



THE STATUTES OF THE REPUBLIC OF SINGAPORE

MEDICAL REGISTRATION ACT 1997

2020 REVISED EDITION

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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.—(1) 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 44;

[Act 34 of 2020 wef 01/07/2022]

“Complaints Panel” means the panel appointed by the Medical Council under section 39;

[Act 34 of 2020 wef 01/07/2022]

“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 President of the Disciplinary Commission under section 58 or the Chief Justice under section 59;

[Act 34 of 2020 wef 01/07/2022]

“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 59H;

[Act 34 of 2020 wef 01/07/2022]

“Interim Orders Committee” means a committee appointed by the Medical Council under section 59J;

[Act 34 of 2020 wef 01/07/2022]

“lay person” means any person who —

- (a) has rendered distinguished public service, or has achieved distinction in any field; and
- (b) is not a legal professional or a registered medical practitioner;

[Act 33 of 2021 wef 01/07/2022]

“legal professional” means any person who —

- (a) has at any time held but no longer holds, office as a Supreme Court Judge or a Judicial Commissioner;
- (b) is an advocate and solicitor of at least 15 years’ standing; or
- (c) is 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);

[Act 33 of 2021 wef 01/07/2022]

“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;

“Registrar of the Supreme Court” includes the Deputy Registrar and an Assistant Registrar;

[Act 34 of 2020 wef 01/07/2022]

“Singapore degree” means a degree, diploma or licence in medicine and surgery specified in the First Schedule.

[Act 34 of 2020 wef 01/07/2022]

(2) *[Deleted by Act 34 of 2020 wef 01/07/2022]*

(3) *[Deleted by Act 34 of 2020 wef 01/07/2022]*

(4) *[Deleted by Act 34 of 2020 wef 01/07/2022]*

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) a member of the Academy of Medicine Singapore appointed by the Minister, who —
 - (i) is the Master of the Academy; or
 - (ii) is a member of the council of the Academy nominated by the Master of the Academy;
 - (c) a member of the College of Family Physicians Singapore appointed by the Minister, who —
 - (i) is the President of the College; or
 - (ii) is a member of the council of the College nominated by the President of the College;
 - (d) a member of the Singapore Medical Association appointed by the Minister, who —
 - (i) is the President of the Association; or
 - (ii) is a member of the council of the Association nominated by the President of the Association;
 - (e) a member of the faculty of each prescribed medical school in Singapore appointed by the Minister who —
 - (i) is the Dean of the prescribed medical school; or
 - (ii) is nominated by the Dean;

- (f) 12 registered medical practitioners resident in Singapore who are elected by the fully registered medical practitioners resident in Singapore; and
- (g) 8 registered medical practitioners resident in Singapore who are appointed by the Minister.

[Act 34 of 2020 wef 01/07/2022]

(2) The members of the Medical Council mentioned in subsection (1)(b) to (g) are appointed or elected for a term not exceeding 3 years and are eligible for re-appointment or re-election, as the case may be.

[Act 34 of 2020 wef 01/07/2022]

(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), (c), (d), (e) or (g) without giving any reason.

[Act 34 of 2020 wef 01/07/2022]

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)(f) must vote for the election of such members at such time and in such manner as may be prescribed.

[Act 34 of 2020 wef 01/07/2022]

(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 8 years' experience in the practice of medicine;
[Act 34 of 2020 wef 01/07/2022]
- (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 medicine is judged by the Health Committee to be impaired by reason of the person's physical or mental condition.

[Act 34 of 2020 wef 01/07/2022]

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 medicine or do any act as a medical practitioner unless the person is registered under this Act and has a valid practising certificate; and

[Act 34 of 2020 wef 01/07/2022]

(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 medicine.

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(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.—(1) The Medical Council may cancel any practising certificate issued to a registered medical practitioner if the Medical Council is satisfied that —

- (a) the practising certificate has been obtained by the registered medical practitioner by fraud, or the registered medical practitioner has, in connection with the application for the practising certificate, made a statement or provided any information or document that is false, misleading or inaccurate in a material particular; or
- (b) the registered medical practitioner fails, or has failed, to comply with any requirement prescribed in connection with the practising certificate (including any requirement that every registered medical practitioner must comply with in order to continue holding the practising certificate).

(2) Where the Medical Council decides under subsection (1) to cancel a practising certificate, the Medical Council must serve on the registered medical practitioner a notice of the decision.

(3) A decision by the Medical Council under subsection (1) takes effect on the date the notice under subsection (2) is served on the registered medical practitioner concerned, or on a later date specified in the notice.

(4) A registered medical practitioner who is aggrieved by the cancellation of his practising certificate under subsection (1) may,

within 30 days after receiving the notice mentioned in subsection (2), appeal to the Minister whose decision is final.

(5) An appeal against a decision to cancel a registered medical practitioner's practising certificate does not affect the operation of the decision appealed against or prevent the taking of action to implement the decision, and unless otherwise directed by the Minister, the decision appealed against must be complied with until the determination of the appeal.

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

(7) The cancellation or deemed cancellation of a practising certificate under this section does not affect —

- (a) the enforcement by any person of any right or claim against the registered medical practitioner; or
- (b) the enforcement by the registered medical practitioner of any right or claim against any person.

(8) A registered medical practitioner whose practising certificate is cancelled or deemed cancelled under this section must, as soon as practicable after receiving notice of the cancellation, removal from a register or suspension of registration (as the case may be), surrender his practising certificate to the Medical Council.

(9) To avoid doubt, this section does not affect the operation of Part 7.

[Act 34 of 2020 wef 01/07/2022]

PART 7

DISCIPLINARY PROCEEDINGS AND INQUIRIES

[Act 34 of 2020 wef 01/07/2022]

*Division 1 — Voluntary removal, suspension, etc.***Voluntary removal, suspension, etc.**

38.—(1) A registered medical practitioner may request the Medical Council to take one or more of the actions in subsection (2) if the registered medical practitioner believes that —

- (a) his fitness to practise medicine 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.

(2) Upon receiving a request under subsection (1), the Medical Council may, with the agreement of the registered medical practitioner, do one or more of the following:

- (a) remove the registered medical practitioner's name from the appropriate register;
- (b) suspend the registration of the registered medical practitioner in the appropriate register for a period not exceeding 3 years;
- (c) where the registered medical practitioner is a fully registered medical practitioner in Part I of the Register of Medical Practitioners — remove the registered medical practitioner's 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), (6), (7), (8) and (9) applies accordingly;
- (d) where the registered medical practitioner is registered in any register other than Part I of the Register of Medical Practitioners — impose additional appropriate conditions or restrictions on his registration or vary the conditions or restrictions already imposed under section 21, 23 or 24;
- (e) suspend or cancel the registered medical practitioner's practising certificate.

(3) However, the Medical Council must not take any action under subsection (2) in relation to a registered medical practitioner if —

- (a) the Medical Council believes that there is evidence of any matter mentioned in section 40(3)(a) or (4)(a), (b) or (c); or
- (b) an inquiry under Division 2 has started and is pending against the registered medical practitioner.

(4) Subsections (2) and (3) also apply where the Medical Council has given a notification to the registered medical practitioner under section 40(6)(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 (2)(a) to (e), the Medical Council must proceed to refer the matter to the chairman of the Complaints Panel under section 40(6)(a).

[Act 34 of 2020 wef 01/07/2022]

Division 2 — Inquiries into complaints against and information about registered medical practitioners

Appointment of Complaints Panel

39.—(1) For the purpose of enabling Inquiry Committees, Complaints Committees, Review Committees, Disciplinary Tribunals and Interim Orders Committees 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) at least 10 registered medical practitioners each of whom is of at least 8 years' standing and is not a member of the Medical Council; and
- (c) at least 6 other persons nominated by the Minister, each of whom is either —
 - (i) a legal professional; or
 - (ii) a lay person.

(2) The term of office of a member of the Complaints Panel mentioned in subsection (1)(a) expires at the end of the member's term of office as a member of the Medical Council.

(3) A member of the Complaints Panel mentioned in subsection (1)(b) or (c)(i) or (ii) is appointed for a term of 3 years and is eligible for re-appointment.

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

(5) 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.

(6) The chairman and deputy chairman appointed under subsection (5) must be registered medical practitioners.

[Act 34 of 2020 wef 01/07/2022]

Complaints against registered medical practitioners, etc.

40.—(1) A person (called in this Part the complainant) may make a complaint against, or provide information about, any registered medical practitioner to the Medical Council on any matter mentioned in subsection (3) or (4).

(2) Every complaint against, or information about, any registered medical practitioner mentioned in subsection (1) must —

(a) be in writing;

(b) be supported by a statutory declaration unless the complaint or information is made or provided by a public officer or the Medical Council; and

(c) be accompanied by every relevant document and information that is in the possession of the complainant.

(3) The complaint mentioned in subsection (1) is a complaint —

(a) relating to —

(i) the conduct of a registered medical practitioner in his professional capacity; or

(ii) a registered medical practitioner's improper act or conduct which brings disrepute to his profession; or

- (b) that the professional services provided by a registered medical practitioner are not of the quality that is reasonable to expect of him.
- (4) The information mentioned in subsection (1) is information relating to —
- (a) the conviction (whether in Singapore or elsewhere) of a registered medical practitioner of an offence implying a defect in character that makes him unfit to practise medicine;
 - (b) the death of any patient resulting from the conduct of a registered medical practitioner in his professional capacity;
 - (c) an adverse finding against a registered medical practitioner by a Coroner at an inquiry under the Coroners Act 2010* into the death of a patient of the registered medical practitioner; or
 - (d) the physical or mental fitness of a registered medical practitioner to practise medicine.
- [*Updated to be consistent with the 2020 Revised Edition]*
- (5) Subject to sections 41 and 42, the Medical Council must within 2 weeks after receipt of a complaint or any information under subsection (1) that is made in accordance with subsection (2), other than a complaint or information touching on the matters mentioned in section 32, refer the complaint or information (as the case may be) to the chairman of the Complaints Panel for the appointment of an Inquiry Committee.
- (6) Subject to sections 41 and 42, the Medical Council may, on its own motion —
- (a) if the Medical Council believes that there is evidence of any matter mentioned in subsection (3) or (4) — make a complaint or refer any information about the registered medical practitioner to the chairman of the Complaints Panel for the appointment of a Complaints Committee; or
 - (b) if the Medical Council believes that there is evidence of any matter mentioned in subsection (3)(b) or (4)(d) — instead of proceeding under paragraph (a), notify the

registered medical practitioner of the evidence and, with the written agreement of the registered medical practitioner, proceed under section 38(2)(a) to (e).

(7) Despite subsections (5) and (6), the Medical Council may immediately refer a complaint or any information directly to the President of the Disciplinary Commission for the appointment of a Disciplinary Tribunal where it relates to any of the following:

- (a) any matter mentioned in subsection (4)(a), (b) or (c);
- (b) any other matter that, in the opinion of the Medical Council, involves a serious threat to the health and safety of any patient.

