
STATUTORY INSTRUMENTS

1992 No. 635

**NATIONAL HEALTH SERVICE,
ENGLAND AND WALES**

**The National Health Service (General
Medical Services) Regulations 1992**

<i>Made</i>	- - - -	<i>10th March 1992</i>
<i>Laid before Parliament</i>		<i>11th March 1992</i>
<i>Coming into force</i>	- -	<i>1st April 1992</i>

The Secretary of State for Health, in exercise of the powers conferred by the provisions set out in column (1) of Schedule 1 to this instrument (as amended in particular by the provisions set out in column (2) of that Schedule), and of all other powers enabling him in that behalf, hereby makes the following Regulations;—

**PART I
GENERAL**

Citation and commencement

1. These Regulations may be cited as the National Health Service (General Medical Services) Regulations 1992 and shall come into force on 1st April 1992.

Interpretation

2.—(1) In these Regulations, unless the context otherwise requires—

“the Act” means the National Health Service Act 1977⁽¹⁾;

“assistant” means a doctor who is acting as an assistant to a doctor on the medical list;

“chemist” has the same meaning as in the Pharmaceutical Regulations;

“child” means a person who has not attained the age of 16 years;

“child health surveillance list” shall be construed in accordance with regulation 27;

“child health surveillance services” means the personal medical services described in regulation 28(2) and in Schedule 4;

“contraceptive services” has the same meaning as in regulation 3(1)(c);

“doctor” means a registered medical practitioner;

“domiciliary visit” means a visit by a doctor either to the place where the patient resides or to the place, other than the doctor’s practice premises, where the doctor is obliged, pursuant to paragraph 13 of the terms of service, to render personal medical services to the patient;

“drug” includes medicine;

“FHSA” means a Family Health Services Authority;

“Family Health Services Authority” means a body of that name established by the Secretary of State under section 10(1) of the Act(2);

“full-time doctor” shall be construed in accordance with regulation 15(1)(a);

“group practice” means an association of not less than two doctors both or all of whom—

- (a) have their names included in an FHSA’s medical list;
- (b) co-ordinate, in the course of regular contact between them, their respective obligations under the terms of service for doctors to provide personal medical services to their patients; and
- (c) conduct and manage their practices from at least one common set of practice premises;

“half-time doctor” shall be construed in accordance with regulation 15(1)(c);

“Health Committee” means the Health Committee of the General Medical Council constituted under section 1(3) of the Medical Act 1983(3);

“job-sharing doctor” shall be construed in accordance with regulation 15(1)(d);

“local directory” means the local directory of family doctors maintained by an FHSA pursuant to regulation 8;

“Local Medical Committee” means a committee recognised under section 44 of the Act(4) as being representative of medical practitioners in a locality;

“locality” means the locality for which an FHSA is established;

“maternity medical services” shall be construed in accordance with regulation 31 and Schedule 5;

“medical card” means a card issued by an FHSA to a person for the purpose of enabling him to obtain, or establishing his title to receive, general medical services, other than contraceptive services, maternity medical services, child health surveillance services and minor surgery services;

“medical list” shall be construed in accordance with regulation 4(1);

“medical officer” means a doctor in the service of the Department of Social Security or, as the case may be, of the Welsh Office;

“Medical Practices Committee” means the committee constituted in accordance with section 7 of the Act;

(2) Section 10 was substituted by section 5(1) of the Health and Social Security Act 1984 (c. 48) and amended by section 2(3) of the National Health Service and Community Care Act 1990 (c. 19). By virtue of section 2(1)(b) of the National Health Service and Community Care Act 1990, references in any Act to a Family Practitioner Committee fall to be construed as references to a Family Health Services Authority.

(3) c.54.

(4) Section 44 was amended by section 12(4) of the National Health Service and Community Care Act 1990 (c. 19).

“medical records” means, in relation to any patient, the records maintained in respect of that patient pursuant to paragraph 36 of the terms of service;

“Medical Register” shall be construed in accordance with section 34 of the Medical Act 1983⁽⁵⁾;

“minor surgery list” shall be construed in accordance with regulation 32;

“minor surgery services” means the personal medical services described in regulation 33 and in Schedule 6;

“obstetric list” shall be construed in accordance with regulation 30;

“parent” includes, in relation to any child, any adult person who, in the opinion of the doctor, is for the time being discharging in respect of that child the obligations normally attaching to a parent in respect of his child;

“patient” has the same meaning as in paragraph 4 of the terms of service;

“Pharmaceutical Regulations” means the National Health Service (Pharmaceutical Services) Regulations 1992⁽⁶⁾;

“practice area” means the area in which a doctor is under an obligation to visit patients, by virtue either of his application for inclusion in the medical list or of any variation to it pursuant to these Regulations or the terms of service;

“practice premises” means, in relation to any doctor, the premises at which he is obliged under paragraph 29 of the terms of service to attend in order to be consulted by, or to provide treatment or services for, his patients;

“Preliminary Proceedings Committee” means the Preliminary Proceedings Committee of the General Medical Council constituted under section 1(3) of the Medical Act 1983;

“Professional Conduct Committee” means the Professional Conduct Committee constituted under section 1(3) of the Medical Act 1983;

“relevant service” means—

- (a) whole-time service in the armed forces of the Crown in a national emergency as a volunteer or otherwise; or
- (b) compulsory whole-time service in those forces, including service resulting from any reserve liability; or
- (c) any equivalent service by a person liable for compulsory whole-time service in those forces;

“restricted doctor” shall be construed in accordance with regulation 15(1)(e);

“restricted list principal” means a doctor who has undertaken to provide general medical services only to a restricted category of patients identified by reference to their connection with a particular establishment or organisation, and “restricted list” shall be construed accordingly;

“restricted services principal” means a doctor who has undertaken to provide general medical services limited to—

- (a) child health surveillance services;
- (b) contraceptive services;
- (c) maternity medical services; or
- (d) minor surgery services,

or to any combination of the above and “restricted services” shall be construed accordingly;

(5) 1983 c. 54.

(6) S.I. 1992/662.

- “temporary resident” shall be construed in accordance with regulation 26;
- “terms of service” means the terms of service contained, or referred to, in Schedule 2;
- “three-quarter-time doctor” shall be construed in accordance with regulation 15(1)(b);
- “trainee general practitioner” means a doctor who is being trained in general practice;
- “treatment” means medical attendance and treatment, but does not include child health surveillance services, contraceptive services, maternity medical services or minor surgery services, unless the doctor has undertaken to provide such services to the person concerned in accordance with these Regulations;
- “the Tribunal” means the Tribunal constituted under section 46 of the Act(7).

(2) Except where expressly provided to the contrary, any document which is required or authorised to be given or sent to a person or body under these Regulations (including the terms of service) may be given or sent by delivering it to that person or, in the case of a body, to the secretary or general manager of that body or by sending it in a pre-paid envelope addressed to him or, in the case of a body, to the secretary or general manager of that body at his usual or last known address.

(3) Unless the context otherwise requires—

(a) any reference in these Regulations—

- (i) to a numbered regulation is a reference to the regulation bearing that number in these Regulations,
- (ii) to a numbered Part or Schedule is to the Part of, or Schedule to, these Regulations bearing that number,
- (iii) to a form thereby prescribed includes a form substantially the same; and

(b) any reference in a regulation or in a Schedule to these Regulations to a numbered paragraph is a reference to the paragraph bearing that number in that regulation or Schedule.

(4) Where, by virtue of directions given under section 13 of the Act, or by virtue of any arrangements made pursuant to regulations made under the Act, a function of the Secretary of State is exercisable by some other person or body, a reference in these Regulations to the Secretary of State in relation to that function includes a reference to the person or body exercising that function on behalf of the Secretary of State(8).

Scope and terms of service

3.—(1) The arrangements with doctors for the provision of general medical services which it is the duty of an FHSA under section 29 of the Act(9) to make and, under section 15(1) of the Act(10), to administer shall include arrangements for the provision of—

- (a) all necessary and appropriate personal medical services of the type usually provided by general medical practitioners;
- (b) child health surveillance services;
- (c) contraceptive services, that is to say—
 - (i) the giving of advice to women on contraception,
 - (ii) the medical examination of women seeking such advice,
 - (iii) the contraceptive treatment of such women, and

(7) 1977 c. 49; section 46 was amended by the Health and Social Security Act 1984 (c. 48), Schedule 8, and modified by S.I.1985/39, article 7(16).

(8) See S.I. 1992/660.

(9) See column 2 of Schedule 1 to these Regulations for the relevant amendments to section 29.

(10) Section 15(1) was amended by the Health Services Act 1980 (c. 53), Schedule 1, paragraphs 35 and 90 and by the Health and Social Security Act 1984 (c. 48), section 5(2) and Schedule 8, Part I.

- (iv) the supply to such women of contraceptive substances and appliances;
- (d) maternity medical services; and
- (e) minor surgery services.

(2) The arrangements to which paragraph (1) refers shall incorporate the terms of service set out in Schedule 2, and Schedules 8, 9, 10, 11, 12 and 13 shall have effect for the purposes of paragraphs 29, 37, 44(1), 44(2), 47 and 50 respectively of the terms of service.

PART II

THE MEDICAL LIST

Medical list

- 4.—(1) An FHSA shall prepare a list, to be called the medical list, of—
- (a) doctors entitled, pursuant to section 30 of the Act, to have their names included in the list; and
 - (b) doctors for the time being appointed under regulation 25.
- (2) The medical list shall be divided into five parts, as follows:—
- (a) part I shall contain the names of doctors who are full-time doctors;
 - (b) part II shall contain the names of doctors who are three-quarter-time doctors;
 - (c) part III shall contain the names of doctors who are half-time doctors;
 - (d) part IV shall contain the names of doctors who are job-sharing doctors; and
 - (e) part V shall contain the names of doctors who are restricted doctors.
- (3) An FHSA shall, when including the name of any doctor in its medical list, assign the name to that part of the list which is, by virtue of paragraph (2), appropriate in the case of that doctor, having regard to the nature of any condition imposed or treated as imposed in relation to him by the Medical Practices Committee under regulation 15.
- (4) In respect of any doctor whose name is included in it, the medical list shall indicate—
- (a) if he is on any of the child health surveillance list, the obstetric list or the minor surgery list;
 - (b) if the general medical services he has undertaken to provide include, exclude or are limited to maternity medical services;
 - (c) except in the case of a doctor who has requested otherwise, if he has undertaken to provide contraceptive services, and if so—
 - (i) whether he has so undertaken in respect only of patients for whom he or his partners have also undertaken to provide other general medical services, or
 - (ii) whether he has so undertaken without such restriction;
 - (d) if he has been relieved of the responsibility for providing services during certain times under paragraph 18(2) of the terms of service and the name of the doctor with whom the FHSA has made arrangements for the provision of services during such times;
 - (e) if he is included in the medical list by virtue of his appointment under regulation 25; and
 - (f) if he is a restricted list principal or a restricted services principal, and if so, the nature of the restricted list or, as the case may be, of the restricted services.
- (5) In addition to the name of the doctor and any information required to be included by virtue of paragraph (4), the medical list shall contain—

- (a) the address of the practice premises where he agrees to attend for the purpose of treating persons, and the telephone numbers at which he is prepared to receive messages;
- (b) particulars of the days and hours when he agrees to be in attendance at such premises;
- (c) particulars of any days and hours when an appointments system is in operation;
- (d) where he practises in partnership, the name of each partner;
- (e) where he participates in a group practice, the name of each other doctor in that group practice;
- (f) an indication of the geographical boundary of his practice area by reference to a sketch, diagram or plan and details of any conditions as to his practice area attached to the granting of his application by the Medical Practices Committee or, on appeal, by the Secretary of State;
- (g) if the FHSA thinks fit, details of that part of the locality in which the doctor undertakes to provide treatment; and
- (h) provided that the doctor consents to its inclusion, his date of birth, or, if he does not so consent, the date of his first full registration as a medical practitioner (whether pursuant to the Medical Act 1983⁽¹¹⁾ or otherwise).

Application for inclusion in the medical list or to succeed to a vacancy

5.—(1) An application by a doctor for the inclusion of his name in the medical list shall be made except in a case to which paragraph (2) applies, by sending to the FHSA an application in writing which shall include the information and undertakings specified in Part I of Schedule 3.

(2) An application by a doctor—

- (a) to succeed to a practice declared vacant; or
- (b) to fill a vacancy which has arisen where the Medical Practices Committee has resolved that an additional doctor is required in a locality otherwise than in succession to another doctor,

shall be made, by sending the application to the FHSA by no later than the date specified in the notice given under regulation 12 in respect of the vacancy to which the application relates, or within such further period as that FHSA may for reasonable cause allow, and shall include the information and undertakings specified in Part II of Schedule 3.

(3) On receiving an application under paragraph (1) the FHSA shall, subject to section 30(1A) of the Act⁽¹²⁾ (which contains requirements as to knowledge of English), forthwith send the application to the Medical Practices Committee together with a report containing the information specified in Part IIIA of Schedule 3.

(4) Where a doctor makes an application for the inclusion of his name in the medical list of more than one FHSA, the FHSA in whose locality resides the largest number of individuals who are expected to be on his list of patients, shall send to the Medical Practices Committee the report mentioned in paragraph (3) and any other FHSA shall send the application to the Medical Practices Committee together with a report containing the information specified in Part IIIB of Schedule 3.

(5) Where a doctor makes an application for the inclusion of his name in the medical list only as a restricted list principal the FHSA shall send the application to the Medical Practices Committee together with a report containing the information specified in Part IIIC of Schedule 3.

(6) Where a doctor makes an application for the inclusion of his name in the medical list only as a restricted services principal, the FHSA shall send the application to the Medical Practices Committee together with a report containing the information specified in Part IIID of Schedule 3.

(11) 1983 c. 54.

(12) Section 30(1A) was added by the Health and Social Security Act 1984, Schedule 3.

(7) Before making a report under paragraph (3), (4), (5) or (6), the FHSA shall consult the Local Medical Committee.

(8) Where a report mentioned in paragraph (3), (4), (5) or (6) does not support a doctor's application under paragraph (1), the FHSA shall send to the doctor a copy of that part of the report which does not support his application and the doctor may, within 14 days of receiving it, send to the Medical Practices Committee his representations in writing in response to that report.

(9) In paragraph (2)(a) and in paragraph 14(5) of the terms of service "practice declared vacant" means a practice—

- (a) which has been rendered vacant by—
 - (i) the death of a doctor included in the medical list by virtue of regulation 4(1)(a), or
 - (ii) the withdrawal or removal of such a doctor from the medical list; and
- (b) as respects which the Medical Practices Committee has resolved that a doctor is required to fill the vacancy.

Amendment of or withdrawal from the medical list

6.—(1) A doctor shall, unless it is impracticable for him to do so, give notice to the FHSA within 28 days of any occurrence requiring a change in the information recorded about him in the medical list.

(2) A doctor shall, unless it is impracticable for him to do so, give notice in writing to the FHSA at least 3 months in advance of any date on which he intends either—

- (a) to withdraw his name from any of the medical list, the child health surveillance list, the obstetric list or the minor surgery list; or
- (b) to cease to provide any of the following services, namely child health surveillance services, contraceptive services, maternity medical services, or minor surgery services.

(3) Subject to paragraph (6), the FHSA shall—

- (a) on receiving notice from any doctor pursuant to paragraph (1), amend the medical list in relation to that doctor; and
- (b) in the case of a notice pursuant to paragraph (2), so amend the medical list, the child health surveillance list, the obstetric list or the minor surgery list, as the case may be, either—
 - (i) on the date which falls 3 months after the date of the notice, or
 - (ii) on the date from which the FHSA has agreed that the withdrawal or cessation shall take effect,

whichever is the earlier.

(4) Any notice pursuant to paragraph (2) may not be withdrawn except with the consent of the FHSA.

(5) Where the Medical Practices Committee notifies the FHSA that, in relation to any doctor whose name is included in the medical list, it has varied under regulation 16 any condition mentioned in paragraph (1)(a)(i) of that regulation, the FHSA shall amend the medical list by transferring the name of that doctor to that part of the list which, having regard to the nature of the condition as varied, is appropriate in his case by virtue of regulation 4(2).

(6) Where, in relation to any doctor, representations are made to the Tribunal under section 46 of the Act(13) (disqualification of practitioners) that his continued inclusion in the medical list would be prejudicial to the efficient provision of general medical services, the doctor shall not, except with

(13) Section 46 was amended by Schedule 8 to the Health and Social Security Act 1984 (c. 48) and by S.I.1985/39, article 7(16).

the consent of the Secretary of State, be entitled to have his name removed from the medical list until the proceedings on those representations have been determined.

Removal from the medical list

7.—(1) Where an FHSA determines that a doctor whose name has been included in its medical list—

- (a) has died;
- (b) is no longer a doctor; or
- (c) is the subject of a direction given by the Professional Conduct Committee under section 36 of the Medical Act 1983⁽¹⁴⁾ (erasure of name from the register or suspension of registration) or of an order made by that Committee under section 38(1) of that Act (immediate suspension),

it shall remove his name from the medical list with effect from the date of its determination or, where sub-paragraph (c) applies, the date on which the direction or order takes effect, if that date is later than the date of the FHSA's determination.

(2) Where an FHSA determines, in accordance with paragraphs (3) and (4), that a doctor whose name has been included in the medical list for the preceding six months has not during that period provided any general medical services personally, the FHSA may remove his name from the medical list.

(3) In calculating the period of six months referred to in paragraph (2) the FHSA shall disregard—

- (a) any period during which the doctor provided no general medical services by reason only that his registration as a medical practitioner was suspended as mentioned in section 29(8) of the Act⁽¹⁵⁾ (suspension by direction or order of the Health Committee or by interim order of the Preliminary Proceedings Committee); and
- (b) any period during which the doctor was performing relevant service.

(4) Before making any determination under paragraph (2) the FHSA shall—

- (a) give the doctor 28 days' notice of its intention;
- (b) afford the doctor an opportunity of making representations to the FHSA in writing or (if he so wishes) in person; and
- (c) consult the Local Medical Committee.

(5) Where under paragraph (2) the FHSA determines to remove a doctor's name from its medical list it shall give notice in writing of its determination to the doctor together with the reasons for it and inform him of his right of appeal under paragraph (6).

(6) A doctor to whom a notice has been given under paragraph (5) may, within 21 days of receipt of the notice, appeal to the Secretary of State against the decision of the FHSA, and the FHSA shall not remove the doctor from the medical list until—

- (a) if no appeal is made, the expiration of the period of 21 days; or
- (b) if an appeal is made, the appeal is determined.

(7) An appeal under paragraph (6) shall be made in writing and shall set out the grounds of appeal.

(8) On any appeal pursuant to paragraph (6), the Secretary of State may hold an oral hearing of the appeal and in such a case shall—

- (a) appoint one or more persons to hear the appeal who shall report to him on the appeal; and

⁽¹⁴⁾ 1983 c. 54.

⁽¹⁵⁾ Section 29(8) was amended by paragraph 2(2) of Schedule 6 to the Health and Social Services and Social Security Adjudications Act 1983 (c. 41).

- (b) not less than 14 days before the date fixed for the hearing, give notice in writing to the appellant and to the FHSA.
- (9) Where the Secretary of State holds an oral hearing of an appeal pursuant to paragraph (8), the appellant and the FHSA may be represented by counsel, solicitor or any other person.
- (10) Where the Secretary of State allows the appeal, he shall direct the FHSA not to remove the doctor's name from the medical list.
- (11) The FHSA shall remove from the medical list the name of any doctor who has attained the age of 70 years, with effect from the date on which he attained that age.
- (12) The FHSA shall give to any doctor whose name is to be removed from the medical list in accordance with paragraph (11)—
 - (a) notice in writing to that effect not less than 12 months nor more than 13 months before the date on which his name is to be removed; and
 - (b) a further such notice not less than 3 months nor more than 4 months before that date,but the failure to give notice to any doctor as required by sub-paragraph (a) or (b) shall not prevent the removal of that doctor's name from the medical list in accordance with paragraph (11).

Local directory of family doctors

- 8.—(1)** Subject to the requirements of this regulation and regulation 9, an FHSA shall prepare, and thereafter maintain, in addition to the medical list, a list to be known as the local directory of family doctors comprising, in respect of each doctor whose name is included in its medical list, the following information:—
- (a) all the information included in respect of the doctor in the medical list of the FHSA, other than—
 - (i) information included pursuant to regulation 4(4)(d), and
 - (ii) his date of birth, unless the doctor has agreed to its inclusion in the local directory;
 - (b) where the doctor's date of birth is included in the medical list but he has not agreed to its inclusion in the local directory, the date of his first full registration as a medical practitioner whether pursuant to the Medical Act 1983(16) or otherwise;
 - (c) the sex of the doctor;
 - (d) details of any medical qualification held by the doctor which he is entitled to have registered pursuant to section 16 of the Medical Act 1983 (registration of qualifications), including the date on which the qualification was awarded;
 - (e) the nature of any clinic provided by the doctor for his patients and the frequency with which it is held;
 - (f) the number of assistants and trainee general practitioners employed by him;
 - (g) details of—
 - (i) the number of other persons employed or available at his practice premises to assist him in the discharge of his obligations under the terms of service,
 - (ii) the nature of the services provided by each such person, and
 - (iii) the average number of hours normally worked by each such person during any week;
 - (h) the terms of any consent granted to the doctor by the FHSA or, on appeal, by the Secretary of State, pursuant to paragraph 22 of the terms of service, concerning the use of a deputising service; and

- (i) where, and to the extent that, the doctor so requests—
 - (i) details of any languages, other than English, spoken by the doctor or by any person referred to in sub-paragraphs (f) or (g), and
 - (ii) details of any particular clinical interests of the doctor.

(2) Paragraph (1) shall apply in the case of a restricted list principal or a restricted services principal only to the extent that the FHSA sees fit.

(3) The FHSA may, to the extent that it sees fit, also include in the local directory other details or material relating to general medical services, general dental services, general ophthalmic services and pharmaceutical services in its locality.

(4) The local directory shall include the name of each doctor in alphabetical order.

(5) Where a doctor practises in partnership or in a group practice with other doctors, the information regarding his practice which falls to be included in the local directory pursuant to paragraph (1)(e), (f), (g), (h) and (i) may, provided each doctor in the partnership or, as the case may be, the group practice agrees, be included in the entry relating to only one of those doctors.

(6) Notwithstanding the provisions of regulation 37, the FHSA may compile extracts from the information in the local directory by reference to geographical areas of the FHSA's locality, and may make any such extracts available to persons to whom, in the opinion of the FHSA, it is likely to be of interest.

Amendment of local directory

9.—(1) A doctor shall, unless it is impracticable for him to do so, notify the FHSA within 28 days of any occurrence requiring a change in the information recorded about him in the local directory.

(2) The FHSA shall, in the event of a notification pursuant to paragraph (1), make any necessary amendment to the local directory.

PART III

MEDICAL PRACTICES COMMITTEE

Appointment of members and tenure of office

10.—(1) Subject to paragraphs (2) to (4), the chairman and other members of the Medical Practices Committee shall be appointed for a period of three years expiring on 31st March in any year.

(2) A member may be re-appointed on the expiration of his term of office.

(3) A member may resign by giving notice in writing to the Secretary of State, and a member who is appointed as being a person actively engaged in medical practice shall be deemed to have resigned if he ceases to be so engaged.

(4) In the case of a vacancy in membership occasioned by death or by resignation (including deemed resignation under paragraph (3)), a person shall be appointed to fill the vacancy for the remainder of the period for which his predecessor was appointed.

Reports by the FHSA

11.—(1) An FHSA shall, at least once in every three years, make to the Medical Practices Committee a report, containing the information set out in Part IV of Schedule 3, to enable the Medical Practices Committee to judge the adequacy of the medical services in the locality or its different parts.

(2) Subject to paragraphs (3) and (4), where a doctor dies or his name is otherwise withdrawn or removed from the medical list, except where the inclusion of that doctor's name in the list was by virtue only of his appointment under regulation 25, the FHSA shall make a report to the Medical Practices Committee containing the information set out in Part V of Schedule 3 and shall advise as to the need for filling the vacancy.

(3) Where the doctor who has died or whose name is otherwise withdrawn or removed from the medical list was included in the medical list of more than one FHSA, the FHSA in whose locality resides the largest number of individuals who are on his list of patients shall make a report to the Medical Practices Committee containing the information set out in Part V of Schedule 3 and advising as to the need for filling the vacancy and any other FHSA shall make a report to the Medical Practices Committee containing only the information set out in paragraphs 1(a) and (c) and 7 of Part V of Schedule 3.

(4) Where the doctor who has died or whose name is otherwise withdrawn or removed from the medical list was included in the list only as a restricted services principal, the FHSA shall make a report to the Medical Practices Committee containing only the information set out in paragraph 1(a) and (b) of Part V of Schedule 3.

(5) Before making any report under paragraph (1), (2), (3) or (4) the FHSA shall consult the Local Medical Committee.

Advertisement of vacancies

12.—(1) Where it has been resolved that a vacancy has arisen or is about to arise in any locality, the FHSA for that locality shall, within such period as the Medical Practices Committee shall direct, give notice of the vacancy in accordance with paragraph (2).

(2) A notice of a vacancy—

(a) shall include—

(i) details of the nature and location of the vacancy,

(ii) where the vacancy is one in connection with which the Medical Practices Committee has indicated to the FHSA the nature of any condition which it is likely to impose under section 33(4) of the Act in relation to a successful applicant, details of that condition, and

(iii) the date by which any application to fill the vacancy must be sent or delivered to that FHSA;

(b) may include such other information about the vacancy or the locality as that FHSA considers appropriate, and

(c) shall be published in such manner as appears to that FHSA to be likely to bring the vacancy to the attention of doctors within and outside its locality.

(3) In this regulation and in regulation 13, "vacancy" means a requirement for—

(a) an additional doctor to provide general medical services otherwise than in succession to another doctor, as mentioned in regulation 5(2)(b); or

(b) a doctor to succeed to a practice which has been rendered vacant, as mentioned in regulation 5(6).

Selection of applicants by FHSA

13.—(1) An application under regulation 5(2) in respect of a vacancy shall be an application to which the provisions of section 33(2A)(17) of the Act shall apply, and shall be dealt with by the FHSA in accordance with the following provisions of this regulation.

(2) Where the FHSA receives more than one such application in connection with any vacancy, it shall select the applicant whose application it wishes to be considered by the Medical Practices Committee.

(3) Before making its selection for the purposes of paragraph (2), the FHSA may give to any applicant for the vacancy an opportunity of making—

- (a) representations to it in writing; and
- (b) where the FHSA sees fit, representations to it in person.

(4) When the FHSA has selected an applicant, it shall—

- (a) notify each applicant in writing whether or not he has been selected;
- (b) inform any applicant who has not been selected of his right of appeal to the Secretary of State on a point of law under section 33(2A)(c) of the Act; and
- (c) subject to paragraph (5), send the application of the selected applicant to the Medical Practices Committee, indicating in writing that it wishes that application to be considered by that Committee.

(5) An application shall not be sent to the Medical Practices Committee under paragraph (4)(c) until—

- (a) the time has expired for bringing an appeal under section 33(2A)(c) of the Act in connection with the non-selection of any applicant for the vacancy to which the application relates; or
- (b) where such an appeal is made—
 - (i) the appeal has been determined adversely to the appellant, or
 - (ii) where the appeal is successful, the FHSA has reconsidered the application in respect of which the appeal is made,

whichever is the latest.

(6) Where the FHSA receives only one application in connection with any vacancy it shall—

- (a) send the application to the Medical Practices Committee indicating in writing that it is the only application for that vacancy; and
- (b) notify the applicant in writing that it has done so.

Determination of applications by Medical Practices Committee

14.—(1) The Medical Practices Committee shall determine applications under regulation 5 in accordance with the following paragraphs of this regulation.

(2) Subject to paragraph (3), in relation to any such application, the Medical Practices Committee shall—

- (a) where the application is made under regulation 5(1), consider the report made by the FHSA with respect to the application and any representations in writing made by the doctor in accordance with regulation 5(8);

(17) Subsection (2A) was inserted into section 33 of the Act by section 23(2) of the National Health Service and Community Care Act 1990 (c. 19).

- (b) before granting the application, ascertain whether or not the applicant is suitably experienced as mentioned in section 31 of the Act; and
 - (c) where it grants the application, consider—
 - (i) which of the conditions mentioned in regulation 15(1) is appropriate in the case of the applicant, and
 - (ii) whether it should impose in relation to the applicant any condition mentioned in section 33(4)(b) of the Act.
- (3) The Medical Practices Committee shall not determine an application under regulation 5(1) until it has received any representations in writing made by the doctor in accordance with regulation 5(8) or until the time allowed for the making of representations has expired, whichever is the earlier.
- (4) The Medical Practices Committee shall not consider any application made under regulation 5(2) unless the FHSA has indicated that—
- (a) the application is the only one for the vacancy in question; or
 - (b) it has selected the application for consideration by that Committee.
- (5) Subject to paragraph (6), any determination of the Medical Practices Committee shall be the decision of the majority of those members who are present and voting at a meeting of the Committee.
- (6) At any such meeting, four members of the Medical Practices Committee shall form a quorum, and in the case of an equality of votes the chairman shall have a second or casting vote.
- (7) The Medical Practices Committee shall give notice in writing to the applicant whose application it has considered, the FHSA and the Secretary of State of its determination of that application, and shall inform any such applicant whose application is refused or granted subject to conditions of his right of appeal to the Secretary of State on a point of law.
- (8) Where the Medical Practices Committee refuses an application under this regulation, it shall, when it gives notice to the applicant of its determination, include with the notice—
- (a) a statement of the reasons for its decision; and
 - (b) in the case of an application under regulation 5(1), where the report from the FHSA to the Medical Practices Committee, made pursuant to regulation 5(3), (4), (5), or as the case may be, (6) supported the application, a copy of that part of the report.

Conditions under which general medical services are to be provided

- 15.—**(1) For the purposes of section 33(4)(a) of the Act, the condition by reference to which the Medical Practices Committee shall specify the provision of general medical services for which the applicant will be entitled to be remunerated is that he shall provide such services as—
- (a) a full-time doctor, that is to say a doctor who is to provide general medical services during not less than 26 hours in any week in which he is, pursuant to paragraph 29 of his terms of service, normally available to provide such services;
 - (b) a three-quarter-time doctor, that is to say a doctor who is to provide such services during less than 26 hours but not less than 19 hours in any such week;
 - (c) a half-time doctor, that is to say a doctor who is to provide such services during less than 19 hours, but not less than 13 hours, in any such week;
 - (d) a job-sharing doctor, that is to say a doctor—
 - (i) who is to practise in partnership with another doctor whose name is included in the medical list, and
 - (ii) who is himself to provide such services during less than 26 hours in any such week, and

- (iii) for whom the hours during which he is to provide such services are, when aggregated with the hours of that other doctor, to amount to not less than 26 hours in any such week; or
- (e) a restricted doctor, that is to say a doctor—
 - (i) who is a restricted list principal or a restricted services principal, and
 - (ii) who is to provide general medical services during such number of hours in any week as he shall have specified in his application pursuant to regulation 5.
- (2) Where on 1st January 1991 a doctor's name was included in the medical list, that doctor shall be treated as if the Medical Practices Committee had on that date imposed in relation to him—
 - (a) where the doctor was at that date available for not less than 26 hours in any week, the condition mentioned in paragraph (1)(a);
 - (b) where the doctor was at that date available for less than 26 hours but not less than 19 hours in any week, the condition mentioned in paragraph (1)(b);
 - (c) where the doctor was at that date available for less than 19 hours but not less than 13 hours in any week, the condition mentioned in paragraph (1)(c);
 - (d) where the doctor was at that date available jointly with another doctor for not less than 26 hours in any week, the condition mentioned in paragraph (1)(d); or
 - (e) where the doctor was at that date a restricted list principal or a restricted services principal, the condition mentioned in paragraph (1)(e), but as if for the reference in that subparagraph to the hours specified by the doctor in his application, there was substituted a reference to the hours for which the doctor was, in any week, normally available to his patients immediately before 1st January 1991.

Variation of conditions

- 16.—**(1) A doctor whose name is included in a medical list may apply, in accordance with paragraph (2), for the variation of any condition—
- (a) imposed in relation to him by the Medical Practices Committee—
 - (i) under regulation 15(1) or treated, by virtue of regulation 15(2) as having been imposed by that Committee, in relation to the extent to which that doctor may carry out remunerated work, or
 - (ii) in accordance with section 33(4)(b) of the Act, excluding the provision by that doctor of general medical services in a specified part or parts of the locality of an FHSA; or
 - (b) specified in relation to him by the Secretary of State on the determination of any appeal from a decision of the Medical Practices Committee.
- (2) An application for the purposes of paragraph (1) shall be made in writing to the FHSA and shall include the information specified in Part VI of Schedule 3.
- (3) On receipt of an application under this regulation, the FHSA shall forward the application to the Medical Practices Committee, together with its observations in writing on the application.
- (4) Where the observations mentioned in paragraph (3) do not support the doctor's application under paragraph (1), the FHSA shall send to the doctor a copy of that part of those observations which do not support his application and the doctor may, within 14 days of receiving it, send to the Medical Practices Committee his representations in writing in response to the observations.
- (5) The provisions of regulation 14(5) and (6) as respects the constitution and quorum of the Medical Practices Committee shall apply in the case of the determination by that Committee of an application under this regulation as they apply to the determination of an application under that regulation.

