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STATUTORY INSTRUMENTS

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**1992 No. 635**

**NATIONAL HEALTH SERVICE,  
ENGLAND AND WALES**

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

*Made - - - - 10th March 1992*

*Laid before Parliament 11th March 1992*

*Coming into force 1st April 1992*

**THE NATIONAL HEALTH SERVICE (GENERAL  
MEDICAL SERVICES) REGULATIONS 1992**

PART I

GENERAL

1. Citation and commencement
2. Interpretation
3. Scope and terms of service

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THE MEDICAL LIST

4. Medical list
5. Application for inclusion in the medical list or to succeed to a vacancy
6. Amendment of or withdrawal from the medical list
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8. Local directory of family doctors
9. Amendment of local directory

PART III

MEDICAL PRACTICES COMMITTEE

10. Appointment of members and tenure of office
11. Reports by the FHSA
12. Advertisement of vacancies

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13. Selection of applicants by FHSA
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15. Conditions under which general medical services are to be provided
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20. Application for services
21. Assignment of persons to doctors
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25. Temporary provision of services
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27. Child health surveillance list
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29. Obtaining contraceptive services
30. Obstetric list
31. Obtaining maternity medical services
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37. Publication of particulars
38. Appointment of medical adviser
39. Guidance to doctors  
Signature

## SCHEDULE 2 — TERMS OF SERVICE FOR DOCTORS

1. Interpretation
2. Unless the context otherwise requires, any reference in a paragraph...
3. General
4. A doctor's patients
5. A doctor who is elderly or infirm or who has...
6. Acceptance of patients
7. A doctor may— (a) undertake to provide contraceptive services to...
8. Notwithstanding that the person concerned is not on his list,...
9. Termination of responsibility for patients
10. Where a doctor informs the FHSA in writing that he...
11. (1) A doctor with whom an arrangement has been made...
12. Services to patients
13. Provision of services to patients
14. Newly registered patients
15. Patients not seen within 3 years
16. Patients aged 75 years and over
17. (1) Unless prevented by an emergency, a doctor shall attend...
18. Absences, deputies, assistants and partners
19. (1) Subject to the following provisions of this paragraph, a...
20. (1) In relation to his obligations under these terms of...
21. (1) A doctor shall inform the FHSA of any arrangements...
22. (1) Before entering into arrangements with a deputising service for...
23. A doctor shall take reasonable steps to satisfy himself that...
24. (1) A doctor shall inform the FHSA of the name...
25. A doctor acting as a deputy for another doctor may...
26. When issuing any document under these terms of service a...
27. Arrangements at practice premises
28. Employees
29. Doctors' availability to patients
30. Doctors available for only 4 days a week
31. A doctor who— (a) intends to operate an appointments system;...
32. (1) A doctor shall not, without the consent of the...
33. (1) Subject to sub-paragraph (2), a doctor shall not, without...
34. Practice area
35. Notification of change of place of residence
36. Records
37. Certification
38. Fees
39. (1) Where a person from whom a doctor received a...
40. Subject to paragraph 38(f) and (j) a doctor shall not...
41. A doctor shall not without reasonable excuse demand or accept...
42. A doctor shall take all practicable steps to ensure that...
43. Prescribing
44. (1) In the course of treating a patient to whom...
45. (1) Where a doctor— (a) is responsible under these terms...
46. For the purposes of paragraphs 43 and 44 in their...
47. Practice leaflet
48. Reports to medical officer etc
49. Inquiries about prescriptions and referrals
50. Annual reports
51. Incorporation of provisions of regulations etc.

