## Federal Decree-Law No. (4) of 2016 on Medical Liability

## We, Khalifa bin Zayed Al Nahyan, President of the United Arab Emirates:

- Having taken cognizance of the Constitution;
- Federal Law No. (1) of 1972 Concerning the Mandates of Ministries, Powers of Ministers and its amendments;
- Federal Law No. (7) of 1975 Concerning the Practice of Human Medicine Profession, and its amendments;
- Federal Law No. (8) of 1980 on Regulation of Labor Relations, and its amendments;
- Federal Law No. (28) of 1981 Concerning the Detention and Treatment of People with a Mental Disorder;
- Federal Law No. (4) of 1983 on the Profession of Pharmacy and Pharmaceutical Institutions;
- Federal Law No. (5) of 1984 on the Practice of some Health Professions by non-Doctors and non-Pharmacists;
- Federal Law No. (5) of 1985 on the Civil Transactions Law, and its amendments:
- Federal Law No. (3) of 1987 Promulgating the Penal Code, and its amendments;
- Federal Law No. (10) of 1992 Concerning the Law of Evidence in Civil and Commercial Transactions, and its amendments;
- Federal Law No. (35) of 1992 Concerning the Criminal Procedure Law, and its amendments;
- Federal Law No. (15) of 1993 Concerning the Regulation of Human Organs Transplantation;
- Federal Law No (20) of 1995 Concerning Medicines and Preparations derived from Natural Medicines:
- Federal Law No. (28) of 2005 on Personal Status;
- Federal Law No. (6) of 2007 Establishing and Regulating the Insurance Authority;
- Federal Law No. (10) of 2008 on Medical Liability;
- Federal Law No. (11) of 2008 Concerning Licensing of Fertilization Centers in the State;
- Federal Law No. (11) of 2008 on Human Resources in the Federal Government, and its amendments;
- Federal Law No. (7) of 2012 on Regulation of Expertise before the Judicial Bodies;
- Federal Law No. (14) of 2014 on Combating Communicable Disease;
- Federal Law No. (2) of 2015 on Commercial Companies;
- Federal Law No. (4) of 2015 on Private Health Facilities; and
- And in accordance with the presentations made by the Minister of Health and approval of the Cabinet;

## Have promulgated the following Decree-Law:

# Chapter 1 General Provisions Article 1

In the Application of the provisions of this Decree-Law, the following words and expressions shall have the meanings indicated opposite each of them, unless the context requires otherwise:

<sup>\*</sup>In case of any misinterpretation, the Arabic version of this legislation prevails.

**The State** : The United Arab Emirates

MOHAP/ the Ministry

The Ministry of Health and Prevention

**The Minister** : Minister of Health and Prevention

Health Authority : The Ministry or any federal or local government health

authority in the State.

**Profession** : A medical profession or any other profession related thereto as

defined by virtue of a decision issued by the Minister,

**Profession** : Practitioner of a medical profession or any other profession **Practitioner** related thereto as defined by virtue of a decision issued by the

Minister.

Sex Change : Changing the gender of a person whose gender identity is clear (Transsexuality) : (whether man or woman), whose sexual physical features are

matching his/ her physiological, biological and genetic characteristics, and whose gender identity is not suspicious (whether man or woman). This definition means also that undergoing a Sex Reassignment Surgery (SRS) for this category is considered inconsistent deviation from the gender

type established by medical analyses.

**Sex Reassignment** : A medical intervention made for correcting the gender of a (Sex Correction) person whose gender identity is vague and suspicious (whether

he/ she is a man or woman), for example, that person has sexual physical features inconsistent with his/ her physiological and biological and genetic characteristics. Moreover, that person's facial features indicate that he is a male, while in fact he is a

female, and vice versa.

**Human Cloning** : The process of creating a human being by transferring a

nucleus from human somatic cell to an enucleated oocyte (egg), where the cell resulting from this process grows to form a fetus that is genetically identical copy of the somatic cell's

owner.