(6) The Medical Practices Committee shall not consider an application under this regulation until it has received representations from the doctor under paragraph (4) or until the time allowed under that paragraph for the making of representations has expired, whichever is the earlier.

(7) On consideration of an application under this regulation the Medical Practices Committee—

(a) shall take account of the observations made by the FHSA and of any representations made by the doctor in response;

(b) in determining the application, may refuse to vary the condition in question, or may—

(i) in the case of a condition mentioned in paragraph (1)(a)(i), vary the condition by imposing in relation to the doctor such other condition mentioned in regulation 15(1)(a) to (e) as has been requested in the application; and

(ii) in the case of a condition mentioned in paragraph (1)(a)(ii), vary the condition by specifying therein such other part or parts of the relevant locality (in which the doctor is to be excluded from providing general medical services) as that Committee considers appropriate,

(c) shall give notice of its decision in writing to the doctor and to the FHSA.

(8) Where the Medical Practices Committee refuses under paragraph (7)(b) to vary a condition it shall, when it gives notice to the doctor of its decision—

(a) include with the notice—

(i) a statement of the reasons for its decision, and

(ii) in any case where the observations made by the FHSA to the Medical Practices Committee in pursuance of paragraph (3) supported the application, a copy of that part of those observations, and

(b) advise the doctor in writing of his right of appeal under paragraph (10).

(9) Where the Medical Practices Committee varies a condition in the manner mentioned in head (ii) of paragraph 7(b), it shall, when it gives notice to the doctor of its decision—

(a) include with the notice a statement of the reasons for its decision; and

(b) advise the doctor in writing of his right of appeal under paragraph (10).

(10) A doctor may appeal to the Secretary of State on a point of law against the refusal of the Medical Practices Committee to vary a condition under this regulation or its variation of a condition in the manner mentioned in head (ii) of paragraph (7)(b), and—

(a) paragraphs (2) to (9) of regulation 17 shall apply to the making and determination of any such appeal; and

(b) where the Secretary of State allows such an appeal, he shall remit the application to that Committee for reconsideration, and regulation 17(11) shall apply in that event.

Appeal to the Secretary of State

17.—(1) Any appeal to the Secretary of State on a point of law—

(a) pursuant to section 33(2A)(c) of the Act by a doctor who has not been selected by an FHSA as mentioned in paragraph (c) of that subsection;

(b) pursuant to section 33(5) of that Act by a doctor whose application under section 30 of that Act has been refused by the Medical Practices Committee or has been granted by that Committee subject to conditions; or

(c) pursuant to regulation 16(10) (variation of conditions in connection with inclusion in a medical list),

shall be made and determined in accordance with this regulation.

(2) A doctor may appeal by sending to the Secretary of State a notice of appeal within 21 days of the date on which notice of the decision of the FHSA or, as the case may be, the Medical Practices Committee is sent to him.

(3) A notice of appeal shall contain a concise statement of any point of law in respect of which the doctor contends that the decision of the FHSA or, as the case may be, the Medical Practices Committee is erroneous.

(4) If it appears to the Secretary of State that the appeal is of such a nature that it can properly be determined without an oral hearing, he may dispense with an oral hearing and determine the appeal summarily, and shall communicate his decision, together with the reasons for it, in writing to the appellant, and the FHSA or, as the case may be, the Medical Practices Committee.

(5) If the Secretary of State is of the opinion that an oral hearing is required, he shall appoint—

- (a) a person who is a barrister or a solicitor; and
- (b) where the Secretary of State sees fit, one or more other persons,

to hear the appeal.

(6) An oral hearing shall take place at such time and place as the Secretary of State may direct and, not less than 14 days before the date fixed for the hearing, notice of the hearing shall be sent to the appellant, the FHSA or, as the case may be, the Medical Practices Committee and in the case of an appeal mentioned in paragraph (1)(a), to the doctor whose application for appointment to the vacancy to which the appellant's application relates was selected for consideration by the Medical Practices Committee.

(7) Subject to paragraphs (8) and (9), the procedure at the oral hearing shall be such as the person or persons hearing the appeal shall determine.

(8) The appellant and any of the parties to whom notice of the hearing is required to be given may attend and be heard in person or by counsel or solicitor or other representative.

(9) The FHSA or, as the case may be, the Medical Practices Committee, may be represented at the hearing by any duly authorised officer or member or by counsel or solicitor.

(10) The persons hearing the appeal shall make a report to the Secretary of State stating the relevant facts and their conclusions and the Secretary of State, after taking the report into consideration, shall give his decision and communicate it, together with the reasons for it, in writing to—

- (a) the appellant;
- (b) the FHSA or, as the case may be, the Medical Practices Committee; and
- (c) any doctor who has, under paragraph (6), been served with notice of the hearing.

(11) Where, on allowing an appeal, the Secretary of State remits an application to the FHSA or, as the case may be, to the Medical Practices Committee for reconsideration—

- (a) he shall give to that FHSA or, as the case may be, the Medical Practices Committee, such directions as appear to him to be desirable with a view to ensuring the proper determination of the application in accordance with the relevant law; and
- (b) the FHSA or, as the case may be, the Medical Practices Committee, shall redetermine the application and in so doing shall comply with any directions given by the Secretary of State under sub-paragraph (a) of this paragraph with respect to the determination of that application.

Certificate that transaction does not involve sale of goodwill

18. A certificate issued by the Medical Practices Committee under paragraph 1(3) of Schedule 10 to the Act shall be in the form set out in Schedule 7.

PART IV

GENERAL MEDICAL SERVICES OTHER THAN CHILD HEALTH SURVEILLANCE SERVICES, CONTRACEPTIVE SERVICES, MATERNITY MEDICAL SERVICES AND MINOR SURGERY SERVICES

Doctors' lists

19.—(1) In respect of each doctor in its medical list, an FHSA shall prepare and keep up to date a list of—

- (a) the patients in its locality accepted by or assigned to the doctor under this Part, otherwise than as temporary residents; and
- (b) the patients in its locality for whom the doctor has, under paragraph 18 of the terms of service, accepted responsibility during certain periods only.

(2) The FHSA shall from time to time give each doctor in its medical list the information described in Part VII of Schedule 3 with regard to persons included in or removed from his lists.

(3) Subject to regulation 22(7), a person accepted by a doctor for inclusion in his list shall be included in the list from the date on which notification of acceptance is received by the FHSA.

(4) Where a person for whose treatment a doctor is responsible dies, or is absent from the United Kingdom for a period of more than three months, he shall be removed from the doctor's list from the date on which the FHSA first receives notification of the death or that the absence has exceeded three months.

(5) Where a person for whose treatment a doctor is responsible—

- (a) leaves the United Kingdom with the intention of being away for a period of at least three months;
- (b) is in Her Majesty's forces;
- (c) is serving a prison sentence of more than two years or sentences totalling in the aggregate more than that period,

he shall be removed from the doctor's list from the date on which the FHSA first receives notification of the departure, enlistment or imprisonment.

(6) Any removal of a person from a doctor's list caused by the transfer of a person to the list of another doctor, otherwise than in pursuance of a notice under regulation 22(7) or (10), shall take effect—

- (a) from the date on which the FHSA receives notification of the acceptance of the person by the last-named doctor; or
- (b) subject to the consent of the FHSA, from such date, being not earlier than the date of that consent, as may be agreed between the doctors.

(7) Any other removal of a person from a doctor's list shall take effect from the date on which notice of removal is sent by the FHSA to the doctor or from such other date, not being earlier than that date, as may be specified in the notice.

Application for services

20.—(1) An application to a doctor for inclusion in his list for the provision of general medical services shall be made by delivering to the doctor a medical card or a form of application signed (in either case) by the applicant or a person authorised on his behalf.

(2) An application to a doctor for inclusion in his list may be made (otherwise than by the doctor concerned)—

- (a) on behalf of any child, by either parent, or in the absence of both parents, the guardian or other adult person who has the care of the child; or
- (b) on behalf of any person who is incapable of making such an application, by a relative or other adult person who has the care of such person; or
- (c) on behalf of any person under 18 years of age who is—
 - (i) in the care of an authority to whose care he has been committed under the provisions of the Children Act 1989, by a person duly authorised by that authority,
 - (ii) in the care of a voluntary organisation, by that organisation or a person duly authorised by it.

Assignment of persons to doctors

21.—(1) Where—

- (a) a person who is not on the list of any doctor has been refused acceptance by a doctor for inclusion in his list; or
- (b) a person has been refused acceptance by a doctor as a temporary resident,

he may apply to the FHSA for assignment to a doctor, and the provisions of this regulation shall apply in relation to that application.

(2) An application under paragraph (1) shall be made in writing and shall be considered by the FHSA, which shall assign the applicant to such doctor in its medical list as it thinks fit, having regard to—

- (a) the respective distances between the person's residence and the practice premises of the doctors in the part of the locality in question;
- (b) whether within the previous six months the person has been removed from the list of any doctor in that part of the locality at the request of that doctor; and
- (c) such other circumstances, including those concerning the doctors in that part of the locality and their practices, as the FHSA think relevant,

and shall notify the doctor accordingly.

(3) Nothing in paragraph (2) shall—

- (a) require a doctor to provide child health surveillance services, contraceptive services, maternity medical services or minor surgery services for a patient who is assigned to him unless, pursuant to regulation 28, 29, 31 or 33, as the case may be, he has accepted that patient for the provision of such services; or
- (b) enable the FHSA to assign any person to a doctor whose list is at or exceeds the maximum permitted by regulation 24, without the consent of the Secretary of State.

(4) Where the Secretary of State refuses his consent for the purpose of paragraph (3)(b), and the FHSA is satisfied, after due enquiry, that the person concerned still wishes to be assigned to a doctor it shall, as soon as practicable, assign that person to another doctor or, as the case may be, seek the Secretary of State's consent, where required under paragraph (3)(b), for assignment to another doctor.

(5) A doctor to whom a person has been assigned by the FHSA under paragraph (2) or (4) may, within 7 days of receiving notice of it, make representations in writing to that FHSA against that assignment.

(6) Where representations are made under paragraph (5) the FHSA shall, subject to paragraphs (7) and (8), at its next meeting, review its initial assignment and shall either confirm or revise it.

(7) Where a doctor makes representations under paragraph (5), the FHSA shall, before meeting to confirm or revise the assignment, give that doctor the opportunity to address it in the course of an oral hearing in support of those representations.

(8) No person who participated in the making of an initial assignment under this regulation shall participate in a review under paragraph (6).

(9) The FHSA shall, within 7 days of making a determination under paragraph (7), notify the doctor accordingly, and, where an initial assignment made under paragraph (2) has been revised, it shall notify also the patient and the other doctor to whom the patient is assigned under the revised determination.

(10) A doctor who has made representations under paragraph (5) shall remain responsible for the treatment of the person assigned to him pending notification under paragraph (9) of the confirmation or revision of the assignment by the FHSA.

(11) The FHSA may exempt from the liability to have persons assigned to him under this regulation any doctor who applies to that FHSA for that purpose, and in considering such an application shall have regard to the doctor's age, state of health and the number of persons on his list and the FHSA shall notify any such doctor in writing of any decision under this paragraph.

Change of doctor

22.—(1) A person who is on a doctor's list of patients may apply to any other doctor providing general medical services for acceptance on that other doctor's list of patients.

(2) An application for the purposes of paragraph (1) shall be made in accordance with regulation 20.

(3) A person who has made an application under paragraph (1) and has been refused acceptance by any doctor may apply to the FHSA in whose locality he resides for assignment to a doctor whose name is included in the FHSA's medical list.

(4) The FHSA shall inform a doctor as soon as practicable of the removal of a patient from his list on transfer to the list of another doctor.

(5) Subject to paragraphs (6) to (8), the FHSA shall, on the death of, or on the removal or withdrawal from the medical list of the name of any doctor, notify the persons on the list of that doctor of the death, removal or withdrawal.

(6) Where a successor is appointed to a practice the FHSA shall, by notice in writing, inform the persons on the list of the doctor who last carried on that practice of the name of the successor (and, if more than one, of each of them) and of the names of any partners and of the address of their practice premises.

(7) The notice mentioned in paragraph (6) shall state that the person to whom it is given will be deemed, from the date specified in the notice, to be on the list of a named successor, unless that person within 14 days of that date gives notice in writing to the FHSA that he does not wish to be included in that list.

(8) Where no successor is to be appointed to a practice, the FHSA shall notify the persons on the list of the doctor who last carried on that practice of their right to apply to another doctor in the medical list for acceptance.

(9) A doctor who has returned to his practice at the end of a period of relevant service shall, within one month of his return, notify the FHSA in writing that he has resumed practice.

(10) Where the FHSA has been so notified it shall, within 28 days, send a notice to every person who—

- (a) was on the doctor's list at the beginning of such service; and

(b) is still residing at the address at which he was then residing and who has been transferred by reason only of the doctor's departure on relevant service to the list of another doctor, stating that the first doctor has resumed practice and that the person will be restored to his list unless, not later than 14 days after the date of the notice, that person gives notice in writing to the FHSA that he wishes to remain on the list of the other doctor.

(11) After the expiry of the period of 14 days mentioned in paragraph (10), the FHSA shall inform each of the other doctors concerned of the persons who are transferred from his list to the list of the first doctor and shall also inform each of those other doctors of the persons who have elected to remain on his list.

(12) Where a doctor is relieved of the obligation to provide services at certain periods under paragraph 18 of the terms of service—

- (a) the FHSA shall notify the persons on his list of the fact and the terms of the relief; and
- (b) if the doctor subsequently resumes responsibility for providing services at all times, the FHSA shall notify the persons on his list of the fact.

(13) Nothing in this regulation shall require the FHSA to give any notice concerning the making or termination of arrangements under regulation 25.

Removal from doctor's list

23.—(1) Where a person no longer wishes to avail himself of general medical services—

- (a) he may at any time give notice to the FHSA that he wishes to be removed from a doctor's list; and
- (b) the FHSA shall notify him and the doctor concerned that on a specified date, being 14 days after the date of the receipt of the notice by the FHSA, his name will be removed from the doctor's list.

(2) Subject to paragraph (4), where the FHSA is satisfied that a person on the list of a doctor providing general medical services in its locality no longer resides at a place where that doctor is under an obligation under these Regulations to visit and treat him, the FHSA shall—

- (a) inform that person and the doctor that the doctor is no longer obliged to visit and treat the person;
- (b) advise the person either to obtain the doctor's agreement under paragraph 13(1)(b)(ii) of the terms of service to visit him if his condition so requires, or to seek acceptance by another doctor; and
- (c) inform the person that if, after the expiration of 30 days from the date of the letter of advice mentioned in sub-paragraph (b), he has not acted in accordance with the advice, the FHSA will remove him from the doctor's list.

(3) If at the expiration of the period of 30 days referred to in paragraph (2)(c) the FHSA has not been notified of the action taken, it shall remove the patient from the doctor's list and inform him and the doctor accordingly.

(4) Where a person on the list of a doctor providing general medical services has moved to an address outside the FHSA's locality or the address of that person is no longer known to the FHSA, the FHSA shall—

- (a) give to that doctor notice in writing that it intends, at the end of the period of six months commencing with the date of the notice, to remove the person from the doctor's list; and
- (b) at the end of that period, remove the person from the doctor's list, unless within that period the doctor satisfies the FHSA that he is still responsible for providing general medical services for that person, including visiting and treating him when necessary.

(5) Where the FHSA receives particulars of persons who are pupils at, or staff or residents of, a school or residential institution where a doctor provides general medical services, it shall remove from that doctor's list any persons appearing on his list as pupils at, or staff or residents of, that school or institution who are not shown in those particulars.

(6) Where the FHSA has made a request to a school or residential institution to provide the particulars mentioned in paragraph (5) and has not received them, it may, after consulting the doctor, remove from the doctor's list any persons appearing on the list as pupils at, or staff or residents of, the school or institution.

Limitation on number of persons on doctors' lists

24.—(1) This regulation applies as to the aggregate maximum number ("the maximum number") of persons a doctor may have on his list in all localities in which he provides general medical services in addition to—

- (a) any persons for whom under paragraph 18 of the terms of service he has accepted responsibility during certain periods only; and
- (b) any persons whom he has accepted for the provision of contraceptive services only.

(2) Except as otherwise provided in this regulation, the maximum number shall be—

- (a) 3,500, for a doctor carrying on practice otherwise than as an assistant or in a partnership;
- (b) 4,500 for a doctor carrying on practice in partnership, subject to a maximum average of 3,500 for each of the partners in the practice,

and, where the doctor employs an assistant, such further number not exceeding 2,000 for each assistant as the FHSA, or, on appeal, the Secretary of State, may decide in the light of the circumstances of the practice and the amount of time given to it by any assistant.

(3) For the purposes of determining the maximum number of persons on the list, the number of persons on the list of an assistant who is a doctor with a list of his own, shall be regarded as being on the list of the doctor by whom he is employed.

(4) For the purposes of paragraph (2), a doctor who is in partnership shall be deemed to be an assistant, and not a partner, unless the FHSA or, on appeal, the Secretary of State is satisfied that—

- (a) he discharges the duties and exercises the powers of a partner in connection with the practice of the partnership; and,
- (b) either—
 - (i) in the case of a full-time doctor, he is entitled to a share of the profits which is not less than one third of the share of the partner with the greatest share, or
 - (ii) in the case of a three-quarter-time doctor, he is entitled to a share of the profits which is not less than one quarter of the share of the partner with the greatest share, or
 - (iii) in the case of a half-time doctor, he is entitled to a share of the profits which is not less than one fifth of the share of the partner with the greatest share, or
 - (iv) in the case of a job-sharing doctor who practises in partnership with another job-sharing doctor and at least one further doctor, he is entitled to a share of the profits which, when added to the share of the other job-sharing doctor with whose hours his hours are being aggregated for the purposes of regulation 15(1)(d), is not less than one third of the share of the member of the partnership with the greatest share.

(5) The FHSA shall notify each doctor of the number of patients on his list as at the first day of each period of three months ending 31st March, 30th June, 30th September and 31st December and of the number of any excess over the maximum number.

(6) Subject to paragraphs (10) to (12), if there is an excess, the doctor shall, within two months from the date on which the excess was notified to him, take steps to reduce his list to the maximum number by—

- (a) taking a partner;
- (b) engaging an assistant; or
- (c) notifying the FHSA of the names of the necessary number of patients on his list whom he wishes to have removed from his list under paragraph 9 or 10 of the terms of service,

and if at the end of that time such measures have not been completely effective, the FHSA shall remove from his list the necessary number of patients, the selection of such patients being at the discretion of the FHSA.

(7) Where—

- (a) a doctor gives notice under paragraph (6)(c); or
- (b) a doctor whose name is included in the medical list in respect of more than one address and who ceases to practise at one of them, informs the FHSA of his wish to have removed from his list the persons who would have attended for treatment at the address at which he will no longer practise,

the FHSA shall, subject to paragraph (8), send a notice to each person so named to inform him that he should apply to another doctor for acceptance.

(8) Where the FHSA, after consulting the Local Medical Committee, accepts an application from the doctor for the notices under paragraph (7) to name another doctor who—

- (a) is willing to accept the person on his list; and
- (b) has given his written consent in circumstances where such acceptance will not result in an excess number of patients on that other doctor's list (or if that other doctor is in partnership, on the average of the partnership lists),

the notices shall be issued accordingly and the name of any such person shall be included on the list of the doctor named in the notice until such time as the person has chosen another doctor or has informed the FHSA in writing that he wishes not to be so included.

(9) Where an excess number of patients is due to—

- (a) the creation of a partnership of which the doctor is a member; or
- (b) the death or retirement of a partner or the cessation of employment of an assistant in circumstances where the doctor is actively seeking a new partner or assistant,

the FHSA may, on the doctor's undertaking not to accept further patients other than the children of existing patients, permit him to retain, for such period not exceeding nine months as it may determine from the date of the event which gave rise to the excess number, all the patients on his list (and in a case within sub-paragraph (b) above, on the list, if any, of his former partner or assistant) at that date.

(10) In carrying out its function under this regulation the FHSA shall consult as necessary with any other FHSA whose medical list includes a doctor concerned.

(11) Nothing in this regulation shall—

- (a) restrict a doctor from accepting persons who apply to him as temporary residents; or
- (b) exempt him from any liability under the terms of service to give treatment immediately required to any person who applies for acceptance or to give emergency treatment.

(12) An appeal under paragraph (2) or (4) shall be made by sending to the Secretary of State a notice of appeal within 30 days of the date on which notice of the decision of the FHSA was given and the notice of appeal shall contain a concise statement of the grounds of appeal.

(13) The Secretary of State shall, on receipt of any notice of appeal under this regulation, send a copy of that notice to the FHSA.

(14) The FHSA may, within 30 days from the date on which the Secretary of State sent a copy of the notice of appeal, submit representations in writing to him on the appeal.

(15) On any appeal pursuant to paragraph (2) or (4), the Secretary of State may, if he thinks fit, hold an oral hearing and in such a case shall—

- (a) appoint one or more persons to hear the appeal who shall report to him on the appeal; and
- (b) not less than 14 days before the date fixed for the hearing, give notice in writing to the appellant and to the FHSA.

(16) The Secretary of State shall, upon determination by him of an appeal under this regulation, give notice of his decision in writing, together with the reasons for it, to the appellant and to the FHSA.

Temporary provision of services

25.—(1) This regulation applies to the making of arrangements for the temporary provision of general medical services.

(2) Where a doctor ceases to be included in the medical list or his registration is suspended as mentioned in section 29(8) of the Act(18), the FHSA may, after consultation with the Local Medical Committee—

- (a) make arrangements, for the temporary provision of general medical services for that doctor's patients, which may consist of or include the appointment of one or more doctors to undertake the treatment of such persons; and
- (b) where—
 - (i) the doctor was included in a medical list by virtue of regulation 4(1)(a) and ceases by reason of death to be so included, and
 - (ii) within 7 days of the date of death, any person applies to the FHSA in writing on behalf of the estate of that doctor for the appointment of one or more named doctors, appoint one or more of the named doctors to undertake the treatment of the deceased doctor's patients.

(3) The FHSA may make such arrangements as it thinks fit for the accommodation and other needs of any doctor appointed under paragraph (2) and, in the case of any doctor appointed under paragraph (2)(b), shall, where practicable, first consult the person who applied to it for the appointment of that doctor.

(4) Subject to paragraph (10), arrangements under paragraph (2) shall subsist for such period as the FHSA may determine, but not beyond the date on which the vacancy is filled or the suspension referred to in paragraph (2) ceases to have effect.

(5) Where it appears to the FHSA, after consultation with the Local Medical Committee, that a doctor is incapable of adequately carrying out his obligations under the terms of service because of his physical or mental condition, it may require him to be medically examined.

(6) Where the FHSA is satisfied—

- (a) after receiving from the Local Medical Committee a report under paragraph (9), that because of his physical or mental condition; or
- (b) that because of his continued absence,

(18) Section 29(8) was amended by paragraph 2(2) of Schedule 6 to the Health and Social Services and Social Security Adjudications Act 1983 (c. 41).

a doctor's obligations under the terms of service are not being adequately carried out, it may, after consultation with the Local Medical Committee and with the consent of the Secretary of State, make arrangements for the temporary provision of general medical services for that doctor's patients which may consist of or include the appointment of one or more doctors to undertake the treatment of such persons, and may vary such arrangements as necessary.

(7) Subject to paragraph (10), arrangements under paragraph (6) shall subsist for such period as the FHSA may determine, but not, in a case to which paragraph (6)(a) applies, beyond the date (if any) on which the FHSA is satisfied, after consulting the Local Medical Committee, that the doctor is fit to resume his practice.

(8) Before varying or terminating any arrangements made under paragraph (6), but after consulting the Local Medical Committee, the FHSA may require the doctor to be medically examined.

(9) Where under paragraph (5) or (8) a doctor is required to be medically examined—

- (a) he shall submit himself for medical examination by a doctor appointed by the Local Medical Committee; and
- (b) the Local Medical Committee, having considered the report of the examining doctor, shall make a report in writing to the FHSA as to the doctor's fitness to carry out his obligations under the terms of service.

(10) Where the FHSA proposes that the arrangements under paragraph (2) or (6) shall continue—

- (a) for longer than one year;
- (b) for such shorter period as the Secretary of State may specify in any particular case; or
- (c) beyond any further such period,

it shall so notify the Secretary of State in writing not less than 30 days, or as soon as is practicable, before the expiry of that period or further period and shall, in each case, obtain the consent of the Secretary of State to the continuance of the arrangements.

(11) The FHSA shall—

- (a) give reasonable notice in writing of the termination of arrangements under paragraph (2) or (6) to the doctor with whom they were made; and
- (b) as soon as is practicable, notify the Secretary of State in writing that such termination has taken place.

(12) The FHSA shall, where practicable, notify in writing any doctor for the treatment of whose patients arrangements are made under this regulation of such arrangements and of their variation or termination.

(13) A doctor appointed under this regulation shall agree in writing to be bound throughout his appointment by the terms of service which were applicable to the doctor the treatment of whose patients he is appointed (with or without other doctors) to undertake, except that nothing in this regulation shall require him to provide child health surveillance services, contraceptive services, maternity medical services or minor surgery services which he has not undertaken to provide.

(14) Any person on the list of the doctor for the treatment of whose patients arrangements are made under this regulation shall be deemed to remain on that list while those arrangements subsist, unless that person is transferred to the list of another doctor, and any person who applies to the doctor appointed under this regulation for acceptance shall, if accepted, be recorded by the FHSA as being—

- (a) where that doctor is included in the medical list by virtue of regulation 4(1)(a), on his list; and
- (b) in any other case, on the list of the doctor for the treatment of whose patients arrangements are made under this regulation.

(15) The FHSA—

- (a) may deduct from the remuneration of a doctor—
 - (i) for the treatment of whose patients arrangements are made under paragraph (6), or
 - (ii) consequent upon the suspension of whose registration arrangements are made under paragraph (2)(a),the cost, in whole or in part, of any such arrangements; and
- (b) in the case of a doctor performing relevant service, shall deduct from his remuneration the cost of any such arrangements.

(16) In the application of the Act to the making of arrangements for the temporary provision of general medical services and the provision of such services in pursuance of those arrangements—

- (a) section 29(4) (which prohibits, with exceptions, payment of a fixed salary) shall have effect as if the words “otherwise than temporarily” were inserted after the words “general medical services”; and
- (b) section 30(1A) (which contains requirements as to knowledge of English) shall apply to a doctor appointed under this regulation, and in respect of any such doctor section 30(1A) shall have effect as if for the words from “shall be entitled” to “referred to the Medical Practices Committee” there were substituted the words “shall be appointed to provide general medical services temporarily” and as if the words “and where” to the end of the subsection were omitted.

Temporary residents

26.—(1) A person requiring treatment who—

- (a) is not on the list of a doctor providing general medical services in the area of the locality where he is temporarily residing;
- (b) normally resides in a school or similar institution in the locality but is temporarily residing at home in that locality;
- (c) normally resides at home in the locality but is temporarily residing in any institution in that locality; or
- (d) is moving from place to place and is not for the time being resident in any place,

may apply to any doctor providing services in the locality in which he is temporarily resident to be accepted by him as a temporary resident.

(2) For the purposes of paragraph (1), a person shall be regarded as temporarily resident in a place if, when he arrives in that place, he intends to stay there for more than 24 hours but not more than 3 months.

(3) Subject to paragraph (4), a person mentioned in sub-paragraph (a), (b) or (c) of paragraph (1) who is accepted as a temporary resident shall not be removed from the list of any doctor in which he is already included.

(4) If the FHSA for the locality in which the temporary resident is included in any doctor’s list is satisfied, after due enquiry—

- (a) that his stay in the locality of temporary residence has exceeded 3 months; and
- (b) that he has not returned to that FHSA’s locality,

it shall thereupon remove him from that doctor’s list and, if practicable, inform him of that fact and of his entitlement to seek acceptance by any doctor, including the doctor by whom he has been treated as a temporary resident, in the locality in which he is living, and of the name and address of the FHSA for that locality.

PART V

CHILD HEALTH SURVEILLANCE SERVICES, CONTRACEPTIVE SERVICES, MATERNITY MEDICAL SERVICES AND MINOR SURGERY SERVICES

Child health surveillance list

27.—(1) The FHSA shall maintain a list (in these Regulations referred to as “a child health surveillance list”) of the names of those doctors who have satisfied the FHSA or, on appeal, the Secretary of State, in accordance with the following provisions of this regulation, that they have such medical experience and training as are necessary to enable them properly to provide child health surveillance services.

(2) A doctor may apply, in accordance with paragraph (3), to the FHSA for the inclusion of his name in the child health surveillance list required to be maintained by that FHSA.

(3) An application for the purpose of paragraph (2) shall be made in writing and shall include the information specified in Part VIII of Schedule 3 to these Regulations.

(4) Unless the doctor otherwise agrees, the FHSA shall determine an application made in accordance with paragraph (3) within 2 months of receiving it.

(5) The FHSA may, if it thinks fit, hold an oral hearing of any application and shall not refuse an application without giving the doctor an opportunity of an oral hearing.

(6) Where the FHSA decides to hold an oral hearing, it shall, not less than 14 days before the date fixed for the hearing, give notice in writing to the doctor.

(7) When determining an application the FHSA shall have regard in particular to—

- (a) any post-graduate qualification held by him; and
- (b) any training undertaken by the doctor and any medical experience gained by him, during the period of five years immediately preceding the date of the application,

which is relevant to the provision of child health surveillance services, and shall seek and take into account any medical advice it considers necessary to enable it to determine the application.

(8) The FHSA shall determine an application by either—

- (a) granting the application; or
- (b) refusing the application.

(9) The FHSA shall give notice in writing to the doctor of its determination and shall—

- (a) where it refuses the application, inform him of the reasons for the determination and of his right of appeal under paragraph (10);
- (b) where it grants the application, include the doctor’s name in its child health surveillance list.

(10) If an application is refused the doctor may appeal in writing to the Secretary of State within 30 days of receiving notice in writing of the FHSA’s determination.

(11) On any appeal pursuant to paragraph (10) or (16), the Secretary of State—

- (a) may, if he thinks fit, hold an oral hearing of the appeal and, in such a case, shall—
 - (i) appoint one or more persons to hear the appeal who shall report to him on the appeal, and
 - (ii) not less than 14 days before the date fixed for the hearing, give notice in writing to the appellant and to the FHSA;

- (b) in determining the appeal, shall either confirm or reverse the determination of the FHSA and shall communicate his decision, together with the reasons for it, to the appellant and to the FHSA;
 - (c) where he reverses the determination of the FHSA, shall direct that the FHSA include the doctor's name in its child health surveillance list.
- (12) Subject to paragraphs (13) to (17), a doctor's name may be removed by the FHSA from the child health surveillance list only if—
- (a) it has been removed from the medical list of any FHSA pursuant to regulation 6(3) or regulation 7; or
 - (b) the FHSA has determined that the doctor has not provided child health surveillance services at any time during the past 5 years;
- (13) Before making any determination under sub-paragraph (b) of paragraph (11) the FHSA shall—
- (a) give the doctor 30 days' written notice of its intention to do so; and
 - (b) afford the doctor an opportunity of making representations in writing or, if he so desires, orally to the FHSA.
- (14) Where the FHSA makes a determination under sub-paragraph (b) of paragraph (12), it shall send to the doctor a notice which shall include a statement—
- (a) to the effect that, subject to any appeal under paragraph (15), the doctor's name will, after 30 days from the date of the notice, be removed from the child health surveillance list maintained by the FHSA;
 - (b) of the FHSA's reasons for its determination; and
 - (c) of the doctor's right of appeal under paragraph (15).
- (15) A doctor who has received a notice sent in accordance with paragraph (14) may, within 21 days of receiving it, appeal to the Secretary of State against the determination of the FHSA, and pending the determination of the appeal, the FHSA shall not remove his name from the child health surveillance list.
- (16) An appeal to the Secretary of State shall be made in writing and shall include a statement of the grounds of appeal and on any such appeal the Secretary of State shall, if he allows the appeal, direct that the FHSA shall not remove the doctor's name from the child health surveillance list.
- (17) The FHSA shall comply with any direction given to it under this regulation.
- (18) Where the Secretary of State holds an oral hearing of an appeal pursuant to paragraph (11), the appellant and the FHSA may be represented by counsel, solicitor or any other person.

