



THE STATUTES OF THE REPUBLIC OF SINGAPORE

MEDICAL REGISTRATION ACT 1997

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Medical Registration Act 1997

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An Act to provide for the registration of medical practitioners and for matters connected therewith.

[3 April 1998]

PART 1

PRELIMINARY

Short title

1. This Act is the Medical Registration Act 1997.

Interpretation

2. In this Act, unless the context otherwise requires —
 - “certificate of experience” means a certificate granted under section 25;
 - “Complaints Committee” means a committee appointed by the chairman of the Complaints Panel under section 40;
 - “Complaints Panel” means the panel appointed by the Medical Council under section 38;
 - “conditional registration” means registration in Part II of the Register of Medical Practitioners pursuant to section 21 or any other provision of this Act, which registration is subject to any condition or restriction as may be imposed;

- “degree” means any degree or diploma or any qualification granted by any university or institution legally authorised to grant that degree or diploma or qualification and which degree or diploma or qualification is recognised or approved by the Medical Council;
- “Disciplinary Tribunal” means a tribunal appointed by the Medical Council under section 50;
- “fully registered medical practitioner” means a person registered in Part I of the Register of Medical Practitioners in accordance with section 20(1) or (2), as the case may be;
- “Health Committee” means a committee appointed by the Medical Council under section 57;
- “Interim Orders Committee” means a committee appointed by the Medical Council under section 59A; “Medical Council” means the Medical Council of Singapore established under section 3(1) of the repealed Medical Registration Act (Cap. 174, 1985 Revised Edition), and by virtue of section 3 of this Act means the Singapore Medical Council;
- “practising certificate” means a practising certificate granted under section 36;
- “president” means the president of the Medical Council;
- “professional performance” means the knowledge, skill or care possessed and applied by a registered medical practitioner in the provision of medical services;
- “provisional registration” means registration by virtue of section 24 and “provisionally registered” is to be construed accordingly;
- “registered medical practitioner” means a person registered under this Act and includes a person deemed to be so registered under section 72(1);
- “Registrar” means the Registrar of the Medical Council;
- “Singapore degree” means a degree, diploma or licence in medicine and surgery specified in the First Schedule.

Object of Act

2A. The object of this Act is to protect the health and safety of the public by providing for mechanisms to —

- (a) ensure that registered medical practitioners are competent and fit to practise medicine;
- (b) uphold standards of practice within the medical profession; and
- (c) maintain public confidence in the medical profession.

PART 2**MEDICAL COUNCIL****Medical Council to continue to exist**

3. The Medical Council of Singapore is to continue to exist as a body corporate having perpetual succession and a common seal and, as from 3 April 1998, be called the Singapore Medical Council.

Constitution of Medical Council

4.—(1) The Medical Council consists of —

- (a) the Director of Medical Services;
- (b) 2 registered medical practitioners from each prescribed medical school in Singapore to be appointed by the Minister on the nomination of the council of the university to which the prescribed medical school belongs, one of whom is the Dean of the medical school;
- (c) 12 registered medical practitioners resident in Singapore to be elected by the fully registered medical practitioners resident in Singapore; and
- (d) 8 registered medical practitioners resident in Singapore to be appointed by the Minister.

(2) The members referred to in subsection (1)(b), (c) and (d) hold office for a period of 3 years and are eligible for re-appointment or re-election.

(3) If for any reason the Director of Medical Services is unable to attend a particular meeting of the Medical Council, the Director may nominate a representative to attend the meeting and when so attending the representative is deemed for all purposes to be a member of the Medical Council.

(4) The Minister may, at any time, revoke the appointment of any member appointed under subsection (1)(b) or (d) without giving any reason.

Functions of Medical Council

5. The functions of the Medical Council are —

- (a) to keep and maintain registers of registered medical practitioners;
- (b) to approve or reject applications for registration under this Act or to approve any such application subject to such restrictions as it may think fit;
- (c) to issue practising certificates to registered medical practitioners;
- (d) to make recommendations to the appropriate authorities on the courses of instructions and examinations leading to the Singapore degree;
- (e) to make recommendations to the appropriate authorities for the training and education of registered medical practitioners;
- (f) to determine and regulate the conduct and ethics of registered medical practitioners;
- (fa) to determine and regulate standards of practice and the competence of registered medical practitioners within the medical profession;
- (fb) to provide administrative services to other bodies (whether corporate or unincorporate) responsible for the regulation of healthcare professionals; and
- (g) generally to do all such acts and matters and things as are necessary to be carried out under this Act.

Compulsory voting

6.—(1) Every fully registered medical practitioner resident in Singapore who has in force a practising certificate on the day of election of candidates as members of the Medical Council mentioned in section 4(1)(c) must vote for the election of such members at such time and in such manner as may be prescribed.

(2) Every registered medical practitioner who is required to vote for the election of the members of the Medical Council in accordance with subsection (1) and who fails to do so is not entitled to apply for a practising certificate unless he —

- (a) satisfies the Registrar that he had a good and sufficient reason for not voting at the election; or
- (b) pays to the Medical Council a penalty prescribed by the Medical Council.

President of Medical Council

7.—(1) The Medical Council has a president who is elected by the members of the Medical Council from among its members.

(2) The president elected under subsection (1) serves for a term not extending beyond the expiry of the term for which he has been appointed or elected to be a member of the Medical Council and is eligible for re-election.

(3) The president presides at any meeting of the Medical Council and, in his absence, such member as the members present may elect presides at that meeting.

Disqualifications for membership of Medical Council

8. A person must not be a member of the Medical Council —

- (a) if the person is not a citizen or a permanent resident of Singapore;
- (b) if the person is not a registered medical practitioner with at least 10 years' experience in the practice of medicine;
- (c) if the person is an undischarged bankrupt;

- (d) if the person has been convicted in Singapore or elsewhere of any offence involving fraud, dishonesty or moral turpitude or implying a defect in character which makes the person unfit for the person's profession;
- (e) if the person has been found guilty in Singapore or elsewhere of any improper act or conduct which brings disrepute to the person's profession;
- (f) if the person has been found guilty in Singapore or elsewhere of professional misconduct; or
- (g) if the person's fitness to practise as a medical practitioner is judged by the Health Committee to be impaired by reason of the person's physical or mental condition.

Filling of vacancies

9.—(1) The office of a member of the Medical Council becomes vacant if the member —

- (a) dies;
- (b) resigns the member's office;
- (c) is incapacitated by physical or mental illness;
- (d) becomes subject to any of the disqualifications specified in section 8;
- (e) without any good and sufficient reason, refuses to accept an appointment as a member of any committee appointed under section 11 or of the Credentials Committee or the Health Committee; or
- (f) has the member's appointment revoked before the expiry of the term for which the member has been appointed.

(2) The Medical Council may, with the approval of the Minister, remove from office any member of the Medical Council who is absent without leave of the Medical Council from 3 consecutive ordinary meetings of —

- (a) the Medical Council; or

- (b) any committee appointed under section 11 or of the Credentials Committee or the Health Committee of which he is a member.
- (3) Any question as to whether a person has ceased to be a member of the Medical Council is to be determined by the Minister whose decision is final.
- (4) If any vacancy arises among the elected members, the Minister must, as soon as practicable, appoint any registered medical practitioner resident in Singapore to fill that vacancy.
- (5) If any vacancy arises among the appointed members, the Minister may appoint a person to fill the vacancy in the manner in which the appointment to the vacant office was made.
- (6) Any person appointed to fill the vacancy holds office for as long as the member in whose place the person was appointed would have held office.
- (7) The Medical Council may act despite any vacancy in the Medical Council and no act done by or by the authority of the Medical Council is invalid in consequence of any defect that is afterwards discovered in the appointment or election or qualification of the members or any of them.

Appointment of executive secretary and other employees

10. The Medical Council may appoint an executive secretary and such other employees on such terms and conditions as the Medical Council may determine.

Appointment of committees

11.—(1) The Medical Council may —

- (a) appoint one or more committees for any general or special purpose which in the opinion of the Medical Council may be better dealt with or managed by a committee; and
- (b) delegate to any committee so appointed, with or without restrictions or conditions as it thinks fit, any of the powers or functions which may be exercised or performed by the Medical Council.

(2) The number and term of office of the members of a committee appointed under this section and the number of those members necessary to form a quorum are to be fixed by the Medical Council.

(3) A committee appointed under this section may include persons who are not members of the Medical Council.

Meetings and quorum of Medical Council

12.—(1) The Medical Council is to meet at such times and places as the president or the Registrar may appoint.

(2) The quorum at every meeting of the Medical Council must be one-third of the total number of members in office or 7 members, whichever is the higher.

(3) The chairman at any meeting of the Medical Council has an original vote and, in the case of an equality of votes, a casting vote.

(4) There are to be paid to the members of the Medical Council and members of any committee appointed by the Medical Council, or their respective employers, such fees as may be approved by the Minister.

(5) The Medical Council may make rules for the conduct of its business.

PART 3

PRIVILEGES OF MEDICAL PRACTITIONERS

Qualifications to practise

13. Subject to section 66 —

- (a) a person must not practise as a medical practitioner or do any act as a medical practitioner unless the person is registered under this Act and has a valid practising certificate; and
- (b) a person who is not so qualified is called in this Act an unauthorised person.

No remuneration recoverable by unauthorised persons

14. Subject to the provisions of this Act, a person is not entitled to demand, claim, accept, receive or retain or sue for or recover by any means any charge, fee, disbursement, expense or any remuneration —

- (a) for or in connection with any medical or surgical advice, service, attendance or treatment or any operation performed; or
- (b) for any medicine which the person has prescribed and supplied,

unless at the time of rendering such services the person is registered under this Act and has a valid practising certificate.

Medical certificates

15. A certificate or any other document required by any written law to be signed by a duly qualified medical practitioner given after 3 April 1998 is not valid unless signed by a person who is registered under this Act and has a valid practising certificate.

Legally qualified or duly qualified medical practitioner

16. In any written law —

- (a) “legally qualified medical practitioner”;
- (b) “duly qualified medical practitioner”; or
- (c) any expression importing a person recognised by law as a medical practitioner or member of the medical profession,

is to be construed to mean a person who is registered under this Act and has a valid practising certificate.

Unauthorised person acting as medical practitioner

17.—(1) Any unauthorised person who —

- (a) practises medicine;
- (b) wilfully and falsely pretends to be a duly qualified medical practitioner;

- (c) practises medicine or any branch of medicine, under the style or title of a physician, surgeon, doctor, licentiate in medicine or surgery, bachelor of medicine, or medical practitioner, or under any name, title, addition or description implying that he holds any diploma or degree in medicine or surgery or in any branch of medicine;
- (d) advertises or holds himself out as a medical practitioner; or
- (e) contravenes section 13 or 14,

shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$100,000 or to imprisonment for a term not exceeding 12 months or to both and, in the case of a second or subsequent conviction, to a fine not exceeding \$200,000 or to imprisonment for a term not exceeding 2 years or to both.

(2) It is a defence to a prosecution under subsection (1) if the defendant proves that —

- (a) he practised a system of therapeutics according to Malay, Chinese or Indian method; and
- (b) he did not in any way represent himself as a duly qualified or registered medical practitioner.

PART 4

REGISTRATION OF MEDICAL PRACTITIONERS

Registrar of Medical Council

18.—(1) For the purposes of this Act, there is to be a Registrar of the Medical Council.

(2) The Director of Medical Services is to be the Registrar of the Medical Council.

(3) The Minister may appoint a Deputy Registrar to assist the Registrar in carrying out the Registrar's functions and duties under this Act.

(4) The Registrar may, subject to such conditions or restrictions as the Registrar thinks fit, delegate to the Deputy Registrar any of the

Registrar's powers or functions under this Act, except the power of delegation conferred by this section.

(5) The Registrar may continue to exercise any power conferred on the Registrar or perform any function under this Act despite the delegation of such power or function under this section.

Registers

19.—(1) In addition to duties under the Public Sector (Governance) Act 2018, the Registrar must maintain and keep the following registers:

- (a) a register to be called “The Register of Medical Practitioners” containing —
 - (i) in Part I of the Register, the names of persons registered as fully registered medical practitioners under section 20(1) and (2); and
 - (ii) in Part II of the Register, the names of persons registered as medical practitioners with conditional registration;
- (b) a register to be called “The Register of Specialists” containing the names of persons registered as specialists under section 22;
- (ba) a register to be called “The Register of Family Physicians” containing the names of persons registered as family physicians under section 22A;
- (c) a register to be called “The Register of Temporarily Registered Medical Practitioners” containing the names of persons who are registered temporarily as medical practitioners under section 23; and
- (d) a register to be called “The Register of Provisionally Registered Medical Practitioners” containing the names of persons registered provisionally under section 24.

[5/2018]

(2) Each register must contain —

- (a) the names and addresses of the persons registered;

- (b) the dates of the registration of the persons;
- (c) the qualifications by virtue of which the persons are so registered and the dates they obtained such qualifications; and
- (d) such other particulars as the Medical Council may determine for that register.

(3) The Registrar is responsible for the maintenance and custody of the registers.

(4) Every person whose name is registered in any of the registers must inform the Registrar in writing of —

- (a) any change in the person's name or residential address;
- (b) any change in the person's practice address or such of the person's other particulars as may be prescribed; or
- (c) any change or addition to the person's qualification,

within 28 days after such change or addition.

(4A) Any person who contravenes subsection (4)(a) shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$1,000.

(4B) A person who makes a report of a change in the person's residential address under section 10 of the National Registration Act 1965 is deemed to have complied with subsection (4)(a) on the date on which the person makes the report.

(5) The Registrar may disclose any information in the registers to any person prescribed by regulations made under this Act, if such disclosure is in accordance with such conditions as may be specified in those regulations.

(6) Subsection (5) is without prejudice to any other right or duty to disclose the information under general or written law.

Full registration

20.—(1) Subject to the provisions of this Act, any person who —

- (a) holds a Singapore degree;

- (b) holds a certificate of experience or any other certificate specified by the Medical Council; and
- (c) satisfies such other requirements as the Medical Council may, with the approval of the Minister, prescribe,

is entitled to be registered as a fully registered medical practitioner in Part I of the Register of Medical Practitioners.

(1A) For the purposes of subsection (1)(c), the Medical Council may prescribe different requirements for the different degrees, diplomas or licences in medicine and surgery specified in the First Schedule.

(2) Despite subsection (1), a person, not being a Singapore degree holder, who —

- (a) holds such qualifications as may be recognised by the Medical Council;
- (b) complies with section 26;
- (c) satisfies such other requirements as the Medical Council may, with the approval of the Minister, prescribe; and
- (d) satisfies the Medical Council that the person has special knowledge and skill and sufficient experience in any particular branch of medicine,

is, if the Medical Council thinks fit so to direct, to be registered as a fully registered medical practitioner.

(3) Despite subsections (1) and (2), the Medical Council may, if it is of the view that it is not in the public interest for a person mentioned in either of those subsections to be registered as a fully registered medical practitioner, direct that the person be registered as a medical practitioner with conditional registration in Part II of the Register of Medical Practitioners, and section 21(4) and (6) to (9) applies accordingly.

Conditional registration

- 21.—**(1) Subject to the provisions of this Act, any person who —
- (a) holds a degree from a university specified in the Second Schedule or any other qualification which is, in the opinion of the Medical Council, not lower in standing than a degree specified in the Second Schedule;
 - (b) has been selected for employment in Singapore as a medical practitioner in hospitals or other institutions or medical practice approved by the Medical Council;
 - (c) satisfies the Medical Council that the person has the knowledge and skill and has acquired the experience which is necessary for practice as a medical practitioner;
 - (d) complies with section 26; and
 - (e) satisfies such other requirements as the Medical Council may, with the approval of the Minister, prescribe,

is, if the Medical Council thinks fit so to direct and subject to such conditions or restrictions as the Medical Council may think fit to impose, to be registered as a medical practitioner with conditional registration in Part II of the Register of Medical Practitioners.

