the USA;
- (f) Paediatrics and its major subdivisions as recognized by the appropriate Royal Colleges of the UK and their equivalent bodies in the Commonwealth and the Diplomate Boards of the USA;
- (g) Pathology and its major subdivisions as recognized by the appropriate Royal Colleges of the UK and their equivalent bodies in the Commonwealth and the Diplomate Boards of the USA;
- (h) Family Medicine and its subdivisions as recognized by the appropriate Royal Colleges of the UK and their equivalent bodies in the Commonwealth and the Diplomate Boards of the USA;
- (i) such other institutions providing specialized post graduate training and certification as approved by the Minister on the recommendation of the Council.

PART II

List of the specialties and the period of relevant training required for specialty certification

The following qualification in respect of each of the specialties set out in the first column obtained upon completion of training for the corresponding minimum periods set out in the second column:

Name of Specialty	Minimum period of relevant training required for specialty certification
anaesthetics	3 years
biological chemistry}	
chemical pathology}	3 years
cardiology	3 years
child psychiatry	3 years
dermato – venereology	3 years
dermatology	3 years
diagnostic radiology (clinical)	3 years
emergency medicine	3 years

PART III

List of Specialist Qualifications

Name of Specialty	Minimum period of relevant post-graduate training
endocrinology or } endocrinology & diabetes mellitus}	3 years
family medicine	3 years
gastro-enterology general haematology	3 years
general (internal) medicine	3 years
general surgery	3 years
geriatric	3 years
immunology	3 years
infectious diseases or} communicable diseases}	3 years
microbiology-bacteriology	3 years
neurological surgery	3 years
neurology	3 years
nuclear medicine	3 years
obstetrics and gynaecology	3 years
occupational medicine	3 years
ophthalmology	3 years
oral and maxillo-facial surgery	3 years
orthopaedics} (trauma & orthopaedic surgery)}	3 years
oto rhino laryngology} (otolaryngology)}	3 years
paediatrics	3 years
paediatric surgery	3 years

pathological anatomy}	
histopathology}	3 years
pharmacology}	
clinical pharmacology}	
and therapeutics}	3 years
plastic surgery	3 years
psychiatry}	
general psychiatry}	3 years
public health medicine}	
community medicine}	3 years
radiology	3 years
radiotherapy	3 years
renal medicine	3 years
respiratory medicine	3 years
rheumatology	3 years
thoracic surgery	3 years
cardia-thoracic surgery	3 years
tropical medicine	3 years
urology	3 years
vascular surgery	3 years
venerology }	
genito urinary medicine}	3 years

FOURTH SCHEDULE

(section 34)

PROCEEDINGS BEFORE THE COMPLAINTS COMMITTEE

1. Where a matter is referred by the Council to the Complaints Committee, the chairman of the Complaints Committee shall immediately notify, in writing, the medical practitioner or specialist whose conduct or action is the subject of the investigation.
2. The notice referred to in paragraph 1 shall —
 - (a) identify the matter to be investigated;
 - (b) stipulate the right of the medical practitioner or specialist to submit to the Complaints Committee —
 - (i) in writing, an explanation or representation of the complaint; and
 - (ii) any document or other information, concerning the matter;
 - (c) indicate that any submission shall be made by a date not later than twenty-eight days from the date of the notice or such other date as stipulated by the Complaints Committee.
3. The Complaints Committee shall examine all documents and other information relating to the complaint that are submitted to the Complaints Committee and shall make every reasonable effort to verify the information and ascertain all the facts that are relevant to a determination of the matter.
4. The Complaints Committee may hear evidence from any person in relation to the complaint, whether or not that person is a party concerned in the matter.
5. The Complaints Committee, after a consideration of the documents and other information submitted, and where the Complaints Committee, determines that it is in the best interest of all the parties concerned, may request clarifications, in writing, relating to any statement, representation or other information submitted to the Complaints Committee.
6. Where the Complaints Committee is conducting an investigation other than a preliminary investigation —
 - (a) the Complaints Committee may invite each of the parties or both parties concerned in the matter to appear before the Complaints Committee to make representations or to answer questions respecting the matter;

- (b) the medical practitioner, specialist or complainant, where he appears before the Complaints Committee, shall be entitled to representation by his counsel and attorney.
- 7. The Complaints Committee shall report its findings, decision and recommendation to the Council in accordance with section 34.
- 8. Referrals to the Disciplinary Committee shall be prepared by the Complaints Committee with a counsel and attorney.

FIFTH SCHEDULE

(section 35)

