

Human Organ Transplant Ordinance (Cap. 465)

Administrative Guidelines (2019 Edition)

Human Organ Transplant Board
May 2019

Human Organ Transplant Ordinance (Cap. 465)

Administrative Guidelines (2019 Edition)

Contents	Page
Purpose and Nature of Guidelines	1
The Ordinance and the Regulation	1
Interpretation of “Organ”	1
Interpretation of “Payment”	2
Interpretation of “Registered Medical Practitioner”	2
Interpretation of “Restricted Organ Removal” and “Restricted Organ Transplant”	2
Age Requirement for a Living Donor	2
Establishment of “Genetic Relationship”	2
Establishment of “Marital Relationship which has Subsisted for not less than 3 Years”	3
Statutory Requirements for Specified Activities	4
Detailed Procedures	
A. Restricted Organ Removal and/or Restricted Organ Transplant Necessitating the Board’s Prior Written Approval	6
B. Restricted Organ Removal and/or Restricted Organ Transplant between Genetically Related Persons or Spouses	10
C. Transplant Involving Organs Removed for the Donor’s Therapy	11
D. Transplant of Imported Organs	11
E. Submission of Information on Removal, Transplant and Disposal of Organs	14
Handling of Personal Data under the Personal Data (Privacy) Ordinance	18
Penalties for Offences under the Ordinance	18
Enquiries	20

Contents	Page
Appendices	
Appendix 1	Guidance notes on making applications to the Human Organ Transplant Board for the carrying out of restricted organ removal and/or restricted organ transplant.....
	i
APP	Application form for the carrying out of restricted organ removal and/or restricted organ transplant.....
	v
DEC(1)	Declaration to be completed by the applicant.....
	ix
DEC(2)	Declaration to be completed by the intended donor.....
	x
DEC(3)	Declaration to be completed by the intended recipient.....
	xi
DEC(4)	Declaration to be completed by a registered medical practitioner who explained the transplant issues to the intended donor and/or the intended recipient.....
	xii
REP	Report to be made by the interviewer.....
	xiii
Appendix 2	Certificates and medical report in respect of the intended recipient who is incapable of understanding the explanation and receiving the interview.....
	xiv
Appendix 3	Declaration concerning transplants involving organs removed for donor's therapy.....
	xvii
Appendix 4	Certificate for import of human organs for transplant.....
	xviii
Appendix 5	Submission form for certificate for imported organs for transplant purpose.....
	xx
Appendix 6	Submission form for the original or certified true copy of the certificate accompanying imported organs after the transplant of imported organs.....
	xxii
Appendix 7	Form 1 – Information on removal of organ(s) for transplant into another person.....
	xxiv
	Form 2 – Information on transplant of organ(s).....
	xxvi
	Form 3 – Information on final disposal of organ(s) removed/imported.....
	xxviii
Appendix 8	Personal Information Collection Statement.....
	xxix

ADMINISTRATIVE GUIDELINES FOR THE HUMAN ORGAN TRANSPLANT ORDINANCE (CAP. 465)

PURPOSE AND NATURE OF GUIDELINES

The purpose of these Guidelines is to inform persons involved in the import, removal, transplant and disposal of human organs of the requirements of the Human Organ Transplant Ordinance (Cap. 465) (the Ordinance), the Human Organ Transplant Regulation (Cap. 465A) (the Regulation) and the procedures laid down by the Human Organ Transplant Board (the Board) for sections 5 to 7 of the Ordinance. Registered medical practitioners and other relevant personnel are advised to familiarise themselves with the provisions of the Ordinance and the Regulation, as well as the administrative arrangement promulgated in these Guidelines.

2. **IMPORTANT:** Your attention is drawn to the fact that the Guidelines do not have the force of law and the Guidelines must be read subject to the Ordinance and the Regulation. While compliance with the Guidelines should generally promote smooth dealings with the Board, readers are strongly advised to familiarize themselves not only with the Guidelines but also the Ordinance and the Regulation.

THE ORDINANCE AND THE REGULATION

3. The Ordinance, which came into full operation on 1 April 1998 and was amended in 1999, 2007, 2011 and 2018, aims to prohibit commercial dealings in human organs intended for transplanting, to restrict the transplanting of human organs between living persons and the transplanting of imported human organs, and for supplementary purposes connected with these matters.

