建議指南文件<分銷商表列事宜>的問卷

Questionnaire for the Proposed Guidance Notes for the Listing of Distributors



請於 2014 年 12 月 31 日或之前將這問卷交回「醫療儀器管制辦公室」 (傳真: 3157 1286; 電郵: $\underline{mdco@dh.gov.hk}$; 地址: 香港灣仔皇后大道東 183 號合和中心 31 樓 3101 室)

Please return this questionnaire to the Medical Device Control Office on or before 31 December 2014 (Fax: 3157 1286;

| Email: mdco@dh.gov.hk ; Address: Rm. 3101, 31/F., Hopewell Centre, 183 Queen's Road East, Wanchai, Hong Kong) | | | | | | |
|--|---|-------|----------|-------------------|--|--|
| 姓名 Name: | | | | | | |
| 機構名稱 Organisation: | | | | | | |
| 業務性質 Nature of business: | □ 本地負責人 Local Responsible Person | | | | | |
| (can tick more than one box) (可選擇多於一項) | :) □ 進口商 Importer | | | | | |
| | □ 分銷商 Distributor | | | | | |
| | □ 零售商 Retailer | | | | | |
| | □ 本地製造商 Local Manufacturer | | | | | |
| | □ 其他 (請說明) others (please specify): | | | | | |
| 電話號碼 Tel No: | | | | | | |
| 傳真號碼 Fax No: | | | | | | |
| 電郵地址 Email: | | | | | | |
| | | | | | | |
| 請在適當的方格內劃上\號, | 以表達對下述說法的意見。 | | | | | |
| Please indicate your view on the | following statements by ticking the appropriate box | | | | | |
| | | 同意 | 不同意 | 無意見 | | |
| | | Agree | Disagree | 無思兄 No Comment | | |
| 1. 我們知道政府正推行一套醫療儀器行政管理制度。 | | | | | | |
| We are aware that the gove a Medical Device Adminis | ernment is implementing trative Control System (MDACS). | | | | | |
| 2. 政府應設立機制以規管分 | ·銷商,加強對醫療儀器供應鏈的可追溯性。 | | | | | |
| = | tablish a system to regulate distributors to enhance devices in the supply chain. | | | | | |

| | | 同意 | 不同意 | 無意見 |
|----|---|-------|----------|------------|
| | | Agree | Disagree | No Comment |
| 3. | 指南文件內就申請納入分銷商列表時所須符合的要求屬可以接受。 The requirements specified under the guidance document for the listing of distributors are considered acceptable. | | | |
| 4. | 大體而言,指南文件內就表列分銷商所要求的書面程序可以接受。 In general, the documented procedures specified in the guidance document for the listing of distributors are considered acceptable. | | | |
| 5. | 其他意見: Other comments: | | | |
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完

END

Personal Data (Privacy) Ordinance

Statement of Purposes

1. Purpose of Collection

The personal data that are provided by you with whom the Department of Health (DH) interacts will be used by the DH for the purposes of administrative and/or statutory control of medical devices.

2. Classes of Transferees

The personal data that you provide are mainly for use within the DH but it may also be disclosed to other Government bureaux/departments or relevant parties for the purposes mentioned in para. 1 above, and related matters if required. Apart from this, the data may only be disclosed to parties where you have given consent to such disclosure or where it is allowed under the Personal Data (Privacy) Ordinance.

3. Access to Personal Data

You have a right of access and correction with respect to personal data as provided for in sections 18 and 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance. Your right of access includes the right to obtain a copy of your personal data. A fee may be imposed for complying with a data access request.

4. Enquiries

Enquiries concerning the personal data provided, including the making of access and corrections, should be addressed to the Medical Device Control Office, Department of Health (31/F., Hopewell Centre, 183 Queen's Road East, Wanchai, Hong Kong; fascimile number: 3157 1286; telephone number: 3107 8484).

個人資料(私隱)條例 用途聲明

1. 收集資料的目的

你與衞生署溝通互動時所提供的個人資料,會用於衞生署作為行政及/或立法規管醫療儀器的用途。

2. 資料轉介人的類別

你所提供的個人資料,衛生署主要作內部用途,但也可能於有所需要時因以上第 1 段所列目的或有關事項向其他政策局/部門,或有關方面披露。此外,該等資料只可於你同意作出該種披露或作出該種披露是《個人資料(私隱)條例》所允許的情況下,才向其他方披露。

3. 查閱個人資料

根據《個人資料(私隱)條例》第 18 條及 22 條以及附表 1 第 6 原則所述,你有權查閱及修正個人資料,包括有權取得你於以上第 1 段所述的情況下所提供的個人資料。因應查閱資料要求而提供資料時,衞生署可能要徵收費用。

4. 查詢

就已提供的個人資料的查詢,包括索閱或更改資料,可向衞生署醫療儀器管制辦公室 (香港灣仔皇后大道東 183 號合和中心 31 樓 3101 室,傳真號碼: 3157 1286,電話號碼: 3107 8484) 提出。