Article (2)

The provisions of the Decree-Law shall apply to all Profession Practitioners in the State.

# Article (3)

All Profession Practitioners in the State must perform their work duties with accuracy and honesty as required by the Profession and in accordance with the established scientific and technical principles and provide patients with the due care. They may not exploit the patients' needs for the purpose of achieving an unlawful benefit, whether personal or otherwise, nor may they practice discrimination among the patients. Further, all practitioners shall comply with the applicable legislation of the State.

<sup>\*</sup>In case of any misinterpretation, the Arabic version of this legislation prevails.

## Article (4)

Without prejudice to the obligations set out in the applicable legislation, a physician, in particular, must comply with the following:

- 1. Comply with the rules, regulations and procedures of practicing the Profession, as per his/her degree and specialization;
- 2. Record the patient's health condition and his /her personal and family medical history before diagnosis and treatment;
- 3. Use the available diagnostic and treatment tools required for the case;
- 4. Use the necessary medical tools and equipment while diagnosing and treating patients with full attention and vigilance in accordance with the established scientific principles;
- 5. Inform the patient of the available medication options;
- 6. Prescribe the medicine and clearly define its quantity and usage in writing, including the name, signature and date of the prescription; and advise the patient or his/ her family, as the case may be, of the necessity to adhere to the method determined by the physician for taking the medication;
- 7. Inform the patient of the nature and degree of seriousness of his/ her illness, unless the patient's interest requires otherwise or he/ she not psychologically prepared to be informed. Any of the patient's next of kin, relatives or fellows shall be informed in the following two cases:
  - a. If the patient is totally or partially incapacitated;
  - b. If his/ her medical condition is serious that he/ she can't be personally informed and he/ she has not defined a person to be informed on his/ her behalf;
- 8. Inform the patient or his family of the complications that may arise from diagnosis, medical treatment or surgical intervention prior to starting the medication process, and observe and provide treatment for such complications where possible;
- 9. Cooperate with other physicians who are engaged in the patient's treatment, provide information on the patient's medical condition and the course of treatment whenever requested to do so, and consult a specialist physician if the case so requires;
- 10. Cooperate with other Profession practitioners who are engaged in the medical condition of the patient;
- 11. Inform about people suspected to be infected with any of the communicable disease as per the procedures set out in the legislation regulating communicable disease control.

#### Article (5)

## A physician shall not do any of the following:

- Administer treatment without obtaining the patient's consent except in cases requiring
  emergency medical intervention where consent cannot be obtained for any reason or if the
  patient is infected with a contagious disease that threats public health and safety. However,
  as for examination, diagnosis and administration of the first dose of medication, consent of
  incapacitated patient is considered, provided that the patient's relatives or fellows should
  be informed of such medication plan;
- 2. Refrain from providing treatment for a patient in emergency cases or discontinuing the provision of treatment in all cases, unless the patient has violated the physician's instructions, or if such refrainment or discontinuation is attributable to reasons beyond the physician's will, subject to the provisions of Articles (9) and (10) of this Decree-Law;

<sup>\*</sup>In case of any misinterpretation, the Arabic version of this legislation prevails.

