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## Advice / Information for All Registered Medical Practitioners

### Intramuscular injection in the buttock region

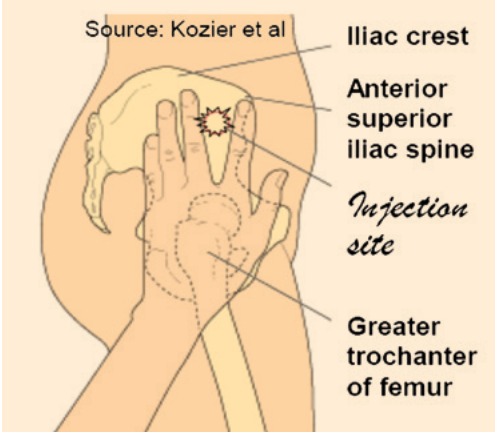
While intramuscular (“IM”) injection in the buttock region is a commonplace procedure, improper administration of it may lead to sciatic nerve injury with devastating consequences, ranging from transient sensory disturbance to permanent paralysis and numbness. Over 20% reported cases of injury of IM injection involved damage to the sciatic nerve. Based on the latest literature, the Medical Council has recently reviewed the general principle in administering IM injection in the buttock region, and would like to promulgate the following advice to members of the profession to supersede the one published in the Newsletter Issue No. 16 of August 2009.

Historically, the dorsogluteal site (commonly known as the upper outer quadrant of the buttock) was the main site for IM injection. However, it risks damaging the sciatic nerve given the anatomical proximity of the injection to the sciatic nerve, particularly in young children under 3 years old. Vastus lateralis should be used for IM injection in infants or deltoid region in older children instead. For adults, there is a wide agreement in the literature that the ventrogluteal site is preferred to the dorsogluteal site for IM injection as it is farther away from the sciatic nerve. Moreover, it has a thinner layer of subcutaneous fat which makes inadvertent subcutaneous injection less likely particularly in obese adults. As such, the Medical Council would recommend the use of the ventrogluteal site given its anatomic advantages.

The patient should lie laterally with the femur rotated internally for ventrogluteal IM injection. The bony landmarks should be accurately identified by palpation rather than eyeballing, as illustrated in the figure on the right for ventrogluteal IM injection. The standing position is not recommended as it has a high risk of

Place your palm over the greater trochanter to form a ‘V’ with your middle finger (left hand) toward the iliac crest and index finger toward the anterior superior iliac spine.

Inject within the center of the ‘V’ below the iliac crest.



inaccurately identifying the bony landmarks. The needle should be injected at a 90 degree angle with the skin stretching taut, as it can maximize the depth of penetration into the muscle, making inadvertent subcutaneous injection less likely.

The above is only advice on the general principle in administering IM injection in the buttock region, and is by no means exhaustive. Doctors who administer the injection should choose the site based on good clinical judgment using the best evidence available and on individualized client assessment. They should continuously update their knowledge and skill on administration of intramuscular injection.

### **References**

- Chan VO, Colville J, Persaud T, Buckley O, Hamilton S and Torreggiani WC. Intramuscular injections into the buttocks: Are they truly intramuscular? *European Journal of Radiology* 2006; 58: 480-4
- Cockshott WP, Thompson GT, Howlett LJ and Seeley ET. Intramuscular or Intralipomatous Injections? *The New England Journal of Medicine* 1982; 307(6): 356-8
- Kruszewski AZ, Lang SH and Johnson JE. Effect of positioning on discomfort from intramuscular injections in the dorsogluteal site. *Nursing Research* 1979 March-April; 28(2): 103-5
- Mishra P and Stringer MD. Sciatic nerve injury from intramuscular injection: a persistent and global problem. *Int J Clin Pract.* 2010 October; 64(11): 1573-9
- Small, SP. Preventing sciatic nerve injury from intramuscular injections: literature review. *Journal of Advanced Nursing* 2004; 47(3): 287-96
- Yeremeyeva E, Kline DG and Kim DH. Iatrogenic sciatic nerve injuries at buttock and thigh levels: the Louisiana State University experience review. *Neurosurgery* 2009; 65(4 Suppl): A63-6

### **New measures on the process of complaints at the Preliminary Investigation Stage for the Medical Council**

Under the Medical Registration Ordinance, Cap. 161, Laws of Hong Kong, the Medical Council is responsible for regulating the discipline of registered medical practitioners.