(8) Where any complaint or information about a registered medical practitioner is referred to the chairman of the Complaints Panel under subsection (5) or (6) or to the President of the Disciplinary Commission under subsection (7), the Medical Council must —

- (a) inform the registered medical practitioner that it has done so; and
- (b) provide the registered medical practitioner with a copy of —
 - (i) the complaint or information; and
 - (ii) any statutory declaration that has been made in support of the complaint or information,

unless the Medical Council is of the view that, based on the facts and evidence before it, there are compelling reasons not to do so.

(9) Where any information mentioned in subsection (4)(d) is referred by the Medical Council to the chairman of the Complaints Panel, the chairman of the Complaints Panel must within 2 weeks after the referral —

- (a) if the chairman 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 medicine — refer the information to a Health Committee; or

- (b) in any other case —
- (i) proceed in accordance with Division 3 where the referral is made under subsection (5); or
 - (ii) proceed in accordance with Division 4 where the referral is made under subsection (6)(a) or section 42(3)(b).

[Act 34 of 2020 wef 01/07/2022]

Limitation period for complaints, etc.

41.—(1) The Medical Council must not refer a complaint or information to the chairman of the Complaints Panel under section 40(5) if the complaint is first made or the information is first provided to the Medical Council after the expiration of the period of —

- (a) 6 years after the date of the act, conduct or occurrence that is the subject matter of the complaint or information; or
- (b) 6 years after the earliest date on which the complainant had knowledge of the act, conduct or occurrence, or could with reasonable diligence have discovered it, if that period expires later than the period mentioned in paragraph (a).

(2) The Medical Council must not make a complaint or refer any information to the chairman of the Complaints Panel under section 40(6)(a) after the expiration of the period of —

- (a) 6 years after the date of the act, conduct or occurrence that is the subject matter of the complaint or information; or
- (b) 6 years after the earliest date on which the Medical Council had knowledge of the act, conduct or occurrence, or could with reasonable diligence have discovered it, if that period expires later than the period mentioned in paragraph (a).

(3) Where the Medical Council refers any complaint or any information to the President of the Disciplinary Commission under section 40(7) for the appointment of a Disciplinary Tribunal after the expiration of the period of —

- (a) 6 years after the date of the act, conduct or occurrence that is the subject matter of the complaint or information; or

- (b) 6 years after the earliest date on which the Council had knowledge of the act, conduct or occurrence, or could with reasonable diligence have discovered it, if that period expires later than the period mentioned in paragraph (a),

the President of the Disciplinary Commission must not appoint a Disciplinary Tribunal for the matter unless he is of the opinion that it is in the public interest to do so.

(4) In this section, “knowledge” includes the knowledge that a person may reasonably have been expected to acquire —

- (a) from facts observable or ascertainable by the person; or
(b) from facts ascertainable by the person with the help of appropriate expert advice which it is reasonable for the person to seek.

[Act 34 of 2020 wef 01/07/2022]

Complaints made, etc., after expiration of limitation period

42.—(1) Where any complaint or information is made or provided to the Medical Council under section 40(1) after the expiration of the period mentioned in section 41(1), the Medical Council must, within 2 weeks after receipt of the complaint or information, refer the complaint or information to the President of the Disciplinary Commission for an assessment mentioned in subsection (3)(a).

(2) The Medical Council must as soon as possible refer any complaint or information mentioned in section 40(6)(a) in respect of which the period mentioned in section 41(2) has expired to the President of the Disciplinary Commission for an assessment mentioned in subsection (3)(a).

(3) Where the Medical Council refers any complaint or information to the President of the Disciplinary Commission for an assessment under subsection (1) or (2) —

- (a) the President of the Disciplinary Commission must, within 3 weeks after the referral, assess whether it is in the public interest to refer the complaint or information to the chairman of the Complaints Panel despite the expiration of the period mentioned in section 41(1) or (2); and

- (b) where the President of the Disciplinary Commission notifies the Medical Council that he is of the opinion that it is in the public interest to refer the complaint or information to the chairman of the Complaints Panel, the Medical Council must, despite section 41(1) or (2) (as the case may be) and within 2 weeks after receipt of the notice, refer the complaint or information or make the complaint (as the case may be) to the chairman of the Complaints Panel.

[Act 34 of 2020 wef 01/07/2022]

Division 3 — Inquiry Committees

Inquiry by Inquiry Committee

43.—(1) Where any complaint or information is referred to the chairman of the Complaints Panel under section 40(5) (other than information mentioned in section 40(4)(d) where section 40(9)(a) or (b)(ii) applies), the chairman of the Complaints Panel must, within 2 weeks after the referral —

- (a) appoint an Inquiry Committee consisting of —
- (i) a chairman, being a member of the Complaints Panel who is a registered medical practitioner; and
 - (ii) one other member of the Complaints Panel who is a registered medical practitioner,
- to inquire into the complaint or information; and
- (b) refer the complaint or information to the Inquiry Committee.

(2) An Inquiry Committee may, in the course of an inquiry under subsection (1), require the complainant, registered medical practitioner concerned or any other person to answer any question or provide any information or document that the Inquiry Committee considers relevant for the purpose of the inquiry.

(3) An Inquiry Committee must complete its inquiry under subsection (1) within 3 weeks after the date that the complaint or information is referred to the Inquiry Committee and —

- (a) if the Committee is unanimously of the opinion that the complaint or information is frivolous, vexatious, misconceived or lacking in substance — dismiss the complaint or information and give reasons for the dismissal;
- (b) if the Committee is unanimously of the opinion that the complaint or information is not frivolous, vexatious, misconceived or lacking in substance and —
 - (i) is unanimously of the opinion that no investigation is necessary — issue a letter of advice to the registered medical practitioner; or
 - (ii) is unanimously of the opinion that an investigation is necessary — refer the matter to the chairman of the Complaints Panel to appoint a Complaints Committee to inquire into the matter, and direct one or more investigators to investigate the matter; or
- (c) in any other case — refer the matter to the chairman of the Complaints Panel to appoint a Complaints Committee to inquire into the matter, and direct one or more investigators to investigate the matter.

(4) The chairman of the Complaints Panel may, upon a written request by an Inquiry Committee, grant to the Inquiry Committee one (but not more than one) extension of the period mentioned in subsection (3) if the chairman is satisfied that the circumstances of the case justify the grant of the extension, except that the extension must not extend beyond the period of 6 weeks after the date that the complaint or information is referred to the Inquiry Committee.

(5) A decision of an Inquiry Committee under subsection (3) is final.

[Act 34 of 2020 wef 01/07/2022]

Division 4 — Complaints Committees

Appointment of Complaints Committees

44. Where any complaint or information is referred to the chairman of the Complaints Panel under section 40(6)(a), 42(3)(b) or

43(3)(b)(ii) or (c), the chairman of the Complaints Panel must, within 2 weeks after the referral —

- (a) appoint a Complaints Committee consisting of —
 - (i) a chairman, being the deputy chairman of the Complaints Panel or a member of the Complaints Panel who is a registered medical practitioner; and
 - (ii) 2 other members of the Complaints Panel, one of whom is a registered medical practitioner and the other is a legal professional or lay person,to inquire into the complaint or information; and
- (b) refer the complaint or information to the Complaints Committee.

[Act 34 of 2020 wef 01/07/2022]

Inquiry by Complaints Committee

45.—(1) A Complaints Committee must complete its inquiry not later than 3 months after the date that the complaint or information is referred to 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 mentioned in subsection (1), the Complaints Committee may apply in writing to the chairman of the Complaints Panel for an extension of time to complete its inquiry.

(3) The chairman of the Complaints Panel may, upon a written request by a Complaints Committee, grant to the Complaints Committee one (but not more than one) extension of the period mentioned in subsection (1) if the chairman is satisfied that the circumstances of the case justify the grant of the extension, except that the extension must not extend beyond the period of 6 months after the date that the complaint or information is referred to the Complaints Committee.

(4) The Medical Council may, upon a written request by a Complaints Committee, apply to the General Division of the High Court in accordance with section 59U for a further extension of time

that extends beyond the period mentioned in subsection (3) for the Complaints Committee to complete its inquiry.

(5) For the purposes of conducting an inquiry, a Complaints Committee may —

- (a) require the production for inspection by the Complaints Committee of any book, document or paper which may relate to or be connected with the subject matter of the inquiry; and
- (b) require the complainant, registered medical practitioner concerned and any other person to give any information or evidence which may relate to or be connected with the subject matter of the inquiry (including any information in relation to any book, document or paper mentioned in paragraph (a)) —
 - (i) at an attendance before the Complaints Committee;
 - (ii) in writing; or
 - (iii) by way of a statutory declaration or an affidavit.

(6) Any person who, without lawful excuse, refuses or fails to comply with any requirement of a Complaints Committee under subsection (5)(a) or (b) 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.

(7) For the purposes of any inquiry, a Complaints Committee may —

- (a) where an Inquiry Committee has directed an investigation under section 43(3)(b)(ii) or (c) — refer to and rely on the report arising from that investigation; or
- (b) in any other case — direct one or more investigators to investigate the complaint or information to which the inquiry relates.

[Act 34 of 2020 wef 01/07/2022]

Findings of Complaints Committee

46.—(1) After considering any investigation report mentioned in section 51 and any report by a Performance Assessment Panel mentioned in section 52 or Fitness Assessment Panel mentioned in section 53, and upon due inquiry into the complaint or information, a Complaints Committee may, if it is of the view that a formal inquiry by a Disciplinary Tribunal or Health Committee is not necessary, take one or more of the following actions:

- (a) issue a letter of advice to the registered medical practitioner;
- (b) issue a letter of warning to the registered medical practitioner;
- (c) direct the registered medical practitioner to seek and undergo medical or psychiatric treatment or counselling;
- (d) direct the registered medical practitioner to undertake and complete specified further education or training within a specified period;
- (e) direct the registered medical practitioner to report, at such times, in such manner and to such person or persons as the Complaints Committee may specify, on the status of —
 - (i) the registered medical practitioner’s physical or mental condition; or
 - (ii) the registered medical practitioner’s medical practice;
- (f) direct the registered medical practitioner to seek and take advice, from such person or persons as the Complaints Committee may specify, on or in relation to the management of his medical practice;
- (g) with the agreement of the registered medical practitioner, request the Medical Council to do one or more of the following:
 - (i) remove the registered medical practitioner’s name from the appropriate register;

- (ii) suspend the registration of the registered medical practitioner from the appropriate register for a period not exceeding 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 as a medical practitioner with conditional registration in Part II of that Register, and section 21(4), (6), (7), (8) and (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 additional appropriate conditions or restrictions on his registration or vary the conditions or restrictions already imposed under section 21, 23 or 24, as the case may be;
- (v) suspend or cancel the registered medical practitioner's practising certificate;
- (h) dismiss the complaint or information;
- (i) give such other direction as the Complaints Committee thinks fit.

