

Introduction of Medical Device Administrative Control System (MDACS)

Medical Device Division
Department of Health

Rev. 2024-04-17

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Contents



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■ Part 1:

- ◆ Brief Introduction to Medical device Administrative Control System (MDACS)
- ◆ Local Responsible Person (LRP)
- ◆ Listing of Traders
 - Local Manufacturer
 - Importer
 - Distributor
- ◆ Listing of Medical Devices
 - Classification
 - Preparation of Application Documents

■ Part 2: Topic 1 , Topic 2 (if applicable)

■ Q & A

■ Evaluation

Brief Introduction to Medical Device Administrative Control System (MDACS)



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Brief Introduction to MDACS



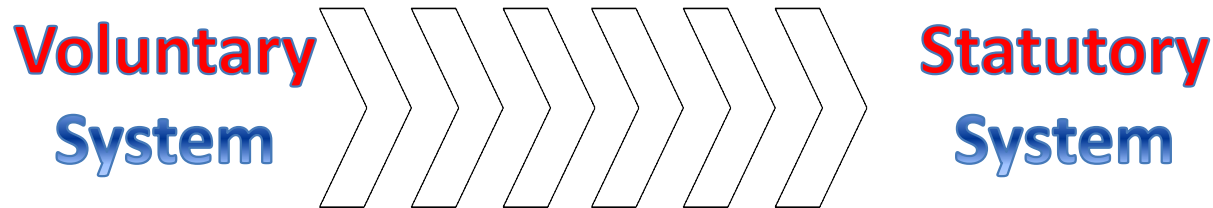
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- Currently, there is **no specific legislation** to regulate the manufacture, import, distribution, supply and use of MDs in Hong Kong.
- However, depending on the nature, characteristics and claims of the MDs concerned, some products may be regulated by other pieces of legislation such as:
 - Pharmacy and Poisons Ordinance (Cap 138)
 - Radiation Ordinance (Cap 303)
 - Telecommunications Ordinance (Cap 106)
 - Consumer Goods Safety Ordinance (Cap. 456)
 - Undesirable Medical Advertisements Ordinance (Cap. 231)
 - Trade Descriptions Ordinance (Cap. 362)

MDACS



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■ Purpose of MDACS

- ❑ **Raise** public's awareness of the use of **safe** medical devices
- ❑ Enable the traders to **familiarize** themselves with the **future mandatory requirements**
- ❑ Provide an opportunity to collect more information and feedback from the industry as a reference to **fine-tune** the long-term **regulatory framework**

MDACS



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■ Scope

- ❑ Products fall within the definition of **Medical Device**
- ❑ Some Medical Devices are excluded from the current scope of MDACS,
For example: Medical Device incorporates human tissue

Definition of Medical Device



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Medical Device means any instrument, apparatus, implement, machine, appliance, implant, in vitro reagent or calibrator, software, material or other similar or related article, **intended by the manufacturer** to be used, alone or in combination, **for human beings** for one or more of the specific purpose(s) of –

- a) diagnosis, prevention, monitoring, treatment or alleviation of **disease**; or
- b) diagnosis, monitoring, treatment, alleviation of or compensation for an **injury**; or
- c) investigation, replacement, modification, or support of the **anatomy or of a physiological process**; or
- d) supporting or sustaining life; or
- e) control of conception; or
- f) disinfection of medical devices; or
- g) providing information for medical purposes by means of *in vitro* examination of specimens derived from the human body;

and which does **not** achieve its **primary intended action** in or on the human body **by pharmacological, immunological, or metabolic means**, but which may be assisted in its intended function by such means. (Ref.: GN-00)

Definition of Medical Device



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- **Examples of medical devices:**
 - **Condom**
 - **Medical device sterilizer**
 - **Blood pressure monitor**
 - **Thermometer**

MDACS



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Medical Device Administrative Control System (MDACS)

Pre-market Control

Post-market Control

Listing System

- (1) Medical Devices
 - General Medical Devices (Class II – IV)
- (2) Traders
 - Local Responsible Person (LRP)
 - Local Manufacturer
 - Importer
 - Distributor

Conformity Assessment Body (CAB) Recognition Scheme

Medical Device Safety Alert System & Adverse Event Reporting System

New procurement requirements of the DH and HA



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■ New procurement requirements of the Department of Health (DH) and Hospital Authority (HA)

→ Starting from 21 June 2023

Medical devices (MDs) being purchased by DH should **preferably** be listed under the Medical Device Administrative Control System (MDACS).

– DH will include the new procurement requirement in the quotation/tender exercises that the MD under purchase is **preferably** be listed under the MDACS. For details of the procurement requirements for a particular MD procurement, please refer to the tender/quotation documents.

→ ensure that the MDs being purchased by DH will meet the **safety, quality and performance** requirements comparable to international standard

– Please refer to individual invitation documents issued by DH for details of other procurement requirements.

– Please refer to the following website for details:

<https://www.mdd.gov.hk/en/whats-new/procurement-requirement/index.html>

MDs being purchased by HA should also **preferably** be listed
under the MDACS

(Please refer to individual invitation documents issued by HA for details of other procurement requirements)

◆ Listing of Traders

□ Local Responsible Person (LRP)



LRP



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- What is a **Local Responsible Person (LRP)**?
 - ▣ **Authorized representative** of the medical device manufacturer
 - ▣ The person responsible for **placing the device on HK market**
 - ▣ The person responsible for making the **application for listing medical devices** under the MDACS and bears **multiple responsibilities** in relation to the listed devices

■ Requirements of LRP

Either a legal person incorporated in Hong Kong,
Or
A natural or legal person with business registration in Hong Kong

Either the manufacturer of the device
or
supported by the manufacturer of the device to perform the obligations of an LRP for the device

Submit the listing application to the Medical Device Division
(The application for listing of LRP is integrated with the application for listing of Medical Devices using the same application form)

Establish documented procedures according to the requirements stipulated by the Medical Device Division



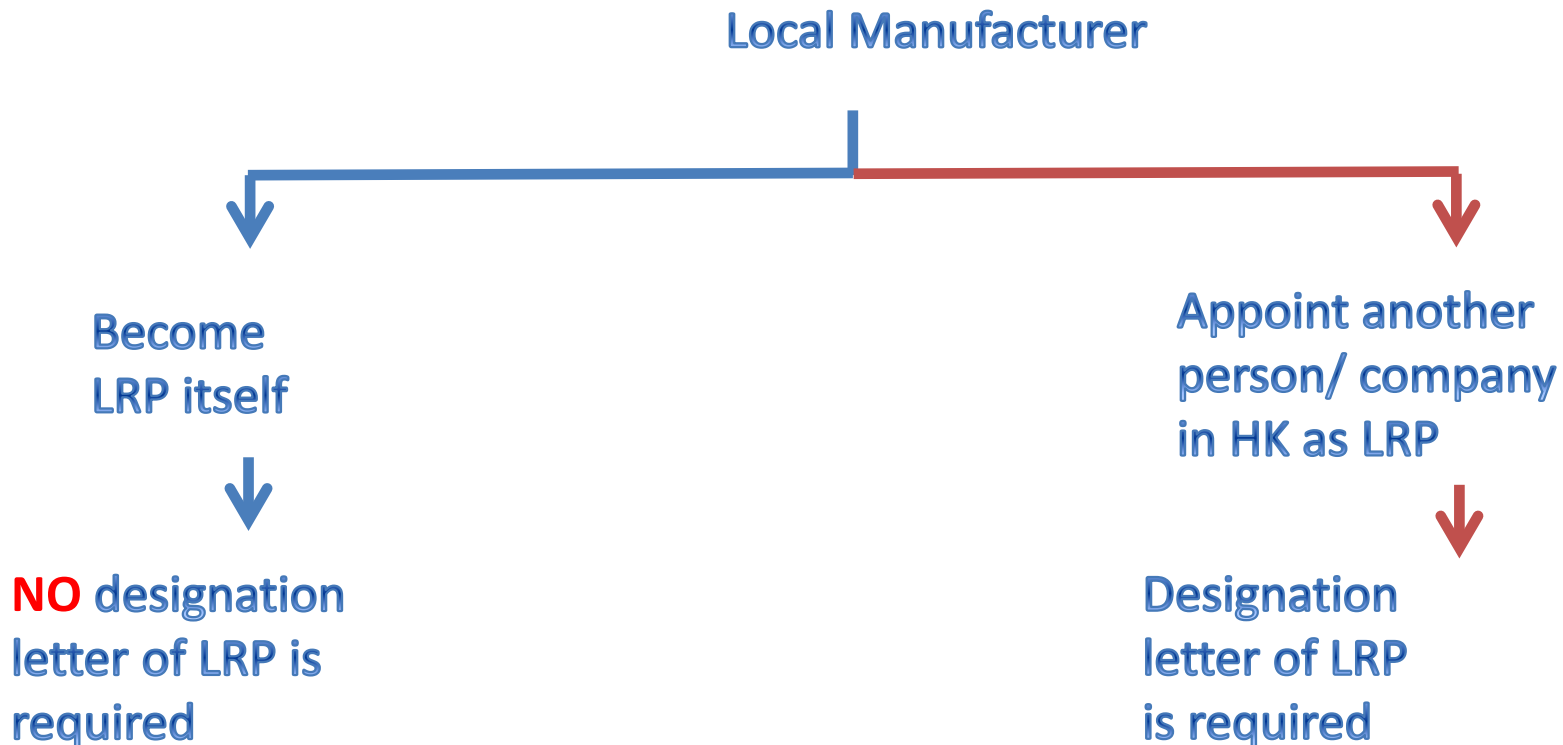
LRP



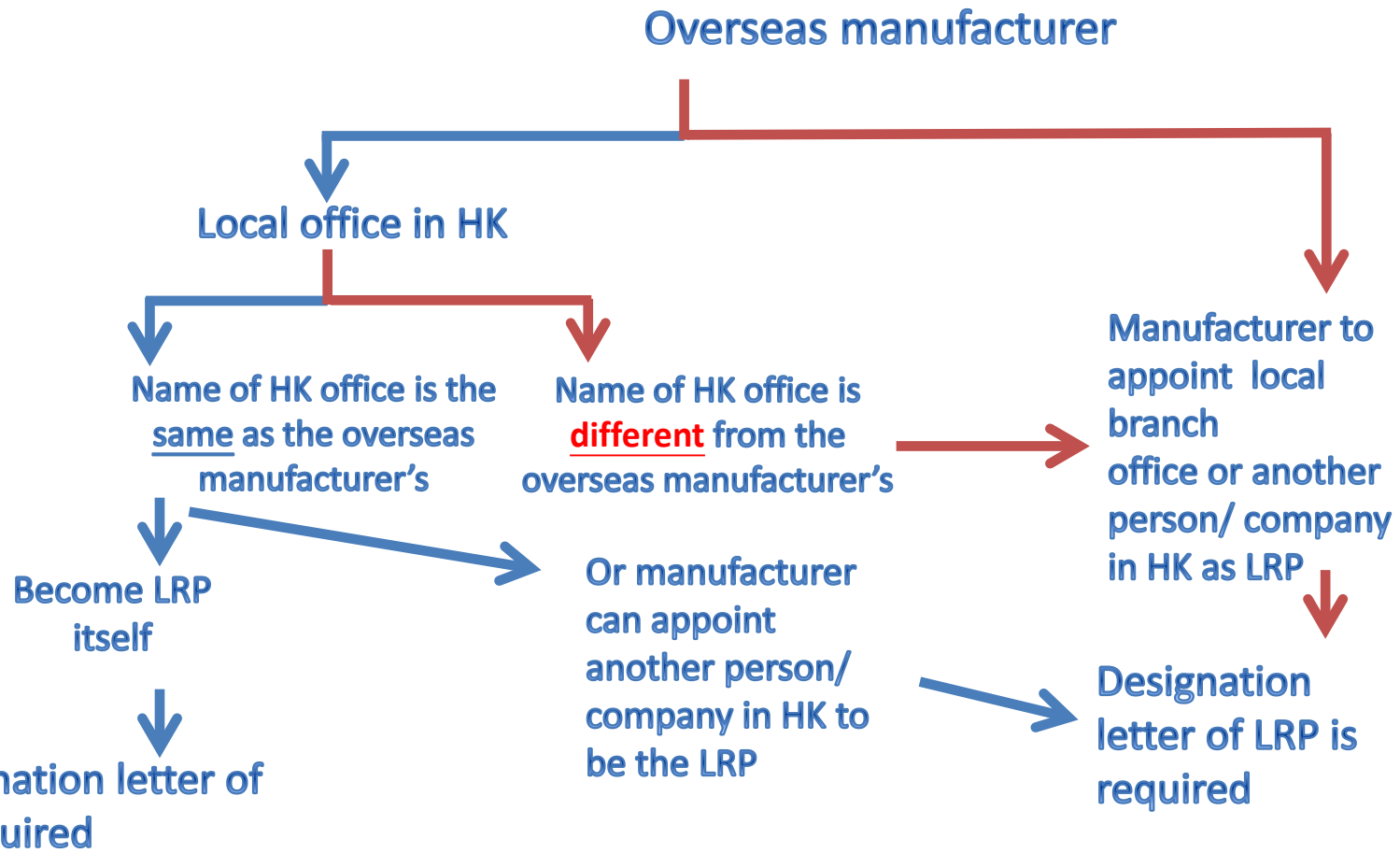
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- **LRP shall refrain from misrepresenting the efficacy or performance of their products for medical purposes.**
- Depending on the nature, characteristics and claims of the MDs concerned, some products may be regulated by other pieces of legislation.
- e.g. the Undesirable Medical Advertisements Ordinance (Cap. 231)
- → you are advised to consult your legal advisor on lawful import and supply of your products in Hong Kong.
(You may also refer to the website <https://www.elegislation.gov.hk/> for Hong Kong Legislation.)

■ Relationship between LRP and Local Manufacturer



■ Relationship between LRP and overseas manufacturer





LRP



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Sample Letter for Designating a Local Responsible Person

<Name of manufacturer>
<Address of manufacturer>
Date:

<Name of LRP>
<Address of LRP>

Dear Sirs,

Re: Designation of Local Responsible Person for <Brief description of devices>

In accordance with the requirements of the Medical Device Administrative Control System (MDACS) of the Hong Kong Special Administrative Region, we hereby designate you, <Name of LRP>, as the Local Responsible Person in respect of the following devices:

<Descriptions of devices including their manufacturer, models, types, and other relevant identifiers>

This designation will require you to comply with, with immediate effect, all the requirements (including but not limited to all the pre-market and post-market requirements) that the MDACS imposes on you as the Local Responsible Person in respect of the above-mentioned devices. We undertake to provide you timely with all the items (documents, information, device and labelling samples etc.) and support that must necessarily originate from us, and which you will need in order to apply for the listing of the afore-mentioned devices and to fulfil your obligations under the MDACS. These items and support include but are not limited to:

- (i) details of design related to the safety and performance of the device;
- (ii) a copy of documents as required in the application form for the listing of devices;
- (iii) any subsequent changes and modifications;
- (iv) details of any recalls, alerts, and related preventive and corrective actions; and
- (v) investigations and reports related to adverse events and post market surveillance.

Yours faithfully,
(signature)
(name and title of official signing this letter)
(official chop (if any) of the manufacturer)

■ Sample letter for designating a LRP

(Source: GN-01,
Appendix 2)

■ Application for listing medical devices

- Submit the completed application form and required information according to the listing requirements of general medical device under the MDACS
- Establish **efficient communication channels** with the Government in relation to their application
- Submit an renewal application to the MDD at least **12 weeks (but no more than 1 year)** before the expiry of Listing (**5 years**)

Reporting changes for Listed MDs



- **The document “Guidance Notes on Changes for Listed Medical Devices” (GN-10) has been issued.**

<https://www.mdd.gov.hk/en/useful-information/forms/index.html>

- GN-10 aims to assist the LRPs in categorising, managing and reporting changes of listed medical devices.
- Starting from 1 January 2024, the LRPs shall comply with the new requirements, and submit the Change Applications with the revised Change Application Form.