- 3. Refrain from providing treatment for a patient or first aid for an injured unless the case does not fall within the physician's specialization, in which case he/ she shall provide the patient with the first aid and transfer him/ her to the specialist physician or the nearest medical facility if the patient wishes so;
- 4. Use unauthorized or unlawful methods in dealing with the medical case of the patient;
- 5. Prescribe any treatment before administering clinical examination to the patient and Health Authorities may develop a system to provide telehealth services as per the controls and conditions set out in the executive regulations of this Decree-Law;
- 6. Disclose the patient's confidential information that the physician gets to know while or due to practicing the profession, whether such information is disclosed by the patient or otherwise obtained by the physician. This prohibition shall not apply in the following conditions:
  - a. If the disclosure is upon the request or approval of the patient;
  - b. If disclosure is in the interest of a husband or wife and is made for either of them personally;
  - c. If disclosure is made in an attempt to prevent or report a crime, in which case disclosure shall be only made to the competent authorities;
  - d. If the physician is assigned as an expert by a judicial or official investigative authority in the State, if he/ she is summoned by either of them to act as a witness to an investigation or a criminal case;
  - e. If the physician is assigned to perform an examination by an insurance company or by an employer, within the scope of assignment;
  - f. If disclosure is made upon request of the health authority with the aim of protecting public health as per the conditions and controls set forth in the executive regulations of this Decree-Law;
  - g. If the purpose of disclosure is for the physician to defend himself/ herself before an investigation authority or any judicial body as the need of defense may requires;
- 7. Clinically examine a patient of the opposite sex without the presence of a third person and without obtaining the patient's prior approval, unless the necessity requires otherwise;
- 8. Provide accommodation for patients in places that are not prepared for this purpose, except in emergencies;
- 9. Perform sex change (transsexuality) surgeries;
- 10. Take unnecessary medical actions or perform unnecessary surgeries for the patient without obtaining his/ her informed consent.

## Article (6)

A medical error is the error made by a Profession Practitioner due to any of the following reasons:

- 1. Ignorance of technical matters that are supposed to be known by any Profession Practitioner of the same degree and specialization;
- 2. Non-compliance with the recognized professional and medical principles;
- 3. Non-exercising due diligence;
- 4. Negligence and not paying attention;

Criteria of gross medical error shall be set out in the executive regulations of this Decree-Law.

<sup>\*</sup>In case of any misinterpretation, the Arabic version of this legislation prevails.

## Article (7)

Sex Reassignment Surgeries (Sex correction) may be performed according to the following controls:

- 1. The person's gender identity is obscure and is suspicious about being male or female;
- 2. The person has sexual and physical features inconsistent with his/her physiological, biological and genetic characteristics;
- 3. The provision of Paragraphs (1 and 2) of this Article shall be proven by medical reports and approval of specialized medical committed formed by the Health Authority with the aim of defining the patient's gender identity and approving the reassignment surgery. The said committee shall refer the case to a psychologist to make the necessary psychological preparation.

## Article (8)

- 1. Except for the emergency cases that require immediate and necessary surgical intervention to save the life of the patients or the fetus, or to avoid gross complications that they may suffer, surgeries may not be made unless:
  - a. The physician who performs the surgery is qualified according to his/ her academic specialization, practical experience, and accuracy and significance of the surgery;
  - b. The necessary laboratory tests and analyses are made to ensure that the surgical intervention is necessary and appropriate to treat the patient and to ensure that the patient's health condition permits performing the surgery;
  - c. A written approval is to be taken from the patient if he/ she is legally competent, or from the patient's spouse or a relative to the fourth degree if he/ she is partly or totally incompetent, or if it is not possible to obtain his / her approval in order to perform the surgery or any other necessary surgery after informing the patient of the consequences and potential medical complications of the surgery. Unless being incompetent, every person has completed eighteen years old shall be considered qualified for giving approval;
  - d. In case it is not possible to obtain the approval of the patient, his/her spouse, or relative to the fourth degree, a report shall be made by the attending physician and other physician from the same health facility and its manager confirming the necessity to perform a surgery for the patient and that report shall be sufficient unless he/ she is legally competent and there is no possibility to obtain any of such approvals;
  - e. The surgery shall be performed in a health facility that is well prepared to perform the respective surgery.
- 2. The provision of surgeries shall apply in implementing the provisions of this Article regarding treatment cases of special nature set out in the executive regulations of this Decree-Law, as the case may be;

#### Article (9)

Without prejudice to the provisions established for the combating communicable diseases;

- 1. The patient may not be discharged from the health facility unless:
  - a. The patient's health condition permits such discharge according to the recognized medical principles;

<sup>\*</sup>In case of any misinterpretation, the Arabic version of this legislation prevails.

