

FUNDAMENTAL LAW ON HEALTH SERVICES

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Purpose

Article 1 – The purpose of this Law is to regulate the fundamental principles relating to health services.

Scope

Article 2 – This Law covers, excluding the Ministry of National Defence, all public institutions and organizations, as well as private legal entities and natural persons.

Fundamental Principles

Article 3 – The fundamental principles relating to health services are as follows: a) Health institutions and organizations shall be planned, coordinated, financially supported and developed by the Ministry of Health and Social Assistance, in such a manner as to provide equal, quality and efficient services throughout the country, with the opinion of other relevant ministries also being obtained. b) With priority being given to preventive health services, the provision of quality services and efficiency shall be taken as the basis in the establishment and operation of all public and private health institutions and organizations, without leading to waste of resources or idle capacity, and by purchasing services when necessary. The Ministry of Health and Social Assistance, with the consent of the relevant Ministry, assigns preventive health service duties to all public and private health institutions and organizations, and supervises all health services of these institutions and organizations. c) The balanced distribution and expansion of all health institutions and organizations and health personnel throughout the country is essential. The establishment and operation of health institutions and organizations shall be regulated by the Ministry of Health and Social Assistance within this principle. This regulation shall be made upon obtaining the opinion of the relevant Ministry. Where deemed necessary, all tariff fees of private health organizations shall be approved by the Ministry of Health and Social Assistance. The prices of all services provided in health institutions or health enterprises belonging to public institutions and organizations shall be determined and announced by the Ministry of Health and Social Assistance. d) (Repealed: 31/5/2006-5510/Article 106.) e) Through the training, supervision, evaluation and auto-control system to be established, it shall be ensured that health institutions provide services within the determined standards and principles. f) (Amended: 24/3/2016-6698/Article 30.) In order to enable the follow-up of everyone's health status and to conduct health services more effectively and rapidly, the Ministry of Health and its affiliated organizations shall establish the necessary registration and notification system. This system may also be established electronically in accordance with e-Government applications. For this purpose, an informatics system covering the affiliated organizations of the Ministry of Health may be established nationwide. g) The Ministry of Health and Social Assistance shall carry out employment planning in order to ensure the balanced distribution of health and auxiliary health personnel throughout the country, and shall ensure coordination with the Council of Higher Education for pre-service training programs for the purpose of training qualified health personnel in line with the country's needs. It shall provide in-service training to health and auxiliary health personnel practising their professions freely or in public institutions. For this purpose, it shall also make use of the facilities of universities, professional organizations with the status of public institutions, and public institutions and organizations. The manner and durations of the in-service training program shall be determined in a regulation to be issued by the Ministry of Health and Social Assistance. h) (Annulled: by the Constitutional Court decision dated 19.4.1988 and numbered E. 1987/16, K. 1988/8.) i) For the purpose of bringing health services to the desired level throughout the country; coordination and cooperation shall be carried out among public and private health institutions and professional organizations with the status of public institutions, from the ministerial level down to the most remote service unit. Health institutions and organizations are obliged to comply with the principles determined on matters such as geographical and functional service areas, the services they will provide, management, and service relations and connections, and to carry out the duties assigned to them. The introduction and promotion of contemporary medical knowledge and technology into the country shall be ensured. j) The training and follow-up of citizens on matters such as protection from diseases, healthy environment, nutrition, maternal and child health and family planning and similar matters shall be carried out under the responsibility of all public organizations, in cooperation with professional organizations with the status of public institutions, and private and voluntary organizations. k) The promotion and provision of the production and quality of medicinal products, vaccines, sera and similar biological substances used in preventive, diagnostic, therapeutic and rehabilitative services is essential, and the Ministry of Health and

Social Assistance is authorized to control and supervise the import, export, production, distribution and consumption of all kinds of preparations, compositions, substances, materials, pharmacopoeial products, cosmetics and the raw and auxiliary substances used in their production, as well as substances, medicinal products, vaccines, sera and similar biological substances and other compositions that cause or are likely to cause physical and psychological dependence through misuse, and to have quality controls carried out for a fee both domestically and abroad, and to carry out licensing, authorization and pricing procedures in accordance with special legislation. The production, import and sale of medicinal products and compositions for which authorization or licence has not been obtained in accordance with special legislation, as well as the use on humans of medicinal products and compositions, even if licensed or authorized, for scientific research purposes without the consent of the Ministry of Health and Social Assistance and the person concerned, are prohibited. l) (Added: 30/5/1997 – Decree-Law – 572/Article 24.) For the prevention of the birth of disabled children, medical and educational work shall be carried out before pregnancy and during the pregnancy period. Measures shall be taken to identify those at risk by subjecting newborn infants to the necessary tests for metabolic diseases. 1 m) (Added: 1/7/2005-5378/Article 34.) The Ministry of Health is authorized to grant opening authorization to organizations to be established by public institutions and organizations, and natural and legal persons, for the purpose of producing auxiliary tools and equipment used in rehabilitative medical services. The principles relating to the granting of opening authorization to these institutions and organizations, production and personnel standards, operation and supervision, and the status of previously established institutions and organizations shall be regulated by a regulation to be issued by the Ministry of Health.

Organization

Article 4 – The Ministry of Health and Social Assistance shall establish, or have established, an organization throughout the country in order to carry out the services and principles listed in Article 3 within this system. (Second paragraph annulled: by the Constitutional Court decision dated 19.4.1988 and numbered E. 1987/16, K. 1988/8.)

Health Enterprise

Article 5 – (Repealed: 11/10/2011-Decree-Law-663/Article 58.)

Other Personnel Related to Health Enterprises

Article 6 – (Repealed: 11/10/2011-Decree-Law-663/Article 58.)

Contracted Personnel

Article 7 – (Repealed: 11/10/2011-Decree-Law-663/Article 58.)

Collection of Treatment Expenses

Article 8 – (Repealed: 11/10/2011-Decree-Law-663/Article 58.)

Regulations

Article 9 – a) (Repealed: 11/10/2011-Decree Law No. 663/Article 58) b) The purchase of services and medicines, the leasing and transfer of vehicles, equipment and materials belonging to relevant institutions and organisations, the leasing of immovable properties; (...) 2 the determination of the standards for medical instruments, equipment and supplies and the criteria for the preparation of technical specifications in the purchase of medical instruments and equipment; jointly by the Ministry of Finance and Customs, the relevant Ministries, and the Ministry of Health and Social Assistance, c) The establishment of the facility, service, and personnel criteria of all public and private health institutions, the classification of health institutions and organisations and the changing of their classes,

1 By Article 1 of Law No. 6462 dated 25/4/2013, the term "Disabled" in this paragraph has been amended to read "Person with Disabilities". 2 The phrase in this paragraph "the principles and procedures of premium distribution and the procedures and principles regarding the transfer of personnel." was annulled by the Constitutional Court's Decision No. E.1987/16, K.1988/8 dated 19/4/1988.

the organisation of health institutions in accordance with their purpose, the creation of a health service chain, the procedures and principles of in-service training, and the determination and supervision of the coordinated operation and service standards of health institutions and organisations, as well as other matters related to this Law, shall be determined by the Ministry of Health and Social Assistance through regulations to be issued.