(2) Where a Complaints Committee, based on the facts and evidence before it, determines that cause of sufficient gravity for a formal inquiry exists —

- (a) where the complaint or information touches on the physical or mental fitness of the registered medical practitioner to practise medicine —
 - (i) the Complaints Committee may, with the agreement of the registered medical practitioner, request the Medical Council to take one or more of the actions in subsection (3); or

- (ii) in any other case — the Complaints Committee must direct the Medical Council to appoint a Health Committee to hold a formal inquiry; or
 - (b) in any other case — the Complaints Committee must recommend to the Medical Council that a formal inquiry be held by a Disciplinary Tribunal.
- (3) Upon receiving a request under subsection (2)(a)(i), the Medical Council may do one or more of the following:
 - (a) remove the name of the registered medical practitioner from the appropriate register;
 - (b) suspend the registration of the registered medical practitioner in the appropriate register for such period not exceeding 3 years;
 - (c) 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 the Register of Medical Practitioners and register him as a medical practitioner with conditional registration in Part II of that Register, and section 21(4), (6), (7), (8) and (9) applies accordingly;
 - (d) where the registered medical practitioner is registered in any register other than Part I of the Register of Medical Practitioners — impose additional appropriate conditions or restrictions on his registration or vary the conditions or restrictions already imposed under section 21, 23 or 24, as the case may be.
- (4) Where the registered medical practitioner concerned fails to comply with a direction of a Complaints Committee under subsection (1)(c), (d), (e), (f) or (i), a Complaints Committee (whether it is the Complaints Committee that gave the direction or another Complaints Committee appointed in its place) may, if it thinks fit, recommend that a formal inquiry be held by a Disciplinary Tribunal or direct that a formal inquiry be held by a Health Committee (as the case may be) in respect of the complaint or information.

(5) Where a Complaints Committee makes a direction under subsection (2)(a)(ii) or (4) that a formal inquiry be held by a Health Committee, the Medical Council must, within one month after receipt of the Complaint Committee's direction, refer the complaint or information to a Health Committee.

(6) Where a Complaints Committee makes a recommendation under subsection (2)(b) or (4) that a formal inquiry be held by a Disciplinary Tribunal —

- (a) the Complaints Committee must give reasons for its recommendation and also recommend to the Medical Council the charge or charges to be preferred against the registered medical practitioner; and
- (b) the Medical Council must, within one month after receipt of the Complaints Committee's recommendation, determine whether it is appropriate for a formal inquiry to be held by a Disciplinary Tribunal.

(7) If the Medical Council determines under subsection (6)(b) that it is not appropriate for a formal inquiry to be held by a Disciplinary Tribunal, the Medical Council must notify the complainant and registered medical practitioner of its decision and the reasons for such determination, and may take one or more of the following actions:

- (a) any action mentioned in subsection (1)(a) to (f) or (h);
- (b) with the agreement of the registered medical practitioner, take one or more of the actions specified in subsection (1)(g)(i) to (v);
- (c) give such other direction as the Medical Council thinks fit.

(8) If the Medical Council determines under subsection (6)(b) that it is appropriate for a formal inquiry to be held by a Disciplinary Tribunal, the Medical Council must refer the complaint or information to the President of the Disciplinary Commission for the appointment of a Disciplinary Tribunal.

(9) A decision of the Complaints Committee under subsection (2)(a)(ii) or (b) or (4), or of the Medical Council under subsection (6)(b), is final.

(10) A letter of advice mentioned in subsection (1)(a) that is to be issued by a Complaints Committee under that subsection or the Medical Council under subsection (7) may be issued by the chairman of the Complaints Committee or the President of the Medical Council (as the case may be) on such terms as the Complaints Committee or the Medical Council (as the case may be) thinks fit.

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

(12) A Complaints Committee must notify the registered medical practitioner concerned and the complainant of its decision under subsection (1), or under subsection (2)(a)(ii) or (4) to refer the complaint or information to a Health Committee, and give the reason for the Complaints Committee's decision.

(13) Every Complaints Committee must immediately report to the Medical Council its findings, and every decision made under this section.

(14) A Complaints Committee completes its inquiry upon the submission of the report mentioned in subsection (13).

[Act 34 of 2020 wef 01/07/2022]

Division 5 — Mediation and withdrawal, etc.

Mediation

47.—(1) An Inquiry Committee or a Complaints Committee may, at any time after any complaint or information (called in this Division the matter) is referred to it but before the completion of its inquiry under section 43(3) or 46(14) (as the case may be), refer the matter for mediation between the registered medical practitioner and the complainant, before a mediator specified by the Inquiry Committee or Complaints Committee.

(2) Where the Inquiry Committee or Complaints Committee (as the case may be) is informed by both the registered medical practitioner and the complainant that they have agreed to participate in mediation

in relation to the matter (whether or not the mediation has been referred to mediation by an Inquiry Committee or a Complaints Committee under subsection (1)) —

- (a) subject to subsection (3), the Inquiry Committee or Complaints Committee (as the case may be) may direct that the inquiry be suspended for the period or suspended subject to the conditions, specified by the Inquiry Committee or Complaints Committee, as the case may be; and
- (b) the mediator must —
 - (i) report to the Inquiry Committee or Complaints Committee (as the case may be) on the status of the mediation, at every interval specified by the Inquiry Committee or Complaints Committee, as the case may be; and
 - (ii) as soon as practicable after the termination of the mediation, inform the Inquiry Committee or Complaints Committee (as the case may be) of the termination and outcome of the mediation.

(3) Where a mediation is terminated and the matter is not withdrawn, the Inquiry Committee or Complaints Committee (as the case may be) must complete its inquiry within the balance of the period mentioned in section 43(3) or 45(1) (as the case may be) or the extended period granted under section 43(4), 45(3) or 59U(1) (as the case may be) following the termination.

(4) Despite subsection (3) and sections 43(3) and 45(1), if the balance of the period mentioned in subsection (3) is less than 7 days, the period during which the Inquiry Committee or Complaints Committee (as the case may be) must complete its inquiry is extended until and including the 7th day after the termination of the mediation.

[Act 34 of 2020 wef 01/07/2022]

Withdrawal of matter

- 48.**—(1) If a complainant withdraws the matter at any time —
- (a) before an Inquiry Committee is appointed to inquire into the matter;
 - (b) after an Inquiry Committee is appointed but before the Inquiry Committee takes any action under section 43(3);
 - (c) before a Complaints Committee is appointed to inquire into the matter; or
 - (d) after a Complaints Committee is appointed but before the Complaints Committee takes any action under section 46(1) or (2),

the Medical Council may, despite the withdrawal, give directions to —

- (e) in the case mentioned in paragraph (a) or (c) — the chairman of the Complaints Panel;
- (f) in the case mentioned in paragraph (b) — the Inquiry Committee; or
- (g) in the case mentioned in paragraph (d) — the Complaints Committee,

for the continuation of the inquiry as if the matter were not withdrawn.

(2) Where the Medical Council gives directions under subsection (1) to the chairman of the Complaints Panel, an Inquiry Committee or a Complaints Committee, the chairman, the Inquiry Committee and the Complaints Committee (as the case may be) must comply with the direction as if the matter had been a complaint made by the Medical Council.

(3) The Medical Council may do any of the following in relation to a matter despite the withdrawal of the matter by the complainant:

- (a) refer the matter to the President of the Disciplinary Commission for the appointment of a Disciplinary Tribunal under section 40(7);

(b) refer the matter to a Health Committee under section 46(5);

(c) proceed under section 46(6)(b) and section 46(7) or (8).

(4) If a complainant withdraws the matter before the conclusion of the inquiry into the matter by a Disciplinary Tribunal or a Health Committee, the Medical Council may inform the Disciplinary Tribunal or Health Committee (as the case may be) to continue the inquiry despite the withdrawal, and all the future proceedings arising or following from the direction are to be taken as if the matter had been a complaint made by the Medical Council.

[Act 34 of 2020 wef 01/07/2022]

Inquiry Committee or Complaints Committee may make costs orders

49.—(1) Where an Inquiry Committee makes a decision under section 43(3)(a) or a Complaints Committee is of the opinion that the matter is frivolous, vexatious, misconceived or lacking in substance and dismisses the matter under section 46(1)(h), the Inquiry Committee or Complaints Committee (as the case may be) may, after hearing the complainant (if the complainant desires to be heard) —

(a) order that the costs of the matter be paid by the complainant; and

(b) in such order, specify the amount of those costs or direct that the amount be taxed by the Registrar of the Supreme Court.

(2) An Inquiry Committee or a Complaints Committee in exercising its discretion as to costs may take into account the parties' conduct in relation to any attempt at resolving the matter by mediation or any other means of dispute resolution.

(3) The General Division of the High Court has jurisdiction to tax any costs mentioned in subsection (1) and any order for costs made by the General Division of the High Court is enforceable as if it were ordered in connection with a civil action in the General Division of the High Court.

(4) Any person who is aggrieved by an order under subsection (1) may, within 14 days after being notified of the order, appeal to the General Division of the High Court.

(5) An appeal under subsection (4) may be made by originating application.

[Act 25 of 2021 wef 01/07/2022]

[Act 34 of 2020 wef 01/07/2022]

Division 6 — Investigations and assessments

Conduct of investigation by investigator

50.—(1) Where —

- (a) an Inquiry Committee, a Complaints Committee or a Disciplinary Tribunal (called in this section the instructing committee) directs an investigation under section 43(3)(b)(ii) or (c), 45(7)(b) or 59A(9), as the case may be; and
- (b) the instructing committee is of the opinion that the registered medical practitioner should be called upon to answer any allegation made against him,

the instructing committee must give the registered medical practitioner written notice of the investigation and invite the registered medical practitioner to give to the investigator, within the period (not exceeding 21 days after the date of the notice), any written explanation he may wish to offer, containing all relevant information and accompanied by every relevant document that is in the possession of the registered medical practitioner.

(2) The registered medical practitioner may, at any time before the expiration of the period specified for the submission of the written explanation, make not more than one application to the instructing committee for an extension of the period, and the extension must not exceed 21 days.

(3) In the course of an investigation mentioned in subsection (1), a relevant Complaints Committee may authorise in writing the investigator to do one or both of the following:

- (a) in the case of a complaint mentioned in section 40(3)(b) — obtain the consent of the registered medical practitioner to undergo a performance assessment in accordance with section 52;
- (b) in the case of any information mentioned in section 40(4)(d) — obtain the consent of the registered medical practitioner to undergo a fitness assessment in accordance with section 53.

(4) Where an investigator requests the consent of the registered medical practitioner under subsection (3), the registered medical practitioner must respond within such time as the investigator may specify in the request.

- (5) If the registered medical practitioner —
 - (a) declines to undergo a performance assessment or fitness assessment requested under subsection (3);
 - (b) having consented to undergo a performance assessment or fitness assessment, subsequently fails to participate in the assessment or refuses to cooperate with any assessor carrying out the assessment; or
 - (c) does not respond to the investigator's request within the time mentioned in subsection (4),

the investigator must make a report to the relevant Complaints Committee under section 51, and the relevant Complaints Committee may proceed with the inquiry and take such action as it thinks fit under section 46.

(6) Where, in the course of an investigation mentioned in subsection (1), an investigator receives any information that relates to the registered medical practitioner who is the subject of the investigation and that is not related to the subject matter of the investigation but may give rise to proceedings under this Part, the investigator must make a report to the Medical Council.

(7) Where, in the course of an investigation mentioned in subsection (1), an investigator receives any information relating to another registered medical practitioner which may give rise to

proceedings under this Part, the investigator must make a report to the Medical Council.

(8) In this section and sections 52 and 53, “relevant Complaints Committee” means —

- (a) the Complaints Committee appointed to inquire into any complaint or information that is the subject of the investigation; or
- (b) the Complaints Committee which has directed the investigation under section 45(7)(b),

as the case may be.

