

BY-LAWS

of

AUSTRALIAN MEDICAL ASSOCIATION

(NSW) LIMITED

Amended May 2011

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BY-LAWS

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(NSW) LIMITED

PART 1 PRELIMINARY

1. Interpretation

- 1.1. Where not inconsistent with the context, words which are defined in the Constitution shall have the same meanings in these By-Laws as they have in the definitions in the Constitution.
- 1.2. The *Interpretation Act 1987* (NSW) applies in the interpretation of these By-Laws in the same way it applies in the interpretation of an Act of Parliament.
- 1.3. These By-Laws shall be construed so as not to be inconsistent with the Constitution and if there is any inconsistency between these By-Laws and the Constitution, the Constitution shall prevail to the extent of the inconsistency.

PART 2 MEMBERSHIP

2. Application For Membership

Applications for election to membership shall be substantially in the form set out in the Schedule to these By-Laws.

3. Extraordinary Members

- 3.1. Persons qualified to become Extraordinary Members of the Association may be elected by the Board of Directors or by a Committee authorised to do so by the Board of Directors after nomination in the manner set out in By-Law 3.2.
- 3.2. Any person who is proposed to be submitted for election as an Extraordinary Member shall be nominated in writing by at least 2 members of the Board of Directors and the person nominated shall give his or her written consent to the nomination.
- 3.3. The Board of Directors may confer on any person elected as an Extraordinary Member, particular or special privileges as it may deem desirable in respect of such membership.

4. Zones

The Zones referred to in Clause 34 are defined as follows:

(a) The Northern Metropolitan Zone comprises the Local Government areas of:

Hornsby	Kuring-gai	Warringah
Manly	Mosman	North Sydney
Willoughby	Lane Cove	Hunters Hill
Ryde	Pittwater	

(b) The Southern Metropolitan Zone comprises the Local Government areas of:

Canterbury	Rockdale	Hurstville
Kogarah	Sutherland	

(c) The Central Metropolitan Zone comprises the Local Government areas of:

Leichhardt	Marrickville	Sydney City
Botany Bay	Randwick	Waverley
Woollahra		

(d) The Western Metropolitan Zone comprises the Local Government areas of:

Parramatta	Blacktown	Ashfield	
Holroyd	Auburn	Canada Bay	
Strathfield	Burwood		
The Hills (that par	t of The Hills Cour	ncil area south of	
Annangrove Road)			

(e) The North Western Metropolitan Zone comprises the Local Government areas of:

Penrith Blue Mountains Hawkesbury The Hills (that part of The Hills Council area north of Annangrove Road)

(f) The South Western Metropolitan Zone comprises the Local Government areas of:

Campbelltown	Camden	Liverpool
Bankstown	Fairfield	

(g) The New England and North Coast Zone comprises the Local Government areas of:

Moree Plains Coffs Harbour	Narrabri Inverell	Gunnedah Uralla
Walcha	Gwydir	Guyra
Tenterfield	Kyogle	
Tweed	Lismore	Richmond
		Valley
Byron	Ballina	Tamworth
Bellingen	Nambucca	Kempsey
Armidale-	Glen Innes	Port
Dumaresq		Macquarie-
		Hastings
Liverpool Plains	Clarence Valley	Greater Taree

(h) The North West Zone comprises the Local Government areas of:

Broken Hill	Central Darling	Bourke
Cobar	Brewarrina	Bogan
Lachlan	Bland	Weddin
Forbes	Parkes	Narromine
Warren	Walgett	Coonamble
Gilgandra	Dubbo	Wellington

Cabonne	Orange	Oberon
Cowra	Blayney	Bathurst
Warrumbungle	Lithgow	Mid-Western
5	0	Regional

(i) The Illawarra and South Coast Zone comprises the Local Government areas of:

Bega Valley	Eurobodalla	Wollondilly
Kiama	Wingecarribee	Wollongong
Shellharbour	Shoalhaven	

(j) The South Zone comprises the Local Government areas of:

(k) The Hunter and Central Coast Zone comprises the Local Government areas of:

Singleton	Muswellbrook	Gloucester
Lake Macquarie	Port Stephens	Newcastle
Maitland	Cessnock	Dungog
Great Lakes	Upper Hunter	Gosford
Wyong		

5. Affiliated Local Medical Associations

- 5.1. Local Medical Associations formed with objects similar to the Association may be affiliated with the Association.
- 5.2. An affiliated Local Medical Association has the following privileges:
 - (a) The President of the Local Medical Association, or his or her nominee, is entitled to attend as an observer and to address, subject to the Standing Orders of the Council, meetings of the Council and of its Committees;
 - (b) The President of the Local Medical Association shall be invited to nominate suitable members of his or her Local Medical Association who are members of the Association, for consideration by the Council for appointment to Committees of the Council and to represent the Association on outside bodies.
 - (c) Each Local Medical Association may appoint a delegate to attend a meeting of delegates of Local Medical Associations to meet the Board of Directors at least once each year for the consideration of matters of common interest to the Local Medical Associations and the Association.

