

February 5, 2024

MEDICAL BOARD ACT

An Act relating to the Medical Board and to the practice Medicine and Surgery.

Short title. 1. This Act may be cited as the Medical Board Act.

Interpretation. 2. In this Act, **unless the context requires otherwise** –

“the Board” means the Medical Board of Trinidad and Tobago;

"Bioethics" means the application of ethical principles to medical practice, healthcare, and research, emphasizing the minimization of risk, the provision of the best standard of care, and the protection of patients' rights, autonomy, and well-being, while promoting the integrity of the medical profession and the advancement of medical knowledge through ethical means;

"Compos Mentis" means “Having the ability to understand the nature and consequences of one's decisions and actions in relation to medical treatment or research participation;

“Continuous Professional Development” or “CPD” means learning experiences which help develop and improve professional practice, allowing medical practitioners to build on their strengths, while developing their competency in areas of capability gaps;

~~“the Council” means the medical Council elected by the Board under this Act of the Board established under section 6;~~

“the Council” means the Medical Council, elected in the majority by the Members of the Board, as established under Section 6;

“diploma” means any diploma, degree, fellowship, membership, licence, certificate or other status or form of recognition granted by a University, college or duly licensed body conferring authority to practise medicine in the country or place where granted;

“the former Ordinance” means the Medical Board Ordinance (repealed by this Act);

"Fiduciary Duty" means the legal obligation of Council members and employees to act with care, loyalty, transparency, accountability, and compliance when managing the Board's funds and assets, always prioritizing the interests of the Board and its stakeholders;

~~"General Medical Council" means the General Council of Medical Education and Registration of the United Kingdom as constituted by the Medical Act 1858 and the Medical Act 1886 of the United Kingdom or by any statutory modification or re-enactment thereof;~~

"medical practitioner" or any other words or expression suggesting legal recognition of any person as a medical practitioner or member of the medical profession means a person registered under this Act;

"Medical Specialist Register" means the Specialist Register provided for under section 10A;

"Medical intervention" shall include and be defined as "any pharmaceutical treatment or prophylactic measure, surgical procedure, or application of a medical device intended to prevent, alleviate, or lessen physical or mental illness for which an individual is currently suffering or is deemed to be at risk." Medical Interventions include both investigational and fully approved pharmaceuticals, devices or procedures;

~~"member " means a member of the Board;~~

"member " means a member of the Board; (Restored)

"Register" means the Register of Medical Practitioners provided for under section 10;

~~"registrant" means a person registered under this Act;~~
(OMIT)

"registration" means registration under this Act;

"specialist" means a person who has undertaken specialist training and has been awarded specialist qualifications from ~~an~~ **a prescribed** institution ~~recognised by the Accreditation Council of Trinidad and Tobago and in a~~ **prescribed** specialty ~~recognised by the Council~~, and that specialist training is, or those qualifications are, or when

considered together, found ~~to satisfy the Council's~~ **by the Council to satisfy the prescribed** requirements for the specialty in question.

MEDICAL PRACTITIONERS MEDICAL BOARD, ITS CONSTITUTION, ETC.

The Medical Board
of Trinidad and
Tobago.
[24 of 1961].

3. The Medical Board of Trinidad established by the Medical Ordinance 1887 and continued under the former Ordinance, shall from the commencement of this Act bear the name of "The Medical Board of Trinidad and Tobago" and by such name shall continue to be a body corporate.

Constitution of
Board.

4. All persons registered under this Act as registrants **as members of the Board** shall constitute the Board.

Persons registered
as members to
continue to be
registered

5. All persons registered immediately prior to the commencement of this Act as members of the Board shall continue to be so registered under this Act.

The Council.
[31 of 2007].

6. (1) There shall be a Council of the Board which shall be appointed by the Minister and shall consist of—

- (a) the Chief Medical Officer;
- ~~(b) two medical practitioners;~~
- (c) ~~four~~ **six** medical practitioners elected by the Board;
- (d) one person nominated by the Inter-Religious Organisation;
- (e) an Attorney-at-law with at least five years' experience nominated by the Law Association of Trinidad and Tobago;
- (f) ~~an~~ **a chartered** accountant with at least five years' experience nominated by the ~~Association of Chartered Accountants—~~ **Institute of Chartered Accountants of Trinidad and Tobago; and**
- (g) a medical practitioner nominated by the University of the West Indies; **and**
- ~~(h) the General Manager appointed under section 6A, ex officio.~~

(2) The Council may appoint such committees ~~comprising of members such registrants and other persons~~ as it thinks fit for the proper carrying out of its functions, and may delegate any of its functions to any such committee, and –

- (a) the chairman of a committee shall be a member of the Council; and
- (b) a committee may, ~~with~~ subject to the approval of the Council, and notice to the Board co- opt other persons to assist it in the performance of its duties;
- (c) a committee shall be constituted in the majority by physicians;
- (d) the names of all members of a committee shall be published and circulated to the Board;
- (e) a committee shall submit a report and the minutes of its meetings at the end of its remit, which shall be be circulated to Members of the Board.

(3) If it appears to the Council that any member ~~of the Council~~ is by reason of illness, absent from Trinidad and Tobago, or for any other cause unlikely to be able for some time to perform his duties as a member of the Council, the Council may declare the seat of that person to be temporarily vacant.

(4) Any vacancy on the Council or any temporary vacancy for the period of its duration shall be filled in accordance with subsection (1).