The Preliminary Investigation Committee ("PIC") of the Medical Council is responsible for investigation of complaints. The Medical Practitioners (Registration and Disciplinary Procedure) Regulation, Cap. 161E provides for processing of complaints in three stages:

- (i) initial screening by the Chairman and the Deputy Chairman of the PIC jointly;
- (ii) consideration by the PIC; and
- (iii) disciplinary inquiry by the Council.

Section 9 of the Medical Practitioners (Registration and Disciplinary Procedure) Regulation states that unless a complaint case is found to be frivolous or groundless and should not proceed further, it is mandatory for the Chairman or the Deputy Chairman of the PIC to direct that the case be referred to the PIC for its consideration (i.e. stage (ii) stated above).

In the past, when a complaint case proceeded into the PIC stage, the doctor under complaint would be notified of the receipt of the complaint by way of a PIC Notice. He or she would be invited to make representation, if any, to the particulars of complaint stated in the PIC Notice before the PIC met to discuss the case concerned.

Following the comments of the judge in *Law Yiu Wai Ray v Medical Council of Hong Kong* (HCAL 46/2015), refined measures have been adopted with regard to the process of complaint cases at the PIC stage. Specifically, the doctor under complaint will be notified of the receipt of the complaint by the PIC and be provided a copy of such letter of complaint. The doctor under complaint will be informed that the PIC will meet for the first time to consider the complaint. However, he or she is not required to give any explanation at this stage. At the first meeting to consider a complaint case, the PIC may either dismiss the complaint case or decide to seek explanation/clarification from the doctor under complaint to facilitate the making of a decision<sup>1</sup> on the complaint case. In the latter scenario, the PIC will inform the doctor under complaint the allegations or disciplinary charges against him or her (if any) and invite him or her to provide a written explanation in response.

The above new measures aim at expediting process of a complaint case by streamlining the procedures so involved and keeping it in compliance with the Law. It is hoped that the new measures will assure and promote the professional competency of doctors in Hong Kong and uphold our principle of professional self-regulation.

By a letter dated 30 September 2016, the Medical Council has informed the medical profession of the above new measures.

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<sup>1</sup> The duty of the PIC is to decide only whether a complaint case should be referred to the Medical Council for inquiry. It is not empowered to pass judgment or sentence.

## Addition of New Specialties in the Specialist Register

At its meeting on 15 April 2016, the Education and Accreditation Committee of the Medical Council accepted the recommendation of the Hong Kong Academy of Medicine to add two new specialties, namely “Clinical Toxicology (臨床毒理科)” (S59) and “Paediatric Respiratory Medicine (兒童呼吸科)” (S60), to the Specialist Register.



## Quotable Qualifications

According to section 5 “Professional communication and information dissemination” of the Code of Professional Conduct, doctors may quote those quotable qualifications approved by the Medical Council in dissemination of service information to the public. The Guidelines on Quoting of Qualifications and the updated List of Quotable Qualifications (“the List”) are promulgated on the Medical Council’s website at <http://www.mchk.org.hk/english/guideline/qualification.html>.

### Additions and changes to the List of Quotable Qualifications

Since January 2016, the Medical Council, on the recommendation of the Education and Accreditation Committee, has approved additions or changes to the List as set out below.