Reporting changes for Listed MDs



	Major Changes	Minor Changes
Meaning	Affect the safety, quality or performance (SQP) of a medical device.	Do not fall in the definition of Major Change
How to determine	Use the flowchart in section 4 or refer to the Example of Changes in Appendix 1. Or otherwise, the LRP may contact MDD for further assistance.	
How to implement	<u>Need</u> approval before implementation. Application for changes is required to get the approval from MDD.	<u>No need</u> approval before implementation. But notification of changes to MDD is required.
How to report or notify	By submitting a Change Application Form	By submitting a Change Application Form
When to report or notify	At least 12 weeks <u>before</u> any planned implementation	notify MDD within 24 weeks from the time the LRP is aware of the change.



LRP

Reporting changes for Listed MDs



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	Concurrent supply (section 6.1)
Possible?	Yes
How	Fill in the “proposed schedule” in the Change Application Form
Requirement	<ol style="list-style-type: none">1. Original version is still in compliance with the Essential Principles of Safety and Performance of Medical Devices as stipulated in MDACS.2. Ensure that appropriate mechanisms to differentiate and identify the changed version and original version.3. Ensure traceability of both versions.
Transition to changed version	Normally completed in <u>24 weeks</u> , or any time upon MDD’s instruction



- 3.3 If the medical device undergoes any changes without notifying MDD or obtaining prior approval from MDD (as appropriate):
 - The listing of the medical device will become **invalid** immediately
 - **no longer be regarded as listed under MDACS**
 - **The LRP shall cease to supply the medical device in a way that purports that the device is still listed under MDACS,**
 - e.g. displaying the HKMD number on the outer package or making such claims in the promotional materials

■ Medical Device Adverse Event Reporting

- ◆ **Guidance Notes for Adverse Event Reporting by Local Responsible Persons (GN-03)**
- ◆ **Any adverse event that meets all of the following criteria should be reported** by the LRP to the MDD:
 - The LRP becomes aware of information regarding an adverse event that has occurred with his listed device(s)
 - LRP's device is associated with the adverse event
 - **The adverse event led to** one of the following outcomes:
 - **Death** of a patient, user or other person;
 - **Serious injury** of a patient, user or other person;
 - **No death or serious injury occurred but the event might lead to death or serious injury** of a patient, user or other person **if the event recurs**

◆ Use error

□ means act or omission of an act that has a different result to that intended by the manufacturer or expected by the operator

□ Reportable use errors:

1. Use error that results in death or serious injury / serious public health concern
 - » **Serious public health concern** means any incident type, which results in imminent risk of death, serious injury, or serious illness that may require prompt remedial action to prevent significant risk of substantial harm to the public
2. When the LRP or manufacturer notes a change in trend or a change in pattern of an issue that can potentially lead to death or serious injury or public health concern
3. When the LRP or manufacturer initiates corrective action to prevent death or serious injury or serious public health concern

◆ Timeframes for Submitting Adverse Event Reports to MDD

- ❑ Adverse event that has posed or likely to pose a public health risk must be reported within 48 hours
- ❑ Adverse events that result in death or serious injury must be reported as soon as possible, but not later than 10 calendar days after the LRP becomes aware of the incident
- ❑ All other reportable adverse events must be reported as soon as possible, but not later than 30 calendar days after the LRP becomes aware of the event

◆ Means of Reporting Adverse Events

- Medical Device Adverse Event Report Form – for Local Responsible Persons (Form-Eng AIR-LRP), which is available at:

<https://www.mdd.gov.hk/en/mdacs/report-adverse-events/index.html>



- About Us
- What's New
- Medical Device Administrative Control System**
- Safety Alerts and Communications
- Disciplinary actions under Medical Device Administrative Control System (MDACS)
- Information, Video and Publication
- Useful Information

[Home](#) > [Medical Device Administrative Control System](#) > Report Medical Device Adverse Events

Scope	
Implementation Progress	
Issued Documents	✓
Listing Application	✓
Examples of Medical Devices Classification	✓
Online Tools	✓
Report Medical Device Adverse Events	
Application for Inclusion into Mailing List	
Search Database	✓




Report Medical Device Adverse Events

The objective of this Medical Device Adverse Event Reporting System is to improve the protection of health and safety of patients, users and others through information dissemination that may reduce the likelihood of, or prevent, repetition of adverse events, or alleviate consequences of such repetition.

This System is designed for the Local Responsible Persons to submit the reportable adverse events related to their listed products, and which are suspected to have caused death or serious injury, or which may lead to death or serious injury if it recurs. *The act of reporting an event is not to be construed as an admission of manufacturer, user, or patient liability for the event and its consequences. Submission of an adverse event report does not, in itself, represent a conclusion by the manufacturer that the content of this report is complete or confirmed, that the devices listed failed in any manner. It is also not a conclusion that the device caused or contributed to the adverse event.*

The Local Responsible Person is responsible to conduct investigations into the events of their listed devices and submit the report to the Medical Device Division as required under the Medical Device Administrative Control System. The event could be reported by filling in the reporting form and send back to us.

Reporting form

- ▶ Medical Device Adverse Event Report Form – for Medical Device Users   
- ▶ Medical Device Adverse Event Report Form – for Local Responsible Persons   

Please submit the report through the following channels:

1. By Mail: Medical Device Division, Room 604, 6/F, 14 Taikoo Wan Road, Taikoo Shing, Hong Kong.
2. By Fax: (852) 3157 1286;



- 1) Introduction
 - 2) Report Form
 - 3) Supplementary Information
 - 4) Form Data Verification
 - 5) Acknowledgement
- [General FAQs](#)

You can either use Form filling with iAM Smart e-ME or type in your personal information

[Form Filling with iAM Smart e-ME](#)

[More Info](#)

I. ADMINISTRATIVE INFORMATION

Report Type *

Initial Follow-up Final Trend

Classification of Event *

Serious Public Health Concern
 Death
 Serious Injury
 Other Reportable Event

Date of this report *

YYYY-MM-DD

Date of adverse event

YYYY-MM-DD

LRP awareness date *

YYYY-MM-DD

Expected date of next report *

YYYY-MM-DD

Particulars of the LRP Submitting this Report - Name *

Particulars of the LRP Submitting this Report - Company *

The background of the slide is a blurred image of medical equipment, including a patient bed and a monitor displaying vital signs like heart rate and blood pressure.

- ◆ Listing of Traders (continued)
 - Local Manufacturer/ Importer/ Distributor



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Local Manufacturer/Importer/Distributor



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Local Manufacturer

- a natural person or legal person with responsibility for the design, manufacture, packaging and labelling of a medical device before it is placed on the market under **its own name**, regardless of whether these operations are carried out by that person **himself or on its behalf by a third party**; or
- A natural or legal person who assembles, packages, processes, fully refurbishes or labels one or more ready-made products or assigns to them their intended purpose as a medical device with a view to their being placed on the market under **its own name**, apart from a person who assembles or adapts medical devices already on the market to their intended purpose for an individual patient

Importer

- a legal **who brings or causes to be brought into Hong Kong** any medical devices falling within the scope of the MDACS for **supply in Hong Kong**

Distributor

- a legal person (other than a manufacturer, an importer or a retailer) in the supply chain who carries on business of **distributing medical devices** falling within the scope of the MDACS by **sale for use in Hong Kong** either on his own behalf or to another distributor.

Local Manufacturer/Importer/Distributor



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■ Establish documented procedures

	Local Manufacturer	Importer	Distributor
1. Keeping of transaction records	Per ISO 13485 (or equivalent) requirements	✓	✓
2. Handling, storage and delivery of medical device	Per ISO 13485 (or equivalent) requirements	✓	✓
3. Managing product alerts, modifications and recalls	✓	✓	✓
4. Managing reportable adverse events in Hong Kong	✓	✓	✓
5. Handling of complaints	✓	✓	✓
6. Tracking of specific medical devices	Per ISO 13485 (or equivalent) requirements	✓	✓
7. Arranging maintenance and services	Per ISO 13485 (or equivalent) requirements	✓	✓
8. Ensuring the standard of medical devices imported	N.A.	✓	N.A.

Local Manufacturer/Importer/Distributor



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■ Obligations

	Local Manufacturer	Importer	Distributor
<u>Making records available for inspection</u>	✓ (Records and documents regarding to QMS or products)	✓ (e.g. transaction records)	✓ (e.g. transaction records)
<u>Reporting adverse events</u> (Guidance Note GN-03)	✓	✓	✓
<u>Notifying the changes</u>	✓ (Including any major changes in relation to the QMS)	✓	✓
<u>Conforming to the advertising requirements</u>	✓	✓	✓
Others	Suggested to submit renewal application at least 12 weeks before the expiry of Listing	Required to submit renewal application at least 12 weeks before the expiry of Listing	Required to submit renewal application at least 12 weeks before the expiry of Listing



Brief Summary

	*LRP	Local Manufacturer	Importer	Distributor
Guidance Notes	GN-01, GN-02, GN-06	GN-08	GN-07	GN-09
Application Form	MD101/MD102	LM	MD-IP+D	MD-IP+D
Business Registration Certificate	✓	✓	✓	✓
Documented Procedures	✓	✓	✓	✓
Other Information	<ul style="list-style-type: none"> ❑ Designation Letter ❑ QMS certificate (if applicable) 	<ul style="list-style-type: none"> ❑ ISO 13485 certificate or equivalent ❑ List of medical device manufactured 	<ul style="list-style-type: none"> ❑ List of medical devices imported ❑ QMS certificate (if applicable) 	<ul style="list-style-type: none"> ❑ List of medical devices distributed ❑ QMS certificate (if applicable)

***The application for listing of LRP is integrated with the application for listing of Medical Devices**



Brief Summary

Requirements	LRP	Local Manufacturer	Importer	Distributor
1. Keeping of transaction records	✓	Per ISO 13485 (or equivalent) requirements	✓	✓
2. Handling, storage and delivery of medical device	✓	Per ISO 13485 (or equivalent) requirements	✓	✓
3. Managing product alerts, modifications and recalls	✓	✓	✓	✓
4. Managing reportable adverse events in Hong Kong	✓	✓	✓	✓
5. Handling of complaints	✓	✓	✓	✓
6. Tracking of specific medical devices	✓	Per ISO 13485 (or equivalent) requirements	✓	✓
7. Arranging maintenance and services	✓	Per ISO 13485 (or equivalent) requirements	✓	✓
8. Ensuring the standard of medical devices imported	N.A.	N.A.	✓	N.A.

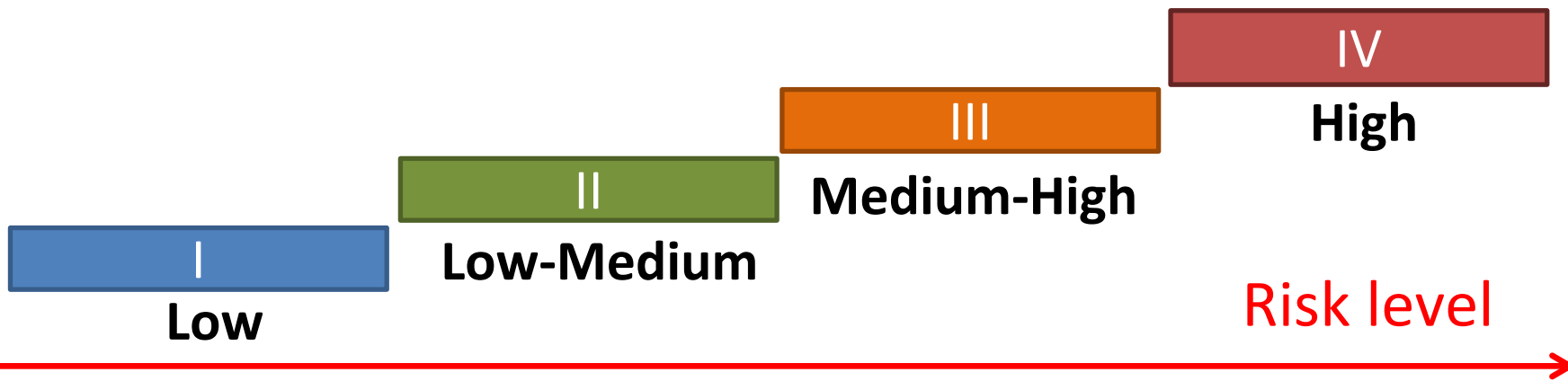


- ◆ Listing of Medical Devices
- Classification of General Medical Devices



Classification of General Medical Device

- Classified into **4 classes** according to the **risk**
 - Class I – Lowest risk
 - Class IV – Highest risk
- The level of control would be **proportionate to** the degree of risk classified for the medical devices



Classification of General Medical Devices



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Risk Factor

(including but not limited to)

Intended Use of the device	<u>*Duration of Contact</u> between Human Body and the medical device	Extent of <u>invasiveness</u>	Any <u>drug</u> or <u>energy</u> delivered to the patient

***NOTE:**

Transient use: Intended for continuous use for **less than 60mins**

Short-term use: Intended for continuous use for **between 60mins to 30days**

Long-term use: Intended for continuous use for **more than 30days**



[Basic Information
of Classification](#)

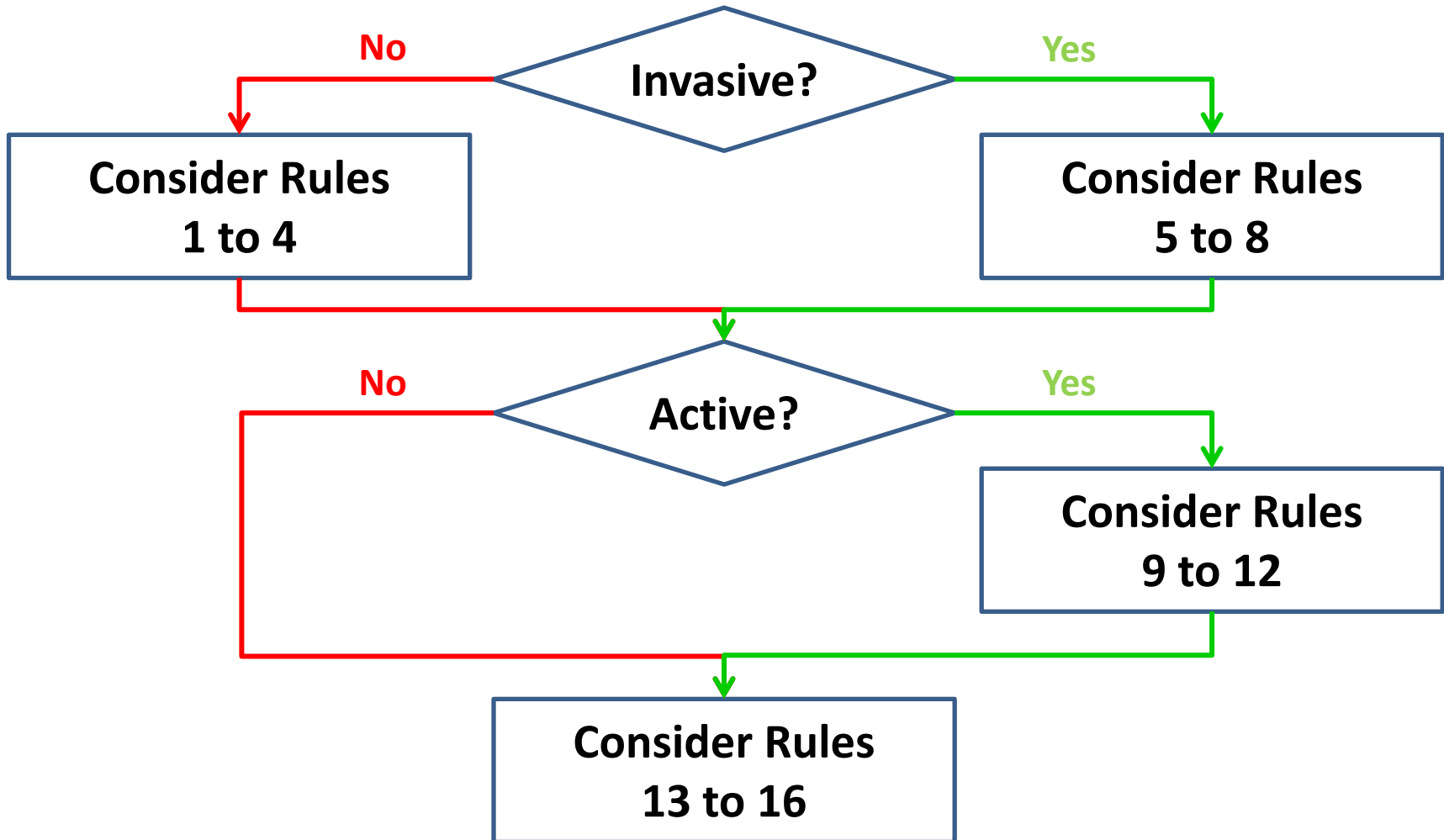
Classification of General Medical Devices



- All classification rules in **Technical Reference TR-003** must be taken into consideration
- If **more than one rules** applies, the rule putting the device into the **highest class prevails**

<u>Non-invasive Devices</u> (Rules 1 to 4)	<u>Invasive Devices</u> (Rules 5 to 8)
<u>Active Devices</u> (Rules 9 to 12)	<u>Additional Rules</u> (Rules 13 to 16)

Classification of General Medical Devices



Classification Rules 1 to 4 (Non-invasive Medical Device)



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Device will come into contact with injured skin?