[Act 34 of 2020 wef 01/07/2022]

Investigation report and information obtained in course of investigation or inquiry

51.—(1) Upon completing an investigation into any complaint or information, the investigator must submit a report on the findings of the investigation to —

- (a) in the case of an investigation directed by an Inquiry Committee under section 43(3)(b)(ii) or (c) — the Complaints Committee that is appointed to inquire into the complaint or information, or if no Complaints Committee has been appointed, the chairman of the Complaints Panel;
- (b) in the case of an investigation directed by a Complaints Committee under section 45(7)(b) — the Complaints Committee; or
- (c) in the case of an investigation directed by a Disciplinary Tribunal under section 59A(9) — the Disciplinary Tribunal.

(2) The report of the investigator (called in this Part an investigation report) must contain any written explanation given by the registered medical practitioner under section 50(1).

(3) A person must not disclose the contents of any 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 concerned, except —

- (a) where the chairman of the Complaints Panel, Complaints Committee or Disciplinary Tribunal (as the case may be) to which the investigation report is submitted considers that there are compelling reasons to do so; or
- (b) where such disclosure is required for the purpose of administering or enforcing this Act or the Infectious Diseases Act 1976*.

[Act 34 of 2020 wef 01/07/2022]

*[*Updated to be consistent with the 2020 Revised Edition]*

Performance assessment

52.—(1) If a registered medical practitioner consents to undergo a performance assessment under section 50(3)(a), the quality of professional services provided by the registered medical practitioner must be assessed by a Performance Assessment Panel appointed by the relevant Complaints Committee and comprising one or more suitably qualified persons determined by the relevant Complaints Committee.

(2) A Performance Assessment Panel is to carry out the performance assessment in accordance with —

- (a) the provisions of this Division;
- (b) any practice and procedure determined by the Medical Council for performance assessments; and
- (c) any instructions issued by the relevant Complaints Committee for the performance assessment.

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

- (a) within such time and at such place as the Panel may reasonably require, produce to the Panel or give the Panel access to any record or document —
 - (i) specified by the Panel or of a class or description so specified;

- (ii) which is in the possession or under the control of the registered medical practitioner; and
 - (iii) which the Panel reasonably believes is or may be relevant to the performance assessment;
 - (b) give 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 the Panel all assistance in connection with the performance assessment which the registered medical practitioner 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 Performance Assessment Panel may require the registered medical practitioner to produce to the Panel a reproduction of such information or matter, or the relevant part of the information or matter, 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) A Performance Assessment Panel must submit a report of its assessment to the relevant Complaints Committee and, with the approval of the relevant Complaints Committee, the registered medical practitioner.
- (7) The relevant Complaints Committee, or the investigator with the approval of the relevant Complaints Committee, may discuss with the registered medical practitioner under assessment the report mentioned in subsection (6) and, in the case of an adverse finding in the report, the possible ways of dealing with that finding.
- (8) If, at any time before the report mentioned in subsection (6) is submitted to the relevant Complaints Committee —
- (a) the relevant Complaints Committee instructs the discontinuation of the performance assessment; or
 - (b) the relevant Complaints Committee completes its inquiry,

the performance assessment is discontinued from the date paragraph (a) or (b) occurs, whichever is earlier.

[Act 34 of 2020 wef 01/07/2022]

Fitness assessment

53.—(1) If a registered medical practitioner consents to undergo a fitness assessment under section 50(3)(b), the registered medical practitioner's fitness to practise medicine by reason of his physical or mental condition must be assessed by a Fitness Assessment Panel appointed by the relevant Complaints Committee and comprising one or more suitably qualified persons determined by the relevant Complaints Committee.

(2) A Fitness Assessment Panel must carry out the fitness assessment in accordance with —

- (a) the provisions of this Division;
- (b) any practice and procedure determined by the Medical Council for fitness assessments; and
- (c) any instructions issued by the relevant Complaints Committee for the fitness assessment.

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

(4) The relevant Complaints Committee, or the investigator with the approval of the relevant Complaints Committee, may discuss with the registered medical practitioner under assessment the report mentioned in subsection (3) and, in the case of an adverse finding in the report, the possible ways of dealing with that finding.

(5) If, at any time before the report mentioned in subsection (3) is submitted to the relevant Complaints Committee —

- (a) the relevant Complaints Committee instructs the discontinuation of the fitness assessment; or
- (b) the relevant Complaints Committee completes its inquiry,

the fitness assessment is discontinued from the date paragraph (a) or (b) occurs, whichever is earlier.

[Act 34 of 2020 wef 01/07/2022]

Division 7 — Review by Review Committee

Request for review

54.—(1) A registered medical practitioner who is aggrieved by any direction or decision of a Complaints Committee under section 46(1) may, within 14 days after being notified under section 46(12), request for a review by a Review Committee whose decision is final.

(2) If the complainant is dissatisfied with any direction or decision of a Complaints Committee under section 46(1), he may, within 14 days after being notified under section 46(12), request for a review by a Review Committee whose decision is final.

(3) Where a complaint is made or any matter or information is referred by the Medical Council under section 40(6)(a) and the Medical Council is dissatisfied with any direction or decision of a Complaints Committee under section 46(1), the Medical Council may within 14 days after receipt of the report under section 46(13), request for a review by a Review Committee whose decision is final.

(4) A request for a review under this section must be made to the chairman of the Complaints Panel.

[Act 34 of 2020 wef 01/07/2022]

Appointment of Review Committee

55.—(1) The chairman of the Complaints Panel must, within 3 weeks after receipt of a request for review under section 54, appoint from among the members of the Complaints Panel, a Review Committee consisting of —

- (a) one registered medical practitioner of at least 10 years' standing;
- (b) one legal professional; and
- (c) one lay person.

(2) The chairman of a Review Committee is a member of that Committee so appointed by the chairman of the Complaints Panel.

- (3) A member of —
- (a) an Inquiry Committee; or
 - (b) a Complaints Committee,

is disqualified from acting as a member of a Review Committee reviewing and determining the same matter as the Inquiry Committee or Complaints Committee.

[Act 34 of 2020 wef 01/07/2022]

Review by Review Committee

56.—(1) A Review Committee must, within 3 months after the date of its appointment, complete its review and report its determination to the Medical Council.

(2) The chairman of the Complaints Panel may, upon a written request by a Review Committee, grant to the Review Committee one (but not more than one) extension of the period mentioned in subsection (1) if the chairman is satisfied that the circumstances of the case justify the grant of the extension, except that the extension must not extend beyond the period of 6 months after the date of the appointment of the Review Committee.

(3) The Medical Council may, upon a written request by a Review Committee, apply to the General Division of the High Court in accordance with section 59U for a further extension of time that extends beyond the period mentioned in subsection (2) for the Review Committee to report its determination to the Medical Council.

(4) A Review Committee may, at the conclusion of its review, only make one or both of the following orders:

- (a) an order that the Complaints Committee has complied with all the procedural requirements under this Act and any regulations governing an inquiry by a Complaints Committee;
- (b) an order directing the Complaints Committee to conduct a further inquiry into or rehear the complaint or matter, where the Review Committee is satisfied that —

- (i) the Complaints Committee has not complied with any of those requirements; or
- (ii) any new evidence submitted to the Review Committee is material to the complaint or matter.

(5) Where a Review Committee makes an order under subsection (4)(b), the Review Committee must give a further direction to the Complaints Committee to complete the further inquiry or rehearing within such period (not exceeding 3 months after the date of the order) as may be specified by the Review Committee.

(6) Section 45(3), (4), (5), (6) and (7) applies to, or in relation to, a Complaints Committee that is given an order under subsection (4)(b) to conduct a further inquiry into or rehear the complaint or matter as if the Complaints Committee were conducting a new inquiry, and —

- (a) for the purposes of section 45(3), the date of the Review Committee's order under subsection (4)(b) is the date that the complaint or information is referred to the Complaints Committee; and
- (b) for the purposes of section 45(7), the Complaints Committee may direct an investigation even if a previous investigation was directed by an Inquiry Committee under section 43(3)(b)(ii) or (c) prior to the order under subsection (4)(b).

[Act 34 of 2020 wef 01/07/2022]

Division 8 — Disciplinary Commission and Disciplinary Tribunals

Disciplinary Commission

57.—(1) The Minister may appoint a Disciplinary Commission consisting of —

- (a) the President of the Disciplinary Commission who must be a registered medical practitioner of at least 20 years' standing;
- (b) such number of registered medical practitioners as the Minister may determine, each of at least 10 years' standing; and

- (c) such number of legal professionals as the Minister may determine.
- (2) The Disciplinary Commission has the following functions:
- (a) to appoint Disciplinary Tribunals;
 - (b) to oversee the training of members of the Complaints Panel and Health Committees;
 - (c) to oversee the procedures and processes of Disciplinary Tribunals;
 - (d) to maintain such information and records as may be prescribed;
 - (e) to publish such information in such manner as may be prescribed.
- (3) In addition to the functions conferred by this section, the Disciplinary Commission may undertake such other functions as the Minister may assign to the Commission, by notification in the *Gazette*, and in so undertaking —
- (a) the Commission is deemed to be fulfilling the purposes of this Act; and
 - (b) the provisions of this Act apply to the Commission in respect of those other functions and duties.
- (4) A member of the Disciplinary Commission mentioned in subsection (1)(a), (b) or (c) is appointed for a term of 3 years and is eligible for re-appointment.
- (5) The President of the Disciplinary Commission may delegate to any other member of the Commission who is a registered medical practitioner any of the duties of the President of the Disciplinary Commission.
- (6) A member of the Disciplinary Commission must not be appointed a member of an Inquiry Committee, a Complaints Committee, a Review Committee, a Disciplinary Tribunal, a Health Committee or an Interim Orders Committee except with the approval of the President of the Disciplinary Commission.

- (7) The Disciplinary Commission may —
- (a) appoint one or more committees for any general or special purpose which in the opinion of the Commission may be better regulated or managed by a committee; and
 - (b) delegate to any committee appointed under paragraph (a), with or without restrictions or conditions, any of the powers or functions of the Commission.
- (8) The number and term of office of the members of a committee appointed under subsection (7) and the number of those members necessary to form a quorum are to be fixed by the Disciplinary Commission.
- (9) A committee appointed under subsection (7) may include one or more persons who are not members of the Disciplinary Commission.

[Act 34 of 2020 wef 01/07/2022]

Appointment of Disciplinary Tribunals

58.—(1) Subject to section 59, the President of the Disciplinary Commission may appoint a Disciplinary Tribunal consisting of —

- (a) 2 members of the Complaints Panel who are registered medical practitioners of at least 10 years' standing; and
- (b) one other member of the Complaints Panel who is a legal professional,

to conduct a formal inquiry into any matter referred to the President of the Disciplinary Commission under section 40(7) or 46(8).

(2) Subject to section 59, the chairman of a Disciplinary Tribunal is a member of that Tribunal so designated by the President of the Disciplinary Commission, and where the President of the Disciplinary Commission designates a registered medical practitioner as the chairman of the Disciplinary Tribunal, that registered medical practitioner must have at least 20 years' standing.

