

## CHAPTER 253

### MEDICAL PRACTITIONERS AND DENTISTS ACT

#### SUBSIDIARY LEGISLATION

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**MEDICAL PRACTITIONERS AND DENTISTS (ELECTION  
OF MEMBERS OF THE BOARD) RULES, 1978**

ARRANGEMENT OF RULES

*Rule*

1. Citation.
2. Interpretation.
3. Notice of election to the Board.
4. Nomination of candidates.
5. Election where nominations do not exceed vacancies.
6. Voting procedure.
7. Counting of votes and elections of candidates.
8. Appeals.

SCHEDULES

FIRST SCHEDULE

SECOND SCHEDULE

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**MEDICAL PRACTITIONERS AND DENTISTS  
(ELECTION OF MEMBERS OF THE BOARD) RULES, 1978**

[L.N. 18/1978, L.N. 209/1983, L.N. 216/1994.]

**1. Citation**

These Rules may be cited as the Medical Practitioners and Dentists (Election of Members of the Board) Rules, 1978.

**2. Interpretation**

In these Rules—

“**Returning Officer**” means a person appointed by the Board for the purposes of these Rules.

[L.N. 209/1983, L.N. 216/1994, s. 2.]

**3. Notice of election to the Board**

(1) The Minister may, from time to time, by notice in the *Gazette* and in such newspapers circulating in Kenya as he may think fit, declare that an election to the Board of up to the five medical practitioners and two dentists prescribed under paragraph (f) of subsection 4(1) of the Act shall be held on a day to be specified in the notice, which day is in these Rules referred to as “election day”.

(2) The notice shall be so published at least ninety days before election day.

**4. Nomination of candidates**

(1) Each medical practitioner or dentist registered in Kenya may, in the form set out in the First Schedule, nominate one registered medical practitioner or dentist, as the case may be, as a candidate for election to the Board; but nobody shall nominate himself as a candidate.

(2) The nomination paper shall contain in block letters the full names of both the proposer and of the candidate and their signatures, which signatures shall be made in the presence of a registered medical practitioner or dentist, as the case may be, of at least five years’ practical experience in Kenya as indicated in the form; and the paper shall also be signed by five registered medical practitioners in support of a candidate for election to the Board as a medical practitioner or three registered dentists in support of a candidate for election to the Board as a dentist.

(3) Each nomination paper, when completed in accordance with paragraph (2), may be either delivered in person to the office of, or sent by registered post to, the Returning Officer in time for it to be received by the Returning Officer not later than thirty days before election day.

(4) No nomination paper shall be valid unless the provisions of this rule have been strictly complied with and the candidate has indicated his willingness to stand for election.

(5) A nomination form received by the Returning Officer which does not comply with the provisions of paragraph (2) or which is not received within the time prescribed under paragraph (3) shall be rejected by the Returning Officer but shall be kept and be available for inspection by an interested party for a period of at least six months after the election day to which it relates.

**5. Election where nominations do not exceed vacancies**

(1) If the number of persons correctly nominated for either profession under rule 4 does not exceed the number of vacancies specified in the notice published under rule 3, all the persons nominated for that profession shall be deemed to have been elected and the names shall be published in accordance with the provisions of rule 7(4).



(2) If the number of the persons nominated for either profession exceeds the vacancies on the Board in respect of that profession, the voting procedure prescribed in rule 6 shall be followed.

## **6. Voting procedure**

(1) In the event of an election having to be held, the Registrar shall not later than twenty-one days before election day send by registered post to every medical practitioner or dentist, as the case may require, registered in Kenya, a voting paper in the form set out in the Second Schedule which shall contain the names of all candidates who have been duly nominated in accordance with rule 4 together with a suitably addressed envelope for returning the voting paper.

(2) Each medical practitioner or dentist who receives a voting paper may, if he wishes to record his vote, place an X against the names of such candidates (not exceeding the number in respect of his side of the profession specified in the notice published under rule 3) for whom he wishes to vote, and shall sign and date the voting form and write his full name in capital letters in the spaces provided for that purpose; and a voting paper which does not contain those particulars, or which contains more than those particulars, may be treated as a spoilt voting paper and, if so treated, shall not be taken into account for the purposes of the election.

(3) The voter shall then return the voting paper in the special envelope sent to him, which shall be sealed before it is despatched by delivering it personally or by sending it by registered post to the Returning Officer at the address appearing on the envelope.

(4) A voting paper received by the Returning Officer after noon on election day shall not be opened by him until after the election has been completed and the results have been published in accordance with rule 7, but shall be kept and be available for inspection by an interested party for a period of at least six months after the election day to which it relates.

(5) Personal canvassing for a candidate within the medical or dental professions by any reasonable means shall not disqualify a candidate, but canvassing by posters, press or other mass media or advertisements shall lead to a candidate being disqualified.

[L.N. 216/1994, s. 2.]

## **7. Counting of votes and elections of candidates**

(1) After 4.30 p.m. on election day, the Returning Officer shall, in the presence of the Registrar, a Deputy Director of Medical Services, one registered medical practitioner and one dentist nominated by the Returning Officer, count the votes given for each candidate, and shall forthwith declare those candidates, not exceeding the number of vacancies to be filled, who receive the highest number of votes to be duly elected to the Board.

(2) Candidates or their authorized representatives may be present at the counting of the votes if they so wish.

(3) Election shall be by a simple majority but in the event of a tie the successful candidate shall be determined by a lot drawn by the Returning Officer in such manner as he shall decide.

(4) The names of the successful candidates shall be published within fourteen days after election day in a notice in the *Gazette* and in such newspapers circulating in Kenya as the Returning Officer may think fit.

## **8. Appeals**

A person aggrieved by a decision of the Returning Officer on an election matter may appeal to the Minister within fourteen days of the publication of the results of the election in the *Gazette* and on any such appeal the Minister may annul the election or may vary any decision of the Returning Officer in such manner as he may think fit.

*Medical Practitioners and Dentists Act*

[Subsidiary]

## FIRST SCHEDULE

[Rule 4.]

Counterfoil Serial No. ....

Serial No. ....

## MEDICAL PRACTITIONERS AND DENTISTS BOARD

## NOMINATION PAPER

Nomination of a candidate for election to the Board.

Name and address of nominated candidate in full (block letters) and Registration No. ....

.....

Name and address of proposer in full (block letters) and Registration No. ....

.....

Signature of proposer .....

Signed by the above-named ..... (proposer)

in my presence this ..... day of ....., 20.....

Full Name (BLOCK LETTERS), Address .....

and Registration No. .... (Registered Medical/Dental\* Practitioner  
of not less than five years experience in

Kenya)

Full Names (BLOCK LETTERS)	Address	Reg. No.	Signatures
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

of not less than five supporters (who must be medical practitioners in the case of a candidate who is a medical practitioner); or

Full Names (BLOCK LETTERS)	Address	Reg. No.	Signatures
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

of not less than three supporters (who must be dentists in the case of a candidate who is a dentist).

I agree to accept this nomination.

Signature of candidate .....

Signed by the above-named ..... (candidate)

in my presence this ..... day of ....., 20.....

## FIRST SCHEDULE—continued

Full name (BLOCK LETTERS), Address .....

and Registration No. .... (Registered Medical/Dental\* Practitioner  
of not less than five years experience in  
Kenya)

\*Delete where not applicable.

*Medical Practitioners and Dentists Act*

[Subsidiary]

## SECOND SCHEDULE

[Rule 6.]

Serial No. ....

Counterfoil Serial No. ....

## MEDICAL PRACTITIONERS AND DENTISTS BOARD

## VOTING PAPER—MEDICAL PRACTITIONERS

<i>Names of Candidates</i>	<i>Here insert X against names of candidates for whom you wish to vote</i>

Name and address of voter in block letters and Registration No. ....

Signature of voter .....

Date .....

Serial No. ....

Counterfoil Serial No. ....

## MEDICAL PRACTITIONERS AND DENTISTS BOARD

## VOTING PAPER—DENTISTS

<i>Names of Candidates</i>	<i>Here insert X against names of candidates for whom you wish to vote</i>

Name and address of voter in block letters and Registration No. ....

Signature of voter .....

Date .....

\_\_\_\_\_



**MEDICAL PRACTITIONERS AND DENTISTS  
(FORMS AND FEES) RULES, 1978**

[L.N. 19/1978, L.N. 76/1983, Corr. No. 26/1983, L.N. 204/1988, L.N. 349/1995, L.N. 138/1997, L.N. 26/2000, L.N. 80/2005, L.N. 135/2010, L.N. 12/2012, L.N. 75/2012, L.N. 161/2015, L.N. 4/2017.]

1. These Rules may be cited as the Medical Practitioners and Dentists (Forms and Fees) Rules, 1978.
2. The register of medical practitioners and dentists to be maintained by the Registrar in accordance with section 5(3) of the Act shall be in Form I in the First Schedule to these Rules.
3. Application for registration as a medical or dental practitioner in accordance with section 6(1) of the Act shall be in Form II in the First Schedule to these Rules.
4. The certificate of registration to be issued by the Registrar in accordance with section 7 of the Act shall be in Form III in the First Schedule to these Rules.
5. Application for a licence to render medical or dental services in accordance with section 13 of the Act shall be in Form IV in the First Schedule to these Rules.
6. A licence issued to render medical or dental services in accordance with section 13 of the Act shall be in Form V in the First Schedule to these Rules.
7. Application for a licence for private medical or dental practice in accordance with section 15(1) of the Act shall be in Form VI in the First Schedule to these Rules.
8. A licence for private medical or dental practice in accordance with section 15(2) of the Act shall be in Form VII in the First Schedule to these Rules.
- 8A. The Board may charge additional late application fee of five hundred shillings in respect of applications submitted out of time under rules 4(2), 7(2) and 28(2) of the Medical Practitioners and Dentists (Private Practice) Rules.

[L.N. 204/1988.]

9. Application for recognition of specialist or sub-specialist status shall be in Form VIII in the First Schedule.

[L.N. 76/1983, s. 2.]

10. The fees set out in the Second Schedule shall be payable in respect of the matters set out therein.

[L.N. 76/1983, s. 2.]

11. Application for registration of a medical institution in accordance with rule 4(1) of the Medical Practitioners and Dentists (Medical Institutions) Rules shall be in Form IX set out in the First Schedule to these Rules.

[L.N. 26/2000, s. 2., L.N. 4/2017, s. 2.]

12. The certificate of registration to be issued by the Registrar in accordance with rule 4(3) of the Medical Practitioners and Dentists (Medical Institutions) Rules shall be in Form X set out in the First Schedule to these Rules.

[L.N. 26/2000, s. 2, L.N. 4/2017, s.3]

13. Application for a licence to operate an approved private medical institution in accordance with rule 5(1) of the Medical Practitioners and Dentists (Medical Institutions) Rules shall be in Form XI set out in the First Schedule to these Rules.

[L.N. 26/2000, s. 2, L.N. 4/2017, s. 4]

14. The annual fees assessment form prescribed in rule 5(3) of the Medical Practitioners and Dentists (Medical Institutions) Rules shall be in Form XII set out in the First Schedule to these Rules.

[L.N. 26/2000, s. 2, L.N. 4/2017, s. 5]

[Subsidiary]

**15.** A licence issued to operate an approved medical institution in accordance with rule 5(4) of the Medical Practitioners and Dentists (Medical Institutions) Rules shall be in Form XIII set out in the First Schedule to these Rules.

[L.N. 26/2000, s. 2, L.N. 4/2017, s. 6.]

**16.** The Board shall when inspecting outpatient private medical institutions pursuant to rule 11 of the Medical Practitioners and Dentists (Medical Institutions) Rules (L.N. 25/2000) use the checklist in Form XIV set out in the First Schedule.

[L.N. 75/2012, s. 2, L.N. 4/2017, s. 7]

**17.** The Board shall when inspecting inpatient medical institutions pursuant to rule 11 of the Medical Practitioners and Dentists (Medical Institutions) Rules (L.N. 25/2000) use the checklist in Form XV set out in the First Schedule.

[L.N. 75/2012, s. 2., L.N. 4/2017, s.8.]

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FIRST SCHEDULE

**FORM I**

(r. 2)

## REGISTER OF MEDICAL PRACTITIONERS AND DENTISTS

<i>No.</i>	<i>Full Name</i>	<i>Address</i>	<i>Basic Qualification</i>	<i>Date of Registration</i>	<i>Additional Qualification</i>	<i>Date and No. of original Registration</i>	<i>Remarks</i>
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## Medical Practitioners and Dentists Act

[Subsidiary]

L.N. 161/2015

FIRST SCHEDULE

(para 2 (a))

FORM II

PHOTO

THE MEDICAL PRACTITIONERS AND DENTISTS ACT

(Cap. 253)

**APPLICATION FOR PERMANENT REGISTRATION AS A MEDICAL OR DENTAL PRACTITIONER**

1. Surname ..... First Name ..... Other Names .....
2. Date of Birth ..... Nationality .....
3. ID No./Passport No. ....
4. Address ..... Code ..... Town ..... County ..... Cell Phone .....
5. Email .....
6. Degree, Diploma or licence held ..... Date(s) qualified .....
7. Name of medical/dental school ..... Email .....

8. Name of Internship Training Centre ..... Email .....

Period of internship from ..... to .....

9. Particulars and testimonials covering the period of experience .....

10. Name of employer .....

Address ..... Code ..... Town ..... County .....

Email ..... Tel .....

**Requirements:**

- (i) Copy of ID/Passport;
- (ii) Coloured passport size photo;
- (iii) Certified copies of professional & academic certificates;
- (iv) Evidence of passing Board's pre-registration examination;
- (v) Internship completion Assessment Forms duly filled and stamped;
- (vi) Evidence of registration from EAC Partner States' Boards and councils (for those applying for reciprocal registration);
- (vii) Registration Fee KSh. 8,000.00

All payments should be made at any KCB Branch countrywide to Board's account No. 1103158643 Milimani Branch. SWIFT CODE: KCBLKENX, BANK: KCB, BANK CODE: 01175.

I hereby certify that the above information is correct to the best of my knowledge and that I have met the above requirements.

Signature of Applicant: ..... Date .....

**FOR OFFICIAL USE**

The process will take a maximum of two weeks.

<b>PREPARED:</b>	<b>APPROVED/NOT APPROVED</b>
Name: ..... Designation .....	Name .....
Signature ..... Date .....	Designation .....
<b>RECOMMENDED:</b>	Signature .....
Name: ..... Designation .....	Date .....
Signature ..... Date .....	

[Subsidiary]

**FORM III**

(r. 4)

## MEDICAL PRACTITIONERS AND DENTISTS ACT

(CAP. 253)

## CERTIFICATE OF REGISTRATION AS A MEDICAL PRACTITIONER OR DENTIST

Registration No. ....

Dr./Mr./Mrs./Miss\* .....

..... (full names in BLOCK LETTERS)

has been registered as a Medical/Dental\* Practitioner in accordance with the provisions  
of section 6 of the medical Practitioners and Dentists Act.

Dated this ..... day ....., 20 .....

Seal of the Board

.....  
*Chairman**Medical Practitioners and Dentists Board*.....  
*Registrar of**Medical Practitioners and Dentists*

\*Delete where not applicable

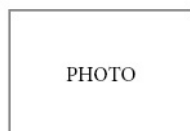
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L.N. 161/2015

FORM IV A

Rule. 5



## MEDICAL PRACTITIONERS AND DENTISTS ACT

(Cap. 253)

## APPLICATION FOR MEDICAL AND DENTAL PRACTITIONERS INTERSHIP LICENCE

1. Surname ..... Other Names..... Other Names .....

2. Date of Birth ..... Nationality .....

3. Address ..... Code ..... Town ..... County..... Tel .....

Email .....

4. Degree, Diploma or Licence held (*if degree not in English, provide official translation*)

Email .....

## Requirements:

(i) Copy of ID/Passport;

(ii) Current coloured passport size photograph;

(iii) Evidence of passing Board internship Qualifying Exam (foreign trained)

(iv) Copy of posting letter from the Ministry of Health;

(v) Evidence of completing Medical/ Dental Training in an accredited University in Kenya;

(vi) Evidence of having completed Medical/ Dental Training in an institution within the EAC that qualifies for reciprocal recognition;

Licence fee KSh. 5000.

I hereby certify that the above information is correct to the best of my knowledge and I have met the above requirements.

Signature of Applicant: ..... Date .....

## FOR OFFICIAL USE

The process will take a maximum of two (2) weeks.

PREPARED: Name: ..... Designation ..... Signature..... Date .....	APPROVED/NOT APPROVED Name: ..... Designation ..... Signature..... Date .....
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[Subsidiary]

**FORM IV B**

L.N. 161/2015

**MEDICAL PRACTITIONERS AND DENTISTS ACT**

(CAP. 253)

**INTERNSHIP LICENCE FOR MEDICAL AND DENTAL PRACTITIONERS**

Dr. ....

(full names)

of.....

(address)

Qualifications.....

is hereby licensed by the Medical Practitioners and Dentists Board to render medical services at .....

(name of approved institution)

in accordance with the provisions of section 13 of the Act.

Dated the ....., 20 .....

.....

*Registrar**Medical Practitioners and Dentists Board***CONDITIONS OF LICENCE**

1. This licence is valid for a period of 11 MONTHS from the date hereof.
2. The licensee is authorized to render medical or dental services, as the case may be, only at the institution mentioned in this licence.
3. The licence is entitled to engage in training employment.
4. This licence does not entitle you to engage in private practice.
5. Signature of Holder .....

\_\_\_\_\_

L.N. 161/2015

FORM V A

## THE MEDICAL PRACTITIONERS AND DENTISTS BOARD

**APPLICATION FOR RETENTION IN THE YEAR.....REGISTER**  
(ALL DOCTORS)

(All fields are mandatory)

1. Surname .....Other Names.....  
Reg. No.....
2. Date of Birth .....Nationality.....
3. Address.....Code.....Town..... Mobile No.....
4. Email .....
5. Name of Employer .....Address ..... Code.....Town.....  
Email.....
6. Work station .....County.....Sub-County.....
7. Basic Qualifications.....Postgraduate qualifications .....
8. Recognized Speciality ..... Sub Specialty .....

**Requirements:**

- (a) Acquire a minimum of 50 CPD points in the calendar year
- (b) Evidence of employment if practitioner is not in private practice
- (c) Renewal fee Kshs.4,000

All payments should be made to:  
Medical Practitioners and Dentists Board  
Account No: 1103158643,  
Bank: KCB, Milimani Branch.  
SWIFT CODE: KCBLKENX  
BANK CODE: 01175

\*Transactions can be undertaken at any KCB Branch countrywide

- (d) Late payment will attract 50% penalty. Penalty date is 30th September .....

Computer generated and stamped banking slip together with should be, within the first week, either emailed to [info@kenyamedicalboard.org](mailto:info@kenyamedicalboard.org) or posted to Medical Practitioners and Dentists Board Office.

I hereby certify that the above information is correct to the best of my knowledge and I have fulfilled all the above requirements.

Signature .....Date.....

**FOR OFFICIAL USE:**

PREPARED:

APPROVED/NOT APPROVED

Name: ..... Designation..... Name .....

Signature .....Date..... Designation .....

**RECOMMENDED:**

Name.....Designation ..... Signature .....

Signature..... Date..... Date.....

Physical Address: MP&DB House-, Woodlands Road, Tel: +254 20-272 8752 / +254 20 272 4994 / +254 20  
off Lenana Road 271 1478  
Address: P. O Box 44839-00100, NAIROBI – Kenya Mobile: + 254 720 771 478/ +254 736 771 478  
Email: [info@kenyamedicalboard.org](mailto:info@kenyamedicalboard.org) Website: [www.medicalboard.co.ke](http://www.medicalboard.co.ke)

L.N. 161/2015

**FORM V B****THE MEDICAL PRACTITIONERS AND DENTISTS BOARD  
ANNUAL RETENTION CERTIFICATE**

Date of first registration (date) Registration No. (Reg. No.)

This is to certify that .....

Whose qualifications are: (Qualifications)

And whose registered address is: (Address)

Having duly complied with the provisions of the Medical Practitioners and Dentists Board is entitled to practice during the year (year).

A retention certificate must be renewed for every subsequent year. This confirmation is evidence of retention in the Register only until 1st December (year).

This certificate does not allow the holder to engage in Private practice.

Seal of the Board.

Dated ....., 20.....

(Signature).....(DMS).....

*Registrar, Medical Practitioners and Dentists Board.*

L.N. 161/2015

## FORM VI

Serial No.....

## THE MEDICAL PRACTITIONERS AND DENTISTS ACT

(Cap. 253)

APPLICATION FOR REGISTRATION OF A PRIVATE MEDICAL  
INSTITUTION

## PART I

(To be completed by the applicant in duplicate)

## 1. CONTACT DETAILS OF THE PROPOSED INSTITUTION

(Block Letters)

(a) Name of the Institution..... Address.....

(b) Telephone Number..... Mobile.....

(c) Email .....

2. TYPE (State whether Hospital, Nursing Home, Maternity Home, Health Centre,  
Dispensary, Laboratory, etc.)......  
.....

## 3. LOCATION OF THE INSTITUTION

(a) Town/Centre/Market.....

(b) Location.....

(c) County.....

## PART II

(To be completed by the applicant in duplicate)

## 1. FULL NAMES AND ADDRESS OF THE APPLICANT

(Block Letters)

.....  
STATE IF APPLICANT IS A DIRECTOR AND/OR ADMINISTRATOR OF THE  
INSTITUTION  
.....

\* Delete where inapplicable

## 2. NATIONALITY OF THE APPLICANT

.....

## 3. PLACE AND DATE OF BIRTH.....

## 4. NATIONAL IDENTITY CARD No.....

(Attach Photocopy)

*Medical Practitioners and Dentists Act*

[Subsidiary]

5. PASSPORT No. (if applicable).....  
 ADDRESS.....

6. WORK PERMIT No. (if applicable)

.....  
*(Attach documentary evidence- copies only).*

**PART III**

*(To be completed by the applicant in duplicate)*

Give full names of Directors of the institution including the following: Nationalities,  
 Passport

Numbers, Work Permit Numbers, Email Address, Kenya National Identity Card  
 Numbers, etc

*(Attach copies of documentary evidence).*

(i) .....

(ii) .....

(iii) .....

*(Use extra space if necessary).*

**PART IV**

*(To be completed by the applicant in duplicate)*

1. Give full names and registration number of the medical or dental practitioner who  
 shall be in-charge of the patient health care at the proposed institution:

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

2. (a) Give full details of professional qualifications of the person named at paragraph  
 (1) above. Include year and place where obtained;

(b) State work experience of the person named at paragraph (1) of PART IV above  
 and name institutions where obtained and date;

(c) Attach documentary evidence (photocopies) in each case. (Please use extra  
 space if necessary).

3. (a) Give full names and professional qualifications of any other person(s), identified  
 by your institution to undertake patient health care at the institution(e.g., Clinical  
 Officers, Nurses, Laboratory Technicians, X-ray Staff, Doctors, Technicians,  
 Pharmaceutical Technicians, etc.).

(b) Attach documentary evidence (photocopies) in each case. (Please use extra space if necessary).

- (i) .....
- (ii) .....
- (iii) .....
- (iv) .....
- (v) .....
- (vi) .....

#### PART V

*(To be completed by Medical Officer of Health in duplicate)*

#### INSPECTION REPORT FOR PRIVATE MEDICAL INSTITUTIONS- FOR REGISTRATION PURPOSES

1. NAME OF THE INSTITUTION.....
2. PHYSICAL LOCATION
  - (a) Plot No./L.R. No.....
  - (b) Market/Centre/Town\*.....
  - (c) Street / Road.....
  - (d) Location.....
  - (e) County.....
3. PREMISES GENERAL INFORMARION
  - (a) Plot area (in hectares).....
  - (b) Water supply.....adequate/inadequate\*
  - (\*Delete where inapplicable)*
  - (c) Refuse disposal:
    - (i) Incinerator available/Not available.\*
    - (ii) Other modes of refuse disposal *(Specify)*  
.....  
.....
  - (d) Environmental suitability .....recommended/  
not recommended.

\* State reasons for not recommending:

.....  
.....

[Subsidiary]

## 4. PLAN OF THE INSTITUTION

- (a) Approved/ No approved\* by the local District Development Committee (*attach copy of the plan*) and documentary evidence (copies) of approval of the institution by the D.D.C

## 5. OUT-PATIENT SERVICES

(See attached minimum requirements for General Practice).

- (a) *Waiting Bay/ Reception Area/Room:* \*

- (i) Seating capacity.....
- (ii) Area (in square metres).....
- (iii) Construction .....Covered/ Not Covered. \*

- (b) *Examination Rooms:*

- (i) Number of rooms.....
- (ii) State if equipment inspected meets the minimum requirements. Attach separate signed list of equipment inspected if necessary.

- (c) *Treatment room:*

- (i) Number of rooms.....
- (ii) State if equipment meets the minimum requirements. Attach separate signed list of equipment inspected.

(\*Delete where inapplicable)

## 6. IN-PATIENT SERVICES

- (a) *Female Ward:*

- (i) Size of the ward (in square metres).....
- (ii) Number of beds.....
- (iii) Number of toilets.....
- (iv) Number of bathrooms.....
- (v) Number of sluice rooms.....

- (b) *Male Ward:*

- (i) Size of the ward (in square metres).....
- (ii) Number of beds.....
- (iii) Number of toilets.....
- (iv) Number of bathrooms.....
- (v) Number of sluice rooms.....



## (c) Maternity Ward:

- (i) Size of the ward (in square metres).....
- (ii) Number of beds.....
- (iii) Number of toilets.....
- (iv) Number of bathrooms.....
- (v) Number of sluice rooms.....
- (vi) Placenta pit depth (in metres).....

## (d) Paediatric Ward:

- (i) Size of the ward (in square metres).....
- (ii) Number of beds.....
- (iii) Number of toilets.....
- (iv) Number of bathrooms.....
- (v) Number of sluice rooms.....

## 7. CLINICAL SUPPORT SERVICES

## (a) Pharmacy:

- (i) Area of the waiting room (in square metres).....
- (ii) Number of dispensing windows.....
- (iii) Number of antibiotic (safe cupboards).....
- (iv) Number of drug stores.....

## (b) Laboratory:

*(see attached minimum requirements)*

- (i) Reception area (in square metres).....
- (ii) Seating capacity.....
- (iii) Size of work-room (in square metres).....
- (iv) Equipment (attach a separate signed list of equipment and reagents/chemicals inspected).

## (c) X-ray Unit:

*(See attached minimum requirements).*

- (i) Size of the reception area (in square metres).....
- (ii) Seating capacity.....
- (iii) Number of screening rooms.....
- (iv) Standard of radiation protection.....

Adequate/Not Adequate. \*

- (v) Equipment (attach separate signed list of equipment inspected).

*Medical Practitioners and Dentists Act*

[Subsidiary]

## (d) Operating Theatre:

- (i) Minor theatre equipment (attach separate signed list of equipment inspected).  
 (ii) Major theatre (indicate by a tick or cross in the box next to the item to show whether available or not).

Induction room..... ☐  
 Operating room..... ☐  
 Recovery room..... ☐

Lighting..... (Adequate/Not Adequate).\*

Equipment..... (attach separate signed list of equipment inspected).

## 8. OTHER SUPPORTING SERVICES

## (a) Kitchen;

- (i) Cooking facility (specify).....  
 (ii) Non-Perishable store..... (Adequate/Not Adequate).\*  
 (iii) Perishable store..... (Adequate/Not Adequate).\*

## (b) Laundry Type (specify).....

## (c) Mortuary:

- (i) Available/ Not Available.\*  
 (ii) Refrigerated/ Not refrigerated.\*  
 (iii) Appropriately located /Not appropriately located.\*  
       *(If not appropriately located, state why)*  
 (iv) Body capacity.....  
 (v) Adequate privacy /Not adequate privacy.\*  
 (vi) Number of ambulances.....  
 (vii) Other facility (specify and use extra space if necessary).....

(\* Delete where inapplicable)

## PART VI

*(To be completed by the Medical Officer of Health in duplicate)*

## I. Give full names and designations of members of the D.H.M.T who participated in the inspection of the institution.

NAME	DESIGNATION
(i) .....	.....
(ii) .....	.....
(iii) .....	.....
(iv) .....	.....

- (v) .....
- (vi) .....
- (vii) .....
- (viii) .....
- (ix) .....
- (x) .....

**2. CERTIFICATE BY M.O.H**

I, Dr.....

*(State full names in Block Letters)*

being the Medical Officer of Health in.....

County, do hereby certify that the inspection of .....  
 was conducted by the County Health Management Team of ..... on  
 .....day of .....20.....under my personal supervision.

I further certify that the inspection was witnessed by

Dr./Mr./Mrs./Miss.....being the  
 Owner/Director/Applicant \* and that.....

the said institution does/does not\* meet the minimum requirements for  
 Registration/Licensing purposes.

Dated this .....day of .....20.....

Signature.....

*(Medical Officer of Health)*

Name of Station.....

Address.....

Telephone Number.....

*(\* Delete where inapplicable)***PART VII***(To be completed by the Applicant/ Director/ Owner of the institution in duplicate)*

I, Dr. /Mr. /Mrs. /Miss \*.....

*(Full Names in Block Letters)*

hereby certify that all the information given by me in the application form is true and  
 correct and that I personally witnessed the inspection which was conducted by the  
 Medical Officer of Health on

.....day of .....20.....

Signature.....

Name in Full.....

[Subsidiary]

**APPLICANT TO NOTE:**

This form **MUST** be returned to the Medical Practitioners and Dentists Board within a period not exceeding three months from the date of issue. Applications which are not returned within the stipulated period shall be time barred.

**PART VIII**

*(For the purposes of vetting applications and enforcement of Laws, Regulations and Decisions of the I.R.C. and the Board.)*

- (a) Name of the institution acceptable to the IRC .....
- (b) Type of institution.....
- (c) Give Name, Type, Location and Registration Number of other institutions operated by the Applicant/ Director or affiliated to the institution named in this application:
- (i) .....
- (ii) .....
- (iii) .....
- (iv) .....

*(Use extra space if necessary).*

*\* Delete where inapplicable*

- (d) Give full particulars of criminal court proceedings for violations of any of the following Ministry of Health laws by any of the institution named in paragraph (c) in this application (Cap. 253, Cap. 260, Cap. 257, Cap 244, Cap 245, Cap. 254 and Cap. 242 (Quote court case references in each case for the past three years proceeding the date of this application)

.....

.....

.....

*(use extra space if necessary).*

- (e) Give names of institutions, their location and registration numbers from among those named at paragraph (c) in this application which have defaulted in licence fees payment during the past three years. State each year of default and penalty imposed and whether or not / penalty has been paid and fees recovered:

.....

.....

*(use extra space if necessary).*

- (f) Give names of any of the institutions named at paragraph (c) in this application which the Board has authorized closure during the past three years (quote minutes references of the I.R.C. and state the institutions' registration number and place of location).

.....

.....

*(Use extra space if necessary).*

- \* (g) F.R.L. Serial No. and date of this application.....  
 (h) Licence Fees Category (quote I.R.C. minutes reference).....  
 (i) F.R.L. Receipt No. and Date.....  
 (j) Date application returned to applicant.....  
 (k) Date application re-submitted by applicant.....  
 (l) Registration Fees Receipt No. and Date.....

**CERTIFICATE BY AN OFFICER AUTHORIZED FOR THE PURPOSES OF PART VIII OF THIS APPLICATION**

*(This certificate must be countersigned by the Registrar)*

I certify that the institution for which this application is made and its Owner/Director/Applicant or its Administrator has/has not been \* subject to the criminal proceedings in violation of any of the laws named in Paragraph (d) in this application and that all information given under PART VIII of this application is correct and true.

Dated this.....day of ....., 20.....

.....  
 Authorized Officer

.....  
 Registrar,  
 Medical Practitioners and Dentists Board

**PART IX**

**FOR OFFICIAL USE ONLY**

**1. INSTITUTION REGISTRATION COMMITTEE'S RECOMMENDATIONS**

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

Dated this.....day of ....., 20.....

.....  
 Chairman  
 Medical Practitioners and Dentists Board

.....  
 Chairman, Committee

\* Delete where inapplicable

**2. INSTRUCTIONS TO THE REGISTRAR BY THE BOARD**

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

Dated this.....day of .....20.....

.....  
 Chairman,  
 Medical Practitioners and Dentists Board

L.N. 161/2015

FORM VIA

PHOTO

## THE MEDICAL PRACTITIONERS AND DENTISTS ACT

(Cap. 253)

**APPLICATION FOR RECOGNITION OF SPECIALIST/SUB-SPECIALITY STATUS**

1. Surname ..... Other Names ..... Reg. No. ....
2. Date of Birth ..... Nationality .....
3. Address ..... Code ..... Town ..... Cell Phone .....  
Email .....
4. Employer .....
5. Degree, Diploma or Licence held (give name of medical school and date qualified) .....
6. Specialty/sub speciality applied for .....
7. Postgraduate qualifications: medical/dental school .....  
Date qualified .....
8. Number of years of experience in speciality/sub speciality after obtaining postgraduate qualifications (indicate the number of years or months, name of institution(s) attended and name of two supervisors whose address must accompany this application).  
 No. of Years/Months ..... Name of Institution ..... Country .....  
 Supervisors: (a) Name ..... Address ..... Code .....  
 Email : ..... Telephone: .....  
 (b) Name ..... Address ..... Code .....  
 Email : ..... Telephone: .....

**Requirements:**

- (i) *Copy of post graduate qualifications and official transcripts;*
- (ii) *Evidence of completion of 2 year full time rotation in a recognized institution for specialist recognition;*
- (iii) *Supportive recommendation from two (2) supervisors in the relevant field;*
- (iv) *For sub-speciality recognition, the applicant should show evidence of training for at least one year;*
- (v) *Speciality and sub speciality must be in the gazetted list;*
- (vi) *Application fee- KSh. 20,000.00*

All payments should be made at any KCB Branch countrywide to Board's account No. 1103158643, Milimani Branch.

I hereby certify that the above information is correct to the best of my knowledge and that I have met

all the above requirements.

Signature of Applicant.....Date .....

**FOR OFFICIAL USE:**

This process takes a maximum of two (2) weeks.

<b>PREPARED BY: -</b>	<b>APPROVED/NOT APPROVED</b>
Name:.....Designation.....	Specialty/SubSpecialty.....
Signature.....Date.....	Name.....
<b>CHECKED BY:</b>	
Name:.....Designation.....	Designation.....
Signature.....Date.....	Signature.....Date.....

## FORM VII

(r. 8)

## MEDICAL PRACTITIONERS AND DENTISTS ACT

(CAP. 253)

## LICENCE FOR PRIVATE MEDICAL OR DENTAL PRACTICE

Licence No. ....

1. Dr./Mr./Mrs./Miss\* .....

.....

.....

(full names in BLOCK LETTERS) OF .....

..... (full address) is hereby licences in accordance with the provisions of section 15 of the Act to engage in private practice on his/her\* own behalf as a private medical/dental\* practitioner or to be employed whole-time/part-time\*, by a private practitioner, Dr./Mr./Mrs./Miss\*..... (name and address of the employer private practitioner).

2. This licence entitles the holder to engage in General Practice/Specialist Practice\*

in ..... (specify discipline).

3. Authorized premises to be used for the purposes of private practice .....

.....

(detailed particulars and location of authorized premises).

4. This licence shall expire on the last day of ....., 20 .....

5. No change of premises is permitted without the authority of the Board.

Dated this ..... day of ....., 20 .....

.....

Registrar of  
Medical Practitioners and Dentists

\*Delete where not applicable.

\_\_\_\_\_



## FORM VIII

(Rule 9)

[L.N. 76/1983, s.2, Corr. No. 26/1983.]

## MEDICAL PRACTITIONERS AND DENTISTS ACT

(CAP. 253)

## APPLICATION FOR RECOGNITION OF SPECIALIST/SUB-SPECIALITY STATUS

1. Surname (BLOCK LETTERS) .....

.....

2. Other names .....

3. Registration No. ....

4. Address .....

.....

.....

5. Place and date of birth .....

6. Nationality .....

7. Places of practice .....

8. Degree or Diploma (*give name of Medical School and date qualified*) .....

.....

9. Speciality or sub-speciality in which specialist/sub-specialist status sought (state clearly) .....

10. (a) Post-graduate qualifications (*indicate the discipline, name of institution, country and date qualified*) .....

.....

(b) Duration of the course(s) .....

.....

11. Number of years of experience after obtaining post-graduate qualifications (*indicate the number of years or months, name of institution(s) attended and name of supervisor, whose letter must accompany this application*) .....

.....

.....

12. List of publications (*if any*) .....

.....

13. Number of years experience in sub-speciality (*indicate clearly number of years or months, name of institution(s) attended and name of supervisor, whose letter must accompany this application*) .

.....

*Medical Practitioners and Dentists Act*

[Subsidiary]

.....  
.....  
14. I solemnly and sincerely declare that the information given is true.

Dated the ....., 20 .....

.....  
*Signature of Applicant*

## FORM IX

L.N. 26/2000

(r. 4(1))

## MEDICAL PRACTITIONERS AND DENTISTS ACT

(CAP. 253)

## APPLICATION FOR REGISTRATION OF A PRIVATE MEDICAL INSTITUTION

## PART I

*(To be completed by the applicant in triplicate)*

1. Name and Address of the Proposed Institution (BLOCK LETTERS) .....

.....

.....

2. Type (State whether Hospital, Nursing Home, Maternity Home, Health Centre, Dispensary, Laboratory, etc) .....

.....

.....

3. Location and Institution—

(a) Town/Centre/Market\* .....

(b) Location .....

(c) District .....

(d) Province .....

\*Delete where inapplicable.

## PART II

*(To be completed by the applicant in triplicate)*

1. Full Name and Address of the Applicant (BLOCK LETTERS) .....

.....

.....

2. State if Applicant is a Director and/or Administrator of the Institution .....

.....

.....

3. Nationality of the Applicant .....

4. Place and Date of Birth .....

5. Kenya National Identity Card no. ....

*(Attach photocopy)*

6. Passport No. (if applicable) .....

.....

7. Work Permit No. *(if applicable)* .....*(Attach documentary evidence — copies only).*

## PART III

*(To be completed by the applicant in triplicate)*

Give full names of Directors of the Institution including the following: Nationalities, Passport Numbers, Work Permit Numbers, Kenya National Identity Card Numbers, etc.

*(Attach copies of documentary evidence)*

(a) .....

.....

.....

(b) .....

.....

.....

(c) .....

.....

.....

.....

.....

.....

.....

*(Use extra space if necessary)*

## PART IV

*(To be completed by the applicant in triplicate)*

1. Give full names of Medical or Dental Practitioners who shall be in-charge of patient health care at the proposed institution .....

.....

.....

2. (a) Give full details of professional qualification of the person named in paragraph (1) above. Include year and place where obtained.

(b) State work experience of the person named in paragraph (1) above and name institutions where obtained and date.

(c) Attach copies of documentary evidence in each case. *(Use extra space if necessary)*

.....

.....

.....

3. (a) Give full names and professional qualifications of any other person(s), identified by your institution, to undertake patient health care at the institution (e.g. Clinical

Officers, Nurses, Laboratory Technicians, X-ray staff, Doctors, Technicians,  
Pharmaceutical Technologies, etc.).....

(b) Attach copies of documentary evidence in each case. (*Use extra space if necessary*).

(i) .....

(ii) .....

(iii) .....

(iv) .....

(v).....

(vi).....

#### PART V

(*To be completed by the Medical Officer of Health in triplicate*)

#### INSPECTION REPORT FOR PRIVATE MEDICAL INSTITUTION FOR REGISTRATION PURPOSES

1. Name of institution .....

2. Physical Location—

- (a) Plot No./L.R. No. ....
- (b) Market/Centre/Town\* .....
- (c) Street/Road\* .....
- (d) Division .....
- (e) District .....
- (f) Province .....

3. Premises General Information—

- (a) Plot area (in hectares) .....
- (b) Water supply.....
- (c) Refuse Disposal—.....
  - (i) Incinerator available/Not available\*
  - (i) Other modes of refuse disposal

(*Specify*)

\*Delete where inapplicable

[Subsidiary]

(d) Environmental suitability .....

recommended/not recommended. \*State reasons for not recommending.

.....

.....

.....

.....

.....

.....

## 4. Plan of the Institution—

(a) Approved/Not approved\* by the local District Development Committee (attach copy of the plan) and documentary evidence (copies) of approval of the institution by the D.D.C.

## 5. Out-patient Services—

*(See attached minimum requirements for General Practice.)*

## (a) Waiting Bay/Reception Area/Room\*—

(i) Seating capacity .....

(ii) Area (in square metres) .....

(iii) Construction ..... covered/not covered\*.

## (b) Examination Rooms—

(i) Number of rooms .....

(ii) State if equipment inspected meets the minimum requirements.

*(Attach separate signed list of equipment inspected if necessary).*

.....

.....

.....

.....

## (c) Treatment rooms—

(i) Number of rooms.

(ii) State if equipment meets the minimum requirements.

*(Attach separate signed list of equipment inspected).*

## 6. In-patient Services—

## (a) Female Ward—

(i) Size of ward (in square metres) .....

(ii) Number of beds .....

(iii) Number of toilets .....

(iv) Number of bathrooms .....

(v) Number of sluice rooms .....

(b) Male Ward—

(i) Size of ward (in square metres) .....

(ii) Number of beds .....

(iii) Number of toilets .....

(iv) Number of bathrooms .....

(v) Number of sluice rooms .....

(c) Maternity Ward—

(i) Size of ward (in square metres) .....

(ii) Number of beds .....

(iii) Number of toilets .....

\*Delete where inapplicable.

(iv) Number of bathrooms .....

(v) Number of sluice rooms .....

(d) Paediatric Ward—

(i) Size of ward (in square metres) .....

(ii) Number of beds .....

(iii) Number of bathrooms .....

(iv) Number of sluice rooms .....

7. Clinic Support Services—

(a) Pharmacy—

(i) Area of waiting room (in square metres) .....

(ii) Number of dispensing windows .....

(iii) Number of anti-biotic (safe cupboards) .....

(iv) Number of drug stores .....

(b) Laboratory—

*(See attached minimum requirements).*

(i) Reception area (in square metres) .....

(ii) Seating capacity .....

(iii) Size of work-room (in square metres) .....

(iv) Equipment (Attach a separate signed list of equipment and reagents/chemicals inspected).

(c) X-Ray Unit—

*(See attached minimum requirements)*

(i) Size of reception area (in square metres) .....

*Medical Practitioners and Dentists Act*

[Subsidiary]

- (ii) Seating capacity .....
- (iii) Number of screening rooms .....
- (iv) Standard of radiation protection .....  
Adequate/Not Adequate\*.
- (v) Equipment (Attach separate signed list of equipment inspected).
- (d) Operating Theatre—
  - (i) Minor theatre equipment (Attach a separate signed list of equipment inspected).
  - (ii) Major theatre (indicate by a tick or cross in the box next to the item to show whether available or not available).

Induction room ☐Operating room ☐Recovery room ☐

Lighting ..... Adequate/Not Adequate\*.

Equipment ..... (attach separate signed list of equipment inspected).

## 8. Other supporting Services—

## (a) Kitchen—

(i) Cooking facility (specify) .....

(ii) Non-perishable store ..... Available/Not Available\*.

(iii) Perishable store ..... Available/Not Available\*.

(b) Laundry type (specify) .....

\*Delete where inapplicable

## (c) Mortuary—

(i) Available/Not Available\*.

(ii) Refrigerated/Not refrigerated\*.

(iii) Appropriately located/Not appropriately located\*.

If not appropriately located state why .....

.....

(iv) Body capacity .....

(v) Adequate Privacy/Not Adequate Privacy\* .....

(vi) Number of ambulances .....

(vii) Other facility (specify and use extra space if necessary) .....

*(To be completed by the Medical Officer of Health in triplicate)*



1. Give full names and designation of members of the D.H.M.T who participated in the inspection of the institution

<i>Name</i>	<i>Designation</i>
(i) .....	.....
(ii) .....	.....
(iii) .....	.....
(iv) .....	.....
(v) .....	.....
(vi) .....	.....
(vii) .....	.....
(viii) .....	.....
(ix) .....	.....
(x) .....	.....

2. Certificate by M.O.H.

I, Dr. ....

(State full names in Block Letters)

being the Medical Officer of Health in-charge ..... District, do  
 hereby certify that the inspection  
 of .....  
 was conducted by the District Health Management Team  
 of .....  
 on the ..... day of .....,  
 20 .....  
 under my personal supervision.

I further certify that the inspection was witnessed by Dr./Mr./Mrs/

Miss .....

being the Owner/Director/Applicant\* and that ..... the said  
 institution does/does not\* meet the minimum requirements for Registration/Licensing  
 purposes

Dated this ..... day of ....., 20 .....

Signature .....

(Medical Officer of Health)

\*Delete where inapplicable

Name of Station .....

address .....

.....

Telephone Number .....

#### PART VII

\*Delete where applicable.

(To be completed by the Applicant/Director/Owner of the institution in triplicate)

I, Dr./Mr./Mrs./Miss\* .....

*Medical Practitioners and Dentists Act*

[Subsidiary]

*(Full Names in Block Letters)*

herby certify that all information given by me in this application form is true and correct and that I personally witnessed the inspection which was conducted by the Medical Officer of Health on the ..... day of ....., 20 .....

Signature .....

Names in Full .....

*Applicant to Note—*

This application form must be returned to the Medical Practitioners and Dentists Board within a period not exceeding three months from the date of issue.

Applications which are not returned within the stipulated period shall be time barred.

## PART VIII

*(For the purposes of vetting application and enforcement of  
Laws, Regulations and Decisions of the I.R.C. and the Board)*

(a) Name of institution acceptable to the I.R.C. ....

(b) Type of institution .....

(c) Give Names, Types, Locations and Registration Numbers of other institutions operated by the Applicant/Director or affiliated to the institution named in this application.

(i) .....

(ii) .....

(iii) .....

(iv) .....

(v) .....

.....

.....

*(Use extra space if necessary)*

(d) Give full particulars of criminal court proceedings for violations of any of the following Ministry of Health laws by any of the Institutions named in paragraph (c)—

Caps. 253, 260, 244, 245, 254 and 242 (quote court case references in each case for the past three years proceeding the date of this application.)

.....

.....

.....

.....

.....

.....

.....

(Use extra space if necessary).

(e) Give names of institutions, their location and registration numbers from among those named in paragraph (c) which have defaulted in licence fees payment during the past three years. State each year of default and penalty imposed and whether or not penalty has been paid and fees recovered—

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

(f) Give names of any of the institutions named in paragraph (c) which the Board has authorized closure during the past three years (quote minutes references of the I.R.C. and state the institutions. Registration Numbers and place of location).

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

(Use extra space if necessary).

(g) F.R.L. Serial No. and date of this application .....

(h) Licence Fees Category (Quote I.R.C. minutes reference) .....

(i) F.R.L. Receipt No. and Date .....

(j) Date application returned to applicant .....

(k) Date application re-submitted by applicant .....

(l) Registration fees Receipt No. and Date .....

CERTIFICATE BY AN OFFICER AUTHORIZED FOR  
THE PURPOSES OF PART VII OF THIS APPLICATION

(This certificate must be countersigned by the Registrar)

I, certify that the institution for which this application is made and its Owner/Director/Applicant or its Administrator has/has not\* been subject of criminal court proceedings in violation of any of the laws named in Part VIII (d) in this application and that all information given under Part VIII of this application is correct and true.

Dated this ..... day of .....,  
20 .....

.....  
Authorized Officer

.....  
Registrar, M.P. and D.B./D.M.S.

\* Delete where inapplicable

[Subsidiary]

## FOR OFFICIAL USE ONLY

<i>1. Institution</i>	<i>Registration</i>	<i>Committee</i>	<i>Recommendation</i>
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

Dated this ..... day of ....., 20.....

.....  
*Chairman,*  
*Medical Practitioners and Dentists Board*

.....  
*Chairman, Committee*

## INSTRUCTIONS TO THE REGISTRAR BY THE BOARD

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

Dated this ..... day of ....., 20 .....

.....  
*Chairman,*  
*Medical Practitioners and Dentists Board*

\_\_\_\_\_

FORM X

(Rule 4(3))

[L.N. 26/2000, s.2, L.N. 161/2015.]

Serial No. ....

MEDICAL PRACTITIONERS AND DENTISTS ACT

(Cap. 253)

CERTIFICATE OF REGISTRATION AS A PRIVATE MEDICAL INSTITUTION

1. Name of Institution .....

.....  
P.O. Box .....

.....  
2. Type .....

.....  
has been registered as a Private Medical Institution in accordance with rule 4(3) of the  
Medical Practitioners and Dentists (Private Medical Institutions) Rules.

Date .....

SEAL OF THE BOARD

.....  
CHAIRMAN M.P. & D. BOARD

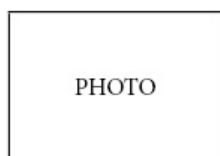
.....  
REGISTRAR M.P. & BOARD/DMS

(a) It shall be the duty of the holder of this certificate to inform the Registrar within fourteen  
(14) days of any change in the registered address in accordance with rule 5 of the Medical  
Practitioners and Dentists (Private Medical Institutions) Rules.

\_\_\_\_\_

[Subsidiary]

## Form XI



## MEDICAL PRACTITIONERS AND DENTISTS ACT

(Cap. 253)

## APPLICATION FOR PRE-REGISTRATION EXAMINATION

1. Surname ..... Other Names.....

2. Date of Birth ..... Nationality .....

3. Address ..... Code ..... Town..... Tel .....

Email ..... Mobile.....

4. Degree, Diploma or Licence held (*give name of medical school and date qualified — if degree not in English, provide official translation*).

5. Particulars of Experience (e.g. posts held, type of practice in which the applicant has been engaged, countries in which the applicant has practiced:

6. Testimonials Covering the Period(s) of Experience .....

7. Have any arrangements been made regarding employment? (if so, give details) .....

(i) Copy of ID/Passport;

(ii) Coloured passport size photograph;

(iii) Certified copies of professional certificates;

(iv) Evidence of appropriate linguistic skills in English and/or Kiswahili for non- Kenyans;

(v) Academic transcripts or evidence of internship;

(vi) Curriculum Vitae;

(vii) Must be attached at a training institution approved by the Board for a period of four (4) months;

(viii) Evidence of completion of internship or registration from a Medical Council;

(ix) Evidence of employment/job offer in a recognized institution;

(x) Letter from Commission for Higher Education (CHE) confirming recognition of the medical/ dental school (if foreign trained);

(xi) Qualification (Form IV or VI certificates);

(xii) Application fee KSh. 5,000.00;

(xiii) Examination / evaluation of qualification papers - Fees KSh. 50,000.00.

All payments should be made at any KCB Branch countrywide to Board's account No. 1103158643, Milimani Branch.

Signature of applicant

.....Date .....

L.N. 26/2000

FOR OFFICIAL USE:

PREPARED: Name: ..... Designation ..... Signature..... Date ..... CHECKED BY:	APPROVED/NOT APPROVED Name ..... Designation.....  Signature..... Date .....
--	---

[Subsidiary]

## Form XII

L.N. 26/2000

(r. 5(3))

Serial No. ....

## MEDICAL PRACTITIONERS AND DENTISTS ACT

(CAP. 253)

## ANNUAL FEES ASSESSMENT FORM

## PART A

*(to be completed in triplicate)*

1. Name of Institution .....

2. Registration Number and Date .....

3. Physical Location .....

4. Name and Address of Applicant for Licence .....

5. Fees Category for Year .....

(i) ☐(ii) ☐(iii) ☐(iv) ☐(v) ☐*(tick relevant box)*

6. Fees Rates Applicable to Institution .....

Licence fees (amount in words) .....

## PART B

*(to be completed by M.O.H. in triplicate)*

## CERTIFICATE BY MEDICAL OFFICER OF HEALTH

I, Dr. *(Full Names in Block Letters)* .....

Being the Medical Officer of Health In-Charge .....

District of .....

Province do hereby certify that the institution named in this application form was last inspected on ..... day of ....., 20 ..... and in my opinion the current condition of its premises requires/does not\* require fresh inspection.



*Medical Practitioners and Dentists Act*

[Subsidiary]

Dated this ..... day of ....., 20 .....

OFFICIAL SEAL

.....  
*Medical Officer Of Health*

STATION .....

ADDRESS .....

TELEPHONE .....

(a) Plot No. ....

(b) Town/Market\* .....

(c) Street/Road\* .....

(d) Location .....

(e) Division .....

(f) District .....

(g) Province .....

7. Date of last inspection of the Institution by the Ministry of Health .....

.....

\*Delete where inapplicable.

## PART C

*(to be completed by the applicant in triplicate)*

## CERTIFICATE BY THE APPLICANT

I, Dr./Mr./Mrs./Miss (Full Names in Block Letters) .....

.....

of P. O. Box .....

being the Administrator/Owner/Director\* *(Specify other)* .....

.....

of (give full names of the institution) .....

.....

.....

do hereby certify that the information given by me in this application is true and correct.

Dated this ..... day of ....., 20 .....

.....

*Applicant*

## PART D

*(For Official use only)*

(a) Acceptable name of institution and type .....

*Medical Practitioners and Dentists Act*

[Subsidiary]

.....  
.....  
.....  
(b) FRL Serial Number and Date .....

.....  
(c) Registration Certificate Number and Date .....

.....  
(d) Licence Fees Assessment Number and Date .....

.....  
(e) Category of Licensing .....

.....  
(f) Registration Fees Receipt Number and Date .....

.....  
(g) Date application sent to IRC/Board .....

.....  
(h) Remarks .....

.....  
I certify that I have personally checked the information above and found it correct and that all procedures and documentation pertaining to this application have been compiled with.

Dated this ..... day of ....., 20 .....

.....  
*Registrar M.P. & D.B./Director of Medical Services*

\_\_\_\_\_

## Form XIII

L.N. 26/2000

(r. 5(4))

[L.N. 26/2000, Section 2.]

Serial No. ....

## MEDICAL PRACTITIONERS AND DENTISTS ACT

(CAP. 253)

## LICENCE TO OPERATE A PRIVATE MEDICAL INSTITUTION

LICENCE No. ....

1. Name of Institution .....

*(Full Names in Block Letters)*

of P. O. Box .....

(full address) is hereby licensed to operate a Private Medical Institution in accordance with the provisions of rule 5(4) of the Medical Practitioners and Dentists (Private Medical Institutions) Rules.

2. This licence entitles the Private Medical Institution to operate as .....

.....

3. Authorized Premises for the Institution .....

.....

4. Maximum Number of Patients .....

5. This Licence shall expire on the last day of ....., 20 .....

6. No change of premises is permitted without the authority of the Board.

Dated this ..... day of ....., 20 .....

.....

*Registrar*

MEDICAL PRACTITIONERS AND DENTISTS  
BOARD/DIRECTOR OF MEDICAL SERVICES

## CONDITIONS OF LICENCE

This licence is issued on condition that minimum requirements set by the Board for operation of the Private Medical Institutions are adhered to at all times.

\_\_\_\_\_

[Subsidiary]

## Form XIV

[L.N. 75/2012, s. 3.]

CHECK LIST FOR SINGULAR/JOINT INSPECTION FOR PRIVATE OUT PATIENT MEDICAL INSTITUTIONS BY HEALTH REGULATORY BODIES IN THE MINISTRIES RESPONSIBLE FOR HEALTH					
MEDICAL/DENTAL CLINIC/LABORATORY/PHARMACY/RADIOLOGY/X-RAY UNIT/MORTUARY					
Date:					
Basic information					
1.	Name facility				
2.	Address				
	(a) physical				
	Building				
	County				
	Ward/Town/street				
	LR No.				
	Tel No./Mobile				
	Email				
	(b) Postal		Code		
3.	Proprietor				
(a)	Name:				
	profession:				
	Pin No.				
(b)	Registered owner				
	(a) Qualification				
	(b) License Certificate No.		Date of issue	Expiry date	
4.	Officer in charge				
	(a) Qualification				
	(b) Registration No.		practice licence number		
5.	Name of Medical Personnel	Cadre	Licence Number	Date of issue	Expiry date
6.	Service offered				
7.	Security of premises external security & security features) (permanent perimeter fence/fire assembly point security guard)				

8.	General cleanliness of premises			
	Total	10		
9:	A. Medical/Dental Clinic	Max score	Awarded	Comments
	1. Consultation - Examination rooms			
1.	Examination Equipment	4		
2.	Resuscitation tray	3		
3.	Infection prevention & control	3		
4.	Policy, guidelines & SOPs	3		
5.	Medical records	4		
6.	Data Security	4		
7.	HMIS/EMR	4		
8.	Reports	3		
9.	Ventilation	2		
10.	Licences	10		
	Total	40		
	B. Pharmacy/ Chemist	Max score	Awarded	
1.	Security for medications (e.g. Secure cupboards for restricted drugs, only accessible by authorized persons & disposal of expired drugs)	10		
2.	Storage of drugs/display/labelling/ packaging conditions	7		
3.	Record-keeping and documentation (Prescriptions written & received and filed/medication errors documented and reported)	10		
4.	Reference materials, Policy and SOPs as per national guidelines	3		
5.	Licences	10		
	Total	40		

[Subsidiary]

	C. Laboratory	Max score	Awarded	Comments
1.	Class of the licence (A-E)	4		
2.	Policies, guidelines and SOPs (Including reporting procedures, handling / labelling / storage / disposal of specimens and safety program)	3		
3.	Equipment management program (manuals, inventory, service contract, calibration)	6		
4.	Record-keeping & Quality control of tests (EQA, IQA, control of analytical errors)	10		
5.	Infection prevention and control	2		
6.	Registration, storage of equipment and reagents (is there a temperature recording system)	5		
7.	Licences	10		
	Total	40		
	D. Radiology / Imaging services	Max score	Awarded	Comments
1.	Current annual premise & device licence	4		
2.	Policies and SOPS (Code of practice including reporting, testing, calibrating, monitoring and control)	3		
3.	Quality assurance program (safety of the patient, worker, environment, security, film storage, quality and documentation)	10		
4.	Personal radiation monitoring (Badges, dose reports)	10		

5.	Radioactive waste management programs	3		
	Total	30		
	E. Nutrition			
1.	Basic Nutrition equipment and materials (weighing Stadiometer, MUAC, BP machine Blood sugar machine ,reference charts)	10		
2.	SOPs (Nutrition assessment, Nutrition suppliments)	3		
3.	Nutrition care process, nutrition assessment, Diagnosis, intervention, M&E)	7		
4.	Record keeping and documentation	10		
5.	Licences	10		
	Total	40		
10.	Findings and Recommendations			
11.	REGISTERED OWNER/ OFFICER IN - CHARGE			
	Name:.....Designation:..... Email.....			
	Tel No.....Date.....Sig.:.....			
	INSPECTION TEAM			
	Name:	Board/Council/MOH	Designation	Sign
	Date			
1.				
2.				

[Subsidiary]

	Name:	Board/Council/MOH	Designation	Sign	Date
3.					
4.					
5.					
6.					