- (d) A Local Medical Association may actively support and officially endorse the candidacy of members of their Local Medical Association who stand for election to the Council.
- (e) A Local Medical Association may utilise, at cost, and by arrangement with the Chief Executive Officer, the secretarial services of the Association for the conduct of the Local Medical Association's affairs.
- (f) Subject to By-Law 5.4(b), office bearers of Affiliated Local Medical Associations are entitled to such indemnity (if any) under such insurance policies (if any) effected by the Association, as the Board of Directors determines. Indemnification of the office bearers of an Affiliated Local Medical Association under policies effected by the Association is conditional upon that Local Medical Association furnishing to the Chief Executive Officer of the Association in January each year, a statement showing the names and addresses of its office bearers.
- (g) Such other benefits or privileges as may be determined by the Board of Directors.
- 5.3. The aims of the Meeting of Delegates are:
 - (a) To bring Affiliated Local Medical Associations into closer relationships with one another, with a view to securing a common policy on matters of mutual interest and uniform methods of procedure and regulation in regard to professional relations of Members with one another and with other persons.
 - (b) To bring the Affiliated Local Medical Associations individual and collectively into closer touch with the Council with a view to developing a more vigorous corporate life in the Local Medical Associations and in the Association.
 - (c) Such other aims as may be approved by the Council.
- 5.4. Affiliation of a Local Medical Association shall be conditional upon the following:
 - (a) Membership of the Local Medical Association is restricted to medical practitioners registered to practice in New South Wales;
 - (b) Office bearers of the Local Medical Association must be members of the Association;
 - (c) The Local Medical Association shall encourage their members to also become members of the Association.
- 5.5. Subject to By-Law 5.4, each affiliated Local Medical Association shall be free to govern itself as it thinks fit.
- 5.6. The boundaries of Affiliated Local Medical Associations shall be determined by their members in consultation with the Council.

6. The AMA Investment Fund

Any resolution of the Council for the expenditure of monies forming part of the fund established by the Council called 'The AMA Investment Fund', must be carried by a majority of not less than two-thirds of the votes cast. This By-Law is an exception to the voting procedure at Council meetings set out in Clause 41.8.

PART 3 ETHICAL MATTERS

7. Code of Ethics

The Association adopts as its Code of Ethics the Code of Ethics issued by the Australian Medical Association dated 1 February 1996, including any amendments to that Code of Ethics made by the Australian Medical Association.

8. Medico/Legal, Insurance And Other Third Party Examinations

Subject to By-Law 9, Members should observe the following provisions when, at the request of an employer, insurer or other third party, they examine a patient, who is under the care of another practitioner:

- (a) The medical examiner must not, without the consent of the attending doctor, do anything in the course of the examination which involves interference with the treatment of the patient.
- (b) The medical examiner must not make any comments to the patient in the nature of criticisms or reflections upon the treatment of the attending doctor, nor express to the patient, without the concurrence of the attending doctor, any opinion as to the aetiology, diagnosis or prognosis. The medical examiner's duty is confined strictly to examining such matters as are necessary for the purposes of the report to the employer, insurer or other third party.
- (c) The medical examiner will, subject to obtaining the consent of the patient, furnish to the attending doctor, a copy of the report or disclose to the attending doctor the contents of the report.
- (d) If the medical examiner finds it necessary to report to the employer, insurer or other third party that any modification in treatment is necessary for the more effective management of the patient, the medical examiner shall so inform the attending doctor.
- (e) If during the examination, the medical examiner discovers a condition which warrants treatment or investigation, the medical examiner may so inform both the patient and the patient's attending doctor.

9. Referrals To Psychiatrists By Employers

- 9.1. Where a patient is referred by their employer to a psychiatrist, the psychiatrist shall, subject to obtaining the patient's consent, report to the patient's usual attending doctor. Any report to the employer shall be restricted to a formal certificate stating fitness or unfitness for work.
- 9.2. Inclusion of the diagnosis in a certificate is not recommended, although this might be a statutory requirement for the payment of sick leave by some employers, such as State Instrumentalities. If the psychiatrist is satisfied that the patient is not under any duress to agree to the release of further information to the employer, specific details may, at the request of the patient, be made available to the employer.

