I: DEFINITIONS:

1. In these Regulations:

(a) “ACFMRA” means the Accreditation Committee of the Federation of Medical Regulatory Authorities of Canada;
(b) “ACGME” means the Accreditation Council for Graduate Medical Education;
(c) “AOA” means the American Osteopathic Association;
(d) “CACMS” means the Committee on Accreditation of Canada Medical Schools;
(e) “Canadian Medical School” means a school accredited by the CACMS;
(f) “FAIMER” means the Foundation for Advancement of International Medical Education and Research;
(g) “International Medical School” means a medical school which:
   (i) is listed on the WHO Directory or the FAIMER Directory; and
   (ii) has a physical campus (i.e., is not a “virtual” school);
(h) “LCME” means Liaison Committee on Medical Education;
(i) “US Medical School” means a school accredited by the LCME or the Accreditation Committee of the AOA;
(j) “WHO” means the World Health Organization.

II: REGISTRATION:

1. (1) An application for Registration in the Medical Register shall be in a form authorized by Council accompanied by the following:

   (a) a notarized, unmounted photograph of passport size;
   (b) a notarized copy of a birth certificate, baptismal certificate or other evidence of date of birth acceptable to Council;
   (c) evidence of Canadian citizenship or of legal entitlement to live and work in Canada;
   (d) (i) an official transcript showing completion of the medicine courses taken by the applicant; or
      (ii) a certificate from the faculty of the school of medicine attended by the applicant attesting that the applicant has completed the syllabus and graduated, showing the subjects in which the applicant has been examined.
   (e) evidence of degree standing or other registrable qualifications;
   (f) a curriculum vitae comprising a chronological list of professional appointments and qualifications;
   (g) evidence from the Medical Council of Canada establishing successful completion of all qualifying examinations of the Medical Council of Canada;
   (h) evidence of

      (i) successful completion of pre-registration physician training of either:

         A: a twelve-month (48 weeks, exclusive of vacation) rotating internship which includes not less than six weeks of general internal medicine, six weeks of general surgery, six weeks of pediatrics and six weeks of obstetrics/gynecology, and has
been approved by the ACFMRAC, which internship must have been completed prior to July 1, 1993; or

B: a two year program approved by the College of Family Physicians of Canada and by the ACFMRAC,

Or

(ii) A: Certification by the Royal College of Physicians and Surgeons of Canada in a specialty;
B: Certification by the College of Family Physicians of Canada; or
C: Completion of a program of not less than two years’ duration (96 weeks, exclusive of vacation) which is accredited by the ACFMRAC, and approved by the Council which provides significant training in the disciplines of medicine, surgery, pediatrics, obstetrics and gynecology, psychiatry and family medicine, with not less than eight months’ training in the five disciplines named in this subsection which are not the primary field of the program, and attested to by the associate dean, post-graduate education of a Canadian Medical School;

(i) evidence of certification by the Royal College of Physicians and Surgeons of Canada, or other specialist certificates, where applicable;
(j) a satisfactory certificate of good standing from every medical licensing authority in whose jurisdiction the applicant holds or last held a license or permit to practice in the past five years;
(k) evidence of reasonable fluency in the English or French language;
(l) certified English translation of all documents in other than English, French or Latin, such certification to be in a manner acceptable to the Registrar.

(2) The provisions of subparagraph 1(d) shall not apply to graduates of Canadian or US Medical Schools.

(3) The Council may waive the application of any of the requirements contained in subparagraph (1).

2. (1) No applicant who has not been previously registered shall be granted registration and issued a license unless such applicant commences the practice of medicine in Prince Edward Island within twelve (12) months from the date such registration was granted.

(2) Any applicant for registration who is not, at the time of application, a resident of Prince Edward Island, shall provide Council with such evidence as the Council deems satisfactory to assure Council of the applicant’s intention to carry on the practice of medicine in Prince Edward Island within Twelve (12) months from the date of application.

3. The provisions of subsections 1(g) and 1(h), shall not apply to any applicant who held the certificate of LMCC from the Medical Council of Canada as of January 1, 1992, and such applicant, in lieu of the requirements of subsections 1(g) and 1(h), shall supply evidence of successful completion of internship requirements in effect at such date, and the certificate of LMCC from the Medical Council of Canada.