(3) A member of an Inquiry Committee, a Complaints Committee, a Review Committee, a Health Committee or an Interim Orders Committee is disqualified from acting as a member of a Disciplinary Tribunal conducting an inquiry into the same matter as the Inquiry

Committee, Complaints Committee, Review Committee, Health Committee or Interim Orders Committee, as the case may be.

(4) A Disciplinary Tribunal may be appointed in connection with one or more matters, as the President of the Disciplinary Commission thinks fit.

(5) The President of the Disciplinary Commission may at any time —

- (a) revoke the appointment of a Disciplinary Tribunal;
- (b) remove any member of a Disciplinary Tribunal;
- (c) fill any vacancy in a Disciplinary Tribunal; or
- (d) where the appointment of a Disciplinary Tribunal has been revoked under paragraph (a) or a Disciplinary Tribunal is for any reason unable to continue with an inquiry, appoint another Disciplinary Tribunal in place of the firstmentioned Disciplinary Tribunal to continue with the inquiry.

(6) The Disciplinary Tribunal that is appointed under subsection (5)(d) may, with the consent of the President of the Disciplinary Commission and the registered medical practitioner to whom the matter relates, and having regard to the evidence given, the arguments adduced and any order made during the proceedings before the previous Disciplinary Tribunal, conduct a formal inquiry into the matter afresh.

(7) The production of any written instrument purporting to be signed by the President of the Disciplinary Commission and making an appointment, a revocation or a removal mentioned in this section constitutes prima facie evidence that such appointment, revocation or removal has been duly made.

(8) Every member of a Disciplinary Tribunal is to be paid such remuneration as the President of the Disciplinary Commission may determine.

(9) 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.

(10) The chairman of a Disciplinary Tribunal may at any time summon a meeting of the Disciplinary Tribunal.

(11) All the members of a Disciplinary Tribunal must be personally present at any meeting of that Tribunal to constitute a quorum for the transaction of any business.

(12) All the members of a Disciplinary Tribunal present at any meeting of that Tribunal must vote on any question arising at the meeting, and such question must be determined by a majority of votes.

(13) However, if any member of a Disciplinary Tribunal —

(a) has his appointment revoked or is removed under subsection (5); or

(b) is unable through death, illness or any other cause to continue with the formal inquiry of the matter,

the Disciplinary Tribunal must not make any decision on any question mentioned in subsection (12) until that vacancy is filled.

[Act 34 of 2020 wef 01/07/2022]

Appointment of Disciplinary Tribunal by Chief Justice

59.—(1) Where the President of the Disciplinary Commission is of the opinion that it would be appropriate for a Disciplinary Tribunal to be chaired by a Supreme Court Judge or a Judicial Commissioner, the President of the Disciplinary Commission is to apply to the Chief Justice to appoint the Disciplinary Tribunal, and the Chief Justice may appoint the Disciplinary Tribunal by —

(a) appointing a Supreme Court Judge or a Judicial Commissioner as chairman of the Disciplinary Tribunal; and

(b) after consulting the President of the Disciplinary Commission, appointing 2 members of the Complaints Panel who are registered medical practitioners each of at least 10 years' standing, as members of the Disciplinary Tribunal.

(2) In relation to any Disciplinary Tribunal appointed under subsection (1) —

- (a) the Chief Justice may exercise the powers of the President of the Disciplinary Commission under section 58(4) to (8); and
- (b) a reference in section 58(4) to (8) to the President of the Disciplinary Commission is a reference to the Chief Justice.

(3) For any Disciplinary Tribunal appointed under subsection (1), the Chief Justice may delegate the exercise of all or any of the powers conferred or duties imposed upon the Chief Justice by subsection (2) and section 59A(11)(a) to any Supreme Court Judge (other than one who is the chairman of the Disciplinary Tribunal), subject to any condition that the Chief Justice may specify.

(4) Where there is a delegation of any power or duty to a Supreme Court Judge under subsection (3), any reference in relation to that power or duty in this Division to the President of the Disciplinary Commission mentioned in subsection (2)(b) is a reference to the Supreme Court Judge who is delegated the power or duty.

[Act 34 of 2020 wef 01/07/2022]

Proceedings of Disciplinary Tribunal

59A.—(1) A Disciplinary Tribunal may meet from time to time to inquire into any matter mentioned in section 58(1) and may, subject to any rules made under section 70A, regulate its own procedure.

(2) A member of a Disciplinary Tribunal who ceases to be a member of the Complaints Panel on the expiration of his term of office is taken to be a member of the Disciplinary Tribunal until the completion of the work by the Disciplinary Tribunal.

(3) The registered medical practitioner concerned may appear in person before the Disciplinary Tribunal 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.

*[*Updated to be consistent with the 2020 Revised Edition]*

(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 mentioned in subsection (5) must be served and may be enforced as if they were orders to attend court or orders to produce documents issued in connection with a civil action in the General Division of the High Court.

[Act 25 of 2021 wef 01/07/2022]

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

(8) Every witness has 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) Where a Disciplinary Tribunal is appointed to conduct a formal inquiry into any complaint or information referred to the President of the Disciplinary Commission under section 40(7) —

- (a) the Disciplinary Tribunal may direct an investigator appointed under section 60A to investigate the complaint or information; and
- (b) the investigator may exercise one or more of the powers under that section in carrying out the investigator's functions and duties under this Part.

(10) A Disciplinary Tribunal must carry out its work expeditiously, and must make its finding and order within 6 months after the date of the appointment of the Disciplinary Tribunal.

(11) Where a Disciplinary Tribunal is of the opinion that it will not be able to make its finding and order within the period mentioned in subsection (10) —

- (a) in the case of a Disciplinary Tribunal appointed under section 59(1) — the chairman of the Disciplinary Tribunal may apply in writing to the Chief Justice for one or more extensions of time (each not exceeding 3 months) to make its finding and order; or

- (b) in any other case — the chairman of the Disciplinary Tribunal may apply in writing to the President of the Disciplinary Commission for an extension of time to make its finding and order.

(12) Upon receiving an application under subsection (11)(b), the President of the Disciplinary Commission may, if the President of the Disciplinary Commission is satisfied that the circumstances of the case justify the grant of an extension, grant the Disciplinary Tribunal one (but not more than one) extension of the period mentioned in subsection (10), except that the extension must not extend beyond the period of 9 months after the date of the appointment of that Disciplinary Tribunal.

(13) The Medical Council may, upon a written request by a Disciplinary Tribunal, apply to the General Division of the High Court in accordance with section 59U for a further extension of time that extends beyond the period mentioned in subsection (12) to make its finding and order.

[Act 34 of 2020 wef 01/07/2022]

Appointment of experts and legal counsel

59B.—(1) For the purposes of any formal inquiry by a Disciplinary Tribunal, the Disciplinary Tribunal may appoint one or more of the following:

- (a) one or more independent experts;
- (b) an advocate and solicitor to advise that Disciplinary Tribunal on any legal matter relating to the inquiry.

(2) In appointing any expert under subsection (1)(a), the Disciplinary Tribunal must hear the views of the registered medical practitioner concerned and the Medical Council.

(3) The Disciplinary Tribunal may, instead of or in addition to appointing its experts under subsection (1)(a), allow the registered medical practitioner concerned and the Medical Council to appoint their respective experts.

(4) An expert or advocate and solicitor appointed under subsection (1) may be paid remuneration of an amount and by one or more persons to be determined by the Disciplinary Tribunal.

[Act 34 of 2020 wef 01/07/2022]

Referral and transfer of cases to Health Committee

59C.—(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 medicine 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 referral under subsection (1), the Health Committee determines that the fitness of the registered medical practitioner to practise medicine 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 referral under subsection (1), the Health Committee determines that the fitness of the registered medical practitioner to practise medicine 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 59I,

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

[Act 34 of 2020 wef 01/07/2022]

Findings of Disciplinary Tribunal

59D.—(1) Where a registered medical practitioner is found by a Disciplinary Tribunal —

- (a) to have been convicted in Singapore or elsewhere of any offence implying a defect in character which makes him unfit to practise medicine;

- (b) to have been guilty of such improper act or conduct which, in the opinion of the Disciplinary Tribunal, brings disrepute to his profession;
- (c) to have been guilty of professional misconduct; or
- (d) to have failed to provide professional services of the quality that is reasonable to expect of him,

the Disciplinary Tribunal may make one or more orders under 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 not exceeding 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), (6), (7), (8) and (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 additional appropriate conditions or restrictions on his registration or vary the conditions or restrictions already imposed under section 21, 23 or 24, as the case may be;
- (e) by order impose on the registered medical practitioner a penalty not exceeding \$100,000;
- (f) order that the registered medical practitioner be censured in writing;

- (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 action that a Complaints Committee may take under section 46(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.

(4) Where a registered medical practitioner is not found by a Disciplinary Tribunal to have been convicted or guilty of any of the matters mentioned in subsection (1), the Disciplinary Tribunal must dismiss the matter mentioned in section 58(1).

(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 any costs mentioned in subsection (5) and any order for costs made by the General Division of the High Court is enforceable as if it were ordered in connection with a civil action in the General Division of the High Court.

(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 advocate and 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.

- (8) The costs and expenses mentioned in subsection (5) include —
- (a) the costs and expenses of any advocate and solicitor appointed by the Medical Council for proceedings before

the Disciplinary Tribunal and, where applicable, the Interim Orders Committee, and any expert appointed by the Medical Council under section 59B(3);

- (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.

[Act 34 of 2020 wef 01/07/2022]

Further orders by Disciplinary Tribunal

59E.—(1) Where a registered medical practitioner, in respect of whom an order under subsection (2) or (3) or section 59D(2)(c) or (d), 59L(1)(b) or 59N(1)(d) is made, is found by a Disciplinary Tribunal (whether, in the case of an order under subsection (2) or (3) or section 59D(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 59D(2)(b), the Disciplinary Tribunal may make an order under section 59D(2)(c) or (d), to take effect immediately after the expiration of the current period of suspension.

(3) Where a Disciplinary Tribunal has made an order for suspension under subsection (1)(b) or section 59D(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 59D(2)(c) or (d), to take effect immediately after the expiration of the current period of suspension.

(4) Where a Disciplinary Tribunal has made an order under section 59D(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 that order.

(5) Where a Disciplinary Tribunal has made an order under section 59D or this section, or has varied the conditions or restrictions imposed by an order under section 59D or this section, the Registrar must immediately serve on the registered medical practitioner and on the complainant a notice of the order or the variation.

(6) 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 59D(2)(a) or (b), a Disciplinary Tribunal, if satisfied that to do so —

- (a) is necessary for the protection of members of the public or is otherwise in the public interest; or
- (b) would be in the best interests of the registered medical practitioner concerned,

may order that, despite section 59F(1) or an appeal under section 59G —

- (c) the registered medical practitioner's name be removed from the appropriate register immediately; or
- (d) the registered medical practitioner's registration in the register be suspended immediately.

(7) Where an order under subsection (6) 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 him.

[Act 34 of 2020 wef 01/07/2022]

When order by Disciplinary Tribunal takes effect

59F.—(1) Subject to section 59E(6), 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 the registered medical practitioner's registration under section 59D(2)(a) or (b) or 59E(1) or (3), does not take effect until the expiration of 30 days after the order is made.