4. The Ordinance and the Regulation are available on the Hong Kong e-Legislation website of the Department of Justice at <https://www.elegislation.gov.hk/>.

INTERPRETATION OF “ORGAN”

5. According to section 2 of the Ordinance, an “organ” refers to any human bodily part which consists of a structured arrangement of tissues; and if wholly removed, cannot be regenerated by the body. Any structured arrangement of tissues forming part of any human bodily part as aforesaid is also regarded as an “organ” for the purpose of the Ordinance.

6. A “regulated product”, as defined in section 7A(1) of the Ordinance, is also subject to all statutory requirements under the Ordinance unless an exemption has been granted by the Director of Health.

The Schedule

7. Those human bodily parts specified in the Schedule to the Ordinance are not subject to regulation under sections 5 to 7 of the Ordinance. However, other sections of the Ordinance still apply to these human bodily parts, e.g. commercial dealings of human bodily parts included in the Schedule are strictly prohibited. The Secretary for Food and Health may amend the Schedule by notice published in the Gazette from time to time. You may wish to get the updated information from the Hong Kong e-Legislation website of the Department of Justice at

INTERPRETATION OF “PAYMENT”

8. For the purpose of the Ordinance, “payment” means payment in money or money’s worth but does not include any payment for defraying or reimbursing –

- (a) the cost of removing, transporting or preserving the organ to be supplied;
- (b) the administrative cost incidental to the removal, transportation or preservation of the organ to be supplied; or
- (c) any expenses or loss of earnings incurred by a person and attributable to his supplying an organ from his body.

9. Commercial dealings in human organs are strictly prohibited. Your attention is drawn to the provisions of section 4 of the Ordinance.

INTERPRETATION OF “REGISTERED MEDICAL PRACTITIONER”

10. For the purpose of the Ordinance, the Regulation and the Guidelines, a “registered medical practitioner”, a “medical practitioner” or a “practitioner” means a medical practitioner registered under the Medical Registration Ordinance (Cap. 161). Except for the limited exception mentioned in paragraph 56 which relates to signing of the certificates for imported organs, statutory functions of medical practitioners under the Ordinance can only be performed by those registered under the Medical Registration Ordinance (Cap. 161).

INTERPRETATION OF “RESTRICTED ORGAN REMOVAL” AND “RESTRICTED ORGAN TRANSPLANT”

11. A “restricted organ removal” means the act of removing from a living person an organ for the purpose of transplanting it into another person. A “restricted organ transplant” means the act of transplanting into a person an organ removed from another person who was living at the time of the removal.

12. Unless the statutory requirements as provided in sections 5A to 5E of the Ordinance have been fully complied with, no person shall carry out a restricted organ removal or a restricted organ transplant.

AGE REQUIREMENT FOR A LIVING DONOR

13. All living donors under sections 5A and 5C of the Ordinance must have reached the age of 18 years. Age should be established by birth certificate and/or identity documents issued in Hong Kong or by the relevant authority in the place where the donor was born or resides.

ESTABLISHMENT OF GENETIC RELATIONSHIP

14. For the purpose of the Ordinance, a person is regarded as genetically related only to –

- (a) his natural parents and natural children;
- (b) his siblings of the whole or half blood;
- (c) the siblings of the whole or half blood of either of his natural parents; and
- (d) the natural children of his siblings of the whole or half blood or the natural children of the siblings of the whole or half blood of either of his natural parents.

(Note: “grandparent and grandchild” is not considered as genetically related under the Ordinance.)

15. A medical practitioner shall not consider the donor and the recipient as genetically related in any of the ways mentioned in paragraph 14 unless the fact of the genetic relationship has been established by the following means as prescribed by the Board by section 2 of the Regulation –

- (a) birth certificates, marriage certificates and identity documents issued under the Births and Deaths Registration Ordinance (Cap. 174), Marriage Ordinance (Cap. 181), Marriage Reform Ordinance (Cap. 178) and Registration of Persons Ordinance (Cap. 177); or
- (b) where the donor or recipient, or some other person whose birth or marriage is necessary to show that the donor and recipient are genetically related, resides outside Hong Kong or was born or married outside Hong Kong, documents that are equivalent to those documents referred to in paragraph 15(a) and are issued by the relevant authority in the country or territory in which such person resides, was born or was married, as the case may be.