III: SPECIALIST REGISTER:

1. Specialist Registration is recognition of specialist status only.

2. (1) To be eligible for Specialist Registration, a physician must:
(a) hold a general license for Prince Edward Island; and
(b) possess certification by the Royal College of Physicians and Surgeons of Canada.

(2) Notwithstanding subparagraph (1), the Council may approve Specialist Registration for a physician who does not comply with the requirements of subparagraph (1) if, in the opinion of Council, such physician possesses qualifications at least equal to the qualifications described in subparagraph (1).

IV: **TEMPORARY AND LIMITED REGISTER:**

1. Registration in the Temporary and Limited Register may be granted to applicants who comply with the following:

   (a) applicants who are otherwise eligible for registration, but who do not plan to practice in the Province for a full calendar year. The Council shall be consulted by the Registrar before a third temporary license is issued in any one year for locum tenens purposes;
   (b) applicants who do not possess all of the qualifications for registration as prescribed in the Act and Regulations;
   (c) applicants who are entitled to practice medicine in any other province or country and who are designated by a hospital or association of hospitals in any province of Canada as members of a human organ retrieval team;
   (d) applicants who are entitled to practice medicine in any other province or country and who consult in Prince Edward Island with a medical practitioner who holds a license.

2. Registration granted to applicants described in subparagraph 1(b) hereof shall be granted for such period of time and upon such terms and conditions, including restrictions as to the area of medicine in which the applicant may practice, as the Council shall determine at the time of granting registration.

3. (1) Applicants seeking registration under subparagraph 1(c) hereof, shall provide to the Registrar the written opinion of the hospital or association of hospitals for whom such applicant is a member of the human organ retrieval team that the applicant has the necessary knowledge and expertise to retrieve human organs for transplant purposes.

   (2) In urgent circumstances, the Registrar may accept, from the Transplant Co-ordinator of the hospital or association of hospitals, oral confirmation of the facts referred to in subparagraph 3(1) hereof, such oral confirmation to be verified in writing within seven (7) days thereafter.

4. Registration under subparagraph 1(c) hereof, shall be valid only for so long as the individuals registered under that subparagraph are members of a human organ retrieval team, and individuals so registered shall not engage in the practice of medicine in Prince Edward Island by virtue of such registration except in connection with the retrieval of human organs for transplant purposes.

5. Individuals registered under subparagraph 1 (d) hereof, may consult in Prince Edward Island with a medical practitioner who holds a license and, if such individual holds a specialist designation from the Royal College of Physicians and Surgeons of Canada, or an equivalent qualification approved by the Council, such individual may also conduct out-patient clinics from a duly approved hospital in Prince Edward Island, provided that such out-patient clinics are held no more frequently than an average of once per month on an annual basis.
V: FAMILY PRACTICE REGISTER:

1. Registration in the Family Practice Register may be granted to applicants who comply with the requirements for registration in such register as prescribed by the Act.

2. The registration of a member under the Family Practice Register shall be revoked upon receipt by the Registrar of notice from the College of Family Physicians of Canada that the College of Family Physicians has revoked the Certificate of Family Practice issued by the College of Family Physicians of Canada to such member.

3. (1) There shall be an area of expertise within the Family Practice Register known as “Family Practice Anesthetists”.

   (2) An applicant registered in the Family Practice Register may be designated as a Family Practice Anesthetist and his name so recorded in the Family Practice Register upon:

      (a) his completion of twelve months of anesthesia training in a program and facility accredited by the Royal College of Physicians & Surgeons of Canada, and

      (b) receipt by the Council of appropriate written and detailed documentation from the program director of the university training program evidencing successful completion by the applicant of the Family Practice Anesthesia training.

(3) Upon an applicant who is registered in the Family Practice Register and has previous experience in anesthesia successfully completing such additional training as may be determined by the Council, such applicant shall be designated as a Family Practice Anesthetist and shall be entitled to have such designation noted in the Family Practice Register.

(4) The Council may, but is not obliged to, designate as a Family Practice Anesthetist and enter in the Family Practice Register the name of any member of the College entitled to registration in the Family Practice Register who practices anesthesia in Prince Edward Island on the date upon which this Regulation comes into effect.

