

## Electronic Health Record Sharing System (eHRSS)

### Additional Healthcare Service Location Form

(Please fill in for each additional Healthcare Service Location)

PART 1 – Information of Healthcare Provider (HCP)		<u>Healthcare provided at Service Location (can ✓ more than one):</u>  <input checked="" type="checkbox"/> General and/or specialist medical service <input type="checkbox"/> Dental <input type="checkbox"/> Elderly – Residential / Day Care / Others* <input type="checkbox"/> Rehabilitation – Residential / Day Care/ Others* <input type="checkbox"/> Laboratory <input type="checkbox"/> Radiology <input type="checkbox"/> Pharmacy <input type="checkbox"/> Occupational therapy <input type="checkbox"/> Physiotherapy <input type="checkbox"/> Optometry <input type="checkbox"/> Chinese Medicine <input type="checkbox"/> _____
Name of Business/ Corporation (English)	ABC Medical Centre Limited	
Name of Business/ Corporation (Chinese)	ABC 醫療中心有限公司	
PART 2 – Information of additional Healthcare Service Location		
Name of Healthcare Service Location in eHRSS (English)	ABC Dialysis Centre	
Name of Healthcare Service Location in eHRSS (Chinese)	ABC 血液透析中心	
Company Phone Number (852) 2386 1388	Fax Number (For document upload) (852) 2386 1387	
Address of Health Service Location (English)		*Delete as appropriate  <div style="background-color: #f5f5f5; padding: 10px;"> <p style="text-align: center; margin: 0;"><b><u>Official Use</u></b></p> <p>PPP: _____</p> <p>_____</p> <p>Processed by _____</p> </div>
Room/Floor	3803	
Building	Nathan Building	
Street	300 Nathan Building	
District	Yau Tsum Mong District	
Remark: You may be requested to submit additional or missing information if required. Failure to provide the information requested or get the connection setup ready within 60 days after the HCP registration form is received by eHR RO, such application will be deemed unsuccessful and all related documents shall be disposed of without further notice.		

## **PERSONAL INFORMATION COLLECTION STATEMENT**

### **Purposes of Collection**

We, the Electronic Health Record Office under the Health Bureau of HKSARG, may collect a variety of information including *name, address, telephone number(s), business registration and healthcare provider registration information* of your organisation, and/or your personal information including *names, titles, identity document number and contact information (e.g. telephone number(s) and email address) and professional registration information (if applicable)*.

The personal data or any information we collected from you and/or your organisation is used for your registration as a registered healthcare provider in the Electronic Health Record Sharing System (eHRSS) or the creation and maintenance of your user account as an authorised user working under a healthcare provider who have participated in eHRSS, and related matters under the Electronic Health Record Sharing System Ordinance (Cap 625) (eHRSSO). Your registration is essential, as only authorised user working under registered healthcare provider with valid account can access information and function(s) in eHRSS. Unless for specified purpose stated in eHRSSO, using your personal information in eHRSS for direct marketing is an offence.

### **Classes of Transferees**

Except with your prior consent, we will not transfer or disclose the collected personal information to any third party except as stated below:

- (1) the Department of Health, Hospital Authority or any person or entity whom we may appoint in writing to assist in performing a function and exercising a power, pursuant to eHRSSO;
- (2) any personnel, agent, adviser, auditor, contractor or service provider engaged by us to provide services or advice (e.g. technical, security or data processing service...etc.) in connection with our operations;
- (3) any person to whom we are required to make disclosure under any law or court order applicable in Hong Kong.

### **Access and Correction of Your Personal Data**

You have the rights of access and correction of the personal data provided under Personal Data (Privacy) Ordinance; please contact the Electronic Health Record Registration Office for more information. A non-excessive fee will be charged for complying with your data access request.

### **Enquiries**

Enquiries concerning personal data provided, including the making of access and correction should be addressed to:

Electronic Health Record Registration Office

Address: Unit 1102, 11/F, Harbourside HQ, 8 Lam Chak Street, Kowloon Bay, H.K.

Hotline: (852) 3467 6230

Fax: (852) 3467 6099

Email: [ehr@ehealth.gov.hk](mailto:ehr@ehealth.gov.hk)