10. Ethics Committee Procedure Concerning Alleged Unethical Conduct

10.1. Questions as to whether a Member, a director and/or shareholder of a Member which is a company or other medical practitioner has been guilty of unethical conduct or a Member has on any ground become liable to expulsion from the Association and all questions of

medical ethics or relating to professional conduct coming to the notice of the Association shall be dealt with and determined in accordance with the provisions of this By-Law.

- 10.2. A committee called the Ethics Committee shall be appointed by the Council at the first meeting of the Council after each Annual Meeting of the Association or at the first meeting of the new Council following a dismissal of the Council pursuant to Clause 38. The Committee shall have the power to co-opt Members, subject to ratification by the Council. The number of non-Councillor members of the Committee shall not exceed one-third of the total number of Committee members. The Ethics Committee shall remain in office until the succeeding Committee is appointed. It shall be the duty of the Ethics Committee to investigate all matters referred to in By-Law 10.1 in accordance with the following provisions of this By-Law, except where By-Law 10.12 applies.
- 10.3. No member of the Ethics Committee or the Council who is personally concerned in an ethics investigation as complainant or otherwise, or is a partner or assistant or principal of any person so concerned or otherwise has a personal interest in the investigation which in the opinion of the Ethics Committee or the Council, would render it undesirable that he or she take part in the investigation, shall take part in or be present at any meeting concerning the investigation as a member of the Ethics Committee or the Council and the Ethics Committee or the Council may proceed with and conclude the investigation in his or her absence.
- 10.4. Complaints regarding the professional conduct of individual members of the profession shall be addressed to the Medical Secretary of the Association. All complaints shall be deemed to have been made to the Council.
- 10.5. In the case of a complaint submitted by a Member of the Association who considers that he, she or it has been (or is) directly affected by what he, she or it alleges to be the unprofessional conduct of another Member or a director of a Member which is a company, it shall be the duty of the Medical Secretary of the Association to ascertain whether the complainant has either personally or by letter, afforded the Member against whom he or she has made the complaint, a reasonable opportunity of explanation, and if this has not been done to call upon the complainant to do so. If the complainant fails to take this step within a week of being requested to do so the propriety of his or her action in making the complaint may itself be made a matter for investigation.
- 10.6. Every complaint regarding the professional conduct of a member of the profession shall be in writing and shall set out in the form of a statement, the facts constituting the conduct complained of with such explanation of the circumstances as may be necessary. The complaint shall contain the name of the member of the profession complained of, the names and particulars of other persons concerned, together with particulars of times and places so far as may be required for the purposes of the investigation. The complaint shall be as brief as is consistent with clearness and completeness. Argument or immoderate language shall be avoided.
- 10.7. If the member of the profession the subject of a complaint is a Member of the Association or a director of a Member which is a company ('the respondent'), a photocopy of the complaint shall be sent to the respondent by the Medical Secretary with a covering letter requesting the respondent to respond to the complaint as soon as possible. A photocopy of the letter sent to the respondent shall be sent to the complainant. On receipt of the respondent's respondence through the Association between the complainant and the respondent and take such other steps as are considered appropriate until such time as there is sufficient information on which to make a determination. The Medical Secretary may make a determination on the complaint and take any action considered appropriate or refer the complaint to the Ethics Committee for determination. Where the Medical Secretary makes a determination on a complaint, a report shall be furnished to the Ethics

Committee by the Medical Secretary outlining details of the complaint, the determination made by the Medical Secretary and any action taken by the Medical Secretary in relation to the complaint.