#### (i) Quotable qualifications under the generally approved category

The Medical Council has approved the following qualifications for inclusion in the List under the generally approved category:

	Title of Qualification	Abbreviation	Chinese Title
1.	Doctor of Public Health, University of London	DrPH (Lond)	倫敦大學公共衛生博士
2.	Doctor of Medicine, Jinan University	MD (JNU)	暨南大學臨床醫學博士
3.	Certificate of Subspecialist Accreditation in Maternal and Fetal Medicine, Hong Kong College of Obstetricians and Gynaecologists	Cert HKCOG (Maternal and Fetal Med)	香港婦產科學院 母胎醫學分科認可證書
4.	Certificate of Subspecialist Accreditation in Urogynaecology, Hong Kong College of Obstetricians and Gynaecologists	Cert HKCOG (Urogynaecology)	香港婦產科學院 泌尿婦科分科認可證書

#### (ii) Quotable qualification under the specifically approved category

The Medical Council has also approved the following application for inclusion of qualification in the List under the specifically approved category:

Title of Qualification	Abbreviation	Chinese Title	Date of approval by the Medical Council	Reference
Doctor of Philosophy, The University of Hong Kong	PhD (HK)	香港大學 哲學博士	6 April 2016	MC/QQ/04/16

The qualification can only be quoted by the specific applicant to whom the approval is given.

### (iii) Chinese titles of quotable qualifications

The Medical Council at the Policy Meeting on 12 July 2016 noted that The Chinese University of Hong Kong had changed the Chinese title of postgraduate diploma from “學士後文憑” to “深造文憑” for seven quotable qualifications, and decided to change the relevant entries in the List as follows:

	Title of Qualification	Abbreviation	Chinese Title
1.	Postgraduate Diploma in Epidemiology and Biostatistics, The Chinese University of Hong Kong	PDip Epidemiology and Biostatistics (CUHK)	香港中文大學流行病學與生物統計學學士後文憑 香港中文大學流行病學與生物統計學深造文憑
	(Approval is also given to the two former courses which were known as		
	“Diploma in Epidemiology and Biostatistics” and	Dip Epidemiology and Biostatistics (CUHK)	香港中文大學流行病學與生物統計學文憑
	“Diploma in Epidemiology and Applied Statistics”. A medical practitioner can quote <u>only one</u> of the qualifications.)	Dip Epidemiology and Applied Statistics (CUHK)	香港中文大學流行病學與應用統計學文憑
(Remarks: The Chinese title of the qualification “ <i>Postgraduate Diploma in Epidemiology and Biostatistics, The Chinese University of Hong Kong</i> ” was changed to “香港中文大學流行病學與生物統計學深造文憑” for holders awarded the qualification with effect from July 2016. Holders awarded the qualification with the old Chinese title should continue to use it.)			
2.	Postgraduate Diploma in Sports Medicine and Health Science, The Chinese University of Hong Kong	PDipSMHS (CUHK)	香港中文大學運動醫學及健康科學學士後文憑 香港中文大學運動醫學及健康科學深造文憑
	Master of Science in Sports Medicine and Health Science, The Chinese University of Hong Kong	MScSMHS (CUHK)	香港中文大學運動醫學及健康科學理學碩士
(Remarks: (1) A medical practitioner possessing both qualifications can quote only one of them. (2) The Chinese title of the qualification “ <i>Postgraduate Diploma in Sports Medicine and Health Science, The Chinese University of Hong Kong</i> ” was changed to “香港中文大學運動醫學及健康科學深造文憑” for holders awarded the qualification with effect from July 2016. Holders awarded the qualification with the old Chinese title should continue to use it.)			