The General
Manager of the
Board

6A. (1) The Council shall appoint a suitably qualified person to be the General Manager of the Board to serve as an administrator to the Council on such terms and conditions as the Council thinks fit.

(2) The General Manager's Portfolio, which shall exclude Executive functions reserved for the President and other members of Council, shall be responsible for such ~~matters~~ administrative duties as the Council may determine.

(3) The General Manager shall not exercise the right to vote at a meeting of the Council.

(4) The General Manager shall be appointed for a term not exceeding three years and is eligible for re-appointment.

The Chief
Medical Officer

6.B. (1) The Chief Medical Officer shall, inter alia, serve as a liaison between the Medical Board and the Ministry of Health, ensuring that local clinical expertise and evidence-based deliberations inform the development of public health policy. He shall be responsible for:

(a) promptly informing the Board of any proposed changes to public health policy within the Ministry of Health that may impact the clinical practice of medical practitioners or public health; and

(b) Conveying to the Ministry of Health any clinical or public health deliberations, concerns, and resolutions put forth by the Board, and advocating for the Board's position in policy deliberations.

Existing Council to
continue in office.

7. Members of the Council elected under the former Ordinance and holding office at the commencement of this Act shall continue to hold office until the election of a new Council as below provided.

Election of Council.

8. Within three months of the coming into force of this Act and triennially thereafter, there shall be convened in accordance with the Regulations a general meeting of the Board for the purpose of electing the Council.

Terms of office and
eligibility for
election.
[31 of 2007].

9. (1) Members of the Council shall hold office for a term of three years.

(2) A President, Vice-President, Secretary and a Treasurer, who shall be medical practitioners, shall be elected from among members of the Council.

(3) ~~Subject to subsection (4), the~~ The members of the Council are eligible for reappointment.

(4) Members of the Council, whether elected or appointed, shall serve no more than two consecutive terms in office.

Subsection (4) shall not apply to the members appointed pursuant to section 6(1)(a) and (h).

~~Exemption from
liability.~~

Terms of
Indemnity &
Liability

~~9A. (1) Neither the Council, a member of the Council nor a member of a committee appointed under section 6(2) is liable to any action, claim or demand or any liability in damages or any other remedy whatsoever including costs, for anything done or omitted in the discharge or purported discharge of the functions of the Council or the committee, unless it is shown that the act or omission was as a result of gross negligence or in bad faith, unless a breach in Fiduciary Duty, as outlined in sub-section (9B, 9C, 9D, 9E, 9F, 9G) has been shown.~~

(2) Any member of the Council, its committees, or employees found to have breached their fiduciary duties shall be subject to disciplinary action, which may include removal from office, restitution of misappropriated funds, and other legal consequences as deemed appropriate by the Board/Council.

Duty Of Care

9B. All members of the Council, committee members, and employees of the Medical Board shall exercise the utmost care and diligence in the management of the Board's funds and assets, ensuring that all decisions are made prudently and in good faith to further the interests of the Board and its stakeholders.

Duty of Loyalty

9C. (1) No member of the Council, its committees, or employee of the Medical Board shall engage in any activity or transaction that would create a conflict of interest or result in personal gain at the expense of the Board.

(2) Any potential conflicts of interest must be promptly disclosed to the Board, and appropriate measures must be taken to mitigate or eliminate such conflicts.

(3) If any member of Council or lay staff becomes aware of a breach of Fiduciary Duty (subsections 9B, 9C, 9D, 9E, 9F, 9G) they shall inform the secretary to Council in writing.

Transparency
and Disclosure

9D. (1) The Council shall ensure that accurate and complete records of all financial transactions and decisions are maintained.

(2) The Council shall provide regular and comprehensive reports on the financial status and operations of the Board to its members, including an annual audited financial statement (subsection 9G) .

(3) All financial records and reports shall be made available for inspection by any member of the Board upon reasonable request.

Accountability

9E. (1) The Council shall establish a Finance Standing Committee* to oversee the financial management and operations of the Board, ensuring compliance with established policies and procedures.

(2) The Finance Committee shall supervise the Board's financial activities, and any discrepancies or irregularities shall be promptly addressed and reported to the Board.

Compliance
with Legal and
Ethical
Standards

9F. (1) All financial activities and transactions of the Board shall comply with applicable laws, regulations, and ethical standards.

(2) The Council shall ensure that all members, committee members, and employees receive appropriate training on fiduciary duties and financial management best practices to uphold the highest standards of conduct.

Annual
Independent
Audits

9G. (1) The Council shall engage an independent external auditor to conduct an annual audit of the Board's financial statements.

(2) The results of the audit shall be presented to the Council, included in the annual financial report, and made available to the public.

Register of Medical
Practitioners.

10. (1) The Council shall cause to be kept a book or register to be known as the "Register of Medical Practitioners" in which shall be entered the name of every person registered as a medical practitioner under this Act showing the following particulars:

- (a) his full name and address;
- (b) a description of and dates of the diplomas in respect of which he is registered and such other medical degrees and certificates to which he is entitled;
- (c) the date of his registration.

(2) Subject to subsection (3), no person whose name is not entered on the Register shall be deemed to be registered.

(3) All persons who were registered as medical practitioners under the former Ordinance immediately prior to the commencement of this Act are entitled to be registered under this Act without application on the part of such persons, and pending the entry of their names on the Register, shall be deemed to be duly registered.

(4) The Register shall at all reasonable times be open and subject to inspection by any person on payment of a fee of one dollar.

Medical Specialist
Register.
[31 of 2007].