Obtaining child health surveillance services

28.—(1) A parent may, in relation to a child of his who is under the age of 5 years, apply to a doctor—

- (a) who is—
 - (i) the doctor on whose list the child is included (in this paragraph referred to as “the child's doctor”),
 - (ii) a doctor with whom the child's doctor is in partnership, or
 - (iii) a doctor with whom the child's doctor is associated in a group practice; and
- (b) whose name is included in any medical list and in the child health surveillance list of the FHSA,

for the provision of child health surveillance services in respect of that child for a period ending on the date on which that child attains the age of 5 years.

(2) A doctor whose name is included in the medical list may, in respect of any person on his list or on the list of a doctor with whom he is in partnership or with whom he is associated in a group practice, undertake to provide child health surveillance services provided that—

- (a) his name is also included in the child health surveillance list, and
- (b) the person in question is a child who is under the age of 5 years.

(3) A doctor who has undertaken, pursuant to paragraph (2), to provide child health surveillance services to any child shall, in respect of that child—

- (a) provide all the services described in paragraph 1 of Schedule 4 to these Regulations, other than any examination so described which the parent refuses to allow the child to undergo, until the date upon which the child attains the age of 5 years;
- (b) maintain such records as are specified in paragraph 2 of that Schedule; and
- (c) furnish the relevant health authority with such information as is specified in paragraph 3 of that Schedule in accordance with the requirements of that paragraph.

(4) An undertaking to provide child health surveillance services shall cease forthwith to be effective if—

- (a) either—
 - (i) the parent informs the doctor, or
 - (ii) the doctor informs the parent,that he wishes the undertaking to have no further effect;
- (b) the child has been removed from the doctor's list, from that of his partner or from that of a doctor with whom he is associated in a group practice, as the case may be, and has not been transferred to any other of those lists;
- (c) the parent—
 - (i) has been invited to arrange for the child to attend for an examination referred to in paragraph 1(b) of Schedule 4 to these Regulations, and
 - (ii) fails within 42 days to respond to that invitation; or
- (d) any examination referred to in paragraph 1(b) of that Schedule is undertaken in respect of the child otherwise than by the doctor or a person acting on his behalf.

(5) Where in accordance with paragraph (4), an undertaking has ceased to be effective, the doctor shall forthwith—

- (a) in a case to which any of heads (a), (c) or (d) of that sub-paragraph applies, so inform the FHSA in writing; and
- (b) in a case to which head (c) or (d) of that sub-paragraph applies, also so inform the parent in writing.

Obtaining contraceptive services

29.—(1) Whether or not she is included in his list for the provision of other personal medical services, a woman may apply to a doctor who has undertaken to provide contraceptive services to be accepted by him for the provision of those services.

(2) An application under paragraph (2) shall be for the provision of such services for a period of 12 months from the date of acceptance, but either the woman or the doctor may terminate the provision at any time during that period.

(3) On any such termination or at the end of the period of 12 months, as the case may be, the woman may apply (or re-apply) to a doctor in accordance with paragraph (2).

(4) A woman may apply to a doctor who has undertaken to provide contraceptive services in a locality or part of a locality in which she is temporarily resident, to be accepted by him for the provision to her, as a temporary resident, of contraceptive services.

(5) Where a woman has been accepted by a doctor for the provision to her of contraceptive services under paragraph (4), paragraph 4 of regulation 26 shall apply to terminate that provision.

Obstetric list

30.—(1) The FHSA shall maintain a list (in these Regulations referred to as “the obstetric list”) of the names of—

- (a) those doctors who, on 31st March 1992, were included in an obstetric list maintained by that FHSA; and
- (b) those doctors who have satisfied the FHSA or, on appeal, the Secretary of State, in accordance with the following provisions of this regulation, that they have such medical experience and training as are necessary to enable them to be included in the obstetric list.

(2) A doctor may apply, in accordance with paragraph (3), to the FHSA for the inclusion of his name in the obstetric list maintained by that FHSA.

(3) An application for the purpose of paragraph (2) shall be made in writing and shall include the information specified in Part X of Schedule 3.

(4) Unless the doctor otherwise agrees, the FHSA shall determine an application made in accordance with paragraph (3) within 2 months of receiving it.

(5) Subject to paragraphs (6) and (7), the FHSA shall grant an application by a doctor for the inclusion of his name in the obstetric list where it is satisfied that the applicant has undertaken such training and has such experience relevant to the provision of maternity medical services as are sufficient to enable him to be included in the obstetric list.

(6) Before reaching any decision under paragraph (4), the FHSA—

- (a) may hold an oral hearing and shall not decide to refuse an application without giving the doctor an opportunity of an oral hearing;
- (b) shall have regard to whether or not the applicant satisfies one or more of the criteria set out in Schedule 5, Part I; and
- (c) shall seek, and take into account, any medical advice it considers necessary to enable it to determine the application provided that where it seeks such advice, it shall consult the Local Medical Committee.

(7) Where the FHSA decides to hold an oral hearing, it shall, not less than 14 days before the date fixed for the hearing, give notice in writing to the doctor.

(8) Where the FHSA is considering whether to grant an application in a case where the applicant satisfies none of the criteria set out in Schedule 5, Part I, it shall consult the Local Medical Committee.

(9) The FHSA shall determine an application by either—

- (a) granting the application; or
- (b) refusing the application.

(10) The FHSA shall inform the doctor in writing of its determination and shall—

- (a) where it refuses the application, give notice in writing to him of the reasons for the determination and of his right of appeal under paragraph (11);

- (b) where it grants the application, forthwith include the doctor's name in its obstetric list.
- (11) If an application is refused the doctor may appeal in writing to the Secretary of State within 30 days of receiving notice in writing of the FHSA's determination.
- (12) On any appeal pursuant to paragraph (11) or (16), the Secretary of State—
- (a) may, if he thinks fit, hold an oral hearing of the appeal and in such a case shall—
 - (i) appoint one or more persons to hear the appeal who shall report to him on the appeal, and
 - (ii) not less than 14 days before the date fixed for the hearing, give notice in writing to the appellant and to the FHSA;
 - (b) in determining the appeal, shall either confirm or reverse the determination of the FHSA and shall communicate his decision, together with the reasons for it to the appellant and to the FHSA; and
 - (c) where he reverses the determination of the FHSA, he shall direct that the FHSA include the doctor's name in its obstetric list.
- (13) Subject to paragraphs (14) to (16), a doctor's name may be removed from the obstetric list only if—
- (a) it has been removed from the medical list of any FHSA pursuant to regulation 6(3) or 7; or
 - (b) the FHSA has determined that the doctor has not provided maternity medical services at any time during the past 5 years.
- (14) Before making any determination under sub-paragraph (b) of paragraph (13) the FHSA shall—
- (a) give the doctor 30 days' written notice of its intention to do so; and
 - (b) afford the doctor an opportunity of making representations in writing or, if he so desires, orally to the FHSA.
- (15) Where the FHSA makes a determination under sub-paragraph (b) of paragraph (13), it shall send to the doctor a notice which shall include a statement—
- (a) to the effect that, subject to any appeal under paragraph (15), the doctor's name will, after 30 days from the date of the notice, be removed from the obstetric list maintained by the FHSA;
 - (b) of the FHSA's reasons for its determination; and
 - (c) of the doctor's right of appeal under paragraph (16).
- (16) A doctor who has received a notice in accordance with paragraph (15) may, within 21 days of receiving it, appeal to the Secretary of State against the determination, and pending the determination of the appeal the FHSA shall not remove his name from the obstetric list.
- (17) An appeal to the Secretary of State under paragraph (16) shall be made in writing and shall include a statement of the grounds of appeal and on any such appeal the Secretary of State shall, if he allows the appeal, direct that the FHSA shall not remove the doctor's name from the obstetric list.
- (18) The FHSA shall comply with any direction given to it under this regulation.
- (19) Where the Secretary of State holds an oral hearing of an appeal pursuant to paragraph (12) the appellant and the FHSA may be represented by counsel, solicitor or any other person.

Obtaining maternity medical services

- 31.—**(1) Maternity medical services shall comprise—
- (a) the provision of personal medical services to a woman during the ante-natal period;

- (b) the provision of personal medical services to a woman during labour;
- (c) the provision of personal medical services to a woman and to her baby, as specified in paragraph 3(b) of Part II of Schedule 5, during the post-natal period; and
- (d) the provision of a full post-natal examination.

(2) A woman who, after a doctor has diagnosed that she is pregnant, requires the provision of maternity medical services may arrange for the provision of any or all of the services mentioned in paragraph (1) with—

- (a) any doctor in the obstetric list;
- (b) the doctor on whose list she is included; or
- (c) any doctor who has accepted her as a temporary resident.

(3) A doctor with whom a woman has made an arrangement under paragraph (2) for the provision of any or all of the services mentioned in paragraph (1) shall provide such services as are specified in Part II of Schedule 5.

(4) The provisions of regulation 20 shall apply to the making of an arrangement by a woman with a doctor for the provision of any or all of the services mentioned in paragraph (1) as they apply to the making of an application for inclusion in a doctor's list.

(5) An arrangement between a woman and a doctor for the provision of any or all of the services mentioned in paragraph (1) may be terminated—

- (a) by the woman—
 - (i) so informing the FHSA in writing,
 - (ii) so informing the doctor in writing who shall within 7 days notify the FHSA in writing, or
 - (iii) making a new arrangement with another doctor who shall within 7 days notify the FHSA in writing of the new arrangement;
- (b) by the doctor making an application under paragraph 11 of the terms of service; or
- (c) where the woman is a temporary resident, when—
 - (i) she ceases to be resident in the doctor's practice area, or
 - (ii) the doctor's responsibility for her is terminated under paragraph 10 of the terms of service,

whichever first occurs.

(6) Where the FHSA receives notification in accordance with paragraph (5)(a)(i) or (iii), it shall within 7 days notify the original doctor in writing that the woman's arrangement with him has been terminated.

(7) In this regulation and in Schedule 5 "ante-natal period" means the duration of a woman's pregnancy until the onset of labour and "post-natal period" means the period of 14 days following the conclusion of a pregnancy.

Minor surgery list

32.—(1) The FHSA shall maintain a list (in these Regulations referred to as "the minor surgery list") of the names of those doctors who have satisfied the FHSA or, on appeal, the Secretary of State in accordance with the following provisions of this regulation that they have such medical experience, training and facilities as are necessary to enable them properly to provide all of the procedures listed in Schedule 6.

(2) A doctor may apply in accordance with paragraph (3), to a FHSA for the inclusion of his name in the minor surgery list maintained by that FHSA.

(3) An application for the purpose of paragraph (2) shall be made in writing and shall include the information specified in Part IX of Schedule 3.

(4) Unless the doctor otherwise agrees, the FHSA shall determine an application made in accordance with paragraph (3) within 2 months of receiving it.

(5) The FHSA may, if it thinks fit, hold an oral hearing of any application and shall not refuse an application without giving the doctor an opportunity of an oral hearing.

(6) Where the FHSA decides to hold an oral hearing, it shall, not less than 14 days before the date fixed for the hearing, give notice in writing to the doctor.

(7) When determining an application the FHSA shall have regard—

(a) for the purpose of assessing the doctor's medical experience and training, to any—

(i) post-graduate qualification held by him,

(ii) any training undertaken by him and any medical experience gained by him, during the period of five years immediately preceding the date of the application,

which is relevant to the provision of minor surgery services;

(b) for the purpose of assessing the doctor's facilities, to the premises and the equipment to be used by the doctor in the provision of minor surgery services,

and shall seek and take into account any medical advice it considers necessary to enable it to determine the application.

(8) The FHSA shall determine an application by either—

(a) granting the application; or

(b) refusing the application.

(9) The FHSA shall inform the doctor in writing of its determination and shall—

(a) where it refuses the application, give notice in writing to him of the reasons for the determination and of his right of appeal under paragraph (10); or

(b) where it grants the application, forthwith include the doctor's name in its minor surgery list.

(10) If an application is refused the doctor may appeal in writing to the Secretary of State within 30 days of receiving notice in writing of the FHSA's determination.

(11) On any appeal pursuant to paragraph (10) or (15) the Secretary of State—

(a) may, if he thinks fit, hold an oral hearing of the appeal and, in such a case shall—

(i) appoint one or more persons to hear the appeal who shall report to him on the appeal, and

(ii) not less than 14 days before the date fixed for the hearing, give notice in writing to the appellant and to the FHSA;

(b) in determining the appeal, shall either confirm or reverse the determination of the FHSA and shall communicate his decision, together with the reasons for it, to the appellant and to the FHSA; and

(c) where he reverses the determination of the FHSA, shall direct that the FHSA include the doctor's name in its minor surgery list.

(12) Subject to paragraphs (13) to (18), a doctor's name may be removed from the minor surgery list only if—

(a) it has been removed from the medical list of any FHSA pursuant to regulation 6(3) or regulation 7; or

- (b) the FHSA has determined that the doctor has not provided minor surgery services at any time during the past 5 years.
- (13) Before making any determination under sub-paragraph (b) of paragraph (12) the FHSA shall—
 - (a) give the doctor 30 days' written notice of its intention to do so; and
 - (b) afford the doctor an opportunity of making representations in writing or, if he so desires, orally to the FHSA.
- (14) Where the FHSA makes a determination under sub-paragraph (b) of paragraph (12), it shall send to the doctor a notice in writing which shall include a statement—
 - (a) to the effect that, subject to any appeal under paragraph (15), the doctor's name will, after 30 days from the date of the notice, be removed from the minor surgery list maintained by the FHSA;
 - (b) of the FHSA's reasons for its determination; and
 - (c) of the doctor's right of appeal under paragraph (15).
- (15) A doctor who has received a notice in accordance with paragraph (14) may, within 21 days of receiving it, appeal to the Secretary of State against the determination, and pending the determination of the appeal, the FHSA shall not remove his name from the minor surgery list.
- (16) An appeal under paragraph 15 to the Secretary of State shall be made in writing and shall include a statement of the grounds of appeal and on any such appeal the Secretary of State shall, if he allows the appeal, direct that the FHSA shall not remove the doctor's name from the minor surgery list.
- (17) The FHSA shall comply with any direction given to it under this regulation.
- (18) Where the Secretary of State holds an oral hearing of an appeal pursuant to paragraph (11) (a), the appellant and the FHSA may be represented by counsel, solicitor or any other person.

Obtaining minor surgery services

- 33.—**(1) A person may apply either in writing or in person to a doctor—
- (a) who is—
 - (i) the doctor in whose list he is included (in this paragraph referred to as “his own doctor”),
 - (ii) a doctor with whom his own doctor is in partnership, or
 - (iii) a doctor with whom his own doctor is associated in a group practice; and
 - (b) whose name is included in the medical list and the minor surgery list of the FHSA,
- for the provision of a procedure specified in Schedule 6 to these Regulations and the provisions of regulation 20(2) shall apply to that application as if the reference in regulation 20(2) to an application to a doctor for inclusion in his list were a reference to an application to a doctor for minor surgery services.
- (2) A doctor whose name is included in the medical list may, in respect of any person on his list or on the list of a doctor with whom he is in partnership or with whom he is associated in group practice, undertake to provide minor surgery services, provided that his name is included in the minor surgery list.
 - (3) A doctor who has undertaken, pursuant to paragraph (2), to provide minor surgery services in respect of any patient shall offer to provide any of the procedures described in Schedule 6 which it is, in his opinion, appropriate for him to provide in the case of that patient.

(4) Where a doctor provides minor surgery services in respect of a patient who is not included on his list, he shall inform in writing the doctor on whose list the patient is included of the outcome of the procedure.

(5) Nothing in this regulation shall prevent any doctor personally performing, in the course of providing general medical services (otherwise than by way of minor surgery services) to a patient, a procedure described in Schedule 6.

PART VI

PAYMENTS TO DOCTORS

Payments

34.—(1) In respect of each financial year the FHSA shall make payments to doctors with whom arrangements for the provision of general medical services exist in its locality, in accordance with such rates and subject to such conditions as the Secretary of State may determine and publish in a Statement, after consultation with such organisations as he may recognise as representing doctors with whom arrangements for the provision of general medical services exist.

- (2) The determination under paragraph (1) shall make provision for the following matters—
- (a) basic practice allowance, and additional allowances for designated areas, seniority and employment of assistants;
 - (b) standard capitation fees and capitation fees for elderly patients;
 - (c) fees for items of service, maternity medical services and temporary residents;
 - (d) fees and allowances for the supply of drugs and appliances and for rural practice;
 - (e) allowances for training doctors and for study leave;
 - (f) allowances for initial practice or inducement to practise;
 - (g) allowances for practice expenses and, in particular, allowances for practice staff including any who are spouses or other relatives and who provide qualifying services in accordance with the determination;
 - (h) allowances for improvement of premises;
 - (i) group practice loans;
 - (j) fees for contraceptive services;
 - (k) payments in relation to the making of arrangements for, and payments for, the temporary provision of general medical services;
 - (l) capitation fees in respect of patients who participate in a consultation pursuant to paragraph 14 of the terms of service;
 - (m) capitation fees in respect of patients to whom child health surveillance services are provided;
 - (n) capitation fees in respect of patients living in deprived areas;
 - (o) fees for minor surgery sessions undertaken;
 - (p) fees in respect of the provision of health promotion clinics approved by the FHSA;
 - (q) target payments in respect of immunisations provided;
 - (r) target payments in respect of cervical cytology;
 - (s) allowances for the employment of locums by a doctor during maternity leave, sickness or study leave;

- (t) allowances for undergoing approved post-graduate education;
- (u) allowances for the employment of doctors by isolated single-handed doctors;
- (v) allowances in respect of providing placements in the practice for undergraduate medical students;
- (w) transitional payments in consequence of changes to doctors' terms of service.

(3) The determination under paragraph (1) may be amended from time to time by the Secretary of State after consultation with the organisations referred to in that paragraph and any amendments shall also be published in a Statement.

(4) Where a doctor is in the medical list of more than one FHSA, any payment due to the doctor may, where the Statement so provides, be made on behalf of all FSAs concerned.

Claims and overpayments

35.—(1) Any claim for fees, allowances or other remuneration by doctors shall be made in accordance with the provisions of the Statement under regulation 34.

(2) Where the FHSA considers that a payment has been made in circumstances when it was not due, the FHSA, except to the extent that the Secretary of State on the application of the FHSA directs otherwise, shall draw the overpayment to the attention of the doctor and—

- (a) where the overpayment is admitted by him; or
- (b) where the overpayment is not so admitted but, the matter having been referred under regulation 7(1) of the National Health Service (Service Committees and Tribunal) Regulations 1992(19) for investigation, the FHSA, or the Secretary of State on appeal under regulation 10(1)(c) of those Regulations, decides that there has been an overpayment,

the amount overpaid shall be recoverable either by deduction from the doctor's remuneration or in some other manner.

(3) Recovery of an overpayment under this regulation shall be without prejudice to the investigation of an alleged breach of the terms of service.

PART VII

MISCELLANEOUS

Determination of question whether a substance is a drug, and recovery of cost

36.—(1) Any question whether a substance ordered by a doctor for provision by a chemist was a drug the provision of which formed part of pharmaceutical services provided under the Act shall be determined under the provisions of this regulation.

(2) Where it appears to the FHSA that a question arises under sub-paragraph (1), the FHSA shall—

- (a) notify the doctor who supplied or ordered the substance of the nature of the question arising; and
- (b) invite him to state in writing, within 30 days from the date on which the notice was sent to him, whether he wishes the question to be referred to the Local Medical Committee for its opinion.

- (3) The FHSA—
 - (a) shall, where the doctor states that he wishes the question to be referred to the Local Medical Committee for its opinion, refer the question accordingly;
 - (b) in any other case, may refer the question to the Local Medical Committee for its opinion; and
 - (c) may, in any event, seek such medical or pharmaceutical advice as it thinks fit, otherwise than from the Local Medical Committee.
- (4) Where the question is referred to the Local Medical Committee under the provisions of paragraph (3), that Committee shall—
 - (a) furnish the doctor concerned with a statement indicating the nature of the question referred to it by the FHSA; and
 - (b) give the doctor concerned a reasonable opportunity to—
 - (i) submit to it any statement in writing, and
 - (ii) appear before it and be heard by it, in connection with the question so referred.
- (5) The Local Medical Committee shall—
 - (a) in forming its opinion under this regulation, have regard to any information or evidence provided by the FHSA in connection with the question referred to it; and
 - (b) inform the doctor and the FHSA, in writing, of its opinion, its findings of fact and its reasons for its opinion.
- (6) The FHSA shall—
 - (a) send notice of the question, in writing, to—
 - (i) the doctor who ordered the substance,
 - (ii) the person to whom the order was given, and
 - (iii) any other person who, in the opinion of the FHSA, has an interest in the determination of the question; and
 - (b) invite any such person to submit to the FHSA his comments in writing on that question within 30 days or within such further period as the FHSA may for reasonable cause allow.
- (7) The FHSA shall, in determining the question, have regard to any opinion obtained by it under any of the provisions of paragraphs (3) to (5), and shall—
 - (a) send notice of its decision in writing to—
 - (i) the doctor concerned,
 - (ii) the Local Medical Committee, and
 - (iii) any person who submitted comments under paragraph (6); and
 - (b) where it determines that the substance in question is not a drug the provision of which formed part of pharmaceutical services, inform the doctor of his right of appeal under paragraph (8).
- (8) Where the FHSA has determined that the substance in question is not a drug the provision of which formed part of pharmaceutical services, the doctor may appeal to the Secretary of State by giving notice of appeal, within 30 days from the date on which the notice of the decision was sent to him or within such longer period as the Secretary of State may, for reasonable cause, allow.
- (9) Any notice of appeal given under this regulation shall be given in writing and shall contain a concise statement of the grounds of appeal.

(10) The Secretary of State shall send a copy of the notice of appeal to the FHSA whose determination is appealed against and to any person who submitted comments to the FHSA under paragraph (6).

(11) Any person to whom a copy of the notice of appeal is sent pursuant to paragraph (10) may, within 30 days from the date on which the notice was sent to him, make representations in writing to the Secretary of State on the appeal.

(12) The Secretary of State shall require an oral hearing of the appeal before he determines it.

(13) An oral hearing shall take place at such time and place as the Secretary of State may direct, and notice of the hearing shall be sent, not less than 14 days before the date fixed for the hearing, to the appellant and to any person who received a copy of the notice of appeal under paragraph (10).

(14) The appellant and any person mentioned in paragraph (10) may attend and be heard in person or by Counsel, solicitor or other representative and the FHSA may be represented at the hearing by any duly authorised officer or member, or by Counsel or solicitor.

(15) The Secretary of State shall determine the procedure at the oral hearing as he sees fit and, on determining the appeal, shall either—

- (a) allow the appeal; or
- (b) confirm the decision of the FHSA.

(16) The Secretary of State shall, as soon as practicable, send to the appellant and to any person mentioned in paragraph (10) notice in writing of his decision on the appeal and shall include in the notice a statement of his reasons for the decision and of his findings of fact.

(17) Where an FHSA or, on appeal, the Secretary of State has determined that a substance was not a drug the provision of which formed part of pharmaceutical services provided under the Act, the FHSA shall recover from the doctor who supplied or ordered the substance, by deduction from his remuneration or otherwise, an amount calculated in accordance with paragraph (19).

(18) Any amount determined as being recoverable under this regulation shall be a debt owing by the doctor to the FHSA by which it is recoverable.

(19) For the purposes of paragraph (18), the amount to be recovered in respect of the supply of any substance shall be the cost of that substance to the FHSA, including the dispensing fee payable in respect of the supply of the preparation, and where the substance was an ingredient in a preparation of which other ingredients were drugs, the amount to be recovered shall be the cost of that substance to the FHSA together with one-half of the amount of the dispensing fee payable in respect of the supply of the preparation.

Publication of particulars

37.—(1) The FHSA shall publish the local directory and the medical list and shall make available for inspection at its office copies of—

- (a) the medical list;
- (b) the terms of service;
- (c) the Statement published under regulation 34;
- (d) the local directory; and
- (e) a compendium of practice leaflets provided to it by doctors whose names are included in its medical list,

and shall keep them up to date.

(2) The FHSA shall make the documents mentioned in paragraph (1) available for inspection at such other places in its locality as appear to it convenient for informing all persons interested

or may publish at such places a notice of the places and times at which copies of such documents may be seen.

(3) The FHSA shall—

- (a) send a copy of the medical list to the Secretary of State, the Medical Practices Committee, the Local Medical Committee, and the Local Pharmaceutical Committee and to any person providing general medical or pharmaceutical services in its locality; and
- (b) at intervals of not more than three months notify them of any alterations.

(4) Notwithstanding paragraph (3), if the FHSA considers that only parts of the medical list, or that only some of the alterations, are likely to concern any such persons or bodies, it may send to those persons or bodies a copy of only those parts or alterations.

Appointment of medical adviser

38. An FHSA shall appoint a doctor to assist it in the exercise of its functions pursuant to paragraph 49 of the terms of service for doctors (inquiries about prescriptions and referrals).

Guidance to doctors

39.—(1) An FHSA may issue guidance to doctors whose names are included in its medical list to assist them in assessing in accordance with paragraph 28 of the terms of service, the qualifications, experience and competence of any employee, or prospective employee.

(2) Any guidance issued for the purposes of paragraph (1) in connection with the employment of members of any profession or other occupational group shall have regard to any statement as to minimum professional standards of conduct published by any body responsible for the regulation of that profession or occupational group.

10th March 1992

William Waldegrave
Signed by One of Her Majesty's Principal
Secretaries of State

SCHEDULE 1

PROVISIONS CONFERRING POWERS EXERCISED
IN MAKING THESE REGULATIONS (1)(2)

(1) <i>Provision</i>	(2) <i>Relevant amendments</i>
National Health Service Act 1977 (20) —	
section 7(2)(a)	Health Services Act 1980 (21) (“the 1980 Act”), Schedule 1, paragraphs 35 and 90;
section 15(1)	Health and Social Security Act 1984 (22) (“the xmlns="http://www.tso.co.uk/assets/namespace/legislation" 1984 Act”), section 5(2) and Schedule 8;
section 16(1)(b)	National Health Service and Community Care Act 1990 (23) (“the 1990 Act”), section 12;
section 29 (24)	The 1980 Act, Schedule 1, Part I, paragraph 36(a);
section 30(1)	The 1980 Act, section 7 and Schedule 1, paragraphs 42 and 93; Health and Social Services and Social Security Adjudications Act 1983 (25) , Schedule 6, paragraph 2; Family Practitioner Committees (Consequential Modifications) Order 1985 (26) (“the 1985 Order”), article 7(3);
section 31(1)	1980 Act, Schedule 1, paragraph 43(a) and Schedule 7; European Communities (Medical, Dental and Nursing Professions) (Linguistic Knowledge) Order 1981 (27) , article 3(1)(a); 1985 Order, article 7(4);
section 33(2A), (4)	1985 Order, article 7(5);
section 34	1985 Order, article 7(7); 1990 Act, section 23;
section 45(1)	1985 Order, article 7(8); 1990 Act, section 23;
section 50	1984 Act, Schedule 3, paragraph 7(a);
section 126(4)	1990 Act, section 65(2);
section 127(a)	

(20) 1977 c. 49.**(21)** 1980 c. 53.**(22)** 1984 c. 48.**(23)** 1990 c. 19.**(24)** As to the manner in which these and other powers may be exercised, *see* also section 103(3) of the Medicines Act 1968 (c. 67) as amended by section 22(4) of the Health and Medicines Act 1988 (c. 49).**(25)** 1983 c. 41.**(26)** S.I. 1985/39.**(27)** S.I. 1981/432.

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(1) <i>Provision</i>	(2) <i>Relevant amendments</i>
section 128(1) (definitions of “prescribed” and “regulations”)	1990 Act, section 26(2);
Schedule 5, paragraph 12(b) and (c)	
Schedule 10, paragraph 1(3)	
Health and Medicines Act 1988 section 8(1)(a) and (5)	

SCHEDULE 2

Regulation 3(2)

TERMS OF SERVICE FOR DOCTORS

ARRANGEMENT OF PARAGRAPHS

- 1–2 Interpretation
- 3. General
- 4–5 A doctor’s patients
- 6–8 Acceptance of patients
- 9–11 Termination of responsibility for patients
- 12–17 Services to patients generally and for specified purposes
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- 27. Arrangements at practice premises
- 28. Employees
- 29–33 Doctors' availability to patients
- 34. Practice area
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- 36. Records
- 37. Certification
- 38–42 Fees
- 43–46 Prescribing
- 47. Practice leaflet
- 48. Reports etc to the medical officer
- 49. Inquiries about prescriptions and referrals
- 50. Annual reports
- 51. Incorporation of provisions of regulations, etc
- Signature
- Explanatory Note

Interpretation

1. In this Schedule, unless the context otherwise requires—

“appliance” means an appliance which is included in a list for the time being approved by the Secretary of State for the purposes of section 41 of the Act⁽²⁸⁾;

“assistant” includes a trainee general practitioner;

“chemical reagent” means a chemical reagent which is included in a list for the time being approved by the Secretary of State for the purposes of section 41 of the Act;

“deputy” means a person to whom a doctor has, under paragraph 19, delegated the treatment of his patient;

“deputising service” means any person or body carrying on a business which is concerned with the provision of a deputy or deputies for doctors for periods which do not normally exceed 48 hours;

“drugs” includes medicines;

“Drug Tariff” means the statement published under regulation 18 of the Pharmaceutical Regulations;

“post-natal period” means the period of 14 days following the conclusion of a pregnancy;

“prescription form” means a form provided by a health authority, an FHSA or, where the doctor is in the medical list of more than one FHSA, by the FHSA which is responsible for the supply of that form, and issued by a doctor to enable a person to obtain pharmaceutical services;

“Scheduled drug” means a drug or other substance specified in Schedule 10 or, except where the conditions in paragraph 44(2) are satisfied, in Schedule 11;

2. Unless the context otherwise requires, any reference in a paragraph in this Schedule to a numbered sub-paragraph is a reference to the sub-paragraph bearing that number in that paragraph.

General

3. Where a decision whether any, and if so what, action is to be taken under these terms of service requires the exercise of professional judgment, a doctor shall not, in reaching that decision, be expected to exercise a higher degree of skill, knowledge and care than—

- (a) in the case of a doctor providing child health surveillance services under regulation 28, maternity medical services under regulation 31 or minor surgery services under regulation 33, that which any general practitioner included in the child health surveillance list, the obstetric list or, as the case may be, the minor surgery list may reasonably be expected to exercise; and
- (b) in any other case, that which general practitioners as a class may reasonably be expected to exercise.

A doctor’s patients

4.—(1) Subject to sub-paragraph (2) and to paragraphs 9, 10 and 11, a doctor’s patients are—

- (a) persons who are recorded by the FHSA as being on his list;
- (b) persons whom he has accepted or agreed to accept on his list, whether or not notification of that acceptance has been received by the FHSA, and who have not been notified to him by the FHSA as having ceased to be on his list;
- (c) for the limited period specified in sub-paragraph (4), persons whom he has refused to accept;

(28) Section 41 was amended by paragraph 53 of Schedule 1 to, and by Schedule 3 to the Health Services Act 1980 (c. 53) and by S.I. 1985/39, article 7(13) and by paragraph 18 of Schedule 9 to the National Health Service and Community Care Act 1990 (c. 19).

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- (d) persons who have been assigned to him under regulation 21;
- (e) for the limited period specified in sub-paragraph (5), persons in respect of whom he has been notified that an application has been made for assignment to him in a case to which regulation 21(3)(b) applies;
- (f) persons whom he has accepted as temporary residents;
- (g) in respect of services under paragraph 8, persons to whom he has agreed to provide those services;
- (h) persons to whom he may be requested to give treatment which is immediately required owing to an accident or other emergency at any place in his practice area, provided that—
 - (i) he is not, at time of the request, relieved of liability to give treatment under paragraph 5, and
 - (ii) he is not, at the time of the request, relieved, under paragraph 19(2), of his obligation to give treatment personally, and
 - (iii) he is available to provide such treatment,and any persons by whom he is requested, and agrees, to give treatment which is immediately required owing to an accident or other emergency at any place in the locality of any FHSA in whose medical list he is included, provided there is no doctor who, at the time of the request, is under an obligation otherwise than under this head to give treatment to that person, or there is such a doctor but, after being requested to attend, he is unable to attend and give treatment immediately required;
- (i) persons in relation to whom he is acting as deputy for another doctor under these terms of service;
- (j) during the period of an appointment under regulation 25, persons whom he has been appointed to treat temporarily;
- (k) in respect of child health surveillance services, contraceptive services, maternity medical services, or minor surgery services persons for whom he has undertaken to provide such services; and
- (l) during the hours arranged with the FHSA, any person whose own doctor has been relieved of responsibility during those hours under paragraph 19 and for whom he has accepted responsibility under that paragraph.