	Title of Qualification	Abbreviation	Chinese Title
3.	Postgraduate Diploma in End-of-Life Care, The Chinese University of Hong Kong	PgD EOLC (CUHK)	香港中文大學寧養關顧學士後文憑 香港中文大學寧養關顧深造文憑
(Remarks: The Chinese title of the qualification was changed to “香港中文大學寧養關顧深造文憑” for holders awarded the qualification with effect from July 2016. Holders awarded the qualification with the old Chinese title should continue to use it.)			
4.	Postgraduate Diploma in Mental Health, The Chinese University of Hong Kong	PDip Mental Health (CUHK)	香港中文大學精神健康醫學學士後文憑 香港中文大學精神健康醫學深造文憑
(Remarks: (1) “ <i>Master of Science in Mental Health, The Chinese University of Hong Kong</i> ” and “ <i>Postgraduate Diploma in Mental Health, The Chinese University of Hong Kong</i> ” should not be quoted simultaneously. (2) The Chinese title of the qualification was changed to “香港中文大學精神健康醫學深造文憑” for holders awarded the qualification with effect from July 2016. Holders awarded the qualification with the old Chinese title should continue to use it.)			
5.	Postgraduate Diploma in Musculoskeletal Medicine and Rehabilitation, The Chinese University of Hong Kong	PgD MMR (CUHK)	香港中文大學骨關節醫學及復康學士後文憑 香港中文大學骨關節醫學及復康深造文憑
	Master of Science in Musculoskeletal Medicine and Rehabilitation, The Chinese University of Hong Kong	MSc MMR (CUHK)	香港中文大學骨關節醫學及復康理學碩士
(Remarks: (1) A medical practitioner possessing both qualifications can quote only one of them. (2) The Chinese title of the qualification “ <i>Postgraduate Diploma in Musculoskeletal Medicine and Rehabilitation, The Chinese University of Hong Kong</i> ” was changed to “香港中文大學骨關節醫學及復康深造文憑” for holders awarded the qualification with effect from July 2017. Holders awarded the qualification with the old Chinese title should continue to use it.)			

	Title of Qualification	Abbreviation	Chinese Title
6.	Postgraduate Diploma in Public Health, The Chinese University of Hong Kong	PDPH (CUHK)	香港中文大學公共衛生學 學士後文憑 香港中文大學公共衛生學 深造文憑
(Remarks: The Chinese title of the qualification was changed to “香港中文大學公共衛生學深造文憑” for holders awarded the qualification with effect from July 2016. Holders awarded the qualification with the old Chinese title should continue to use it.)			
7.	Postgraduate Diploma in Health Services Management, The Chinese University of Hong Kong	PgD HSM (CUHK)	香港中文大學醫療管理學 學士後文憑 香港中文大學醫療管理學 深造文憑
(Remarks: (1) “ <i>Postgraduate Diploma in Health Services Management, The Chinese University of Hong Kong</i> ” and “ <i>Master of Science in Health Services Management, The Chinese University of Hong Kong</i> ” should not be quoted simultaneously. (2) The Chinese title of the qualification was changed to “香港中文大學醫療管理學深造文憑” for holders awarded the qualification with effect from July 2016. Holders awarded the qualification with the old Chinese title should continue to use it.)			

### Application for quoting research master and doctoral degrees

Doctors are advised that individual approval would be required for quoting the specifically approved qualifications (i.e. research master and doctoral degrees other than “*Master of Surgery*” and “*Doctor of Medicine*”) included in the List. Applications for quoting the specifically approved qualifications should be made to the Education and Accreditation Committee of the Medical Council.



## Amendments to the Revised Guidelines for Consideration of Quotable Qualifications

The Medical Council, on the recommendation of the Education and Accreditation Committee, decided at the Policy Meeting on 12 July 2016 to amend the Revised Guidelines for Consideration of Quotable Qualifications with the addition of paragraph 2(d) to set out the reference standard of contact hours of taught Postgraduate Diploma programme and taught Master programme or the equivalent as follows:

*“ 2(d) For a taught postgraduate programme, it should meet the following reference standard of contact hours:*

*(i) Postgraduate Diploma programme or its equivalent: 200 hours*

*(ii) Master programme or its equivalent: 400 hours*

*Contact hours refer to lectures, tutorials, practicals, case study, supervised research study, supervised dissertation writing, etc..”*

The Revised Guidelines and the application form for quotability of qualification are available for downloading on the Medical Council’s website at [http://www.mchk.org.hk/english/guideline/revised\\_guidelines.html](http://www.mchk.org.hk/english/guideline/revised_guidelines.html).

## Quotable Appointments

The Medical Council has implemented the “Rules on Quotable Appointments” (“QA Rules”) with effect from 1 December 2014.

