REGISTRATION OF BIRTHS, DEATHS, MARRIAGES, ETC.

ADMINISTRATION

1960 No. 1603

The Registration (Births, Still-births and Deaths) (Prescription of Forms) Regulations, 1960

Made - - - - *5th September,* 1960
Coming into Operation *1st October,* 1960

The Registrar General, in exercise of the powers conferred on him by paragraph (*a*) of section 39 of the Births and Deaths Registration Act, 1953(**a**) and of all other powers enabling him in that behalf, with the approval of the Minister of Health, hereby makes the following regulations:—

Citation and commencement

1.—(1) These regulations may be cited as the Registration (Births, Still-births and Deaths) (Prescription of Forms) Regulations, 1960; and the Registration (Births, Still-Births and Deaths) (Prescription of Forms) Regulations, 1953(**b**), and these regulations may be cited together as the Registration (Births, Still-births and Deaths) (Prescription of Forms) Regulations, 1953 and 1960.

(2) These regulations shall come into operation on the first day of October, 1960.

Interpretation

2. The Interpretation Act, 1889(**c**), applies to the interpretation of these regulations as it applies to the interpretation of an Act of Parliament.

Amendment of the Registration (Births, Still-Births and Deaths) (Prescription of Forms) Regulations, 1953

3. For the second schedule to the Registration (Births, Still-Births and Deaths) (Prescription of Forms) Regulations, 1953 (which prescribes the form for the registration of a still-birth) there shall be substituted the first schedule to these regulations.

Certificate that child was not born alive

4. The form of a certificate of a registered medical practitioner or a certified midwife in pursuance of paragraph (*a*) of subsection (1) of section 11 of the Births and Deaths Registration Act, 1953, as amended by section 2 of the Population (Statistics) Act, 1960(**d**), stating that the child was not born alive and stating the cause of death and the estimated duration of the pregnancy, shall be the form set out in the second schedule to these regulations or a form substantially to the like effect.

(**a**) 1 & 2 Eliz. 2. c. 20.
(**b**) S.I. 1953/1347 (1953 II, p. 1739).
(**c**) 52 & 53 Vict. c. 63.
(**d**) 8 & 9 Eliz. 2. c. 32.

FIRST SCHEDULE

FORM OF REGISTRATION OF STILL-BIRTH
[Births and Deaths Registration Act, 1953, section 5]

Columns :—1		2	3	4	5	6	7	8	9
No.	When and where born	Sex	Name and surname of father	Name, surname and maiden surname of mother	Occupation of father	Signature, description and residence of informant	When registered	Cause of death and evidence that child was still-born	Signature of registrar

SECOND SCHEDULE

FORM OF CERTIFICATE OF STILL-BIRTH

(Births and Deaths Registration Act, 1953, Section 11 (1) (a), as amended by the Population (Statistics) Act, 1960, Section 2 (1))

*I was present at the still-birth of a $\frac{\text{*male}}{\text{*female}}$ child born

*I have examined the body of a $\frac{\text{*male}}{\text{*female}}$ child which I am informed and believe was born

on the.....day of.....19..... to.....
(NAME OF MOTHER)

at.....
(PLACE OF BIRTH)

I hereby certify that

(i) the child was not born alive, and

(ii) to the best of my knowledge and belief the cause of death and the estimated duration of pregnancy of the mother were as stated below.

CAUSE OF DEATH		Estimated duration of pregnancy
I	I	
DIRECT CAUSE State foetal or maternal condition directly causing death	(*a*)	
ANTECEDENT CAUSES State foetal and/or maternal conditions, if any, giving rise to the above cause (*a*) stating the underlying cause last	due to (*b*)..... due to (*c*).....	
II	II	..... Weeks
OTHER SIGNIFICANT CONDITIONS of foetus or mother which may have contributed to but, in so far as is known, were not related to direct cause of death	.....	

†
1. The certified cause of death has been confirmed by post-mortem.
2. Post-mortem information may be available later.
3. Post-mortem not being held.

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

Qualification as registered by General Medical Council, or Registered No. as Certified Midwife .....

Residence.....

* Strike out the words which do not apply.

† Ring appropriate digit.

Given under my hand this fifth day of September, nineteen hundred and sixty.

E. M. T. Firth,
Registrar General.

I approve.

J. Enoch Powell,
Minister of Health.

30th August, 1960.

EXPLANATORY NOTE

(This note is not part of the Regulations, but is intended to indicate their general purport.)

These regulations prescribe the form of certificate to be used by medical practitioners and midwives in certifying causes of death of still-born children as required by section 2 of the Population (Statistics) Act, 1960, and amend the form of entry to be made in the registers of still-births to provide for recording the cause of death.