VI: MEDICAL EDUCATION REGISTER:

1. (1) The Medical Education Register shall be divided into three parts:

   (a) Part I - Persons who are students of a Canadian Medical School, U.S. Medical School or International Medical School and who are engaged in a program of pre-registration training acceptable to the Council;

   (b) Part II – Persons who hold a medical degree from a Canadian Medical School, U.S. Medical School or International Medical School and are engaged in a program of pre-registration physician training acceptable to the Council;

   (c) Part III – Persons who hold a medical degree from a Canadian Medical School, U.S. Medical School or International Medical School and are engaged in a program of post-graduate training acceptable to the Council.

   (2) Individuals fulfilling the criteria set out in subsection (1) may, upon application and payment of the prescribed fee, be registered in the appropriate part of the Medical Education Register.
2. A person registered in Part I of the Medical Education Register may practice medicine as a student in a program of pre-registration physician training acceptable to Council, but only under the immediate supervision and direction of a registered medical practitioner.

1.1 Notwithstanding subsection 1(1), a student of International Medical School may only be registered under Part 1 of the Medical Education Register if the applicant:
(a) has completed core training in an International Medical School and is in a period of clinical training;
(b) is working in Prince Edward Island in the position arranged by the Department of Health of the Province of Prince Edward Island; and
(c) provides to the Registrar confirmation from the International Medical School, by letter signed by the undergraduate dean or equivalent officer, with accompanying university stamp or seal, confirming that the applicant is registered at the International Medical School and outlining the level of training which the applicant has reached and certifying that the applicant is in good standing with the International Medical School.

1.2 Notwithstanding subsection 1(1), a graduate of International Medical School may only be registered in Part II or Part III of the Medical Education Register if the applicant:
(a) is engaged in a program of post-graduate training under the auspices of a Canadian Medical School; and
(b) has successfully completed the Medical Council of Canada evaluating examination.

1.3 An individual who has been registered in Part II or Part III of the Medical Education Register pursuant to section 1.2 must successfully complete the Medical Council of Canada qualifying examination Part I within one year of being registered in Part II or Part III of the Medical Education Register, failing which the individual is subject to being struck off the Medical Education Register by the Council.

3. (1) Subject to subsections (2) and (3), an individual registered in Part II of the Medical Education Register may practice medicine:
(a) in any hospital in which he is employed in the course of such program of pre-registration physician training;
(b) with an ambulance service approved by such hospital;
(c) in any other institution utilized for the training of physicians in such program of pre-registration as is approved by the teaching authority.

(2) An individual registered in Part II of the Medical Education Register shall practice medicine only under the supervision and direction of a registered medical practitioner.

(3) Notwithstanding subsections (1) and (2), an individual registered in Part II of the Medical Education Register shall not sign:
(a) death certificates;
(b) committal papers; or
(c) life, accident or health insurance papers.

4. Notwithstanding subsections 3.1 and 3.2, an individual registered in Part II of Part III of the Medical Education Register may write prescriptions in the course of the practice of medicine as per Section 3(1) of Subsection 5(1) as the case may be, without any countersignature from the supervising physician.
5. (1) Subject to subsection (2), an individual registered in Part III of the Medical Education Register may practice medicine:

(a) in any hospital in which he is employed in the course of such program of post-graduate training acceptable to Council;
(b) with an ambulance service approved by such hospital;
(c) in any other location utilized for the training of physicians in such program of post-graduate studies, provided that such location is approved by the teaching authority.

(2) Notwithstanding subsection (1), an individual registered in Part III of the Medical Education Register shall carry out a locum tenens only if registered in the Medical Register or Temporary Register.

6. Registration pursuant to Regulation VI (1) (a) shall be voluntary on the part of the student.

7. The Council may cancel the registration of an individual registered in the Medical Education Register upon:

(a) such individual ceasing to have the qualifications for registration in the Medical Education Register, or
(b) such individual being the subject of disciplinary action by the College or another medical licensing authority having jurisdiction over such individual.

