

醫療儀器規管架構建議研討會

Discussion Forum on Proposed Framework for Statutory Regulation of Medical Devices

(報名表格 Enrolment Form)



送呈 To: 衛生署醫療儀器管制辦公室 Medical Device Control Office, Department of Health
(電郵地址 E-mail: mdco@dh.gov.hk ; 傳真 Fax: (852) 3157 1286)

本人欲報名參加以下其中的一個研討會，選擇次序由 1 至 6 順序排列：

I would like to enrol in one of the following forums with the order of preference marked from 1 to 6:

日期 Date	2010 年 9 月 8 日(三) 8 Sep 2010 (Wed)		2010 年 9 月 15 日(星期三) 15 Sep 2010 (Wed)		2010 年 9 月 21 日(星期二) 21 Sep 2010 (Tue)	
時間 Time	10:00-12:30	14:30 - 17:00	10:00-12:30	14:30 - 17:00	10:00-12:30	14:30 - 17:00
語言 Language	中文 Chinese	英文 English	英文 English	中文 Chinese	中文 Chinese	英文 English
地點 Venue	地點 3 Venue 3	地點 3 Venue 3	地點 1 Venue 1	地點 1 Venue 1	地點 1 Venue 1	地點 1 Venue 1
選擇次序 Preference No.						
地點 1: 九龍石硤尾南昌街 382 號公衛生檢測中心 一樓演講廳 Venue 1: Lecture Theatre, 1/F, Public Health Laboratory Centre, 382 Nam Cheong Street, Shek Kip Mei, Kowloon 地點 2: 九龍亞皆老街 147C 衛生防護中心大樓地下演講廳 Venue 2: Lecture Theatre, G/F, Centre for Health Protection Building, 147C Argyle Street, Kowloon 地點 3: 香港皇后大道中 345 號上環市政大廈 5 樓上環文娛中心演講廳 Venue 3: Lecture Theatre, Sheung Wan Civic Centre, 5/F., Sheung Wan Municipal Services Building, 345 Queen's Road Central, Hong Kong						

姓名 Name: _____

機構 Organization: _____

業務性質 Nature of Business: 本地負責人 / 代理人 Local Responsible Person/Agent
 (可選擇多於一項) 進口商 / 出口商 importer / exporter
 (can tick more than one box) 分銷商 / 批發商 distributor / wholesaler
 零售商 retailer
 本地製造商 local manufacturer
 其他 (請說明) others (please specify)

電話 Telephone: _____

傳真 Fax: _____

電郵地址 E-mail: _____

(祇供回覆使用 For Reply Use Only)

執事先生/女士:
Dear Sir/Madam,

RN:

Confirmation of Enrollment 報名確認信

- 閣下的報名已被接受，請出席 2010 年 9 月 ____ 日 ____ 時的研討會。
Your enrolment is confirmed. Please attend the forum on ____ Sep 2010 at ____.
- 閣下所選擇的時段已滿座，請致電 (852) 3107 8484 登記另一時段。
The session(s) that you selected is full. Please call telephone no. (852) 3107 8484 for enrollment in another session.

衛生署醫療儀器管制辦公室
Medical Device Control Office, Department of Health

備註 Remarks

If Tropical Cyclone Signal No. 8 or above and/or Rainstorm "BLACK" Warning is issued and in effect at 2 hours before the commencement of the forum, it will be cancelled automatically.

如研討會開始之前二小時，八號或更高的熱帶氣旋警告信號及/或黑色暴雨警告仍然有效，研討會將會自動取消。

個人資料(私隱)條例 用途聲明

1. 收集資料的目的

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

2. 資料轉介人的類別

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

3. 查閱個人資料

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

4. 查詢

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

Personal Data (Privacy) Ordinance

Statement of Purposes

1. Purpose of Collection

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

2. Classes of Transferees

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

3. Access to Personal Data

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

4. Enquiries

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