

**ROYAL GOVERNMENT OF BHUTAN
MEDICAL AND HEALTH COUNCIL**

REGULATIONS



KINGDOM OF BHUTAN

**MEDICAL AND HEALTH COUNCIL SECRETARIAT
THIMPHU**

Table of contents

PART – I

1.	Preliminary.	04
2.	Proclamation.	05
3.	Short Title and Commencement and Extent.	05
4.	Jurisdiction.	05
6.	Definitions.	06

PART - II

7.	Regualtions governing the Etiquette, Ethic and Conduct	09
8.	Standard of Code of Etiquette, Ethics and Conduct in general.....	10
12.	Duties to Society.	14
13.	Duties to Profession.	15
13.	Speciality specific standards of code of Etiquette, Ethics and Conduct	16
14.	Regulations governing offenses	20
15.	Negligence of duty	21
16.	Procedures for complaint against practitioners	22
17.	The powers of Professional Ethics Sub-committee	22

Part - III

18.	Regulations governing the Registration.....	23
19.	Registration Criteria.....	24
20.	Registration Committee	24
21.	Registration Procedure	25
22.	Certificate for registration.....	26
23.	Regularory Jurisdiction of registration	27
24.	Restoration of names to a register.....	28
25.	Privileges Emanating from registration	29

PART -IV

25.	Regulations governing uniform standard	
-----	--	--

of education and training.	31
26. Uniformity in Standards.	32
27. Minimum standard of education and training.....	33
28. Criteria and procedures for appointment of inspectors, visitors, observers & their ToR.....	37
29. Minimum requirement for induction of teachers of medical and health sciences.....	38
30. Guidelines for the conduction of examination.....	39
PART – V	
31. Regulations governing the recognition of local and foreign institutes and qualification.....	40
32. Minimum criteria for recognition of local institutions	41
33. Recognised institutions of foreign countries.....	42
34. Procedures for recognition of institutions.....	43
PART –VI	
35. Regulations governing functions of various council organs.....	44
36. Guidelines on nonimation of council members	45
37. Guidelines on formation of sub-committees.....	46
38. Functions of sub-committees	47
39. Towards medical and ahelth council autonomy.....	47
40. Budget Procedure.....	48
41. Professional Ethic sub-committee.....	49
PART – VII	
42. Supplementaries to the regulations governing etiquette, ethic and conduct	52
43. Grading of offenses	54
44. Supplementaries to regulations governing registration.....	55
45. Supplementaries to regulations governing schedules	67

Preamble

Regulations to provide for enforcement of provision of the act that reads as:

An act to provide for the constitution of a composite council for regulation of the medical and health profession in all its aspects especially in respect of ethics and matters concerned therewith.

Whereas a council needs to be established for regulations of medical and health profession in all its aspects and a common register for all categories of medical and health professionals needs to be maintained.

And whereas, a uniform standard of education and training for all categories of medical and health professionals needs to be ensured.

And whereas local and foreign medical and health institutions, scholars and academicians needs to be recognised.

The council may by notification make rules and regulations to carry out the purposes of this Act. Without prejudice to the generality of this power, such rules and regulations may amongst others provide for the following:

- a) Management and maintenance of the property of the Council and audit of account thereof.
- b) Holding of the meetings of the Council and its subcommittees.
- c) Nomination, appointment, resignations and terminations of the members of the Council.
- d) Power and duties of the office bearers of the Council.
- e) Mechanisms and procedures of appointment of the members of the Executive Committee, Sub-Committees and other committees.

- f) Tenure of office of the members and office bearers of the Council.
- g) Preparation of schemes, strategies and programmes toward achieving the objectives of the Council.
- h) Setting up of minimum criteria for recognition of institutes, teachers, and courses.
- i) Fixation of the amount of fees payable by individuals and institutions for registration.
- j) Fixation of amount of fees payable by institutions for recognition and inspections.
- k) Criteria and procedures for appointments of inspectors, visitors, observers and their terms of references.
- l) Framing of guidelines for the conduct of examinations of
- m) Minimum requirement for induction of teachers of medical and Health sciences.
- n) Standards of professional conduct, etiquette and code of ethics to be observed by all professionals.

Supplementary is because the main body of the regulations texts does not allow details and features that dater easy comprehension of thoughts and does not smudge the outlook.

PART – I

PRELIMINARY

PROCLAMATION

In exercise of the powers conferred under chapter II, section 17 and chapter VI, section a –n of the Medical and Health Council Act, 2002, Kingdom of Bhutan, Medical and Health Council, Royal Government of Bhutan, by public notification, make the following regulations for the purpose of laying down standards of professional etiquette, ethic and conduct, maintenance of common register of medical and health professionals, ensuring uniform standard of health and medical education and training for all categories of medical and health professionals, recognition of national and international medical and health institutes, scholars, academicians and qualifications and above all to carry out the purposes of Medical and Health Council Act 2002 of Kingdom of Bhutan.

Regulations:

The digits before first point (.) are the serial numbers of the regulations. The digits after first point (.) are clauses and the digits after second point (.) are sub-clauses.

1: Short Title and Commencement and Extent

1.1: These regulations may be cited as “Medical and Health Council Regulations”.

1.2: The regulations shall come into force on 02 February 2005, corresponding 23rd day of the 12th month of the Wood Bird Year of the Bhutanese calendar.

1.3: The regulations shall extend to the Kingdom of Bhutan.

2: Jurisdiction

The regulation shall have the following jurisdiction:

- 2.1: The regulations shall serve as the working document to Medical and Health Council and the actions taken will be based on these regulations.
- 2.2: Notwithstanding regulations 2.1, the regulations are not exhaustive and wherever necessary the case shall be settled by a responsible body of the professionals formed by the Council.
- 2.3: The regulations may be revised every five years.
- 2.4: The Medical and Health Council Regulations shall have the force of law.
- 2.5: To further strengthen the regulations, the council shall frame set of rules wherever necessary and in particular to facilitate various organs of the Council function expeditiously.

3: **Definitions**

3.1: All expressions used and not defined in these regulations shall have the meaning assigned to them in the Act.

3.2: In these regulations, unless the context otherwise requires:

3.2.1: “**Act**” means the Medical and Health Council Act 2002, Kingdom of Bhutan.

3.2.2: “**Council**” means Medical and Health Council, Kingdom of Bhutan.

3.2.3: “**Regulations**” means Medical and Health Council regulations.

3.2.4: “**Rules**” means Medical and Health Council rules

3.2.5: “**Registration**” means registration for the purpose of enrolment on Medical and Health Council register after obtaining the recognized primary medical or health qualification followed by completion of such practical training as prescribed in Bhutan or abroad as per the provision of the Act.

- 3.2.6: **“Temporary Registration”** means registration of foreign nationals holding qualifications from institutions recognized by the Council.
- 3.2.7: **“Provisional Registration”** means provisional registration in Medical and Health Council register for the purpose of undergoing practical training in Bhutan and for no other purpose, by a Bhutanese citizen possessing any primary medical and health qualification but has not undergone such practical training after obtaining that qualification as may be required by the rules or regulations in force in the country granting the qualifications.
- 3.2.8: **“Prescribed”** means prescribed under the regulations made under this Act.
- 3.2.9: **“Prescribed Authority”** means a recognized medical institution or any other examining body authorized by the Medical and Health Council to conduct the screening test.
- 3.2.10: **“Primary Medical and Health Qualification”** means a medical and health qualification awarded by any medical or health institutions within or outside Bhutan, which is a recognized qualification for enrolment as medical or health professionals in the country in which the institution awarding the said qualification is situated as validated in the Schedule under the Act and prescribed from time to time.
- 3.2.11: **“Qualifying Examination”** means examination to be qualified to become eligible for admission to medical or health courses recognized in Bhutan.
- 3.2.12: **"Executive Committee"** means the executive committee constituted under Chapter- II, Section 11 of the Act.
- 3.2.13: **“Inspectors”** means such qualified personnel or visitors who are capable of rendering advice or recommendations to the Council with regards to inspection of institutions and examinations (page 6 of Act).