(2) Except in a case to which head (h), (i) or (j) of sub-paragraph (1) applies, no person shall be a patient for the purposes of that sub-paragraph if the doctor has been notified by the FHSA that he is no longer responsible for the treatment of that person.

(3) Where a person applies to a doctor for treatment and claims to be on that doctor's list, but fails to produce his medical card on request and the doctor has reasonable doubts about that person's claim, the doctor shall give any necessary treatment and shall be entitled to demand and accept a fee accordingly under paragraph 38(f), subject to the provision for repayment contained in paragraph 39.

(4) Where a doctor refuses to accept for inclusion on his list a person who lives in his practice area and who is not on the list of another doctor practising in that area, or refuses to accept as a temporary resident a person to whom regulation 26 applies, he shall on request give that person any immediately necessary treatment for one period not exceeding 14 days from the date when that person was refused acceptance or until that person has been accepted by or assigned to another doctor, whichever period is the shorter.

(5) Where the FSHA has notified a doctor that it is applying for the Secretary of State's consent under regulation 21(3)(b), the doctor shall give the person proposed for assignment any immediately necessary treatment until the FHSA has notified him that—

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- (a) the Secretary of State has determined whether or not the person is to be assigned to that doctor; and
- (b) either the person has been accepted by, or assigned to, another doctor or another doctor has been notified that an application has been made, in a case to which regulation 21(3) (b) applies, to assign that person to him.

5. A doctor who is elderly or infirm or who has been exempted by the FHSA under regulation 21(11) from the liability to have persons assigned to him, may be relieved by the FHSA of any liability to give treatment which is immediately required owing to an accident or other emergency between 7pm on weekdays and 8am on the following morning and between 1pm on Saturday and 8am on the following Monday to persons who are neither—

- (a) on his list; nor
- (b) temporary residents for whom he is responsible; nor
- (c) accepted by him for the provision of maternity medical services.

Acceptance of patients

6.—(1) Subject to sub-paragraph (2), a doctor may agree to accept a person on his list if the person is eligible to be accepted by him.

(2) Where a doctor is responsible for treating the patients of another doctor whose name has been removed from the medical list, he may not consent to the transfer of any of those patients under regulation 22 to his own list or to that of his partner.

(3) Where a doctor has agreed to accept a person on his list, he shall, within 14 days of receiving that person's medical card or form of application, or as soon after the expiry of that period as is practicable—

- (a) sign the medical card or, as the case may be, the form of application; and
- (b) send it to the FHSA.

(4) Where, for the purposes of sub-paragraph (3), any person signs a medical card or form of application on behalf of a doctor he shall, in addition to his own signature, specify the name of the doctor on whose behalf he is signing.

7. A doctor may—

- (a) undertake to provide contraceptive services to a woman who has applied to him in accordance with regulation 29;
- (b) accept as a temporary resident a person who has applied to him in accordance with regulation 26(1);
- (c) undertake to provide maternity medical services to a woman who has made an arrangement with him in accordance with regulation 31(2).

8. Notwithstanding that the person concerned is not on his list, a doctor may—

- (a) take a cervical smear from a woman who would be eligible for acceptance by him as a temporary resident or for whom he has undertaken to provide maternity medical services or contraceptive services; and
- (b) vaccinate or immunise a person who would be eligible for acceptance by him as a temporary resident.

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Termination of responsibility for patients

9.—(1) A doctor may have any person removed from his list and shall notify the FHSA in writing that he wishes to have a person removed from his list and, subject to sub-paragraph (2), the removal shall take effect—

- (a) on the date on which the person is accepted by or assigned to another doctor; or
- (b) on the eighth day after the FHSA receives the notice,

whichever is the sooner.

(2) Where, at the date when the removal would take effect under sub-paragraph (1), the doctor is treating the person at intervals of less than 7 days, the doctor shall inform the FHSA in writing of the fact and the removal shall take effect—

- (a) on the eighth day after the FHSA receives notification from the doctor that the person no longer needs such treatment; or
- (b) on the date on which the person is accepted by or assigned to another doctor,

whichever is the sooner.

10. Where a doctor informs the FHSA in writing that he wishes to terminate his responsibility for a temporary resident, his responsibility for that person shall cease in accordance with paragraph 9, as if the temporary resident were a person on his list.

11.—(1) A doctor with whom an arrangement has been made for the provision of any or all of the maternity medical services mentioned in regulation 31(1)(a) may agree with the woman concerned to terminate the arrangement, and in default of agreement the doctor may apply to the FHSA for permission to terminate the arrangement.

(2) On an application under paragraph (1), the FHSA, after considering any representations made by either party and after consulting the Local Medical Committee, may terminate the arrangement.

(3) Where a doctor ceases to provide any or all of the maternity medical services mentioned in regulation 31(1)(a), he shall inform any woman for whom he has arranged to provide such services that he is ceasing to provide them and that she may make a fresh arrangement to receive those services from another doctor.

Services to patients

12.—(1) Subject to paragraphs 3, 13 and 44, a doctor shall render to his patients all necessary and appropriate personal medical services of the type usually provided by general medical practitioners.

(2) The services which a doctor is required by sub-paragraph (1) to render shall include the following:

- (a) giving advice, where appropriate, to a patient in connection with the patient's general health, and in particular about the significance of diet, exercise, the use of tobacco, the consumption of alcohol and the misuse of drugs or solvents;
- (b) offering to patients consultations and, where appropriate, physical examinations for the purpose of identifying, or reducing the risk of, disease or injury;
- (c) offering to patients, where appropriate, vaccination or immunisation against measles, mumps, rubella, pertussis, poliomyelitis, diphtheria and tetanus;
- (d) arranging for the referral of patients, as appropriate, for the provision of any other services under the Act; and
- (e) giving advice, as appropriate, to enable patients to avail themselves of services provided by a local social services authority.

(3) A doctor is not required by sub-paragraph (1) or (2)—

- (a) to provide to any person child health surveillance services, contraceptive services, minor surgery services nor, except in an emergency, maternity medical services, unless he has previously undertaken to the FHSA to provide such services to that person; or
- (b) where he is a restricted services principal, to provide any category of general medical services which he has not undertaken to provide.

Provision of services to patients

13. The services referred to in paragraph 12 shall be rendered by a doctor—

- (a) at his practice premises;
- (b) if the condition of the patient so requires—
 - (i) at the place where the patient was residing when he was accepted by the doctor pursuant to paragraph 6 or, as the case may be, when he was assigned to the doctor pursuant to regulation 21 or, in the case of a patient who was previously on the list of a doctor in a practice declared vacant, when the doctor succeeded to the vacancy,
 - (ii) at such other place as the doctor has informed the patient and the FHSA is the place where he has agreed to visit and treat the patient if the patient's condition so requires, or
 - (iii) in any other case, at some other place in the doctor's practice area; or
- (c) at such places and at such times as have been approved by the FHSA in his case, pursuant to paragraph 29.

Newly registered patients

14.—(1) Subject to sub-paragraphs (4) to (9), where a patient has been accepted on a doctor's list under paragraph 6 or assigned to a doctor's list under regulation 21, the doctor shall, in addition to and without prejudice to his other obligations in respect of that patient under these terms of service, within 28 days of the date of such acceptance or assignment invite the patient to participate in a consultation either at his practice premises or, if the condition of the patient so warrants, at such other place as the doctor is obliged under paragraph 13(b) to render personal medical services to that patient.

(2) Where a patient (or, in the case of a patient who is a child, his parent) agrees to participate in a consultation mentioned in sub-paragraph (1), the doctor shall, in the course of that consultation—

- (a) seek details from the patient as to his medical history and, so far as may be relevant to the patient's medical history, as to that of his consanguineous family, in respect of—
 - (i) illnesses, immunisations, allergies, hereditary conditions, medication and tests carried out for breast or cervical cancer,
 - (ii) social factors (including employment, housing and family circumstances) which may affect his health,
 - (iii) factors of his lifestyle (including diet, exercise, use of tobacco, consumption of alcohol, and misuse of drugs or solvents) which may affect his health, and
 - (iv) the current state of his health;
- (b) offer to undertake a physical examination of the patient, comprising—
 - (i) the measurement of his height, weight and blood pressure, and
 - (ii) the taking of a urine sample and its analysis to identify the presence of albumen and glucose;

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- (c) record, in the patient's medical records, his findings arising out of the details supplied by, and any examination of, the patient under this sub-paragraph;
 - (d) assess whether and, if so, in what manner and to what extent he should render personal medical services to the patient;
 - (e) in so far as it would not, in the opinion of the doctor, be likely to cause serious damage to the physical or mental health of the patient to do so, offer to discuss with the patient (or, where the patient is a child, the parent) the conclusions the doctor has drawn as a result of the consultation as to the state of the patient's health.
- (3) On each occasion where a doctor invites a patient or parent to participate in a consultation pursuant to sub-paragraph (1) he shall—
- (a) make the invitation in writing or, if the invitation is initially made orally, confirm it in writing, by a letter either handed to the patient or his representative or sent to the patient or parent at the address recorded in his medical records as being his last home address;
 - (b) record in the patient's medical records the date of each such invitation and whether or not it was accepted; and
 - (c) where, as a result of making the invitation, the doctor becomes aware that the patient is no longer residing at the address shown in his medical records, advise the FHSA accordingly.
- (4) A doctor shall not be obliged to offer a consultation pursuant to sub-paragraph (1)—
- (a) if he is a restricted services principal;
 - (b) in respect of a child under the age of 5 years;
 - (c) to any patient who, immediately before joining the list of the doctor, was a patient of a partner of the doctor and who, during the 12 months immediately preceding the date of his acceptance or assignment to the doctor's list, had participated in a consultation pursuant to sub-paragraph (1); or
 - (d) to the extent allowed by the FHSA, to any patient within a class of patients in respect of which the FHSA or, on appeal, the Secretary of State has, pursuant to sub-paragraphs (5) to (8), deferred the doctor's obligation under sub-paragraph (1).
- (5) Where a doctor assumes responsibility for a list of patients on his succession to a practice declared vacant, or otherwise becomes responsible for a significant number of new patients within a short period, he may apply, in accordance with sub-paragraph (6), to the FHSA for the deferment of his obligation under sub-paragraph (1) for a period not exceeding 2 years from the date of the application.
- (6) An application pursuant to sub-paragraph (5) shall be made in writing and shall be accompanied by a statement of the doctor's proposals, by reference to particular classes of patient, with a view to securing that all eligible patients are invited to participate in a consultation pursuant to sub-paragraph (1) by the end of the period of the deferment.
- (7) Within 2 months of receiving an application the FHSA shall determine it—
- (a) by approving the application;
 - (b) by approving the application subject to conditions; or
 - (c) by refusing the application.
- (8) A doctor may appeal in writing to the Secretary of State against any refusal of an application, or against any condition subject to which an application is approved by the FHSA pursuant to sub-paragraph (7)(b), and on determining such an appeal the Secretary of State shall either confirm the FHSA's decision or substitute his own determination for that of the FHSA.
- (9) The Secretary of State shall notify the doctor in writing of his determination and shall include with the notice a statement of his reasons for it.

Patients not seen within 3 years

15.—(1) Subject to sub-paragraph (2), a doctor shall, in addition to and without prejudice to any other obligation under these terms of service, invite each patient on his list who appears to him—

- (a) to have attained the age of 16 years but who has not attained the age of 75 years; and
- (b) to have neither—
 - (i) within the preceding 3 years attended either a consultation with, or a clinic provided by, any doctor in the course of his provision of general medical services, nor
 - (ii) within the preceding 12 months been offered a consultation pursuant to this sub-paragraph by any doctor,

to participate in a consultation at his practice premises for the purpose of assessing whether he needs to render personal medical services to that patient.

(2) Sub-paragraph (1) shall not apply in the case of a doctor who is a restricted services principal.

(3) When inviting a patient to participate in a consultation pursuant to sub-paragraph (1) a doctor shall comply with the requirements of paragraph 14(3).

(4) Where a patient agrees to participate in a consultation mentioned in sub-paragraph (1), the doctor shall, in the course of that consultation—

- (a) where appropriate, seek details from the patient as to his medical history and, so far as may be relevant to the patient's medical history, as to that of his consanguineous family, in respect of—
 - (i) illnesses, immunisations, allergies, hereditary diseases, medication and tests carried out for breast or cervical cancer,
 - (ii) social factors (including employment, housing and family circumstances) which may affect his health,
 - (iii) factors of his lifestyle (including diet, exercise, use of tobacco, consumption of alcohol, and misuse of drugs or solvents) which may affect his health, and
 - (iv) the current state of his health;
- (b) offer to undertake a physical examination of the patient, comprising—
 - (i) the measurement of his blood pressure, and
 - (ii) the taking of a urine sample and its analysis to identify the presence of albumen and glucose, and
 - (iii) the measurement necessary to detect any changes in his body mass;
- (c) record, in the patient's medical records, his findings arising out of the details supplied by, and any examination of, the patient under this sub-paragraph;
- (d) assess whether and, if so, in what manner and to what extent he should render personal medical services to the patient; and
- (e) in so far as it would not, in the opinion of the doctor, be likely to cause serious damage to the physical or mental health of the patient to do so, offer to discuss with the patient the conclusions the doctor has drawn as a result of the consultation as to the state of the patient's health.

(5) In this paragraph "body mass" means the figure produced by dividing the number of kilograms in the patient's weight by the square of the number of metres in his height.

Patients aged 75 years and over

16.—(1) Subject to sub-paragraph (2), a doctor shall, in addition to and without prejudice to any other obligations under these terms of service, in each period of 12 months beginning on 1st April in each year—

- (a) invite each patient on his list who has attained the age of 75 years to participate in a consultation; and
- (b) offer to make a domiciliary visit to each such patient,

for the purpose of assessing whether he needs to render personal medical services to that patient.

(2) Sub-paragraph (1) shall not apply in the case of any doctor who is a restricted services principal.

(3) Any consultation pursuant to sub-paragraph (1) may take place in the course of the domiciliary visit pursuant to that sub-paragraph.

(4) In the case of a patient who is accepted by a doctor pursuant to paragraph 6, or assigned to him pursuant to regulation 21 and who has attained the age of 75 years when he is so accepted or assigned, an invitation and an offer pursuant to sub-paragraph (1) shall be made within 12 months of the date of his acceptance or assignment.

(5) A doctor shall, when making an assessment following a consultation under sub-paragraph (1), record in the patient's medical records the observations made of any matter which appears to him to be affecting the patient's general health, including, where appropriate the patient's—

- (a) sensory functions;
- (b) mobility;
- (c) mental condition;
- (d) physical condition including continence;
- (e) social environment;
- (f) use of medicines.

(6) A doctor shall keep with the patient's medical records a report of any observations made in the course of a domiciliary visit made pursuant to sub-paragraph (1) which are relevant to the patient's general health.

(7) When inviting a patient to participate in a consultation, or offering him a domiciliary visit, pursuant to sub-paragraph (1), a doctor shall comply with the requirements of paragraph 14(3) as if paragraph 14(3) referred to an offer as well as an invitation.

(8) Where a patient has participated in a consultation pursuant to sub-paragraph (1), the doctor shall offer to discuss with him the conclusions he has drawn, as a result of the consultation, as to the state of the patient's health, unless to do so would, in the opinion of the doctor, be likely to cause serious harm to the physical or mental health of the patient.

17.—(1) Unless prevented by an emergency, a doctor shall attend and treat any patient who attends for the purpose at any place, and during the hours, for the time being approved by the FHSA under paragraph 29, other than a patient who attends when an appointment system is in operation and who has not previously made, and is not then given, an appointment to see the doctor.

(2) In such a case the doctor may refuse to attend and treat the patient during that surgery period, provided that—

- (a) the patient's health would not thereby be jeopardised; and
- (b) the patient is offered an appointment to attend again within a time which is reasonable having regard to all the circumstances.

(3) A doctor shall take reasonable steps to ensure that no refusal is made pursuant to sub-paragraph (2) without his knowledge.

Absences, deputies, assistants and partners

18.—(1) Subject to sub-paragraph (2), a doctor is responsible for ensuring the provision for his patients of the services referred to in paragraph 12 throughout each day during which his name is included in the FHSA's medical list.

(2) A doctor who was, prior to 1st April 1990, relieved by the FHSA of such responsibility in respect of his patients during times approved by the FHSA may continue to enjoy such relief for so long as his name is included in the medical list.

19.—(1) Subject to the following provisions of this paragraph, a doctor shall give treatment personally.

(2) Subject to sub-paragraphs (3), (5) and (6), a doctor (in this sub-paragraph referred to as “the patient’s doctor”) shall be under no obligation to give treatment personally to a patient provided that reasonable steps are taken to ensure the continuity of the patient’s treatment, and in those circumstances treatment may be given—

- (a) by another doctor acting as a deputy, whether or not he is a partner or assistant of the patient’s doctor; or
- (b) in the case of treatment which it is clinically reasonable in the circumstances to delegate to someone other than a doctor, by a person whom the doctor has authorised and who he is satisfied is competent to carry out such treatment.

(3) Subject to sub-paragraph (4), in the case of maternity medical services a doctor on the obstetric list shall not arrange for the provision of such services by another doctor unless that doctor is a doctor on the obstetric list or satisfies one or more of the criteria set out in Part 1 of Schedule 5.

(4) Sub-paragraph (3) shall not apply where there has been a summons to an obstetric emergency.

(5) In the case of child health surveillance services, a doctor who has, pursuant to regulation 28, undertaken to provide such services shall not arrange for the provision of such services by—

- (a) another doctor unless that doctor is included in a child health surveillance list; or
- (b) any other person without the consent of the FHSA.

(6) In the case of minor surgery services, a doctor who has, pursuant to regulation 33, undertaken to provide such services shall not arrange for the provision of such services by—

- (a) another doctor unless that doctor is included in a minor surgery list; or
- (b) any other person.

(7) In this paragraph “a summons to an obstetric emergency” means a summons to the doctor by a midwife or on behalf of the patient to attend when medical attention is required urgently by a woman or her baby during pregnancy, labour or the post-natal period, as defined in regulation 31(7).

20.—(1) In relation to his obligations under these terms of service, a doctor is responsible for all acts and omissions of—

- (a) any doctor acting as his deputy;
- (b) any deputising service while acting on his behalf; and
- (c) any person employed by, or acting on behalf of, him or such a deputy or deputising service, except where the act or omission is one for which a deputy is responsible under sub-paragraph (2).

(2) Where a doctor whose name is included in the medical list is acting as deputy to another doctor whose name is also included in the list, the deputy is responsible for—

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- (a) his own acts and omissions in relation to the obligations under these terms of service of the doctor for whom he acts as deputy; and
- (b) the acts and omissions of any person employed by him or acting on his behalf.

21.—(1) A doctor shall inform the FHSA of any arrangements for the engagement of a deputy on a regular basis unless the deputy—

- (a) is an assistant of the doctor, or is a doctor included in the medical list of an FHSA; and
- (b) is to carry out the arrangements at the doctor’s practice premises.

(2) Where a doctor proposes to be absent from his practice for more than a week, he shall inform the FHSA of the name of any doctor responsible for his practice during his absence.

22.—(1) Before entering into arrangements with a deputising service for the provision of any deputy, a doctor shall obtain the consent of the FHSA.

(2) In giving its consent, the FHSA may impose such conditions as it considers necessary or expedient to ensure the adequacy of such arrangements.

(3) Before refusing its consent or imposing any such conditions, the FHSA shall consult the Local Medical Committee.

(4) The FHSA may at any time, and shall periodically, review in consultation with the Local Medical Committee any such consent given or conditions imposed in relation to any doctor under this paragraph, and may withdraw such consent or vary such conditions.

(5) A doctor may appeal to the Secretary of State against refusal of consent or the imposition of a condition under this paragraph or against withdrawal of consent or variation of conditions under this paragraph.

(6) An appeal under sub-paragraph (5) shall be made in writing within 30 days of the decision of the FHSA and shall set out the grounds of appeal.

(7) In determining an appeal under sub-paragraph (5) the Secretary of State may substitute for the FHSA’s decision such decision and conditions as he thinks fit.

23. A doctor shall take reasonable steps to satisfy himself that a doctor whom he proposes to employ as a deputy or assistant is not disqualified under section 46 of the Act⁽²⁹⁾ from inclusion in the medical list of the FHSA and he shall not knowingly employ a doctor who is so disqualified.

24.—(1) A doctor shall inform the FHSA of the name of any assistant he employs and of the termination of such employment, and shall not employ any one or more assistants for a total period of more than three months in any period of twelve months without the consent of the FHSA.

(2) The FHSA shall periodically review and may withdraw any consent given, but, before refusing or withdrawing consent, the FHSA shall consult the Local Medical Committee.

(3) The doctor may appeal to the Medical Practices Committee against any refusal or withdrawal of consent.

(4) Any withdrawal of consent under this paragraph shall not have effect until the expiration of a period of one month after the date of notification of the withdrawal, but if the doctor appeals to the Medical Practices Committee against the withdrawal, and the Medical Practices Committee dismisses the appeal, the withdrawal shall not take effect until after such date as that Committee determines being a date falling not less than one month after the date of such dismissal.

25. A doctor acting as a deputy for another doctor may treat patients at places and at times other than those approved pursuant to paragraph 29 in relation to the doctor for whom he is acting, but

⁽²⁹⁾ Section 46 was amended by Schedule 8 to the Health and Social Security Act 1984 (c. 48) and by S.I. 1985/39, article 7(16).

when determining the places and times at which he is to provide such treatment, the deputy shall have regard to the convenience of the patients.

26. When issuing any document under these terms of service a deputy or assistant (other than a partner or assistant whose name is included in the medical list) shall, as well as signing the document himself, enter on it the name of the doctor for whom he is acting, if it does not already appear.

Arrangements at practice premises

27. A doctor shall—

- (a) provide proper and sufficient accommodation at his practice premises, having regard to the circumstances of his practice; and
- (b) on receipt of a written request from the FHSA, allow inspection of those premises at a reasonable time by a member or officer of the FHSA or Local Medical Committee or both, authorised by the FHSA for the purpose.

Employees

28.—(1) A doctor shall, before employing any person to assist him in the provision of general medical services, take reasonable care to satisfy himself that the person in question is both suitably qualified and competent to discharge the duties for which he is to be employed.

(2) When considering the competence and suitability of any person for the purpose of sub-paragraph (1), a doctor shall have regard, in particular, to—

- (a) that person's academic and vocational qualifications;
- (b) that person's training and his experience in employment; and
- (c) any guidance issued by the FHSA pursuant to regulation 39.

(3) A doctor shall afford to each employee reasonable opportunities to undertake appropriate training with a view to maintaining that employee's competence.

Doctors' availability to patients

29.—(1) Any doctor whose name is included in a medical list shall—

- (a) normally be available at such times and places as shall have been approved by the FHSA or, on appeal, by the Secretary of State in his case, in accordance with the requirements of the following provisions of this paragraph, following an application by the doctor; and
- (b) inform his patients about his availability in such manner as the FHSA may require in accordance with sub-paragraph (16).

(2) Subject to sub-paragraphs (3), (4), (5) and (6), the FHSA shall not approve any application submitted by a doctor in relation to the times at which he is to be available unless it is satisfied that—

- (a) the times proposed are such that the doctor will normally be available—
 - (i) in 42 weeks in any period of 12 months,
 - (ii) for no less than the number of hours in any such week which are specified in the condition imposed or treated as imposed in relation to him under regulation 15, and
 - (iii) on 5 days in any such week;
- (b) the hours for which the doctor will normally be available in any week are to be allocated between the days on which he will normally be available in that week in such a manner as is likely to be convenient to his patients;

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- (c) where the doctor is a three-quarter-time doctor or a half-time doctor, he is practising in partnership with—
 - (i) another doctor whose name is included in the medical list and who is himself a full-time doctor, or
 - (ii) two job-sharing doctors whose names are included in the medical list and whose hours are aggregated for the purpose of head (d) of this sub-paragraph;
- (d) where the doctor is a job-sharing doctor—
 - (i) he is practising in partnership with another doctor whose name is included in the medical list, and
 - (ii) the hours for which both doctors will normally be available will in aggregate be not less than 26 hours in any week referred to in head (a)(i) of this sub-paragraph.
- (3) On any application made pursuant to sub-paragraph (1) by a three-quarter-time doctor or a half-time doctor—
 - (a) head (a)(iii) of sub-paragraph (2) shall not apply; and
 - (b) any approval of the application shall be subject to the condition that the approval shall lapse after the expiry of a period of 6 months from that date on which that doctor ceases to satisfy head (c) of sub-paragraph (2).
- (4) On any application made pursuant to sub-paragraph (1) by a job-sharing doctor—
 - (a) head (a)(iii) of sub-paragraph (2) shall apply so as to require either the job-sharing doctor or the other doctor referred to in sub-paragraph (2)(d) to be normally available on each of the days mentioned in that head; and
 - (b) any approval of the application shall be subject to the condition that the approval shall lapse after the expiry of a period of 6 months from the date on which the doctor ceases to satisfy sub-paragraph (2)(d).
- (5) On any application made pursuant to sub-paragraph (1) by a doctor who is a restricted list principal or a restricted services principal, sub-paragraph (2)(a)(i) and (iii), (c) and (d) shall not apply.
- (6) The FHSA may, in relation to the application of any full-time doctor who seeks normally to be available on only 4 days in any week referred to in sub-paragraph (2)(a)(i), excuse the doctor from the requirement of head (a)(iii) of that sub-paragraph and approve the application to the extent allowed by paragraph 30.
- (7) In this paragraph and in paragraph 30, “available” means, in relation to a doctor, available to provide general medical services to his patients, and for the purposes of calculating the time at which a doctor is to be regarded as available—
 - (a) account may be taken of any period when the doctor is attending at his practice premises or at any clinic provided by him for his own patients, and of any time spent making a domiciliary visit; but
 - (b) no account shall be taken of time spent by the doctor holding himself in readiness to make a domiciliary visit if required by any patient;and “availability” shall be construed accordingly.
- (8) An application by a doctor in relation to any place at which he is to be available shall not be approved by the FHSA unless it is satisfied that—
 - (a) the place at which the doctor proposes to be available is likely to be convenient to his patients;
 - (b) the location of that place is in accordance with any condition imposed in his case pursuant to section 33(4)(b) or (5) of the Act (distribution of general medical services).

(9) An application for approval pursuant to sub-paragraph (1) shall be made in writing to the FHSA and shall—

- (a) include the information specified in Part I of Schedule 8 to these Regulations; and
- (b) where appropriate, also include—
 - (i) in the case of a doctor to whom sub-paragraph (5) applies, the additional information specified in Part II of that Schedule,
 - (ii) in the case of a doctor to whom sub-paragraph (6) applies, the additional information specified in Part III of that Schedule.

(10) The FHSA shall determine an application within 28 days of receiving it.

(11) In determining any application, the FHSA shall either—

- (a) grant approval;
- (b) grant approval subject to such conditions as the FHSA sees fit to impose for the purpose of securing that the doctor is available at such times and places as are convenient to his patients; or
- (c) refuse approval.

(12) The FHSA shall notify the doctor in writing of its determination, and, where it refuses an application or grants an application subject to conditions, it shall send the doctor a statement in writing of the reasons for its determination and of the doctor's right of appeal under sub-paragraph (13).

(13) A doctor may within 30 days of receiving a notification pursuant to sub-paragraph (12) appeal in writing to the Secretary of State against any refusal of approval or against any condition imposed pursuant to sub-paragraph (11).

(14) The Secretary of State may, when determining an appeal, either confirm the determination of the FHSA or substitute his own determination for that of the FHSA.

(15) The Secretary of State shall notify the doctor in writing of his determination and shall in every case include with the notification a written statement of the reasons for the determination.

(16) The FHSA may, as it considers appropriate, require a doctor to inform his patients, by displaying a notice at his practice premises or sending notices to them, about the times and places at which he is available.

(17) A doctor may apply to the FHSA for a variation of the times and places at which, in accordance with a determination under this paragraph ("the earlier determination"), he is required to be normally available, and sub-paragraphs (2) to (15) shall apply to the making and determination ("the subsequent determination") of an application under this sub-paragraph as if it were the first application by that doctor for the purposes of this paragraph.

(18) Where an application made under sub-paragraph (17) is approved or is approved subject to conditions, for the purposes of sub-paragraphs (1) and (16) the earlier determination mentioned in sub-paragraph (17) shall cease to have effect and the subsequent determination mentioned in that sub-paragraph shall have effect instead—

- (a) where the subsequent determination is made by the FHSA and no appeal is made, from the day falling 8 weeks after the date on which the doctor receives notification of that FHSA's determination.
- (b) where the subsequent determination is made on appeal, from the day falling 8 weeks after the date on which the doctor receives notification of the Secretary of State's determination.

(19) Where it appears to the FHSA that a doctor's hours of availability are allocated for the purposes of sub-paragraph (2)(b) in a manner which may no longer be convenient to his patients, it may, subject to sub-paragraph (26), review the terms of—

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- (a) any approval granted under sub-paragraph (11)(a) or (b); or
 - (b) any direction given under sub-paragraph (21)(a);
- by the FHSA or the Secretary of State as to such allocation.
- (20) On review under sub-paragraph (19) the FHSA shall—
- (a) give notice to the doctor of its proposed re-allocation of his hours of availability; and
 - (b) allow him 30 days within which to make representations to the FHSA about its proposals.
- (21) After considering any representations made in accordance with sub-paragraph (20)(b), the FHSA shall either—
- (a) direct the doctor to revise the allocation of his hours of availability in the manner specified in the direction; or
 - (b) confirm that the existing allocation of the doctor’s hours of availability continues to be convenient to his patients.
- (22) The FHSA shall notify the doctor in writing of its determination under sub-paragraph (21), and, where it gives a direction under head (a) of that sub-paragraph, it shall include with the notice a statement in writing of the reasons for its determination and of the doctor’s right of appeal under sub-paragraph (23).
- (23) A doctor may, within 30 days of receiving notification under sub-paragraph (22), appeal in writing to the Secretary of State against a direction under sub-paragraph (21).
- (24) Sub-paragraphs (14) and (15) shall apply to any appeal made under sub-paragraph (23).
- (25) A doctor in respect of whom a direction is given under sub-paragraph (21) shall revise the allocation of his hours of availability so as to give effect to the direction—
- (a) where the direction is given by the FHSA and no appeal is made, not later than 8 weeks after the date on which he receives notification under sub-paragraph (22); or
 - (b) where the direction is given or confirmed on appeal, not later than 8 weeks after the date on which he receives notification of the Secretary of State’s decision;
- and the allocation of hours as so revised shall be regarded as having been approved for the purposes of sub-paragraphs (1) and (16).
- (26) No FHSA shall undertake a review under sub-paragraph (19) on more than one occasion in any period of 2 years.

Doctors available for only 4 days a week

30.—(1) Subject to sub-paragraph (3), where the FHSA is satisfied that, by reason of a doctor’s participation in health-related activities (other than the provision of general medical services to his patients), he would be likely to suffer an unreasonable degree of inconvenience if paragraph 29(2)(a)(iii) applied in his case, it may give its approval for the doctor normally to be available on only 4 days in any week referred to in sub-paragraph (2)(a) of that paragraph.

(2) For the purposes of sub-paragraph (1), “health-related activities” means activities connected with—

- (a) the organisation of the medical profession or the training of its members;
- (b) the provision of medical care or treatment;
- (c) the improvement of the quality of such care and treatment; or
- (d) the administration of services under Part I of the Act or of arrangements pursuant to section 29 of the Act for the provision of general medical services,

and in determining whether any activity is a health-related activity, the FHSA shall have regard to the illustrative list in Part IV of Schedule 8.

- (3) The FHSA shall not give its approval in accordance with sub-paragraph (1) if, in its opinion—
- (a) the effectiveness of the doctor’s services to his patients is likely to be significantly reduced; or
 - (b) his patients are likely to suffer significant inconvenience,
- by reason of the doctor having been relieved from the requirements of paragraph 29(2)(a)(iii).

31. A doctor who—

- (a) intends to operate an appointments system;
- (b) succeeds to a practice where such a system is in force; or
- (c) joins a partnership operating such a system,

shall notify the FHSA of any appointments system which he proposes to operate or, as the case may be, of any proposal to discontinue such a system.