(2) An order of a Disciplinary Tribunal, other than an order for the removal of any name or for the suspension of any registration under section 59D(2)(a) or (b) or 59E(1) or (3), takes effect from the date the order is made.

(3) While any order for the suspension of any registration remains in force, the person concerned is not regarded as being registered even though his name still appears in the register concerned; but on the expiration of such order, his rights and privileges as a registered medical practitioner are to be revived immediately after the date of such expiration but only if the person concerned has complied with all the terms of the order.

[Act 34 of 2020 wef 01/07/2022]

Appeal against Disciplinary Tribunal's decision or order

59G.—(1) If the registered medical practitioner concerned or the Medical Council is dissatisfied with a decision of or an order by the Disciplinary Tribunal mentioned in section 59D(2), (4) or (5) or 59E, the registered medical practitioner or the Medical Council may, within 30 days after the service on the registered medical practitioner of the notice of the decision or order, appeal to the General Division of the High Court against the decision or order.

(2) 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 to be no appeal.

(3) In any appeal to the General Division of the High Court against a decision or an order mentioned in section 59D(2), (4) or (5) or 59E, 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.

(4) Despite sections 59D, 59E and 59F, where an appeal has been made to the General Division of the High Court against a decision or an order of the Disciplinary Tribunal mentioned in section 59D(2) or 59E (called in this section a relevant order), the relevant order is not to take effect until after —

- (a) the relevant order is confirmed by the General Division of the High Court;
- (b) the appeal is for any reason dismissed by the General Division of the High Court; or
- (c) the appeal is withdrawn.

(5) Subsection (4) does not apply if, at the time of making the relevant order —

- (a) where a relevant order is made under section 59D(2)(a) or (b) or 59E(1) or (3) — the Disciplinary Tribunal makes an order under section 59E(6)(c) or (d); or
- (b) in any other case — the Disciplinary Tribunal orders that the relevant order take effect immediately despite an appeal because doing so —
 - (i) is necessary for the protection of members of the public or is otherwise in the public interest; or
 - (ii) would be in the best interests of the registered medical practitioner concerned.

[Act 34 of 2020 wef 01/07/2022]

*Division 9 — Health Committees***Appointment of Health Committees**

59H.—(1) The Medical Council may, from time to time, appoint one or more Health Committees, each comprising 3 persons, at least one of whom must be a member of the Medical Council.

(2) The Medical Council must appoint as the chairman of a Health Committee —

- (a) if the Health Committee has only one member of the Medical Council — that member of the Medical Council; and
- (b) if the Health Committee has more than one member of the Medical Council — any of those members of the Medical Council as the Medical Council thinks fit.

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

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

[Act 34 of 2020 wef 01/07/2022]

Unfitness to practise medicine through illness, etc.

59I.—(1) Where a Health Committee determines that a registered medical practitioner's fitness to practise medicine is impaired by reason of the registered medical practitioner's physical or mental condition, the Health Committee may take one or more of the following actions:

- (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), (6), (7), (8) and (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 additional appropriate conditions or restrictions on his registration or vary the conditions or restrictions already imposed under section 21, 23 or 24, as the case may be;
- (d) recommend to the Medical Council that the name of the registered medical practitioner be removed from the appropriate register;
- (e) order that the registered medical practitioner pay 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), (4) or (5)(b) or section 59L(1)(b) or 59N(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 expiration 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 immediately after the expiration 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) 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.

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

(10) Section 59A(3) to (13) applies, with the necessary modifications, to a Health Committee as it applies to a Disciplinary Tribunal appointed under section 58 and for this purpose —

- (a) a reference in those provisions to a Disciplinary Tribunal is a reference to the Health Committee; and
- (b) a reference in those provisions to the President of the Disciplinary Commission is a reference to the Medical Council.

(11) 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 the person of the notice of the order, appeal to the Minister whose decision is final.

(12) 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.

[Act 34 of 2020 wef 01/07/2022]

Division 10 — Interim Orders Committees

Interim Orders Committee

59J.—(1) The Medical Council may, from time to time, appoint one or more committees each comprising 3 members who must each be a member of the Medical Council or the Complaints Panel, to be known for the purposes of this Act as Interim Orders Committees, to inquire into or review any matter under this Division.

(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, the President of the Disciplinary Commission, an Inquiry Committee, a Complaints Committee, a Review Committee, a Disciplinary Tribunal or a Health Committee may refer any complaint or information, that was referred to the chairman, President, Committee or Tribunal (as the case may be), to the Medical Council for the purpose of —

(a) appointing an Interim Orders Committee; or

(b) referring the complaint or information to an Interim Orders Committee,

for the Interim Orders Committee to determine whether an order should be made under section 59L(1).

(4) Subject to subsection (5), the Medical Council may, on its own motion and at any time after any complaint or information is made, provided or referred under section 40(1) or (6)(a), refer the complaint

or information to an Interim Orders Committee for the purpose of determining whether an order should be made under section 59L(1).

(5) The Medical Council must not refer any complaint or information to which section 42(1) or (2) applies to an Interim Orders Committee under subsection (4) at any time before the President of the Disciplinary Commission has assessed that it is in the public interest to refer the complaint or information to the chairman of the Complaints Panel under section 42(3)(a).

(6) The chairman of the Complaints Panel, or a member of an Inquiry Committee, a Complaints Committee, a Review Committee, a Disciplinary Tribunal or a Health Committee, is disqualified from acting as a member of an Interim Orders Committee inquiring into and determining the same matter as the chairman, or the Inquiry Committee, Complaints Committee, Review Committee, Disciplinary Tribunal or Health Committee, as the case may be.

(7) Where the Medical Council refers any complaint or information under subsection (4) to an Interim Orders Committee, any member of the Medical Council who participated in or influenced the making of the decision to make the referral is disqualified from acting as a member of the Interim Orders Committee inquiring into or reviewing the same matter.

(8) A member of an Interim Orders Committee inquiring into or reviewing any matter is disqualified from acting as a member of an Inquiry Committee, a Complaints Committee, a Review Committee, a Disciplinary Tribunal or a Health Committee inquiring into or reviewing the same matter, or taking part in any deliberation of the Medical Council in respect of the same matter under any provision of this Part.

(9) Section 59A(3) to (9) applies, with the necessary modifications, to an Interim Orders Committee and to proceedings before it as it applies to a Disciplinary Tribunal appointed under section 58 and to proceedings before such Disciplinary Tribunal.

[Act 34 of 2020 wef 01/07/2022]

Immediate interim orders

59K.—(1) Subject to subsection (5), an Interim Orders Committee may, at any time after any complaint or information is referred to it but before an interim order is made under section 59L(1), make an immediate interim order against a registered medical practitioner without first giving the registered medical practitioner an opportunity to be heard if —

- (a) the Interim Orders Committee is satisfied that —
 - (i) a court of law in Singapore has found that the registered medical practitioner has engaged in any conduct alleged in the complaint or information; and
 - (ii) the conduct poses an imminent danger to the health or safety of any patient of the registered medical practitioner; or
- (b) the Medical Council certifies that the Medical Council is of the opinion that any conduct alleged in the complaint or information poses an imminent danger to the health or safety of any patient of the registered medical practitioner.

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

(3) An immediate interim order ceases to have effect from —

- (a) the date the Interim Orders Committee revokes the immediate interim order;
- (b) the date an interim order is made under section 59L(1) to replace the immediate interim order; or
- (c) where the registered medical practitioner has not, within one month after the date of the immediate interim order, been given an opportunity to be heard by the Interim Orders Committee on the question whether an interim order under section 59L(1) should be made — the expiration of one month after the date of the immediate interim order,

whichever occurs first.

- (4) In this section, “immediate interim order” means an order —
- (a) that a registered medical practitioner’s registration in the appropriate register be suspended from the date of the order; or
 - (b) that a registered medical practitioner’s registration be conditional on his compliance, from the date of the order, with such conditions or restrictions specified in the order as the Interim Orders Committee thinks fit to impose.
- (5) This section does not apply in relation to any complaint or information referred to an Interim Orders Committee if the Interim Orders Committee has made an interim order under section 59L(1) in respect of the same complaint or information.

[Act 34 of 2020 wef 01/07/2022]

Interim orders

59L.—(1) Subject to subsection (4), where, upon due inquiry into any complaint or information referred to an Interim Orders Committee, the 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 it 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 a period not exceeding 18 months specified in the order (called in this Part an interim suspension order); or
 - (b) that his registration be conditional on his compliance, during a period not exceeding 18 months, with such conditions or restrictions specified in the order as the Interim Orders Committee thinks fit to impose (called in this Part an interim restriction order).
- (2) An Interim Orders Committee must inquire into and decide on the complaint or information referred to it as soon as is practicable after the complaint or information is referred to it.

(3) The Registrar must immediately notify the registered medical practitioner of the order made under subsection (1), and such order takes effect from the date the order is made.

(4) An Interim Orders Committee must not make an order under subsection (1) at any time after the relevant proceedings are concluded.

(5) For the purposes of subsection (4), the relevant proceedings are concluded when any one of the events mentioned in section 59Q(2)(a), (b), (c) or (d) occurs.

[Act 34 of 2020 wef 01/07/2022]

Review of interim orders

59M.—(1) Subject to subsection (2), where an Interim Orders Committee has made an order under section 59L(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 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 an order under section 59P(2) or an Interim Orders Committee has made a replacement order under section 59N(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 the order (or the order which has been replaced) 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.

[Act 34 of 2020 wef 01/07/2022]

Interim Orders Committee may revoke, vary or replace interim order

59N.—(1) Upon a review under section 59M or upon the recommendation of the chairman of the Complaints Panel, the President of the Disciplinary Commission, the Medical Council or any specified committee, the Interim Orders Committee that made an interim suspension order or interim restriction order under this section or section 59L(1) in relation to any registered medical practitioner may do any of the following:

- (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) in the case of an interim restriction order — 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, 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;
- (d) in the case of an interim suspension order — if satisfied that the public interest or the interests of the registered medical practitioner 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 notify the registered medical practitioner of the decision under subsection (1), and such order takes effect from the date the order is made.

(3) For the purposes of subsection (1), a reference to an Interim Orders Committee that made an interim suspension order or interim restriction order includes a reference to another Interim Orders Committee appointed in its place.

(4) In this section, “specified committee”, in relation to the registered medical practitioner against whom an interim suspension order or interim restriction order has been made, means an Inquiry Committee, a Complaints Committee, a Review Committee, a Disciplinary Tribunal or a Health Committee appointed to conduct an inquiry or review (as the case may be) in relation to the complaint against or information about the registered medical practitioner.

[Act 34 of 2020 wef 01/07/2022]

Right of hearing

59O.—(1) An order under section 59L(1) or 59N(1)(b), (c) or (d) must not be made by an Interim Orders Committee in respect of any registered medical practitioner unless he has been afforded an opportunity of appearing before the Interim Orders Committee and being heard on the question of 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.

[Act 34 of 2020 wef 01/07/2022]

Application to General Division of the High Court

59P.—(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 59L(1) or 59N(1)(c) or (d) has effect, and may apply again for one or more further extensions.