- 3.2.14: **“Medical negligence”** means breach of duty of care and professionally approved practice towards a patient, which results in by an act of commission or omission, damage to a patient as defined by the Council from time to time.
- 3.2.15: **“Professional misconduct”** means medical and health professional in the pursuit of their profession having done something with regard to it, which will be reasonably regarded as disgraceful and dishonourable by their professional brethren of good repute and competency.
- 3.2.16: **“Consent”** means voluntary agreement, compliance or permission for examination, investigation and treatment of a patient in medical and health practices.
- 3.2.17: **“Medical or Health Professional”** means practitioner of the art and science of medicine or professionals in the field of health and health care who are duly authorized to do so by the Council.
- 3.2.18: **“Registered professional”** means medical and health professionals recognized and registered with Medical and Health Council.
- 3.2.19: **“Medical Ethics”** means standard moral duties of medical and health professionals in the practice of their profession, as stipulated or modified by the Medical and Health Council from time to time.
- 3.2.20: **Force of Law** means a body of rules that have been laid down for determining rights and legal obligations, which are recognized by the courts of justice.
- 3.2.21: **“Traditional Medicine”** means indigenous medicine recognized as a full-fledged branch of medical science by the Act.
- 3.2.22: **“Other Systems of Medicines”** means all other system of medicines besides allopathic system of medicines and

Bhutanese traditional medicine (gSo-ba Rigpa). These will also be under the purview of Medical And Health Council and professionals will have to be recognised and registered by the Council.

3.2.23: **“Recognized qualifications”** are those qualifications that conform to the standards required by Medical and Health Council regulations as to be fit for recognition.

3.2.24: **“Reasonable Care”** means for the purpose of this regulation is the standard of care in the medical and health profession of the ordinary skilled person exercising and professing to have that special skill at that time adjudged and accepted as proper by a responsible body or professional opinion.

PART –II

**REGULATIONS GOVERNING THE ETIQUETTE,
ETHICS, AND CONDUCT**

Purposes:

- To create and foster more disciplined body of medical and health professionals through an institutionalised process of standardization as to etiquette, ethic and conduct.
- To generate the sense of fraternity in and to propel the art and science of healing towards excellence.
- To enunciate a frame-work legal environment for the welfare of both the patients and professionals.

4: Standard Code of Etiquette, Ethic and Conduct in General

4.1: Code of etiquette

4.1.1: It is the prescribed norm of medical and health council that all registered medical and health professionals on duty shall present themselves in professional attire where required, if not in national dress.

4.1.2: Traditionally the professionals of medicine and health have been the symbol of health and hygiene. In the same manner, it is the stated policy of the medical and health council that every such practitioner is expected to conform to this norm, that shall be taken into considerations, while conferring the certificate of good standing, inter-alia.

4.1.3: The medical or health professionals being the natural role models of healthy habits are expected to refrain from smoking, chewing doma and imbibing alcoholic drinks in excessive quantities that may affect, his normal behaviour. Further, a registered professional shall totally abstain from use of psychotropic or habit-forming drugs.

4.2: Code of Ethics:

Every medical or health professional shall:

4.2.1: make the care of patients his/her first concern.

- 4.2.2: treat every patient politely and considerately.
- 4.2.3: respect patients' dignity and privacy.
- 4.2.4: listen to patients and respect their views.
- 4.2.5: give information to patients in a way that they can understand.
- 4.2.6: respect the rights of patients to be fully involved in decisions about their care.
- 4.2.7: keep professional knowledge and skills up to date.
- 4.2.8: recognize the limits of their professional competence.
- 4.2.9: be honest and trustworthy.
- 4.2.10: respect and protect confidential information.
- 4.2.11: make sure that personal beliefs do not prejudice patients' care.
- 4.2.12: act appropriately to protect patients from risk, if there is good reason to believe that a colleague or groups of colleagues are not fit to practice.
- 4.2.13: avoid abusing his/her position.
- 4.2.14: work with colleagues in ways that are in the best interest of the patient.
- 4.2.15: Shall respect and follow the hospital charter of patients right as approved by the medical and health council.
- 4.2.16: There is no rule preventing professionals from charging one another for their services but is generally regarded as a pleasure and privilege to give one's services free to a professional colleague.

4.2.17: Medical and health professional shall not indulge in habitual solicitation of home services and gifts from patients or their relatives.

4.3: Code of conduct:

4.3.1: Duties to patients

Every medical or health professional shall:

4.3.2: obtain from patient the consent for examination and treatment. All research projects must have ethical clearance from the research ethical committee.

4.3.3: make conscientious assessment of the history, symptoms and signs of a patient's condition. Order appropriate investigations and provide necessary treatment along with regular review and ensure follow up.

4.3.4: render competent and considerate professional management to provide best possible care.

4.3.5: take appropriate and prompt action wherever evidence suggests the existence of a condition that requires urgent medical intervention.

4.3.6: consult appropriate professional colleagues as and when the circumstances arise.

4.3.7: maintain professional secrecy.

4.3.8: ensure timely referral.

4.3.9: not practise active euthanasia.
Clause:

4.3.10: shall exercise due sensitivity and subtleness while disclosing critical or grave condition or death of the patient to the patient or the relatives as the case may be.

- 4.3.11: attend to all patients without discrimination on the basis of social, economic, religious or caste status.
- 4.3.12: medical and health professionals shall notify to the patients party when relieving the patient from treatment.
- 4.3.13: a professional shall not commercialize any secret remedy.
- 4.3.14: explain to the patient the likelihood of loss or impairment of some function following interventional procedure.
- 4.3.15: must ensure the presence of a female attendant during examination or procedure on a female patient.
- 4.3.16: explain the side effects and risks of potential hazardous drugs when it is being used.
- 4.3.17: examine the visual fields accordingly so that a declining vision is not incorrectly diagnosed as cataract and the treatment of glaucoma is delayed.
- 4.3.18: not indulge in any commercial dealing of human organs.
- 4.3.19: explain to the patient regarding the techniques used, pathological investigations required and also document the same clearly, precisely and accurately.
- 4.3.20: not perform illegal termination of pregnancy
- 4.3.21: be very careful to prevent the occurrence of foetal malformation while prescribing drugs to a pregnant or a lactating woman and shall provide counselling accordingly.
- 4.3.22: be extra careful not to leave any instrument in the body of the patient following surgical and other procedures.
- 4.3.23: use anaesthesia wherever possible when reducing fracture/dislocation so as to avoid discomfort to the patient.

- 4.3.24: take precautionary measures to ensure asepsis and minimize the occurrence of infection during procedures including open reduction or internal fixation of any fracture.
- 4.3.25: take necessary care with regards to dose and volume of drugs with potential damaging side effects.
- 4.3.26: keep proper clinical notes reflecting diagnosis, investigations, treatment and prognosis. Important points such as deterioration or improvement of the patient should be discussed with patient party.
- 4.3.27: show due respects and recognize the rights of the child as enshrined in the rights of the child charter.
- 4.3.28: be very careful while applying heat therapy or electric stimulation to avoid electric shock or burns.
- 4.3.29: maintain a standard of personal health such that the ability to provide care is not compromised.
- 4.3.30: use judgment regarding individual competence when accepting and delegating responsibility.
- 4.3.31: maintain standard of personal conduct, which reflect value on the profession and enhance public confidence.
- 4.3.32: ensure that the use of technology and scientific advances are compatible with the safety, dignity and rights of the people.
- 4.3.33: participate in creating and maintaining favourable working conditions in all profession.
- 4.3.34: sustain a cooperative relationship with co-workers in nursing and other fields.

4.4: Duties to Society

All medical and health professionals shall disclose information even if it is obtained in confidence from patient when it is necessary to do so in the interest of the security of the state, the maintenance of law and order, in the court of law and infectious diseases of public health importance or communicable diseases. It is obligatory to inform police on crimes.

4.5: Duties to profession

Every medical or health professional shall:

- 4.5.1: try and attain highest standard of knowledge.
- 4.5.2: try and attain highest standard of professional behaviour.
- 4.5.3: share necessary knowledge.
- 4.5.4: not indulge in unfounded criticism of professional colleagues, institutions and professions.
- 4.5.5: not give any certificate in his professional capacity, which contains any false statements.
- 4.5.6: not abuse professional knowledge, skill or privileges.
- 4.5.7: not have improper associations in the form of sexual relationship or criminal association with a person with whom the individual has a professional relationship at the material time.
- 4.5.8: not be a party to false pretences, forgery, fraud, theft, counterfeiting, indecent behaviour or assault.
- 4.5.9: practice the system of medicine in which he or she has qualified and authorized to do so (cross-pathy).
- 4.5.10: all medical and health professionals are required to keep proper records of their patients for at least 10 years. The information shall include following:

Name of the patient	:
Age	:
Sex	:
Address	:
Occupation	:
Date of 1st visit	:
Clinical note (summary) of the case	:
Diagnosis	:
Treatment and Advice	:

5: Profession and Specialty Specific Standard of Code of Etiquette, Ethic and Conduct

All the specific professionals shall:

5.1: Traditional medicine

Refer patients to the allopathic system of medicine in time if and when appropriate treatment is not available in the traditional medicine.