10A. (1) The Council shall cause to be kept a book or register to be known as the Medical Specialist Register which shall contain the following particulars:

- (a) name and address of the specialist;
- (b) area of expertise;
- (c) training, experience and qualifications in the area of specialisation;
- (d) date of registration in the Register; and
- (e) date of registration in the Medical Specialist Register.

(2) Any person whose name is not entered in the Medical Specialist Register shall not be deemed a medical specialist.

Secretary to maintain the Register and Medical Specialist Register.
[31 of 2007].

11. (1) The Secretary shall keep and maintain the Register and the Medical Specialist Register in accordance with this Act and the Rules and Regulations of the Council in that behalf and shall from time to time make the necessary alterations in the addresses or qualifications of persons registered.

(2) The Secretary shall on the advice of the Council, and as prescribed by Regulations, erase from the Register and the Medical Specialist Register—

- (a) the name and particulars of every deceased medical practitioner and specialist; and
- (b) the name of every person caused by the Council to be erased from the Register and Medical Specialist Register in accordance with section 24.

Other duties of the Secretary and Treasurer.
[31 of 2007
7 of 2009].

11A. In addition to the duties set out in this Act, the Secretary and Treasurer shall perform such other duties as may be prescribed.

Who may be registered.

12. (1) Any person who establishes to the satisfaction of the Council that he holds a diploma —

- ~~(a) in respect of which he is entered or entitled to be entered on the Medical Register of the General Medical Council; and~~
- (b) granted by an institution listed in the Schedule, and that he is of good character and a fit and proper person to practise medicine, shall upon application and upon compliance with the requirements of this Act, be entitled to be registered as a ~~registrant~~ Member of the Board.

(2) The Minister, ~~subject to the approval of the Council and notice to the Board,~~ may by Order, amend the Schedule.

Duration of registration

12A. (1) The registration of a medical practitioner shall continue in force until the 31st day of December of each year unless the registration has been suspended or terminated in accordance with section 24.

(2) Notwithstanding subsection (1), where the registration of a medical practitioner has expired, the medical practitioner shall be deemed to be registered for a period not exceeding ~~three~~ months from the date of the expiration of the registration.

Renewal and CPD

12B. (1) The registration of a medical practitioner shall not be renewed unless the Council is satisfied that he has met the ~~prescribed criteria in relation to Continuing Professional Development~~ and has paid the annual retention fee, including all outstanding annual retention fees.

(2) For the avoidance of doubt, a registrant whose registration is suspended shall maintain his registration in accordance with this Act during the period of his suspension.

Annual retention fee and late fee

12C. (1) Where a medical practitioner has been registered to practise under section 10 or 10A and he has satisfied the provisions of section 12B, he shall pay by December 31st of each year, an annual retention fee, which shall be ~~prescribed by the Minister,~~ approved by the Board in order to continue his practice.

(2) Where a medical practitioner fails to pay the annual retention fee ~~or to complete the prescribed CPD criteria by March 31st of the subsequent year,~~ he shall be charged and pay the prescribed late fee.

Removal of name from Register and Medical Specialist Register

12D. (1) The Council, ~~after due warning,~~ shall remove from the Register or the Medical Specialist Register, as the case may be, the name of a medical practitioner who fails to renew his registration as a medical practitioner or a specialist by June 30th of the subsequent year.

(2) When the name of any person is removed from ~~the Register or the Medical Specialist Register~~ pursuant to subsection (1), the Council shall in writing –

- (a) publish a notice to that effect in the *Gazette*; and
- (b) require the person to return to the Council his certificate of registration within a stated period of time.

(3) Where the name of a medical practitioner has been removed from the Register or the Medical Specialist Register, the medical practitioner shall be required to comply with and satisfy the requirements of section 29A in order to have his registration restored.

Issue of temporary licence to practice.

13. (1) Notwithstanding section 12, the Council may issue or authorise to be issued, a temporary licence to engage in the practice of medicine during the currency thereof and subject to the terms and conditions contained therein, to any other person who establishes to the satisfaction of the Council that he is the holder of a diploma approved by the Board and is of good character and a fit and proper person to practise medicine.

(2) The Council shall determine the nature and extent of each temporary licence, including—

- (a) the time during which the licence remains in force;
- (b) the area to which it extends;
- (c) the nature and character of the work which may be performed under the authority thereof;
- (d) such other terms and conditions as the Council may deem it expedient to impose.

(3) It shall be lawful for the Council, upon the expiration of the period fixed for the temporary licence and upon being satisfied by a majority of members of the Council representing not less than two-thirds of those present and voting that the other conditions therein have been duly met by the person named and that the person is in all respects a fit and proper person to practise medicine, to grant registration to that person as a ~~registrant~~ Member of the Board.

Fees.
[31 of 2007].

14. (1) An applicant for registration under section 16 shall pay to the Treasurer such registration fee as the Minister may by Order prescribe.

(2) A person, upon being admitted to registration or to whom a temporary licence has been granted, shall pay to the Treasurer such annual fee as the Minister may by Order prescribe.

Registration of
higher or additional
qualification.

15. Any member of the Board who has obtained a diploma higher than or additional to the diploma in respect of which he has been admitted to registration and which is approved by the Board shall, on payment of such fee as may be prescribed, be entitled to have the higher or additional diploma shown in the Register in substitution for or in addition to, as the case may be, the diploma previously shown.

Evidence and
information
required to be
furnished.
[31 of 2007].

