BERMUDA

MEDICAL PRACTITIONERS (REGISTRATION) REGULATIONS 1950

SR&O 34 / 1950

[made under section 30 of the Medical Practitioners Act 1950 and brought into operation on 1 November 1950]

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SCHEDULE
Forms

Citation
1 These Regulations may be cited as the Medical Practitioner (Registration, etc.) Regulations, 1950.

Interpretation
2 In these Regulations—
   “the Act” means the Medical Practitioners Act 1950 [title 30 item 8];
   “the Council” means the Bermuda Medical Council;
“the register” means the register of medical practitioners maintained by the Registrar under section 6 of the Act.

[Regulation 2 definition “the register” amended by 2020 : 47 s.133 effective 11 December 2020]

Application for registration

3 Applications by a person to be registered under the Act shall be made to the Registrar in Form A in the Schedule.

[Regulation 3 amended by 2020 : 47 s. 133 effective 11 December 2020]

Documents in support

4 (1) The following documents shall be forwarded by an applicant to the Registrar with an application to be registered under the Act, that is to say—

(a) the originals of all medical diplomas awarded to the applicant, or copies of such medical diplomas certified as true copies by or on behalf of the authorities by which the original medical diplomas were respectively awarded;

(b) where the applicant is registered as a medical practitioner in any country or place outside Bermuda, a copy of the relevant entry or entries in that foreign register certified as a true copy by the authority which keeps and maintains that foreign register;

(c) a certificate or testimonial of the character of the applicant given within the period of three months last preceding the date of the application by a person of standing and responsibility well acquainted with the applicant;

(d) a statement by the applicant of his experience in the practice of medicine, surgery and midwifery up to the date of the application;

(e) a certificate or testimonial of the professional competence of the applicant in the practice of medicine, surgery or midwifery given by a medical practitioner of standing and responsibility well acquainted with the practice of the applicant.

(2) In this regulation—

(a) “foreign register” means a register of medical practitioners kept and maintained by any department of, or any person acting under the authority of, the government of any country or place outside Bermuda;

(b) “medical diploma” means any diploma, degree, fellowship, membership, licence, authority to practise, letters, testimonial, certificate, or other status or document granted in respect of medicine, surgery and midwifery, or any of them, or in respect of any branch of medicine or surgery, by any university, corporation, college, or other body, or by any department of, or body of persons acting under, the authority of the government of any country or place, whether within or without Her Majesty’s dominions.

[Regulation 4 amended by 2020 : 47 s.133 effective 11 December 2020]
Entries in register
5 Where, in pursuance of section 9(1)(b)(i) of the Act, the name and professional qualifications of an applicant for registration under the Act are to be entered in the register, there shall, together with such particulars, be entered the following particulars—

(a) the residence of the applicant;
(b) the date of award of each professional qualification of the applicant;
(c) the date of the entry of the name and particulars of the applicant in the register.

Form of certificate of registration
6 A certificate of registration shall be in Form B in the Schedule.

Additional particulars may be entered
7 Application by a registered medical practitioner to have particulars of any degree, diploma or other qualifications entered in the register in pursuance of section 12 of the Act shall be made to the Registrar in Form C in the Schedule.

[Regulation 7 amended by 2020 : 47 s.133 effective 11 December 2020]

Form of authorization of visiting practitioner
8 An authorization permitting a person to practise in Bermuda for a limited period in pursuance of section 21(1) of the Act shall be in Form D in the Schedule.

Service of documents
9 Any application, notice or other document which is required or authorized under the Act to be made or given to, or served on, any person may be made, given or served—

(a) by delivering it to that person; or
(b) in the case of the Registrar or the Council, by leaving it or sending it in a prepaid letter addressed to the Registrar or, as the case may be, to the Chairman of the Bermuda Medical Council, at the Department of Health; or
(c) in the case of any other person, by leaving it or by sending it in a prepaid letter addressed to him, at his usual or last business residence.

[Regulation 9 amended by 2020 : 47 s.133 effective 11 December 2020]
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SCHEDULE

FORMS

FORM A
Application for Registration

A—Application

I hereby make application for the entry of my name (as a specialist) in the register of medical practitioners maintained by the Registrar under section 6 of the Medical Practitioners Act, 1950; and I do hereby declare that to the best of my information and belief, the particulars hereunder are true.

Dated this [blank] day of [blank] 19[blank]

Signature of applicant.

B—Particulars to be Furnished by Applicant

1 Surname [blank]
2 Full Christian names [blank]
3 Address (residential and professional) [blank]
4 Age [blank]
5 Nationality [blank]
6 Professional degrees, diplomas or other qualifications (with dates of grant) [blank]
7 Present appointment [blank]
7A Appointments previously held [blank]
8 Registration, with date, place and authority [blank]
9 Particulars (if any) of striking off or removal from any medical register, or of any disciplinary action taken by any medical authority [blank]
10 Particulars (if any) of any conviction of any offence as a result of which a sentence of imprisonment was imposed without the option of a fine

Delete where appropriate.

1 Delete where appropriate.
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FORM B
Certificate of Registration

I certify that the name of [blank] was on the [blank] day of [blank] 19 [blank] entered (as a specialist in [blank]) in the medical register kept and maintained by me in pursuance of the provisions of the Medical Practitioners Act, 1950.

Dated this [blank] day of [blank] 19 [blank]

Registrar
Bermuda

FORM C
Application for Entry of Additional Qualifications in Register

A—Application

I hereby make application for the entry of the following additional qualifications granted since the entry of my name in the register of medical practitioners maintained by the Registrar under section 6 of the Medical Practitioners Act, 1950, and I do hereby declare that, to the best of my information and belief, the particulars hereunder are true.

Dated this [blank] day of [blank] 19 [blank]

Signature of applicant.

B—Particulars

1 Surname [blank]
2 Full Christian names [blank]
3 Additional qualifications granted [blank]
4 Authority by which additional qualifications granted [blank]
5 Date on which additional qualification granted [blank]

FORM D
Authorization for Visiting Practitioner to Practise Medicine and Surgery

1 The Bermuda Medical Council hereby authorizes [blank] of [blank] to practise in Bermuda subject to the conditions and restrictions hereinafter specified in this authorization.

1 Delete where appropriate.
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2 This authorization shall have effect from the [blank] day of [blank] 19 [blank] to the [blank] day of [blank] 19 [blank]

3 The following special conditions and restrictions [blank] are hereby imposed by the Council, that is to say—

Dated this [blank] of [blank] 19 [blank]

Chairman,
Bermuda Medical Council

(Schedule amended by 2020 : 47 s.133 effective 11 December 2020)

Amended by:
1970 : 390
1972 : 3
BR 72 / 1980
2020 : 47]