Yes

Rule 1
Applicable

No

Device for channeling or storing blood, body liquids or tissues, liquids or gases for eventual delivery into the body?

Yes

Rule 2
Applicable

No

Device modifies the biological or chemical composition of blood, other body liquids, or other liquids for infusion into the body?

Yes

Rule 3
Applicable

No

Rules 1, 2 and 3 applicable?

No

Rule 4
Applicable



Classification Rules 5 to 8 (Invasive Medical Device)

Device is invasive with respect to body orifice?

Yes

Rule 5
Applicable

No (i.e. device is surgically invasive)

Device for **transient use**?

Yes

Rule 6
Applicable

No

Device for **short-term use**?

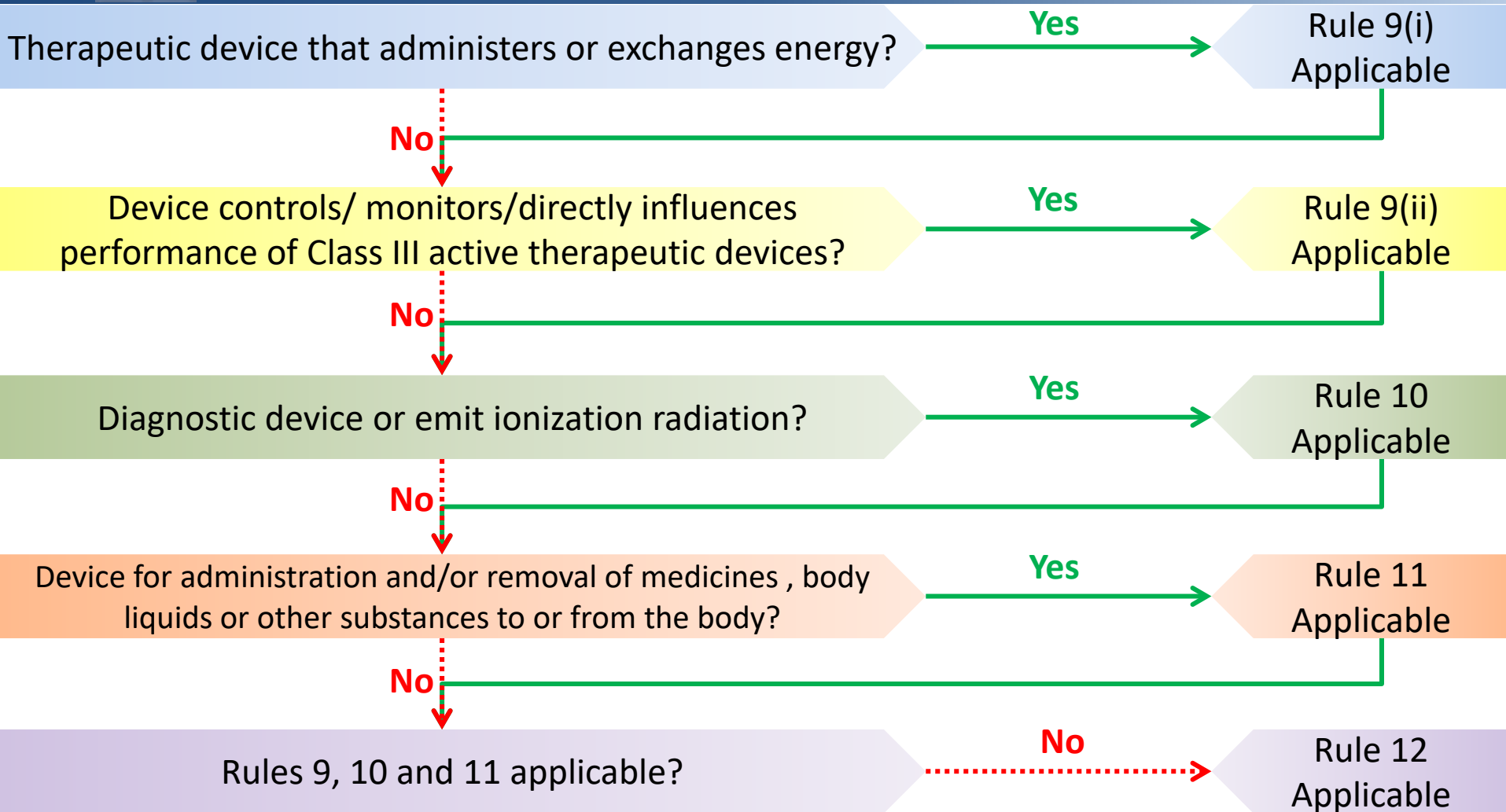
Yes

Rule 7
Applicable

No (i.e. device is an implantable device
or for long-term use)

Rule 8
Applicable

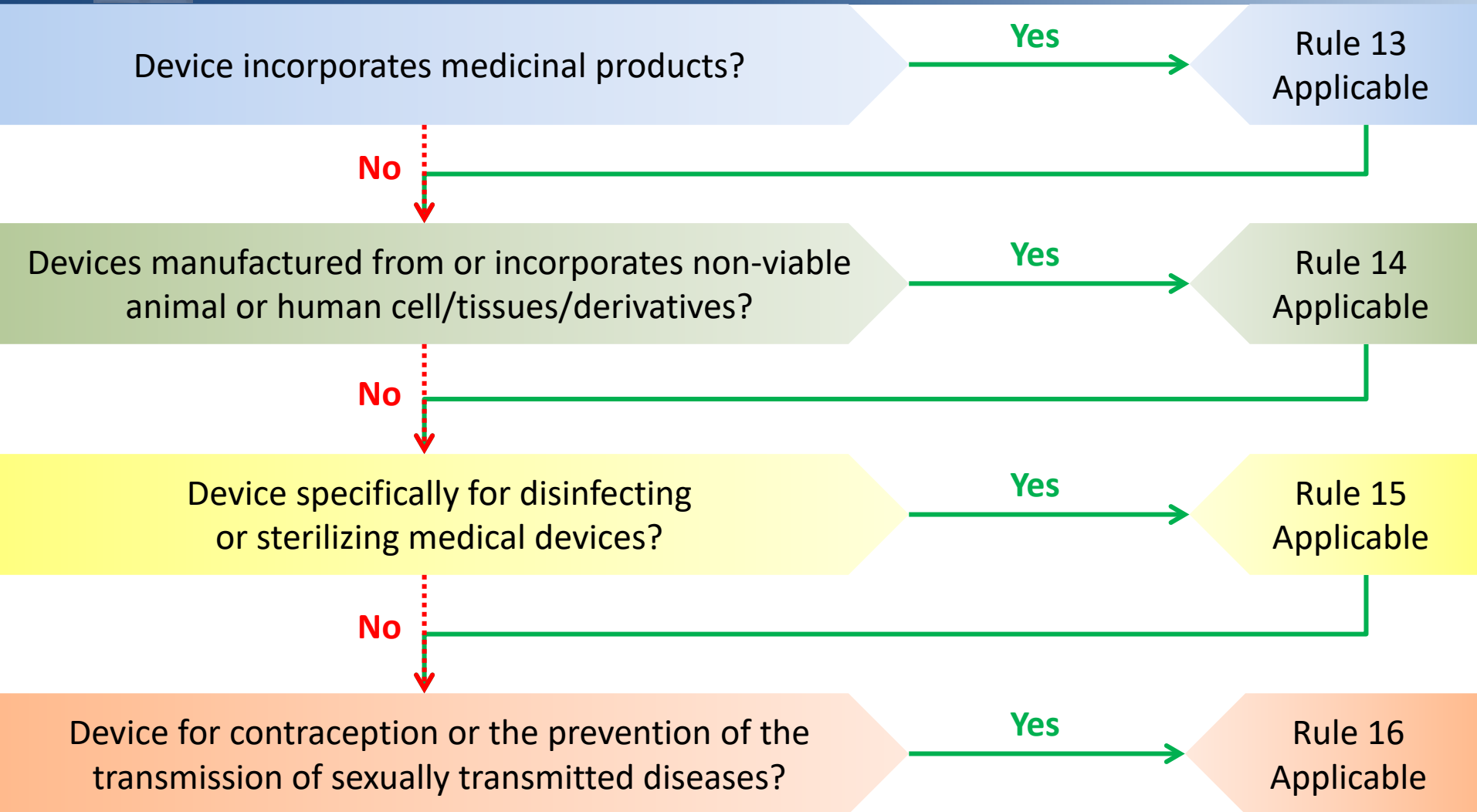
Classification Rules 9 to 12 (Active Medical Device)



Classification Rules 13 to 16 (Additional Rules)



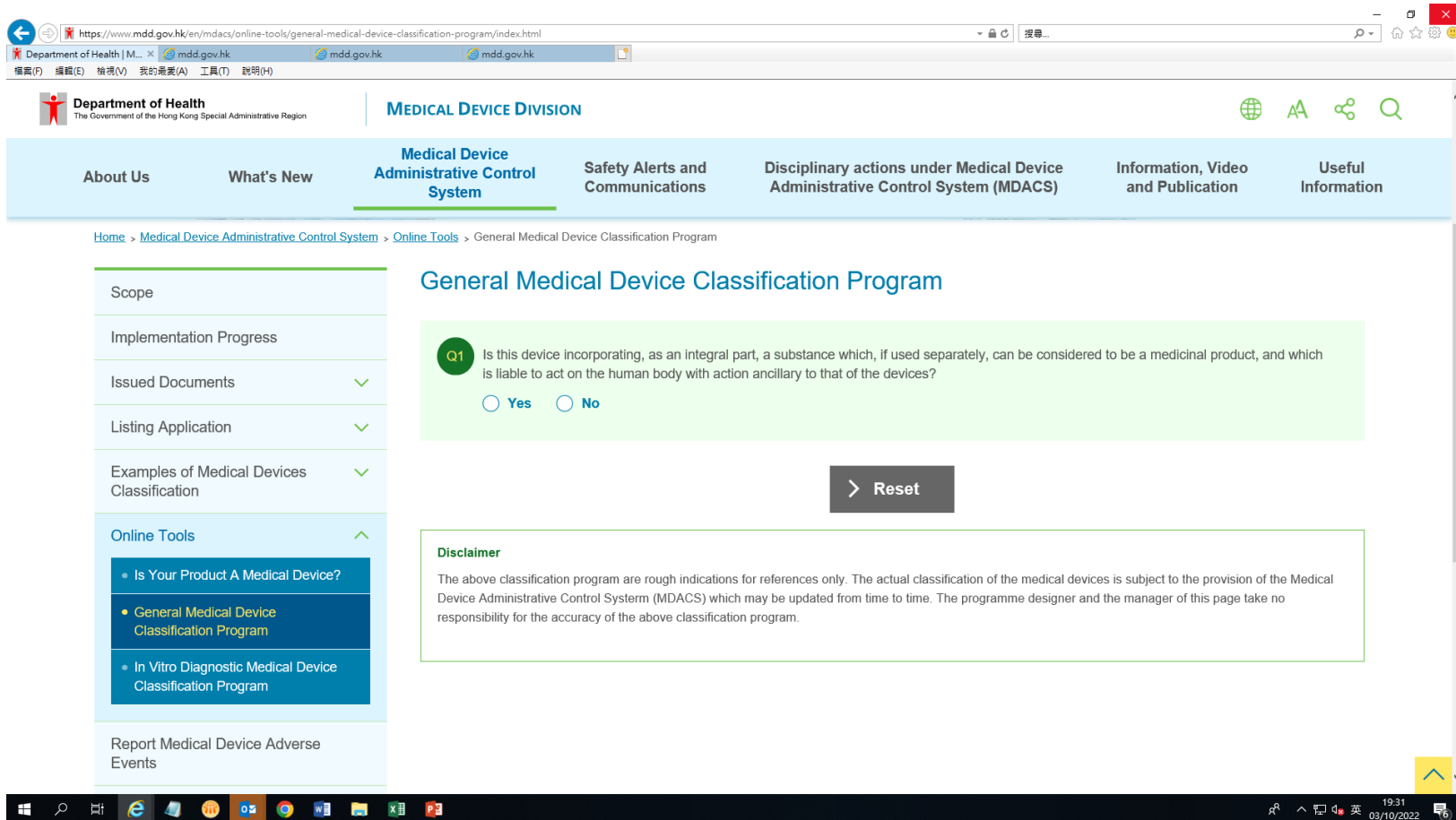
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Classification of General Medical Devices

Online classification program

<https://www.mdd.gov.hk/en/mdacs/online-tools/general-medical-device-classification-program/index.html>

