

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 CHUI Hon Chiu (崔漢昭醫生) (Reg. No.: M05286)

Date of hearing: 5 March 2019 (Tuesday)

Present at the hearing

Council Members/Assessors: Prof. LAU Wan-yee, Joseph, SBS  
(Chairperson of the Inquiry Panel)  
Dr LAM Tzit-yuen, David  
Dr KONG Wing-ming, Henry  
Mr HUNG Hin-ching, Joseph  
Mr KAN Pak-him, Christopher

Legal Adviser: Mr Edward SHUM

Defence Counsel representing the Defendant: Mr Tony LI instructed by Messrs.  
Kennedys

Senior Government Counsel representing the Secretary: Ms Carmen POON

1. The charges against the Defendant, Dr CHUI Hon Chiu, are:

“That on or about 5 May 2014, she, being a registered medical practitioner, disregarded her professional responsibility to her patient (“the Patient”) in that:

- (a) she failed to ensure that the name of the prescribing doctor was labelled in the dispensed medicine; and
- (b) she failed to ensure that the name of the medicine was labelled in the dispensed medicine.

In relation to the facts alleged, either singularly or cumulatively, she has been guilty of misconduct in a professional respect.”

## **Facts of the case**

2. The Defendant was at all material times a registered medical practitioner. Her name has been included in the General Register from 6 March 1984 to present.
3. The Defendant admits the factual particulars of the disciplinary charges against her.
4. Briefly stated, the Defendant was at all material times working as a locum doctor in the clinic of Dr MA Joseph located at Mei Foo Sun Chuen, Kowloon. On 5 May 2014, the Patient consulted the Defendant at Dr MA's clinic complaining of minor rashes around the lower corner of her right eyelid.
5. On examination, the Defendant noted that there was swelling and redness in the Patient's right eye and there was a maculopapular rash over the Patient's right outer eyelid. A diagnosis of allergic contact dermatitis was made. The Defendant then prescribed to the Patient the following medicines:-
  - (i) oral Piriton 4 mg 3 times a day for 3 days;
  - (ii) vitamin C 100 mg 3 times a day for 3 days; and
  - (iii) 1% hydrocortisone cream for local application on the right outer eyelid 2 times a day for 3 days
6. There is no dispute that the prescribed medicines were subsequently dispensed to the Patient through the Defendant's clinic assistant. However, none of the prescribed medicines were labelled with the name of the Defendant as prescribing doctor. The container of the 1% hydrocortisone cream bore on one side a label with the letters "H.C". On the other side of the container, there was a label bearing the name of the Patient and the instruction (in Chinese and English) for use 2 times a day morning and night.
7. The Patient returned home and took the prescribed medicines. According to the unchallenged evidence of the Patient, she continued to apply the 1% hydrocortisone cream around the lower corner of her right eyelid for some 2 months. And yet, her medical condition did not improve and there was sign of worsening of rashes around the lower corner of her right eyelid.
8. The Patient subsequently lodged this complaint against the Defendant with the Medical Council.

### **Burden and Standard of Proof**

9. We bear in mind that the burden of proof is always on the Legal Officer and the Defendant does not have to prove her innocence. We also bear in mind that the standard of proof for disciplinary proceedings is the preponderance of probability. However, the more serious the act or omission alleged, the more inherently improbable must it be regarded. Therefore, the more inherently improbable it is regarded, the more compelling the evidence is required to prove it on the balance of probabilities.
10. There is no doubt that the allegations made against the Defendant here are serious ones. Indeed, it is always a serious matter to accuse any registered medical practitioner of misconduct in a professional respect. We need to look at all the evidence and to consider and determine the disciplinary charges against the Defendant separately and carefully.

### **Findings of the Inquiry Panel**

11. The Defendant admits the factual particulars of the disciplinary charges against her but it remains for us to determine on the evidence whether she is guilty of misconduct in a professional respect.
12. Registered medical practitioners in Hong Kong are in a unique position in that they can prescribe and dispense medicines to patients. As a registered medical practitioner who dispensed medicines to her patients, the Defendant had the personal responsibility to ensure all dispensed medicines are properly labelled.
13. It is clearly stated in paragraph 9.4 of the Code of Professional Conduct (2009 edition) (the “Code”) that:-

“All medications dispensed to patients directly or indirectly by a doctor should be properly and separately labelled with all the following information:-

- (a) name of prescribing doctor or proper means of identifying him;

...

- (d) name of medicine, which can be either:-
  - (i) the name of the medicine as it is registered with the Pharmacy and Poisons Board of Hong Kong and shown in the Compendium of Pharmaceutical Products published by the Department of Health; or
  - (ii) the generic, chemical or pharmacological name of the medicine;...”

14. Proper labelling of medicine is an important requirement in the practice of medical practitioners in Hong Kong. Doctors who provide subsequent treatment to the same patient will need to know what medicines the patient has been taking in order to determine the proper treatment. Failure to properly label the medicines may have serious consequences, particularly in emergency situations.
15. Doctors who provide subsequent treatment to the same patient need to be able to tell from the label who was the prescribing doctor. Otherwise, the prescribing doctor may not be contacted in good time to provide the necessary information and/or assistance, particularly when the patient is unable to communicate with the subsequent treating doctor. We acknowledge that the Defendant was at the material time a locum doctor. However, this is not an excuse for the Defendant’s failure to comply with the requirement of proper labelling of the name of prescribing doctor.
16. The Medical Council has repeatedly emphasized in previous cases the importance of proper labelling of name of medicine. Doctors who provide subsequent treatment to the same patient need to know the name and dosage of medicine previously taken by the patient when formulating their treatment plans. This will also avoid over dosage and adverse effect of drug-drug interaction.
17. In this case, the Defendant merely labelled the container of the 1% hydrocortisone cream with the letters “H.C”. Doctors who provide subsequent treatment to the Patient cannot tell the name and strength of the medicine inside the container. And there is no excuse for her failure to comply with the requirement of proper labelling of name of medicine.
18. For these reasons, we find the Defendant’s conduct to have fallen below the standards expected of registered medical practitioners in Hong Kong. We therefore find her guilty of professional misconduct in respect of disciplinary charges (a) and (b).

## Sentencing

19. The Defendant has a clear record.
20. In line with published policy, we shall give her credit in sentencing for admitting the factual particulars of the disciplinary charges against her and her cooperation throughout these disciplinary proceedings.
21. We bear in mind that the purpose of a disciplinary order is not to punish the Defendant 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.
22. There is no evidence before us of concealment of the nature of the prescribed medicines. We accept that the disciplinary charges in this case are in respect of poor labelling rather than deliberate non-labelling.
23. We are told in mitigation that a number of remedial measures have been taken by the Defendant after the incident to prevent this mishap from happening again. In particular, the Defendant would check the medicines against the consultation record before allowing the clinic assistant to dispense them to the patients. Moreover, a sticker bearing the Defendant's name will be placed on top of medicine bags of the clinic where she is going to work as a locum doctor.
24. We are further told that the Defendant has already retired from medical practice. And we accept that the Defendant has learnt her lesson and we believe that the chance of her committing the same or similar disciplinary offence in the future is low.
25. Taking into consideration the nature and gravity of this case and what we have heard and read in mitigation, we shall make a global order in respect of disciplinary charges (a) and (b) that the Defendant be reprimanded.

Prof. LAU Wan-yee, Joseph, SBS  
Chairperson of the Inquiry Panel  
The Medical Council of Hong Kong