- (2) Subject to the provisions of this Act, any person who holds —
- (a) a Singapore degree; and
 - (b) a certificate approved by the Medical Council as being equivalent to a certificate of experience and granted by a hospital or an institution outside Singapore that is recognised by the Medical Council for the purpose of this paragraph,

is entitled to be registered as a medical practitioner with conditional registration in Part II of the Register of Medical Practitioners and is subject to such conditions or restrictions as the Medical Council may think fit to impose.

(3) The Medical Council may require a person with a degree, other than a degree specified in the Second Schedule, to undergo and pass an examination conducted or arranged by the Medical Council or by

such other person or persons as the Medical Council may appoint to satisfy itself that the degree is not lower in standing than a degree specified in the Second Schedule.

(4) Every direction by virtue of which a person is registered under this section must specify the conditions or restrictions of the person's registration and may further specify one or more of the following:

- (a) that the person must work for a specified period under the supervision of a fully registered medical practitioner approved by the Medical Council;
- (b) that the person's performance must be subject to review by such fully registered medical practitioners or healthcare professionals as the Medical Council may determine;
- (c) the particular employment or descriptions of employment for the purposes of which the person is so registered.

(5) [*Deleted by Act 1 of 2010*]

(6) The Medical Council may cancel the conditional registration of a medical practitioner if —

- (a) the medical practitioner fails to comply with any of the conditions or restrictions specified in the direction by virtue of which the person is registered; or
- (b) the Medical Council is of the opinion, having regard to any report of one or more fully registered medical practitioners supervising the person and any reviews of the medical practitioners or healthcare professionals mentioned in subsection (4)(b) (if any) that the person is unable to perform the duties of a medical practitioner satisfactorily.

(7) A person who is or has been registered with conditional registration may —

- (a) after the expiry of the period of supervision under subsection (4)(a); and
- (b) upon the revocation or lapse of all the conditions or restrictions specified under subsection (4),

apply to the Medical Council to be registered as a fully registered medical practitioner.

(8) If the Medical Council thinks fit so to direct, having regard to the knowledge and skill shown and the experience acquired by the applicant mentioned in subsection (7), the applicant is to be registered under section 20 as a fully registered medical practitioner.

(9) On a medical practitioner with conditional registration becoming registered otherwise than conditionally, the medical practitioner's name must be removed from Part II of the Register of Medical Practitioners.

Registration of specialists

22.—(1) Subject to the provisions of this Act, any person —

- (a) who holds such postgraduate degrees or qualifications; or
- (b) who has gained such special knowledge of and skill and experience,

in a particular branch or branches of medicine, may apply to the Medical Council to be registered as a specialist.

(1A) A person may be registered under subsection (1) as a specialist subject to such conditions or restrictions as the Medical Council may impose.

(2) The Medical Council must not register any person under subsection (1) as a specialist unless the person has obtained a certificate from the Specialists Accreditation Board under section 35.

(3) The Medical Council may, with the approval of the Minister, make regulations for all or any of the following purposes:

- (a) providing for the registration of specialists in any branch of medicine;
- (b) regulating the recording in, removal from, and restoration to the Register of Specialists of the names, particulars and qualifications of persons so registered;
- (c) providing for appeals by medical practitioners against any refusal of the Medical Council to register them in the

Register of Specialists or to restore their names to that Register or against any decision of the Medical Council to remove their names from that Register;

- (d) prescribing the fees payable in respect of —
 - (i) any application for registration as a specialist;
 - (ii) any such registration as a specialist;
 - (iii) any restoration of names to the Register of Specialists; and
 - (iv) any appeal.

Registration of family physicians

22A.—(1) Subject to the provisions of this Act, any person —

- (a) who holds such postgraduate degrees or qualifications; or
- (b) who has gained such special knowledge of and skill and experience,

in family medicine, may apply to the Medical Council to be registered as a family physician in the Register of Family Physicians.

(2) A person may be registered under subsection (1) as a family physician subject to such conditions or restrictions as the Medical Council may impose.

(3) The Medical Council must not register any person under subsection (1) as a family physician unless the person has obtained a certificate from the Family Physicians Accreditation Board under section 35B.

(4) The Medical Council may, with the approval of the Minister, make regulations for all or any of the following purposes:

- (a) providing for the registration of family physicians;
- (b) regulating the recording in, removal from, and restoration to the Register of Family Physicians of the names, particulars and qualifications of persons so registered;
- (c) providing for appeals by medical practitioners against any decision of the Medical Council refusing to register them

in the Register of Family Physicians or to restore their names to that Register or against any decision of the Medical Council to remove their names from that Register;

- (d) prescribing the fees payable in respect of —
- (i) any application for registration as a family physician;
 - (ii) any such registration as a family physician;
 - (iii) any restoration of names to the Register of Family Physicians; and
 - (iv) any appeal.

Temporary registration

23.—(1) Subject to the provisions of this Act, any person —

- (a) who is in Singapore for the purpose of teaching, research or postgraduate study in medicine under such training scheme as may be approved by the Minister in any institution recognised by the Medical Council for that purpose;
- (b) who possesses medical knowledge, experience and skill which the Medical Council considers to be of international standing or are such as to have special value to the people of Singapore; or
- (c) who is not otherwise entitled to be registered as a medical practitioner under this Act but who, in the opinion of the Medical Council, possesses other qualifications which are adequate for the purposes of registration under this Act,

and who, if the person has a degree other than a Singapore degree, complies with section 26, may be registered temporarily as a medical practitioner in the Register of Temporarily Registered Medical Practitioners for so long as the person continues to engage himself exclusively in teaching, research or postgraduate study in medicine under such approved training scheme or in such medical capacity as the Medical Council may specify.

(2) Any registration under subsection (1) is for a period not exceeding 2 years which may be renewed, at the discretion of the

Medical Council, for a further period or periods each not exceeding 12 months.

(3) A person may be registered under subsection (1) subject to such conditions and restrictions as the Medical Council may impose.

Provisional registration

24.—(1) This section has effect for enabling persons desirous of obtaining certificates of experience to be employed as mentioned in section 25(1).

(2) Any person who is qualified to be registered under this Act may, for the purpose of satisfying any requirement as to experience, be provisionally registered for such duration and subject to such conditions or restrictions as the Medical Council may specify, if he produces evidence satisfactory to the Registrar that he has been selected to be engaged in such employment as is mentioned in section 25(1).

(2A) The Medical Council may cancel the provisional registration of a medical practitioner if —

- (a) he fails to comply with any of the conditions or restrictions of his provisional registration; or
- (b) the Medical Council is of the opinion, having regard to the report of one or more registered medical practitioners supervising him and the reviews (if any) of the registered medical practitioners or healthcare professionals working with him, that he is unfit or otherwise unable to practise as a medical practitioner.

(2B) The Medical Council must, before proceeding under subsection (2A), notify the registered medical practitioner concerned of its intention to cancel his provisional registration under subsection (2A) and must give the registered medical practitioner an opportunity to submit reasons why his registration should not be so cancelled.

(2C) Any person who is aggrieved by the cancellation of his registration by the Medical Council under subsection (2A) may,

within 30 days after being notified of the cancellation, appeal to the Minister whose decision is final.

(3) Any person who is provisionally registered is to be registered in the Register of Provisionally Registered Medical Practitioners and on a person becoming registered otherwise than provisionally his name must be removed from such register.

Certificate of experience in approved hospital

25.—(1) A certificate of experience must not be granted in respect of any person unless that person has been engaged in employment as a house officer or in such other similar capacity as may be approved by the Medical Council (called in this section the approved capacity) in one or more hospitals or institutions in Singapore approved by the Medical Council for a prescribed period.

(2) A person who has been employed as mentioned in subsection (1) may apply for a certificate of experience to the certifying authority, and if the certifying authority is satisfied —

- (a) that during the time the applicant has been so employed the person has been engaged for such period or minimum period as may be prescribed in medicine, in surgery and in an approved capacity; and
- (b) that the person's service while so employed has been satisfactory,

the certifying authority is to grant, in such form as may be prescribed, a certificate of experience that it is so satisfied.

(3) In subsection (2), “certifying authority” means —

- (a) the Dean of the Yong Loo Lin School of Medicine of the National University of Singapore;
- (b) the Dean of the Duke-NUS Graduate Medical School Singapore; or
- (c) such other person as may be prescribed.

Experience required for holders of degrees other than Singapore degrees

26. A person applying for registration by virtue of a degree, other than a Singapore degree, must satisfy the Medical Council that the person has —

- (a) a certificate of experience, or a certificate approved by the Medical Council as being equivalent to a certificate of experience and granted by a hospital or an institution outside Singapore that is recognised by the Medical Council for the purpose of this paragraph; or
- (b) rendered satisfactory service in any appointment which, in the opinion of the Medical Council, confers experience of the practice of medicine not less extensive than that required for a certificate of experience.

Evidence of qualification and entry of additional qualifications

27.—(1) No qualification is to be entered on a register unless the Registrar is satisfied by such evidence as the Registrar may consider proper that the person claiming the qualification is entitled to it.

(2) Every person registered under this Act, who obtains any qualification in addition to the qualification by virtue of which that person has been registered, may apply to the Medical Council to have that additional qualification inserted in a register.

(3) The Medical Council has power to decide what additional qualifications may be entered in a register.

Application for registration

28.—(1) Every application for registration under this Act must be made to the Medical Council in such manner or form and must be accompanied by such documents and particulars as the Medical Council may require.

(2) An application under subsection (1) must be accompanied by the prescribed fee.

(3) The Medical Council may refuse to register any applicant who, in the opinion of the Medical Council —

- (a) is not qualified to be registered;
- (b) is not of good reputation and character;
- (c) is unfit to practise medicine —
 - (i) because the applicant's ability to practise has been impaired by reason of the applicant's physical or mental condition; or
 - (ii) for any other reason;
- (d) has without reasonable cause failed to submit to a medical examination when required to do so under section 29(4)(b);
- (e) has had the applicant's name removed from a register of medical practitioners in any country whose degrees or licences in medicine are recognised as a qualification entitling the holder of the degree or licence to be registered under this Act; or
- (f) has failed to comply with any condition or restriction of any previous registration as may have been imposed on the applicant by the Medical Council.

(4) Where the Medical Council refuses to register an applicant, the Medical Council must by written notice inform the applicant of such refusal.

(5) Any person who is aggrieved by any refusal of the Medical Council under subsection (3) may, within one month of the notice given under subsection (4), appeal to the Minister whose decision is final.

(6) The Registrar must enter the name of a registered medical practitioner in the appropriate register.

(7) Every registered medical practitioner is, on payment of the prescribed fee, entitled to receive a certificate of registration.

Credentials Committee

29.—(1) The Medical Council is to appoint a committee called the Credentials Committee, consisting of at least 3 members of the Medical Council, to —

- (a) scrutinise all applications for registration other than applications for registration as specialists and family physicians; and
- (b) undertake such other duties as the Medical Council thinks fit to assign to the Credentials Committee.

(2) The term of office of the members of the Credentials Committee and the quorum of the Committee are to be determined by the Medical Council.

(3) The Credentials Committee may interview the applicants and make such enquiries or do anything which the Committee may think necessary or expedient for discharging its functions under this Act.

(4) Without limiting subsection (3), the Credentials Committee may, by written notice, require an applicant —

- (a) to furnish such further information, documents or particulars as the Credentials Committee may require within the time specified in the notice; or
- (b) to submit to a medical examination to be conducted by a registered medical practitioner nominated or approved by the Medical Council within such time as may be specified in the notice.

(5) The registered medical practitioner who conducts the examination mentioned in subsection (4)(b) must, within 14 days after the examination or such longer time as the Credentials Committee may allow, submit his report on the applicant's fitness to practise medicine to the Credentials Committee.

(6) Any applicant who fails to comply with a requirement under subsection (4) within the time stated in the notice is deemed to have withdrawn his application.

Publication of list of registered medical practitioners with practising certificates

30. The Registrar must publish on the Medical Council's Internet website, or on such other medium which is accessible to members of the public as the Minister may require, a list of the names, practice addresses, qualifications and dates of qualifications and registration of all registered medical practitioners who have in force a practising certificate.

Alterations in registers

31. The Registrar must —

- (a) insert in a register any alteration which may come to his knowledge in the name or address of any person registered under this Act;
- (b) insert in a register such alterations in the qualifications, additional qualifications and other particulars in the register as are required to be altered under this Act;
- (c) correct any error in any entry in a register;
- (d) remove from a register the name of any person whose name is ordered to be removed under this Act;
- (e) remove from a register the name of any person who is deceased;
- (f) remove from a register the name of any person who has not renewed his practising certificate for a continuous period of at least 2 years, and who cannot be contacted or sent any document using his particulars in the register; and
- (g) remove from a register the name of any person who has requested and shown sufficient reason for his name to be removed from that register, unless an inquiry has or proceedings have commenced under Part 7 against that person.

Power of Medical Council to remove names from registers

32.—(1) Despite the provisions of this Act, the Medical Council may, upon such evidence as it may require, order the removal from the appropriate register the name of a registered medical practitioner under any of the following circumstances:

- (a) if he has been registered with conditional registration and the conditional registration has been cancelled by the Medical Council under section 21(6);
- (b) if he has been temporarily registered under section 23 and has contravened or failed to comply with any condition or restriction imposed by the Medical Council;
- (c) if he has been registered in the Register of Specialists and —
 - (i) his name has been removed from the Register of Medical Practitioners; or
 - (ii) he has contravened or failed to comply with any condition or restriction imposed by the Medical Council under section 22;
- (ca) if he has been registered in the Register of Family Physicians and —
 - (i) his name has been removed from the Register of Medical Practitioners; or
 - (ii) he has contravened or failed to comply with any condition or restriction imposed by the Medical Council under section 22A;
- (cb) if his provisional registration has been cancelled by the Medical Council under section 24(2A);
- (d) if he has obtained registration fraudulently or by incorrect statement;
- (e) if his degree for registration under this Act has been withdrawn or cancelled by the authority through which it was acquired or by which it was awarded;

- (f) if he has had his registration in any other country withdrawn, suspended or cancelled by the authority which registered him;
- (g) if he has failed to serve the Government or such other body or organisation as directed by the Government for such period as may be specified in any undertaking given by him to the Government.

(2) The Medical Council must, before exercising its powers under subsection (1), notify the registered medical practitioner concerned of its intention to take such action and must give the registered medical practitioner an opportunity to submit reasons why his name should not be removed.

(3) Any person who is aggrieved by any order of the Medical Council under subsection (1) may, within 30 days of being notified of the order, appeal to the Minister whose decision is final.

Restoration of names removed under section 31 or 32

33.—(1) Where the name of a person has been removed from a register under section 31(f) or 32(1)(a), (b), (c), (ca), (cb) or (g), the Medical Council may, upon application by the person, if it thinks fit direct —

- (a) that the person's name be restored to the register; or
- (b) that the person be registered as a medical practitioner with conditional registration in Part II of the Register of Medical Practitioners, and section 21(4) and (6) to (9) applies accordingly.

(2) An application under subsection (1) must not be made to the Medical Council more than once in any period of 6 months by or on behalf of the medical practitioner.

(3) An application under subsection (1) must not be made to the Medical Council by or on behalf of the medical practitioner unless the medical practitioner has complied with all the terms of the order made against the medical practitioner under section 32(1), where applicable.

PART 5

SPECIALISTS ACCREDITATION BOARD

Establishment of Specialists Accreditation Board

34.—(1) There is to be a board called the Specialists Accreditation Board (called in this Part the Board) consisting of at least 8 registered medical practitioners to be appointed by the Minister.

(2) The chairman of the Board is to be appointed by the Minister from among its members.

(3) The chairman and members of the Board are appointed for a term not exceeding 3 years but may be re-appointed and may at any time be removed from office by the Minister.

(4) If any member of the Board dies, resigns or is removed from office, the Minister may fill the vacancy by the appointment of a registered medical practitioner and every person so appointed holds office for the remainder of the term for which the person's predecessor was appointed.

(5) The powers of the Board are not affected by any vacancy in its membership.

(6) At any meeting of the Board, 3 members form a quorum.