16. An applicant for registration on the Register, Medical Specialist Register or for a temporary licence shall furnish to the Secretary—

- (a) satisfactory evidence of his qualifications;
- (b) satisfactory proof of his identity;
- (c) such further and other information as the Council may require.

Erasure of incorrect
or fraudulent entry.
[31 of 2007].

17. The Secretary shall on the advice of the Council and as prescribed by Regulation erase from the Register and the Medical Specialist Register any entry which has been incorrectly or fraudulently made.

Certificate of
Secretary to be
prima facie
evidence.
[31 of 2007].

18. In all cases where proof of registration or of the issue of a temporary licence is required to be made, the production of a certificate showing that the person therein named is duly registered or is the holder of a temporary licence, certified under the hand of the Secretary, shall be sufficient evidence in all Courts of the registration of such person, or of the issue to him of a temporary licence as the case may be, and the production of the original Register shall not be required and any such certificate shall be accepted without proof that the person signing as the Secretary is the Secretary.

Publication of lists.
[31 of 2007].

19. (1) The Secretary shall not later than 31st March in each year cause to be printed in the Gazette a true and correct list of the names of all persons who are registered at such time and also a true and correct list of the names of all persons to whom a temporary licence has been granted.

(2) A copy of the Gazette containing a list referred to in subsection (1) shall, in the absence of proof to the contrary, be evidence in all Courts of the registration of, or of the issue of a temporary licence to, any person therein named, as the case may be, and of the qualifications of such person and of the non-registration of any person who is not therein named.

Power of Council to make Rules and Regulations.
[31 of 2007].

20. (1) The Council, subject to the approval of the Board, shall have power to make such Rules or Regulations as it deems necessary for carrying the purposes and provisions of this Act into effect, and, without restricting the generality thereof, for all or any of the following purposes:

- (a) for the good government of the Board and for the proper conduct of its affairs;
- (b) for regulating the time, manner and place of meetings of the Board and the Council and the proceedings thereof;
- (c) for the conduct of elections including the manner of voting thereat, and all other matters arising out of or incidental to the elections as provided for in this Act;
- (d) with respect to the fees for registration or for the issue of a temporary licence and the amount of any annual or special fees to be paid by **members registrants**;
- (e) with respect to the determination of the professional qualification and experience including internship required of an applicant for registration or for a temporary licence, and to proof of professional conduct and general fitness to practise medicine;
- (f) for regulating the manner of applying and using the funds of the Board;
- (g) for providing for bye-elections and the circumstances whereby a vacancy shall be deemed to occur on the Council;
- (h) for prescribing anything required or authorized to be prescribed;
- (i) for prescribing in respect of any contravention thereof or failure to comply therewith a penalty not exceeding a fine of three hundred dollars or imprisonment for three months on summary conviction;
- (j) for establishing standards for continuous education and training of medical practitioners; and
- (k) for determining whether a person is a specialist for the purposes of this Act.

(2) No Rule or Regulation shall come into force or have effect until it has been approved by the **both the Board and the Minister**.

(3) All Rules and Regulations shall be published in the Gazette and the production of a copy thereof shall be prima facie proof that a Rule or Regulation contained therein has been made and published as required by this Act.

False representations with a view to obtaining

21. Any person who wilfully procures or attempts to procure himself or any other person to be registered or licensed under this Act, by making

registration or
licence.
[31 of 2007].

or producing, or causing to be made or produced, any false or fraudulent representation or statement or declaration, either verbally or in writing or otherwise, is liable on summary conviction to a fine of ten thousand dollars and to imprisonment for two years.

Use of title by
unauthorised
person.
[31 of 2007].

22. (1) Any person not being a ~~registrant~~ **member of the Board** or the holder of a temporary licence who—

- (a) takes or uses any name, title, addition or description implying or calculated to lead persons to believe that he is registered or licensed under this Act or that he is recognised by law as a physician, surgeon, or licentiate in medicine or surgery;
- (b) assumes or uses the title “doctor”, “surgeon”, or “physician” or any affix or prefix indicative of any such title as an occupational designation relating to the practice of medicine;
- (c) advertises or holds himself out as a person authorized or qualified to practise medicine or surgery; or
- (d) purports to practise medicine, is liable on summary conviction to a fine of ten thousand dollars and to imprisonment for two years.

(2) Subsection (1) shall not operate so as to prevent a person who is registered as a dentist from using such title as is authorised thereby and appropriate to his qualifications.

(3) Any person whose name is not entered on the Medical Specialist Register and who—

- (a) practises as a specialist;
- (b) takes or uses any name, title, addition or description implying or calculated to lead persons to believe that he is so registered; or
- (c) advertises or holds himself out as a person authorised or qualified to practise as a specialist,

is liable on summary conviction to a fine of ten thousand dollars and to imprisonment for two years.

(4) Notwithstanding any provision to the contrary, a medical practitioner who before the 28th September 2007 practised as a specialist may, for a period of one year after the commencement of the said Act—

- (a) practise as a specialist;
- (b) take or use any name, title, addition or description implying or calculated to lead persons to believe that he is a specialist; or
- (c) advertise or hold himself out as a person authorised or qualified to practise as a specialist,

but shall within that period apply for registration on the Medical Specialist Register.

Advertisement,
holding out, or
practice by
unauthorized
person.
[31 of 2007].