- b. The patient is transferred to another facility to complete his/ her medication, provided that requirements of safe health transfer are fulfilled and the patient is not affected during the transfer process;
- c. Upon the request of the patient if he/ she is legally competent, provided that the patient is informed of the consequences of discharge without medical advice and a written acknowledgment shall be taken him/ her for bearing his/ her own responsibility;
- d. A written approval from a physician in the facility, if the patient is partly or totally incompetent, under an acknowledgment made by his/ her guardian or custodian as to the responsibility for transfer of the patient to another health facility;
- e. No person may remain in the health facility with no medical excuse without his/ her satisfaction.

## Article (10)

- 1. Ending a patient's life is not permitted any reason whatsoever, even upon the request of the patient or his/ her guardian or custodian;
- 2. Cardiopulmonary Resuscitation (CPR) equipment may not be removed except in cases of cardiopulmonary arrest or if all brain functions completely stop as per the accurate medical criteria stipulated by virtue of a decision issued by the Minister and the physicians decide that such arrest is irreversible.

## Article (11)

Natural death is permitted to happen by non-application of CPR in the event that the patient is dying, in the following cases:

- 1. if the patient is suffering from an incurable disease;
- 2. All medication methods have already applied;
- 3. It is proven that medication is useless in the respective case;
- 4. The attending physician advices not to apply cardiopulmonary resuscitation;
- 5. Three consultant physicians at least decide that the patient's interest requires permitting natural death and non-application of cardiopulmonary resuscitation. In such a case, approval of the patient, his/her guardian or custodian is not required;
- 6. However, upon request of the patient, refraining from doing CPR is not permitted even if it is useless.

## Article (12)

- 1. Creating human cloning and conducting research, experiments or applications with the intention of creating human cloning is prohibited;
- 2. Conducting medical research or experiments on a person is only allowed after obtaining his/her approval and upon a written permission from the body determined by the executive regulations and according to the conditions stipulated by such regulations.

## Article (13)

Artificial organs may not be implanted in the body before ensuring their appropriateness and harmlessness to the Patient as well as preparing the body to receive them.

<sup>\*</sup>In case of any misinterpretation, the Arabic version of this legislation prevails.

## Article (14)

Using the assisted reproductive technology or planting an embryo in a woman's womb is only permitted for a married spouses and upon their written consent, provided that such procedure is done during their legitimate marriage.

## Article (15)

No action or intervention may be made for the purpose of regulating reproduction unless upon request or consent of the two spouses. Moreover, no action or intervention may be made for the purpose of sterilizing a woman unless it is based on opinion of a medical specialized committee comprising at least three physicians deciding that pregnancy or delivery will pose a definite risk to mother's life. This procedure shall only be done after obtaining the wife's written approval and informing the husband.

#### Article (16)

A physician may only perform abortion or prescribe any abortifacient to induce abortion in the following two cases:

- 1. If continuing pregnancy poses risk to the life of a pregnant woman, under the following conditions:
  - a. There is no other option to save the pregnant woman's life except abortion;
  - b. Abortion is performed by a specialist gynecologist/obstetrician and upon approval of the physician who is treating the medical case that is undergoing abortion;
  - c. A report shall be written by the concerned physicians indicating the difficulty of having normal delivery and the reason for abortion, signed by the pregnant woman and her husband or guardian, in case her consent cannot be obtained, to be as a proof of consent to undergo abortion. Each of the concerned parties shall keep a copy of the report, however their approval is not necessary to be obtained in cases of emergency that require immediate surgical intervention.
- 2. In case of fetal impairment, under the following conditions:
  - a. Abortion is performed upon a written request of the two spouses;
  - b. The period of pregnancy so far is less than one hundred and twenty days;
  - c. The impairment is proven by a report of a medical committee comprising consultants in gynecology, pediatrics and radiology;
  - d. The committee's report is based on medical examinations and use of scientifically acceptable technologies;
  - e. If it is serious and incurable fetal impairment; that if the fetus is born alive, its life would be terrible, causing pains for him/ her and his/ her family.