PROCEEDINGS BEFORE THE DISCIPLINARY COMMITTEE

- I. Notice of inquiry.
 - (1) The Council shall serve on the medical practitioner or specialist against whom disciplinary proceedings are to be instituted a notice of inquiry.
 - (2) The notice of inquiry referred to under subparagraph (1) shall —
 - (a) specify, in the form of a charge, the matters that shall be investigated by the Disciplinary Committee; and
 - (b) state the time and place at which the inquiry may be held.
 - (3) Except with the consent of the medical practitioner or specialist, an inquiry shall not be fixed for a date earlier than twenty-eight days after the date of the notice of inquiry.
 - (4) The notice of inquiry shall be served personally or by pre-paid registered post on the medical practitioner or specialist at the address recorded in the Register or specialist register, or at his last known address where that address differs from that on the register or the specialist register.
 - (5) In any case where there is a complainant, a copy of the notice of inquiry shall be sent to the complainant.
2. Where, after a complaint has been referred to the Disciplinary Committee for investigation, and it appears to the Disciplinary Committee that the inquiry shall not be held, the Council shall notify the complainant, if any, and the medical practitioner of the decision of the Disciplinary Committee.
3. The medical practitioner or specialist shall either receive free copies of, or allowed access to, any documentary evidence relied on for the purpose of the inquiry.
4. The medical practitioner or specialist may be represented by a counsel and attorney in any disciplinary proceedings instituted against that medical practitioner or specialist.
5. Where the medical practitioner or specialist or his counsel and attorney does not appear at the date fixed for the hearing of the inquiry, the Disciplinary Committee may, if it is satisfied that a notice of inquiry was personally served on the medical practitioner or specialist, proceed with the inquiry in his absence and the absence of his counsel and attorney.

6. Where witnesses are examined by the Disciplinary Committee, the medical practitioner or specialist shall be given an opportunity of attending and asking questions to the witnesses in his own behalf; and no documentary evidence shall be used against that medical practitioner or specialist unless he has previously been supplied with copies thereof or given access thereto.
7. The medical practitioner or specialist shall be permitted to give evidence, call witnesses and make submissions orally or in writing in his own behalf.
8. The Disciplinary Committee may call additional witnesses and may adjourn the proceedings to another convenient time or place.
9. The testimony of witnesses shall be taken under oath or by affirmation, by the Chairman of the Council.
10. Upon the application of —
 - (a) any party to the inquiry;
 - (b) the chairman of the Disciplinary Committee; or
 - (c) the counsel and attorney for the Disciplinary Committee,the Registrar may issue a summons for the purposes of procuring the attendance of witnesses, the giving of testimony and the production of documents before the Disciplinary Committee.
11. The Disciplinary Committee shall ensure that the proceedings and the evidence are recorded; transcribed and certified by a stenographer engaged under a contract for service or any other suitable person.
12. Where, having heard the evidence in support of the charges, the Disciplinary Committee is of the opinion that the evidence is insufficient, the Disciplinary Committee may dismiss the charges without calling upon the medical practitioner or specialist for his defence.
13. Upon the conclusion of the inquiry, the Disciplinary Committee shall submit a report of its findings, decision, reasons for the decision and recommendations to the Council in accordance with section 35.

SIXTH SCHEDULE

(section 52)

PROCEEDINGS BEFORE A SPECIAL REVIEW COMMITTEE

1. The Special Review Committee shall consist of three medical practitioners, two of whom shall not be a member of the Council.
2. Notice of investigation.
 - (1) The Council shall serve a notice of investigation —
 - (a) to the medical practitioner or specialist who is the subject of the investigation;
 - (b) where the medical practitioner or specialist is employed by any public or private entity, to the person in charge of the entity; and
 - (c) to any person who made a complaint relating to the ability or competence of the medical practitioner or specialist.
 - (2) The notice of investigation shall —
 - (a) specify, in the form of a charge, the matters that shall be investigated by the Disciplinary Committee; and
 - (b) state the time and place at which the investigation may be held.
 - (3) Except with the consent of the medical practitioner or specialist, an investigation shall not be fixed for a date earlier than twenty-eight days after the date of the notice of investigation.
 - (4) The notice of investigation shall be served personally or by pre-paid registered post on the medical practitioner or specialist at the address shown on the register or the specialist register or at his last known address if that address differs from that on the register or the specialist register.
3. The medical practitioner or specialist shall be present at the investigation or shall be represented by his counsel and attorney.
4. Where the medical practitioner or specialist or his counsel and attorney does not appear at the date fixed for the investigation of the case, the Special Review Committee may, if it is satisfied that a notice of investigation has been served on the medical practitioner or specialist, proceed with the investigation in his absence and the absence of his counsel and attorney.
5. Where witnesses are examined by the Special Review Committee, the medical practitioner or specialist shall be given an opportunity of

attending and asking questions to the witnesses in his own behalf, and no documentary evidence shall be used against that medical practitioner or specialist unless he has previously been supplied with copies thereof or given access thereto.

6. The medical practitioner or specialist shall be permitted to give evidence, call witnesses and make submissions orally or in writing on his own behalf.
7. The medical practitioner or specialist shall be entitled to receive free copies of or allowed access to, any documentary evidence relied on for the purpose of the inquiry.
8. Subject to paragraph 9, where the Special Review Committee has received a report relating to an examination referred to under section 52, the contents of the report shall not be disclosed to any person, whether or not that person is a part of the investigation, other than the medical practitioner or specialist concerned in the matter.
9. Upon the conclusion of the investigation, the Special Review Committee shall submit, to the Council, the report required by section 52.

SEVENTH SCHEDULE

(sections 15, 22, 24, 26, 27, 28, 29 and 30)

FEEES

	Fees
	\$
Registration	
Provisional	50
Temporary	200
Medical Practitioner	100
Specialist	200
Special Purpose	300
Honorary Registration	0
Licence	
Provisional	100
Temporary	400
Medical Practitioner	400
Specialist	800
Special Purpose	1200
Honorary	0
Administrative	
Application	25
Certificate of good standing	100
Restoration to Register	500
Copy of Licence (lost, destroyed or mutilated)	100
Renewal of certificate of registration	100
Renewal of licence	100
Examination	1200