32.—(1) A doctor shall not, without the consent of the FHSA or, on appeal, the Medical Practices Committee, carry on practice at any house, flat, surgery, branch surgery, or other similar premises (referred to in this paragraph as “the practice premises”) which have been previously occupied or used for the purpose of his practice by another doctor (referred to in this paragraph as “the former occupant”) whose practice has been declared vacant and to whose practice a successor has been, or is to be, appointed; but this provision shall not apply—

- (a) where the former occupant or his executors or administrators has or have, in agreement with the FHSA, made an offer to the successor on his appointment to sell or let to him the practice premises upon terms to be approved by the Medical Practices Committee and upon terms that the offer cannot be withdrawn within one month from the date on which the successor was appointed, and the successor has failed or refused to accept the offer before the expiry thereof;
- (b) where such an offer was made to the successor and accepted by him before its expiry and the approval of the Medical Practices Committee has been given to the terms of the proposed agreement;
- (c) after the expiry of a period of 12 months from the date on which the successor was appointed;
- (d) where the former occupant was a member of a partnership and the doctor concerned is another member of the partnership who acquires the practice premises in accordance with the terms of a partnership agreement which has been in operation for a period of 12 months before the date on which notice of the former occupant’s intended retirement was given to the FHSA concerned, or the date of the former occupant’s death; or
- (e) where the doctor is using the practice premises in consequence of temporary arrangements for the carrying on of the practice made either under regulation 25 or by agreement between the former occupant or his executors or administrators and the successor pending the approval of the Medical Practices Committee to a proposed sale or lease of the practice premises to the successor.

(2) In this paragraph “successor” means the doctor appointed by the Medical Practices Committee to succeed to the practice in accordance with regulations 13, 14 and 17, and “the date on which the successor was appointed” means—

- (a) the date on which the successor is informed that no appeal has been made to the Secretary of State;
- (b) in the event of an appeal, the date on which the successor is notified of the Secretary of State’s decision to dismiss the appeal.

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33.—(1) Subject to sub-paragraph (2), a doctor shall not, without the consent of the FHSA, or, on appeal, the Medical Practices Committee, start to practise at any house, flat, surgery, branch surgery or other similar premises (referred to in this paragraph as “the practice premises”) within 1 year of their having ceased to be occupied or used for the purpose of his practice by another doctor (referred to in this paragraph as “the former occupant”) who was within one month of such cessation practising at group practice premises as a member of a group, or at accommodation made available by the Secretary of State, less than 3 miles away (in either case) from the practice premises.

(2) Sub-paragraph (1) shall not apply—

- (a) where the former occupant gives written consent to another doctor to use the practice premises;
- (b) after the former occupant has (or if there was more than one former occupant, all the former occupants have) ceased to practise as a member of a group at the group practice premises, or at accommodation made available by the Secretary of State; or
- (c) to any of the former occupants who has ceased to practise at such premises as are mentioned in sub-paragraph (2)(b).

(3) In this paragraph “group practice premises” means premises where practice is wholly or mainly carried on by a group practice.

Practice area

34.—(1) Subject to sub-paragraph (2), a doctor may at any time with the consent of the FHSA, or, on appeal, the Secretary of State, alter the extent of his practice area.

(2) A doctor shall not, contrary to any condition imposed by the Medical Practices Committee, or on appeal the Secretary of State, under section 33(4) or (5) of the Act, open practice premises in any locality or part of a locality where, at the time of his application to open such premises, the Medical Practices Committee is of the opinion that the number of medical practitioners undertaking to provide general medical services in that locality or part of that locality is already adequate.

Notification of change of place of residence

35. Where a doctor whose name is included in the medical list changes his place of residence he shall notify the FHSA in writing of the change not later than 28 days after such change.

Records

36. A doctor shall—

- (a) keep adequate records of the illnesses and treatment of his patients on forms supplied to him for the purpose by the FHSA; and
- (b) forward such records to the FHSA on request as soon as possible; and

within 14 days of being informed by the FHSA of the death of a person on his list and, in any other case of the death of such a person, not later than one month of learning of such a death, forward the records relating to that person to the FHSA.

Certification

37.—(1) A doctor shall issue free of charge to a patient or his personal representatives any medical certificate of a description prescribed in column 1 of Schedule 9, which is reasonably required under or for the purposes of the enactments specified in relation to the certificate in column 2 of that Schedule, except where, for the condition to which the certificate relates, the patient—

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(a) is being attended by another doctor (other than a partner, assistant or other deputy of the first named doctor); or

(b) is not being treated by, or under the supervision of, a doctor.

(2) The exception in sub-paragraph (1)(a) shall not apply where the certificate is issued pursuant to regulation 2(1) of the Social Security (Medical Evidence) Regulations 1976⁽³⁰⁾ (which provides for the issue of a certificate in the form of a special statement by a doctor on the basis of a written report made by another doctor).

(3) Any certificate given under sub-paragraph (1) for the purposes of—

(a) the Social Security Act 1975⁽³¹⁾ shall be issued in accordance with any regulations made under that Act⁽³²⁾;

(b) section 17(2) of the Social Security and Housing Benefits Act 1982⁽³³⁾ shall be issued in accordance with any regulations made under that Act⁽³⁴⁾; or

(c) Part V of, and Schedule 4 to, the Social Security Act 1986⁽³⁵⁾, shall be issued in accordance with any regulations made under that Act⁽³⁶⁾.

Fees

38. A doctor shall not, otherwise than under or by virtue of the Regulations, demand or accept a fee or other remuneration for any treatment, including child health surveillance services, contraceptive services, maternity medical services and minor surgery services, whether under these terms of service or not, which he gives to a person for whose treatment he is responsible under paragraph 4, except—

(a) from any statutory body for services rendered for the purposes of that body's statutory functions;

(b) from any body, employer or school for a routine medical examination of persons for whose welfare the body, employer or school is responsible, or an examination of such persons for the purpose of advising the body, employer or school of any administrative action they might take;

(c) for treatment which is not of a type usually provided by general medical practitioners and which is given—

(i) pursuant to the provisions of section 65 of the Act, or

(ii) in a registered nursing home which is not providing services under the Act,

if, in either case, the doctor is serving on the staff of a hospital providing services under the Act as a specialist providing treatment of the kind the patient requires and if, within 7 days of giving the treatment, the doctor supplies the FHSA, on a form provided by it for the purpose, with such information about the treatment as it may require;

(d) under section 158 of the Road Traffic Act 1988⁽³⁷⁾;

(e) from a dentist in respect of the provision at his request of an anaesthetic for a person for whom the dentist is providing general dental services;

⁽³⁰⁾ S.I. 1976/615, as amended by S.I. 1982/699, 1987/409, 1987/1686 and 1992/247.

⁽³¹⁾ 1975 c. 14.

⁽³²⁾ See S.I. 1976/615 and 1987/1968.

⁽³³⁾ 1982 c. 24; section 17 was amended by section 20 of the Social Security Act 1985 (c. 53).

⁽³⁴⁾ See S.I. 1985/1604, as amended by S.I. 1992/247.

⁽³⁵⁾ 1986 c. 50.

⁽³⁶⁾ See S.I. 1987/235, as amended by S.I. 1991/2284.

⁽³⁷⁾ 1988 c. 53.

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

- (f) when he treats a patient under paragraph 4(3), in which case he shall be entitled to demand and accept a reasonable fee (recoverable in certain circumstances under paragraph 39) for any treatment given, if he gives the patient a receipt on a form supplied by the FHSA;
- (g) for attending and examining (but not otherwise treating) a patient at his request at a police station in connection with proceedings which the police are minded to bring against him;
- (h) for treatment consisting of an immunisation for which no remuneration is payable by the FHSA in pursuance of the Statement made under regulation 34 and which is requested in connection with travel abroad;
- (i) for circumcising a patient for whom such an operation is requested on religious grounds and is not needed on any medical ground;
- (j) for prescribing or providing drugs which a patient requires to have in his possession solely in anticipation of the onset of an ailment while he is outside the United Kingdom but for which he is not requiring treatment when the medicine is prescribed;
- (k) for a medical examination to enable a decision to be made whether or not it is inadvisable on medical grounds for a person to wear a seat belt;
- (l) where the person is not one to whom any of paragraphs (a), (b) or (c) of section 38(1) of the Act⁽³⁸⁾ applies (including by reason of regulations under section 38(6) of that Act), for testing the sight of that person.
- (m) where he is a doctor who is authorised or required by an FHSA under regulation 20 of the Pharmaceutical Regulations to provide drugs, medicines or appliances to a patient and provides for that patient, otherwise than under pharmaceutical services, any Scheduled drug.

39.—(1) Where a person from whom a doctor received a fee under paragraph 38(f) applies to the FHSA for a refund within 14 days of payment of the fee (or such longer period not exceeding a month as the FHSA may allow if it is satisfied that the failure to apply within 14 days was reasonable) and the FHSA is satisfied that the person was on the doctor's list when the treatment was given, the FHSA may recover the amount of the fee from the doctor, by deduction from his remuneration or otherwise, and shall pay that amount to the person who paid the fee.

(2) Where a doctor has supplied any drug or appliance in respect of which, in the case of a person on his list, he would have been entitled to payment, the FHSA shall credit him with the appropriate amount.

40. Subject to paragraph 38(f) and (j) a doctor shall not demand or accept a fee or other remuneration from a patient of his for any prescription for any drug or appliance.

41. A doctor shall not without reasonable excuse demand or accept from the FHSA any fee or other remuneration to which he is not entitled under the provisions of these Regulations, the Statement published under regulation 34 or the Drug Tariff.

42. A doctor shall take all practicable steps to ensure that any partner, deputy, or assistant of his, whether or not the partner, deputy or assistant is providing general medical services, shall not demand or accept any remuneration for treatment given to the doctor's patients, or for any prescription for any supply of any drug or appliance for the doctor's patients, unless the partner, deputy or assistant would have been entitled to charge if the patient had been on his own list.

(38) 1977 c. 49; section 38 was amended by the Health and Social Security Act 1984 (c. 48), section 1(3), by S.I. 1985/39, article 7(11), and by the Health and Medicines Act 1988 (c. 49), section 13(1).

Prescribing

43.—(1) Subject to paragraph 44, a doctor shall order any drugs or appliances which are needed for the treatment of any patient to whom he is providing treatment under these terms of service by issuing to that patient a prescription form, and such a form shall not be used in any other circumstances.

(2) In issuing any such prescription form the doctor shall himself sign the form in ink with his initials, or forenames, and surname in his own handwriting and not by means of a stamp, and shall so sign only after particulars of the order have been inserted in the form, and—

- (a) the prescription shall not refer to any previous prescription; and
- (b) a separate prescription form shall be used for each patient, except where a doctor is prescribing in bulk for a school or institution under paragraph 45.

(3) Where a doctor orders drugs specified in Schedule 2 to the Misuse of Drugs Regulations 1985 **(39)** (controlled drugs to which regulations 14, 15, 16, 18, 19, 20, 21, 23, 25 and 26 of those Regulations apply) for supply by instalments for treating addiction to any drug specified in that Schedule, he shall—

- (a) use only the prescription form provided by the FHSa specially for the purposes of supply by instalments;
- (b) specify the number of instalments to be dispensed and the interval between each instalment; and
- (c) order only such quantity of the drug as will provide treatment for a period not exceeding 14 days.

(4) The form provided by the FHSa specially for the purpose of supply by instalments shall not be used for any purpose other than ordering drugs in accordance with sub-paragraph (3) of this paragraph.

(5) In a case of urgency a doctor may request a chemist to dispense a drug or an appliance before a prescription form is issued, only if—

- (a) that drug is not a Scheduled drug;
- (b) that drug is not a controlled drug within the meaning of the Misuse of Drugs Act 1971 **(40)**, other than a drug which is for the time being specified in Schedule 5 to the Misuse of Drugs Regulations 1985; and
- (c) the doctor undertakes to furnish the chemist, within 72 hours, with a prescription form completed in accordance with sub-paragraph (2).

44.—(1) In the course of treating a patient to whom he is providing treatment under these terms of service, a doctor shall not order on a prescription form a drug or other substance specified in Schedule 10 to these Regulations but may otherwise prescribe such a drug or other substance for that patient in the course of that treatment.

(2) In the course of treating such a patient a doctor shall not order on a prescription form a drug specified in an entry in column 1 of Schedule 11 to these Regulations unless—

- (a) that patient is a person of a description mentioned in column 2 of that entry;
- (b) that drug is prescribed for that patient only for the purpose specified in column 3 of that entry; and
- (c) the doctor endorses the face of the form with the reference “SLS”,

but may otherwise prescribe such a drug for that patient in the course of that treatment.

(39) S.I. 1985/2066; the relevant amending instrument is S.I. 1986/2330.

(40) 1971 c. 38.

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45.—(1) Where a doctor—

- (a) is responsible under these terms of service for the treatment of 10 or more persons in a school or other institution in which at least 20 persons normally reside; and
- (b) orders, for any two or more of those persons for whose treatment he is responsible, drugs or appliances to which this paragraph applies,

he may use a single prescription form for the purpose.

(2) Where a doctor uses a single prescription form for the purpose mentioned in sub-paragraph (1), he shall (instead of entering on the form the names of the persons for whom the drugs or appliances are ordered) enter on the form—

- (a) the name of the institution in which those persons reside; and
- (b) the number of persons residing there for whose treatment he is responsible.

(3) This paragraph applies to any drug or appliance which can be supplied as part of pharmaceutical services and which—

- (a) in the case of a drug, is not a product of a description or class which is for the time being specified in an order made under section 58(1) of the Medicines Act 1968⁽⁴¹⁾; or
- (b) in the case of an appliance, does not contain such a product.

46. For the purposes of paragraphs 43 and 44 in their application to a doctor who has undertaken to provide contraceptive services, “drugs” includes contraceptive substances and “appliances” includes contraceptive appliances.

Practice leaflet

47.—(1) Subject to paragraph (2), a doctor whose name is included in the medical list of an FHSA shall compile in relation to his practice a document (in this paragraph called a “practice leaflet”) which shall include the information specified in Schedule 12.

(2) Sub-paragraph (1) shall, in relation to a doctor referred to in regulation 4(2)(e), apply only to the extent that the FHSA sees fit.

(3) A doctor shall review his practice leaflet at least once in every period of 12 months, and shall make any amendments necessary to maintain its accuracy.

(4) A doctor shall make available a copy of the most recent edition of his practice leaflet to the FHSA, to each patient on his list and to any other person who, in the doctor’s opinion, reasonably requires one.

(5) A doctor who practises in partnership with other doctors whose names are included in the medical list shall satisfy the requirements of this paragraph if he makes available a practice leaflet, compiled and, where appropriate, revised in accordance with sub-paragraphs (1) and (3), which relates to the partnership as a whole; and in such a case a doctor may, if he so wishes, also produce a practice leaflet relating to his own activities.

Reports to medical officer etc

48. A doctor shall—

- (a) supply in writing to a medical officer within such reasonable period as that officer may specify, any relevant clinical information which he requests about a patient to whom the doctor under these terms of service has issued or has refused to issue a medical certificate; and

⁽⁴¹⁾ 1968 c. 67. See S.I. 1983/1212 as amended by S.I. 1984/756, 1986/586, 1987/674, 1987/1250, 1988/2017 and 1989/1852.

- (b) answer any inquiries by a medical officer about a prescription form or medical certificate issued by the doctor under these terms of service or about any statement which the doctor has made in a report under these terms of service.

Inquiries about prescriptions and referrals

49.—(1) A doctor whose name is included in the medical list shall, subject to sub-paragraphs (2) and (3) below, sufficiently answer any inquiries, whether oral or in writing, from the FHSA concerning—

- (a) any prescription form issued by the doctor under these terms of service;
- (b) the considerations by reference to which the doctor issues such forms under these terms of service;
- (c) the referral by the doctor under these terms of service of any patient to any other services provided under the Act; and
- (d) the considerations by reference to which the doctor refers patients to any such services.

(2) An inquiry referred to in sub-paragraph (1) may be made only for the purpose either of obtaining information to assist the FHSA to discharge its functions or of assisting the doctor in the discharge of his obligations under these terms of service.

(3) A doctor shall not be obliged to answer any inquiry referred to in sub-paragraph (1) unless it is made by a doctor appointed under regulation 38 who produces, on request, written evidence that he is authorised by the FHSA to make such an inquiry on behalf of the FHSA.

Annual reports

50.—(1) A doctor whose name is included in the medical list shall provide annually to the FHSA a report, in accordance with this paragraph, relating to the provision by him of personal medical services (in this paragraph called an “annual report”).

(2) An annual report shall contain the information specified in Schedule 13.

(3) Each annual report shall be compiled in respect of the period of 12 months ending on the 31st March of the year in which it is provided and shall be sent to the FHSA by 30th June of that year.

(4) In the case of a doctor who practises in partnership with other doctors whose names are included in the medical list, the information referred to in sub-paragraph (2) may alternatively be provided in the form of an annual report in respect of the partnership as a whole instead of by each doctor in the partnership individually and in such a case a doctor may, if he so wishes, also produce his own annual report.

(5) Where the FHSA requires that the information referred to in sub-paragraph (2) be provided on a form supplied by the FHSA, the doctor shall use that form.

(6) The FHSA shall not disclose any annual report to any person, unless otherwise lawfully empowered to do so.

Incorporation of provisions of regulations etc.

51. Any provisions of the following affecting the rights and obligations of doctors shall be deemed to form part of the terms of service—

- (a) the Regulations;
- (b) so much of Part II of the National Health Service (Service Committees and Tribunal) Regulations 1992(42) as relates to—

(42) S.I. 1992/664.

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- (i) the investigation of questions arising between doctors and their patients and other investigations to be made by the medical service committee and the joint services committee and the action which may be taken by the FHSA as a result of such investigations,
- (ii) appeals to the Secretary of State from decisions of the FHSA,
- (iii) the investigation of cases of alleged excessive prescribing,
- (iv) the investigation of certification,
- (v) the investigation of record keeping,
- (vi) decisions as to treatment for which fees may be charged.

SCHEDULE 3

Regulation 5(1)

PART I

INFORMATION AND UNDERTAKINGS TO BE INCLUDED
IN AN APPLICATION FOR INCLUSION IN A MEDICAL LIST

1. Full name.
2. Sex.
3. Date of Birth.
4. Private address and telephone number.
5. Medical qualifications and where obtained.
6. Registration number in the Medical Register and date of first registration.
7. Information about general medical services to be provided for persons in the FHSA’s locality, and in particular whether—

(a) (a) including excluding limited to	maternity medical services
(b) (b) including excluding limited to	contraceptive services
(i) excluding including	fitting of intra-uterine devices
(ii) restricted not restricted	to patients to whom the doctor or partner provides other personal medical services
(c) (c) including excluding limited to	child health surveillance services
(d) (d) including excluding limited to	minor surgery services

8. Present or most recent appointment.
 - (a) (a) Name and private address of any intended partner and whether or not the name is in the FHSA's medical list.
 - (b) Names and private addresses of members of group (other than those already specified in (a) above) with whom doctor intends to practise.
10. Whether applied/intending to apply for inclusion in obstetric list/child health surveillance list/minor surgery list.
11. Notification of the geographical boundary of the applicant's proposed practice area by reference to a sketch, diagram or plan.
12. Notification of address(es) of proposed practice premises.
13. Whether the applicant intends to practise as—
 - (a) a full-time doctor;
 - (b) a three-quarter-time doctor;
 - (c) a half-time doctor;
 - (d) a job-sharing doctor; or
 - (e) a restricted doctor.
14. Where the applicant intends to practise as a job-sharing doctor, the name of the other job-sharing doctor with whose hours the applicant's hours are to be aggregated for the purposes of regulation 15(1)(d).
15. Notification of proposed days and hours of attendance.
16. Telephone number(s) at which prepared to receive messages.
17. Undertaking that if accepting as a patient a person who, at the time of acceptance, is residing at a place outside the practice area, he will visit him at that address.
18. Proposed place of residence (including telephone number and distance from main practice premises) and an undertaking to inform the FHSA whenever changing permanent residence.
19. Declaration that he is a registered medical practitioner, included in the Medical Register in that name.
20. Undertaking to be bound by the terms of service.
Regulation 5(2)

PART II

INFORMATION AND UNDERTAKINGS TO BE INCLUDED IN AN APPLICATION TO FILL A VACANCY

1. Full name.
2. Sex.
3. Date of birth.
4. Private Address and telephone number.
5. Medical qualifications and where obtained.
6. Declaration that he is a registered medical practitioner, included in the Medical Register in that name.

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7. Registration number in the Medical Register and date of first registration.
8. Whether applying to succeed to a practice, or be appointed to a vacancy in a practice.
9. Notification of the geographical boundary of the applicant's proposed practice area by reference to a sketch, diagram or plan.
10. Notification of address(es) of proposed practice premises.
11. Whether the applicant intends to practise as—
 - (a) a full-time doctor;
 - (b) a three-quarter-time doctor;
 - (c) a half-time doctor;
 - (d) a job-sharing doctor; or
 - (e) a restricted doctor.
12. Where the applicant intends to practise as a job-sharing doctor, the name of the other job-sharing doctor with whose hours the applicant's hours are to be aggregated for the purposes of regulation 15(1)(d).
13. Notification of proposed days and hours of attendance.
14. Telephone number(s) at which prepared to receive messages.
15. Undertaking that if accepting as a patient a person who at the time of acceptance or succession is residing at a place outside the practice area he will visit him at that address.
16. Proposed place of residence (including telephone number and distance from main surgery) and an undertaking to inform the FHSA whenever changing permanent residence.
17. Whether or not on the medical list for the FHSA's locality.
18. If not in the FHSA's medical list, present or most recent appointment, and if in general practice, whether as principal, assistant or locum.
19. Professional experience (including starting and finishing dates of each appointment) separated into:
 - (a) trainee or assistant experience in general practice;
 - (b) general practice experience;
 - (c) hospital appointments;
 - (d) other (including obstetric) experience;
 - (e) any additional supporting particulars.
20. The name and address of principal to whom trainee or assistant.
21. Particulars of covenants restricting medical practice by the applicant in the FHSA's locality.
22. Name and address of any intended partner and whether or not the name is included in the FHSA's medical list.
23. Names and addresses of two referees.
24. If applicant is not in the FHSA's medical list—
 - (1) name of any other FHSA in whose list he is included;
 - (2) particulars of any outstanding application for inclusion on the medical list of any FHSA;
 - (3) information about general medical services to be provided and, in particular, whether—

(a) (a) including excluding	maternity medical services limited to
(b) (b) including excluding limited to	contraceptive services
(i) excluding including	fitting of intra-uterine including devices
(ii) restricted not restricted	to patients to whom the doctor or partner provides other personal medical services
(c) (c) including excluding limited to	child health surveillance services
(d) (d) including excluding limited to	minor surgery services

- (4) whether or not applied/intending to apply for—
- (a) inclusion in minor surgery list,
 - (b) inclusion in child health surveillance list,
 - (c) inclusion in obstetric list; and
- (5) undertaking to be bound by terms of service.
- Regulation 5(3)

PART IIIA

INFORMATION TO BE INCLUDED IN REPORT BY FHSA TO MEDICAL PRACTICES COMMITTEE IN RESPECT OF APPLICATION FOR INCLUSION IN A MEDICAL LIST

1. Full name of applicant.
2. Copies of—
 - (a) the applicant's application to the FHSA;
 - (b) any evidence concerning the applicant's qualifications and experience produced in accordance with the National Health Service (Vocational Training) Regulations 1979(43); and
 - (c) any declaration of partnership.
3. Date from which applicant proposes to provide general medical services and whether he proposes to practise as a full-time, three-quarter-time, half-time, job-share or restricted doctor.
4. Area of the FHSA's locality in which such services are to be provided.
5. The number of doctors who are not restricted doctors already providing general medical services in that area whose names are included in the FHSA's medical list and whether they are full-time, three-quarter-time, half-time, job-sharers, and the number of full-time assistants.

(43) S.I. 1979/1644.

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6. The total number of patients registered with the medical list doctors as at 31st March, 30th June, 30th September or 31st December, whichever is the last to precede the date of the report.

7. The average number of patients on the lists of doctors providing general medical services in that area.

8. Where the applicant proposes to provide such services in partnership with another doctor, details of each proposed partner, as respects—

- (a) his full name and his age, and whether he practises as a full-time, three-quarter-time, half-time, job-sharer or restricted doctor;
- (b) the total number of patients on his list;
- (c) the number of patients on his list who are over the age of 65;
- (d) the number of patients on his list who attract deprivation payments;
- (e) where the proposed partner is a doctor who is authorised or required to provide drugs, medicines or appliances, the number of patients on his list who are patients in respect of whom he is so authorised;
- (f) the total annual number of temporary resident attendances based on the last available four complete quarters;
- (g) the total number of rural practice units credited for the last known quarter;
- (h) the number of hours in each week which he devotes to health-related activities, within the meaning of paragraph 30 of Schedule 2;
- (i) the number and location of the practice premises from which he provides general medical services and sessions spent at branch surgeries.

9. Details of each doctor, including where requested, the sex of that doctor who provides general medical services from practice premises situated up to 5 miles from the applicant's proposed practice premises, as respects each of the matters mentioned in sub-paragraphs (a) to (h) of paragraph 8 above.

10. Any other information which the FHSA considers to be relevant to the determination of the application.

11. Whether or not the application is supported by the FHSA, including details of its reasons for supporting or not supporting the application and any report from the Local Medical Committee or Community Health Council.

12. If the Medical Practices Committee so request, a breakdown of the lists of patients by reference to age and/or sex and a description of the area.

13. A statement that the FHSA has confirmed that the applicant is a registered medical practitioner and that his name as entered on the application is currently included in the Medical Register.

14. A statement that the applicant is a British or a European Community national or, if not, that the FHSA has checked that the applicant is entitled to work as a self-employed practitioner in the United Kingdom.

Regulation 5(4)

PART IIIB

INFORMATION TO BE INCLUDED IN REPORT BY ADDITIONAL FHSA TO MEDICAL PRACTICES COMMITTEES IN RESPECT OF APPLICATION FOR INCLUSION IN A MEDICAL LIST

1. Full name of applicant.
 2. Date from which the applicant proposes to provide medical services.
 3. The area of the FHSA's locality in which medical services are to be provided.
 4. The name of any other FHSA in whose locality the applicant provides or intends to provide medical services.
 5. The area of any other FHSA's locality in which the applicant provides, or intends to provide, medical services.
 6. Details of the distance from the nearest point on the FHSA boundary (to whom the current application is made) to:—
 - (a) the doctor's nearest surgery,
 - (b) the doctor's private address.
 7. Whether the areas named in the application—
 - (a) are/are not within the catchment area of the doctor's present practice,
 - (b) are/are not adjacent to the doctor's area of practice,
 - (c) do/do not already contain patients of the doctor's present partnership practice.
 8. Whether local practices are unwilling/unable to accept the proposed patients.
 9. Whether the applicant intends to open a branch surgery.
 10. Whether or not the application is supported by the FHSA, including details of its reasons for supporting or not supporting the application and any report from the Local Medical Committee or Community Health Council.
 11. Any other information which the FHSA considers to be relevant to the determination of the application, including whether or not it is the opinion of the FHSA that the doctor would be able to comply with the terms of service.
- Regulation 5(5)

PART IIIC

INFORMATION TO BE INCLUDED IN REPORT BY FHSA TO MEDICAL PRACTICES COMMITTEE IN RESPECT OF A RESTRICTED LIST APPLICATION

1. Full name of applicant.
2. Date from which applicant proposes to provide general medical services.
3. Copy of the applicant's application to the FHSA.
4. Copy of evidence concerning the applicant's qualifications and experience produced in accordance with the National Health Service (Vocational Training) Regulations 1979⁽⁴⁴⁾.

(44) S.I. 1979/1644.

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5. The name of the establishment or organisation, to which patients connected to them, the applicant will be limiting the provision of general medical services, and the numbers of such patients.
 6. The area of the FHSA's locality in which the establishment or organisation is sited.
 7. A statement that the FHSA has confirmed that the applicant is a registered medical practitioner and that his name as entered on the application is currently included in the Medical Register.
 8. A statement that the applicant is a British or European Community national or, if not, that the FHSA has checked that the applicant is entitled to work as a self-employed practitioner in the United Kingdom.
 9. Whether the application is in respect of a new practice or an extension of the doctor's current practice.
 10. Whether the application is made by the successor to any other doctor and if so the name of that doctor.
 11. Whether or not the application is supported by the FHSA, including details of its reasons for supporting or not supporting the application and any report from the Local Medical Committee or Community Health Council.
 12. Any other information which the FHSA considers to be relevant to the determination of the application.
- Regulation 5(6)

PART IIID

INFORMATION TO BE INCLUDED IN A REPORT BY FHSA TO MEDICAL COMMITTEE IN RESPECT OF A RESTRICTED SERVICES APPLICATION

1. Full name of applicant.
2. Copy of the applicant's application to the FHSA.
3. The names of any proposed partners and/or members of the applicant's group practice.
4. Copy of any declaration of partnership, or intent to practise in association with a group practice.
5. The date from which the applicant proposes to provide the services in question.
6. Confirmation that the applicant is eligible to be included in the child health surveillance list or the minor surgery list as the case may be.
7. The area of the FHSA's locality in which the medical services in question are to be provided.
8. The name of any other FHSA in whose locality the applicant provides or intends to provide the medical services.
9. The area of any other FHSA's locality in which the applicant provides, or intends to provide, the medical services.
10. Whether or not the application is supported by the FHSA, including details of its reasons for supporting or not supporting the application and any report from the Local Medical Committee or Community Health Council.
11. A statement that the FHSA has confirmed that the applicant is a registered medical practitioner and that his name as entered on the application is currently included in the medical register.

12. A statement that the applicant is a British or European Community national, or, if not, that the FHSA has checked that the applicant is entitled to work as a self-employed practitioner in the United Kingdom.

13. Any other information which the FHSA considers to be relevant to the determination of the application, including any unusual factors that may affect demand for the particular services in question.

14. If the Medical Practices Committee so request, details of the numbers of doctors on the Medical List already providing the services in question in the area of locality of the FHSA where the applicant proposes to provide the service.

Regulation 11(1)

PART IV

INFORMATION TO BE INCLUDED IN A REPORT BY FHSA TO THE MEDICAL PRACTICES COMMITTEE CONCERNING ADEQUACY OF SERVICES

1. The names of the doctors in the medical list providing general medical services mainly in the FHSA's locality.

2. The names and numbers of full-time assistants.

3. Where appropriate, the serial number of each partnership.

4. The part of the FHSA's locality where the doctors mainly practise, and whether each doctor practises as—

(a) a full-time doctor;

(b) a three-quarter time doctor;

(c) a half-time doctor; or

(d) a job-sharing doctor.

5. In respect of each doctor,—

(a) his full name, sex and date of birth;

(b) his index number;

(c) the number of patients on his list in respect of each FHSA in whose medical list he is included and the total.

Regulation 11(2)

PART V

INFORMATION TO BE INCLUDED IN A REPORT BY FHSA ON DEATH, WITHDRAWAL OR REMOVAL OF DOCTOR FROM MEDICAL LIST

(a) (a) the full name, age, practice address and, if requested, the sex of the doctor and the area of the FHSA's locality in which such services were provided and the date of his death, withdrawal or removal from the medical list;

(b) whether the doctor practised as—

(i) a full time doctor,

(ii) a three-quarter time doctor,

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- (iii) a half-time doctor,
 - (iv) a job-sharing doctor,
 - (v) a restricted doctor;
 - (c) the total number of patients on his list;
 - (d) the number of patients on his list who are over the age of 65;
 - (e) where he was a doctor who was authorised or required under regulation 20 of the Pharmaceutical Regulations to provide drugs or appliances, the number of patients on his list in respect of whom he was so authorised;
 - (f) the total annual number of temporary resident attendances based on the last available four complete quarters;
 - (g) the number of patients on his list attracting deprivation payments;
 - (h) the number of hours per week which he devoted to health related activities within the meaning of paragraph 30 of Schedule 2;
 - (i) the total number of rural practice units credited for the last known quarter;
 - (j) the number and location of the practice premises from which he provided general medical services, and sessions spent at branch surgeries;
 - (k) in respect of a single handed doctor, whether the premises are available for sale or rent.
2. Where the doctor provided services in partnership with another doctor, details of each partner as respects each of the matters mentioned in paragraph 1(a)–(j) above.
 3. Details of each doctor who provides general medical services from practice premises situated up to 5 miles from the doctors' practice premises as respects each of the matters mentioned in paragraph 1(a)–(j).
 4. Any other information which the FHSA considers to be relevant.
 5. The number of doctors who are not restricted doctors providing general medical services in the area where the doctor practised whose names are included in the FHSA's medical list and whether they are full-time, three-quarter-time, half-time or job-sharers, and the number of full-time assistants.
 6. If the Medical Practice Committee so request a breakdown of age/sex of patient lists and type of area of residence.
 7. A recommendation from the FHSA, with reasons, for dealing with the vacancy, giving an account of any report from the Local Medical Committees or Community Health Council (if made); and in respect of partnerships the proposals by the remaining partner(s).
- Regulation 16(2)

PART VI

INFORMATION TO BE INCLUDED IN AN APPLICATION FOR THE VARIATION OF A CONDITION IMPOSED IN CONNECTION WITH INCLUSION IN A MEDICAL LIST

1. Full name.
2. Private address.
3. Information about the services to be provided, and in particular whether they—

(a) (a) will include |maternity medical services

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will exclude will be limited to	
(b) (b) will include will exclude will be limited to	contraceptive services
(i) excluding including	fitting of intra-uterine including devices
(ii) restricted not restricted	to patients to whom the doctor or partner provides other personal medical services
(c) (c) will include will exclude will be limited to	child health surveillance services
(d) (d) will include will exclude will be limited to	minor surgery services

4. Name and private address(es) of partner(s) with whom the applicant intends to practise, indicating whether or not the name is in the FHSA's medical list.