## FORM XV

CHECK LIST FOR SINGULAR/JOINT INSPECTIONS FOR PRIVATE INPATIENT MEDICAL INSTITUTIONS BY HEALTH REGULATORY BODIES IN THE MINISTRIES RESPONSIBLE FOR HEALTH				
Basic information				
1.	Name facility			N/A
2.	Category of Facility	Level		N/A(to be graded at the time of registration)
3.	Proprietor/owner			N/A
	(a) Organization	Private ( ), Faith based ( ), GOK ( ), Community based ( ).		N/A
	(b) Proprietor's name			N/A
	Current Licence No.	(III) Expiry date of the current licence		5
			Not matching	1
			matching	5
4.	Name of Officer in charge.	Current practicing licence No.		N/A
				N/A
				N/A
5.	Address			
	Physical	County		N/A
		Building, Plot No.		
		Town, Street		
	Tel No.			
	Email			N/A
	Postal	Box No.	Code:	N/A
6.	Medical Personnel			N/A (to be graded at the time of registration).
	Name of Medical Personnel	Cadre	Licence Number	Expiry date

L.N. 75/2012



## FORM XV

CHECK LIST FOR SINGULAR/JOINT INSPECTIONS FOR PRIVATE INPATIENT MEDICAL INSTITUTIONS BY HEALTH REGULATORY BODIES IN THE MINISTRIES RESPONSIBLE FOR HEALTH				
Basic information				
1.	Name facility			N/A
2.	Category of Facility	Level		N/A (to be graded at the time of registration)
3.	Proprietor/owner			N/A
	(a) Organization	Private ( ), Faith based ( ), GOK ( ), Community based ( ).		N/A
	(b) Proprietor's name			N/A
	Current Licence No.	(III) Expiry date of the current licence		5
			Not matching	1
			matching	5
4.	Name of Officer in charge.	Current practicing licence No.		N/A
				N/A
				N/A
5.	Address			
	Physical	County		N/A
		Building, Plot No.		
		Town, Street		
	Tel No.			
	Email			N/A
	Postal	Box No.	Code:	N/A
6.	Medical Personnel			N/A (to be graded at the time of registration).
	Name of Medical Personnel	Cadre	Licence Number	Expiry date

[Subsidiary]

	Total number of staff					
7.	Services offered					
	Outpatient Services Y/N	MCH( ) & HCT( )			N/A	
	Inpatient Services	YES / NO (tick/circle )	Number of beds	Number of cots	N/A	
8.	Health Facility Infrastructure					Score
	A. Building				Yes	No
1.	Building suitable for scope of work					
2.	Signage for directions is in place and clear					
	B. Environmental - Infection Prevention				Yes	No
1.	Adequate waste management & disposal (according to guidelines )					
2.	Personal protective equipment available (Gloves, gowns or dust coats, and safety boots for infection prevention)					
	C. Utilities				Yes	No
1.	Safe, clean running water available – Tap or container). Sufficient water storage available					
2.	Stable electrical power supply					
<p><b>Key: Ranking of scores</b></p> <p>Level 0: the desired activity is absent, or there is mostly ad hoc activity related to risk reduction</p> <p>Level 1: the structure of more uniform risk-reduction activity begins to emerge</p> <p>Level 2: the processes are in place for consistent and effective risk-reduction activities</p> <p>Level 3: there are data to confirm successful risk-reduction strategies and continue improvement</p>						
9. Management& Recording						
			Scoring key			
	A. General management	1	2	3	4	5
1.	Strategic plan with Vision/Mission/values/ Objectives identified					1. Not available 2. Available but not in use 3. In use, not known to all 4. In use, not displayed 5. Displayed, known and fully used
2.	Organization chart available					1. Approved by management 2. Approved by board

						3. <i>Approved by an accredited body</i>
3.	Service charter displayed					1. <i>Not Displayed</i> 2. <i>Displayed</i> 3. <i>Regular performance review</i>
4.	List of all staff working, including position and qualifications					1. <i>No list</i> 2. <i>List available</i> 3. <i>List with qualifications available</i> 4. <i>List with qualifications and Job description</i> 5. <i>Staff development plan available</i>
	<b>B. Quality Management</b>					<b>Comments</b>
1.	Certifications/ accreditations					No scoring (Yes or No)
2.	Performance indicators monitored					1. <i>Performance indicators (PI) not collected</i> 2. <i>PIs collected routinely</i> 3. <i>PIs analyzed</i> 4. <i>There's feedback</i> 5. <i>External publications</i>
3.	Patients charter					1. <i>Not available</i> 2. <i>Available</i> 3. <i>Displayed</i>
4.	Feedback mechanism in place					1. <i>No policy</i> 2. <i>Policy available</i> 3. <i>Collection Mechanism available</i> 4. <i>Regular analysis of complaints &amp; compliments</i> 5. <i>Evidence of action</i>
	<b>C. Medical Records &amp; Information Systems</b>					<b>Comments</b>
1.						
2.	Medical records for each patient (files – manual/ electronic)					1. <i>No medical records</i> 2. <i>Separate medical record for each patient</i> 3. <i>All patients are triaged</i>

[Subsidiary]

						4. Comprehensive medical notes 5. Notes are legible and signed
3.	Approved register is kept of all patients (An outpatient and inpatient register)					1. No registers 2. Old registers 3. Current registers available 4. Registers correctly used
4.	Records are kept in a secure place					1. No restricted access to files 2. There's restricted access to files 3. Files kept in lockable cabinets and only authorised persons can access
5.	Contributes to external databases and reports periodically (Linkage to national HMIS)					1. No routine reports 2. Routine reports available but not reported 3. Routine reports submitted irregularly 4. Routine reports submitted regularly
<b>D. Equipment Management</b>						<b>Comments</b>
1.	Preventive maintenance plan for equipment					1. No preventive plan 2. Service contract available 3. Equipment checked on schedule and results documented 4. Due date for next maintenance documented
2.	Calibration					1. Machines not calibrated 2. No contract for calibration 3. Calibration not regular but contract available 4. Calibration regular with results available

10. Patient Services			
		Scoring system	Comments
<b>A. Consultation</b>			
1.	Consultation – Examination rooms	1. Examination coach 2. The above with screen 3. The above with steps 4. The above with mackintosh 5. All the above with bed sheet	
2.	Sink /wash basin	1. Sink available 2. The above with Sink without running water 3. The above with Sink with running water from the tap 4. The above with Sink with all of the above with soap 5. All the above with Sink with running water and drier	
3.	Examination Equipment	<ul style="list-style-type: none"> <li>• thermometer</li> <li>• stethoscope</li> <li>• BP machine</li> <li>• weighing machine</li> <li>• Diagnostic kit</li> </ul>	
<b>B. Emergency/Resuscitation room</b>			
1.	Triage	1. triage area 2. Nurse not trained in triage 3. Nurse trained in triage 4. SoPs of triage available 5. Proper coding of client	
2.	Emergency tray	<ul style="list-style-type: none"> <li>• Incomplete emergency tray</li> <li>• Presence of emergency tray with all requirements</li> </ul>	

[Subsidiary]

		<ul style="list-style-type: none"> <li>• The racks clearly labelled</li> <li>• All the above at designated sites</li> <li>• All the above and up to date list of all requirements</li> </ul>	
3.	Equipment	<ul style="list-style-type: none"> <li>• Ambu bag/masks</li> <li>• Suction machine</li> <li>• Oxygen cylinder and flowmeter</li> <li>• Endotracheal tubes</li> <li>• All the above with an ideal adjustable bed</li> </ul>	
	C. Sterilization Process		
1.	Central Supply Unit	<ol style="list-style-type: none"> <li>1. Separation areas for cleaning</li> <li>2. Decontamination</li> <li>3. Sterilization Process – SoPs available</li> <li>4. Storage of sterile supplies</li> <li>5. All the above labelled and stored in designated area</li> </ol>	
2.	Autoclave Machine	<ul style="list-style-type: none"> <li>• Autoclave manual available</li> <li>• Autoclave electric available</li> <li>• SoPs available</li> <li>• Maintenance plan</li> <li>• Digitalized autoclave</li> </ul>	
	D. Labour Ward		
1.	Procedures for obstetric emergencies	<ol style="list-style-type: none"> <li>1. Procedure for obstructed labour and foetal distress</li> </ol>	

		2. Procedure for Eclampsia 3. Procedure for APH/PPH/HELLP 4. Availability of resuscitaire 5. Resuscitaire with oxygen, the suction machine, ambu bags	
2.	Equipments	<ul style="list-style-type: none"> <li>• Delivery bed available</li> <li>• Sterile delivery set</li> <li>• Vacuum extractor</li> <li>• Suction machine</li> <li>• Maintenance plan</li> </ul>	
3.	Monitoring of Labour	<ul style="list-style-type: none"> <li>• Partograph chart available</li> <li>• Contraction properly charted</li> <li>• Cervical dilatation</li> <li>• Colour coding</li> <li>• TPR/BP</li> </ul>	
4.	Access to theatre	1. Ambulance available 2. General theatre available (not close to L/W) 3. General theatre available (close to L/W) 4. More than one theatre 5. L/W fully equipped theatre	
5.	Incubator	1. Presence of incubator 2. Functional incubator 3. Proper temperature regulation	

[Subsidiary]

		4. Oxygen connection 5. Maintenance plan	
6.	Hand washing facility	1. Sink 2. Sink without running water 3. Sink with running water from the tap 4. Sink with all of the above with soap 5. Sink with running water and drier	
7.	Sluice room	1. Presence of sluice room 2. Sluicing sink 3. Availability of running water 4. Decontamination buckets available 5. SoPs	
8.	Waste management	1. Available Waste bins 2. coded bins with improper lining 3. bins with proper coded lining 4. Good segregation practice 5. All of the above with SoPs	
9.	State of floor	1. Cement floor 2. Cement floor with drainage 3. Ceramic tile floor with drainage 4. Tarazo with good drainage 5. A cleaning chart	
10.	Nursing Personnel	1. nurses available 2. midwives available	



		3. midwives available but not the right ratio 1:3 4. Midwives available ratio of 1:2 5. Midwives available ratio 1:1	
11.	Oxygen source	1. Oxygen cylinders available 2. External oxygen piped to L/W 3. Oxygen plant SOPS 4. Maintenance plan	
E. Clinical Wards			
1.	Oversight of patients	1. Admission procedures 2. Categorization 3. Patients uniform 4. Clinical ward round 5. Handing over / discharge reports	
2.	Patient records	1. Availability 2. Non -Coded filing system 3. Coded filing system 4. Designated and secure storage area E-filing	
3.	Monitoring equipment	1. Thermometer 2. Stethoscope 3. BP machine 4. Weighing machine 5. Diagnostic kit	
4.	Resuscitation tray	1. Presence of an emergency tray 2. Presence of emergency tray with the necessary contents	

[Subsidiary]

		3. The racks clearly labelled 4. All the above at designated sites 5. All the above plus list of updating the contents						
<b>F. Pharmacy</b>								
		<b>SCORE</b>						<b>COMMENTS</b>
		0	1	2	3	4	5	
1.	General conditions of premises							
	Adequate general condition of premises (Hygiene, sanitation, ventilation, state of repair, running water, light, adequate space, display of drugs)							
2.	Medications							
	Conditions of medications adequate (e.g. security, display, labelling, expiry dates)							
3.	Record Keeping/ Documentation							
	Prescriptions received and recorded							
<b>G. Medical /Dental Laboratory</b>								
1.	Licensing							
	Licensed for services per class (C,D, E)							
2.	SOPs							
	Standard Operating Procedures & guidelines available (according to Class: Including reporting procedures, handling / labelling / storage / disposal of specimens and safety program)							
3.	Quality assurance							
	Quality control practiced (Equipment / reagent registered, validated, calibrated and quality control of tests, well maintained equipment, storage)							
4.	Infection prevention and control							
	Infection prevention and control practices observed (waste management and sharps disposal, Personal protective equipment)							

H. Radiology and Imaging Services		Scoring						Comments
		0	1	2	3	4	5	
1.	Licenses							
	Premises & devices							
2.	Safety and storage							
	Safety of personnel, environment and patient adequate, quality assurance and equipment management (personal safety and control area safety, waste management)							
3	Documentation							
	Facility Code of Practice present (including reporting, testing, calibrating, monitoring and control, standard operating procedures)							
I. Food Nutrition and Dietetics		Scoring						Comments
		0	1	2	3	4	5	
1	Nutrition assessment and care plan in place for the patients							
2	Availability of supplementary, therapeutic, & parental feeds							
3	Procurement, delivery, inspection & menu and service of food according to laid protocols/procedures							
4	Food & personnel hygiene and waste disposal Registered Nutritionist & Medically examined kitchen staff.							
J. Mortuary/ funeral parlour		Scoring						Comments
		0	1	2	3	4	5	
1.	SOP for receiving, identification, storage and release of bodies including solid disposal							
2.	Protective gear & equipment							
3.	Overall environment							
K. Occupational Therapy		Scoring						Comments
		0	1	2	3	4	5	
1.	Trained personnel							
2.	Basic equipment							
3.	room							
L. Physiotherapy		Scoring						Comments
		0	1	2	3	4	5	
1.	Trained personnel							
2.	Basic equipment							
3.	Workshop							
4.	SOP							

[Subsidiary]

5.	Records							
	M. Orthopaedic technology	Scoring						Comments
		0	1	2	3	4	5	
1.	Trained personnel							
2.	Room							
3.	Specialized equipment/materials							
4.	SOPs							
5.	Records							
	N. Orthopaedic plaster and trauma	Scoring						Comments
		0	1	2	3	4	5	
1.	Trained personnel							
2.	Room							
3.	Specialized equipment/materials							
4.	SOPs							
5.	records							
	O. Medical and Dental Services	Scoring						Comments
		0	1	2	3	4	5	
1.	Trained personnel							
2.	Basic Equipments							
3.	SOPs							
4.	Rooms							
11.	Findings and Recommendations							
12.	REGISTERED OWNER/ OFFICER IN-CHARGE							
	Name:..... Designation:..... Email.....							
	Tel No.:.....Date.....Sign:.....							
	INSPECTION TEAM							
	Name:	Board/Council/MOH	Designation	Sign	Date			
1.								
2.								
3.								
4.								
5.								
6.								

L.N. 161/2015

(para 2 (c))



FORM XVI

## THE MEDICAL PRACTITIONERS AND DENTISTS ACT

(Cap. 253)

## APPLICATION FOR PEER REVIEW

1. Surname ..... Other Names .....
2. Date of Birth ..... Nationality.....
3. Address..... Code..... Town..... Tel/Mobile.....  
Email.....
4. Degree, Diploma or Licence held (*give name of medical school and date qualified – if degree not in English, provide official translation*)  
.....
5. Particulars of Experience (*e.g. posts held, type of practice in which the applicant has been engaged, countries in which the applicant has practiced*)  
.....
6. Testimonials Covering the Period(s) of  
Experience.....
7. Have any arrangements been made regarding employment? (*if so, give details*).....  
*Requirements:*
  - (i) Copy of ID/Passport;
  - (ii) Coloured pass port size photograph;
  - (iii) Certified copies of professional certificates and academic transcripts;
  - (iv) Copy of current CV;
  - (v) Evidence of postgraduate qualification(s);
  - (vi) Certificate of status from current regulatory authority;
  - (vii) Specialist Recognition (if any) from current medical Board;
  - (viii) Application fees of Kshs. 5,000.00;
  - (ix) Peer Review/evaluation fees of Kshs. 95,000.00.

*All payments should be made at any KCB Branch countrywide to Board's account No. 1103158643, Milimani Branch; SWIFT CODE: KCBLKENX, BANK CODE: 01175, BANK: KCB*

[Subsidiary]

I hereby certify that the above information is correct to the best of my knowledge and I have fulfilled all the above requirements.

Signature of applicant .....Date.....

**FOR OFFICIAL USE:**

The process takes a maximum of Thirty (30) days

<b>PREPARED:</b>	<b>APPROVED/NOT APPROVED</b>
Name:.....Designation.....	Name.....
Signature.....Date.....	Designation.....
<b>CHECKED BY:</b>	Signature.....
Name:.....Designation.....	Date.....
Signature.....Date.....	

L.N. 161/2015

## FORM XVII

## THE MEDICAL PRACTITIONERS AND DENTISTS ACT

(Cap. 253)

## RENEWAL FORM FOR PRIVATE PRACTICE LICENCE 20.....

(All fields are mandatory)

1. Surname ..... Other Names ..... Reg. No.....
2. Date of Birth..... Nationality.....
3. Address..... Code..... Town..... Mobile No.....  
Email.....
4. Employer.....
5. Name of authorized premises..... County..... Sub county.....
6. Previous Private Practice Licence Number.....
7. Notification for any changes of name, address and/or authorized premises.....  
.....
8. Specialist/General practice. If specialized please specify the discipline.....  
Sub Specialty.....
9. Letter of no objection from employer/Schedule of duties should be provided for Part-time practice.
10. All applications together with payments should be received by 30th September, 20.....
11. Late payment shall attract 50% penalty.

[Subsidiary]

**Requirements:****(i) Fees:****Kenyans—***A fee of Shs.15,000 is payable annually for Specialist Practice**A fee of Shs.10,000 is payable annually for General Practice**A fee of Shs.10,000 is payable annually for Part-time Practice***Non-Kenyans—***A fee of Shs.40,000 is payable annually for Specialist Practice**A fee of Shs.30,000 is payable annually for General Practice**A fee of Shs.30,000 is payable annually for Part-time Practice***(ii) Copy of previous licence;****(iii) Acquire a minimum of 50 CPD points .***All payments should be made at any KCB Branch countrywide to Board's account No. 1103158643, Milimani Branch.*

Computer generated and stamped banking slip together with renewal form should be, within the first week, either emailed to or posted to the address below.

Signature of applicant .....date.....

I hereby certify that the above information is correct to the best of my knowledge.

**FOR OFFICIAL USE:**

<b>PREPARED:</b>	<b>APPROVED/NOT APPROVED</b>
Name:.....Designation.....	Name.....
Signature.....Date.....	Designation.....
<b>RECOMMENDED:</b>	Signature.....
Name:.....Designation.....	Date.....
Signature.....Date.....	

Physical Address: MP&DB House- Woodlands Rd off Lenana Rd  
 Tel: +254 20-272 8752 |+254 20 272 4994 |+254 20 271 1478  
 Mobile: +254 720 771 478 |+254 736 771 478  
 Address: P.O Box 44839-00100, NAIROBI-Kenya

Email: [info@kenyamedicalboard.org](mailto:info@kenyamedicalboard.org)

Website: [www.medicalboard.co.ke](http://www.medicalboard.co.ke)



<div style="border: 1px solid black; width: 50px; height: 50px; margin: 0 auto;"></div> <p style="text-align: center; margin: 0;">PHOTO</p>	<p style="margin: 0;">FORM XVIII</p> <p style="margin: 0;">THE MEDICAL PRACTITIONERS AND DENTISTS ACT</p> <p style="margin: 0;">(Cap. 253)</p>
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## APPLICATION FOR TEMPORARY LICENCE FOR FOREIGN DOCTORS

1. Surname ..... Other Names .....
2. Date of Birth..... Nationality.....
3. Address..... Code..... Town..... Tel.....  
Email.....
4. Degree, Diploma or Licence held (*if not in English, provide official translation*)  
.....
5. Name of medical/dental school..... Dates qualified.....
6. Particulars of Experience (*e.g. posts held, type of practice in which the applicant has been engaged, countries in which the applicant has practiced:*)  
.....
7. Testimonials covering the period of experience  
.....
8. Name of employer:..... address..... Code.....  
Email..... Tel No.....
9. Is this a New Application or a Renewal? ..... If renewal,  
licence No.....

## Mandatory Requirements:

- (i) Copy of ID/Passport;
- (ii) Current coloured pass port size photograph;
- (iii) Certified copies of professional certificates and transcripts;
- (iv) Certificate of Status;
- (v) Introduction letter/job offer from the institution;
- (vi) Copy of registration certificate from respective medical Board/Council;
- (vii) Copy of current/last practice licence;
- (viii) Copy of current CV;
- (ix) Licence fee Kshs.20,000.00.

All payments should be made at any KCB Branch countrywide to Board's account No. 1103158643, Milimani Branch.

I hereby certify that the above information is correct to the best of my knowledge and I have met the above requirements.

Signature of applicant ..... Date.....

[Subsidiary]

**FOR OFFICIAL USE:**

The process will take a maximum of two weeks.

<b>PREPARED BY:</b> Name:.....Designation..... Signature.....Date.....	<b>APPROVED/NOT APPROVED</b> Name..... Designation..... Signature.....Date.....
<b>CHECKED BY: -</b> Name:.....Designation..... Signature.....Date.....	

## FORM XIX

## THE MEDICAL PRACTITIONERS AND DENTISTS BOARD

(The Medical Practitioners and Dentist Act, Cap. 253)

## TEMPORARY LICENCE FOR FOREIGN DOCTORS

Dr. ....

(full name)

of .....

(address)

Qualifications .....

Is hereby licensed by the Medical Practitioners and Dentists Board to render Medical

services at .....

(name of approved institution)

In accordance with the provisions of section 13 of the Act.

Dated the ....., 20.....

.....

Registrar

Medical Practitioners and Dentists Board

## CONDITIONS OF LICENCE:

1. This licence is valid for a period of 9 MONTHS from the date hereof.
2. This licence is authorized to render medical or dental services as the case may be only at the institution mentioned in this licence.
3. The licence is entitled to engage in training employment.
4. This licence does not entitle you to engage in private practice.
5. Signature of Holder .....

L.N. 161/2015

[Subsidiary]

L.N. 161/2015

FORM XX

## THE MEDICAL PRACTITIONERS AND DENTISTS ACT

(Cap. 253)

## APPLICATION FOR CERTIFICATE OF STATUS

## SECTION A: PERSONAL DETAILS

1. Surname ..... Other Names ..... Reg. No. ....
2. Date of Birth ..... Nationality .....
3. Address ..... Code ..... Town ..... Tel/Mobile .....  
Email .....
4. Reasons for Certificate of status .....
5. Intended county of stay/study/practice ..... Institution .....  
Period .....
6. If certificate is for travel, when are you expected back into the country .....

## SECTION B: REFEREE

I, Dr./Prof. (Names in full) .....

(indicate Full Names as they appear in the Register)

Reg. No. .... of P.O. Box .....

Telephone (Mobile) ..... Email .....

Being a practitioner of good standing, I do hereby declare that I have been and I am well acquainted with the said Dr. ....

Reg. No./Licence No. ....

For the past ..... years; and further declare that during this time he/she:-

- (a) has been engaged in Medical/Dental practice;
- (b) has conducted himself/herself well socially and in a responsible manner;
- (c) character and conduct have been .....
- (d) reasons for certificate of status .....

Signed ..... Date .....

## SECTION C: REQUIREMENTS

- (i) A recommendation by a registered practitioner of good status (in section B above);
- (ii) Attach copy of current retention certificate/private practice licence/temporary licence for foreign practitioner;
- (iii) Evidence that the practitioner is not under any investigation by the Board;
- (iv) Application fee of Kshs.20,000.00.

L.N. 161/2015

*All payments should be made at any KCB Branch countrywide to Board's account No. 1103158643, Milimani Branch; SWIFT CODE: KCBLKENX, BANK CODE: 01175, BANK: KCB*

I hereby certify that the above information is correct to the best of my knowledge and that I have met all the requirements.

Signature of Applicant.....Date .....

FOR OFFICIAL USE:

The process takes a maximum of two (2) weeks.

<b>PREPARED:</b>	<b>APPROVED/NOT APPROVED</b>
Name:.....	Name.....
Designation.....	Designation.....
Signature.....	Signature.....
Date.....	Date.....
<b>RECOMMENDED:</b>	
Name:.....	
Designation.....	
Signature.....	
Date.....	

[Subsidiary]

## FORM XXI

## THE MEDICAL PRACTITIONERS AND DENTISTS BOARD

## APPLICATION FOR ACCREDITATION AS A CPD PROVIDER

PLEASE READ THIS SECTION CAREFULLY BEFORE COMPLETING THE FORM

- (a) The application form must be completed by a duly authorized person;
- (b) Every application must be accompanied by:-
- (i) an application fee of Ksh.15, 000.00 (non-refundable);
  - (ii) calendar of activities; and
  - (iii) names of two referees.

*All payments should be made at any KCB Branch countrywide to Board's account No. 1103158643, Milimani Branch.*

## PART A: ADMINISTRATIVE INFORMATION

1. Particulars of Applicant
(a) Name of institution:
(b) Permanent Address:

(c) Physical Address:	
(d) City/Town:	(e) County:
(f) Postal Address:	(g) Postal Code:
(h) Plot No.:	(i) LR No.:
(j) Telephone No:	(k) Mobile No.:
(l) Email:	(m) Website:
(n) Fax:	
2. Name of Contact Person:	
Landline No.:	Mobile No.:
Email:	
Any other additional information:	

**PART B: DECLARATION BY APPLICANT**

I, the undersigned confirm that all the information in this form and accompanying documentation is correct and true to the best of my knowledge. I further agree to inform the MPDB, about any changes or modifications made to the information given in the document(s) submitted.

Name of Head of Institution/Department: .....

Signature: .....

Name of CPD coordinator: .....

Signature: .....

Date of Application: .....

Official Stamp:

**PART C: FOR MPDB OFFICIAL USE ONLY**

<b>PREPARED BY: -</b>	<b>APPROVED/NOT APPROVED</b>
Name:.....Designation.....	Name.....
Signature.....	Designation.....
Date.....	Signature.....
<b>CHECKED BY: -</b>	Date.....
Name:.....	
Designation.....	
Signature.....	
Date.....	

[Subsidiary]

## FORM XXII

## THE MEDICAL PRACTITIONERS AND DENTISTS BOARD

## CPD ANNUAL RETENTION FORM

## PART I

Name of Provider.....

Telephone (landline).....

Address.....code.....

Physical location.....

Website.....

Name of Contact Person.....

Position.....

Telephone.....

Email.....

Name &amp; Signature of applicant.....

Date.....

I hereby certify that the above information is correct to the best of my knowledge.

FOR OFFICIAL USE:

<b>PREPARED BY: -</b>	<b>APPROVED/NOT APPROVED</b>
Name:.....	Name.....
Designation.....	Designation.....
Signature.....	Signature.....
Date.....	Date.....
<b>CHECKED BY: -</b>	
Name:.....	
Designation.....	
Signature.....Date.....	

Physical Address: MP&amp;DB House- Woodlands Rd off Lenana Rd

Tel: +254 20-272 8752 l+254 20 272 4994 l+254 20 271 1478

Mobile: +254 720 771 478 l+254 736 771 478

Address: P.O Box 44889-00100, NAIROBI-Kenya

Email: medicalboard@kenyamedicalboard.org

ceo@kenyamedicalboard.org

Website: www.medicalboard.co.ke

L.N. 161/2015

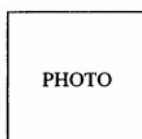


## PART II

1. Part I provides information and guidelines for filling this form.
2. Part II will contain details of the CPD accredited provider. A copy of the Boards certificate should be attached.
3. Part III relates to the calendar of events. Applicants are expected to provide a detailed annual calendar of events in as much as possible the format indicated. The calendar of events should be received by the Board not later than 31<sup>st</sup> December of the preceding year.
4. Part IV will contain information of the attendees. Providers are expected to keep a record of the attendees of each activity in the prescribed form. The list of attendees should be received by the Board not later than thirty days from the date on which the activity was held.
5. A fee of Kshs 40,000/= to be paid per calendar year.
6. An application for retention shall be deemed to be for the next calendar year and can only relate to future CPD activities to be conducted.
7. CPD providers who intend to charge participants a fee shall indicate the same on the retention form and shall provide all relevant details of the same.
8. CPD programs or activities must-
  - (a) have significant intellectual and practical content and should emphasize ethical aspects of practice;
  - (b) be related to or be relevant to the practice of medicine;
  - (c) be of relevance and benefit to medical practitioners, dental practitioners or other health professionals, or designed specifically for registered medical institutions (whether government or private);
  - (d) be designed with the primary objective of increasing the professional competence of the attendee; and
  - (e) be approved by the Board.
9. The Board's decision shall be final

L.N. 161/2015

FORM XXIII



THE MEDICAL PRACTITIONERS AND DENTISTS ACT  
(Cap. 253)

APPLICATION FOR INTERNSHIP QUALIFYING EXAMINATION/FOR FOREIGN  
TRAINED DOCTORS/EAST AFRICA COMMUNITY RECIPROCAL  
RECOGNITION

1. Surname ..... Other Names .....
2. Date of Birth.....Nationality.....

[Subsidiary]

3. Address.....Code.....Town.....Tel.....  
Email.....
4. Degree, Diploma or Licence held (*give name of medical school and date qualified-  
if degree not in English, provide official translation*)  
.....

**Requirements:**

- (i) Copy of ID/Passport;
- (ii) Coloured pass port size photograph;
- (iii) Certified copies of professional certificates;
- (iv) Curriculum Vitae;
- (v) Must be attached at a training institution approved by the Board for a period of four (4) Months;
- (vi) Qualifications ( Form IV or VI Certificates);
- (vii) Evidence of appropriate linguistic skills in English and/or Kiswahili for non-Kenyans;
- (viii) Evidence of registration from EAC Partner States Board's and councils (for those applying for reciprocal registration);
- (ix) Letter from Commission for Higher Education (CHE) confirming recognition of the medical/dental school (if foreign trained);
- (x) Application fee Kshs. 5,000.00;
- (xi) Examination/Evaluation of qualification papers Kshs.30,000.00.

All payments should be made at any KCB Branch countrywide to Board's account No. 1103158643, Milimani Branch.

I hereby certify that the above information is correct to the best of my knowledge and I have fulfilled all the above requirements.

Signature.....Date.....

**FOR OFFICIAL USE:**

<b>PREPARED BY: -</b>	<b>APPROVED/NOT APPROVED</b>
Name:.....Designation.....	Name.....
Signature.....Date.....	Designation.....
<b>CHECKED BY: -</b>	Signature.....
Name:.....Designation.....	Date.....
Signature.....Date.....	

## SECOND SCHEDULE

[L.N. 204/1988, L.N. 349/1995, s. 2, L.N. 138/1997, s. 2, L.N. 26/2000, s. 2, L.N. 80/2005, s. 2, L.N. 135/2010, s. 2, L.N. 12/2012., L.N. 4/2017, s. 9.]

SECOND SCHEDULE		
	Item	Fees (Shs.)
1.	Indexing of a medical/dental student	1,000
2.	MEDICAL/DENTAL PRACTITIONERS	
	(a) Permanent Registration of a Medical/Dental practitioner	8,000
	(b) Retention of the name of a Medical/Dental practitioner in the Register	4,000
	(c) Renewal of Private Practice Licence by Citizens of Kenya	
	(i) Full-time-general practice	10,000
	(ii) Full-time-Specialist practice	15,000
	(iii) Part-time-Specialist practice	10,000
	(d) Renewal of Private Practice Licence by non-Citizen	
	(i) Full-time-general practice	30,000
	(ii) Full-time-Specialist practice	40,000
	(iii) Part-time-Specialist practice	30,000
	(e) Temporary licence for foreign doctor	20,000
	(f) Specialist recognition	20,000
	(g) Exam fees	
	(i) Application	5,000
	(ii) Internship qualifying exam	30,000
	(iii) Assessment for Registration exam	50,000
	(iv) Peer review	95,000
	(b) Processing additional qualifications	20,000
	(i) Certificate of status	20,000
3.	INSTITUTION FEES	
	(a) Registration of a new institution	
	(i) Medical Clinic	10,000
	(ii) Dental Clinic	10,000
	(iii) Dispensary	5,000
	(iv) Faith Based Dispensary	5,000

[Subsidiary]

	(v) Mobile Clinic	10,000
	(vi) Eye Clinic	10,000
	(vii) Faith Based Basic Health Centre	5,000
	(viii) Basic Health Centre	10,000
	(ix) Faith Based Comprehensive Health Centre	5,000
	(x) Comprehensive Centre	15,000
	(xi) Medical/Dental Centre	15,000
	(xii) Funeral Home Stand Alone	15,000
	(xiii) Nursing Home/Cottage Hospital	15,000
	(xiv) Maternity Home	15,000
	(xv) Faith Based Level 4 Hospital	10,000
	(xvi) Hospital Level 4 Internship Training Centre/County Hospital	30,000
	(xvii) Faith Based Level 5 Hospital	10,000
	(xviii) Hospital Level 5/County Referral Hospitals/Secondary Care Hospital	20,000
	(xix) Faith Based Specialized Tertiary Referral Hospital	10,000
	(xx) Specialized Tertiary Referral Hospital	30,000
	(xxi) Faith Based National Referral and Teaching Hospitals and specialized hospitals Level	20,000
	(xxii) National Referral and Teaching Hospitals and specialized hospitals Level 6	40,000
	(b) Renew of institution annual licence	
	(i) Medical Clinic	15,000
	(ii) Dental Clinic	15,000
	(iii) Dispensary	5,000
	(iv) Faith Based - Dispensary	5,000
	(v) Mobile Clinic	15,000
	(vi) Eye Clinic	15,000
	(vii) Faith Based Basic Health Centre	15,000
	(viii) Basic Health Centre	15,000
	(ix) Faith Based Comprehensive Health Centre	15,000
	(x) Comprehensive Health Centre	20,000
	(xi) Medical/Dental Centre	20,000
	(xii) Funeral Home Stand Alone	20,000
	(xiii) Maternity Home	25,000
	(xiv) Nursing Home/Cottage Hospital	30,000
	(xv) Faith Based Level 4 Hospital	30,000
	(xvi) Hospital Level 4 Internship Training Centre/County Hospital	80,000
	(xvii) Faith Based Hospital Level 5	50,000

	(xviii) Hospital Level 5/ County Referral Hospitals	90,000
	(xix) Faith Based Specialized Tertiary Referral Hospital	80,000
	(xx) Specialized Tertiary Referral Hospital	90,000
	(xxi) Faith Based National Referral and Teaching Hospitals and specialized hospitals Level 6	100,000
	(xxii) National Referral and Teaching Hospitals and specialized hospitals Level 6	300,000
4.	INSPECTION	
	(a) Inspection of new facility	5,000
	(b) Inspection of Medical/Dental School	500,000
5.	CONTINUOUS PROFESSIONAL DEVELOPMENT (CPD) FEES	
	(a) Application for new facility	15,000
	(b) Annual CPD accreditation	40,000
	(c) Curriculum review	100,000
6.	TRIBUNAL/PRELIMINARY INQUIRY COMMITTEE (PIC) PROFESSIONAL CONDUCT COMMITTEE CHARGES	
	(a) Lodging PIC complaint against a medical practitioner or dentist	2,000
	(b) Tribunal proceedings (per pages)	200
	(c) Court attendance by official of the Board	20,000 - 100,000
7.	SALE OF BOOKS AND GUIDELINES	
	(a) Code of professional Conduct and Discipline	2,500
	(b) Doctor/ Institutions register (each)	10,000
	(c) Doctors Fees Guidelines	5,000
8.	Search fees	3,000
9.	Medical Certification Fees	3,000



**MEDICAL PRACTITIONERS AND DENTISTS (REGISTRATION,  
LICENSING, ASSESSMENT AND INTERNSHIP) RULES, 1979****ARRANGEMENT OF RULES****PART I – PRELIMINARY***Rule*

1. Citation.
2. Interpretation.

**PART II – REGISTRATION AND LICENSING**

3. Application.
4. Exemption from registration fee.
5. Licence to undergo internship.
6. Issue of licence to render medical or dental services.
7. Board to approve application.

**PART III – ASSESSMENT**

8. Assessment examination.
9. Assessment committee.
10. Committee may co-opt.
11. Written report.
12. Candidate to be informed where committee recommends no registration.
13. Appeal.
14. Fee.

**PART IV – INTERNSHIP QUALIFYING EXAMINATION AND REMEDIAL TRAINING**

15. Internship qualifying examination.
16. When held.
17. Remedial training.
18. Position on failure of examination.
19. Fee.
20. Exemption.
21. Voluntary remedial training.
22. Offences.

**PART V – INTERNSHIP**

23. Internship.
24. Guide lines.
25. Supervision of intern.
26. Internship assessment form.
27. Procedure on reception of supervisor's recommendations.
28. No registration until completion of internship.
29. Conditions to be met by institutions offering training employment.

**SCHEDULE —****DELETED**

[Subsidiary]

**MEDICAL PRACTITIONERS AND DENTISTS (REGISTRATION,  
LICENSING, ASSESSMENT AND INTERNSHIP) RULES, 1979**

[L.N. 156/1979, L.N. 292/1988, L.N. 159/1989, L.N. 9/1992, L.N. 131/2005.]

**PART I – PRELIMINARY****1. Citation**

These Rules may be cited as the Medical Practitioners and Dentists (Registration, Licensing, Assessment and Internship) Rules, 1979.

**2. Interpretation**

In these Rules, unless the context otherwise requires—

“**assessment**” means the determination of the suitability of a person for registration or licensing under the Act including by means of oral or written examination or both, and the determination of a period, if any, which the Board considers necessary for a person to undergo remedial training;

“**chairman**” means the chairman of the Board;

“**co-ordinator**” means the person for the time being appointed as co-ordinator of assessment examinations under rule 9;

“**intern**” means a person holding a medical or dental degree or diploma recognized by the Board, or a person who has passed the internship qualifying examination, and who is undergoing a prescribed period of internship in a recognized institution;

“**internship**” means training employment;

“**internship qualifying examination**” means a written or oral examination or both which determines the suitability of foreign trained graduates who do not hold degrees or diplomas recognized by the Board to undergo internship;

“**licensed**” means licensed under section 13 of the Act to render medical or dental services;

“**recognized institution**” means an institution declared to be a recognized institution for internship and gazetted in accordance with regulation 29(3);

“**registered**” means registered as a medical practitioner or dentist under section 6 of the Act;

“**remedial training**” means a period of extra training in a defined discipline or disciplines determined from time to time by the Board;

“**supervisor**” means a medical or dental practitioner of consultant status appointed by the Board to supervise the performance of an intern in any one of the approved disciplines during the period of internship.

[L.N. 131/2005, s. 2(a).]

**PART II – REGISTRATION AND LICENSING****3. Application**

(1) An application for registration or licensing shall be submitted to the Registrar in the form, and together with the fee, prescribed in the Medical Practitioners and Dentists (Forms and Fees) Rules and shall be accompanied by—

- (a) legible photocopies of the applicant’s diplomas, degrees, licences or other qualifications, and testimonials, all of which shall be attested against the originals by an official of the Board; and
- (b) a curriculum vitae.



(2) An application by a person registered in a foreign country shall, in addition to the documents specified in paragraph (1), be accompanied by a certificate of good standing and registration or similar certificate containing evidence of registration from the appropriate foreign authority.

#### **4. Exemption from registration fee**

A medical or dental practitioner who was previously registered in Kenya and who on the 1st January, 1978 had attained the age of sixty-five and retired shall be exempted from paying any registration fee.

#### **5. Licence to undergo internship**

The Registrar shall issue free of charge a licence to enable an applicant who has satisfied the provisions of Parts IV and V to undergo an internship.

#### **6. Issue of licence to render medical or dental services**

The Registrar, in consultation with the chairman, shall, on behalf of the Board, issue, on payment of the prescribed fee, a licence to an applicant who is not otherwise eligible to be registered and who is considered to be of good character and a fit and proper person to be licensed, or who does not wish to be registered even though he is qualified to be registered, to render medical or dental services in a salaried post as provided by sections 13 and 14 of the Act.

#### **7. Board to approve application**

The Board shall approve all applications for registration or licensing before certificates of registration or licences are issued.

### **PART III – ASSESSMENT**

#### **8. Assessment examination**

No person to whom section 11(2) of the Act applies shall be registered unless he has passed or has been exempted from an assessment examination.

#### **9. Assessment committee**

(1) There is hereby established a committee known as the assessment committee which shall consist of a co-ordinator of assessment examinations who shall be the deputy chairman of the Board and such other members as may be appointed by the Board from time to time.

(2) The committee shall consist of two panels, one of which shall consist of four medical practitioners and the other of two dentists.

(3) Where the co-ordinator sits on any panel he shall be the chairman of that panel but in any other case he shall appoint a chairman.

(4) The committee shall sit at least once in three months.

#### **10. Committee may co-opt**

The committee may co-opt not more than two medical practitioners and two dentists, one of whom may be of consultant status, who are not members of the Board, to serve on the relevant panel from time to time.

#### **11. Written report**

The co-ordinator shall as soon as possible after completion of an assessment examination submit to the Board a written report signed by the members of the panel giving in the case of each candidate—

- (a) the name and address;
- (b) the marks attained in oral and written examination and the result;

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[Subsidiary]

- (c) any recommendations as to whether the candidate should be referred for further internship or remedial training and for how long;
- (d) any other general recommendations, observations or remarks.

## **12. Candidate to be informed where committee recommends no registration**

Where a report is submitted under rule 11 recommending that a candidate should not be registered, the Board shall, unless it proposes to authorize registration notwithstanding the report, inform the candidate concerned of the substance of the committee's report and recommendations.

## **13. Appeal**

(1) A candidate may, within fourteen days of his being informed of the committee's recommendation that he should not be registered, appeal to the full Board against the report and recommendation.

(2) A decision by the Board on appeal under this rule shall be final.

## **14. Fee**

A candidate for an assessment examination shall pay to the Board a fee of one hundred shillings.

### **PART IV – INTERNSHIP QUALIFYING EXAMINATION AND REMEDIAL TRAINING**

## **15. Internship qualifying examination**

Any person who has qualified outside Kenya shall be required to engage in internship and, unless exempted under rule 20, shall be required to pass an internship qualifying examination (in this part referred to as "the examination"), which may be written or oral or both, recognized and approved by the Board and which is of equivalent standard to the qualifying examinations in medicine or dentistry of the University of Nairobi.

## **16. When held**

The examination shall be conducted by the assessment committee and shall be held as and when necessary.

## **17. Remedial training**

(1) A candidate who fails the examination shall be required to undergo a period of remedial training in those disciplines in which in the opinion of the assessment committee he has inadequate knowledge.

(2) A remedial training period shall as far as possible be continuous and shall not exceed a total of six months.

(3) On expiry of a remedial training period a written report shall be submitted to the Board by the administrator or medical superintendent of the relevant hospital in consultation with the candidate's supervisor.

(4) A person shall be required to undergo remedial training if—

- (a) he fails to pass the examination;
- (b) he does not satisfy his supervisors during his internship;
- (c) he fails the assessment examination after three consecutive attempts at monthly intervals;
- (d) he has been subject to disciplinary action arising out of professional incompetence.

## **18. Position on failure of examination**

A person who fails the examination shall be allowed two more attempts which shall be made during the remedial training period, and any person who fails the examination three times shall be deemed unsuitable for internship or for registration or licensing.

**19. Fee**

A fee of one hundred shillings shall be payable by a candidate for the examination each time it is attempted.

**20. Exemption**

Medical and dental graduates who are holders of degrees or diplomas which are recognized by the Board shall be exempted from the examination.

**21. Voluntary remedial training**

A period of remedial training may be undergone voluntarily by any person before attempting the examination.

**22. Offences**

(1) An administrator of a medical institution in Kenya which, without prior approval of the Board, offers internship to a person who has neither passed the examination nor been exempted under rule 20, shall be guilty of an offence, and liable to a fine not exceeding five thousand shillings.

(2) A person who has neither passed the examination nor been exempted under rule 20 and who, without the prior approval of the Board, undergoes internship shall be guilty of an offence and liable to a fine not exceeding one thousand shillings or to a term of imprisonment not exceeding one month, or to both.

**PART V – INTERNSHIP****23. Internship**

A person who is the holder of a degree, diploma or other qualification which is recognized by the Board or who has passed the internship qualifying examination referred to in Part IV shall undergo a prescribed period of internship.

**24. Guide lines**

(1) An intern shall receive from the Board at the commencement of the period of internship a copy of "Guide Lines for Interns" detailing all the disciplines and areas which he is expected to cover during the prescribed period of internship before being considered for registration.

(2) The Board shall inform the intern in writing of the recognized institution where internship may be undertaken.

**25. Supervision of intern**

During the period of internship, an intern shall be under the supervision and guidance of the employing institution in conjunction with the approved supervisors and he shall be offered every opportunity and facility to enable him to undergo his internship.

**26. Internship assessment form**

On completion of internship, an intern shall submit a duly completed internship assessment form to the Board through the medical superintendent of the recognized hospital where he has completed his internship, and through the Provincial Medical Officer of the respective province.

**27. Procedure on reception of supervisor's recommendations**

Upon receipt of the supervisor's recommendations, the Board shall issue a registration certificate or licence, or direct the intern to undergo a further period of internship in the disciplines in which his performance may have been found to be unsatisfactory; and such further period of internship may be undertaken in the same or a different institution or institutions for a period of not less than three months.

[Subsidiary]

**28. No registration until completion of internship**

No person shall be entitled to be registered as a medical or dental practitioner unless he has successfully completed a prescribed period of internship.

**29. Conditions to be met by institutions offering training employment**

(1) Institutions which shall be recognized by the Board for training employment shall meet the following requirements—

- (a) they shall have been gazetted as approved medical institutions in accordance with the Act;
- (b) provision of constant supervision of interns, in the case of medical interns, by at least one consultant or specialist and one other full-time medical practitioner with a postgraduate qualification in each of the following disciplines, namely medicine, paediatrics, obstetrics and gynaecology and surgery, and in the case of dental interns by at least two dentists of consultant grade and one additional dentist with a post-graduate qualification;
- (c) provision in addition of at least one consultant or specialist in pathology, radiology and anaesthetics;
- (d) provision of a properly stocked and functioning medical library,

and every such institution shall be liable to inspection by the Board from time to time in order that the Board may satisfy itself that the provisions of this rule are being complied with.

(2) An institution which fails to provide the minimum requirements specified in paragraph (1) may have its recognition withdrawn by the Board.

(3) Notwithstanding any other provisions of these Rules, the Board may from time to time, by notice in the *Gazette*, declare recognized institutions for internship.

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**SCHEDULE**

[Deleted by L.N. 131/2005, s. 2(b).] [L.N. 292/1988, L.N. 159/1989, L.N. 9/1992.]

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**MEDICAL PRACTITIONERS AND DENTISTS (DISCIPLINARY  
PROCEEDINGS) (PROCEDURE) RULES, 1979**

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SCHEDULE —

FORMS

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## MEDICAL PRACTITIONERS AND DENTISTS (DISCIPLINARY PROCEEDINGS) (PROCEDURE) RULES, 1979

[L.N. 157/1979, L.N. 21/2012, L.N. 223/2013.]

### PART I – PRELIMINARY

#### 1. Citation

These Rules may be cited as the Medical Practitioners and Dentists (Disciplinary Proceedings) (Procedure) Rules, 1979.

#### 2. Interpretation

In these Rules, unless the context otherwise requires—

“**Board’s advocate**” means an advocate appointed by the Board to assist in conducting an inquiry under these Rules;

“**case relating to conviction**” means a case where it is alleged that a medical practitioner or dentist has been convicted of an offence under this Act or under the Penal Code (Cap. 63);

“**Chairman**” means the chairman of the Board;

“**charge**” means a charge or charges specified in a notice of inquiry;

“**complainant**” means a body or person that makes a complaint to the Board;

“**infamous or disgraceful conduct in a professional respect**” means serious misconduct judged according to the rules, written or unwritten, which govern the medical and dental professions;

“**inquiry**” means a disciplinary inquiry held by the Board sitting as a tribunal into the conduct of a medical practitioner or dentist;

“**notice of inquiry**” means a written and signed notice from the Board which is sent to a medical or dental practitioner, specifying, in the form of a charge or charges, matters upon which the inquiry is to be held, and stating the date, time and place where the inquiry is to be held.

### PART II – PROCEEDINGS RELATING TO CONVICTION AND INFAMOUS CONDUCT IN A PROFESSIONAL RESPECT

#### 3. Preliminary Inquiry Committee

(1) There is hereby established a committee to be known as the Preliminary Inquiry Committee which shall consist of seven members elected from among the members of the Board.

(2) The Director of Medical Services or, in his absence, a Deputy Director of Medical Services who is a member of the Board shall be the chairman of the Preliminary Inquiry Committee.

(3) The chairman of the Preliminary Inquiry Committee shall convene the meetings of the committee as and when necessary.

(4) The Preliminary Inquiry Committee may co-opt into the Committee any person whose knowledge and skills are necessary for the proper determination of any matter before it.

(5) A person co-opted under sub-rule (4) may attend the meetings of the Committee and participate in its deliberations but shall have no right to vote at the meeting.

[L.N. 223/2013, r. 2.]

#### 4. Functions of Preliminary Inquiry Committee

(1) The functions of the Preliminary Inquiry Committee shall be to—

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- (a) conduct inquiries into the complaints submitted to it under these Rules and make appropriate recommendations to the Board;
- (b) ensure that the necessary administrative and evidential arrangements have been met so as to facilitate the Board to effectively undertake an inquiry under rule 6;
- (c) promote mediation and arbitration between the parties and refer matters to such mediator or arbitrator as the parties may in writing agree; and
- (d) at its own liberty, record and adopt mediation agreements or compromise between the parties, on the terms agreed and thereafter inform the chairperson.

(2) Subject to paragraph (1), the Preliminary Inquiry Committee after considering the complaint and making such inquiries with respect thereto as it may think fit, shall—

- (a) if of the opinion that the complaint does not warrant reference to the Board for inquiry, reject the complaint and so inform the Chairman;
- (b) if of the opinion that the complaint does warrant reference to the Board, cause it to be referred to the Professional Conduct Committee together with its findings and recommendations.

(3) The Preliminary Inquiry Committee shall, in consultation with the Board, have the power to—

- (a) levy reasonable costs of the proceedings from parties;
- (b) make an order compelling a medical practitioner or dentist to undergo continuous professional development of not more than fifty points;
- (c) suspend the licence of a medical institution for a period of not more than six months;
- (d) make an order for the closure of an institution pending the compliance by that institution, of a condition or requirement under the licence issued to it under the Act; and
- (e) make such further recommendations as the committee deems fit.

[L.N. 21/2012, s. 2, L.N. 223/2013, r. 3.]

#### **4A. Professional Conduct Committee**

(1) The Board may, upon the recommendation of the Preliminary Inquiry Committee, establish on an ad hoc basis, a professional Conduct Committee comprising—

- (a) a chairperson;
- (b) two persons registered in the same profession in which a medical practitioner or dentist whose conduct is being inquired is registered;
- (c) one member of the Board;
- (d) one person representing the general public;
- (e) the Board's advocate who shall be the legal advisor; and
- (f) the Chief Executive Officer of the Board.

(2) The functions of the Professional Conduct Committee shall be to—

- (a) conduct inquiries into the complaints within such counties as the Board may specify and make appropriate recommendations to the Board;
- (b) ensure that the necessary administrative and evidential arrangements have been met so as to facilitate the Board to effectively undertake an inquiry under rule 6;
- (c) convene sittings in respective counties to determine complaints;
- (d) promote arbitration between the parties and refer matters to such arbitrator as the parties may in writing agree.

(3) The Professional Conduct Committee shall, subject to prior or subsequent approval by the Board, have power to—



- (a) levy reasonable costs of the proceedings from parties;
- (b) order a medical practitioner or dentist to undergo continuous professional development for a maximum of up to fifty points;
- (c) suspend licenses for medical institutions for up to six months;
- (d) order closure of institutions until compliance with the requirements of the operating licence;
- (e) admonish a doctor or dentist or the institution and conclude the case; and
- (f) make such further recommendations as the committee deems fit.

(4) The Professional Conduct Committee may summon or correspond with persons including medical practitioners and dentists to whom a complaint relates as it thinks fit and may peruse or inspect all instruments relating to the complaint.

[L.N. 21/2012, s. 3, L.N. 223/2013, r. 4.]

## **5. Submission of complaint or information**

(1) Whenever a complaint or information is received by the Chairman from a body or person and it appears to him that—

- (a) a medical practitioner or dentist has been convicted of an offence under this Act or under the Penal Code; or
- (b) that a question arises whether the conduct of a medical practitioner or dentist constitutes serious professional misconduct,

the Chairman shall submit the matter to the Preliminary Inquiry Committee and Professional Conduct Committee.

(2) When the Preliminary Inquiry Committee refers the complaint to the Board under rule 4(2)(b), the Chairman shall send to the medical practitioner or dentist to whom the complaint relates a notice of inquiry which shall—

- (a) be in Form 1 in the Schedule and shall, unless the Board otherwise directs, require the party to whom it is addressed to furnish the Chairman and every other party a notice of all the documents which he intends to rely on at the hearing;
- (b) set out, in general terms, the charge or charges of professional misconduct made against the medical practitioner or dentist; and
- (c) specify the date and time of and the place at which the inquiry is proposed to be held.

(3) The notice of inquiry shall be sent to the medical practitioner or dentist by registered post addressed to his last known address as notified to the Registrar or by any other means approved by the Board.

(4) In any case where there is a complaint, a copy of the notice of inquiry shall be sent to him.

[L.N. 223/2013, r. 5.]

## **6. Procedure in cases relating to conviction**

(1) In cases relating to conviction, where the medical practitioner or dentist appears, the following order of proceedings shall be observed as respects proof of convictions alleged in the charge or charges—

- (a) the complainant, or if a complainant does not appear or there is no complainant, the Board's advocate shall adduce evidence of the conviction and produce before the Board a certified copy of the Court proceedings which resulted in the conviction of the medical practitioner or dentist;
- (b) if, as regards a conviction, no evidence is adduced, the Chairman shall thereupon announce that the conviction has not been proved;

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- (c) the Chairman shall ask the medical practitioner or dentist whether he admits each previous conviction of which evidence is so adduced;
- (d) if the medical practitioner or dentist does not admit all the convictions, he may, if he intends to adduce other oral evidence in addition to his own evidence as respects any conviction which he does not admit either in person or by his advocate, open his case;
- (e) the medical practitioner or dentist or his advocate, as the case may be, may adduce evidence in respect of any conviction which he does not admit;
- (f) at the close of the evidence for the medical practitioner or dentist, the complainant or the Board's advocate, as the case may be, may with the leave of the Board, adduce evidence to rebut any evidence adduced by the medical practitioner or dentist;
- (g) the complainant or the Board's advocate, as the case may be, may address the Board and close his file;
- (h) the medical practitioner or dentist or his advocate may then address the Board and close his case.

(2) Where the medical practitioner or dentist does not appear and the Board has decided to proceed with the inquiry, subparagraphs (a) and (b) of paragraph (1) shall apply but the remainder of that paragraph shall not apply.

(3) On the conclusion of the proceedings under this rule the Board shall consider every conviction alleged in the charge or charges, other than a conviction which has been admitted by the medical practitioner or dentist, and shall determine whether it has been proved and the Chairman shall then announce its determination in such terms as the Board may approve.

## **7. Procedure in cases relating to conduct**

(1) In all cases relating to conduct where the medical practitioner or dentist appears the following order of proceedings shall apply—

- (a) if the complainant appears, he shall open the case against the medical practitioner or dentist or where the complainant does not appear or there is no complainant, the Board's advocate shall present all the facts on which the complaint or information is based;
- (b) the complainant or the Board's advocate, as the case may be, may address the Board and adduce evidence of the facts alleged in the charge or charges;
- (c) if as respects any charge no evidence is adduced, the Board shall record and the Chairman shall announce a finding that the medical practitioner or dentist is not guilty of infamous or disgraceful conduct in a professional respect as alleged in the charge or charges;
- (d) at the close of the case against him, medical practitioner or dentist or his advocate may make either one or both of the following submissions as respects any charge which remains outstanding namely—
  - (i) that no sufficient evidence has been adduced upon which the Board could find that the facts alleged have been proved;
  - (ii) that the facts of which evidence has been adduced are insufficient to support a finding of infamous or disgraceful conduct in a professional respect,

and where any such submission is made, the complainant or the Board's advocate, as the case may be, may answer the submission and the medical practitioner or dentist or his advocate may reply thereto;

- (e) if a submission is made under paragraph (d), the Board shall consider and determine whether the submission should be upheld and if the Board determines to uphold such a submission as regards any charge, it shall record, and the Chairman shall announce, that the medical practitioner or dentist is not guilty of infamous or disgraceful conduct in a professional respect in respect of the matters to which that charge relates;
- (f) the medical practitioner or dentist may then, if he intends to adduce oral evidence in addition to his own evidence, open his case upon any charge which remains outstanding;
- (g) at the close of the evidence for the medical practitioner or dentist the complainant or the Board's advocate, as the case may be, may with leave of the Board, adduce evidence to rebut any evidence adduced by the medical practitioner or dentist;
- (h) the complainant, or the Board's advocate, as the case may be, may then address the Board and close his case.

(2) The medical practitioner or dentist or his advocate may then address the Board and close his case.

(3) Where in a case relating to conduct the medical practitioner or dentist does not appear and the Board decides to proceed with the inquiry only subparagraphs (a), (b) and (c) of paragraph (1) shall apply.

(4) On conclusion of the proceedings under paragraph (1) the Board shall consider and determine as respects each charge which remains outstanding which, if any, of the facts alleged in the charge has been proved to their satisfaction.

(5) If under paragraph (3) the Board decides, as regards any charge, either that none of the facts alleged in the charge have been proved to their satisfaction, or that such facts as have been proved would be insufficient to support a finding of infamous or disgraceful misconduct in a professional respect, the Board shall record a finding that the medical practitioner or dentist, as the case may be, is not guilty of the misconduct alleged in the charge or charges.

(6) The Chairman shall announce determination or the finding of the Board after the procedure prescribed under this rule has been complied with.

**8.** Deleted by L.N. 223/2013, r. 6.

**9.** Deleted by L.N. 223/2013, r. 6.

## **10. Inquiries into charges against two or more practitioners**

(1) Nothing in these Rules shall be construed as preventing an inquiry being held jointly into charges against two or more medical practitioners or dentists.

(2) Where a joint inquiry is held, the provisions of these Rules shall apply subject to the necessary adaptations and any directions which may be given by the Board.

### **PART II A**

#### **10A. Application**

(1) The provisions of this Part shall apply to proceedings conducted by the Preliminary Inquiry Committee and the Professional Conduct Committee or with necessary modifications, to an inquiry held by the Board sitting as a tribunal.

(2) In this Part, "Committee" means either the Preliminary Inquiry Committee or the Professional Conduct Committee, as the case may be.

[L.N. 223/2013, r. 6.]

#### **10B. Powers of the Committee**

- (1) The Committee shall, in conducting proceedings under these Rules, have power to—
  - (a) administer oaths;

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[Subsidiary]

- (b) summon persons to attend and give evidence;
- (c) order the production of relevant documents, including court judgments; and
- (d) recover in whole or in part the cost of the inquiry not exceeding one million shillings from any or all the parties involved in the proceedings.

(2) An oath shall be administered by the chairperson of the Committee.

(3) Notices and summons of the Committee shall be issued under the hand of the Registrar and shall be deemed to have been issued by the Committee.

[L.N. 223/2013, r. 6.]

#### **10C. Non-response by respondent**

Where the respondent fails to respond to a notice of inquiry—

- (a) the hearing may proceed in his or her absence; and
- (b) he or she commits an act of professional misconduct.

[L.N. 223/2013, r. 6.]

#### **10D. Form of proceedings**

In the determination of complaints under these Rules, the Committee shall have due regard to the principles of natural justice and shall not be bound by any legal or technical rules of evidence applicable to proceedings before a court of law.

[L.N. 223/2013, r. 6.]

#### **10E. Language of proceedings**

(1) Proceedings before the Committee shall be conducted in English or Kiswahili.

(2) The Committee may, at its discretion, allow an application lodged in any local language spoken in Kenya by persons or a community directly affected by the subject matter of the application, if those persons or community cannot immediately obtain a translation but undertake to do so within a reasonable time.

(3) The Committee shall, taking into account all the circumstances, grant the assistance of a competent interpreter free of charge to a party or witness who does not understand or speak the language used at the hearing or who is deaf.

(4) The rulings of the Committee shall be prepared in the English language but may be translated, on request by a party, into the Kiswahili language.

[L.N. 223/2013, r. 6.]

#### **10F. Information**

(1) The Committee may receive or obtain information from such persons as it may deem proper, including, information from such persons as the Committee considers to possess knowledge or experience in matters relating to any complaint before it.

(2) Where a complaint is not disposed of after the preliminary investigation, the Committee shall review the complaint with a view to initiating further investigations.

(3) Subject to the provisions of these Rules, the Committee may regulate its procedure in such manner as it deems fit.

[L.N. 223/2013, r. 6.]

#### **10G. Directions and pre-hearing orders**

(1) The Committee may on its own motion or on the application by a party to the proceedings give directions, including directions for the furnishing of further particulars or supplementary statements, as are necessary to enable the parties prepare for the hearing or assist the Committee determine the issues related to the hearing before it.

(2) The Committee may take into account the need to protect any matter that relates to the intimate, personal or financial circumstance of any party or consists of information communicated or obtained in confidence or concerns national security and may order that all or part of the evidence of a person be heard in private or prohibit or restrict the publication of that evidence.

(3) The Committee shall not compel a person to give any evidence or produce any document or other material that he or she could not be compelled to give or produce in a trial for an action in a court of law.

(4) An application by a party for directions shall be made in writing to the Committee and shall, unless accompanied by the written consent of all parties, be served by the party seeking directions on all other parties to the proceedings.

(5) If any party objects to the directions sought, the Committee shall consider the objection and if it considers it necessary, give the parties an opportunity to appear and be heard by it on the objection raised.

[L.N. 223/2013, r. 6.]

#### **10H. Non-appearance by respondent**

(1) Where a medical practitioner or dentist whose conduct is the subject of investigation, without reasonable excuse, fails to appear either personally or by his representative at the time and place fixed in the notice of hearing served on him—

- (a) the inquiry may proceed in his absence; and
- (b) he or she commits an act of professional misconduct.

(2) If a person appearing at the inquiry, without reasonable excuse—

- (a) refuses or fails to be sworn or affirmed;
- (b) refuses or fails to answer a question that he is required to answer by the person chairing the Committee; or
- (c) refuses or fails to produce a document that he was required to produce by a summons served, on him or her,

he or she commits an offence.

[L.N. 223/2013, r. 6.]

#### **10I. Failure to comply with directions**

(1) Where a party fails to comply with directions given under these Rules, the Committee may, in addition to other powers available to it, before or at the hearing of the complaint dismiss the whole or part of the complaint, or, as the case may be, strike out the whole or part of a respondent's reply and where appropriate, direct that a party be excluded from participating in the hearing.

(2) The Committee shall not dismiss, strike out or give any directions under sub rule (1) unless it has served a notice on the party who has failed to comply with the direction, giving him or her an opportunity to show cause why the Committee should not give directions under sub rule (1) of this rule.

[L.N. 223/2013, r. 6.]

#### **10J. Varying or setting aside of directions**

A medical practitioner or dentist on whom directions, including any summons, are served and who had no opportunity of objecting to the making of directions may apply to the Committee to vary or set aside the directions, but the Committee shall not do so without first notifying the person who applied for the directions and considering any representations made by him.

[L.N. 223/2013, r. 6.]

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[Subsidiary]**10K. Summons and orders**

A medical practitioner or dentist summoned to give evidence before the Committee shall be given at least seven days' notice of the hearing unless the person has informed the Committee that he or she accepts the shorter notice given.

[L.N. 223/2013, r. 6.]