- 10.8. The Medical Secretary may at any stage of the investigation place any information available before the Ethics Committee and seek such advice or assistance from the Ethics Committee as he or she deems necessary.
- 10.9. The Ethics Committee shall have the sole and final right to determine whether the form of any information referred to it is in accordance with the requirements of this By-Law and shall be entitled to refer any information back to the Medical Secretary at any time to ask for any further information from any party to the investigation which it may deem necessary or desirable. The Ethics Committee shall investigate the complaint based on the information provided to it.
- 10.10. The Ethics Committee may obtain such further information, documentary or oral as shall be deemed necessary, provided that neither the complainant nor the respondent shall be present at any meeting of the Ethics Committee at which it considers any information unless it is otherwise deemed by the Ethics Committee.
- 10.11. If the investigation is found by the Ethics Committee to be one only affecting the complainant and the respondent personally, the Committee shall have full power to make a final determination on the investigation without reference to the Council and that determination shall be deemed to be the decision of the Council and be binding upon all the parties concerned.
- 10.12. The Council may at any time conduct any ethics investigation if it so desires and it may at any stage assume the conduct of any ethics investigation which has been commenced by the Ethics Committee and in that event all the rights, powers and authorities vested in the Ethics Committee shall be assumed and exercised by the Council and the procedure in this By-Law so far as applicable shall be followed, but the Council may in any case in which such procedure is not applicable, desirable or appropriate, conduct the investigation in such manner in all respects as it shall deem proper and may bring in such finding and take such action as it thinks appropriate.
- 10.13. The Medical Secretary may at any stage of an ethics investigation refer any conduct of a Member or a director and/or shareholder of a Member which is a company the subject of a complaint to the Council which in the opinion of the Medical Secretary might render the Member liable to censure by or expulsion from the Association and the Council may cause any new or further enquiry or investigation to be made.
- 10.14. In cases investigated by the Ethics Committee (other than those referred to in By-Laws 10.11 and 10.12) the Ethics Committee shall after the investigation, present to the Council, a report on the investigation and the Council shall upon receipt of the report be entitled to pass such resolution and to take action it thinks fit.
- 10.15. If the member of the profession whose conduct is complained of is not a Member of the Association or is not a director and/or shareholder of a Member which is a company, the Medical Secretary shall submit the complaint to the Ethics Committee and the Ethics Committee shall then determine whether or not the practitioner concerned shall be communicated with and, if so, in what manner. In the event of the practitioner consenting to the complaint being investigated and adjudicated upon by the Ethics Committee and the Council in accordance with this By-Law, the procedure to be followed in the investigation and adjudication shall, except in so far as it may be inapplicable, be the same as that set out in this By-Law in the case of a complaint against a Member of the Association.

- 10.16. Council members who have taken part as members of the Ethics Committee in any investigation shall be entitled to take part in the consideration by the meeting of the Council of the report of the Ethics Committee on the investigation and to speak and vote on the matter as members of the Council.
- 10.17. No question as to the conduct of an individual member of the profession shall in any circumstances be considered by a General Meeting of the Association.
- 10.18. A copy of any resolution of the Council relating to any investigation shall, unless otherwise determined by the Council, be sent by the Medical Secretary to each of the parties concerned.
- 10.19. If the practitioner the subject of a complaint shall make amends or express regret to the satisfaction of the Council, it shall be competent for the Council to rescind any resolution passed under this By-Law.
- 10.20. The finding of the Council upon an investigation shall be final, unless new facts are brought forward which in the opinion of the Council justify the investigation being reopened.
- 10.21. It shall be the duty of every Member of the Association to provide reasonable assistance to the Ethics Committee and to the Council in the investigation of complaints regarding the professional conduct of individual members of the profession, and any party to an investigation shall be required to furnish for such purposes such number of copies (not exceeding 10) as may reasonably be required of any document submitted by him or her for the consideration of the Ethics Committee or the Council.
- 10.22. The Council may:
 - (a) Bring to the notice of any other Branch of the Australian Medical Association any resolution or By-Law of the Association as to medical ethics or otherwise relating to professional conduct, and may request support from the other Branch with a view to making the operation of such resolution or By-Law more effective.
 - (b) Bring to the notice of every Member of the Association and if thought fit to the notice of any or every member of the profession residing within the area of the Association any resolution or By-Law as to medical ethics or otherwise relating to professional conduct adopted by any other Branch of the Australian Medical Association Limited of which the Association shall have received notice.
- 10.23. If a By-Law of the Association or any resolution of the Council refers to the terms and conditions upon which any Members should accept or hold an appointment or appointments of any kind, it shall be the duty of the Medical Secretary to request those Members who hold these appointments, upon terms or under conditions inconsistent with that By-Law or resolution, to take the necessary steps within the period of one calendar month to terminate the appointments in accordance with the terms of the engagement, or to secure such modifications of the terms or conditions of the appointments as shall be necessary for compliance with the By-Law or such resolution, but no further action shall be taken under the By-Law or pursuant to the resolution until after the expiration of a period of one calendar month from the time when the request was made.

PART 4 COORDINATING COMMITTEES AND SPECIAL GROUPS

11. Coordinating Committee

- 11.1. The Council shall establish a Coordinating Committee in respect of each class of Member referred to in Clauses 35.1(a) to (k) and (x) of this Constitution.
- 11.2. The role of each Coordinating Committee is to facilitate liaison between the Council and:
 - (a) Members of the Association falling within the relevant class; and
 - (b) Special Groups whose members fall within the relevant class.
- 11.3. Each Coordinating Committee shall consist of the member of the Council elected to represent the relevant class of Members, who shall convene and chair the Committee, and, subject to By-Law 11.4, two members from each Special Group constituted under By-Law 12 whose Members fall within the relevant class, to be nominated by that Special Group.
- 11.4. Should there be no such Special Group, the College and Society representing doctors in the relevant field of professional interest shall each be invited to nominate one of its members, who shall be an Ordinary Member, to serve on the Coordinating Committee. Should there be no organisation other than the relevant College, the College shall be invited to nominate two Ordinary Members to serve on the Coordinating Committee.