VII: CORporations Register:

1. An application for registration in the Corporations Register shall be in a form authorized by Council accompanied by the following:

(a) a certified copy of the Letters Patent or Articles of Incorporation of the applicant;
(b) a certificate of good standing issued by the jurisdiction of incorporation of the applicant;
(c) a certificate of the Secretary of the corporation as to the legal and beneficial ownership of all issued shares of the corporation and as to the identity of all the directors of the corporation;
(d) a list of all persons who will carry on the practice of medicine on behalf of the corporation.

2. (1) A corporation holding registration in the Corporations Register shall annually file with the Registrar, on or before the 31st day of January in each year, a statutory declaration of the Secretary of the corporation stating the identity of all the legal and beneficial shareholders and directors of the corporation.

(2) The Secretary of any corporation registered in the Corporations Register shall, upon any change in the legal and beneficial ownership of any of the issued shares of the corporation, or in the identity of any of the directors of the corporation, on the same date upon which such change occurs, file with the Registrar written advice of such change.

(3) Failure to comply with subsection (2) shall entitle the Council to revoke the registration of a corporation in the Corporations Register.

3. Upon the annual renewal of the licenses held by the legal and beneficial owners of all issued shares of the corporation, and provided the requirements of section 21(3) of the Act respecting registration continue to
be complied with by the corporation, the license of a corporation issued pursuant to section 21(5) shall be renewed, subject to the continued compliance by the corporation with the provisions of the Act.

4. **(1)** A partnership consisting of two or more professional corporations, or consisting of one or more professional corporations and one or more individual practitioners, may carry on business under such name as such partnership may determine, provided that all documentation utilized by such partnership in dealing with the public discloses that one or more of the partners is a professional corporation, and also names the individuals carrying on the practice of medicine on behalf of the corporation.

*(2)* A professional corporation carrying on the practice of medicine without association with another professional corporation or individual, shall indicate in all documentation utilized by it in dealing with the public that it is a professional corporation, and shall also identify all individuals carrying on the practice of medicine on behalf of the corporation.

VIII: **FEES:**

1. The Council shall annually prescribe the amounts of all fees payable under the Act and Regulations, which amounts shall remain in effect until further prescribed by the Council.

2. All physicians practicing as professional corporations shall be liable to pay the appropriate registration and licensing fees individually, notwithstanding the absence of fees payable for registration in the Corporations Register.

3. The annual licensing fee shall be reduced by 50% for any individual applying for a license subsequent to July 1 in any year.

4. Council shall have the power to impose such additional levy upon members of the College in such amounts as the Council shall consider sufficient to enable the College to discharge its financial obligations from time to time, and such levy shall be added to and comprise part of the annual license fee for persons registered in the Medical Register, and be collectable by the Council in the same manner as the annual license fee.

IX: **PENALTIES FOR LATE PAYMENT OR NON-PAYMENT OF ANNUAL FEES:**

1. The Registrar shall, on or before the 1st day of December in each year, mail to each member then holding a license, a written notice in Form A or to like effect respecting the renewal of his license.

2. Every member who wishes to have his license renewed for the following calendar year shall pay to the Registrar or such person as the Registrar may nominate, on or before the 15th day of January of each year, the prescribed annual license fee.

3. **(1)** Every member who fails to pay the prescribed fee on or before January 1 of each year, shall be liable to pay a late payment penalty in an amount prescribed by the regulations, and the Registrar shall, on or before the 15th day of January, mail to each member who has failed to pay the prescribed annual license fee, a notice in Form B or to like effect.
(2) Upon receipt by the Registrar of notice from the Prince Edward Island Medical Society of non-payment of annual membership fees of the Society by a member, the Registrar shall, on or before the 15th day of February, mail to such member who has failed to pay the annual membership fee of the Society a notice in Form C or to like effect.

4. (1) The license of a member who fails to pay:

(a) the prescribed annual license fee or fees  
(b) such penalty or penalties as prescribed by the Regulations on or before the 30th day of January in any year, shall be suspended.

(2) The license of a member who fails to pay:

(a) the prescribed annual membership fee of the Prince Edward Island Medical Society, and  
(b) such penalty or penalties as prescribed by the Regulations, on or before the 15th day of March in any year, shall be suspended.

(3) The license of a member who fails to pay any additional levy imposed upon members of the College by Council, within thirty (30) days of being notified of such additional levy, shall be suspended.