**10L. Exclusion of persons disrupting proceedings**

Without prejudice to any other powers it may have, the Committee may exclude from the hearing or part of it, any person whose conduct has disrupted or is likely, in the opinion of the Committee, to disrupt the hearing.

[L.N. 223/2013, r. 6.]

**10M. Failure of Parties to attend hearing**

(1) Where a party fails to attend or be to represented at a hearing of which he has been duly notified, the Committee may—

- (a) unless it is satisfied that there is sufficient reason for the absence of the party, hear and determine the application in the absence of that party; or
- (b) adjourn the hearing,

and may make such orders as to costs as it considers fit.

(2) Before determining an application under sub-rule (1)(a) of this rule, the Committee shall consider any representations made in writing submitted by that party in response to the notice of application and for the purpose of this rule, the application and any reply shall be treated as representations in writing.

(3) A party aggrieved by the decision of the Committee under sub-rule (1)(a) may file an application within thirty days from the date of the decision for review of the order, and the Committee may within reasonable time review the order on such terms as it considers fit, if the Committee is satisfied that there was sufficient cause for non-attendance.

[L.N. 223/2013, r. 6.]

**10N. Procedure at hearing**

(1) The chairperson shall, at the commencement of the hearing, explain the order of proceedings which the Committee proposes to adopt.

(2) The Committee shall conduct the hearing in such manner as it considers suitable for the determination of the application or the clarification of issues before it and generally for the just handling of the proceedings and shall, so far as it appears to it appropriate, avoid legal technicality and formality in its proceedings.

(3) The parties shall be heard in such order as the Committee shall determine, and shall be entitled to give evidence, call a witness, and address the Committee on both evidence and generally on the subject matter of the application.

(4) Evidence before the Committee may be given orally or, if the Committee so orders, by affidavit or written statement, but the Committee may at any stage of the proceedings require the personal attendance of any deponent or author of a written statement.

(5) The Committee may receive evidence of any fact which appears to it to be relevant to the application.

(6) The Committee may, during the hearing and if it is satisfied that it is just and reasonable to do so, permit a party to rely on grounds not stated in his notice of application or, as the case may be, his reply and to adduce any evidence not presented to the Committee before or at the time the Committee took the disputed decision.

(7) The Committee may require any witness to give evidence on oath or affirmation and for that purpose it may administer an oath or affirmation in the prescribed form.

[L.N. 223/2013, r. 6.]

**10O. Quorum**

The quorum at meetings of the Committee shall be four members.

[L.N. 223/2013, r. 6.]

**10P. Power to determine application without hearing**

The Committee may determine the application or any issue arising therefrom without an oral hearing.

[L.N. 223/2013, r. 6.]

**10Q. Consolidation of proceedings**

The Committee may, in its discretion and upon giving the parties concerned an opportunity to be heard, order the consolidation of any proceedings before it where complaints have been filed in respect of the same matter or in respect of several interests in the same subject in dispute.

[L.N. 223/2013, r. 6.]

**10R. Amendment of pleadings**

The Committee may allow any amendments to the statements of complaint or response at any stage of the proceedings, provided that such amendment shall be for the interest of justice and is aimed at aiding the determination of the proceedings upon fair notice to the other party.

[L.N. 223/2013, r. 6.]

**10S. Extension of time**

The Committee may extend the time for doing anything under this Part on such terms as the Committee thinks fit.

[L.N. 223/2013, r. 6.]

**10T. Demonstration and display facilities**

The Committee may, at the request of any party and upon payment of the prescribed fees, provide visual demonstration facilities for the display of any maps, charts, diagrams, illustrations or texts and documents, which that party intends to exhibit during the hearing.

[L.N. 223/2013, r. 6.]

**10U. Opportunity to be heard or cross-examine**

The Committee shall grant to any party a reasonable opportunity—

- (a) to be heard, submit evidence and make representations; and
- (c) to cross-examine witnesses to the extent necessary to ensure fair hearing.

[L.N. 223/2013, r. 6.]

**10V. Adjournment of proceedings**

(1) The Committee may of its own motion, or upon the application of any party, adjourn the inquiry upon such terms as it thinks fit.

(2) Notice of an adjournment of the inquiry shall be given to the persons involved in the proceedings in writing by the Committee.

[L.N. 223/2013, r. 6.]

**10W. Judicial notice**

(1) The Committee may take judicial notice of—

- (a) facts that are publicly known and that may be judicially noticed by a court of law; and

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[Subsidiary]

- (b) generally recognized facts and any information, policy or rule that is within its specialized knowledge.

(2) Before the Committee takes notice of any fact, information, opinion, policy or unwritten rule other than that which may be judicially noticed by a court, it shall notify the parties of its intention and afford them a reasonable opportunity to make representations with respect thereto.

[L.N. 223/2013, r. 6.]

## **10X. Representation**

(1) Any party to the proceedings, may represent himself or be represented by an advocate of his choice.

(2) A party represented by an advocate may, at any stage of the proceedings change his advocate upon giving notice to the Committee and his former advocate.

(3) The party shall serve the notice of change of advocate on all other parties to the proceedings.

[L.N. 223/2013, r. 6.]

## **10Y. Decisions of the Committee**

(1) After the hearing the complaint, the Committee may determine or order—

- (a) that the complaint be dismissed;
- (b) that the member be reprimanded;
- (c) that the member be suspended from practice for a specified period not exceeding two years; or
- (d) make such order as the Committee consider fit.

(2) The decision of the Committee may be taken by a majority of the members present and the decision shall record whether it was unanimous or taken by a majority of the members present.

(3) For the purposes of making the decision on the inquiry every member of the Committee has one vote, and, in the event of an equality of votes, the chairperson shall have a casting vote.

(4) The decision of the Committee may be given orally at the end of the hearing or may be reserved and shall—

- (a) be reduced to writing whether there has been a hearing or not; and
- (b) shall be signed and dated by the chairperson.

(5) A dissenting opinion may be pronounced separately by the member who wrote it and shall be dated and signed by that member.

(6) Every document containing a decision referred to in this rule shall, as soon as may be reasonable, be entered in the register and the Committee shall send a copy of the entry to each party.

(7) Except where a decision is announced at the end of the hearing, it shall be treated as having been made on the date on which a copy of the document recording it is sent to the applicant.

(8) Every order or determination of the Committee shall be made under the hand of chairperson or in his or her absence by the person chairing the meeting at which the order or determination is made.

(9) Every order or determination of the Committee bearing the signature of the person chairing shall be *prima facie* evidence that the order or determination is that of the Committee.

[L.N. 223/2013, r. 6.]



**10Z. Reasons for decisions**

The Committee shall give reasons for reaching its decision, and each decision shall include—

- (a) a statement of the findings of fact made from the evidence adduced, including, where applicable, any relevant government policy; and
- (b) a statement of the laws and rules of law applied, and the interpretation thereof.

[L.N. 223/2013, r. 6.]

**PART III – PROCEEDINGS RELATING TO APPLICATIONS FOR RESTORATION****11. Application for restoration of name on register**

(1) An application for restoration of the name of a medical practitioner or dentist on the register or the restoration of a licence after removal or cancellation pursuant to sections 19 and 20 of the Act shall be in Form 2 set out in the Schedule.

(2) All applications for restoration of the name on the register shall be accompanied by a certificate of identity and good character in Form 3 set out in the Schedule and signed by a medical practitioner or dentist, as the case may be, of at least ten years' standing.

(3) The medical practitioner or dentist making an application under paragraph (1) shall give the names of three referees, two of whom shall be medical practitioners or dentists of consultant status or of at least ten years' experience and of good repute and standing and one of whom shall be a non-medical person of good repute and social status, to whom the Board can send a request for information about the character, habits and conduct of the applicant during the period of suspension.

(4) At the hearing of the application the following procedure shall be followed—

- (a) the register shall state to the Board the circumstances in which the applicant's name was removed or erased from the register or the licence cancelled and shall adduce evidence as to the conduct of the medical practitioner or dentist since that time;
- (b) the Chairman shall then invite the applicant to address the Board if he so wishes, and adduce evidence as to his conduct since his name was erased from the register or the licence was cancelled;
- (c) the Board may, if it thinks fit, receive oral or written observation on the applicant from any body or person whose complaint resulted in the applicant's name being erased from the register or licence being cancelled.

(5) At the close of the proceedings under this rule the Board shall record and the Chairman shall pronounce the finding or determination of the Board.

(6) Subject to the provision of this rule, the proceedings of the Board in connection with applications for restoration of the name of a medical practitioner or dentist on the register or restoration of a licence after cancellation, as the case may be, shall be such as the Board may determine.

**PART IV – GENERAL****12. Adjournment of proceedings**

The Board may at any stage during an inquiry under these Rules adjourn its proceedings as it thinks fit.

**13. Proceedings to be in camera**

The proceedings of the Board shall be held *in camera*.

**14. Summons at proceedings**

The Board may issue a summons, in Form 4 set out in the Schedule, to any person to attend as a witness or to produce any documents.

[Subsidiary]

**15. Notes taken at proceedings**

Any party to the proceedings shall, on application, be furnished with a certified copy of the proceedings or determination or finding of the Board on the payment of a fee of two hundred shillings for every page of the certified copy of the proceedings or determination or finding of the Board.

[L.N. 223/2013, r. 7.]

**16. Venue of meetings**

Meetings of the Board for purposes of an inquiry under these Rules, except in so far as the Chairman may otherwise direct, shall be held at the offices of the Board and may be held as regularly as circumstances require.

**17. Service of documents**

The service of a summons or documents shall be by post or by any means approved by the Board as being the most convenient in the circumstances.

**18. Evidence**

(1) For the purpose of these Rules, the Board may receive oral, documentary or other evidence of any fact or matter which appears to it to be relevant to the inquiry into any matter before it.

(2) The Board may, if satisfied that the interests of justice will not be prejudiced, admit in evidence without strict proof, copies of documents which are themselves admissible, maps, plans, recorded tapes, photographs, certificates of conviction and sentence, certificates of birth and marriage and death, the records including records of the Ministry of Health and other Government Ministries, records of private practitioners, private medical institutions and any other relevant sources, the notes and minutes of proceedings before the Board and before other tribunals and courts, and the Board may take note without strict proof thereof of the professional qualifications, the address and the identity of the medical practitioner or dentist.

(3) The Board may accept and act on admissions made by any party and may in such cases dispense with proof of the matters admitted.

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## SCHEDULE

## FORM 1

(r. 5(3))

## MEDICAL PRACTITIONERS AND DENTISTS ACT

(CAP. 253)

Dr/Mr/Mrs/Miss .....

Address .....

Dear Sir/Madam,

On behalf of the Medical Practitioners and Dentists Board, notice is hereby given to you that in consequence of a complaint made to the Board against you/information received by the Board an inquiry is to be held into the following charge/charges against you.

If the charge relates to a conviction—

That you were on the ..... day of ..... at .....  
(specify court recording the conviction) convinced of .....

.....

*(set out particulars of the conviction in sufficient detail to identify the case)*

If the charge relates to conduct—

That being registered under the Act you .....

*(set out briefly the facts alleged)* ..... and that in relation to the facts alleged

you have been guilty of infamous conduct in a professional respect.

Where there is more than one charge, the charges are to be stated consecutively (charges relating to conviction being set out before charges relating to conduct).

Notice is further given to you that on the ..... day of .....

20 ..... a meeting of the Board will be held at Afya House, Cathedral Road, Nairobi at

..... a.m./p.m. to consider the above charge/charges against you and to determine

whether or not the Board should direct the Registrar to remove your name from the register pursuant to section 20(1) of the Medical Practitioners and Dentists Act (Cap. 253).

You are hereby invited to answer in writing the above-mentioned charge/charges and also to appear in person before the Board at the place, date and time specified above for the purpose of answering the charge/charges. You may bring your advocate with you. The Board has power to hear and decide upon the charge/charges in your absence if you do not appear.

Any answer, admission or other statement or communication which you may desire to make with respect to the said charge/charges should be addressed to the Chairman of the Board.

If you desire to make any application that the inquiry should be postponed, you should send the application to the Secretary of the Board as soon as possible, stating the grounds on which you desire a postponement.

Date this ..... day ....., 20 .....

.....

Registrar of the Board

\_\_\_\_\_

[Subsidiary]

FORM 2

(r. 11)

## MEDICAL PRACTITIONERS AND DENTISTS ACT

(CAP. 253)

## APPLICATION FOR RESTORATION OF NAME IN THE REGISTER

(Note: This declaration must be made before a practitioner of not less than 10 years experience and if good standing.)

I, the undersigned .....  
 of (address) .....  
 .....  
 now holding the qualification(s) of .....

do solemnly and sincerely declare as follows—

1. I am the person formerly registered as a medical practitioner/dentist under the name of .....  
 and the qualification(s) of .....  
 .....  
 registration number ..... and, I hereby apply for the restoration of my name to the register.

2. In an inquiry held on the ..... day of ....., 20 ..... at .....  
 ..... (place) the Board directed my name to be erased from the register, and the offence for which the Board directed the erasure of my name was .....

3. Since the erasure of my name from the register, I have been residing at .....  
 .....  
 and ..... my ..... occupation ..... has  
 been .....

4. It is my intention if my name is registered to the register to engage in private practice  
 be ..... employed, ..... (other  
 specify) .....

5. The grounds of my application are .....  
 .....  
 .....

6. Names and addresses of my referees—  
 (a) .....  
 .....  
 (b) .....  
 .....  
 .....  
 (c) .....  
 .....  
 .....

Declared at ..... Signed .....  
 On ..... Date .....  
 Before me ..... (Full Name)  
 Signed .....  
 Name of practitioner in full and registration/date of qualification  
 Date .....

FORM 3

(r. 11(2))

## MEDICAL PRACTITIONERS AND DENTISTS ACT

(CAP. 253)

## CERTIFICATE OF IDENTITY AND GOOD CHARACTER

I, .....  
 of (address) .....  
 do certify as follows—  
 1. I have read the statutory declaration made on the .....  
 ..... day of ....., 20 ..... by  
 Dr./Mr./Mrs./Miss .....  
 of (address) .....

2. The said Dr./Mr./Mrs./Miss .....  
 .....  
 was formerly registered as a medical/dental practitioner with the following address and  
 qualification(s) .....  
 .....  
 Registration No. ....

3. I have been and am well acquainted with the said Dr./Mr./Mrs./  
 Miss .....  
 both before and since his name was erased from the register, and I believe him to be now  
 a person of good character, and the statements in the said declaration are, to the best of  
 my knowledge, information and belief, true.

Signed .....  
 Registered address .....  
 .....  
 .....  
 Registered Qualifications .....  
 .....  
 Date .....  
 Dated this ..... day of ..... 20 .....  
 Signature of Witness .....  
 Address ..... Date .....

[Subsidiary]

FORM 4

(r. 14)

## MEDICAL PRACTITIONERS AND DENTISTS ACT

(CAP. 253)

## WITNESS SUMMONS

To .....

.....

.....

In pursuance of section 20(3) of the above Act, you are hereby commanded to attend in person as a witness in an inquiry to be held before the Medical Practitioners and Dentists Board against Dr./Mr./Mrs./Miss .....

.....  
at the Ministry of Health Headquarters, Afya House, Cathedral Road, Nairobi  
on .....

..... and to remain in attendance until released by the Board.

Under the provisions of section 20(8) of the Act, any person who fails when summoned by the Board to attend as a witness or to produce any books, documents or other exhibits, shall be guilty of an offence and shall be liable to a fine of KSh. 2,000 or to imprisonment for one month.

Dated this ..... day of ....., 20 .....

.....

Registrar of the Board

Summons received on .....

by Signature of Witness .....

Served by .....

Date and time ..... Date and time .....

Place .....

\_\_\_\_\_

**MEDICAL PRACTITIONERS AND DENTISTS (PRIVATE PRACTICE) RULES, 1979****ARRANGEMENT OF RULES****PART I – PRELIMINARY***Rule*

1. Citation.
2. Interpretation.

**PART II – GENERAL PRACTICE**

3. Eligibility for licence to engage in private practice.
4. Application for a licence.
5. Conditions in licences.
6. Notice of refusal to grant a licence, etc.
7. Locums.

**PART III – PRIVATE CLINICS**

8. Interpretation.
9. Board to approve premises.
10. Conditions for issue of a licence under this Part.
11. Restriction on number of private clinics.
12. Licensee to indicate name, etc.
13. Licensee's assistants.
14. Keeping of essential drugs.
15. Notification of disease, etc.
16. Manner of dressing.
17. Clinical radiological laboratories.

**PART IV**

18. Repealed.
19. Repealed.
20. Repealed.

**PART V – COMMITTEES**

21. Establishment of private practice committee.
22. Establishment of specialist committee.

**PART VI – SPECIALIST PRACTICE**

23. Specialities in medical practice.
24. Specialities in dentistry.
25. Board to recognize specialists.
26. Application of Part II.

**PART VII – PRIVATE CLINICAL LABORATORY MEDICINE**

27. Licence to practice clinical laboratory medicine.
28. Saving.
29. Requirements for clinical laboratories.

[Subsidiary]

*Rule*

30. Investigations carried out in clinical laboratory medicine.
31. Duties of a practitioner operating a clinical laboratory.
32. Fees.
33. Offences.

## PART VIII – PRIVATE CLINICAL RADIOLOGICAL LABORATORY MEDICINE

34. Licence to practice clinical radiological medicine.
35. Savings.
36. Requirements for a clinical radiological laboratory.
37. Undertaking of operations in a clinical radiological laboratory.
38. Duties of the owner of a clinical radiological laboratory.
39. Screening facilities.
40. Fees.

## PART IX – MISCELLANEOUS

41. Board to prescribe fees.
42. Penalties.
43. Legal proceedings, etc.
44. Mode of serving notices.
45. Postgraduate qualifications.

## SCHEDULES

## FIRST SCHEDULE

## SECOND SCHEDULE —

PART A – MINIMUM REQUIREMENTS FOR A  
GENERAL PRACTITIONER

## PART B – MINIMUM REQUIREMENTS FOR A DENTAL SURGERY

## THIRD SCHEDULE —

RETURN OF NOTIFIABLE INFECTIOUS  
DISEASES

## FOURTH SCHEDULE

—

## MINIMUM STANDARDS FOR A CLINICAL LABORATORY

## FIFTH SCHEDULE

## SIXTH SCHEDULE —

LIST OF APPROVED SPECIALIST  
POSTGRADUATE QUALIFICATIONS



**MEDICAL PRACTITIONERS AND  
DENTISTS (PRIVATE PRACTICE) RULES**

[L.N. 182/1979, L.N. 288/1979, L.N. 289/1979, L.N. 25/2000, L.N. 141/2012.]

**PART I – PRELIMINARY****1. Citation**

These Rules may be cited as the Medical Practitioners and Dentists (Private Practice) Rules.

**2. Interpretation**

In these Rules, unless the context otherwise requires—

**“advertise”** means to issue or cause to be issued a sign, notice, circular, label or wrapper or to make any announcement orally or by means of producing or transmitting light or sound;

**“approved clinical laboratory”** means a private clinical laboratory which is covered on a full-time basis by a pathologist and is so equipped as to enable the carrying out therein of investigations in clinical chemistry, haematology and microbiology;

**“approved medical institution”** means a Government or private hospital or nursing home which has been declared by the Board to be an approved institution;

**“approved radiological laboratory”** means a private radiological laboratory which is covered on a full-time basis by a radiologist and is so equipped as to enable the carrying out therein of investigations in general radiology in addition to special radiological investigations;

**“clinic”** means consulting rooms, offices or an outpatient department without beds used by a practitioner for the diagnosis and treatment of disease or the giving of medical or dental advice and instructions;

**“clinical laboratory”** means premises for examining specimens for the purpose of providing information on diagnosis, treatment or prevention of disease;

**“clinical radiological laboratory”** means premises in which ionising radiations are used for nuclear medicine, diagnostic research or therapeutic purposes;

**“general practice”** means the practice of general medicine or dentistry other than specialist practice as defined in these Rules;

**“hospital”** means an institution which has, in addition to resident medical practitioners or dentists, an operating theatre and a mortuary;

**“immediate supervision”** means being available to give help and guidance when required;

**“ionising radiations”** means gamma rays, x-rays, alpha and beta particles, high speed electrons, neutrons, protons and other nuclear particles or electromagnetic radiation capable of producing ions directly or indirectly in their passage through matter;

**“laboratory medicine”** means the practice of all or any of the following disciplines, namely pathology, clinical chemistry, microbiology and parasitology, haematology, morbid anatomy and histology, cytology, immunopathology, forensic pathology and other disciplines relevant thereto;

**“licence”** means a licence to engage in full-time or part-time private practice;

**“locum”** means a registered medical practitioner or dentist substituting and providing services for another registered medical practitioner or dentist;

**“maternity home”** means any premises used for the reception of expectant women or of women who have given birth within the preceding six weeks;

[Subsidiary]

**“medical laboratory technician”** means a holder of a certificate in medical laboratory technology issued by the Medical Training Centre or similar institution which is recognized by the Ministry of Health;

**“medical laboratory technologist”** means a holder of a certificate or a diploma in medical laboratory technology issued by the University of Nairobi or similar institution which is recognized by the Ministry of Health;

**“nursing home”** means any premises howsoever named or described which are used for the reception of, and for provision of medical care and nursing for, persons suffering from any sickness, injury or infirmity, and having a mortuary and an outpatient department, but does not include premises maintained or directly controlled by the Government or a local authority;

**“pathologist”** means a specialist in one or all of the disciplines in clinical laboratory medicine;

**“private clinic”** means a clinic where a private practice is carried out;

**“private practice”** means giving medical, surgical or dental advice, attendance or performing an operation, or engaging in radiological or clinical laboratory medicine, for a fee;

**“radiographer”** means a holder of a diploma in radiography obtained from the Medical Training Centre or such similar institution which is recognized by the Ministry of Health;

**“radiographic film processor”** means a holder of a certificate, attesting to his proficiency in radiographic film processing, obtained at the Medical Training Centre or such similar institution which is recognized by the Ministry of Health;

**“radiologist”** means a specialist in the use of ionising radiation;

**“single discipline pathologist”** means a medically qualified person whose training has not covered all the disciplines of clinical laboratory medicine, but who is a specialist in any of the disciplines in pathology;

**“specialist”** means a medical practitioner or dentist who has completed an approved training programme in a particular discipline in medicine or dentistry, and who has acquired a recognized post-graduate qualification or its equivalent, and who thereafter has gained sufficient experience and shown to the Board’s satisfaction adequate clinical, radiological or laboratory skill, in his chosen discipline;

**“specialist practice”** means the practice of medicine or dentistry in a specialized discipline as specified in these Rules.

## PART II – GENERAL PRACTICE

### 3. Eligibility for licence to engage in private practice

(1) A medical practitioner or dentist shall be eligible for a licence to engage in private practice under section 15 of the Act on his own behalf either full or part-time or in the employment, either full or part-time, of a private practitioner or group of private practitioners, if he has worked continuously in Kenya on a full-time basis in a salaried post in a Government or private hospital or in any non-profit-making approved medical institution for a period of not less than three years.

(2) Notwithstanding anything contained in paragraph (1), the Board may, if it is satisfied that it is in the public interest to do so, allow a medical practitioner or dentist who is not otherwise eligible for a licence to engage in private practice under paragraph (1) to be issued with a licence entitling him to engage in private practice as a salaried employee of a private practitioner or group of private practitioners.

[L.N. 288/1979.]

**4. Application for a licence**

(1) An application for a licence to engage in private practice shall be in the Form VI set out in the Medical Practitioners and Dentists (Form and Fees) Rules, and shall be accompanied by the prescribed fee.

(2) An application for renewal of a licence shall be made under this Part and shall be made not less than six weeks before the date of expiry of the licence.

(3) An application for permission to change the premises to which the licence relates may be made at any time.

(4) The Board may, on application—

- (a) for renewal of a licence; or
- (b) for change of premises,

request such further relevant information from an applicant as it thinks fit.

(5) A person who includes, or causes to be included, in an application, or in response to a request for information from the Board, information which he knows or has cause to believe is incorrect shall be guilty of an offence.

**5. Conditions in licences**

(1) The Board may impose any conditions on a licensee under this Part and in particular may impose a condition that the private practice of the licensee shall not conflict with the terms and conditions of his employment.

(2) A licence shall be issued in respect only of the premises named therein and may not apply to any other premises unless the authority of the Board for it to do so has previously been obtained.

(3) A licensee shall display a licence in a conspicuous position at the premises to which it relates and a licensee who fails to do so shall be guilty of an offence.

(4) The Board may cancel a licence if any of the conditions imposed under it are contravened.

(5) Where a licensee ceases his private practice he shall surrender his licence to the Board within thirty days of so doing.

**6. Notice of refusal to grant a licence, etc**

(1) The Board shall, before—

- (a) refusing to grant or renew a licence; or
- (b) refusing to allow a change of premises to which the licence relates; or
- (c) cancelling the licence,

give to the applicant or licensee not less than twenty-eight days' notice in writing stating its intention so to act; and such notice shall inform the applicant or licensee that he may within twenty-one days of receipt of the notice inform the Board in writing whether he wishes to be heard on the question of the proposed refusal or cancellation.

(2) Where the applicant or licensee informs the Board in writing under paragraph (1) that he wishes to be heard the Board shall not effect a refusal or cancellation before it has given him an opportunity to show cause why the application or licence should not be refused or cancelled.

(3) Where the Board, after complying with this rule, refuses to grant or renew a licence, or cancels a licence, it shall inform the applicant or licensee of its decision within fourteen days of the expiry of the period of twenty-eight days referred to in paragraph (1) or, where the applicant or licensee has been heard, within fourteen days of the hearing; and the Board shall inform the applicant or licensee of the reason for its decision.

(4) An appeal to the High Court under section 15(6) of the Act against the decision of the Board under this rule shall be made within thirty days of the receipt of the decision.

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[Subsidiary]**7. Locums**

(1) A medical practitioner or dentist who wishes to work as a locum for another practitioner shall be required to satisfy requirements for eligibility for a licence to engage in private practice specified in rule 3.

(2) A prospective locum shall make an application in Form VI set out in the Medical Practitioners and Dentists (Forms and Fees) Rules stating the period during which he requires to work as a locum:

Provided that in the case of an emergency a medical practitioner or dentist may act as a locum for a period not exceeding fourteen days during which time he shall inform the Board of his action and make a formal application under this paragraph.

(3) Where the duration of a locum practice is not to exceed six weeks the Registrar or Chairman may give his written consent to the applicant to practise as a locum in the form specified in the First Schedule and no fee shall be payable by the applicant.

(4) Where an applicant wishes to work as a locum for a period exceeding six weeks he shall obtain a licence to engage in private practice in Form VII set out in the Medical Practitioners and Dentists (Forms and Fees) Rules and pay the prescribed fees.

(5) A practitioner may not work as a locum for more than two periods each one of which is not less than fourteen days and does not exceed three months in duration in any one year without special permission from the Board so to do.

**PART III – PRIVATE CLINICS****8. Interpretation**

In this Part, “**licensee**” means a medical practitioner or dentist licensed to operate a private clinic under rule 9.

**9. Board to approve premises**

(1) No private practitioner shall operate a private clinic unless the premises where the clinic is situated have been approved by the Board.

(2) A private practitioner who wishes to operate a private clinic shall apply to the Board in writing for permission to use the premises intended for use as a private clinic before applying for a licence to engage in private practice; and the Board shall grant or refuse to grant a licence under this paragraph within thirty days of receiving the application.

(3) A licence to operate a private clinic shall be in Form VII set out in the Medical Practitioners and Dentists (Forms and Fees) Rules, and shall be issued on payment of the prescribed fee.

**10. Conditions for issue of a licence under this Part**

(1) A licence under rule 9 shall be issued subject to such conditions as the Board thinks fit including in any case the conditions that the licensed premises shall—

- (a) be kept in good order and a good state of repair;
- (b) be kept reasonably secure from unauthorized entry;
- (c) conform to the minimum requirements set out in Part A or Part B of the Second Schedule, as the case may be, and any other written law, and in particular the Public Health Act (Cap. 242); and
- (d) not be a residential building except with special permission from the Board.

(2) A private clinic licensed under these Rules shall be open for inspection at any reasonable time by an authorized officer of the Board and any person who wilfully obstructs such an officer acting in the course of his duty shall be guilty of an offence and liable to a fine not exceeding one thousand shillings.

**11. Restriction on number of private clinics**

(1) A private practitioner shall not be licensed to operate more than one private clinic, but the Board may permit a private practitioner to operate two clinics where both are situated in a rural area.

(2) If more than one private clinic is permitted under paragraph (1), a separate licence shall be issued and a separate fee be paid in respect of each clinic.

**12. Licensee to indicate name, etc**

(1) A licensee shall indicate his name and qualifications outside his clinic in an unostentatious manner and in accordance with the “Code of Professional Conduct and Discipline” and the name and qualifications so indicated shall conform to the provisions of paragraph 4 of Part A of the Second Schedule.

(2) A licensee who—

- (a) uses any words implying that a private clinic is a hospital or a nursing home;
- (b) advertises a private clinic in any manner whatsoever to the general public,

shall be guilty of an offence.

**13. Licensee’s assistants**

(1) A licensee may employ as an assistant any person who has undergone a recognized training in medicines, dentistry, nursing or midwifery in an approved training institution, and who is not registered as a medical practitioner or dentist, to undertake defined duties under the immediate supervision of the licensee or a registered practitioner employed by him.

(2) Where any assistant employed under paragraph (1) undertakes or offers to undertake any form of medical or dental treatment independently without the immediate supervision of a medical practitioner or dentist he shall be guilty of an offence.

(3) Paragraph (2) shall be in addition to and not in derogation of the provisions of section 22 of the Act.

**14. Keeping of essential drugs**

(1) A licensee shall keep in his private clinic adequate stocks of essential drugs listed in paragraph 3 of the Second Schedule.

(2) A licensee shall keep an accurate record of all drugs to which the Pharmacy and Poisons Act (Cap. 244) and the Dangerous Drugs Act (Cap. 245) apply.

**15. Notification of disease, etc**

(1) A licensee shall immediately notify the medical officer of health of any of the notifiable diseases set out in the Third Schedule which he treats in his clinic.

(2) A licensee shall immediately notify the police in the event of any death occurring in his clinic and supply to them all relevant information concerning the death.

**16. Manner of dressing**

A licensee shall, whilst on duty, at all times be dressed and groomed in such a manner as to portray a respectable image to the public and in particular he shall observe the standards of ethics laid down in the “Code of Professional Conduct and Discipline”.

**17. Clinical radiological laboratories**

(1) A private clinic may not include a clinical radiological laboratory unless the practitioner who operates the clinic—

- (a) is himself qualified in the use of ionising radiation; or
- (b) employs a radiographer,

and in either case the person referred to in paragraph (a) or (b) personally undertakes the radiological examination of patients.

(2) A private clinic may not include a clinical laboratory unless—

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[Subsidiary]

- (a) examination of the specimens obtained from patients in that laboratory is undertaken by the private practitioner personally or a qualified medical laboratory technician or technologist;
- (b) examinations are limited in the way prescribed in paragraph (3).

(3) A clinical laboratory may only be used for the purposes of undertaking investigations of the following nature—

- (a) haemoglobin;
- (b) blood slides;
- (c) urinalysis;
- (d) stool microscopy;
- (e) occult blood tests;
- (f) gram stains;
- (g) special smears.

(4) Neither a clinical radiological laboratory nor a clinical laboratory may be used as a referral laboratory for a practitioner who does not operate, or is not employed by the clinic concerned; and any person who in such laboratory—

- (a) undertakes the examination of patients or specimens from patients; or
- (b) treats patients,

who have been referred from outside the practice concerned shall be guilty of an offence.

#### PART IV – NURSING HOMES AND HOSPITALS

18. *Repealed by L.N. 25/2000, s. 14.*

19. *Repealed by L.N. 25/2000, s. 14.*

20. *Repealed by L.N. 25/2000, s. 14.*

#### PART V – COMMITTEES

##### **21. Establishment of private practice committee**

(1) There shall be a committee to be known as the private practice committee which shall be composed, subject to paragraph (2), of not more than five members appointed by the Board from among its members.

(2) The committee shall elect its own chairman and shall have power to co-opt not more than two members from outside the Board whenever necessary.

(3) The committee shall be responsible for reviewing, whenever it is in its opinion necessary, applications for licences to engage in private practice, fees charged in private practice and such other matters as shall be assigned to it by the chairman of the Board.

(4) The committee shall report its findings to the Board.

##### **22. Establishment of specialist committee**

(1) There shall be a committee to be known as the specialist committee which shall be composed, subject to paragraph (2), of not more than five members appointed by the Board from among its members.

(2) The committee shall elect its own chairman and shall have powers to co-opt not more than one medical practitioner or dentist from any speciality from outside the Board whenever necessary.

(3) The committee shall be responsible for reviewing the postgraduate qualifications for inclusion in the list of approved specialist qualifications and shall also scrutinize applications for specialist practice and such other matters as shall be assigned to it by the chairman of the Board.

(4) The committee shall report its findings to the Board.

## PART VI – SPECIALIST PRACTICE

**23. Specialities in medical practice**

(1) The specialties in medical practice are set out in Part I of the Fourth Schedule to these Rules.

(2) The sub-specialists in clinical medicine are set out in Part II of the Fourth Schedule to these Rules.

[L.N. 141/2012, s. 2.]

**24. Specialities in dentistry**

The specialties in dentistry are as set out in the Fifth Schedule to these Rules.

[L.N. 141/2012, s. 3.]

**25. Board to recognize specialists**

(1) The Board may recognize a medical practitioner or dentist as a specialist in any one or more of the disciplines referred to in rules 23 and 24 and shall publish a list of the specialists so recognized annually in the *Gazette*.

(2) A medical practitioner or dentist may be recognized as a specialist under paragraph (1) if—

- (a) he is a holder of a postgraduate qualification which is equivalent to the Master of Medicine degree of the University of Nairobi and has had not less than five years training and experience after registration under the supervision of a recognized specialist in his discipline in a recognized institution:

Provided that if a postgraduate qualification is awarded after the normal period of training for the Master of Medicine degree of the University of Nairobi, no practitioner shall be recognized as specialist until he has had at least two years experience after obtaining the postgraduate qualification; or

- (b) he possesses a diploma recognized by the Board, obtained before the 1st January, 1978, not being equivalent to the Master of Medicine degree of the University of Nairobi and has worked in a recognized institution for at least seven years during which period he has gained adequate experience and clinical skill under the supervision of a specialist in that field and has published papers in reputable medical journals.

(3) Unless the Board otherwise directs, before a medical practitioner or dentist can be recognized as a specialist in a subspeciality he must be in possession of a basic specialist qualification in the discipline, and must have at least two years experience under supervision in the subspeciality.

(4) For the purposes of issuing licences for private practice in any speciality, a medical practitioner or dentist who—

- (a) satisfies the requirements provided for in paragraph (2) shall be recognized as a specialist and may be licensed for specialist private practice in his chosen discipline;
- (b) does not fulfil the requirements of paragraph (2) shall be issued with a licence for general practice if he applies for a licence for specialist private practice.

(5) Notwithstanding the requirements of paragraph (2) the Board may, in the public interest, authorize the Director of Medical services to issue a letter of authority in the form set out in the Ninth Schedule to a person holding a postgraduate diploma, but not fulfilling the necessary requirements, to engage in specialist practice in an approved medical institution in the discipline or subspeciality which is specified in the diploma for such period as the Board determines.

[L.N. 289/1979, L.N. 141/2012, s. 5.]

[Subsidiary]

**26. Application of Part II**

Part II shall apply to medical practitioners or dentists engaged in specialist practice.

**PART VII – PRIVATE CLINICAL LABORATORY MEDICINE****27. Licence to practice clinical laboratory medicine**

(1) The Board may grant a licence in the Form VII set out in the Medical Practitioners and Dentists (Forms and Fees) Rules to a medical practitioner to practise private clinical laboratory medicine if the practitioner is both eligible under rule 3 and a pathologist.

(2) The Board shall publish annually in the *Gazette* a list of licensed private clinical laboratories.

**28. Saving**

(1) Subject to paragraphs (2) and (3), a registered medical practitioner who was operating a private clinical laboratory before the commencement of these Rules may, notwithstanding rule 29(1)(b), continue to operate.

(2) A practitioner referred to in paragraph (1) shall make application in the Form VI set out in the Medical Practitioners and Dentists (Forms and Fees) Rules within three months of commencement for a licence under rule 27.

(3) Where the Board refuses a licence applied for under this rule the practitioner concerned shall cease from the date of refusal to operate the private clinical laboratory concerned.

**29. Requirements for clinical laboratories**

(1) A clinical laboratory shall—

- (a) conform to the standards stipulated in the Sixth Schedule;
- (b) be approved by the Board before starting to function as such;
- (c) be at all times supervised by a pathologist.

(2) The Board may inspect any premises used as a clinical laboratory at any reasonable time.

(3) Any person who hinders or obstructs an officer of the Board acting in the course of his duty under paragraph (2) shall be guilty of an offence.

[L.N. 141/2012, s. 5.]

**30. Investigations carried out in clinical laboratory medicine**

A general or single discipline pathologist, a general practitioner and a medical laboratory technician may respectively undertake such investigations in clinical laboratory medicine as are set out in rule 17(3) and the Fourth Schedule.

**31. Duties of a practitioner operating a clinical laboratory**

A medical practitioner operating a clinical laboratory—

- (a) shall provide diagnostic aid services for the community by meeting the needs of hospitals, medical and dental practitioners and other health services and in so doing he may monitor individual patients, when requested to do so, by providing appropriate laboratory control of therapy;
- (b) shall provide consultant advisory services in all aspects of laboratory investigations, including the interpretation of results and shall advise on any further appropriate investigations;
- (c) shall collaborate in systematic education and training for all members of laboratory staff;
- (d) may collaborate in the development, study and laboratory control of new methods of treatment, whilst adhering to the laid down medical ethics;



- (e) may provide laboratory facilities for and advice on approved research projects undertaken by clinicians;
- (f) may undertake basic or applied research on pathology problems.

**32. Fees**

A private practitioner in laboratory medicine may charge fees in accordance with the Board's prescribed fees in private laboratory medicine.

**33. Offences**

A person who contravenes any of the provisions of this Part shall be guilty of an offence.

**PART VIII – PRIVATE CLINICAL RADIOLOGICAL LABORATORY MEDICINE****34. Licence to practice clinical radiological medicine**

(1) The Board may grant a licence in Form VII set out in the Medical Practitioners and Dentists (Forms and Fees) Rules to a medical practitioner to engage in private practice in clinical radiological medicine if the practitioner is both eligible under rule 3 and a radiologist.

(2) The Board shall publish annually in the *Gazette* a list of licensed private clinical radiological laboratories.

**35. Savings**

(1) Subject to paragraphs (2) and (3), a registered medical practitioner who was operating a private clinical radiological laboratory, other than a laboratory providing only screening facilities, before the commencement of these Rules may, notwithstanding rule 34, continue to operate.

(2) A practitioner referred to in paragraph (1) shall make an application in Form VI set out in the Medical Practitioners and Dentists (Forms and Fees) Rules within three months of commencement for a licence under rule 34.

(3) Where the Board refuses a licence applied for under this rule the practitioner concerned shall cease from the date of refusal to operate the private clinical radiological laboratory concerned.

**36. Requirements for a clinical radiological laboratory**

(1) A clinical radiological laboratory shall—

- (a) conform to the standards stipulated in the Eighth Schedule;
- (b) be approved by the Board before starting function as such;
- (c) be at all times supervised by a radiologist;
- (d) keep an accurate record of all clinical radiological examinations undertaken by it.

{L.N. 141/2012, s. 7.}

**37. Undertaking of operations in a clinical radiological laboratory**

(1) A radiologist, general practitioner, radiographer or radiographic film processor may undertake such operations in a clinical radiological laboratory as may from time to time be specified by the Board in guidelines to be issued by it.

(2) A practitioner operating a clinical radiological laboratory shall carry out radiological examinations only at the request of a registered medical or dental practitioner or a practitioner who is licenced under section 15 of the Act.

**38. Duties of the owner of a clinical radiological laboratory**

(1) The owner and the management of a clinical radiological laboratory shall ensure that all staff and the public are protected from the hazards of radiation and that the staff comply with the provisions of the Fifth Schedule.

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[Subsidiary]

(2) All staff employed in radiation work shall undergo periodical medical examination at least once in every two years and a certificate shall be issued in respect thereof.

### **39. Screening facilities**

(1) No clinical radiological laboratory which provides only screening facilities shall be licensed under these Rules.

(2) A person who publicly offers or advertises screening facilities shall be guilty of an offence and liable to a fine not exceeding five thousand shillings or to imprisonment for a term not exceeding three months, or to both.

### **40. Fees**

A private practitioner in radiological work may charge fees in accordance with the Board's prescribed fees therefor.

## **PART IX – MISCELLANEOUS**

### **41. Board to prescribe fees**

(1) The Board shall prescribe the fees to be charged for visits, referrals and consultations in general practice and specialist practice.

(2) A receipt shall be issued for any fee charged for any medical or dental services rendered, including laboratory and radiological services.

(3) The Board shall have powers to arbitrate in all complaints regarding fees in private practice.

### **42. Penalties**

Where a person is guilty of an offence under these Rules for which no penalty is expressly provided he shall be liable to a fine not exceeding two thousand shillings.

### **43. Legal proceedings, etc**

Whether or not proceedings are brought against any person for an offence under these Rules the Board may, where it is satisfied that there has been a contravention of any of these Rules or of the conditions of any licence granted thereunder, and notwithstanding that such contravention is not an offence, cancel or refuse to renew any licence granted thereunder, and in such case rule 6 shall apply.

### **44. Mode of serving notices**

Wherever under these Rules, notice is to be served on an applicant or information is to be supplied to him, the notice or letter containing the information shall be sent to him either by registered post or by hand delivery, whichever is convenient.

### **45. Postgraduate qualifications**

For purposes of these Rules specialist qualifications recognized by the Board shall be as specified in the Seventh Schedule.

[L.N. 141/2012, s. 8.]

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FIRST SCHEDULE

[Rule 7(3).]

Medical Practitioners and Dentists Board,  
P.O. Box 30016,  
NAIROBI.

Dr. .... (Reg. No. .... )

P.O. Box .....

.....

.....

Dear Sir,

RE: APPLICATION FOR LOCUM

I acknowledge your letter dated .....

Ref. No. .... applying for a locum.

Permission is hereby granted for Dr. .... Reg. No. ....

to work as a locum in your place of practice during your absence from .....

to .....

Yours faithfully,

.....

*Registrar/Chairman*

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## SECOND SCHEDULE

[Rules 10(1)(c), 12(1) and 14.]

## PART A – MINIMUM REQUIREMENTS FOR A GENERAL PRACTITIONER

**1. PREMISES—**

(1) premises should contain the following accommodation—

- (a) waiting room;
- (b) a consulting room which should be reasonably sound-proofed so that conversations taking place therein are not easily audible outside the consulting room;
- (c) an examination room which should be either a separate room or a curtained-off part of a consulting room;
- (d) a treatment room in which such procedures as the giving of medications and the carrying out of minor surgical operations can be done;
- (e) adequate toilet facilities.

(2) These rooms should be adequately furnished and clean and—

- (a) there shall be sufficient sitting accommodation in the waiting room for the size of the practice;
- (b) the consulting room shall have a desk for the doctor, a chair for the doctor and two or three chairs for the patient and persons accompanying the patient; and a consulting room should also have a facility for the practitioner to wash his hands, for example, where there is no running water there shall be a washing basin with a jug of water which is periodically topped up;
- (c) there shall be an examination couch in the consulting/examination room and another couch in the treatment room and the couches shall be designed so that it is easy for an infirm patient to get on to them, and there shall be adequate lighting, either daylight or artificial light, to enable the practitioner to see his patient fully.

**2. EQUIPMENT—**

The practitioner shall have the following equipment available at his place of work—

- (a) diagnostic instruments such as stethoscope, syphygmomanometer, foetal stethoscope, torch, patella hammer, auroscope, ophthalmoscope, proctoscope, vaginal speculum, disposable tongue depressors;
- (b) instruments for carrying out certain procedures, for example, opening abscesses and stitching wounds;
- (c) sterilizers for surgical instruments and containers, etc.;
- (d) a facility to examine urine on the premises, for example, by the use of “labstix” or equivalent reagents;
- (e) a cabinet for patients’ records.

**3. STOCKING OF DRUGS—**

(1) The practitioner should attempt to keep in his premises a stock of those essential drugs which he considers should be administered to his patients in his premises and especially if his practice is not in a location where there may be a dispensing pharmacy. The range of drugs that he should have is wide, but he ought to have at least the following—

Injectations of analgesics (for example, pethidine, morphine, etc.); antibiotics, antihistamines, bronchodilators, antiemetics, antispasmodics, local anaesthetics and corticosteroids. For the purpose of administering injections, he should have disposable syringes and needles and surgical spirit.

(2) Further the doctor should provide himself with a bag which he can carry with him when visiting patients, when travelling or to be available for him to use whenever his services may be needed. This bag should contain as a minimum the following—

Such drugs as injections of analgesics, antibiotics, bronchodilators, tranquilisers, local anaesthetics, antispasmodics, antiemetics, oral preparations such as antipyretics, analgesics, gastrointestinal sedatives, antidiarrhoeals, antihistamines, bronchodilators, antibiotics, muscle relaxants, etc.

(3) For the purpose of the doctor's bag, it should be the practice to carry disposable syringes and needles rather than steel and glass syringes which require sterilization. The bag will be adequately furnished if it carries a supply of 2 ml disposable syringes and 25 g (1 in) and 21 g (1½ in) disposable needles. It is also convenient to carry strips of spirit swabs rather than carrying a supply of surgical spirit and pieces of cotton wool. Practitioners shall take steps to destroy all disposable equipment to avoid their possible use.

#### 4. Approved description of name—

Dr./Mr. MBBS, BDS

Medical Practitioner/Dentist/Clinical Laboratory/Clinical Radiological Laboratory

Dr./Mr. MBBS, DCH, MRCP, FRCS, M.MED., FRCR, etc.

Specialist Physician, Paediatrician, Dermatologist, Anaesthetist, Radiologist, Psychiatrist, Pathologist, Obstetrician and Gynaecologist, Surgeon (Orthopaedic, Urologist, Neurosurgeon, Thoracic, Plastic, Ophthalmology), etc.

#### PART B – MINIMUM REQUIREMENTS FOR A DENTAL SURGERY

1. WAITING ROOM: With basic furniture, telephone, etc.

#### 2. LABORATORY/WORKSHOP—

##### (a) Basic Laboratory Requirement

Investing flasks;  
Press and clamp;  
Polishing motor;  
Laboratory motor and hand piece;  
Bunsen burner;  
Pliers, wax knife, etc.;  
Denture materials;  
Plaster for models;  
Model trimmer;  
Polishing brushes, cone felt, etc.

##### (b) Basic Requirements in filling Materials

1. Amalgams;
2. Dental cements—
  - (i) Zinc oxide Engenel;
  - (ii) Zinc and copper phosphates;
  - (iii) Calcium hydroxides;
  - (iv) Silicate and silicophosphate cements;
  - (v) Filling resins.

3. TOILET—with wash basin and water borne sanitation.

4. SURGERY—composed of the following basic essentials—

- (i) dental unit with low and high speed drills which are water cooled;
- (ii) wash-basin with running water;

[Subsidiary]

- (iii) steriliser unit;
- (iv) cabinet with basic dental instruments;
- (v) basic drugs and medicaments used in dentistry including antimicrobials, corticosteroids, analgesics, haemostatic and anaesthetic drugs, in addition to antiseptics disinfectants;
- (vi) lockable cabinet, containing essential emergency drugs;
- (vii) emergency oxygen cylinder;
- (viii) cabinet for patients' records and card system.

**5. INTRA-ORAL RADIOLOGICAL UNIT.**

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**THIRD SCHEDULE**

[Rule 15.]

**RETURN OF NOTIFIABLE INFECTIOUS DISEASES**

The following diseases are notified on Med. 25 Forms. These forms are obtainable from Central Medical Stores or any Government medical institution—

Acute poliomyelitis  
 Anthrax  
 Cerebro-spinal fever (meningococcal meningitis)  
 Cholera  
 Diphtheria  
 Infective hepatitis  
 Malaria S.T. (in high altitude areas)  
 Plague (human)  
 Plague (rodent)  
 Rabies  
 Severe diarrhoeal diseases  
 Sexually transmitted diseases  
 Smallpox (Variola major)  
 Smallpox (Variola minor)  
 Trypanosomiasis  
 Tuberculosis (all forms)  
 Yellow fever

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## FOURTH SCHEDULE

[Rule 23.]

## PART I — SPECIALITIES IN MEDICAL PRACTICE

Anaesthesia  
 Internal Medicine  
 Obstetrics and Gynaecology  
 Paediatrics  
 Pathology  
 Psychiatry  
 Radiology  
 General Surgery  
 Cardiothoracic Surgery  
 Neurosurgery  
 Ophthalmology  
 Orthopaedic Surgery  
 Plastic Surgery  
 Family Medicine  
 Dermatology  
 Geriatrics  
 Occupational medicine  
 Microbiology  
 Palliative Medicine  
 Public Health  
 Ear, Nose and Throat (Otorhinolaryngology)

## PART II — MEDICAL SUB-SPECIALITIES IN MEDICAL PRACTICE

	Speciality	Sub-speciality
a.	Medicine	Cardiology Neurology Nephrology Gastroenterology Rheumatology Venereology Communicable disease Tropical medicine Haematology Endocrinology Immunology Chest and Respiratory Medicine
b.	Paediatrics	Cardiology Neurology Nephrology Gastroenterology Rheumatology

*Medical Practitioners and Dentists Act*

[Subsidiary]

		Haematology Neonatology Endocrinology Tropical medicine Immunology Psychiatry
c.	Surgery	Neurosurgery Cardiothoracic surgery Paediatric surgery Urology Plastic Surgery Vascular Surgery
d.	Pathology	Forensic Medicine Immunology Haematology Microbiology Clinical pathology/Clinical Chemistry
e.	Anaesthesia	Critical Care

## FIFTH SCHEDULE

[Rule 24.]

## DENTISTRY SPECIALITIES

Orthodontics  
 Prosthodontics  
 Periodontology  
 Oral -and Maxillofacial Surgery  
 Restorative Dentistry  
 Paediatric Dentistry  
 Dental Radiology  
 Oral Medicine  
 Oral Pathology  
 Science of Dental Materials  
 Implantology  
 Endodontics  
 General Dental Practice  
 Public Health

## SIXTH SCHEDULE

[Rules 27 and 29.]

## MINIMUM STANDARDS FOR A CLINICAL LABORATORY

## 1. CATEGORIES AND RESPONSIBILITIES OF PATHOLOGISTS

(a) *General Pathologist*—

- (i) This is a specialist whose basic training has covered all the disciplines of clinical laboratory medicine and who ultimately has attained a recognisable higher qualification in any one or all other disciplines.



- (ii) General pathologists shall run laboratories that carry out the following investigations—

1. Morbid anatomy, histopathology and cytology;
2. Haematology and blood transfusion;
3. Clinical chemistry;
4. Medical microbiology and parasitology;
5. Immunopathology;
6. Forensic pathology;
7. Other allied laboratory investigations.

(b) *Single Discipline Pathologist*—

This is a medically qualified person whose training shall not have covered all the disciplines of clinical laboratory medicine but who shall be a holder of a postgraduate qualification in only one discipline. He shall practise only in his particular discipline of specialization.

(c) *Categories of Pathology Laboratories*—

For purposes of the practice of clinical laboratory medicine, the following categories of laboratories shall be recognized—

- (i) Government hospitals and local authority laboratories;
- (ii) Non-profit making missionary hospital laboratories;
- (iii) Non-government or private hospital laboratories which charge economical fees;
- (iv) Private clinical laboratories not attached to hospitals;
- (v) Nursing home laboratories;
- (vi) Other non-profit making laboratories.

## 2. MINIMUM FACILITIES FOR A PRIVATE CLINICAL LABORATORY

- (i) A minimum of any three of the following disciplines should be offered—
  1. Haematology and blood transfusion.
  2. Medical microbiology and parasitology.
  3. Clinical chemistry.
  4. Morbid anatomy, histopathology and cytology.
- (ii) STAFF
  1. At least one pathologist.
  2. At least one qualified technologist for each of the disciplines.
- (iii) PHYSICAL FACILITIES
  1. Waiting room.
  2. Specimen collection room with a couch.
  3. Toilet facilities.
  4. Adequate laboratory space dictated by activities.
- (iv) SAFETY REQUIREMENTS
  1. Autoclave for sterilization of specimens before disposal.
  2. Fire fighting equipment.
  3. Sinks with both cold and hot water.
- (v) EQUIPMENT
  1. At least one microscope.
  2. Refrigerator.
  3. Incubator.

[Subsidiary]

4. Centrifuge.
  5. Haemoglobinometer.
  6. Counting chamber.
  7. E.S.R. tube.
  8. Disposable syringes and needles.
  9. Calorimeter.
  10. Water bath.
  11. Still.
  12. Burners.
  13. Electrophoresis tank.
  14. Necessary laboratory glassware.
  15. Chemical balance.
- (vi) REAGENTS AND CHEMICALS
- There should be minimum reagents and chemicals to enable a confirmatory diagnosis to be reached in each of the disciplines offered.
- (vii) DOCUMENTATION
- All specimens must be recorded in a register. Such registration should show the following: date, patient's name, attending doctor's name, nature of the specimen and tests requested.

## SEVENTH SCHEDULE

[Rule 36.]

## 1. MINIMUM REQUIREMENTS FOR A CLINICAL RADIOLOGICAL LABORATORY

For the purpose of considering radiological protection facilities the following should be adopted as a general guide—

LEVEL 0—Clinics and health stations operated by a nurse or medical assistant without any direct medical supervision—*No radiological facility required.*

LEVEL 1—Small clinics, health stations or general practices under supervision of a general practitioner who can undertake emergency work and refer patients to other levels—radiography only for chest, fractures (mainly extremities), and in exceptional cases plain abdomen necessary. *No fluoroscopy should be undertaken.*

LEVEL 2—District Hospitals or rural hospitals staffed by a small number of doctors and undertaking general medical care and minor surgery, some private hospitals, clinics and non-profit making hospitals may be included in this group—radiographic examinations required include chest, simple abdomen, fractures, and possibly some fluoroscopic examinations.

LEVEL 3—Medium sized regional provincial hospital that undertakes routine hospital work such as general medical care and routine surgery including abdominal surgery. The medical staff should include specialists in main fields as defined in these Rules.

*All general radiographic work is needed* which would include some special examinations e.g. tomography, angiography, urography, etc.

LEVELS 4 & 5—Large central and general hospitals including teaching hospitals where all types of radiological procedures are required.

## 2. FOR A PROPERLY ORGANIZED RADIATION PROTECTION PROGRAMME TO SUCCEED, it is strongly recommended that—

(1) In hospitals at levels 3, 4 and 5, all x-ray diagnostic examinations should be carried out by the diagnostic radiology department.

(2) Even when an x-ray equipment is installed in other departments the head of the radiology department should have responsibility for radiological aspects of any examination performed.

(3) Level 1 refers to a rural or remote area where no other radiological service is available and the supervision is that of a general practitioner with limited skill in radiology. A fully qualified radiographer may not be available at this level and the x-ray equipment may be operated by a nurse or laboratory technician. Such a nurse or technician should have had additional training in radiography.

(4) In areas where a more comprehensive radiological service is available, no attempt should be made to provide a level 1 radiological service.

### 3. PREMISES

(1) The x-ray room should provide adequate radiation protection for people outside the room, who may have no knowledge of radiation or radiation requirements.

(2) The basic x-ray room for general purposes should be about 6 x 4 x 3 metres in size, with wall thickness in all directions of 2 mm. lead equivalent.

(3) The doors, the darkroom hatch, and covers for services and other instructions through the wall should have the same lead equivalent protection.

(4) Windows should be at least 2 metres from the ground outside the x-ray room and 1.6 metres from the floor level of the room.

(5) If the control panel is within the x-ray room, the protective shield should be positioned such that neither "once scattered" radiation nor direct radiation can pass round the edge of the shield from any part of the room where x-ray procedures are carried out.

(6) The darkroom should be at least 6 sq. meters in area.

(7) There should be at least two protected changing cubicles of 1.5 sq. metres minimum size, preferably outside the x-ray room.

(8) If ordinary building material are used, they should be thick enough e.g. in the range 70.25 KV, 15 cm of concrete or 25 cm of brick with plaster is sufficient.

(9) However, if a prefabricated wood or metal building is being planned, it will need lead lining, preferably supported by plywood to prevent sagging (2 mm. lead sheet is adequate).

(10) Converting an old building for an X-ray room will need a review by a radiation protection expert.

### 4. CHOICE OF X-RAY EQUIPMENT

(1) The x-ray equipment should be adequate for its purposes e.g. at level 1 of radiological care, a good stationary x-ray tube and generator should be employed. Improvisation of a mobile machine in an old room used for other purposes should not be tolerated under any circumstances.

(2) For routine general radiography, necessary ancillary apparatus should be provided e.g. chest stand and a stationary couch with grid and film x-ray.

(3) To avoid mains voltage drops, the power supply to an x-ray unit should be separated from, say, that for lifts, etc.

(4) Where power supplies are particularly unreliable, battery operated or condenser discharge equipment should be used.

(5) An x-ray tube head of lower rating than that of generator should be installed.

(6) For exposure controls, meters giving clear indication of voltage, current, and milliampere-seconds at all times are required.

(7) The timing device must be capable of making sufficiently short exposures (say down to 0.04 sec.) must terminate a present exposure, and must be "dead man" type.

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[Subsidiary]

(8) All x-ray, fluoroscopic and dental equipment must further meet the protection standards as laid down by the International Commission on Radiation Protection.

(9) The normal output for radiographic units should lie from 60 KV and above with preferably not less than 50mA. For fluoroscopic units without image intensifiers, 75 KV and 2-3mA is the normal order. 3mA should not be exceeded at 100 KV.

## 5. SAFETY PROCEDURES

### RADIOGRAPHY

(1) Staff positions should be behind protective shields preferably outside the x-ray room providing there is adequate view through a lead glass and communication device for speaking to the patient during exposure.

(2) During special techniques, where staff need be in the x-ray room, protective aprons and gloves should be worn.

(3) Films should be supported mechanically. Beam size should be reduced to cover by means of light beam diaphragms or variable cones only areas under investigation.

### FLUOROSCOPY

(1) Only essential persons who must wear protective aprons, should be present in the room during fluoroscopy.

(2) The fluoroscopy switch should be spring loaded so that it is not left on unnecessarily or accidentally.

(3) A cumulative timing device that gives an audible warning and finally switches off after a few minutes to restrict the total switch-on time of the equipment.

(4) A properly darkened room.

(5) A fluoroscopy switch coupled with the room's red light.

(6) If sufficient information can be obtained from radiography alone (e.g. as in chest examinations) then fluoroscopy should not be done.

(7) There should be effective coning devices.

(8) With conventional equipment, adequate dark adaptation of at least 15 minutes prior to screening is necessary.

### ROOM LAYOUT

(1) Primary x-ray beam should not fall on the darkroom wall and should not routinely point towards doors or windows.

(2) Where there is more than one piece of equipment in the same room—

(a) only one generator per room should be installed;

(b) a warning device should be mounted on each x-ray tube and control panel of the generator;

(c) an adequate protective screen should be provided between each x-ray tube area.

(3) For special techniques such as tomography, angiography, etc., a special room should be provided.

(4) Record room, offices and waiting room should be provided outside the main x-ray room at all levels.

(5) Protective screens should be provided for all the positions in which staff are required to be during exposure in the x-ray room.

(6) Persons required to assist during fluoroscopic procedures should wear a protective apron of at least 0.25 mm lead equivalent.

(7) The physician performing the fluoroscopic procedures should wear a protective apron of at least 0.25 mm lead equivalent.

(8) When a new x-ray facility goes into operation, all staff members who at any time may enter the department should be issued with radiation monitoring badges.

(9) Site monitoring during the radiation surveys should be done before commissioning the unit.

(10) Persons likely to receive three tenths ( $\frac{3}{10}$ ) of the annual maximum permissible dose should be monitored regularly.

(11) Radiation personnel should be medically examined on initial appointment and at any time when the exposure levels as indicated by personnel monitoring are sufficiently high.

#### PROTECTION OF THE GENERAL PUBLIC

(1) Careful attention must be paid to be protection of all areas around, above and below x-ray rooms.

(2) Apart from adequate protective thickness of walls, floors, ceilings and doors, unprotected windows should not allow the public outside to be irradiated.

(3) Stray radiation should not reach the waiting rooms or other occupied areas.

(4) One patient must not use a curtained corner of an x-ray room to change clothing while another is being radiographed in the same room.

(5) Separate protected cubicles should be provided preferably outside x-ray room.

(6) Lead-protected doors must always be closed during x-ray examinations.

(7) Particular care should be taken to avoid irradiating patients in adjacent beds during mobile radiography.

(8) Protective clothing should be worn by parents holding children undergoing x-ray examinations. They should not stand in the path of a primary beam.

#### EIGHTH SCHEDULE

[Rule 45.]