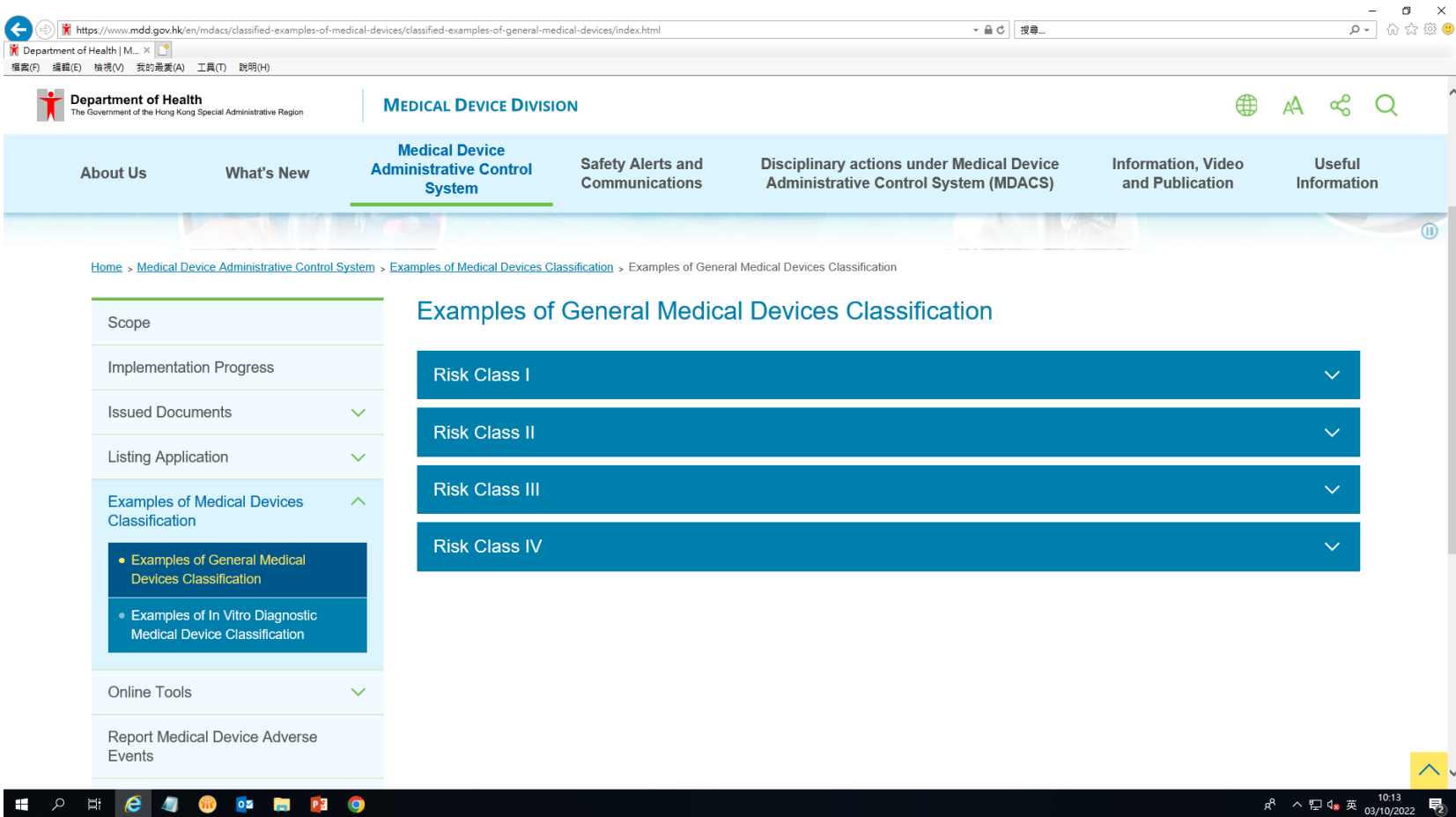


The screenshot shows a web browser displaying the Department of Health's Medical Device Division website. The page is titled "General Medical Device Classification Program". The navigation menu includes "About Us", "What's New", "Medical Device Administrative Control System", "Safety Alerts and Communications", "Disciplinary actions under Medical Device Administrative Control System (MDACS)", "Information, Video and Publication", and "Useful Information". The "Medical Device Administrative Control System" menu item is highlighted. The main content area features a sidebar with "Online Tools" including "Is Your Product A Medical Device?", "General Medical Device Classification Program", and "In Vitro Diagnostic Medical Device Classification Program". The main content area displays a question: "Q1 Is this device incorporating, as an integral part, a substance which, if used separately, can be considered to be a medicinal product, and which is liable to act on the human body with action ancillary to that of the devices?" with radio buttons for "Yes" and "No". A "Reset" button is visible below the question. A disclaimer is provided at the bottom of the main content area.

Classification of General Medical Devices

Examples of Classified General Medical Devices

<https://www.mdd.gov.hk/en/mdacs/classified-examples-of-medical-devices/classified-examples-of-general-medical-devices/index.html>



The screenshot displays the website for the Medical Device Division of the Department of Health. The page is titled "Examples of General Medical Devices Classification" and is part of the "Medical Device Administrative Control System" section. The navigation menu includes "About Us", "What's New", "Medical Device Administrative Control System", "Safety Alerts and Communications", "Disciplinary actions under Medical Device Administrative Control System (MDACS)", "Information, Video and Publication", and "Useful Information". The main content area features a sidebar with a table of contents and a main section with four expandable cards for Risk Class I, Risk Class II, Risk Class III, and Risk Class IV. The sidebar table of contents includes: Scope, Implementation Progress, Issued Documents (checked), Listing Application (checked), Examples of Medical Devices Classification (expanded), Online Tools (checked), and Report Medical Device Adverse Events. The expanded "Examples of Medical Devices Classification" section contains two items: "Examples of General Medical Devices Classification" (selected) and "Examples of In Vitro Diagnostic Medical Device Classification".

Category	Status
Scope	
Implementation Progress	
Issued Documents	✓
Listing Application	✓
Examples of Medical Devices Classification	^
• Examples of General Medical Devices Classification	
• Examples of In Vitro Diagnostic Medical Device Classification	
Online Tools	✓
Report Medical Device Adverse Events	

- Examples of General Medical Devices Classification
- Examples of In Vitro Diagnostic Medical Device Classification

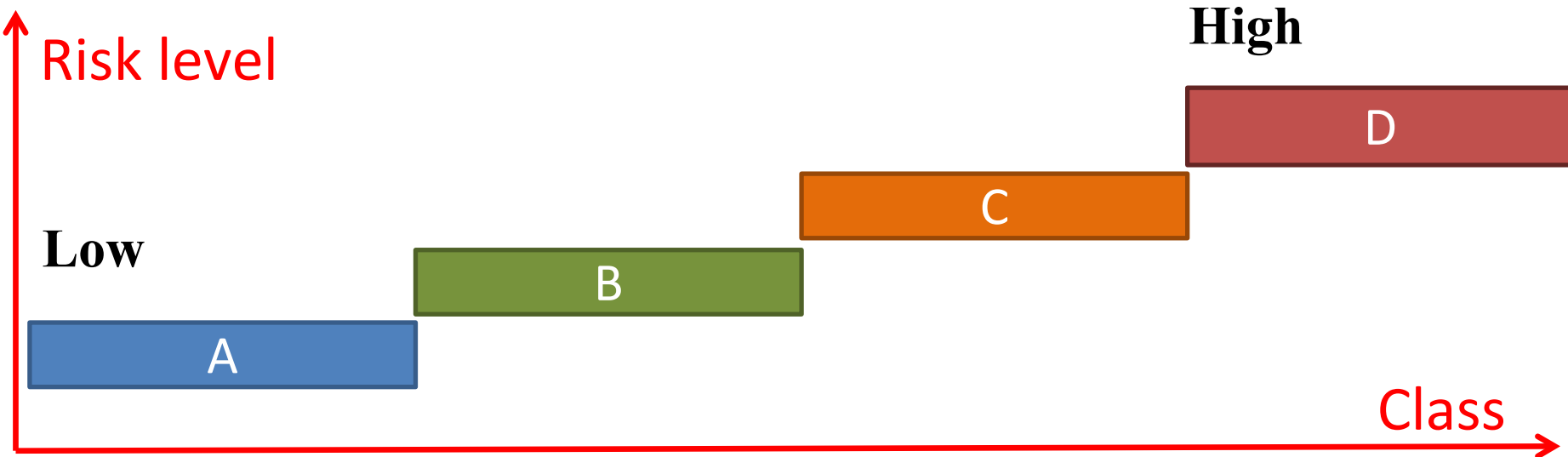


- ◆ Listing of IVD Medical Devices
 - Classification of IVD Medical Devices



Classification of IVD Medical Device

- Classified into **4 classes** according to the **risk**
 - ◆ Class A – Lowest risk
 - ★ ◆ **Class D – Highest risk**
- The level of control would be **proportionate to** the degree of risk classified for the medical devices



Classification of IVD Medical Device



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Class	Individual Risk	Public Health Risk
D	High	High
C	High	Moderate
B	Moderate	Low
A	Low	Low

Classification of IVD Medical Devices



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- All classification rules in Technical Reference TR-006 must be taken into consideration
- If more than one rules applies, the rule putting the device into the highest class prevails

Classification of IVD Medical Devices



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Rule 1 => Class D

- To detect the presence of, or exposure to, a **transmissible agent** in blood, blood components, blood derivatives, cells, tissues or organs or any of their derivatives, in order to assess their suitability for **transfusion** or **transplantation** or **cell administration**, or
- To detect the presence of, or exposure to, a **transmissible agent** that causes a **life-threatening** disease with a **high or suspected high risk of propagation**
 - ◆ Examples: Tests to detect infection by HCV, HIV, HTLV

Rule 2

- To be used for **blood grouping, or to determine foeto-maternal blood group incompatibility, or tissue typing** to ensure the **immunological compatibility** of blood, blood components, cells, tissues or organs that are intended for **transfusion or transplantation or cell administration** are **Class C** (e.g. HLA), **except** when intended to determine the presence of the antigen or antibody for any of the following markers:
ABO system [A (ABO1), B (ABO2), AB (ABO3)], **Rhesus System** [RH1 (D), RH2 (C), RH3 (E), RH4 (c), RH5 (e), and weak or partial Rh (D)], **Kell System** [Kel1 (K)], **Kidd System** [JK1 (Jka), JK2 (Jkb)] **and Duffy System** [FY1 (Fya), FY2 (Fyb)], in which case they are **Class D**.

Rule 3

- IVDMDs are **Class C** if they are intended for use:
 - in detecting the presence of, or exposure to, a **sexually transmitted agent**
 - ◆ Examples: Sexually transmitted diseases, such as *Chlamydia trachomatis*, *Neisseria gonorrhoeae*.
 - in detecting the presence **in cerebrospinal fluid or blood** of an **infectious agent** with a risk of **limited propagation**
 - ◆ Examples: *Neisseria meningitidis* or *Cryptococcus neoformans*.

Rule 3 (continued)

- IVDMDs are **Class C** if they are intended for use:
 - in detecting the presence of **an infectious agent**, if there is a significant risk that an erroneous result would cause **death or severe disability** to the individual, foetus or embryo being tested or to the individual's offspring
 - ◆ Examples: Diagnostic assay for CMV, *Chlamydia pneumoniae*, Methycillin Resistant *Staphylococcus aureus*, Zika

Rule 3 (continued)

- IVDMDs are **Class C** if they are intended for use:
 - in determining **infective disease status or immune status**, and where there is a risk that an erroneous result will lead to a patient management decision resulting in **an imminent life-threatening situation or severe disability** for the patient or for the patient's offspring
 - ◆ Examples: Enteroviruses, CMV and HSV in transplant patients

Rule 3 (continued)

- IVDMDs are **Class C** if they are intended for use:
 - in **pre-natal screening** of women in order to determine their **immune status** towards transmissible agents
 - ◆ Examples: Immune status tests for Rubella or Toxoplasmosis
 - in **human genetic testing**
 - ◆ Examples: Huntington's Disease, Cystic Fibrosis

Rule 3 (continued)

- IVDMDs are **Class C** if they are intended for use:
 - in screening for **selection of patients for selective therapy and management** as companion diagnostics (CDx)
 - ◆ Examples: Devices intended to detect antibodies against a specific medicinal product during the course of treatment, Devices intended for the qualitative detection of ALK protein in FFPE NSCLC tissue, intended as an aid in identifying patients eligible for treatment with crizotinib or ceritinib, and Devices intended to identify defined EGFR mutations in order to administer the tyrosine-kinase inhibitor dacomitinib for the treatment of adult patients with locally advanced or metastatic NSCLC and EGFR-activating mutations

Rule 3 (continued)

- IVDMDs are **Class C** if they are intended for use:
 - to be used for **disease staging**, where there is a risk that an erroneous result would lead to a patient management decision resulting in **a life-threatening situation** for the patient or for the patient's offspring
 - ◆ Examples: Brain type natriuretic peptide, and Devices intended for staging of ELF for detecting the following markers: hyaluronic acid, procollagen III amino terminal peptide, tissue inhibitor or metalloproteinase

Rule 3 (continued)

- IVDMDs are **Class C** if they are intended for use:
 - in **screening, diagnosis or staging** of cancer
 - ◆ Examples: PSA, CEA, and CA 125
 - to **monitor levels of medicines, substances or biological components**, when there is a risk that an erroneous result will lead to a patient management decision resulting in an **immediate life-threatening situation** for the patient or for the patient's offspring
 - ◆ Examples: Troponin, Cyclosporin, Prothrombin time testing

Rule 3 (continued)

- IVDMDs are **Class C** if they are intended for use:
 - in the **management of patients** suffering from a **life-threatening infectious disease**
 - ◆ Examples: HBV monitoring marker, HCV viral load, HIV Viral Load and HIV and HCV geno- and subtyping
 - in **screening for congenital disorders in the foetus or embryo**
 - ◆ Examples: Spina Bifida or Down Syndrome, Glucose-6-Phosphate Dehydrogenase Deficiency, and Tay-Sachs Disease

Rule 3 (continued)

- IVDMDs are **Class C** if they are intended for use:
 - in **screening for congenital disorders** in **new-born babies** where failure to detect and treat such disorders could lead to **life-threatening situations or severe disabilities**
 - ◆ Examples: Beta-thalassaemia, Biotinidase Deficiency

Rule 4

- IVDMDs intended for **self-testing or near patient testing** are classified as **Class C**,

except those devices from which **the result is not determining a critical situation**, in which case they are classified under **Class B** by Rule 6, and those devices which are classified under **Class D** by Rule 1 and/or Rule 2.

Near patient (testing): testing performed outside a laboratory environment by a healthcare professional not necessarily a laboratory professional, generally near to, or at the side of, the patient

Rule 4 (continued)

- Example for self-testing Class C: Blood glucose monitoring.
- Example for near patient testing Class C: Blood glucose monitoring.
- Example for self-testing or near patient testing Class D: Rapid test for detection of HIV.
- Example for near patient testing Class D: Pre-transfusion ABO compatibility test card intended to be used at the recipients' bedside as precaution against ABO-incompatible transfusion.
- Examples for self-testing Class B: Pregnancy self-test, Fertility testing, Urine test strips.
- Example for near patient testing Class B: Quantitative test for haemoglobin as an aid in diagnosing iron deficiency.