(7) At any meeting of the Board, the chairman presides and in his absence the members present must elect one of their members to preside at the meeting.

(8) If on any question to be determined by the Board there is an equality of votes, the chairman or the member presiding at the meeting has a casting vote.

(9) Subject to the provisions of this Act, the Board may determine its own procedure.

(10) The Board may appoint one or more committees consisting of such members as it thinks fit to assist the Board in carrying out its functions under this Act.

Functions of Specialists Accreditation Board

35.—(1) The functions of the Board are —

- (a) to determine the qualifications, experience and other conditions for registration as specialists under this Act;
- (b) to define specialties in medicine for the purposes of maintaining and keeping the Register of Specialists;
- (c) to determine the training programmes to be recognised for persons who intend to qualify for registration as specialists under this Act;
- (d) to grant to persons who have the qualifications or experience and who meet the conditions for registration as specialists under this Act certificates to that effect;
- (e) to recommend to the Medical Council programmes for the continuing medical education of persons who are registered as specialists under this Act; and
- (f) to advise the Medical Council on matters affecting or connected with the registration of specialists under this Act.

(1A) The Board may further subdivide the specialties in medicine into further classes of sub-specialties and this section applies, with the necessary modifications, to such sub-specialties.

(1B) A reference in this Act to a specialty is to be construed as including a reference to a sub-specialty.

(2) Any person who desires to have a certificate from the Board to certify that the person has the qualifications or experience and who meets the conditions for registration as specialists under this Act may apply to the Board.

(3) Any person who is aggrieved by the refusal of the Board to grant the certificate may, within one month of the notice of the refusal, appeal to the Minister whose decision is final.

PART 5A

FAMILY PHYSICIANS ACCREDITATION BOARD

Establishment of Family Physicians Accreditation Board

35A.—(1) There is to be a board called the Family Physicians Accreditation Board (called in this Part the Board) consisting of at least 8 registered medical practitioners to be appointed by the Minister.

(2) The chairman of the Board is to be appointed by the Minister from among its members.

(3) The chairman and members of the Board are appointed for a term not exceeding 3 years but may be re-appointed and may at any time be removed from office by the Minister.

(4) If any member of the Board dies, resigns or is removed from office, the Minister may fill the vacancy by the appointment of a registered medical practitioner and every person so appointed holds office for the remainder of the term for which the person's predecessor was appointed.

(5) The powers of the Board are not affected by any vacancy in its membership.

(6) At any meeting of the Board, 4 members form a quorum.

(7) At any meeting of the Board, the chairman presides and, in his absence, the members present must elect one of their members to preside at the meeting.

(8) If on any question to be determined by the Board there is an equality of votes, the chairman or the member presiding at the meeting has a casting vote.

(9) Subject to the provisions of this Act, the Board may determine its own procedure.

(10) The Board may appoint one or more committees consisting of such members as it thinks fit to assist the Board in carrying out its functions under this Act.

Functions of Family Physicians Accreditation Board

35B.—(1) The functions of the Board are —

- (a) to determine the qualifications, experience and other conditions for registration as a family physician under this Act;
- (b) to define the scope of family medicine for the purposes of maintaining and keeping the Register of Family Physicians;
- (c) to determine the training programmes to be recognised for persons who intend to qualify for registration as family physicians under this Act;
- (d) to grant to persons who have the qualifications or experience and who meet the conditions for registration as family physicians under this Act certificates to that effect;
- (e) to recommend to the Medical Council programmes for the continuing medical education of persons who are registered as family physicians under this Act; and
- (f) to advise the Medical Council on matters affecting or connected with the registration of family physicians under this Act.

(2) Any person who desires to have a certificate from the Board to certify that the person has the qualifications or experience and meets the conditions for registration as a family physician under this Act may apply to the Board.

(3) Any person who is aggrieved by the refusal of the Board to grant the certificate may, within one month of the notice of refusal, appeal to the Minister whose decision is final.

PART 6

PRACTISING CERTIFICATES

Practising certificates

36.—(1) Any registered medical practitioner who desires to obtain a practising certificate must make an application to the Medical Council in such form and manner as the Medical Council may require.

(2) Every application for a practising certificate must be accompanied by the prescribed fee.

(3) A practising certificate is to be granted for a period not exceeding 2 years from the date of issue of the practising certificate.

(4) Any application for renewal of a practising certificate must be made not later than one month before the expiry of the practising certificate in such form as the Medical Council may require.

(5) Any registered medical practitioner who applies for a practising certificate later than one month before the expiry of the practising certificate is liable to pay to the Medical Council such late application fee as may be prescribed by the Medical Council.

(6) The Medical Council may —

(a) refuse to grant a practising certificate to a registered medical practitioner; or

(b) refuse to renew the practising certificate of the registered medical practitioner,

if the registered medical practitioner fails to comply with any condition that is prescribed by the Medical Council with the approval of the Minister for the purposes of this section.

(7) Without limiting subsection (6) and section 70(2)(b), the Medical Council may, with the approval of the Minister, prescribe conditions that require a registered medical practitioner applying for the grant or renewal of his practising certificate to —

(a) submit such information or declaration (including statutory declaration) as the Medical Council may require;

- (b) comply with such continuing medical education requirements as may be prescribed; and
- (c) take out and maintain, or be covered by, adequate and appropriate insurance or other forms of protection with such insurers or other organisations as may be approved by the Medical Council for indemnity against loss arising from claims in respect of civil liability incurred by that practitioner in the course of his medical practice, and which meets such minimum terms and conditions as the Medical Council may determine.

Cancellation of practising certificates

37. Where a registered medical practitioner has had his name removed from a register (other than the Register of Specialists or the Register of Family Physicians) under this Act or his registration suspended, any practising certificate issued to him is deemed to be cancelled and the registered medical practitioner must immediately surrender the practising certificate to the Medical Council.

PART 7

DISCIPLINARY PROCEEDINGS, HEALTH COMMITTEE INQUIRIES AND PERFORMANCE ASSESSMENTS

Division 1 — Voluntary removal, suspension, etc.

Voluntary removal, suspension, etc.

37A.—(1) A registered medical practitioner who believes that —

- (a) his fitness to practise is impaired by reason of his physical or mental condition; or
- (b) the quality of the professional services provided by him does not meet the standard which is reasonable to expect of a medical practitioner,

may request the Medical Council to do one or more of the following:

- (i) to remove his name from any register;

- (ii) to suspend his registration in the appropriate register for a period of not more than 3 years;
- (iii) where the registered medical practitioner is a fully registered medical practitioner in Part I of the Register of Medical Practitioners, to remove his name from Part I of that Register and register him instead as a medical practitioner with conditional registration in Part II of that Register, and section 21(4) and (6) to (9) applies accordingly;
- (iv) where the registered medical practitioner is registered in any register other than Part I of the Register of Medical Practitioners, to impose appropriate conditions or restrictions on his registration;
- (v) to suspend or cancel his practising certificate.

(2) Subject to this section, if the Medical Council and the registered medical practitioner agree in writing on the action to be taken under subsection (1), the Medical Council may proceed with the agreed course of action.

(3) The Medical Council must not take any action under this section in relation to a registered medical practitioner if —

- (a) it believes that there is evidence of any matter referred to in section 39(1)(a) or (b); or
- (b) proceedings have been commenced under Division 2 against the registered medical practitioner.

(4) This section applies where the Medical Council has notified the registered medical practitioner under section 39(3)(b), except that if the Medical Council and the registered medical practitioner are unable to agree on the course of action to be taken under subsection (1)(i) to (v), the Medical Council must proceed to refer the matter to the chairman of the Complaints Panel under section 39(3)(a).

*Division 2 — Complaints and commencement of inquiry***Appointment of Complaints Panel**

38.—(1) For the purpose of enabling Complaints Committees and Disciplinary Tribunals to be constituted in accordance with this Part, the Medical Council must appoint a panel (called in this Act the Complaints Panel) consisting of —

- (a) at least 10 members of the Medical Council;
- (b) not less than 10 and not more than 100 registered medical practitioners of at least 10 years' standing who are not members of the Medical Council; and
- (c) not less than 6 and not more than 50 lay persons nominated by the Minister.

(2) The term of office of a member of the Complaints Panel referred to in subsection (1)(a) expires at the end of his term of office as member of the Medical Council, and a member of the Complaints Panel referred to in subsection (1)(b) or (c) is appointed for a term of 2 years; and any member of the Complaints Panel is eligible for re-appointment.

(3) The Medical Council may at any time remove from office any member of the Complaints Panel or fill any vacancy in its membership.

(4) The Medical Council must appoint, from among the members of the Complaints Panel who are members of the Medical Council, the chairman and the deputy chairman of the Complaints Panel.

(5) Any member of the Medical Council who is employed in the Ministry of Health is not disqualified from being a member of any Complaints Committee, Disciplinary Tribunal, Health Committee or Interim Orders Committee by reason only that he is so employed.

Complaints against registered medical practitioners, etc.

39.—(1) Any —

- (a) complaint touching on the conduct of a registered medical practitioner in his professional capacity or on his improper act or conduct which brings disrepute to his profession;

- (b) information on the conviction of a registered medical practitioner of any offence implying a defect in character which makes him unfit to practise as a medical practitioner;
- (c) complaint that the professional services provided by a registered medical practitioner are not of the quality which is reasonable to expect of him; or
- (d) information touching on the physical or mental fitness to practise of a registered medical practitioner,

must be made or referred to the Medical Council in writing and supported by such statutory declaration as the Medical Council may require, except that a statutory declaration is not required if the complaint or information is made or referred by any public officer or by the Medical Council.

(2) The Medical Council must refer every complaint or information, other than a complaint or information touching on the matters referred to in section 32, to the chairman of the Complaints Panel.

(3) The Medical Council may, on its own motion —

- (a) make a complaint or refer any information on a registered medical practitioner to the chairman of the Complaints Panel if it believes that there is evidence of any matter referred to in subsection (1); or
- (b) notify the registered medical practitioner and proceed under section 37A(1)(i) to (v) if it believes that there is evidence of any matter referred to in subsection (1)(c) or (d) and the registered medical practitioner agrees to such course of action in writing.

(4) Despite subsections (2) and (3), where a registered medical practitioner has been convicted in Singapore or elsewhere of an offence implying a defect in character which makes him unfit to practise medicine, the Medical Council may immediately refer the matter to a Disciplinary Tribunal under section 50.

Appointment of Complaints Committees

40.—(1) The chairman of the Complaints Panel may appoint one or more committees (called for the purposes of this Act Complaints Committees), each comprising —

- (a) a chairman, being a member of the Complaints Panel who is a member of the Medical Council;
- (b) a registered medical practitioner who is a member of the Complaints Panel; and
- (c) a lay person who is a member of the Complaints Panel,

to inquire into any complaint or information mentioned in section 39(1).

(2) A Complaints Committee may be appointed in connection with one or more matters or for such fixed period of time as the chairman of the Complaints Panel may think fit.

(3) The chairman of the Complaints Panel may at any time revoke the appointment of any Complaints Committee or may remove any member of a Complaints Committee or fill any vacancy in a Complaints Committee.

(4) No act done by or under the authority of a Complaints Committee is invalid in consequence of any defect that is subsequently discovered in the appointment or qualification of the members or any of them.

(5) All the members of a Complaints Committee must be present to constitute a quorum for a meeting of the Complaints Committee and any resolution or decision in writing signed by all the members of a Complaints Committee is as valid and effectual as if it had been made or reached at a meeting of the Complaints Committee where all its members were present.

(6) A Complaints Committee may meet for the purposes of its inquiry, adjourn and otherwise regulate the conduct of its inquiry as its members may think fit.

(7) The chairman of a Complaints Committee may at any time summon a meeting of the Complaints Committee.

(8) All members of a Complaints Committee present at any meeting thereof must vote on any question arising at the meeting and such question is to be determined by a majority of votes and, in the case of an equality of votes, the chairman has a casting vote.

(9) A member of a Complaints Committee, even though he has ceased to be a member of the Complaints Panel on the expiry of his term of office, is deemed to be a member of the Complaints Panel until such time as the Complaints Committee has completed its work.

Referral to Complaints Committee

41.—(1) Where any complaint or information mentioned in section 39(1)(a), (b) or (c) is made or referred by the Medical Council to the chairman of the Complaints Panel, the chairman of the Complaints Panel must lay the complaint or information before a Complaints Committee.

(2) Where any information mentioned in section 39(1)(d) is referred by the Medical Council to the chairman of the Complaints Panel, the chairman of the Complaints Panel must —

- (a) if he is satisfied, based on any evidence given in support of the information, that a formal inquiry is necessary to determine the physical or mental fitness of the registered medical practitioner to practise, refer the information to a Health Committee; or
- (b) in any other case, lay the information before a Complaints Committee.

Commencement of inquiry by Complaints Committee

42.—(1) A Complaints Committee must, within 2 weeks after its appointment, commence its inquiry into any complaint or information, or any information or evidence mentioned in section 44(5), and complete its inquiry not later than 3 months after the date the complaint or information is laid before the Complaints Committee.

(2) Where a Complaints Committee is of the opinion that it will not be able to complete its inquiry within the period specified in subsection (1) due to the complexity of the matter or serious

difficulties encountered by the Complaints Committee in conducting its inquiry, the Complaints Committee may apply in writing to the chairman of the Complaints Panel for an extension of time to complete its inquiry and the chairman may grant such extension of time to the Complaints Committee as he thinks fit.

(3) For the purposes of any inquiry, a Complaints Committee may appoint one or more investigators in accordance with section 60A to investigate the complaint or information, and the investigator may exercise any one or more of the powers under that section in carrying out the investigator's functions and duties under this Part.

(4) A Complaints Committee must —

- (a) if it is unanimously of the opinion that the complaint or information is frivolous, vexatious, misconceived or lacking in substance, dismiss the matter and give the reasons for the dismissal;
- (b) if it is unanimously of the opinion that no investigation is necessary —
 - (i) issue a letter of advice to the registered medical practitioner; or
 - (ii) refer the matter for mediation between the registered medical practitioner and the complainant; or
- (c) in any other case, direct one or more investigators to carry out an investigation and make a report to it under section 48.

Mediation

43.—(1) In referring the matter for mediation under section 42(4)(b)(ii), the Complaints Committee may order the personal attendance of the complainant and the registered medical practitioner before a mediator specified by the Complaints Committee.

(2) The mediator mentioned in subsection (1) must submit a report to the Complaints Committee on the outcome of the mediation.

(3) If the complainant refuses or fails, without reasonable cause, to comply with the order under subsection (1), the Complaints Committee may dismiss the matter.

(4) If the registered medical practitioner refuses or fails, without reasonable cause, to comply with the order under subsection (1), the Complaints Committee may proceed to make a direction under section 42(4)(b)(i) or (c).

(5) If for any reason the mediation does not take place or the matter is not amicably resolved through mediation, the Complaints Committee or another Complaints Committee appointed in its place may make any direction under section 42(4)(b)(i) or (c) as it thinks fit.

Conduct of investigation

44.—(1) An investigator directed under section 42(4)(c) to investigate any complaint or information must, if the investigator is of the opinion that a registered medical practitioner should be called upon to answer any allegation made against the practitioner, give written notice of the complaint or information to the practitioner.

(2) A notice under subsection (1) must —

(a) include copies of any complaint or information and of any statutory declaration or affidavit that have been made in support of the complaint or information; and

(b) invite the registered medical practitioner, within such period (being at least 21 days after the date of the notice) as may be specified in the notice, to give to the Complaints Committee any written explanation the practitioner may wish to offer.

(3) In the course of investigations, the Complaints Committee may authorise the investigator in writing to —

(a) in the case of a complaint mentioned in section 39(1)(c), obtain the consent of the registered medical practitioner to undergo a performance assessment in accordance with the provisions of Division 3; and

- (b) in the case of any information mentioned in section 39(1)(d), obtain the consent of the registered medical practitioner to submit to a fitness assessment in accordance with the provisions of Division 3,

and the registered medical practitioner must respond within such reasonable time as the investigator may, in the notice, specify.

