MINISTRY OF HEALTH
GUIDELINES ON SEXUAL STERILIZATION

1 APPLICATION TO BE AN APPROVED INSTITUTION

1.1 Every treatment for sexual sterilization must be carried out in a Government hospital or in an approved institution.

1.2 An application to the Minister for the approval of any hospital, maternity home, clinic or other place as an "approved institution" shall be in the Form I set out in the Schedule to the Voluntary Sterilization Regulations.

1.3 In the case where more than one clinic is owned by the same medical practitioner, approval will be given to only one clinic.

1.4 The Minister may cancel the status of an approved institution granted without giving any reason.

2 REGISTERED MEDICAL PRACTITIONERS

2.1 A registered medical practitioner in an approved institution may carry out treatment for both male and female sterilization if he holds the following qualifications:

2.1.1 Master of Medicine(O&G) of the University of Singapore or National University of Singapore;
2.1.2 Fellow of a Royal College of Surgeons; or
2.1.3 Member or Fellow of a Royal College of Obstetricians and Gynaecologists.

2.2 A registered medical practitioner in private practice who does not hold any of the qualifications specified in that paragraph shall, notwithstanding paragraph 2.1, may carry out treatment for male sterilization if he has at least 6 months experience in a surgical unit of a Singapore Government hospital or a hospital recognised by the Minister that is outside Singapore.

2.3 A registered medical practitioner employed by the Government may carry out both male and female sterilization if he holds or has held an appointment in a surgical unit of any Government hospital for a period of not less than 6 months.
CONSENT FOR TREATMENT

3.1 A registered medical practitioner may carry out treatment for sexual sterilization only where consent to such treatment has given.

**Adults**
Consent to such treatment may be given by the patient himself if the patient is 21 years of age or above or is below 21 years of age but married.

**Minors**
Where the patient is below 21 years of age and unmarried, consent must be given by the patient together with his parent or if there is no parent living, his guardian.

**Consent given on behalf of patient**
Where the patient is inflicted with any hereditary form of illness that is recurrent, mental illness, mental deficiency or epilepsy, consent may be given on behalf of the patient:

(a) where the patient is married, by the spouse of the patient; or
(b) where the patient is unmarried, by a parent or, if there is no parent living, the guardian,

provided in such a case, the registered medical practitioner must certify that the treatment is necessary in the interest of the person undergoing such treatment and of society generally.

3.2 A registered medical practitioner shall, before carrying out any treatment for sexual sterilization, give a full and reasonable explanation as to the meaning and consequences of the treatment:

(a) to the person or persons who has or have given consent to such treatment; or
(b) in the case where consent has been given on behalf of the patient, to the person who has given consent on behalf of the patient.

The person referred to in paragraph (a) or (b) above shall certify that he clearly understands the meaning and consequences of that treatment.

3.3 Consent for treatment for sexual sterilization, and the certificate of the registered medical practitioner if applicable, shall be in Form IV set out in the Schedule to the Regulations.
4 **REGISTER**

Every approved institution shall maintain a register solely for recording particulars of all treatments for sexual sterilization carried out in the institution and the register shall contain the following particulars:

4.1 name of operating theatre;
4.2 name of registered medical practitioner who carried out the treatment;
4.3 name of patient as indicated in the identity card or passport;
4.4 identity card or passport number of patient;
4.5 date of operation; and
4.6 method of sterilization.

5 **REPORTS**

Every registered medical practitioner who carries out treatment for sexual sterilization shall report to the Director of Medical Services within 30 days of any treatment in the Form II of the Schedule to the Regulations.

6 **CERTIFICATE OF SEXUAL STERILIZATION**

6.1 Every registered medical practitioner who carries out treatment for sexual sterilization shall:
   6.1.1 issue a Certificate of Sexual Sterilization to the person sterilized;
   6.1.2 ensure that the Certificate of Sexual Sterilization is made out to none other than the person who had undergone sterilization;
   6.1.3 retain a duplicate of the Certificate of Sexual Sterilization; and
   6.1.4 ensure that all standard forms of Certificates that are unused are kept under safe custody.

6.2 A Certificate of Sexual Sterilization can be issued to the patient after vasectomy. There is no requirement to have positive histopathology report or three negative sperm counts.

6.3 A Certificate of Sexual Sterilization can be issued to the patient after the performance of hysterectomy.

7 **PHYSICAL FACILITIES / EQUIPMENT** should be in accordance with the "Guidelines on Requirements for Premises to be Used for Sexual Sterilization".
GUIDELINES ON REQUIREMENTS FOR PREMISES TO BE USED FOR THE TREATMENT TO TERMINATE PREGNANCY / SEXUAL STERILIZATION

1. Operating Room

   a) Room Space

   At least 3 metres x 4 metres in dimensions with sufficient space for free movement. Room should be used for operation and examination of patients.

   b) Air-conditioning:

   The room should be air-conditioned.

   c) Lighting:

   Sufficient lighting should be provided.

   Angle-poised light source could be used for termination of pregnancy. Illumination level should not be less than 20,000 LUX at task with one metre clearance height. The colour temperature of the light should be between 3,000K and 6,000K. For sexual sterilization, proper operating theatre light should be used.

   d) Wall & Ceiling:

   For easy cleaning, the wall and ceiling should be of smooth surface. Wall should preferably be tiled.

   Wall should be covered with durable washable paint or washable impervious material.

   e) Door:

   The width of the door should not be less than 1.2 metres.

   f) Floor:

   The floor should be covered with smooth washable material. Preferably tiled. Wooden flooring and carpets are not permitted.

   g) Partition of Room:

   Full partition is required for room used for treatment.

   h) Cleanliness

   Tidiness and cleanliness should be maintained at all times. Room should be thoroughly cleaned before and after each operation.

2. Equipment
a) Proper operating table with facilities for tilting should be used.

b) Adequate and appropriate equipment should be used for termination of pregnancy and sexual sterilization.

c) Surgical instruments used for invasive procedures should be rendered sterile by the appropriate procedure of sterilisation such as steam autoclaving or alternatively use sterile disposable instruments.

d) Hand brush and antiseptic preparations eg Chlorhexidine or providone-iodine should be used for hand washing before operation.

e) Sterile gloves, gowns & hand towels should be used during the operation. The doctor should wear mask, goggles and surgical cap.

f) Medical and surgical equipment, instruments, appliances and materials should be functional, effective and comply with established or recommended procedures for their maintenance and use.

g) No unnecessary equipment/furniture should be kept in the operating room.

3. **Emergency facilities**

The following emergency drugs and equipment for resuscitation should be available at all times:

a) Injection Atropine

b) Injection Adrenaline

c) Antihistamines - e.g. injection Phenergan or Piriton

d) Injection Calcium Gluconate 10%

e) Steroids - e.g. injection Hydrocortisone or equivalent

f) Injection Sodium Bicarbonate 8.4%

g) Intravenous infusion set & cannulas

h) Intravenous solutions - eg Hartman's

i) Airviva & airways

j) Motor suction apparatus