23. (1) No person who is not registered or the holder of a temporary licence under this Act shall, either directly or indirectly, carry on for hire, gain, or hope of reward the healing art in any of its branches or—

- (a) by advertisement, sign, or statement of any kind, written or oral, allege or imply or state that he is, or hold himself out as being qualified, able, or willing, to diagnose, prescribe for, prevent, or treat, any human disease, ailment, deformity, defect, or injury, or to perform any operation to remedy any human disease, ailment, deformity, defect, or injury, or to examine or advise upon the physical or mental condition of any person;
- (b) diagnose, or offer to diagnose, or attempt to diagnose, any human disease, ailment, deformity, defect, or injury, or to examine or advise upon, the physical or mental condition of any person;
- (c) prescribe or administer any drugs, serum, medicine, or any substance or remedy, whether for the cure, treatment, or prevention, of any human disease, ailment, deformity, defect, or injury;
- (d) prescribe or administer any treatment, or perform any operation or manipulation, or apply any apparatus or appliance, for the cure, treatment, or prevention, of any human disease, ailment, deformity, defect, or injury; or
- (e) act as the assistant or associate of any person who practises or pretends to practise medicine as herein set out.

(2) Subsection (1) does not apply to—

- (a) any person acting under the direction or supervision of a medical practitioner;
- (b) any person who is registered or licensed under any other Act and who, under the authority thereof, performs or provides any service which he is authorised or entitled to perform thereunder; or
- (c) any person performing any such service under the authority and supervision of any other person so registered or licensed if permitted or authorised by such Act.

(3) Nothing in this Act shall prevent—

- (a) any person from giving necessary medical or surgical aid in cases of urgent need without hire, gain or hope of reward;
- (b) the domestic administration of family remedies.

(4) Any person who contravenes this section is liable on summary conviction to a fine of ten thousand dollars and to imprisonment for two years.

(5) In any prosecution under this Act it shall be sufficient proof of an offence under this section if it is proved that the accused has done or committed a single act of unauthorised practice or has committed on one occasion any of the acts prohibited hereunder.

24. (1) Where any ~~registrant~~ Member of the Board or any holder of a temporary licence has either before or after he is registered or licensed under this Act been convicted either in the Commonwealth or elsewhere of an offence which, if committed in Trinidad and Tobago, would be punishable on indictment, or is guilty of infamous or disgraceful conduct in a professional respect, such practitioner shall be liable to be dealt with in the manner hereinafter provided.

(2) The Council may, and upon the application of any four ~~registrants~~ Members of the Board shall, cause enquiry to be made into the case of a person liable to be dealt with as in this section provided, and on proof of such conviction or of such infamous or disgraceful conduct may—

- (a) censure or reprimand the medical practitioner concerned;
- (b) suspend the medical practitioner concerned for a period not exceeding five years; or
- (c) cause the name of such practitioner to be erased from the Register, the Medical Specialist Register or his temporary licence to be revoked, as the case may be,

except that this subsection shall not apply in respect of a medical practitioner adopting or refraining from adopting the practice of any particular theory of medicine or research, nor on account of a conviction for a political offence outside the Commonwealth, nor on account of a conviction for an offence which though within the provisions of this section ought not, in the opinion of the Council, either from the trivial nature of the offence, or from the circumstances under which it was committed, to disqualify a person from practising medicine or surgery.

(3) If the Council, finds, after due enquiry, that a medical practitioner is suffering from a physical or mental condition that might, if he continues to practise, constitute a danger to the public or to a patient, the Council may suspend the ~~member~~ ~~registrant~~ from practising until such time as in the opinion of the Council such ~~member~~ ~~registrant~~ is able to resume practise.

(4) Notwithstanding subsection (2), if the Council considers that there are reasons or circumstances which render such a course expedient, the Council may, at any time before making an order, suspend the proceedings of the enquiry for a period not exceeding six months, during which the medical practitioner is entitled to practise; and at the end of such period the Council may either direct that the proceedings shall be discontinued or make such order as it shall deem proper.

(5) Without restricting the generality of subsections (1) and (2), every medical practitioner shall be deemed guilty of infamous or disgraceful conduct who—

- (a) wilfully betrays a professional confidence;
- (b) abandons a patient in danger without sufficient cause, and without giving him an opportunity to retain the services of another medical practitioner;
- (c) knowingly gives a false certificate respecting birth, death, notice of disease, state of health, vaccination or disinfection or respecting any matter relating to life, health, or accident insurance;
- (d) divides with another person, who is not a partner, any fees or profits resulting from consultations or surgical operations, without the patient's knowledge and consent;
- (e) is addicted to the excessive use of intoxicating liquors or the excessive or habitual use of opiates or narcotics;
- (f) impersonates another medical practitioner;
- (g) employs in connection with his professional practice an assistant who is not registered or licensed under this Act, or permits a person who is not registered or licensed under this Act to attend or treat patients or to perform operations upon patients in respect of matters requiring professional discretion or skill, or by his presence or advice, assistance or co-operation, enables any such person, whether acting as an assistant or otherwise, to attend or treat any person for any ailment or to perform any operation upon a patient in respect of any matter requiring professional discretion or skill, or who holds out a person who is not registered or licensed under this Act as a person qualified to practise surgery, medicine or obstetrics in Trinidad and Tobago;
- (h) directly or indirectly holds himself out to the public as a specialist or as being specially qualified in any particular branch of medicine and who has not taken a special course in such branch and received a certificate of specialty therein which is recognised by the Council;
- (i) does or fails to do any act or thing, the doing of which or the failure to do which the Council considers to be unprofessional or discreditable; or
- (j) fails to notify the Council of the outcome of any disciplinary proceedings taken against him in another jurisdiction within one month of the determination of those proceedings.

