## 填寫資料後即成 限閱文件 RESTRICTED WHEN ENTERED WITH DATA

\*HKID/Passport Number:



\*Name:

# CERVICAL SCREENING INFORMATION SYSTEM (CSIS)

## 子宫頸普查資訊系統(系統)

Information Update Form 資料更新表格

To be filled in by Registrant 供已登記者填寫

Please read Personal Information Collection Statement overleaf and fill in this form in BLOCK letters. (\*Mandatory field)

請參閱背頁之收集個人資料用途聲明,然後以正楷填寫本表格。

(\*為必須填寫項目)

## Personal Particulars 個人資料

*姓名:	*香港身份證/護照號碼:
*HK Mobile Number:	Other Phone Number:
*香港手提電話:	其他聯絡電話:
Updated Information 更新資料	
Correspondence Address: 通訊地址:	
HK Mobile Number:	
香港手提電話:	
E-mail Address: 電郵地址:	
Method of Communication (you may select more than one option) 通訊方式(可選擇多於一項): □ SMS 手機短訊 □ Email 電郵 □ Postal mail 郵寄	
Note: If registered through DH clinic, the contact information, including the method of communication, will be updated on the Clinical Information Management System accordingly, which is shared across all services in DH. 註:如曾經於衞生署其他診所登記,適用於衞生署各部門的臨床訊息管理系統將更新相關聯絡資料,包括通訊方式。	
Preferred Language of Correspondence (Select ONE ONLY)	
預設通訊語言( <b>只選一項</b> )	
□ Chinese 中文 □ English 英文	
*Declaration 聲明	
<ol> <li>I confirm that the information given is correct and complete.</li> <li>I fully understand the Personal Information Collection Statement overleaf and I agree to let my personal data and health information to be disclosed by the relevant parties listed in the Statement to the Department of Health for the stated purposes.         A copy of this consent is valid as the original. This consent shall remain valid unless and until written notice of my revocation is received by the said relevant parties which actually have in their possession my personal data and which have been authorized to provide such data.     </li> </ol>	
<ol> <li>本人證實填寫的資料乃屬正確及完整。</li> <li>本人完全明白印於背頁之收集個人資料用途聲明,並同意聲明內所列的有關機構及組織向衞生署提供本人的個人及健康資料以作所述用途。本同意書的副本與正本同樣有效。除非擁有本人的個人資料及獲得授權透露該等資料的有關機構及組織收到本人的書面通知撤銷此同意書,否則本同意書將維持有效。</li> </ol>	
Signature: 簽署:	Date: 日期:



Please send the completed form by post to the Cervical Screening Programme Office, Department of Health Room 10, 5/F, 134 Queen's Road West, Sai Ying Pun, Hong Kong

請將填妥之「子宮頸普查資訊系統」更新表格寄往:

香港西營盤皇后大道西 134 號 5 字樓 10 室 衞生署子宮頸普查計劃辦事處

Photocopy of the blank form is accepted. Information update can also be done online at www.csis.gov.hk 如有需要,可自行影印此表格。亦可透過互聯網 www.csis.gov.hk 更改資料。

填寫資料後即成 限閱文件
RESTRICTED WHEN ENTERED WITH DATA

## Cervical Screening Information System Information Update Form (for Registrant)

## **Personal Information Collection Statement**

We shall keep your personal data confidential at all times. Our policies and practices with respect to the collection, use, retention, disclosure, transfer, security and access of personal data will be in accordance with the Personal Data (Privacy) Ordinance (Cap. 486) and are as set out in this Statement.

By signing your agreement to this Statement in the Registration Form, you have authorized any Services within the Department of Health (DH), the Hospital Authority and the public hospitals under its management, any entities (including subsidiaries) owned/controlled by the Hospital Authority, private hospitals and clinics, and any third parties as appropriate to provide your personal data (including health information) to the Cervical Screening Information System (CSIS) of DH. Such personal data will be used for the purposes stated below.

#### **Purpose of Collection**

Your personal data and health information provided to the CSIS which is maintained by DH, will be used for the following purposes:

- 1. Recording and transferring of your personal data and health information (collected at anytime from your registration with the CSIS until your withdrawal) for continuity of care or reference by other medical professionals who provide care to you (if you withdraw from the CSIS, your record will only be retained for internal use and accessed by DH);
- 2. Contacting you and sending screening reminders and notifications to you;
- 3. Preparing statistics for research or teaching purposes;
- 4. For quality assurance of the CSIS; and
- 5. Investigating and following up matters related to the CSIS.

The provision of personal data is voluntary. If you do not provide sufficient information, we may not be able to prove that you have registered with the CSIS and cannot provide/coordinate services for you.

#### **Classes of Transferees of Personal Data**

Besides internal use within DH, your personal data and health information may also be accessed by, disclosed and transferred to other health care providers, including doctors and pathology laboratories, Government bureaux/departments, the Hospital Authority, and any relevant third parties for the purposes mentioned above, if required. Apart from this, the data may only be disclosed to parties where you have given consent to such disclosure or where such disclosure is allowed under the Personal Data (Privacy) Ordinance.

#### 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.

#### Enquiries

Written enquiries concerning the personal data provided, including the making of access and corrections, should be addressed to Cervical Screening Programme Office, Department of Health, Room 10, 5/F, 134 Queen's Road West, Sai Ying Pun, Hong Kong. You may also visit our website: www.cervicalscreening.gov.hk.

## 子宮頸普查資訊系統 資料更新表格(已登記者)

## 收集個人資料用途聲明

我們會致力把你的個人資料保密。本署有關個人資料的收集、使用、保存、披露、轉交、保安和查閱的政策,均根據 486 章《個人資料(私隱)條例》而制定。

如你在登記表格簽署同意這份聲明,即代表你授權衞生署屬下部門、醫院管理局、醫院管理局負責管理的公立醫院及其全資擁有/管轄的機構(包括附屬公司)、私家醫院及診所,及其他有關機構或組織,向衞生署子宮頸普查資訊系統(系統)提供你的個人和健康資料,而所提供的資料將會作下述用途。

## 收集資料的目的

你於系統所儲存的個人及健康資料,會由衞生署作以下用途:

- 記錄你的個人和健康資料〔自你登記系統起至退出期間所收集到的資料〕以作持續照顧或轉交其他向你提供服務的專業醫護人員作參考之用〔假如你退出本系統,你的記錄會繼續被保存,但只供衞生署內部查閱及使用〕;
- 2. 聯絡你和寄出覆檢提醒信和通知書;
- 3. 製備統計數字,以進行研究或教學用途;
- 4. 監控系統之質素;及
- 5. 調查及跟進與系統有關之事項。

個人資料的提供純屬自願性質。如你不提供充足的資料,我們可能無法證明你已登記了系統,因而不能為你提供/協調服務。

## 個人資料轉交到的人士/機構類別

除了供本署內部使用外,你所提供的個人及健康資料亦可能於有需要時因以上所列之目的供其他醫護人員/機構,包括醫生及病理學化驗所、政府部門、醫院管理局或有關人士查閱及向他們披露及轉交。此外,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,才向有關方面披露。

#### 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,包括有權取得你所提供的個人資料。本系統因應查閱資料要求而提供資料時,可能要徵收費用。

#### 杳詢

有關所提供個人資料(包括查閱及修正資料)的查詢,請以書面方式交到以下地址:香港西營盤皇后大道西 134 號 5 字樓 10 室,衞生署子宮頸普查計劃辦事處。你亦可瀏覽我們的網頁: www.cervicalscreening.gov.hk。