##### LIST OF APPROVED SPECIALIST POSTGRADUATE QUALIFICATIONS

<i>Speciality</i>	<i>Kenya</i>	<i>Foreign Equivalents</i>
1. Anaesthesia	M.Med. (Anaesthesia)	F.F.A.R.C.S., F.F.A.A.R.C.S., M.D. (Anaesthesia), Dip. Am. Board of Anaesthesiology, etc
2. Internal Medicine	M.Med. (Medicine)	M.R.C.P. (U.K.), M.R.A.C.P., F.R.C.P. (C), Dip. Am. Board of Int. Medicine, M.D. (Medicine) New Delhi, etc.
3. Obstetrics and Gynaecology	M.Med (Obs./Gyn.)	M.R.C.O.G., F.R.C.S. (O.B.S./GYN.) M.D. (O.B.S./GYN.), M.R.A.C.O.G., Dip. Am. Board of Obst. and Gynae., etc.
4. Paediatrics	M.Med (Paediatrics)	M.R.C.P. (U.K); M.R.A.C., F.R.C.P., (C), Dip. Am. Board of Paediatrics, M.D. (PAED), New Delhi, etc
5. Pathology		M.R.C (Path.), M.D. (Path.) New Delhi, Dip. Am. Board of Paediatrics, M.D. (PAED), New Delhi, etc.

*Medical Practitioners and Dentists Act*

[Subsidiary]

6. Psychiatry		M.R.C. (Psync.), M.D. (Psych.) Dip. Am. Board of Psychiatry, etc.
7. Radiology	M. Med. (Radiology)	F.R.C.R., M.D. (Radiology), Dip. Am. Board of Radiology, etc.
8. (i) Surgery — General	M. Med. (Surgery)	F.R.C.R., F.R.A.C.S., F.R.C.S. (Canada), Dip. Am. Board of Surgeons, M.S. (New Delhi), etc.
(ii) Cardiothoracic Surgery	M. Med. (Surgery)	F.R.C.S., F.R.A.C.S.(C), Dip. Am. Board of Surgeons, M.S. (New Delhi), etc.
(iii) Neurosurgery	M. Med. (Surgery)	F.R.C.S., F.R.A.C.S., F.R.C.S. (C), M.S. (New Delhi), Dip. Am. Board of surgeons, etc.
(iv) Ophthalmology		F.R.C.S., F.R.A.C.S., F.R.C.S.(C), M.S. (New Delhi), Dip. Am. Board of Surgeons.
(v) Orthopaedics Trauma		F.R.C.S., F.R.A.C.S., F.R.C.S.(C), M.S. (New Delhi), Dip. Am. Board of Surgeons, etc.
(vi) Otorhinolaryngology		F.R.C.S., F.R.A.C.S., F.R.C.S.(C), M.S. (New Delhi), Dip. Am. Board of Surgeons, etc.
(vii) Plastic Surgery		F.R.C.S., F.R.C.S., F.R.C.S. (C), M.S. (New Delhi), Dip. Am. Board of Surgeons, etc.
9. Dentistry		F.D.S.E.C.S., M.D.S., (New Delhi). Cert. Am. Board of Orthodontics, Cert. Am. Board of Endodontics, Cert. Am. Board of Periodontology, Cert. Am. Board of Oral and Maxillary facial Surgery, Cert. Am Board of Conservative Dentistry, etc.

NINTH SCHEDULE

[Rule 25(5).]

The Medical Practitioners and  
Dentists Board,  
P. O. Box 30016,  
NAIROBI

Date .....

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

Dear Sir,

This is to certify that Dr. ....

being a holder of a diploma in .....

is hereby authorized by the Board to render services in the discipline of .....

and that his authorized place of private practice is .....

This letter of authority shall expire on 31st December, 20 .....

Yours faithfully,

.....

Director of Medical Services/Registrar

\_\_\_\_\_





**MEDICAL PRACTITIONERS AND DENTISTS (MEDICAL INSTITUTIONS) RULES, 2000**

**ARRANGEMENT OF RULES**

*Rule*

1. Citation.
2. Interpretation.
3. Licensing of a medical institution.
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SCHEDULE —

CATEGORIZATION OF PRIVATE MEDICAL  
INSTITUTIONS

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**MEDICAL PRACTITIONERS AND DENTISTS  
(MEDICAL INSTITUTIONS) RULES, 2000**

[L.N. 25 of 2000, L.N. 3 of 2017]

**1. Citation**

These Rules may be cited as the Medical Practitioners and Dentists (Medical Institutions) Rules, 2000 and shall come into effect on the 1st April, 2000.

**2. Interpretation**

In these Rules, unless the context otherwise requires—

“**institution**” means a medical institution;

“**licence**” means a licence to operate a medical institution issued under these Rules;

“**medical institution**” means premises of a health facility which offers medical or dental services, and where persons suffering from any sickness, injury, or infirmity are given medical, surgical, dental treatment or nursing care, and includes a hospital, a maternity home, a mission hospital, an institutional clinic, a convalescent home, a nursing home, a medical centre, a dispensary, a health centre, a laboratory and other specialized medical institutions other than those licensed under Rule 9 of the Clinic Rules, but does not include hospitals or other medical establishments operated by the Government or by a local authority;

“**register**” means the register of medical institutions.

[L.N. 3 of 2017, s.4.]

**3. Licensing of a medical institution**

(1) The Board may, subject to these Rules, grant a licence for the use of any premises as a medical institution.

(2) No premises shall be used by any person as a medical institution unless they are registered and licensed for such use by the Board.

(3) No person shall use the term “hospital” or “nursing home” or any other name that suggests a medical institution in connection with the use of any premises unless the premises are licensed under these Rules.

[L.N. 3 of 2017, s.5.]

**4. Application for a registration**

(1) A person or organization to operate a medical institution shall submit to the registrar an application in the prescribed form set out in the Medical Practitioners (Form and Fees) Rules, which shall be accompanied by the prescribed registration fee.

(2) Where the applicant satisfies the Board that the institution meets the requirement for registration, the registrar shall register the institution as an approved medical institution.

(3) The Board shall issue to every approved medical institution registered under these Rules a certificate of registration in the prescribed form set out in the Medical Practitioners and Dentists (Forms and Fees) Rules on payment of the prescribed fee.

(4) The registrar shall keep a register of all medical institutions.

[L.N. 3 of 2017, s. 6.]

**5. Application for a licence**

(1) An application for a licence to operate a medical institution shall be in the prescribed form set out in the Medical Practitioners and Dentists (Forms and Fees) Rules, and shall be accompanied by the prescribed fee.

(2) An application for a license to be issued under these Rules shall be made to the Board on or before the 30th October of each year.

(3) An annual fees assessment form shall be in the prescribed form set out in the Medical Practitioners and Dentists (Forms and Fees) Rules.

(4) A licence to operate an approved medical institution shall be in the prescribed form set out in the Medical Practitioners and Dentists (Forms and Fees) Rules.

(5) A licence issued under these Rules shall be granted for a period of one year.

(6) A licence issued under these Rules shall expire on the 31st December of the year in which it was issued, and may thereafter be renewed annually on payment of the prescribed fee.

(7) No licence shall be transferred under these Rules.

(8) A licence issued under these Rules shall be displayed in a conspicuous place at the premises to which the licence relates.

(9) An application for renewal of licence shall be made under these Rules.

(10) An application for permission to change the premises to which the licence relates may be made at any time.

(11) The Board may, on application—

- (a) for renewal of the licence; or
- (b) for change of premises,

request such further relevant information from the applicant as it thinks fit.

(12) The Board may charge an additional late application fee in respect of applications submitted after the 30th October of any year as specified in subrule (2).

[L.N. 3 of 2017, s.7.]

## **6. Conditions for grant of licence**

(1) No licence shall be granted under these Rules unless the premises and its proposed facilities and equipment are approved by the Board as suitable for the purpose indicated in the application, and the Board is satisfied as to the character and ability of the applicant to run the medical institution.

(2) An institution shall be registered and licensed as medical institution where—

- (a) the medical institution conforms to the description, infrastructure and personnel criteria for the respective category and facility set out in the Schedule;
- (b) the medical officer of health of the county where the premises are located submits a satisfactory report on the premises to the Board;
- (c) the medical practitioners or dentists providing services at the institution is the holder of a valid private practice licence issued under the Act to render medical or dental service at the institution;
- (d) all professional staff working or intending to work in the institution are qualified and are registered by the relevant registering authority as required;
- (e) the quality of health care to be provided at the institution shall be such as to comply with the minimum standards acceptable to the Board.

(3) For the purposes of this rule, the Board may issue guidelines which guidelines shall be subject to regular review.

[L.N. 3 of 2017, s. 8.]

## **7. Categorization of medical institutions**

For purposes of licensing, the Board shall categorize registered approved medical institutions as set out in the Schedule to these Rules, and shall determine the annual fees payable in respect of each category.

[L.N. 3 of 2017, s. 9.]

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[Subsidiary]**8. Services at institutions**

(1) Every licence issued to a medical institution shall specify the nature of the services that may be provided by the institution.

(2) Paragraph (1) shall not prevent the carrying out at a medical institution in case of an emergency of any other treatment as may in the opinion of a medical practitioner, be necessary.

(3) Every licence shall state the maximum number of patients who may be accommodated in the institution at any one time, and may be limited to any particular class or classes of patients.

[L.N. 3 of 2017, s. 10.]

**9. Refusal to register or license**

(1) Where the owner or managing body of a medical institution does not comply with these Rules, the Board may refuse to register or license the institution.

(2) The Board may refuse to renew the licence of a medical institution which is operated in a manner that contravenes any provision of the Act or these Rules.

[L.N. 3 of 2017, s. 11.]

**10. Revocation of licence**

(1) A licence may at any time be revoked by the Board—

- (a) if the licensee wilfully neglects or refuses to comply with any provision of these Rules or obstructs, impedes, or hinders any person carrying out any duties or responsibilities under the Act and these Rules;
- (b) if in the opinion of the Board, the private medical institution is managed in a manner contrary to these Rules or in such a manner that the revocation of the licence is required in the public interest;
- (c) if, after inquiry the Board finds that there has been professional misconduct.

(2) Where the Board refuses to grant registration, grant or review a licence, or cancels or revokes a licence, it shall inform the applicant or the licensee of its decision and the reasons therefor in writing.

(3) The proprietor of a medical institution may request the Board to reconsider its decision under subrule (2) and the Board may comply accordingly.

[LN. 3 of 2017, s. 12]

**11. Inspection of medical institutions**

(1) All medical institutions shall be subject to inspection by the Board.

(2) The operator of a medical institution shall submit to the Board once in every six months list of—

- (a) all medical practitioners and dentists in their employment;
- (b) all medical practitioners and dentists who are authorized to use their premises, indicating in each case the authorized place for use as a private clinic.

[L.N. 3 of 2017, s.13.]

**12. Responsibility of owner, etc., of medical institution**

(1) It shall be the responsibility of the owner and the managing body of a medical institution to acquaint themselves fully with—

- (a) the qualifications; and
- (b) the professional conduct,

of all medical practitioners and dentists working at the medical institution and they shall consult the Board in case of any doubt.

(2) The owner and the managing body of a medical institution, as well as the medical practitioner or dentist concerned, shall be responsible for any instance of professional misconduct occurring within the premises about which they know or ought reasonably to have known.

[L.N. 3 of 2017, s.14.]

### **13. Responsibilities of administrators of approved private medical institutions**

The administrators of medical institutions shall ensure that no medical practitioners or dentists working there engages in private practice outside the areas of specialization and competence for which they have been licensed except—

- (a) in cases of emergency; or
- (b) in cases where practitioners with the requisite specializations are not reasonably available.

[L.N. 3 of 2017, s.15.]

### **14. Revocation of Part IV**

PART IV of the Medical Practitioners and Dentists (Private Practice) Rules is revoked.

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[Subsidiary]

## SCHEDULE

[Rule 7.]

## Level 1

<i>Facility</i>	<i>Description</i>	<i>Infrastructure</i>	<i>Personnel</i>
i. Community Health Facility	Health facility that focuses on— (a) ensuring individuals, households and communities carry out appropriate healthy behaviours; and (b) recognition of signs and symptoms of conditions that need to be managed at other levels of the system.		

## Level 2

<i>Facility</i>	<i>Description</i>	<i>Infrastructure</i>	<i>Personnel</i>
i. Medical Clinic	A health facility for— (a) treating outpatients; and (b) intended for use for not more than 12 hours to provide services including but not limited to— (i) basic outpatient services; (ii) emergency maternity services; (iii) basic laboratory services;	(a) At least three rooms being— (i) a reception; (ii) a consulting room; and (iii) a treatment room or observation; (b) a procedure room, if procedures are done at the facility; (c) a First Aid Kit; (d) a Health Information Management System;	(a) At least one health practitioner being— (i) a medical specialist; (ii) a general practitioner; (iii) a clinical officer; (iv) a registered nurse; or (v) a midwife; (b) one medical assistant; (c) staff trained in First Aid and basic life support

<i>Facility</i>	<i>Description</i>	<i>Infrastructure</i>	<i>Personnel</i>
	(iv) minor surgical procedures; and (v) outreach services	(e) a waste management system; (f) proof of contract with a licensed waste disposal company	
ii. Dental Clinic	An outpatient facility for the treatment of dental related problems.	(a) At least three rooms being— (i) a reception; (ii) a consulting room; and (iii) a treatment room or observation; (b) A sterilization room containing the prescribed equipment used by the dental practitioner for— (i) the promotion of oral health; (ii) the prevention, diagnosis and treatment of oral diseases; and (iii) the rehabilitation of oral structures; (c) a specialized dental chair with accessories, in the case of a comprehensive clinic-Unit; (d) basic normal clinic chair; (e) all equipment for extraction and minor oral surgery, filling; and	(a) Dentist; and (b) Dental Assistant or Nurse or Community Oral Health Officer

[Subsidiary]

Facility	Description	Infrastructure	Personnel
		(f) ART instruments, including a scaler, with effective infection control.	
iii. Dispensary/ Faith-Based Dispensary	A health facility for— (a) outpatient services; (b) immunization; (c) child health; (d) screening for communicable conditions; (e) prevention mother to child HIV transmission; (f) institutional screening for NCDS; (g) integrated vector management; (h) good hygiene practices; (i) HIV and STI prevention; (j) Port health; (k) control and prevention of neglected tropical diseases; (l) community management of violence and injuries (m) pre-hospital care; (n) emergency maternity services; (o) work place health and safety services;	(a) Infrastructure and equipment to offer— (i) basic outpatient services; (ii) emergency maternity services; (iii) basic laboratory services; (iv) minor surgical procedures; and (v) outreach services	At least— (a) two general Clinical Officers; (b) four Kenya Enrolled Community Health Nurses; (c) two Kenya Registered Community Health Nurses; (d) two Enrolled Nurses; (e) one Pharmaceutical technologist; (f) one orthopaedic technologist; (g) one General physiotherapist; (h) two occupational therapist; (i) two community oral health officers; (j) two health promotion officers; (k) one medical social worker; (l) two Clerks (m) one health records information management officer; (n) two medical laboratory technologists; (o) two nutrition & dietetic technologists (p) one nutrition & dietetic technician (q) one publichealth officer; (r) two Public Health Technicians; and (s) four support staff.



<i>Facility</i>	<i>Description</i>	<i>Infrastructure</i>	<i>Personnel</i>
	<p>(p) food quality and safety services;</p> <p>(q) reproductive health services;</p> <p>(r) limited laboratory services;</p> <p>(s) health promotion;</p> <p>(t) safe water, sanitation and hygiene;</p> <p>(u) nutrition services;</p> <p>(v) pollution control services;</p> <p>(w) substance abuse services;</p> <p>(x) micronutrient deficiency control;</p> <p>(y) housing school health;</p> <p>(z) food fortification advocacy</p> <p>(aa) Population Management services; and</p>		
iv. Mobile Clinic	<p>Health facility that operates through migration of the clinics from one area to another, with each mobile clinic linked to a static health facility from where it operates beyond the reach of the static facility which provides staffing, administrative services and storage of supplies and other necessary needs and provides—</p> <p>(a) maternity services;</p>	<p>(a) Infrastructure and equipment to offer—</p> <p>(i) basic outpatient services;</p> <p>(ii) emergency maternity services;</p> <p>(iii) basic laboratory services;</p> <p>(iv) minor surgical procedures;</p> <p>(v) outreach services</p>	<p>(a) two general clinical officers;</p> <p>(b) four Kenya Enrolled Community Health Nurses;</p> <p>(c) two Kenya Registered Community Health Nurses; and</p> <p>(d) Enrolled Nurses.</p>

[Subsidiary]

<i>Facility</i>	<i>Description</i>	<i>Infrastructure</i>	<i>Personnel</i>
	(b) primary care services; (c) curative, MCH/FP services; (d) emergency services; and (e) specific services for— (i) HIV, TB, Malaria, CA screening services; (ii) referral services; (iii) defaulter tracing; and (iv) neglected tropical conditions.		
v. Eye Clinic	A health facility for the treatment of outpatient eye clients (including optical) for not more than twelve hours.	(a) At least three rooms being— (i) a reception; (ii) a consulting room; and (iii) a treatment room or observation; (b) a procedure room, if procedures are done at the facility; (c) a health information management system; (d) a First Aid kit; (e) a waste management system; and (f) proof of contract with a licensed waste disposal company.	(a) an ophthalmic nurse; (b) an ophthalmic clinical officer; or (c) ophthalmologist who exclusively offers eye care services.

## Level 3A

Facility	Description	Infrastructure	Personnel
i. Basic Health Centre/Faith-Based Basic Centre	<p>A health facility that has been Gazetted as a health centre owned by the MOH or other governmental organization or licensed to a faith based organization, community or registered organization including a school, company, church, mosque, NGO, or humanitarian organization, that offers many ambulatory health services and generally offer preventive and curative services appropriate to local needs, including—</p> <p>(a) curative services;</p> <p>(b) outpatient services;</p> <p>(c) inpatient services;</p> <p>(d) referral services;</p> <p>(e) additional outpatient care, largely limited to minor surgery on outpatient basis;</p> <p>(f) limited emergency inpatient services for emergency inpatients including patients, awaiting referral and on twelve hours observation;</p>	<p>At least—</p> <p>(a) on two acres of land;</p> <p>(b) three consultation rooms;</p> <p>(c) one treatment room;</p> <p>(d) one minor theatre at outpatients;</p> <p>(e) one records room;</p> <p>(f) inpatient bed capacity of not more than (16) sixteen beds being four beds each for the male ward, female ward, paediatric ward and maternity ward;</p> <p>(g) one drugs store;</p> <p>(h) one general store;</p> <p>(i) one laboratory room;</p> <p>(j) one labour ward with capacity of two;</p> <p>(k) one delivery room;</p> <p>(l) one community services room;</p> <p>(m) a supply services unit with—</p> <p>(i) a kitchen; and</p> <p>(ii) laundry; Health Information Systems</p> <p>(n) staff housing for at least two members of staff;</p> <p>(o) one WC;</p> <p>(p) one simple incinerator;</p>	<p>(a) staff who report to the medical or clinical officer in-charge;</p> <p>(b) public health officers and technicians, who, may have an office at the health centre, are deployed to a geographical area not a health unit and report to the district public health officer;</p> <p>(c) six general clinical officers;</p> <p>(d) one graduate clinical officer;</p> <p>(e) one specialized clinical officer or clinical officer ENT;</p> <p>(f) one clinical officer lung and skin;</p> <p>(g) one clinical officer paediatrics;</p> <p>(h) one clinical officer reproductive health;</p> <p>(i) two dental nurses;</p> <p>(j) twelve Kenya Enrolled Community Health Nurses;</p> <p>(k) eight Kenya Registered Community Health Nurses;</p> <p>(l) two Kenya Registered Nurses;</p> <p>(m) four Enrolled Nurse;</p> <p>(n) six registered</p>

[Subsidiary]

<i>Facility</i>	<i>Description</i>	<i>Infrastructure</i>	<i>Personnel</i>
	(g) limited oral health services; (h) individual health education; (i) maternity services for normal deliveries; (j) antenatal care (ANC); (k) family planning (FP) services (l) immunization services; and (m) routine and specific laboratory services , including malaria; smear test for TB; HIV testing.	(q) a placenta pit; (r) one motorcycle; (s) communication equipment; (t) water storage for roof catchment; (u) fence and gate; (v) composite pit	Midwives (o) one Sign Language nurse; (p) one Pharmacist; (q) four pharmaceutical technologists; (r) two plaster Technicians or technologists; (s) one orthopaedic Technologist; (t) three general physiotherapists; (u) three occupational therapists; (v) one dental officer; (w) two dental technologists; (x) four Community Oral Health Officers; (y) four health promotion officers; (z) two Medical Social Workers; (aa) one health administrative officer; (bb) four clerks; (cc) one supply chain assistant; (dd) four health records information management officers; (ee) one ICT officer; (ff) two medical engineering technicians; (gg) ten medical laboratory technologists; (hh) two nutrition and dietetic officers;

Facility	Description	Infrastructure	Personnel
			(ii) one nutrition and dietetic technician; (jj) two public health officers; (kk) two public health technicians; (ll) two cooks; (mm) four drivers; (nn) ten support staff; (oo) two mortuary attendants; and (pp) four security officers.
ii. Comprehensive Health Centre/ Faith-Based Comprehensive Centre	A health facility that— (a) focuses on appropriate preventive and promotive care as in KEPH interventions; (b) provides— (i) curative services; (ii) outpatient services; (iii) inpatient services; (iv) referral services; (v) additional outpatient care, largely limited to minor surgery on outpatient basis; (vi) limited emergency inpatient services for emergency inpatients including patients,	At least— (a) on two acres of land; (b) three consultation rooms; (c) one treatment room; (d) one minor theatre at outpatients; (e) one records room; (f) supply services unit with— (i) kitchen; (ii) laundry; (g) health information management systems; (h) inpatient bed capacity of not more than twenty four beds being six beds each for the male ward, female ward, paediatric ward and maternity ward; (i) one drug store; (j) one general store; (k) one laboratory room;	At least— (a) two medical officers; (b) six general clinical officers; (c) one graduate clinical officer; (d) one clinical officer ENT; (e) one clinical officer Lung and Skin; (f) one clinical officer paediatrics; (g) one clinical officer reproductive Health; (h) Two dental nurses; (i) twelve Kenya Enrolled Community Health Nurses; (j) eight Kenya Registered Community Health Nurses; (k) two Kenya Registered Nurses; (l) four Enrolled Nurses; (m) six registered midwives; (n) one Sign Language

[Subsidiary]

Facility	Description	Infrastructure	Personnel
	awaiting referral and on twelve hours observation;	(l) one labour ward with capacity of two;	Nurse;
	(vii) limited oral health services;	(m) a delivery room;	(o) One pharmacist;
	(viii) individual health education;	(n) a community services room;	(p) four pharmaceutical technologists;
	(ix) maternity services for normal deliveries;	(o) maternity theatre;	(q) two Plaster Technicians or Technologists;
	(x) caesarian section services,	(p) blood transfusion facilities;	(r) one orthopaedic technologist;
	(xi) antenatal care (ANC);	(q) basic radiological and imaging facilities;	(s) three general physiotherapists;
	(xii) family planning (FP) services;	(r) surgical procedures facilities;	(t) three occupational therapists;
	(xiii) immunization services;	(s) school health programs;	(u) one dental officer;
	(xiv) routine and specific laboratory services, including malaria; smear test for TB; HIV testing;	(t) Central Sterilization Services Department;	(v) Two dental technologists;
	(xv) blood transfusion services;	(u) staff housing for at least two;	(w) four Community Or Health Officers;
	(xvi) radiologic and imaging services; and	(v) one WC;	(x) four health promotion officers;
	(xvii) surgical procedures.	(w) a simple incinerator;	(y) two medical social workers;
		(x) one placenta pit;	(z) one health administrative officer;
		(y) one motorcycle;	(aa) four clerks;
		(z) communication equipment;	(bb) one supply chain assistant;
		(aa) water storage for roof catchment;	(cc) four health records information management officers;
		(bb) composite pit;	(dd) one ICT officer;
		(cc) and fence and gate.	(ee) two medical engineering technicians;
			(ff) ten medical laboratory technologists;
			(gg) two nutrition and dietetic officer;
			(hh) one nutrition and dietetic technician;
			(ii) two public health officers;

Facility	Description	Infrastructure	Personnel
			(jj) two public health technicians; (kk) two cooks; (ll) four drivers; (mm) ten support staff; (nn) two mortuary attendants; and (oo) four security officers.
iii Medical or Dental Centre	An outpatient facility including group with no inpatient beds that offer— (a) medical or dental consultation services; (b) basic laboratory services; (c) Pharmacy services; (d) Medical or dental procedures; (e) radiological services.	(a) At least four rooms being— (i) a reception; (ii) two consulting rooms; and (iii) treatment room or observation; (iv) a common waiting area with reception area; (b) triage room; (c) at least one procedure room; (d) a health information management system; (e) a First Aid Kit; (f) waste management system; (g) proof of contract with a licensed waste disposal company.	(a) at least one resident specialist being— (i) doctor; (ii) medical officer; (iii) dentist; (iv) clinical officer; or (v) nursing practitioner in charge of patient care; (c) triage nurse or dental assistant; (d) pathologist or laboratory technologist in charge of the laboratory; (e) pharmacist or pharmaceutical technologist in charge of the pharmacy; and (f) a receptionist
iv Funeral Homes Stand-Alone	A facility where— (a) dead bodies are stored; and (b) undergo autopsy before cremation or burial; (c) additional services		At least— (a) one pathologist; and (b) morgue attendant.

[Subsidiary]

Facility	Description	Infrastructure	Personnel
	including— (i) the sale of coffins; (ii) cremation; (iii) burial; (iv) transportation of bodies, may be provided.		

**Level 3B**

Facility	Description	Infrastructure	Personnel
i. Nursing Home or Cottage Hospital	A health facility that is licensed to a resident practitioner to offer outpatient and inpatient services.	(a) wards with twelve to forty nine inpatient bed capacity; (b) one laboratory; (c) one kitchen; (d) a laundry; and (e) may have maternity beds and labour ward.	(a) the licensed resident practitioner being— (i) a nurse; (ii) a clinical officer; (iii) a medical officer; or (iv) a specialist; (b) a visiting medical officer or specialist.
ii. Maternity Home	A health facility that is licensed to a resident practitioner to offer outpatient and inpatient services, exclusively, for maternity clients, i.e. ANC, delivery and newborn care, and postnatal services.	(a) wards with six to forty eight inpatient bed capacity; in multiples of six; (b) one labour ward; (c) one laboratory; (d) a kitchen; (e) a laundry; and (f) may have a theatre.	(a) the licensed resident practitioner being— (i) a nurse; (ii) a clinical officer; (iii) a medical officer; or (iv) a specialist; (b) a visiting medical officer or specialist.

**Level 4**

Facility	Description	Infrastructure	Personnel
1. Hospital Level 4/ Internship Training Centre/ County Hospital/Faith Based Hospital	A health facility that— (a) offers services for elimination of communicable diseases; (b) screening for	At least— (a) on five acres of land; or office space of approximately 2,500 sq. metres	At least— (a) sixteen medical officers; (b) two anesthesiologists; (c) two general surgeon;



Facility	Description	Infrastructure	Personnel
	animal transmitted conditions; (c) provides— (i) Highly Active Anti-Retroviral Therapy (HAART); (ii) AntiRetroViral (ARV) prophylaxis for children born of HIV +ve mothers; (d) male circumcision; (e) Pelvic Inflammatory Disease (PID) management; (f) screening for— (i) cervical cancer for all women in the reproductive age group; and (ii) breast cancer screening for women; (g) prostate examination for men; (h) evacuation services for injuries; (i) disaster risk reduction interventions; (j) facility disaster response planning; (k) disaster	(a) for every clinical department appropriate space for— (i) waiting bays; (ii) doctors' rooms; (iii) nursing station; (iv) Head of department office; (v) nurse in-charge office; (vi) intern's office; (vii) cloak rooms for staff and clients; (viii) staff lounge room; (ix) medical material store room; (x) sluice room; (xi) drug cabinet; (xii) changing rooms with locker; and (xiii) laminar flow air system for operating theatres; (b) general equipment including— (i) defibrillator; (ii) ventilator; (iii) modern communication system and ICT infrastructure;	(d) one orthopaedic surgeon; (e) one ENT surgeon; (f) two Obs/Gyne specialist; (g) one neonatologist; (h) one nephrologist; (i) one neurologist; (j) one ophthalmologist; (k) one optometrist; (l) one dermatologists; (m) two Paeditricians; (n) one pathologist; (o) two psychiatrists; (p) two radiologists; (q) two specialist physician (internist); (r) one public health physician; (s) thirty general clinical officers; (t) fourteen graduate clinical officers; (u) two specialized clinical officers; (v) four clinical officer lung & skin; (w) four Ophthalmology or cataract surgeons; (x) two clinical officers paediatrics; (y) two clinical officers reproductive health; (z) One clinical officer dermatology or venereology; (aa) one clinical officer orthopaedics; (bb) six clinical officers anaesthetists; (cc) one clinical officer psychiatry/ mental

[Subsidiary]

Facility	Description	Infrastructure	Personnel
	management;	(iv) automation in all areas;	health;
	(l) provides essential services;	(v) fire-fighting equipment;	(dd) one clinical officer oncology/palliative Care;
	(m) vaccination for yellow fever, tetanus and rabies;	(vi) standby generators; and	(ee) four Nurses;
	(n) management of surgical emergencies including trauma care;	(vii) UPS back-ups;	(ff) eight dental nurses;
	(o) advanced life support;	(c) catering and laundry, maintenance;	(gg) one hundred Kenya Enrolled Community Health nurses;
	(p) management of pregnancy complications;	(d) biomedical engineering;	(hh) fifty Kenya Registered Community Health nurses;
	(q) management of abnormal pregnancies;	(e) general cleaning services; and	(ii) twenty Kenya Registered nurses;
	(r) management of pre-term labour;	(f) infection control infrastructure;	(jj) six Enrolled Nurses
	(s) caesarean section;	(g) laboratory services for—	(kk) two oncology Nurses;
	(t) radiology services;	(i) Hepatitis B and C tests;	(ll) two ophthalmic nurses;
	(u) outpatient services of outpatient turnover of more than two hundred and fifty;	(ii) ELISA tests;	(mm) two paediatric nurses;
	(v) emergency operations;	(iii) Widal tests;	(nn) four palliative care nurses;
	(w) general operations;	(iv) CD 4 count;	(oo) six psychiatrist nurses;
	(x) specialized operations;	(v) liver function tests;	(pp) twenty registered midwives;
	(y) management of medical, surgical, pediatric and gynecological in-patients;	(vi) renal function tests;	(qq) one Sign Language nurses;
	(z) laboratory services;	(vii) blood gases;	(rr) ten theater nurses;
	(aa) specialized therapy services	(viii) Cholesterol tests (Total/Differential);	(ss) six anaesthetist nurses;
		(ix) semen analysis;	(tt) ten Accidents & Emergency nurses;
		(x) tumor markers (PSA, CA125);	(uu) four Pharmacists;
		(xi) Bence Jones protein;	(vv) two clinical pharmacists;
		(xii) cytology;	(ww) eight pharmaceutical technologists;
		(xiii) biopsy examinations;	(xx) four plaster
		(xiv) micro nutrient test;	
		(xv) cerebrospinal	

Facility	Description	Infrastructure	Personnel
	(bb) HIV/AIDS management; (cc) tuberculosis management; (dd) Palliative care; (ee) rehabilitative services; (ff) physiotherapy; and (gg) speech and hearing therapy.	fluid analysis (culture, biochemistry, cytology); (xvi) stool testing including for polio; (xvii) lung function testing; (xviii) lipid profiling; (xix) fecal occult blood testing for bowel cancers; and (xx) screening for sickle cell anemia; (d) specialized therapy services; (e) out-patient services; (f) in-patient services with a bed capacity that does not exceed one hundred and fifty being thirty bed ward each for the male ward, female ward, pediatric ward, antenatal ward and postnatal ward; or patient turn-over of not less than 250 per day. (g) radiological and imaging services including— (i) Ultra Sound scan; (ii) X-ray; (iii) endoscopy;	technicians technologists; (yy) three orthopaedic technologists; (zz) six general physiotherapists; (aaa) one BSc Physiotherapist; (bbb) two specialized physiotherapists; (ccc) ten occupational therapists; (ddd) one clinical psychologists; (eee) four dental officers; (fff) one oromaxillofacial surgeon; (ggg) two paediatric dentist; (hhh) six dental technologists; (iii) two community oral health officers; (jjj) six general radiographer; (kkk) one ultrasonographer; (lll) four health promotion officers; (mmm) six medical social workers; (nnn) one medical superintendent; (ooo) two health administrative officers; (ppp) ten clerks; (qqq) one secretaries; (rrr) two accountants; (sss) four supply chain assistants;

[Subsidiary]

Facility	Description	Infrastructure	Personnel
		(iv) laparoscopy; (g) general surgical procedures theater; (h) mortuary services; (i) autopsy services; (j) one operating theatre; (k) radiology unit with x-ray; (l) specialist clinics; (m) MRI Machine; (n) CT scan machine; (o) dialysis machine; (p) endoscopy & colonoscopy unit; (q) mammography machine; (r) ultra sound machine; (s) one waiting room; (t) four consultation rooms; (u) one registration room; (v) one injection room; (w) one plaster room; (x) one minor theatre; (y) at least two dental unit rooms with a sterilization room; (z) one ENT services room; (aa) one laboratory room; (bb) MCH/FP unit with— (i) one immunization	(ttt) two supply chain officers; (uuu) eight health records information management officers; (vvv) two medical engineering technicians; (www) forty medical laboratory technologists; (xxx) ten nutrition and dietetic officers; (yyy) eight nutrition and dietetic technologists; (zzz) four nutrition and dietetic technicians (aaaa) two cateresses; (bbbb) four public health officers; (cccc) ten cooks; (dddd) twelve drivers; (eeee) forty support Staff (ffff) six mortuary attendants; (gggg) ten security officers; and (hhhh) at least four specialists in the four major examinable areas to qualify as an internship centre.

<i>Facility</i>	<i>Description</i>	<i>Infrastructure</i>	<i>Personnel</i>
		services room; (ii) one FP coordination room; (iii) one antenatal coordination room; (iv) one maternity ward for a three deliveries; and (v) one nursery room with cots; (cc) two operating theatre beds; (dd) administration unit with— (i) one pharmacy/drug dispensing room; (ii) one cash office; (iii) two stores; (iv) two administration offices; and (v) one room for health records; (ee) a supply services unit with— (i) kitchen; and (ii) laundry; (ff) one community services room; (gg) radiology unit; (hh) one x-ray room; (ii) one USS room; (jj) one mortuary;	

[Subsidiary]

Facility	Description	Infrastructure	Personnel
		(kk) staff quarters for at least four persons on duty; (ll) ablution block; (mm) four stance pit latrine; (nn) source of running water; (oo) water reservoir; (pp) one placenta pit; (qq) one generator house; (rr) one incinerator; (ss) one motorcycle; (tt) two vehicles; (uu) one ambulance; (vv) one support vehicle; (ww) a composite pit; (xx) water storage for roof catchment; (yy) fence and gate.	

**Level 5**

Facility	Description	Infrastructure	Personnel
Hospital Level 5/County Referral Hospitals/Secondary Care Hospitals/Faith Based	A health facility that— (a) offers services for elimination of communicable diseases; (b) screening for animal transmitted conditions; (c) provides— (i) Highly Active Anti-Retroviral Therapy (HAART); (ii) AntiRetro Viral	(a) on at least ten acres of land; or office space of approximately 10,000 sq. metres (b) at least three hundred beds; (c) internship centres of at least one hundred and fifty beds; (d) an operating theatre; (e) an Intensive Care Unit; (f) radiology unit with x-ray machine;	At least— (a) fifty medical officers; (b) anesthesiologists; (c) two cardiologists; (d) four general surgeons; (e) two orthopaedic surgeons; (f) one cardiothoracic surgeon; (g) one critical care physician; (h) two ENT surgeons; (i) three Obs/Gyne specialists; (j) two palliative care specialists;

Facility	Description	Infrastructure	Personnel
	(ARV) prophylaxis for children born of HIV +ve mothers;	(g) specialist clinics;	(k) two neonatologists;
	(d) male circumcision;	(h) MRI Machine;	(l) two nephrologists;
	(e) Pelvic Inflammatory Disease (PID) management;	(i) CT scan machine;	(m) one neurologist;
	(f) screening for—	(j) dialysis machine;	(n) one plastic surgeon or reconstructive surgeon;
	(i) cervical cancer for all women in the reproductive age group; and	(k) endoscopy & colonoscopy unit;	(o) one neurosurgeon;
	(ii) breast cancer screening for women;	(l) mammography machine;	(p) four oncologists;
	(g) prostate examination for men;	(m) ultra sound machine;	(q) two ophthalmologists;
	(h) evacuation services for injuries;	(n) one waiting room;	(r) one optometrist;
	(i) disaster risk reduction interventions;	(o) six consultation rooms;	(s) one dermatologists;
	(h) facility disaster response planning;	(p) one registration room;	(t) one paediatric endocrinologist;
	(i) disaster management;	(q) two injection rooms;	(u) one paediatric nephrologist;
	(j) provides essential services;	(r) one plaster room;	(v) one paediatric neurologist;
	(k) vaccination for yellow fever, tetanus and rabies;	(s) one minor theatre;	(w) one paediatric surgeon;
	(l) management of surgical	(t) one dental unit room;	(x) four paediatricians;
		(u) one ENT services room;	(y) two pathologists;
		(v) one laboratory room;	(z) four psychiatrists;
		(w) MCH/FP unit with—	(aa) four radiologists;
		(i) one immunization services room;	(bb) one rheumatologist;
		(ii) one FP coordination room;	(cc) four specialist physicians or Internist;
		(iii) one antenatal coordination room;	(dd) one medical endocrinologist;
			(ee) two public health physicians;
			(ff) one urological surgeon;
			(gg) one child and adolescent psychiatrist;
			(hh) one community psychiatrist;

[Subsidiary]

Facility	Description	Infrastructure	Personnel
	emergencies including trauma care;	(iv) one maternity ward for six deliveries; and	(ii) one forensic psychiatrist;
(m)	advanced life support;		(jj) forty four general clinical officers;
(n)	management of pregnancy complications;	(v) one high dependency unit with six cots;	(kk) fourteen graduate clinical officers;
(o)	management of abnormal pregnancies;	(x) inpatient services;	(ll) four specialized clinical officers;
(p)	management of pre-term labour;	(y) two hundred beds for male inpatients;	(mm) two clinical officer lung and skin;
(q)	caesarean section;	(z) two hundred beds for female and children inpatients;	(nn) two clinical officers ophthalmology or cataract surgeries;
(r)	radiology services;	(aa) four operating theatre beds being one each for—	(oo) two clinical officers paediatrics;
(s)	outpatient turnover of more than two hundred and fifty;	(i) Gynae emergencies;	(pp) two clinical officers reproductive health;
(t)	emergency operations;	(ii) cold case;	(qq) two clinical officers dermatology or venereology;
(u)	general operations;	(iii) general emergencies ; and	(rr) two clinical officers Orthopaedics;
(v)	specialized operations;	(iv) ophthalmic cases;	(ss) fifteen clinical officers anaesthetists;
(w)	management of medical, surgical, pediatric and gynecological in-patients;	(bb) one intensive care unit with four beds;	(tt) two clinical officers co psychiatry/mental health;
(x)	laboratory services;	(cc) medical engineering unit;	(uu) two clinical officers oncology or palliative care;
(y)	specialized therapy services;	(dd) administration unit with—	(vv) twelve BSN nurses;
(z)	HIV/AIDS management;	(i) one pharmacy or drug dispensing room;	(ww) two cardiology nurses;
(aa)	tuberculosis management;	(ii) one cash office;	
(bb)	Palliative care;	(iii) two stores;	
(cc)	rehabilitative		



Facility	Description	Infrastructure	Personnel
	services; (dd) physiotherapy; and (ee) speech and hearing therapy.	(iv) two administr ation offices; and (v) one room for health records; (ee) a supply services unit with— (i) kitchen; and (ii) laundry; (ff) one community services room; (gg) radiology unit; (hh) one x-ray room; (ii) one USS room; (jj) one mortuary; (kk) staff quarters for at least eight persons on duty; (ll) ablution block; (mm) ten stance pit latrine; (nn) source of running water; (oo) water reservoir; (pp) one placenta pit; (qq) one generator house; (rr) one incinerator; (ss) one motorcycle; (tt) two vehicles; (uu) one ambulance; (vv) one support vehicle;	(xx) twenty critical care nursing nurses; (yy) eight dental nurses; (zz) two forensic nurses; (aaa) two hundred and Kenya Enrolled Community Health nurses; (bbb) two hundred and sixty Kenya Registered Community Health nurses; (ccc) eighty Kenya Registered Nurse nurses; (ddd) Enrolled Nurses; (eee) nephrology nurses; (fff) oncology nurses; (ggg) ophthalmic nurses; (hhh) ten paediatric nurses; (iii) six palliative care nurses; (jjj) twenty psychiatrist nurses; (kkk) sixty Registered Midwives; (lll) two Sign Language nurses; (mmm) sixty theatre nurses; (nnn) four anaesthetist nurses;

[Subsidiary]

Facility	Description	Infrastructure	Personnel
		(ww) a composite pit; (xx) water storage for roof catchment; and (yy) fence and gate.	(ooo) ten Accidents & Emergency nurses; (ppp) six pharmacists; (qqq) four clinical pharmacists; (rrr) one oncology pharmacist; (sss) ten pharmaceutical technologists; (ttt) six plaster technicians or technologists; (uuu) six orthopaedic technologists; (vvv) general physiotherapists; (www) two BSc physiotherapists; (xxx) three specialized physiotherapists; (yyy) occupational therapists; (zzz) two clinical psychologists; (aaaa) ten dental officers; (bbbb) two oromaxillofacial surgeons; (cccc) six paediatric dentists; (ffff) two Orthodontists; (gggg) ten dental technologists; (hhhh) ten general radiographer; (iiii) two ultrasonographers; (jjjj) one

<i>Facility</i>	<i>Description</i>	<i>Infrastructure</i>	<i>Personnel</i>
			mammograph er; (kkkk) three CT scan or MRI radiographer; (IIII) two dental radiographer; (mmmm) two therapy radiographer; (nnnn) two nuclear medicine technologists; (oooo) one radiation monitoring and safety officer; (pppp) medical social workers; (qqqq) one Medical Superintenden t; (rrrr) two health administrative officers; (ssss) two human resource management officers; (tttt) twenty clerks; (uuuu) two secretaries (vvvv) six accountants; (wwwv) six supply chain assistants; (xxxx) two supply chain officers; (yyyy) twelve health records information management officers; (zzzz) four ICT officers;

[Subsidiary]

<i>Facility</i>	<i>Description</i>	<i>Infrastructure</i>	<i>Personnel</i>
			(aaaaa) two medical engineers (bbbbb) medical engineering technologist; (ccccc) six medical engineering technicians; (ddddd) twenty nutrition and dietetic officer; (eeee) twelve nutrition and dietetic technologists; (fffff) four nutrition and dietetic technicians; (ggggg) two caterers; (hhhhh) four public health officers; (iiii) twenty cooks; (jjjj) drivers; (kkkkk) sixty support staff; (lllll) mortuary attendants; and (mmmmm) security officers.

**Level 6A**

<i>Facility</i>	<i>Description</i>	<i>Infrastructure</i>	<i>Personnel</i>
Specialized Tertiary Referral Hospital/Faith Based Specialized Tertiary Referral Hospital	A health facility that offers specialized services exclusively or a group of specialized services, among others, radiological services, oncology services; ophthalmology	(a) waiting bays; (b) doctors' rooms; (c) nursing station; (d) Head of department's office; (e) nurse in-charge's office; (f) intern's office;	A resident specialist in charge of the area of specialty of the institution.

	services, dental services and renal.	<ul style="list-style-type: none"> <li>(g) cloak rooms for staff and clients;</li> <li>(h) staff lounge room;</li> <li>(i) medical material store room;</li> <li>(j) sluice room;</li> <li>(k) drug cabinet;</li> <li>(l) changing rooms with lockers;</li> <li>(m) laminar flow air system for operating theatres;</li> <li>(n) general equipment including— <ul style="list-style-type: none"> <li>(i) defibrillator;</li> <li>(ii) ventilator;</li> <li>(iii) modern communication system and ICT infrastructure;</li> <li>(iv) automation in all areas;</li> <li>(v) fire-fighting equipment;</li> <li>(vi) standby generators; and</li> <li>(vii) UPS back-ups;</li> <li>(viii) catering and laundry, maintenance;</li> <li>(ix) biomedical engineering;</li> <li>(x) general</li> </ul> </li> </ul>	
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[Subsidiary]

		cleaning services; and (xi) infection control infrastructure; (o) laboratory equipment; (p) outpatient or inpatient beds; (q) radiological and imaging equipment including ultrasound scan, x-ray, endoscopy and laparoscopy equipment; (r) general Surgical procedures theater, where applicable; and (s) autopsy equipment.	
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**Level 6B**

<i>Facility</i>	<i>Description</i>	<i>Infrastructure</i>	<i>Personnel</i>
National Tertiary Referral and Teaching Hospitals and Hospitals/National Tertiary Referral and Teaching Faith Based Hospital	A health facility that— (a) offers services for elimination of communicable diseases; (b) screening for animal transmitted conditions; (c) provides— (i) Highly Active Anti-Retroviral Therapy (HAART); (ii) AntiRetro	(a) on at least ten acres of land; or office space of approximately 10,000 sq. metres. (b) at least three hundred beds; (c) internship centres of at least one hundred and fifty beds; (d) an operating theatre; (e) an Intensive Care Unit; (f) radiology unit	At least— (a) fifty medical officers; (b) anesthesiologists; (c) one oromaxillofacial anesthesiologist; (d) two cardiologists; (e) four general surgeons; (f) two orthopaedic surgeons; (g) one cardiothoracic surgeon; (h) one critical care physician;

Facility	Description	Infrastructure	Personnel
	Viral (ARV) prophylaxis for children born of HIV +ve mothers;	with x-ray machine;	(i) two ENT surgeons;
	(d) male circumcision;	(g) specialist clinics;	(j) two gastroenterologists;
	(e) Pelvic Inflammatory Disease (PID) management;	(h) MRI Machine;	(k) three Obs/Gyne specialists;
	(f) screening for—	(i) CT scan machine;	(l) two palliative care specialists;
	(i) cervical cancer for all women in the reproductive age group; and	(j) dialysis machine;	(m) two neonatologists;
	(ii) breast cancer screening for women;	(k) endoscopy & colonoscopy unit;	(n) two nephrologists;
	(g) prostate examination for men;	(l) mammography machine;	(o) one neurologist;
	(h) evacuation services for injuries;	(m) ultrasound machine;	(p) one plastic surgeon or reconstructive surgeon;
	(i) disaster risk reduction interventions;	(n) one waiting room;	(q) one neurosurgeon;
	(j) facility disaster response planning;	(o) six consultation rooms;	(r) four oncologists;
	(k) disaster management;	(p) one registration room;	(s) two ophthalmologists;
	(l) provides essential services;	(q) two injection rooms;	(t) one optometrist;
	(m) vaccination for yellow fever, tetanus and rabies;	(r) one plaster room;	(u) one dermatologists;
		(s) one minor theatre;	(v) one paediatric endocrinologist;
		(t) one dental unit room;	(w) one paediatric nephrologist;
		(u) one ENT services room;	(x) one paediatric neurologist;
		(v) one laboratory room;	(y) one paediatric surgeon;
		(w) MCH/FP unit with—	(z) four paediatricians;
		(i) one immunization services room;	(aa) two pathologists;
		(ii) one FP coordination room;	(bb) four psychiatrists;
			(cc) four radiologists;
			(dd) one rheumatologist;
			(ee) four specialist physicians or Internist;
			(ff) one medical

[Subsidiary]

Facility	Description	Infrastructure	Personnel
	(n) management of surgical emergencies including trauma care;	(iii) one antenatal coordination room;	endocrinologist;
	(o) advanced life support;	(iv) one maternity ward for six deliveries; and	(gg) two public health physicians;
	(p) management of pregnancy complications ;	(v) one high dependency unit with six cots;	(hh) one urological surgeon;
	(q) management of abnormal pregnancies;	(x) inpatient services;	(ii) one child and adolescent psychiatrist;
	(r) management of pre-term labour;	(y) two hundred beds for male inpatients;	(jj) one community psychiatrist;
	(s) caesarean section;	(z) two hundred beds for female and children inpatients;	(kk) one forensic psychiatrist;
	(t) radiology services;	(aa) four operating theatre beds being one each for—	(ll) forty four general clinical officers;
	(u) outpatient turnover of more than two hundred and fifty;	(i) Gynae emergencies;	(mm) fourteen graduate clinical officers;
	(v) emergency operations;	(ii) cold case;	(nn) four specialized clinical officers;
	(w) general operations;	(iii) general emergencies; and	(oo) two clinical officer lung and skins;
	(x) specialized operations;	(iv) ophthalmic cases;	(pp) two clinical officers ophthalmology or cataract surgeries;
	(y) management of medical, surgical, pediatric and gynecological in-patients;	(bb) one intensive care unit with four beds;	(qq) two clinical officers paediatrics;
	(z) laboratory services;	(cc) medical engineering unit;	(rr) two clinical officers reproductive health;
	(aa) specialized therapy services;	(dd) administration unit with—	(ss) two clinical officers dermatology or venereology;
	(bb) HIV/AIDS management;	(i) one pharmacy or drug dispensing room;	(tt) two clinical officers Orthopaedics;
			(uu) fifteen clinical officers anaesthetists;
			(vv) two clinical officers co



Facility	Description	Infrastructure	Personnel
	(cc) tuberculosis management;	(ii) one cash office;	psychiatry/mental health;
	(dd) Palliative care;	(iii) two stores;	(ww) two clinical officers oncology or palliative care;
	(ee) rehabilitative services;	(iv) two administration offices; and	(xx) twelve BSN nurses;
	(ff) physiotherapy ; and	(v) one room for health records;	(yy) two cardiology nurses;
	(gg) speech and hearing therapy.	(ee) a supply services unit with—	(zz) twenty critical care nursing nurses;
		(i) kitchen; and	(aaa) eight dental nurses;
		(ii) laundry;	(bbb) two forensic nurses;
		(ff) one community services room;	(ccc) two hundred and Kenya Enrolled Community Health nurses;
		(gg) radiology unit;	(ddd) two hundred and sixty Kenya Registered Community Health nurses;
		(hh) one x-ray room;	(eee) eighty Kenya Registered Nurse nurses;
		(iii) one USS room;	(fff) Enrolled Nurses;
		(zz) one mortuary;	(ggg) nephrology nurses;
		(aaa) staff quarters for at least eight persons on duty;	(hhh) oncology nurses;
		(bbb) ablution block;	(iii) ophthalmic nurses;
		(ccc) ten stance pit latrine;	(jjj) ten paediatric nurses;
		(ddd) source of running water;	(kkk) six palliative care nurses;
		(eee) water reservoir;	(lll) twenty psychiatrist nurses;
		(fff) one placenta pit;	(mmm) sixty Registered
		(ggg) one generator house;	
		(hhh) one incinerator;	

[Subsidiary]

Facility	Description	Infrastructure	Personnel
		(iii) one motorcycle; (jjj) two vehicles; (kkk) one ambulance; (lll) one support vehicle; (mmm) a composite pit; (nnn) water storage for roof catchment; and (ooo) fence and gate.	Midwives; (nnn) two Sign Language nurses; (ooo) sixty theatre nurses; (ppp) four anaesthetist nurses; (qqq) ten Accidents & Emergency nurses; (rrr) six pharmacists; (sss) four clinical pharmacists; (ttt) one oncology pharmacist; (uuu) ten pharmaceutical technologists; (vvv) six plaster technicians or technologists; (www) six orthopaedic technologists; (xxx) general physiotherapists; (yyy) two BSc physiotherapy; (zzz) three specialized physiotherapists; (aaaa) occupational therapists; (bbbb) two clinical psychologists; (cccc) ten dental officers; (dddd) two oromaxillofacial surgeons; (eeee) six paediatric dentists;

<i>Facility</i>	<i>Description</i>	<i>Infrastructure</i>	<i>Personnel</i>
			(ffff) two Orthodontists; (gggg) ten dental technologists; (hhhh) ten general radiographer; (iiii) two ultrasonographe rs; (jjjj) one mammographe; (kkkk) three CT scan or MRI radiographer; (llll) two dental radiographer; (mmmm) two therapy radiographer; (nnnn) two nuclear medicine technologists; (oooo) one radiation monitoring and safety officer; (pppp) medical social workers; (qqqq) one Medical Superintendent; (rrrr) two health administrative officers; (ssss) two human resource management officers; (tttt) twenty clerks; (uuuu) two secretaries (vvvv) six accountants; (wwww) six supply chain assistants; (xxxx) two supply chain officers;

[Subsidiary]

<i>Facility</i>	<i>Description</i>	<i>Infrastructure</i>	<i>Personnel</i>
			(yyyyy) twelve health records information management officers; (zzzz) four ICT officers; (aaaaa) two medical engineers (bbbbb) medical engineering technologists; (ccccc) six medical engineering technicians; (dddd) twenty nutrition and dietetic officer; (eeee) twelve nutrition and dietetic technologists; (ffff) four nutrition and dietetic technicians; (ggggg) two caterers; (hhhhh) four public health officers; (iiii) twenty cooks; (jjjj) drivers; (kkkkk) sixty support staff; (lllll) mortuary attendants; and (mmmmm) security officers.

**MEDICAL PRACTITIONERS AND DENTISTS (CONTINUING  
PROFESSIONAL DEVELOPMENT) REGULATIONS, 2005**

ARRANGEMENT OF REGULATIONS

*Regulation*

1. Citation.
  2. Conduct of education programmes by the Board.
  3. Record of accredited programmes and participants.
  4. Requirements for continuing professional education programmes.
  5. Fees.
  6. Attendance and participation in programmes by practitioners.
  7. Proof of attendance in a professional development programme.
  8. Delegation of functions.
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**MEDICAL PRACTITIONERS AND DENTISTS (CONTINUING PROFESSIONAL DEVELOPMENT) REGULATIONS, 2005**

[L.N. 132/2005.]

**1. Citation**

These Regulations may be cited as the Medical Practitioners and Dentists (Continuing Professional Development) Regulations, 2005, and shall come into force on such date as the Minister may, by notice in the *Gazette*, appoint.

**2. Conduct of education programmes by the Board**

(1) The Board shall conduct such continuing professional development or education programmes as may be deemed relevant from time to time, and may accredit any programme conducted by any institution, body or other organization where the said institution, body or organization has filed a return with the Board.

(2) The Board shall assign a unit or units to each continuing professional development or education programme to be used in awarding credits to members participating thereof, and may issue certificates of participation to the participants who have successfully completed a programme or programmes.

**3. Record of accredited programmes and participants**

(1) The Board shall keep a record of all accredited programmes showing the description of such programmes.

(2) The Board shall keep a record of the participants taking part in any programme, showing against any participant, whether he completed the programme or not.

**4. Requirements for continuing professional education programmes**

Every continuing professional development or education programme shall emphasize ethical, practical and professional aspects of clinical practice and/or strategic health planning, must be relevant to the practice of medicine, and shall be aimed at the improvement of the professional competence of the medical and dental practitioners.

**5. Fees**

The Board may prescribe a fee to be paid by participants taking part in any continuing professional development or education programme, and in the case of an accredited programme, the Board shall approve any fee levied.

**6. Attendance and participation in programmes by practitioners**

Every medical and dental practitioner must attend and participate in at least two programmes organized, or accredited, by the Board, and must obtain not less than five units consequent upon such attendance and participation in such programmes in any given year.

**7. Proof of attendance in a professional development programme**

Every application for an annual retention certificate shall be accompanied by proof that the applicant has secured five units upon attending and participating in the continuing professional development or education programmes during the preceding year.

**8. Delegation of functions**

The Board may delegate any or all of its functions under these Regulations to a committee.

**MEDICAL PRACTITIONERS AND DENTISTS (TRAINING,  
ASSESSMENT AND REGISTRATION) RULES 2014**

[L.N. 37/2014, L.N. 97/2014.]

**PART I – PRELIMINARY****1. Citation**

These Rules may be cited as the Medical Practitioners and Dentists (Training, Assessment and Registration) Rules, 2014.

**2. Interpretation**

In these Rules, unless the context otherwise requires—

**"assessment"** means the determination of the suitability of a person for registration under the Act including by means of oral or written examination or both, and the determination of a period, if any, which the Board considers necessary for a person to undergo remedial training;

**"Committee"** means the Training, Assessment and Registration Committee established under rule 3;

**"co-ordinator"** means the person for the time being appointed as examinations co-ordinator under rule 13;

**"intern"** means a person holding a medical or dental degree or its equivalent recognized by the Board, or a person who has passed the internship qualifying examination, and who is undergoing a prescribed period of internship in a recognized institution;

**"internship"** means training employment;

**"internship qualifying examination"** means a written or oral examination or both which determines the suitability of foreign trained graduates who hold degrees or diplomas recognized by the Board to undergo internship;

**"recognized institution"** means an institution accredited for internship and gazetted in accordance with rule 32;

**"registered"** means registered as a medical practitioner or dentist under section 6 of the Act;

**"remedial training"** means a period of extra training in a defined discipline or disciplines determined from time to time, by the Board;

**"supervisor"** means a medical or dental practitioner of specialist status appointed by the Board to supervise the performance of an intern in any one of the approved disciplines during the period of internship; and

**"unit of continuing education"** means a measurement assigned by the Board to all or part of a continuing education activity.

**PART II – ESTABLISHMENT OF THE TRAINING,  
ASSESSMENT AND REGISTRATION COMMITTEE****3. Establishment of the Committee**

There shall be established a Committee to be known as the Training, Assessment and Registration Committee.

**4. Functions of the Committee**

The functions of the Committee shall be to—

[Subsidiary]

- (a) accredit and regulate all medical schools, dental schools, internship training centres, continuing professional development and continuing education programme providers;
- (b) inspect all medical schools, dental schools and internship training centres;
- (c) index all medical and dental students;
- (d) conduct examinations by the Board;
- (e) conduct internship qualifying examinations;
- (f) review post-graduate qualifications for the purpose of awarding specialist recognition;
- (g) scrutinize applications for approving specialists and sub specialist status;
- (h) conduct all pre-registration and pre-internship examinations by the Board and peer reviews;
- (i) approve the registration of medical practitioners and dentists;
- (j) implement the continuing professional development programmes by the Board;
- (k) monitor and ensure compliance with the continuing professional development;
- (l) perform such other functions as may be assigned to it by the Board from time to time.

## **5. Membership of the Committee**

(1) The Committee shall be composed of not more than five members appointed by the Board from among its members.

(2) The Committee shall elect its own chairman and shall have the powers to co-opt not more than three private practitioners who are not members of the Board, for the purposes of transacting the business of the Committee, whenever expedient.

(3) The persons co-opted under sub-rule (2) may not vote in any matter before the Committee.

(4) The Committee may regulate its own procedure.

## **PART III — SPECIALISTS PRACTICE AND RECOGNITION**

## **6. Specialities in medical and dental practice**

The major specialities in medical and dental practice shall be as provided in the Schedule to these Rules.

## **7. Recognition of specialists by the Board**

(1) The Board may recognize a medical or dental practitioner as a specialist in any of the specialities referred to in rule 6.

(2) The Board shall publish a list of the specialists so recognized annually in the Gazette or in any other manner as may be approved by the Board.

(3) For a medical or dental practitioner to be recognized as a specialist under sub-rule (1), he or she must—

- (a) be a holder of a postgraduate qualification equivalent to the masters of medicine or dental surgery degree recognized by the Board and having not less than five years formal training and experience under supervision of a recognized specialist in a recognized institution:

Provided that if a postgraduate qualification is awarded after a three year period of training, no medical or dental practitioner shall be recognized as a specialist unless he or she has had at least two years' experience after obtaining the postgraduate qualification;



- (b) possess a diploma recognized by the Board, obtained before 1st January, 1978, not being equivalent to the masters of medicine degree of the University of Nairobi and has worked in a recognized institution for at least seven years during which period he or she has gained adequate experience and clinical skills under the supervision of a specialist in that field and has published papers in reputable medical journals.

(4) No medical or dental practitioner may be recognized by the Board if his or her training is less than three years.

(5) Unless the Board otherwise directs, before a medical or dental practitioner can be recognized as a sub specialist, he must possess a basic specialist qualification in his or her discipline and have at least six months' training and experience under supervision of a recognized sub specialist in a recognized institution.