5.2: Dentistry

5.2.1: not call his clinic, a hospital.

5.2.2: not allow his name to be used to designate commercial articles such as toothpaste, toothbrush, tooth powder and liquid cleaners.

5.3: Internal Medicine

5.3.1: caution epileptics in writing, regarding fire, water, height hazards and to avoid driving.

5.3.2: advise diabetic patients to carry their prescriptions indicating disease and doses of drugs lest, they fall in coma (diabetic or hypoglycaemic) in unknown circumstances.

5.4: General Surgery

5.4.1: observe standard surgical operative procedure.

5.4.2: Provide reasonable care to ensure that gauze or instruments are not left inside the body of the patient following surgery.

5.5: Anaesthesiology

- 5.5.1: discuss with the patient about the choice of suitable anaesthetics except in the case of emergency.
- 5.5.2: inform the patient of the possibility of causing damage or displacement of loose teeth, crowns and bridgework during anaesthesia.
- 5.5.3: check and confirm that all equipments, machines and instruments are in working condition prior to operation. They must observe closely, monitor and be vigilant during anaesthesia.

5.6: Dermatology

- 5.6.1: explain the diagnosis and prognosis of certain dermatological conditions, especially with regards to duration of treatment, scarring and pigment abnormalities.
- 5.6.2: inform patients of the risks and prognosis of cosmetic and dermato surgery. This should be recorded along with appropriate pre and postoperative photographs as far as possible.

5.7: Gynaecology and Obstetrics

- 5.7.1: be the only authorized professional to carry out medical termination of pregnancy and this shall only be done in a hospital with blood transfusion facility.

5.8: Paediatrics

- 5.8.1: routine examination of hips of all infants shall be undertaken by paediatricians during their first contact for early diagnosis and management of congenital dislocation of hip joints for optimal functional recovery.

5.9: Orthopaedics

- 5.9.1: Follow standard orthopaedic operative procedure:
- 5.9.2: be found to be negligent if non-union of fracture is the result of poor standard of primary treatment viz-a-viz,

failure to achieve an acceptable position of the bone fragments, so that a gap exists at the fracture site causing inappropriate internal fixation.

5.10: Ophthalmology

5.10.1: advise x-ray examination in a case with suggestive history of perforating wounds in the eye with no clinical signs of foreign body.

5.10.2: undertake vision test before cataract surgery and note down the same in prescription.

5.11: Otorrhinolaryngology

5.11.1: inform patient's pre operatively of the possibility of voice change following surgery of the throat and larynx.

5.11.2: take measures to avoid damage to facial nerve during surgery of the mastoid and parotid area.

5.11.3: inform patients to exercise mouth breathing prior to any nose and sinus surgery.

5.11.4: explain adequately of the consequences of multiple cranial nerve palsies following trauma or surgery at the cerebello-pontine angle of the brain.

5.12: Diagnostic services

5.12.1: not use pre-natal diagnostic techniques merely for the purpose of gender determination of the foetus.

5.12.2: take reasonable care not to give wrong diagnostic results and take caution in interpreting the results.

5.13: Psychiatry

5.13.1: take reasonable care not to subject the patient to preventable fractures or dislocation of bones while administering the electro-convulsive therapy (CET).

5.14: Blood Transfusion Services

5.14.1: ensure that the correct blood is issued from blood bank.

5.15: Physiotherapy

- 5.15.1: take particular care to prevent electric shock while using any modality of heat waves to the patient with metal implants such as in fractures.
- 5.15.2: avoid fracture in weak bones especially in elderly, children or very debilitated patients during physiotherapy.

5.16: Nursing

- 5.16.1: provide required nursing care.
- 5.16.2: carry personal responsibility and accountability for nursing practice.
- 5.16.3: administer drugs correctly to the right patient in correct dose and in suitable dosage form with appropriate counselling and instructions in accordance to 5Rs (right patient, right drug, right dose, right method, right time) and prescription.
- 5.16.4: assume major role in determining and implementing acceptable standards of clinical nursing practice, management, research and education.

5.17: Pharmacy

- 5.17.1: engage in the manufacture, sales, import/export, distribution and storage of only drugs registered by the Drugs Regulatory Authority (DRA) of Bhutan.
- 5.17.2: shall only dispense and sell medicine and medical products.
- 5.17.3: dispense drugs correctly to the right patient in correct dose and in suitable dosage form with appropriate counselling and instructions in accordance to the authentic prescription.
- 5.17.4: not deviate from the prescriber's instructions when dispensing. However the pharmacist can use his

professional right to deny or deviate from the prescribed drug if it is necessary to protect the patient.

5.17.5: ensure that adequate and appropriate labelling is done for all dispensed medicines.

5.17.6: seek clarification in case of doubt from the prescriber regarding the prescribed medication. In case the prescriber could not be contacted, the pharmacist should use his/her professional judgment correctly for the benefit of the patient.

5.18: Technicians

5.18.1: not resort to physical examination of patients or prescribe medicines.

5.18.2: carry out the investigations only upon the orders by qualified professionals.

5.19: Public Health

- 5.19.1: health professionals engaged in public health work shall enlighten the public concerning quarantine regulations and measures for the prevention of epidemic and communicable diseases. They shall notify the constituted public health authorities of every case of notifiable communicable disease under their care, in accordance with the laws, rules and regulations of the health authorities.
- 5.19.2: when an epidemic prevails, the professionals must provide their service without regard to the risk on their own health.
- 5.19.3: all public health professionals possessing special training shall act responsibly in prevention and containment of potential life threatening outbreak situations.
- 5.19.4: they should play their part in enforcing the laws of the community, in partnership with proper authorities in the administration of sanitary laws and regulations.

6: Regulations governing offences

6.1: Any contravention of Medical and Health Council Regulations and/or any action by a medical and health professional that is in contravention to professionally approved practice are considered as offences for the purposes of the Act.

6.2: The concerned professionals shall be held guilty of offences if they are proven to have:

- 6.2.1: committed gross negligence of duty;
- 6.2.2: committed professional misconduct;
- 6.2.3: breach of professionally approved standard of practice;
- 6.2.4: physical or mental incapacity;
- 6.2.5: conviction for crimes;
- 6.2.6: been practicing without valid registration or qualification.

6.2.7: It is the universal practice, that in hospitals wherein both practices of charging fees and free services exist, the consumers of free services are also given the right to sue against the damages just as in the case of patients who pay for the fee for services.

7: Negligence of duty

7.1: The alleged professional shall be held guilty of negligence of duty if it is established that:

7.1.2: the concerned practitioner owes a duty of care to the patient;

7.1.3: there is a breach of this duty by an act of commission or omission;

7.1.4: a causal relationship exists between the breach of commission or omission and alleged damage or harm and finally;

7.1.5: damage or harm is in fact done to the patient;

7.1.6: the gravity of offence and the appropriate punishment will be decided by professional ethic sub-committee appointed by the Council. The penalty will range from the dismissal of complaint, reprimand, suspension of registration and permanent erasure of name from register;

7.1.7: in case of damage or loss of life due to lack of appropriate standard facilities, the professional is not held liable;

7.1.8: The management under which defendant is operative shall provide all types of assistance to it's employees including in the event of damage awarded on an individual who has been absolved by the council of all professional misconduct or negligence charges.

8: Delegation of duties

Delegation of responsibilities or duties in medical care during exigencies should be done with utmost caution.

9: Procedures for Complaint Against Practitioners

- 9.1:** Any person who is injured by any act by a medical or health professional contrary to the professionally approved practice shall have the rights to bring accusation against such professional by filing a complaint with the Council.
- 9.2:** The council upon receipt of written complaint shall direct it to the professional ethical sub-committee for inquiry and investigation.
- 9.3:** The council shall decide all such matters within a period of one year.
- 9.4:** No action shall be taken on an anonymous complaint.
- 9.5:** The registrar shall notify the professional of the receipt of the complaint or report enclosing a copy thereof and request the professional to submit to the council any explanation which the professional may have to offer in respect of such fact of matters alleged in the complaint or report against him.

PART - III

REGULATIONS GOVERNING THE REGISTRATION (for all modes of registration)

Purpose:

- to fosters the safety of public health and protect the professionals from unfounded allegations and disrepute.
- to systematically discourage the practice of quackery in the field of medical and health professions.
- to document the quantitative and qualitative data on the professionals at any given time.
- to regulate the importance of continuing medical education and professional development.

10: Registration Criteria

10.1: Only upon prior recognition of the qualification by the council the holder of such qualifications shall be eligible for registration.