#### Article (17)

Medical liability shall not be established in any of the following cases:

- 1. If the harm is not caused by any of the reasons set out in Article (6) of this Decree-Law and its executive regulations;
- 2. If the harm is caused by the patient's own action or due to his/ her refusal to receive treatment or to follow the medical instructions issued by his/ her physicians or if the harm is caused by some external reason;

<sup>\*</sup>In case of any misinterpretation, the Arabic version of this legislation prevails.

- 3. If the physician applies a certain medical method of treatment in contradiction to other physicians of the same specialization as long as such method conforms to the generally acceptable medical principles;
- 4. In case the recognized or unexpected medical effects and complications resulting from the medical practice are not caused by medical error.

#### Chapter 2

# Medical Liability Committees and Supreme Committee of Medical Liability

#### Article (18)

A Medical Liability Committee shall be formed by virtue of a decision issued by the Minister or Head of the Health Authority, as the case may be, comprising physicians of various medical specializations. The executive regulations shall define the method of its formation and the rules and procedures of its functioning.

These committees shall be exclusively responsible for examining complaints submitted thereto by the Health Authority, public prosecution or the Court, and shall decide on the occurrence, non-occurrence and severity of the medical errors. In case of multiple liability, such Committee shall decide on the percentage of error committed by each party, the reasons for such error, the resulting damage, the casual relationship between the error and the damage, and percentage of damage caused to the affected organ, if any. The Committee may appoint experts and any other party it deems appropriate to perform its tasks.

Without prejudice to the provisions provided herein, the provisions set forth in the Federal Law No. (7) of 2012 mentioned-above shall apply to this Committee.

The compensation claims filed due to medical liability shall only be accepted after being referred and submitted to the Medical Liability Committees in accordance with the provisions of this Decree-Law.

#### Article (11)

All complaints on facts related to the medical error shall be submitted or referred to the Health Authority as per the controls set forth in the executive regulations.

The Health Authority shall refer all complaints to the said Medical Liability Committee, which in turn issues a reasoned report of its opinion regarding each and every case referred thereto based on its examination of the case, after reviewing the medical file and based on any other facts and information reached by the Committee upon its investigations, discussions, and technical study of the case. The Committee must submit its report to the Health Authority within thirty days from the date of referral. This term may be extended for one or more similar terms upon the approval of the Health Authority at the Committee's request.

## Article (20)

The complainant and defendant Profession Practitioner, as the case may be, may challenge the report of the Medical Liability Committee by submitting a complaint to the Competent Health Authority within thirty days from the date of being legally notified of the decision reached in the report as stipulated in the executive regulations.

<sup>\*</sup>In case of any misinterpretation, the Arabic version of this legislation prevails.

The Competent Health Authority shall attach the report and all related documents and papers to the complaint and refer them to the Supreme Committee of Medical Liability that is mentioned in Article (21) of this Decree-Law.

The Committee's report shall be final unless being challenged within the period set forth in Paragraph (1) of this Article. In such case, no challenge made against the medical report issued by the Committee may be accepted before any authority.

## Article (21)

A permanent medical technical committee called the "Supreme Committee for Medical Liability" shall be formed by virtue of a proposal of the Minister after coordination with the other health bodies. The decision shall determine the method of its formation, rules and procedures of its function, the term of its membership, and remunerations granted to its members.

This Committee shall exclusively examine the complaints submitted against the reports issued by the Medical Liability Committees set forth herein and shall submit a reasoned report of its opinion regarding every and each complaint in accordance with the procedures and rules set out in the abovementioned Cabinet's Resolution.

The Supreme Committee may uphold the report and refuse, amend or cancel the complaint, and its report shall be final. No challenge whatsoever made against the medical reports that are issued by this Committee may be accepted by any other authority.