Classification of IVD Medical Devices



Rule 5 => Class A

■ The following IVDMDs are Class A:

- Products for general laboratory use, or accessories which possess no critical characteristics, **intended by the manufacturer** to make them suitable for in vitro diagnostic procedures **related to a specific examination**
 - ◆ Examples: Buffer solutions, Washing solutions, Histological stains
- Instruments **intended by the manufacturer specifically** to be used for in vitro diagnostic procedures
 - ◆ Examples: Clinical chemistry analyser, Enzyme immunoassay analyser
- **Specimen receptacles**
 - ◆ Examples: Plain urine cup, Microbiological specimen collection devices

Classification of IVD Medical Devices



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Rule 6 => Class B

■ IVDMDs **not covered in Rules 1 through 5** are Class B

- ◆ Examples: Blood gases, Helicobacter pylori test, Physiological markers such as hormones, vitamins, enzymes, metabolic markers, Specific IgE assays, Coeliac disease markers, and Tests for Anti-Nuclear Antibody, SHBG, BUN, AST, ALP, Creatinine and HbA1c

Classification of IVD Medical Devices



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Rule 7 => Class B

- IVDMDs that are **controls without a quantitative or qualitative assigned value** are Class B
 - ◆ Examples: Urinalysis controls and Chemistry controls

Classification of IVD Medical Devices



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- Recommendations (TR-006, sec. 5)
 - ◆ Calibrators intended to be used with an IVD reagent should be placed in the same class as the IVD reagent
 - ◆ Stand alone control materials with quantitative or qualitative assigned values intended for one specific analyte or multiple analytes should be placed in the same class as the IVD reagent(s)

Classification of IVD Medical Devices

Online classification program for IVD medical devices

<https://www.mdd.gov.hk/en/mdacs/online-tools/in-vitro-diagnostic-medical-device-classification/index.html>



The screenshot displays the Medical Device Administrative Control System (MDACS) website. The header includes the Department of Health logo and navigation links. The main content area features a banner for the Medical Device Administrative Control System and a sidebar with various menu items. The central focus is the 'In Vitro Diagnostic Medical Device Classification Program' interface, which includes a question Q1: 'Is this a product for general laboratory use not manufactured, sold or represented for use in specified in vitro diagnostic applications?' with radio buttons for 'Yes' and 'No', and a 'Reset' button. A disclaimer is also visible at the bottom of the interface.

Department of Health
The Government of the Hong Kong Special Administrative Region

MEDICAL DEVICE DIVISION

About Us | What's New | **Medical Device Administrative Control System** | Safety Alerts and Communications | Disciplinary actions under Medical Device Administrative Control System (MDACS) | Information, Video and Publication | Useful Information

MEDICAL DEVICE ADMINISTRATIVE CONTROL SYSTEM

Home > Medical Device Administrative Control System > Online Tools > In Vitro Diagnostic Medical Device Classification Program

In Vitro Diagnostic Medical Device Classification Program

Q1 Is this a product for general laboratory use not manufactured, sold or represented for use in specified in vitro diagnostic applications?

Yes No

> Reset

Disclaimer
The result of above Medical Device Administrative Control System (MDACS) online tools are rough indications for references only. The actual classification of the medical devices is subject to the provision of the MDACS which may be updated from time to time. The developer and the web master of this page take no responsibility for the accuracy of the above online tool.

Scope
Implementation Progress
Issued Documents
Listing Application
Examples of Medical Devices Classification
Online Tools
• Is Your Product A Medical Device?
• General Medical Device Classification Program
• **In Vitro Diagnostic Medical Device Classification Program**
Report Medical Device Adverse Events

Classification of IVD Medical Devices

Classified Examples of IVD Medical Devices:

<https://www.mdd.gov.hk/en/mdacs/classified-examples-of-medical-devices/classified-examples-of-in-vitro-diagnostic-medical/index.html>



The screenshot shows the Department of Health Medical Device Division website. The main navigation bar includes: About Us, What's New, Medical Device Administrative Control System (highlighted), Safety Alerts and Communications, Disciplinary actions under Medical Device Administrative Control System (MDACS), Information, Video and Publication, and Useful Information. The main content area features a large banner for the 'MEDICAL DEVICE ADMINISTRATIVE CONTROL SYSTEM'. Below the banner, a breadcrumb trail reads: Home > Medical Device Administrative Control System > Examples of Medical Devices Classification > Examples of In Vitro Diagnostic Medical Device Classification. A left-hand sidebar contains a menu with items: Scope, Implementation Progress, Issued Documents, Listing Application, Examples of Medical Devices Classification (expanded to show 'Examples of General Medical Devices Classification' and 'Examples of In Vitro Diagnostic Medical Device Classification'), Online Tools, Report Medical Device Adverse Events, Application for Inclusion into Mailing List, and Search Database. The main content area is titled 'Examples of In Vitro Diagnostic Medical Device Classification' and contains a 'Remarks' section with four numbered points. Below the remarks is a search bar with a 'Search' button and a 'Reset' button. A list of risk classes is shown on the right: Risk Class A, Risk Class B, Risk Class C, and Risk Class D, each with a dropdown arrow.

Department of Health
The Government of the Hong Kong Special Administrative Region

MEDICAL DEVICE DIVISION

About Us What's New **Medical Device Administrative Control System** Safety Alerts and Communications Disciplinary actions under Medical Device Administrative Control System (MDACS) Information, Video and Publication Useful Information

MEDICAL DEVICE ADMINISTRATIVE CONTROL SYSTEM

Home > Medical Device Administrative Control System > Examples of Medical Devices Classification > Examples of In Vitro Diagnostic Medical Device Classification

Examples of In Vitro Diagnostic Medical Device Classification

Remarks:

1. Local Responsible Person (LRP) may apply their general medical devices under risk class II/III/IV and in vitro diagnostic medical devices under risk class B/C/D for listing under the Medical Device Administrative Control System (MDACS). For details on application for listing, please refer to [Medical Device Listing Application](#).
2. The actual classification of a particular device must be considered individually, taking account of its design and use intended by the manufacturer. The above examples of medical devices are for reference only. Please refer to "[Classification of General Medical Devices](#)" (Technical Reference TR-003) and "[Classification of In Vitro Diagnostic Medical Devices](#)" (Technical Reference TR-006) for details.
3. Where a medical device has features that place it into more than one class, classification should be based on the highest class indicated.
4. If there is any inconsistency or ambiguity between the English version and the Chinese version, the English version shall prevail.

* AMDNS = Asian Medical Device Nomenclature System

Please enter keyword(s)

- Risk Class A
- Risk Class B
- Risk Class C
- Risk Class D

◆ Listing of Medical Devices

□ Preparation of Application Documents





Preparation of Application Documents



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- **Requirements, application procedures, guidance** for completing the application form and information required for application for listing of MDs, you may refer to:
 - the Guidance Notes for Listing Class II/III/IV Medical Devices (GN-02)
 - the Guidance Notes for Listing Class B/C/D In Vitro Diagnostic Medical Device (GN-06)

- Application Forms:
 - MD101 (GMD) / MD102 (IVDMD)
 - ❑ Part A: Particulars of Manufacturer
 - ❑ Part B: Particulars of Local Responsible Person
 - ❑ Part C: Particulars of the Device
 - ❑ Part D: Marketing Approvals and Essential Principles

Part A: Particulars of Manufacturer



Note	Part A: Particulars of Manufacturer		Encl.	
A001	Manufacturer's name*	<i>in English</i>	ABC Medical limited	
		<i>in Chinese</i>	N/A	
	Address of Head Office*:	<i>in English</i>	1342N, Derby Road, Arlington VA, USA	
		<i>in Chinese</i>	N/A	
	Post Code: VA 12345-6780		Country: USA	
	Contact person: John Smith		Telephone: 800.332.2354	
	Fax: 703.276.0314		E-mail: jsmith@abcmed.com	
	Website*: http://www.abcmedical.com			

* Manufacturer's name and address should be align with the information on ISO 13485 and marketing approval (s) (e.g. EC certificate).

Part A: Particulars of Manufacturer



A002	<input type="checkbox"/> Registered place of business in Hong Kong:		(A1) <input type="checkbox"/>
	<input type="checkbox"/> Copy of business registration certificate (with business registration number _____) is enclosed		
	Contact person:	Telephone:	
	Fax:	E-mail:	
A003	<u>Established Quality Management System</u> <input checked="" type="checkbox"/> Full quality management system covering device design, production, and post-production processes <input type="checkbox"/> Partial quality management system covering processes: _____		(A2) <input checked="" type="checkbox"/>
	Standards with which the system complies: <input checked="" type="checkbox"/> ISO13485:2003 or later edition (ISO13485: _____) <input checked="" type="checkbox"/> System certified by <u>CAB SYSTEMS LTD</u> (certification body), and a copy of the certificate is enclosed		
A004	Has the manufacturer designated any Local Responsible Person (LRP)? <i>(N.B. If the manufacturer has no registered place of business in Hong Kong, it must designate a legal person incorporated in Hong Kong or a natural or legal person with a registered place of business in Hong Kong as the LRP.)</i> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, manufacturer itself acts as the LRP		

Part B: Particulars of Local Responsible Person



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Note	Part B: Particulars of Local Responsible Person (LRP)			Encl.
B001	LRP's name*	<i>in English</i>	CARDIO SUPPLIES LTD.	(B1) <input checked="" type="checkbox"/>
		<i>in Chinese</i>	心臟儀器供應有限公司	
	Address in Hong Kong (Please give the registered place of business, if any)*	<i>in English</i>	32/F., METROPOLITAN CENTRE, 123 MERRY STREET, CAUSEWAY BAY, HONG KONG	
		<i>in Chinese</i>	香港銅鑼灣喜樂街123號都市中心32樓	
	Contact person: CHAN TAI-MAN		Telephone: 2800 0000	
	Position: General Manager		Email: tchan@cardio.com.hk	
	Contact telephone for public enquiries * : 2000 0000		Fax : 2900 0000	
Mobile telephone for urgent use (24 hours) : 9000 0000				
<u>Business Registration</u>				
<input checked="" type="checkbox"/> Copy of business registration certificate (with business registration number: <u>BR123467</u>) is enclosed				
<input type="checkbox"/> Not applicable				
B002	Date designated as LRP by the manufacturer: <u>30 June 2010</u>			(B2) <input checked="" type="checkbox"/>
	<input checked="" type="checkbox"/> Manufacturer's designation letter is enclosed			
B003	<u>Established Quality Management System</u>			(B3) <input checked="" type="checkbox"/>
	<input checked="" type="checkbox"/> ISO9001 <input type="checkbox"/> ISO13485 <input type="checkbox"/> None <input checked="" type="checkbox"/> System certified by <u>ABC Agency</u> (certification body), and a copy of the certificate is enclosed			

Part B: Particulars of Local Responsible Person



B004	<p><u>Documented Procedures Established and Maintained</u></p> <p><input checked="" type="checkbox"/> The applicant <u>does not</u> have any medical device listed under the Medical Device Administrative Control System</p> <p><input checked="" type="checkbox"/> The procedures indicated in items (i) to (vi) below are enclosed</p> <p>(i) Keeping of transaction records (ii) Management of product recalls and field safety notices (iii) Handling of reportable adverse incidents in Hong Kong (iv) Tracking of specific medical devices (if applicable) (v) Complaints handling (vi) Maintenance and service arrangements (if applicable)</p> <p><input type="checkbox"/> The applicant already has one or more medical device listed under the Medical Device Administrative Control System (LRP number: _____)</p> <p><input type="checkbox"/> There is no change to the procedures indicated in items (i) to (vi). (<i>Please go to B005</i>); OR</p> <p><input type="checkbox"/> The procedures indicated in items (i) to (vi) have been updated and enclosed.</p>	(B4) <input checked="" type="checkbox"/>
B005	<p><input checked="" type="checkbox"/> The LRP is also an importer and/or distributor of the device named in Part C</p> <p>Listing No. of Importer (if applicable): <u>IMP0123456</u></p> <p>Listing No. of Distributor (if applicable): <u>DIS0345678</u></p>	
B006	<p><input type="checkbox"/> The device named in Part C is currently a listed device (under another LRP), with Listing No. _____.</p>	

Part B: Particulars of Local Responsible Person



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■ Designation Letter

(Enclosure B2)

(GN-01 Appendix 5)

- ✓ Manufacturer's name and address
- ✓ LRP's name and address
- ✓ Descriptions of the device(s)
- ✓ Manufacturer's signature and official stamp (if applicable)
- ✓ Date

<Name of manufacturer>
<Address of manufacturer>

Date:

<Name of LRP>
<Address of LRP>

Dear Sirs,

Re: Designation of Local Responsible Person for <Brief description of devices>

In accordance with the requirements of the Medical Device Administrative Control System (MDACS) of the Hong Kong Special Administrative Region, we hereby designate you, <Name of LRP>, as the Local Responsible Person in respect of the following devices:

<Descriptions of devices including their makes, models, types, and other relevant identifiers>

This designation will require you to comply with, with immediate effect, all the requirements (including but not limited to all the pre-market and post-market requirements) that the MDACS imposes on you as the Local Responsible Person in respect of the above-mentioned devices. We undertake to provide you timely with all the items (documents, information, device and labelling samples etc.) and support that must necessarily originate from us, and which you will need in order to apply for the listing of the afore-mentioned devices and to fulfil your obligations under the MDACS. These items and support include but are not limited to:

- (i) details of design related to the safety and performance of the device;
- (ii) a copy of documents as required in the application form for the listing of devices;
- (iii) any subsequent changes and modifications;
- (iv) details of any recalls, alerts, and related preventive and corrective actions; and
- (v) investigations and reports related to adverse incidents and post market surveillance.

Yours faithfully,

(signature)

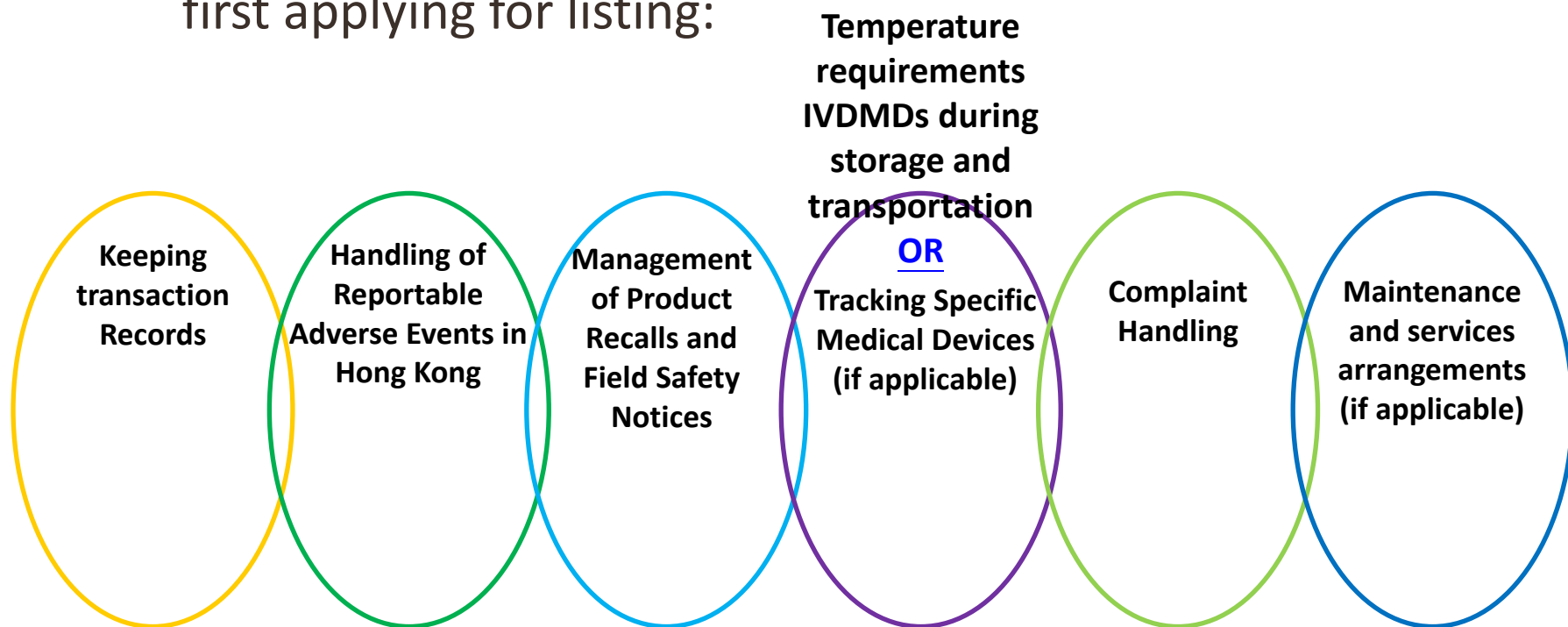
(name and title of official signing this letter)