- (4) If the registered medical practitioner —
 - (a) declines to undergo a performance or fitness assessment requested under subsection (3);
 - (b) having agreed to undergo such an assessment, subsequently fails to participate in the assessment or refuses to cooperate with the assessors; or
 - (c) does not respond to the notice within the time specified in subsection (3),

the investigator must make a report to the Complaints Committee under section 48 and the Complaints Committee may proceed with the inquiry and make such order as it deems fit under section 49(1) or (2).

(5) Where, in the course of an investigation, an investigator receives any information touching on, or obtains any evidence of, the conduct, physical or mental fitness, or professional performance of a registered medical practitioner other than the registered medical practitioner concerned which may give rise to proceedings under this Part, the investigator must make a report to the Complaints Committee under section 48.

(6) On receiving a report under subsection (5), the Complaints Committee may —

- (a) if it is unanimously of the opinion that the complaint or information is frivolous, vexatious, misconceived or lacking in substance, dismiss the matter and give the reasons for the dismissal; or
- (b) if it believes there is evidence of any matter referred to in section 39(1) in respect of a registered medical practitioner other than the registered medical practitioner concerned —

- (i) direct one or more investigators to carry out an investigation and make a report to it under section 48; or
- (ii) refer the matter to the chairman of the Complaints Panel and the chairman must act in accordance with section 41 by referring the complaint or information to a Health Committee or laying it before a different Complaints Committee, as the case may be.

Division 3 — Performance and fitness assessments

Performance assessment

45.—(1) If a registered medical practitioner agrees to undergo a performance assessment under section 44(3)(a), the quality of professional services provided by him must be assessed by a Performance Assessment Panel appointed by the Complaints Committee and comprising one or more suitably qualified persons as the Complaints Committee may determine.

(2) The Performance Assessment Panel will carry out the performance assessment in accordance with —

- (a) the provisions of this Division;
- (b) the practice and procedure as may be determined by the Medical Council; and
- (c) such instructions as may be issued by the Complaints Committee.

(3) The registered medical practitioner under assessment must, if required by the Performance Assessment Panel —

- (a) produce to the Panel or give the Panel access to any record or document specified by the Panel or any record or other document which is of a class or description so specified and which is in his possession or under his control being in either case a record or other document which the Panel reasonably believes is or may be relevant to the performance assessment, within such time and at such place as the Panel may reasonably require;

- (b) give to the Panel such explanation or further particulars in respect of anything produced in compliance with a requirement under paragraph (a) as the Panel may specify; and
- (c) give to the Panel all assistance in connection with the performance assessment which he is reasonably able to give.

(4) Where any information or matter relevant to a performance assessment is recorded otherwise than in a legible form, the power of a Performance Assessment Panel to require the production of any record or other document conferred under subsection (3) includes the power to require the production of a reproduction of any such information or matter or of the relevant part of it in a legible form.

(5) A Performance Assessment Panel may inspect, examine or make copies of or take any abstract of or extract from any record or document produced under subsection (3) or (4).

(6) The Performance Assessment Panel must give a report of the assessment to the Complaints Committee and, with the approval of the Complaints Committee, the registered medical practitioner.

(7) The Complaints Committee, or the investigator with the approval of the Complaints Committee, may discuss the report with the registered medical practitioner under assessment and, in the case of an adverse finding in the report, the possible ways of dealing with that finding.

Fitness assessment

46.—(1) If a registered medical practitioner agrees to submit to a fitness assessment under section 44(3)(b), his fitness to practise medicine by reason of his physical or mental condition must be assessed by a Fitness Assessment Panel appointed by the Complaints Committee and comprising one or more suitably qualified persons as the Complaints Committee may determine.

(2) The Fitness Assessment Panel will carry out the fitness assessment in accordance with —

- (a) the provisions of this Division;

- (b) the practice and procedure as may be determined by the Medical Council; and
- (c) such instructions as may be issued by the Complaints Committee.

(3) The Fitness Assessment Panel must submit a report of the assessment to the Complaints Committee and, with the approval of the Complaints Committee, provide a copy of the report to the registered medical practitioner.

(4) The Complaints Committee, or the investigator with the approval of the Complaints Committee, may discuss the report with the registered medical practitioner under assessment and, in the case of an adverse finding in the report, the possible ways of dealing with that finding.

Confidentiality of information

47.—(1) A person to whom this section applies is not compellable in any proceedings to give evidence in respect of, or to produce any document containing any information which has been obtained in the course of, a performance or fitness assessment except in the case of the following:

- (a) an inquiry by any Complaints Committee, Disciplinary Tribunal, Health Committee or Interim Orders Committee; or
- (b) a prosecution for a criminal offence.

(2) A person to whom this section applies must not disclose any information contained in any document as may have come to that person's knowledge in the course of a performance or fitness assessment unless the disclosure is made —

- (a) under or for the purpose of administering and enforcing this Act or the Infectious Diseases Act 1976; or
- (b) for any other purpose with the consent of the person to whom the information relates.

(3) This section applies to —

- (a) a member of a Performance or Fitness Assessment Panel;

- (b) the investigator mentioned in section 42(4)(c) or 44(6)(b)(i);
- (c) a member of any Complaints Committee, Disciplinary Tribunal, Health Committee or Interim Orders Committee; and
- (d) any member, officer or agent of the Medical Council.

Division 4 — Powers after investigation

Investigation report and deliberation by Complaints Committee

48.—(1) Upon completing an investigation into any complaint or information, the investigator must submit a report on the findings of the investigation to the Complaints Committee for its deliberation.

(2) The report mentioned in subsection (1) must include —

- (a) any written explanation given by the registered medical practitioner after receiving a notice under section 44(1);
- (b) any assessment report made under Division 3, if a performance or fitness assessment was undertaken; and
- (c) any recommendation on the necessity or otherwise of a formal inquiry by a Disciplinary Tribunal or Health Committee.

(3) A person must not disclose the contents of the investigation report or any information contained in any document which was obtained in the course of any investigation or inquiry commenced under this Part to any other person, including the registered medical practitioner, except where —

- (a) the Complaints Committee in its absolute discretion thinks otherwise; or
- (b) such disclosure is required for the purpose of administering and enforcing this Act or the Infectious Diseases Act 1976.

(4) The Complaints Committee may, in the course of its deliberations and before it reaches a decision, seek such legal advice as it thinks necessary.

(5) The registered medical practitioner concerned does not have the right to be heard by the Complaints Committee, whether in person or by counsel, unless the Complaints Committee in its absolute discretion otherwise allows.

Findings of Complaints Committee

49.—(1) After deliberation of the investigation report and any recommendation of an investigator made under section 48, and upon due inquiry into the complaint or information (including any information or evidence mentioned in section 44(5)), a Complaints Committee must, if it is of the view that no formal inquiry by a Disciplinary Tribunal or Health Committee is necessary —

- (a) issue a letter of advice to the registered medical practitioner;
- (b) issue a letter of warning to the registered medical practitioner;
- (c) order that the registered medical practitioner seek and undergo medical or psychiatric treatment or counselling;
- (d) order that the registered medical practitioner undertake and complete specified further education or training within a specified period;
- (e) order that the registered medical practitioner report on the status of the fitness of his physical or mental condition or on the status of his medical practice at such times, in such manner and to such persons as may be specified by the Complaints Committee;
- (f) order that the registered medical practitioner seek and take advice, in relation to the management of his medical practice, from such persons as may be specified by the Complaints Committee;
- (g) by agreement with the registered medical practitioner —
 - (i) remove the name of the registered medical practitioner from the appropriate register;

- (ii) suspend the registration of the registered medical practitioner from the appropriate register for a period of not more than 3 years;
 - (iii) where the registered medical practitioner is a fully registered medical practitioner in Part I of the Register of Medical Practitioners, remove his name from Part I of that Register and register him instead as a medical practitioner with conditional registration in Part II of that Register, and section 21(4) and (6) to (9) applies accordingly;
 - (iv) where the registered medical practitioner is registered in any register other than Part I of the Register of Medical Practitioners, impose appropriate conditions or restrictions on his registration; or
 - (v) suspend or cancel his practising certificate;
- (h) refer the matter for mediation between the registered medical practitioner and the complainant;
- (i) dismiss the complaint or matter; or
- (j) make such other order as it thinks fit.
- (2) Where a Complaints Committee determines that a formal inquiry is necessary, it must order —
- (a) that an inquiry be held by a Health Committee if the complaint, information or evidence touches on the physical or mental fitness of the registered medical practitioner to practise; or
 - (b) that an inquiry be held by a Disciplinary Tribunal.
- (3) Where a Complaints Committee has made an order under subsection (2) or (6) for a formal inquiry to be held by a Disciplinary Tribunal or Health Committee, the Medical Council must appoint a Disciplinary Tribunal or Health Committee (as the case may be) which must hear and investigate the complaint or matter.
- (4) Where a Complaints Committee has decided to issue a letter of advice to the registered medical practitioner, the chairman of the

Complaints Committee must issue the letter of advice in such terms as it thinks fit.

(5) Where a Complaints Committee has referred the matter for mediation, section 43 applies with the necessary modifications, and references in section 43(4) and (5) to section 42(4)(b)(i) or (c) are to be read as references to section 49(1) or (2), respectively.

(6) Where a registered medical practitioner in respect of whom an order is made under subsection (1)(c), (d), (e) or (f) is found by a Complaints Committee (whether it is the Complaints Committee that made the order or another Complaints Committee appointed in its place) to have failed to comply with any of the requirements imposed on him, the Complaints Committee may, if it thinks fit, order that a formal inquiry be held by a Disciplinary Tribunal or Health Committee (as the case may be) in respect of the complaint, information or evidence.

(7) Where, in the course of an inquiry, a Complaints Committee receives any information touching on, or any evidence of, the conduct of the registered medical practitioner concerned which discloses an offence under any written law, the Complaints Committee must record the information and report it to the Medical Council.

(8) Where the complainant withdraws his complaint before —

- (a) the complaint is referred to a Complaints Committee or Health Committee under this section; or
- (b) the conclusion of the inquiry into the complaint by a Complaints Committee, Disciplinary Tribunal or Health Committee,

the Medical Council may, despite such withdrawal, refer the complaint to or direct a Complaints Committee to continue the inquiry (as the case may be) and the chairman of the Complaints Panel, or the Complaints Committee, Disciplinary Tribunal or Health Committee (as the case may be) must comply with such direction as if the complaint had been made by the Medical Council.

(9) A Complaints Committee must notify the registered medical practitioner concerned and the person who made the complaint or referred the information under section 39(1) of its decision under

subsection (1) or (2) and, if it makes an order under subsection (1), the reason for making the order.

(10) A registered medical practitioner who is aggrieved by any order of a Complaints Committee under subsection (1) may, within 30 days after being notified of the determination of the Complaints Committee, appeal to the Minister whose decision is final.

(11) If the person who has made the complaint or referred any information to the Medical Council is dissatisfied with any order of a Complaints Committee under subsection (1), he may, within 30 days after being notified of the determination of the Complaints Committee, appeal to the Minister whose decision is final.

(12) If the Medical Council is dissatisfied with any order of a Complaints Committee under subsection (1) in a case where a complaint is made or any matter or information is referred to the chairman of the Complaints Panel under section 37A(4), 39(3)(a) or 44(6)(b)(ii), the Medical Council may, within 30 days after being notified of the determination of the Complaints Committee, appeal to the Minister whose decision is final.

(13) The Minister may, after considering the appeal, make —

- (a) an order affirming the determination of a Complaints Committee;
- (b) an order directing a Complaints Committee to immediately appoint one or more investigators for the purposes of carrying out an investigation under section 42(4)(c);
- (c) an order directing the Medical Council to —
 - (i) immediately appoint a Disciplinary Tribunal to hear and investigate the complaint or matter; or
 - (ii) order that an inquiry into such matter be held by a Health Committee; or
- (d) such other order as the Minister thinks fit.

(14) Every Complaints Committee must immediately report to the Medical Council its findings and the order or orders made.

*Division 5 — Disciplinary Tribunals***Disciplinary Tribunal**

50.—(1) The Medical Council may appoint one or more Disciplinary Tribunals, each comprising —

(a) a chairman, from a panel appointed by the Minister, who is —

(i) a registered medical practitioner of at least 20 years' standing;

(ii) a person who has at any time held office as a Supreme Court Judge or a Judicial Commissioner;

(iii) an advocate and solicitor of at least 15 years' standing as an advocate and solicitor; or

(iv) a Judicial Service Officer or Legal Service Officer who has in the aggregate at least 15 years of full-time employment in the Singapore Judicial Service or the Singapore Legal Service (or both);

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(b) subject to paragraph (c)(ii), at least 2 registered medical practitioners of at least 10 years' standing from among members of the Complaints Panel; and

(c) where the chairman is a registered medical practitioner —

(i) one observer from among members of the Complaints Panel who is a lay person; or

(ii) a member who is a person referred to in paragraph (a)(ii), (iii) or (iv), in lieu of one of the registered medical practitioners mentioned in paragraph (b),

to inquire into any matter in respect of which a Complaints Committee has under section 49(2)(b) ordered that a formal inquiry be held or into any matter referred to the Disciplinary Tribunal under section 39(4).

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(2) A member of a Complaints Committee inquiring into any matter concerning a registered medical practitioner must not be a member of a Disciplinary Tribunal inquiring into the same matter.

(3) The observer appointed under subsection (1)(c)(i) must not vote on any question or matter to be decided by the Disciplinary Tribunal and need not be present at every meeting of the Disciplinary Tribunal.

(4) A Disciplinary Tribunal may be appointed in connection with one or more matters or for a fixed period of time as the Medical Council may think fit.

(5) The Medical Council may at any time revoke the appointment of any Disciplinary Tribunal or may remove any member of a Disciplinary Tribunal or fill any vacancy in a Disciplinary Tribunal.

(6) Without limiting subsection (5), where, after a Disciplinary Tribunal has commenced the hearing and investigation of any matter, any member of the Disciplinary Tribunal is unable through death, illness or any other cause to continue with the hearing and investigation of the matter, the Medical Council may fill the vacancy or appoint another Disciplinary Tribunal to continue the hearing and investigation of the matter.

(7) The Disciplinary Tribunal so reconstituted or appointed under subsection (6) may, with the consent of the Medical Council and the registered medical practitioner to whom the complaint relates, and having regard to the evidence given, the arguments adduced and any order made during the proceedings before the previous Disciplinary Tribunal, hear and investigate the matter afresh.

(8) The production of any written instrument purporting to be signed by the Medical Council and making an appointment, revocation or removal referred to in this section is evidence that such appointment or revocation has been duly made.

(9) Every member of a Disciplinary Tribunal appointed under subsection (1) is to be paid such remuneration as the Medical Council may determine.

(10) No act done by or under the authority of a Disciplinary Tribunal is invalid in consequence of any defect that is subsequently

discovered in the appointment or qualification of the members or any of them.

(11) Subject to subsection (3), all members of a Disciplinary Tribunal must be personally present at any meeting thereof to constitute a quorum for the transaction of any business.

(12) Subject to subsection (3), all members of a Disciplinary Tribunal present at any meeting thereof must vote on any question arising at the meeting and such question is to be determined by a majority of votes and, in the case of an equality of votes —

- (a) where the chairman is a registered medical practitioner, the chairman has a casting vote; or
- (b) where the chairman is not a registered medical practitioner, the question is to be determined by a majority of votes of the members of the Disciplinary Tribunal who are registered medical practitioners, and if there is no such majority of votes, the question must be resolved in favour of the registered medical practitioner under inquiry.

Proceedings of Disciplinary Tribunal

51.—(1) A Disciplinary Tribunal may meet from time to time to inquire into any matter referred to it by the Medical Council and may regulate its own procedure.

(2) A member of a Disciplinary Tribunal, even though he has ceased to be a member of the Complaints Panel or panel referred to in section 50(1)(a) on the expiry of his term of office, continues to be a member of the Disciplinary Tribunal until such time as the Disciplinary Tribunal has completed its work.

(3) The registered medical practitioner concerned may appear in person or be represented by counsel.