12. Special Groups

- 12.1. Special Groups of Members having distinctive professional interests (the formation of which is authorised by the Constitution) may be formed and conducted subject to and in accordance with the following provisions of this By-Law:
 - (a) whenever the Council shall determine or be requested by any Members to form a Special Group it shall, subject to (b) below, convene a meeting of Members who in its opinion would be qualified to be Members of that Special Group, for the purpose of considering the formation of that Special Group. This meeting shall be chaired by a member of the Council nominated by the President or by the nominee of that member of Council.
 - (b) Should the Council consider that the views of Members who in its opinion are qualified to be members of a Special Group, regarding the formation of a Special Group, may be ascertained by means other than the holding of a meeting of those Members, then the Council may take such other steps as it considers appropriate to obtain the views of those Members.
 - (c) Whenever any Members shall determine to form a Special Group the Chairman of the meeting at which the decision to form a Special Group was taken shall make an application to that effect to the Council. The application shall be accompanied by a list of Members who desire and are qualified to become Members of the Special Group. The Chairman of the meeting shall have the duty of convening all further meetings and of setting in motion all procedures necessary for the formation of the Special Group and the election of its office bearers.
 - (d) On receipt of the application, the Chief Executive Officer shall as soon as practicable refer it to the Council for consideration, and the Council may consent to the application as received or may impose any conditions, limitations or restrictions which it may think proper in respect to the information or operations of

the Special Group, or may refuse consent to the formation of the Special Group. Upon the Council having consented to the formation of a Special Group, those Members who are qualified and intend to become Members may proceed with the formation of the Special Group, subject to this By-Law. Any conditions, limitations or restrictions imposed by the Council in respect to the Special Group may be varied or released by the Council.

- (e) No Member shall be eligible to become a member of a Special Group unless he is a Member of the Association and possesses the qualifications for membership of that Special Group as prescribed by the Association.
- (f) Any Member who wishes to become a member of a Special Group who possesses the qualifications required for membership shall on making the required application be admitted as a member except that an application shall not be required of any Members who possess the relevant qualifications and who have been named as proposed members in any list supplied to the Association under By-Law 12.1(c).
- (g) Application for membership of a Special Group shall be made in writing to the Secretary of the Special Group and shall contain the full name and address of the applicant and full particulars of his or her qualifications for membership. If there is no Secretary of the Special Group or no Secretary known to the applicant, then the application may be made either to the Chairman of the Special Group or to the Chief Executive Officer of the Association. If the application is received by the Chief Executive Officer of the Association, he or she shall as soon as practicable forward it to the Secretary or Chairman of the Special Group.
- (h) If there is any dispute or question as to whether a Member applying for admission as a member of a Special Group possesses the qualifications entitling that Member to become a member, the dispute or question shall be referred to the Council and the decision of the Council on the matter shall be final and conclusive as between all parties.
- (i) Every Special Group shall have a Chairman, a Secretary and a Treasurer. The first Chairman, Secretary and Treasurer shall be elected at the first meeting of the Special Group held after its formation. The term of office and method of election of the officers shall be determined by the rules of the Special Group.
- (j) The Secretary of a Special Group shall, with all expedition, forward to the Chief Executive Officer, the names and addresses of all officers of the Special Group holding office and also the names and addresses and qualifications of all persons who become members of the Special Group, and any alteration in those details.
- (k) Not more than one Special Group shall exist in respect of any one area unless in the opinion of the Council there are special circumstances which justify the existence of more than one.
- (I) No Special Group shall consist of Extraordinary Members only.
- (m) A Special Group may by resolution permit persons who are not members of the Special Group to attend any meeting of the Special Group if it is of the opinion that their attendance will promote the objects, scope or purposes of the Special Group.
- (n) For the purpose of providing for the expenses incurred by a Special Group each member of the Special Group shall pay to its Treasurer such subscription whether annual or otherwise as shall be fixed by the Special Group. All moneys

so received shall be the property of the Special Group and shall be applied and disbursed in such manner as it shall determine.