#### PART IV — ADMISSIONS CRITERIA

### 8. Admission criteria for medicine and surgery

(1) All candidates admitted to the Bachelor of Medicine and Bachelor of Surgery degree programme or its equivalent must satisfy the following indexing requirements—

- (a) For Kenya Certificate of Secondary Education holders, minimum university admission requirement is C+ (plus) and in addition, an average of B plain in each the of the following cluster subjects—
  - (i) Biology;
  - (ii) Chemistry;
  - (iii) Physics or Mathematics; and
  - (iv) English or Kiswahili;
- (b) For Kenya Advanced Certificate of Education holders, a minimum of two principal passes in Biology, Chemistry and a subsidiary pass in either Mathematics or Physics;
- (c) For International Baccalaureate (IB), a minimum of grade 5 or above in International Baccalaureate;
- (d) For Diploma holders in Medical Sciences, a minimum "O" level Division II pass or C+ (plus) mean grade and a credit C+ pass in the cluster subjects in K.C.S.E., in addition to a three year diploma with a minimum of a credit pass from a medical training institution recognized by the Board;
- (e) Proficiency in English language;
- (f) For holders of any degree in Biological Sciences or equivalent qualifications from a recognized university, subject to passing Graduate Record Examination (GRE);
- (g) Other qualifications deemed to be equivalent to those in paragraphs (a)-(d) above from institutions recognized by the different institutions' Senates.

(2) The fee for indexing of medical and dental students shall be as prescribed by the Board.

### 9. Admission requirements for dental surgery

All candidates admitted to the Bachelor of Dental Surgery degree programme or its equivalent must satisfy the following indexing requirements—

- (a) For Kenya Certificate of Secondary Education holders, minimum university admission requirement is C+ (plus) and in addition, an average of B plain in each of the following cluster subjects—
  - (i) Biology;

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- (ii) Chemistry;
- (iii) Physics or Mathematics; and
- (iv) English or Kiswahili;
- (b) For Kenya Advanced Certificate of Education holders, a minimum of two principal passes in Biology, Chemistry and a subsidiary pass in either Mathematics or Physics;
- (c) For International Baccalaureate (IB), a minimum of grade 5 or above in Biology, Chemistry, Physics or Mathematics, English or Kiswahili subject clusters;
- (d) For Diploma holders in Medical Sciences, a minimum "O" level Division II pass in K.A.C.E or C+ (plus) mean grade and a credit C+ pass in the cluster subjects in K.C.S.E., in addition to a three year diploma with a minimum of a credit pass from a medical training institution recognized by the Board in any of the following fields —
  - (i) dental technology;
  - (ii) dental surgery assistants;
  - (iii) dental hygiene;
  - (iv) community oral health;
  - (v) clinical medicine;
  - (vi) laboratory technology;
  - (vii) radiography;
  - (viii) Pharmaceutical technology;
  - (ix) nursing; and
  - (x) other equivalent disciplines;
- (e) Proficiency in English language. International students from non-English speaking countries shall provide evidence of competence in English language by the production of the Test of English as a Foreign Language (TOEFL) certificate or its equivalent;
- (f) For holders of any degree in Biological Sciences or equivalent qualifications from a recognized university, subject to passing Graduate Record Examination (GRE);
- (g) Other qualifications deemed to be equivalent to those in paragraphs (a)-(c) above from institutions recognized by the different institutions' Senates.

## PART V — ASSESSMENT AND REGISTRATION

**10. Application for registration**

(1) An application for registration by an applicant shall be submitted to the Registrar in the prescribed form together with the prescribed fee and shall be accompanied by—

- (a) a full and sufficient evidence of the course or courses studied and the examination undergone in order to ascertain the authenticity of the degree, diploma or other qualifications submitted and the institutions in which they were undertaken together with legible photocopies of the applicant's degrees, diplomas or other qualifications and testimonials, all of which shall be attested by an official of the Board;
- (b) a short statement of the career history of the applicant since qualifying and documentary evidence of any work experience in medicine or dentistry by the employer or institution specifying the exact nature and the extent of the work performed and the period of employment or appointment.

(2) A person shall not be registered unless he or she—

- (a) produces his or her national identity card or passport;

- (b) is of good character;
- (c) possesses the requisite knowledge and skills required by the Board;
- (d) is a citizen of Kenya or a national of a State within the East African Community;
- (e) is proficient in English or Kiswahili;
- (f) is of sound physical and mental health.

(2) An application by a person registered in a foreign country shall, in addition to the documents specified in sub-rule (1), be accompanied by a certificate of good standing and registration or similar certificate containing evidence of registration from the appropriate foreign authority.

(3) All the applications for registration shall be submitted to the Committee for approval before the certificates of registration issued by the Board.

#### **11. Exemption from registration fees**

A medical or dental practitioner who was previously registered in Kenya and who on 1st January, 1978 had attained the age of sixty-five and retired shall be exempted from paying any registration fee.

#### **12. Assessment examinations**

No person to whom section 11(2) of the Act applies shall be registered unless he or she has passed or has been exempted from an assessment examination.

#### **13. Panels**

(1) The Committee shall constitute a medical and a dental Panel each consisting of a co-ordinator of assessment examinations and examination examiners.

(2) The co-ordinator shall be the Chairperson of each Panel.

(3) Each Panel shall sit at least once in three months.

(4) The Committee shall appoint examiners for each Panel.

#### **14. Submission of written reports**

The co-ordinator shall as soon as possible after completion of an assessment examination, submit to the Committee, for onward submission to the Board by the Committee, a written report signed by the members of the Panel, giving in the case of each candidate—

- (a) the name and address;
- (b) the marks attained in the examination and the results;
- (c) any recommendations as to whether the candidate should be referred for further internship or remedial training and for how long;
- (d) any other general recommendations, observations or remarks.

#### **15. Candidate to be informed where Board decides application**

Where a report is submitted under rule 14 recommending that a candidate should not be registered, the Board shall, unless it proposes to authorize registration notwithstanding the report, inform the candidate concerned of the substance of the Board's report and decision, in writing, within a period of three months, from the date of the decision.

#### **16. Appeals**

(1) A candidate may, within fourteen days of his or her being informed of the Committee's recommendation that he or she should not be registered, appeal to the full Board against the report and recommendation.

(2) A decision by the Board on appeal under this rule shall be final and the Board shall inform the appellant, of its decision in writing, within a period of fourteen days from the date of the decision.

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**17. Fees payable**

A candidate for an assessment examination shall pay to the Board the prescribed fee.

**PART VI — INTERNSHIP QUALIFYING EXAMINATIONS AND REMEDIAL TRAINING****18. Internship qualifying examination**

Any person who has qualified outside Kenya shall be required to engage in internship and, unless exempted under rule 23, shall be required to pass an internship qualifying examination (in this Part referred to as “the examination”), which may be written or oral or both, recognized and approved by the Board and which is of equivalent standard to the qualifying examinations in medicine or dentistry by the universities in Kenya approved by the Board.

**19. Conduct of examination**

(1) The examination shall be conducted by the Committee and shall be held at least twice a year.

(2) All candidates for the examination shall undergo an attachment at a training institution approved by the Board for a period of four months during which time they must rotate in all relevant clinical areas.

(3) A candidate shall not be eligible to sit for the examination if he or she fails to produce

- (a) his or her identity card or passport;
- (b) a letter of successful completion of attachment specified in sub-rule (2); and
- (c) certified copies of the degree certificate and other testimonials.

**20. Remedial training**

(1) A candidate who fails the examination shall be required to undergo a period of remedial training in those disciplines in which in the opinion of the Committee he or she has insufficient or inadequate knowledge.

(2) A remedial training period shall as far as possible be continuous and shall not exceed a total of twelve months.

(3) On expiry of a remedial training period, a written report shall be submitted to the Board by the candidate's supervisor through the administrator or medical superintendent of the relevant hospital or institution.

(4) A person shall be required to undergo remedial training if he or she—

- (a) fails to pass the examination;
- (b) does not satisfy his supervisors during his or her internship;
- (c) has been subject to disciplinary action arising out of professional incompetence.

**21. Repeat examinations**

A person who fails the examination shall be allowed two more attempts which shall be made during the remedial training period, and any person who fails the examination three times shall be deemed unsuitable for internship or registration.

**22. Fees for repeat examinations**

A candidate for the examination shall pay the prescribed fee, each time it is attempted.

**23. Exemption from examination**

A medical or dental graduate who is a holder of a degree or its equivalent from a university within the East African Community which is recognized by the Joint East African Medical and Dental Boards or Councils shall be eligible for exemption from the examination.

**24. Voluntary remedial training**

A period of remedial training may be undergone voluntarily by any person before attempting the examination.

**25. Offences**

(1) An administrator of a medical institution in Kenya which, without prior approval of the Board, offers internship to a person who has neither passed the examination nor been exempted under rule 23, commits an offence.

(2) A person who has neither passed the examination nor been exempted under rule 23 and who, without prior approval of the Board, undergoes internship, commits an offence and is liable to a fine not exceeding ten thousand shillings or to a term of imprisonment not exceeding twelve months, or to both.

**PART VII — INTERNSHIP****26. Internship**

A person who is a degree holder, diploma or other qualification which is recognized by the Board or who has passed the internship qualifying examination referred to in Part VI shall undergo a prescribed period of internship.

**27. Licence guidelines for internships**

(1) An intern shall receive from the Board at the commencement of the period of internship—

- (a) an internship licence, on payment of the prescribed fee;
- (b) a copy of “Guide Lines for interns” detailing all the disciplines and areas which he or she is expected to cover during the prescribed period of internship before being considered for registration.

(2) An intern who undertakes internship training without a licence, commits an offence.

**28. Supervision for interns**

During the period of internship, an intern shall be under the supervision and guidance of the employing institution in conjunction with the approved supervisors and he or she shall be offered every opportunity and facility to enable him or her undergo his or her internship.

**29. Internship assessment form**

On completion of internship, an intern shall submit a duly completed form and logbook to the Board through the immediate supervisors of the recognized institution where he or she has completed his or her internship, and through the head of that institution.

**30. Procedure upon receipt of assessment form**

Upon receipt of the supervisor’s recommendations, the Board shall issue a registration certificate, or direct the intern to undergo a further period of internship in the disciplines in which his or her performance may have been found to be unsatisfactory; and such further period of internship may be undertaken in the same or a different institution or institutions for such period as advised by the supervisor.

**31. Conditions for recognized institutions**

(1) Institutions which shall be recognized by the Board for internship must meet the following requirements—

- (a) they must have gazetted as approved medical institutions in accordance with the Act;
- (b) provision of constant supervision of interns, in the case of medical interns, by at least one specialist and one other full-time medical practitioner with postgraduate qualification in each of the following disciplines—

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- (i) medicine;
- (ii) paediatrics;
- (iii) obstetrics and gynaecology;
- (vi) surgery,

and such other specialists or disciplines as may be specified by the Board, from time to time;

- (c) provision of constant supervision of interns, in the case of dental interns, by at least one specialist and one full-time dental practitioner with postgraduate qualification in each of the following disciplines—
  - (i) oral and maxillofacial surgery;
  - (ii) prosthetics, restorative dentistry or periodontology;
  - (iii) paediatric dentistry or orthodontics,

and such other specialists or disciplines as may be specified by the Board, from time to time;

- (d) availability of a medical library and resource centre; and
- (e) provision of a fully functional dental laboratory in the case of dental interns.

(2) The Board shall inspect every institution offering internship training to ensure compliance with this rule, from time to time.

### **32. Publication of list of recognized institutions**

The Board shall each year publish in the Kenya Gazette or in any other manner as may be approved by the Board, a list of all recognized institutions where internship may be undertaken

### **33. Observance of Board guidelines**

All recognized institutions that provide internship training shall adhere to the guidelines set out by the Board.

### **34. Withdrawal of recognition**

Any institution that fails to meet the minimum requirements set out in rule 31 shall have its recognition withdrawn by the Board.

## **PART VIII — CONTINUING PROFESSIONAL DEVELOPMENT**

### **35. Conduct of continuing professional development programmes**

(1) The Board shall conduct education programmes as may from time to time be deemed relevant and may accredit any programme conducted by any institution, body or other organization (in these Rules referred to as “the sponsoring agency”).

(2) The Board shall assign a unit or units of continuing education for each programme to be used in awarding credits to members participating thereof.

### **36. Award of credits and certificates**

The Board or the sponsoring agency may award credits to participants in the continuing education programme and shall issue certificates of participation to all participants who have successfully completed the programme.

### **37. Record of accredited programmes**

(1) The Board shall keep a record of all accredited programmes showing their sponsoring agencies, the description of any such programmes and whether the sponsoring agency has filed a record of its participants.

(2) The Board or the sponsoring agency shall keep a record of the participants in any programme, showing whether the participants successfully completed their programmes or not.

(3) The sponsoring agency shall, upon the completion of any programme, file a return with the Board.

### **38. Requirement for continuing educational programmes**

Every continuing professional development or education programme shall emphasize ethical, practical and professional aspects of clinical practice or strategic health planning relevant to the practice of medicine and must be aimed at the improvement of the professional competence of the medical and dental practitioners.

### **39. Application for accreditation**

(1) Any sponsoring agency seeking accreditation shall make an application in that regard to the Board in the prescribed form.

(2) The Board shall consider the application for accreditation and shall approve or reject the same, having regard to the following—

- (a) whether the objective of the programme is that of the improvement of the professional competence of medical and dental practitioners;
- (b) whether the applicant has the infrastructure sufficient and conducive for disseminating the programmes;
- (c) whether the applicant has the expertise and resources necessary for achieving the goals of continuing professional development or continuing education programme;
- (d) whether the programme is an educational programme;
- (e) whether the programme is an activity dealing with the subject matter that is directly relevant to the practice of medicine and dentistry;
- (f) whether the method of presentation sought to be utilised is appropriate for dissemination of the relevant skills and knowledge to the participants; and
- (g) any other matter that may appear relevant.

### **40. Participation fees**

The Board may prescribe a fee to be paid by participants taking part in any continuing education programme, and, in the case of an accredited programme, the Board shall approve any such fee levied by a sponsoring agency.

### **41. Proof of compliance**

Every application for an annual retention certificate shall be accompanied by proof that the applicant has secured five units upon attending and participating in the continuing education programmes during the preceding year.

### **42. Delegation of functions**

The Board may delegate any or all of its functions under these Rules to a committee appointed by itself.

### **43. Revocation of L.N. 156/1979 and L.N. 132/2005**

The Medical Practitioners and Dentists (Registration, Licensing, Assessment and Internship) Rules, 1979, and the Medical Practitioners and Dentists (Continuing Professional Development) Regulations, 2005, are revoked.

[Subsidiary]

## SCHEDULE

[r.6]

## A. MAJOR SPECIALITIES IN MEDICAL PRACTICE

1. Anaesthesia.
2. Obstetrics and Gynaecology.
3. Internal medicine.
4. Paediatrics and child health.
5. Pathology.
6. Psychiatry.
7. Radiology.
8. General surgery.
9. Cardiothoracic surgery.
10. Neurosurgery.
11. Ophthalmology.
12. Orthopaedic surgery.
13. Ear, Nose and Throat (Otorhinolaryngology).
14. Plastic and reconstructive surgery.
15. Family Medicine.
16. Geriatrics.
17. Occupational Medicine.
18. Dermatology.
19. Palliative medicine.
20. Microbiology.
21. Public Health.

## B. SUB SPECIALITIES IN MEDICAL PRACTICE

1. Anaesthesia—
  - (a) Critical care;
  - (b) Neuro;
  - (c) Cardiac;
  - (d) Paediatric.
2. Internal Medicine—
  - (a) Cardiology;
  - (b) Neurology;
  - (c) Nephrology;
  - (d) Gastroenterology;
  - (e) Rheumatology;
  - (f) Venereology;
  - (g) Communicable diseases;
  - (h) Tropical medicine;
  - (i) Haematology;



- (j) Endocrinology;
- (k) Immunology;
- (l) Chest and respiratory medicine.

**3. Obstetrics and Gynaecology—**

- (a) Endocrinology;
- (b) Oncology;
- (c) Infertility;
- (d) Maternal and foetal medicine;
- (e) Adolescent medicine;

**4. Pathology—**

- (a) Forensic medicine;
- (b) Immunology;
- (c) Haematology;
- (d) Microbiology;
- (e) Clinical pathology/clinical chemistry;
- (f) Cytology.

**5. Psychiatry—**

- (a) Paediatric;
- (b) Adult psychiatry.

**6. Radiology—**

- (a) Radiodiagnosis;
- (b) Nuclear medicine.

**7. Paediatrics—**

- (a) Cardiology;
- (b) Neurology;
- (c) Nephrology;
- (d) Gastroenterology;
- (e) Rheumatology;
- (f) Haematology;
- (g) Neonatology;
- (h) Endocrinology;
- (i) Tropical medicine;
- (j) Immunology;
- (k) Venereology;
- (l) Communicable diseases;
- (m) Chest and respiratory medicine.

**8. Surgery—**

- (a) Neurosurgery;
- (b) Cardiothoracic surgery;
- (c) Paediatric surgery;
- (d) Urology;
- (e) Plastic surgery;
- (f) Vascular surgery.

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**9. Cardiothoracic surgery—**

- (a) Cardiac and thoracic surgery;
- (b) Vascular surgery.

**10. Neurosurgery—**

- (a) Adult neurosurgery;
- (b) Paediatric neurosurgery.

**11. Ophthalmology.****12. Orthopaedics.****13. Ear, Nose and Throat.****14. Plastic surgery.****15. Family medicine.****16. Geriatrics.****17. Occupational medicine.****C. MAJOR SPECIALITIES IN DENTISTRY — ORAL AND MAXILLOFACIAL SURGERY****1. Orthodontics.****2. Prosthodontics.****3. Periodontology.****4. Oral and maxillofacial Surgery.****5. Restorative Dentistry.****6. Paediatric dentistry.****7. Dental radiology.****8. Oral Public Health.****9. Oral medicine.****10. Oral pathology.****11. Science and dental materials.****12 Immunology, Endodontics.****13. General Dental Practice.**

*Note* — The Board may approve such other specialities, from time to time.

## SCHEDULE

[L.N. 97/2014]

*A . Recognized institutions at which internship  
may be undertaken by a medical practitioner:*

1. Aga Khan Hospital – Kisumu.
2. Aga Khan Hospital – Mombasa.
3. Aga Khan University Hospital.
4. AIC Kijabe Hospital.
5. AIC Litein Hospital.
6. Bungoma District Hospital.
7. Busia District Hospital.
8. Chuka District Hospital.
9. Coast Provincial General Hospital.
10. Consolata Hospital, Mathari.
11. Defence Forces Memorial Hospital.
12. Embu Provincial General Hospital.
13. Garissa District Hospital.
14. Gatundu District Hospital.
15. Homabay District Hospital.
16. Isiolo District Hospital.
17. Iten District Hospital.
18. Jaramogi Oginga Odinga Teaching & Referral Hospital.
19. Kabarnet District Hospital.
20. Kajiado District Hospital.
21. Kakamega Provincial General Hospital.
22. Kangundo District Hospital.
23. Kapenguria District Hospital.
24. Kapkatet District Hospital.
25. Kapsabet District Hospital.
26. Karatina District Hospital.
27. Kendu Adventist Hospital.
28. Kenyatta National Hospital.
29. Kericho District Hospital.
30. Kerugoya District Hospital .
31. Kiambu District Hospital.
32. Kilifi District Hospital.
33. Kisii Level 5 Hospital.
34. Kisumu District Hospital.

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35. Kitale District Hospital.
36. Kitui District Hospital.
37. Machakos Level 5 Hospital.
38. Makueni District Hospital.
39. Malindi District Hospital.
40. Mama Lucy Kibaki Hospital.
41. Maragua District Hospital.
42. Maua Methodist Hospital.
43. Mbagathi District Hospital.
44. Meru District Hospital.
45. Migori District Hospital.
46. Moi Hospital – Voi.
47. Moi Teaching & Referral Hospital.
48. Mukurweini District Hospital.
49. Murang'a District Hospital.
50. Mwingi District Hospital.
51. Naivasha District Hospital.
52. Nakuru Provincial General Hospital.
53. Nanyuki District Hospital.
54. Narok District Hospital.
55. Nazareth Mission Hospital.
56. North Kinangop Catholic Hospital.
57. Nyahururu District Hospital.
58. Nyamira District Hospital.
59. Nyeri Provincial General Hospital.
60. Our Lady of Lourdes Mwea Hospital.
61. PCEA Chogoria Hospital.
62. PCEA Kikuyu Hospital.
63. PCEA Tumutumu Hospital.
64. Siaya District Hospital.
65. Tenwek Mission Hospital.
66. The Karen Hospital.
67. The Mater Hospital.
68. Thika Level 5 Hospital.
69. Vihiga District Hospital.
70. Webuye District Hospital.
71. Msambweni District Hospital.

*B Recognized institutions at which internship may be undertaken by a dental practitioner:*

1. Kenyatta National Hospital.
  2. University of Nairobi–School of Dental Sciences.
  3. Coast Provincial General Hospital.
  4. Defence Forces Memorial Hospital
  5. Jaramogi Oginga Odinga Teaching & Referral Hospital.
  6. Machakos Level 5 Hospital.
  7. Moi Teaching and Referral Hospital.
  8. Nyeri Provincial General Hospital.
  9. Rift Valley Provincial Hospital.
  10. Kakamega Provincial General Hospital.
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**THE MEDICAL PRACTITIONERS AND DENTISTS  
(INSPECTIONS AND LICENSING) RULES, 2014**

[L.N. 154/2014.]

**PART I – PRELIMINARY****1. Citation**

These Rules may be cited as the Medical Practitioners and Dentists (Inspections and Licensing) Rules, 2014.

**2. Interpretation**

In these Rules, unless the context otherwise requires —

**"advertise"** means to issue or cause to be issued a sign, notice, circular, label or wrapper or to make any announcement orally or by means of electronic or print media;

**"approved clinical laboratory"** means a private clinical laboratory which is covered by a pathologist and is so equipped as to enable the carrying out of investigations in clinical chemistry, haematology and microbiology;

**"approved medical institution"** means a Government or private hospital or nursing home which has been declared by the Board to be approved institution;

**"clinic"** means a consulting office or room or an outpatient department without beds used by a medical or dental practitioner for the diagnosis and treatment of diseases or the giving of medical or dental advice and instructions;

**"clinical laboratory"** means premises or equipment for examining specimens for the purpose of providing information on diagnosis, treatment or prevention of diseases;

**"Committee"** means the Inspections and Licensing Committee established under rule 3;

**"general practice"** means the practice of general medicine or dentistry other than specialist practice as defined in these Rules;

**"hospital"** means an institution which has, in addition to resident medical practitioners or dentists, an operating theatre and a mortuary;

**"immediate supervision"** means being available to give help and guidance when required;

**"ionizing radiation"** means rays, x-rays, gamma rays, alpha and beta particles, high speed electrons, neutrons, protons and other nuclear particles or electromagnetic radiation capable of producing ions directly or indirectly in their passage through matter;

**"laboratory medicine"** means the practice of all or any of the following disciplines namely, pathology, clinical chemistry, microbiology and parasitology, haematology, morbid anatomy and histology, cytology, immunopathology, forensic pathology and other disciplines relevant thereto;

**"licence"** means a licence to engage in full-time or part-time practice in a calendar year;

**"locum"** means a registered medical practitioner or dentist substituting and providing services for another registered medical practitioner or dentist;

**"maternity home"** means any premises used for the reception and management of expectant women or of women who have given birth within the preceding six weeks;

**"medical laboratory technician"** means a holder of a certificate in medical laboratory technology issued by the Medical Centre or similar institution which is recognized by the Ministry of Health;

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**"nursing home"** means any premises howsoever named or described which is used for the reception of, and for provision of medical care and nursing for, persons suffering from any sickness, injury or infirmity and having a mortuary and an outpatient department, but does not include premises maintained or directly controlled by the Government or a County;

**"private clinic"** means a clinic where a private practice is carried out;

**"private practice"** means giving medical, surgical or dental advice, attendance or performing an operation, or engaging in radiological or clinical laboratory medicine, for a fee, at a facility that is not for the Government;

**"radiographer"** means a holder of a diploma in radiography obtained from the Medical Centre or such institution which is recognized by the Ministry of Health;

**"radiographic film processor"** means a holder of a certificate attesting to his proficiency in radiographic film processing, obtained at the Medical Centre or such similar institution which is recognized by the relevant regulatory authority;

**"radiologist"** means a specialist in diagnostic medical imaging;

**"single discipline pathologist"** means a medically qualified person whose training has not covered all the disciplines of clinical laboratory medicine, but who is a specialist in any of the disciplines in pathology;

**"specialist"** means a medical or dental practitioner who has completed an approved training programme in a particular discipline in medicine or dentistry, and who has acquired a recognized post-graduate qualification or its equivalent, and who thereafter has gained sufficient experience and shown to the Board's satisfaction, adequate skills, in his chosen discipline; and

**"specialist practice"** means the practice of medicine or dentistry in a specialized discipline as specified in these Rules.

## PART II — ESTABLISHMENT OF THE INSPECTIONS AND LICENSING COMMITTEE

### 3. Establishment of the Committee

(1) There is established a Committee to be Known as the Inspections and Licensing Committee —

(2) The functions of the Committee shall be to —

- (a) issue licences to all eligible medical and dental practitioners;
- (b) issue licences to private, mission and faith-based hospitals, medical and dental centres, dispensaries, clinics and health centres;
- (c) issue temporary licences to foreign medical and dental practitioners;
- (d) approve and license the premises for the practice by medical and dental practitioners;
- (e) inspect clinics, health centres, medical and dental centres, mortuaries, maternity and nursing homes and give such orders as appropriate;
- (f) inspect all hospitals including faith-based hospitals and Government hospitals and give such orders as appropriate;
- (g) review, whenever it is in its opinion necessary, all applications for licences to engage in private practice by medical and dental practitioners;
- (h) maintain a register of all persons and facilities licensed under these Rules;
- (i) review the fees charged in private practice by medical and dental practitioners, from time to time; and
- (j) undertake any other activity that may be necessary for the fulfillment of its functions under these Rules.



**4. composition of the committee**

(1) The Committee shall be composed of five members appointed by the Board from among its members and the chief executive officer.

(2) The Committee shall elect its Chairman and shall have powers to co-opt not more than three other persons who are not members of the Board, for the purposes of transacting the business of the Committee, whenever it is expedient.

(3) The persons co-opted under sub-rule (2) may not vote in any matter before the Committee.

(4) The Committee shall report its findings to the Board.

(5) Subject to these Rules, the Committee may regulate its own procedure.

**PART III — GENERAL PRACTICE****5. Practising licence, temporary licence, etc**

(1) Subject to section 15 of the Act, no person shall engage in practice as a medical or dental practitioner unless that person holds a valid practising licence issued under these Rules.

(2) The Board shall grant temporary licences to eligible foreign medical and dental practitioners to perform specific work or works in specific institutions in Kenya.

(3) A licence issued under sub-rule (2) shall be for a period not exceeding twelve (12) months and shall be renewable for a maximum period of three years.

(4) Notwithstanding the provisions of sub-rule (3), any foreign medical or dental practitioner who seeks to extend his licence beyond the period of three years as specified under sub-rule (3), must apply to the Board for permanent registration.

**6. Eligibility to practice**

(1) A medical practitioner or dentist shall be eligible for a licence to engage in private practice on his own behalf either full or part-time or in the employment, either full or part-time, of a private practitioner or group of private practitioners, if he has worked continuously in Kenya on a full-time basis in a salaried post in a Government or private hospital or in any non-profit making approved medical institution for a period of not less than one year.

(2) Notwithstanding anything contained in sub-rule (1), the Board may, if it is satisfied that it is in the public interest to do so, allow a medical or dental practitioner under sub-rule (1) to be issued with a licence entitling him to engage in practice as a salaried employee of a private practitioner or group of private practitioners.

**7. Application for a licence**

(1) An application for a licence to engage in private practice shall be as in Form VI set out in the Medical and Dental Practitioners (Forms and Fees) Rules, and shall be accompanied by the prescribed fee. (

(2) An application for renewal of a licence shall be made under this Part and shall be made not less than six weeks before the date of expiry of the licence.

(3) An application for permission to change the premises to which the licence relates may be made at any time.

(4) The Board may, on application —

- (a) for renewal of a licence; or
- (b) for change of premises,

request such further relevant information from an applicant as it deems fit.

(5) A person who includes, or causes to be included, in the application, or in response to a request for information from the Board, information which he knows or has cause to believe is incorrect, shall be guilty of an offence.

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[Subsidiary]**8. Conditions in licences**

(1) The Board may impose any conditions on a licensee under this Part and in particular a condition that the practice of licences the licensee shall not conflict with the terms and conditions of his employment.

(2) A licence shall be issued in respect only of the premises named therein and may not apply to any other premises unless the authority of the Board for it to do so has previously been obtained.

(3) A licensee shall display the licence in a conspicuous position at the premises to which it relates and any licensee who fails to do so shall be guilty of an offence.

(4) The Board may cancel a licence if any of the conditions imposed in the licence are contravened.

**9. Notice of refusal to grant a licence, etc.**

(1) The Board shall, before —

- (a) refusing to grant or renew a licence; or
- (b) refusing to allow a change of premises to which the licence relates; or
- (c) canceling the licence,

give to the applicant or licensee not less than twenty-eight days' notice in writing stating its intention so to act and such notice shall inform the applicant or licensee that he may within twenty-one days of receipt of the notice inform the Board in writing whether he wishes to be heard on the question of the proposed refusal or cancellation.

(2) Where the applicant or licensee informs the Board in writing under sub-rule (1) that he wishes to be heard, the Board shall not effect a refusal or cancellation before it has given him an opportunity to show cause why the application or licence should not be refused or cancelled.

(3) Where the Board, after complying with this rule, refuses to grant or renew a licence, or cancels a licence, it shall inform the applicant or licensee of its decision within fourteen days of the expiry of the period of twenty-eight days referred to in sub-rule (1) or where the applicant or licensee has been heard, within fourteen days of the hearing; and the Board shall inform the applicant or licensee of the reason for its decision.

(4) An appeal to the High Court under section 15 (6) of the Act against the decision of the Board under this rule shall be made within thirty days of the receipt of the decision.

**10. Locums**

(1) A medical practitioner or dentist who wishes to work as a locum for another practitioner shall be required to satisfy requirements for eligibility for a licence to engage in private practice specified in rule 6.

(2) A prospective locum shall make an application in Form VI set out in the Medical practitioners and Dentists (Forms and Fees) Rules stating the period during which he requires to work as a locum:

Provided that in the case of an emergency, a medical practitioner or dentist may act as a locum for a period not exceeding fourteen days during which time he shall inform the Board of his action and make a formal application under this rule.

(3) Where the duration of a locum practice is not to exceed six weeks the Registrar or Chairman may give his written consent to the applicant to practice as a locum in the form specified in the First Schedule and no fee shall be payable by the applicant.

(4) Where an applicant wishes to work as a locum for a period exceeding six weeks he shall obtain a licence to engage in private practice in Form VII set out in the Medical Practitioners and Dentists (Forms and Fees) Rules and pay the prescribed fees. The fee payable shall be fifty per cent of the private practice licence in one's category.

## PART IV — PRIVATE CLINICS

**11. Interpretation**

In this Part, "licensee" means a medical and dental practitioner licensed to operate a private clinic under rule 12.

**12. Board to approve Premises.**

(1) No private practitioner shall operate a private clinic unless the premises where the clinic is situated has been inspected and approved by the Board.

(2) A private practitioner who wishes to operate a private clinic shall apply to the Board in writing for permission to use the premises intended for use as a private clinic before applying for a licence to engage in private practice; and the Board shall grant or refuse to grant a licence under this rule within thirty days of receiving the application.

(3) A licence to operate a private clinic shall be in Form VIII set out in Medical Practitioners and Dentists (Forms and Fees) Rules, and shall be issued on payment of the prescribed fee.

**13. Conditions for issue of a licence under this Part.**

A licence under rule 12 shall be issued subject to such conditions as the Board prescribes including in any case the conditions that the licensed premises shall —

- (a) be kept in good order and a good state of repair;
- (b) be kept reasonably secure from unauthorized entry;
- (c) conform to the minimum requirements set out in Part A or Part B of the Second Schedule, as the case may be and any other written law, and in particular the Public Health Act (Cap. 242);
- (d) not be a residential building except with special permission from the Board.

**14. Restriction on number of private Clinics**

A private medical or dental practitioner shall be licensed to operate by the Board not more than two clinics.

**15. License to indicate name, etc**

(1) A licensee shall indicate his name and qualifications outside his clinic in an unostentatious manner and in accordance with the "Code of Professional Conduct and Discipline" and the name and qualifications so indicated shall conform with the provisions of paragraph 4 of Part A of the Second Schedule.

(2) A licensee who —

- (a) uses any words implying that a private clinic is a hospital or a nursing home;
- (b) advertises a private clinic in any manner whatsoever to the general public,

shall be guilty of an offence.

**16. Licensee's assistants**

(1) A licensee may employ as an assistant any person who has undergone a recognized training in medicine, dentistry, nursing or midwifery in an approved training institution and who is not registered as a medical practitioner or dentist to undertake defined duties under the immediate supervision of the licensee or a registered practitioner employed by him.

(2) Where any assistant employed under sub-rule (1) undertakes or offers to undertake any form of medical or dental treatment independently without the immediate supervision of a medical practitioner or dentist he shall be guilty of an offence.

(3) Sub-rule (2) shall be in addition to and not in derogation of the provisions of section 22 of the Act.

[Subsidiary]

**17. Keeping of essential drugs**

(1) A licensee shall keep in his private clinic adequate stocks of essential drugs listed in paragraph 3 of Part A in the Second Schedule.

(2) A licensee shall keep an accurate record of all drugs to which the Pharmacy and Poisons Act (Cap. 244) and the Dangerous Drugs Act (Cap. 245) apply.

**18. Notification of disease, etc**

(1) A licensee shall immediately notify the medical officer of health of any of the notifiable diseases set out in Third Schedule to these Rules which he treats in his clinic.

(2) A licensee shall immediately notify the police in the event of any death occurring in his clinic and supply to them all relevant information concerning the death.

**19. Manner of dressing**

A licensee shall, whilst on duty, at all times be dressed and groomed in such a manner as to portray a respectable image to the public and in particular he shall observe the standards of ethics laid down in the "Code of professional Conduct and Discipline".

**20. Clinical radiological laboratories**

(1) A private clinic may not include a clinical radiological laboratory unless the practitioner who operates the clinic —

- (a) is himself qualified in the use of ionizing radiation; or
- (b) employs a radiographer,

and in either case the person referred to in paragraph (a) or (b) personally undertakes the radiological examination of patients.

(2) A private clinic may not include a clinical laboratory unless —

- (a) examination of the specimens obtained from patients in the laboratory is undertaken by the private practitioner personally or a qualified medical laboratory technician or technologist;
- (b) examinations are limited in the way prescribed in sub-rule (3).

(3) A clinical laboratory may only be used for the purposes of undertaking investigations of the following nature —

- (a) haemoglobin;
- (b) blood slides;
- (c) urinalysis;
- (d) stool microscopy;
- (e) occult blood tests;
- (g) gram stains;
- (e) special smears

(4) Neither a clinical radiological laboratory nor a clinical laboratory may be used as a referral laboratory for a practitioner who does not operate, or is not employed by the clinic concerned and any person who in such laboratory —

- (a) undertakes the examination of patients or specimens from patients: or
- (b) heats patients, who have been referred from outside the practice concerned,

shall be guilty of an offence.

**PART V — NURSING HOMES AND HOSPITALS****21. Inspections of nursing homes and hospitals**

(1) All nursing homes and hospitals shall be subject to inspection by the Board.

(2) The operator of a nursing home or hospital shall submit to the Board once in every twelve months lists of —

- (a) all medical practitioners and dentists in their employment; and
- (b) all medical practitioners and dentists who are authorized to use their premises, indicating in each case the authorized place for use as a private clinic

## **22. Responsibilities of owners, etc of nursing homes and hospitals**

(1) It shall be the responsibility of the owner and the managing body of a nursing home or private hospital to acquaint themselves fully with —

- (a) the qualifications; and
- (b) the professional conduct,

of all medical and dental practitioners working at the nursing home or private hospital and they shall consult the Board in case of any doubt.

(2) The owner and the managing body of a nursing home or private hospital, as well as the medical or dental practitioners concerned, shall be responsible for any instance of professional misconduct occurring within the premises about which they know or ought reasonably to have known.

## **23. Emergencies, etc**

The administrators of approved medical institutions shall ensure that no medical or dental practitioners working there engage in private practice outside the area of specialization and competency for which they have been licensed except in cases —

- (a) of emergency; or
- (b) where practitioners with the requisite specializations are not reasonably available.

### **PART VI — PRIVATE CLINICAL LABORATORY MEDICINE**

## **24. Licence to practice clinical laboratory medicine**

(1) The Board may grant a licence in the Form VII set out in the Medical Practitioners and Dentists (Forms and Fees) Rules to a medical practitioner to practice private clinical laboratory medicine if the practitioner is both eligible under rule 6 and a pathologist.

(2) The Board shall publish annually in the print or electronic media, a list of licensed private clinical laboratories.

## **25. Savings**

(1) Subject to sub-rules (2) and (3), a registered medical practitioner who was operating a private clinical laboratory before the commencement of these Rules may, notwithstanding rule 23 (b), continue to operate.

(2) A practitioner referred to in sub-rule (1) shall make application in the Form VI set out in the Medical Practitioners and Dentists (Forms and Fees) Rules within three months of commencement of these Rules, for a licence under rule 24.

(3) Where the Board refuses to issue a licence applied for under this rule, the practitioner concerned shall cease from the date of refusal, to operate the private clinical laboratory concerned.

## **26. Requirements for clinical laboratories**

(1) A clinical laboratory shall —

- (a) conform to the standards stipulated in the Fourth Schedule;
- (b) be approved by the Board before starting to function as such; and
- (c) be at all times supervised by a pathologist.

(2) The Board may inspect any premises used as a clinical laboratory at any reasonable time.

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[Subsidiary]

(3) Any person who hinders or obstructs an officer of the Board acting in the course of his duty under sub-rule (2) shall be guilty of an offence.

### **27. Investigations carried out in clinical laboratory medicine**

A general or single discipline pathologist, a general practitioner and a medical laboratory technician may respectively undertake such investigations in clinical laboratory medicine as set out in rule 20 (3) and the Fourth Schedule.

### **28. Duties of a practitioner operating a clinical laboratory**

A medical practitioner operating a clinical laboratory —

- (a) shall provide diagnostic aid services for the community by meeting the needs of hospitals, medical and dental practitioners and other health services and in so doing he may monitor individual patients, when requested to do so, by providing appropriate laboratory control of therapy;
- (b) shall provide consultant advisory services in all aspects of laboratory investigations, including the interpretation of results and shall advise on any further appropriate investigations;
- (c) shall collaborate in systematic education and training for all members of laboratory staff;
- (d) may collaborate in the development study and laboratory control of new methods of treatment, whilst adhering to the laid down medical ethics;
- (e) may provide laboratory facilities for and advise on approved research projects undertaken by clinicians; and
- (f) may undertake basic or applied research on pathology problems.

### **29. Fees**

A private practitioner in laboratory medicine may charge fees in accordance with the Board's prescribed fee in private laboratory medicine.

### **30. Offences**

A person who contravenes any of the provisions of this Part shall be guilty of an offence.

#### **PART VII — PRIVATE CLINICAL RADIOLOGICAL LABORATORY MEDICINE**

### **31. Licence to practice clinical radiological medicine**

(1) The Board may grant a licence in Form VII set out in the Medical Practitioners and Dentists (Forms and Fees) Rules, to a medical practitioner to engage in private practice in clinical radiological medicine if the practitioner is both eligible under rule 6 and a radiologist.

(2) The Board shall publish annually in the print or electronic media, a list of licensed private clinical radiological laboratories.

### **32. Savings**

(1) Subject to sub-rules (2) and (3), a registered medical practitioner who was operating a private clinical radiological laboratory, other than a laboratory providing only screening facilities, before the commencement of these rules may, notwithstanding rule 31, continue to operate.

(2) A practitioner referred to in sub-rule (1) shall make an application in Form VI set out in the Medical Practitioners and Dentists (Forms and Fees) Rules, within three months of commencement of these Rules, for a licence under rule 31.

(3) Where the Board refuses a licence applied for under this rule the practitioner concerned shall cease from the date of refusal to operate the private clinical radiological laboratory concerned.

**33. Requirements for a clinical radiological laboratory**

A clinical radiological laboratory shall —

- (a) conform to the standards stipulated in the Fifth Schedule;
- (b) be approved by the Board before starting function as such;
- (c) be at all times supervised by a radiologist;
- (d) keep an accurate record of all clinical radiological examinations undertaken by it.

**34. Undertaking of operations in a clinical radiological laboratory**

(1) A radiologist, general practitioner, radiographer or radiographic film processor may undertake such operations in a clinical radiological laboratory as may from time to time be specified by the Board in guidelines to be issued by it.

(2) A practitioner operating a clinical radiological laboratory shall carry out radiological examinations only at the request of a registered medical or dental practitioner or a practitioner who is licenseC ,inder section 15 of the Act.

**35. Duties of the owner of a clinical radiological laboratory**

(1) The owner and the management body of a clinical radiological laboratory shall ensure that all staff and the public are protected from the hazards of radiation and that the staff comply with the provisions of the Fifth Schedule.

(2) All staff employed in radiation work shall undergo periodical medical examination at least once in every two years and a certificate shall be issued in respect thereof.

**36. Screening facilities**

(1) No clinical radiological laboratory which provides only screening facilities shall be licensed under these Rules.

(2) A person who publicly offers or advertises screening facilities shall be guilty of an offence and liable to a fine not exceeding five thousand shillings or to imprisonment for a term no exceeding three months or to both.

**37. Fees**

A private practitioner in radiological work may charge fees in accordance with the Board's prescribed fees.

**PART VIII —MISCELLANEOUS****38. Board to prescribe fees**

(1) The Board shall prescribe the fees to be charged for visits, consultations, surgical, anaesthesia and other related procedures in general practice and specialist practice.

(2) A receipt shall be issued for any fee charged for any medical or dental services rendered, including laboratory and radiological services.

(3) The Board shall have powers to arbitrate in all complaints regarding fees in private practice.

**39. General penalty**

Where a person is guilty of an offence under these rules for which no penalty is expressly provided he shall be liable to a fine not exceeding ten thousand shillings or imprisonment for a period not exceeding twelve months or to both such fine and imprisonment.

**40. Legal proceedings, etc**

Whether or not proceedings are brought against any person for an offence under these rules the Board may, where it is satisfied that there has been a contravention of any of these Rules or of the conditions of any licence granted thereunder, and notwithstanding that such contravention

[Subsidiary]

is not an offence, cancel or refuse to renew any licence granted thereunder, and in such case rule 6 shall apply.

#### **41. Mode of serving notices**

Wherever under these Rules, notice is to be served on an applicant or information is to be supplied to him, the notice or letter containing the information shall be sent to him either by registered post or by hand delivery, or by email, whichever is convenient.

#### **42. Revocation of L.N. 182 of 1979**

The Medical Practitioners and Dentists (Private Practice) Rules, 1979, are revoked.

### **SCHEDULE**

Rule 10.(3))

#### **A. MAJOR SPECIALITIES IN MEDICAL PRACTICE**

Medical Practitioners and Dentists Board I

P.O. Box 30016

NAIROBI

.....

Dr. .... Reg. No. ....)

P.O. Box .....

.....

.....

Dear Sir,

#### **RE: APPLICATION FOR LOCUM**

I acknowledge your letter dated

Ref. No. .... applying for a locum.

Permission is hereby granted for Dr. ....

Reg. No..... to work as a locum in your place of

practice during your absence from .....

to .....

yours faithfully,

*Registrar/Chairman.*



## THE MEDICAL PRACTITIONERS AND DENTISTS (FITNESS TO PRACTICE) RULES, 2016

[L.N. 128/2016.]

### 1. Citation

These Rules may be cited as the Medical Practitioners and Dentists (Fitness to Practice) Rules, 2016.

### 2. Interpretation

In these Rules, unless the context otherwise requires —

**"Board"** has the meaning assigned to it under section 2 of the Act;

**"Committee"** means the Fitness to Practice Committee established under rule 3;

**"fitness to practise"** in relation to a medical or dental practitioner or student, means a person having the necessary skills, knowledge and character to practise safely and effectively and includes acts that may affect public protection or confidence in the profession;

**"impairment"** means a mental, social, or physical condition which affects or has the potential to affect competence, attitude, judgement or performance of professional acts by a registered practitioner or a medical or dental student and may include —

- (a) serious or persistent failure to meet institutional or professional minimum standards of practise;
- (b) reckless or deliberate acts that potentially affect or harm self, colleagues and patients, relatives of patients and others;
- (c) concealing professional errors or impeding investigations into the same;
- (d) sexual misconduct or indecency;
- (e) improper relationships with service users or colleagues;
- (f) failure to respect the autonomy of service users;
- (g) violence or threatening behaviour; (h) dishonesty, fraud or an abuse of trust; (i) exploitation of a vulnerable person; (j) substance abuse or misuse;
- (h) dishonesty, fraud or an abuse of trust; (i) exploitation of a vulnerable person; (j) substance abuse or misuse;
- (i) exploitation of a vulnerable person; (j) substance abuse or misuse;
- (j) substance abuse or misuse;
- (k) health problems which the practitioner or student has not addressed, and which may affect safety or confidence of the service users;
- (l) any other equally serious activities, behaviours, utterances which undermine public confidence in the medical profession;

**"intervention"** means any medical, social or other process, procedure or activity conducted with a view to correcting an impairment in a medical or dental practitioner or student;

**"practitioner"** means a person registered under the Act as a medical practitioner or dentist; and

**"student"** means a person undergoing medical or dental training in an institution registered under the Act.

### 3. Establishment of the Committee

- (1) There is established a committee to be known as the Fitness to Practice Committee.
- (2) The Committee shall comprise of —

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[Subsidiary]

- (a) the Vice-Chairperson of the Board, who shall Chair the Committee;
- (b) three members of the Board;
- (c) a representative appointed by the Kenya Medical Association;
- (d) a representative appointed by the Kenya Dental Association; and
- (e) the advocate of the Board who shall be the legal advisor;
- (f) four other members co-opted by the Committee and of whom—
  - (i) one shall be a preferred expert or professional representative of the practitioner or student appearing before the Committee;
  - (ii) one shall be a representative nominated by the relevant specialist association;
  - (iii) one shall be a professional expert as may be nominated by the Board, and
  - (iv) one shall be a person whose expertise is relevant to the matter as the Board may determine

(3) In the absence of the Vice-Chairperson of the Board the Committee shall appoint a Chairperson from amongst its members who are members of the Board.

(4) The quorum at the meeting of the Committee shall be six members.

(5) Subject to these Rules, the Committee may regulate its own procedures.

#### **4. Functions of the committee**

The Committee shall —

- (a) receive reports of alleged impairment of practitioners and students from themselves, institutions, practitioners, patients, the Board, the general public or from any other source;
- (b) undertake an inquiry into reports of alleged impairment of practitioners and students;
- (c) recommend to the Board appropriate interventions, where applicable, and
- (d) recommend to the Board the conditions for fitness to practise from time to time

#### **5. Procedure relating to impairment**

(1) Any person making a report regarding the fitness to practice of a practitioner or student shall complete the prescribed Form provided for in the Schedule and submit it to the Board.

(2) All reports received by the Committee shall be discussed in a sitting of the Committee.

(3) In the event the Committee finds that the report merits further inquiry it shall record as such and thereafter cause the concerned practitioner or student to be assessed.

(4) Upon assessment under paragraph (3), the Committee may make any of the following recommendations to the Board —

- (a) that the practitioner or student is fit to practise;
- (b) that the practitioner or student is unfit to practise independently and requires to practise under supervision while undergoing an intervention for a prescribed period of time;
- (c) that the practitioner or student is temporarily unfit to practise and should have their license or privileges temporarily withdrawn for the duration of an intervention to facilitate their return to fitness; or
- (d) that the practitioner or student is permanently unfit to practise and should have their practise license or privileges permanently withdrawn and undergo any other interventions as may be deemed necessary.

**6. Appeal**

Any person aggrieved by a decision of the Committee may, within 14 days of that decision, appeal against the decision to the Board.

**7. Effects of failure to comply with the Rules**

A practitioner or student who fails to comply with the requirements or any directive issued under these Rules shall have their license withdrawn by the Board until such a time as they shall be deemed to have complied.

**8. Application for restoration of license**

A practitioner or student whose license or privileges have been temporarily withdrawn shall upon satisfactory completion of the prescribed intervention, apply for restoration of their license or privileges and the application shall be considered alongside a confidential report submitted to the Board indicating fitness to practise or otherwise.

FORM

SCHEDULE

Rule 5.(1))

**MEDICAL PRACTITIONERS AND DENTISTS,  
FITNESS TO PRACTISE REPORTING FORM**

1. Date.....

2. Name of practitioner/student subject to report.....

3. Physical Address of practitioner/student subject to report

.....

4. Nature of alleged impairment .....

.....

Any Other Relevant Information .....

*(may attach additional documents if available)*

5. Details of person reporting (*optional*)

Name.....Signature.....

P O Box ..... Code.....City.....

Tel. No..... email .....



## THE MEDICAL PRACTITIONERS AND DENTISTS (MEDICAL CAMP) RULES, 2016

[L.N. 129/2016.]

### 1. Citation

These Rules may be cited as the Medical Practitioners and Dentists (Medical Camp) Rules, 2016.

### 2. Interpretation

In these Rules, unless the context otherwise requires —

**"Camp Director"** means a medical or dental practitioner of good standing who assumes overall responsibility for a medical camp;

**"foreign practitioner"** means a person licensed by the Board from recognized jurisdictions under section 13 of the Act and who appears in the register of temporary foreign medical or dental practitioners;

**"medical camp"** means a temporarily organized activity within a specified locality for purposes of providing free, subsidized or sponsored medical or dental services, surgical, educational and diagnostic services or treatment;

**"practitioner"** means a person for the time being registered or licensed as a medical or dental practitioner under the Act;

**"site "** means the location where the medical camp shall take place; and

**"sponsoring entity"** means a person who meets the full or part of the cost of a medical camp

### 3. Holding of a medical camp

(1) A medical camp may be held anywhere within the country upon application to the Board for a license and fulfillment of the requirements set out under these Rules.

(2) An application for license to hold a medical camp shall be filled in the Form as set out in the Schedule and shall be accompanied by a prescribed fee and the following information —

- (a) a detailed profile of the medical camp which shall include the dates, location and services to be provided;
- (b) a list of the practitioners and other health professionals who shall attend to patients during the medical camp;
- (c) a list of non-health professionals involved in the medical camp;
- (d) a list of medical equipment and supplies;
- (e) a referral policy as set out in the approved referral guidelines;
- (f) a professional indemnity cover from a recognized organization; and
- (g) a waste management policy.

(3) An application for a license under this rule shall be made not less than four weeks before the commencement of the medical camp.

(4) The Board may, upon receipt of an application for a license to hold a medical camp, request such further or relevant information from the applicant as it deems fit.

(5) The Board may in its discretion waive the prescribed fees or any part thereof for the general interest of the public.

(6) Despite the provisions of paragraphs (1) and (2), the Board may, if it is satisfied that it is in the public interest to do so, allow a medical camp to be held within such other terms as it may deem fit.

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[Subsidiary]**4. Rejection of application**

(1) The Board may reject an application for a medical camp made under these Rules, but before rejecting the application it shall inform the applicant in writing, with a seven days' notice, giving reasons for the intended rejection.

(2) Any applicant issued with a notice under paragraph (1) may lodge an appeal with the Board within seven days of receipt of the notice.

**5. Conditions on a license**

The Board may, upon issuance of a license, impose any conditions on a license as it considers fit and may cancel a license if any of the conditions imposed on the license are contravened.

**6. License to apply on the site**

A license shall be issued only in respect to the site and duration named in the application and shall not apply to any other site or duration unless authorized by the Board.

**7. Revocation of a license**

A license issued under these Rules may at any time be revoked by the Board —

- (a) if the licensee does not comply with the provisions of these Rules or obstructs, any person carrying out any duties or the responsibilities under the Act or these Rules;
- (b) if the medical camp is conducted in a manner contrary to these Rules or contrary to public interest; or
- (c) where after inquiry or during the medical camp, the Board finds professional misconduct.

**8. Duration of the medical camp**

A medical camp shall not be held for more than seven days unless the Board otherwise permits.

**9. Responsibility of the camp Director**

It shall be the responsibility of the Camp Director to —

- (a) notify and apply to the relevant authorities including county government in writing of the intention to hold a medical camp;
- (b) obtain authorization to hold the medical camp from the Board and other statutory bodies;
- (c) ensure that all health care professionals involved in the medical camp are duly licensed by the Board or other relevant regulatory authorities;
- (d) ensure supervision of medical or dental students involved in the medical camp;
- (e) have in place a referral mechanism for patients requiring further management; and
- (f) file a report with the Board within three months of completion of the medical camp.

FORM

SCHEDULE

Rule 3(2))

**APPLICATION TO CONDUCT MEDICAL/DENTAL CAMP(S)***Section 1: Details of the Applicant*

## (a) Individual Application

Name (as it appears on the National ID/Passport):.....

.....

ID Number/Passport No. .... Nationality:.....

P.O. Box ..... Code ..... Town ..... County.....

Email address .....

Telephone No.:..... Mobile No.....

## (b) Institutional Application

Name of the institution (as it appears on registration certificate/certificate of incorporation)

.....

Country ..... of  
Registration .....P.O. .... Box .....  
Code ..... Town ..... County.....Physical  
Location:.....Email  
address .....Telephone ..... No.:..... Mobile  
No.....*Section 2: Details of the Camp*Name ..... of ..... Camp  
Director: .....ID ..... Number/Passport ..... No. ....  
Nationality:.....

Duration of the medical camp:

From: .....

To: .....

Location ..... County..... Sub-  
County .....

Further details of the medical camp site (include details of the specific location):

.....

.....

.....

.....

Name of sponsoring entity .....

Country of registration of sponsoring entity .....

*Medical Practitioners and Dentists Act*

[Subsidiary]

Estimated no. of patients to be  
seen ..... Services to be offered  
during the camp:

- (i) .....
- (ii) .....
- (iii) .....
- (iv) .....
- (v).....

**Section 3: Requirements**

Attach the following documents, to this application form, in the prescribed order:

1. Copies of up-to-date licenses of ALL medical/dental practitioners involved in  
the camp;
2. Copies of up-to-date licenses of ALL other health personnel involved in the  
camp;
3. List of ALL non-medical/dental personnel involved in the camp;
4. Letter of authorization from the County Government or relevant Authority;
5. List of ALL Medical Equipment;
6. Referral Policy;
7. Waste management and disposal policy; and
8. Medical Indemnity Cover.
9. Proof of payment of the application fees and credentialing fees
  - (a) Application fees KSh. 5,000.00
  - (b) Credentialing fees as per the following categories
    - (i) Category A—KSh.100,000.00
    - (ii) Category B—KSh.50,000.00
    - (iii) Category C—KSh.20,000.00
    - (iv) Category D—KSh.10,000.00
    - (v) Category E —Free

**Section 4: Declaration**

I solemnly declare that

1. The information given above is true to the best of my knowledge and belief.
2. The Medical/Dental camp is NOT FOR PROFIT Signature of  
Applicant ..... Date .....



*FOR OFFICIAL USE*

The process will take a maximum of two (2) weeks.

<b>PREPARED:</b> Name: .....Designation..... Signature.....Date.....	<b>APPROVED/NOT APPROVED:</b> Name..... Designation..... Signature.....
<b>RECOMMENDED:</b> Name:.....Designation..... Signature.....Date.....	

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*Medical Practitioners and Dentists Act*

[Subsidiary]

FORM II

MEDICAL PRACTITIONERS AND DENTISTS ACT  
(Cap. 253)**LICENSE TO CONDUCT A MEDICAL CAMP**

This is to certify  
that.....

(Applicant's Name or Sponsoring Institution/Facility)

P.O

Box .....

Category .....

is hereby granted authority to conduct a Medical/Dental Camp Under the provisions of  
the Medical Practitioners and Dentists Act Cap. 253

at.....from.....to .....

(Location)

Dated this..... day of..... 20.....

.....

*Chairman of**Medical Practitioners and Dentists Board***CONDITIONS OF THE LICENSE**

1. This license is issued on condition that the minimum requirements set by the Board  
for conducting a medical/dental camp are adhered to at all times and that the medical/dental  
camp is not for profit.

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**THE MEDICAL PRACTITIONERS AND DENTISTS (PRACTITIONERS  
AND HEALTH FACILITIES) (ADVERTISING) RULES, 2016**

[L.N.130/2016.]

**1. Citation**

These Rules may be cited as the Medical Practitioners and Dentists (Practitioners and Health Facilities) (Advertising) Rules, 2016.

**2. Interpretation**

In these Rules, unless the context otherwise requires —

**"advertisement"** means the use of promotional information to increase sales which is transmitted through but not limited to any public communication using television, radio, motion pictures, newspapers, billboards, books, lists, pictorial representations, designs, mobile communications or other displays, the internet or directories, business cards, announcement cards, office signs, letterhead, telephone directory listings, professional lists, professional directory listings and similar professional notices;

**"health institution"** means an institution which, is registered by the Board under the Act for provision of medical and dental services;

**"intermediary"** means a person or party who provides a link between the practitioners or institutions and the patients;

**"practitioner"** means a person registered under the Act as a medical or dental practitioner.

**3. General conduct**

(1) A practitioner or health institution registered under the Act shall not directly or indirectly permit any promotion which may be reasonably regarded as calculated to attract patients, clients or business except as provided under these Rules.

(2) Advertisements under these Rules shall only contain information about services offered in Kenya.

(3) A practitioner or health institution shall not advertise their practice in any form other than in accordance with these Rules.

(4) An advertisement made under these Rules shall —

- (a) be objective, true and dignified;
- (b) be respectful of the professional ethics of the profession;
- (c) not attempt to denigrate other practitioners or health institutions or the profession; and
- (d) not infringe on patient confidentiality.

(5) Nothing in these Rules derogates from the power of the Board to rule on the desirability or otherwise of a practitioner, a health institution or of the proposed or actual advertisements.

**4. Information which may be advertised**

(1) A practitioner or a health institution may only provide the following information in an advertisement under these Rules—

- (a) the identity of the medical or dental practitioner;
- (b) the identity of the health institution or hospital;
- (c) the reference to the practitioner's specialization issued by the Board;
- (d) the address, physical location and other contact information of the practitioner, clinic, office or health institution including the email and web site;
- (e) the language of business used by the practitioner or the health institution;
- (f) the hours the clinic or facility or office is open for conducting business;

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[Subsidiary]

- (g) the statement of the position currently or previously held by the practitioner within the health institution;
- (h) the certification or accreditation of the practitioner with a professional body or agency including any affiliation with licensed hospitals or clinics;
- (i) the safety and quality accreditation of the practice or healthcare setting;
- (j) the year of registration and registration number of the practitioners or the health institution;
- (k) the professional and academic qualification(s) of the practitioner provided that any such professional qualifications should be recognized by the Board, and
- (l) any publication or cases or research work and provision of medical or dental education in which the practitioner or facility or other professional members of the health institution may have contributed to, provided such information does not infringe on patient confidentiality.

(2) Practitioners shall not participate in health related advertisements or endorse health related medical products and procedures unless provided for under these Rules.

### **5. Information which may not be included in advertisements**

(1) A practitioner or health institution shall not provide the following information in an advertisement under these Rules —

- (a) the names or identities of patients;
- (b) a picture of the patient or client, which includes images, graphic or other visual representations or facsimiles;
- (c) information that creates or is likely to create unrealistic or unwarranted expectations about the effectiveness of the health services offered;
- (d) a promise by the practitioner or health institution to achieve a particular outcome for the patient or prospective patients or clients;
- (e) a promise to complete treatment of patients in any particular time or faster than other practitioners or Health Institutions;
- (f) a promise that failure to obtain the outcome promised shall constitute a waiver of the fees for the practitioner or Health Institutions, and
- (g) deceitful, erroneous or misleading information.

2. Despite the provisions of paragraph (1), a patient or legal guardian shall retain autonomy to consent or decide whether their information or otherwise may be shared.

### **6. Signposts or notice boards**

Any signage put up by a medical or dental practitioner or health institution shall contain information in accordance with these Rules and shall not—

- (a) use the Red Cross and Red Crescent or any other copyrighted signs; or
- (b) use names, photographs, images and diagrams which may be misleading to members of the public.

### **7. Prohibited means of attracting business**

No medical or dental practitioner or health institution shall seek to advertise, solicit or attract business or patients through any of the following means—

- (a) an “intermediary” that would amount to professional touting;
- (b) unsolicited contact;
- (c) false or misleading statements, or where undue influence is used; and
- (d) arranged referrals where commission or otherwise is arranged or paid.

**8. Effect of noncompliance**

(1) In the event a medical or dental practitioner or a health institution is in breach of any of these Rules, the Board shall upon receipt of a complaint refer the complaint to the Preliminary Inquiry Committee for an appropriate inquiry or action.

(2) Where a practitioner or health institution fails to comply with these Rules that practitioner or health institution commits an act of professional misconduct.

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## THE MEDICAL PRACTITIONERS AND DENTISTS (PROFESSIONAL FEES) RULES, 2016

[L.N.131/2016.]

### 1. Citation

These Rules may be cited as the Medical Practitioners and Dentists (Professional Fees) Rules, 2016.