# Chapter 3

# **Investigations with Profession Practitioners**

## Article (22)

The Undersecretary or the director in charge of other medical bodies, as the case may be, shall be informed of any investigation conducted with Profession Practitioners of any of such bodies regarding the facts related to their work, regardless of the body conducting such investigation, in accordance with the controls set out in the executive regulations.

#### Article (23)

The Health Authority may temporarily suspend the license until the Medical Liability Committee submits its report issued regarding the facts of the medical error. It may also take the same action when investigating any other violation of the provisions of this Decree-Law. The suspension shall be for a maximum period of thirty days that may be renewed similar periods.

#### Article (24)

The concerned parties may submit the medical error-related complaints to the public prosecution, and the latter shall refer such complaints directly to the Competent Health Authority to take actions as set forth in this Decree-Law.

In all cases, Profession Practitioners may only be investigated, arrested or taken into preventive custody due to a complaint filed against them after the final medical report is provided by the

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Health Authority, establishing the occurrence of the gross medical error committed by the defendant.

## Chapter 4

## **Civil Liability Insurance for Medical Errors**

#### Article (25)

A Profession Practitioner may only practice its profession in State after obtaining a civil liability insurance against medical errors from a licensed insurance company in the State.

A Health Facility hosting a visiting physician shall be liable for compensating the affected party for the physician's medical error, without prejudice to its right to recourse against the erring party.

The executive regulations of this Decree-Law shall stipulate the controls required for enforcing the provisions of this Article.

## Article (26)

Every owner of any health facility is obliged to insure his/ her Profession Practitioners against civil liability for medical errors and against any risks resulting from practicing the Profession or arising from it; and in both cases, the owner of the facility shall bear the full cost of the insurance premium.

# Article (27)

The insurance companies shall legally subrogate any insured health facilities and persons regarding their rights and obligations.

## Chapter 5

#### **Penalties**

#### Article (28)

- 1. Whoever violates any provision of Articles (12/1) and (14) of this Decree-Law shall be sentenced to not less than two-year imprisonment and not more than five-year imprisonment, and shall be fined not less than AED 200,000 (two hundred thousand dirhams) and not more than AED 500,000 (five hundred thousand dirhams), or to either of these two penalties;
- 2. Whoever violates the provision of Article 12, Clause 2 and Article 15 of this Decree-Law shall be sentenced to not less than six- month-imprisonment, and shall be fined not less than AED 100.000 (hundred thousand dirhams) and not more than AED 200.000 (two hundred thousand dirhams), or to either of these two penalties.

#### Article (29)

Whoever violates the provisions of Article (13) of this Decree-Law shall be sentenced to not less than three-month-imprisonment, and shall be fined not less than AED 50,000 (fifty thousand dirhams) and not more than AED 100,000 (hundred thousand dirhams), or to either of these two penalties.

<sup>\*</sup>In case of any misinterpretation, the Arabic version of this legislation prevails.

#### Article (30)

Without prejudice to the provisions of the Islamic Law, whoever violates the provisions of Article (10) of this Decree-Law shall be sentenced to not less than ten-year imprisonment.

## Article (31)

Whoever violates the provisions clause (9) of Article (5) of this Decree-Law shall be sentenced to not less than three-year imprisonment and not more than ten-year imprisonment.

## Article (32)

Whoever violates the provisions of clauses (2 and 10) of Article (5) of this Decree-Law shall be fined not less than AED 10,000 (ten thousand dirhams) and not more than AED 100,000 (hundred thousand dirhams)

## Article (33)

Subject to Article (16) of this Decree-Law, each and every physician intentionally carried out abortion, prescribed any abortifacient to induce abortion, used any method causing abortion, or directed a pregnant woman to any means leading to abortion, whether or not such abortion is upon her approval, shall be sentenced to not more than four-year imprisonment. However, if the abortion causes death of the victim, the physician shall be sentenced to not less than five-year imprisonment and not more than ten-year imprisonment.