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|----------------------------------|--|
| Bioethics: | <p>24.A. (1) All medical practitioners registered under the provisions of this Act shall adhere to the Principles of Bioethics (subsections 24.B,C,D,E,F,G,H,I) to ensure the protection of patients' rights, safety, and well-being when administering medical interventions or conducting medical research</p> <p>(2) Violations of any principle (subsections 24.B,C,D,E,F,G,H,I) may incur disciplinary action subject to the terms in subsection 24.(2) .</p> |
| Voluntary Informed Consent | <p>24B. (1) Prior to administering a medical intervention with significant and/or uncertain risk or involving a patient in research, medical practitioners shall obtain in writing, voluntary informed consent from said patient, who shall be regarded as compos mentis unless proven otherwise by a competent authority.</p> <p>(2) In the event of an emergent situation where a patient is suspected to be non-compos mentis and, therefore, incapable of providing consent, the practitioner is authorized to exercise their professional judgment in administering medical interventions, in strict compliance with sub-clauses 24.C,D,E,F,I.</p> <p>(3) In the event that a patients is proven to be non-compos mentis, voluntary informed consent shall be obtained from the patient's legal guardian or a person authorized to make medical decisions on their behalf.</p> <p>(4) The patient or their legal guardian shall be provided with adequate information regarding the nature, purpose, risks, and benefits of the proposed intervention or research, and their consent must be given freely without coercion or undue influence. The patient or their legal guardian should possess sufficient knowledge and comprehension of the elements of the subject matter involved to enable them to make an understanding and enlightened decision.</p> <p>(5) As part of the informed consent process, medical practitioners shall disclose to patients the regulatory or approval status of any medical intervention being administered or prescribed, along with any uncertainties or limitations in the available knowledge regarding its short-term and long-term safety profile, based on the extent and quality of safety testing conducted.</p> |
| Minimization of Risk and Harm | <p>24.C. (1) A Medical intervention or research instrument shall be administered only if the importance of the objective outweighs the inherent risks and burdens to the patients. Every precaution shall be taken to mitigate the risk of injury, disability, or death.</p> <p>(2) Medical practitioners shall recognize and adhere to the limits</p> |

of their professional competence in diagnostics, therapeutics, or any other medical interventions, including but not limited to surgical and pharmaceutical interventions. When the complexity of a case exceeds the practitioner's expertise, appropriate consultation or referral to a specialist shall be sought.

(3) Medical practitioners shall ensure timely clinical referral and professional correspondence. Patients shall be referred for relevant specialist care when necessary and subsequently referred back to their primary care providers for proper follow-up and holistic care as required.

Evidence-Based Practice

24.D. Medical interventions or clinical research shall be based upon a thorough knowledge of the scientific literature and evidence-based practices. Medical interventions or research shall be administered by or under the supervision of qualified, medical practitioners possessing appropriate clinical training and expertise.

Avoidance of Unnecessary Suffering

24.E. Medical interventions shall be conducted in a manner that minimizes any potential physical and mental suffering or injury to patients.

Proportionality of Risk and Benefit

24.F. The degree of risk involved in medical intervention shall never exceed the anticipated therapeutic benefit or the seriousness of the medical condition being treated. The potential benefits of the intervention must be carefully weighed against the risks, considering the severity of the patient's condition, their prognosis, and the impact on their overall well-being and quality of life.

Right to Refuse or Withdraw

24.G. Patients, or their legal guardians in the case of patients who are non-compos mentis, shall have the right to refuse or withdraw from any medical intervention or research at any time without prejudice or penalty, and they must be informed of this right.

Integrity in Promotion and Representation

24.H. (1) Medical practitioners shall not make unsubstantiated, false, or misleading claims about the benefits, efficacy, or safety of any medical intervention, whether through direct communication with patients, advertising, social media, or other platforms.

(2) When promoting or representing medical interventions, medical practitioners shall rely on credible scientific evidence and empirical data, and shall accurately convey the level of certainty or uncertainty associated with the claims being made.

(3) Medical practitioners shall not exploit their position of trust or authority to unduly influence patients' decisions regarding medical interventions, and shall respect patients' autonomy and right to make informed choices based on accurate and unbiased information.

Right to Non-Discriminatory Care

24.I Patients shall have the right to receive the best possible care from medical practitioners, without discrimination, prejudice, or bias based on their economic, social, religious, or personal beliefs, status, or characteristics. The provision of medical care shall be based solely on the patient's clinical needs, the urgency of their condition, and the potential benefits of the proposed treatment. Factors such as race, ethnicity, national origin, sex, sexual orientation, age, disability, socioeconomic status, or any other non-medical characteristics shall not influence the quality of care offered.

Validity of medical certificate.

25. No certificate required to be given pursuant to any Act by any physician, surgeon, or licentiate in medicine or surgery, shall be valid unless the person giving the same is a ~~member registrant~~ of the Board or is the holder of a temporary licence.

Recovery of fees and costs of medicines supplied.

26. (1) A ~~member registrant~~ of the Board or the holder of a temporary licence is entitled to demand and recover in any Court, with full costs of suit, his reasonable charges for professional aid, advice and visits, and the price of any medicine or medical or surgical appliance rendered or supplied by him to his patients.