Appointment of certain health personnel Additional Article 1- (Added: 10/7/2003-Law No. 4924/Article 10; Amended: 11/10/2011-Decree Law No. 663/Article 58) Open appointments to the specialist physician, specialist pursuant to medical specialisation legislation, physician, dentist, and pharmacist positions and cadres of public institutions and organisations shall be carried out, without obtaining an open appointment permit, after completion of the procedures envisaged in the legislation, and their placement shall be carried out by the Ministry of Health without examination and by drawing of lots. (Amended sentence: 16/6/2022-Law No. 7411/Article 8) The procedures and principles regarding the drawing of lots and the procedures and principles regarding their appointments within the Ministry of Health shall be determined by regulations to be issued by the Ministry of Health. 3

(Amended second paragraph: 16/6/2022-Law No. 7411/Article 8) Specialisation training in medicine and dentistry shall be provided by professors, associate professors, doctoral faculty members, instructors, and chief residents who are specialists in the relevant field pursuant to medical specialisation legislation. In order for doctoral faculty members and chief residents to provide medical specialisation training, they must have actually worked in their field of specialisation for at least one year. In training and research hospitals, one of the instructors shall be assigned by the hospital administrator as the training officer of the relevant unit for a one-year period, while its administrative officer shall be selected from among the specialists in the relevant field for the same period. The administrative officer duty may also be conferred upon the training officer of the unit. Appointments to the positions of instructor, chief resident, and assistant shall be made within the framework of the relevant legislation, without obtaining an open appointment permit. Appointments to chief resident positions shall be made through a professional examination to be conducted or commissioned by the Agency, from among physicians, dentists, and specialists pursuant to medical specialisation legislation who are specialists in the relevant field and possess professional experience, scientific publications, and foreign language proficiency. The appointment of professors or associate professors as instructors to training and research hospitals shall be made upon a notice to be issued by the Agency, based on the evaluation of the scientific studies and educational qualifications of the applicants. Three professors in the relevant fields of specialisation shall be designated to evaluate the scientific studies and educational qualifications of the candidates. These professors shall separately submit their opinions on the candidates, making a priority ranking, and the assignment shall be made in accordance with these opinions. The criteria for appointment and qualification as chief resident, as well as the procedures and principles regarding the examinations, shall be regulated by the Ministry of Health by regulation. (Added paragraph: 4/7/2012-Law No. 6354/Article 7) Professors and associate professors who do not hold positions or cadres in higher education institutions, including those belonging to public institutions and organisations and foundations; may be employed as contracted instructors in training and research hospitals, subject to the approval of the Ministry of Finance, by decision of the Ministry of Health, in order to engage in theoretical and practical education and training, as well as research activities in required fields, and to carry out the work required by these activities. Contracts may be concluded for up to one year, provided that the monthly working hours do not exceed 80. Contracted instructors may be paid an hourly contract

fee of up to ten times the additional course fee determined by title pursuant to the fourth paragraph of Article 11 of the Higher Education Personnel Law No. 2914 dated 11/10/1983 for faculty members holding the same title positions in higher education institutions, depending on the nature of the activity they will undertake. For activities of a special nature, the hourly contract fee may be increased by up to one-fold by decision of the Ministry of Health, upon the favourable opinion of the Ministry of Finance. The annual total amount of the contract fee to be paid to contracted instructors within this scope may under no circumstances exceed one percent of the total personnel expenses realised by the relevant training and research hospital in the previous year. Upon the proposal of the relevant training and research hospital and the favourable opinion of the Ministry of Health, this rate may be increased by up to one-fold by the Ministry of Finance. The increased amount shall be paid from the revolving fund budget. No payment may be made, under any designation whatsoever, to contracted instructors employed within this scope other than the payments to be made pursuant to this Article, and no administrative duty may be assigned to these persons. The procedures and principles regarding the employment of contracted instructors pursuant to this Article, the amount of the hourly contract fees to be paid to them depending on the duties they perform, and other matters shall be jointly determined by the Ministry of Finance and the Ministry of Health.

Additional Article 2- (Added: 14/7/2004-Law No. 5220/Article 1) The Minister of Finance is authorised to cancel the allocations, in agreement with the Ministry of Health, of immovable properties under Treasury ownership allocated to the Ministry of Health and of other immovable properties in the use of the Ministry of Health that are deemed necessary, after their ownership has been transferred free of charge to the Treasury, and to sell them without being subject to Article 24 of the Public Accounting Law No. 1050. 4 Sale prices shall be recorded as revenue in the budget. The necessary appropriations shall be envisaged in the budget of the Ministry of Health to be used for the construction, repair, and equipping of health institutions and organisations and for the purchase of medical instruments and equipment. Immovable properties of persons who make conditional donations for the use of the Ministry shall be returned to such persons in the event that they are not used for the intended purpose.

Additional Article 3 – (Added: 21/6/2005 – Law No. 5371/Article 1) Those who complete their education domestically or abroad pursuant to the relevant legislation as physicians and specialist physicians, and those who obtain the title of specialist physician upon completing sub-speciality training, provided that it is separately for each of their educations, in the Socio-Economic Development Ranking of Districts prepared by the Undersecretariat of the State Planning Organisation; 300 in settlements affiliated with the centres of sixth-group districts, 350 in settlements affiliated with the centres of fifth-group districts and in the centres of sixth-group districts, 400 in settlements affiliated with the centres of fourth-group districts and in the centres of fifth-group districts, 450 in settlements affiliated with the centres of third-group districts and in the centres of fourth-group districts,

500 days in settlements affiliated with district centres of the second group and in district centres of the third group, 550 days in settlements affiliated with district centres of the first group and in district centres of the second group, 600 days in district centres of the first group, They are obliged to perform State service as civil servants for days, in the Ministry of Health or in the Ministry of National Defence and other organisations deemed appropriate by the Ministry of Health. (Additional sentence: 16/6/2022-7411/Article 9) Personnel who are performing their State service obligation may work in the province where they are located as contracted health personnel subject to Law No. 4924 dated 10/7/2003 on the Employment of Contracted Health Personnel in Places Where Difficulty is Experienced in Recruiting Personnel and on the Amendment of Certain Laws and Decree Laws. These periods may be shortened by Presidential decree according to need. In the calculation of the periods, actual service shall be the basis, and weekends and official holidays shall be counted as actual service. Days spent on annual, excuse and sick leave, however, shall be added to the obligation period. 567

Those who complete their education (...) 8 in medicine, medical specialisation or subspecialty training in the Turkish Armed Forces are not subject to the State service obligation. However, the provisions of this Article shall also apply to those who leave the Turkish Armed Forces before serving two years. Except for the Turkish Armed Forces, the State service obligation to be performed by personnel studying on behalf of any public institution or organisation pursuant to the provisions of this Law shall be deducted from the compulsory service period. (Additional paragraph: 31/10/2016-Decree Law 678/Article 25; Enacted as is: 1/2/2018-7071/Article 25) Those who perform their military service as reserve officers in places jointly determined by the Ministry of Health and the Ministry of National Defence shall be deemed to have completed their State service obligation.

