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NATIONAL REGISTRY OF DISEASES ACT (CHAPTER 201B)

NATIONAL REGISTRY OF DISEASES (ACUTE MYOCARDIAL INFARCTION NOTIFICATION) REGULATIONS 2012

ARRANGEMENT OF REGULATIONS

Regulation

1. Citation and commencement
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In exercise of the powers conferred by sections 6, 7 and 23 of the National Registry of Diseases Act, the Minister for Health hereby makes the following Regulations:

Citation and commencement

1. These Regulations may be cited as the National Registry of Diseases (Acute Myocardial Infarction Notification) Regulations 2012 and shall come into operation on 1st September 2012.

Definitions

2. In these Regulations, unless the context otherwise requires —
- “acute myocardial infarction” means myocardial infarction with one or more of the following:
- (a) changes in cardiac biomarkers beyond the typical limits applicable to the particular test used, together with —
 - (i) symptoms indicative of myocardial ischaemia; or

(ii) electrocardiogram changes indicative of new myocardial ischaemia;

(b) development of new pathological Q waves in the electrocardiogram of the patient;

(c) new loss of viable myocardium or new regional wall motion abnormality;

(d) fresh thrombus,

and includes acute myocardial infarction developed as a complication of cardiovascular intervention for some other cardiac condition;

“patient” means a person to whom a notification referred to in regulation 3 relates.

Form, time and manner of notification for acute myocardial infarction

3. For the purposes of section 6(1) of the Act, a notification by the manager of a healthcare institution to the Registrar that a person has been diagnosed with or is undergoing treatment for acute myocardial infarction at the healthcare institution shall —

(a) contain the information specified in the First Schedule;

(b) be made in the appropriate Form or Listing specified in the Second Schedule, which Form or Listing may be downloaded from the Registry’s Internet website at <http://www.nrdo.gov.sg> or obtained from the office of the Registry during such hours as the office is open for business;

(c) be sent to the Registrar —

(i) by hand (including by courier);

(ii) by registered mail; or

(iii) by using such secure electronic notification system as may be approved by the Registrar; and

(d) be made —

- (i) where the patient has been diagnosed with acute myocardial infarction, not later than 3 months after the diagnosis of that disease was first made;
- (ii) where the patient is undergoing treatment for acute myocardial infarction which commenced before 1st September 2012 and continues on or after that date, not later than 30th November 2012; or
- (iii) where the patient is undergoing treatment for acute myocardial infarction which commenced on or after 1st September 2012, not later than 3 months after the treatment commenced.

Collection of additional information under section 7 of Act

4. Upon receiving a notification referred to in regulation 3 from the manager of a healthcare institution, the Registrar or an authorised Registry officer may, for the purposes of section 7(1) of the Act, require the manager to provide all or any of the additional information specified in the Third Schedule concerning the patient.

FIRST SCHEDULE

Regulation 3(a)

INFORMATION TO BE SUBMITTED WITH NOTIFICATION

1. Identification number of patient (NRIC number, passport number, Foreign Identification number or hospital registration number).
2. Name of patient.
3. Date of birth or age of patient (if date of birth is unknown).

SECOND SCHEDULE

Regulation 3(b)

FORMS OF NOTIFICATION

1. Acute myocardial infarction notification forms set out at <http://www.nrdo.gov.sg>.
2. Acute myocardial infarction case listings.
3. Cardiac biomarkers listings.

SECOND SCHEDULE — *continued*

4. Hospital inpatient discharge summaries.

THIRD SCHEDULE

Regulation 4

ADDITIONAL INFORMATION

1. Patient's particulars:
 - (a) gender;
 - (b) ethnic group;
 - (c) citizenship or resident status;
 - (d) country of birth;
 - (e) residential postal code.
2. Other information:
 - (a) dates of admission and discharge;
 - (b) discharge status;
 - (c) name of admitting healthcare institution;
 - (d) if patient transferred to admitting healthcare institution, name of transferring healthcare institution;
 - (e) whether patient was admitted before transfer, if applicable;
 - (f) details of arrival at emergency medicine department (including date, time(s), and whether electrocardiogram was transmitted from ambulance to emergency medicine department);
 - (g) presenting symptoms or signs (including date and time of onset of symptoms or signs);
 - (h) venue where cardiopulmonary resuscitation and/or direct current shock was applied;
 - (i) heart failure classification in emergency medicine department or upon admission;
 - (j) care setting where patient was managed after onset of acute myocardial infarction.
3. Risk factor profile (including date profile taken).
4. Investigations (including date(s) and findings).

THIRD SCHEDULE — *continued*

5. Classification of acute myocardial infarction and treatment(s) of acute myocardial infarction (including type(s), date(s) and time(s) of treatment(s)).
6. Details of medications administered.
7. Complications during hospitalisation (including date(s)), if any.
8. Current status of patient:
 - (a) living or deceased;
 - (b) where the patient is deceased, the date, time, place and cause of death.
9. Patient's electrocardiograms.
10. Details of notifying healthcare institution:
 - (a) person who made the notification;
 - (b) name of notifying healthcare institution.

Made this 21st day of August 2012.

TAN CHING YEE
*Permanent Secretary,
Ministry of Health,
Singapore.*

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