

ADVICE / INFORMATION FOR ALL REGISTERED MEDICAL PRACTITIONERS

About the Professional Code and Conduct

On the recommendation of the Preliminary Investigation Committee, the Council would like to draw the attention of members of the profession to the following disciplinary cases discussed by the Committee recently:

Section 10 "Prescription and labelling of dispensed medicines"

A doctor in a complaint case was alleged to have failed to properly and separately label the medications dispensed to her patient, by dispensing more than one drug in one medicine bag to the said patient.

The Preliminary Investigation Committee would like to remind members of the need to strictly comply with section 10.1 of the Professional Code and Conduct regarding the prescription and labelling of dispensed medicines. That is, "all medications dispensed to patients directly or indirectly by a medical practitioner should be properly and separately labeled with the following essential information:-

(a) name of doctor or means of identifying the doctor who prescribes the medication; (b) a name that properly identifies the patient; (c) the date of dispensing; (d) the trade name or pharmacological name of the drug; (e) the dosages, where appropriate; (f) the method and dosage of administration; and (g) precautions where applicable. Failure to comply with the section may lead to disciplinary action.



Section 14 "Relationship between doctors and organizations"

Some doctors in a complaint case were alleged to have allowed references to their names, professional titles and places of work in an advertisement in a newspaper for the promotion of a commercial slimming business in such a way that it might appear to the public that they were endorsing that business.

The Preliminary Investigation Committee considers that it is advisable for members to take extra care to ensure that no reference should be made to their status as doctors or to their place of work in this type of advertisement.



Section 3 "Untrue or misleading certificates and other professional documents"

Section 4 "Communication in professional practice"

Section 15 "Improper financial transactions"

The Council would like to remind members of the profession of the need to familiarize themselves with the following sections of the Professional Code and Conduct. Failure to comply with the sections may be subject to disciplinary action.

3.1 Medical practitioners are required to issue reports and certificates for a variety of purposes (e.g. insurance claim forms, receipts, medical reports, international vaccination certificates, incapacity to work through illness or injury certificates etc.) on the assumption that the truth of the certificates can be accepted without question. In some cases the certificates are required to include a statement that a patient has been examined on a particular date. Medical practitioners are expected to exercise care in issuing certificates and kindred documents, and should not include in them statements which the medical practitioner has not taken appropriate steps to verify. Any medical practitioner who in his professional capacity gives any certificate or similar document containing statements which are untrue, misleading or otherwise improper renders himself liable to disciplinary proceedings. In particular, medical practitioners are warned that the signing of blank certificates is prohibited by the Council.

4.1 *The need for good communication and information*

4.1.1 Good communication between doctors and patients, and between doctors, is fundamental to the provision of good patient care.

4.1.2 A key aspect of good communication in professional practice is to provide appropriate information to users of a doctor's service and to enable those who need such

information to have ready access to it. Patients need such information in order to make an informed choice of medical practitioner and to make the best use of the services the medical practitioner offers. Doctors, for their part, need information about the services of their professional colleagues. Medical practitioners in particular need information about specialist services so that they may advise patients and refer them, where appropriate, for further investigations and/or treatment.