Additional Article 4 – (Added: 21/6/2005 – 5371/Article 1)

5 By Article 78 of Decree Law No. 680 dated 2/1/2017, the phrase "Ministry of National Defence and" was inserted after the phrase "deemed appropriate by the Ministry of Health" in this paragraph; this provision was subsequently enacted as is and became law by Article 76 of Law No. 7072 dated 1/2/2018. 6 By Article 106 of Decree Law No. 700 dated 2/7/2018, the phrase "upon the proposal of the Ministry of Health the Council of Ministers" in this paragraph was amended to "the President". 7 By Article 9 of Law No. 7411 dated 16/6/2022, the phrase "or, upon request of the persons concerned, as contracted health personnel subject to Law No. 4924 dated 10.7.2003" was removed from the text of the Article. 8 By the Decision of the Constitutional Court dated 13/3/2006 and numbered E: 2006/21, K: 2006/38; the phrase "... or by studying abroad on their own behalf and account without receiving student foreign currency from the State ..." in the first sentence of the last paragraph of Additional Article 3, and the phrase "... or completing the remaining obligation as a specialist physician while being a physician ..." in the third sentence of the first paragraph of Additional Article 6 were annulled.

The deanships of faculties of medicine and the chief physician offices of training hospitals are obliged to report the names and addresses of physicians and specialist physicians who graduate or complete their specialisation and subspecialty training to the Ministry of Health within fifteen days. Following the registration procedures of diplomas and specialisation certificates by the Ministry of Health, within at the latest two months, the personnel subject to the State service obligation, their places of assignment and the process related to the appointment procedure shall be announced on the website. This announcement shall serve in lieu of notification. Except for appointments to be made on grounds of spousal status and health excuses, the places of duty of personnel shall be determined by drawing lots, with the right of preference being granted. (Additional sentence: 2/1/2014-6514/Article 43) However, those who perform their State service obligation in settlements affiliated with district centres of the fifth and sixth groups and in provincial centres and settlements affiliated with provincial centres to be determined by the President shall not be appointed to these places against their will when they again become subject to the State service obligation. Following the announcement of the assignment results on the website, where necessary, the personnel concerned shall be given twenty days to complete their documents. The State service obligation period shall commence upon the personnel's taking up duty at the place to which they are appointed. (Fourth and fifth sentences annulled: by the Decision of the Constitutional Court dated 8/12/2011 and numbered E.: 2010/113, K.: 2011/164.) (...) 9

Personnel within the scope of the State service obligation may not practise their profession before completing this duty.

Additional Article 5 – (Added: 21/6/2005 – 5371/Article 1) (Amended paragraph: 14/7/2023-7456/Article 27) Physicians may take the assistantship examinations for specialisation training and commence specialisation training before starting or completing their State service obligation. However, in order to commence training in a subspecialty or in more than one speciality branch, it is required that at least half of the State service obligation period be completed. Periods spent in assistantship, specialisation and subspecialty training, as well as in

military service, shall not be counted towards the State service obligation. (Additional paragraph: 28/3/2007 – 5614/Article 1) Personnel who are performing their State service obligation may work in the province where they are located as contracted family physicians or, in case of need, may be assigned for family medicine practices. The periods spent by this personnel in family medicine shall be counted towards the State service obligation. In places where family medicine practices have been introduced, the place of duty within the province of personnel subject to the State service obligation who work in primary health care institutions may be changed for reasons arising from this practice.

Additional Article 6 – (Added: 21/6/2005 – 5371/Article 1) Personnel who are performing their State service obligation may not be appointed to another place except on grounds of excuse and necessity. However, in extraordinary situations such as earthquakes, they may be assigned ex officio, temporarily for a period not exceeding one month, or within the scope of the operational, epidemic control and similar needs of the Turkish Armed Forces, the Gendarmerie General Command and the Coast Guard Command, domestically or abroad for up to two months. (Additional sentence: 18/2/2021-7281/Article 30) In extraordinary situations, this period may be extended by the Ministry of

Health by up to threefold. For personnel appointed to another place for reasons such as excuse (...) 8 and situations of necessity, their remaining obligation periods shall be determined according to the ratio of the service periods at the former and new places of duty. 10 (Additional paragraph: 18/2/2021-7281/Article 30) Those appointed to the cadres of the Ministry of National Defence or the Ministry of Interior may be assigned, without being subject to a time limitation, to domestic or international training, shooting, sports, exercises and operational activities to be conducted outside the place designated by their unit for the provision of health services. For personnel serving in places determined by the Ministry of National Defence, the Ministry of Interior, the General Staff or the force commands, the Gendarmerie General Command and the Coast Guard Command, where units are deployed within the scope of domestic or international operations conducted for 30 consecutive days or more, where they prepare for the operation, where they commence the execution of the operation and actually conduct the operation, where military elements necessary for combat service support of the operation are deployed, or where combat service support of the operation is provided, one and a half (1.5) times the actual periods spent in such places shall be taken in the calculation of the State service obligation period. Personnel who fulfil their State service obligations as contracted health personnel and whose contracts are terminated shall complete the remaining part of their obligations as civil servants. Appointments to be made within the scope of the State service obligation shall not be included in the number of open appointments. Those who complete their State service obligation as civil servants or contracted health personnel may, upon request, without being subject to the limitations concerning the periods, in accordance with the relevant legislation

they shall be entitled to transfer within or between institutions or to be appointed through open recruitment in accordance with this Law. Personnel obligated to perform public service shall be subject, outside the provisions of this Law, to the general provisions and the relevant legislation of the Institution.

Provisional Article 7- (Added: 3/7/2005-Law No. 5396/Article 1; Repealed: 21/2/2013-Law No. 6428/Article 12) 11

Health services provided by local administrations and unions

Provisional Article 8 – (Added: 1/7/2006-Law No. 5538/Article 11) Health services provided by, or by contracted personnel employed pursuant to the third paragraph of Article 36 of the Provincial Administration Law No. 5302 dated 22/2/2005 and in accordance with the civil servant staffing norm, by local administration unions, municipalities and provincial administrations, where such services are delivered through civil servant positions established directly by law or by authorities or organs empowered by law to establish positions in the name of these institutions, shall be deemed to fall within the scope of health services provided by official health institutions.