5. Details of any proposed changes to—

- (a) the geographical boundary of the applicant's practice area, by reference to a sketch, diagram or plan;
- (b) his practice premises;
- (c) his place of residence; or
- (d) his telephone number(s) at which messages may be received.

6. Where applicant is seeking a variation of a condition relating to his hours or the sharing of work, whether he wishes to practise as —

- (a) a full-time doctor;
- (b) a three-quarter-time doctor;
- (c) a half-time doctor;
- (d) a job-sharing doctor and the name of the other job-sharing doctor with whose hours the applicant's hours are to be aggregated for the purposes of regulation 15(1)(d); or
- (e) a restricted doctor.

Regulation 19(2)

PART VII

INFORMATION TO BE SUPPLIED BY FHSA WITH REGARD TO DOCTORS' LISTS

1. The number of patients included on the doctor's list, in each of the age groups in accordance with the capitation fee they attract.

2. The number of children included on the doctor's list for whom he or she has undertaken to provide child health surveillance services.

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3. The number of patients included on the doctor's list for whom a deprivation payment is due, in each group in accordance with the level of fee they attract.
 4. The number of patients included for whom a rural practice payment is due.
 5. The number of patients for whom the doctor has assumed responsibility from a doctor who is relieved of the responsibility to provide out of hours services.
- Regulation 27(3)

PART VIII

INFORMATION TO BE SUPPLIED BY DOCTOR APPLYING FOR INCLUSION IN A CHILD HEALTH SURVEILLANCE LIST

1. Full name.
 2. Address of practice premises.
 3. Registration number in the Medical Register and date of first registration.
 4. Details of relevant medical experience after date of first registration (and, if appropriate, before that date) during last 5 years, together with any references.
 5. Title of any post-graduate qualification held and date awarded.
- Regulation 32(3)

PART IX

INFORMATION TO BE SUPPLIED BY DOCTOR APPLYING FOR INCLUSION IN A MINOR SURGERY LIST

1. Name.
 2. Address of practice premises.
 3. Registration number in the Medical Register and date of first registration.
 4. Details of relevant medical experience after date of first registration (and, if appropriate, before that date) during last 5 years together with any references.
 5. Details of premises and equipment to be used.
 6. Title of any post-graduate qualification held and date awarded.
- Regulation 30(3)

PART X

INFORMATION TO BE SUPPLIED BY DOCTOR APPLYING FOR INCLUSION IN AN OBSTETRIC LIST

1. Name.
2. Address of practice premises.
3. Registration number in the Medical Register and date of first registration.

4. Details of relevant obstetric experience during the previous 10 years (and, if appropriate, before that date), together with any references.
5. Details of relevant training undertaken during the previous 5 years.
6. Title of any relevant post-graduate qualification held and date awarded.

SCHEDULE 4

Regulations 2(1) and 28

CHILD HEALTH SURVEILLANCE SERVICES

1. The services referred to in regulation 28(2)(a) shall comprise—
 - (a) the monitoring—
 - (i) by the consideration of information concerning the child received by or on behalf of the doctor, and
 - (ii) on any occasion when the child is examined or observed by or on behalf of the doctor (whether pursuant to sub-paragraph (b) or otherwise),
of the health, well-being and physical, mental and social development (all of which characteristics are referred to in this Schedule as “development”) of the child while under the age of 5 years with a view to detecting any deviations from normal development;
 - (b) the examination of the child by or on behalf of the doctor on so many occasions and at such intervals as shall have been agreed between the FHSA and the health authority in whose district the child resides (in this Schedule called “the relevant health authority”) for the purposes of the provision of child health surveillance services generally in that district.
2. The records mentioned in regulation 28(3)(b) shall comprise an accurate record of—
 - (a) the development of the child while under the age of 5 years, compiled as soon as is reasonably practicable following the first examination mentioned in paragraph 1(a) and, where appropriate, amended following each subsequent examination mentioned in that sub-paragraph; and
 - (b) the responses (if any) to offers made to the child’s parent for the child to undergo any examination referred to in paragraph 1(b).
3. The information mentioned in regulation 28(3)(c) shall comprise—
 - (a) a statement, to be prepared and dispatched to the relevant health authority as soon as is reasonably practicable following any examination referred to in paragraph 1(a), of the procedures undertaken in the course of that examination and of the doctor’s findings in relation to each such procedure;
 - (b) such further information regarding the development of the child while under the age of 5 years as the relevant health authority may request.

SCHEDULE 5

Regulation 30

PART I

CRITERIA TO BE CONSIDERED BEFORE
INCLUSION IN AN OBSTETRIC LIST

1. Whether the applicant has, within the period of 10 years previous to the date of his application, held, for not less than 6 months, a resident appointment in a maternity unit in a hospital or hospitals in a member state of the European Community during which at least half the time has been spent on obstetric work.

2. Where an applicant has held an appointment of the type mentioned in paragraph 1 during a period ending more than 9 years, 6 months previous to the date of his application, whether he has, within the period of 5 years previous to the date of his application, either—

- (a) attended a refresher course in obstetrics of not less than one week; or
- (b) spent not less than 2 weeks as an obstetric officer in a maternity unit under the supervision of a consultant obstetrician.

3. Whether the applicant has, within the period of 2 years previous to the date of his application—

- (a) been included in the obstetric list of the same or another FHSA; and
- (b) at the time of ceasing to be included in that obstetric list, was qualified for admission to it under paragraph 1 or 2.

4. Whether the applicant has, in the period of 5 years previous to the date of his application, been engaged in obstetric practice involving—

- (a) attendance at not less than 100 maternity cases involving responsibility for ante-natal care; and
- (b) attendance at not less than 50 cases involving the supervision of labour and responsibility for the post-natal period.

5. Whether the applicant is, at the time of the application, in the obstetric list of another FHSA.

6. Whether the applicant has, in the period of 2 years previous to the date of his application, had at least 6 months consecutive training experience under the supervision of a consultant obstetrician in a maternity unit involving attendances at—

- (a) not less than 20 normal deliveries;
- (b) not less than 10 abnormal deliveries; and
- (c) not less than 10 ante-natal and 2 post-natal clinics.

7. For the purposes of this Part of this Schedule—

“maternity unit” means a hospital or that part of a hospital which specialises in the provision of care to a woman during her pregnancy, labour and the post-natal period;

“refresher course in obstetrics” means a course of study in obstetrics approved by the Regional Adviser on Post-Graduate Education, or in Wales, by the Postgraduate Dean;

“normal delivery” means a delivery of a baby which does not require active intervention by a doctor;

“abnormal delivery” means a delivery of a baby which does require active intervention by a doctor;

“ante-natal clinic” means a clinic where a woman’s pregnancy is monitored by or on behalf of a doctor and appropriate care provided;

“post-natal clinic” means a clinic where an assessment is made by a doctor of the health of a woman following the post-natal period and where the post-natal examination is performed and appropriate care given;

“resident appointment” means a post in a hospital requiring the post-holder to reside at the hospital at times when required for duty at the hospital;

“obstetric officer” means a doctor undertaking post-graduate training in obstetrics in a hospital under the supervision of a consultant obstetrician;

“obstetric practice” means the use of the skills required of a doctor supervising and caring for a woman’s health during her pregnancy, labour and the post-natal period;

“consultant obstetrician” means a doctor engaged by a hospital or hospitals as a consultant in the specialty of obstetrics.

Regulation 31

PART II

MATERNITY MEDICAL SERVICES

1. A doctor with whom a woman has made an arrangement under regulation 31(2) for the provision of maternity medical services during the ante-natal period shall take all reasonable steps to secure that she receives all necessary personal medical services connected with the pregnancy from the time when the arrangement is made until—

- (a) where the pregnancy is terminated by miscarriage, the woman has received all necessary personal medical services in connection with the miscarriage; or
- (b) where the woman goes into labour, the date of the onset of that labour.

2. A doctor with whom a woman has made an arrangement under regulation 31(2) for the provision of maternity medical services during labour shall take all reasonable steps to secure that she receives all necessary personal medical services during that labour.

3. A doctor with whom a woman has made an arrangement under regulation 31(2) for the provision of maternity medical services during the post-natal period shall—

- (a) take all reasonable steps to secure that the woman receives all necessary personal medical services related to the recent pregnancy or labour during the post-natal period; and
- (b) where the pregnancy has resulted in the birth of a live baby, render all necessary personal medical services to that baby during the period of 14 days following its birth, unless, during that period, another doctor has accepted the baby for inclusion in his list pursuant to an application made on the baby’s behalf under regulation 20(1).

4. A doctor with whom a woman has made an arrangement under regulation 31(2) for the provision of a post-natal examination shall, not less than 6 weeks nor more than 12 weeks after the conclusion of her pregnancy—

- (a) undertake a full post-natal examination of the woman; and
- (b) take all reasonable steps to ensure that the woman is informed of the need for any further treatment she may require.

5. Where the doctor is aware that an arrangement under regulation 31(2) is about to be terminated under regulation 31(5) he shall take all reasonable steps to ensure that the woman is informed of the manner in which she may make a further such arrangement with another doctor.

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6. The doctor shall be relieved of his obligations under paragraph 1, 2, 3 or 4, as the case may be,
- (a) during any period when the woman is outside the doctor’s practice area and is not present at any other place where, pursuant to paragraph 13 of the terms of service, the doctor is obliged to visit and treat her;
 - (b) where it is proposed that the woman’s labour should take place in a hospital, to the extent that responsibility for her care has been taken over by the hospital; and
 - (c) where the woman has been admitted to a hospital as an in-patient, to the extent that her care has been taken over by the hospital.

SCHEDULE 6

Regulations 2(1) and 33

MINOR SURGERY PROCEDURES

Injections	intra articular
	peri articular
	varicose veins
	haemorrhoid
Aspirations	joints
	cysts
	bursae
Incisions	hydrocele
	abcesses
	cysts
Excisions	thrombosed piles
	sebaceous cysts
	lipoma skin lesions for histology
	intra-dermal naevi, papilloma, dermatofibroma and similar conditions
Curette cautery and cryocautery	warts
	removal of toe nails (partial and complete)
	warts and verrucae
Other	other skin lesions (eg molluscum contagiosum)
	removal of foreign bodies

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nasal cautery

SCHEDULE 7

Regulation 18

FORM OF CERTIFICATE TO BE ISSUED BY THE MEDICAL PRACTICES COMMITTEE UNDER PARAGRAPH 1(3) OF SCHEDULE 10 TO THE NATIONAL HEALTH SERVICE ACT 1977

WHEREAS _____ has applied to the Medical Practices Committee under paragraph 1(2) of Schedule 10 to the National Health Service Act 1977 for its opinion as to whether the proposed transaction or series of transactions described in the Schedule, which sets out all material circumstances disclosed to the Medical Practices Committee, involves the sale of the goodwill or any part of the goodwill of a medical practice which it is unlawful to sell by virtue of section 54(1) of that Act AND WHEREAS the Medical Practices Committee has considered the application

NOW, THEREFORE, the Medical Practices Committee hereby certifies that it is satisfied that the transaction or series of transactions does not involve the giving of valuable consideration in respect of the goodwill or any part of the goodwill of the medical practice.

Dated this _____ day of _____ 19____

Signature of the chairman or other member authorised by the Medical Practices Committee for the purpose. }

SCHEDULE 8

Regulation 3(2) Schedule 2 paragraph 29

DOCTORS' HOURS

PART I

INFORMATION TO BE INCLUDED WITH ANY APPLICATION UNDER PARAGRAPH 29 OF SCHEDULE 2

1. The address of the proposed practice premises.
2. The days in each week during which the doctor will normally be in attendance at the practice premises and available for consultation by his patients.
3. The hours of each such attendance by the doctor.
4. The hours of any attendance by the doctor on those occasions when he is not usually available to provide the full range of services specified in paragraph 12 of the terms of service (for example, for providing emergency treatment only).
5. The frequency, duration and purpose of any clinic provided by the doctor.
6. The estimated total time each week to be spent making any domiciliary visits.
7. The doctor's proposals for notifying patients of the times and places approved by the FHSA.

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8. The terms of any condition imposed by the Medical Practices Committee or the Secretary of State under section 33(4)(b) or (5) of the Act.

9. In the case of a doctor to whom paragraph 18(2) of the terms of service does not apply, his proposals for discharging his continuous responsibility for his patients.

PART II

ADDITIONAL INFORMATION TO BE INCLUDED IN ANY APPLICATION BY A DOCTOR WHO IS A RESTRICTED SERVICES PRINCIPAL OR A RESTRICTED LIST PRINCIPAL

1. In the case of a restricted services principal—
 - (a) the proposed allocation of the total number of hours for which he is normally to be available in any week between each category of services provided; and
 - (b) where different services are to be provided at different places, the place at which each category of services is to be provided.
2. In the case of a restricted list principal, the name, address and nature of the establishment(s) or organisation(s) with which his patients are connected.

PART III

ADDITIONAL INFORMATION TO BE INCLUDED IN ANY APPLICATION BY A DOCTOR WHO SEEKS NORMALLY TO BE AVAILABLE ON ONLY 4 DAYS IN EACH WEEK

1. A brief description of each health-related activity with reference to which the application is made.
2. The days in each week during which the doctor will be undertaking that activity.
3. The number of hours in each week which are likely to be occupied in the course of such activity.

PART IV

ILLUSTRATIVE LIST OF HEALTH-RELATED ACTIVITIES

Appointments concerning medical education or training.

Medical appointments within the health service other than in relation to the provision of general medical services.

Medical appointments under the Crown, with Government Departments or Agencies, or public or local authorities.

Appointments concerning the regulation of the medical profession or the Medical Practices Committee.

SCHEDULE 9

paragraph 37

LIST OF PRESCRIBED MEDICAL CERTIFICATES

Column 1 <i>Description of Medical Certificate</i>	Column 2 <i>Short title of enactment under or for the purpose of which certificate required</i>
1. To support a claim or to obtain payment either personally or by proxy; to prove inability to work or incapacity for self-support for the purposes of an award by the Secretary of State; or to enable proxy to draw pensions etc. }	Naval and Marine Pay and Pensions Act 1865 (45)
	Air Force (Constitution) Act 1917 (46)
	Pensions (Navy, Army, Air Force and Mercantile Marine) Act 1939 (47)
	Personal Injuries (Emergency Provisions) Act 1939 (48)
	Pensions (Mercantile Marine) Act 1942 (49)
	Polish Resettlement Act 1947 (50)
	Home Guard Act 1951 (51)
	Social Security Act 1975 (52)
	Industrial Injuries and Diseases (Old Cases) Act 1975 (53)
	Parts I and III of the Social Security and Housing Benefits Act 1982 (54)
Part II of, and Part V of, and Schedule 4 to, the Social Security Act 1986 (55)	
2. To establish pregnancy for the purpose of obtaining welfare foods	Section 13 of the Social Security Act 1988 (56)
3. To establish fitness to receive inhalational analgesia in childbirth	Nurses, Midwives and Health Visitors Act 1979 (57)
4. To secure registration of still-birth	Births and Deaths Registration Act 1953 (58)
5. To enable payment to be made to an institution or other person in case of mental	Section 142 of the Mental Health Act 1983 (59)

(45) 28 & 29 Vict. c.73.**(46)** 7 & 8 Geo. 5 c.51.**(47)** 2 & 3 Geo. 6 c.83.**(48)** 2 & 3 Geo. 6 c.82.**(49)** 5 & 6 Geo. 6 c.26.**(50)** 10 & 11 Geo. 6 c.19.**(51)** 15 & 16 Geo. 6 and 1 Eliz. 2 c.8.**(52)** 1975 c. 14.**(53)** 1975 c. 16.**(54)** 1982 c. 24.**(55)** 1986 c. 50.**(56)** 1988 c. 7.**(57)** 1979 c. 36.**(58)** 1 and 2 Eliz. 2 c.72**(59)** 1983 c. 20.

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Column 1 <i>Description of Medical Certificate</i>	Column 2 <i>Short title of enactment under or for the purpose of which certificate required</i>
disorder of persons entitled to payment from public funds	
6. To establish unfitness for jury service	Juries Act 1974 (60)
7. To establish unfitness to attend for medical examination	National Service Act 1948 (61)
8. To support late application for reinstatement in civil employment or notification of non-availability to take up employment, owing to sickness }	Reinstatement in Civil Employment Act 1944 (62) Reinstatement in Civil Employment Act 1950 (63) Reserve Forces Act 1980 (64)
9. To enable a person to be registered as an absent voter on grounds of physical incapacity.	Representation of the People Act 1983
10. To support application for certificates conferring exemption from charges in respect of drugs, medicines and appliances.	National Health Service Act 1977
11. To support a claim by or on behalf of a severely mentally impaired person for exemption from liability to pay the community charge.	Local Government Finance Act 1988

SCHEDULE 10

DRUGS AND OTHER SUBSTANCES NOT TO BE PRESCRIBED FOR SUPPLY UNDER PHARMACEUTICAL SERVICES

- 10. 10 Cleaning and Disinfecting Solution
- 10. 10 Rinsing and Neutralising Solution
- 10 Day Slimmer Tablets
- 10 Hour Capsules
- 4711 Cologne
- Abidec Capsules
- Acarosan Foam
- Acarosan Moist Powder
- Acnaveen Bar
- Acne Aid Bar
- Actal Suspension

(60) 1974 c. 23.

(61) 11 & 12 Geo. 6 c.64.

(62) 7 & 8 Geo. 6 c.15.

(63) 14 & 15 Geo. 6 c.10.

(64) 1980 c. 9.

Actal Tablets
Actifed Compound Linctus
Actifed Expectorant
Actifed Linctus with Codeine
Actifed Syrup
Actifed Tablets
Actomite
Actonorm Gel
Actonorm Powder
Actonorm Tablets
Actron Tablets
Adult Cough Balsam (Cupal)
Adult Meltus Cough and Catarrh Linctus
Adult Tonic Mixture (Thornton and Ross)
Afrazine Nasal Drops
Afrazine Nasal Spray
Afrazine Paediatric Nasal Drops
Agarol Emulsion
Agiolax Granules
Airbal Breathe Easy Vapour Inhaler
AL Tablets
Alagbin Tablets
Alcin Tablets
Aletres Cordial (Potters)
Alexitol Sodium Suspension 360 mg/5 ml
Alexitol Sodium Tablets
Algipan Tablets
Alka-Donna Suspension
Alka-Donna Tablets
Alka-Donna P Mixture
Alka-Donna P Tablets
Alka Mints
Alka-Seltzer Tablets
Alket Powders
All Fours Cough Mixture (Harwood)
All Fours Mixture (Glynwed Wholesale Chemists)
All Fours Mixture (Roberts Laboratories)
Allbee with C Capsules
Allbee with C Elixir
Almasilate Tablets 500 mg

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Almazine Tablets 1 mg
Almazine Tablets 2.5 mg
Almay Aftersun Soother
Almay Face Powder
Aloin Tablets 40 mg
Alophen Pills
Alpine Tea
Alprazolam Tablets 0.25 mg
Alprazolam Tablets 0.5 mg
Alprazolam Tablets 1 mg
Altacaps
Altacite Suspension
Altacite Plus Tablets
Altacite Tablets
Altelave Liquid
Aludrox Gel
Aludrox Suspension
Aludrox MH Suspension
Aludrox SA Suspension
Aludrox Tablets
Aluhyde Tablets
Aluminium Hydroxide and Silicone Suspension
Aluminium Phosphate Gel
Aluminium Phosphate Tablets 400 mg
Alupent Expectorant Mixture
Alupent Expectorant Tablets
Aluphos Gel
Aluphos Tablets
Alupram Tablets 2 mg
Alupram Tablets 5 mg
Alupram Tablets 10 mg
Aluzyme Tablets
Alzed Tablets
AMI-10 Rinsing and Storage Solution
Amiclear Contact Lens Cleanser Tablets
Amidose Saline Solution 30 ml
Amin-Aid
Amisyn Tablets
Ammonia and Ipecacuanha Mixture BP
Ammonium Chloride and Morphine Mixture BP

Amplex Mouthwash
Amplex Mint Capsules
Amplex Original Capsules
Anadin Analgesic Capsules Maximum Strength
Anadin Analgesic Tablets
Anadin Extra Analgesic Tablets
Anadin Paracetamol Tablets
Anadin Tablets Soluble
Andrews Liver Salts Effervescent Powder
Andrews Liver Salts (Diabetic Formula) Effervescent Powder
Andursil Liquid
Andursil Tablets
Anestan Bronchial Tablets
Aneurone Mixture
Angiers Junior Aspirin Tablets
Angiers Junior Paracetamol Tablets
Anorvit Tablets
Antasil Liquid
Antasil Tablets
Antistin-Privine Nasal Drops
Antistin-Privine Nasal Spray
Antitussive Linctus (Cox)
Antoin Tablets
Antussin Liquid (Sterling Winthrop)
Anxon Capsules 15 mg
Anxon Capsules 30 mg
Anxon Capsules 45 mg
Aperient Tablets (Brome and Schimmer)
Aperient Tablets (Kerbina)
Apodorm Tablets 2.5 mg
Apodorm Tablets 5 mg
APP Stomach Powder
APP Stomach Tablets
Arocin Capsules
Ascorbef Tablets
Ascorbic Acid and Hesperidin Capsules (Regent Laboratories)
Asilone Orange Tablets
Asilone Tablets
Askit Powders
Askit Tablets

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Aspergum Chewing Gum Tablets 227 mg
Aspirin Chewing-Gum Tablets 227 mg
Aspirin Tablets, Effervescent Soluble 300 mg
Aspirin Tablets, Effervescent Soluble 500 mg
Aspirin Tablets, Slow (Micro-Encapsulated) 648 mg
Aspro Clear Extra Tablets
Aspro Clear Tablets
Aspro Extra Strength Tablets 500 mg
Aspro Junior Tablets
Aspro Microfined Tablets
Aspro Paraclear Tablets
Aspro Paraclear Junior Tablets
Asthma Tablets (Cathay)
Astroplast Analgesic Capsules
Atensine Tablets 2 mg
Atensine Tablets 5 mg
Atensine Tablets 10 mg
Ativan Tablets 1 mg
Ativan Tablets 2.5 mg
Atrixo
Aveeno Bar
Aveeno Bar Oilated
Aveeno Baby
Aveenobar
Ayrtons Macleans Formula Tablets
B Complex Capsules (Rodale)
B Complex Super Capsules (Rodale)
B Extra Tablets (British Chemotherapeutic Products)
Babezone Syrup
Baby Chest Rub Ointment (Cupal)
Babylix Syrup
Babysafe Tablets
Badedas Bath Gelee
Balm of Gilead (Robinsons)
Balm of Gilead Cough Mixture (Wicker Herbal Stores)
Balm of Gilead Liquid (Culpeper)
Balm of Gilead Mixture (Potters)
Banfi Hungarian Hair Tonic
Banimax Tablets
Barker's Liquid of Life Solution

Barker's Liquid of Life Tablets
Barkoff Cough Syrup
Barnes-Hind Cleaning and Soaking Solution
Barnes-Hind Intensive Cleaner
Barnes-Hind No. 4 Cleaner
Barnes-Hind Wetting and Soaking Solution
Bausch and Lomb Cleaning Tablets
Bausch and Lomb Daily Lens Cleaner
Bausch and Lomb Saline Solution
Bayer Aspirin Tablets 300 mg
BC500 Tablets
BC500 with Iron Tablets
BC500 Vitamin Sachets Effervescent
Becosym Forte Tablets
Becosym Syrup
Becosym Tablets
Becotab Tablets
Beecham CoughCaps
Beechams Day Nurse Capsules
Beechams Day Nurse Syrup
Beechams Catarrh Capsules
Beechams Night Nurse Capsules
Beechams Night Nurse Syrup
Beechams Pills
Beechams Powders
Beechams Powders Capsule Form
Beechams Powders Mentholated
Beechams Powders Tablet Form
Beehive Balsam
Bekovit Tablets
Belladonna and Ephedrine Mixture, Paediatric, BPC
Bellocarb Tablets
Benadon Tablets 20 mg
Benadon Tablets 50 mg
Benafed Linctus
Benerva Compound Tablets
Benerva Injection 25 mg/ml
Benerva Injection 100 mg/ml
Benerva Tablets 3 mg
Benerva Tablets 10 mg

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Benerva Tablets 25 mg
Benerva Tablets 50 mg
Benerva Tablets 100 mg
Benerva Tablets 300 mg
Bengers Food
Bengue's Balsam
Benylin Chesty Cough Linctus
Benylin Children's Cough Linctus
Benylin Day and Night Cold Treatment
Benylin Decongestant Linctus
Benylin Dry Cough Linctus
Benylin Expectorant
Benylin Fortified Linctus
Benylin Mentholated Cough and Decongestant Linctus
Benylin Paediatric
Benylin with Codeine
Benzedrex Inhaler
Benzoin Inhalation BP
Bepro Cough Syrup
Bergasol Ultra Protection Tanning Lotion
Best Royal Jelly Capsules
Biactol Anti-Bacterial Face Wash
Bile Beans Formula 1 Pill
Biocare GLA Complex Tablets
Biocare EfaPLEX Linseed/GLA Blend Capsules
Bioflavonoid C Capsules
Bioscal Hair Formula
Bio-Strath Drops
Bio-Strath Elixir
Biovital Vitamin Tonic
Biovital Tablets
Birley's Antacid Powder
Bis-Mag Lozenges
Bis-Peps Tablets
Bisma-Calna Cream
Bisma-Rex Powder
Bisma-Rex Tablets
Bismag Antacid Powder
Bismag Tablets
Bismuth Compound Lozenges BPC

Bismuth Dyspepsia Lozenges
Bismuth Pepsin and Pancreatin Tablets
Bismuth, Soda and Pepsin Mixture
Bisodol Antacid Powder
Bisodol Extra Tablets
Bisodol Tablets
Bisolvomycin Capsules
Bisolvon Elixir
Bisolvon Tablets
Blackcurrant Cough Elixir (Thornton and Ross)
Blackcurrant Syrup Compound (Beben)
Blandax Suspension
Blavig Tablets
Blood Tonic Mixture (Thompsons)
Boldolaxine Tablets
Bonemeal Calfos, Vit A Ester, Vit D Tablets
Bonomint Chewing Gum
Bonomint Tablets
Booth's Cough and Catarrh Elixir
Boots Baby Oil
Boots Cold Relief Powder for Solution
Boots Compound Laxative Syrup of Figs
Boots Cough Relief for Adults
Boots Glycerin and Blackcurrant Soothing Cough Relief
Boots Hard Lens Soaking Solution
Boots Hard Lens Wetting Solution
Boots Health Salts
Boots Indigestion Plus Mixture
Boots Indigestion Powder
Boots No. 7 Vitamin E Skin Cream
Boots Orange Drink
Boots Soft Lens Comfort Solution
Boots Soft Lens Soaking Solution
Boots Soya Milk
Boots Vapour Rub Ointment
Boston Lens Cleaning Solution
Boston Lens Wetting and Soaking Solution
Box's Balm of Gilead Cough Mixture
Bravit Capsules
Bravit Tablets

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Breoprin Tablets 648 mg
Brewers Yeast Tablets (3M Health Care)
Brewers Yeast-Super B Tablets (Rodale)
Brewers Yeast Tablets (Phillips Yeast Products)
Bricanyl Compound Tablets
Bricanyl Expectorant
Brogans Cough Mixture
Brogans Cough Syrup
Bromazepam Tablets 1.5 mg
Bromazepam Tablets 3 mg
Bromazepam Tablets 6 mg
Bromhexine Hydrochloride Elixir 4 mg/5 ml
Bromhexine Hydrochloride Tablets 8 mg
Bronalin Expectorant
Bronalin Paediatric Cough Syrup
Bronchial and Cough Mixture (Worthington Walter)
Bronchial Balsam (Cox)
Bronchial Catarrh Syrup (Rusco)
Bronchial Cough Mixture (Evans Medical)
Bronchial Emulsion (Three Flasks) (Thornton and Ross)
Bronchial Emulsion AS Extra Strong (Ayrton Saunders)
Bronchial Mixture (Rusco)
Bronchial Mixture Extra Strong (Cox)
Bronchial Mixture Sure Shield Brand
Bronchial Tablets (Leoren)
Bronchialis Mist Liquid (Industrial Pharmaceutical Services)
Bronchialis Mist Nig Double Strength (Phillip Harris Medical)
Bronchisan Childrens Cough Syrup
Bronchisan Cough Syrup
Broncholia Mixture
Bronchotone Solution
Bronkure Cough and Bronchitis Mixture (Jacksons)
Brontus Syrup
Brontus Syrup for Children
Brontussin Cough Suppressant Mixture
Brooklax Tablets
Brotizolam Tablets 0.125 mg
Brotizolam Tablets 0.25 mg
Bufferin Tablets
Buttercup Baby Cough Linctus

Buttercup Syrup
Buttercup Syrup Honey and Lemon
Cabdrivers Adult Linctus
Cabdrivers Diabetic Linctus
Cabdrivers Nasal Decongestant Tablets
Cadbury's Coffee Compliment
Cafadol Tablets
Caffeine and Dextrose Tablets
Calamage
Calcimax Syrup
Calcinate Tablets
Calcium Syrup (Berk Pharmaceuticals)
California Syrup of Figs
Calpol Six Plus Suspension
Calpol Tablets
Calsalettes Sugar Coated Tablets
Calsalettes Uncoated Tablets
Camfortix Linctus P1
Canderel Intense Sweetner Spoonful
Cantaflour
Capramin Tablets
Carbellon Tablets
Carisoma Compound Tablets
Carnation Coffeemate
Carnation Instant Build-Up
Carnation Slender Meal Replacement (A11 Flavours)
Carrzone Powder
Carters Little Pills
Cascara Evacuant Liquid Mixture
Cascara Tablets BP
Castellan No. 10 Cough Mixture
Catarrh and Bronchial Syrup (Thornton and Ross)
Catarrh Cough Syrup (Boots)
Catarrh-Ex Tablets
Catarrh Mixture (Herbal Laboratories)
Catarrh Syrup for Children (Boots)
Catarrh Tablets (Cathay)
Ce-Cobalin Syrup
Ceeyees Tablets
Celaton Rejuvenation Tablets

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

Celaton CH3 Strong and Calm Tablets
Celaton CH3 Triplus Tablets
Celaton CH3 + Ease and Vitality Tablets
Celaton Whole Wheat Germ Capsules
Celavit 1 Powder
Celavit 2 Powder
Celavit 3 Powder
Celevac Granules
Centrax Tablets 10mg
Cephos Powders
Cephos Tablets
Charabs Tablets
Charvita Tablets
Cheroline Cough Linctus
Cherry Bark Cough Syrup Children's (Loveridge)
Cherry Bark Linctus Adults (Loveridge)
Cherry Cough Balsam (Herbal Laboratories)
Cherry Cough Linctus (Savory and Moore)
Cherry Cough Mixture (Rusco)
Cherry Flavoured Extract of Malt (Distillers)
Chest and Cough Tablets (Brome and Schimmer)
Chest and Cough Tablets (Kerbina)
Chest and Throat Tablets No. 8,000 (English Grains)
Chest Pills (Brome and Schimmer)
Chest Tablets (Kerbina)
Chesty Cough Syrup (Scott and Bowne)
Chilblain Tablets (Boots)
Child's Cherry Flavoured Linctus (Cupal)
Children's Blackcurrant Cough Syrup (Rusco)
Children's Cherry Cough Syrup (Thornton and Ross)
Children's Cough Linctus (Ransoms)
Children's Cough Mixture (Beecham)
Children's Cough Mixture (Loveridge)
Children's Cough Syrup (Ayrton Saunders)
Children's Cough Syrup (Cox)
Children's Cough Syrup (Evans Medical)
Children's Cough Syrup (Thornbers)
Children's Medicine Liquid (Hall's)
Children's Phensic Tablets
Children's Wild Cherry Cough Linctus (Evans Medical)