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SCHEDULE 3 —

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

1. Full name.
2. Sex.
3. Date of Birth.
4. Private address and telephone number.
5. Medical qualifications and where obtained.
6. Registration number in the Medical Register and date of first...
7. Information about general medical services to be provided for persons...
8. Present or most recent appointment.
9. (a) Name and private address of any intended partner and...
10. Whether applied/intending to apply for inclusion in obstetric list/child health...
11. Notification of the geographical boundary of the applicant's proposed practice...
12. Notification of address(es) of proposed practice premises.
13. Whether the applicant intends to practise as—
14. Where the applicant intends to practise as a job-sharing doctor,...
15. Notification of proposed days and hours of attendance.
16. Telephone number(s) at which prepared to receive messages.
17. Undertaking that if accepting as a patient a person who,...
18. Proposed place of residence (including telephone number and distance from...
19. Declaration that he is a registered medical practitioner, included in...
20. Undertaking to be bound by the terms of service.

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

1. Full name.
2. Sex.
3. Date of birth.
4. Private Address and telephone number.
5. Medical qualifications and where obtained.
6. Declaration that he is a registered medical practitioner, included in...
7. Registration number in the Medical Register and date of first...
8. Whether applying to succeed to a practice, or be appointed...
9. Notification of the geographical boundary of the applicant's proposed practice...
10. Notification of address(es) of proposed practice premises.
11. Whether the applicant intends to practise as—
12. Where the applicant intends to practise as a job-sharing doctor,...
13. Notification of proposed days and hours of attendance.
14. Telephone number(s) at which prepared to receive messages.
15. Undertaking that if accepting as a patient a person who...
16. Proposed place of residence (including telephone number and distance from...
17. Whether or not on the medical list for the FHSA's...
18. If not in the FHSA's medical list, present or most...
19. Professional experience (including starting and finishing dates of each appointment)...
20. The name and address of principal to whom trainee or...
21. Particulars of covenants restricting medical practice by the applicant in...
22. Name and address of any intended partner and whether or...

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23. Names and addresses of two referees.
24. If applicant is not in the FHSA's medical list—
  - PART IIIA — INFORMATION TO BE INCLUDED IN REPORT BY FHSA TO MEDICAL PRACTICES COMMITTEE IN RESPECT OF APPLICATION FOR INCLUSION IN A MEDICAL LIST
    1. Full name of applicant.
    2. Copies of— (a) the applicant's application to the FHSA;
    3. Date from which applicant proposes to provide general medical services...
    4. Area of the FHSA's locality in which such services are...
    5. The number of doctors who are not restricted doctors already...
    6. The total number of patients registered with the medical list...
    7. The average number of patients on the lists of doctors...
    8. Where the applicant proposes to provide such services in partnership...
    9. Details of each doctor, including where requested, the sex of...
    10. Any other information which the FHSA considers to be relevant...
    11. Whether or not the application is supported by the FHSA,...
    12. If the Medical Practices Committee so request, a breakdown of...
    13. A statement that the FHSA has confirmed that the applicant...
    14. A statement that the applicant is a British or a...
  - PART IIIB — INFORMATION TO BE INCLUDED IN REPORT BY ADDITIONAL FHSAS TO MEDICAL PRACTICES COMMITTEES IN RESPECT OF APPLICATION FOR INCLUSION IN A MEDICAL LIST
    1. Full name of applicant.
    2. Date from which the applicant proposes to provide medical services....
    3. The area of the FHSA's locality in which medical services...
    4. The name of any other FHSA in whose locality the...
    5. The area of any other FHSA's locality in which the...
    6. Details of the distance from the nearest point on the...
    7. Whether the areas named in the application—
    8. Whether local practices are unwilling/unable to accept the proposed patients....
    9. Whether the applicant intends to open a branch surgery.
    10. Whether or not the application is supported by the FHSA,...
    11. Any other information which the FHSA considers to be relevant...
  - PART IIIC — INFORMATION TO BE INCLUDED IN REPORT BY FHSA TO MEDICAL PRACTICES COMMITTEE IN RESPECT OF A RESTRICTED LIST APPLICATION
    1. Full name of applicant.
    2. Date from which applicant proposes to provide general medical services....
    3. Copy of the applicant's application to the FHSA.
    4. Copy of evidence concerning the applicant's qualifications and experience produced...
    5. The name of the establishment or organisation, to which patients...
    6. The area of the FHSA's locality in which the establishment...
    7. A statement that the FHSA has confirmed that the applicant...
    8. A statement that the applicant is a British or European...
    9. Whether the application is in respect of a new practice...
    10. Whether the application is made by the successor to any...
    11. Whether or not the application is supported by the FHSA,...
    12. Any other information which the FHSA considers to be relevant...