Provisional Article 9 – (Added: 21/1/2010-Law No. 5947/Article 11; Amended: 11/10/2011-Decree-Law No. 663/Article 58; Amended: 4/7/2012-Law No. 6354/Article 8) 12

(Amended first sentence: 20/8/2016-Law No. 6745/Article 39) Health facilities affiliated with the Public Hospitals Institution of Türkiye and university institutions providing undergraduate and specialty training in the fields of medicine and dentistry may jointly use human resources, financial resources, physical infrastructure, buildings, medical devices and other resources for education, research and healthcare delivery, in accordance with the following procedures and principles. However, in provinces other than metropolitan municipalities, education and research services may be provided, as from the date of entry into force of this Article, by only one of either a Ministry of Health education and research hospital or a university health practice and research centre. In these provinces, the Ministry and its affiliated institutions and the universities shall carry out joint use and cooperation for undergraduate medical education and/or medical specialty training. 13

For health facilities to be jointly used, a joint use protocol shall be concluded between the President of the Public Hospitals Institution of Türkiye and the university rector, subject to the favourable opinion of the Ministry and the Council of Higher Education. 13

(Added paragraph: 15/11/2018-Law No. 7151/Article 20) (Amended paragraph: 21/2/2024-Law No. 7496/Article 18) Protocols may also be concluded with more than one university for health facilities subject to joint use, within the framework of the principles set forth in this Article. With the hospital under joint use, separate two-year contracts may be signed for the conduct of education and research activities and for the delivery of health services, subject to the opinion of the dean of the relevant faculty regarding the faculty members of the university's faculty of medicine and dentistry. In addition, contracts may also be concluded with personnel other than faculty members holding positions in the faculties of medicine and dentistry, and with university personnel outside these faculties, subject to the opinion of the dean of the relevant faculty. The conclusion of a service contract is a prerequisite for additional payments to be made to faculty members by the Ministry. These contracts shall specify the nature of the services to be provided, performance targets and duration. Contracts concluded with faculty members shall additionally set out the authorities and responsibilities concerning undergraduate and postgraduate education and scientific studies. Where the faculty member: a) Is subsequently found not to fulfil any of the requirements for acquiring this status, or loses any of these requirements during the term of office, b) Is dismissed from public office or from the university teaching profession, or withdraws, is deemed to have withdrawn from, or retires from a position in a higher education institution, c) Is absent from duty for more than sixty days due to reasons such as police custody, detention or conviction, ç) Is warned in writing three times within one contract period by the hospital coordination board, subject to the taking of his/her defence, due to failure to fulfil the contractual obligations without a justified reason, the contract shall be terminated. The duty of faculty members whose contracts are terminated or not renewed at the health facility shall cease. Where the contract is terminated or its term expires in circumstances other than those set forth in subparagraphs (a) and (b), the faculty member may conclude a new contract with other health facilities with which the university has signed a joint use protocol with the Ministry. (Added paragraph: 15/11/2018-Law No. 7151/Article 20) The practices of the universities' health practice and research centres and oral and dental health practice and research centres may be carried out

in hospitals and health facilities operated by the universities, or in hospitals or health facilities with which the universities have signed joint use protocols. In health facilities under joint use, medical specialty and undergraduate training, including the training of Ministry of Health specialty students, shall be conducted under the authority and responsibility of the dean of the relevant faculty in accordance with the relevant legislation. (Added sentences: 20/8/2016-Law No. 6745/Article 39) The dean, having sought the opinion of the hospital chief physician, shall appoint as education officer one faculty member holding the title of professor, or, if none, associate professor, or, if no associate professor either, one assistant professor or one instructor. The chief physician shall at the same time be deemed the director of the health practice and research centre on behalf of the university. Health facilities brought under joint use shall be operated in accordance with the legislation to which the Ministry is subject, and the facility shall be managed by the chief physician appointed by the Ministry, subject to the opinion of the university. Where the health facility brought under joint use falls within the scope of a public hospitals union, administrative appointments for that facility shall be made within the framework of the public hospitals union legislation. (Added sentence: 2/1/2014-Law No. 6514/Article 44) No additional fee shall be charged for post-working-hours services at health facilities under joint use pursuant to the third paragraph of Article 73 of the Social Insurance and General Health Insurance Law No. 5510 dated 31/5/2006. (Added paragraph: 20/8/2016-Law No. 6745/Article 39) The revolving fund accounts of health facilities brought under joint use shall be consolidated, provided that this is limited solely to the units under joint use and is effective for transactions carried out after the commencement of joint use. However, where the debt relates to an existing immovable property, debts incurred prior to the date of signature of the protocol shall be covered by the revolving fund budget of the health facility. (Added paragraph: 20/8/2016-Law No. 6745/Article 39) All personnel, including faculty members on duty at health facilities under joint use and in the relevant units, shall be obliged to provide the medical and scientific consultancy, on-call duty, consultation and other health services required, and to respond to invitations extended to them in this context. Personnel performing on-call duty in this manner

to faculty members, an on-call duty fee shall also be paid in accordance with Article 33 (Additional) of the Civil Servants Law No. 657 dated 14/7/1965, on the basis of the coefficient figure determined for instructors.

(Amended paragraph: 2/1/2014-6514/44 art.) An additional payment shall be made to faculty members, lecturers, and research assistants working in the basic medical sciences of the relevant faculty, who are enumerated in subparagraph (1) of paragraph (c) of Article 58 of Law No. 2547, together with personnel actually working in health facilities in joint use, in accordance with the additional payment legislation to which the Ministry is subject, based on the additional payment basis and ceiling additional payment rates provided for in Article 58 of the Higher Education Law No. 2547 dated 4/11/1981 for university personnel, and the additional payment basis and ceiling additional payment rates provided for in Article 5 of the Law on Revolving Funds to be Granted to Health Institutions Affiliated with the Ministry of Health and Convalescence (Rehabilitation) Facilities No. 209 dated 4/1/1961 for personnel of the Ministry and its affiliated organizations. The additional payment to be made to the university rector, vice rectors, secretary general, the dean of the relevant faculty, and vice deans as the managerial share under Article 58 of Law No. 2547 shall be made from the revolving fund account of the health facility in joint use.

The disciplinary proceedings and all personnel affairs of the personnel working in a health facility in joint use shall be carried out in accordance with the relevant legislation of the institution where their positions are located. (Additional sentence: 11/11/2020-7256/28 art.) 14 (Restructured sentence: 21/2/2024-7496/18 art.) However, for personnel working in jointly used training and research hospitals, limited to the educational and healthcare services they are obliged to perform under their contracts, the acts requiring disciplinary sanctions under the relevant legislation and the disciplinary sanctions corresponding to such acts shall be determined by the hospital coordination board; this decision shall be notified to the relevant authority for execution.

For the appointment of personnel working in institutions and organizations in joint use to professor and associate professor positions by the university, instructor positions belonging to the Ministry and its affiliated organizations may also be used.