(4) The Registrar shall promptly enter in the Register a memorandum with respect to the name of each member whose license is suspended and shall thereupon notify all of the parties deemed necessary by Council of the fact that the license of each such member has been suspended.

5. (1) A member of the College who leaves the Province to reside elsewhere shall notify the Registrar of that fact.

(2) In the event that an application for a license is received from an individual who has complied with subparagraph (1) hereof, Council shall review the application and shall not impose a penalty fee, if a satisfactory explanation for the departure from the Province is given to Council;

(3) In the event an application for a license is received from an individual who has not complied with subparagraph (1), such individual shall be required to pay the annual license fee for each year for the period of his absence, plus the reinstatement fee.

(4) Notwithstanding any compliance with subparagraph (1), any individual who has been absent from the Province for a period of six years shall be required to re-apply for registration in the Medical Register.

(5) Notwithstanding Subsections IX: 3. (1), and IX: 4.(1) any member who is registered as a Visiting Consultant on the Temporary and Limited Register shall not be subject to such suspension or penalty and shall have his licence reinstated in the given year on receipt of the annual licence fee for Visiting Consultants, such fee to be received prior to the consultant undertaking any medical work on PEI during that calendar year, and provided that 12 months has not elapsed, since the expiry of the last active registration.
FORM A:
NOTICE

Your license to practice medicine in the Province of Prince Edward Island expires December 31, 20___. In order for your license to practice medicine to be renewed, you are required to pay the annual licensing fee of $_____ to the College of Physicians and Surgeons, on or before January 15, 20___, in accordance with Section 25 of the Prince Edward Island Medical Act and Regulations made thereunder.

Failure by you to pay the foregoing fees within the time specified will result in a late payment penalty of ($200.00) being imposed, and may result in your license to practice medicine in Prince Edward Island being suspended in accordance with the provisions of Section 25 of the Prince Edward Island Medical Act.

REGISTRAR

FORM B:
NOTICE

The records of the College of Physicians and Surgeons of Prince Edward Island show that you have not paid the prescribed annual license fee for the College of the Physician and Surgeons of Prince Edward Island for the year commencing January 1, 20___. By virtue of Section 25 of the Prince Edward Island Medical Act and Regulations made thereunder, you are hereby advised that, unless payment is made of the prescribed annual license fee of $_____ and a late payment fee of ($200.00) to the College of Physicians and Surgeons of Prince Edward Island on or before the 30th day of January, 20___, your license to practice medicine in Prince Edward Island shall be suspended effective the 31st day of January, 20___, without further notice to you. If your license is suspended in accordance with Section 25 of the Prince Edward Island Medical Act, prior to any reinstatement of your license to practice medicine in Prince Edward Island, a reinstatement fee of $300.00 will be required in addition to the annual license fee of $_____.

REGISTRAR

FORM C:
NOTICE

The College of Physicians and Surgeons of Prince Edward Island has received notice from the Prince Edward Island Medical Society that you have not paid the prescribed annual membership fee of the Prince Edward Island Medical Society for the year commencing January 1, _____. By virtue of Section 25 of the Prince Edward Island Medical Act and Regulations made thereunder, you are hereby advised that, unless payment is made to the Prince Edward Island Medical Society of the prescribed annual membership fee of $_____ on or before the 15th day of March, 20___, and notice of such payment is received by the College of Physicians and Surgeons of Prince Edward Island, your license to practice
medicine in Prince Edward Island shall be suspended effective the 16th day of March, 20___, without further notice to you. If your license is suspended in accordance with Section 25 of the Prince Edward Island Medical Act, prior to any reinstatement of your license to practice medicine in Prince Edward Island, a reinstatement fee of $300.00 payable to the College of Physicians and Surgeons of Prince Edward Island will be required.

REGISTRAR

X: AMENDMENT OF BY-LAWS AND REGULATIONS:

1. For the purposes of this Regulation, the term “Special Resolution” means a Resolution passed by not less than two-thirds of the votes cast by the members who voted in respect of that Resolution, or signed by all the members entitled to vote on that Resolution.

2. By-laws and Regulations shall be enacted by a Special Resolution of the Council.

3. No By-law or Regulation shall be considered by the Council unless a notice of motion has been made in accordance with Section 4 hereof.