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

1. Full name of applicant.
2. Copy of the applicant's application to the FHSA.
3. The names of any proposed partners and/or members of the...
4. Copy of any declaration of partnership, or intent to practise...
5. The date from which the applicant proposes to provide the...
6. Confirmation that the applicant is eligible to be included in...
7. The area of the FHSA's locality in which the medical...
8. The name of any other FHSA in whose locality the...
9. The area of any other FHSA's locality in which the...
10. Whether or not the application is supported by the FHSA,...
11. A statement that the FHSA has confirmed that the applicant...
12. A statement that the applicant is a British or European...
13. Any other information which the FHSA considers to be relevant...
14. If the Medical Practices Committee so request, details of the...

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

1. The names of the doctors in the medical list providing...
2. The names and numbers of full-time assistants.
3. Where appropriate, the serial number of each partnership.
4. The part of the FHSA's locality where the doctors mainly...
5. In respect of each doctor,— (a) his full name, sex...

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

1. (a) the full name, age, practice address and, if requested,...
2. Where the doctor provided services in partnership with another doctor,...
3. Details of each doctor who provides general medical services from...
4. Any other information which the FHSA considers to be relevant...
5. The number of doctors who are not restricted doctors providing...
6. If the Medical Practice Committee so request a breakdown of...
7. A recommendation from the FHSA, with reasons, for dealing with...

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

1. Full name.
2. Private address.
3. Information about the services to be provided, and in particular...
4. Name and private address(es) of partner(s) with whom the applicant...
5. Details of any proposed changes to— (a) the geographical boundary...
6. Where applicant is seeking a variation of a condition relating...

**PART VII — INFORMATION TO BE SUPPLIED BY FHSA WITH REGARD TO DOCTORS' LISTS**

1. The number of patients included on the doctor's list, in...
2. The number of children included on the doctor's list for...
3. The number of patients included on the doctor's list for...
4. The number of patients included for whom a rural practice...
5. The number of patients for whom the doctor has assumed...

**PART VIII — INFORMATION TO BE SUPPLIED BY DOCTOR APPLYING FOR INCLUSION IN A CHILD HEALTH SURVEILLANCE LIST**

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1. Full name.
2. Address of practice premises.
3. Registration number in the Medical Register and date of first...
4. Details of relevant medical experience after date of first registration...
5. Title of any post-graduate qualification held and date awarded.

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

1. Name.
2. Address of practice premises.
3. Registration number in the Medical Register and date of first...
4. Details of relevant medical experience after date of first registration...
5. Details of premises and equipment to be used.
6. Title of any post-graduate qualification held and date awarded.

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

1. Name.
2. Address of practice premises.
3. Registration number in the Medical Register and date of first...
4. Details of relevant obstetric experience during the previous 10 years...
5. Details of relevant training undertaken during the previous 5 years....
6. Title of any relevant post-graduate qualification held and date awarded....

SCHEDULE 4 — CHILD HEALTH SURVEILLANCE SERVICES

1. The services referred to in regulation 28(2)(a) shall comprise—
2. The records mentioned in regulation 28(3)(b) shall comprise an accurate...
3. The information mentioned in regulation 28(3)(c) shall comprise—

SCHEDULE 5 —

PART I — CRITERIA TO BE CONSIDERED BEFORE INCLUSION IN AN OBSTETRIC LIST

1. Whether the applicant has, within the period of 10 years...
2. Where an applicant has held an appointment of the type...
3. Whether the applicant has, within the period of 2 years...
4. Whether the applicant has, in the period of 5 years...
5. Whether the applicant is, at the time of the application,...
6. Whether the applicant has, in the period of 2 years...
7. For the purposes of this Part of this Schedule— “maternity...