- (o) A Special Group shall not be deemed the agent of the Council or to have any authority to represent or bind the Council in any manner whatsoever.
- (p) Each Special Group shall be entitled to make Rules as it may deem necessary or proper for or in relation to the conduct of its business and affairs. No Special Group shall be entitled to make any Rule which is inconsistent with this By-Law. A copy of all Rules passed by a Special Group shall be forwarded to the Association. All Rules of a Special Group and any amendments to those Rules need to be approved by the Council before they become operative.
- (q) Whenever, in the opinion of the Council, the continuance of a Special Group is unnecessary or undesirable, the Council may by resolution dissolve it. Upon notice being given by the Council to the Secretary or Chairman of the Special Group of such a resolution, it shall be the duty of the Secretary or Chairman of the Special Group and of all Members to take all such steps and do or concur in doing all such things as may be necessary or proper to bring about the dissolution of the Special Group and the discontinuance of its operations.
- (r) Each Special Group shall on or before the 31st day of January in each year furnish to the Council a Report of its work and operations during the preceding year.
- (s) The Council may require applications for membership of a Special Group and returns of the membership of Special Groups and of all officers to be in a form prescribed or approved from time to time by the Council.
- (t) A member of a Special Group shall cease to be a member of that Special Group on ceasing to be a Member of the Association.
- (u) A Special Group may nominate a member to attend meetings of the Council as an observer, who may, with the permission of the Chairman of the Council, address the meeting on any matter of direct concern to members of that Special Group.

PART 5 AUSTRALIAN MEDICAL ASSOCIATION LIMITED

13. National Conference

- 13.1. The Council shall appoint annually Ordinary Members or Nominated Representatives who are Ordinary Members of the Australian Medical Association to be members of the National Conference of the Australian Medical Association to be the Representatives of the Association at the National Conference as the Association is entitled to appoint under the Constitution of the Australian Medial Association.
- 13.2. Subject to the Constitution of the Australian Medical Association, the term of membership of persons appointed shall be from the commencement of the Annual Meeting of the National Conference held next succeeding the date of their appointment until the commencement of the Annual Meeting of the National Conference in the following year. The appointments shall be made not later than 35 days before the date appointed for the holding of each Annual Meeting of the National Conference and a notification as to the appointments shall be forwarded to the Secretary General of the Australian Medical Association not later than 28 days before that date.

- 13.3. In the event of the membership of the National Conference of any Member representing the Association ceasing otherwise than by expiration of his or her term of membership, the Council shall appoint another Ordinary Member or Nominated Representative of the Association who is an Ordinary Member of the Australian Medical Association to be a member of the National Conference in his or her place and shall notify the Secretary General of the Australian Medical Association of that appointment.
- 13.4. The appointment of Members or Nominated Representatives to represent the Association at the National Conference under this By-Law shall be made by a resolution of the Council.
- 13.5. Whenever a person representing the Association at the National Conference is unable to attend the National Conference and the Association is entitled to nominate another person to act as a substitute for that person, the nomination shall be made by the President and notice of the nomination shall be given to the Secretary General of the Australian Medical Association.

14. Federal Council

- 14.1. The Council shall appoint annually a member of the Council to be a member of the Federal Council of the Australian Medical Association to represent the Association on the Federal Council. Subject to the Constitution of the Australian Medical Association, the term of membership of the person appointed shall be from the conclusion of the Annual Meeting of the National Conference held next succeeding the date of the appointment until the conclusion of the Annual Meeting of the Annual Meeting of the National Conference in the following year. Such appointment shall be made not later than 35 days before the date appointed for the holding of each Annual Meeting of the National Conference and notification of the appointment shall be forwarded to the Secretary General of the Australian Medical Association not later than 28 days before that date.
- 14.2. In the event of the membership of the Federal Council of any person representing the Association ceasing otherwise than by expiration of his or her term of membership, the Council shall appoint another member of Council of the Association who is an Ordinary Member of the Australian Medical Association to be a Member of the Federal Council in his or her place and shall forthwith notify the Secretary General of the Australian Medical Association of such appointment.
- 14.3. The appointment of a person to represent the Association on the Federal Council under this By-Law shall be made by resolution of the Council.
- 14.4. Whenever a person representing the Association on the Federal Council is unable to attend any meeting of the Federal Council and the Council has thereby become entitled to nominate another person to act as a substitute for him or her, the nomination shall be made by resolution of the Council and notice of the nomination shall be forwarded to the Secretary General of the Australian Medical Association. The nomination or appointment of a substitute shall be in writing and shall be signed on behalf of the Council by the President or the Chief Executive Officer.

15. General

15.1. Whenever an official communication is received by the Secretary or the Honorary Treasurer of the Association from the Secretary, Treasurer or other officer of the Australian Medical Association requesting that any matter be submitted to the Association or to the Council, it shall be submitted to the Association or the Council, as the case may be, in accordance with the terms of such request.

- 15.2. The Chief Executive Officer shall forward to the Secretary General of the Australian Medical Association the Annual Report and Balance Sheet of the Association immediately after it is published.
- 15.3. The Honorary Treasurer shall forward to the Treasurer of the Australian Medical Association all subscriptions in respect of membership of the Australian Medical Association collected from Members of the Association as are prescribed by the By-Laws of the Australian Medical Association.