10.2: Only upon prior recognition of institutions, the qualifications conferred by such institutions shall be recognised.

11: Registration Committee:**11.1: Composition**

11.1.1: the registration committee shall comprise of not less than 3 members.

11.1.2: out of 3 members, there shall be at least 1 from Council, 1 from Executive Committee and 1 from Ethical Sub-Committees.

11.1.3: they shall elect one member as chairperson.

11.1.4: individual cases for registration shall be forwarded by the chairperson after scrutinizing the credentials with any one of the members.

12: Functions:

Normally the registration is conducted by the office of the registrar. Where reasonable doubt exists, that the prospective candidate(s) for registration may not possess the minimum standard of knowledge and skill prescribed in Bhutan for that particular category of profession, the registrar shall refer such cases to the registration committee.

13: Registration Procedure

13.1: The applicant shall dully fill in application form and furnish in original and photocopies of the qualifications to be registered, evidence of registration of such qualifications with their respective councils of the countries of origin where applicable, accompanied by attested copies thereof, citizenship ID card, medical fitness certificate and character certificate where required.

13.2: The applicant shall pay the registration fee as prescribed from time to time. The current prescribed registration fee structure is given below.

Registration Fee structure						
Sl. no	Qualification	National			Contract	Provisional
		Initial	Additional	Renewal		
1.	Certificate	500	200	200	500	250
2.	Diploma	700	400	500	1,000	700
3.	Degree	1000	600	500	5,000	500
4.	Certificate of Good Standing	1000				

ct service professionals shall be registered as temporary professionals. They will be liable to the same disciplinary procedures under the Medical and Health Council regulations, as other professionals.

13.4: All foreign medical and health professionals including volunteers practicing in Bhutan shall be registered as temporary professionals. They will also be liable to the same disciplinary procedures under the Medical and Health Council regulations, as other professionals.

13.5: The particulars of the professional along with the qualification being registered will be entered into the appropriate register.

13.6: The originals of the document will be returned to the individual and the attested photocopies will be retained by the Medical and Health Council secretariat.

14: Declaration

Every medical and health professional on the way of registration shall sign the declaration before the registrar of Medical and Health council in a prescribed form and thereby make a solemn pledge to abide by its regulations.

15: Certificate for Registration:

The registrar, after satisfying himself that the applicant has complied with all the requirements of these and regulations made hereunder, shall grant a certificate of registration in the prescribed form.

16: Renewal of Registration:

16.1: Every certificate of registration shall be renewed every five years after initial registration for continued practice.

16.2: The renewal will be done after evaluating the competency by fulfilment of **continuing medical education** of minimum of **30 hours** during last five years, and on payment of such fees as may be prescribed for the time being.

16.3: Renewal time shall open from three months before expiry of initial registration.

16.4: Registration should be renewed within a month of the expiry.

17: Regulatory Jurisdiction of Registration:

17.1: Only the registered professional, shall practice their professions in the jurisdiction of Kingdom of Bhutan after these registration regulations take effect.

17.5: Whoever willfully procures or attempts to procure himself or herself to be registered as a medical or health professional producing fraudulent representation or declaration and any person who assist therein, shall be punishable as per law.

17.6: Whoever falsely pretends to be registered as a medical or health professional without factually being registered with Medical and Health Council and uses his or her name or title or letters representing that he or she is so registered, shall be punishable as per law.

17.7: After the inquiry and after giving an opportunity of being heard to the applicant and having regard to the advice of the registration committee, the registrar is satisfied that the applicant has not complied with the requirements of the act and the regulations, shall, for reasons to be recorded in writing, reject the application for registration.

17.8: The certificate of registration shall be displayed by the registered medical or health professional in the prescribed place.

18: Cancellation or Suspension of Registration:

18.1: The registrar, Suo moto or on complaint, may issue a notice to the professional to show cause why his registration should not be suspended or cancelled for the reasons mentioned in the notice.

18.2: After giving a reasonable opportunity of being heard to the professional and having regard to the advice of the disciplinary committee, the registrar satisfied that there has been a breach of the provisions of this Act or the regulations, he may, without prejudice to any criminal action take against such professional by suspending the registration for such period as he may think fit or cancel the registration, as the case may be.

18.3: Notwithstanding anything contained in sub-sections (1), (2) of regulation 18, if the registrar is of the opinion that it is necessary or expedient to do so, in the public interest, he may, for reasons to be recorded in writing, suspend the registration of any professional without issuing any such notice referred to in sub-section (1).

19 Restoration of names to a register

19.1: Where a practitioner whose name has been erased from the relevant register, applies for the restoration of his name to the register, the following procedure shall apply.

19.2: The council shall afford to the applicant an opportunity of being heard.

19.3: The professional Ethics Sub-committee shall thereafter inform the council, of its decision. On receipt of such decision the council shall direct the registrar to take steps, as may be necessary to give effect to that decision.

20: Privileges Emanating from Registration

A person who is dully registered depending on qualification and existing government policies may:

20.1: Practice

20.1.1: the registered professional may practice in any part of the country.

20.1.2: business-licensing authority shall issue licenses only to those who are able to furnish registration certificate from Medical and Health Council and approval to enter into private practice from competent authority of the Royal Government. The business licensing authority shall also suspend or withdraw the license upon receipt of communication from Medical and Health Council that the registration of the license holder is suspended or cancelled.

20.2: Prescribe Medicines

20.2.1: it is one of the core privileges earned by a health and medical professional through his determined devotion and pursuits of the vocation and his profession to prescribe medicine. Improper prescription of medicine by lay public pose as source of imminent and grave danger to the health of the patient. That is why in Bhutan the sanctity of prescribing medicines by only the qualified professionals shall be maintained.

20.2.2: while prescribing, the professionals shall adhere to limits set by their highest acquired professional qualification and be guided by the policies of the health sector implemented through Essential Drug Programme, Drugs Regulating Authority and Quality Standard and Assurance Programme. The prescription shall be guarded against wrong prescription, over prescription, under prescription and in-illegible prescription.

20.2.3: failure to adhere to these medicine-prescribing regulations leading to injuries is actionable in the court of law.

20.3: Issue Medical Certificates

20.3.1: this eligibility to issue certificates is also one of the rare privileges, stemming from not only the premises of technical competency but also the public trust gained by the medical profession over the centuries through sacrifices and professional discipline, which is why its original sanctity shall be preserved in Bhutan.

20.3.2: professionals issuing certificates must know their limits set by their highest acquired qualification.

20.3.3: the issue of medical certificate by un-authorized professional is illegal and the certificate is invalid.

20.4: Deposit medical evidence:

Only the registered medical and health professionals are competent to deposit medical evidence to court of law.

20.5: Employment:

The registered professional shall become professionally eligible for appointment in any government institution in their respective specialties.

PART – IV

REGULATIONS GOVERNING UNIFORM STANDARDS OF EDUCATION AND TRAINING FOR ALL MEDICAL AND HEALTH PROFESSIONALS

Purpose

- to systematically standardize the medical education and training ensuring thereby the uniformity across the country, in terms of minimum level of competence, quality and excellence, connecting the process to the conformation of criteria on recognition of qualifications and institutions.
- to help the country recognise each level of medical education and training standards and take them to the standards of the region, globe and beyond.

21: Uniformity in Standards

21.1: Medical and Health Council is the authority to ensure that all institutions meet with the set standards uniformly.

21.2: For re-certification all medical and health professionals must have at least 30 hours of Continuing Medical Education (CME) to be eligible for re-certification, in five years time.

21.3: The Council shall encourage continuing medical education, the council shall support the Human resource Division (HRD) to promote various forums such as clinical meetings, seminars, symposia, conferences, workshops, short-course trainings within Bhutan and in countries outside Bhutan for every category of professionals.

21.4: The Ministry of Health shall recognise the need of professionals to undertake or take part in research as part of CME.

21.5: The council may encourage for the medical and health professional to take sabbatical leave after completion of five years to enhance their professional competence.

22: Minimum Standard of Education and Training

Minimum standard of education and training for all categories of medical and health professional is hereby set out as outlined hereafter.