Under the QA Rules and the “Guidelines on Quotability of Appointments by Private Hospitals, Nursing Homes, Maternity Homes and Medical Clinics”, a private hospital, nursing home, maternity home or medical clinic has to satisfy the Medical Council that it has an established and objective system of offering appointments which is acceptable to the Medical Council before its appointments can be quoted by doctors in their medical practice. The names of 13 institutions with their appointment systems accepted by the Medical Council and their approved quotable appointments are included in the “List of Quotable Appointments by Private Hospitals, Nursing Homes, Maternity Homes and Medical Clinics accepted under the Rules on Quotable Appointments” (“QA List”).

Members of the profession are required to comply with the QA Rules in quoting your appointments for the purpose of professional practice in Hong Kong. You are also advised to refer to the QA List for quotability of any appointments made by private hospitals, nursing homes, maternity homes and medical clinics before quoting them.

The QA Rules and the QA List are promulgated on the Medical Council’s website at <http://www.mchk.org.hk/english/guideline/appointment.html>.



# Statistics on Complaints / Inquiries Handled by the Medical Council in 2015

**Table 1 - Complaints received by the Medical Council**

<b>Number of Complaints Received</b>	<b>2011</b> <b>461</b>	<b>2012</b> <b>480</b>	<b>2013</b> <b>452</b>	<b>2014</b> <b>624</b>	<b>2015</b> <b>493</b>
<b>(A) Allegations by Category</b>					
1. Conviction in Court	61	63	40	58	31
(a) Failure to keep proper record of dangerous drugs	( - )	(2)	(5)	(4)	(3)
(b) Others	(61)	(61)	(35)	(54)	(28)
2. Disregard of professional responsibility to patients	294	318	311	285	289*
3. Issuing misleading/false medical certificates	29	20	41	28	24
4. Practice promotion	19	8	12	6	10
5. Misleading, unapproved description & announcement	12	8	8	12	9
6. Improper/indecent behaviour to patients	2	10	7	6	5
7. Abuse of professional position to further improper association with patients	2	-	2	2	2
8. Fitness to practise	2	2	-	2	-
9. Abuse of professional confidence	1	1	-	-	-
10. Depreciation of other medical practitioners	1	1	3	1	1
11. Improper delegation of medical duties to unregistered persons	-	1	-	-	-
12. Sharing fee and improper financial transaction	-	5	-	-	-
13. Other minor issues unrelated to professional responsibility	38	43	28	224	122
<b>(B) Progress of Complaints as at 31 December 2015</b>					
1. Dismissed by the Chairman and the Deputy Chairman of the Preliminary Investigation Committee ("PIC") in consultation with Lay Member as being frivolous or groundless	211	295	313	392	149
2. Could not be pursued further because the complainants failed to provide further information or statutory declaration or the complaints were anonymous or withdrawn, etc.	10	17	9	12	7
3. Under consideration by the Chairman and the Deputy Chairman of the PIC in consultation with Lay Member	89	25	56	132	312
4. Held in abeyance	1	1	3	-	-
5. Being considered at the PIC meetings	15	28	13	59	21
6. Dismissed by the PIC	40	25	15	1	1
7. Referred to the Medical Council for no inquiry	46	47	21	14	1
8. Referred to the Medical Council for disciplinary inquiry	46	39	19	10	2
9. Referred to the Medical Council for restoration inquiry	2	1	2	2	-
10. Referred to the Health Committee for hearing	1	2	1	2	-

## Remarks:

- \* The breakdown of cases on "Disregard of professional responsibility to patients" in 2015 is as follows:
- (a) Conducting unnecessary or inappropriate treatment/surgery – 79 cases
  - (b) Failure/unsatisfactory result of treatment/surgery, failure to properly/timely diagnose illness and disagreement with doctor's medical opinion – 78 cases
  - (c) Inappropriate prescription of drugs – 51 cases
  - (d) Failure to give proper medical advice/explanation – 29 cases
  - (e) Doctor's unprofessional attitude/Doctor-patient communication – 3 cases
  - (f) Fees and others – 49 cases