### 2. Interpretation

In these Rules, unless the context otherwise requires —

**"Board"** means the Medical Practitioners and Dentists Board established under section 4 of the Act;

**"institution"** means a facility or institution registered under the Act to offer medical or dental services or both; and

**"practitioner"** means a practitioner registered under the Act as a medical or dental practitioner.

### 3. Chargeable fees

(1) The fees specified under the Schedule to these Rules shall be the fees charged by practitioners offering medical or dental services, or both.

(2) The fees referred to under paragraph (1) shall be adhered to by all practitioners and institutions registered under the Act and no practitioner may agree or accept fees above that which is provided under these Rules.

(3) No practitioner shall charge fees for a consultation or services not rendered.

(4) The fees prescribed under the Schedule shall be subject to revision at the discretion of the Board.

### 4. Powers of the Board

The Board shall have powers to arbitrate any disputes on fees as shall arise between a practitioner and an institution or between a practitioner and a patient or a third party and the Board shall conduct the arbitration in such manner as it shall consider suitable for determination of the dispute.

### 5. Effect of failure to comply

Where a practitioner fails to comply with these Rules that practitioner commits an act of professional misconduct.

## SCHEDULE

(r.3 (1), (4))

## FORM

FEES GUIDELINES FOR MEDICAL & DENTAL PRACTITIONERS			
Annual Inflation Rate			
Year			
2013 - 5.60			
2014 - 6.50			
2015 - 6.80			
Compounded Inflation Rate - 0.20			
NOTE: The Current figures have been adjusted using the inflation rate as from the year 2013 to March 2015 as quoted by The Kenya National Bureau of Statistics attached as ANNEX 1.			
A: GENERAL PRACTITIONERS			
		<i>New</i>	<i>New</i>
		<i>Minimum (KSh.)</i>	<i>Maximum (KSh.)</i>
	Consultation	1,800.00	5,000.00
	House Visits – NB (Consultations only. Incidentals to be agreed upon by the parties)	—	—
	Day Time	3,600.00	7,500.00
	Night Time	6,000.00	12,000.00
	Hospital Visits		
	Day Time	3,600.00	7,500.00
	Night Time	6,000.00	12,000.00
	Institutional Locum Fees per hour -Daytime	2,000.00	5,000.00
	Institutional Locum Fees per hour - Nighttime	3,000.00	6,000.00
B: SPECIALISTS			
	Consultations	3,600.00	7,500.00
	House Visits NB (Consultations only. Incidentals to be agreed upon by the parties)	—	—
	Day Time	6,000.00	12,000.00
	Night Time	12,000.00	18,000.00
	Hospital Visits		
	Day Time	6,000.00	12,000.00



	Emergency Night visits	12,000.00	18,000.00
	Emergency Day visits	7,200.00	12,000.00
	ICU Visit (Daily charges)	7,200.00	10,000.00
	HDU Visit (Daily charges)	6,000.00	7,500.00
	Witnessing a postmortem	24,000.00	60,000.00
	Institutional Locum Fees per hour - Daytime	3,000.00	6,000.00
	Institutional Locum Fees per hour - Nighttime	4,500.00	9,000.00
	C: GENERAL MEDICAL AND DENTAL LEGAL REPORTS		
GMDLR01	General medical and dental reports	6,000.00	12,000.00
GMDLR02	Medical and Dental Legal Reports	6,000.00	60,000.00
GMDLR03	Court Appearances ( per session)	50,000.00	120,000.00
	M001: GENERAL SURGERY	—	—
	A) Complex Major	Minimum	Maximum
GEN.SURG01	Abdominoperineal resection (APR)	90,000.00	180,000.00
GEN.SURG02	Anterior Resection of Rectum	80,000.00	150,000.00
GEN.SURG03	Total Gastrectomy	96,000.00	140,000.00
GEN.SURG04	Partial Gastrectomy	60,000.00	100,000.00
GEN.SURG05	Total Oesophagectomy	84,000.00	144,000.00
GEN.SURG06	Unilateral Adrenalectomy	90,000.00	144,000.00
GEN.SURG07	Bilateral Adrenalectomy	108,000.00	180,000.00
GEN.SURG08	Total Resection of Colon	84,000.00	180,000.00
GEN.SURG09	Partial Pancreatectomy	132,000.00	180,000.00
GEN.SURG10	Nephrectomy	66,000.00	90,000.00
GEN.SURG11	Cholecystectomy + CBD exploration	90,000.00	170,000.00
GEN.SURG12	Excision of Biliary stricture	132,000.00	180,000.00
	B) Major I		
GEN.SURG14	Open cholecystectomy	72,000.00	168,000.00
GEN.SURG15	Laparoscopic cholecystectomy	96,000.00	150,000.00
GEN.SURG16	Vagotomy + drainage	72,000.00	132,000.00
GEN.SURG17	Repair of perforated duodenal ulcer	72,000.00	96,000.00
GEN.SURG18	Repair of hiatus hernia	54,000.00	96,000.00
GEN.SURG19	Splenectomy	70,000.00	180,000.00
GEN.SURG20	Parathyroidectomy	120,000.00	180,000.00

[Subsidiary]

GEN.SURG21	Radical mastectomy	100,000.00	180,000.00
GEN.SURG22	Simple mastectomy	72,000.00	96,000.00
GEN.SURG23	Breast lumpectomy	36,000.00	72,000.00
GEN.SURG24	Drainage of breast abscess	40,000.00	60,000.00
GEN.SURG25	Segmental resection of breast	60,000.00	96,000.00
GEN.SURG26	Total thyroidectomy	72,000.00	170,000.00
GEN.SURG27	Intestinal resection + anastomosis	72,000.00	150,000.00
GEN.SURG28	Exploration of retroperitoneal mass	72,000.00	180,000.00
GEN.SURG29	Exploratory laparotomy	72,000.00	108,000.00
GEN.SURG30	Bowel resection and anastomosis	72,000.00	108,000.00
GEN.SURG31	Laparotomy for pyloric stenosis	48,000.00	72,000.00
GEN.SURG32	Hemicolectomy	84,000.00	144,000.00
GEN.SURG33	Transverse colectomy	84,000.00	144,000.00
GEN.SURG34	Exteriorization of caecum	72,000.00	108,000.00
GEN.SURG35	Stripping of bilateral varicose veins	72,000.00	108,000.00
GEN.SURG36	Bilateral inguinal herniorrhaphy	60,000.00	140,000.00
GEN.SURG37	Bilateral sympathectomy	60,000.00	96,000.00
GEN.SURG38	Bilateral gynaecomastia correction	48,000.00	110,000.00
GEN.SURG39	Excision of Liver hydatid cyst	66,000.00	160,000.00
	<i>C ) Major II</i>		
GEN.SURG40	Repair of umbilical hernia	50,000.00	100,000.00
GEN.SURG41	Repair of epigastric hernia	60,000.00	110,000.00
GEN.SURG42	Repair of incisional hernia	50,000.00	110,000.00
GEN.SURG43	Unilateral inguinal herniorrhaphy	50,000.00	120,000.00
GEN.SURG44	Unilateral femoral herniorrhaphy	60,000.00	100,000.00
GEN.SURG45	Repair of recurrent inguinal hernia	80,000.00	150,000.00
GEN.SURG46	Repair of strangulated hernias	54,000.00	120,000.00
GEN.SURG47	Repair of burst abdomen	50,000.00	100,000.00
GEN.SURG48	Stripping of unilateral varicose veins	40,000.00	80,000.00
GEN.SURG49	Unilateral sympathectomy	30,000.00	66,000.00
GEN.SURG50	Unilateral gynaecomastia correction	30,000.00	66,000.00
GEN.SURG51	Laparoscopic appendicectomy	80,000.00	140,000.00
GEN.SURG52	Laparoscopic herniorrhaphy	65,000.00	120,000.00
GEN.SURG53	Laparoscopic Niessens	120,000.00	180,000.00



	fundoplication		
GEN.SURG54	Laparoscopic gastrojejunostomy	70,000.00	140,000.00
GEN.SURG55	Laparoscopic repair of perforated duodenal ulcer	80,000.00	120,000.00
	<i>D) Intermediate I</i>	—	—
GEN.SURG56	Unilateral orchidopexy	60,000.00	120,000.00
GEN.SURG57	Bilateral orchidopexy	90,000.00	140,000.00
GEN.SURG58	Appendicectomy	60,000.00	120,000.00
GEN.SURG59	Diagnostic laparoscopy + biopsy	60,000.00	100,000.00
GEN.SURG60	Unilateral herniotomy	50,000.00	80,000.00
GEN.SURG61	Bilateral herniotomy	60,000.00	90,000.00
GEN.SURG62	Unilateral herniotomy + orchidopexy	80,000.00	100,000.00
GEN.SURG63	Bilateral herniotomy + orchidopexy	90,000.00	180,000.00
GEN.SURG64	Haemorrhoidectomy	70,000.00	150,000.00
GEN.SURG65	Colostomy	70,000.00	90,000.00
GEN.SURG66	Closure of colostomy	80,000.00	140,000.00
GEN.SURG67	EUA and anorectal stretch	40,000.00	66,000.00
GEN.SURG68	Lateral sphincterotomy	50,000.00	60,000.00
GEN.SURG69	Excision of pilonidal sinus	36,000.00	72,000.00
GEN.SURG70	Fistulectomy for fistulae in ano	36,000.00	80,000.00
GEN.SURG71	Orchidectomy	36,000.00	60,000.00
GEN.SURG72	Tracheostomy	30,000.00	60,000.00
	<i>E) Intermediate II</i>		
GEN.SURG73	Minor skin graft	30,000.00	48,000.00
GEN.SURG74	Minor release of contractures	30,000.00	54,000.00
GEN.SURG75	Excision of sternomastoid tumour	30,000.00	54,000.00
GEN.SURG76	Repair of hydrocele	36,000.00	80,000.00
GEN.SURG77	Excision of thyroglossal cyst	30,000.00	60,000.00
	<i>F) Minor (GA)</i>	—	—
GEN.SURG78	Lymph node biopsy	18,000.00	36,000.00
GEN.SURG79	Surgical toilet	30,000.00	80,000.00
GEN.SURG80	Needle biopsy : liver	18,000.00	36,000.00
GEN.SURG81	Secondary suturing of wounds	30,000.00	60,000.00
GEN.SURG82	Excision of ganglion	30,000.00	50,000.00
GEN.SURG83	Excision of lipoma	30,000.00	70,000.00
GEN.SURG84	Skin biopsy	22,000.00	36,000.00
GEN.SURG85	Excision of warts / skin lesions	18,000.00	50,000.00

[Subsidiary]

GEN.SURG86	Adult circumcision	18,000.00	50,000.00
GEN.SURG87	Paediatric circumcision	18,000.00	70,000.00
GEN.SURG88	Incision & drainage	25,000.00	60,000.00
GEN.SURG89	Incision & drainage (perineal abscess )	25,000.00	60,000.00
GEN.SURG90	Ingrown toenail	20,000.00	40,000.00
	M002 : GENERAL SURGERY	—	—
	<i>G) Minor (LA)</i>	—	—
GEN.SURG91	Lymph node biopsy	15,000.00	50,000.00
GEN.SURG92	Excision of lipoma / lump	15,000.00	50,000.00
GEN.SURG93	Excision of breast lump	15,000.00	50,000.00
GEN.SURG94	Minor surgical toilet	20,000.00	50,000.00
GEN.SURG95	Ingrown toenail	20,000.00	50,000.00
GEN.SURG96	Excision of sebaceous cyst	25,000.00	50,000.00
GEN.SURG97	Excision of ganglion	20,000.00	50,000.00
GEN.SURG98	Excision of warts / skin lesions	15,000.00	50,000.00
GEN.SURG99	Sigmoidoscopy	18,000.00	40,000.00
GEN.SURG100	Colonoscopy	30,000.00	54,000.00
GEN.SURG101	Proctoscopy ( and biopsy )	15,000.00	24,000.00
GEN.SURG102	Suprapubic cystostomy	20,000.00	36,000.00
GEN.SURG103	Testicular biopsy	20,000.00	24,000.00
GEN.SURG104	Adult circumcision	20,000.00	40,000.00
GEN.SURG105	Paediatric circumcision	25,000.00	30,000.00
GEN.SURG106	Incision & drainage	20,000.00	40,000.00
GEN.SURG107	Vasectomy	12,000.00	18,000.00
	M003 : NEUROSURGERY		
	<i>A) Complex Major</i>	—	—
NEURO01	Craniotomy for aneurysm	144,000.00	360,000.00
NEURO02	Craniotomy for AV malformation	144,000.00	300,000.00
NEURO03	Craniotomy for brain tumour	144,000.00	300,000.00
NEURO04	Posterior fossa surgery	180,000.00	360,000.00
	<i>B) Major I</i>	—	—
NEURO05	Microdiscectomy	96,000.00	180,000.00
NEURO06	Anterior cervical discectomy	96,000.00	180,000.00
NEURO07	Anterior cervical fusion - AO plating	108,000.00	180,000.00
NEURO08	Craniotomy for intracerebral haematoma	96,000.00	180,000.00
NEURO09	Glioma	96,000.00	192,000.00
NEURO10	Extradural haematoma	96,000.00	144,000.00
NEURO11	Subdural haematoma	96,000.00	144,000.00
NEURO12	Laminectomy for cervical / thoracic / or lumbar spine	108,000.00	180,000.00
NEURO13	Spinal fusions with implants	120,000.00	240,000.00
NEURO14	Lumbar fusion / spondylosis / disc procedure	120,000.00	240,000.00



NEURO15	Excision of intracranial nerve lesions	108,000.00	180,000.00
NEURO16	Repair of dura	72,000.00	132,000.00
	<i>C) Major II</i>		
NEURO17	Burr hole(s) for		
NEURO18	Subdural haematoma		
NEURO19	Brain abscess	72,000.00	144,000.00
NEURO20	Biopsy procedure	72,000.00	144,000.00
NEURO21	ICP monitoring/VP shunt	72,000.00	144,000.00
NEURO22	Excision of spinal tumours	108,000.00	216,000.00
NEURO23	Acrylic cranioplasty	120,000.00	180,000.00
NEURO24	Stereotactic intracranial procedure	96,000.00	210,000.00
NEURO25	Clipping of cerebral artery	48,000.00	144,000.00
NEURO26	Elevation of depressed skull fracture	60,000.00	120,000.00
NEURO27	Application of skull callipers	54,000.00	84,000.00
NEURO28	Spina bifida surgery	96,000.00	144,000.00
	<i>D) Intermediate I</i>		
NEURO29	Microsurgical nerve graft / nerve repair / exploration/ microsurgical anastomosis	48,000.00	108,000.00
	<i>E) Intermediate II</i>		
NEURO30	Surgical toilet and repair of major scalp wounds / lacerations	18,000.00	48,000.00
NEURO31	Surgical toilet for scalp tumour	48,000.00	96,000.00
NEURO32	Ventricular / cisternal puncture	12,000.00	24,000.00
	<i>F) Minor (LA)</i>		
NEURO33	Repair minor scalp wounds / lacerations	12,000.00	30,000.00
NEURO34	Lumbar puncture	12,000.00	24,000.00
	M004 : UROLOGICAL SURGERY		
	<i>A) Complex Major</i>		
UROS01	Percutaneous nephrostomy	120,000.00	168,000.00
UROS02	Ureteroscopic extraction of calculus in ureter flexible	144,000.00	216,000.00
UROS03	Ureteroscopic extraction of calculus in ureter - rigid	144,000.00	216,000.00
UROS04	Bilateral orchidectomy	120,000.00	210,000.00
UROS05	Laparoscopic orchidectomy	120,000.00	180,000.00
UROS06	Primary repair of incisional hernia	60,000.00	90,000.00

[Subsidiary]

UROS07	Primary repair of incisional hernia laparoscopic	80,000.00	120,000.00
UROS08	Repair of previous incision in abdominal wall	60,000.00	100,000.00
UROS09	Repair of kidney wound	120,000.00	180,000.00
UROS10	Repair of vesico-colic fistula	180,000.00	360,000.00
UROS11	Repair of injury to penis	180,000.00	240,000.00
UROS12	Transplantation of kidney	240,000.00	360,000.00
UROS13	Radical nephrectomy	240,000.00	360,000.00
UROS14	Radical nephrectomy laparoscopic	240,000.00	360,000.00
UROS15	Nephro-ureterectomy	240,000.00	360,000.00
UROS16	Open removal of calculus from kidney	180,000.00	300,000.00
UROS17	Construction of ileal conduit	240,000.00	360,000.00
UROS18	Bilateral re-implantation of ureter into bladder	180,000.00	360,000.00
UROS19	Bilateral re-implantation of ureter into bowel	144,000.00	300,000.00
UROS20	Orchidopexy bilateral	144,000.00	240,000.00
UROS21	Repair of recurrent femoral hernia	36,000.00	72,000.00
UROS22	Repair of recurrent femoral hernia laparoscopic	48,000.00	90,000.00
UROS23	Drainage of kidney	120,000.00	180,000.00
UROS24	Drainage of pyonesphrosis	120,000.00	180,000.00
UROS25	Excision of segment of ureter	120,000.00	180,000.00
UROS26	Cystoscopy turp	144,000.00	216,000.00
UROS27	External meatotomy	36,000.00	96,000.00
UROS28	Excision of lesion of testes	60,000.00	108,000.00
UROS29	Reconstruction of penis	120,000.00	180,000.00
UROS31	Bilateral herniotomy	48,000.00	108,000.00
UROS32	Laparotomy for post-operative	36,000.00	72,000.00
UROS33	Ileal or colonic replacement of ureter	180,000.00	360,000.00
UROS34	Repair of recurrent inguinal hernia - bilateral	96,000.00	192,000.00
UROS35	Repair of recurrent inguinal hernia - bilateral lap	90,000.00	180,000.00
UROS36	PCNL per track	144,000.00	204,000.00
UROS37	Emergency laparotomy	90,000.00	120,000.00
UROS38	Radical prostatectomy	180,000.00	360,000.00



UROS39	Radical prostatectomy laparoscopic	180,000.00	360,000.00
UROS40	Operations on ureteric orifice	36,000.00	60,000.00
UROS41	Cystostomy and insertion of SP catheter	60,000.00	84,000.00
UROS42	Panendoscopy laser urethrotomy	48,000.00	72,000.00
UROS43	Orchidectomy & excision of spermatic cord	60,000.00	96,000.00
UROS44	Hydrocele repair	36,000.00	72,000.00
UROS45	Adult circumcision	18,000.00	36,000.00
UROS46	Paediatric circumcision	18,000.00	36,000.00
UROS47	Ureteroscopy (diagnostic)	60,000.00	84,000.00
UROS48	Ureteroscopy (diagnostic) flexible	60,000.00	84,000.00
UROS49	Repair of ruptured urethra	96,000.00	132,000.00
UROS50	Excision of epididymal cyst	48,000.00	84,000.00
UROS51	Operation on varicocele laparoscopic	72,000.00	96,000.00
UROS52	Endoscopic insertion of prosthesis in ureter	48,000.00	72,000.00
UROS53	Endoscopic extraction of bladder calculus	96,000.00	132,000.00
UROS54	Excision of lesion of skin or subcutaneous tissue	12,000.00	24,000.00
UROS55	Unilateral herniotomy	24,000.00	54,000.00
UROS57	Primary repair of femoral hernia	24,000.00	60,000.00
UROS58	Primary repair of femoral hernia laparoscopic	30,000.00	72,000.00
UROS59	Repair of peri-umbilical hernia - reducible	48,000.00	84,000.00
UROS60	Repair of peri-umbilical hernia - irreducible	60,000.00	108,000.00
UROS61	Operation for peyronies disease	90,000.00	120,000.00
UROS62	Injection intracavernosal	12,000.00	30,000.00
UROS63	Catheterisation	10,000.00	24,000.00
UROS64	Dressing	4,000.00	6,000.00
UROS65	Aspiration of subcutaneous haematoma	12,000.00	18,000.00
UROS66	Injection into subcutaneous tissue/painful Trig.	12,000.00	24,000.00
UROS67	Introduction of substance into skin	6,000.00	12,000.00
UROS68	Incision & drainage	12,000.00	18,000.00

[Subsidiary]

UROS69	Endoscopic hydrodissection of bladder	12,000.00	30,000.00
UROS70	Biopsy of lesion of penis	24,000.00	48,000.00
UROS71	Diathermic excision of warts or subcutaneous tissue	36,000.00	72,000.00
UROS72	Removal of D J Stent	12,000.00	36,000.00
UROS73	Ureteric meatotomy	60,000.00	120,000.00
UROS74	Cystoscopy (Incl biopsy)	36,000.00	72,000.00
UROS75	Excision of urethral caruncle	36,000.00	72,000.00
UROS76	Meatoplasty	48,000.00	96,000.00
UROS77	Orchidopexy abdominal	120,000.00	180,000.00
UROS78	Open pyeloplasty	180,000.00	300,000.00
UROS79	Dilatation of female bladder outlet	36,000.00	72,000.00
UROS80	Urethoplasty simple	120,000.00	180,000.00
UROS81	Urethoplasty complex	180,000.00	240,000.00
UROS82	Repair of bladder	120,000.00	300,000.00
UROS83	Cystoscopy rigid uretero, nephroscopy, laser lithotripsy	120,000.00	300,000.00
UROS84	Cystoscopy flexible uretero, nephroscopy, laser lithotripsy	120,000.00	300,000.00
UROS85	Combined abdominal and vaginal operations on bladder	180,000.00	300,000.00
UROS86	Endoscopic resection of lesion in bladder	96,000.00	192,000.00
UROS87	Retropubic suspension of bladder neck	84,000.00	144,000.00
	M005 : PLASTIC AND RECONSTRUCTIVE SURGERY		
PRS01	Cleaning and dressing of burn wounds under G.A.	60,000.00	120,000.00
PRS02	Excision of a single lump or uncomplicated keloid growth under L.A.	40,000.00	50,000.00
PRS03	Single partial thickness graft under L.A.	50,000.00	60,000.00
PRS04	Revision of a single scar under L.A.	50,000.00	60,000.00
PRS05	Major pressure sores debridement	50,000.00	70,000.00
PRS06	Excision of multiple growths or complicated keloid growth and reconstruction under G.A.	80,000.00	100,000.00



PRS07	Single partial thickness graft under G.A.	90,000.00	100,000.00
PRS08	Single partial thickness graft following excision of ulcer or growth under G.A.	80,000.00	100,000.00
PRS09	Full thickness grafting under G.A.	80,000.00	100,000.00
PRS10	Revision of multiple scars under G.A.	120,000.00	160,000.00
PRS11	Syndactyly/polydactyly correction ( single )	80,000.00	120,000.00
PRS12	Syndactyly/polydactyly correction (multiple)	140,000.00	180,000.00
PRS13	Lipoma (less than 5cm) under LA	60,000.00	80,000.00
PRS14	Lipoma (more than 5cm) under GA	100,000.00	120,000.00
PRS15	Gynaecomastia	150,000.00	180,000.00
PRS16	Ganglion under GA	80,000.00	90,000.00
PRS17	Sebaceous cyst	50,000.00	70,000.00
PRS18	Surgical toilet (minor) under GA	50,000.00	70,000.00
PRS19	Excision of lesions (single site & reconstruction) under LA	60,000.00	80,000.00
PRS20	Excision of lesions (multiple sites & reconstruction ) under GA	100,000.00	150,000.00
PRS21	Blepharoplasty	150,000.00	180,000.00
PRS22	Anterior canthotomy & Z-plasty under GA	120,000.00	140,000.00
PRS23	Nerve release and decompression under GA	80,000.00	100,000.00
PRS24	Tissue expander insertion	120,000.00	150,000.00
PRS25	Tissue expander removal and advancement	150,000.00	200,000.00
PRS26	Lip reconstruction	100,000.00	150,000.00
PRS27	Digit reconstruction under GA	100,000.00	150,000.00
PRS28	Multiple contracture release or major	150,000.00	180,000.00
PRS29	Neck contracture & skin grafting under GA		
PRS30	Dermaabrasion/Chemical peel/ Laser	100,000.00	180,000.00
PRS31	Fat injection for scar repair	150,000.00	200,000.00
PRS32	Tendon/muscle repair extensor - single under GA	80,000.00	100,000.00

[Subsidiary]

PRS33	Tendon/muscle repair flexor - single under GA	80,000.00	100,000.00
PRS34	Tendon repair - multiple under GA	120,000.00	150,000.00
PRS35	Tendon repair - Achilles tendon under GA	160,000.00	180,000.00
PRS36	Tendon transfer	150,000.00	180,000.00
PRS37	Brow lift	100,000.00	120,000.00
PRS38	Re-plantation (team charges)	600,000.00	800,000.00
PRS39	Ectropion/entropion correction - single under GA	120,000.00	150,000.00
PRS40	Ectropion/entropion correction - bilateral under GA	150,000.00	200,000.00
PRS41	Buttock lift	150,000.00	200,000.00
PRS42	Thigh lift	150,000.00	200,000.00
PRS43	Release of minor contractures under GA	100,000.00	120,000.00
PRS44	Advancement flaps reconstruction under G.A.	120,000.00	180,000.00
PRS45	Unilateral cleft lip repair under G.A.	80,000.00	100,000.00
PRS46	Bilateral cleft lip repair under G.A.	100,000.00	150,000.00
PRS47	Cleft palate repair under G.A.	150,000.00	200,000.00
PRS48	Bilateral cleft lip & palate repair under GA	150,000.00	300,000.00
PRS49	Rotational myocutaneous flap reconstruction of pressure sores	200,000.00	250,000.00
PRS50	Fingertip injuries – advancement flaps or cross finger flaps	120,000.00	150,000.00
PRS51	Liposuction (Single site)	90,000.00	220,000.00
PRS52	Augmentation Mammoplasty (Bilateral)	150,000.00	200,000.00
PRS53	Reduction Mammoplasty (Bilateral)	200,000.00	400,000.00
PRS54	Face-lift (limited)	216,000.00	300,000.00
PRS55	Face-lift (extended)	360,000.00	420,000.00
PRS56	Reconstruction of breast (using latissimus dorsi flap)	220,000.00	300,000.00
PRS57	Reconstruction of breast (using TRAM flap)	250,000.00	350,000.00
PRS58	Major flap reconstruction of head and neck	250,000.00	300,000.00

PRS59	Free-flap reconstruction (Team charges)	600,000.00	800,000.00
PRS60	Reconstruction of the hand (groin flap – reversed radial etc)	150,000.00	180,000.00
PRS61	Rhinoplasty	300,000.00	400,000.00
PRS62	Auriculoplasty (per stage)	250,000.00	300,000.00
PRS63	Abdominoplasty (mini)	150,000.00	200,000.00
PRS64	Abdominoplasty (full)	300,000.00	360,000.00
PRS65	Rotational flap for compound fracture	160,000.00	190,000.00
PRS66	Rotational flap for pressure sores	200,000.00	220,000.00
PRS67	Pedicle flap	120,000.00	180,000.00
PRS68	Hair transplant	300,000.00	400,000.00
PRS69	Lipoplasty including autologous fat grafting	200,000.00	300,000.00
PRS70	Brachioplasty - bilateral	150,000.00	200,000.00
PRS71	Inverted nipple correction	100,000.00	120,000.00
PRS72	Labiaplasty	150,000.00	200,000.00
PRS73	Vaginoplasty	150,000.00	200,000.00
PRS74	Augmentoplasty	200,000.00	300,000.00
PRS75	Excision of malignant tumours (BCC, SCC, MM) & reconstruction under GA	100,000.00	120,000.00
PRS76	Excision of malignant tumours (BCC, SCC, MM) & reconstruction under GA	150,000.00	200,000.00
PRS77	Corrective procedures for female genital anomalies	200,000.00	300,000.00
PRS78	Surgical treatment of vulvovaginal tumours	300,000.00	400,000.00
PRS79	Surgical treatment of penile tumours	200,000.00	300,000.00
PRS80	Correction of asymmetric breast (including Poland syndrome)	200,000.00	300,000.00
PRS81	Correction of tuberous breast	200,000.00	300,000.00
PRS82	Surgical treatment of Fournier gangrene	120,000.00	140,000.00
PRS83	Surgical treatment of amputations (ear, nose, lids, lip, eyebrow, scalp) with reconstruction	200,000.00	250,000.00
PRS84	Static support in facial palsy	100,000.00	120,000.00
PRS85	Dynamic support in facial palsy including free muscle flap	150,000.00	200,000.00



[Subsidiary]

PRS86	Nerve grafting in facial palsy	200,000.00	220,000.00
PRS87	Brachial Plexus repair	300,000.00	600,00
PRS88	Otoplasty (surgery for bat ear)-bilateral	80,000.00	100,000.00
PRS89	Wound dressings - clinic	15,000.00	20,000.00
PRS90	Wound dressings - ward	25,000.00	50,000.00
	M006: ORTHOPAEDIC SURGERY		
	<i>A. Complex Major</i>		
	PROCEDURE		
	1. ARTHROPLASTY		
ORTHOS01	1.1. Hemiarthroplasty	72,000.00	96,000.00
ORTHOS02	1.2 Primary Joint Replacement	120,000.00	216,000.00
ORTHOS03	1.3 Revision Joint Replacement	240,000.00	420,000.00
	2. SPINE PROCEDURES		
ORTHOS04	2.1. Discectomies (open & endoscopic)	144,000.00	240,000.00
ORTHOS05	2.1.1. Cervical	144,000.00	240,000.00
ORTHOS06	2.1.2. Thoracolumbar	108,000.00	180,000.00
ORTHOS07			
ORTHOS08	2.2. Laminectomy (without instrumentation)	72,000.00	144,000.00
ORTHOS09	2.3. Laminectomy (without instrumentation)	144,000.00	240,000.00
ORTHOS10	2.4. Kyphoplasty/ vertebroplasty	144,000.00	216,000.00
ORTHOS11	2.5. Complex deformity corrections including Scoliosis, High cervical stabilization	240,000.00	420,000.00
	3. LIMB RECONSTRUCTION		
ORTHOS12	3.1 Microsurgical procedures (digit reattachment & transfers)	180,000.00	300,000.00
ORTHOS13	3.2 Prosthesis - fitting surgery	180,000.00	300,000.00
	4. COMPLEX FRACTURE FIXATION		
ORTHOS14	4.1 Pelvis	144,000.00	180,000.00
ORTHOS15	4.2 Elbow	96,000.00	144,000.00
	B: MAJOR I		
	1.0 ARTHROSCOPIC SURGERY		
ORTHOS016	1.1 Diagnostic	48,000.00	96,000.00
ORTHOS017	1.2 Corrective/ Reconstruction	90,000.00	180,000.00

	2.0. OPEN REDUCTION & INTERNAL FIXATION		
ORTHOS018	2.1. Long bones	72,000.00	144,000.00
ORTHOS019	2.2. Hand	72,000.00	144,000.00
ORTHOS020	2.3. Ankle and foot	72,000.00	144,000.00
ORTHOS021	3.0. OPEN REDUCTION & EXTERNAL FIXATION	48,000.00	96,000.00
	4.0. CLOSED REDUCTION & FIXATION		
ORTHOS022	4.1. Minimal Invasive percutaneous osteosynthesis	72,000.00	144,000.00
ORTHOS023	4.2. Imaging guided wire/ screw fixation	72,000.00	144,000.00
	5.0. JOINT NON-PROSTHETIC STABILIZATION		
ORTHOS024	5.1. Open stabilization procedures	72,000.00	144,000.00
	6.0. TENDON SURGERY		
ORTHOS025	6.1 Tendon repair		
ORTHOS026	6.1.1. Multiple	108,000.00	180,000.00
ORTHOS027	6.1.2. Single	72,000.00	108,000.00
ORTHOS028	6.2 Tendon transfer	90,000.00	180,000.00
	ARTHROTOMY (Interventional)		
ORTHOS029	7.1. Small joint	36,000.00	72,000.00
ORTHOS030	7.2. Large joint	84,000.00	120,000.00
	C: MAJOR II		
	1. AMPUTATIONS		
ORTHOS031	1.1. Major amputation	36,000.00	120,000.00
ORTHOS032	1.2. Minor (finger, toe)	18,000.00	48,000.00
	2. ARTHRODESIS		
ORTHOS033	2.1. Large joint	72,000.00	120,000.00
ORTHOS034	2.2. Small joint	36,000.00	48,000.00
	3. CORRECTIVE SURGERY		
	3.1. HAND & FOOT DEFORMITIES		
ORTHOS035	3.1.1. Moderate/ severe deformity	60,000.00	108,000.00
ORTHOS036	3.1.2. Minor deformity	36,000.00	48,000.00
	3.2. OSTEOTOMIES (Excluding spine)	—	—
ORTHOS037	3.2.1. With casting	60,000.00	84,000.00
ORTHOS038	3.2.2. With ORIF	72,000.00	144,000.00

[Subsidiary]

ORTHOS039	3.2.3. With External fixation (Ilizarov)	72,000.00	144,000.00
ORTHOS040	4. NERVE EXPLORATION & REPAIR	72,000.00	120,000.00
ORTHOS041	5. BONE GRAFT (without additional procedure)	48,000.00	96,000.00
ORTHOS042	6. SOFT TISSUE RELEASE	48,000.00	84,000.00
ORTHOS043	7. Open Ligament repair	60,000.00	84,000.00
ORTHOS044	8. Major tumour excision	72,000.00	144,000.00
	D. INTERMEDIATE		
	EXCISION SURGERY		
ORTHOS045	1.0 Sequestrectomy (excluding spine)	48,000.00	96,000.00
ORTHOS046	2.0 Excisional arthroplasty - isolated	60,000.00	84,000.00
ORTHOS047	Excisional arthroplasty - with replacement ( <i>Replacement fees apply</i> )		
ORTHOS048	3.0 Fasciectomy	36,000.00	60,000.00
ORTHOS049	4.0 Major surgical debridement	60,000.00	96,000.00
	E. MINOR		
ORTHOS050	1.0 Closed fracture/ joint reduction under GA & casting	36,000.00	60,000.00
	2.0 MINOR EXCISIONS/ BIOPSY		
ORTHOS051	2.1 Small lesions under GA	24,000.00	42,000.00
ORTHOS052	2.2 Surgical debridement	36,000.00	48,000.00
ORTHOS053	3.0 REMOVAL OF A FOREIGN BODY FROM A JOINT	24,000.00	48,000.00
	4.0 REMOVAL OF IMPLANTS		
ORTHOS054	4.1 Spine & complex pelvis	48,000.00	84,000.00
ORTHOS055	4.2 Long and short bones	24,000.00	60,000.00
ORTHOS056	5.0 Application of cast without anaesthesia/ traction systems	6,000.00	24,000.00
	M007 : CARDIOTHORACIC AND VASCULAR SURGERY	—	—
	A) Complex Major	—	—
CARVS01	Pleurectomy / decortication	108,000.00	168,000.00
CARVS02	Pericardectomy	108,000.00	168,000.00
CARVS03	Vessel bypass surgery	138,000.00	180,000.00
CARVS04	Coronary angioplasty / stent	216,000.00	270,000.00



CARVS05	Oesophagectomy	144,000.00	270,000.00
CARVS06	Splenorenal shunt	84,000.00	132,000.00
CARVS07	Portocaval shunt	84,000.00	132,000.00
CARVS08	Excision of carotid body tumour	90,000.00	180,000.00
CARVS09	Closed valvotomy	72,000.00	108,000.00
CARVS10	Mitral valvotomy / baloon	72,000.00	108,000.00
CARVS11	Open heart surgery	180,000.00	360,000.00
CARVS12	Pneumonectomy / lobectomy	126,000.00	240,000.00
CARVS13	Surgery for achalasia of cardia	72,000.00	108,000.00
CARVS14	Vascular amputation	90,000.00	180,000.00
CARVS15	Aneurysm repair	132,000.00	216,000.00
CARVS16	Repair of traumatic arterial transection	90,000.00	144,000.00
CARVS17	Thoracotomy	54,000.00	156,000.00
CARVS18	Resection of complex AV fistula	90,000.00	144,000.00
CARVS19	Subfascial DVT ligation + skin graft	72,000.00	126,000.00
CARVS20	Thromboembolectomy	72,000.00	132,000.00
CARVS21	Carotid arterectomy	72,000.00	108,000.00
CARVS22	PDA ligation	90,000.00	138,000.00
	<i>B) Major</i>		
CARVS023	Insertion of MB tube	72,000.00	144,000.00
CARVS024	Mediastinoscopy	90,000.00	144,000.00
CARVS025	Thoracoscopy	72,000.00	120,000.00
CARVS026	Minithoracotomy for open lung biopsy	72,000.00	12,000.00
	Pacemaker implantation		
CARVS027	Single	108,000.00	126,000.00
CARVS028	Dual	180,000.00	216,000.00
CARVS029	Excision of mediastinal tumour	108,000.00	144,000.00
CARVS030	Ligation / stripping of varicose veins	54,000.00	90,000.00
CARVS031	Myocardial biopsy	36,000.00	60,000.00
CARVS032	Thymectomy	72,000.00	108,000.00
CARVS033	Pericardial window	54,000.00	96,000.00
CARVS034	Resection of simple AV fistula	54,000.00	108,000.00
CARVS035	Rib resection for thoracic outlet syndrome	90,000.00	132,000.00
	<i>C) Intermediate</i>		
CARVS036	Bronchoscopy and removal of FB		

[Subsidiary]

CARVS037	Oesophagoscopy biopsy / dilatation / removal of FB	48,000.00	96,000.00
CARVS038	Feeding gastrostomy / jejunostomy	48,000.00	108,000.00
CARVS039	Other rib resection	18,000.00	36,000.00
CARVS040	Pericardial catheterisation	24,000.00	60,000.00
CARVS041	Repair of ruptured diaphragm	48,000.00	96,000.00
	<i>D) Minor</i>		
CARVS042	Insertion of chest tube / chest aspiration	8,400.00	18,000.00
CARVS043	Pericardiocentesis	8,400.00	18,000.00
CARVS044	Pulmonary artery catheterisation	6,000.00	12,000.00
	M008: CARDIOLOGY		
CARD01	2 D echocardiogram	14,400.00	18,000.00
CARD02	12 Lead ECG	3,600.00	4,800.00
CARD03	24 hour holter	12,000.00	14,400.00
CARD04	Pericardiocentesis	36,000.00	48,000.00
CARD05	Pacemaker insertion	60,000.00	72,000.00
	<i>Out patient</i>		
CARD06	Consultation	6,000.00	9,000.00
CARD07	Urgent consultation	9,000.00	12,000.00
CARD08	ECG (with interpretation)	3,000.00	4,800.00
CARD09	Echocardiogram	14,400.00	18,000.00
CARD010	Echocardiogram - portable	18,000.00	21,600.00
CARD011	Exercise stress test	14,400.00	21,600.00
CARD012	24 hour holter	14,400.00	18,000.00
CARD013	24 hour ambulatory BP	18,000.00	30,000.00
CARD014	Pacemaker check	9,000.00	12,000.00
CARD015	ICD /CRTD check	12,000.00	18,000.00
CARD016	Pulmonary function tests	9,600.00	12,000.00
CARD017	Transoesophageal echo	24,000.00	48,000.00
	<i>Inpatient</i>		
CARD018	Emergency A&E	14,400.00	18,000.00
CARD019	ICU/HDU care	12,000.00	21,600.00
CARD020	Ward (per day)	9,000.00	12,000.00
CARD021	Resuscitation	18,000.00	24,000.00
CARD022	Right heart catheter	48,000.00	84,000.00
CARD023	Coronary angiogram	60,000.00	96,000.00
CARD024	Coronary PCI - per vessel (50% for additional vessel)	144,000.00	210,000.00



CARD025	Coronary thrombectomy (aspiration)	36,000.00	48,000.00
CARD026	Coronary FFR/IVU	36,000.00	48,000.00
CARD027	Loop recorder implantation	36,000.00	48,000.00
CARD028	ICD implantation	240,000.00	300,000.00
CARD029	CRTD implantation	240,000.00	300,000.00
CARD030	IVC filter	36,000.00	48,000.00
CARD031	DC cardioversion	24,000.00	48,000.00
CARD032	CVP insertion	30,000.00	42,000.00
CARD033	Intra-aortic balloon pump insertion	48,000.00	90,000.00
CARD034	Intra-aortic balloon pump per day	30,000.00	54,000.00
	<i>Cardiac catheterization</i>		
CARD035	Right heart catheterization including measurement of oxygen saturation pulmonary pressures and cardiac output	30,000.00	48,000.00
CARD036	Left heart catheterization	36,000.00	60,000.00
CARD037	Diagnostic right and left heart catheterization	72,000.00	84,000.00
CARD038	Catheter placement & coronary angiography, imaging supervision and interpretation	48,000.00	72,000.00
CARD039	Coronary angiography with catheter placement(s) in bypass graft(s) internal mammary, arterial, venous graft) including intraprocedural injections for bypass graft angiography	72,000.00	96,000.00
CARD040	Coronary angiography with right heart catheterization	84,000.00	108,000.00
CARD041	Coronary angiography with bypass graft angiography and right heart catheterization	96,000.00	120,000.00
CARD042	Trans septal puncture	30,000.00	48,000.00
CARD043	Pharmacological study	9,000.00	12,000.00
CARD044	Injection right ventricle or right atrial angiography, imaging and supervision	30,000.00	48,000.00
CARD045	Injection supra-avalvular aortography imaging supervision and interpretation	18,000.00	30,000.00
CARD046	Injection for pulmonary angiography, imaging supervision and interpretation	30,000.00	48,000.00

[Subsidiary]

CARD047	Insertion of arterial closure device (eg angioseal, starclose, per close	3,000.00	9,000.00
	Non-invasive cardiopulmonary testing		
CARD048	Performing and interpretation of the resting 12 lead ECG	1,800.00	3,600.00
CARD049	Performing and interpretation of the cardiovascular stress ECG, supervision and report	14,400.00	21,600.00
CARD050	24 hour ambulatory ECG/holter with monitoring and interpretation and report	12,000.00	18,000.00
CARD051	24 hour ambulatory BP measurement, analysis and interpretation and report	12,000.00	18,000.00
CARD052	Spirometry including graphic report	6,000.00	9,000.00
CARD053	Spirometry, for bronchospasm evaluation: before and after bronchodilator	7,200.00	9,600.00
CARD054	Tilt-table testing for syncope evaluation	6,000.00	9,000.00
	<i>Percutaneous coronary interventions</i>		
CARD055	Percutaneous transluminal coronary angioplasty, single vessel	120,000.00	180,000.00
CARD056	Percutaneous transluminal coronary, each additional vessel	60,000.00	96,000.00
CARD057	Transcatheter placement of intracoronary stent, percutaneous initial vessel	144,000.00	210,000.00
CARD058	Transcatheter placement of intracoronary stent, each additional vessel	72,000.00	108,000.00
CARD059	Aspiration thrombectomy of intracoronary thrombus	30,000.00	48,000.00
CARD060	Intracoronary physiology studies, fractional flow reserve	30,000.00	48,000.00
CARD061	Intracoronary ultrasound studies, IVUS	30,000.00	48,000.00
	<i>Pacemakers</i>		
CARD062	Permanent single chamber insertion	84,000.00	120,000.00
CARD063	Permanent - dual chamber insertion	120,000.00	180,000.00

CARD064	Insertion of implantable cardiac defibrillator (ICD)	180,000.00	240,000.00
CARD065	Insertion of biventricular cardiac resynchronization device	300,000.00	42,000.00
CARD066	Defibrillation threshold testing during or after implantation of ICD device	30,000.00	4,800.00
CARD067	Insertion of temporary transvenous pacemaker	36,000.00	60,000.00
CARD068	Programming of atrio-ventricular sequential pacemaker or single chamber pacemaker (eg DDD, VVI)	9,000.00	12,000.00
CARD069	Programming of ICD (implantable cardiac defibrillator)	12,000.00	15,000.00
CARD070	Renewal of pacemaker generator (battery change)	42,000.00	72,000.00
CARD071	Insertion of implantable loop recorder	36,000.00	60,000.00
CARD072	Synchronized DC cardioversion for unstable tachyarrhythmia	18,000.00	30,000.00
	<i>Structural heart disease interventional procedures</i>		
CARD073	Atrial septostomy	96,000.00	120,000.00
CARD074	Pulmonary valve valvuloplasty	96,000.00	144,000.00
CARD075	Aortic valve valvuloplasty	96,000.00	144,000.00
CARD076	Mitral valve valvuloplasty, percutaneous balloon	96,000.00	144,000.00
CARD077	Coarctation of the aorta, percutaneous balloon dilatation	72,000.00	108,000.00
CARD078	Closure of atrial septal defect	96,000.00	144,000.00
CARD079	Closure of patent ductus arteriosus	90,000.00	144,000.00
CARD080	Pericardiocentesis without drainage, diagnostic	9,000.00	18,000.00
CARD081	Pericardiocentesis with catheter draining, therapeutic	24,000.00	42,000.00
	<i>Specialist consultations and inpatient visits</i>		
CARD082	Cardiology specialist office consultation initial visit during normal office hours	4,800.00	9,600.00
CARD083	Cardiology specialist casualty/emergency room consultation, initial visit	9,000.00	12,000.00



[Subsidiary]

CARD084	Cardiology specialist hospital consultation, intensive care unit initial visit	12,000.00	18,000.00
CARD085	Cardiology specialist hospital consultation, medical or surgical ward, initial visit	6,000.00	10,800.00
CARD086	Cardiology specialist hospital, ICU follow up visit	9,000.00	10,800.00
CARD087	Cardiology specialist hospital, high dependency unit, follow up visit	6,000.00	10,800.00
CARD088	Cardiology specialist hospital, medical or surgical ward, follow up visit	4,800.00	9,600.00
CARD089	Emergency cardiac resuscitation	18,000.00	30,000.00
CARD090	Micro-laryngeal surgery	144,000.00	180,000.00
CARD091	Micro-laryngoscopy	72,000.00	120,000.00
CARD092	Intranasal ethmoidectomy	90,000.00	120,000.00
CARD093	Cochlea operations	90,000.00	144,000.00
CARD094	Middle ear tumour excision	144,000.00	180,000.00
	M009 : EAR, NOSE AND THROAT SURGERY		
	<i>A) Major I</i>		
ENT01	Excision of thyroglossal cyst / duct	90,000.00	132,000.00
ENT02	Excision of submandibular salivary gland	72,000.00	108,000.00
ENT03	Excision of branchial cyst / sinus / fistula	90,000.00	144,000.00
ENT04	Caldwell-Luc procedure	72,000.00	120,000.00
ENT05	T.I.T. and turbinoplasty	54,000.00	84,000.00
ENT06	T.I.T. and intranasal antrostomy	72,000.00	108,000.00
ENT07	Tonsillectomy ( adult )	54,000.00	108,000.00
ENT08	Submucous resection of nasal septum	72,000.00	144,000.00
ENT09	Uvulopalatopharyngoplasty	54,000.00	144,000.00
	Bat Ears reduction:		
ENT010	Unilateral	72,000.00	108,000.00
ENT011	Bilateral	90,000.00	144,000.00
ENT012	Lateral rhinotomy	108,000.00	144,000.00
ENT013	Laryngocele excision	108,000.00	144,000.00
ENT014	Maxillary artery ligation	108,000.00	156,000.00
ENT015	Meatoplasty	90,000.00	132,000.00

ENT016	Transplatatal excision of choanal atresia	126,000.00	168,000.00
ENT017	Vocal cord lateralisation	90,000.00	126,000.00
	<i>B) Intermediate I</i>		
ENT018	Bronchoscopy and removal of FB	72,000.00	108,000.00
ENT019	Excision of head and neck lipoma	72,000.00	132,000.00
ENT020	Tracheostomy	48,000.00	72,000.00
ENT021	Adenoidectomy	36,000.00	72,000.00
ENT022	Adenotonsillectomy (Ts 7 As )	60,000.00	96,000.00
ENT023	Tonsillectomy ( paediatric )	60,000.00	120,000.00
ENT024	Direct laryngoscopy and biopsy	60,000.00	84,000.00
ENT025	Myringotomy	18,000.00	36,000.00
ENT026	Myringoplasty	18,000.00	48,000.00
ENT027	Nasal polypectomy	36,000.00	72,000.00
ENT028	Oesophagoscopy and removal of FB	60,000.00	96,000.00
ENT029	EUA and biopsy of nasopharynx, ears, nose	48,000.00	96,000.00
ENT030	Intranasal antrostomy	36,000.00	96,000.00
	<i>C) Intermediate II</i>		
ENT031	Incision + drainage head and neck abscess (I&D)	30,000.00	48,000.00
ENT032	Pharyngeal abscess drainage	36,000.00	72,000.00
ENT033	Preauricular sinus excision	36,000.00	72,000.00
ENT034	Bilateral antranasal washout (BAWO)	36,000.00	60,000.00
	<i>D) Minor</i>		
ENT035	MUA # nose	12,000.00	30,000.00
ENT036	Antral and nasal packing	12,000.00	30,000.00
ENT037	Release of tongue tie	12,000.00	30,000.00
ENT038	Chemical cauterisation of the nose	12,000.00	30,000.00
ENT039	Diathermy and reduction of septum	8,400.00	24,000.00
ENT040	Nasal / tonsillar cautery	18,000.00	36,000.00
ENT041	Cervical lymph node biopsy	8,400.00	30,000.00
ENT042	Removal of FB in ear or nose	8,400.00	18,000.00
ENT043	Removal of wax from external ears ( syringing )	6,000.00	12,000.00

[Subsidiary]

	M010 OPHTHALMOLOGY		
	<i>Diagnostic Tests</i>		
OPHT01	Tonometry per eye	1,200.00	1,800.00
OPHT02	Pachymetry per eye	1,800.00	2,400.00
OPHT03	Gonioscopy per eye	1,800.00	2,400.00
OPHT04	Retinal photography per eye	1,800.00	2,400.00
OPHT05	Flourescein Angiography	12,000.00	18,000.00
OPHT06	Visual Fields per eye	2,400.00	3,000.00
OPHT07	Ocular Coherent Tomography Scan per eye	6,000.00	6,600.00
OPHT08	Corneal Topography per eye	2,400.00	3,000.00
OPHT09	Ultrasound per eye	6,000.00	7,200.00
OPHT10	Visual Fields per eye	2,400.00	3,600.00
OPHT11	Biometry per eye	3,600.00	4,800.00
OPHT12	Oculyzer per eye	3,600.00	4,800.00
OPHT13	Retinoscopy	1,800.00	3,600.00
OPHT14	Endothelia Cell count per eye	2,400.00	3,600.00
OPHT15	Dressing	3,600.00	4,800.00
OPHT16	Optical coherence tomography(OCT)	5,000.00	8,000.00
OPHT17	Topography	5,000.00	8,000.00
OPHT18	Tomography	5,000.00	8,000.00
	ORBIT AND ACCULOPLASTICS		
	<i>Lids</i>		
OPHT19	Entropion repair Moderate	48,000.00	80,000.00
OPHT20	Epiblepharon repair	24,000.00	60,000.00
OPHT21	Ectropion repair Moderate	48,000.00	70,000.00
OPHT22	Ptosis repair	60,000.00	80,000.00
OPHT23	Brow lift	36,000.00	100,000.00
OPHT24	Lid +/- canaliculi laceration repair	48,000.00	60,000.00
OPHT25	Lid tumour excision/incisional biopsy	72,000.00	80,000.00
OPHT26	Lid tumour excision + reconstruction	96,000.00	150,000.00
OPHT27	Tarsorrhaphy	24,000.00	30,000.00
OPHT28	Upper lid blepharoplasty	48,000.00	80,000.00
OPHT29	Lower lid blepharoplasty	48,000.00	80,000.00
OPHT30	Lid abscess I&D	24,000.00	100,000.00
OPHT31	Chalazion I&D	24,000.00	30,000.00



OPHT32	Epilation	6,000.00	10,000.00
OPHT33	Lash Electrolysis	24,000.00	30,000.00
	<i>Sockets</i>		
OPHT034	Evisceration	48,000.00	60,000.00
OPHT035	Evisceration + orbital implant	60,000.00	72,000.00
OPHT036	Enucleation	48,000.00	60,000.00
OPHT037	Enucleation + orbital implant	48,000.00	80,000.00
OPHT038	Socket/Fornix reconstruction	96,000.00	150,000.00
	<i>Orbit</i>		
OPHT039	Dermoid excision	72,000.00	96,000.00
OPHT040	Anterior orbitotomy	12,000.00	180,000.00
OPHT041	Lateral orbitotomy	12,000.00	180,000.00
OPHT042	Orbital wall repair	12,000.00	180,000.00
OPHT043	Orbital wall decompression	120,000.00	200,000.00
OPHT044	Mucocele incision and drainage	60,000.00	80,000.00
OPHT045	Exenteration	96,000.00	120,000.00
	<i>Lacrimonal</i>		
OPHT046	Punctoplasty	36,000.00	60,000.00
OPHT047	Syringing and probing (S&P)	24,000.00	40,000.00
OPHT048	Syringing, Probing & intubation	48,000.00	80,000.00
OPHT049	DCR	96,000.00	120,000.00
OPHT050	DCR + Jones tube	120,000.00	200,000.00
	<b>RETINA AND POSTERIOR SEGMENT SURGERY</b>		
	<i>Retina Photocoagulation</i>		
OPHT051	Central laser per session	15,000.00	40,000.00
OPHT052	PRP on slit lamp per session	20,000.00	40,000.00
OPHT053	PRP Laser indirect with parabulbar per eye per session	40,000.00	60,000.00
OPHT054	Laser retinopexy	48,000.00	72,000.00
OPHT055	Cyclo-Cryo per eye	24,000.00	36,000.00
OPHT056	Cyclo-photo per eye	24,000.00	36,000.00
OPHT057	Intra-vitreous injections	15,000.00	35,000.00
OPHT058	Posterior segment trauma surgery/repair	150,000.00	300,000.00
	<i>Surgical Procedures</i>		
OPHT059	Silicon Oil Removal	120,000.00	180,000.00
OPHT060	Cataract surgery with Silicon Oil removal	180,000.00	240,000.00
OPHT061	Posterior Vitrectomy with dropped intra ocular lens or vitreous foreign body	240,000.00	300,000.00

[Subsidiary]

OPHT062	Posterior vitrectomy and gas	240,000.00	300,000.00
OPHT063	Posterior vitrectomy and oil	240,000.00	300,000.00
OPHT064	Posterior vitrectomy, Delamination and gas or oil	240,000.00	300,000.00
OPHT065	Combined Procedures (Vitreectomy, band or buckle, gas or oil)	300,000.00	360,000.00
OPHT066	Combine procedure (Posterior vitrectomy and cataract surgery and intraocular lens implant)	300,000.00	360,000.00
OPHT067	Combine procedure (Posterior vitrectomy, buckle or band and cataract surgery and intraocular lens implant)	300,000.00	360,000.00
OPHT068	Posterior Vitrectomy and Macula hole surgery	240,000.00	300,000.00
OPHT069	Retina Detachment surgery - Scleral buckle/Scleral Explant and Cryotherapy	240,000.00	300,000.00
OPHT070	Posterior Segment Trauma surgery/Repair	24,000.00	360,000.00
OPHT071	Scleral Buckle/Explant removal	84,000.00	120,000.00
	PEDIATRIC OPHTHALMOLOGY AND SQUINTS		
OPHT072	AC Reformation	12,000.00	18,000.00
OPHT073	AC wash out	18,000.00	24,000.00
OPHT074	Corneal FB removal	12,000.00	18,000.00
OPHT075	Corneal repair	60,000.00	120,000.00
OPHT076	EUA	18,000.00	24,000.00
OPHT077	Goniotomy	60,000.00	72,000.00
OPHT078	IOL exchange	72,000.00	96,000.00
OPHT079	Lensectomy and IOL	72,000.00	96,000.00
OPHT080	AC Membrane Removal	18,000.00	24,000.00
OPHT081	Pars Plana Posterior Capsulotomy	36,000.00	48,000.00
OPHT082	Iridectomy/ Iridotomy	24,000.00	36,000.00
OPHT083	Pupilloplasty	24,000.00	36,000.00
OPHT084	Squint Repair Per Muscle	48,000.00	60,000.00
OPHT085	Every extra muscle	30,000.00	48,000.00
OPHT086	Optical Iridectomy	36,000.00	60,000.00
	GLAUCOMA SURGERY		
OPHT087	Trabeculectomy	60,000.00	96,000.00
OPHT088	Goniotomy	60,000.00	84,000.00



OPHT089	Combined Phaco/trab	120,000.00	144,000.00
OPHT090	Combined ECCE/Trab	120,000.00	144,000.00
OPHT091	Glaucoma Drainage Implants [GDI]	84,000.00	96,000.00
OPHT092	Combined Phaco/GDI	120,000.00	144,000.00
OPHT093	Surgical Iridectomy	24,000.00	36,000.00
OPHT094	EUA for congenital glaucoma	18,000.00	40,000.00
OPHT095	Bleb Revision	24,000.00	36,000.00
OPHT096	Cyclocryotherapy	24,000.00	36,000.00
OPHT097	Retrobulbar Alcohol	6,000.00	12,000.00
	<i>Lasers</i>		
OPHT098	Trabeculoplasty	24,000.00	36,000.00
OPHT099	Laser Peripheral Iridotomy	24,000.00	36,000.00
OPHT100	Trans-Scleral cyclophotocoagulation	24,000.00	36,000.00
OPHT101	Laser suturelysis	12,000.00	18,000.00
	CORNEA AND ANTERIOR SEGMENT		
OPHT102	Small Incision Cataract surgery with Implant	60,000.00	84,000.00
OPHT103	Phacoemulsification Cataract surgery with Implant	84,000.00	108,000.00
OPHT104	Combined Phacoemulsification with Trab	120,000.00	144,000.00
OPHT105	Intraocular lens implant with vitrectomy	84,000.00	108,000.00
OPHT106	Perforating eye injury repair	84,000.00	108,000.00
OPHT107	Conjunctival lesion excision	24,000.00	36,000.00
OPHT108	Conjunctival lesion excision with graft	36,000.00	48,000.00
OPHT109	Corneal transplant (PKP)	180,000.00	24,000.00
OPHT110	Corneal Transplant (Lamellar Keratoplasty)	180,000.00	240,000.00
OPHT111	Triple Procedure (Corneal transplant+cataract surgery+ intraocular lens)	240,000.00	300,000.00
OPHT112	Elective Removal of Corneal Sutures - Theatre	12,000.00	24,000.00
OPHT113	Removal of Corneal Sutures - Slit Lamp	6,000.00	12,000.00
OPHT114	Corneal Ulcer Scrapping	6,000.00	12,000.00
OPHT115	Removal of Corneal Foreign Body	6,000.00	12,000.00

[Subsidiary]

OPHT116	Cross Linking per eye	48,000.00	84,000.00
OPHT117	YAG posterior Capsulotomy per eye	6,000.00	12,000.00
OPHT118	Anterior Chamber Tap / injection	8,400.00	12,000.00
OPHT119	Subconjunctival/Subtenon Injection	8,400.00	12,000.00
	REFRACTIVE SURGERIES		
OPHT120	Pre-LASIK assesment	8,400.00	12,000.00
OPHT121	LASIK procedure per eye	84,000.00	108,000.00
OPHT122	Surface Ablation per eye	84,000.00	108,000.00
OPHT123	Intraocular Contact Lens per eye	84,000.00	108,000.00
OPHT124	Photokeratectomy (removal of corneal scar)	84,000.00	108,000.00
	M011 : OBSTETRICS AND GYNAECOLOGICAL SURGERY		
	A) Complex Major		
OBGYN01	Wertheim's hysterectomy	180,000.00	420,000.00
OBGYN02	Ovarian cancer resection (pelvic clearance)	180,000.00	420,000.00
OBGYN03	Repair of vesicovaginal	180,000.00	420,000.00
OBGYN04	Repair of rectovaginal fistula	180,000.00	420,000.00
OBGYN05	AP colpoperineorrhaphy	180,000.00	360,000.00
OBGYN06	Repair of ruptured uterus / caesarian hysterectomy	180,000.00	420,000.00
OBGYN07	Radical vulvectomy	180,000.00	420,000.00
OBGYN08	Manchester repair	180,000.00	420,000.00
OBGYN09	Repair of pelvic floor	180,000.00	420,000.00
	B) Major I		
	Laparotomy:		
OBGYN010	Tuboplasty	144,000.00	300,000.00
OBGYN011	Hysterectomy ( abdominal )	144,000.00	300,000.00
OBGYN012	Myomectomy	144,000.00	300,000.00
OBGYN013	Ovarian cystectomy	120,000.00	240,000.00
OBGYN014	Ruptured ectopic pregnancy	100,000.00	200,000.00
OBGYN015	Pelvic abscess	120,000.00	240,000.00
OBGYN016	Exploratory / adhesiolysis	120,000.00	240,000.00
OBGYN017	Ventrosuspension	120,000.00	240,000.00
OBGYN018	Salpingo – oophorectomy	120,000.00	240,000.00
OBGYN019	Endometriosis surgery	180,000.00	300,000.00
OBGYN020	Metroplasty / uteroplasty	144,000.00	300,000.00