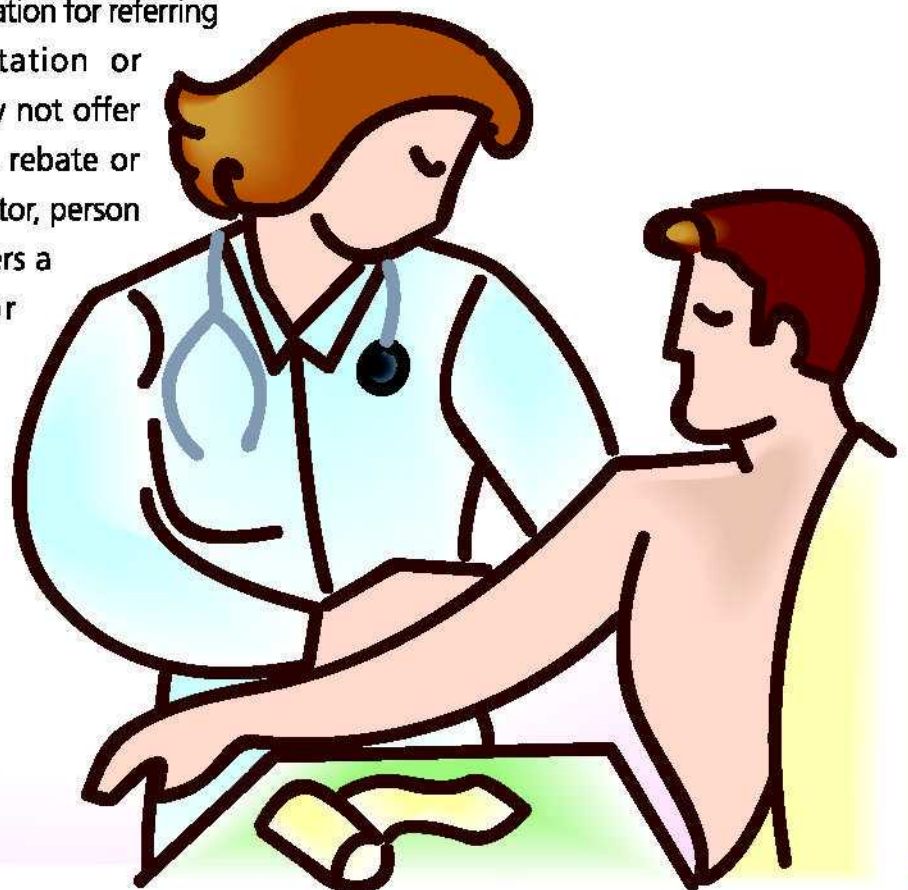
- 4.1.3 Persons seeking medical attention for themselves or their families can nevertheless be particularly vulnerable to persuasive influence, and patients are entitled to protection from misleading advertisements. Practice promotion of doctors' medical services as if the provision of medical care were no more than a commercial activity is likely both to undermine public trust in the medical profession and, over time, to diminish the standard of medical care.

4.2 Principles and rules of good communication and information

- 4.2.1 Information refers to information of any forms, computer-related information, internet modalities, telemedicine related items and any other forms of electronic transmission. Any information provided by a doctor to the public or a patient:-
- (a) shall be legal, decent, honest, truthful, factual, accurate, and not exaggerated; and
 - (b) shall not claim superiority over or disparage other doctors or their work.

- 15.1 A doctor may not receive any payment by way of commission, rebate or otherwise from another doctor or organization for referring a patient for consultation or treatment. A doctor may not offer or pay any commission, rebate or otherwise to another doctor, person or organization who refers a patient to him for consultation or treatment.

- 15.2 A doctor shall not share his fees with any other person other than the bona fide partners of that practice.



- 15.3 A doctor shall not receive any rebate from diagnostic laboratories or similar organizations to whom he refers patients.
- 15.4 If a doctor has financial or commercial interests in organizations providing health care or in pharmaceutical or other biomedical companies, these must not affect the way he prescribes for, treats or refers patients.
- 15.5 A doctor, before taking part in discussion with patients or their relatives about buying goods or services, must declare any relevant financial interest or commercial interest which he or his family may have in the purchase.
- 15.6 The seeking or acceptance by a doctor from a hospital, nursing home, health centre or similar institution of any inducement for the referral of patients to the institution, such as free or subsidized consulting premises or secretarial assistance, is considered improper. Similarly the offering of such inducements to colleagues by doctors who manage or direct such institutions may be regarded as improper.
- 15.7 Sponsorship from commercial organization for participation in scientific meetings, or for educational and charitable services is acceptable provided the amount sponsored is reasonable and not excessive.

