

香港醫務委員會  
The Medical Council of Hong Kong

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**DISCIPLINARY INQUIRY**  
**MEDICAL REGISTRATION ORDINANCE, CAP. 161**

Defendant: Dr CHEUNG Chung Sing (張重誠醫生) (Reg. No.: M04221)

Date of hearing: 8 November 2017 (Wednesday)

Present at the hearing

Temporary Chairman: Dr HO Pak Leung, JP  
Council Members/Assessors: Dr HUNG Se Fong, BBS  
Dr LAM Tzit Yuen, David  
Ms LAU Wai Yee, Monita  
Prof TAN Choon Bng, Kathryn  
Ms HUI Mei Sheung, Tennessy, MH JP

Legal Adviser: Mr Edward SHUM

Defence Solicitor representing the Defendant: Mr CHIU Siu Keung Donny of Messrs.  
CHOW, GRIFFITHS & CHAN  
Solicitors & Notaries

Senior Government Counsel (Ag.) representing the Secretary: Miss Vienne LUK

1. The amended charge against the Defendant, Dr CHEUNG Chung Sing, is:

“That he, being a registered medical practitioner, was convicted at the Kowloon City Magistrates’ Courts on 6 November 2013 of four counts of the offence of failing to keep a Register of Dangerous Drugs in the form specified in the First Schedule, being an offence punishable with imprisonment, contrary to regulations 5(1) and 5(7) of the Dangerous Drugs Regulations made under Dangerous Drugs Ordinance, Chapter 134, Laws of Hong Kong.”

## **Facts of the case**

2. The Defendant was at all material times a registered medical practitioner. His name has been included in the General Register from 5 March 1981 to present and his name has never been included in the Specialist Register.
3. On 19 April 2013, pharmacists from the Department of Health (“DH”) visited the Defendant’s clinic at Room 3136, 3/F, Lok Fu Plaza, Lok Fu, Kowloon for dangerous drugs (“DD”) inspection. They met the Defendant’s clinic assistant, Ms YIU and the locum doctor, Dr LI. According to Ms YIU, the Defendant was on leave on that day.
4. With the assistance of Ms YIU, 4 kinds of DD, namely, Lorazepam 1mg x 9,801 tablets, Diazepam 10mg x 2,640 tablets, Diazepam 5mg x 3,013 tablets and Phentermine 30mg x 131 capsules were found. However, the DD Register kept by the Defendant was found to be non-compliant with the statutory requirements under the Dangerous Drugs Regulations, Cap. 134A (the “DD Regulations”), in that (1) the receipt or supply record of the 131 Phentermine 30mg capsules was not found; (2) separate registers or separate parts of the dangerous drug register were not used for entries made with respect to each of the remaining 3 DD; (3) the date of receipt or supply was not recorded for every entry; and (4) the address and identity card number of patients, column for invoice number and the DD balance were all found missing.
5. The Defendant was subsequently charged with 4 counts of the offence of “failing to keep a register of dangerous drugs in the form specified in the First Schedule”, contrary to regulations 5(1)(a) and 5(7) of the DD Regulations. The Defendant was convicted on his own plea of the aforesaid offence at the Kowloon City Magistrates’ Court on 6 November 2013 and was fined a total sum of \$10,000.
6. There is no dispute that the aforesaid offence is punishable with imprisonment. And the Defendant’s convictions were reported to the Council through his solicitors by a letter dated 11 November 2013.

## **Findings of the Council**

7. Section 21(3) of the Medical Registration Ordinance expressly provides that:

“Nothing in this section shall be deemed to require the Council to inquire into the question whether the registered medical practitioner was properly convicted but the Council may consider any record of the case in which such conviction was recorded and any other evidence which may be available and is relevant as showing the nature and gravity of the offence.”

8. The Council is therefore entitled to take the aforesaid convictions as conclusively proven against the Defendant.
9. Accordingly, we also find the Defendant guilty of the disciplinary offence as charged.

### **Sentencing**

10. In line with published policy, we shall give credit to the Defendant for his frank admission in this inquiry and cooperation during the preliminary investigation stage. However, given that there is hardly any room for dispute in a disciplinary case involving criminal conviction, the credit to be given to him must necessarily be of a lesser extent than in other cases.
11. The Defendant has one previous disciplinary record in 1994, which related to his failure to properly supervise his nurse who gave an injection to his patient in the inappropriate place and thereby causing injury to the leg. We accept that the previous disciplinary conviction was over 20 years ago and the present disciplinary offence is of a different nature.
12. We bear in mind that the purpose of a disciplinary order is not to punish the Defendant for the offence for a second time, but to protect the public from persons who are unfit to practise medicine and to maintain public confidence in the medical profession by upholding the high standards and good reputation of the profession.
13. The Council has repeatedly emphasized the importance of proper record of dangerous drugs in compliance with the statutory requirements. Medical practitioners being given the legal authority to supply dangerous drugs must diligently discharge the corresponding responsibility to keep records in the prescribed form. As a matter of fact, the DD register is a simple form which can be filled in as a clerical exercise whenever drugs are received or dispensed, and there is nothing complicated about it. Any medical practitioner exercising

proper care would have no difficulty at all in complying with the statutory requirements.

14. In the recent years, all cases of failing to comply with the statutory requirements to keep proper dangerous drugs register have been dealt with by removal from the General Register, and in less serious cases the operation of the removal order would be suspended for a period with the condition of peer audit.
15. There is nothing in the evidence to suggest that the Defendant prescribed the DD to his patients improperly. We are however quite concerned about the substantial quantities of DD found in the Defendant's clinic. Stringent control of DD is essential to avoid misuse and abuse. Failure to comply with the statutory requirements to keep proper DD Registers may jeopardize the monitoring system of DD by public officers.
16. We are told in mitigation that the Defendant has since the incident taken immediate remedial measures to rectify his shortcomings and to prevent recurrence of the same mistake. He has trained and reminded his clinic assistants of the importance of keeping proper DD registers. Before he retired from medical practice in April this year, he had conducted regular checks of each DD register every week to ensure compliance with the statutory requirements.
17. We accept that the Defendant has learnt his lesson and the chance of his repeating the same or similar breach would be low.
18. Having considered the nature and gravity of this case and the mitigation advanced by the Defendant, we order that the Defendant's name be removed from the General Register for a period of 2 months, and the operation of the removal order be suspended for a period of 12 months. We wish to emphasize that but for his retirement from medical practice, we would have imposed the usual condition of peer audit on the Defendant.

Dr HO Pak Leung, JP  
Temporary Chairman  
The Medical Council of Hong Kong