(4) A Disciplinary Tribunal is not bound to act in a formal manner and is not bound by the provisions of the Evidence Act 1893 or by any other law relating to evidence but may inform itself on any matter in such manner as it thinks fit.

(5) A Disciplinary Tribunal may, for the purposes of any proceedings before it, administer oaths and any party to the

proceedings may take out a subpoena to testify or a subpoena to produce documents.

(6) The subpoenas referred to in subsection (5) must be served and may be enforced as if they were subpoenas issued in connection with a civil action in the General Division of the High Court.

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(7) Any person giving evidence before a Disciplinary Tribunal is legally bound to tell the truth.

(8) Witnesses have the same privileges and immunities in relation to hearings before a Disciplinary Tribunal as if such hearings were proceedings in a court of law.

(9) A Disciplinary Tribunal must carry out its work expeditiously and may apply to the Medical Council for an extension of time and for directions to be given to the Disciplinary Tribunal if the Disciplinary Tribunal fails to make its finding and order within 6 months from the date of its appointment.

(10) When an application for extension of time has been made under subsection (9), the Medical Council may grant an extension of time for such period as it thinks fit.

(11) In sections 172, 173, 174, 175, 177, 179, 182 and 228 of the Penal Code 1871, “public servant” is deemed to include a member of a Disciplinary Tribunal taking part in any investigation under this section, and in sections 193 and 228 of the Penal Code 1871, “judicial proceeding” is deemed to include any such investigation.

Reference and transfer of cases to Health Committee

52.—(1) Where, in the course of inquiring into the case of a registered medical practitioner, it appears to a Disciplinary Tribunal that his fitness to practise may be impaired by reason of his physical or mental condition, the Disciplinary Tribunal may refer that question to a Health Committee for determination.

(2) If, on a reference under this section, the Health Committee determines that the fitness of the registered medical practitioner to practise is not impaired by reason of his physical or mental condition,

the Health Committee must certify its opinion to the Disciplinary Tribunal.

(3) If, on a reference under this section, the Health Committee determines that the fitness of the registered medical practitioner to practise is impaired by reason of his physical or mental condition, the Health Committee must —

- (a) certify its opinion to the Disciplinary Tribunal; and
- (b) proceed to dispose of the case in accordance with section 58,

and the Disciplinary Tribunal ceases to exercise its function in relation to the case.

Findings of Disciplinary Tribunal

53.—(1) Where a registered medical practitioner is found by a Disciplinary Tribunal —

- (a) to have been convicted in Singapore or elsewhere of any offence involving fraud or dishonesty;
- (b) to have been convicted in Singapore or elsewhere of any offence implying a defect in character which makes him unfit for his profession;
- (c) to have been guilty of such improper act or conduct which, in the opinion of the Disciplinary Tribunal, brings disrepute to his profession;
- (d) to have been guilty of professional misconduct; or
- (e) to have failed to provide professional services of the quality which is reasonable to expect of him,

the Disciplinary Tribunal may exercise one or more of the powers referred to in subsection (2).

(2) For the purposes of subsection (1), the Disciplinary Tribunal may —

- (a) by order remove the name of the registered medical practitioner from the appropriate register;

- (b) by order suspend the registration of the registered medical practitioner in the appropriate register for a period of at least 3 months and not more than 3 years;
- (c) where the registered medical practitioner is a fully registered medical practitioner in Part I of the Register of Medical Practitioners, by order remove his name from Part I of that Register and register him instead as a medical practitioner with conditional registration in Part II of that Register, and section 21(4) and (6) to (9) applies accordingly;
- (d) where the registered medical practitioner is registered in any register other than Part I of the Register of Medical Practitioners, by order impose appropriate conditions or restrictions on his registration;
- (e) by order impose on the registered medical practitioner a penalty not exceeding \$100,000;
- (f) by writing censure the registered medical practitioner;
- (g) by order require the registered medical practitioner to give such undertaking as the Disciplinary Tribunal thinks fit to abstain in future from the conduct complained of; or
- (h) make such other order as the Disciplinary Tribunal thinks fit, including any order that a Complaints Committee may make under section 49(1).

(3) In any proceedings instituted under this Part against a registered medical practitioner consequent upon his conviction for a criminal offence, a Disciplinary Tribunal and the General Division of the High Court on appeal from any order of the Disciplinary Tribunal are to accept his conviction as final and conclusive.

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(4) Where a registered medical practitioner is not found by a Disciplinary Tribunal to have been convicted or guilty of any matter referred to in subsection (1), the Disciplinary Tribunal is to dismiss the complaint or matter.

(5) A Disciplinary Tribunal may under subsection (2) order the registered medical practitioner concerned to pay to the Medical

Council such sums as it thinks fit in respect of costs and expenses of and incidental to any proceedings before the Disciplinary Tribunal and, where applicable, an Interim Orders Committee.

(6) The General Division of the High Court has jurisdiction to tax such costs referred to in subsection (5) and any such order for costs made is enforceable as if it were ordered in connection with a civil action in the General Division of the High Court.

[40/2019]

(7) The Disciplinary Tribunal in ordering that costs be paid by the registered medical practitioner under this section may certify that costs for more than one solicitor be paid if it is satisfied that the issues involved in the proceedings are of sufficient complexity, and the certification by the Disciplinary Tribunal has the same effect as if it were a certification by a Judge in a civil action in the General Division of the High Court.

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(8) The costs and expenses mentioned in subsection (5) include —

- (a) the costs and expenses of any assessor and advocate and solicitor appointed by the Medical Council for proceedings before the Disciplinary Tribunal and the Interim Orders Committee;
- (b) such reasonable expenses as the Medical Council may pay to witnesses; and
- (c) such reasonable expenses as are necessary for the conduct of proceedings before the Disciplinary Tribunal and the Interim Orders Committee.

Orders of Disciplinary Tribunal

54.—(1) Where a registered medical practitioner, in respect of whom an order under section 53(2)(c) or (d), 59B(1)(b) or 59D(1)(d) is made, is found by a Disciplinary Tribunal (whether, in the case of an order under section 53(2)(c) or (d), it is the Disciplinary Tribunal that made the order or another Disciplinary Tribunal appointed in its place) to have failed to comply with any of the requirements imposed on him as conditions or restrictions of his registration, the Disciplinary Tribunal may, if it thinks fit, by order —

- (a) remove his name from the appropriate register; or
- (b) suspend his registration in the appropriate register for such period not exceeding 12 months as may be specified in the order.

(2) Where a Disciplinary Tribunal has made an order for suspension under subsection (1)(b) or section 53(2)(b), the Disciplinary Tribunal may make an order under section 53(2)(c) or (d), to take effect from the expiry of the current period of suspension.

(3) Where a Disciplinary Tribunal has made an order for suspension under subsection (1)(b) or section 53(2)(b) against a registered medical practitioner and he has failed to comply with that order, the Disciplinary Tribunal or another Disciplinary Tribunal appointed in its place may, if it thinks fit —

- (a) by order remove his name from the appropriate register; or
- (b) make an order under section 53(2)(c) or (d), to take effect from the expiry of the current period of suspension.

(4) Where a Disciplinary Tribunal has made an order under section 53(2)(c) or (d), the Disciplinary Tribunal or another Disciplinary Tribunal appointed in its place may revoke the order or revoke or vary any of the conditions or restrictions imposed by the order.

(5) Subsection (1) applies to a registered medical practitioner whose registration is subject to conditions or restrictions imposed by an order made under subsection (2) or (3) as it applies to a registered medical practitioner whose registration is subject to conditions or restrictions imposed by an order made under section 53(2)(c) or (d), and subsection (4) applies accordingly.

(6) Where a Disciplinary Tribunal has made an order under section 53 or this section, or has varied the conditions or restrictions imposed by an order under this section, the Registrar must immediately serve on the registered medical practitioner and on the complainant a notice of the order or the variation.

(7) Subject to subsection (8), an order made by a Disciplinary Tribunal for the removal of the name of a registered medical

practitioner from the appropriate register or for the suspension of his registration under subsection (1) or (3) or section 53(2) does not take effect until the expiry of 30 days after the order is made.

(8) On making an order for the removal of the name of a registered medical practitioner from the appropriate register or for the suspension of his registration under subsection (1) or (3) or section 53(2), a Disciplinary Tribunal, if satisfied that to do so is necessary for the protection of members of the public or would be in the best interests of the registered medical practitioner concerned, may order that his name be removed from the register or that his registration in the register be suspended immediately.

(9) Where an order under subsection (8) is made, the Registrar must immediately serve a notice of the order on the person to whom it applies and —

- (a) if that person was present or represented at the proceedings of the Disciplinary Tribunal, the order takes effect from the time the order is made; or
- (b) if that person was neither present nor represented at the proceedings of the Disciplinary Tribunal, the order takes effect from the date of service of the notice on that person.

(10) An order of a Disciplinary Tribunal, other than an order for the removal of any name or for the suspension of any registration under subsection (1) or (3) or section 53(2)(a) or (b), takes effect from the date the order is made.

(11) While any order for the suspension of any registration remains in force, the person concerned is not to be regarded as being registered, even though the person's name still appears in the register, but immediately on the expiry of such order, the person's rights and privileges as a registered medical practitioner are to be revived as from the date of such expiry provided that the medical practitioner has complied with all the terms of the order.

Appeal against order by Disciplinary Tribunal

55.—(1) A registered medical practitioner or the Medical Council who is dissatisfied with a decision of the Disciplinary Tribunal

referred to in section 53(2), (4) or (5) or 54 (called in this section the decision of the Disciplinary Tribunal) may, within 30 days after the service on the registered medical practitioner of the notice of the order, appeal to the General Division of the High Court against the order (called in this section an appeal to the General Division of the High Court).

[40/2019]

(2) A complainant who is dissatisfied with the decision of the Disciplinary Tribunal may, within 30 days after the lapse of the period for appeal in subsection (1), provided the complainant has not received notice of the Medical Council's decision to file an appeal to the General Division of the High Court, apply to a Review Committee to direct the Medical Council to file an appeal to the General Division of the High Court.

[40/2019]

(3) For the purposes of hearing applications under subsection (2), the Minister may appoint one or more Review Committees, each comprising —

- (a) one member from the panel referred to in section 50(1)(a); and
- (b) 2 members who are registered medical practitioners of at least 10 years' standing.

(4) The chairman of a Review Committee is to be appointed by the Minister from among its 3 members.

(5) A Review Committee is not bound by the rules of evidence and is to regulate its own proceedings.

(6) Upon an application under subsection (2), the Review Committee may, if it is unanimously of the opinion that there are sufficient grounds for the decision of the Disciplinary Tribunal to be appealed against to the General Division of the High Court, direct the Medical Council to file an appeal to the General Division of the High Court.

[40/2019]

(7) Before exercising its power under subsection (6), the Review Committee must give to both the Medical Council and the registered medical practitioner concerned a reasonable opportunity to make

representations in writing as to why the Review Committee should not make a direction under subsection (6).

(8) The Review Committee's decision under subsection (6) is final.

(9) If the Review Committee directs the Medical Council to file an appeal to the General Division of the High Court, the Medical Council must do so within 14 days of the receipt of the direction despite the expiry of 30 days mentioned in subsection (1).

[40/2019]

(10) An appeal under this section is to be heard by 3 Judges of the General Division of the High Court and from the decision of the General Division of the High Court there is no appeal.

[40/2019]

(11) In any appeal to the General Division of the High Court against a decision referred to in section 53(2), (4) or (5) or 54, the General Division of the High Court is to accept as final and conclusive any finding of the Disciplinary Tribunal relating to any issue of medical ethics or standards of professional conduct unless such finding is in the opinion of the General Division of the High Court unsafe, unreasonable or contrary to the evidence.

[40/2019]

(12) Despite anything in section 53 or 54, where a registered medical practitioner has appealed to the General Division of the High Court against an order referred to in section 53(2) or 54, the order does not take effect unless the order is confirmed by the General Division of the High Court or the appeal is for any reason dismissed by the General Division of the High Court or is withdrawn.

[40/2019]

Restoration of names to register

56.—(1) Where the name of a medical practitioner has been removed from a register pursuant to an order made by a Disciplinary Tribunal under section 53 or 54, the Medical Council may, upon application by the medical practitioner, if it thinks fit —

(a) restore his name to the register; or

(b) register him as a medical practitioner with conditional registration in Part II of the Register of Medical

Practitioners, and section 21(4) and (6) to (9) applies accordingly.

(2) No application for the restoration of the name of a medical practitioner to a register under this section is to be made to the Medical Council —

- (a) before the expiry of 3 years from the date of the removal;
or
- (b) more than once in any period of 12 months by or on behalf of the medical practitioner,

and unless the medical practitioner has complied with all the terms of the order made against him.

Division 6 — Health Committee

Health Committee

57.—(1) The Medical Council may appoint one or more Health Committees, each comprising at least 3 persons, of whom at least one must be a member of the Medical Council and who must be the chairman.

(2) A Health Committee must inquire into any case or matter referred to it under this Act.

(3) A Health Committee may be appointed in connection with one or more matters or for a fixed period of time as the Medical Council may think fit.

Unfitness to practise through illness, etc.

58.—(1) Where a Health Committee determines that a registered medical practitioner's fitness to practise is impaired by reason of his physical or mental condition, the Health Committee may exercise one or more of the following powers:

- (a) by order suspend his registration in the appropriate register for such period not exceeding 12 months as may be specified in the order;
- (b) where the registered medical practitioner is a fully registered medical practitioner in Part I of the Register

of Medical Practitioners, by order remove his name from Part I of that Register and register him instead as a medical practitioner with conditional registration in Part II of that Register, and section 21(4) and (6) to (9) applies accordingly;

- (c) where the registered medical practitioner is registered in any register other than Part I of the Register of Medical Practitioners, by order impose appropriate conditions or restrictions on his registration;
- (d) recommend to the Medical Council that the name of the registered medical practitioner be removed from the appropriate register;
- (e) order that he pays to the Medical Council costs and expenses of and incidental to any inquiry or hearing by the Health Committee and, where applicable, an Interim Orders Committee.

(2) Where the Medical Council accepts the recommendation of the Health Committee under subsection (1)(d), the Medical Council must by order remove the name of the registered medical practitioner from the appropriate register and that order takes effect from the date the order is made.

(3) Where a registered medical practitioner, in respect of whom an order under subsection (1)(b) or (c) or section 59B(1)(b) or 59D(1)(d) is made, is determined by a Health Committee to have failed to comply with any of the requirements imposed on him as conditions or restrictions of his registration, the Health Committee may, if it thinks fit, by order suspend his registration in the appropriate register for such period not exceeding 12 months as may be specified in the order.

(4) Where a Health Committee has made an order for suspension under subsection (1)(a) or (3), the Health Committee may make an order under subsection (1)(b) or (c), to take effect from the expiry of the current period of suspension.

(5) Where a Health Committee has made an order for suspension under subsection (1)(a) or (3) against a person and that person has

failed to comply with that order, the Health Committee may, if it thinks fit —

- (a) make a recommendation mentioned in subsection (1)(d) to the Medical Council, and subsection (2) applies accordingly; or
- (b) make an order under subsection (1)(b) or (c), to take effect from the expiry of the current period of suspension.

(6) Where a Health Committee has made an order under subsection (1)(b) or (c), the Health Committee or another Health Committee appointed in its place may, on its own motion or on the application of the Medical Council or the registered medical practitioner, revoke the order or revoke or vary any of the conditions or restrictions imposed by the order.

(7) An application under subsection (6) must not be made in respect of the same registered medical practitioner more than once in any period of 12 months.

(8) Subsection (3) applies to a registered medical practitioner whose registration is subject to conditions or restrictions imposed by an order made under subsection (4) or (5)(b) as it applies to a registered medical practitioner whose registration is subject to conditions or restrictions imposed by an order made under subsection (1)(b) or (c), and subsection (5) applies accordingly.

(9) Where a Health Committee has made an order (including a revocation of the order or a revocation or variation of any condition or restriction imposed by the order) under this section, the Registrar must immediately serve on the person to whom the order applies a notice of the order or of the revocation or variation.