Recommendations made by the Jury at the conclusion of a Death Inquest

At the request of a Coroner's Court and on the recommendation of the Ethics Committee, the Medical Council would like to draw the attention of members of the profession to the following recommendations made by the Jury at the conclusion of a Death Inquest :-

- The nurse should always ask the patient whether he / she has fever. If the answer is positive, the temperature should be taken and recorded down on the patient's record. Even if there isn't any fever, the remark of "no fever" should also be recorded as a reference.
- As travelling abroad becomes more frequent, doctors should be more alert and ask the patient's travel history.
- More publications or circulations should be passed down to the public so as to educate them and alert their awareness of certain diseases.
- Doctors should be provided with a checklist / guidelines as to what questions to ask.



QUOTABLE QUALIFICATIONS

The Medical Council approved the following qualifications to be included in the List of Quotable Qualifications :-

	Title of Qualifications	Abbreviation	Chinese Title
1.	Diploma in Tropical Child Health, University of Liverpool	DTCH (Lpool)	英國利物浦大學 熱帶兒科學文憑
2.	Graduate Diploma in Geriatric Medicine, University of New South Wales	GradDipGeriMed (New South Wales)	澳洲新南威爾斯大學 老人醫學深造文憑
3.	Master of Medicine in Geriatrics, University of New South Wales	MMed (Geriatrics) (New South Wales)	澳洲新南威爾斯大學 老人醫學碩士
4.	Postgraduate Diploma in Aviation Medicine, University of Otago	PGDipAvMed (Otago)	新西蘭奧塔哥大學 航空醫學深造文憑
5.	Master of Science in Clinical Gerontology, Chinese University of Hong Kong	MSc Clinical Gerontology (CUHK)	香港中文大學 臨牀老人學理學碩士
6.	Member, Royal College of Surgeons of Edinburgh	MRCSEd	英國愛丁堡皇家外科 醫學院院員
7.	Postgraduate Diploma in Sport and Exercise Medicine, University of Bath or Master of Science in Sport and Exercise Medicine, University of Bath (A medical practitioner can quote <u>only one</u> of the qualifications)	PGDipSEM (Bath) MScSEM (Bath)	英國巴斯大學體育及 運動醫學深造文憑 英國巴斯大學體育及 運動醫學碩士
8.	Master of Sports Medicine, University of New South Wales	MSpMed (New South Wales)	澳洲新南威爾斯大學 運動醫學碩士
9.	Master of Science in Pain Management, University of Wales	MSc Pain M (Wales)	英國威爾斯大學 疼痛科碩士

CRITERIA FOR VETTING QUOTABLE QUALIFICATIONS

This is promulgated for general information that the Medical Council, on the recommendation of the Education and Accreditation Committee, has endorsed that as a matter of policy no qualification would be approved for inclusion in the List of Quotable Qualifications before the completion of the initial course leading to that qualification. This policy will be incorporated into the current Criteria for Vetting Quotable Qualifications.

The Specialist Register - Addition of New Specialty

The Medical Council has recently approved the inclusion of "Reproductive Medicine (生殖醫學科)" as a new specialty in the Specialist Register.

Enquiries relating to the application for inclusion of names under the Specialist Register or change of specialty should be directed to the following address:-

Medical Council Secretariat
4/F, Hong Kong Academy of Medicine Jockey Club Building,
99 Wong Chuk Hang Road,
Aberdeen,
Hong Kong.
Tel No. 2873 4829
Fax No. 2554 0577

Application for Removal of Name from the Specialist Register

This is to inform doctors whose names are included in the Specialist Register that they could apply to the Medical Council for removal of their names from the Specialist Register if they are no longer practising medicine. Applications for removal of names from the Specialist Register should be sent to the following address:-

Medical Council Secretariat
4/F, Hong Kong Academy of Medicine Jockey Club Building,
99 Wong Chuk Hang Road,
Aberdeen,
Hong Kong.
Tel No. 2873 4829
Fax No. 2554 0577