22.1: Royal Institute of Health Sciences (RIHS): For the time being, the prevailing standards of education and training, based on its own

internal standard maintained by RIHS shall be recognised and are documented hereby as the minimum standard required:

1. Prospectus, Third Edition, September 2001.
2. Curriculum for general Nurse Midwife, First Edition 1998.
3. Curriculum for Health Assistant and Auxiliary Nurse Midwife, First Edition 1998.
4. Syllabus and curriculum for the Radiographer Course, December 1997.
5. Syllabus and curriculum for the Laboratory Technician course, 1998.
6. Syllabus and curriculum for Ophthalmic Assistant course, 1998.
7. Syllabus and curriculum for the Dental Hygienist course, November 1992.
8. Syllabus and curriculum for the Pharmacy Technician Course, December 1992.
9. Syllabus and curriculum for the Dental Technician course, January 1998.
10. Syllabus and curriculum for the Physiotherapy Technician course, November 1997.
11. Curriculum for ENT Assistant/Technician Course, July 2003.
12. Curriculum for Operation Theatre Technician Course,
13. Orthopedic Technician Training Programme

22.2: Institute of Traditional Medicine Services (ITMS): For the time being, the prevailing standards of education and training based on its own internal standard maintained by Institute of Traditional Medicine Services shall be recognised and are documented hereby as the minimum standard required:

1. Curriculum for the Dungscho Course, Revised March 2004.
2. Curriculum for the sMenpa, 2003
3. Training Programme for Pharmacy Technician, October 1996
4. Institute at a Glance, First Edition – September 2002.
5. Main Text book for Dungscho and sMenpa, Volume: I – to IV, Edition 1981.
6. Tsewa Text Book,
7. Sorig Lopdey (Supplementary) Part: I to III.

8. GSO RIG TIG GECS BSDUS, Edition 1983
9. DRI MED SEL GON and DRI MED SEL PHREN, Edition 1983
10. TSE (Main Text Book)
11. TSE (Supplementary)

22.3: Outside Country Minimum Standards of Education and Training:

The minimum, uniform standard of education and training for medical and health professionals outside the country shall follow the following criteria, which may be amended from time to time. As examples, criteria of minimum standard of education and training of some the streams are outlined below. The list will be completed in course of time.

22.3.1: Medical Education Medical Doctors

Entry qualification - 12 years of schooling, with science
Institute – recognized by Medical and Health Council
Duration of course – minimum four and half years
Language of instruction – English

Temporary Registration

Entry qualification - Degree

Registration

Degree

Internship – one year

Postgraduate Diploma Admission

Entry qualification – Degree

Institute – recognized by Medical and Health Council

Duration of course – minimum of one year

Language of instruction – English

Post graduation in Medicine

Entry qualification – Degree

Institute – recognized by Medical and Health Council

Duration of course – minimum of two years

Language of instruction – English

22.3.2: **Dental/Oral Surgeon**

Dental Surgeon (BDS)

Entry qualification - 12 years of schooling with science

Institute – recognized by Medical and Health Council

Duration of course – four years

Language of instruction – English

Temporary Registration

Entry qualification - Degree

Registration

Degree

Language of instruction – English

Temporary Registration

Entry qualification - Degree

Registration

Degree

Internship – one year

Postgraduate Diploma

Entry qualification – Degree

Institute – recognized by Medical and Health Council

Duration of course – minimum of one year

Language of instruction – English

Post graduation

Entry qualification – Degree

Institute – recognized by Medical and Health Council

Duration of course – minimum of two years

Language of instruction – English

22.3.3: **Graduate Dental Hygienist**

Entry qualification – 12 passed

Institute – recognized by Medical and Health Council

Duration of course – three years degree course

Registration

Degree

22.3.4: **Pharmacy Education**

B.Sc Pharmacy /B.Pharm

Degree

Institute – recognized by Medical And Health Council

Duration – of course – four years

Language of instruction – English

M.Sc Pharmacy/ M.Pharm

Entry qualification – B.Sc Pharmacy /B.Pharm

Institute – recognized by Medical and Health Council

Duration of course – minimum one year

Language of instruction – English

22.3.5: **Nursing Education**

B.Sc Nursing Admission

Institute – recognized by Medical and Health Council

Duration – of course – four years or minimum one
year after GNM Course

Language of instruction – English

Msc Nursing Admission

Entry qualification – Bsc Nursing

Institute – recognized by Medical and Health Council

Duration – of course – one years

Language of instruction – English

22.3.6: Public Health Education

Entry qualification – Degree

Institute – recognized by Medical and Health Council

Duration – of course – one years

Language of instruction – English

22.3.7: Paramedical Education

Entry qualification – 10 passed

Institute – recognized by Medical and Health Council

Duration – of course – one years

Language of instruction – English

22.3.8: Dungscho

Entry qualification – 12 passed

Institute – recognized by Medical and Health Council

Duration – of course – five years

Language of instruction – Dzongkha & Choeky

22.3.9: SMenpa

Entry qualification – 10 passed

Institute – recognized by Medical and Health Council

Duration – of course – three years

Language of instruction – Dzongkha & Choeky

23: Criteria and Procedures for Appointment of Inspectors, Visitors, Observers and their Terms of References.

23.1: The team shall consist of 4 members drawn from council, sub-committee and Medical and Health Council Secretariat.

23.2: Procedure for appointment:

The chairman of the executive committee will be the appointing authority on recommendation of the registrar.

23.3: Terms of Reference (TOR) will be initiated by the registrar on appointment and approved by the President.

23.4: Members of inspection team shall be entitled to TA/DA at the government rates and honorarium of Nu. 1000/= per day.

24: Minimum Requirement for Induction of Teachers of Medical and Health Sciences.

24.1: The teachers training of medical and health professional shall have a higher technical qualification than the trainees.

TEACHERS FOR RIHS

24.1.1: GNM Course:

The team of teachers shall include doctor with minimum qualification of MBBS or MPH, Bsc. Nurse Master and Ph.d holders.

24.1.2: Diploma in Clinical Medicine (ACO) Course:

The team of teachers shall include MBBS or MPH doctors, Diploma holder Nurses, and other relevant professional.

24.1.3: District Health Supervisory (DHSO) Course:

The team of teachers shall include MBBS or MHP doctors, Diploma holder Nurses, Public Health Administrators, Programme Managers and Planning Officers, and other relevant professionals.

24.1.4: Health Assistant Course:

The team of teachers shall include MBBS or MPH doctors, Diploma or Graduate Nurse, Pharmacist and Pathologist with experience and other relevant professionals.

24.1.5: Technician /Hygienist/Assistant Course:

Sr. Technicians, MBBS or specialist doctors, and other relevant professionals.

TEACHERS FOR ITMS:

24.2.1: Dungscho Course:

The team of teachers shall include Sr. Dungschos and Dungschos with postgraduate degrees or doctorate.

24.2.2: SMenpa Course:

Dungschos and senior Menpas with experience and training in teaching.

25: Guidelines for the Conduct of Examination.

25.1: Institutes shall take proper care while selecting teachers for setting appropriate type of question papers.

25.2: Institutes will take all required measures to ensure confidential custody of question papers till the hour of examination, which shall have to be conducted with proper facilities and decorum.

25.3: Institutes will invite external invigilators.

25.4: Institute will invite external examiner (s) for each batch of examinee and the examinee are evaluated impartially. The external examiners can be from within the country or outside.

25.5: Medical and Health Council shall inspect the examinations from time to time.

26: Evaluation - the institute is already conducting in-course and final evaluations of the students and may continue to do so. However, at a future date the institute could modify as per requirement of RUB subject to approval from the council.

PART - V

REGULATIONS GOVERNING THE RECOGNITION OF LOCAL AND FOREIGN INSTITUTES AND QUALIFICATION THEY CONFER

Purpose

- to ensure the level of competence and quality of the professionals practices are genuinely up to the marks procured.
- to help the country develop national standards for recognising local or foreign qualification and institutions.
- to help the country gain a poise for negotiating into reciprocal programmes with international medical and health institutions.

27: Minimum criteria for recognition of Local Institutions

27.1: Both the Royal Institute of Health Sciences (RIHS) and Institute of Traditional Medicines Services (ITMS) shall be recognised on the basis of “as is, where is,” that are documented under regulations no 23.1 and 23.2, upon payment of prescribed registration fee.

27.2: Medical and Health Council shall review and revise the minimum standards every five years.

27.3: These recognized institutes are required to seek prior approval from Medical and Health Council to launch any new course (s). For recognition of existing courses being conducted by institution in Bhutan, the institution shall apply to Medical and Health Council in pursuance of rules and regulations stipulated by the council.

27.4: The Medical and Health Council will accord approval to launch new courses by recognized institutions upon its satisfaction that the minimum standards are met and on payment of Nu. 25,000/= which is subject to change from time to time.

27.5: For the reciprocal recognition, all the institutions in the Kingdom of Bhutan, will communicate through Medical and Health Council while negotiating with foreign institutions.

27.6: For recognition of certificates, diploma, degree awarded in Bhutan the proper channel of communication with the foreign institution shall be Medical and Health Council.