(2) No person claiming to be, or describing himself as, or acting in the capacity of, a physician or surgeon shall be allowed to recover in any Court any fees or charges for services or for drugs or medicines supplied unless he is a ~~member registrant~~ of the Board or is the holder of a temporary licence.

27. (Repealed by Act No. 36 of 1997).

Employment of assessors and assistants.

28. A committee appointed by the Council under this Act may, for the purpose of the execution of its duties, employ at the expense of the Board, such legal or other assessors or assistants as the committee may think necessary or proper.

Appeal against refusal to register, erasure from Register, suspension, etc.

29. Any person aggrieved by the refusal of the Council to grant registration or a temporary licence to him, or by the erasure of his name from the Register, or by an order for his suspension under section 24(2)(b) or by the revocation or suspension of his licence, may, within three months after the date on which notice is given to him by the Council of such refusal, revocation or suspension, appeal against the Council's decision to a Judge in Chambers who shall give such directions in the matter as he may think proper, including a direction as to the costs of the appeal.

Restoration
following failure to
renew registration.

29A. A person whose name has been removed from the Register or the Medical Specialist Register under section 12D shall be restored if, by December 31st of any year following the removal of his name, ~~he pays the annual retention fee.~~

- ~~(a) satisfies the Council that he has met the prescribed criteria in relation to Continuing Professional Development for the period in respect of which his name was removed; and~~
- ~~(b) pays the annual retention fee, including all outstanding annual retention fees.~~

Restoration
following erasure

29B. (1) A person whose name has been erased from the Register or Medical Specialist Register may apply to the Council, at any time after ~~two five years~~ after the erasure, to have his name restored to the Register or Medical Specialist Register, as the case may be.

(2) An application under subsection (1) shall–

- (a) be in writing to a Panel established by the Council for consideration of these matters; and
- (b) include in detail all the relevant particulars such as his name, former registration number, medical qualifications, registered address and potential employer or location of practice.

(2) When considering an application under subsection (1), the Panel shall consider–

- (a) the gravity of the issue triggering the erasure;
- (b) the medical practitioner's historical professional conduct;
- (c) his fitness to practice; and
- (d) any other relevant information.

Decision of Panel.

29C. (1) Where the Panel makes a decision after considering an application under section 29B, it may –

- (a) recommend restoration to the Register;
- (b) reject the application; or
- (c) grant a temporary licence to the applicant, which would allow him to practice under supervision.

(2) Where restoration to the Medical Specialist Register is being sought, the applicant shall pursue the process set out in section 16 within three months of his restoration to the Register.

Penalties.

30. Any person who commits an offence under this Act for which no specific penalty is provided is liable to a penalty of seven hundred and fifty dollars, and in case of a continuing offence to a further penalty of thirty dollars for each day during which such offence is continued after written notice thereof from the Council.

Authorisation to prosecute.
[*172/1961
136/1976
31 of 2007].

31. No conviction shall take place in respect of any prosecution for any offence against this Act unless the prosecution has been authorised in writing by the Council under the hand of the Secretary or by the Director of Public Prosecutions; and any authority purporting to be signed by the Secretary shall be received as prima facie evidence of the authorisation.

Retention of services of Attorney-at-Law.

32. In the prosecution of any person for any offence committed against this Act, the Council may, if it sees fit, employ or instruct any Attorney-at-law to appear and prosecute in respect of any such offence, and to apply any part of the funds of the Board towards the payment and remuneration of the Attorney-at-law.

Recovery of penalties.

33. All penalties incurred under this Act or under any Regulation, may be recovered on summary conviction before a Magistrate, who may also award costs.

Fines for use of Board.
[31 of 2007].

34. Any sum or sums of money arising from conviction and recovery of penalties imposed by this Act or by any Regulation, shall be paid to the Magistrate who shall pay the amount recovered to the Treasurer for the use of the Board.

Funds of Board to be used for purpose of Act.

35. The funds or moneys belonging or payable to and collected by the Board under and by virtue of this Act may be applied towards the payment of all expenses incurred in carrying out the provisions of this Act and of all matters incidental thereto.

SCHEDULE

LIST OF MEDICAL SCHOOLS

1. The University of the West Indies, Faculty of Medical Sciences (Trinidad and Tobago).
2. The University of the West Indies, Faculty of Medical Sciences (Jamaica).
3. The University of the West Indies, Faculty of Medical Sciences (Barbados).
4. The World Directory of Medical Schools (where the accreditation status is recognised by the Accreditation Council of Trinidad and Tobago).
5. Institutions accredited by the Educational Commission for Foreign Medical Graduates.

MEDICAL BOARD (FEES) REGULATIONS

made under section 20(1)(d)

- Citation. 1. (1) These Regulations may be cited as the Medical Board (Fees) Regulations.
- Commencement. (2) These Regulations shall come into operation on 1st January 1967.
- Fees. 2. (1) There shall be paid to the Secretary-Treasurer the fees specified in the second column of the following Table in respect of the matters set out in the first column thereof:

TABLE

| <i>First column</i> | <i>Second column</i> |
|--|----------------------|
| Full Registration Licence | \$400.00 |
| Registration of Intern (Provisional Licence) | \$200.00 |
| Temporary Registration Licence | \$300.00 |
| Registration of a Specialist Diploma Licence | \$500.00 |
| Registration of an additional Diploma Licence ... | \$300.00 |
| Annual Retention Fee..... | \$300.00 |
| Fine for non-payment of Annual Retention Fee ... | \$100.00 |
| Issue of letter of good standing | \$150.00 |

(2) The annual retention fee may be paid at the Eric Williams Medical Complex, Uriah Butler Highway or any other place designated by the Board on or before 31st December in each year preceding the year for which it becomes payable.