4. (1) Notice of motion to enact a By-law or Regulation shall be made by a written notice of motion of a member of the Council at any regular or special meeting of the Council.

   (2) Every notice of motion to enact a By-law or Regulation shall be laid on the table until:

   (a) a special meeting of the Council, to be held at least one month after the giving of the notice of motion; or

   (b) the next regular meeting of Council, whichever first occurs, at which time the motion shall be considered.

5. Upon a notice of motion having been tabled in accordance with Section 4 hereof, the Registrar shall mail a copy of the notice of motion to every member of the Council, at least one week prior to the meeting at which the motion is to be considered.

6. A By-law shall be effective immediately upon approval by the Council, or at such other time as Council may direct.

7. A Regulation becomes effective 14 days after a copy of the Regulation has been sent to the Minister of Health and Social Services in accordance with the Section 67(2) of the Medical Act.

8. Any amendment or repeal of a By-law or Regulation shall be made by By-law or Regulation, respectively.

9. No act or thing done in reliance upon, or right acquired under or pursuant to, a by-law or regulation which is subsequently repealed or amended shall be prejudicially affected by such repeal or amendment.
XI: PROFESSIONAL MISCONDUCT:

1. For the purposes of Part IV of the Medical Act, “professional misconduct” constitutes a failure to maintain the standards of practice of the professional and includes:
   (a) failing to maintain accepted professional standards and procedures in the practice of medicine;
   (b) engaging in the practice of medicine while the medical practitioner’s ability to perform any professional service in accordance with accepted professional standards is impaired by a disability, illness, addiction or condition;
   (c) failing to advise a patient that the medical practitioner’s moral or religious convictions prevent the provision of medical treatment that may be appropriate for the patient and to advise the patient of the consequences of not receiving such a treatment;
   (d) making a claim respecting the utility of a remedy, treatment, device, or procedure that cannot be supported as a reasonable professional medical opinion;
   (e) prescribing, administering or assisting any person in the use of any drugs or therapy in a manner that is not consistent with generally accepted professional standards and procedures in the practice of medicine, unless in the context of a research protocol approved by a research ethics committee acceptable to Council;
   (f) failing to reveal the exact nature of a remedy or treatment following a lawful request for such information;
   (g) prescribing selling, administering, distributing, ordering, or giving any drug that is classified as a controlled substance under the Controlled Drugs and Substances Act (Canada), S.C. 1996, c. 19, or recognized as addictive or dangerous, to a family member or to himself or herself;
   (h) engaging in conduct or an act relevant to the practice of medicine that, having regard to all the circumstances, would reasonably be regarded by medical practitioners as disgraceful, dishonourable, or unprofessional;
   (i) failing to comply with the terms of any agreement made with the Council relating to the practice of medicine or with any undertaking given to the Council;
   (j) failing to respond appropriately or within a reasonable time to a written inquiry relating to the medical practitioner’s practice of medicine from the Registrar, the Council, a Committee of the Council or a person acting on behalf of the Registrar, the Council or a Committee of the Council;
   (k) failing to report to the Council the commencement of any legal proceedings against the medical practitioner, any action taken against the medical practitioner by any professional regulatory body, health care institution, professional association, government body, law enforcement agency, or a decision or judgment in respect of the medical practitioner by any court, for any act or conduct which could constitute professional misconduct under the Act or these regulations, or for any act or conduct that could lead to a finding under the Act that the member is unfit to engage in the practice of medicine;
   (l) permitting, counselling or assisting any person who is not a medical practitioner or medical corporation to engage in the practice of medicine unless the medical practitioner has, in the opinion of the Council, reasonable justification;
   (m) improperly prescribing, selling or dispensing a drug or a medical product;
   (n) abusing a patient verbally or physically;
   (o) engaging in the practice of medicine in another jurisdiction without being authorized to do so by the professional regulatory body regulating the practice of medicine in that jurisdiction unless the medical practitioner has, in the opinion of the Council, reasonable justification;
(p) providing a professional medical service without the consent of the patient if consent is required by law;
(q) requesting that a patient or any other person release, exempt, or otherwise limit the medical practitioner’s liability resulting from professional negligence or error;
(r) failing to maintain the records and accounts that are required by the College to be kept by medical practitioners with respect to their practice;
(s) charging or accepting any fee that is not fully disclosed, fair and reasonable;
(t) charging or accepting a fee for an undertaking to be available to provide insured services to a specific patient;
(u) refusing to render a medically necessary emergency service unless payment of the whole or part of the fee is received in advance of the service being rendered;
(v) charging or accepting a fee for services not performed, other than for the cancellation of an appointment within a reasonable time before the appointment according to a written policy of the medical practitioner, if the patient has received prior notification of the policy, and a method is available for patients to notify the medical practitioner of cancellations;
(w) failing to issue a statement or receipt on the request of a patient or a person on behalf of the patient;
(x) signing or issuing in the medical practitioner’s professional capacity a document which the medical practitioner knows or ought to know is false or misleading;
(y) paying fees to or conferring a benefit on, or requesting or accepting a fee, rebate, commission or other benefit from, a person in respect of the referral of a patient; and
(z) failing, without reasonable cause, to provide a report, certificate or record relating to an examination or treatment performed by the medical practitioner to the patient or a person on behalf of the patient within a reasonable time after a request for the report, certificate or record is made;
(aa) Failure to cooperate with the Council, College, its Committees, and its Officers or Employees;
(bb) Failure to provide such information to the College of Physicians and Surgeons as required by Council.