(10) While a person's registration in the register is suspended by virtue of this section, he is to be treated as not being registered in the register even though his name still appears in it.

(11) Sections 50(9), (10), (11) and (12)(a) and 51 apply, with the necessary modifications, to a Health Committee and references to a Disciplinary Tribunal are to be read as references to a Health Committee.

(12) Any person who is aggrieved by an order (including a revocation of the order or a revocation or variation of any condition or restriction imposed by the order) made under this section may, within 30 days after the service on him of the notification of the order, appeal to the Minister whose decision is final.

(13) Any order (including a revocation of the order or a revocation or variation of any condition or restriction imposed by the order) made under this section takes effect from the date the order, revocation or variation is made unless the Minister decides otherwise.

Restoration of names removed on recommendation of Health Committee

59.—(1) Where the name of a person has been removed from a register on the recommendation of a Health Committee under section 58, the Medical Council may, upon application by the person, if it thinks fit —

- (a) restore his name to the register; or
- (b) register him as a medical practitioner with conditional registration in Part II of the Register of Medical Practitioners, and section 21(4) and (6) to (9) applies accordingly.

(2) No application under subsection (1) in respect of the same person is to be made to the Medical Council more than once in any period of 12 months.

(3) No application under subsection (1) in respect of a person is to be made to the Medical Council unless that person has complied with all the terms of the order made against him.

Division 7 — Interim Orders Committees

Interim Orders Committee

59A.—(1) The Medical Council may appoint one or more committees each comprising 3 of its members, called for the purposes of this Act Interim Orders Committees, to inquire into any matter referred by the Medical Council under subsection (3).

(2) An Interim Orders Committee may be appointed in connection with one or more matters or for a fixed period of time.

(3) The chairman of the Complaints Panel, or a Complaints Committee, Disciplinary Tribunal or Health Committee may refer any complaint or information to the Medical Council for the purpose of determining if an order should be made under section 59B(1), and the Medical Council must refer the complaint or information to an Interim Orders Committee for this purpose.

(4) Neither the chairman of the Complaints Panel nor a member of a Complaints Committee, Disciplinary Tribunal or Health Committee inquiring into any matter is to be a member of an Interim Orders Committee inquiring into or reviewing the same matter.

(5) A member of an Interim Orders Committee inquiring into or reviewing any matter must not be a member of a Complaints Committee or Disciplinary Tribunal inquiring into the same matter, or take part in any deliberation of the Medical Council under section 58 in respect of the same matter.

(6) All members of an Interim Orders Committee must vote on any question arising at a meeting of the Interim Orders Committee and such question is to be determined by a majority of votes.

(7) A member of an Interim Orders Committee which has commenced any inquiry or review of any case or matter, even though he has ceased to be a member of the Medical Council, continues to be a member of the Interim Orders Committee until completion of that inquiry or review.

(8) Sections 50(9), (10), (11) and (12)(a) and 51(1), (4) to (8) and (11) apply, with the necessary modifications, to an Interim Orders Committee and to proceedings before it as they apply to a Disciplinary Tribunal and to proceedings before a Disciplinary Tribunal.

Interim orders

59B.—(1) Where, upon due inquiry into any complaint or information referred to it, an Interim Orders Committee is satisfied that it is necessary for the protection of members of the public or is

otherwise in the public interest, or is in the interests of the registered medical practitioner concerned, that his registration be suspended or be made subject to conditions or restrictions, the Interim Orders Committee may make an order —

- (a) that his registration in the appropriate register be suspended for such period not exceeding 18 months as may be specified in the order (called in this Part an interim suspension order); or
- (b) that his registration be conditional on his compliance, during such period not exceeding 18 months as may be specified in the order, with such conditions or restrictions so specified as the Interim Orders Committee thinks fit to impose (called in this Part an interim restriction order).

(2) The Registrar must immediately serve a notice of the order made under subsection (1) on the registered medical practitioner, and such order takes effect from the date the order is made.

Review of interim orders

59C.—(1) Subject to subsection (2), where an Interim Orders Committee has made an order under section 59B(1), the Interim Orders Committee or another Interim Orders Committee appointed in its place —

- (a) must review the order within the period of 6 months beginning on the date on which the order was made, and must, for so long as the order continues in force, further review it before the end of the period of 3 months beginning on the date of the decision of the immediately preceding review; and
- (b) may review the order where new evidence relevant to the order has become available after the making of the order.

(2) Where the General Division of the High Court has extended the order under section 59F(2) or an Interim Orders Committee has made a replacement order under section 59D(1)(c) or (d), the first review after such extension or making of the replacement order must take place —

- (a) if the order (or the order which has been replaced) had not been reviewed under subsection (1), within the period of 6 months beginning on the date on which the General Division of the High Court ordered the extension or on which the replacement order was made, as the case may be; or
- (b) if it had been reviewed under subsection (1), within the period of 3 months beginning on the date on which the General Division of the High Court ordered the extension or on which the replacement order was made.

[40/2019]

Interim Orders Committee may revoke, vary or replace interim order

59D.—(1) Where an interim suspension order or an interim restriction order has been made under this section or section 59B(1) in relation to any person, the Interim Orders Committee that made the order or another Interim Orders Committee appointed in its place may, either upon its review referred to in section 59C or upon the recommendation of a Complaints Committee, Disciplinary Tribunal or Health Committee —

- (a) revoke the order or revoke any condition or restriction imposed by the order;
- (b) make an order varying any condition or restriction imposed by the order;
- (c) if satisfied that to do so is necessary for the protection of members of the public or is otherwise in the public interest, or is in the interests of the registered medical practitioner concerned, or that the registered medical practitioner has not complied with any requirement imposed as a condition or restriction of his registration in the interim restriction order, replace that order with an interim suspension order having effect for the remainder of the period of the former; or

(d) if satisfied that the public interest or the interests of the registered medical practitioner concerned would be more adequately served by an interim restriction order, replace the interim suspension order with an interim restriction order having effect for the remainder of the period of the former.

(2) The Registrar must immediately serve a notice of the decision under subsection (1) on the registered medical practitioner, and such order takes effect from the date the order is made.

Right of hearing

59E.—(1) No order under section 59B(1) or 59D(1)(b), (c) or (d) is to be made by an Interim Orders Committee in respect of any registered medical practitioner unless he has been given an opportunity of appearing before the Interim Orders Committee and being heard on the question whether such an order should be made in his case.

(2) For the purposes of subsection (1), the registered medical practitioner may be represented before the Interim Orders Committee by counsel.

(3) Regulations made for the purposes of an Interim Orders Committee may include provisions securing that the registered medical practitioner in respect of whom an interim suspension order or an interim restriction order has been made is, if he so requires, entitled to be heard by the Interim Orders Committee on each occasion when it reviews the order, and be represented by counsel during such review.

Application to General Division of High Court

59F.—(1) The Medical Council may apply to the General Division of the High Court for an extension of the period for which an order made under section 59B(1) or 59D(1)(c) or (d) has effect, and may apply again for further extensions.

[40/2019]

(2) On such an application, the General Division of the High Court may extend (or further extend) for up to 12 months the period for which the order has effect.

[40/2019]

(3) The General Division of the High Court may, on application by the registered medical practitioner concerned —

- (a) in the case of an interim suspension order, revoke the order;
- (b) in the case of an interim restriction order, revoke the order or vary any condition or restriction imposed by the order; or
- (c) in either case, substitute for the period specified in the order (or in the order extending it) some other period which could have been specified in the order when it was made (or in the order extending it).

[40/2019]

Duration of interim orders

59G.—(1) An interim suspension order or an interim restriction order is in force until the earlier of the following:

- (a) the end of the period specified —
 - (i) in the order; or
 - (ii) if the period is extended under section 59F(2), in the order extending it;
- (b) the date on which the relevant proceedings are concluded.

(2) For the purposes of subsection (1)(b), the relevant proceedings are concluded if —

- (a) the Complaints Committee inquiring into the complaint or information has made an order under section 49(1) and —
 - (i) no appeal to the Minister under section 49(10) or (11) was made against that decision within the period specified in that section or such an appeal was withdrawn; or

- (ii) the Minister made an order under section 49(13)(a) or (d);
- (b) the Disciplinary Tribunal inquiring into the complaint or information has made an order under section 53(2) which has taken effect, or has dismissed the complaint or matter under section 53(4); or
- (c) the Health Committee inquiring into the matter has made an order under section 58(1) which has taken effect, the Medical Council has made an order under section 58(2) which has taken effect, or the Health Committee has dismissed the complaint or matter,

as the case may be.

Person suspended under interim suspension order not regarded as registered

59H.—(1) While a person's registration in the register is suspended by virtue of an interim suspension order, the person is not to be regarded as being registered even though the person's name still appears in the register.

(2) Immediately upon the expiry or revocation of the interim suspension order, the person's rights and privileges as a registered medical practitioner are to be revived from the date of such expiry or revocation, provided that the person has complied with all the terms of the order.

(3) To avoid doubt, sections 39 to 54, 57 and 58 continue to apply to a person whose registration in the register is suspended by virtue of an interim suspension order.

Division 8 — Appointment of legal counsel

Medical Council may appoint legal counsel

59I. For the purposes of an inquiry under this Part by any Disciplinary Tribunal, Health Committee or Interim Orders Committee, the Medical Council may appoint an advocate and solicitor and pay the advocate and solicitor, as part of the expenses of

the Medical Council, such remuneration as the Medical Council may determine.

PART 8

GENERAL

Application of funds of Medical Council

60.—(1) All fees, penalties and other moneys payable under this Act must be paid to the Medical Council and any fee, penalty or other moneys not paid may be recoverable by the Medical Council as a debt due to the Medical Council.

(2) All moneys received by the Medical Council or the Registrar must be paid into the funds of the Medical Council.

(3) The costs and expenses of and incidental to the performance of the functions of the Medical Council, the Complaints Committees, the Disciplinary Tribunals, the Health Committee and any other committee appointed by the Medical Council under this Act must be paid by the Medical Council out of its funds.

(4) The Minister may pay into the funds of the Medical Council such sum of money out of moneys to be provided by Parliament as the Minister may determine.

(4A) The Medical Council may invest moneys belonging to its funds in accordance with the standard investment power of statutory bodies as defined in section 33A of the Interpretation Act 1965.

Investigators

60A.—(1) The Medical Council may, in writing, appoint a member or an employee of the Medical Council, a public officer or any other person as an investigator, subject to such conditions and limitations as the Medical Council may specify —

(a) to investigate the commission of an offence under this Act;
or

(b) to carry out an investigation under Part 7.

- (2) An investigator may, for the purposes of subsection (1) —
- (a) by order in writing require any person —
- (i) to furnish any information within that person's knowledge; or
- [S 759/2022]*
- (ii) to produce any book, document, paper or other record, or any article or thing which may be in that person's custody or possession and which may be related to or be connected with the subject matter of the investigation for inspection by the investigator and for making copies thereof, or to provide copies of such book, document, paper or other record,
- and may, if necessary, further require such person to attend at a specified time and place for the purpose of complying with sub-paragraph (i) or (ii);
- [S 759/2022]*
- (b) by order in writing require the attendance before the investigator of any person who, from any information given or otherwise, appears to be acquainted with the facts and circumstances of the matter under investigation;
- (c) examine orally any person apparently acquainted with the facts and circumstances of the matter under investigation, and to reduce into writing the answer given or statement made by that person who is bound to state truly the facts and circumstances with which that person is acquainted, and the statement made by that person must be read over to that person and must, after correction, be signed by that person; and
- (d) without warrant enter, inspect and search during regular business hours any premises which are used or proposed to be used, or in respect of which there is reasonable cause to believe are being used by the registered medical practitioner who is under investigation to carry out the practice of medicine and may —

- (i) inspect and make copies of and take extracts from, or require the registered medical practitioner or the person having the management or control of the premises to provide copies of or extracts from, any book, document, record or electronic material relating to the affairs of the premises or the facilities or services provided or the practices or procedures being carried out at the premises;
- (ii) inspect any apparatus, appliance, equipment or instrument used or found on the premises;
- (iii) inspect, test, examine, take and remove any chemical, pharmaceutical or any other substance found on the premises;
- (iv) inspect, test, examine, take and remove any container, article or other thing that the investigator reasonably believes to contain or to have contained any chemical, pharmaceutical or any other substance found on the premises;
- (v) inspect any test or procedure performed or carried out on the premises;
- (vi) take such photographs or video recording as the investigator thinks necessary to record the premises or part of the premises, including any apparatus, appliance, equipment, instrument, article, book, document or record found on the premises; and
- (vii) seize and remove from the premises any book, record, document, apparatus, equipment, instrument, material, chemical, pharmaceutical or any other substance which the investigator reasonably believes to be the subject matter of, or to be connected with, an investigation under subsection (1)(a) or (b).

- (3) Any person who —
- (a) intentionally offers any resistance to or wilfully delays an investigator in the exercise of any power under subsection (2); or
 - (b) fails to comply with any requisition or order of an investigator under subsection (2),

shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$5,000 or to imprisonment for a term not exceeding 6 months or to both.

(4) In this section, “record” includes the medical record of any person.

Assessor to Medical Council

61.—(1) For the purposes of advising the Medical Council or any Complaints Committee, Disciplinary Tribunal, Health Committee or Interim Orders Committee in proceedings before any of them under the provisions of this Act, the Medical Council may appoint an assessor to the Medical Council who is an advocate and solicitor of at least 10 years’ standing.

(2) Any assessor appointed under this section must not participate or sit in any deliberations of the Medical Council or any Complaints Committee, Disciplinary Tribunal, Health Committee or Interim Orders Committee unless invited to do so, and the assessor’s participation must be limited only to questions of law arising from the proceedings.

(3) The Medical Council may pay to persons appointed to act as assessors such remuneration, to be paid as part of the expenses of the Medical Council, as the Medical Council may determine.

Fraudulent registration

- 62.** Any person who —
- (a) procures or attempts to procure registration or a certificate of registration as a medical practitioner or a practising certificate under this Act by knowingly making or producing or causing to be made or produced any false

or fraudulent declaration, certificate, application or representation, whether in writing or otherwise;

- (b) wilfully makes or causes to be made any false entry in any register maintained under this Act;
- (c) forges or alters any certificate of registration as a medical practitioner or any practising certificate issued under this Act;
- (d) fraudulently or dishonestly uses as genuine any certificate of registration as a medical practitioner or any practising certificate which the person knows or has reason to believe is forged or altered; or
- (e) buys, sells or fraudulently obtains a certificate of registration as a medical practitioner or any practising certificate issued under this Act,

shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$10,000 or to imprisonment for a term not exceeding 2 years or to both.

Medical practitioner not to practise during suspension from practice

63.—(1) A registered medical practitioner whose registration in the appropriate register is suspended under Part 7 must not practise medicine or act as a medical practitioner during his suspension.

(2) Any registered medical practitioner who contravenes subsection (1) shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$10,000 or to imprisonment for a term not exceeding 2 years or to both.

Medical practitioner to use only qualifications entered in register and approved title, etc.

64.—(1) A registered medical practitioner must not —

- (a) use or exhibit or publish in any card, letter, stationery, nameplate, signboard, placard, circular, handbill or any notice displayed at the premises used by him for the practice of medicine any qualification other than the

qualifications which are entered in any register kept under this Act or which has been approved by the Medical Council; or

- (b) use any title, addition or designation other than the title, addition or designation which has been approved by the Medical Council.

(2) Any registered medical practitioner who contravenes subsection (1) may be subject to disciplinary proceedings under this Act.

False assumption of title of specialist or family physician

65.—(1) A registered medical practitioner who is not registered under section 22 as a specialist in a branch of medicine must not —

- (a) practise medicine or that branch of medicine under the style or title of a specialist in that branch of medicine, or under any name, title, addition or description implying that he is such a specialist or has any degree, qualification or experience in that branch of medicine; or
- (b) advertise or hold himself out as a specialist in that branch of medicine.

(1A) A registered medical practitioner who is not registered under section 22A as a family physician must not —

- (a) practise under any name, title, addition or description implying that he is registered under that section as a family physician or has any degree, qualification or experience that could make him eligible for such registration; or
- (b) advertise or hold himself out as being registered as a family physician.