16. Those documents listed above can be combined for establishing a genetic relationship. If the donor or the recipient does not reside, or was not born or married in Hong Kong, he may not be able to supply an identity document issued under the Registration of Persons Ordinance (Cap. 177) and a birth certificate issued under the Births and Deaths Registration Ordinance (Cap. 174). He may then be required to supply the equivalent documents as listed in paragraph 15(b).

ESTABLISHMENT OF MARITAL RELATIONSHIP WHICH HAS SUBSISTED FOR NOT LESS THAN 3 YEARS

17. For the purpose of the Ordinance, a medical practitioner shall not consider the donor and the recipient as spouses whose marriage has subsisted for not less than 3 years unless the fact of the marital relationship has been established by the following means as prescribed by the Board by section 2A of the Regulation –

- (a) any document or documents –
 - (i) issued under the Marriage Ordinance (Cap. 181) or the Marriage Reform Ordinance (Cap. 178) which shows or show that the 2 persons are the parties to –
 - (1) a marriage celebrated or contracted in accordance with the provisions of the Marriage Ordinance (Cap. 181);
 - (2) a modern marriage validated by the Marriage Reform Ordinance (Cap. 178); or
 - (3) a customary marriage declared to be valid by the Marriage Reform Ordinance (Cap. 178); or
 - (ii) equivalent to that or those issued under the Marriage Ordinance (Cap. 181) or the Marriage Reform Ordinance (Cap. 178) which shows or show that the 2 persons are the parties to a marriage celebrated or contracted outside Hong Kong in accordance with the law in force at the time and in the place where the marriage was performed; and
- (b) a statutory declaration by either of the donor or the recipient to the effect that the marriage has subsisted for not less than 3 years.

STATUTORY REQUIREMENTS FOR SPECIFIED ACTIVITIES

18. Section 5A of the Ordinance provides that a medical practitioner may carry out a restricted organ removal and/or a restricted organ transplant if he is satisfied that (i) the recipient is genetically related to the donor; or is the spouse of the donor at the time of the transplant and their marriage has subsisted for not less than 3 years; and (ii) all the statutory requirements have been complied with. The prescribed means to establish the donor's age and the genetic or marital relationship between the donor and the recipient are at paragraphs 13 to 17 above and the specific statutory requirements are at paragraphs 46 to 48 below.

19. According to section 5B of the Ordinance, a medical practitioner may carry out a restricted organ transplant if he is satisfied that at the time the organ concerned was removed from its donor, it was removed for the therapy of the donor and not for transplant into any specific recipient. The medical practitioner carrying out the restricted organ transplant is required to make a declaration in writing and submit it as well as the Form 2 to the Board within 30 days after the transplant, or within such longer period as the Board may on application allow. The specific statutory requirements and procedure are at paragraphs 49 to 52 below.

20. A medical practitioner may apply for the Board's prior written approval for the carrying out of a restricted organ removal and/or a restricted organ transplant under section 5C of the Ordinance. The application should be submitted to the Board by the medical practitioner who has clinical responsibility for the donor. Detailed application procedure is at paragraphs 25 to 45 below.

21. Under section 6 of the Ordinance and section 3 of the Regulation, a medical practitioner or other prescribed person shall submit the information prescribed by the Regulation in statutory forms to the Board within 30 days after the removal, transplant or disposal of human organs took place in Hong Kong, or within such longer period as the Board on application may allow. Details of the arrangement are at paragraphs 66 to 77 below.

22. In accordance with section 7 of the Ordinance, a medical practitioner may transplant an imported organ into a recipient provided that the organ when imported into Hong Kong is accompanied by a certificate that complies with all the statutory requirements and that he or another person who is acceptable to the Board has supplied the original or a copy of the certificate to the Board. If only a copy of the certificate has been supplied to the Board, the medical practitioner transplanting an imported organ into a recipient is required to ensure that the original or a certified true copy of the certificate certified by the medical practitioner importing the organ into Hong Kong is supplied to the Board within 7 working days after the transplant. Please see paragraphs 53 to 65 for details.

23. As a quick reference, statutory requirements for organ removal/transplant/disposal activities in Hong Kong are indicated in the following table –

ACTIVITY	APPROVAL/ACKNOWLEDGEMENT FROM THE BOARD OR SUPPLY OF INFORMATION TO THE BOARD	REMARKS
Remove and transplant an organ from a local dead donor	Prior approval/acknowledgment is not required.	The provisions of the Medical (Therapy, Education and Research) Ordinance (Cap. 278) have to be complied with in respect of the removal and use of the organ from a dead person.

