

FORM 2

CONFIDENTIAL

*Not to be destroyed within five years of the date of operation*

OFFENCES AGAINST THE PERSON ORDINANCE

(Chapter 212)

CERTIFICATE TO BE COMPLETED IN RELATION TO THE TERMINATION OF A  
PREGNANCY IN EMERGENCY UNDER SECTION 47A(4) OF THE ORDINANCE

I, .....  
*(Name and qualifications of practitioner)*

of .....  
*(Full address of practitioner)*

.....

and I, .....  
*(Name and qualifications of practitioner)*

of .....  
*(Full address of practitioner)*

.....

hereby certify that we ..... of the opinion, formed in good faith, that it ..... immediately necessary to

terminate the pregnancy of .....  
*(Full name of pregnant woman)*

of .....  
*(Usual place of residence of pregnant woman)*

.....

in order —

1. to save the life of the pregnant woman; or
2. to prevent grave permanent injury to the physical or mental health of the pregnant woman.

(Choose appropriate  
box)

This certificate of opinion is given —

- A.     before the commencement of the treatment for the termination of the pregnancy to which it relates;     (Choose appropriate  
or, if that is not reasonably practicable, then     box)
- B.     not later than 24 hours after such termination.

*Signed* .....     *Date* .....

*Signed* .....     *Date* .....