16. Representation On Other Bodies

Whenever the Association is empowered or requested to nominate, elect or appoint any member or members of or any representative or representatives to or on any other Committee, Board, Council, Association, Society or other like body, or to any Congress, Convention or other meeting, the nomination, election or appointment shall be made by the Council unless otherwise provided or required by the terms of the power or authority under which the nomination, election or appointment is made.

17. Confidential Matters

Except with the consent of the Board of Directors in writing, no Member shall publish or be a party to publishing in any newspaper or otherwise the whole or any part of the Constitution or By-Laws of the Association, any communication between that Member, or a Nominated Representative or any other Member and the Association or the Council or the Board of Directors or a Committee of the Association, whether the communication relates to a matter under consideration by or has been submitted for the consideration of the Association or the Council or the Board of Directors or a Committee of the Association, or any Rule, Minute, decision or proceedings of the Association, or any other like matter. It shall not be necessary to obtain the consent of the Board of Directors to a publication of any matter referred to in this By-Law in The Medical Journal of Australia, or any other newspaper, journal or magazine approved by the Board of Directors.

PART 6 RULES OF DEBATE

- 18.1. When any Member or Nominated Representative wishes to speak in debate he or she shall rise and address the Chairman. In the case where 2 or more Members rise at the same time, the Chairman shall decide who has precedence.
- 18.2. No Member or Nominated Representative shall remain standing during a discussion, except the Member or Nominated Representative addressing the Chairman.
- 18.3. No Member or Nominated Representative shall speak more than once on the same question without leave of the meeting.
- 18.4. The mover of a motion shall have the right of reply, but not the mover of an amendment. The reply must be limited to answering the arguments advanced against the motion.
- 18.5. Every motion and amendment shall be presented in writing by the proposer at the time the proposition is made and shall be immediately handed to the Chairman.
- 18.6. All motions and amendments must be seconded.
- 18.7. When a motion or amendment has been moved and seconded it shall not be withdrawn without the consent of the meeting.
- 18.8. The seconder of a motion or amendment may reserve his speech.

- 18.9. A report of a Committee officially presented shall be received without a motion; but its adoption, as a whole, or by clauses, shall be moved and seconded.
- 18.10. No motion, on any other subject, shall be submitted until the one under discussion is disposed of.
- 18.11. A motion may be disposed of by withdrawal (subject to By-Law 18.7), adoption, rejection, amendment, the postponement of the question either to a definite time or to a time to be subsequently fixed, by reference of the same to a Committee, or by the carrying of the motion 'the previous question'.
- 18.12. Should an amendment be carried, it becomes the substantive motion, and an amendment to that motion may be proposed. If no further amendment is proposed the motion shall be put without further discussion.
- 18.13. Should an amendment be lost and no further amendment is proposed, the motion shall be put without further discussion.
- 18.14. No second amendment shall be submitted until the first is disposed of, though any speaker may indicate his or her intention to propose another amendment.
- 18.15. All amendments shall be taken in the order in which indication of them shall have been given.
- 18.16. When 'the previous question' shall have been moved, the motion shall be put to the meeting in the following form: 'That the motion (or motion and amendment) before the meeting be not put'. This motion may be discussed concurrently with the motion or amendment before the meeting. If 'the previous question' is carried, the motion or amendment before the meeting shall not be put. If 'the previous question' is not carried the discussion on the motion or amendment before the meeting amendment before the meeting.
- 18.17. The motion 'the previous question' or for the postponement of a question, or for the reference of the question to a Committee or for the adjournment of the debate or of the meeting, may be moved at any time, notwithstanding that there is a motion or motion with amendment before the meeting.
- 18.18. A motion 'That the vote be now taken', or 'That the question be now put', may be presented by any Member who has not taken part in the debate; but no discussion shall be allowed on that motion. If the motion is carried, the Chairman shall call upon the Member or Nominated Representative who has the right of reply, and immediately thereafter shall put the motion and any amendment to a vote.
- 18.19. At the close of a discussion, the Chairman shall request all Members to be seated and the motion or the motion and amendment shall be read before being put to the vote. The vote on the amendment shall be taken first. No person shall speak after the Chairman has risen to put 'the question' to the meeting, until the vote has been taken.
- 18.20. The Chairman shall call to order any speaker who departs from the motion or amendment or violates the courtesies of debate.
- 18.21. The Chairman shall decide all points of order. A Member or Nominated Representative may move a motion of dissent from the ruling of the Chairman on a point of order. A motion of dissent shall be put to the meeting without debate and if the motion is passed the Chairman shall uphold the point of order accordingly.
- 18.22. A Member or Nominated Representative may rise to a point of order when he or she considers the Rules of Debate have been violated. The Member or Nominated

Representative must submit the point of order to the Chairman. Upon the point of order being raised, the Member or Nominated Representative addressing the meeting shall be seated until the point of order has been decided.