(Amended paragraph: 20/8/2016-6745/39 art.) Cooperation may be established between the health facilities of the Ministry of Health and its affiliated organizations and the units of universities providing education in health sciences, with separate revolving funds, in the provision of healthcare services, education, research, public health promotion, and other fields of activity of the institutions. Cooperation protocols shall be signed between the governor and the rector upon the proposal of the university and, as relevant, the units of the Ministry or its affiliated organizations, with the favorable opinion of the Ministry and the Council of Higher Education. The members of the teaching staff working in the units of the university operating in the field of health sciences who will work within the scope of cooperation in the health facilities of the Ministry and its affiliated organizations, or the personnel of the Ministry and its affiliated organizations who will work at the university, shall be determined by mutual agreement through a list annexed to the protocol.

(Amended paragraph: 20/8/2016-6745/39 art.) The procedures and principles regarding joint use and cooperation, as well as other matters concerning additional payments to be made to personnel from revolving fund revenues, shall be determined by a regulation issued by the Ministry of Health, with the favorable opinion of the Ministry of Finance and the Council of Higher Education, within the framework of the relevant legislative provisions.

14 This sentence was annulled by the Constitutional Court's Decision No. E.:2021/5; K.:2023/109 dated 1/6/2023.

Additional Article 10 – (Added: 6/4/2011-6225/8 art.) (Amended: 21/2/2024-7496/19 art.) In addition to obtaining permission from the Ministry of Health for the use of medicinal products for human use and medical devices on humans for the purpose of scientific research, even if a treatment method or a license or authorization has been obtained, the following are required: a) The research must first have been conducted in a non-human experimental setting or on a sufficient number of animals, b) The scientific data obtained as a result of experiments conducted in a non-human experimental setting or on animals must necessitate that the research also be conducted on humans in order to achieve the intended objective, c) The research must not have a foreseeable harmful and permanent effect on human health, ç) During the research, methods causing pain to the person to a degree incompatible with human dignity must not be applied, d) The intended purpose of the research must outweigh the burden it imposes on the person and the risk to the person's health, e) The person to be subjected to the research must give written consent based on adequate information about the nature and consequences of the research, and this consent must not be contingent upon the provision of any benefit, f) The relevant ethics committee must deem the research appropriate. Studies conducted with medicinal products for human use used in compliance with the terms of the license or authorization, where the use of such products is dependent on the research protocol; studies conducted with medical devices after placing on the market, provided that they are used in accordance with the intended purpose of use specified in the technical documentation; research on traditional and complementary medicine practices; and studies on tissue and cells of human or animal origin or products derived therefrom, are excluded. Studies on treatment methods other than these shall be initiated after the approval of the relevant ethics committee has been obtained and notification has been made to the Ministry of Health. In the event that the study subject to this notification is not in compliance with scientific principles, legislative provisions, or ethical principles, it shall be decided to temporarily suspend the study, and the study shall not be allowed to continue until the non-compliance is remedied. This provision shall also apply to studies on the intended use of foods for special medical purposes and to studies on the use of health claims on foods and food supplements.

Studies on cosmetic products to be conducted on humans shall be initiated after the approval of the ethics committee designated by the Ministry of Health and upon obtaining permission from the Ministry of Health.

Performance evaluation studies involving in vitro diagnostic medical devices on biological materials obtained from humans: a) Performance evaluation studies whose sole purpose is performance assessment and where sample collection is performed through surgical procedures, b) Performance evaluation studies involving additional invasive procedures or other risks for volunteers, c) Performance evaluation studies where test results may influence patient management decisions or may be used to guide treatment, shall be initiated after the approval of the ethics committee designated by the Ministry of Health and upon obtaining permission from the Ministry of Health. However, performance evaluation studies on diagnostic support devices conducted using only residual samples, as well as post-market performance follow-up studies conducted with in vitro diagnostic medical devices after placing on the market, provided that they are used in accordance with the intended purpose of use specified in the technical documentation, and where volunteers are subjected to additional invasive or burdensome procedures, shall be initiated after the approval of the relevant ethics committee has been obtained and notification has been made to the Ministry of Health. In the event that the study subject to this notification is not in compliance with scientific principles, legislative provisions, or ethical principles, it shall be decided to temporarily suspend the research, and the research shall not be allowed to continue until the non-compliance is remedied.

The research referred to shall be conducted in health institutions and organizations, and in research and development centers, that possess personnel, equipment, and laboratory facilities suitable for ensuring the safety of the persons on whom the research is to be conducted, for the sound conduct of the research, for its follow-up, and, where necessary, for emergency intervention, and that are appropriate to the nature of the research. The types of research that may be conducted in such places shall be determined by the Ministry of Health.

r. In these trials, the protection of the rights and health of the individual shall take precedence over all other considerations. The volunteer on whom research is to be conducted or is being conducted may withdraw his/her consent at any stage of the trial and without any conditions. Depending on the type of trial, it is mandatory to take out insurance in order to secure volunteers against any harm that may arise from the trial. For trials where insurance is mandatory, the procedures and principles regarding the presentation and request of the insurance shall be determined by the Ministry of Health. The procedures and principles regarding liability insurance shall be determined by the Insurance and Private Pension Regulation and Supervision Agency, after obtaining the opinion of the Ministry of Health. Beyond insurance coverage, no persuasive inducement or financial offer may be made to volunteers in order to secure their participation in or continuation of the trial. However, the expenses that will arise from the participation of volunteers in the trial, as well as the loss of income incurred by healthy volunteers due to loss of working days, shall be specified in the trial budget and covered from this budget. Where the information obtained as a result of the trial is to be published, the identity data of the volunteer may not be disclosed. If, during the conduct of the trial, the Ministry of Health determines that one of the conditions existing at the time the trial was authorised has ceased to exist, it shall immediately suspend the clinical trial. The trial shall be terminated directly in cases where these conditions are not fulfilled within the specified period, where it is understood that their fulfilment is impossible, or where the health of a volunteer is endangered.

Ethics committees shall be established for the purpose of ensuring the protection of the rights, safety and well-being of volunteers who will participate in the trials or studies specified in this Article, and of evaluating the trials from an ethical and scientific perspective. The relevant ethics committees commence their duties following the authorisation of the Ministry of Health. Ethics committees operate in an independent, impartial and transparent manner. A Clinical Trials Advisory Board shall be established within the Ministry of Health to deliver opinions on matters

concerning clinical trials and ethics committees. The qualifications and number of members of ethics committees and of the Clinical Trials Advisory Board, as well as their duties, powers, and working procedures and principles, shall be determined by the Ministry of Health. The sponsor may delegate all or part of its duties and powers relating to the trial. The rights and obligations of the parties, matters relating to the authorisation of the transferee's activities and the conduct of the trial, and other conditions that must be included in the contract shall be determined by the Ministry of Health. The procedures and principles governing the conduct of scientific research on human beings shall be laid down by a regulation to be issued by the Ministry of Health. Without prejudice to the provisions of the Turkish Penal Code No. 5237 dated 26/9/2004: a) An administrative fine of between one hundred thousand Turkish liras and one million Turkish liras shall be imposed, according to the nature of their acts, on sponsors and transferees of trials who engage in activities contrary to the procedures and principles determined by the Ministry of Health, excluding scientific studies or trials conducted solely for academic purposes. b) Investigators who engage in activities contrary to the procedures and principles determined by the Ministry of Health or who fail to fulfil their obligations in a manner that endangers the safety and well-being of volunteers shall be prohibited from participating in the trials and studies specified in this Law for a period of six months to two years, according to the nature of their acts. c) Where an ethics committee authorised by the Ministry of Health acts contrary to the determined working procedures and principles three times within one year, the establishment authorisation of that ethics committee shall be revoked. ç) Members of ethics committees who act contrary to the working procedures and principles determined by the Ministry of Health shall be prohibited from serving as members of ethics committees falling within the scope of this Law for a period of one year. The Ministry of Health is authorised to make the regulations pursuant to this Article, to establish the necessary acts and procedures, to authorise and supervise the specified trials and studies, and to impose the specified administrative fines and sanctions.