OBGYN021	Simple vulvectomy	180,000.00	300,000.00
OBGYN022	Vaginal hysterectomy	180,000.00	300,000.00
	Operative Laparoscopy:		
OBGYN023	Ovarian cystectomy / drilling	144,000.00	300,000.00
OBGYN024	Ectopic pregnancy	144,000.00	300,000.00
OBGYN025	Tuboplasty	144,000.00	300,000.00
OBGYN026	Adhesiolysis	144,000.00	300,000.00
OBGYN027	Endometriosis surgery	144,000.00	300,000.00
OBGYN028	Myomectomy	144,000.00	300,000.00
OBGYN029	Hysterectomy	144,000.00	300,000.00
	<i>C) Major II</i>		
OBGYN030	Caesarian section	96,000.00	180,000.00
OBGYN031	Colposuspension $\pm$ D&C	84,000.00	120,000.00
OBGYN032	Hysterotomy	84,000.00	120,000.00
OBGYN033	Laparoscopic bilateral tubal ligation	60,000.00	96,000.00
OBGYN034	Diagnostic / dye laparoscopy + D&C	72,000.00	108,000.00
	Operative Hysteroscopy		
OBGYN035	Biopsy	48,000.00	72,000.00
OBGYN036	Retrieval of lost / fragmented IUCD	48,000.00	84,000.00
OBGYN037	Synechiolysis / septolysis	84,000.00	180,000.00
OBGYN038	Resection of submucous fibroid	84,000.00	180,000.00
OBGYN039	Avulsion of endometrial polyps	84,000.00	180,000.00
OBGYN040	Endometrial ablation	84,000.00	120,000.00
	<i>D) Intermediate I</i>		
OBGYN041	Resuturing of burst abdomen	24,000.00	60,000.00
	Termination of pregnancy		
OBGYN042	Medical	12,000.00	36,000.00
	Surgical		
OBGYN043	Before 12 weeks	36,000.00	96,000.00
OBGYN044	After 12 weeks	60,000.00	120,000.00
OBGYN045	D & C hysterosalpingogram	36,000.00	60,000.00
OBGYN046	D & C + cone biopsy	48,000.00	96,000.00
OBGYN047	Manual removal of retained placenta	36,000.00	60,000.00
OBGYN048	Postnatal tubal ligation	36,000.00	72,000.00
OBGYN049	Cerclage	36,000.00	48,000.00
OBGYN050	Mini-laparotomy for tubal	36,000.00	72,000.00

[Subsidiary]

PAEDS03	Biliary atresia ( Kasai Kimura procedures, porto –enterostomy )	90,000.00	240,000.00
PAEDS04	Nissen's fundoplication	60,000.00	144,000.00
PAEDS05	Gut duplications procedure	36,000.00	108,000.00
	Hirschsprung's disease procedure:	—	—
PAEDS06	a) Laparotomy, biopsy, colostomy	48,000.00	96,000.00
PAEDS07	b) Abdominoperineal pull through (Soave, Swenson)	72,000.00	180,000.00
PAEDS08	c) Closure of colostomy	36,000.00	60,000.00
PAEDS09	d) Rectal biopsies	24,000.00	48,000.00
PAEDS10	Hellers cadiomyotomy	60,000.00	120,000.00
PAEDS11	Bladder neck reconstruction	96,000.00	240,000.00
PAEDS12	Urinary diversion	48,000.00	96,000.00
PAEDS13	Rectosigmoidostomy	54,000.00	108,000.00
PAEDS14	Posterior sagittal anorectoplasty (PSARP ) for anorectal malformation	72,000.00	180,000.00
	<i>B) Major I</i>		
PAEDS015	Omphalocele	36,000.00	96,000.00
PAEDS016	Splenectomy	60,000.00	108,000.00
	Laparotomy:		
PAEDS017	Intussusception	48,000.00	96,000.00
PAEDS018	Volvulus	48,000.00	96,000.00
PAEDS019	Malrotation & plication	60,000.00	120,000.00
PAEDS020	Tumours	72,000.00	144,000.00
PAEDS021	Intestinal resection + anastomosis	60,000.00	144,000.00
PAEDS022	Exploration of retroperitoneal mass	72,000.00	108,000.00
PAEDS023	Hemicolectomy	48,000.00	96,000.00
PAEDS024	Excision of liver hydatid cyst	60,000.00	144,000.00
PAEDS025	Nephrectomy	72,000.00	120,000.00
PAEDS026	Reflux hydroureter ( re - implantation )	36,000.00	60,000.00
PAEDS027	Urethroplasty for hypospadias and epispadias	60,000.00	144,000.00
PAEDS028	Repair of fistula after urethroplasty	24,000.00	48,000.00
PAEDS029	Thyroidectomy	24,000.00	60,000.00
PAEDS030	Pyloric stenosis	60,000.00	120,000.00
PAEDS031	Pelvic ureteric junction obstruction (PUJO)	60,000.00	144,000.00



PAEDS032	Bladder calculi	24,000.00	48,000.00
PAEDS033	Umbilicoplasty	36,000.00	72,000.00
PAEDS034	Mastectomy	36,000.00	84,000.00
	<i>C) Major II</i>		
PAEDS035	Colostomy	48,000.00	96,000.00
PAEDS036	Gastrostomy	36,000.00	72,000.00
PAEDS037	Diagnostic laparotomy	48,000.00	96,000.00
PAEDS038	Repair of inguinal hernia / hydrocele	24,000.00	60,000.00
PAEDS039	Bilateral inguinal hernia	36,000.00	72,000.00
PAEDS040	Repair of diaphragmatic hernia	60,000.00	90,000.00
PAEDS041	Orchidopexy	24,000.00	60,000.00
PAEDS042	Bilateral orchidopexy	36,000.00	96,000.00
	<i>D) Intermediate I</i>		
PAEDS043	Appendicectomy	36,000.00	84,000.00
PAEDS044	Resuturing of burst abdomen	24,000.00	48,000.00
PAEDS045	Herniotomy + unilateral orchidectomy	54,000.00	90,000.00
PAEDS046	Herniotomy + unilateral orchidopexy	54,000.00	90,000.00
PAEDS047	Fistula in ano	48,000.00	96,000.00
PAEDS048	Excision of pilonidal sinus	30,000.00	84,000.00
PAEDS049	Fissure in ano	18,000.00	48,000.00
PAEDS050	Resection of posterior / anterior urethral valves	48,000.00	96,000.00
PAEDS051	Torsion of testis	48,000.00	96,000.00
PAEDS052	Extrophy of bladder ( repair )	96,000.00	240,000.00
PAEDS053	Cystic hygroma	48,000.00	96,000.00
PAEDS054	Excision of ganglion / lipoma	18,000.00	36,000.00
	<i>E) Intermediate II ( GA )</i>		
PAEDS055	Tracheostomy	48,000.00	72,000.00
PAEDS056	Skin grafting (burns )	24,000.00	48,000.00
PAEDS057	Release of contractures	18,000.00	60,000.00
PAEDS058	Surgical toilet	12,000.00	24,000.00
PAEDS059	Polypectomy	18,000.00	48,000.00
PAEDS060	Testicular biopsy	18,000.00	48,000.00
PAEDS061	Cystoscopy + insertion of DJ stent	12,000.00	36,000.00
PAEDS062	Cystoscopy + insertion of DJ stent	30,000.00	60,000.00
PAEDS063	Insertion of CAPD catheter	24,000.00	48,000.00

[Subsidiary]

PAEDS064	Suprapubic cystotomy	18,000.00	36,000.00
PAEDS065	Exploration of foreign body	24,000.00	48,000.00
PAEDS066	Excision of haemorrhoids	24,000.00	48,000.00
	<i>F) Minor (GA)</i>		
PAEDS067	Lymph node biopsy	18,000.00	36,000.00
PAEDS068	Needle biopsy liver	18,000.00	36,000.00
PAEDS069	Secondary suturing of wounds - LA	12,000.00	24,000.00
PAEDS070	Secondary suturing of wounds - GA	24,000.00	48,000.00
PAEDS071	Skin biopsy	12,000.00	24,000.00
PAEDS072	Excision of warts	8,400.00	24,000.00
PAEDS073	Rigid sigmoidoscopy + rectal snip	8,400.00	30,000.00
PAEDS074	Excision of fingernail / toenail	18,000.00	30,000.00
PAEDS075	Circumcision	12,000.00	30,000.00
PAEDS076	Release of tongue tie	18,000.00	30,000.00
PAEDS077	Incision and drainage of abscess	18,000.00	30,000.00
PAEDS078	Insertion of underwater seal drainage	18,000.00	36,000.00
	M013: ANAESTHESIA		
	ANAESTHESIA		
	<i>Transfers</i>	<i>Minimum KSh.</i>	<i>Maximum KSh.</i>
ANAES01	Inter hospital (From one unit to another) Per Hour	10,000.00	15,000.00
ANAES02	Inter hospital (Same town) - Per hour	10,000.00	20,000.00
ANAES03	Inter hospital (Different town) - Per hour	10,000.00	50,000.00
ANAES04	Inter hospital (International) - Per hour excluding air fare, accomodation and travel insurance	10,000.00	25,000.00
	<i>Procedures outside the operating room</i>		
ANAES05	Tracheal intubation	7,500.00	15,000.00
ANAES06	Tracheal extubation	7,500.00	15,000.00
ANAES07	CVP Catheterization	15,000.00	20,000.00
ANAES08	Lumbar puncture (LP)	10,000.00	15,000.00
ANAES09	Bladder Catheterization	5,000.00	20,000.00
ANAES10	NG tube insertion	10,000.00	20,000.00
ANAES11	ICU Admission protocol	25,000.00	40,000.00



ANAES12	Insertion of IV line	5000.00 (+visit 3000.00)	
ANAES13	Arterial line	10,000.00	10,000.00
ANAES14	Epidurals for labour		
ANAES15	Pain procedures (including nerve blocks)		
	Visits and Reviews		
ANAES016	Pre-operative visit	5,000.00	8,000.00
ANAES017	Post operative visit	5,000.00	8,000.00
ANAES018	ICU visit	10,000.00	10,000.00
ANAES019	HCU visit	7,500.00	7,500.00
	Monitored anaesthetic care, anaesthesia for other procedures, investigations i.e. CT scans/MRI as per category A and B	The anaesthetic charges for group A and B apply	The anaesthetic charges for group A and B apply
	ANAESTHESIA SPECIALTY FEES (invoicing begins at induction to accept recovery, handover at PACU)		
	<i>Group A: ASA I,II Patient</i>		
ANAES020	Minimum charge (1st half hour)	15,000.00	20,000.00
ANAES021	Second half hour +	15,000.00	20,000.00
ANAES022	Second and third hours	20,000.00	25,000.00
ANAES023	Fourth and subsequent hours	25,000.00	27,500.00
	<i>Group B: ASA III,IV,V neonates and specialized surgery</i>		
ANAES024	Minimum charge + 1st half hour	30,000.00	35,000.00
ANAES025	Second half hour	30,000.00	35,000.00
ANAES026	Second and third hours	35,000.00	40,000.00
ANAES027	Fourth and subsequent hours	45,000.00	50,000.00
	EMERGENCIES: 40% additional charge		
	NB: In group B it may be mandatory to involve a second anaesthesiologist. In such cases, the second anaesthesiologist will invoice 50% of the charges raised by the primary. This is an additional cost of 50% on the anaesthetic fee.		
	Diagnostic and Therapeutic Regional Anesthetic & Chronic pain Procedure Fees		
ANAES028	1st Consultations	4,000.00	10,000.00
ANAES029	Follow up Consultation	2,500.00	5,000.00

[Subsidiary]

	<i>Procedure</i>	<i>Minimum cost</i>	<i>Maximum cost</i>
	Nerve & Plexus blocks		
ANAES030	Nerve plexus	14,000.00	24,500.00
ANAES031	Peripheral nerve block - single	10,500.00	18,400.00
ANAES032	Peripheral nerve block - multiple	14,000.00	24,500.00
ANAES033	Peripheral Nerve block - continuous	17,500.00	30,700.00
ANAES034	Greater occipital nerve block:	21,000.00	36,800.00
ANAES035	Lesser occipital nerve block:	21,000.00	36,800.00
ANAES036	Suprascapular nerve:	14,000.00	24,500.00
ANAES037	Intercostal nerve (single)	10,500.00	18,400.00
ANAES038	Intercostal nerve (multiple)	14,000.00	24,500.00
ANAES039	Ilioinguinal and Iliohypogastric nerve:	10,500.00	18,400.00
ANAES040	Trigeminal nerve (any branch):	56,000.00	98,000.00
ANAES041	Sphenopalatine ganglion:	28,000.00	49,000.00
ANAES042	Stellate ganglion (cervical sympathetic):	14,000.00	24,500.00
ANAES043	Superior hypogastric plexus	28,000.00	49,000.00
ANAES044	Thoracic or lumbar paravertebral sympathetic or ganglion impar block	28,000.00	49,000.00
ANAES045	Celiac plexus:	28,000.00	49,000.00
ANAES046	Gasserian ganglion	28,000.00	49,000.00
ANAES047	Lateral femoral cutaneous nerve of the thigh	10,500.00	18,400.00
ANAES048	Paravertebral catheter	17,500.00	30,700.00
	JOINT / BURSA INJECTION OR ASPIRATION		
ANAES049	Major joint/bursa (knee, hip, shoulder, trochanteric bursa, subacromial bursa, pes anserine bursa)	7,000.00	12,300.00
ANAES050	Intermediate joint/ bursa: (temporomandibular, acromioclavicular, wrist, elbow, ankle, olecranon bursa)	10,500.00	18,400.00
ANAES051	Minor joint / bursa: (fingers [PIP, DIP], toes)	3,500.00	6,200.00
ANAES052	Sacroiliac joint (SIJ) with fluoroscopy/ ultrasound	21,000.00	36,800.00
ANAES053	Sacroiliac joint (SIJ) without fluoroscopy/ ultrasound (billed like trigger point injection)	7,000.00	12,300.00



ANAES054	Fluoroscopic needle guidance (non-spinal):	21,000.00	36,800.00
ANAES055	Shoulder arthrogram injection:	17,500.00	30,700.00
ANAES056	Hip arthrogram injection:	17,500.00	30,700.00
	<i>Tendons, Ligaments, and Muscle Injections</i>		
ANAES057	Tendon sheath or Ligament: (iliolumbar ligament, trigger finger, De Quervain's tenosynovitis, plantar fascia)	7,000.00	12,300.00
ANAES058	Tendon origin/insertion:	7,000.00	12,300.00
ANAES059	Trigger point injection (1 or 2 muscles)	7,000.00	12,300.00
ANAES060	Trigger point injection (3 or more muscles):	10,500.00	18,400.00
	Epidural Steroid Injections (ESI)		
	Interlaminar		
ANAES061	Interlaminar – cervical or thoracic	28,000.00	49,000.00
ANAES062	Interlaminar – lumbar or sacral:	14,000.00	24,500.00
ANAES063	Fluoroscopic needle guidance (Spinal)	14,000.00	24,500.00
	Transforaminal--Remember: Fluoro can NOT be billed separately for these.		
ANAES064	Transforaminal – cervical or thoracic ( <u>first</u> level)	28,000.00	49,000.00
ANAES065	Transforaminal – cervical or thoracic ( <u>each additional</u> level):	31,500.00	55,200.00
ANAES066	Transforaminal – lumbar or sacral ( <u>first</u> level):	21,000.00	36,800.00
ANAES067	Transforaminal – lumbar or sacral ( <u>each additional</u> level):	24,500.00	42,900.00
	Facet Joint Procedures		
	Intraarticular Joint or Medial Branch Block-Remember: Fluoro can NOT be billed separately for these.		
ANAES068	Intraarticular joint or medial branch block (MBB) – cervical or thoracic ( <u>1st</u> level)	28,000.00	49,000.00
ANAES069	Intraarticular joint or medial branch block (MBB) – cervical or thoracic ( <u>2nd</u> level):	28,000.00	49,000.00
ANAES070	Intraarticular joint or medial branch block (MBB) – cervical or thoracic ( <u>3rd</u> level):	28,000.00	49,000.00

*Medical Practitioners and Dentists Act*

[Subsidiary]

ANAES071	Intraarticular joint or medial branch block (MBB) – lumbar or sacral ( <u>1st</u> level):	21,000.00	36,800.00
ANAES072	Intraarticular joint or medial branch block (MBB) – lumbar or sacral ( <u>2nd</u> level):	21,000.00	36,800.00
ANAES073	Intraarticular joint or medial branch block (MBB) – lumbar or sacral ( <u>3rd</u> level):	21,000.00	36,800.00
	Radiofrequency Ablation (RFA) / “Destruction” of Facet Joint---- Remember: Fluoro can NOT be billed separately for these.		
ANAES074	Radiofrequency ablation (RFA) – cervical or thoracic ( <u>1st</u> joint):	35,000.00	61,300.00
ANAES075	Radiofrequency ablation (RFA) – cervical or thoracic ( <u>each additional</u> joint):	35,000.00	61,300.00
ANAES076	Radiofrequency ablation (RFA) – lumbar or sacral ( <u>1st</u> joint):	28,000.00	49,000.00
ANAES077	Radiofrequency ablation (RFA) – lumbar or sacral ( <u>each additional</u> joint):	28,000.00	49,000.00
	Sacroiliac Joint		
ANAES078	Sacroiliac joint (SIJ) without fluoroscopy: (billed as a trigger point injection)	10,500.00	18,400.00
ANAES079	Sacroiliac joint (SIJ) <u>with</u> fluoroscopy:	21,000.00	36,800.00
ANAES080	Sacral lateral branch blocks:	24,500.00	42,900.00
	Radiofrequency Ablation (RFA) of the Sacroiliac Joint	24,500.00	42,900.00
ANAES081	RF of L5 dorsal primary ramus:	24,500.00	42,900.00
ANAES082	RF of S1 lateral branches:	24,500.00	42,900.00
ANAES083	RF of S2 lateral branches:	24,500.00	42,900.00
ANAES084	RF of S3 lateral branches:	24,500.00	42,900.00
ANAES085	Fluoroscopic needle guidance (Spinal): (for the S1-S3 nerve lateral branches, not the L5)	28,000.00	49,000.00
	Vertebroplasty / Kyphoplasty	Same as Orthopedic surgery	
	Vertebroplasty		
ANAES086	Vertebroplasty – Thoracic ( <u>1st</u> level):		
ANAES087	Vertebroplasty – Thoracic ( <u>each additional</u> level):		

ANAES088	Vertebroplasty – Lumbar ( <u>1st</u> level):		
ANAES089	Vertebroplasty – Lumbar ( <u>each additional</u> level):		
	Kyphoplasty		
ANAES090	Kyphoplasty – Thoracic ( <u>1st</u> level):		
ANAES091	Kyphoplasty – Thoracic ( <u>each additional</u> level): 22525		
ANAES092	Kyphoplasty – Lumbar ( <u>1st</u> level):		
ANAES093	Kyphoplasty – Lumbar ( <u>each additional</u> level):		
	Discogram / Discography--- Remember: Fluoroscopy is bundled here and can NOT be billed separately for these		
ANAES094	Discogram / Discography – Cervical/Thoracic ( <u>each</u> disc):		
ANAES095	Supervision & interpretation of fluoroscopy – Cervical/Thoracic ( <u>each</u> disc):		
ANAES096	Discogram / Discography – Lumbar ( <u>each</u> disc):		
ANAES097	Supervision & interpretation of fluoroscopy – Lumbar ( <u>each</u> disc):		
	Botulinum Toxin Injections		
ANAES098	Botulinum toxin type A – Botox,		
	Permanent Chemical / Cryosection and/or Neurolysis:		
ANAES099	Chemodenervation of muscles in the neck (spasmodic torticollis):		
ANAES100	Chemodenervation of muscles of the trunk and/or extremity (cerebral palsy, dystonia, multiple sclerosis):		
ANAES101	Chemodenervation of muscles innervated by facial, trigeminal, cervical spinal and accessory nerves, bilateral (chronic migraine):		
	Neurostimulation (Spinal Cord Stimulator)		
	<u>Trial</u> Procedure		



[Subsidiary]

ANAES102	Percutaneous implant of electrode array:	189,000.00	330,800.00
	Implantation of Spinal Cord Stimulator <u>Percutaneous</u> Leads and Generator		
ANAES103	Percutaneous implant of electrode array	280,000.00	490,000.00
ANAES104	Insertion or replacement of pulse generator	280,000.00	490,000.00
	<u>Removal</u> of Leads/Generator (Explant)		
ANAES105	Removal of spinal neurostimulator percutaneous array(s)		
ANAES106	Removal of pulse generator:	189,000.00	330,800.00
ANAES107	Replacement of Battery	94,500.00	165,400.00
	Intrathecal Pump		
ANAES108	Trial Procedure	94,500.00	165,400.00
ANAES109	Implantation	280,000.00	490,000.00
ANAES110	Testing	94,500.00	165,400.00
ANAES111	Removal of Intrathecal pump	189,000.00	330,800.00
ANAES112	Replacement of battery	94,500.00	165,400.00
ANAES113	Assessing the pump and making changes to pump delivery	10,500.00	18,400.00
ANAES114	Refill of pump medications	18,900.00	33,100.00
	<i>Others Procedures</i>		
ANAES115	Carpal tunnel injection	14,000.00	24,500.00
ANAES116	Epidural blood patch	21,000.00	36,800.00
ANAES117	Fluoroscopic needle guidance ( <u>spinal</u> ):	21,000.00	36,800.00
ANAES118	Fluoroscopic needle guidance ( <u>non-spinal</u> ):	21,000.00	36,800.00
ANAES119	CT needle guidance:	21,000.00	36,800.00
ANAES120	Labor Epidural	35,000.00	61,300.00
ANAES121	Tunnelled/Long term Epidural for Chronic Cancer pain	49,000.00	85,800.00
	Prolotherapy		
ANAES122	single region	7,000.00	12,300.00
ANAES123	multiple	10,500.00	18,400.00
	Lidocaine/ Ketamine infusions		
ANAES124	IV	35,000.00	61,300.00
ANAES125	S/C	28,000.00	49,000.00

ANAES126	PCEA & PCA Protocol	17,500.00	30,700.00
	<i>Modifiers</i>		
	Incomplete procedure (reduced service) [Stopping a part of a procedure because of reasons other than the patient's well-being]		
	Incomplete procedure (physician elected to terminate a surgical or diagnostic procedure due to the patient's well-being) – reduced service		
	Procedures done under some sedation or monitored anaesthesia care will be billed separately		
	Procedures done under general anaesthesia for postoperative pain management will be billed separately.		
	Procedures done under general anaesthesia for anaesthesia purposes will not be billed separately.		
	M014 : DIAGNOSTIC RADIOLOGY	—	—
	<i>A ) X-Ray of Extremities</i>		
DGRAD01	Hand	1,200.00	1,800.00
DGRAD02	Both Hands	1,800.00	2,160.00
DGRAD03	Digits	1,200.00	1,800.00
DGRAD04	Wrist	9,600.00	18,000.00
DGRAD05	Scaphoid views	1,800.00	2,160.00
DGRAD06	Forearm	1,800.00	2,160.00
DGRAD07	Both forearms	3,000.00	3,360.00
DGRAD08	Elbow	2,400.00	3,360.00
DGRAD09	Both elbows	3,600.00	4,200.00
DGRAD010	Humerus	1,800.00	3,000.00
DGRAD011	Both humeri	3,000.00	3,360.00
DGRAD012	Shoulder	2,400.00	3,600.00
DGRAD013	Both shoulders	4,800.00	6,000.00
DGRAD014	Clavicle	1,200.00	1,800.00
DGRAD015	Both clavicles	1,800.00	30,000.00
DGRAD016	Sternoclavicular joint	2,400.00	3,600.00
DGRAD017	Foot	1,200.00	2,400.00

[Subsidiary]

DGRAD018	Both feet	1,800.00	3,000.00
DGRAD019	Ankle	1,200.00	2,400.00
DGRAD020	Both ankles	1,800.00	3,000.00
DGRAD021	Leg	1,440.00	3,360.00
DGRAD022	Both legs	2,400.00	3,600.00
DGRAD023	Knee	1,440.00	3,360.00
DGRAD024	Both knees	2,160.00	3,600.00
DGRAD025	Knee skyline view	1,800.00	3,600.00
DGRAD026	Both knees skyline view	3,000.00	4,200.00
DGRAD027	Femur	1,800.00	3,600.00
DGRAD028	Both femora	3,360.00	4,200.00
DGRAD029	Portable X – rays	600.00	1,440.00
DGRAD030	Heels	120.00	3,600.00
DGRAD031	Hip	3,360.00	4,200.00
DGRAD032	Both hips	1,440.00	2,160.00
DGRAD033	Pelvis	1,440.00	2,160.00
	<i>B ) Myelogram</i>		
		12,000.00	24,000.00
DGRAD034	Regional	18,000.00	30,000.00
	<i>C ) Angiogram / Venogram</i>		
DGRAD035	Unilateral venogram	12,000.00	12,000.00
DGRAD036	Bilateral venogram	14,400.00	18,000.00
DGRAD037	Unilateral femora arteriogram	24,000.00	36,000.00
DGRAD038	Bilateral femora arteriogram	42,000.00	48,000.00
DGRAD039	Regional selective arteriogram	36,000.00	48,000.00
DGRAD040	Bilateral flush aortography	36,000.00	48,000.00
DGRAD041	Unilateral carotid angiogram	36,000.00	48,000.00
DGRAD042	Bilateral carotid angiogram	42,000.00	42,000.00
DGRAD043	Vessel angiogram	48,000.00	60,000.00
	<i>D ) Image Intensifier</i>		
DGRAD044	Theatre 0.5 hours	7,200.00	9,600.00
DGRAD045	Theatre 1 hour	12,000.00	21,600.00
DGRAD046	Theatre 1.5 hours	12,000.00	21,600.00
DGRAD047	Theatre 2 hours	18,000.00	21,600.00
DGRAD048	Theatre 3 hours	18,000.00	21,600.00
	<i>E ) Other X – Rays</i>		
DGRAD049	AP or PA chest	1,200.00	2,400.00
DGRAD050	Thoracic inlet	1,440.00	2,400.00
DGRAD051	Chest PA & lateral / oblique	2,160.00	4,200.00



DGRAD052	Skull 2 views	2,400.00	3,360.00
DGRAD053	Skull 3 views	3,000.00	3,600.00
DGRAD054	Skull 4 views	1,200.00	2,400.00
DGRAD055	Pituitary fossa	3,000.00	4,200.00
DGRAD056	Mandible	3,360.00	4,200.00
DGRAD057	Facial bones 4 Views		
	<i>E ) Other X – Rays ( continued )</i>		
DGRAD058	Optic foramina	2,400.00	6,000.00
DGRAD059	T.M. joints	3,000.00	6,000.00
DGRAD060	Mastoids	3,000.00	6,000.00
DGRAD061	Paranasal sinuses	3,000.00	6,000.00
DGRAD062	Maxillary antrum / orbit antrum	2,640.00	6,000.00
DGRAD063	Nasal bone	1,200.00	2,400.00
DGRAD064	Cervical spine AP & lateral	1,800.00	3,600.00
DGRAD065	Cervical spine 5 views, flexion, extension	3,000.00	6,000.00
DGRAD066	Thoracic spine AP & lateral	3,000.00	6,000.00
DGRAD067	Lumbar spine AP & lateral	3,000.00	6,000.00
DGRAD068	Sacro – iliac joints	3,000.00	6,000.00
DGRAD069	Sacrum & coccyx	3,000.00	6,000.00
DGRAD070	Skeletal survey	12,000.00	24,000.00
DGRAD071	Supine abdomen	1,200.00	2,400.00
DGRAD072	Supine & erect abdomen	1,800.00	3,000.00
DGRAD073	Pelvimetry	1,800.00	3,000.00
DGRAD074	Barium swallow	3,000.00	4,200.00
DGRAD075	Barium meal	6,000.00	9,600.00
DGRAD076	Barium meal & follow through	7,200.00	9,600.00
DGRAD077	Gastrograffin examination	6,000.00	9,600.00
DGRAD078	Barium enema	7,200.00	9,600.00
DGRAD079	Double contrast barium enema	12,000.00	24,000.00
DGRAD080	IVU	8,400.00	14,400.00
DGRAD081	High dose IVU	12,000.00	18,000.00
DGRAD082	Retrograde pyelogram	9,600.00	14,400.00
DGRAD083	MCU	6,000.00	12,000.00
DGRAD084	Ascending cystourethrogram	6,000.00	12,000.00
DGRAD085	T – Tube cholangiogram	7,200.00	12,000.00
DGRAD086	Cholangiogram in theatre	12,000.00	24,000.00
	<i>F ) Ultrasound</i>		
DGRAD087	Liver, gallbladder, pancreas, spleen	6,000.00	9,600.00

[Subsidiary]

DGRARD088	Pelvic, gynae, bladder, prostate	6,000.00	9,600.00
DGRARD089	Ultrasound guided biopsies	12,000.00	24,000.00
DGRARD090	Bilateral doppler	12,000.00	24,000.00
DGRARD091	Unilateral doppler	6,000.00	9,600.00
DGRARD092	Transrectal	6,000.00	9,600.00
DGRARD093	Thyroid	6,000.00	9,600.00
DGRARD094	Testes	6,000.00	9,600.00
DGRARD095	Breast	6,000.00	9,600.00
DGRARD096	Lumbar spine	6,000.00	9,600.00
DGRARD097	Chest	6,000.00	9,600.00
DGRARD098	Transvaginal	6,000.00	9,600.00
	<i>G ) CT Scan</i>		
DGRARD99	Emergency	18,000.00	30,000.00
DGRARD100	Regional	18,000.00	30,000.00
DGRARD101	Abdominal	18,000.00	30,000.00
DGRARD102	Head / Skull	14,400.00	26,400.00
DGRARD103	Orbits / Sinuses	12,000.00	24,000.00
	<i>H ) Others</i>		
DGRARD104	Cardiac Sc ( pacemaker )	14,400.00	21,600.00
DGRARD105	Cardiac Sc ( perm port)	18,000.00	24,000.00
DGRARD106	HSG	6,000.00	120,000.00
DGRARD107	Sialogram	6,000.00	12,000.00
DGRARD108	Sinogram	6,000.00	12,000.00
DGRARD109	Athrogram	6,000.00	12,000.00
DGRARD110		12,000.00	24,000.00
	M015: DERMATOLOGY		
DERM01	Laser	15,000.00	60,000.00
DERM02	Electrocautery	30,000.00	60,000.00
DERM03	Basal Cell Excision	24,000.00	60,000.00
DERM04	Squamous Cell Excision	36,000.00	72,000.00
DERM05	Cryotherapy	25,000.00	50,000.00
DERM06	Cautery	36,000.00	72,000.00
DERM07	KOH Preparation	2,500.00	5,000.00
DERM08	Skin Biopsy (small to large)	12,000.00	50,000.00
DERM09	Chemical Cautery (phenol)	6,000.00	15,000.00
DERM10	Iontophoresis (per session minimum 5 sessions)	4,800.00	7,200.00
DERM11	Botox injection per session	60,000.00	120,000.00
DERM12	Intra lesional injection	30,000.00	50,000.00
DERM13	Phototherapy per session minimum 7 sessions	20,000.00	60,000.00



DERM14	Ingrown toe nail	24,000.00	48,000.00
DERM15	A typical mole excision	36,000.00	72,000.00
DERM16	Culletage	12,000.00	36,000.00
DERM17	Microdemabration/ microneedling	24,000.00	48,000.00
DERM18	Chemical peels	6,000.00	12,000.00
DERM19	Dermal feelers	60,000.00	120,000.00
DERM20	Electrolysis/epilation /Electrofulguration	48,000.00	72,000.00
DERM21	Skin punch biopsy	15,000.00	60,000.00
DERM22	Incision and drainage of abscess	12,000.00	24,000.00
DERM23	excision of skin lesions /wart, ganglion, lipoma	20,000.00	50,000.00
	M016 : GASTROENTEROLOGY AND ENDOSCOPY		
	OGD		
GASTROEND01	Diagnostic	18,000.00	48,000.00
GASTROEND02	Sclerotherapy	36,000.00	72,000.00
GASTROEND03	Diathermy ( haemostatic procedure )	36,000.00	72,000.00
GASTROEND04	Pyloric balloon dilatation	36,000.00	72,000.00
GASTROEND05	PEG tube insertion	36,000.00	72,000.00
GASTROEND06	Stricture dilatation (savary gilliard)	36,000.00	72,000.00
GASTROEND07	Upper GI polypectomy	36,000.00	72,000.00
GASTROEND08	Stent insertion	36,000.00	72,000.00
GASTROEND09	Stricture dilatation (TTC)	36,000.00	72,000.00
GASTROEND10	Pneumatic dilatation	36,000.00	72,000.00
GASTROEND11	Band ligation	36,000.00	72,000.00
	Colonoscopy		
GASTROEND12	Diagnostic	18,000.00	36,000.00
GASTROEND13	Stricture dilatation	36,000.00	72,000.00
GASTROEND14	Lower GI polypectomy	36,000.00	72,000.00
	ERCP		
GASTROEND15	Diagnostic	36,000.00	60,000.00
GASTROEND16	Sphincterotomy	36,000.00	72,000.00
GASTROEND17	Stent insertion	36,000.00	84,000.00
GASTROEND18	Sphincterotomy + stone removal	36,000.00	60,000.00
	Others		
GASTROEND19	Bronchoscopy	18,000.00	36,000.00

[Subsidiary]

GASTROEND20	Laryngoscopy	12,000.00	36,000.00
GASTROEND21	Sigmoidoscopy	12,000.00	36,000.00
GASTROEND22	Rectal snip	6,000.00	12,000.00
GASTROEND23	Liver biopsy	18,000.00	36,000.00
GASTROEND24	Peritoneal biopsy	6,000.00	36,000.00
	M017 : OTHER PROCEDURES	—	—
	A) Neurology		
	EEG	6,000.00	18,000.00
	Nerve conduction atudies	12,000.00	36,000.00
	Evoked potential	12,000.00	36,000.00
	Diagnostic lumbar puncture	6,000.00	18,000.00
	Therapeutic lumbar puncture	12,000.00	36,000.00
	B) Respiratory	#VALUE!	#VALUE!
	Peak flowmetry	6,000.00	18,000.00
	Spirometry	6,000.00	18,000.00
	Chest aspiration	6,000.00	18,000.00
	Chest aspiration with biopsy	6,000.00	18,000.00
	C) Dermatology		
	Basal cell excision	18,000.00	36,000.00
	Squamous cell excision	18,000.00	36,000.00
	Cryotherapy	6,000.00	18,000.00
	Cautery	18,000.00	36,000.00
	KOH preparation	6,000.00	12,000.00
	Skin biospy	6,000.00	12,000.00
	D) Nephrology		
	Vascular access	—	—
	A – V shunt / fistulae	24,000.00	60,000.00
	Renal biopsy	18,000.00	36,000.00
	Insertion of peritoneal catheter	24,000.00	60,000.00
	Haemodialysis	6,000.00	18,000.00
	Pertineal dialysis	6,000.00	18,000.00
	Renal transplant	36,000.00	72,000.00
	CVVHD	6,000.00	18,000.00
	E) Psychiatry		
	Electroconvulsive Therapy (per session)	12,000.00	24,000.00
	Psychotherapy (per hour)	8,000.00	15,000.00
	M017 : OTHER PROCEDURES		—
	F) Paediatrics		
	Exchange transfusion	24,000.00	48,000.00

	Cannulae fixation - <i>anaes</i>	1,200.00	6,000.00
	Venepuncture	1,200.00	1,800.00
	Chemotherapy - IV	6,000.00	12,000.00
	Chemotherapy intrathecal	9,600.00	18,000.00
	Intraosseous cannulation	12,000.00	24,000.00
	Central line insertion	12,000.00	18,000.00
	Venous cutdown	12,000.00	24,000.00
	Femoral vein cannulation	12,000.00	24,000.00
	Umbilical catheterization	6,000.00	12,000.00
	Lumbar puncture	6,000.00	12,000.00
	Resuscitation	12,000.00	24,000.00
	Pleural tap	12,000.00	24,000.00
	Pleural biopsy	18,000.00	30,000.00
	Intubation	6,000.00	12,000.00
	Surprapubic bladder tap	6,000.00	9,600.00
	Urinary catheter insertion	3,600.00	7,200.00
	N.G. tube insertion	3,600.00	7,200.00
	Flatus tube insertion	3,600.00	7,200.00
	Proctoscopy	1,200.00	6,000.00
	Enema	6,000.00	12,000.00
	Manual removal of impacted stool	9,000.00	18,000.00
	<i>Removal of Foreign Bodies:</i>	—	—
	Eye	6,000.00	12,000.00
	Nose	6,000.00	12,000.00
	Ear	6,000.00	12,000.00
	Vagina	6,000.00	12,000.00
	Rectum	6,000.00	12,000.00
	Bone marrow aspirate - <i>path</i>	6,000.00	12,000.00
	Splenic aspirate - <i>gastro</i>	6,000.00	12,000.00
	Pericardial tap / aspirate	12,000.00	24,000.00
	Insertion of PD catheter	18,000.00	36,000.00
	Permcath	18,000.00	36,000.00
	M018: ANATOMICAL PATHOLOGY: HISTOLOGY/CYTOLOGY/PM		
PATH01	Cytology Pap smears/Gynae Cytology Vaginal or cervical smears, each	2,040.00	3,360.00
PATH02	Cytology Sputum, all body fluids and tumour aspirates: First unit	2,040.00	2,880.00



[Subsidiary]

PATH03	Cytology: Performance of fine-needle aspiration (FNA)	2,760.00	5,040.00
PATH04	Histology Additional Blocks (per block)	1,920.00	2,880.00
PATH05	Histology and frozen section in laboratory	3,600.00	5,760.00
PATH06	Histology and frozen section in theatre	7,200.00	21,600.00
PATH07	Histology consultation per slide	2,160.00	4,320.00
PATH08	Histology Medium sized biopsies (3 to 5 blocks)	5,760.00	8,640.00
PATH09	Histology Small Sized Biopsies (1-2 blocks)	3,600.00	5,760.00
PATH10	Histology Large Sized Biopsies (more than 5 slides)	8,000.00	15,000.00
PATH11	Immunofluorescence studies	3,360.00	5,520.00
PATH12	Immunoperoxidase studies	5,040.00	8,280.00
PATH13	Intraop Examination of fine needle aspiration in theatre	12,960.00	19,440.00
PATH14	Postmortem: Foetal autopsy excluding histology & ancillary tests	30,000.00	60,000.00
PATH15	Postmortem: Forensic autopsy excluding histology & ancillary tests/procedures/court appearance	36,000.00	66,000.00
PATH16	Postmortem: Clinical autopsy excluding histology & ancillary tests/procedures	30,000.00	60,000.00
PATH17	Second and subsequent frozen sections, each	6,240.00	4,200.00
PATH18	Serial step sections	3,240.00	4,800.00
PATH19	Special stains	1,080.00	1,440.00
PATH20	Transmission electron microscopy	10,680.00	21,600.00
PATH21	Forensic toxicology	150,000.00	250,000.00
PATH22	Exhumation	100,000.00	150,000.00
	CLINICAL CHEMISTRY, SEROLOGY, ENDOCRINOLOGY		
PATH23	Abnormal pigments: Qualitative	600.00	960.00
PATH24	Abnormal pigments: Quantitative	1,200.00	1,800.00
PATH25	Acid phosphate	720.00	1,080.00
PATH26	Amino acids Quantitative (Post derivatisation HPLC)	9,840.00	14,760.00

PATH27	Albumin	720.00	1,080.00
PATH28	Alcohol	2,040.00	3,480.00
PATH29	Alkaline phosphatase	720.00	1,080.00
PATH30	Alkaline phosphatase-iso-enzymes	2,040.00	2,400.00
PATH31	Ammonia: Enzymatic	1,080.00	1,440.00
PATH32	Ammonia: Monitor	600.00	960.00
PATH33	Alpha-1-antitrypsin: Total	1,080.00	1,440.00
PATH34	Amylase	720.00	1,080.00
PATH35	Arsenic in blood, hair or nails	4,680.00	6,840.00
PATH36	Bilirubin - Reflectance	720.00	1,080.00
PATH37	Bilirubin: Total	720.00	1,080.00
PATH38	Bilirubin: Conjugated	600.00	720.00
PATH39	Breath Hydrogen Test	2,760.00	4,080.00
PATH40	CSF Nicotinic Acid	2,040.00	3,480.00
PATH41	CSF Glutamine	1,440.00	2,160.00
PATH42	Cadmium: Atomic absorption	2,400.00	3,480.00
PATH43	Calcium: Ionized	960.00	1,320.00
PATH44	Calcium: Spectrophotometric	600.00	720.00
PATH45	Calcium: Atomic absorption	1,080.00	1,440.00
PATH46	Carotene	360.00	480.00
PATH47	Carnitine (Total or free) in biological fluid: Each	2,040.00	2,400.00
PATH48	Carnitine (Total or free) in muscle: Each	3,120.00	4,560.00
PATH49	Acyl Carnitine	3,120.00	4,560.00
PATH50	Chloride	480.00	600.00
PATH51	Chol/HDL/LDL/Trig	1,920.00	3,840.00
PATH52	LDL cholesterol (chemical determination)	960.00	1,320.00
PATH53	Cholesterol total	720.00	1,080.00
PATH54	HDL cholesterol	720.00	1,080.00
PATH55	Cholinesterase: Serum or erythrocyte: Each	1,080.00	1,440.00
PATH56	Cholinesterase phenotype (Dibucaine or fluoride each)	1,200.00	1,800.00
PATH57	Total CO2	720.00	1,080.00
PATH58	Creatinine	600.00	720.00
PATH59	CSF-Immunoglobulin G	1,320.00	1,920.00
PATH60	C1-Esterase Inhibitor	1,320.00	1,920.00
PATH61	CSF-Albumin	1,320.00	1,920.00

[Subsidiary]

PATH62	CSF-IgG Index	2,760.00	4,200.00
PATH63	Glutamic acid	3,840.00	5,520.00
PATH64	Homocysteine (random)	2,040.00	2,880.00
PATH65	Homocysteine (after Methionine load)	2,400.00	3,480.00
PATH66	D-Xylose absorption test: Two hours	1,800.00	3,480.00
PATH67	Fibrinogen: Quantitative	600.00	720.00
PATH68	Glucose tolerance test (2 specimens)	1,200.00	1,800.00
PATH69	Glucose strip-test with photometric reading	360.00	480.00
PATH70	Galactose	1,440.00	2,160.00
PATH71	Glucose tolerance test (3 specimens)	1,800.00	3,480.00
PATH72	Glucose tolerance test (4 specimens)	2,160.00	3,360.00
PATH73	Glucose: Quantitative	600.00	720.00
PATH74	Glucose tolerance test (5 specimens)	2,760.00	4,080.00
PATH75	Galactose-1-phosphate uridyl transferase	2,040.00	3,120.00
PATH76	Fructosamine	1,080.00	1,440.00
PATH77	HbA1C	2,160.00	3,600.00
PATH78	Immunofixation: Total protein, IgG, IgA, IgM, Kappa, Lambda	6,000.00	8,880.00
PATH79	Lithium: Flame ionisation	720.00	1,080.00
PATH80	Lithium: Atomic absorption	1,080.00	1,440.00
PATH81	Iron	960.00	1,320.00
PATH82	Iron-binding capacity	1,080.00	1,440.00
PATH83	Blood gases: Astrup/pO <sub>2</sub> and ancillary tests - can only be charged to a maximum of 6 times per patient per day	2,520.00	3,600.00
PATH84	Oximetry analysis: MetHb, COHb, O <sub>2</sub> Hb, RHb, SulfHb	960.00	1,320.00
PATH85	Ketones in plasma: Qualitative	360.00	480.00
PATH86	Drug level-biological fluid: Quantitative per drug (others)	2,880.00	5,760.00
PATH87	Anti-Mullerian Hormone	7,080.00	9,840.00
PATH88	Cyclosporin assay	2,880.00	4,440.00
PATH89	Tacrolimus assay	2,880.00	4,440.00
PATH90	Lysosomal enzyme assay	4,680.00	6,960.00



PATH91	Thymidine kinase	2,640.00	3,840.00
PATH92	Lipase	720.00	1,440.00
PATH93	Lactate	2,040.00	3,120.00
PATH94	Lipoprotein electrophoresis	1,200.00	1,800.00
PATH95	Orosmucoid	1,320.00	1,920.00
PATH96	Osmolality: Serum or urine	960.00	1,320.00
PATH97	Magnesium: Spectrophotometric	600.00	720.00
PATH98	Magnesium: Atomic absorption	1,080.00	1,440.00
PATH99	Mercury: Atomic absorption	2,400.00	3,480.00
PATH100	Copper: Atomic absorption	2,400.00	3,480.00
PATH101	Protein electrophoresis	1,200.00	1,800.00
PATH102	IgG sub-class 1, 2, 3 or 4: Per sub-class	2,640.00	3,840.00
PATH103	Serological antibody (tests per antibody)	2,640.00	4,560.00
PATH104	Phosphate	600.00	720.00
PATH105	Potassium	600.00	720.00
PATH106	Sodium	600.00	720.00
PATH107	Protein: Total	480.00	720.00
PATH108	pH, pCO <sub>2</sub> or pO <sub>2</sub> : Each	960.00	1,320.00
PATH109	Pyruvic acid	600.00	960.00
PATH110	Salicylates	600.00	960.00
PATH111	Caeruloplasmin	600.00	960.00
PATH112	Phenylalanine: Quantitative	1,440.00	2,160.00
PATH113	Aspartate aminotransferase (AST)	720.00	1,080.00
PATH114	Alanine aminotransferase (ALT)	720.00	1,080.00
PATH115	Creatine kinase (CK)	720.00	1,080.00
PATH116	Lactate dehydrogenase (LD)	720.00	1,080.00
PATH117	Gamma glutamyl transferase (GGT)	720.00	1,080.00
PATH118	Aldolase	720.00	1,080.00
PATH119	Angiotensin converting enzyme (ACE)	1,200.00	1,800.00
PATH120	Lactate dehydrogenase isoenzyme	1,440.00	2,040.00
PATH121	CK-MB: Immunoinhibition/precipitation	1,440.00	2,040.00
PATH122	Adenosine deaminase	720.00	1,080.00
PATH123	Serum/plasma enzymes	720.00	1,080.00

[Subsidiary]

PATH125	Lead: Atomic absorption	1,920.00	2,880.00
PATH126	Triglyceride	1,080.00	1,680.00
PATH127	Tay - Sachs Study	4,680.00	6,960.00
PATH128	Red cell magnesium	2,040.00	2,400.00
PATH129	Urea	600.00	720.00
PATH130	CK-MB: Mass determination: Quantitative (Automated)	2,040.00	3,480.00
PATH131	CK-MB: Mass determination: Quantitative (Not automated)	2,400.00	4,200.00
PATH132	Myoglobin quantitative: Monoclonal immunological	2,040.00	3,480.00
PATH133	Uric acid	600.00	720.00
PATH134	Vitamin D3	2,880.00	5,760.00
PATH135	Vitamin A-saturation test	2,880.00	5,760.00
PATH136	Vitamin E (tocopherol)	2,880.00	5,760.00
PATH137	Vitamin A	2,880.00	5,760.00
PATH138	Troponin isoforms: Each	3,000.00	4,800.00
PATH139	Apoprotein AI: Turbidometric method	1,200.00	1,680.00
PATH140	Apoprotein AII: Turbidometric method	1,200.00	1,680.00
PATH141	Apoprotein B: Turbidometric method	1,200.00	1,680.00
PATH142	Lipoprotein (a)(Lp(a)) assay	2,040.00	3,480.00
PATH143	Sodium + potassium + chloride + CO <sub>2</sub> + urea	2,040.00	3,120.00
PATH144	ELISA technique (other test) per antibody	2,520.00	4,320.00
PATH145	Sirolimus Assay	9,840.00	14,640.00
PATH146	Quantitative protein estimation: Mancini method	1,080.00	1,680.00
PATH147	Quantitative protein estimation: Nephelometer or Turbidometric method	1,200.00	1,680.00
PATH148	Quantitative protein estimation: Labelled antibody	2,040.00	3,480.00
PATH149	C-reactive protein (Ultra sensitive)	1,920.00	2,880.00
PATH150	Lactose	1,440.00	2,040.00
PATH151	Vitamin B6	2,040.00	2,880.00
PATH152	Zinc: Atomic absorption	2,400.00	3,480.00
PATH153	Urine dipstick, per stick (irrespective of the number of tests on stick)	360.00	360.00



PATH154	Abnormal pigments	600.00	960.00
PATH155	Alkapton test: Homogentisic acid	600.00	960.00
PATH156	Amino acids: Quantitative (Post derivatisation HPLC)	9,840.00	14,760.00
PATH157	Amino laevulinic acid	2,400.00	3,480.00
PATH158	Amylase	720.00	1,080.00
PATH159	Arsenic	2,400.00	3,480.00
PATH160	Ascorbic acid	360.00	480.00
PATH161	Bence-Jones protein	480.00	600.00
PATH162	Calcium: Atomic absorption	1,080.00	1,440.00
PATH163	Calcium: Spectrophotometric	600.00	720.00
PATH164	Lead: Atomic absorption	1,920.00	2,880.00
PATH165	Urine collagen telopeptides	4,680.00	6,960.00
PATH166	Bile pigments: Qualitative	360.00	480.00
PATH167	Protein: Quantitative	360.00	480.00
PATH168	Mucopolysaccharides: Qualitative	600.00	720.00
PATH169	Oxalate	1,320.00	1,920.00
PATH170	Glucose: Quantitative	360.00	480.00
PATH171	Steroids: Chromatography (each)	1,080.00	1,440.00
PATH172	Creatinine	600.00	720.00
PATH173	Creatinine clearance	1,080.00	1,440.00
PATH174	Electrophoresis: Qualitative	600.00	960.00
PATH175	Fetal Lung Maturity	4,680.00	6,960.00
PATH176	Urine/Fluid - Specific Gravity	240.00	360.00
PATH177	Metabolites HPLC (High Pressure Liquid Chromatography)	4,800.00	7,080.00
PATH178	Metabolites (Gaschromatography/Mass spectrophotometry)	6,000.00	8,880.00
PATH179	Pharmacological/Drugs of abuse: Metabolites HPLC (High Pressure Liquid Chromatography)	4,800.00	7,080.00
PATH180	Pharmacological/Drugs of abuse: Metabolites (Gaschromatography/Mass spectrophotometry)	6,000.00	8,880.00
PATH181	5-Hydroxy-indole-acetic acid: Screen test	480.00	600.00
PATH182	5HIAA (Hplc)	9,840.00	14,760.00

[Subsidiary]

PATH183	Ketones: Excluding dip-stick method	360.00	480.00
PATH184	Reducing substances	360.00	480.00
PATH185	Metanephrines: Column chromatography	2,760.00	4,200.00
PATH186	Metanephrine (Hplc)	9,840.00	14,760.00
PATH187	Aromatic amines (gas chromatography/mass spectrophotometry)	3,480.00	5,040.00
PATH188	Nitrosonaphtol test for tyrosine	360.00	480.00
PATH189	Orotic Acid - Urine	1,320.00	1,920.00
PATH190	Very long Chain Fatty Acids	16,200.00	24,240.00
PATH191	Micro Albumin: Quantitative	2,040.00	3,480.00
PATH192	Micro Albumin: Qualitative	600.00	960.00
PATH193	pH: Excluding dip-stick method	240.00	360.00
PATH194	Thin layer chromatography: One way	960.00	1,320.00
PATH195	Thin layer chromatography: Two way	1,440.00	2,160.00
PATH196	Organic acids: Quantitative: GCMS	13,680.00	20,520.00
PATH197	Phenylpyruvic acid: Ferric chloride	360.00	480.00
PATH198	Chromium Total Urine	2,400.00	3,480.00
PATH199	Phosphate excretion index	2,760.00	4,200.00
PATH200	Porphobilinogen qualitative screen: Urine	720.00	1,080.00
PATH201	Porphobilinogen/ALA: Quantitative each	1,920.00	2,880.00
PATH202	Magnesium: Spectrophotometric	600.00	720.00
PATH203	Magnesium: Atomic absorption	1,080.00	1,440.00
PATH204	Identification of carbohydrate	1,080.00	1,440.00
PATH205	Identification of drug: Qualitative	600.00	960.00
PATH206	Identification of drug: Quantitative	1,440.00	4,080.00
PATH207	Urea clearance	720.00	1,080.00
PATH208	Copper: Spectrophotometric	600.00	720.00
PATH209	Copper: Atomic absorption	2,400.00	3,480.00
PATH210	Chloride	480.00	600.00
PATH211	Urobilinogen: Quantitative	960.00	1,320.00
PATH212	Phosphates	600.00	720.00

PATH213	Potassium	600.00	720.00
PATH214	Sodium	600.00	720.00
PATH215	Urea	600.00	720.00
PATH216	Uric acid	600.00	720.00
PATH217	Total protein and protein electrophoresis	1,440.00	2,160.00
PATH218	VMA: Quantitative	7,800.00	13,440.00
PATH219	Catecholamines (HPLC)	7,800.00	13,440.00
PATH220	Immunofixation: Total protein, IgG, IgA, IgM, Kappa, Lambda	6,000.00	8,880.00
PATH221	Immunoglobulin D	1,320.00	1,920.00
PATH222	Cystine: Quantitative	2,040.00	3,480.00
PATH223	Dinitrophenol hydrazine test: Ketoacids	360.00	480.00
PATH224	Chloride	480.00	600.00
PATH225	Fat: Qualitative	480.00	720.00
PATH226	Fat: Quantitative	2,760.00	4,200.00
PATH227	Ph	240.00	360.00
PATH228	Occult blood: Chemical test	360.00	480.00
PATH229	Occult blood: Monoclonal antibodies	1,200.00	1,800.00
PATH230	Potassium	600.00	720.00
PATH231	Sodium	600.00	720.00
PATH232	Secretory IgA	1,320.00	1,920.00
PATH233	Elastase quantitative ELISA	6,000.00	8,880.00
PATH234	Stercobilinogen: Quantitative	960.00	1,320.00
PATH235	Porphyryn screen qualitative: Urine, stool, red blood cells: Each	720.00	1,080.00
PATH236	Porphyryn qualitative analysis by TLC: Urine, stool, red blood cells: Each	2,640.00	3,840.00
PATH237	Porphyryn: Total quantisation: Urine, stool, red blood cells: Each	2,640.00	3,840.00
PATH238	Porphyryn quantitative analysis by TLC/HPLC: Urine, stool, red blood cells: Each	3,840.00	5,640.00
PATH239	Drug level in biological fluid: Monoclonal immunological	2,040.00	3,480.00
PATH240	Amylase in exudate	720.00	1,080.00
PATH241	Fluoride in biological fluids and water	2,040.00	3,120.00



[Subsidiary]

PATH242	Trace metals in biological fluid: Atomic absorption	2,400.00	3,480.00
PATH243	Calcium in fluid: Spectrophotometric	600.00	720.00
PATH244	Calcium in fluid: Atomic absorption	1,080.00	1,440.00
PATH245	Gallstone analysis: (Bilirubin, Ca, P, Oxalate, Cholesterol)	2,760.00	4,200.00
PATH246	Urea breath test	7,440.00	11,040.00
PATH247	Lecithin in amniotic fluid: L/S ratio	3,480.00	5,040.00
PATH248	Lamellar body count in amniotic fluid	1,320.00	1,920.00
PATH249	Foam test: Amniotic fluid	480.00	720.00
PATH250	Renal calculus: Chemistry	720.00	1,080.00
PATH251	Renal calculus: Crystallography	2,040.00	3,120.00
PATH252	Sweat: Sodium	600.00	720.00
PATH253	Sweat: Potassium	600.00	720.00
PATH254	Sweat: Chloride	480.00	600.00
PATH255	Sweat collection by iontophoresis (excluding collection material)	600.00	960.00
PATH256	Tryptophane loading test	2,760.00	4,200.00
PATH257	Cell count	480.00	720.00
PATH258	Cell count, protein, glucose and chloride	1,080.00	1,440.00
PATH259	Chloride	480.00	600.00
PATH260	Sodium	600.00	720.00
PATH261	Protein: Qualitative	240.00	360.00
PATH262	Protein: Quantitative	480.00	720.00
PATH263	Glucose	600.00	720.00
PATH264	Urea	600.00	720.00
PATH265	Protein electrophoresis	2,040.00	3,480.00
PATH266	HCG: Latex agglutination: Qualitative (side room)	600.00	960.00
PATH267	HCG: Latex agglutination: Semi- quantitative (side room)	1,200.00	1,800.00
PATH268	HCG: Monoclonal immunological: Qualitative	1,320.00	1,920.00
PATH269	HCG: Monoclonal immunological: Quantitative	2,040.00	3,480.00
PATH270	Bone Specific Alk Phosphatase	2,640.00	3,840.00

PATH271	Anti IgE receptor antibody test (10 samples and dilution)	20,160.00	30,240.00
PATH272	Eosinophil cationic protein	3,480.00	5,280.00
PATH273	Micro-albuminuria: Radio-isotope method	2,040.00	3,480.00
PATH274	Acetyl choline receptor antibody	19,800.00	29,520.00
PATH275	CA-199 tumour marker	2,640.00	3,840.00
PATH276	Nuclear Matrix Protein 22	4,560.00	6,720.00
PATH277	CA-125 tumour marker	2,640.00	3,840.00
PATH278	C6 complement functional essay	5,640.00	8,520.00
PATH279	Beta-2-microglobulin	2,040.00	3,480.00
PATH280	Chromograqnin A	6,000.00	8,880.00
PATH281	CA-549	2,640.00	3,840.00
PATH282	Tumour markers: Monoclonal immunological (each)	2,640.00	3,840.00
PATH283	CA-195 tumour marker	2,640.00	3,840.00
PATH284	Carcino-embryonic antigen	2,640.00	3,840.00
PATH285	TSH Receptor Ab	2,400.00	4,680.00
PATH286	Cast Per Allergen	3,480.00	5,280.00
PATH287	CA-724	2,640.00	3,840.00
PATH288	Neuron specific enolase	2,640.00	3,840.00
PATH289	Osteocalcin	4,080.00	6,000.00
PATH290	Vitamin B12-absorption: Shilling test	2,040.00	2,400.00
PATH291	Serotonin	2,520.00	3,600.00
PATH292	T4 Free thyroxine (FT4)	2,040.00	3,360.00
PATH293	TSH/T4 Thyrotropin (TSH) + Free Thyroxine (FT4)	3,240.00	6,360.00
PATH294	Insulin	2,040.00	3,480.00
PATH295	C-Peptide	2,040.00	3,480.00
PATH296	Calcitonin	2,520.00	3,600.00
PATH297	B-Type Natriuretic Peptide	5,040.00	8,880.00
PATH298	Releasing hormone response	6,360.00	9,360.00
PATH299	Vitamin B12	1,920.00	3,600.00
PATH300	Vitamin D3: Calcitroil (RIA)	9,360.00	14,160.00
PATH301	Drug concentration: Quantitative	2,040.00	3,480.00
PATH302	Free hormone assay	2,400.00	3,360.00
PATH303	Growth hormone	2,040.00	3,480.00
PATH304	Hormone concentration: Quantitative	2,040.00	3,480.00
PATH305	Carbohydrate deficient transferrin	3,840.00	5,520.00



[Subsidiary]

PATH306	Cortisol	2,040.00	3,480.00
PATH307	DHEA sulphate	2,040.00	3,480.00
PATH308	Testosterone	2,040.00	3,480.00
PATH309	Free testosterone	2,400.00	3,360.00
PATH310	Oestradiol	2,040.00	3,480.00
PATH311	Oestriol	1,440.00	2,040.00
PATH312	Multiple antigen specific IgE screening test for Atopy	4,800.00	7,080.00
PATH313	TSH - Thyrotropin (TSH)	2,520.00	3,840.00
PATH314	Combined antigen specific IgE	3,240.00	4,680.00
PATH315	TFT - Thyroid function test (T3+T4+TSH)	4,320.00	7,200.00
PATH316	T3 Free tri-iodothyronine (FT3)	2,040.00	3,360.00
PATH317	Renin activity	2,520.00	3,600.00
PATH318	Parathormone	2,160.00	3,360.00
PATH319	Aldosterone	2,040.00	3,480.00
PATH320	Follitropin (FSH)	2,040.00	3,480.00
PATH321	Lutropin (LH)	2,040.00	3,480.00
PATH322	Soluble transferrin receptor	1,440.00	2,160.00
PATH323	Prostate specific antigen	1,920.00	2,760.00
PATH324	17 Hydroxy progesterone	2,040.00	3,480.00
PATH325	Progesterone	2,040.00	3,480.00
PATH326	Alpha-feto protein	2,040.00	3,480.00
PATH327	ACTH	3,240.00	5,400.00
PATH328	Free PSA	2,760.00	3,840.00
PATH329	Sex hormone binding globulin	2,040.00	3,480.00
PATH330	Gastrin	2,040.00	3,480.00
PATH331	Ferritin	2,040.00	3,480.00
PATH332	Anti-DNA antibodies	2,040.00	3,480.00
PATH333	Antiplatelet antibodies	2,040.00	2,880.00
PATH334	Hepatitis: Per antigen or antibody	1,920.00	2,760.00
PATH335	Transcobalamine	2,040.00	3,480.00
PATH336	Folic acid	2,040.00	3,480.00
PATH337	Prostatic acid phosphatase	2,040.00	3,480.00
PATH338	Erythrocyte folate	2,400.00	3,360.00
PATH339	Prolactin	2,040.00	3,480.00
PATH340	Procalcitonin: Semi-quantitative	4,080.00	6,120.00
PATH341	Procalcitonin: Quantitative	5,760.00	8,640.00
PATH342	HCG: Quantitative as used for Down's screen	1,920.00	2,880.00