STATISTICS ON DISCIPLINARY CASES HANDLED BY THE MEDICAL COUNCIL

Complaints Received by the Medical Council

Nature	1998	1999	2000	2001	2002
1. Conviction in Court					
(a) Failure to keep proper record of dangerous drugs	2	1	-	3	1
(b) Others	7	6	5	7	11
2. Disregard of professional responsibility to patients	133	120	114	121	160*
3. Drug-related cases (excluding court convictions)					
(a) Failure to properly label drugs dispensed	1	3	8	4	4
(b) Failure to keep proper record of dangerous drugs	-	1	-	-	-
(c) Prescription of drugs of dependence other than bona-fide treatment	4	-	4	1	2
(d) Abuse of Drugs	-	-	-	-	-
(e) Others	1	-	-	1	-
4. Termination of pregnancy	-	1	-	-	-
5. Abuse of professional position to further improper association with patients	-	-	-	-	1
6. Improper, indecent behaviour to patients	12	2	3	8	2
7. Abuse of professional confidence	1	-	-	1	1
8. Advertising/canvassing	33	35	25	19	24
9. Sharing fee & improper financial transaction	-	1	-	-	3
10. Depreciation of other medical practitioner(s)	2	2	-	-	3
11. Misleading, unapproved description & announcement	8	9	4	5	6
12. Issuing misleading, false medical certificates	18	26	14	21	23
13. Improper delegation of medical duties to unregistered persons	2	1	1	2	-
14. Fitness to practise	2	-	1	-	-
15. Miscellaneous	19	22	48	43	46
Total :	245	230	227	236	287

Remarks:

(i) Of the 287 complaints received in 2002:

- 28 cases (9%) were inactionable because the complainants failed to provide further information or statutory declaration, or the complaints were anonymous, etc.
- 117 cases (41%) were dismissed by the PIC Chairman, the PIC Deputy Chairman and the Lay Member as being frivolous or groundless.
- 71 cases (25%) were referred to the PIC meeting.
- 71 cases (25%) are pending further information or statutory declaration.

(ii) For cases referred to the PIC meeting, some of them have been carried forward to the PIC meetings to be held in 2003.

(iii) *The major categories of cases on disregard of professional responsibility to patients in 2002 include:

- (1) failure/unsatisfactory result of surgery (25%)
- (2) failure to properly/timely diagnose illness or to give proper advice (29%)

STATISTICS ON DISCIPLINARY CASES HANDLED BY THE MEDICAL COUNCIL

Breakdown on the complaints received in 2002 which
were dismissed by the PIC Chairman, Deputy Chairman
and the Lay Member

Reasons for Dismissal	No. of Cases
Doctors' attitude	12
Commercial dispute	-
Communication problem	6
Complications of treatment	15
Unsatisfactory results of treatment	5
Difference in medical opinion	11
Misdiagnosis	5
No evidence	19
Groundless	44
TOTAL	117

STATISTICS ON DISCIPLINARY CASES HANDLED BY THE MEDICAL COUNCIL

Work of the Council's Preliminary Investigation Committee (PIC)

Nature	1998	1999	2000	2001	2002
1. Total cases considered by the PIC	56	39	58	80	76*
2. Total cases referred by the PIC to Council for inquiries	7	17	15	18	14#
3. Total cases referred by the PIC to Health Committee for hearing	-	2	-	-	-

Remarks:

*The major categories of cases considered by the PIC in 2002 include:

	No. of Cases
(a) Conviction in court	7
(b) Disregard of professional responsibility to patients	
• inappropriate prescription of drugs	8
• failure to properly/timely diagnose illness	10
• failure to give proper advice/explanation	4
• conducting unnecessary or inappropriate treatment/surgery	1
• failure/unsatisfactory result of surgery	5
• others	16
(c) Drug-related cases (excluding court convictions)	
• improper labelling of drugs	2
• others	1
(d) Advertising/canvassing	10
(e) Issuing untrue or misleading medical certificates	3
(f) Misleading, unapproved description & announcement	1
(g) Improper, indecent behaviour to patients	1
(h) Miscellaneous	7
	76

#The major categories of cases referred by the PIC to the Medical Council for inquiry in 2002 include:

	No. of Cases	
(a) Conviction		
• careless driving	4	<i>(These cases were of minor offences and the Council accepted the PIC's recommendation that no inquiry was to be held.)</i>
• others	2	
• failure to keep proper record of dangerous drugs	1	
(b) Disregard of professional responsibility to patients		<i>(Of these 8 cases, 2 cases have been heard by the Council in 2002.)</i>
• inappropriate prescription of drugs	1	
• failure to properly/timely diagnose illness	1	
(c) Improper financial transaction	1	
(d) Issuing untrue or misleading medical certificates	2	
(e) Others	2	
	14	