(2) Upon an application under subsection (1), the General Division of the High Court may grant an extension (or a further extension) for a period not exceeding 12 months.

(3) The General Division of the High Court may, upon 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).

(4) An application under subsection (3) must be made within 14 days after the registered medical practitioner concerned is notified of the interim suspension order or interim restriction order under section 59L(3) or 59N(2), as the case may be.

(5) An application under subsection (3) must be heard otherwise than in open court.

(6) The General Division of the High Court may, upon an application by the registered medical practitioner, order that any information contained in any document relating to an application under subsection (3) must not be published or disclosed, unless —

- (a) the registered medical practitioner consents to the publication or disclosure; or
- (b) the General Division of the High Court is satisfied that the information if published or disclosed does not disclose any confidential information.

[Act 34 of 2020 wef 01/07/2022]

Duration of interim orders

59Q.—(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 59P(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 when any one of the following occurs:
- (a) where an Inquiry Committee has been appointed to inquire into the complaint or information — the Inquiry Committee has under section 43 —
 - (i) dismissed the complaint; or
 - (ii) issued a letter of advice;
 - (b) where a Complaints Committee has been appointed to inquire into the complaint or information — the Complaints Committee has taken an action under section 46(1) and —
 - (i) no request for review under section 54(1), (2) or (3) was made to the Review Committee against that action within the period specified in that section; or
 - (ii) such a request was made but withdrawn, or the Review Committee made an order under section 56(4)(a) in relation to the request;
 - (c) where a Disciplinary Tribunal has been appointed to inquire into the complaint or information — the Disciplinary Tribunal —
 - (i) has made an order under section 59D(2) which has taken effect; or
 - (ii) has dismissed the complaint or matter under section 59D(4);
 - (d) where a Health Committee has been appointed to inquire into the matter —
 - (i) the Health Committee has made an order under section 59I(1) which has taken effect;

- (ii) the Medical Council has made an order under section 59I(2) which has taken effect; or
- (iii) the Health Committee has dismissed the complaint or matter.

[Act 34 of 2020 wef 01/07/2022]

Person suspended under interim suspension order not regarded as registered

59R.—(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) Upon the expiration or revocation of an interim suspension order, the person’s rights and privileges as a registered medical practitioner are revived immediately after the date of the expiration or revocation, but only if he has complied with all the terms of the order.

(3) To avoid doubt, sections 40 to 59E, 59H and 59I continue to apply to a person whose registration in the register is suspended by or under an interim suspension order.

[Act 34 of 2020 wef 01/07/2022]

Division 11 — Miscellaneous

Medical Council may appoint legal counsel

59S.—(1) For the purposes of an inquiry under this Part by any Inquiry Committee, Complaints Committee, Review Committee, Health Committee or Interim Orders Committee, the Medical Council may appoint an advocate and solicitor to advise that Committee on any legal matter relating to the inquiry.

(2) Where an advocate and solicitor is appointed under subsection (1), the Medical Council may pay the advocate and solicitor, as part of the expenses of the Medical Council, such remuneration as the Medical Council may determine.

[Act 34 of 2020 wef 01/07/2022]

Restoration of names to register

59T.—(1) This section applies in relation to a medical practitioner whose name has been removed from a register —

- (a) under section 38(2)(a) or 46(1)(g)(i) or (3)(a) or under section 37A(1)(i) or 49(1)(g)(i) as in force immediately before the date of commencement of section 7 of the Medical Registration (Amendment) Act 2020;
- (b) pursuant to an order made by a Disciplinary Tribunal under section 59D(2)(a) or 59E(1)(a) or (3)(a) or under section 53(2)(a) or 54(1)(a) or (3)(a) as in force immediately before that date;
- (c) on the recommendation of a Health Committee under section 59I(1)(d) or under section 58(1)(d) as in force immediately before that date;
- (d) pursuant to an order made by a Disciplinary Committee under section 45 or 46 as in force immediately before 1 December 2010; or
- (e) under section 22 of the repealed Medical Registration Act (Cap. 174, 1985 Ed.).

(2) Subject to subsections (3) and (4), the Medical Council may, upon an application for restoration by the medical practitioner mentioned in subsection (1), 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), (6), (7), (8) and (9) applies accordingly.

(3) In the case mentioned in subsection (1)(b), the Medical Council must not restore the name of a medical practitioner to the register or register him as a medical practitioner with conditional registration under subsection (2) if —

- (a) the medical practitioner has not complied with all the terms of any order made against him by the Disciplinary Tribunal;

- (b) the application for restoration is made before the expiration of 3 years from the date of the removal; or
- (c) the application for restoration is made more than once in any period of 12 months by or on behalf of the medical practitioner.

(4) In the case mentioned in subsection (1)(c), (d) or (e), the Medical Council must not restore the name of a medical practitioner to the register or register him as a medical practitioner with conditional registration under subsection (2) if —

- (a) the medical practitioner has not complied with all the terms of any order made against him by the Health Committee, Disciplinary Committee or Medical Council, as the case may be; or
- (b) the application for restoration is made more than once in any period of 12 months by or on behalf of the medical practitioner.

[Act 34 of 2020 wef 01/07/2022]

Applications to General Division of the High Court for extension of time

59U.—(1) Where an application is made to the General Division of the High Court under section 45(4), 56(3) or 59A(13), the General Division of the High Court may, subject to such conditions as the General Division of the High Court may impose, grant one or more further extensions of time, each not exceeding 3 months.

(2) An application under subsection (1) may be made by an originating application without notice, and must not be heard in open court.

[Act 25 of 2021 wef 01/07/2022]

(3) The General Division of the High Court may, upon an application by the Medical Council, order that any information contained in any document relating to an application under subsection (1) must not be published or disclosed, unless —

- (a) the Medical Council consents to the publication or disclosure; or

- (b) the General Division of the High Court is satisfied that the information if published or disclosed does not disclose any confidential information.

[Act 34 of 2020 wef 01/07/2022]

Meetings and proceedings of committees

59V.—(1) Subject to subsection (2), this section applies to every Inquiry Committee, Complaints Committee, Review Committee, Health Committee or Interim Orders Committee (each called in this section a relevant committee) appointed under this Act.

(2) Subsection (8) does not apply in relation to an Inquiry Committee.

(3) The appointing authority of a relevant committee may at any time —

- (a) revoke the appointment of the relevant committee;
- (b) remove any member of the relevant committee;
- (c) fill any vacancy in the relevant committee; or
- (d) where the appointment of the relevant committee has been revoked under paragraph (a) or the relevant committee is for any reason unable to continue with an inquiry or review (as the case may be), appoint another relevant committee in place of the firstmentioned relevant committee to continue with the inquiry or review (as the case may be).

(4) No act done by or under the authority of a relevant committee is invalid as a consequence of any defect that is subsequently discovered in the appointment or qualifications of the members or any of them.

(5) The chairman of a relevant committee may at any time summon a meeting of the relevant committee.

(6) A relevant committee may meet for the purposes of its inquiry or review (as the case may be), and may adjourn and otherwise regulate the conduct of its inquiry or review (as the case may be) as its members think fit.

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

(8) All the members of a relevant committee present at any meeting of the relevant committee must vote on any question arising at the meeting, and such question must be determined by a majority of votes.

(9) However, if any member of a relevant committee —

(a) has his appointment revoked or is removed under subsection (3); or

(b) is unable through death, illness or any other cause to continue with the inquiry or review (as the case may be),

the relevant committee must not make any decision on any question arising at a meeting until that vacancy is filled.

(10) A member of a relevant committee who ceases to be a member of the Complaints Panel or Medical Council (as the case may be) on the expiration of his term of office is taken to be a member of the relevant committee until the completion of the work by the relevant committee.

(11) In this section, “appointing authority” means —

(a) in relation to an Inquiry Committee, a Complaints Committee or Review Committee — the chairman of the Complaints Panel; and

(b) in relation to a Health Committee or an Interim Orders Committee — the Medical Council.

[Act 34 of 2020 wef 01/07/2022]

Employee of Ministry of Health not disqualified from being committee member

59W. Any member of the Medical Council who is employed in the Ministry of Health is not disqualified from being a member of any Inquiry Committee, Complaints Committee, Review Committee,

Disciplinary Tribunal, Health Committee or Interim Orders Committee by reason only that the member is so employed.

[Act 34 of 2020 wef 01/07/2022]

Confidentiality of information

59X.—(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 assessment or fitness assessment under section 52 or 53 except in —

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

(2) A person to whom this section applies must not disclose any information contained in any document that may have come to the person's knowledge in the course of a performance assessment or fitness assessment under section 52 or 53 unless the disclosure is made —

- (a) under or for the purpose of administering or 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.

*[*Updated to be consistent with the 2020 Revised Edition]*

(3) This section applies to —

- (a) a member of a Performance Assessment Panel or Fitness Assessment Panel;
- (b) an investigator appointed under section 60A to carry out an investigation under this Part;
- (c) a member of any Inquiry Committee, Complaints Committee, Review Committee, Disciplinary Tribunal, Health Committee or Interim Orders Committee; and

- (d) a member or an officer or an agent, of the Medical Council or Disciplinary Commission.

[Act 34 of 2020 wef 01/07/2022]

PART 8 GENERAL

Application of funds of Medical Council, etc.

60.—(1) All fees, penalties and other moneys payable to the Medical Council under this Act that are not paid are recoverable as a debt due to the Medical Council.

[Act 34 of 2020 wef 01/07/2022]

(2) Subject to subsection (2A), all fees and other moneys (other than penalties) collected or recovered by the Medical Council under this Act must be paid to the Medical Council.

[Act 34 of 2020 wef 01/07/2022]

(2A) All penalties collected or recovered under this Act must be paid into the Consolidated Fund.

[Act 34 of 2020 wef 01/07/2022]

(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.

[Act 34 of 2020 wef 01/07/2022]

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, without lawful excuse —
- (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.

[Act 34 of 2020 wef 01/07/2022]

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

Proceedings conducted by officers of Medical Council

61. Despite the provisions of any written law, a legal officer of the Medical Council who has been admitted as an advocate and solicitor under the Legal Profession Act 1966* may —

- (a) appear in any proceedings under this Act or any other civil proceedings involving the Medical Council in the performance of its functions or duties under any written law; and
- (b) make and do all acts and applications in respect of any proceedings under this Act or any other civil proceedings, on behalf of the Medical Council.

[Act 34 of 2020 wef 01/07/2022]

*[*Updated to be consistent with the 2020 Revised Edition]*

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.

Deemed public servants

65A.—(1) The following persons are each taken to be a public servant for the purposes of the Penal Code 1871* in relation to his performance of any function or duty under this Act:

- (a) the chairman of the Complaints Panel;
- (b) the President of the Disciplinary Commission;
- (c) any member of —
 - (i) the Medical Council;
 - (ii) the Disciplinary Commission;
 - (iii) any Inquiry Committee, Complaints Committee, Review Committee, Disciplinary Tribunal, Health Committee or Interim Orders Committee; and
 - (iv) any other committee appointed by the Medical Council or the Disciplinary Commission under this Act;
- (d) any employee of the Medical Council or the Disciplinary Commission, or any other person acting under the direction of the Medical Council or the Disciplinary Commission.