(2) A registered medical practitioner who contravenes subsection (1) or (1A) may be subject to disciplinary proceedings under this Act.

Exemption

66. All ships' surgeons while in discharge of their duties relating to the treatment of cabin crew and passengers on board are —

- (a) exempted from registration and from compliance with section 13 relating to practising certificate; and
- (b) entitled to all the privileges of registered medical practitioners under this Act.

Composition of offences

66A.—(1) The Medical Council may compound any offence under this Act that is prescribed as a compoundable offence by collecting from a person reasonably suspected of having committed the offence a sum not exceeding the lower of the following:

- (a) one-half of the amount of the maximum fine that is prescribed for the offence;
- (b) \$5,000.

(2) On payment of the sum of money, no further proceedings are to be taken against that person in respect of the offence.

(3) The Medical Council may, with the approval of the Minister, make regulations to prescribe the offences which may be compounded.

(4) All sums collected under this section must be paid into the funds of the Medical Council.

Duty of medical practitioner to inform Medical Council of medical practitioners who are unfit to practise

67.—(1) A registered medical practitioner who treats or attends to another registered medical practitioner who is, in the opinion of the medical practitioner treating or attending to him, unfit to practise as a medical practitioner by reason of his mental or physical condition must inform the Medical Council accordingly.

(2) Any registered medical practitioner who fails to comply with subsection (1) may be subject to disciplinary proceedings under this Act.

No action in absence of bad faith

68. No action or proceedings shall lie against the Medical Council, a Complaints Committee, a Disciplinary Tribunal, the Health Committee or any other committee appointed by the Medical Council or any member or employee thereof for any act or thing done under this Act unless it is proved to the court that the act or thing was done in bad faith or with malice.

Power to amend, vary, rescind, revoke or suspend condition or restriction

68A. To avoid doubt, the power of the Medical Council to impose a condition or restriction under Parts 4, 5 and 5A includes, unless the contrary intention appears, the power to amend, vary, rescind, revoke or suspend such condition or restriction.

Jurisdiction of court

69. A Magistrate's Court or a District Court has jurisdiction to hear and determine all offences under this Act and, despite anything to the contrary in the Criminal Procedure Code 2010, has power to impose the full penalty or punishment in respect of the offence.

Regulations

70.—(1) Subject to the provisions of this Act, the Medical Council may, with the approval of the Minister, make such regulations as may be necessary or expedient to give effect to the provisions and purposes of this Act and for the due administration of this Act.

(2) Without limiting subsection (1), the Medical Council may, with the approval of the Minister, make regulations —

- (a) prescribing the time, place and procedure for the election of members of the Medical Council;
- (b) regulating the grant and renewal of practising certificates, including prescribing conditions for such grant and renewal;
- (c) regulating the registration of medical practitioners;

- (d) prescribing the procedure of any committee appointed by the Medical Council under this Act and the conduct of any proceedings by such committee;
- (e) enabling a Disciplinary Tribunal, the Health Committee and an Interim Orders Committee to order and give discovery and inspection of documents for the purpose of any proceedings before them;
- (f) regulating the professional practice, etiquette, conduct and discipline of registered medical practitioners;
- (g) prescribing the forms necessary for the administration of this Act;
- (h) regulating the removal and restoration of names in any register kept under this Act;
- (i) prescribing the duties and functions of the assessor to the Medical Council;
- (j) prescribing the fees including, in the case of a practising certificate under this Act, a late application fee for late applications and other charges for the purposes of this Act;
- (k) prescribing the penalties for failure to comply with the provisions of this Act; and
- (l) generally providing for such other matters as may be necessary or expedient for carrying out the provisions of this Act.

(3) Regulations made under this Act may make different provisions for different classes of persons and different circumstances.

Amendment of Schedules

71. The Minister may, after consultation with the Medical Council, by order amend the First or Second Schedule.

PART 9

SAVING AND TRANSITIONAL PROVISIONS

Persons who are already registered

72.—(1) Every person who is registered under the provisions of the repealed Medical Registration Act (Cap. 174, 1985 Revised Edition) (called in this Part the repealed Act) immediately before 3 April 1998 is upon that date deemed to be a registered medical practitioner under the provisions of this Act.

(2) The Registrar is to —

- (a) transfer to Part I of the Register of Medical Practitioners the names, addresses, qualifications and any other particulars of all medical practitioners registered pursuant to section 9(1)(a) of the repealed Act which appear, immediately before 3 April 1998, in the register kept under that Act;
- (b) transfer to Part II of the Register of Medical Practitioners the names, addresses, qualifications and any other particulars of all medical practitioners registered pursuant to section 9(1)(b) and (c) of the repealed Act which appear, immediately before 3 April 1998, in the register kept under that Act;
- (c) transfer to the Register of Provisionally Registered Medical Practitioners the names, addresses, qualifications and any other particulars of all persons provisionally registered pursuant to section 13 of the repealed Act which appear, immediately before 3 April 1998, in the Register of Provisional Medical Registration kept under that Act; and
- (d) transfer to the Register of Temporarily Registered Medical Practitioners the names, addresses, qualifications and any other particulars of persons registered for a limited period pursuant to section 9(3) of the repealed Act which appear, immediately before 3 April 1998, in the register kept under that Act.

(3) In transferring the names under subsection (2), the Registrar may omit the names of any person known to the Registrar to be deceased.

(4) Section 47 also applies to any person whose name was removed from or struck off the register kept under the repealed Act.

Pending disciplinary proceedings

73.—(1) This Act does not apply to any inquiry, investigation or other proceedings of a disciplinary nature commenced before 3 April 1998 and the repealed Act continues to apply to that inquiry, investigation or proceedings as if this Act had not been enacted.

(2) Where on 3 April 1998 any matter is in the course of being investigated by the Preliminary Proceedings Committee, the Preliminary Proceedings Committee continues to exist to complete the investigation and may make such order, ruling or direction as it could have made under the powers conferred upon it by the repealed Act.

(3) Any order, ruling or direction made or given by the Medical Council pursuant to the repealed Act is treated as an order, a ruling or a direction under this Act and has the same force and effect as if it had been made or given by the Medical Council pursuant to the powers vested in the Medical Council under this Act.

(4) Nothing in this section is taken as prejudicing section 16 of the Interpretation Act 1965.

Term of office of member appointed or elected to take place of existing member

74.—(1) Despite section 4(2), a person appointed or elected after 24 January 2003 as a member of the Medical Council to take the place of a member of the Medical Council who was appointed or elected before that date and whose term of office has expired, holds office for a term that is determined by the Minister by order in the *Gazette*.

(2) The Minister may determine a term of office that is at least 6 months and not more than 40 months.

Transitional provisions

75.—(1) A lay person who was appointed as a member of the Complaints Panel before 24 January 2003, and whose term has not expired by that date, is deemed, for the purposes of section 38(1)(c), to have been nominated by the Minister for such appointment and continues to be a member of the Complaints Panel until the date of expiry of that term.

(2) Despite sections 20, 21 and 23, the Minister may, subject to such conditions as the Minister may determine, by regulations exempt any person or person within a class of persons who, at any time on or before 24 January 2003, was engaged as a house officer, or in such other similar capacity as may be approved by the Medical Council, in a hospital or an institution approved by the Medical Council under section 25, from the requirement that the person must —

- (a) in the case of section 20(1), hold a certificate of experience;
- (b) in the case of section 20(2), 21(1) or 23, comply with section 26; or
- (c) in the case of section 21(2), hold a certificate referred to in paragraph (b) of that subsection,

before the person may be registered.

FIRST SCHEDULE

Sections 2, 20(1A) and 71

SINGAPORE DEGREE

1. Licentiate in medicine and surgery of the King Edward VII College of Medicine, Singapore.
2. Degree in medicine and surgery of the University of Malaya in Singapore.
3. Degree in medicine and surgery of the University of Singapore.
4. Degree in medicine and surgery of the Yong Loo Lin School of Medicine (formerly known as the Faculty of Medicine), National University of Singapore.
5. Doctor of Medicine of the Duke-NUS Graduate Medical School Singapore.

FIRST SCHEDULE — *continued*

6. Degree in medicine and surgery of the Lee Kong Chian School of Medicine, Nanyang Technological University — Imperial College London.

[S 404/2014]

SECOND SCHEDULE

Sections 21(1) and (3) and 71

LIST OF REGISTRABLE BASIC MEDICAL QUALIFICATIONS

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Country or region</i>	<i>Body Granting Qualifications</i>	<i>Qualifications</i>
Australia	1. Australian National University, ANU Medical School	MB BS, MChD
	2. Monash University, Faculty of Medicine, Nursing and Health Sciences	MB BS, MD
	3. The University of Adelaide, Faculty of Health Sciences	MB BS
	4. The University of Melbourne, Melbourne Medical School	MB BS, MD
	5. The University of Queensland, School of Medicine	MB BS, Doctor of Medicine AQF Level 9 Masters (Extended)
	6. The University of Sydney, Sydney Medical School	MB BS, MD
	7. The University of Western Australia, Faculty of Medicine, Dentistry and Health Sciences	MB BS, MD

SECOND SCHEDULE — *continued*

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Country or region</i>	<i>Body Granting Qualifications</i>	<i>Qualifications</i>
	8. University of New South Wales, Faculty of Medicine	MB BS, BMed MD
Austria	1. Medizinische Universität Wien	Dr.med.univ.
Belgium	1. Katholieke Universiteit Leuven, Faculteit Geneeskunde	Arts (Physician)
Canada	1. McGill University, Faculty of Medicine	MD, CM
	2. McMaster University, Michael G. DeGroot School of Medicine	MD
	3. Université de Montréal, Faculty of Medicine	MD
	4. University of Alberta, Faculty of Medicine and Dentistry	MD
	5. University of British Columbia, Faculty of Medicine	MD
	6. University of Calgary, Cumming School of Medicine	MD
	7. University of Toronto, Faculty of Medicine	MD
Denmark	1. Aarhus Universitet, Det Sundhedsvidenskabelige Fakultet	Candidatus Medicinae
Finland	1. University of Helsinki, Faculty of Medicine	Licentiate in Medicine
France	1. Sorbonne University, Faculty of Medicine	Docteur en Médecine

SECOND SCHEDULE — *continued*

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Country or region</i>	<i>Body Granting Qualifications</i>	<i>Qualifications</i>
Germany	1. Charité- Universitätsmedizin Berlin	Zeugnis über die Ärztliche Prüfung
	2. Ludwig-Maximilians- Universität, München Medizinische Fakultät	Zeugnis über die Ärztliche Prüfung
	3. Ruprecht-Karls- Universität Heidelberg, Medizinische Fakultät Heidelberg	Zeugnis über die Ärztliche Prüfung
Hong Kong Special Administrative Region, People's Republic of China	1. The Chinese University of Hong Kong, Faculty of Medicine	MB ChB
	2. The University of Hong Kong, Li Ka Shing Faculty of Medicine	MB BS
India	1. All-India Institute of Medical Sciences, New Delhi	MB BS
	2. Christian Medical College, Vellore	MB BS
Ireland	1. The University of Dublin, Trinity College Dublin, School of Medicine	MB BCh BAO
Japan	1. Kyoto University, Faculty of Medicine	Igaku (Bachelor of Medicine)
	2. Osaka University, Faculty of Medicine	Igaku (Bachelor of Medicine)
	3. The University of Tokyo, School of Medicine	Igaku (Bachelor of Medicine)
Malaysia	1. Universiti Kebangsaan Malaysia (Kuala Lumpur), Faculty of Medicine	Doktor Perubatan

SECOND SCHEDULE — *continued*

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Country or region</i>	<i>Body Granting Qualifications</i>	<i>Qualifications</i>
	2. Universiti Malaya (Kuala Lumpur), Faculty of Medicine	MB BS
Netherlands	1. Erasmus Universiteit Rotterdam, Erasmus University Medical Centre (Erasmus MC)	Arts
	2. Leiden University, Leiden University Medical Centre (LUMC)	Arts
	3. University of Amsterdam, Academic Medical Centre (AMC)	Arts
	4. Utrecht University, Faculty of Medicine - UMC Utrecht	Arts
New Zealand	1. The University of Auckland, Faculty of Medical and Health Sciences	MB ChB
	2. University of Otago, Faculty of Medicine	MB ChB
People's Republic of China	1. Fudan University, Shanghai Medical College	Doctor of Medicine
	2. Peking University Health Science Centre (PUHSC)	Master of Medicine, Doctor of Medicine
	3. Shanghai Jiao Tong University, School of Medicine	Doctor of Medicine
	4. Tsinghua University, Peking Union Medical College (PUMC)	Doctor of Medicine

SECOND SCHEDULE — *continued*

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Country or region</i>	<i>Body Granting Qualifications</i>	<i>Qualifications</i>
South Korea	1. Seoul National University, College of Medicine	Eui-haksa
	2. Yonsei University, College of Medicine (Seoul)	Eui-haksa, Euimoo-suksa
Spain	1. Universidad de Barcelona, Facultad de Medicina	Licenciado en Medicina y Cirugia, Graduado en Medicina
Sweden	1. Karolinska Institutet	Lakarexamen
	2. Lunds Universitet, Medicinska Fakulteten	Lakarexamen
	3. Uppsala Universitet, Medicinska Fakulteten	Lakarexamen
Switzerland	1. Universitat Basel, Medizinische Fakultat	Diplome Federal
	2. Universitat Bern, Medizinische Fakultat	Diplome Federal
	3. Universitat Zurich, Medizinische Fakultat	Diplome Federal
	4. Université de Geneve, Faculté de Médecine	Diplome Federal
Taiwan	1. National Taiwan University, College of Medicine (Taipei)	Doctor of Medicine
United Kingdom	1. Cardiff University, School of Medicine	MB BCH
	2. Imperial College London, School of Medicine	MB BS
	3. The University of Edinburgh, Edinburgh Medical School	MB ChB

SECOND SCHEDULE — *continued*

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Country or region</i>	<i>Body Granting Qualifications</i>	<i>Qualifications</i>
	4. The University of Manchester, Faculty of Biology, Medicine and Health	MB ChB
	5. The University of Sheffield, The Medical School	MB ChB
	6. University of Birmingham, School of Medicine	MB ChB
	7. University of Bristol, Bristol Medical School	MB ChB
	8. University of Cambridge, School of Clinical Medicine	MB BChir
	9. University of Dundee, School of Medicine	MB ChB
	10. University of Glasgow, School of Medicine	MB ChB
	11. University of Leicester, School of Medicine	MB ChB
	12. University of Liverpool, School of Medicine	MB ChB
	13. University of London, King's College London, GKT School of Medical Education	MB BS
	14. University of London, Queen Mary University of London, Barts and The London School of Medicine and Dentistry	MB BS
	15. University of London, St. George's University of	MB BS

SECOND SCHEDULE — *continued*

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Country or region</i>	<i>Body Granting Qualifications</i>	<i>Qualifications</i>
	London, St. George's Hospital Medical School	
	16. University of London, University College London, UCL Medical School	MB BS
	17. University of Nottingham, School of Medicine	BMBS
	18. University of Oxford, Medical Sciences Division	BM BCH
	19. University of Southampton, Faculty of Medicine	BM, BM BS
United States of America	1. Baylor College of Medicine	MD
	2. Boston University, School of Medicine	MD
	3. Columbia University, Vagelos College of Physicians and Surgeons	MD
	4. Duke University, School of Medicine	MD
	5. Emory University, School of Medicine	MD
	6. Geisel School of Medicine at Dartmouth	MD
	7. Harvard Medical School	MD
	8. Icahn School of Medicine at Mount Sinai	MD

SECOND SCHEDULE — *continued*

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Country or region</i>	<i>Body Granting Qualifications</i>	<i>Qualifications</i>
	9. Johns Hopkins University, School of Medicine	MD
	10. Keck School of Medicine of the University of Southern California	MD
	11. Mayo Clinic School of Medicine	MD
	12. New York University, School of Medicine	MD
	13. Northwestern University, The Feinberg School of Medicine	MD
	14. Stanford University, School of Medicine	MD
	15. The Ohio State University, College of Medicine	MD
	16. The Warren Alpert Medical School of Brown University (formerly known as Brown Medical School)	MD
	17. University of California, Los Angeles, David Geffen School of Medicine	MD
	18. University of California, San Diego, School of Medicine	MD
	19. University of California, San Francisco, School of Medicine	MD

SECOND SCHEDULE — *continued*

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Country or region</i>	<i>Body Granting Qualifications</i>	<i>Qualifications</i>
	20. University of Chicago, Pritzker School of Medicine	MD
	21. University of Michigan, Medical School (Ann Arbor)	MD
	22. University of North Carolina at Chapel Hill, School of Medicine	MD
	23. University of Pennsylvania, Perelman School of Medicine	MD
	24. University of Pittsburgh, School of Medicine	MD
	25. University of Washington, School of Medicine (Seattle)	MD
	26. University of Wisconsin, School of Medicine and Public Health (Madison)	MD
	27. Vanderbilt University, School of Medicine	MD
	28. Washington University in St Louis, School of Medicine	MD
	29. Weill Cornell Medicine	MD
	30. Yale School of Medicine	MD

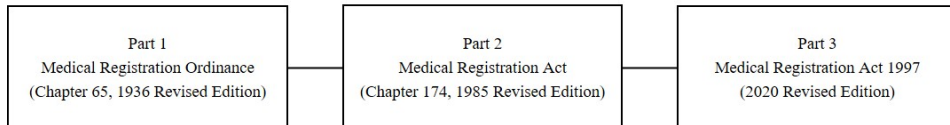
[S 613/2019]

LEGISLATIVE HISTORY

MEDICAL REGISTRATION ACT 1997

This Legislative History is a service provided by the Law Revision Commission on a best-efforts basis. It is not part of the Act.