Additional Article 11 – (Added: 2/1/2014 – Article 46 of Law No. 6514) (Amended first paragraph: 21/2/2024 – Article 20 of Law No. 7496) All acts and procedures relating to the provision of health services shall be supervised by the Ministry of Health. This provision also covers the activities of all kinds of institutions within the scope of international health tourism. (Amended second paragraph: 21/2/2024 – Article 20 of Law No. 7496) Except for health services to be provided, in emergency situations, by persons authorised to practise their profession until emergency health services are reached and health services become continuous, those who provide or have provided health services without a licence or authorisation shall be punished with imprisonment from one year to three years and a judicial fine of up to twenty thousand days. Those who open service units and health facilities subject to special permission without obtaining permission from the Ministry of Health, or who provide the services to be rendered therein, shall be punished with an administrative fine of up to half of the gross service revenue of the previous month, but not less than two hundred and fifty thousand Turkish liras. (Amended third paragraph: 21/2/2024 – Article 20 of Law No. 7496) Health institutions and organisations that fail to keep the records determined by the Ministry of Health in an appropriate manner or fail to fulfil the notification obligation shall be punished with an administrative fine of up to two percent of the gross service revenue of the previous month, but not less than fifty thousand Turkish liras. (Amended fourth paragraph: 21/2/2024 – Article 20 of Law No. 7496) In cases of non-compliance with the principles of intervention to emergency patients determined by the Ministry of Health, and with the standards for personnel, medical devices and equipment, buildings and service units, materials and medicines, an administrative fine of up to five percent of the gross service revenue of the previous month, but not less than one hundred thousand Turkish liras, shall be imposed. In the event of repetition within one year of the acts requiring administrative fines under this Article, the administrative fines shall be imposed with a twofold increase; in the event of commission for the third time, the activity of the relevant section or of the entirety of the health institution or organisation shall be suspended for up to ten days. Where there are multiple health institutions

and organisations under the same name and ownership, administrative sanctions shall be applied only to the health institution or organisation where the violation occurred. Governors are authorised to impose the administrative fines specified in this Article, and the Ministry of Health is authorised to impose the suspension of activity penalty. The procedures and principles regarding the implementation of this Article shall be regulated by the Ministry of Health, after obtaining the opinion of the Council of Higher Education with respect to university health application and research centres.

Additional Article 12 – (Added: 2/1/2014 – Article 47 of Law No. 6514) (Repealed first paragraph: 12/5/2022 – Article 13 of Law No. 7406) (Added paragraph: 15/4/2020 – Article 28 of Law No. 7243) In cases of intentional injury (Article 86), threat (Article 106), insult (Article 125) and resistance to prevent the performance of duty (Article 265) set forth in the Turkish Penal Code No. 5237, committed against healthcare personnel and auxiliary healthcare personnel employed in public or private health institutions and organisations by reason of their duties: a) The penalties to be imposed under the relevant Articles shall be increased by half. b) The provisions on the postponement of imprisonment regulated in Article 51 of the Turkish Penal Code shall not apply. Personnel employed in private health institutions and organisations shall be deemed public officials for the purposes of the application of the Turkish Penal Code No. 5237 with respect to crimes committed against them in connection with these duties. (Added paragraph: 15/11/2018 – Article 21 of Law No. 7151) Suspects of intentional crimes committed by reason of duty against personnel employed in health institutions and organisations shall be apprehended by law enforcement officers and, after the necessary procedures are carried out, shall be referred to the Republic Chief Public Prosecutor's Office. The Republic Public Prosecutor shall complete the judicial procedures. In the investigation of these crimes, the statements of healthcare personnel who are complainants, victims or witnesses shall be taken at their workplace by law enforcement officers. The provisions of this paragraph shall also apply to intentional crimes committed by reason of duty against personnel employed in private health institutions and organisations. (Added paragraph: 15/4/2020 – Article 28 of Law No. 7243) In the health institution or organisation where the violence occurred, other healthcare personnel who can provide the service provided by the victim shall not be provided to the perpetrator or his/her relative

and where auxiliary health personnel exist, the service shall be provided by other relevant personnel.

Additional Article 13 – (Added: 2/1/2014-6514/Article 48) The examination fees to be collected from participants for the theoretical and practical examinations in first aid training, and the fees to be paid to examination proctors serving in the examinations, shall be determined annually by the Ministry of Health.

Additional Article 14 – (Added: 6/2/2014-6518/Article 38) The expenses of a maximum of four hundred foreign patients per year who seek treatment in our country and whose requests are deemed appropriate by the Ministry of Foreign Affairs and the Ministry of Health — specifically, those expenses that can be covered within the scope of subparagraphs (b), (c), (d) and (f) of the first paragraph of Article 63 of Law No. 5510 on Social Insurance and General Health Insurance dated 31/5/2006, as well as accommodation expenses up to the amount found by multiplying the coefficient figure of (1300) by the civil servant monthly coefficient, on a daily basis, for the patients themselves and for each of their companions not exceeding two persons, and travel expenses including round-trip — shall be covered by the Public Hospitals Institution of Turkey, provided that the appropriation allocated for this purpose in the budget of the Public Hospitals Institution of Turkey is not exceeded and that the treatment is carried out in health institutions affiliated with the Ministry of Health and in State university hospitals.

Additional Article 15 – (Added: 20/8/2016-6745/Article 40) Foundation universities that have a faculty of medicine and/or dentistry but do not have a health application and research center, or whose health application and research center lacks sufficient capacity and educational infrastructure, may cooperate with private hospitals that have sufficient capacity and educational

infrastructure for undergraduate education in medicine and dentistry, specialty training in medicine, dentistry and pharmacy, and research activities, provided that their budgets are separate. A cooperation protocol shall be signed between the authorized bodies of the relevant university and the private hospital, and shall be put into effect upon the approval of the Ministry of Health and the Council of Higher Education. The private hospital with which cooperation is carried out shall be regarded as a health application and research center of the university. University faculty members who will actually serve there shall be appointed by the rector upon the request of the relevant dean and the hospital manager. The legislation applicable to the assigned university personnel shall apply to them. The private hospital with which cooperation is carried out shall remain subject to its own legislation outside the activities of the faculty members and the educational and research functions of the university. The procedures and principles regarding the implementation of this Article shall be determined by the Ministry of Health after obtaining the opinion of the Council of Higher Education.