Chilvax Tablets
Christy's Rich Lanolin
Christy's Skin Emulsion
Chocolate Laxative Tablets (Isola)
Chocovite Tablets
Cidal
Cidex Longlife
Cidex Sterilising Solution
Cinnamon Essence Medicinal Mixture (Langdale)
Cinnamon Tablets Medicinal (Langdale)
Cinota Drops
Citrosan Powder
Claradin Effervescent Tablets
Clarkes Blood Mixture
Clean and Soak
Cleansing Herb Dried (Potters)
Cleansing Herbs (Brome and Schimmer)
Cleansing Herbs Powder (Dorwest)
Clerz Lubricating and Rewetting Eye Drops
Clorazepate Dipotassium Capsules 7.5mg
Clorazepate Dipotassium Capsules 15mg
Clorazepate Dipotassium Tablets 15mg
Co-op Aspirin Tablets BP 300mg
Co-op Bronchial Mixture
Co-op Halibut Liver Oil Capsules BP
Co-op Paracetamol Tablets BP 500mg
Co-op Soluble Aspirin Tablets BP 300mg
Cobalin H Injection 250 mcg/ml
Cobalin H Injection 1000 mcg/ml
Cobalin Injection 100 mcg/ml
Cobalin Injection 250 mcg/ml
Cobalin Injection 500 mcg/ml
Cobalin Injection 1000 mcg/ml
Coda-Med Tablets
Cod Liver Oil and Creosote Capsules (5 Oval) (R P Scherer)
Cod Liver Oil and Creosote Capsules (10 Oval) (R P Scherer)
Cod Liver Oil Caps 10 Minims (Woodward)
Cod Liver Oil High Potency Capsules (R P Scherer)
Cod Liver Oil with Malt Extract and Hypophosphite Syrup (Distillers)
Cod Liver Oil 0.3ml Capsules (R P Scherer)

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

Cod Liver Oil 0.6ml Capsules (R P Scherer)
Codalax
Codalax Forte
Codanin Analgesic Tablets
Codis Soluble Tablets
Codural Tablets
Cojene Tablets
Cold and Influenza Capsules (Regent Laboratories)
Cold and Influenza Mixture (Boots)
Cold and Influenza Mixture (Davidson)
Cold and Influenza Mixture (Rusco)
Cold and Influenza Mixture (Thornton and Ross)
Cold Relief (Blackcurrant Flavour) Granular Powder (Boots)
Cold Relief Capsules (Scott and Bowne)
Cold Relief Tablets (Boots)
Cold Tablets (Roberts)
Coldrex Powder
Coldrex Tablets
Colgard Emergency Essence (Lane Health Products)
Colgate Dental Cream with MFP Fluoride
Colgate Disclosing Tablets
Collins Elixir
Colocynth and Jalap Tablets Compound BPC 1963
Colocynth Compound Pills BPC 1963
Cologel Liquid
Communion Wafers
Complan
Comploment Continus Tablets
Compound Fig Elixir BP
Compound Rhubarb Oral Powder BP
Compound Rhubarb Tincture BP
Compound Syrup of Glycerophosphates BPC 1963
Compound Syrup of Hypophosphites BPC 1963
Comtrex Capsules
Comtrex Liquid
Comtrex Tablets
Concavit Capsules
Concavit Drops
Concavit Injection
Concavit Syrup

Congreves Balsamic Elixir
Constipation Herb Dried (Potters)
Constipation Herbs (Hall's)
Constipation Herbs (Mixed Herbs) (Brome and Schimmer)
Constipation Mixture No. 105 (Potters)
Contac 400 Capsules
Contactaclean Cleaning Solution
Contactasoak Disinfecting and Soaking Solution
Contactasol 02 Care Solution
Contactasol Complete Care All-In-One Solution
Contactasol Wetting Solution
Copholco Cough Syrup
Copholcoids
Coppertone Apres Plage Aftersun Milk
Corrective Tablets (Ayrton Saunders)
Correctol Tablets
Cosalgescic Tablets
Cosylan Syrup
Coterpin Syrup
Cough and Bronchitis Mixture (Davidson)
Cough and Cold Mixture (Beecham)
Cough Balsam (Abernethy's)
Cough Balsam (Thornbers)
Cough Expectorant Elixir (Regent Laboratories)
Cough Linctus (Sanderson's)
Cough Linctus Alcoholic (Thomas Guest)
Cough Linctus for Children (Boots)
Cough Medicine for Infants and Children Solution (Boots)
Cough Mixture (Tingles)
Cough Mixture Adults (Thornton and Ross)
Cough Mixture Adults (Wicker Herbal Stores)
Cough Syrup Best (Diopharm)
Cough Tablets (Kerbina)
Country Basket Rice Cakes
Covermark Removing Cream
Covonia Bronchial Balsam Linctus
Cow and Gate Babymeals Stage One
Cow and Gate Baby Milk Plus
Cow and Gate Premium Baby Food
Cox Pain Tablets

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Crampex Tablets
Cranberry Juice
Cream of Magnesia Tablets 300 mg
Cremaffin Emulsion
Creosote Bronchial Mixture (Loveridge)
Crookes One-a-Day Multivitamins with Iron
Crookes One-a-Day Multivitamins without Iron
Croupline Cough Syrup (Roberts)
Cupal Health Salts
Cupal Nail Bite Lotion
Cupanol Over Six Paracetamol Suspension
Cuticura Medicated Foam Bath
Cuticura Talcum Powder
Cyanocobalamin Solution (any strength)
Cyanocobalamin Tablets (any strength)
Cytacon Liquid
Cytacon Tablets
Cytamen 250 Injection
Cytamen 1000 Injection
Dakin's Golden Vitamin Malt Syrup
Dalivit Capsules
Dalivit Syrup
Dalmane Capsules 15 mg
Dalmane Capsules 30 mg
Dansac Skin Lotion
Davenol Linctus
Daxaids Tablets
Day-Vits Multivitamin and Mineral Tablets
Dayovite
De Witt's Analgesic Pills
De Witt's Antacid Powder
De Witt's Antacid Tablets
De Witt's Baby Cough Syrup
De Witt's Cough Syrup
De Witt's PL Pills
Deakin and Hughes Cough and Cold Healer Mixture
Deakin's Fever and Inflammation Remedy Mixture
Delax Emulsion
Delimon
Deltasoralen Bath Lotion

Dentakit Toothache First Aid Kit
Derbac Soap
Dermacolor Cleansing Cream
Dermacolor Cleansing Lotion
Dermacolor Cleansing Milk
Desiccated Liver Tablets
Desiccated Liver USNF Tablets
Detox Tablets (Hursdrex)
Dextrogesic Tablets
Dextromethorphan Hydrobromide Solution 3.75 mg/5 ml
Dextromethorphan Hydrobromide Solution 7.5 mg/5 ml
Dextromethorphan Hydrobromide Syrup 6.6 mg/5 ml
Dextromethorphan Hydrobromide Syrup 13.5 mg/5 ml
Dextropropoxyphene and Paracetamol Dispersible Tablets
Dextropropoxyphene and Paracetamol Soluble Tablets
DF 118 Elixir
DF 118 Injection
DF 118 Tablets
DGL 1 Suspension
DGL 2 Suspension
DGT 1 Tablets
DGT 2 Tablets
Diabetic Bronal Syrup
Dialar Forte Syrup 5 mg/5 ml
Dialar Syrup 2 mg/5 ml
Dialume Capsules 500 mg
Diazepam Capsules, Slow 10 mg
Diazepam Elixir 5 mg/5ml
Dietade Diabetic Jam
Dietade Diabetic Marmalade
Dietade Diabetic Squash
Dietade Fruit Sugar
Dietade Jelly Crystals
Digesprin Antacid Tablets
Digestells Lozenges
Dihydroxyaluminium Sodium Carbonate Tablets
Dijex Liquid
Dijex Tablets
Dimotane Expectorant
Dimotane Expectorant DC

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Dimotane with Codeine Elixir
Dimotane with Codeine Paediatric Elixir
Dimotapp Elixir
Dimotapp Elixir Paediatric
Dimotapp LA Tablets
Dimotapp P Tablets
Dimyрил Linctus
Dinnefords Gripe Mixture
Disprin Extra Tablets
Disprin Solmin Tablets
Disprin Tablets
Disprinex Tablets
Disprol Tablets
Distalgesic Soluble Tablets
Distalgesic Tablets
Do-Do Linctus
Do-Do Tablets
Dolasan Tablets
Doloxene Capsules
Doloxene Compound Pulvules
Dolvan Tablets
Dorbanex Capsules
Dorbanex Liquid
Dorbanex Liquid Forte
Dormonoct Tablets 1 mg
Dr Brandreth's Pills
Dr D E Jongh's Cod Liver Oil with Malt Extract and Vitamins Fortified Syrup
Dr William's Pink Pills
Drastin Tablets
Dristan Decongestant Tablets with Antihistamine
Dristan Nasal Spray
Droxalin Tablets
Dry Cough Linctus (Scott and Bowne)
Dual-Lax Extra Strong Tablets
Dual-Lax Tablets
Dulca Tablets
Dulcodos Tablets
Dulco-Lax Suppositories
Dulco-Lax Tablets
Duo-Gastritis Mixture (Baldwin's)

Duphalac Syrup
Duralin Capsules Extra Strength
Duralin Tablets
Duttons Cough Mixture
Dynese Aqueous Suspension
Dynese Tablets
D001 Capsules
D002 Capsules
D004 Capsules
D006 Capsules
D007 Capsules
D009 Capsules
D010 Capsules
D011 Capsules
D012 Capsules
D013 Capsules
D014 Capsules
D017 Capsules
D018 Capsules
D019 Capsules
D020 Capsules
D021 Capsules
D024 Capsules
D029 Capsules
D030 Capsules
D031 Capsules
D032 Capsules
D033 Capsules
D034 Capsules
D036 Capsules
Ecdilyn Syrup
Educol Tablets
Efamol
Efamol Capsules
Efamol Marine Capsules
Efamol Oil
Efamol Plus Capsules
Efamol PMP
Efamolia Night Cream
Effer-C Tablets

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Effico Syrup
Eldermint Cough Mixture (Herbal Laboratories)
Elgydium Toothpaste
Elizabeth Arden Flawless Finish
Elizabeth Arden Sunblock Cream Factor 15
Elizabeth Arden Sunscience Superblock Cream SPF 34
Elkamol Tablets
Emulave
Emuwash
Endet Powders
Ener-G Gluten-free and Soya-free Macaroon Cookies
Ener-G Gluten-free Rice Peanut-Butter Cookies
Ener-G Gluten-free Rice Walnut Cookies
Ener-G Low-Protein and Gluten-free Egg Replacer
Energen Starch Reduced Crispbread
Engran HP Tablets
Engran Tablets
Eno Fruit Salts
EP Tablets
EPOC Capsules
Equagesic Tablets
Eskornade Spansule Capsules
Eskornade Syrup
Eso-Col Cold Treatment Tablets
Euhypnos Capsules 10mg
Euhypnos Elixir 10mg/5ml
Euhypnos Forte Capsules 20mg
Evacalm Tablets 2mg
Evacalm Tablets 5mg
Evans Cough Balsam
Evening Primrose Oil
Evening Primrose Oil Capsules
Evident Disclosing Cream
Ex-Lax Chocolate Laxative Tablets
Ex-Lax Pills
Expectorant Cough Mixtures (Beecham)
Expulin Cough Linctus
Expulin Paediatric Cough Linctus
Expurhin Paediatric Decongestant
Extil Compound Linctus

Extravite Tablets
Extren Tablets
Exyphen Elixir
E001 Capsules
E015 Capsules
E018 Capsules
E021 Capsules
E031 Capsules
E032 Capsules
Fabrol Granules
Fade Out Skin Lightening Cream
Fairy Household Liquid
Falcodyl Linctus
Falkamin
Fam Lax Tablets
Famel Expectorant
Famel Linctus
Famel Original Linctus
Family Cherry Flavoured Linctus (Cupal)
Family Herbal Pills
Farex Fingers
Farleys Rusks
Father Pierre's Monastery Herbs
Fe-Cap C Capsules
Feac Tablets
Feen-a-Mint Tablets
Fefol-Vit Spansules
Femerital Tablets
Feminax Tablets
Fendamin Tablets
Fennings Adult Cooling Powders
Fennings Children's Cooling Powders
Fennings Little Healers Pills
Fennings Mixture
Fennings Soluble Junior Aspirin Tablets
Fenox Nasal Drops
Fenox Nasal Spray
Ferfolic Tablets
Fergluvite Tablets
Ferraplex B Tablets

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Ferrlecit Tablets/Dragees
Ferrograd C Tablets
Ferrol
Ferrol Compound Mixture
Ferromyn B Elixir
Ferromyn B Tablets
Ferrous Gluconate Compound Tablets
Fesovit Spansules
Fesovit Z Spansules
Fibre Biscuits
Fine Fare Aspirin Tablets 300mg
Fine Fare Hot Lemon Powders
Flar Capsules
Flavelix Syrup
Flexcare Soft Lens Solution
Flexsol Solution
Flora Margarine
Floradix Formula Liquid
Floradix Tablets
Floral Arbour Tablets (Cathay)
Flucaps
Flunitrazepam Tablets 1mg
Flurlar Capsules 15mg
Flurlar Capsules 30mg
Flurazepam Capsules 15mg
Flurazepam Capsules 30mg
Flurazepam Hydrochloride Capsules 15mg
Flurazepam Hydrochloride Capsules 30mg
Flu-Rex Tablets
Flurex Bedtime Cold Remedy
Flurex Capsules
Flurex Decongestant Inhalant Capsules
Flurex Hot Lemon Concentrate
Flurex Tablets
Folped
Formulix
Forprin Tablets
Fortagesic Tablets
Fortison Low Sodium
Fortral Capsules 50mg

Fortral Injection
Fortral Suppositories
Fortral Tablets 25mg
Fortral Tablets 50mg
Fortris Solution
Fosfor Syrup
Franol Expectorant
Franolyn Sed Liquid
Frisium Capsules 5mg
Frisium Capsules 10mg
Frisium Capsules 20mg
Fybranta Tablets
Fynnon Calcium Aspirin Tablets
Fynnon Salt
G Brand Linctus
Galake Tablets
Gale's Honey
Galfer-Vit Capsules
Galloway's Baby Cough Linctus
Galloway's Bronchial Cough Care
Galloway's Bronchial Expectorant
Galloway's Cough Syrup
Gamophen
Gastalar Tablets
Gastric Ulcer Tablets No.1001
Gastrils Pastilles
Gastritabs
Gastrovite Tablets
Gatinar Syrup
Gaviscon Granules
Gelusil Lac Powder
Gelusil Tablets
Genasprin Tablets
Genatosan
Gentian Acid Mixture with Nux Vomica
Gentian Alkaline Mixture with Nux Vomica
Gentian and Rhubarb Mixture BPC
Georges Vapour Rub Ointment
Geriplex Capsules
Gevral Capsules

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Gevral Tablets
GF Brand Baking Powder
GF Brand Banana Cake
GF Brand Chocolate Nut Cookies
GF Brand Cooking Crumbs
GF Brand Date and Walnut Cake
GF Brand English Style Mustard
GF Brand Fruit Bran Biscuits
GF Brand Ginger Cake
GF Brand Ginger Cookies
GF Brand Gluten-free Coconut Cookies
GF Brand Gluten-free Maize Biscuits with Chocolate
GF Brand Gluten-free Maize Biscuits with Hazelnut
GF Brand Gluten-free Pastry Mix
GF Brand Gluten-free Thin Wafer Bread
GF Brand Gravy Mix
GF Brand Hot Breakfast Cereal
GF Brand Lemon Cake
GF Brand Muesli
GF Brand Muesli Fruit Biscuits
GF Dietary Low Protein Pizza Mix with Tomato Topping Mix and Baking Dish
GF Dietary Low Protein Vegetable Burgers in Low Protein Sauce
GF Dietary Low Protein Vegetable Casserole
Givitol Capsules
Gladlax Tablets
Glemony Balsam (Baldwin's)
Glenco Elixir
Gluca-Seltzer Effervescent Powder
Glucodin
Glycerin Honey and Lemon Cough Mixture (Isola)
Glycerin Honey and Lemon Linctus (Boots)
Glycerin Honey and Lemon Linctus with Ipecacuanha (Boots)
Glycerin Lemon and Honey and Ipecacuanha (Thomas Guest)
Glycerin Lemon and Honey Linctus (Rusco)
Glycerin Lemon and Honey Syrup (Cupal)
Glycerin Lemon and Honey Syrup (Thomas Guest)
Glycerin Lemon and Honey Syrup (Waterhouse)
Glycerin Lemon and Ipecacuanha Cough Mixture (Isola)
Glykola Elixir
Glykola Infants Elixir

Goat's Milk Spray Dried Powder
Golden Age Vitamin and Mineral Capsules
Golden Health Tablets (Kerbina)
Golden Health Tablets (Brome and Schimmer)
Gon Tablets
Gonfalcon Tablets
Grangewood Insomnia Tablets
Granogen
Granose Liquid Soya Milk
Granoton Emulsion
Gregovite C Tablets
GS Tablets
Guaiphenesin Syrup (any strength)
Guanor Expectorant
H-Pantoten Tablets
Hactos Chest and Cough Mixture (Thomas Hubert)
Halaurant Syrup
Halcion Tablets 0·125mg
Halcion Tablets 0·25mg
Haliborange Syrup
Haliborange Tablets
Halibut Liver Oil A and D Capsules (Rodale)
Halin Tablets
Halocaps Inhalant Capsules
Halycitrol Emulsion
Hayphryn Nasal Spray
Head and Shoulders Shampoo
Health Salts (Wicker Herbal Stores)
Health Tonic Mixture (Hall's)
Healtheries Rice Crispbread
Healthilife Sunflower Seed Oil Capsules 500mg
Heart Shape Indigestion Tablets
Hedamol Capsules
Hedex Plus Capsules
Hedex Seltzer Granules
Hedex Soluble Granules
Hedex Tablets
Heinz Weight Watcher Baked Beans
Hemingways Catarrh Syrup
Hemoplex Injection

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

Hepacon B12 Injection
Hepacon Liver Extract Injection
Hepacon-Plex
Hepacon B-Forte Injection
Hepanorm Tablets
Herbal Aperient Tablets (Cathay)
Herbal Aperient Tablets (Kerbina)
Herbal Bronchial Cough Tablets (English Grains)
Herbal Laxative Naturtabs
Herbal Pile Tablets
Herbal Quiet Nite Sleep Naturtabs
Herbal Syrup (Baldwin's)
Herbalene Herbs
Hermesetas (blue)
Hermesetas Gold
Hermesetas Light
Hermesetas Liquid Sweetener
Hermesetas Sprinkle Sweet
Hexidin Solution
Hi-g-ah Tea
Hi-pro Liver Tablets
Hill's Adult Balsam
Hill's Junior Balsam
Hip C Rose Hip Syrup
Histalix Expectorant
Honey and Molasses Cough Mixture (Lane Health Products)
Hot Blackcurrant Cold Remedy (Beechams)
Hot Lemon Cold Remedy (Beechams)
Hot Lemon Cold Treatment (Scott and Bowne)
Hot Measure Solution (Reckitt and Colman)
Hydrocare Boiling/Rinsing Solution
Hydrocare Cleaning and Soaking Solution
Hydrocare Preserved Saline Solution
Hydrocare Protein Remover Tablets
Hydroclean Solution
Hydron Europe Cleaning Solution
Hydron Europe Comfort Soaking Solution
Hydron Europe Solusal
Hydron Europe Solution Comfort
Hydrosoak Disinfecting and Soaking Solution

Hydrosol Comfort Solution
Hypon Tablets
Iberet 500 Tablets
Iberol Tablets
ICC Analgesic Tablets
Iliadin Mini Nasal Drops
Iliadin Mini Paediatric Nasal Drops
Imarale Agba Suspension
Imarale Omode Suspension
Importal
Inabrin Tablets 200mg
Indian Brandy Solution
Indigestion Mixture (Boots)
Indigestion Mixture (Thornton and Ross)
Indigestion Mixture (William Ransom)
Indigo Indigestion Lozenges
Infra-Care Baby Bath
Influenza and Cold Mixture 2315 (Wright Layman and Umney)
Inhalit Liquid Inhalation
Innox Finishing Touch Loose Powder
Innox Moisturised Liquid Make-Up
Inoven Caplets
Iodinated Glycerol Elixir 60 mg/5 ml
Iodised Vitamin Capsules
Iodo-Ephedrine Mixture
Ipecacuanha Pills 20 mg
Ipecacuanha and Morphine Mixture BP
Ipecacuanha and Squill Linctus Paediatric BPC
Ipsel Hygienic Babysalve
Irofol C
Iron and Brewers Yeast Tablets (3M Health Care)
Iron and Vitamin Tablets (Davidson)
Iron Formula Tablets (Rodale)
Iron Jelloids Tablets
Iron Tonic Tablets (Boots)
Ironorm Capsules
Ironorm Tonic
Ironplan Capsules
Ivy Tablets (Ayrton Saunders)
Jaap's Health Salts

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

Jacksons All Fours Cough Mixture
Jacksons Febrifuge
Jambomins Tablets
Jenners Suspension
Jenners Tablets
Jochem Hormone Hair Preparation
Johnson and Johnson Baby Bath
Johnson and Johnson Baby Cream
Johnson and Johnson Baby Lotion
Johnson and Johnson Baby Oil
Johnson and Johnson Baby Powder
Johnson and Johnson Baby Shampoo
Jolen Creme Bleach
Jordans Crunchy Bar
Junamac
Jung Junipah Tablets
Junior Cabdrivers Linctus
Junior Disprin Tablets
Junior Disprol Suspension
Junior Disprol Tablets
Junior Ex-Lax Chocolate Tablets
Junior Lemsip Powder
Junior Meltus Cough and Catarrh Linctus
Junior Mucron Liquid
Junior Paraclear Tablets
Junior Tablets (Rodale)
Juno-Junipah Mineral Salts
Juvel Elixir
Juvel Tablets
Jevela Gluten-Free Sage and Onion Stuffing Mix
Karvol Capsules
Kelsoak 2 Solution
Kelvinol 2 Wetting Solution
Kenco Instant Decaffeinated Coffee
Kendales Adult Cough Syrup
Kendales Cherry Linctus
Kest Tablets
Ketazolam Capsules 15 mg
Ketazolam Capsules 30 mg
Ketazolam Capsules 45 mg

Keybells Linctus of Glycerine, Lemon and Ipecacuanha
Kingo Cough Syrup
Koladex Tablets
Kolanticon Tablets
Kolanticon Wafers
Kolantyl Gel
Krauses Cough Linctus
Kruschen Salts
Kuralax Herbs
Labiton Kola Tonic
Laboprin Tablets
Lac Bismuth Mixture
Lactaid Lactase enzyme for milk drops
Lactaid Lactase enzyme tablets
Lactaid Lactose reduced skimmed and whole milk UHT
Lacto Calamine
Laevoral
Lamberts Evening Primrose Oil 250mg Capsules
Lamberts Evening Primrose Oil 500mg Capsules
Lamberts Evening Primrose Oil 1000mg Capsules
Lamberts L-Threonine 500mg Capsules
Lamberts Protein Deficiency Formula Capsules
Lance B and C Tablets
Lane's Cut-a-Cough
Lane's Laxative Herb Tablets
Lane's Sage and Garlic Catarrh Remedy
Lantigen B
Lavender Bath
Laxaliver Pills
Laxatabs Leoren
Laxipurg Tablets
Laxoberal Elixir
LC 65 Cleaning Solution
Lederplex Capsules
Lederplex Liquid
Lejfbire Biscuit
Lem-Plus Hot Lemon Drink
Lemeze Cough Syrup
Lemon Eno Powder
Lemon Flu-Cold Concentrated Syrup

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

Lemon Glycerine and Honey Cough Syrup Compound (Carter Bond)
Lemon Glycerine and Honey Lung Mixture (Whitehall Laboratories)
Lemon Glycerine and Ipecac Cough Syrup Compound (Carter Bond)
Lemon Juice, Glycerine and Honey A S Syrup (Ayrton Saunders)
Lemon Linctus 1-472
Lemsip Expectorant
Lemsip Linctus
Lemsip Powder
Lendormin Tablets 0.125 mg
Lendormin Tablets 0.25 mg
Lensept Solution
Lensine 5 All in One Solution
Lensplus Sterile Saline Spray
Lensrins Solution
Leoren Tonic Tablets
Lexotan Tablets 1.5 mg
Lexotan Tablets 3 mg
Lexotan Tablets 6 mg
Libraxin Tablets
Librium Capsules 5 mg
Librium Capsules 10 mg
Librium Tablets 5 mg
Librium Tablets 10 mg
Librium Tablets 25 mg
Librofem Tablets
Lightning Cough Remedy Solution (Potters)
Limitrol Capsules "5"
Limitrol Capsules "10"
Linctified Expectorant
Linctified Expectorant Paediatric
Linctoid C
Linituss
Linoleic Acid
Linus Vitamin C Powder
Lipoflavonoid Capsules
Lipotriad Capsules
Lipotriad Liquid
Liqufruta Blackcurrant Cough Medicine
Liqufruta Honey and Lemon Cough Medicine
Liqufruta Medica

Liqufruta Medica Garlic Flavoured Cough Medicine
Liquid Formula (Food Concentrate) (Rodale)
Liquid Paraffin and Phenolphthalein Emulsion BP
Liquid Paraffin Emulsion with Cascara BPC
Liquifilm Wetting Solution
Listerine Antiseptic Mouthwash
Listermint Mouthwash
Liver Herbs (Hall's)
Livibron Mixture
Loasid Tablets
Lobak Tablets
Lofthouse's Original Fisherman's Friend Honey Cough Syrup
London Herb and Spice Herbal Tea Bags
Loramet Capsules 1 mg
Loramet Tablets 0.5 mg
Loramet Tablets 1 mg
Lotussin Cough Syrup
L-Threonine Capsules
L-Threonine Tablets
Lucozade
Luma Bath Salts
Lung Balsam (Rusco)
Lyons Ground Coffee Beans
Lypsyl Lemon
Lypsyl Mint
Lypsyl Original
Lysaldin
M and B Children's Cough Linctus
Maalox Concentrate Suspension
Maalox Plus Tablets
Mackenzies Smelling Salts
Maclean Indigestion Power
Maclean Indigestion Tablets
Macleans Toothpaste
Magaldrate Tablets
Mainstay Pure Cod Liver Oil
Male Gland Double Strength Supplement Tablets
Male Sex Hormone Tablets (Diopharm)
Malinal Plus Tablets
Malinal Suspension 500 mg/5 ml

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

Malinal Tablets 500 mg
Malt Extract with Cod Liver Oil and Chemical Food (Distillers)
Malt Extract with Cod Liver Oil BPC and Hypophosphites (Distillers)
Malt Extract with Cod Liver Oil BPC Soft Extract (Jeffreys Miller)
Malt Extract with Haemoglobin and Vitamins Syrup (Distillers)
Malt Extract with Halibut Liver-Oil Syrup (Distillers)
Mandarin Tablets
Manna Herbal Rheumapainaway Tablets
Marvel
Matthew Cough Mixture
Maturaplus Tablets
Max Factor Face Powder
Max Factor Pan-Stik
Maxivits Tablets
Medathlon Aspirin Tablets 300 mg
Medazepam Capsules 5 mg
Medazepam Capsules 10 mg
Medex Elixir
Mediclean Soft Lens Solution
Medilax Tablets
Medipain Tablets
Medised Suspension
Medised Tablets
Medisoak Soft Lens Solution
Meditus Syrup
Medocodene Tablets
Meggeson Dyspepsia Tablets
Melissin Syrup
Melo Brand Glycerin Lemon and Honey with Ipecac
Meloids Lozenges
Menthacol Liquid
Menthells Pellet/Pill
Menthol and Benzoin Inhalation BP
Menthol and Eucalyptus (M in P) Pastilles (Thomas Guest)
Menthol Inhalation
Mentholated Balsam (Loveridge)
Mentholated Balsam (Savory and Moore)
Mentholated Balsam (Wright Layman and Umney)
Mentholated Balsam Mixture (Pilsworth Manufacturing)
Mentholatum Balm

Mentholatum Nasal Inhaler
Metatone
Methylcysteine Tablets 100 mg
Micaveen
Midro-Tea Power
Milgard Baby Cleansing Milk
Milk of Magnesia Tablets
Mil-Par Suspension
Milupa 7 Cereal Breakfast
Milupa Aptamil Baby Milk
Milupa Camomile Infant Drink
Milupa Fennel Variety Infant Drink
Milupa Harvest Muesli Breakfast
Milupa Modified Yoghurt
Milupa Special Formula HN25
Minadex Syrup
Minamino Syrup
Minivits Tablets
Minoxidil Cream
Minoxidil Lotion
Minoxidil Ointment
Minoxidil Solution (for external use)
Mira Flow Cleaning Solution
Mira Flow Soft Lens Solution
Mira Soak Lens Soaking Solution
Mira Sol Soft Lens Solution
Mitchell's Wool Fat Soap
Modifast Nutritionally Complete Supplemented Fasting Formula
Mogadon Capsules 5 mg
Mogadon Tablets 5 mg
Moorland Indigestion Tablets
Morning Glory Tablets
Morny Lavender Talc
Mrs Cullen's Lemsoothe Powder
Mrs Cullen's Powders
Mu-Cron Tablets
Mucodyne Capsules
Mucodyne Syrup
Mucodyne Forte Syrup
Mucodyne Forte Tablets

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Mucodyne Paediatric Syrup
Mucofalk Sachets
Mucorex Syrup
Mucorex Tablets
Mucron Liquid
Muffin Linctus
Multi-Vitamin Tablets (English Grains)
Multivitamin Capsules (Regent Laboratories)
Multivitamin Tablets (Approved Prescription Services)
Multivitamin Tablets (Chemipharm)
Multivitamin Tablets (Evans Medical)
Multivitamin Tablets (UAC International)
Multivitamin with Mineral Capsules (Potters)
Multivitamin with Minerals Tablets (Chemipharm)
Multivite Pellets
Multone Tablets
My Baby Cough Syrup
Mycolactine Tablets
Mylanta Liquid
Mylanta Tablets
Myolgin Tablets
N Tonic Syrup (Cupal)
N-300 Capsules
Napoloids Tablets
Napsalgesic Tablets
Natex 12A Tablets
Natural Bran
Natural Herb Laxative Tablets (Brome and Schimmer)
Natural Herb Laxative Tablets (Kerbina)
Natural Herb Tablets (Dorwest)
Natural Herb Tablets (Kerbina)
Natural Herb Tablets (Lane)
Naturavite Tablets
Naudicelle
Neo-Cytamen Injection 250 mcg/ml
Neo-Cytamen Injection 1000 mcg/ml
Neoklenz Powder
Neophyrn Nasal Drops
Neophyrn Nasal Spray
Nescafe Instant Coffee

Nestle Nativa HA
Nethaprin Expectorant
Neuro Phosphates
Neurodyne Capsules
Neutradol Concentrated Air Deodoriser
Neutradonna Powder
Neutradonna Sed Powder
Neutradonna Sed Tablets
Neutradonna Tablets
Neutrogena Soap
Neutrolactis Tablets
New Formula Beechams Powders Capsules
New Life Herbs
New Life Tablets
Newton's Children's Cough Treatment
Newton's Cough Mixture for Adults
Nezcaam Syrup
Nicobrevin
Nicorette
Nicorette Plus
Nilbite
Nirolex Expectorant Linctus
Nitrados Tablets 5 mg
Nitrazepam Capsules 5 mg
Nivea
No 177 Tablets (Leoren)
Nobrium Capsules 5 mg
Nobrium Capsules 10 mg
Nocold Tablets
Noctamid Tablets 0.5 mg
Noctamid Tablets 1 mg
Noctesed Tablets 5 mg
Noradran Bronchial Syrup
Norgesic Tablets
Normax Capsules
Normison Capsules 10 mg
Normison Capsules 20 mg
Norvits Syrup
Noscapine Linctus BP
Novasil Antacid Tablets

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Novasil Antacid Viscous Suspension
Nucross Coconut Oil
Nulacin Tablets
Nurodol Tablets
Nurofen Tablets 200 mg
Nurofen Soluble Tablets
Nurse Sykes Bronchial Balsam
Nurse Sykes Powders
Nu-Soft Baby Oil
Nux Vomica Acid Mixture
Nux Vomica Alkaline Mixture
Nux Vomica Elixir BPC
Nylax Tablets
Octovit Tablets
Oilatum Bar
Oilatum Soap
Olbas Oil
Omeiri Iron Tonic Tablets
Omilcaf Suspension
Onadox 118 Tablets
One Gram C Capsule
Opas Powder
Opas Tablets
Opobyl Bailly Pills
Oral B Plaque Check Disclosing Tablets
Orange and Halibut Vitamins (Kirby Warrick Pharmaceuticals)
Organidin Elixir
Organidin Solution
Organidin Tablets
Original Indigestion Tablets (Boots)
Orovite Elixir
Orovite Tablets
Orovite 7
Orthoxicol Syrup
Ostermilk Complete Formula
Ostermilk Two Milk Powder
Otrivine Nasal Drops 0.05%
Otrivine Nasal Drops 0.1%
Otrivine Nasal Spray 0.1%
Otrivine-Antistin Nasal Drops