STATISTICS ON DISCIPLINARY CASES HANDLED BY THE MEDICAL COUNCIL

Work Statistics of the Council's Preliminary Investigation Committee in the Year of 2002

	Quarter				Total
	Jan-Mar	Apr-June	July-Sept	Oct-Dec	
No. of PIC Meetings	2	3	3	3	11
No. of cases considered	15	16	21	24	76
No. of cases dismissed (%)	12 (80%)	14 (87.5%)	17 (81%)	17 (70.9%)	60 (78.9%)
No. of cases pending further investigation (%)	- (-)	- (-)	- (-)	2 (8.3%)	2 (2.6%)
No. of cases referred to inquiry (%)	3 (20%)	2 (12.5%)	4 (19%)	5 (20.8%)	14 (18.5%)
No. of cases referred to Health Committee	- (-)	- (-)	- (-)	- (-)	- (-)

STATISTICS ON DISCIPLINARY CASES HANDLED BY THE MEDICAL COUNCIL

Disciplinary Inquiries conducted by the Medical Council in 2002

No. of Cases	Nature	Decision of the Medical Council
3	Disregard of professional responsibilities to patients	1 Removed for 3 months 1 Reprimand 1 Not guilty
2	Conviction <ul style="list-style-type: none"> • failure to keep proper record of dangerous drugs • conspiracy to defraud 	Warning letter Removed for 1 year
2	Failure to properly label drugs dispensed	2 Removed for 1 month (suspended for 1 year)
1	Improper financial transaction	Reprimand
2	Miscellaneous <ul style="list-style-type: none"> • made fraudulent representations to another medical practitioner to induce him to join his medical group practice • practised in another name which was not included in the General Register 	Removed for 3 years Warning letter

[Summary : 1 case: not guilty

9 cases: guilty

Of these 10 cases, 8 cases were referred for inquiry by the PIC meetings held in 2001]

STATISTICS ON DISCIPLINARY CASES HANDLED BY THE MEDICAL COUNCIL

Figures on Appeal Cases

	1998	1999	2000	2001	2002
No. of Appeals lodged	4(+1*)	-	2	2(+3*)	1
No. of Appeal cases carried forward from previous years	2	-	-	2	4
Total No. of Appeal cases in progress in the year	7	0	2	7	5

Result of Appeal Cases concluded in 2002:

(a) Dismissed by the Court of First Instance/ Court of Appeal	2
(b) Allowed	1
(c) Appeal withdrawn	1
	4

* "Judicial Review" case at the Court of First Instance / Court of Appeal.

REMINDERS

Renewal of annual practising / retention certificates

Under the Medical Registration Ordinance, it is necessary for all registered medical practitioners, irrespective of whether they are in private practice or public service, to apply for renewal of their annual practising / retention certificates on 1st January each year. Any medical practitioner who has not yet done so this year should send in his / her application together with the prescribed payment to the Registrar of Medical Practitioners at 17/F., Wu Chung House, 213 Queen's Road East, Wan Chai, Hong Kong (Tel. 2961 8648 / 2961 8655).

The current prescribed fees are \$420 for a practising certificate and \$290 for a retention certificate. All cheques should be crossed and made payable to "*The Government of the Hong Kong Special Administrative Region*".

Please note that the Medical Council may order the name of any registered medical practitioner to be removed from the General Register if the practitioner concerned has failed to apply for his / her annual practising / retention certificate before 30 June of a year. His / her name will simultaneously be removed from the Specialist Register if he / she has been registered as a "specialist".

Change of registered address

Under the Medical Registration Ordinance, all registered medical practitioners are 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 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,
Wan Chai, Hong Kong.

Tel. No. 2961 8648 / 2961 8655
Fax No. 2891 7946

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* serve on rotation basis in the sequence of alphabetical order of their surnames for a period of 3 months.