#### Article (34)

The imprisonment of not more than one year and fine not more than AED 20000 (two hundred thousand dirhams), or either of these two penalties shall be imposed on whoever is proven to have committed a gross medical error as set out herein.

If the gross medical error causes a death of a person, the perpetrator shall be sentenced to not more than two-year imprisonment and shall be fined not more than five hundred thousand dirhams, or to either of these two penalties.

If the crime provided in the First Paragraph of this Article is committed under the impact of alcohol or any drugs, the perpetrator shall be sentenced to not more than two-year imprisonment and shall be fined not more than a million dirhams.

## Article (35)

The victim or his own attorney and his heirs or their own attorney may request the proof of reconciliation with the defendant before the Health Authority regarding the crimes punishable under Article (34) of this Decree-Law, where such Health Authority shall refer the proof of reconciliation to the public prosecution. The reconciliation proof may be requested before the public prosecution. In all cases, the complaint shall be suspended according to such reconciliation.

Reconciliation may be made at any times and in all cases while considering the claim, even after the judgment becomes final.

Such reconciliation shall result in closing the criminal case, and the public prosecution shall order to suspend execution of the penalty if reconciliation is reached while it is being executed.

<sup>\*</sup>In case of any misinterpretation, the Arabic version of this legislation prevails.

In all cases, reconciliation shall not prejudice the right of the aggrieved party to resort to the civil court to claim compensation.

Reconciliation shall not apply if the acts mentioned in Article (34) of this Decree-Law are recommitted.

## Article (36)

The penalties set forth in any other law shall not apply to the acts punishable under the provisions of this Decree-Law.

## Article (37)

Profession Practitioners shall comply with the physician's obligations, to the extent applicable to them.

The executive regulation of this Decree-Law provides for the disciplinary system applicable to the employees working in medical-related professions

## Article (38)

The disciplinary penalties prescribed in accordance with the applicable legislation shall apply to the violations for which no penalty is determined in this Decree-Law. The criminal liability under this Decree-Law shall not prejudice the disciplinary liability applicable on any of the violating Profession Practitioner.

# Article (39)

The provisions set out in the legislation in force and applicable to private health facilities with regard to the disciplinary penalties and any penalties related thereto shall apply to the private health facilities with regard to any violations committed by such facilities to the provisions of this Decree-Law and its executive regulations.

## Chapter 6

#### **Final Provisions**

## Article (40)

The employees appointed under a resolution of the Minister of Justice in agreement with the head of Competent Health Authority shall have the capacity of judicial officers with regard to reporting the violations of the provisions of this Decree-Law and the decisions promulgated in execution hereof.

## Article (41)

The Cabinet shall issue the executive regulation of the provisions of this Decree Law within six months as of the date of its publication.

#### Article (42)

Federal Law No. 10 of 2008 on Medical Liability shall be repealed and Cabinet Resolution No. 33 of 2009 on the Executive Regulations of Federal Law No. 10 of 2008 on Medical Liability, and the decisions issued thereunder shall remain in force until the executive regulations to this Decree-Law is issued in a manner does not conflict with its provisions.

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## Article (43)

Any provision conflicts or contradicts to the provisions of this Decree-Law shall be annulled.

Any provisions contrary or in conflict with the provisions of this Decree-Law shall be repealed.

# Article (44)

The Supreme Committee for Medical Liability set out in the said Federal Law No. (10) of 2008 shall continue examining the files referred thereto until the date of forming the Medical Liability Committee.

All incomplete files shall be referred to the concerned Medical Liability Committee once it is formed.

# Article (45)

This Decree-Law shall be published in the Official Gazette and shall come into force as of its publication date.

# Khalifa bin Zayed Al Nahyan

#### **President of the United Arab Emirates**

Issued by us in Abu Dhabi Presidential Palace:

Date: Shawwal 28, 1437 H

Corresponding to: August 2, 2016 G

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