XII: PHYSICIAN RETRAINING:

1. (1) Upon receipt by Council of an application for registration of a medical practitioner who has not at any time in the previous three years actively carried on the practice of medicine, Council may, before such registration is granted and a license issued, require such practitioner to undergo such course of retaining as may be prescribed by Council in coordination with the Dalhousie University Medical School or other approved medical school.

   (2) Upon satisfactory completion of the retraining course referred in subparagraph (1), Council shall, if all other requirements for registration have been met by the applicant, grant registration to such application and direct the Registrar to issue such license to such applicant.

2. (1) A member of the College wishing to substantially alter his type of practice must apply to and obtain the consent of Council before undertaking such alteration.

   (2) Upon receipt of an application under subparagraph (1), Council may investigate the proposed alteration and, upon review of the facts, may require the member to undergo a course of retraining as may be prescribed by Council in co-ordination with Dalhousie University Medical School or other approved medical school.
(3) If a member of the College contravenes the provisions of subparagraph (1), Council may suspend the license of such member until such time as the member has complied with the provisions of subparagraph (1).

(4) In the event Council has required a course or retraining as described in subparagraph (2), Council shall, upon the member satisfactorily completing the course of retraining, consent to the substantial alteration in the member’s type of practice.

XIII: PATIENT INFORMATION:

1. The Council may, upon receipt of a request from a member for relevant professional information respecting a patient in the possession of another member who,

   (a) by reason of physical or mental incapacity, is unable to provide such information to the member so requesting; or
   (b) refuses to make such information available,

appoint a member or members to locate and review the records of the incapacitated or refusing member and provide the requesting member with the information requested.

2. The Council shall not make the appointment referred to in paragraph 1 unless the requesting member establishes the necessity of disclosure to him of the information requested.

3. No action shall be brought or maintained against the Council or its appointees pursuant to paragraph 1 for any claim for breach of confidentiality arising out of the review of the incapacitated or refusing member’s records by the Council’s appointees, or the disclosure of relevant professional information respecting a patient to the member requesting same.

XIV: ADVERTISEMENT:

1. A medical practitioner shall not, when publishing or communicating any information about his or her practice of medicine or qualifications, whether orally, in print or through electronic media

   (a) make statements that are unprofessional, false, misleading or deceptive in any way;
   (b) promote or offer incentives for the use of the medical practitioner's services;
   (c) compare the medical practitioner's skill with other medical practitioners or imply superiority of skill or quality of services;
   (d) refer to specific drugs, appliances or equipment;
   (e) include associations between the medical practitioner and any company or product, unless the product is closely identified with a procedure performed by the medical practitioner and the association with the product is reasonable for the purposes of adequately informing the public;
   (f) make endorsements; or
   (g) contravene the Canadian Medical Associations Code of Ethics.