27.7: Only upon the strict fulfillment of the conditions set out by the admission criteria of the respective institutions, the foreign students shall be admitted into courses or research programme conducted by the institutes of the Kingdom.

27.9: Foreign nationals obtaining qualifications from Medical and Health Institutions in Bhutan shall be granted provisional registration with Medical and Health Council.

28: Recognised Institutes of Foreign Countries

28.1: Minimum criteria for recognition

28.1.1: those of foreign institutions shall be deemed have been recognised by the Medical and Health Council, on the “as was, where was,” basis from where Bhutanese nationals or otherwise have qualified and are already working in Bhutan and from where our Bhutanese nationals are going to qualify till 2010.

28.1.2: hereinafter, for the purpose of allowing professional practice in the country or sending national students for studies outside country, only those of foreign institutions shall be recognised which conform to our minimum criteria for the recognition of particular level of qualifications as laid down under regulations 30.1.

28.1.3: hereinafter, Medical and Health Council shall recognize only those medical and health institutions of foreign countries that are recognized by their respective national councils, which is duly confirmed by Medical and Health Council that the holders including Bhutanese nationals that are allowed to practice in their respective countries.

28.1.4: foreign institutes shall also be recognised that fulfill the criteria set out for the reciprocal recognition programme.

28.1.5: the council shall also apply other criteria like physical facilities, student hospital bed ratio and so on that council shall frame in-course of time.

28.1.6: the council shall institute screening examination, either oral or written, or both for the purpose of registration of a candidate who has obtained such qualifications from institutions which are not included in the schedule IV.

28.1.7: the council shall appoint a competent committee for the purpose of screening test.

29: Procedures for Recognition of Institutions

29.1: The institution, intending to get recognized and registered under appropriate schedule maintained for the purpose by the Medical and Health Council, shall apply to the Registrar in prescribed form along with prescribed fee.

29.2: Medical and Health Council shall appoint inspectors to the applicant institute for inspection in prescribed form.

29.3: The name of the institution along with the courses leading to specific qualification shall be entered into appropriate schedules.

29.4: Upon completion of the prescribed formalities, the institution shall be awarded the certificate of recognition for a specific period. Periodic supervisory inspection of the institutions will be conducted to ensure continuity of minimum standards.

29.5: All the application forms, certificates, declaration forms are included under supplementary (Part- VII).

30: The Professional Ethics Sub-Committee shall have the following powers:

30.1: To obtain and receive all such evidence, written or oral, and to examine all such persons involved as witnesses, to procure or examine;

30.2 To call any person (s) to attend any meeting of the Committee, to give evidence and to produce any document or other thing in his/her possession; and to examine him/her as a witness;

30.3: In the absence or failure to appear in person the council shall proceed with the proceedings and make the decision accordingly.

Part- VI

REGULATIONS GOVERNING THE FUNCTIONS OF VARIOUS MEDICAL AND HEALTH COUNCIL ORGANS, RULES OF PRECEEDURES OF CONDUCTING BUSINESS AND OVERALL MANAGEMENT OF MEDICAL AND HEALTH COUNCIL

Purpose

- Management and maintenance of the property of the council and audit of account thereof.
- Holding of the meetings of the council and its subcommittees.
- Nomination, appointment, resignations and terminations of the members of the council.
- Power and duties of the office bearers of the council.
- Mechanisms and procedures of appointment of the members of the executive Committee, Sub-Committees and other committees.
- Tenure of office of the members and office bearers of the council.
- Preparation of schemes, strategies and programmes toward achieving the objectives of the Council.
- Criteria and procedures for appointment of inspectors, visitors, observers and their terms of references.

31: Guidelines on Nomination of Council Members

31.1: The selection of the council will be as per act.

31.2: Members must be Bhutanese nationals.

31.3: The professional members of council shall have not less than 5 years experience in the field.

32: Appointment of Ad-hoc Committees;

The Council shall have the power to form or appoint ad-hoc committees to meet specific requirements such as finance and economic, research, education standards and curriculum etc...

33: GUIDELINE ON FORMATION OF SUB-COMMITTEES

- 33.1:** The number of the sub-committee members shall range 7 – 10.
- 33.2:** Each sub-committee should have a minimum of 1/3 of members with technical expertise.
- 33.3:** A member of the council may be a member of only one sub-committee.
- 33.4:** Each sub-committee shall have at least one council member.
- 33.5:** Representative (s) from relevant organizations outside the health sector shall be included in the sub-committees.
- 33.6:** The sub-committee members shall elect a chairperson among themselves.
- 33.7:** The sub-committee members should attend the meeting in person. If the member fails to attend the meeting for 3 consecutive meetings s/he shall forfeit the membership.
- 33.8:** The quorum for the meeting will be 2/3 and decision shall be made by the consensus if not by simple majority.
- 33.9:** The tenure of the sub-committee members shall be three years and may be re-nominated by the council for another term with the provision of 1/3 of members continuing.
- 33.10:** The venue and frequency of the meeting of the sub-committee shall be decided by the chairperson.
- 33.11:** Remunerations for attending sub-committee meetings shall be as per the existing government rules and regulations.
- 33.12:** The guidelines shall be reviewed every three years.

34: Functions of Sub-committees

34.1: All these sub-committees are the embodiment of the council and shall function under the overall control of the Medical and Health Council.

34.2: All these sub-committees shall discharge function of all technical nature in the form of submission of reports and recommendations to the council, on various pertinent issues and subjects.

34.3: These sub-committees independently or with cooption of other technical experts shall form the responsible body of professionals, in order to determine the reasonableness or as accepted practice to settle cases/disputes.

34.4: These sub-committees shall be responsible to educate their respective lot of professionals on the Act and regulations and enforce them.

34.5: They are responsible to ensure that every professional under their purview get to participate in the continuing medical education and continuing professional development, that are uniform, of standard quality, adequate and equitable.

34.6: The members shall take part in planning process of Medical and Health Council, in inspection team, and other special committees.

35: Budget Planning Procedures:

35.1: By end of 1st quarter of the fiscal year, the secretariat shall prepare first draft of the annual budget plan in consultation of various and sub-committees and present it to the executive committee and then to the first Council meeting of the year. The draft budget proposals revised by the Council shall be submitted to DBA in response to its first call.

35.2: The secretariat shall, in consultation with executive committee, in response to the final budget call made by DBA, prepare the final annual budget proposed in the light of the guidelines circulated by DBA and submit to the same to the DBA.

35.3: More elaborate procedures shall be followed during the preparation of 5 year budget plan and all stakeholders, the council, executive committees, sub-committees, and special committees if any shoulder the responsibility, reflecting their collective wisdom with a sense of accountability.

35.4: To carry out the purposes of the Act, in letters and spirit, as a national authority, the Council, shall make conscious efforts to achieve by end of 2005 – 2006 its full establishment, in terms of premises, buildings, officers, equipments, furniture, manpower, budgets, policies, plan, programmes, and other supports setting out itself to become fully functional autonomous statutory body, exercising fully the power bestowed on it by the National Assembly of the Royal Government.

36: Professionals Ethic Sub-committee:

36.1: The Professional Ethic Sub-Committee shall consist of ten other members – five of the Council and five of the Sub-committees elected at a meeting of the Council.

36.2: Every person elected to be a member of the Professional Ethic Sub-Committee shall, unless he/she earlier vacates office, holds office for a period of three years from the date of his/her election, and members shall vacate office if, for any reason, he/she ceases to be a member of the Council during the aforesaid period.

36.3: From among the members of the committee a chairman will be elected who presides at all the meetings thereof.

36.4: The meetings of the Professional Ethic Sub-Committee shall be held as and when necessary.

36.5: Every member of the Professional Ethic Sub-Committee shall attend every meeting thereof and the absence of any member from any meeting, shall be a bar to such member from participating in any proceedings connected with the inquiry being held by the Professional Ethic Sub-committee.

- 36.6:** If the attendance of the members at any meeting of the Professional Ethic Sub-Committee falls below the quorum such meeting shall be postponed for a further date.
- 36.7:** The Registrar shall be the secretary to the Professional Ethic Sub-committee.
- 36.8:** All questions hereto for decision at any meeting of the Professional Ethic Sub-Committee shall be decided by the consensus of the members. In the case of an equality of votes, the chairman shall, in addition to his vote, have a casting vote.

PART VII

SUPPLEMENTARIES (ANNEXURES)

Purpose

- To capture essential details and off features
- To relief the main body of regulations from details and features that would cloud the easy comprehension and outlook.

Supplementary to the regulations governing etiquette, ethic and conduct

37: Validity of Consent:

37.1: consent is valid if freely given, without any compulsion, and where necessary in writing.