Additional Article 16 – (Added: 20/8/2016-6745/Article 41) Academic physicians holding the title of associate professor or professor who are serving abroad shall be exempted from the obligation of State service, provided that they have actually practiced the profession in an academic position in Turkey for at least 3 years.

Additional Article 17 – (Added: 15/8/2017-Decree-Law-694/Article 85; Accepted verbatim: 1/2/2018-7078/Article 81) Physicians and specialist physicians serving in health institutions and organizations belonging to the Ministry of Health and its affiliated organizations, as well as family physicians employed in accordance with the provisions of Law No. 5258 on Family Medicine dated 24/11/2004, may work until the age of seventy-two, provided that they are deemed appropriate by the Ministry each year.

Additional Article 18 – (Added: 12/5/2022-7406/Article 14) Provided that those subject to the investigation procedure set forth in Article 53 of the Higher Education Law are excluded, the provisions of Law No. 4483 on the Trial of Civil Servants and Other Public Officials dated 2/12/1999 shall apply to investigations conducted regarding physicians and dentists serving in public or private health institutions and organizations and in foundation universities, as well as other health professionals, on account of medical procedures and practices related to examination, diagnosis and treatment carried out within the scope of the practice of the health profession. The authorization for investigation shall be granted by the Professional Liability Board established within the Ministry of Health. The Professional Liability Board may, with respect to physicians and dentists serving in private health institutions and organizations and in foundation universities, as well as other health professionals, also assign directors or deputy directors serving in provincial health directorates to conduct preliminary inquiries. The time limits set forth in Article 7 of Law No. 4483 regarding the granting of authorization for investigation shall be applied as doubled. Objections may be lodged against the decisions of the Professional Liability Board before the Ankara Regional Administrative Court. With respect to physicians and dentists serving in public institutions and organizations and State universities, as well as other health professionals, the Professional Liability Board shall decide within one year whether recourse shall be had against the person concerned, and the amount of recourse, on account of compensation paid by the administration due to medical procedures and practices related to examination, diagnosis and treatment carried out within the scope of the practice of the health profession, taking into consideration whether the person concerned abused his/her duty by acting contrary to the requirements of his/her duty and his/her degree of fault. (Additional sentence: 21/2/2024-7496/Article 21) With respect to those serving in State universities, a final decision shall be rendered within six months, taking into account the decision of the Professional Liability Board by the relevant university and, if any, the final decision of a criminal court finding that the person concerned abused his/her duty by acting contrary to the requirements of his/her duty. (Additional paragraph: 21/2/2024-7496/Article 21) After paying the compensation adjudicated in a final court decision, the administration shall be subrogated to the rights of health professionals serving in

public institutions and organizations and in State universities who have compulsory professional financial liability insurance and who caused the payment of compensation due to medical procedures and practices related to examination, diagnosis and treatment carried out within the scope of the practice of the health profession. Compensation paid by the administration, including attorney's fees and litigation costs, for damages caused by all kinds of fault and by negligence or delay in fulfilling the requirements of the duty of these health professionals due to medical procedures and practices related to examination, diagnosis and treatment carried out within the scope of the practice of the health profession, shall be claimed from the insurance company with which the health professional has taken out compulsory financial liability insurance for medical malpractice, in proportion to the fault of the health professional and within the insurance coverage. The Professional Liability Board shall be composed of the following seven members, to be determined by the Minister of Health: 15

a) a Deputy Minister, b) the Directors General or their deputies of Health Services, Public Hospitals, Legal Services, and Management Services, c) two physicians, one from an internal medicine specialty and the other from a surgical specialty, one of whom holds the title of professor or associate professor. The chair of the Professional Liability Board shall be a Deputy Minister. The term of office of the members determined under subparagraph (c) shall be two years. The Professional Liability Board shall convene with the absolute majority of its full membership and shall take decisions by the absolute majority of its full membership. Abstention votes shall not be cast in votes. Depending on the nature and number of incoming business, the Minister of Health may establish new boards from among those listed in the fourth paragraph, under the chairmanship of another Deputy Minister. 16 Members of the Professional Liability Board shall not be held liable financially or administratively on account of the decisions they render within the scope of the second paragraph, unless it is established by a final decision of a criminal court that they acted contrary to the requirements of their duty. The procedures and principles regarding the implementation of this Article shall be determined by a regulation to be put into effect by the Ministry of Health.

Provisional Article 1 – Upon their request and subject to the acceptance of the organization, the health and auxiliary health personnel and other personnel of an organization converted to the health enterprise system may be employed on a contractual basis without the need for a new appointment. However, personnel transferring from civil servant status to a contract shall, upon their request, be affiliated with the Retirement Fund of the Republic of Türkiye. Personnel whose request for a contract is not accepted by the relevant health institution, or who do not request a contract, may, upon the request of the health institution and with the approval of their institutions, be [text continues]

...transferred to a position (kadro). Until they are appointed to a new position, such personnel shall be assigned to duties appropriate to their status, and their salaries, supplementary indicators and all other rights pertaining to their former positions shall be preserved as attached to their persons for as long as they remain in their new duties.

Provisional Article 2 – The revolving funds of health facilities which have revolving funds and whose reorganisation is envisaged shall be transferred to the health enterprise.

Provisional Article 3 – (Repealed: 31/5/2006-Article 106 of Law No. 5510)

15 By the Decision of the Constitutional Court dated 30/11/2023 and numbered E: 2022/90, K: 2023/201, this paragraph has been annulled with respect to the phrase "...at State universities..." contained in the second paragraph. 16 By Article 21 of Law No. 7496 dated 21/2/2024, the phrase "third" in this paragraph has been amended to read "fourth".

Provisional Article 4 – (Repealed: 23/5/2000 - Article 5 of Law No. 4568)

Provisional Article 5 – Until the regulations relating to this Law are drawn up and put into effect, the provisions of legislation that are not contrary to this Law shall continue to be applied.

Provisional Article 6 – (Added: 21/6/2005 – Article 2 of Law No. 5371) Those who, at the date of entry into force of this Law, are studying at faculties of medicine, as well as those

undergoing specialty training or subspecialty training in medicine, shall be obliged to perform State service in accordance with the provisions of provisional Article 3 of this Law.

Waiver of the pursuit of debts belonging to public health service enterprises Provisional Article 7 – (Added: 1/7/2006 - Article 12 of Law No. 5538) No debt shall be assessed against the health service enterprises belonging to public institutions and organisations which were exempt from value added tax pursuant to subparagraph (a) of paragraph (2) of Article 17 of the Value Added Tax Law No. 3065 dated 25/10/1984, on account of overpayments made in the value added tax amounts of the invoices issued by such enterprises for treatment services they provided to public institutions and organisations in periods prior to 1/1/2005; the pursuit of debts already assessed shall be waived and the collection procedure shall be terminated.