(official chop (if any) of the manufacturer)

Part B: Particulars of Local Responsible Person

■ Documented Procedure of LRP (Enclosure B4)

- The documented procedures of LRP below [B004 items (i) to (vi)] must be submitted with the application form when first applying for listing:



Part C: Particulars of the Device



Note	Part C: Particulars of the Device		Encl.
C001	Make*	<i>in English</i>	ABC Medical
		<i>in Chinese</i>	N/A
	Brand Name*	<i>in English</i>	VGOOD
		<i>in Chinese</i>	N/A
	Model*	<i>in English</i>	PMS
		<i>in Chinese</i>	N/A
C002	<input type="checkbox"/> A single medical device <input type="checkbox"/> A medical device family <input type="checkbox"/> A medical device series <input checked="" type="checkbox"/> A medical device system For a medical device family, medical device series or a medical device system, please provide the additional information required in a format similar to MDS-01. <input type="checkbox"/> Additional information similar to <u>MDS-01</u> attached		(C1) <input type="checkbox"/>
C003	Description of the device: <i>(Please enter the appropriate AMDNS term. If none of the terms in AMDNS appear appropriate, enter a short description of the device.)</i> MONITORING SYSTEMS, PHYSIOLOGIC AMDNS Code: 12636 Other Codes <i>(Please enter if known):</i>		
C004	Other common descriptions of the device: PATIENT MONITORING SYSTEM		

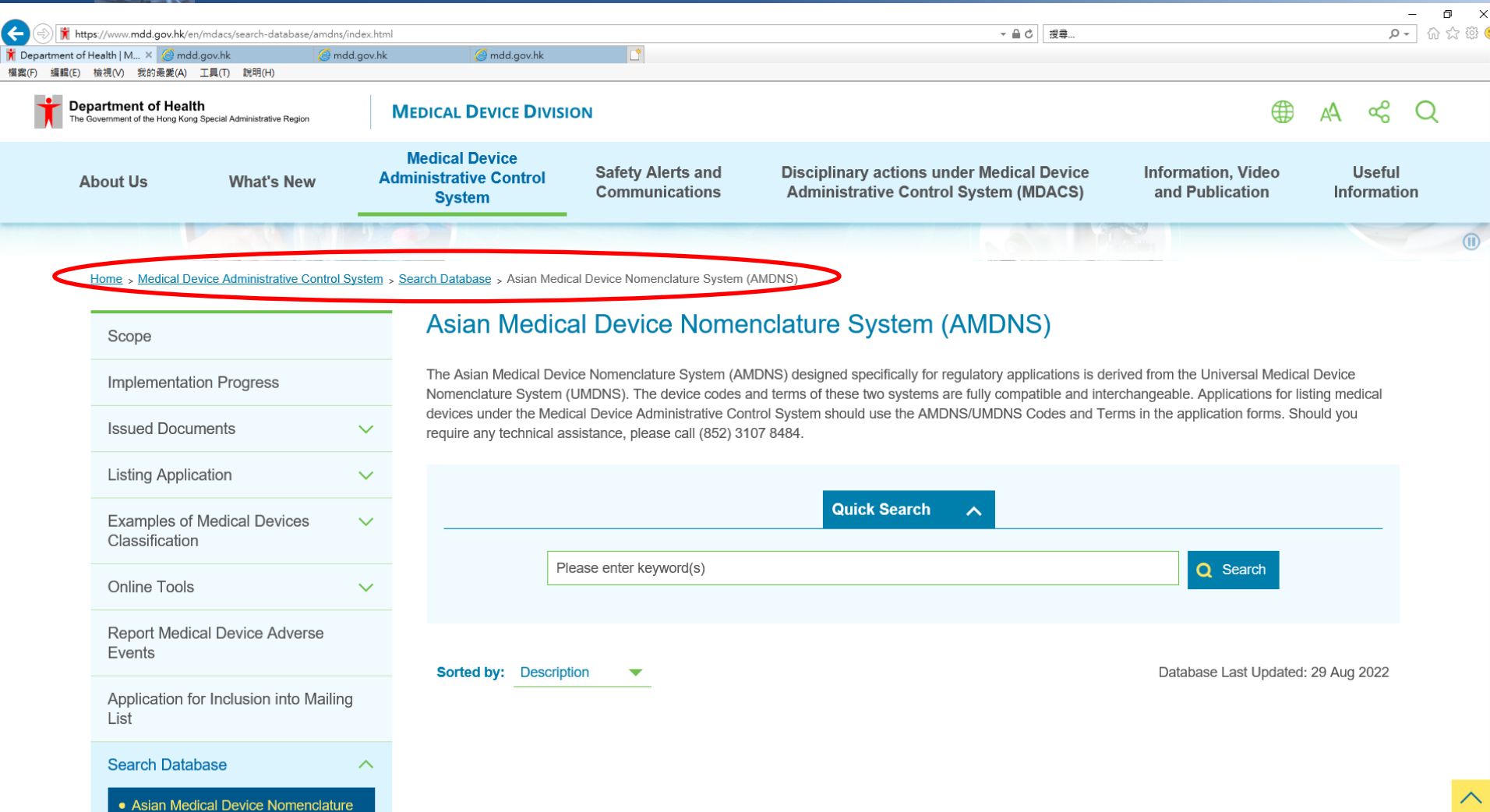
See GN-02, Section 9

Please provide this information as far as possible

IVDMD (Form: MD102)

C002	An IVDMD may include reagents, calibrators, control materials, specimen receptacles, software and related instruments or apparatus or other articles. Please specify all the component(s) of this IVDMD that apply. <input type="checkbox"/> Reagent(s) <input type="checkbox"/> Control material(s) <input type="checkbox"/> Calibrator(s) <input type="checkbox"/> Others (Please specify) _____ In addition, please provide the additional required information of the IVDMD in the following space, if any. Use separate sheets if required. _____
------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Part C: Particulars of the Device



The screenshot shows a web browser displaying the Medical Device Administrative Control System (MDACS) search database. The breadcrumb navigation path is circled in red: [Home](#) > [Medical Device Administrative Control System](#) > [Search Database](#) > Asian Medical Device Nomenclature System (AMDNS).

Asian Medical Device Nomenclature System (AMDNS)

The Asian Medical Device Nomenclature System (AMDNS) designed specifically for regulatory applications is derived from the Universal Medical Device Nomenclature System (UMDNS). The device codes and terms of these two systems are fully compatible and interchangeable. Applications for listing medical devices under the Medical Device Administrative Control System should use the AMDNS/UMDNS Codes and Terms in the application forms. Should you require any technical assistance, please call (852) 3107 8484.

Quick Search ^

Please enter keyword(s)

Sorted by: [Description](#) ▾

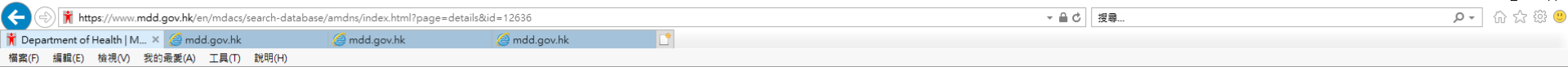
Database Last Updated: 29 Aug 2022

Left sidebar menu items: Scope, Implementation Progress, Issued Documents, Listing Application, Examples of Medical Devices Classification, Online Tools, Report Medical Device Adverse Events, Application for Inclusion into Mailing List, Search Database, Asian Medical Device Nomenclature.

Part C: Particulars of the Device



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Department of Health



MEDICAL DEVICE DIVISION



About Us

What's New

Medical Device
Administrative Control
System

Safety Alerts and
Communications

Disciplinary actions under Medical Device
Administrative Control System (MDACS)

Information, Video
and Publication

Useful
Information

Online Tools

Report Medical Device Adverse
Events

Application for Inclusion into Mailing
List

Search Database

- Asian Medical Device Nomenclature System (AMDNS)
- The List of Medical Devices
- The List of Local Responsible Person (LRP)
- The List of Importers
- The List of Distributors
- The List of Local Manufacturers
- The List of Conformity Assessment Bodies (CAB)

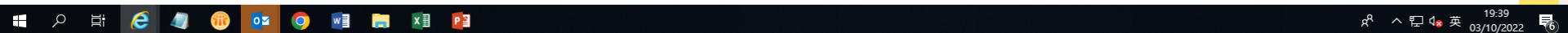
Database Last Updated: 29 Aug 2022

Descriptions / Terms without the corresponding Codes are not product identifiers.

Search Result Details Table

Code	12636
Description / Term	Monitoring Systems, Physiologic
Definition	Monitoring systems designed for continuous assessment of vital physiologic parameters. These systems usually include a central station monitor that receives, consolidates, and displays the information and a set of monitors that are deployed near the patient (bedside monitors) to provide the required data from each patient; many systems also include portable radio transmitters (with appropriate sensors), receivers, and antennas (telemetry systems) to allow monitoring of ambulatory patients. Physiologic monitoring systems are used to evaluate and observe trends in patients in compromised or unstable conditions; they are used mostly in intermediate care units and in general medical and surgical areas. Additionally, some systems can assess conditions that are vital for patient life (e.g., anesthetic gas concentrations).
Related Terms	17223 , 18117 , 20170 , 20770 , 22860 , 23177 , 26708 , 26721 , 26724 , 27872 , 33515 , 34411
Specialty Categories	Anesthesiology, Cardiology, Intensive Care Unit, Cardiothoracic Surgery, Emergency Medicine, Healthcare Information Technology, Internal Medicine, Nursing Services, Physical Therapy, Perfusion, Radiology, Rehabilitation, Pulmonary Medicine, Respiratory Care Services, Surgery

[Back](#)



Part C: Particulars of the Device



C005	Intended use of the device*	<i>in English</i>	A physiologic monitoring system intended for monitoring, recording and alarming of multiple physiological parameters depending on which modules are equipped. It is indicated for use in acute care settings in health care facilities by health care professionals whenever there is a need for monitoring physiological parameters of adult, paediatric or neonatal patients.
		<i>in Chinese</i>	病人監護儀用以監察及記錄病人的多項生理參數（視乎裝設哪些元件而定），並在適當時發出警報。醫護人員在醫護設施的急症護理環境中，如需監護病患成年人，兒童或初生嬰兒的生理參數，版刻使用該監護儀

Part C: Particulars of the Device



C006	<p>Accessories and parts covered by the Marketing Approvals and Essential Principles Conformity Checklist under Note D001 of Part D. <i>Please provide its identifier(s) (e.g. part number) and description using a format similar to MDS-02.</i></p> <p><input checked="" type="checkbox"/> Additional information similar to MDS-02 attached</p>	(C1) <input checked="" type="checkbox"/>
C007	<p>1. The device</p> <p>Yes No</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> incorporates, as an integral part, a medicinal product which could act on the human body with action ancillary to that of the device</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> is manufactured from or incorporating human cells/tissues/derivatives</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> is manufactured from or incorporating animal cells/tissues/derivatives</p>	

IVDMD (Form: MD102)

	<p>2. The device</p> <p><input type="checkbox"/> is a non-active device (<i>please go to section 3</i>)</p> <p><input checked="" type="checkbox"/> is an active device</p> <p><input type="checkbox"/> intended to control or monitor the performance of devices in Class III, or intended directly to influence of such devices</p> <p><input checked="" type="checkbox"/> intended for monitoring of vital physiological parameters, the nature of variations is such that it could result in injury to the patient</p> <p><input checked="" type="checkbox"/> intended for diagnosing in clinical situations where there is an immediate danger</p> <p><input type="checkbox"/> intended to administer or exchange energy to or from the patient in a potentially hazardous way including ionizing radiation</p> <p><input type="checkbox"/> none of the above</p>	
--	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--

C006	<p>Accessories and parts covered by the Marketing Approvals and Essential Principles under Note D001 of Part D. (<i>Please provide its identifier(s) (e.g. part number) and description</i>). (<i>Use separate sheet if required</i>):</p>
C007	<p>The device</p> <p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/> is manufactured from or incorporating human cells/tissues/derivatives</p> <p><input type="checkbox"/> <input type="checkbox"/> is manufactured from or incorporating animal cells/tissues/derivatives</p> <p>If the IVDMD contains substance(s) from human or animal origin, please state the location of such descriptions inside the submitted documentation, e.g. the Instruction for Use, or the additional information provided separately.</p>

Part C: Particulars of the Device



C007	<p>3. The device</p> <ul style="list-style-type: none"><input checked="" type="checkbox"/> is a non-invasive device<ul style="list-style-type: none"><input type="checkbox"/> comes into contact with injured skin (e.g. wound dressings) <i>(please complete section 4)</i><input checked="" type="checkbox"/> connected to an active medical device in Class II or a higher class<input type="checkbox"/> intended for channelling blood, or storing or channelling other body liquids, or for storing organs, parts of organs or body tissues<input type="checkbox"/> intended for modifying the biological or chemical composition of blood, other body liquids or other liquids intended for infusion into the body<input type="checkbox"/> none of the above<input type="checkbox"/> is an invasive device<ul style="list-style-type: none"><input type="checkbox"/> invasive with respect to body orifices (other than those surgically invasive)<input type="checkbox"/> intended to be connected to an active medical device in Class II or a higher class<input type="checkbox"/> intended for use in oral cavity, ear canal or nasal cavity<input type="checkbox"/> intended to supply energy in the form of ionizing radiation<input type="checkbox"/> intended to have biological effect or be wholly or mainly absorbed<input type="checkbox"/> intended to administer medicinal products by means of a delivery system and is potentially hazardous<input type="checkbox"/> intended for use in direct contact with the central nervous system or to<input type="checkbox"/> diagnose, monitor or correct a defect of the heart of central circulatory system through direct contact<input type="checkbox"/> intended to undergo chemical change in the body<input type="checkbox"/> none of the above <p>and is intended for <i>(please check the applicable item only)</i></p> <ul style="list-style-type: none"><input type="checkbox"/> transient use (< 60 mins)<input type="checkbox"/> short-term use (between 60 mins and 30 days)<input type="checkbox"/> long-term use (> 30 days)
------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Part C: Particulars of the Device



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	<p>4. The device is a wound dressing</p> <ul style="list-style-type: none"> <input type="checkbox"/> intended to be used as a mechanical barrier, for compression of wounds or for absorption of exudates (e.g. simple wound dressing; cotton wool) <input type="checkbox"/> intended to manage the microenvironment of wounds (e.g. non-medicated impregnated gauze dressings) <input type="checkbox"/> intended to be used principally with wounds which have breached the dermis and can only heal by secondary intent (e.g. dressings for chronic ulcerated wounds). <input type="checkbox"/> impregnated with medicinal products (e.g. medicated gauze dressings) 	
C008	<p>Class of the medical device: <input type="checkbox"/> Class II <input checked="" type="checkbox"/> Class III <input type="checkbox"/> Class IV</p> <p>Reasons for classifying the device as Class II/III/IV device: <i>It is an active device intended for monitoring of vital physiological parameters, where the nature of variations is such that it could result in immediate danger to the patient (Rule 10(i))</i></p>	
C009	<p><u>Manufacturing Site(s)</u> (Use separate sheet if required): (1) 1324N, Derby Road, Arlington, VA 12345-6789, USA (2) 1000 Butler Road, Plymouth Place, PA 12486-1248, USA</p>	(C1) <input checked="" type="checkbox"/>

IVDMD (Form: MD102)

C008	<p>Class of the IVDMD: <input type="checkbox"/> Class B <input type="checkbox"/> Class C <input type="checkbox"/> Class D</p>
	<p>Reasons for the classification:</p>
C009	<p><u>Manufacturing site(s)</u> (Use separate sheet if required):</p>