(3) The Secretary-Treasurer shall notify by post each ~~member~~ ~~registrant~~ whose annual retention fee has not been paid for the following year.

(4) The annual retention fee may be paid in advance for any number of years but payments made in advance in respect of the annual retention fee are not recoverable.

(5) When an annual retention fee is paid, the ~~member~~ ~~registrant~~ ~~or holder~~ of a licence shall receive a certificate of good standing.

MEDICAL BOARD REGULATIONS

**deemed to be made under section 20*

- Citation. 1. These Regulations may be cited as the Medical Board Regulations.
- Common Seal. 2. The common Seal of the Board shall have engraved thereon Medical Board of Trinidad and Tobago and shall represent the arms of Trinidad and Tobago with the figure of the AEsculapius in the foreground.
- Issuing of licences and certificates. 3. All licences and certificates issued by the authority of the Board shall be stamped with the Seal of the Board.
- Applying for registration. 4. Any person applying for registration as a ~~member-registrant~~ of the Board shall appear in person at a meeting of the Council and present for inspection all necessary documents.
- The Council may exempt any person from attendance if he produces satisfactory reasons for the exemption.
- Lost or destroyed licence.
[51/1980]. 5. When a licence has been proved to have been lost or destroyed, a certificate of registration may be issued on the authority of the Council on the payment of a fee of five dollars.
- Annual General Meeting. 6. An Annual General Meeting of the Board shall take place not later than the 15th March in each year. At the meeting the statement of accounts and the report of the work of the Council for the year shall be submitted to the Board. Any other business of which at least three days' notice have been given shall also be considered at the meeting.
- Communications. 7. All communications shall be directed through the Secretary-Treasurer.
- Registration of licences. 8. The registration of all licences shall be dated and signed by the Secretary-Treasurer.
- Minute Book, Register 9. The Secretary-Treasurer shall keep the Minute Book and Register.
- Moneys payable to Board. 10. The Secretary-Treasurer shall receive all the moneys payable to the Board and shall lodge all such moneys in a Bank to the credit of an account to be entitled the Medical Board of Trinidad and Tobago.
- Payments. 11. The Secretary-Treasurer shall when practicable make all payments above the sum of ten dollars by cheque, such cheques to be signed by him and countersigned by the President.

| | |
|---------------------------------|--|
| Bookkeeping. | 12. The Secretary-Treasurer shall keep a book in which shall be entered the receipts and payments of the Board. |
| Balance sheet and expenditure. | 13. The Secretary-Treasurer shall annually, in January, submit to the Council for presentation to the Board a balance sheet of the Revenue and Expenditure of the Board, and a statement of the work of the Council during the year. |
| Convening meetings of Council. | 14. The Secretary-Treasurer shall at the request of the President convene all meetings of the Council for such time and at such place and with such object as may be specified by the President. |
| Summoning meetings of Board. | 15. The Secretary-Treasurer shall at the request of the President, or on a requisition in writing signed by at least four registrants members of the Board , summon all such meetings of the Board as he may be required to summon as aforesaid. At least three days' notice shall be given of all such meetings. |
| British Pharmacopeia. | 16. The British Pharmacopeia shall be the official Pharmacopeia of the Medical Board. The Board may by resolution adopt any new edition of the above-named Pharmacopeia, or any addendum thereto, put forward by the authority of the General Council of Medical Education and Registration of the United Kingdom. |
| Fee for services. [51/1980]. | 17. The following fee shall be paid by the Board to the Officer hereunder mentioned for services: <i>The Secretary-Treasurer: Annual Honorarium \$500.</i> |
| Investment of funds. [78/1956]. | 18. The Council may from time to time place at interest or invest in the purchase of such securities as may be approved by the Minister any portion of the funds of the Board not immediately required for the purposes of the Board. |
| Penalty. | 19. A person who is guilty of a breach of any of these Regulations is liable on summary conviction to a penalty of \$200. |
| Copy of Regulations | 20. Every person now on the Register, and every other person at the time of registration shall be supplied with a copy of the Regulations of the Board. |

MEDICAL BOARD (SPECIALIST REGISTRATION) REGULATIONS

made under section 20(1)(k) and (2)

Citation.

1. These Regulations may be cited as the Medical Board (Specialist Registration) Regulations.

Interpretation.
Ch. 29:50

2. In these Regulations, “Medical Specialist Register” means the Specialist Register provided under section 10A of the Act.

Requirements to
register as a
Medical Specialist.

3. Any person applying for registration as a specialist in the Medical Specialist Register shall, in addition to the information required under section 16 and in accordance with paragraph (c) of that section, furnish to the Secretary-Treasurer—

- (a) satisfactory evidence of specialist postgraduate qualifications;
- (b) evidence that he holds full registration with the Board; and
- (c) an updated certificate of good standing.

Registration on the
Medical Specialist
Register.

4. Any person who satisfies the requirements of the Act and regulation 3, shall be entitled to be registered as a specialist in the Medical Specialist Register.

Transitional.

5. Notwithstanding the provisions of regulation 3, a person who at the date of the coming into force of these Regulations, was in possession of specialist postgraduate qualifications and was registered as a specialist in the Medical Specialist Register, shall be entitled to be registered as a specialist in the Medical Specialist Register under these Regulations without making application therefor and shall be so registered.