PATH343	First trimester Downs screen	6,840.00	10,080.00
PATH344	Second Trimester Down's screen	4,200.00	6,360.00
PATH345	Anti-CCP	2,160.00	3,360.00
PATH346	Erythropoietin	2,640.00	3,840.00
PATH347	HTLV I/II	2,640.00	3,840.00
PATH348	Anti-Gm1 Antibody Assay	9,360.00	14,160.00
PATH349	HIV Ab - Rapid Test	2,040.00	2,400.00
PATH350	Thyroglobulin	2,640.00	2,400.00
PATH351	SCC marker	2,640.00	2,400.00
	CYTOGENETIC STUDIES	—	—
PATH352	First trimester Downs screen	6,840.00	10,080.00
PATH353	Second Trimester Down's screen	4,200.00	6,360.00
PATH354	Cell culture: Lymphocytes, cord blood	2,040.00	2,880.00
PATH355	Cell culture: Amniotic fluid, fibroblasts, leukaemia bloods, bone marrow, other specialised cultures	5,760.00	8,640.00
PATH356	Cell culture: Chorionic villi	7,680.00	11,520.00
PATH357	Cytogenetic analysis: Lymphocytes: Idiograms, karyotyping, one staining technique	17,280.00	25,800.00
PATH358	Cytogenetic analysis: Amniotic fluid, fibroblasts, chorionic villi, products of conception, bone marrow, leukemia bloods: Idiograms, karyotyping, one staining technique	34,440.00	51,720.00
	HAEMATOLOGY AND COAGULATION		
PATH359	Alkali resistant haemoglobin	600.00	960.00
PATH360	Antiglobulin test (Coombs' or trypsinized red cells)	600.00	720.00
PATH361	Antibody titration	1,080.00	1,440.00
PATH362	Antibody identification	1,200.00	1,680.00
PATH363	Bleeding time (does not include the cost of the simplate device)	960.00	1,320.00
PATH364	Blood volume, dye method	1,080.00	1,440.00
PATH365	Buffy layer examination	2,640.00	3,840.00
PATH366	Bone marrow cytological examination only	2,640.00	3,840.00
PATH367	Bone marrow Aspiration Procedure (excl consumables and histology)	3,000.00	5,280.00



[Subsidiary]

PATH368	Bone marrow trephine biopsy (excl consumables and histology)	4,200.00	6,240.00
PATH369	Bone marrow aspiration and trephine biopsy procedure (excl consumables and histology)	4,680.00	6,960.00
PATH370	Capillary fragility: Hess	360.00	480.00
PATH371	Circulating anticoagulants	720.00	1,200.00
PATH372	Coagulation factor inhibitor assay	7,200.00	10,800.00
PATH373	Activated protein C resistance	3,360.00	4,920.00
PATH374	Coagulation time	480.00	720.00
PATH375	Anti-factor Xa Activity	6,840.00	10,080.00
PATH376	Cold agglutinins	600.00	720.00
PATH377	Protein S: Functional	3,960.00	5,760.00
PATH378	Compatibility for blood transfusion	600.00	720.00
PATH379	Cryoglobulin	600.00	720.00
PATH380	Protein C (chromogenic)	3,960.00	5,760.00
PATH381	Anti-thrombin III (chromogenic)	2,760.00	4,200.00
PATH382	Plasminogen (chromogenic)	7,800.00	11,520.00
PATH383	Lupus Russel Viper method	2,160.00	3,240.00
PATH384	Lupus Kaolin Exner method	3,240.00	4,800.00
PATH385	Erythrocyte count	360.00	480.00
PATH386	Factors V and VII: Qualitative	1,080.00	1,440.00
PATH387	Erythrocyte sedimentation rate	480.00	600.00
PATH388	Fibrin stabilizing factor (urea test)	600.00	960.00
PATH389	Fibrin monomers	480.00	600.00
PATH390	Plasminogen activator inhibitor (PAI-I)	8,280.00	12,480.00
PATH391	Tissue plasminogen Activator (tPA)	8,520.00	12,720.00
PATH392	Osmotic fragility (before and after incubation)	2,400.00	3,480.00
PATH393	ABO Reverse Group	600.00	720.00
PATH394	Full blood count	1,080.00	2,040.00
PATH395	Full cross match	1,080.00	2,160.00
PATH396	Coagulation factors: Quantitative	4,080.00	6,120.00
PATH397	Factor VIII related antigen	7,680.00	11,400.00
PATH398	Coagulation factor correction study	2,040.00	2,400.00
PATH399	Factor XIII related antigen	7,680.00	11,520.00



PATH368	Bone marrow trephine biopsy (excl consumables and histology)	4,200.00	6,240.00
PATH369	Bone marrow aspiration and trephine biopsy procedure (excl consumables and histology)	4,680.00	6,960.00
PATH370	Capillary fragility: Hess	360.00	480.00
PATH371	Circulating anticoagulants	720.00	1,200.00
PATH372	Coagulation factor inhibitor assay	7,200.00	10,800.00
PATH373	Activated protein C resistance	3,360.00	4,920.00
PATH374	Coagulation time	480.00	720.00
PATH375	Anti-factor Xa Activity	6,840.00	10,080.00
PATH376	Cold agglutinins	600.00	720.00
PATH377	Protein S: Functional	3,960.00	5,760.00
PATH378	Compatibility for blood transfusion	600.00	720.00
PATH379	Cryoglobulin	600.00	720.00
PATH380	Protein C (chromogenic)	3,960.00	5,760.00
PATH381	Anti-thrombin III (chromogenic)	2,760.00	4,200.00
PATH382	Plasminogen (chromogenic)	7,800.00	11,520.00
PATH383	Lupus Russel Viper method	2,160.00	3,240.00
PATH384	Lupus Kaolin Exner method	3,240.00	4,800.00
PATH385	Erythrocyte count	360.00	480.00
PATH386	Factors V and VII: Qualitative	1,080.00	1,440.00
PATH387	Erythrocyte sedimentation rate	480.00	600.00
PATH388	Fibrin stabilizing factor (urea test)	600.00	960.00
PATH389	Fibrin monomers	480.00	600.00
PATH390	Plasminogen activator inhibitor (PAI-I)	8,280.00	12,480.00
PATH391	Tissue plasminogen Activator (tPA)	8,520.00	12,720.00
PATH392	Osmotic fragility (before and after incubation)	2,400.00	3,480.00
PATH393	ABO Reverse Group	600.00	720.00
PATH394	Full blood count	1,080.00	2,040.00
PATH395	Full cross match	1,080.00	2,160.00
PATH396	Coagulation factors: Quantitative	4,080.00	6,120.00
PATH397	Factor VIII related antigen	7,680.00	11,400.00
PATH398	Coagulation factor correction study	2,040.00	2,400.00
PATH399	Factor XIII related antigen	7,680.00	11,520.00

[Subsidiary]

PATH400	Haemoglobin estimation	360.00	480.00
PATH401	Contact activated product assay	2,040.00	3,120.00
PATH402	Grouping: A B and O antigens	600.00	720.00
PATH403	Grouping: Rh antigen	600.00	720.00
PATH404	PIVKA	5,520.00	8,280.00
PATH405	Euglobulin Lysis time	3,360.00	4,920.00
PATH406	Haemoglobin A2 (column chromatography)	1,920.00	2,880.00
PATH407	Haemoglobin electrophoresis	3,480.00	5,040.00
PATH408	Haemoglobin electrophoresis HPLC	9,720.00	13,080.00
PATH409	Haemoglobin-S (solubility test)	600.00	720.00
PATH410	Haptoglobin: Quantitative	3,480.00	4,320.00
PATH411	Ham's acidified serum test	1,080.00	1,680.00
PATH412	Heinz bodies	360.00	480.00
PATH413	Haemosiderin in urinary sediment	360.00	480.00
PATH414	Leucocyte differential count	960.00	1,200.00
PATH415	Leucocytes: Total count	360.00	480.00
PATH416	QBC malaria concentration and fluorescent staining	720.00	1,440.00
PATH417	LE-cells	1,200.00	1,680.00
PATH418	Neutrophil alkaline phosphatase	3,600.00	5,400.00
PATH419	Packed cell volume: Haematocrit	360.00	480.00
PATH420	Plasmodium falciparum: Monoclonal immunological identification	1,200.00	1,800.00
PATH421	Plasma haemoglobin	960.00	1,320.00
PATH422	Platelet sensitivities	2,520.00	3,600.00
PATH423	Platelet aggregation per aggregant	2,040.00	2,400.00
PATH424	Platelet count	360.00	480.00
PATH425	Platelet adhesiveness	600.00	960.00
PATH426	Prothrombin consumption	720.00	1,200.00
PATH427	Prothrombin determination (two stages)	720.00	1,200.00
PATH428	Prothrombin index (INR)	960.00	1,200.00
PATH429	Therapeutic drug level: Dosage	600.00	960.00
PATH430	Reticulocyte count	480.00	600.00
PATH431	Schumm's test	600.00	720.00
PATH432	Sickling test	360.00	480.00



PATH400	Haemoglobin estimation	360.00	480.00
PATH401	Contact activated product assay	2,040.00	3,120.00
PATH402	Grouping: A B and O antigens	600.00	720.00
PATH403	Grouping: Rh antigen	600.00	720.00
PATH404	PIVKA	5,520.00	8,280.00
PATH405	Euglobulin Lysis time	3,360.00	4,920.00
PATH406	Haemoglobin A2 (column chromatography)	1,920.00	2,880.00
PATH407	Haemoglobin electrophoresis	3,480.00	5,040.00
PATH408	Haemoglobin electrophoresis HPLC	9,720.00	13,080.00
PATH409	Haemoglobin-S (solubility test)	600.00	720.00
PATH410	Haptoglobin: Quantitative	3,480.00	4,320.00
PATH411	Ham's acidified serum test	1,080.00	1,680.00
PATH412	Heinz bodies	360.00	480.00
PATH413	Haemosiderin in urinary sediment	360.00	480.00
PATH414	Leucocyte differential count	960.00	1,200.00
PATH415	Leucocytes: Total count	360.00	480.00
PATH416	QBC malaria concentration and fluorescent staining	720.00	1,440.00
PATH417	LE-cells	1,200.00	1,680.00
PATH418	Neutrophil alkaline phosphatase	3,600.00	5,400.00
PATH419	Packed cell volume: Haematocrit	360.00	480.00
PATH420	Plasmodium falciparum: Monoclonal immunological identification	1,200.00	1,800.00
PATH421	Plasma haemoglobin	960.00	1,320.00
PATH422	Platelet sensitivities	2,520.00	3,600.00
PATH423	Platelet aggregation per aggregant	2,040.00	2,400.00
PATH424	Platelet count	360.00	480.00
PATH425	Platelet adhesiveness	600.00	960.00
PATH426	Prothrombin consumption	720.00	1,200.00
PATH427	Prothrombin determination (two stages)	720.00	1,200.00
PATH428	Prothrombin index (INR)	960.00	1,200.00
PATH429	Therapeutic drug level: Dosage	600.00	960.00
PATH430	Reticulocyte count	480.00	600.00
PATH431	Schumm's test	600.00	720.00
PATH432	Sickling test	360.00	480.00

[Subsidiary]

PATH433	Sucrose lysis test for PNH	600.00	720.00
PATH434	T and B-cells EAC markers (limited to ONE marker only for CD4/8 counts)	2,760.00	4,080.00
PATH435	Thrombo - Elastogram	3,360.00	4,920.00
PATH436	Fibrinogen titre	600.00	720.00
PATH437	Glucose 6-phosphate- dehydrogenase: Qualitative	1,080.00	1,680.00
PATH438	Glucose 6-phosphate- dehydrogenase: Quantitative	2,040.00	3,120.00
PATH439	Red cell pyruvate kinase: Quantitative	2,040.00	3,120.00
PATH440	Red cell Rhesus phenotype	1,320.00	1,920.00
PATH441	Haemoglobin F in blood smear	720.00	1,200.00
PATH442	Partial thromboplastin time	720.00	1,200.00
PATH443	Thrombin time (screen)	1,080.00	1,440.00
PATH444	Thrombin time (serial)	1,080.00	1,440.00
PATH445	Haemoglobin H	360.00	480.00
PATH446	Fibrin degeneration products (diffusion plate)	1,320.00	2,040.00
PATH447	Fibrin degeneration products (latex slide)	600.00	960.00
PATH448	XDP (Dimer test or equivalent latex slide test)	1,200.00	1,680.00
PATH449	Haemagglutination inhibition	1,320.00	1,920.00
PATH450	D-Dimer (quantitative)	2,760.00	5,280.00
PATH451	Ristocetin Cofactor	4,560.00	6,840.00
PATH452	Heparin removal	3,600.00	5,520.00
PATH453	Autogenous vaccine	2,040.00	3,480.00
PATH454	Entomological examination	2,640.00	3,960.00
PATH455	Parasites in blood smear	720.00	1,200.00
PATH456	CD4/CD8	1,440.00	4,320.00
PATH457	Flow Cytometry per marker	4,800.00	6,240.00
	IMMUNOLOGY & TISSUE TYPING		
PATH458	HLA test for specific allele DNA-PCR	4,680.00	6,840.00
PATH459	HLA typing low resolution Class I DNA-PCR per locus	12,600.00	18,720.00
PATH460	HLA typing low resolution Class II DNA-PCR per locus	9,240.00	13,920.00
PATH461	HLA typing high resolution Class I or II DNA-PCR per locus	8,280.00	12,480.00



PATH462	Anti IgE receptor antibody test (10 samples and dilution)	20,160.00	30,240.00
PATH463	Mast cell tryptase	12,120.00	18,240.00
PATH464	Acetyl choline receptor antibody	19,800.00	29,520.00
PATH465	IgE: Total	2,040.00	3,480.00
PATH466	Antigen specific IgE	2,040.00	3,480.00
PATH467	Panel typing: Antibody detection: Class I	4,680.00	6,840.00
PATH468	Panel typing: Antibody detection: Class II	5,520.00	8,280.00
PATH469	HLA test for specific locus/antigen - serology	3,480.00	5,040.00
PATH470	HLA typing: Class I - serology	6,480.00	9,840.00
PATH471	HLA typing: Class II - serology	6,480.00	9,840.00
PATH472	HLA typing: Class I & II - serology	11,280.00	16,920.00
PATH473	Cross matching T-cells (per tray)	2,400.00	3,480.00
PATH474	Cross matching B-cells	4,800.00	7,200.00
PATH475	Cross matching T- & B-cells	6,120.00	9,120.00
	MICROBIOLOGY		
PATH476	Miscellaneous (body fluids, urine, exudate, fungi, puss, scrapings, etc.)	720.00	1,080.00
PATH477	Fungus identification	1,200.00	1,680.00
PATH478	Faeces (including parasites)	720.00	1,080.00
PATH479	Inclusion bodies	600.00	960.00
PATH480	Crystal identification polarized light microscopy	600.00	960.00
PATH481	Campylobacter in stool: Fastidious culture	1,320.00	1,920.00
PATH482	Antigen detection with polyclonal antibodies	600.00	960.00
PATH483	Mycobacteria microscopy	480.00	600.00
PATH484	Antigen detection with monoclonal antibodies	1,440.00	2,040.00
PATH485	Concentration techniques for parasites	480.00	600.00
PATH486	Dark field, phase or interference contrast microscopy, Nomarski or Fontana	960.00	1,320.00
PATH487	Cytochemical stain	720.00	1,200.00
PATH488	Antibiotic susceptibility test: Per organism	1,080.00	1,680.00

[Subsidiary]

PATH489	Adhesive tape preparation	480.00	600.00
PATH490	Clostridium difficile toxin: Monoclonal immunological	2,040.00	3,480.00
PATH491	Antibiotic assay of tissues and fluids	1,800.00	2,640.00
PATH492	Blood culture: Aerobic	1,440.00	2,640.00
PATH493	Blood culture: Anaerobic	1,440.00	2,640.00
PATH494	Bacteriological culture: Miscellaneous	1,320.00	3,000.00
PATH495	Radiometric blood culture	1,440.00	2,520.00
PATH496	Bacteriological culture: Fastidious organisms	1,800.00	3,120.00
PATH497	In vivo culture: Bacteria	2,040.00	3,120.00
PATH498	In vivo culture: Virus	2,040.00	3,120.00
PATH499	Bacterial exotoxin production (in vivo assay)	2,640.00	3,960.00
PATH500	Fungal culture	1,440.00	2,640.00
PATH501	Clostridium difficile (cytotoxicity neutralisation)	3,840.00	5,640.00
PATH502	Antibiotic level: Biological fluids	2,040.00	2,400.00
PATH503	Rotavirus latex slide test	720.00	1,200.00
PATH504	Identification of virus or rickettsia	2,640.00	3,960.00
PATH505	Identification: Chlamydia	2,040.00	3,120.00
PATH506	Culture for staphylococcus aureus	360.00	480.00
PATH507	Anaerobe culture: Comprehensive	3,480.00	5,280.00
PATH508	Anaerobe culture: Limited procedure	1,320.00	1,920.00
PATH509	Beta-lactamase assay	600.00	960.00
PATH510	Sterility control test: Biological method	600.00	960.00
PATH511	Mycobacterium culture	3,240.00	5,520.00
PATH512	Radiometric tuberculosis culture	1,440.00	2,040.00
PATH513	Mycoplasma culture: Comprehensive	1,320.00	1,920.00
PATH514	Identification of mycobacterium	1,320.00	1,920.00
PATH515	Mycobacterium: Antibiotic sensitivity	1,320.00	1,920.00
PATH516	Antibiotic synergistic study	2,640.00	3,960.00
PATH517	Viable cell count	360.00	360.00



PATH518	Biochemical identification of bacterium: Abridged	480.00	720.00
PATH519	Biochemical identification of bacterium: Extended	2,040.00	3,480.00
PATH520	Serological identification of bacterium: Abridged	480.00	720.00
PATH521	Serological identification of bacterium: Extended	1,320.00	2,040.00
PATH522	Grouping for streptococci	1,080.00	1,440.00
PATH523	Antimicrobial substances	600.00	720.00
PATH524	Radiometric mycobacterium identification	1,920.00	2,760.00
PATH525	Radiometric mycobacterium antibiotic sensitivity	3,240.00	4,800.00
PATH526	Helicobacter: Monoclonal immunological	2,040.00	3,480.00
PATH527	HIV ELISA - Antibodies to human immunodeficiency virus (HIV)	2,040.00	2,760.00
PATH528	IgE: Total: EMIT or ELISA	2,040.00	2,400.00
PATH529	Auto antibodies by labelled antibodies	2,040.00	3,120.00
PATH530	Sperm antibodies	2,040.00	3,120.00
PATH531	Virus neutralisation test: First antibody	9,360.00	14,160.00
PATH532	Virus neutralisation test: Each additional antibody	1,920.00	2,880.00
PATH533	Precipitation test per antigen	600.00	960.00
PATH534	Agglutination test per antigen	720.00	1,200.00
PATH535	Cryptococcal Antigen	1,440.00	3,000.00
PATH536	Haemagglutination test: Per antigen	1,320.00	1,920.00
PATH537	Modified Coombs' test for brucellosis	600.00	960.00
PATH538	Hepatitis Rapid Viral Ab	2,040.00	2,400.00
PATH539	Antibody titer to bacterial exotoxin	600.00	720.00
PATH540	IgE: Specific antibody titer: ELISA/EMIT: Per Ag	2,040.00	3,480.00
PATH541	Complement fixation test	720.00	1,200.00
PATH542	IgM: Specific antibody titer:ELISA/EMIT: Per Ag	1,920.00	2,760.00
PATH543	C-reactive protein (CRP)	1,800.00	2,640.00

[Subsidiary]

PATH544	IgG: Specific antibody titer: ELISA/EMIT: Per Ag	2,040.00	3,480.00
PATH545	Qualitative Kahn, VDRL or other flocculation	360.00	480.00
PATH546	Neutrophil phagocytosis	3,240.00	4,800.00
PATH547	Quantitative Kahn, VDRL or other flocculation	600.00	720.00
PATH548	Neutrophil chemotaxis	8,520.00	12,720.00
PATH549	Tube agglutination test (others)	600.00	960.00
PATH550	Paul Bunnell: Presumptive	360.00	480.00
PATH551	Infectious mononucleosis latex slide test (Monospot or equivalent)	1,200.00	1,680.00
PATH552	Anti Gad/Ia2 Ab	8,520.00	12,720.00
PATH553	Rose Waaler agglutination test	600.00	960.00
PATH554	Gonococcal, listeria or echinococcus agglutination	1,320.00	1,920.00
PATH555	Slide agglutination test	480.00	600.00
PATH556	Serum complement level: Each component	480.00	720.00
PATH557	Anti Ia2 Antibodies	4,680.00	6,840.00
PATH558	Anti Gad Antibodies	4,680.00	6,840.00
PATH559	Auto-antibody: Sensitized erythrocytes	600.00	960.00
PATH560	Herpes virus typing: Monoclonal immunological	2,640.00	3,960.00
PATH561	Western blot technique	9,240.00	13,920.00
PATH562	Epstein-Barr virus antibody titer	960.00	1,320.00
PATH563	Immuno-diffusion test: Per antigen	480.00	720.00
PATH564	Respiratory syncytial virus (ELISA technique)	4,560.00	6,720.00
PATH565	Immuno electrophoresis: Per immune serum	1,320.00	1,920.00
PATH566	Polymerase chain reaction	9,360.00	14,160.00
PATH567	Indirect immuno-fluorescence test (bacterial, viral, parasitic)	2,040.00	2,400.00
PATH568	Lymphocyte transformation	6,480.00	9,720.00
PATH569	Bilharzia Ag Serum/Urine	1,920.00	2,760.00
PATH570	Histone Ab	2,040.00	3,120.00
PATH571	Quantitative PCR (DNA/RNA) others	10,800.00	21,600.00
PATH572	Recombinant DNA technique per probe	3,240.00	4,800.00



PATH573	Ribosomal RNA targeting for bacteriological identification	4,560.00	6,720.00
PATH574	Ribosomal RNA amplification for bacteriological identification	9,360.00	14,160.00
PATH575	Bacteriological DNA identification (LCR) per probe	3,240.00	4,800.00
PATH576	Bacteriological DNA identification (PCR) per test	7,680.00	14,040.00
PATH577	Mixed antiglobulin reaction: Semen	960.00	1,320.00
PATH578	Friberg test: Semen	1,920.00	2,760.00
PATH579	Kremer test: Semen	600.00	720.00
PATH580	Quantitative PCR - viral load (not HIV) - hepatitis C, hepatitis B, CMV, etc.	17,400.00	25,200.00
PATH581	Semen analysis: Cell count	1,080.00	1,440.00
PATH582	Semen analysis: Cytology	1,080.00	1,440.00
PATH583	Semen analysis: Viability + motility - 6 hours	960.00	1,200.00
PATH584	Semen analysis: Supravital stain	720.00	1,200.00
PATH585	Seminal fluid: Alpha glucosidase	2,640.00	3,840.00
PATH586	Seminal fluid fructose	480.00	720.00
PATH587	Seminal fluid: Acid phosphatase	720.00	1,080.00
PATH588	Helicobacter: Pylori antigen test	1,920.00	4,080.00
PATH589	HIV Ab - Rapid Test	360.00	1,080.00
PATH590	Antibiotic MIC per organism per antibiotic	1,080.00	1,680.00
PATH591	Non-radiometric automated blood cultures	1,800.00	2,640.00
PATH592	Rapid automated bacterial identification per organism	1,920.00	2,880.00
PATH593	Rapid automated antibiotic susceptibility per organism	2,160.00	3,240.00
PATH594	Rapid automated MIC per organism per antibiotic	2,160.00	3,240.00
PATH595	Mycobacteria: MIC determination - E Test	2,160.00	3,240.00
PATH596	Mycobacteria: Identification HPLC	4,560.00	6,720.00
PATH597	Mycobacteria: Liquefied, concentrated, fluorochrome stain	1,320.00	1,920.00
PATH598	Transmission electron microscopy	10,680.00	15,840.00
PATH599	HIV Drug Resistance Testing	42,000.00	72,000.00
PATH600	HIV Viral Load	6,000.00	11,520.00

[Subsidiary]

PATH601	HIV Qualitative DNA test	6,000.00	11,520.00
PATH602	Scanning electron microscopy	12,600.00	18,720.00
	MOLECULAR STUDIES/PCR	—	—
PATH603	Specified additional analysis e.g. mosaicism, Fanconi anaemia, Fra X, additional staining techniques	9,000.00	13,440.00
PATH604	FISH procedure, including cell culture	14,760.00	22,080.00
PATH605	FISH analysis per probe system	4,560.00	6,840.00
PATH606	Blood: DNA extraction	5,760.00	8,640.00
PATH607	Blood: Genotype per person: Southern blotting	11,400.00	17,160.00
PATH608	Blood: Genotype per person: PCR	7,680.00	11,520.00
PATH609	Prenatal diagnosis: Amniotic fluid or chorionic tissue: DNA extraction	11,520.00	17,280.00
PATH610	Prenatal diagnosis: Amniotic fluid or chorionic tissue: Genotype per person: Southern blotting	24,120.00	36,000.00
PATH611	Prenatal diagnosis: Amniotic fluid or chorionic tissue: Genotype per person: PCR	15,480.00	23,040.00
PATH612	PCR - generic tests per marker	11,520.00	23,040.00
PATH613	DNA paternity test profile per individual	14,400.00	28,800.00
PATH614	Quantitative PCR (DNA/RNA) others	10,800.00	21,600.00
PATH615	Qualitative PCR (DNA/RNA) others	8,400.00	18,000.00
	OTHER CONSULTATION WORK	—	—
PATH616	Attendance in theatre	7,200.00	21,600.00
PATH617	Sit-in consultancy per hour session	7,200.00	21,600.00
PATH618	Teaching consultancy per hour session	7,200.00	21,600.00
CODE	D001: FEES GUIDELINES FOR DENTAL PRACTITIONERS		
A	Consultation Fees	Minimum (KES)	Maximum (KES)
	IMPORTANT NOTE: Valid for 3 months		
C001	General dentist	1,500.00	4,000.00

C002	Dental specialist	3,000.00	6,000.00
	HOSPITAL VISIT CONSULTATION FEES		
	Per visit		
C003	Hospital visit-day	5,000.00	10,000.00
C004	Hospital visit-night	10,000.00	20,000.00
B	Radiology	Minimum (KES)	Maximum (KES)
RAD001	Occlusal views	1,000.00	1,500.00
RAD002	Left / Right Bitewing (LBW / RBW)	1,000.00	1,500.00
RAD003	Bilateral Bitewings (BBW)	1,500.00	2,000.00
RAD004	Intraoral Periapical (IOPA)	1,000.00	1,500.00
RAD005	Orthopantomogram ( OPG )	2,000.00	3,000.00
RAD006	Cephalometric radiograph (Lateral Cephalogram)	3,500.00	5,000.00
RAD007	Sialogram	6,000.00	10,000.00
RAD008	TMJ Tomograms	2,000.00	4,000.00
RAD009	CBCT Single tooth	1,500.00	2,000.00
RAD010	CBCT Maxilla	8,000.00	12,000.00
RAD011	CBCT Right/Left Maxilla	4,000.00	7,000.00
RAD012	CBCT Mandible	8,000.00	12,000.00
RAD013	CBCT Right/Left Mandible	4,000.00	7,000.00
RAD014	Radiology Report	2,000.00	5,000.00
C	ORAL SURGERY BY GENERAL DENTIST	Minimum (KES)	Maximum (KES)
	IMPORTANT NOTE: Oral Surgery cases that are diagnosed as complex will be referred to Specialist Oral & Maxillofacial Surgeons		
MOS001	Extraction - Uncomplicated	3,000.00	7,000.00
MOS002	Extraction - Complicated/Surgical	5,000.00	10,000.00
MOS003	Disimpaction (Surgical Odontectomy )	20,000.00	25,000.00
MOS004	Management of Alveolar Osteitis (Dry Socket)	6,000.00	8,000.00
MOS005	Dentoalveolar Debridement	10,000.00	15,000.00
MOS006	Incision & Drainage	6,000.00	10,000.00
MOS007	Apicectomy	15,000.00	30,000.00
MOS008	Dentoalveolar Splinting	14,000.00	18,000.00



[Subsidiary]

MOS009	Soft Tissue Management	10,000.00	15,000.00
MOS010	Removal of Sutures & Post Operative Review	1,500.00	2,000.00
MOS011	Maxillo - Mandibular Fixation	20,000.00	40,000.00
D	RESTORATIVE DENTISTRY	<i>Minimum (KES)</i>	<i>Maximum (KES)</i>
	Restorations/Fillings		
RES001	Amalgam – one surface	4,000.00	6,000.00
RES002	Amalgam – two surfaces	5,000.00	8,000.00
RES003	Amalgam three surfaces	6,000.00	8,000.00
RES004	Complex multisurface Amalgam Filling (More than 3 surfaces)	7,000.00	9,000.00
RES005	Composite / Tooth coloured Filling (one surface)	5,000.00	6,000.00
RES006	Composite / Tooth coloured Filling (two surfaces)	6,000.00	7,000.00
RES007	Composite / Tooth coloured Filling (three surfaces)	7,000.00	9,000.00
RES008	Complex multisurface Tooth coloured Filling (More than 3 surfaces)	8,000.00	9,000.00
RES009	Temporary / Provisional filling	3,000.00	5,000.00
RES010	Fissure sealant - per tooth	4,000.00	5,000.00
RES011	Preventive Resin Restorations (PRR)	4,000.00	5,000.00
RES012	Pins (each)	2,000.00	5,000.00
RES013	Metalic Post (each)	3,500.00	6,000.00
RES014	Fibre Post	12,000.00	15,000.00
RES015	Cast Post	15,000.00	25,000.00
E	ENDODONTICS (ROOT CANAL TREATMENT)	<i>Minimum (KES)</i>	<i>Maximum (KES)</i>
	Charges Do not include Cost of Filling (Restoration) or Crown post Endodontic Treatment		
END001	Pulputomy	10,000.00	15,000.00
	Root Canal Treatment		
END002	a) Anterior tooth	15,000.00	20,000.00
END003	b) Premolars	20,000.00	25,000.00
END004	c) Molars	25,000.00	40,000.00
END005	d) Accessory or Extra Canals (each)	10,000.00	15,000.00
END006	e) Retreatment of a previously root treated tooth (Additional charge to the basic cost of Root Canal Treatment)	10,000.00	20,000.00

END007	f) Access through crowns (Additional Charge)	6,000.00	10,000.00
END008	Bleaching Non-vital (per tooth/Per session)	5,000.00	7,000.00
END009	Apico-ectomy (anterior teeth - (using MTA)	20,000.00	30,000.00
END010	Apico-ectomy (Posterior teeth - (using MTA)	40,000.00	50,000.00
END011	Hemisection/Root amputation (Exclude cost of RCC)	20,000.00	30,000.00
END012	Root submersion	15,000.00	20,000.00
END013	Repair of Perforation (using MTA) non-surgical	20,000.00	30,000.00
END014	Repair of Perforation (using MTA) Surgical	30,000.00	40,000.00
END015	Pulp Revascularization	40,000.00	50,000.00
END016	Removal of separated/Fractured Instruments plus RCC	30,000.00	50,000.00
END017	Endodontics Transplantation/Re-Implantation	20,000.00	35,000.00
END018	Apexification (using MTA)	30,000.00	40,000.00
END019	Apexification (using Calcium Hydroxide)	20,000.00	25,000.00
END020	Apexogenesis	20,000.00	30,000.00
END021	Endodontic Implants	50,000.00	80,000.00
END022	Vital Pulp Therapy (using Calcim Hydroxide)	5,000.00	7,000.00
F	PERIODONTICS	<i>Minimum (KES)</i>	<i>Maximum (KES)</i>
	General Periodontics		
PERI001	Scaling and polishing	6,000.00	15,000.00
PERI002	Prophylaxis	4,500.00	7,000.00
PERI003	Polishing and stain removal	3,600.00	8,000.00
PERI004	Management of Dentine Hypersensitivity Per appointment	3,600.00	10,000.00
PERI005	Full Mouth Flouride application (Flouridation)	3,000.00	5,000.00
PERI006	Root planing (per quadrant)	6,000.00	10,000.00
	Periodontal Splinting		
PERI007	Resin composite/wire splint (per sextant)	10,000.00	20,000.00
PERI008	Reinforced fiber splint (per sextant excluding cost of splint)	15,000.00	25,000.00
	Periodontal Surgery		

[Subsidiary]

PERI009	Open flap debridement (1 to 3 contiguous teeth or edentulous spans)	25,000.00	40,000.00
PERI010	Root coverage surgery using xenografts/allografts (exclude cost of graft)	30,000.00	40,000.00
PERI011	Root coverage surgery using autograft	40,000.00	60,000.00
PERI012	Frenectomy	10,000.00	15,000.00
PERI013	Crown lengthening (1 to 3 contiguous teeth)	15,000.00	30,000.00
PERI014	Gingivectomy (1 to 3 contiguous teeth)	15,000.00	25,000.00
PERI015	Gingivoplasty (1 to 3 contiguous teeth)	15,000.00	25,000.00
PERI016	Vestibuloplasty	20,000.00	40,000.00
PERI017	Root resection (excluding cost of endodontic therapy and subsequent crown)	25,000.00	40,000.00
PERI018	Hemisection (excluding cost of endodontic therapy and subsequent crown)	20,000.00	30,000.00
PERI019	Guided tissue regeneration per site (excluding cost of graft material)	25,000.00	35,000.00
PERI020	Guided bone regeneration per site (excluding cost of graft material)	25,000.00	35,000.00
PERI021	Block grafts (excluding cost of graft)	100,000.00	120,000.00
PERI022	Alveoloplasty	20,000.00	30,000.00
PERI023	Socket preservation per extraction site (excluding cost of graft material)	10,000.00	15,000.00
	Surgical Phase of Oral Implantology		
	Exclusive of Costs of Implant Fixtures, Healing Abutments & Provisional prothesis / restorations. Cost of implant fixtures will vary depending on the choice of implant selected		
PERI024	Development of implant therapy treatment plan (excluding cost of radiological examination)	As per the consultation charges	As per the consultation charges
PERI025	Single implant placement (excluding cost of implant fixture)	60,000.00	80,000.00



PERI026	Subsequent contiguous implant placement (excluding cost of implant fixture)	25,000.00	30,000.00
PERI027	Subsequent non contiguous implant placement in the same quadrant (excluding cost of fixture)	35,000.00	50,000.00
PERI028	Implant exposure (excluding cost of healing abutment)	15,000.00	20,000.00
PERI029	Removal of failed implant	35,000.00	50,000.00
PERI030	Scaling of implant fixture (excluding cost of general scaling)	5,000.00	8,000.00
PERI031	Sinus lift (Closed Sinus Lift) (excluding cost of graft material)	45,000.00	60,000.00
PERI032	Lateralisation of mandibular canal	120,000.00	150,000.00
PERI033	Application of locally delivered antimicrobials per site (excluding cost of antimicrobials)	3,000.00	5,000.00
PERI034	Supportive periodontal therapy	5,000.00	10,000.00
PERI035	Collecting and processing blood for platelet rich plasma	8,000.00	12,000.00
G	PROSTHODONTICS	<i>Minimum (KES)</i>	<i>Maximum (KES)</i>
	Fixed prosthodontics		
PROS001	Diagnostic cast / Study Models	3,600.00	4,800.00
PROS002	Wax up per unit	2,000.00	4,000.00
PROS003	Prefabricated post & core	15,000.00	20,000.00
PROS004	Cast post and core ( excluding cost of gold)	20,000.00	30,000.00
	Crowns		
PROS005	Temporary crown per unit	10,000.00	15,000.00
PROS006	Metal ceramic Crown	40,000.00	55,000.00
PROS007	Ceramic / Zirconia / Emax Crown	45,000.00	60,000.00
PROS008	Full gold crown	60,000.00	80,000.00
PROS009	Implant retained crown per unit (excluding cost of components)	40,000.00	55,000.00
PROS010	Fixed Definitive Bridge (Charges are per Unit)	40,000.00	55,000.00
	Provisional Maryland Bridge		
PROS011	Composite (per unit)	15,000.00	20,000.00
PROS012	Porcelain/Ceramic Fused to Metal (per unit)	40,000.00	55,000.00

[Subsidiary]

PROS013	Recementation of crown or bridge per unit	5,000.00	10,000.00
PROS014	Removal of crown /bridge per unit	8,000.00	12,000.00
	Veneers per unit:		
PROS015	Direct composite Veneers	10,000.00	15,000.00
PROS016	Indirect Composite Veneers	25,000.00	30,000.00
PROS017	Ceramic / Porcelain Veneers	30,000.00	40,000.00
PROS018	Inlays /onlays (excluding cost of alloy)	30,000.00	45,000.00
PROS019	Repair of fractured porcelain	10,000.00	15,000.00
	Prosthodontic Phase of Oral Implantology		
PROS020	Temporary implant restoration (excluding cost of components)	15,000.00	30,000.00
PROS021	Permanent / Definitive implant retained restoration - crown or bridge (excluding cost of components)	40,000.00	60,000.00
	<i>Removable prosthodontics</i>		
PROS022	Complete upper and lower denture	40,000.00	60,000.00
PROS023	Single complete denture	25,000.00	35,000.00
	Acrylic Removable Partial Dentures		
PROS024	Acrylic Removable Partial Denture 1 -3 teeth	12,000.00	15,000.00
PROS025	Acrylic Removable Partial Denture 4-6 teeth	15,000.00	25,000.00
PROS026	Acrylic Removable Partial Denture 7 or more	25,000.00	40,000.00
PROS027	Repair of broken acrylic denture: Without impression	4,000.00	7,000.00
PROS028	Repair of broken acrylic denture: With Impression	8,000.00	10,000.00
PROS029	Cobalt chrome Removable Partial Denture (excluding lab fee)	40,000.00	70,000.00
PROS030	Repair of cobalt chrome RPD	8,000.00	10,000.00
PROS031	Addition of a tooth on denture	5,000.00	10,000.00
PROS032	Soft/Hard relines	8,000.00	10,000.00
PROS033	Michigan splint	40,000.00	60,000.00
PROS034	Mouth guard	10,000.00	15,000.00



	<i>Maxillofacial prosthodontics</i>		
PROS036	Obturator with acrylic base	40,000.00	60,000.00
PROS037	Obturator with cobalt chrome base	80,000.00	100,000.00
PROS038	Facial prosthesis	Case Dependent	Case Dependent
H	PAEDIATRIC DENTISTRY	<i>Minimum (KES)</i>	<i>Maximum (KES)</i>
PAED001	Fissure sealant	4,000.00	6,000.00
PAED002	Fluoride varnish application	5,000.00	7,000.00
PAED003	Preventive resin restoration	6,000.00	8,000.00
PAED004	Pulpotomy	10,000.00	15,000.00
PAED005	Pulpectomy	15,000.00	20,000.00
PAED006	Uncomplicated extraction	3,000.00	6,000.00
PAED007	Stainless steel Crown	10,000.00	15,000.00
PAED008	Restorative dentistry	Refer to charges in restorative section	
PAED009	Prophylaxis, Scaling, Root planning, Gingivoplasty, Gingivectomy, Frenectomy	Refer to charges in Periodontics section	
PAED010	Dentures	Refer to charges prosthodontics section	
PAED011	Minor oral surgery	Refer to charges in surgery section	
PAED012	Root canal treatment, apexification, apexogenesis and other endodontic treatment procedures	Refer to charges in endodontics section	
PAED013	Study models and orthodontic treatment procedures	Refer to charges in orthodontics section	
I	ORTHODONTICS	<i>Minimum (KES)</i>	<i>Maximum (KES)</i>
	Diagnosis + treatment planning		
ORTH001	Orthodontic Study models	3,000.00	8,000.00
ORTH002	Extraoral & Intraoral Photographs	1,000.00	5,000.00
ORTH003	Diagnosis + treatment planning	Charge as per consultation	Charge as per consultation

[Subsidiary]

ORTH004	Orthodontic diagnostic setup	Charge as per consultation	Charge as per consultation
ORTH005	Treatment planning orthognathic Surgery	Charge as per consultation	Charge as per consultation
	<i>Comprehensive Fixed Orthodontic Treatment</i>		
ORTH006	Single arch Orthodontics - Mild & Moderate Malocclusion	75,000.00	150,000.00
ORTH007	Class I Malocclusion - Mild & Moderate	150,000.00	250,000.00
ORTH008	Class I Malocclusion - Severe	187,500.00	350,000.00
ORTH009	Class I Malocclusion - Severe + Complications	262,500.00	400,000.00
ORTH010	Class II + III - Mild	112,500.00	250,000.00
ORTH011	Class II + III - Moderate	187,500.00	300,000.00
ORTH012	Class II + III - Severe	225,000.00	480,000.00
ORTH013	Class II + III - Severe + Complications	375,000.00	600,000.00
ORTH014	Re-bonding of brackets/attachments/bands	2,250.00	5,000.00
ORTH015	Implant- aided orthodontics (TADs Temporary Anchorage Devices) - per implant	30,000.00	60,000.00
ORTH016	Sectional Fixed Appliance per arch	37,500.00	100,000.00
	Lingual Orthodontics		
ORTH017	Single arch - Mild & Moderate	150,000.00	300,000.00
ORTH018	Single arch - severe	240,000.00	400,000.00
ORTH019	Class I Malocclusion - Mild & Moderate	315,000.00	500,000.00
ORTH020	Class I Malocclusion - Severe	390,000.00	600,000.00
ORTH021	Class I Maloccl. - Severe + Complications	465,000.00	700,000.00
ORTH022	Class II + III - mild	375,000.00	600,000.00
ORTH023	Class II + III - moderate	412,500.00	650,000.00
ORTH024	Class II + III - severe	510,000.00	720,000.00
ORTH025	Class II + III - severe + complications	562,500.00	1,000,000.00
	Interceptive Orthodontics		
ORTH026	First Removable appliance per arch	22,500.00	50,000.00

ORTH027	Fixed Interceptive Orthodontics Appliance	37,500.00	75,000.00
ORTH028	Subsequent Removable appliance	11,250.00	30,000.00
ORTH029	Removable Habit Breaker	15,000.00	40,000.00
ORTH030	Fixed Habit breaker	26,250.00	60,000.00
ORTH031	Fixed Space Maintainer per arch	15,000.00	40,000.00
	Retentive Phase of Orthodontics		
ORTH032	Removable retainer per arch	15,000.00	35,000.00
ORTH033	Fixed retainer per arch	18,750.00	40,000.00
	Correction of Dentofacial Anomalies		
ORTH034	Functional appliance	37,500.00	100,000.00
ORTH035	Bite plate for TMJ dysfunction	15,000.00	40,000.00
ORTH036	Major occlusal adjustment	15,000.00	25,000.00
ORTH037	Minor occlusal adjustment	7,500.00	15,000.00
ORTH038	Cleft palate: Consultation Out of surgery	As per Consultation	As per Consultation
ORTH039	Cleft palate: Subsequent consultations	As per Consultation	As per Consultation
ORTH040	Passive presurgical protheses	15,000.00	45,000.00
ORTH041	Active Presurgical Orthopaedic Appliance	33,750.00	90,000.00
J	AESTHETIC DENTISTRY	<i>Minimum (KES)</i>	<i>Maximum (KES)</i>
ORTH043	Tooth Whitening / Bleaching per Arch (Take Home Bleach including the gel)	24,000.00	36,000.00
ORTH044	Chairside Tooth Whitening (Power Bleaching / Zoom Bleaching)	35,000.00	50,000.00
ORTH045	Microabrasion (per tooth)	5,000.00	7,000.00
K	DENTAL TREATMENT UNDER GENERAL ANAESTHESIA	<i>Minimum (KES)</i>	<i>Maximum (KES)</i>
	Fees outlined are Dental Surgeon's fees only : Excluding theatre/hospital fees, materials and anaesthetists fees		
DGA001	Children : Multiple fillings (Full Mouth Restorations - FMR) & or Extractions	60,000.00	100,000.00
DGA002	Adults : Multiple fillings / extractions	60,000.00	100,000.00



[Subsidiary]

L	DENTAL TREATMENT UNDER CONSCIOUS SEDATION	Minimum (KES)	Maximum (KES)
	Fees outlined are for conscious sedation 1-2 hours in a dental surgery with these facilities: (Excluding anaesthetists fees & cost of dental procedures. An Anaesthetist is required for this conscious sedation)		
DCONSED01	Children	Charge as per procedure	Charge as per procedure
DCONSED02	Adults	Charge as per procedure	Charge as per procedure
	OMFS001: FEE GUIDELINES FOR ORAL AND MAXILLOFACIAL SURGERY		
	Specialists Consultation Fees		
	<i>Consultations</i>	<i>Minimum (KES)</i>	<i>Maximum (KES)</i>
OMFS001	First visit	3,600.00	7,500.00
OMFS002	Follow up Consultation for the Same Condition	3,600.00	7,200.00
	House Visits NB (Consultations only. Incidentals to be agreed upon by the parties)	<i>Minimum (KES)</i>	<i>Maximum (KES)</i>
OMFS003	Day Time	6,000.00	12,000.00
OMFS004	Night Time	12,000.00	18,000.00
	Hospital Visits		
OMFS005	Day Time	6,000.00	12,000.00
OMFS006	Emergency Night visits	12,000.00	18,000.00
OMFS007	Emergency Day visits	7,200.00	12,000.00
OMFS008	ICU Visit (Daily charges)	7,200.00	10,000.00
OMFS009	HCU Visit (Daily charges)	6,000.00	7,500.00
OMFS010	Witnessing a postmortem	24,000.00	60,000.00
	<i>A) Minor Surgery</i>	<i>Minimum (KES)</i>	<i>Maximum (KES)</i>
OMFS011	Incision & Drainage dentoalveolar abscess (I&D)	7,800.00	15,600.00
OMFS012	Cervical lymph node biopsy	15,600.00	31,200.00
OMFS013	MUA # nose	39,000.00	46,800.00

OMFS014	Intranasal antrostomy	39,000.00	46,800.00
	<i>B) Intermediate I</i>	<i>Minimum (KES)</i>	<i>Maximum (KES)</i>
OMFS015	Surgical removal supernumerary/other teeth	15,600.00	39,000.00
OMFS016	Transplantation/reimplantation of teeth	31,200.00	54,600.00
OMFS017	EUA	39,000.00	54,600.00
OMFS018	Removal of bone plates	31,200.00	54,600.00
OMFS019	Reduction of alveolar fracture	39,000.00	54,600.00
OMFS020	Sequestrectomy/Decortication Mandible/Maxilla	39,000.00	54,600.00
OMFS021	Tracheostomy: routine	23,400.00	39,000.00
OMFS022	Intermediate faciaal soft tissue repair	23,400.00	46,800.00
OMFS023	Exploration/removal facial foreign bodies	23,400.00	46,800.00
OMFS024	TMJ athroscopy	39,000.00	54,600.00
OMFS025	Endoscopic EUA/biopsy	39,000.00	54,600.00
OMFS026	Incision & Drainage head and neck abscess	23,400.00	39,000.00
OMFS027	Posterior apicectomy	23,400.00	39,000.00
OMFS028	Septoplasty – simple	31,200.00	70,200.00
OMFS029	Sinus Lift	80,000.00	140,000.00
	<i>C) Intermediate II</i>	<i>Minimum (KES)</i>	<i>Maximum (KES)</i>
OMFS030	Surgical removal of impacted third molars	62,400.00	93,600.00
OMFS031	Surgical exposure/removal of impacted canines	62,400.00	93,600.00
OMFS032	Closure of oro – antral fistula	62,400.00	109,200.00
OMFS033	Caldwell-Luc procedure	62,400.00	109,200.00
OMFS034	Elevation # zygoma: closed	62,400.00	109,200.00
OMFS035	Exploration of submandibular/parotid gland duct	62,400.00	109,200.00
OMFS036	Enucleation of mandibular/maxillary mass	62,400.00	93,600.00
OMFS037	Excision of head and neck lipoma	62,400.00	93,600.00
OMFS038	Submandibular gland Sialadenectomy	62,400.00	93,600.00
OMFS039	Sublingual gland Sialadenectomy	62,400.00	93,600.00
OMFS040	Vestibuloplasty & skin graft	62,400.00	109,200.00

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OMFS041	Excision of oral/facial fibroosseous lesion	62,400.00	109,200.00
OMFS042	Coronoidectomy	62,400.00	109,200.00
OMFS043	Temporalis/Masseter Myotomy	62,400.00	109,200.00
OMFS044	Cryotherapy to V Nerve branches/Minor Haemangioma	62,400.00	109,200.00
OMFS045	Cheiloplasty	62,400.00	109,200.00
OMFS046	Minor oral/facial bone/cartilage onlay graft	62,400.00	93,600.00
OMFS047	Torticollis/Fibromatosis Colli correction	62,400.00	93,600.00
OMFS048	Lip shave & Mucosal Advancement Flap	62,400.00	117,000.00
OMFS049	Wedge excision & primary closure lip	62,400.00	117,000.00
OMFS050	Excision facial BCC & local flap reconstruction	62,400.00	117,000.00
OMFS051	Excision/revision of facial scar	62,400.00	117,000.00
OMFS052	Primary repair bilateral cleft lip	62,400.00	124,800.00
OMFS053	Primary repair bilateral/complete cleft palate	62,400.00	124,800.00
OMFS054	Pharyngoplasty	62,400.00	124,800.00
OMFS055	Revision cleft lip/nose/palatoplasty	62,400.00	124,800.00
	<i>D) Major I</i>	<i>Minimum (KES)</i>	<i>Maximum (KES)</i>
OMFS056	Closed reduction # mandible/maxilla	93,600.00	124,800.00
OMFS057	Segmental osteotomy mandible/maxilla	93,600.00	124,800.00
OMFS058	Excision of thyroglossal cyst	93,600.00	124,800.00
OMFS059	Removal of branchial/thyroglossal neck cyst	93,600.00	124,800.00
OMFS060	Superficial parotidectomy	93,600.00	124,800.00
OMFS061	Extraoral/intraoral implants	93,600.00	124,800.00
OMFS062	Ridge augmentation/sinus lift	93,600.00	124,800.00
OMFS063	Genioplasty: augmentation/reduction	93,600.00	124,800.00
OMFS064	Tongue reduction	93,600.00	124,800.00
OMFS065	Open joint procedure TMJ	93,600.00	124,800.00
OMFS066	Closure cleft oronasal fistula & bone graft	93,600.00	124,800.00
OMFS067	Excision of scalp lesion & Wolfe graft	93,600.00	124,800.00



OMFS068	Open rhinoplasty & auricular cartilage grafts	93,600.00	124,800.00
OMFS069	Partial thickness skin graft to oral defect – minor	93,600.00	124,800.00
OMFS070	Full thickness skin/composite graft oral defect	93,600.00	124,800.00
	<i>E) Major II</i>	<i>Minimum (KES)</i>	<i>Maximum (KES)</i>
OMFS071	ORIF # Zygoma	140,400.00	187,200.00
OMFS072	Exploration/graft orbital #	140,400.00	187,200.00
OMFS073	ORIF Nasoethmoid/frontal #	140,400.00	187,200.00
OMFS074	ORIF # Maxilla (Le Fort I)	140,400.00	187,200.00
OMFS075	ORIF # Mandible	140,400.00	187,200.00
OMFS076	Major facial soft tissue repair	140,400.00	187,200.00
OMFS077	Mandibular osteotomy (Le Fort I/cleft) (SS/VS/EO)	140,400.00	187,200.00
OMFS078	Maxillary Osteotomy (Le Fort I/cleft)	140,400.00	187,200.00
OMFS079	Postcondylar cartilage graft	140,400.00	187,200.00
OMFS080	Salivary duct redirection (Wilkie procedure)	140,400.00	187,200.00
OMFS081	Cleft alveolar bone graft	140,400.00	187,200.00
OMFS082	Excision facial hemangioma/lymphangioma	140,400.00	187,200.00
OMFS083	Nerve exploration & microsurgical repair	140,400.00	187,200.00
OMFS084	Primary repair unilateral cleft lip	140,400.00	187,200.00
OMFS085	Primary repair unilateral/incomplete cleft palate	140,400.00	187,200.00
OMFS086	Closed Rhinoplasty	140,400.00	187,200.00
OMFS087	Radical/modified neck dissection (RMND)	140,400.00	187,200.00
OMFS088	Radical Parotidectomy	140,400.00	187,200.00
	<i>F) Complex Major</i>	<i>Minimum (KES)</i>	<i>Maximum (KES)</i>
OMFS089	ORIF # zygoma & orbit – complex comminuted	156,000.00	312,000.00
OMFS090	ORIF # nasoethmoid	156,000.00	312,000.00
OMFS091	Frontal & Canthopexy	156,000.00	312,000.00
OMFS092	ORIF # maxilla (Le Fort II/III) – unilateral	156,000.00	312,000.00
OMFS093	ORIF # maxilla (Le Fort II/III) – bilateral	156,000.00	312,000.00



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OMFS094	ORIF # mandible – complex comminuted	156,000.00	312,000.00
OMFS095	Complex facial soft tissue repair (STR)	156,000.00	312,000.00
OMFS096	Complex facial STR & VIIIn/parotid duct repair	156,000.00	312,000.00
OMFS097	Radical Parotidectomy & VIIIn graft	156,000.00	312,000.00
OMFS098	Le Fort II/Kufener midfacial osteotomy	156,000.00	312,000.00
OMFS099	Bimaxillary osteotomy	156,000.00	312,000.00
OMFS100	Costochondral graft to mandible	156,000.00	312,000.00
OMFS101	Hypertelorism correction	156,000.00	312,000.00
OMFS102	Secondary craniofacial reconstruction	156,000.00	312,000.00
OMFS103	Closed rhinoplasty	156,000.00	312,000.00
OMFS104	RMND & Mandibulectomy/Maxillectomy	156,000.00	312,000.00
OMFS105	RMND & reconstruction plate/bone graft	156,000.00	312,000.00
OMFS106	RMND & glossectomy/oral cancer resection	156,000.00	312,000.00
OMFS107	RMND & pedicled flap/microvascular free flap	156,000.00	312,000.00

Made on the 22nd July, 2016.

CLEOPA K. MAILU,  
*Cabinet Secretary for Health*

**MEDICAL PRACTITIONERS AND DENTISTS  
(REFERRAL OF PATIENTS ABROAD) RULES, 2017**

[L.N. 2/2017.]

**1. Citation**

These Rules may be cited as the Medical Practitioners and Dentists (Referral of Patients Abroad) Rules, 2017.

**2. Interpretation**

In these Rules, unless the context otherwise requires—

**"abroad"** means outside the borders of Kenya;

**"medical management"** means medical interventions including diagnosis, treatment and follow up;

**"receiving facility"** means an institution or hospital outside Kenya where a patient has been referred to; and

**"referral"** means the transfer of a patient from one hospital or practitioner to another for purposes of consultation, treatment, review or further action.

**3. Referral of patients abroad**

(1) A medical or dental practitioner may refer a patient for medical or dental management abroad where—

- (a) there is evidence that there is inadequate expertise or medical facilities to handle the condition locally;
- (b) there is evidence that the referral would be the most cost effective option for the patient, or
- (c) the patient has opted to seek medical intervention or management abroad where public resources are not used.

(2) Save wherein a patient consents, a medical or dental practitioner shall not be compelled to give information regarding a patient to third parties for purposes of referral.

**4. Qualification and Responsibility of the referring practitioner**

(1) The referring medical or dental practitioner shall—

- (a) be duly registered and licensed by the Board and of good standing;
- (b) be a specialist or sub-specialist in the area in which the patient is being referred for;
- (c) act in the best interest of the patient;
- (d) ensure that there shall be significant health benefits to the patient in seeking treatment abroad;
- (e) ensure that the referral is for curative, specialized diagnostic purposes or rehabilitative services ;
- (f) provide the patient or guardian with relevant information on the expected treatment; and
- (g) ensure an appropriate review and follow up mechanism is established upon the patient's return.

**5. Category and accreditation abroad**

(1) A medical or dental practitioner shall refer a patient for treatment abroad to—

- (a) a medical or dental practitioner who has the requisite recognized credentials to offer the level of the required specialized service;

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- (b) a receiving institution that has recognition from the regulatory authority of the receiving country to offer the required service;
- (c) a receiving institution that is above or the equivalent to a Level 5 or Level 6 category facility in Kenya; or
- (d) a receiving institution that has recognized international accreditation.

**6. Referral process**

(1) A medical or dental practitioner shall refer a patient abroad in the Referral Form set out in the Schedule.

(2) The Referral Form shall be accompanied by—

- (a) a comprehensive medical report by the referring practitioner;
- (b) a letter of confirmation from the receiving facility;
- (c) a letter of no objection from the Office of the Director of Medical Services; and
- (d) proof of adequate funding.

**7. Professional misconduct**

A practitioner shall be culpable of professional misconduct if such practitioner—

- (a) refers a patient where the health outcome will not improve;
- (b) discloses information acquired in the course of professional engagement to an unauthorized third party without the consent of the patient, or otherwise than required by law; and
- (c) refers or agrees to refer a patient for personal and/or financial gain.

**SCHEDULE**

(r.6(1))

**THE MEDICAL PRACTITIONERS AND DENTISTS ACT***(Cap. 253)***REFERRAL FORM FOR MEDICAL MANAGEMENT ABROAD****PART A-To be filled by the patient****i. BIO DATA OF THE PATIENT**

Surname: ..... First name .....

Other name(s): .....

ID/Passport No: ..... Date of Birth: .....

Age: ..... Gender: € Female € Male

P. O. Box ..... Code ..... Town .....

County .....

Email address .....

Telephone No. .... Mobile No. ....

Source of funding (Tick(✓) where appropriate)

Self-funded

National Hospital Insurance Fund

Private Insurance

Government sponsored

Other, specify .....

**ii. DETAILS OF THE NEXT OF KIN**

Surname: ..... First Name: .....

Other name(s): .....

ID/Passport No: ..... Date of Birth: .....

Relationship .....

P. O. Box ..... Code ..... Town .....

County .....

Email address .....  
 Telephone No ..... Mobile No. ....

**iii. DETAILS OF THE ACCOMPANYING CARE-GIVER (if different from B above)**

Surname: ..... First Name: .....  
 Other name(s): .....  
 ID/Passport No: ..... Date of Birth: .....  
 Relationship .....  
 P. O. Box ..... Code ..... Town .....  
 County .....  
 Email address .....  
 Telephone No ..... Mobile No. ....

**iv. DETAILS OF THE DONOR (Where Appropriate)**

Surname: ..... First Name: .....  
 Other name(s): .....  
 ID/Passport No: ..... Date of Birth: .....  
 Relationship .....  
 P. O. Box ..... Code ..... Town .....  
 County .....  
 Email address .....  
 Telephone No ..... Mobile No. ....

**v. DECLARATION**

I ..... hereby declare that  
 the information given above is true to the best of my knowledge and belief.  
 Signature: .....  
 Date: .....

**PART B -To be filled in by the Referring Practitioner**

**(a) MEDICAL DETAILS OF THE PATIENT**

(1) Provisional diagnosis .....  
 .....  
 .....  
 .....  
 (2) Reasons for referral: .....  
 .....  
 .....  
 (3) Expected Treatment .....  
 .....  
 .....  
 .....  
 (4) Expected Outcome .....  
 .....  
 .....  
 .....  
 (5) Plan for review and follow-up upon return of the patient to the country .....  
 .....  
 .....  
 .....

**(b) DETAILS OF THE RECEIVING FACILITY/PRACTITIONER**

**1. Receiving Facility**

Name of facility: .....  
 .....  
 .....  
 City: ..... Country: .....  
 Physical address: .....  
 .....  
 Postal address: .....  
 .....  
 .....

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E-Mail: .....  
 Telephone/Mobile No .....

**2. Practitioner/Contact Person:**

Name: .....  
 Qualification: .....  
 E-mail address .....  
 Telephone/Mobile No .....

**(c) CERTIFICATION BY THE REFERRING PRACTITIONER**

Details of referring practitioner:

Surname: ..... First Name: .....  
 Other name(s) .....  
 Qualification .....  
 Speciality .....  
 Sub-specialty .....  
 Reg. No: ..... License No: .....  
 P. O. Box ..... Code ..... Town .....  
 County .....

Email address .....

Telephone No ..... Mobile No .....

I certify that the information given in Part A and B regarding Mr/Mrs/Ms/Mst ..... is  
 true to the best of my knowledge and belief.

Signature: .....

Date .....

**PART C — To be filled in by the Kenya Medical Practitioners and Dentists Board**

I wish to confirm that Dr. .... is registered under Registration

Number ..... validly licensed under current License

No: ..... and is of good standing.

Name..... Signature..... Date.....

Chief Executive Officer

Kenya Medical Practitioners and Dentists Board

**PART D - To be filled in by the Director of Medical Services**

Approval is hereby given for..... who has been referred by

Dr..... to travel abroad for medical/dental management

in..... (country).

Name..... Signature..... Date.....

Director of Medical Services