**Table 2 - Breakdown on the complaints received in 2015 which were dismissed by the Chairman and the Deputy Chairman of the Preliminary Investigation Committee of the Medical Council as being frivolous or groundless**

<u>Nature of Complaints</u>	<u>No. of Cases</u>
1. Disagreement with doctor's medical opinion	12
2. Misdiagnosis	8
3. Undesirable reactions to drugs prescribed	5
4. Sick leave and related matters	5
5. Unsatisfactory results of treatment/surgery	3
6. Practice promotion/Misleading, unapproved description & announcement	2
7. Doctor's attitude/Doctor-patient communication	1
8. Fees dispute	1
9. Other issues unrelated to professional misconduct	112
<b>Total :</b>	<b>149</b>

**Table 3 - Work of the Preliminary Investigation Committee ("PIC") of the Medical Council**

<u>Nature</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>
1. Total number of cases referred to the PIC meetings	99	95	89	95	129*
2. Total number of cases referred to the Medical Council for no inquiry after the PIC meetings	26	48	26	20	35 <sup>#</sup>
3. Total number of cases referred to the Medical Council for inquiries after the PIC meetings	33	21	32	48	57 <sup>#</sup>
4. Total number of cases referred to the Health Committee for hearing after the PIC meetings	-	-	-	-	1

**Remarks:**

\* This figure included those cases received before 2015. They were considered by the PIC in 2015 under the following categories:

	<u>No. of Cases</u>
(a) Disregard of professional responsibility to patients	63
• <i>failure/unsatisfactory results of treatment/surgery</i>	17
• <i>inappropriate prescription of drugs</i>	15
• <i>failure to properly/timely diagnose illness</i>	9
• <i>failure to give proper medical advice/explanation</i>	9
• <i>conducting unnecessary or inappropriate treatment/surgery</i>	8
• <i>fees and others</i>	5
(b) Conviction in court	48
(c) Practice promotion	6
(d) Misleading, unapproved description and announcement	5
(e) Issuing misleading/false medical certificates	1
(f) Depreciation of other medical practitioners	1
(g) Improper financial transaction	1
(h) Found guilty by overseas professional regulatory bodies	1
(i) Miscellaneous	3
<b>Total :</b>	<b>129</b>

# The cases referred by the PIC to the Medical Council in 2015 are classified as follows:

	<u>No. of Cases</u>
(A) Recommended for no inquiry	
Conviction in court	35
• <i>careless driving</i>	30
• <i>failure to comply with Buildings Ordinance order</i>	2
• <i>dangerous driving</i>	1
• <i>riding/possessing bicycle within country park or special area without consent</i>	1
• <i>failing to display valid vehicle licence</i>	1
(B) Recommended for disciplinary inquiry	
(a) Conviction in court	9
• <i>failure to keep a proper record for dangerous drugs</i>	6
• <i>fraud and obtaining access to a computer with dishonest intent</i>	1
• <i>theft</i>	1
• <i>failure to provide specimen of breath for a screening breath test by a person who is driving a motor vehicle on a road</i>	1
(b) Disregard of professional responsibility to patients	32
• <i>inappropriate prescription of drugs</i>	12
• <i>failure/unsatisfactory results of treatment/surgery</i>	6
• <i>conducting unnecessary or inappropriate treatment/surgery</i>	5
• <i>failure to properly/timely diagnose illness</i>	5
• <i>failure to give proper advice/explanation</i>	4
(c) Practice promotion/Misleading, unapproved description & announcement	8
(d) Miscellaneous	2
(C) Recommended for restoration inquiry	
(a) Conviction in court	3
• <i>practice of medicine without registration</i>	1
• <i>practice of medicine without registration, possession of dangerous drugs, possession of substance to which the Antibiotics Ordinance applies, possession of Part I poison</i>	1
• <i>conspiracy to engage in corrupt conduct at election</i>	1
(b) Medical certificates	1
(c) Miscellaneous	2
<b>Total :</b>	<b><u>92</u></b>