37.2: consent should be informed. All hazards must be disclosed.

37.3: it is the patient who decides whether to accept or reject the advice of the practitioner.

38: Types of Consent:

38.1: Implied – when a patient enters hospital OPD seeking treatment.

38.2: Expressed – given in gesture, verbally or in writing.

38.3: Informed – wherein the patient is explained with reasonable thoroughness about his medical problem, procedures to undergo, advantages and disadvantages and alternatives.

39: Procedure for Compulsory Consent:

39.1: It is compulsory to obtain consent from patients on request by a third party, e.g. Judiciary, Employer, Police, Prison, Insurance purposes, from spouse for sterilization, or abortions etc.

39.2: In special cases- victims of rape, invasive examinations such as blood tests, lumber puncture etc.

39.3: Oral or written consent should be obtained, such as for rectal, genital (external or internal), examination of breasts, and procedures such as Endoscopies and ultrasonography using special probes.

39.4: Consent should be also compulsorily obtained for research projects.

39.5: It is compulsory to obtain consent in writing for treatment such as all surgical procedures, hazardous treatment, where mutilation or permanent disability is likely.

40: Invalidity of consent:

The consent obtained from mentally ill, minor and under fear fraud and force, is invalid. In cases of minor consent should be obtained from parents or guardian and in case of mentally ill patient, the consent should be obtained from the legal guardian.

41: Exceptions to consent:

Emergencies to save life, where patient or guardian refuses treatment when it is essential to save life. An appropriate record should be made, and if possible should be attested by the guardian or parents. It is not necessary to obtain consent in court order, quarantine or in mandatory mass vaccination.

42: FORM OF NOTICE OF INQUIRY

Date, _____

Sir/Madam,

On behalf of the professional ethics sub-committee, notice is hereby given to you that in consequence of a complaint/report made against you to the Professional ethics Committee, an inquiry is to be held into the following charge/charges against you in the copy of complaint enclosed.

Notice is further given to you that on _____ day of _____ 19__ a meeting of the Professional Ethics Sub-Committee will be held at _____ a.m.p.m. in the office of the council.

You are hereby required to answer in writing the above-mentioned charge/charges and also to appear before the Professional ethics sub-Committee at the place and time specified above either in person or by Attorney-at-Law. If you do not appear as directed the Professional ethics sub-Committee shall have the power to hear and decide upon the said charge/charges in your absence.

Any answer, explanation or other statement or communication which you may desire to make with regard to the said charge/charges should be addressed to the Registrar of the council and transmitted so as to reach him not less than _____ days before the day appointed for the holding of the inquiry.

If, for any reason, you desire a postponement of the inquiry, you may make an application to the registrar of the council forthwith stating grounds on which you desire such postponement.

Registrar
Bhutan Medical and Health Council

43. Grading of offences and penalties

44.1: Grading of offences and penalties

Sl. No.	Legal Offences	Professional offences	Penalties
1.	Felony	Criminal negligence	Permanent erasure of name from registration
2.	Misdemeanor	Serious professional misconduct	Suspension of registration
3.	Petty Misdemeanor	Professional misconduct	Reprimand
4.	Violation	Trivial Offence	Dismissal

43.2: Categories of Criminal Negligence

All cases of medical and health professional injuries inflicted by the patient party that are graded as criminal negligence by professional ethics sub-committee in its due proceeding(s) shall be committed to legal system of the country.

43.3: All grades of Serious Professional Misconduct:

Abortion, adultery, alcohol, addictions, advertising are some of the cases of serious professional misconduct and shall be presided over the Professional Ethics Sub-Committees.

43.2.2: Professional Misconduct:

Cross pathy, covering, association with unqualified persons, violation of drug acts, unnecessary surgical operations, fraudulent medical certificates, withholding notifiable diseases information, vide infra, discrimination.

43.2.3: Categories of Trivial Offences:

Violation of codes of etiquette, ethics and mild form of conduct offences

44: Supplementary to registration regulations (Application forms, certificates, declaration, registers, code of professional fidelity)

**44.1: ROYAL GOVERNMENT OF BHUTAN
MEDICAL AND HEALTH COUNCIL
MINISTRY OF HEALTH**

(Application for full registration on the register of medical and/or health professional)

To
The Registrar
Bhutan Medical and Health Council
Thimphu

Dear sir,
I request you that my name, address and qualifications as stated below, may be registered on the register of medical and/or health professional under the Medical and Health Council and that I may be furnished with a certificate of registration:

Name in full in block letters:Sex.....ID.No.....
Father's Name:
Nationality: Date of birth: Place of birth:
Admission session..... Student Registration number of University or Institute

Permanent address in block letters:

Present address:

Description of qualification (s) of which registration (s) is desired	Name of the University or licensing body	Date of obtaining the qualifications	Name of the medical and/or health institution from which the applicant appeared for the said qualifying examination.

Yours faithfully

Date:

Full Signature

44.2:

**ROYAL GOVERNMENT OF BHUTAN
MEDICAL AND HEALTH COUNCIL
MINISTRY OF HEALTH**

(Application for the issue of certificate of additional qualification of medical and/or health professional)

To
The Registrar
Bhutan Medical and Health Council
Thimphu

Dear sir,

I request you that my name, address and additional qualification (s) as stated below, may be registered on the register of medical abd/or health professional under the Bhutan Medical and Health Council that I may be furnished with a additional qualification certificate of registration.

Name in full in block letters:Sex.....ID.No.....

Father's Name:

Nationality: Date of birth: Place of birth:

Permanent address in block letters:

.....
.....
.....

Present address:

.....
.....

MEDICAL AND HEALTH COUNCIL registration number:

Description of qualification of which registration is desired	Name of the University	Date of obtaining the qualification	Name of the medical and/or health Institution from which the applicant have appeared for the said qualifying examination

Yours faithfully

Date:

Signature

44.3:

**ROYAL GOVERNMENT OF BHUTAN
MEDICAL HEALTH COUNCIL
MINISTRY OF HEALTH:: THIMPHU**

RENEWAL OF REGISTRATION

Registration Number :
Date of registration :
Profession :
Name :
Sex.....: :
ID.No.....: :
Father's/Husband's Name :

Permanent Address

Village :
Block :
District :

Present Address

Health Centre/Hospital :
Village/city :
District :

Qualification

- 1. Basic :
- 2. Post-graduate Degree/Diploma/Certificate (if registered with Bhutan Medical & Health Council)
-

Signature

FOR OFFICE USE

Date : Signature

Renewed upto:

Yours faithfully

Date: Signature

44.4:

**ROYAL GOVERNMENT OF BHUTAN
BHUTAN MEDICAL AND HEALTH COUNCIL
Application for Temporary Registration**

To,
The Registrar
Bhutan Medical and Health Council
Ministry of Health
Thimphu

Sir,

I request that my name, address and qualification (s) as stated below, may be registered on the register of medical and/or health Professional under the Bhutan Medical and Health Council that I may be furnished with a certificate of registration.

Name in fullSex.....ID.No.....
Nationality.....
Permanent address (in block letters)
.....
.....

Description of qualification of which registration is desired.	Name of the University	Date of obtaining the qualification	Name of the medical and/or health Institution from which the applicant have appeared for the said qualifying examination

Yours faithfully

Date:

Signature

**44.5: ROYAL GOVERNMENT OF BHUTAN
BHUTAN MEDICAL AND HEALTH COUNCIL
MINISTRY OF HEALTH
(Application for the issue of certificate of Good Standing)**

To
The Registrar
Bhutan Medical and Health Council
Thimphu

Dear Sir,

I request you that I may be issued with certificate of Good Standing. My particulars are given below:

Name in full in block letters:
.....Sex.....ID.No.....

Father's Name:
.....

Nationality: Date of birth: Place of birth:
.....

Permanent address in block letters:
.....
.....
.....

Present address:
.....
.....
.....

Medical and Health Council registration number:Date of registration.....

Present Place of work:

Studies/publication/research if any:
.....
.....

Date:

Signature

44.6: CODE OF PROFESSIONAL FIDELITY

(Geneva Declaration accepted by the General Assembly of the World Medical Association at London on October 12,1949)

1. I solemnly pledge myself to consecrate my life to the service of humanity.
2. I will give to my teachers the respect and gratitude, which is their due.
3. I will practice my profession with conscience and dignity.
4. The health of my patient will be my first consideration.
5. I will respect the secrets, which are confided in me.
6. I will maintain, by all means in my power, the honour and the noble traditions of the medical profession.
7. My colleagues will be my brothers.
8. I will not permit considerations of religion, nationality, race, part politics or social standing to intervene between my duty and my patient.
9. I will maintain the utmost respect for human life from the time of conception.
10. Even under threat, I will not use my medical knowledge contrary to the law of humanity.
11. I will also promise to abide by the Medical and Health Council regulations in letters and spirit.