Part C: Particulars of the Device



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C010	<p><u>History of previous recalls, reportable adverse incidents, banning in other countries or post-market surveillance studies</u></p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes (Please check the appropriate boxes and provide details):</p> <p><input type="checkbox"/> Recalls completed or in progress</p> <p><input checked="" type="checkbox"/> Reportable adverse incidents bearing implications to the device</p> <p><input type="checkbox"/> The device banned previously in other countries</p> <p><input type="checkbox"/> Proactive post-market surveillance studies</p>	(C2) <input checked="" type="checkbox"/>
C011	<p><u>Usage</u></p> <p><input type="checkbox"/> The device is for single use</p> <p><input type="checkbox"/> The device is supplied as sterile product</p> <p><input type="checkbox"/> Disposal of used device or any part thereof (including any used accessories or consumables) requires special precautions.</p> <p><input type="checkbox"/> The device is intended to be used/operated by healthcare professionals only</p> <p><input type="checkbox"/> The device is intended to be used/operated by laypersons</p> <p><input type="checkbox"/> It is intended for self-use</p>	
C012	<p><u>Repair and Servicing</u></p> <p><input checked="" type="checkbox"/> The device requires regular servicing/testing/checking/calibration</p> <p><input checked="" type="checkbox"/> Repairs and servicing provided by the LRP or appointed party in Hong Kong</p> <p><input type="checkbox"/> All repairs and servicing performed in Hong Kong</p> <p><input checked="" type="checkbox"/> Part of the repairs and servicing performed in Hong Kong</p> <p><input checked="" type="checkbox"/> Technical support provided by the manufacturer</p>	

IVDMD (Form: MD102)

C010	<p><u>History of previous recalls, reportable adverse events, banning in other countries or post-market surveillance studies</u></p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes (Please check the appropriate boxes and provide details):</p> <p><input type="checkbox"/> Recalls completed or in progress</p> <p><input type="checkbox"/> Reportable adverse events bearing implications to the device</p> <p><input type="checkbox"/> The device banned previously in other countries</p> <p><input type="checkbox"/> Proactive post-market surveillance studies</p>	(C2) <input type="checkbox"/>
C011	<p><u>Usage</u></p> <p><input type="checkbox"/> The IVDMD is for single use</p> <p><input type="checkbox"/> The IVDMD is supplied as sterile product</p> <p><input type="checkbox"/> Disposal of used device or any part thereof (including any used accessories or consumables) requires special precautions.</p> <p><input type="checkbox"/> The device is intended to be used/operated by healthcare professionals only</p> <p><input type="checkbox"/> The device is intended to be used/operated by laypersons</p> <p><input type="checkbox"/> It is intended for self-use</p>	
C012	<p><u>Repair & Servicing</u></p> <p><input type="checkbox"/> The IVDMD requires regular servicing/testing/checking/calibration</p> <p><input type="checkbox"/> Repairs and servicing provided by the LRP or appointed party in Hong Kong</p> <p><input type="checkbox"/> All repairs and servicing performed in Hong Kong</p> <p><input type="checkbox"/> Part of the repairs and servicing performed in Hong Kong</p> <p><input type="checkbox"/> Technical support provided by the manufacturer , please specify: _____</p>	

Part C: Particulars of the Device



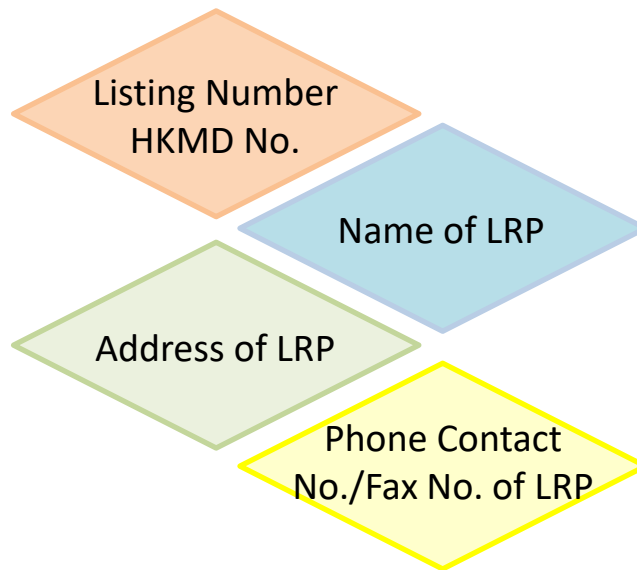
C013	<p>Labelling Requirements</p> <p>Instructions for use are available (Note: <u>Devices intended for self-use by consumers must be accompanied by instructions for use written in both English and Chinese</u>):</p> <p><input checked="" type="checkbox"/> in English <input type="checkbox"/> in Chinese</p> <p><input checked="" type="checkbox"/> A set of copies of device labelling is enclosed</p> <p><input checked="" type="checkbox"/> Electronic labelling is available: https://www.abcmmedical.com/vgood</p> <p><input checked="" type="checkbox"/> Sample of Special Listing Information is enclosed</p> <p>Please indicate where in the labelling the following information is given:</p> <p>(1) Indications for use of the device: <u>Pages 4 – 8 of the operator's manual</u></p> <p>(2) Contraindications against use of the device: <u>Pages 9 – 11 of the operator's manual</u></p> <p>(3) Cleaning, disinfection and/or sterilization procedures: <u>Pages 45 of the operator's manual</u></p> <p>(4) User precautions: <u>Pages 24 – 28 of the operator's manual</u></p> <p>(5) Disposal precautions: <u>N.A.</u></p>	(C3) <input checked="" type="checkbox"/>
C014	<p>Licensing Requirements</p> <p>The device is subject to provisions under the following ordinances and a copy of the required licence(s) is/are enclosed:</p> <p>Yes No</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Radiation Ordinance (Cap. 303)</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Pharmacy and Poisons Ordinance (Cap. 138)</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Antibiotics Ordinance (Cap. 137)</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Dangerous Drugs Ordinance (Cap. 134)</p>	(C4) <input type="checkbox"/>

Part C: Particulars of the Device



■ C013: Special Listing Information (See GN-01, sec. 4.4.13)

□ Special Listing Information Includes:



The Special Listing Information shall be provided on:

- (1) the outer packaging of the medical device, and/or
- (2) a document in which the Special Listing Information is printed, such as delivery note

Part C: Particulars of the Device



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C015	<p><u>Conformity Assessment</u></p> <p><input type="checkbox"/> MDACS Conformity Assessment Certificate issued by one of the Conformity Assessment Bodies recognized by MDD</p> <p>MDACS Conformity Assessment Body number: _____</p>	(C5) <input type="checkbox"/>
C016	<p><u>Safety and Risk Analysis</u></p> <p>International or national safety standards with which the device complies: <i>(1) IEC 60601-1:2005; (2) IEC 60601-1-2:2014; (3) IEC60601-1-8:2006; (4) IEC 60601-2-49:2011</i></p> <p><input checked="" type="checkbox"/> Risk analysis conducted: report or summary is enclosed</p> <p><input checked="" type="checkbox"/> Type test performed: report or test certificate is enclosed</p>	(C6) <input checked="" type="checkbox"/>
C017	<p><u>Clinical Evaluation</u></p> <p><input checked="" type="checkbox"/> Clinical investigation report of the device is enclosed</p> <p><input type="checkbox"/> Demonstration of equivalence to another device (equivalent device) where safety and efficacy of which are well established:</p> <p><input type="checkbox"/> Clinical investigation report of the equivalent device and a report of demonstration of equivalence are enclosed</p> <p><input type="checkbox"/> Report demonstrating full equivalence to a well established product is enclosed</p>	

IVDMD (Form: MD102)

C015	<p><u>Verification during IVDMD batch release (for Class D IVDMD only)</u></p> <p><input type="checkbox"/> Batch Verification by the Notified Body as the IVDMD is included in Annex II List A of European Council Directive 98/79/EC</p> <p><input type="checkbox"/> Others, please provide details _____</p>	(C5) <input type="checkbox"/>
C016	<p><u>Conformity Assessment</u></p> <p><input type="checkbox"/> MDACS Conformity Assessment Certificate issued by Conformity Assessment Bodies recognized by MDD.</p> <p>MDACS Conformity Assessment Body number: _____</p>	(C6) <input type="checkbox"/>
C017	<p><u>Performance and Risk Analysis</u></p> <p>Specifications, international or national standards with which the device complies: _____</p> <p><input type="checkbox"/> Risk analysis conducted: report or summary is enclosed.</p> <p><input type="checkbox"/> Type test performed: report or test certificate is enclosed</p>	(C7) <input type="checkbox"/>
C018	<p><u>Performance Evaluation</u></p> <p><input type="checkbox"/> Performance evaluation report of the IVDMD is enclosed</p> <p><input type="checkbox"/> Demonstration of equivalence to another IVDMD (equivalent IVDMD) or a published method of diagnosis where safety and efficacy of which are well established:</p> <p><input type="checkbox"/> Performance evaluation report of the equivalent IVDMD or a published method of diagnosis and a report of demonstration of equivalence are enclosed</p> <p><input type="checkbox"/> Report demonstrating full equivalence to a well established product is enclosed</p>	(C8) <input type="checkbox"/>

Part C: Particulars of the Device



- C015: Conformity Assessment Certificate (Appendix C5)
 - **Conformity Assessment Body (CAB)** means a body recognized by the MDD to engage in the performance of procedures for determining whether the device fulfills the relevant MDACS requirements
 - Recognized CABs:
 - ✓ BSI Assurance UK Limited (c/o BSI Pacific Limited)
 - ✓ SGS United Kingdom Limited (c/o SGS Hong Kong Limited)
 - ✓ TÜV SÜD Product Service GmbH (c/o TÜV SÜD Hong Kong)

Part C: Particulars of the Device



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MEDICAL DEVICE DIVISION



About Us

What's New

**Medical Device
Administrative Control
System**

Safety Alerts and
Communications

Disciplinary actions under Medical Device
Administrative Control System (MDACS)

Information, Video
and Publication

Useful
Information

Listing Application



Examples of Medical Devices
Classification



Online Tools



Report Medical Device Adverse
Events

Application for Inclusion into Mailing
List

Search Database



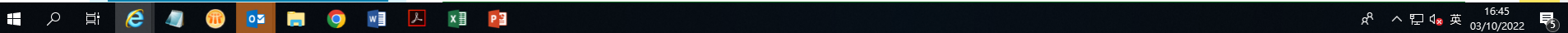
- Asian Medical Device Nomenclature System (AMDNS)
- The List of Medical Devices
- The List of Local Responsible Person (LRP)
- The List of Importers
- The List of Distributors
- The List of Local Manufacturers

Sorted by: [Certificate No.](#)

Database Last Updated: 26 Aug 2021



Name	Certificate No.	Address	Telephone Number	Scope of Recognition	Remarks
BSI Assurance UK Limited c/o BSI Pacific Limited	CAB07001	BSI Assurance UK Limited, BSI, Kitemark Court, Davy House, Knowlhill, Milton Keynes, MK5 8PP, United Kingdom c/o BSI Pacific Limited, 23/F, Cambridge House, Talkoo Place, 979 King's Road, Island East, Hong Kong	(852) 3149 3300	All general medical devices and all in vitro diagnostic medical devices (Quality Management System and Type Examination)	
SGS United Kingdom Limited c/o SGS Hong Kong Limited	CAB07002	SGS United Kingdom Limited, Unit 202B, Worle Parkway, Weston-super-Mare, Somerset, BS22 6WA, United Kingdom c/o SGS Hong Kong Limited, Units 303 and 305, 3/F, Building 22E, Phase 3, Hong Kong Science Park, Pak Shek Kok, N.T.	(852) 2334 4481	All general medical devices (Quality Management System and Type Examination)	
TÜV SÜD Product Service GmbH c/o TÜV SÜD Hong Kong	CAB09001	TÜV SÜD Product Service GmbH, Ridlerstrasse 65, 80339 München, Germany c/o TÜV SÜD Hong Kong, 3/F, West Wing, Lakeside 2, 10 Science Park West Avenue, Hong Kong Science Park, Pak Shek Kok, N.T.	(852) 2776 1323	All general medical devices (Quality Management System and Type Examination)	



Part C: Particulars of the Device



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Conformity Assessment Routes



Alternative
Route

C015:
CAB recognized by
MDD

Conduct conformity
assessment on the medical
device and issue CAB
certificate

D001: Demonstrate the medical device **conforms to the Essential Principles of Safety and Performance of Medical Device** through **valid marketing approvals of the medical device obtained in specified countries/region***

*China, Australia, Canada, European Union, Japan, United States of America and/or Korea (trial scheme)

Part D: Marketing Approvals & Essential Principles



Note	Part D: Marketing Approvals and Essential Principles	Encl.
D001	<p><u>Marketing Approvals in Mainland China and/or Foreign Countries</u></p> <p><input checked="" type="checkbox"/> Approval(s) obtained for the medical device (with same make and model) to be placed on the market of the following countries:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Mainland China (National Medical Products Administration) <input type="checkbox"/> Australia (The Therapeutic Goods Administration) <input type="checkbox"/> Canada (Health Canada) <input checked="" type="checkbox"/> Member countries of European Union that have implemented relevant EU directives or regulations and a copy of the EC Declaration of Conformity is enclosed <input type="checkbox"/> Japan (Ministry of Health, Labour and Welfare) <input type="checkbox"/> Korea (Ministry of Food and Drug Safety) <input type="checkbox"/> United States of America (U.S. Food and Drug Administration) <p><u>Essential Principles</u></p> <ul style="list-style-type: none"> <input type="radio"/> Earliest approval obtained on or before 31 December 2004 <input checked="" type="radio"/> Earliest approval obtained on or after 1 January 2005 <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Essential Principles Conformity Checklist MD-CCL is enclosed; OR <input type="checkbox"/> Essential Requirements Checklist / General Safety and Performance Requirements Checklist in accordance with relevant EU directives or regulations and Essential Principles Declaration of Conformity are enclosed 	(D1) <input checked="" type="checkbox"/>

Part D: Marketing Approvals



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Marketing approvals (GMDs and IVDMDs)

Starting from 1st January 2024,

- ✓ MDD accepts marketing approvals in Mainland China, South Korea and/or other five Global Harmonization Task Force (GHTF) founding member's countries, including Australia, Canada, member countries of European Union, Japan and United States of America.

Starting from 2nd April 2024:

- ✓ MDD accepts the marketing approval in Singapore.