**Table 4 - Work statistics of the Preliminary Investigation Committee (“PIC”) of the Medical Council in 2015**

	Quarter				Total
	Jan-Mar	Apr-Jun	Jul-Sept	Oct-Dec	
No. of PIC Meetings	3	3	3	3	12
No. of cases considered	33	34	32	30	129
No. of cases dismissed (%)	9 (27.3%)	9 (26.5%)	8 (25.0%)	10 (33.3%)	36 (27.9%)
No. of cases referred to the Medical Council (%)	23 (69.7%)	25 (73.5%)	24 (75.0%)	20 (66.7%)	92* (71.3%)
No. of cases referred to the Health Committee (%)	1 (3.0%)	-- (0%)	-- (0%)	-- (0%)	1 (0.8%)

\* Of them, 35 cases were of minor offences and the Medical Council accepted the PIC’s recommendation that no inquiry was to be held (Please see details at Table 3).

**Table 5 - Disciplinary inquiries conducted by the Medical Council in 2015**

Nature	No. of Cases Involved	Decision of the Council
(A) Conviction in court		
(a) Misconduct in public office and false accounting	(1)	Removed for 6 months
(b) Failure to keep a register of dangerous drugs	(1)	Removed for 2 months (suspended for 12 months)
(c) Behaving in a disorderly manner in public place and resisting a police officer in the due execution of his duty	(1)	Removed for 4 months (suspended for 12 months)
(d) Indecent assault	(1)	1 charge : Removed permanently 1 charge : Warning letter
<b>Sub-total</b>		<b>4</b>
(B) Disregard of professional responsibility to patients	(1)	1 charge : Warning letter 1 charge : Not guilty
	(1)	Warning letter (not gazetted)
	(1)	1 charge : Removed for 6 months 1 charge : Removed for 6 months 1 charge : Removed for 3 months 1 charge : Not guilty (removal orders run concurrently)
		(suspended for 12 months)

Nature	No. of Cases Involved	Decision of the Council
(B) Disregard of professional responsibility to patients ( <i>continued</i> )	(1)	1 charge : Removed for 12 months 1 charge : Removed for 9 months (removal orders run concurrently) (suspended for 12 months)
	(1)	Not guilty
	(7)	To be continued
<b>Sub-total</b>		<b>12</b>
(C) Practice Promotion	(1)	1 charge : Removed for 1 month 1 charge : Removed for 1 month 1 charge : Removed for 1 month 1 charge : Removed for 1 month (removal orders run concurrently) (suspended for 12 months)
	(1) (for 3 consolidated complaint cases)	Removed for 1 month (suspended for 12 months)
	(1)	Removed for 3 months (suspended for 36 months)
<b>Sub-total</b>		<b>3</b>
(D) Issuing misleading/false medical certificates	(1)	Warning letter (not gazetted)
	(1)	Not guilty
<b>Sub-total</b>		<b>2</b>
<b>Total :</b>		<b>21</b>

[Summary : 12 cases : guilty

2 cases : not guilty

7 cases : to be continued

All cases were referred to the Medical Council for inquiry by the PIC meetings held in/before 2015.]

**Table 6 - Figures on appeal cases**

	<u>2011</u>	<u>2012</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>
No. of appeals lodged during the year	5	1	4	2	1
No. of appeal cases carried forward from previous years	13	6	3	5	4
<b>Total no. of appeal cases in progress in the year :</b>	<b>18</b>	<b>7</b>	<b>7</b>	<b>7</b>	<b>5</b>
<b>Results of appeal cases concluded in 2015 :</b>					
	<u>No. of cases</u>				
(a) Dismissed by Court of Appeal	3				
(b) Allowed by Court of Appeal	0				
(c) Appeal withdrawn	1				
<b>Total :</b>	<b>4</b>				

## Result of the 2015 Election of the Medical Council

The Medical Council held its 20<sup>th</sup> election of Medical Council Members on 16 December 2015 to fill two vacancies. Dr Hon Pierre CHAN and Dr CHEUNG Tak Hong were elected/re-elected by obtaining 1,812 and 1,544 votes respectively. Their term of office as Members of the Medical Council commenced from 24 January 2016 for a period of three years.



