

SCHEDULE 3

PART V

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

- (a) (a) the full name, age, practice address and, if requested, the sex of the doctor and the area of the FHSA's locality in which such services were provided and the date of his death, withdrawal or removal from the medical list;
- (b) whether the doctor practised as—
 - (i) a full time doctor,
 - (ii) a three-quarter time doctor,
 - (iii) a half-time doctor,
 - (iv) a job-sharing doctor,
 - (v) a restricted doctor;
- (c) the total number of patients on his list;
- (d) the number of patients on his list who are over the age of 65;
- (e) where he was a doctor who was authorised or required under regulation 20 of the Pharmaceutical Regulations to provide drugs or appliances, the number of patients on his list in respect of whom he was so authorised;
- (f) the total annual number of temporary resident attendances based on the last available four complete quarters;
- (g) the number of patients on his list attracting deprivation payments;
- (h) the number of hours per week which he devoted to health related activities within the meaning of paragraph 30 of Schedule 2;
- (i) the total number of rural practice units credited for the last known quarter;
- (j) the number and location of the practice premises from which he provided general medical services, and sessions spent at branch surgeries;
- (k) in respect of a single handed doctor, whether the premises are available for sale or rent.