Marketing Approvals



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Countries	Marketing Approvals
China	Medical Device Registration Certificate
Australia	Australia Therapeutic Goods Administration (TGA) ARTG Certificate
Canada	Health Canada (HC) Medical Device Licence
Japan	Pre-market Certification (Ninsho) from Registered Certification Body (RCB) Pre-market Approval (Shonin) from Ministry of Health, Labour and Welfare (MHLW)
USA	Premarket Notification [510(k) clearance] Premarket Approval (PMA)
EU	EC/EU Certificates: <ul style="list-style-type: none">• Directive 93/42/EEC (MDD)• Directive 90/385/EEC (AIMD)• Regulation (EU) 2017/745 (MDR)
Korea	•Medical Equipment Import Permit or Certificate of Free Sales
Singapore	•Health Sciences Authority (HSA) (SINGAPORE MEDICAL DEVICE REGISTER (SMDR))

Part D: Marketing Approvals & Essential Principles

■ GMD:

- Marketing Approvals (Appendix D1)-
Conformity to the Essential Principles
 - ▣ If recognized marketing approvals were obtained on or after 1st January, 2005, then the applicant has to provide:
 - **Essential Principles Conformity Checklist** (MD-CCL); or
 - (i) **Essential Requirements Checklist** prepared according to the **European Medical Device Directives** or **General Safety and Performance Requirements (GSPR) Checklist** prepared according to the **European Medical Device Regulation** and
 - (ii) the Hong Kong **Essential Principles Declaration of Conformity** (GN-02, Appendix I)

IVDMD:

- Marketing Approvals (Appendix D1)-
Conformity to the Essential Principles
 - ▣ If the device has obtained recognized marketing approvals on or after 1st January, 2005, then the applicant has to provide:
 - **Essential Principles Conformity Checklist for In Vitro Diagnostic Medical Devices (MDIVD-CCL)**; or
 - (i) **Essential Requirements Checklist** prepared for the **European IVD Medical Device Directive** or **General Safety and Performance Requirements (GSPR) Checklist** prepared for the **European IVD Medical Devices Regulation**, and
 - (ii) HK MDACS's **Essential Principles Declaration of Conformity** (GN-06, Appendix I)

Essential Principles Conformity Checklist (MD-CCL)



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Appendix 2



**Medical Device Control Office
Department of Health**

**Medical Device Administrative Control System
Essential Principles Conformity Checklist**

Make: ABC Medical

Brand Name and Model: VGOOD PMS-123

Clause	Essential Principle	Applicable	Method of Conformity	Identity of Specific Documents
General Requirements				
1.	Medical devices should be designed and manufactured in such a way that, when used under the conditions and for the purposes intended and, where applicable, by virtue of the technical knowledge, experience, education or training of intended users, they will not compromise the clinical condition or the safety of patients, or the safety and health of users or, where applicable, other persons, provided that any risks which may be associated with their use constitute acceptable risks when weighed against the benefits to the patient and are compatible with a high level of protection of health and safety.	Yes	<ol style="list-style-type: none"> 1. <i>The devices are designed and manufactured under a full quality management system in accordance with ISO 13485 and presently certified</i> 2. <i>The patient monitor is tested to comply with IEC 60601-1, IEC 60601-1-2, IEC 60601-1-8 and IEC 60601-2-49 standards.</i> 3. <i>Risk analysis has been performed in accordance with ISO 14971. It shows that any risks which may be associated with the devices are acceptable when weighed against the benefits to the patient and are compatible with a high level of protection of health and safety.</i> 	<ol style="list-style-type: none"> 1. <i>ISO 13485 Certificate No. 012345</i> 2. <i>Type Test Certificate No. 123456 to show compliance with ISO IEC 60601-1 standard</i> 3. <i>Type Test Certificate No. 23456 to show compliance with IEC 60601-1-2 standard</i> 4. <i>Type Test Certificate No. 34567 to show compliance with IEC 60601-1-8 standard</i> 5. <i>Type Test Certificate No. 45678 to show compliance with IEC 60601-2-49 standard</i> 6. <i>Risk Analysis Report RAR-001</i>

Essential Principles Conformity Checklist (MD-CCL)



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I confirm that I have neither amended the wording in this form, nor otherwise altered the form in any material manner, apart from filling in the blanks.

I declare that the information provided in this form is accurate and correct and the device conforms to all the applicable requirements stipulated above.

Signature: _____

Name: CHAN TAI-MAN

Position: GENERAL MANAGER

The Applicant (Local Responsible Person): CARDIO SUPPLIES LTD

Date: 31 Jul 2011

Essential Principles Declaration of Conformity (GN-02 / GN-06, Appendix I)



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GMD:

GN-02:2024(E)

11. Appendix I

<Name of Manufacturer/Local Responsible Person>
<Address of Manufacturer/Local Responsible Person>
<Date>

Medical Device Division,
Department of Health.
Room 604, 6/F,
14 Taikoo Wan Road,
Taikoo Shing, Hong Kong

Dear Sirs

Product: <Make> <Brand Name and Model(s)>
<Product Description>
Manufactured by <Manufacturer>
<Address of Manufacturer>

We declare that the captioned product fully complies with all the relevant clauses stipulated under the Essential Principles of Safety and Performance of Medical Devices as required under the Medical Device Administrative Control System. We undertake to provide the necessary evidence to demonstrate the compliance within two weeks upon request.

Yours faithfully

<Signature>
<Name and Title>
<Company Name>

IVDMD:

GN-06:2024(E)

9. Appendix I

<Name of Manufacturer/Local Responsible Person>
<Address of Manufacturer/Local Responsible Person>
<Date>

Medical Device Division,
Department of Health.
Room 604, 6/F,
14 Taikoo Wan Road,
Taikoo Shing, Hong Kong

Dear Sirs

Product: <Make> <Brand Name and Model(s)>
<Product Description>
Manufactured by <Manufacturer>
<Address of Manufacturer>

We declare that the captioned product fully complies with all the relevant clauses stipulated under the Essential Principles of Safety and Performance of In Vitro Diagnostic Medical Devices as required under the Medical Device Administrative Control System. We undertake to provide the necessary evidence to demonstrate the compliance within two weeks upon request.

Yours faithfully

<Signature>
<Name and Title>
<Company Name>

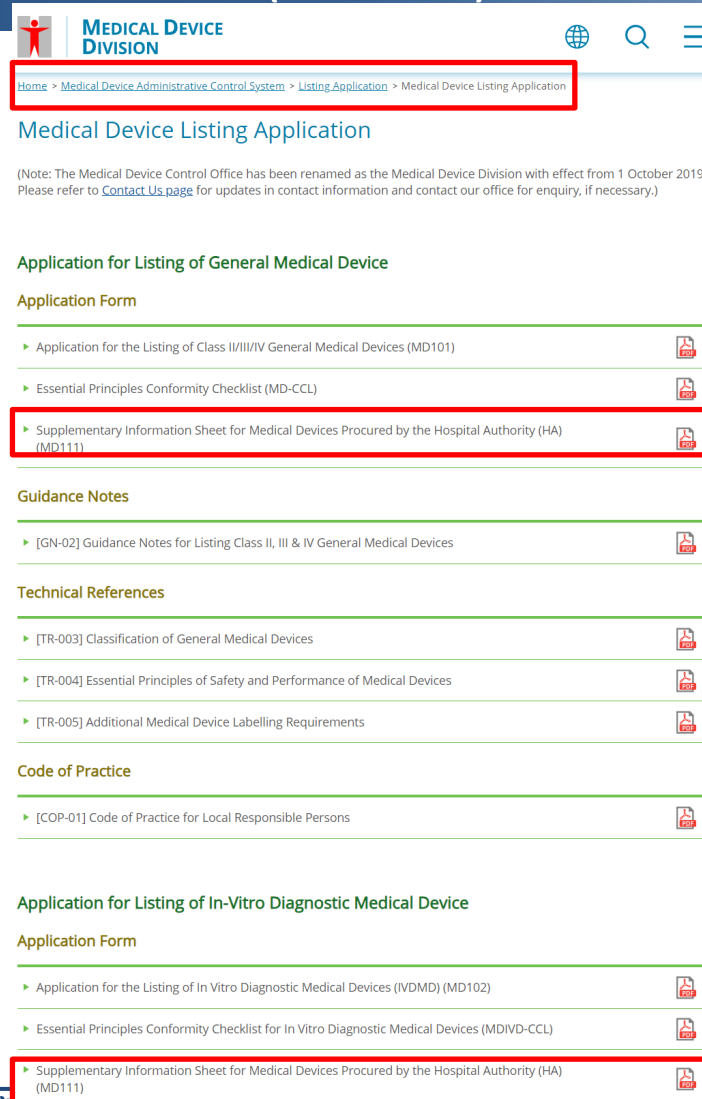
Supplementary Information Sheet for Medical Devices Procured by the Hospital Authority (MD111)



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- ✓ Applicable to listing application containing medical device(s) **procured by the Hospital Authority** in the past twelve months
- ✓ The applicant should include the duly completed Supplementary Information Sheet **along with the relevant listing application forms and required documents**
- ✓ **Not applicable** to change application and renewal application
- ✓ The Supplementary Information Sheet need not be submitted if there is no relevant information on medical device(s) being procured by the Hospital Authority

Supplementary Information Sheet for Medical Devices Procured by the Hospital Authority (MD111)



MEDICAL DEVICE DIVISION

Home > Medical Device Administrative Control System > Listing Application > Medical Device Listing Application

Medical Device Listing Application

(Note: The Medical Device Control Office has been renamed as the Medical Device Division with effect from 1 October 2019. Please refer to [Contact Us page](#) for updates in contact information and contact our office for enquiry, if necessary.)

Application for Listing of General Medical Device

Application Form

- Application for the Listing of Class II/III/IV General Medical Devices (MD101)
- Essential Principles Conformity Checklist (MD-CCL)
- Supplementary Information Sheet for Medical Devices Procured by the Hospital Authority (HA) (MD111)**

Guidance Notes

- [GN-02] Guidance Notes for Listing Class II, III & IV General Medical Devices

Technical References

- [TR-003] Classification of General Medical Devices
- [TR-004] Essential Principles of Safety and Performance of Medical Devices
- [TR-005] Additional Medical Device Labelling Requirements

Code of Practice

- [COP-01] Code of Practice for Local Responsible Persons

Application for Listing of In-Vitro Diagnostic Medical Device

Application Form

- Application for the Listing of In Vitro Diagnostic Medical Devices (IVDM) (MD102)
- Essential Principles Conformity Checklist for In Vitro Diagnostic Medical Devices (MDIVD-CCL)
- Supplementary Information Sheet for Medical Devices Procured by the Hospital Authority (HA) (MD111)**

Supplementary Information Sheet for Medical Devices Procured by the Hospital Authority (MD111)

[Home](#) > [Useful Information](#) > [Forms](#)

Frequently Asked Questions

Issued Documents under Medical
Device Administrative Control
System (MDACS)

Forms

Useful Sites

Forms

(Note: The Medical Device Control Office has been renamed as the Medical Device Division with effect from 1 October 2019. Please refer to [Contact Us page](#) for updates in contact information and contact our office for enquiry, if necessary.)

Forms are available in pdf and/or Word formats:

- ▶ Application for Inclusion on the List of Importers/ Distributors (MD-IP+D)  
- ▶ Application for Recognition (or Change of Scope of Recognition) Under the Conformity Assessment Body Recognition Scheme of the MDACS (CAB-AA) 
- ▶ Application for the Listing of In Vitro Diagnostic Medical Devices (IVDMD) (MD102) 
- ▶ Application for the Listing of Local Manufacturers (LM) 
- ▶ Application for the Listing of Class II/III/IV General Medical Devices (MD101) 
- ▶ Application Form for Certificate to National Medical Products Administration 
- ▶ Change Application Form for Listed Medical Devices (MD105) 
- ▶ Essential Principles Conformity Checklist (MD-CCL) 
- ▶ Essential Principles Conformity Checklist for In Vitro Diagnostic Medical Devices (MDIVD-CCL) 
- ▶ Medical Device Adverse Event Report Form - for Local Responsible Persons  
- ▶ Medical Device Adverse Event Report Form - for Medical Device Users  
- ▶ Post-Market Surveillance Report Form (MD108) 
- ▶ Renewal and Change Application Form for Listed Importers/Distributors (MD203) 
- ▶ Renewal / Change Form for Listed Local Manufacturers 
- ▶ Renewal Form for Listed Medical Devices 
- ▶ Supplementary Information Sheet for Medical Devices Procured by the Hospital Authority (HA)(MD111) 

Frequently asked questions



1) What is the existing legislative control of MDs?

- Currently, there is no specific legislation that regulates the *manufacture, import, export and sale* of MDs in Hong Kong. However, depending on the nature and characteristics of the products concerned, some products may be regulated by existing pieces of legislation

2) How to distinguish or classify MDs?

- Depend on the claims made by the manufacturer, generally its intended use and the principle of design, which usually could be observed from technical documents or labelling of the product
- Definition of MD under MDACS (GN-00) ; Classification of GMDs (TR-003) ; Classification of IVDMDs (TR-006)
- Online Tools (<https://www.mdd.gov.hk/en/mdacs/online-tools/index.html>)
- Examples of MDs Classification (<https://www.mdd.gov.hk/en/mdacs/classified-examples-of-medical-devices/index.html>)

3) Does MDD issues Free Sale Certificate?

- At present, Free Sale Certificate / letter to foreign government is not available under the Medical Device Administrative Control System

4) What kind of changes of listed MDs do LRPs need to be submit/notify MDD?

- The LRP has the responsibility to timely inform MDD of any change to the listed MD (including major and minor change)

5) How to distinguish major and minor changes?

- Refer Section 2 of GN-10 to know the definition of major and minor changes
- Refer to the Flowchart in Guidance Notes: GN-10 for reference to distinguish major change and minor change of MDs

Preparation of Application Documents



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The screenshot shows a Windows Explorer window titled 'ABC Medical PMS-123'. The address bar indicates the path: 'C:\Documents and Settings\vo_mdco.dh\桌面\ABC Medical PMS-123'. The main area displays a grid of folders:

A1 - Manufacturer information	A2 - Manufacturer QMS
B1 - LRP BR	B2 - LRP Design Letter
B3 - LRP QMS	B4 - LRP SOP
C1 - Device Information	C2 - Device History
C3 - Device Labelling	C4 - Batch Release
C5 - CAB Certificate	C6 - Device standard
C7 - Clinical Evaluation	D1 - Marketing Approvals

The folder 'D1 - Marketing Approvals' is highlighted with a dashed border. The left sidebar shows navigation options like '檔案及資料夾工作' and '其他位置'.

Further Information



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■ Online Resources(www.mdd.gov.hk)

- Related Guidance notes, Technical References and Codes of Practice

<https://www.mdd.gov.hk/en/useful-information/issued-documents-under-mdacs/index.html>

- List of Medical Device

<https://www.mdd.gov.hk/en/mdacs/search-database/list-md/index.html>

Issued Documents

Guidance Note



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Guidance Notes for Definitions and Abbreviations for Medical Device Administrative control System

GN-00

Overview of the Medical Device Administrative Control System

GN-01

Guidance Notes for Listing Class II, III & IV Medical Devices

GN-02

Guidance Notes for Adverse Event Reporting by Local Responsible Persons

GN-03

Conformity Assessment Framework and Conformity Assessment Bodies

GN-04

Guidance Notes for Listing In Vitro Diagnostic (IVD) Medical Devices

GN-06

Guidance Notes for Listing of Importers of Medical Devices

GN-07

Guidance Notes for Listing of Local Manufacturers

GN-08

Guidance Notes for Listing of Distributors

GN-09

Guidance Notes for Changes of Listed Medical Devices

GN-10

Issued Documents Technical Reference



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Principles of Conformity Assessment for Medical Devices	TR-001
Summary Technical Documentation for Demonstrating Conformity to the Essential Principles of Safety and Performance of Medical Devices	TR-002
Classification Rules for Medical Devices	TR-003
Essential Principles of Safety and Performance of Medical Devices	TR-004
Additional Medical Device Labelling Requirements	TR-005
Principles of In Vitro Diagnostic (IVD) Medical Devices Classification	TR-006
Software Medical Devices and Cybersecurity	TR-007
Artificial Intelligence Medical Devices (AI-MD)	TR-008

Issued Documents: Code of Practice



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Code of Practice for Local Responsible Person

COP-01

Code of Practice for Conformity Assessment Body

COP-02

Code of Practice for Listed Local Manufacturer

COP-03

Code of Practice for Listed Importers of Medical Devices

COP-04

Code of Practice for Listed Distributors of Medical Devices

COP-05

Contact Us



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