Otrivine-Antistin Nasal Spray
Overnight Bedtime Cold Medicine
Owbridge's Cough Mixture
Oxamid Tablets 10 mg
Oxamid Tablets 15 mg
Oxamid Tablets 30 mg
Oxymetazoline Hydrochloride Nasal Drops 0.025%
Oxymetazoline Hydrochloride Nasal Drops 0.05%
Oxymetazoline Hydrochloride Nasal Spray 0.05%
Oxysept 1 Disinfecting Solution
Oxysept 2 Rinsing, Neutralising and Storing Solution
Ozium 500 Air Sanitizer
Ozium 1500 Air Sanitizer
Ozium 3000
Pacidal Tablets
Paedo-Sed Syrup
Pain Relief Tablets (Cox)
Pain Relief Tablets (Davidson)
Pameton Tablets
Panacron Nasal Spray
Panacron Tablets
Panadeine Co Tablets
Panadeine Forte Tablets
Panadeine Soluble Effervescent Tablets
Panadeine Tablets
Panadol Caplets
Panadol Extra Tablets
Panadol Junior Sachets
Panadol Soluble Tablets
Panadol Tablets
Panaleve Junior
Panasorb Tablets
Panets Tablets
Pango Pain Paracetamol Codeine Tablets (Cupal)
Pantene Hair Tonic
Papain Compound Tablets
Paprika Tablets (Kerbina)
Para-Seltzer Effervescent Tablets
Paracetamol and Caffeine Capsules
Paracetamol and Caffeine Tablets

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

Paracetamol DC Tablets
Paracetamol Tablets Soluble (Boots)
Paracetamol Tablets, Sorbitol Basis 500 mg
Paracets Tablets 500 mg
Paraclear Tablets
Paracodol Capsules
Paracodol Tablets
Paradeine R Tablets
Paragesic Effervescent Tablets
Parahypon Tablets
Parake Tablets
Paralgin Tablets
Paramin Capsules
Paramol Tablets
Paranorm Cough Syrup
Pardale Tablets
Parenamps Intramuscular Injection
Pastilaid Pastilles
Pavacol Cough Syrup
Paxadon Tablets
Paxalgesic Tablets
Paxidal Tablets
Paynocil Tablets
PEM Linctus
Penetrol Inhalant
Pentazocine-Aspirin Compound Tablets
Peplax Peppermint Flavoured Laxative Tablets
Peppermint Indigestion Tablets (Boots)
Pepto-Bismol Suspension
Pernivit Tablets
Persomnia Tablets
Petrolagar Emulsion Plain
Petrolagar Emulsion with Phenolphthalein
PF Plus Tablets
Pharmacin Capsules
Pharmacin Effervescent Plus C Tablets
Pharmacin Effervescent Tablets 325 mg
Pharmaton Capsules
Pharmidone Tablets
Phenergan Compound Expectorant Linctus

Phenolphthalein Compound Pills BPC
Phenolphthalein Compound Tablets BPC 1963
Phenolphthalein Tablets BP
Phensedyl Cough Linctus
Phensic Tablets
Phensic 2 Tablets
Phenylephrine Hydrochloride Nasal Drops 0.25%
Phenylephrine Hydrochloride Nasal Spray 0.5%
Phillips Iron Tonic Tablets
Phillips Tonic Yeast Tablets
Phillips' Toothpaste
Phisoderm
Pholcolix Syrup
Pholcomed D Linctus
Pholcomed Diabetic Forte Linctus
Pholcomed Expectorant
Pholcomed Forte Linctus
Pholcomed Linctus
Pholcomed Pastilles
Pholtex Syrup
Pholtussa Mixture
Phosferine Liquid
Phosferine Multi-Vitamin Liquid
Phosferine Tablets
Phyllosan Tablets
Physeptone Linctus
Pile Mixture (Ayrton Saunders)
Pile Tablets (Ayrton Saunders)
Pine Catarrh Drops Lozenges
Piz Buin Children's Balm SPF 8
Piz Buin Creme Factor 6
Piz Buin Creme Factor 8
Piz Buin Lip Protection Stick SPF 8
Piz Buin SPF 6 Lotion
Piz Buin SPF 8 Lotion
Plax Anti-Plaque Pre-Brushing Rinse
Plenamin Super
Plenivite with Iron Tablets
Pliagel Soft Lens Solution
Plurivite M Tablets

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Plurivite Tablets
Poli-grip Denture Fixative Cream
Polyalk Gel
Polyalk Tablets
Polyvite Capsules
Potaba + 6 Capsules
Potaba + 6 Tablets
Potassium Bromide and Nux Vomica Mixture BPC 1963
Powdered Bran Tablets 2 g
Power Plus Super Multivitamin and Mineral Capsules
Power GLA 65 (Borage Oil) Capsules
Powerin Tablets
PP Tablets
PR Tablets
Prazepam Tablets 10 mg
PRD 200 Tablets 600 mg
Preflex Solution
Pregnadon Tablets
Pregnavite Forte Tablets
Premark Tablets 20 mg
Prenatal Dri-Kaps Capsules
Prenatol Anti Stretch Mark Cream
Primes Premiums Tablets
Priory Cleansing Herbs Powder
Procol Capsules
Proctofibe Tablets
Prodexin Tablets
Proflex Tablets 200 mg
Progress Powder
Propain Tablets
Pro-Plus He-Vite Elixir
Proteolised Liver Tablets
Pro-Vitamin A Capsules (Rodale)
Pru Sen Tablet Bar
Prymecare Tablets for Soft and Gas Permeable Lenses
Prymeclean Cleaning Solution for Soft Lenses
Prymesoak Soaking Solution for Soft Lenses
Pulmo Bailly Liquid
Purgoids Tablets
Pyridoxine Tablets, Slow 100 mg

Quick Action Cough Cure (Brian C Spencer)
Quiet Life Tablets
Rabenhorst Tomato Juice
Raspberry Tablets No. B039
Rayglo Chest Rub Ointment
Rayglo Laxative Tablets
Reactivan Tablets
Red Catarrh Pastilles (Baldwin)
Redelan Effervescent Tablets
Redoxon Adult Multivitamin Tablets
Redoxon C Effervescent Tablets 1 g
Redoxon C Tablets 25 mg
Redoxon C Tablets 50 mg
Redoxon C Tablets 200 mg
Redoxon C Tablets 250 mg
Redoxon C Tablets 500 mg
Redoxon Children's Multivitamin Tablets
Redoxon Effervescent Tablets 1 g
Regaine
Regina Royal Jelly Capsules
Reg-U-Lett Tablets
Relanium Tablets 2 mg
Relanium Tablets 5 mg
Relanium Tablets 10 mg
Relcol Tablets
Remnos Tablets 5 mg
Remnos Tablets 10 mg
Rennie Tablets
Rennie Gold Tablets
Rennie Plus Tablets
Resolve Granules
Respaton
Rheumavit Tablets
Rhuaka Herbal Syrup
Rhuaka Tablets
Rhubarb and Soda Mixture Ammoniated BP
Rhubarb Compound Mixture BPC
Rhubarb Mixture Compound Paediatric BPC
Ribena
Riddovydrin Liquid

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

Rinurel Linctus
Rinurel Tablets
Rite-Diet Diabetic Cherry Cake
Rite-Diet Diabetic Fruit Cake
Rite-Diet Gluten-Free Baking Powder
Rite-Diet Gluten-Free Biscuits (chocolate chip cookies; half-coated chocolate biscuit; half covered chocolate digestive biscuit; custard cream biscuit; Lincoln biscuit; shortcake biscuit; sultana biscuit; soya bran)
Rite-Diet Gluten-Free Canned Rich Fruit Cake
Rite-Diet Gluten-Free Crunchy Bars
Rite-Diet Gluten-Free Muesli Cookies
Rite-Diet Macaroni in Mushroom Sauce, Low Protein/Gluten Free
Rite-Diet Spaghetti with Tomato Sauce, Low Protein/Gluten-Free
Robaxisal Forte Tablets
Roberts Aspirin and Caffeine Tablets
Robinsons Baby Rice
Robitussin AC Liquid
Robitussin Cough Soother
Robitussin Cough Soother Junior Formula
Robitussin Expectorant
Robitussin Expectorant Plus
Robitussin Liquid
Robitussin Plus Liquid
Robitussin Syrup
RoC Compact Cleanser
RoC Eye Make-Up Remover Lotion
RoC Foundation Cream
RoC Vitamin Cream
Rock Salmon Cough Mixture
Rohypnol Tablets 1 mg
Roscorbic Effervescent Tablets
Roscorbic Tablets 25 mg
Roscorbic Tablets 50 mg
Roscorbic Tablets 200 mg
Roscorbic Tablets 500 mg
Rose Hip C-100 Capsules
Rose Hip C-200 Capsules
Rose Hip Tablets (English Grains)
Rose Hip Tablets (Potters)
Rose Hip Tablets (Roberts)

Rosemary Bath
Rosmax Syrup
Roter Tablets
Rovigon
Rubelix Syrup
Rubraton B Elixir
Ruby Tonic Tablets (Jacksons)
Rum Cough Elixir
Ruthmol
Rutin Plus Tablets (Gerard)
Safapryn Tablets
Safapryn-Co Tablets
Safflower Seed Oil
Sainsbury's Aspirin Tablets 300 mg
Sainsbury's Cold Powders with Blackcurrant
Sainsbury's Hot Lemon Powders
Sainsbury's Indigestion Tablets
Sainsbury's Junior Soluble Aspirin Tablets
Sainsbury's Paracetamol Tablets 500 mg
Sainsbury's Soluble Aspirin Tablets
St Clement's Fruit Juice Concentrate
Salzone Syrup
Salzone Tablets 500 mg
Sanatogen Junior Vitamins Tablets
Sanatogen Multivitamins Plus Iron (Formula One) Tablets
Sanatogen Multivitamins Tablets
Sanatogen Nerve Tonic Powder
Sanatogen Selected Multivitamins Plus Iron (Formula Two) Tablets
Sanatogen Tonic
Sancos Compound Linctus
Sancos Syrup
Savant Tablets
Savlon Baby Care Baby Bath
Savlon Baby Care Cream
Savlon Baby Care Lotion
Savlon Baby Care Oil
Savlon Baby Care Powder
Savlon Baby Care Shampoo
Savlon Baby Care Soap
Saxin

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SBL Junior Cough Linctus
SBL Soothing Bronchial Linctus
Schar Gluten Free Sponge Cake
Scholl Foot Refresher Spray
Scott's Cod Liver Oil Capsules
Scott's Emulsion
Scott's Husky Biscuits
Seaweed Vitamin A Ester BP and Vitamin D BP Capsules (Regent Laboratories)
Sebbix Shampoo
Secloclin Capsules
Sedazin Tablets 1 mg
Sedazin Tablets 2.5 mg
Selora Sodium-free Salt Substitute
Selsun Soft Conditioner
Senlax Tablets
Senna Laxative Tablets (Boots)
Senna Tablets (Potters)
Senokot Tablets
Senotabs Tablets
Sensodyne Toothpaste
Serenid D Tablets 10 mg
Serenid D Tablets 15 mg
Serenid Forte Capsules 30 mg
Sertin Tablets
Setamol Soluble Tablets
Setlers Extra Strength Tablets
Setlers Liquid
Setlers Tablets
Seven Seas Cod Liver Oil
Seven Seas Formula 70 Multivitamin Multimineral Capsules
Seven Seas Malt and Cod Liver Oil
Seven Seas Orange Syrup and Cod Liver Oil
Seven Seas Pure Cod Liver Oil Capsules
Seven Seas Start Right Cod Liver Oil for Babies
Sidros Tablets
Silk-Lax Tablets
Siloxyl Suspension
Siloxyl Tablets
Simeco Suspension
Simeco Tablets

Simple Hair Conditioner
Simple Shampoo
Simple Soap
Sine-Off Tablets
Sinitol Capsules
Sinutab Tablets
Sionon Sweetner
Skin Glow Capsules
SMA Gold Cap Powder and Ready-to-Feed
SMA Powder and Concentrated Liquid
Snufflebabe Vapour Rub
Soaclens Solution
Softtab Soft Lens Care Tablets
Solis Capsules 2 mg
Solis Capsules 5 mg
Solis Capsules 10 mg
Solmin Tablets
Solpadeine Capsules
Solpadeine Forte Tablets
Solpadeine Tablets Effervescent
Solprin Tablets
Soluble Aspirin Tablets for Children (Boots)
Soluble Phensic Tablets
Solusol Solution
Somnite Suspension 2.5 mg/5 ml
Somnite Tablets 5 mg
Soquette Soaking Solution
Sovol Liquid
Sovol Tablets
Soya Powder and Nicotinamide Tablets
Special Stomach Powder (Halls)
Spectraban 4 Lotion
SPHP Tablets
Squill Linctus Opiate BP (Gee's Linctus)
Squill Linctus Opiate, Paediatric, BP
Squire's Soonax Tablets
SR2310 Expectorant
SR Toothpaste (Gibbs)
Staffords Mild Aperient Tablets
Staffords Strong Aperient Tablets

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

Steri-Clens Solution
Steri-Solve Soft Lens Solution
Sterling Health Salts Effervescent
Sterling Indigestion Tablets
Sterling Paracetamol Tablets
Sterogyl Alcoholic Solution
Stomach Aids Tablets
Stomach Mixture (Herbal Laboratories)
Stomach Mixture H138 (Southon Laboratories)
Stomach Powder (Diopharm)
Stomach Tablets (Ulter)
Street's Cough Mixture
Strengthening Mixture (Hall's)
Stress B Supplement Tablets
Strychnine and Iron Mixture BPC 1963
Strychnine Mixture BPC 1963
Stute Diabetic Blackcurrant Jam
Stute Diabetic Marmalade
Sudafed Co Tablets
Sudafed Expectorant
Sudafed Linctus
Sunerven Tablets
Super Plenamins Tablets
Super Yeast + C Tablets
Superdrug Health Salts
Surbex-T Tablets
Surem Capsules 5 mg
Surem Capsules 10 mg
Surelax Laxative Tablets
Sweetex
Sylopal Suspension
Sylphen Tablets
Syn-Ergel
Syndol Tablets
Syrтусsar Cough Syrup
T-Zone Decongestant Tablets
Tabasan Tablets
Tablets No. B006
Tablets No. B011
Tablets No. B015

Tablets No. B024
Tablets No. B025
Tablets No. B029
Tablets No. B034
Tablets No. B035
Tablets No. B036
Tablets No. B037
Tablets No. B038
Tablets No. B040
Tablets No. B041
Tablets No. B045
Tablets No. B048
Tablets No. B070
Tablets No. 268A (Potters)
Tablets to Formula A10
Tablets to Formula A11
Tablets to Formula A18
Tablets to Formula A19
Tablets to Formula A20
Tablets to Formula A22
Tablets to Formula A23
Tablets to Formula A31
Tablets to Formula A32
Tablets to Formula A33
Tablets to Formula A45
Tablets to Formula A51
Tablets to Formula A63
Tablets to Formula A67
Tablets to Formula A68
Tablets to Formula A69
Tablets to Formula A70
Tablets to Formula A71
Tablets to Formula A105
Tablets to Formula A111
Tablets to Formula A114
Tablets to Formula A120
Tablets to Formula A147
Tablets to Formula A157
Tablets to Formula A158
Tablets to Formula A161

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

Tablets to Formula A162
Tablets to Formula A164
Tablets to Formula A165
Tablets to Formula A166
Tablets to Formula A167
Tablets to Formula A169
Tablets to Formula A175
Tablets to Formula A183
Tablets to Formula A184
Tablets to Formula A190
Tablets to Formula A195
Tablets to Formula A202
Tablets to Formula A203
Tablets to Formula A213
Tablets to Formula A221
Tablets to Formula A244
Tablets to Formula A245
Tablets to Formula A246
Tablets to Formula A247
Tablets to Formula A248
Tablets to Formula A249
Tablets to Formula A250
Tablets to Formula A264
Tablets to Formula A266
Tablets to Formula A270
Tablets to Formula A271
Tablets to Formula A272
Tablets to Formula A273
Tablets to Formula A274
Tablets to Formula A275
Tablets to Formula A276
Tablets to Formula A277
Tablets to Formula A298
Tablets to Formula A301
Tablets to Formula A316
Tablets to Formula BA6
Tablets to Formula B10
Tablets to Formula B15
Tablets to Formula B18
Tablets to Formula B19

Tablets to Formula B20
Tablets to Formula B21
Tablets to Formula B22
Tablets to Formula B25
Tablets to Formula B26
Tablets to Formula B29
Tablets to Formula B41
Tablets to Formula B48
Tablets to Formula B51
Tablets to Formula B56
Tablets to Formula B58
Tablets to Formula B64
Tablets to Formula B65
Tablets to Formula B66
Tablets to Formula B67
Tablets to Formula B68
Tablets to Formula B70
Tablets to Formula B71
Tablets to Formula B72
Tablets to Formula B73
Tablets to Formula B74
Tablets to Formula B75
Tablets to Formula B76
Tablets to Formula B77
Tablets to Formula B78
Tablets to Formula B79
Tablets to Formula B80
Tablets to Formula B81
Tablets to Formula B82
Tablets to Formula B83
Tablets to Formula B85
Tablets to Formula B86
Tablets to Formula B87
Tablets to Formula B90
Tablets to Formula B91
Tablets to Formula B93
Tablets to Formula B94
Tablets to Formula B96
Tablets to Formula B98
Tablets to Formula B100

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

Tablets to Formula B102
Tablets to Formula B104
Tablets to Formula B117
Tablets to Formula B118
Tablets to Formula B120
Tablets to Formula B122
Tablets to Formula B124
Tablets to Formula B128
Tablets to Formula B141
Tablets to Formula B143
Tablets to Formula B145
Tablets to Formula B148
Tablets to Formula B156
Tablets to Formula B157
Tablets to Formula B158
Tablets to Formula B160
Tablets to Formula B163
Tablets to Formula B169
Tablets to Formula B178
Tablets to Formula B180
Tablets to Formula B181
Tablets to Formula B182
Tablets to Formula B190
Tablets to Formula B193
Tablets to Formula B207
Tablets to Formula B209
Tablets to Formula B210
Tablets to Formula B211
Tablets to Formula B212
Tablets to Formula B213
Tablets to Formula B214
Tablets to Formula B215
Tablets to Formula B216
Tablets to Formula B217
Tablets to Formula B218
Tablets to Formula B222
Tablets to Formula B223
Tablets to Formula B224
Tablets to Formula B225
Tablets to Formula B227

Tablets to Formula B228
Tablets to Formula B231
Tablets to Formula B234
Tablets to Formula B235
Tablets to Formula B236
Tablets to Formula B243
Tablets to Formula B248
Tablets to Formula B250
Tablets to Formula B251
Tablets to Formula B252
Tabmint Anti-Smoking Chewing Gum Tablets
Tancolin Childrens Cough Linctus
Tedral Expectorant
Temazepam Gelthix Capsules
Temazepam Planpak
Tensium Tablets 2 mg
Tensium Tablets 5 mg
Tensium Tablets 10 mg
Tercoda Elixir
Tercolix Elixir
Terpalin Elixir
Terperoin Elixir
Terpoin Antitussive
Terrabron
Three Noughts Cough Syrup
Tidmans Bath Sea Salt
Timotei Herbal Shampoo
Titan Hard Cleanser
Tixylix Cough Linctus
Tolu Solution BP
Tolu Compound Linctus Paediatric BP
Tolu Syrup BP
Tonatexa Mixture
Tonic Tablets (Thomas Guest)
Tonic Wines
Tonivitan A and D Syrup
Tonivitan B Syrup
Tonivitan Capsules
Top C Tablets
Toptabs

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Total All Purpose Solution
Totavit D R Capsules
Totolin Paediatric Cough Syrup
Tramil Capsules
Trancoprin Tablets
Transclean Cleaning Solution
Transdrop
Transoak Solution
Transol Solution
Tranxene Capsules 7.5 mg
Tranxene Capsules 15 mg
Tranxene Tablets 15 mg
Triocos Linctus
Triogesic Elixir
Triogesic Tablets
Triominic Syrup
Triominic Tablets
Triopaed Linctus
Triotussic Suspension
Trioivit Tablets
Triple Action Cold Relief Tablets
Tritamyl Gluten-Free Bread Mix
Tropium Capsules 5 mg
Tropium Capsules 10 mg
Tropium Tablets 5 mg
Tropium Tablets 10 mg
Tropium Tablets 25 mg
Trufree Crispbran
Tudor Rose Bay Rhum
Tums Tablets
Tusana Linctus
Tussifans Syrup
Tussimed Liquid
Two-A-Day Iron Jelloids Tablets
Tymasil
Tysons Catarrh Syrup
Udenum Gastric Vitamin Powder
Ultracach Analgesic Capsules
Ultradal Antacid Stomach Tablets
Ultralief Tablets

Uncoated Tablets to Formula A323
Uncoated Tablets to Formula A325
Unichem Baby Oil
Unichem Chesty Cough Linctus
Unichem Children's Dry Cough Linctus
Unichem Cold Relief Capsules
Unichem Dry Cough Linctus
Uniflu Tablets
Unigesic Capsules
Unigest Tablets
Unisomnia Tablets 5 mg
United Skin Care Programme (Uni Derm; Uni-Salve; Uni-Wash)
Vagisil Feminine Powder
Valium Capsules 2 mg
Valium Capsules 5 mg
Valium Syrup 2 mg/5 ml
Valium Tablets 2 mg
Valium Tablets 5 mg
Valium Tablets 10 mg
Valonorm Tonic Solution
Valrelease Capsules
Vanamil Tablets
Vapex Inhalant
Vaseline Intensive Care Lotion
Vaseline Intensive Care Lotion Herbal and Aloe
Veganin Tablets
Veno's Adult Formula Cough Mixture
Veno's Cough Mixture
Veno's Honey and Lemon Cough Mixture
Veracolate Tablets
Verdiviton Elixir
Vervain Compound Tablets
Vi-Daylin Syrup
Vicks Coldcare Capsules
Vicks Cremacoat Syrup
Vicks Cremacoat Syrup with Doxylamine Succinate
Vicks Cremacoat Syrup with Guaiphenesin
Vicks Cremacoat Syrup with Paracetamol and Dextromethorphan
Vicks Daymed
Vicks Formula 44 Cough Mixture

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Vicks Inhaler
Vicks Medinite
Vicks Pectorex Solution
Vicks Sinex Nasal Spray
Vicks Vapo-Lem Powder Sachets
Vicks Vapour Rub
Videnal Tablets
Vigour Aids Tablets
Vigranon B Complex Tablets
Vigranon B Syrup
Vikelp Coated Tablets
Vikonon Tablets
Villescon Liquid
Villescon Tablets
Virvina Elixir
Visclair Tablets
Vita Diem Multi Vitamin Drops
Vita-Six Capsules
Vitalin Tablets
Vitamin and Iron Tonic (Epitone) Solution
Vitamin A and D Capsules BPC 1968 (Regent Laboratories)
Vitamin A Ester and Vitamin D2 Capsules (Regent Laboratories)
Vitamin A Ester Capsules (Regent Laboratories)
Vitamin A Ester Conc, Alpha Tocopherol Acetate Nat Capsules (Regent Laboratories)
Vitamin A 4500 Units and Vitamin D2 Capsules (Regent Laboratories)
Vitamin A 6000 Units and Vitamin D2 Capsules (Regent Laboratories)
Vitamin A, C and D Tablets (Approved Prescription Services)
Vitamin A, D and C Tablets (Regent Laboratories)
Vitamin B Complex Tablets (English Grains)
Vitamin B Complex with Brewer's Yeast Tablets (English Grains)
Vitamin B1 Dried Yeast Powder (Distillers)
Vitamin B1 Yeast Tablets (Distillers)
Vitamin B12 Tablets 0.01 mg
Vitamin B12 Tablets 0.025 mg
Vitamin B12 Tablets 0.05 mg
Vitamin B12 Tablets 0.10 mg
Vitamin B12 Tablets 0.25 mg
Vitamin B12 Tablets 0.5 mg
Vitamin B12 Tablets 1 mg
Vitamin C Tablets Effervescent 1 g

Vitamin Capsules (Regent Laboratories)
Vitamin Malt Extract with Orange Juice (Distillers)
Vitamin Mineral Capsules (Regent Laboratories)
Vitamin Tablets No. B077
Vitamin Tablets No. B081
Vitamin Tablets No. B084
Vitaminised Iron and Yeast Tablets (Kirby Warrick Pharmaceuticals)
Vitanorm Malt Extract
Vitanorm Malt Extract Syrup
Vitsafe's CF Kaps Tablets
Vitasafe's WCF Kaps Tablets
Vitathorne Chilblain Tablets
Vitatrop Tablets
Vitavel Powder for Syrup
Vitavel Solution
Vitepron Tablets
Vitorange Tablets
Vitrite Multi-Vitamin Syrup
Vykmin Fortified Capsules
W L Tablets
Wallachol Syrup
Wallachol Tablets
Wate-on Emulsion
Wate-on Emulsion Super
Wate-on Tablets
Wate-on Tablets Super
Wate-on Tonic
Waterhouses All Fours
Wines
Woodwards Nursery Cream
Wrights Glucose with Vitamin D Powder
Wrights Vaporizing Fluid
Xanax Tablets 0.25 mg
Xanax Tablets 0.5 mg
Xanax Tablets 1.0 mg
Yeast and B12 Tablets (English Grains)
Yeast Plus Tablets (Thomas Guest)
Yeast-Vite Tablets
Yellow Phenolphthalein Tablets (any strength)
Zactirin Tablets

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Zefringe Sachets
 Zendium Toothpaste
 Zubes Expectorant Cough Syrup
 Zubes Original Cough Mixture
 Zyriton Expectorant Linctus

SCHEDULE 11

DRUGS TO BE PRESCRIBED UNDER PHARMACEUTICAL SERVICES ONLY IN CERTAIN CIRCUMSTANCES

Column 1 <i>Drug</i>	Column 2 <i>Patient</i>	Column 3 <i>Condition</i>
Acetylcysteine Granules	Any patient	Treatment of abdominal complications associated with cystic fibrosis
Carbocisteine	A patient under the age of 18 who has undergone a tracheostomy	Treatment of any condition which through damage or disease, affects the airways and has required a tracheostomy
Clobazam	Any patient	Treatment of epilepsy
Pregnavite Forte F	A woman who has previously given birth to a child (whether or not born alive) with a defect of the neural tube or aborted a foetus with such a defect	Reduction of the risk of spina bifida or anencephaly in a child which may be born to the patient

SCHEDULE 12

Regulation 3(2) Schedule 2 Paragraph 47

INFORMATION TO BE INCLUDED IN PRACTICE LEAFLETS PERSONAL AND PROFESSIONAL DETAILS OF THE DOCTOR

1. Full name.
2. Sex.
3. Medical qualifications registered by the General Medical Council.
4. Date and place of first registration as medical practitioner.

PRACTICE INFORMATION

5. The times approved by the FHSA during which the doctor is personally available for consultation by his patients at his practice premises.
6. Whether an appointments system is operated by the doctor for consultation at his practice premises.

7. If there is an appointments system, the method of obtaining a non-urgent appointment and the method of obtaining an urgent appointment.
8. The method of obtaining a non-urgent domiciliary visit and the method of obtaining an urgent domiciliary visit.
9. The doctor's arrangements for providing personal medical services when he is not personally available.
10. The method by which patients are to obtain repeat prescriptions from the doctor.
11. If the doctor's practice is a dispensing practice the arrangements for dispensing prescriptions.
12. If the doctor provides clinics for his patients, their frequency, duration and purpose.
13. The numbers of staff, other than doctors, assisting the doctor in his practice and a description of their roles.
14. Whether or not the doctor provides child health surveillance services, contraceptive services, maternity medical services, minor surgery services.
15. Whether the doctor works single handed, in partnership, part-time or on a job sharing basis, or within a group practice of doctors.
16. The nature of any arrangements whereby the doctor or his staff receive patients' comments on his provision of general medical services.
17. The geographical boundary of his practice area by reference to a sketch, diagram or plan.
18. Whether the doctor's practice premises have suitable access for all disabled patients and, if not, the reasons why they are unsuitable for particular types of disability.
19. If an assistant is employed, details of that assistant as specified in paragraphs 1 to 5 of this Schedule.
20. If the practice is either a general practitioner training practice, for the purposes of the National Health Service (Vocational Training) Regulations 1979(65), or undertakes the teaching of undergraduate medical students, the nature of the arrangements for drawing this to the attention of patients.

SCHEDULE 13

Regulation 3(2) Schedule 2, Paragraph 50

INFORMATION TO BE PROVIDED IN ANNUAL REPORTS

1. The number of staff, other than doctors, assisting the doctor in his practice, by reference to—
 - (a) the total number but not by reference to their names;
 - (b) the principal duties and hours of employment of each employee;
 - (c) the qualifications of each employee;
 - (d) the relevant training undertaken by each employee during the preceding 5 years.
2. The following information as respects the practice premises—
 - (a) any variations in relation to floor space, design or quality since the last annual report;
 - (b) any such variations anticipated in the course of the forthcoming period of 12 months.

(65) S.I. 1979/1644.

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3. The following information as respects the referral of patients to other services under the Act during the period of the report:

(a) as respects those by the doctor to a specialist—

(i) the total number of patients referred as in-patients,

(ii) the total number of patients referred as out-patients,

by reference in each case to whichever of the following clinical specialities applies, and specifying in each case the name of the hospital concerned:

— General Surgical

— General Medical

— Orthopaedic

— Rheumatology (Physical Medicine)

— Ear, Nose and Throat

— Gynaecology

— Obstetrics

— Paediatrics

— Ophthalmology

— Psychiatry

— Geriatrics

— Dermatology

— Neurology

— Genito-urinary

— X-ray

— Pathology

— Others (including plastic surgery, accident or emergency and endocrinology); and

(b) the total number of cases of which the doctor is aware (by reference to the categories listed in sub-paragraph (a)) in which a patient referred himself to services under the Act.

4. The doctor's other commitment as a medical practitioner, with reference to—

(a) a description of any posts held; and

(b) a description of all work undertaken,

Including, in each case, the annual hourly commitment.

5. The nature of any arrangements whereby the doctor or his staff received patients' comments on his provision of general medical services.

6. The following information as respects orders for drugs and appliances:—

(a) whether the doctor's practice has its own formulary;

(b) whether the doctor uses a separate formulary;

(c) the doctor's arrangements for the issue of repeat prescriptions to patients.

EXPLANATORY NOTE

(This note is not part of the Regulations)

These Regulations consolidate, with amendments, those provisions of the National Health Service (General Medical and Pharmaceutical Services) Regulations 1974 (“the 1974 Regulations”) which relate to general medical services. The provisions of the 1974 Regulations which relate to pharmaceutical services are consolidated, with amendments, in the National Health Service (Pharmaceutical Services) Regulations 1992. The 1974 Regulations and all subsequent amendments are revoked by regulation 26 and Schedule 4 to the National Health Service (Pharmaceutical Services) Regulations 1992. These Regulations therefore regulate the terms on which general medical services are provided under the National Health Service Act 1977.

The principal changes effected by these Regulations are the following.

Regulation 5 makes provision for inclusion in a medical list or to succeed to a vacancy. Where the report which a Family Health Services Authority (“FHSA”) has to send to the Medical Practices Committee does not support a doctor’s application, the Medical Practices Committee is required to show that part of the report to the doctor concerned. Where the Medical Practices Committee refuses an application which the FHSA did support, regulation 14 requires it to send to the doctor that part of the report which did support the application. Regulation 5 and the various sections of Part III of Schedule 3 make provision for the content of reports from FHSAs to the Medical Practices Committee, first, in respect of different kinds of application and secondly, where an application is for inclusion in the medical list of more than one FHSA.

The Regulations enable a doctor to appeal against a decision of an FHSA concerning the number of patients on his list (regulation 24). Provision is included to ensure that doctors are given notice of hearings and of appeals relating to their admission onto the child health surveillance list, the obstetric list and the minor surgery list and that they are given reasons for decisions in such cases.

The Regulations contain new provisions relating to the inclusion of a doctor in an obstetric list and the provision of maternity medical services. The procedure for admission to an obstetric list, which reflects that applicable to admission to a child health surveillance list and a minor surgery list, is set out in regulation 30. The criteria to be considered by an FHSA in deciding whether to admit a doctor to such an obstetric list, which relate to that doctor’s obstetric qualifications and experience, are contained in Part I of Schedule 5. Arrangements for maternity medical services and the obligations of a doctor who has undertaken to provide such services are contained in regulation 31 and Part II of Schedule 5, respectively. Maternity medical services are defined to comprise four component parts and a doctor who undertakes to provide maternity medical services may undertake to do so in respect of any or all of those parts.

The provisions in the doctors’ terms of service (Schedule 2) concerning arrangements made by a doctor for the provision of general medical services by a deputy are amended to clarify the extent of a doctor’s obligation to give treatment personally.

These Regulations also make a number of amendments to the 1974 Regulations which are minor or consequential drafting amendments or procedural in nature.