FORM A

THE PROFESSIONS SUPPLEMENTARY TO MEDICINE ACT, 1965

APPLICATION FOR ADMISSION TO THE REGISTER OF:

| MEDICAL LABORATORY TECH | INOLOGY [] | RADIOGRAPHY | [] |
|---|---------------------|---------------------------------------|-------|
| PHYSIOTHERAPY | [] | OCCUPATIONAL THERAPY | [] |
| DIETITIAN/NUTRITIONIST | Γ [] | SPEECH THERAPY | [] |
| AUDIOLOGIST | [] | PUBLIC HEALTH INSPECTOR | [] |
| DIETETIC ASSISTANT | [] | NUTRITION ASSISTANT | [] |
| PSYCHOLOGY | [] | CHRIROPODY/PODIATRY | [] |
| CYTOLOGY | [] | ULTRASONOGRAPHY | [] |
| PATHOLOGIST | [] | CARDIOVASCULAR TECHNOLOGY | [] |
| NAME OF APPLICANT: (IN BLOCK LETTERS) | SURNAME | CHRISTIAN & FORENA | ME(S) |
| STATE WHETHER | { } Single { } Ma | rried { } Divorced { } Widowed | |
| Married female applicants: | Please state maider | n name and furnish relevant documents | |
| DATE AND PLACE OF BIR | TH: | | |
| NATIONALITY: | | | |
| CURRENT ADDRESS: (This should be an address at which you are certain to Receive communication sent to you). | | | |
| CONTACT NUMBER(S) | | | |
| EMAIL: | | | |
| PLACE & PRACTICE ADDI (Address of place or institution in which Profession is practised) | | | |
| QUALIFICATION(S): | | | |
| | | | |

FORWARDED HEREWITH ARE THE FOLLOWING:

| | 1. | CERTIFICATES (OR CERTIFIED COPIES THEREOF): | | | | | |
|---|---------|--|---------------|---|---|------------------|----------------|
| | | CHARACTER REFERENG DING IN ONE PASSPORT SIZE F | | | NE MUST BE FRO | | |
| PLEA | SE ST | TATE: | | | | | |
| | 1. | ARE YOU FLUENT IN | THE USE OF TI | HE ENGLISH LAI | NGUAGE? [] Y | YES [] No | |
| | 2. | HAVE YOU EVER BEI (If "YES" give deta | | OF A CRIMINAI | OFFENCE? [] | YES [] No | |
| | 3. | HAVE YOU EVER BEEN (If "YES" give deta | | ΓY OF PROFESSI | | JCT? S [] No | |
| I DEC | CLAR | E THAT THE FOREGOIN | G PARTICULAR | S ARE CORRECT | TO THE BEST OF | F MY KNOWLED | GE. I HAVE NOT |
| | | | _ DOLLARS A | ND I HEREBY A | 'S GUIDELINE OF PPLY FOR REGISTORY VENT OF MY BEIN | TRATION IN THE | REGISTER FOR |
| CONSI | DERAT | ION THEREOF, TO BE BO | | | | TO THE REGULA | ΓΙΟΝS RELATINO |
| SIG | NATUR | E OF APPLICANT | | | DAT | ГЕ | |
| 1 st Floor, Kin 50 Half Way | | | | rar s Supplementa Kingston Schoo ay Tree Road, A, WEST INDI | l of Nursing Kingston 5 | ; | |
| | FOR O | FFICE USE ONLY | | VERIFIED | APPROVED | DEFERRED | REJECTED |
| DOCUMENTS RI | ECEIVE | ID | | | | | |
| REGISTRATION | FEE (\$ |) CHEQUI | 3 🗖 | | | | |
| REGISTRATION | DATE | | | | | | |

CERTIFICATE NO.

DATE COLLECTED/DISPATCHED

^{*}N.B ALL FEES ARE NONE REFUNDABLE*

COUNCIL FOR PROFESSIONS SUPPLEMENTARY TO MEDICINE

REGULATING PROFESSIONS......PROTECTING THE PUBLIC"

INFAMOUS CONDUCT

ISSUED PURSUANT TO SECTION 12 OF THE PROFESSIONS SUPPLEMENTARY TO MEDICINE ACT, 1965

The Professions Supplementary to Medicine Act 1965 provides for the establishment of a Disciplinary Committee.

It is not practicable to compile a complete list of conduct, which may at some time be regarded as infamous, but the Act does not preclude the Committee from judging a person to be guilty of infamous conduct in a professional respect in the absence of this.

The Act provides that -

- (1) if a registered member of the Council is convicted of a criminal offence which, in the opinion of the Disciplinary Committee renders him unfit to be kept on the Register; or
- (2) where the Disciplinary Committee is satisfied that the name of any person has been fraudulently entered on the Register maintained by the Council, the Committee may if it thinks fit, direct that the person's name be removed from the Register.

The purpose of the statement is to enable the Council to fulfill its statutory function of ensuring and promoting high standards of professional conduct. These standards are necessary not solely or even principally for the benefit of the professions, but to safeguard treatment which can be given to a patient and for the patient's protection.

With these considerations in mind, the following guidelines are pertinent and failure to observe them would be the kind of conduct which can be considered infamous in a professional respect.

SCOPE OF PRACTICE:

- (1) A registrant should confine the exercise of his/her professional skill to that in which he/she has been trained.
- (2) Where direct patient care is involved, except in an emergency or unless there is no direct access to the patient's doctor, these exercises should be carried out only on referral by a registered medical or dental practitioner.
- (3) Registrants should not either personally or as agents or employees of any person, firm, or corporate body, sell or accept commission on the sale of goods to the public in connection with their professional occupation, or should they in any way directly or indirectly be associated with the sale of such goods.
- (4) Registrants should not
 - directly or indirectly canvas for patients;
 - advertise whether directly or indirectly, for the purpose of obtaining patients or promoting their own professional advantage;
 - nor should they, for such purpose procure, sanction or acquiesce in the publication of notices commending or directing attention to their professional skill, knowledge, services or qualifications or deprecating the professional skill, knowledge, services or qualifications of their colleagues.

| Professional signs where necessary, | should be dignified | d and restrained | in character an | id limited in position |
|-------------------------------------|---------------------|-------------------|-----------------|------------------------|
| size and wording to no more than is | reasonably require | ed to indicate to | persons seeking | g the location of and |
| entrance to premises where the prac | tice is carried on. | | | |

| Signature | Date |
|-----------|------|