## Reminders

### Reporting of offence punishable with imprisonment

A doctor convicted of any offence punishable with imprisonment is liable to disciplinary proceedings of the Medical Council, regardless of whether he/she is sentenced to imprisonment. Some offences, though appear to be trivial, e.g. careless driving, riding/driving on a footpath, failing to comply with a prescribed traffic sign within the Tsing Ma Control Area, failing to comply with Buildings Ordinance order, failing to wear seat belt, using vehicle without insurance, etc. are in fact offences punishable with imprisonment.

Members of the profession are reminded that upon conviction of an offence punishable with imprisonment they should report to the Medical Council within 28 days as required under section 29 of the Code of Professional Conduct as follows:

*“A doctor who has been convicted in or outside Hong Kong of an offence punishable with imprisonment or has been the subject of adverse findings in disciplinary proceedings by other professional regulatory bodies is required to report the matter to the Council within 28 days from the conviction or the adverse disciplinary finding, even if the matter is under appeal. Failure to report within the specified time will in itself be ground for disciplinary action. In case of doubt the matter should be reported.”*

In reporting conviction cases to the Medical Council, the doctor should provide all relevant document(s) such as certificate of trial as far as possible. Provision of sufficient information saves time in making clarification with the doctor and liaising with the adjudicating court for retrieval of the related court document(s), materials of which facilitate the deliberation of the Medical Council in deciding whether a disciplinary inquiry on the conviction by the doctor should be held in the first instance.

### Timely renewal of practising/retention certificates

A notification letter was issued to individual doctors on 30 September 2016 inviting them to apply for renewal of the annual practising/retention certificates. The Medical Council would like to remind doctors to make timely application for renewal of the certificates, and draw doctors' attention to the following:

- (a) According to section 20A of the Medical Registration Ordinance (“the Ordinance”), a doctor who has not renewed the practising certificate by 31 December cannot lawfully practise medicine from 1 January of the following year onwards, until and unless he/she has obtained a valid practising certificate.
- (b) Section 19(1)(b) of the Ordinance provides that the Medical Council may order the removal from the General Register of the name of any person who has not, before 30 June of a year, obtained his/her practising/retention certificate for that year. If a doctor's name is removed from the General Register, he/she will cease to be a registered doctor and cannot continue to practise. It is a criminal offence under section 28(2) of the Ordinance for a person whose name is not on the General Register to practise medicine or surgery.

## Change of registered address

Under the Ordinance, any registered medical practitioner is required to provide the Registrar of Medical Practitioners with an address at which notices from the Medical Council may be served on him/her. For this purpose, please notify the Registrar of Medical Practitioners either in writing or by completing a form, which is available from the Council's website and can be obtained from the Central Registration Office at the following address, as soon as there is any change in your registered address:

17/F, Wu Chung House, 213 Queen's Road East, Wanchai, Hong Kong  
Tel. No.: 2961 8648 / 2961 8655  
Fax No.: 2891 7946 / 2573 1000

The address provided will be used for the purposes associated with registration under the Ordinance. The registered addresses as well as the names, qualifications and dates of qualifications of all persons whose names appear on the General Register are required to be published annually in the Gazette.

Although the registered address may be a practising address, a residential address or a Post Office Box number, the Medical Council advises the applicant that the practising address be provided as the registered address. The practising address will be of more meaningful reference for the public in ascertaining who is entitled to practise medicine in Hong Kong, and will also afford privacy to the practitioner's residential address.

While publication of the registered medical practitioner's registered address in the Gazette is a mandatory requirement under the Ordinance, the Medical Council has decided that a registered medical practitioner may choose whether to have his/her registered address published in the Council's website. Any subsequent change in your choice must be notified in writing to the Registrar of Medical Practitioners. Given the size of the updating exercise which involves over 14,000 entries, the list of registered medical practitioners on the website will be updated on a monthly basis. Any request for changing the publication of registered address and/or any other information in individual entries on the Medical Council's website will be processed only during the updating exercises.

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\* serve on a rotation basis each for a period of 3 months

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