PART II — MATERNITY MEDICAL SERVICES

1. A doctor with whom a woman has made an arrangement...
2. A doctor with whom a woman has made an arrangement...
3. A doctor with whom a woman has made an arrangement...
4. A doctor with whom a woman has made an arrangement...
5. Where the doctor is aware that an arrangement under regulation...
6. The doctor shall be relieved of his obligations under paragraph...

SCHEDULE 6 — MINOR SURGERY PROCEDURES

SCHEDULE 7 — FORM OF CERTIFICATE TO BE ISSUED BY THE MEDICAL PRACTICES COMMITTEE UNDER PARAGRAPH 1(3) OF SCHEDULE 10 TO THE NATIONAL HEALTH SERVICE ACT 1977

SCHEDULE 8 — DOCTORS' HOURS

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

1. The address of the proposed practice premises.
2. The days in each week during which the doctor will...
3. The hours of each such attendance by the doctor.
4. The hours of any attendance by the doctor on those...
5. The frequency, duration and purpose of any clinic provided by...
6. The estimated total time each week to be spent making...
7. The doctor's proposals for notifying patients of the times and...
8. The terms of any condition imposed by the Medical Practices...
9. In the case of a doctor to whom paragraph 18(2)...

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

1. In the case of a restricted services principal—
2. In the case of a restricted list principal, the name,...

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

1. A brief description of each health-related activity with reference to...
2. The days in each week during which the doctor will...
3. The number of hours in each week which are likely...

PART IV — ILLUSTRATIVE LIST OF HEALTH-RELATED ACTIVITIES

SCHEDULE 9 — LIST OF PRESCRIBED MEDICAL CERTIFICATES

SCHEDULE 10 — DRUGS AND OTHER SUBSTANCES NOT TO BE PRESCRIBED FOR SUPPLY UNDER PHARMACEUTICAL SERVICES

SCHEDULE 11 — DRUGS TO BE PRESCRIBED UNDER PHARMACEUTICAL SERVICES ONLY IN CERTAIN CIRCUMSTANCES

SCHEDULE 12 — INFORMATION TO BE INCLUDED IN PRACTICE LEAFLETS — PERSONAL AND PROFESSIONAL DETAILS OF THE DOCTOR

1. Full name.
2. Sex.
3. Medical qualifications registered by the General Medical Council.
4. Date and place of first registration as medical practitioner.  
— PRACTICE INFORMATION
5. The times approved by the FHSA during which the doctor...
6. Whether an appointments system is operated by the doctor for...
7. If there is an appointments system, the method of obtaining...
8. The method of obtaining a non-urgent domiciliary visit and the...
9. The doctor's arrangements for providing personal medical services when he...
10. The method by which patients are to obtain repeat prescriptions...
11. If the doctor's practice is a dispensing practice the arrangements...
12. If the doctor provides clinics for his patients, their frequency,...
13. The numbers of staff, other than doctors, assisting the doctor...
14. Whether or not the doctor provides child health surveillance services,...
15. Whether the doctor works single handed, in partnership, part-time or...
16. The nature of any arrangements whereby the doctor or his...
17. The geographical boundary of his practice area by reference to...



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18. Whether the doctor's practice premises have suitable access for all...
19. If an assistant is employed, details of that assistant as...
20. If the practice is either a general practitioner training practice,...

#### SCHEDULE 13 — INFORMATION TO BE PROVIDED IN ANNUAL REPORTS

1. The number of staff, other than doctors, assisting the doctor...
2. The following information as respects the practice premises—
3. The following information as respects the referral of patients to...
4. The doctor's other commitment as a medical practitioner, with reference...
5. The nature of any arrangements whereby the doctor or his...
6. The following information as respects orders for drugs and appliances:—...

Explanatory Note