Provisional Article 8 – (Added: 2/1/2014 - Article 49 of Law No. 6514) No debt shall be assessed for the supplementary payments made, from the revolving funds of health facilities under joint use in accordance with supplementary Article 9 prior to the date of entry into force of this Article, to the university rector, vice-rectors, secretary general, the dean and vice-deans of the relevant unit, and to teaching staff members.

Provisional Article 9 – (Added: 2/1/2014 - Article 50 of Law No. 6514) Physicians who were engaged in professional activities abroad prior to 1/1/2013, those who became specialists in accordance with the legislation on medical specialisation, and those who completed their education abroad prior to the date of entry into force of this Article, shall be exempt from the State service obligation, provided that they return to Türkiye within six months from the date of entry into force of this Article and actually practise their profession in Türkiye for at least three years.

Provisional Article 10 – (Added: 20/8/2016 - Article 42 of Law No. 6745) The procedures and principles within the scope of supplementary Article 15 of this Law shall be determined by the Ministry of Health within three months. Protocols concluded prior to the entry into force of this Article between foundation higher education institutions and private hospitals, which are currently being implemented, shall remain valid with their existing rights and obligations until the end of the periods specified in the protocols.

Provisional Article 11 – (Added: 20/8/2016 - Article 43 of Law No. 6745) Medical practitioners who completed their medical education or medical specialisation training abroad prior to the date of entry into force of this Article shall be exempt from the State service obligation, provided that they return to Türkiye within six months from the date of entry into force of this Article and actually practise their profession in Türkiye for at least three years.

Provisional Article 12 – (Added: 15/11/2018 - Article 22 of Law No. 7151) Contracts shall be concluded within three months from the date of entry into force of this Article, within the scope of the third paragraph of supplementary Article 9, with university personnel who are to work at health facilities with which a joint use protocol has been concluded under supplementary Article 9 prior to the date of entry into force of this Article.

Provisional Article 13 – (Added: 12/5/2022 - Article 15 of Law No. 7406) The provisions of the first paragraph of supplementary Article 18 shall not apply to those for whom a finalised authorization for an investigation has been granted pursuant to the provisions of Law No. 4483, and the investigations or prosecutions shall continue. With respect to recourse actions brought on account of compensation paid by the administration due to medical procedures and practices relating to examination, diagnosis and treatment carried out by physicians, dentists and other health professionals working in public institutions and organisations and at State universities within the scope of the practice of the health profession, where proceedings are pending as of the date of entry into force of this Article, the plaintiff shall be granted a period of two months to apply to the Professional Liability Board for a decision to be rendered pursuant to the second paragraph of supplementary Article 18. In the absence of such application, the case shall be dismissed on procedural grounds. In this case, the litigation costs shall be left upon the parties and no attorney's fee shall be adjudged against the plaintiff.

Repealed provisions

Article 10 – The provisions of other laws that are contrary to this Law are hereby repealed.

Entry into force

Article 11 – This Law shall enter into force on the date of its publication.

Execution

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Article 12 – The Council of Ministers shall execute the provisions of this Law.

PROVISIONS THAT COULD NOT BE INCORPORATED INTO LAW NO. 3359 DATED 7/5/1987

1- Provisional Article of Law No. 5748 dated 12/3/2008:

Provisional Article 1 – Professors and associate professors who have served for at least six months as chief of clinic or deputy chief of clinic in the training and research hospitals of the Ministry of Health, and who apply for appointment to these positions within one month following the publication of this Law, shall be evaluated by three professors or chiefs of clinic to be designated by the Ministry in the relevant fields of specialty, with respect to their scientific studies and qualifications as educators. Those found qualified as a result of this evaluation shall be appointed according to the titles of the positions they actually hold.

LIST SHOWING THE DATES OF ENTRY INTO FORCE OF THE LEGISLATION AMENDING AND SUPPLEMENTING LAW NO. 3359

Number of the Amending Law/ Decree Law Amended or Repealed Articles of Law No. 3359
Date of Entry into Force Decree Law/572 3 6/6/1997 4568 Provisional Article 4 26/5/2000 4924
Additional Article 1 24/7/2003 5220 Additional Article 2 21/7/2004 5335 8 27/4/2005 5371
Additional Articles 3, 4, 5 and 6, Provisional Article 6 5/7/2005 5378 3 7/7/2005 5396 Additional
Article 7 15/7/2005 5413 Additional Article 1 1/11/2005 5538 Additional Article 8, Provisional
Article 7 12/7/2006 5614 Additional Article 5 4/4/2007 5748 Additional Article 1, Provision that
Could Not Be Incorporated 22/3/2008 5510 (as amended by Law No. 5754) 3, Provisional Article 3
1/10/2008 5947 Additional Article 9 30/1/2010 6225 Additional Article 10 26/4/2011 Decree
Law/663 5, 6, 7, 8, 9, Additional Article 1, Additional Article 7, Additional Article 9 2/11/2011 6354
Additional Article 1, Additional Article 9 12/7/2012 6428 Additional Article 7 9/3/2013 6462 3
3/5/2013 6514 Additional Articles 4, 9, 10, 11, 12, 13, Provisional Article 8, Provisional Article 9
18/1/2014 6518 Additional Article 14 19/2/2014 6698 3 7/4/2016 6745 Additional Article 9,
Additional Article 15, Additional Article 16, Provisional Article 10, Provisional Article 11 7/9/2016
Decree Law/678 Additional Article 3 22/11/2016 Decree Law/680 Additional Article 3 6/1/2017
Decree Law/694 Additional Article 17 25/8/2017 7071 Additional Article 3 8/3/2018 7072
Additional Article 3 8/3/2018

Number of the Amending Law/ Decree Law Amended or Repealed Articles of Law No. 3359
Date of Entry into Force 7078 Additional Article 17 8/3/2018 Decree Law/700 Additional Article 3,
Additional Article 4 On the date on which the President assumed office by taking the oath
following the Grand National Assembly of Turkey and Presidential elections held together on
24/6/2018 (9/7/2018) 7151 Additional Article 5, Additional Article 9, Additional Article 12,
Provisional Article 12 5/12/2018 7243 Additional Article 12 17/4/2020 7256 Additional Article 9
17/11/2020 7281 Additional Article 6 5/3/2021 7406 Additional Article 12, Additional Article 18,
Provisional Article 13 27/5/2022 7411 Additional Article 1, Additional Article 3, 23/6/2022 7456
Additional Article 5 15/7/2023 By the Decision of the Constitutional Court dated 1/6/2023 and
numbered E.:2021/5; K.:2023/109 Additional Article 9 18/10/2023 By the Decision of the
Constitutional Court dated 30/11/2023 and numbered E: 2022/90, K: 2023/201 Additional Article
18 2/2/2024 7496 Additional Article 9, Additional Article 10, Additional Article 11, Additional
Article 18 1/3/2024