I make these promises solemnly, freely and upon my honour.

Place:.....

Date:.....

Signature

Attested
Signature & designation of the
Attesting Officer

Note: The declaration is to be attested by the registrar himself or a registered

44.7:

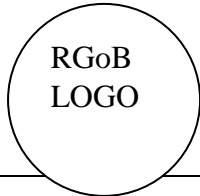
Temporary Register of Medical Doctors (M.B.B.S)

Serial Number of Registration	Date of Registration	Full name of the Medical Doctor Registered	Address of the Medical Doctors Registered	Qualifications with dates there of	Date and the reason for erase from the register
1	2	3	4	5	6

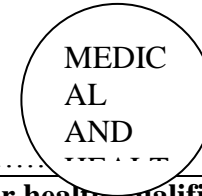
44.8:**Register of Medical Doctors (M.B.B.S)**

Serial Number of Registration	Date of Registration	Full name of the Medical Doctor Registered	Address of the Medical Doctors Registered	Qualifications with dates there of	Date and the reason for erase from the register
1	2	3	4	5	6

44.9:



**MEDICAL AND HEALTH COUNCIL
Certificate of full Registration**



Registration No. :

Date of Registration.....

Name	Address	Recognised medical and/or health qualification and date thereof

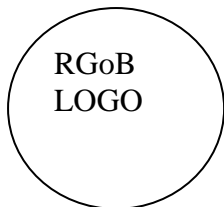
It is hereby certified that the above description of the name, registration number, date of registration, address and qualifications of the registered medical and/or health professional is a true copy of the entries in the register relating to the professional named above.

The letters MM/TD/TM/DS/NP/PH/PM forming a part of the above registration number indicate that the registered medical and/or health professional holds a recognized medical or health qualification included in the first, second or fourth schedule of the Medical and Health Council Act, 2002.

Note: The certificate holder is to send to the registrar immediate notice of any change in his/her address so that his/her correct address duly be inserted in the register.

REGISTRAR

44.10:



MEDICAL AND HEALTH COUNCIL



Certificate of Good Standing

Registration No. :

Date of Certificate.....

I hereby certify that the following is a true copy of the entry in the register relating to the fully registered medical and health professional named below:

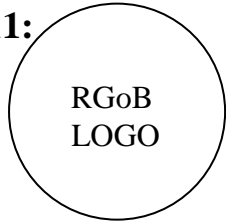
Name	Address	Date of registration	Qualifications and dates thereof	Remarks

I further certify that no disciplinary proceedings are in progress against the professional named above and that s/he has never been the subject of an inquiry by the disciplinary committee.

Note: The entry in the register reproduced above shows the name, date of full registration, address and qualification of the professional, to whom it relates..

REGISTRAR

44.11:



MEDICAL AND HEALTH COUNCIL

Registration Certificate for Additional Medical and/or Health Qualification



Registration No. :

Date of Registration.....

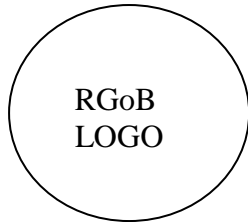
I hereby certify that the following additional qualification(s) has been duly registered in the register.

Name	Address	Recognised medical and/or health qualifications and dates thereof

N.B. This certificate is valid as evidence of registration ONLY until the FULL REGISTRATION is valid.

REGISTRAR

44.12:



**MEDICAL AND HEALTH COUNCIL
MEDICAL AND HEALTH COUNCIL ACT, 2002
Certificate of Temporary Registration**



Registration No. :

Date of Registration:

Name	Address	Recognized medical and/or health qualifications and dates thereof

It is hereby certified that the above description of the name, registration number, date of registration, address and qualification(s) of the registered professional is a true copy of the entries in the register relating to the Professional named above.

The letters MM/TD/TM/DS/NP/PH/PM forming a part of the above registration number indicate that the registered professional holds a recognized qualification included in the first, second or fourth schedules of the Medical and Health Council Act, 2002.

Note: The certificate holder is to send to the registrar immediate notice of any change in his/her address so that his/her correct address duly be inserted in the register.

REGISTRAR

45: Supplementaries to regulations governing recognition of institutions and qualifications

Act Schedules

45.1: schedule- I: Includes all qualifications in the field Modern Medicine, Traditional Medicine and Dentistry conferred by the institutions in Bhutan and recognized by MEDICAL AND HEALTH COUNCIL .

Schedule – I:

Country	University	Institute	Place	Stream	Qualification in descending order
Kingdom of Bhutan	Royal University of Bhutan	Royal Institute of Health Sciences	Changzamtok, Thimphu	Modern Medicine	<ul style="list-style-type: none"> • Diploma on Clinical Management. • Certificate of Health Assistant • Certificate of Basic Health Worker. • Certificate of Radio-graphy • Certificate of Ophthalmic Assistant. • Certificate of Ortho technician. • Certificate of ENT Technician.
Kingdom of Bhutan	Royal University of Bhutan	ITMS	Kawajangsa	Traditional Medicine	<ul style="list-style-type: none"> • Bachelors of Traditional Medicine. • Diploma of Traditional medicine. • Certificate of Traditional medicine.
Kingdom of Bhutan	Royal University of Bhutan	Royal Institute of Health Sciences	Changzamtok	Dentistry	<ul style="list-style-type: none"> • Certificate of dental technician. • Certificate of dental Hygienist.

45.2: Schedule – II: Includes all the qualifications in the field of Nursing, Pharmacy, laboratory science, environmental health, medical technology, occupational health, health administration, and health economics conferred by institutions in Bhutan and recognized by Medical And Health Council .

Country	University	Institute	Place	Stream	Qualification in descending order
Kingdom of Bhutan	Royal University of Bhutan/La Trabe University	Royal Institute of Health Sciences	Changzamtok, Thimphu	Nursing	<ul style="list-style-type: none"> • Bsc. Nursing. • .
Kingdom of Bhutan	Royal University of Bhutan	Royal Institute of Traditional Medicine		Traditional Medicine	<ul style="list-style-type: none"> • Diploma GNM • Certificate ANM • Certificate AN
- do -	- do -	Royal Institute of Health Sciences	Changzamtok, Thimphu	Pharmacy	<ul style="list-style-type: none"> • Certificate of Pharmacy Technician.
				Laboratory science	<ul style="list-style-type: none"> • Certificate of Lab. Technician • Certificate of X-Ray Technician.
Kingdom of Bhutan	Public Health programmes	Malaria programme	Galyegphu	Environmental	<ul style="list-style-type: none"> • Certificate of Malaria lab. Tech.

				Medical technology	<ul style="list-style-type: none"> • Certificate of HRM technician
				Occupational health	<ul style="list-style-type: none"> • Certificate of physio technician • Health administration. • Diploma DHSO
				Health economic	<ul style="list-style-type: none"> •

45.3 : Schedule- III: Includes institutes of Kingdom of Bhutan along with the Qualifications awarded by them and recognized by Medical And Health Council on the strength of their prevailing standards of their Infrastructure, Syllabus and Curriculum as referred and documented under regulation governing uniform standard education and training and ultimately their registration with Medical And Health Council. These Institutes Are:

1. Royal Institute of Health Sciences (RIHS)
2. Institute of Traditional Medicine Services
3. National Institute of Family Health (NIFH)
4. Public Health Programmes.

45.4: Schedule- IV: Includes all qualifications in all the fields acquired by Bhutanese nationals from Foreign institutions and recognized by Medical And Health Council.

Schedule-IV:

Country	University	Institute	Place	Stream	Qualification in descending order
India	Guwahati University	Guwahati Medical College	Guwahati	Modern Medicine	<ul style="list-style-type: none"> • MBBS • M.D
	AIIMS	AIIMS	New Delhi		<ul style="list-style-type: none"> • MS
				Traditional	
		Cuttak Dental College	Orissa	Dentistry	<ul style="list-style-type: none"> • BDS
Thailand	Burappa	Burapa Bnursing College	Burapa	Nursing	<ul style="list-style-type: none"> • MSc.
				Pharmaacy	
				Laboratory science	
				Environmental Health	
				Medical Technology	
				Occupational Health	
				Health Administration	
				Health Economics	

45.5: Schedule V: Includes all qualifications and institutions recognized by Medical and Health Council that are all non Bhutanese professionals hold and acquire from, registered for the purpose of employment or practice in Bhutan.