- 18.23. A Member or Nominated Representative who thinks himself or herself misrepresented by a speaker may, with the indulgence of the meeting, interrupt the speaker in order to correct the misrepresentation but he or she must not enter into argument.
- 18.24. Any motion to suspend these Rules of Debate must be passed by a vote of two-thirds of those present at the meeting.

PART 7 MEDICAL PRACTICE COMPANIES

- 19.1. No Member shall be associated with or participate in the conduct of a Medical Practice Company as a shareholder, director, employee consultant or otherwise, unless the Medical Practice Company complies with and is conducted in conformity with the provisions of these By-Laws. A Member which is a Medical Practice Company will comply with the provisions of these By-Laws relating to Medical Practice Companies.
- 19.2. Each and every Member who is a member, shareholder or director of a Medical Practice Company shall for the purpose of these By-Laws be deemed to have personally omitted or done or omitted to do all acts, matters and things which the Medical Practice Company shall commit to do or omit to do and which if applied to a Member is regulated, controlled or prohibited by these By-Laws, the Ethical Rulings of the Association or the Code of Ethics of the Australian Medical Association and for the purpose of these By-Laws each and every such Member shall be personally responsible and answerable for any such act, matter or thing committed or done or omitted to be done by the Medical Practice Company to the same extent as if he or she had personally committed, done or omitted to do such act, matter or thing.
- 19.3. No Member shall be a shareholder or a director of a Medical Practice Company unless the Medical Practice Company conducts its affairs in conformity with the Constitution, By-Laws and Ethical Rulings of the Association and the Code of Ethics of the Australian Medical Association as if it were an individual Member of the Association.

THE SCHEDULE

APPLICATION FOR ELECTION (By-Law 2)

The Secretary Australian Medical Association (NSW) Limited PO Box 121 ST LEONARDS NSW 2065

I,

a Registered Medical Practitioner, hereby apply/being a director ofPty Limited, hereby apply on behalf ofPty Limited for election as a Member of the Australian Medical Association Limited and of Australian Medical Association (NSW) Limited, and I agree, if elected/and I on behalf ofPty Limited agree that ifPty Limited is elected, to observe the principles stated in the Declaration of Geneva, viz:

"I solemnly pledge myself to consecrate my life to the service of humanity;

I will give to my teachers the respect and gratitude which is their due;

I will practice my profession with conscience and dignity;

The health of my patient will be my first consideration;

I will respect the secrets which are confided in me, even after the patient has died;

I will maintain by all the means in my power the honour and the noble traditions of the medical profession;

My colleagues will be my brothers;

I will not permit considerations of religion, nationality, race, party politics or social standing to intervene between my duty and my patient;

I will maintain the utmost respect for human life, from its beginning even under threat, and I will not use my medical knowledge contrary to the laws of humanity;

I make these promises solemnly, freely and upon my honour."

and to abide by:

- (a) The Constitution and By-Laws and the Code of Ethics of the Australian Medical Association Limited for the time being in force.
- (b) The Constitution and By-Laws of Australian Medical Association (NSW) Limited.
- (c) The requirements of any other Division, Branch, Special Group or Affiliated Local Association of the Australian Medical Association Limited or Australian Medical Association (NSW) Limited to which I may at the time belong.
- (d) The requirement to pay my annual Subscription to the Australian Medical Association Limited and Australian Medical Association (NSW) Limited.

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

Date of Birth Male Female

QUALIFICATIONS OF APPLICANT OR NOMINATED REPRESENTATIVE

Initial Qualifications (Date and Place of)	
Higher Qualifications (if any) (Dates and Places of)	•
Registration (Dates and Places of)	•
Membership of other Medical organisations, if any	
(Branch/Group)(Date)	
Previous Membership of AMA, if any	•
(Branch/Group)(Date)	•
Home Address	•
Postcode	•
Practice Address	•
Postcode	•
Classification	
Private Practice Salaried	
GP Specialist Other	
Sub-Specialty (please specify)	•
Type of Practice	•
Hospital Appointments	
Sessional D Modified Fees D Salaried D Other	
Membership Category	
Decorations	•
Directors and Shareholders of Company Applicants	
(a) Directors	
Name	•
Address	
Registered Medical Practitioner? Yes 🗌 No 🗌	
(b) Shareholders	
Name	
Address	
Registered Medical Practitioner? Yes 🗌 No 🗌	
SignatureDate	
Date of Birth Male 🗌 Female 🗌	