PICTORIAL OVERVIEW OF PREDECESSOR ACTS



LEGISLATIVE HISTORY DETAILS

PART 1

MEDICAL REGISTRATION ORDINANCE

(CHAPTER 65, 1936 REVISED EDITION)

1. Ordinance IX of 1905 — The Medical Registration Ordinance 1905

Bill	:	G.N. No. 1381/1904
First Reading	:	9 December 1904
Second Reading	:	10 March 1905
Notice of Amendments	:	31 March 1905
Third Reading	:	14 April 1905
Commencement	:	1 July 1905

2. Ordinance XI of 1907 — The Medical Registration Ordinance 1907

Bill	:	G.N. No. 482/1907
First Reading	:	10 May 1907
Second Reading	:	21 May 1907
Notice of Amendments	:	7 June 1907
Third Reading	:	14 June 1907
Commencement	:	21 June 1907

3. Ordinance 12 of 1916 — Medical Registration (Amendment) Ordinance 1916

Bill	:	G.N. No. 489/1916
First Reading	:	28 April 1916

Second Reading	:	5 May 1916
Third Reading	:	12 May 1916
Commencement	:	18 May 1916

4. Ordinance 17 of 1921 — Medical Registration (Amendment) Ordinance, 1921

Bill	:	G.N. No. 521/1921
First Reading	:	25 April 1921
Second Reading	:	23 May 1921
Third Reading	:	4 July 1921
Commencement	:	11 July 1921

5. 1920 Revised Edition — Ordinance No. 99 (Medical Registration)

Operation	:	28 November 1921
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6. Ordinance 32 of 1922 — Statute Laws (Revised Edition) Amendment Ordinance, 1922

(Amendments made by section 8 of the above Ordinance)

Bill	:	G.N. No. 1158/1922
First Reading	:	14 August 1922
Second Reading	:	11 September 1922
Notice of Amendments	:	23 October 1922
Third Reading	:	23 October 1922
Commencement	:	28 November 1921 (section 8)

7. 1926 Revised Edition — Ordinance No. 99 (Medical Registration)

Operation	:	1 August 1926
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8. Ordinance 16 of 1931 — Medical Department Titles Ordinance, 1931
(Amendments made by section 2 of the above Ordinance)

Bill	:	G.N. No. 1646/1931
First Reading	:	31 August 1931
Second and Third Readings	:	28 September 1931
Commencement	:	1 January 1932 (section 2)

9. Ordinance 15 of 1933 — Medical Registration (Amendment) Ordinance, 1933

Bill	:	G.N. No. 733/1933
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First Reading	:	1 May 1933
Second Reading	:	31 July 1933
Notice of Amendments	:	31 July 1933
Third Reading	:	31 July 1933
Commencement	:	15 August 1933

10. Ordinance 44 of 1934 — Medical Department Titles Ordinance, 1934
(Amendments made by section 2 of the above Ordinance)

Bill	:	G.N. No. 2296/1934
First Reading	:	17 October 1934
Second and Third Readings	:	3 December 1934
Commencement	:	14 December 1934 (section 2)

11. Ordinance 51 of 1935 — Medical Registration (Amendment) Ordinance, 1935

Bill	:	G.N. No. 2658/1935
First Reading	:	28 October 1935
Second and Third Readings	:	20 November 1935
Commencement	:	2 December 1935

12. 1936 Revised Edition — Medical Registration Ordinance (Chapter 65)

Operation	:	1 September 1936
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13. Ordinance 29 of 1936 — Medical Registration (Amendment) Ordinance, 1936

Bill	:	G.N. No. 2613/1936
First Reading	:	26 October 1936
Second and Third Readings	:	18 November 1936
Commencement	:	9 December 1936

14. Ordinance 19 of 1946 — Medical Registration (Amendment) Ordinance, 1946

Bill	:	G.N. No. S 71/1946
First, Second and Third Readings	:	18 July 1946
Commencement	:	25 July 1946

PART 2
MEDICAL REGISTRATION ACT
(CHAPTER 174, 1985 REVISED EDITION)

15. Ordinance 23 of 1953 — Medical Registration Ordinance, 1953

Bill	:	1/1953
First Reading	:	25 February 1953
Second Reading	:	17 March 1953
Select Committee Report	:	Council Paper No. 35 of 1953
Notice of Amendments	:	16 June 1953
Third Reading	:	16 June 1953
Commencement	:	27 June 1953

16. Ordinance 12 of 1955 — Medical Registration (Amendment) Ordinance, 1955

Bill	:	39/1954
First Reading	:	16 November 1954
Second Reading	:	14 December 1954
Third Reading	:	28 January 1955
Commencement	:	4 February 1955

17. 1955 Revised Edition — Medical Registration Ordinance (Chapter 191)

Operation	:	1 July 1956
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18. G.N. No. S (N.S.) 178/1959 — Singapore Constitution (Modification of Laws) (No. 4) Order, 1959

Commencement	:	20 November 1959
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19. G.N. No. S (N.S.) 179/1959 — Singapore Constitution (Modification of Laws) (No. 5) Order, 1959

Commencement	:	20 November 1959
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20. Ordinance 9 of 1964 — Medical Registration (Amendment) Ordinance, 1964

Bill	:	25/1964
First Reading	:	10 June 1964
Second and Third Readings	:	4 November 1964
Commencement	:	20 November 1964

- 21. 1970 Revised Edition — Medical Registration Act (Chapter 218)**
 Operation : 31 July 1971
- 22. Act 31 of 1971 — Medical Registration (Amendment) Act, 1971**
 Bill : 17/1971
 First Reading : 19 October 1971
 Second and Third Readings : 2 December 1971
 Commencement : 14 July 1972
- 23. G.N. No. S 86/1978 — Medical Registration (Amendment of Schedule) Notification, 1978**
 Commencement : 1 May 1978
- 24. Act 16 of 1979 — Medical Registration (Amendment) Act, 1979**
 Bill : 17/1979
 First Reading : 21 March 1979
 Second and Third Readings : 15 May 1979
 Commencement : 15 June 1979
- 25. G.N. No. S 175/1980 — Medical Registration Act (Amendment of Schedule) Notification, 1980**
 Commencement : 13 June 1980
- 26. Act 5 of 1981 — Statutes of the Republic of Singapore (Miscellaneous Amendments) Act, 1981**
 (Amendments made by section 2 read with the Schedule to the above Act)
 Bill : 1/1981
 First Reading : 17 February 1981
 Second and Third Readings : 6 March 1981
 Commencement : 24 April 1981 (section 2 read with the Schedule)
- 27. G.N. No. S 127/1983 — Medical Registration Act (Amendment of Schedule) Notification 1983**
 Commencement : 20 May 1983
- 28. 1983 Reprint — Medical Registration Act (Chapter 218)**
 Reprint : 1 September 1983

29. 1985 Revised Edition — Medical Registration Act (Chapter 174)

Operation : 30 March 1987

30. G.N. No. S 277/1989 — Medical Registration Act (Amendment of Schedule) Notification 1989

Commencement : 23 June 1989

31. G.N. No. S 400/1989 — Medical Registration Act (Amendment of Schedule) (No. 2) Notification 1989

Commencement : 6 October 1989

32. G.N. No. S 450/1993 — Medical Registration Act (Amendment of Schedule) Notification 1993

Commencement : 12 November 1993

PART 3

MEDICAL REGISTRATION ACT 1997
(2020 REVISED EDITION)

33. Act 5 of 1997 — Medical Registration Act 1997

Bill : 2/1997

First Reading : 2 June 1997

Second and Third Readings : 25 August 1997

Commencement : 3 April 1998

34. 1998 Revised Edition — Medical Registration Act (Chapter 174)

Operation : 30 May 1998

35. Act 28 of 2000 — Statutes (Miscellaneous Amendments and Repeal) Act 2000

(Amendments made by section 5 of the above Act)

Bill : 22/2000

First Reading : 25 August 2000

Second and Third Readings : 9 October 2000

Commencement : 1 November 2000 (section 5)

36. G.N. No. S 536/2001 — Medical Registration Act (Amendment of Schedule) Order 2001

Commencement : 26 October 2001

37. Act 46 of 2002 — Medical Registration (Amendment) Act 2002

Bill : 47/2002

- First Reading : 25 November 2002
Second and Third Readings : 5 December 2002
Commencement : 24 January 2003
- 38. G.N. No. S 122/2003 — Medical Registration Act (Amendment of Schedule) Order 2003**
- Commencement : 14 March 2003
- 39. 2004 Revised Edition — Medical Registration Act (Chapter 174)**
- Operation : 31 July 2004
- 40. Act 42 of 2005 — Statutes (Miscellaneous Amendments) (No. 2) Act 2005**
(Amendments made by section 7 read with item (14) of the Fifth Schedule to the above Act)
- Bill : 30/2005
First Reading : 17 October 2005
Second and Third Readings : 21 November 2005
Commencement : 1 January 2006 (section 7 read with item (14) of the Fifth Schedule)
- 41. G.N. No. S 178/2006 — Medical Registration Act (Amendment of Schedule) Order 2006**
- Commencement : 1 April 2006
- 42. G.N. No. S 440/2006 — Medical Registration Act (Amendment of Schedule) (No. 2) Order 2006**
- Commencement : 1 August 2006
- 43. G.N. No. S 138/2007 — Medical Registration Act (Amendment of Schedule) Order 2007**
- Commencement : 1 April 2007
- 44. G.N. No. S 525/2007 — Medical Registration Act (Amendment of Schedule) (No. 2) Order 2007**
- Commencement : 1 October 2007
- 45. G.N. No. S 183/2009 — Medical Registration Act (Amendment of Schedule) Order 2009**
- Commencement : 29 April 2009

46. G.N. No. S 521/2009 — Medical Registration Act (Amendment of Schedule) (No. 2) Order 2009

Commencement : 30 October 2009

47. Act 1 of 2010 — Medical Registration (Amendment) Act 2010

Bill : 22/2009

First Reading : 19 October 2009

Second and Third Readings : 11 January 2010

Commencement : 10 August 2010 (section 4)
1 December 2010 (sections 2, 3, 5 to 8,
9(b), 10, 11, 12, 14 to 29 and 31 to 41)
1 July 2011 (sections 9(a) and 13)
1 July 2012 (section 30)

48. G.N. No. S 455/2012 — Medical Registration Act (Amendment of Schedule) Order 2012

Commencement : 1 November 2010 (paragraph 2(b))
15 September 2012 (except
paragraph 2(b))

49. Act 2 of 2012 — Statutes (Miscellaneous Amendments) Act 2012
(Amendments made by section 9 of the above Act)

Bill : 22/2011

First Reading : 21 November 2011

Second Reading : 18 January 2012

Notice of Amendments : 18 January 2012

Third Reading : 18 January 2012

Commencement : 1 March 2012 (section 9)

50. G.N. No. S 404/2014 — Medical Registration Act (Amendment of First and Second Schedules) Order 2014

Commencement : 2 June 2014

51. 2014 Revised Edition — Medical Registration Act (Chapter 174)

Operation : 31 December 2014

52. G.N. No. S 252/2016 — Medical Registration Act (Amendment of Second Schedule) Order 2016

Commencement : 1 June 2016

- 53. Act 5 of 2018 — Public Sector (Governance) Act 2018**
(Amendments made by section 78 of the above Act)
- | | | |
|----------------------|---|---------------------------|
| Bill | : | 45/2017 |
| First Reading | : | 6 November 2017 |
| Second Reading | : | 8 January 2018 |
| Notice of Amendments | : | 8 January 2018 |
| Third Reading | : | 8 January 2018 |
| Commencement | : | 1 April 2018 (section 78) |
- 54. G.N. No. S 613/2019 — Medical Registration Act (Amendment of Second Schedule) Order 2019**
- | | | |
|--------------|---|----------------|
| Commencement | : | 1 January 2020 |
|--------------|---|----------------|
- 55. Act 40 of 2019 — Supreme Court of Judicature (Amendment) Act 2019**
(Amendments made by section 28(1) read with item 96 of the Schedule to the above Act)
- | | | |
|----------------------|---|--|
| Bill | : | 32/2019 |
| First Reading | : | 7 October 2019 |
| Second Reading | : | 5 November 2019 |
| Notice of Amendments | : | 5 November 2019 |
| Third Reading | : | 5 November 2019 |
| Commencement | : | 2 January 2021 (section 28(1) read with item 96 of the Schedule) |
- 56. 2020 Revised Edition — Medical Registration Act 1997**
- | | | |
|-----------|---|------------------|
| Operation | : | 31 December 2021 |
|-----------|---|------------------|
- 57. G.N. No. S 759/2022 — Revised Edition of the Laws (Rectification of Acts) (No. 2) Order 2022**
- | | | |
|-------------|---|-------------------|
| Operation | : | 31 December 2021 |
| Publication | : | 26 September 2022 |
- 58. Act 33 of 2021 — Judicial Service (Miscellaneous Amendments) Act 2021**
- | | | |
|---------------------------|---|-----------------|
| Bill | : | 30/2021 |
| First Reading | : | 4 October 2021 |
| Second and Third Readings | : | 3 November 2021 |
| Commencement | : | 14 January 2022 |

Abbreviations

(updated on 29 August 2022)

G.N.	Gazette Notification
G.N. Sp.	Gazette Notification (Special Supplement)
L.A.	Legislative Assembly
L.N.	Legal Notification (Federal/Malaysian)
M.	Malaya/Malaysia (including Federated Malay States, Malayan Union, Federation of Malaya and Federation of Malaysia)
Parl.	Parliament
S	Subsidiary Legislation
S.I.	Statutory Instrument (United Kingdom)
S (N.S.)	Subsidiary Legislation (New Series)
S.S.G.G.	Straits Settlements Government Gazette
S.S.G.G. (E)	Straits Settlements Government Gazette (Extraordinary)

COMPARATIVE TABLE
MEDICAL REGISTRATION ACT 1997

This Act has undergone renumbering in the 2020 Revised Edition. This Comparative Table is provided to help readers locate the corresponding provisions in the last Revised Edition.

2020 Ed.	2014 Ed.
—	11—(4) [<i>Deleted by Act 5 of 2018</i>]
—	60—(5) [<i>Deleted by Act 5 of 2018</i>]