*[*Updated to be consistent with the 2020 Revised Edition]*

(2) For the purposes of sections 193 and 228 of the Penal Code 1871*, “judicial proceeding” is taken to include any proceedings before an Inquiry Committee, a Complaints Committee, a Review Committee, a Disciplinary Tribunal, a Health Committee or an Interim Orders Committee.

[Act 34 of 2020 wef 01/07/2022]

*[*Updated to be consistent with the 2020 Revised Edition]*

General exemption

65B.—(1) The Minister may, after consultation with the Medical Council, by order in the *Gazette*, exempt any person or class of persons from all or any of the provisions of this Act, either generally or in a particular case and subject to such conditions as the Minister may impose.

(2) This section does not affect section 66.

[Act 34 of 2020 wef 01/07/2022]

Exemption for ships' surgeons

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.

[Act 34 of 2020 wef 01/07/2022]

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 Consolidated Fund.

[Act 34 of 2020 wef 01/07/2022]

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

medicine by reason of his mental or physical condition must inform the Medical Council accordingly.

[Act 34 of 2020 wef 01/07/2022]

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

Protection from personal liability

68. No liability shall lie against —

- (a) the chairman of the Complaints Panel;
- (b) the President of the Disciplinary Commission;
- (c) any member of —
 - (i) the Medical Council;
 - (ii) the Disciplinary Commission;
 - (iii) any Inquiry Committee, Complaints Committee, Review Committee, Disciplinary Tribunal, Health Committee or Interim Orders Committee; and
 - (iv) any other committee appointed by the Medical Council or the Disciplinary Commission under this Act; or
- (d) any employee of the Medical Council or the Disciplinary Commission, or any other person acting under the direction of the Medical Council or the Disciplinary Commission,

for anything which is done or purported to be done, or omitted to be done, in good faith and with reasonable care in the exercise or purported exercise of any power or the performance or purported performance of any function under this Act.

[Act 34 of 2020 wef 01/07/2022]

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.

Service of documents

68B.—(1) A document that is permitted or required by this Act to be served on a person may be served as described in this section.

(2) A document permitted or required by this Act to be served on an individual may be served —

- (a) by giving it to the individual personally;
- (b) by sending it by prepaid registered post to the address specified by the individual for the service of documents or, if no address is so specified, the individual's residential address or business address;
- (c) by leaving it at the individual's residential address with an adult apparently resident there, or at the individual's business address with an adult apparently employed there;
- (d) by affixing a copy of the document in a conspicuous place at the individual's residential address or business address;
- (e) by sending it by fax to the fax number last known to the person giving or serving the document as the fax number for the service of documents on the individual; or
- (f) by sending it by email to the individual's last email address.

(3) A document permitted or required under this Act to be served on a partnership (other than a limited liability partnership) may be served —

- (a) by giving it to any partner or other similar officer of the partnership;
- (b) by leaving it at, or by sending it by prepaid registered post to, the partnership's business address;
- (c) by sending it by fax to the fax number used at the partnership's business address; or

(d) by sending it by email to the partnership's last email address.

(4) A document permitted or required under this Act to be served on a body corporate (including a limited liability partnership) or an unincorporated association may be served —

(a) by giving it to the secretary or other similar officer of the body corporate or unincorporated association or the limited liability partnership's manager;

(b) by leaving it at, or by sending it by prepaid registered post to, the registered office or principal office in Singapore of the body corporate or unincorporated association;

(c) by sending it by fax to the fax number used at the registered office or principal office in Singapore of the body corporate or unincorporated association; or

(d) by sending it by email to the last email address of the body corporate or unincorporated association.

(5) Service of a document under this section takes effect —

(a) if the document is sent by fax and a notification of successful transmission is received, on the day of transmission;

(b) if the document is sent by email, at the time that the email becomes capable of being retrieved by the person to whom it is sent; and

(c) if the document is sent by prepaid registered post, 2 days after the day the document was posted (even if it is returned undelivered).

(6) A document may be served on a person under this Act by email only with that person's prior written consent.

(7) This section does not apply to documents to be served in proceedings in court.

(8) In this section —

“business address” means —

- (a) in the case of an individual, the individual’s usual or last known place of business in Singapore; or
- (b) in the case of a partnership (other than a limited liability partnership), the partnership’s principal or last known place of business in Singapore;

“document” includes a direction, order or notice permitted or required by this Act to be served on a person;

“last email address” means the last email address given by the addressee concerned to the person giving or serving the document as the email address for the service of documents under this Act;

“residential address” means an individual’s usual or last known place of residence in Singapore.

[Act 34 of 2020 wef 01/07/2022]

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, and the reinstatement of practising certificates cancelled under the Act;

[Act 34 of 2020 wef 01/07/2022]

- (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 the Health Committee and an Interim Orders Committee to order discovery or inspection of documents for the purpose of any proceedings before them;
[Act 34 of 2020 wef 01/07/2022]
- (ea) prescribing that a 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 the Committee reviews the order, and may be represented by counsel at each review;
[Act 34 of 2020 wef 01/07/2022]
- (eb) prescribing the procedure for the withdrawal of charges by the Medical Council in any proceedings under Part 7;
[Act 34 of 2020 wef 01/07/2022]
- (f) regulating the professional practice, etiquette, conduct and discipline of registered medical practitioners, except in relation to the proceedings of a Disciplinary Tribunal;
[Act 34 of 2020 wef 01/07/2022]
- (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) *[Deleted by Act 34 of 2020 wef 01/07/2022]*
- (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.

Rules relating to Disciplinary Commission and Disciplinary Tribunals

70A. The Minister may make rules —

- (a) to provide for matters relating to the Disciplinary Commission; and
- (b) to regulate the practice and procedure of Disciplinary Tribunals, including enabling Disciplinary Tribunals to order discovery or inspection of documents for the purpose of any proceedings before them.

[Act 34 of 2020 wef 01/07/2022]

Amendment of Schedules

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

[Act 34 of 2020 wef 01/07/2022]

(2) The Minister may, in any order made under subsection (1), make such saving or transitional provision as may be necessary or expedient.

[Act 34 of 2020 wef 01/07/2022]

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) *[Deleted by Act 34 of 2020 wef 01/07/2022]*

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) [*Deleted by Act 34 of 2020 wef 01/07/2022*]

(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.
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,	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>
	Nursing and Health Sciences	
	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
	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. DeGroote 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>
	3. Universite de Montreal, 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	Licenciate in Medicine
France	1. Sorbonne University, Faculty of Medicine	Docteur en Medecine
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	1. The Chinese University of Hong Kong, Faculty of Medicine	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>
Republic of China	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
	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

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. 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
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

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>
	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
	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

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 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 London, St. George's Hospital Medical School	MB BS
	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

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>
	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
	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

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>
	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
	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

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>
	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.

1. Act 5 of 1997 — Medical Registration Act 1997

Date of First Reading : 2 June 1997
(Bill No. 2/97 published on 3 June 1997)

Date of Second and Third Readings : 25 August 1997

Date of commencement : 3 April 1998

2. 1998 Revised Edition — Medical Registration Act

Date of operation : 30 May 1998

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

Date of First Reading : 25 August 2000
(Bill No. 22/2000 published on 26 August 2000)

Date of Second and Third Readings : 9 October 2000

Date of commencement : 1 November 2000

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

Date of commencement : 26 October 2001

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

Date of First Reading : 25 November 2002
(Bill No. 47/2002 published on 26 November 2002)

Date of Second and Third Readings : 5 December 2002

Date of commencement : 24 January 2003

6. G. N. No. S 122/2003 — Medical Registration Act (Amendment of Schedule) Order 2003

Date of commencement : 14 March 2003

7. 2004 Revised Edition — Medical Registration Act

Date of operation : 31 July 2004

8. Act 42 of 2005 — Statutes (Miscellaneous Amendments) (No. 2) Act 2005

Date of First Reading : 17 October 2005
(Bill No. 30/2005 published on
18 October 2005)

Date of Second and Third
Readings : 21 November 2005

Date of commencement : 1 January 2006 (Item (14) of the Fifth
Schedule)

**9. G. N. No. S 178/2006 — Medical Registration Act (Amendment of
Schedule) Order 2006**

Date of commencement : 1 April 2006

**10. G. N. No. S 440/2006 — Medical Registration Act (Amendment of
Schedule) (No. 2) Order 2006**

Date of commencement : 1 August 2006

**11. G. N. No. S 138/2007 — Medical Registration Act (Amendment of
Schedule) Order 2007**

Date of commencement : 1 April 2007

**12. G. N. No. S 525/2007 — Medical Registration Act (Amendment of
Schedule) (No. 2) Order 2007**

Date of commencement : 1 October 2007

**13. G. N. No. S 183/2009 — Medical Registration Act (Amendment of
Schedule) Order 2009**

Date of commencement : 29 April 2009

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

Date of commencement : 30 October 2009

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

Date of First Reading : 19 October 2009
(Bill No. 22/2009 published on
19 October 2009)

Date of Second and Third
Readings : 11 January 2010

Date of commencement : 10 August 2010
 1 December 2010
 1 July 2011
 1 July 2012

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

Date of commencement : 1 November 2010
 15 September 2012

17. Act 2 of 2012 — Statutes (Miscellaneous Amendments) Act 2012

Date of First Reading : 21 November 2011
 (Bill No. 22/2011 published on
 21 November 2011)

Date of Second and Third : 18 January 2012
 Readings

Date of commencement : 1 March 2012

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

Date of commencement : 2 June 2014

19. 2014 Revised Edition — Medical Registration Act (Chapter 174)

Date of operation : 31 December 2014

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

Date of commencement : 1 June 2016

21. Act 5 of 2018 — Public Sector (Governance) Act 2018

Date of First Reading : 6 November 2017 (Bill No. 45/2017
 published on 6 November 2017)

Date of Second and Third : 8 January 2018
 Readings

Date of commencement : 1 April 2018

22. G.N. No. S 613/2019 — Medical Registration Act (Amendment of Second Schedule) Order 2019

Date of commencement : 1 January 2020

23. Act 40 of 2019 — Supreme Court of Judicature (Amendment) Act 2019

Date of First Reading : 7 October 2019 (Bill No. 32/2019
 published on 7 October 2019)

- Date of Second and Third Readings : 5 November 2019
- Date of commencement : 2 January 2021
- 24. 2020 Revised Edition — Medical Registration Act 1997**
- Date of operation : 31 December 2021
- 25. 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
- 26. Act 33 of 2021 — Judicial Service (Miscellaneous Amendments) Act 2021**
- Date of First Reading : 4 October 2021
(Bill No. 30/2021)
- Date of Second and Third Readings : 3 November 2021
- Date of commencement : 14 January 2022
1 July 2022
- 27. Act 25 of 2021 — Courts (Civil and Criminal Justice) Reform Act 2021**
- Date of First Reading : 26 July 2021
(Bill No. 18/2021)
- Date of Second and Third Readings : 14 September 2021
- Date of commencement : 1 April 2022
1 July 2022
- 28. Act 34 of 2020 — Medical Registration (Amendment) Act 2020**
- Date of First Reading : 3 September 2020
(Bill No. 30/2020)
- Date of Second and Third Readings : 6 October 2020
- Date of commencement : 1 July 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>]