ACTIVITY	APPROVAL/ACKNOWLEDGEMENT FROM THE BOARD OR SUPPLY OF INFORMATION TO THE BOARD	REMARKS
Carry out a restricted organ removal and/or transplant between (i) genetically related persons; or (ii) spouses where marriage has subsisted for not less than 3 years	Prior approval/acknowledgement is not required . The medical practitioner concerned has to satisfy himself of compliance with all the statutory requirements before carrying out the operations.	Please refer to paragraphs 13 to 17 for details on establishment of the donor's age and genetic/ marital relationship between the donor and the recipient under the Ordinance. For other statutory requirements, please refer to paragraphs 46 to 48.
Transplant an organ removed for donor's therapy and no recipient has been identified at the time of removal	Prior approval/acknowledgement is not required . The medical practitioner should check the relevant documents concerning the organ before carrying out the transplant. He should also submit a declaration to the Board within 30 days after the transplant, or within such longer period as the Board, on application, may allow.	Please refer to paragraphs 49 to 52 for detailed procedures.
Carry out a restricted organ removal and/or transplant where (i) the donor and the recipient are not genetically related; or (ii) they are spouses but their marriage has subsisted for less than 3 years; or (iii) the organ was removed for the donor's therapy and a specific recipient has been identified at the time of the removal	Prior written approval is required .	Please refer to paragraphs 25 to 45 for detailed application procedures. The application should be submitted by the medical practitioner who has clinical responsibility for the donor.
Transplant an imported organ into a recipient	The medical practitioner must ensure that the original or a copy of the certificate accompanying the imported organ has been supplied to the Board before carrying out the transplant. If only a copy of the certificate has been supplied to the Board, he must also ensure that the original or a certified true copy of the certificate would be received by the Board within 7 working days after the transplant.	Please refer to paragraphs 53 to 65 for detailed procedures.
After the removal/ transplant/ disposal of an organ	Appropriate Form 1/2/3 and other supplementary documents is required to be submitted to the Board within 30 days after the activity takes place or within such longer period as the Board, on application, may allow.	Please refer to paragraphs 66 to 77 for detailed procedures.

24. In section 5C(2)(a) of the Ordinance (i.e. as paragraph 20 refers), the “registered medical practitioner who has clinical responsibility for the donor concerned” means any registered medical practitioner from the team involved in the clinical management of the donor.

DETAILED PROCEDURES

A. Restricted Organ Removal and/or Restricted Organ Transplant Necessitating the Board's Prior Written Approval

25. A medical practitioner shall obtain the prior written approval from the Board before carrying out a restricted organ removal or a restricted organ transplant or both if –

- (a) the donor is not genetically related to the recipient; or
- (b) the donor is the spouse of the recipient but their marriage has subsisted for less than 3 year; or
- (c) the organ is removed for the donor's therapy and a specific recipient has been identified at the time of the removal.

The proposed operation(s) should be referred to the Board for its approval by a medical practitioner who has clinical responsibility for the donor concerned (see paragraph 24 for definition).

26. Under section 5C(2) of the Ordinance, the Board may give its approval for a restricted organ removal and/or a restricted organ transplant only if it is satisfied of all the relevant conditions stated in the Ordinance. In particular, the Board must be satisfied of the following -

- (a) the proposed operation(s) is/are referred to it for approval by a medical practitioner who has clinical responsibility for the donor concerned;
- (b) the donor concerned has reached the age of 18 years;
- (c) a medical practitioner has, in the absence of the recipient concerned, explained to the donor, and the donor has understood, the following aspects of the proposed organ removal –
 - (i) the procedure;
 - (ii) the risk involved; and
 - (iii) the donor's entitlement to withdraw consent to that removal at any time;
- (d) the donor has given his consent to the proposed organ removal without coercion or the offer of inducement and has not subsequently withdrawn his consent;
- (e) a medical practitioner has, in the absence of the donor, explained to the recipient, and the recipient has understood, the following aspects of the proposed organ transplant –
 - (i) the procedure;
 - (ii) the risk involved; and
 - (iii) the recipient's entitlement to withdraw consent to that transplant at any time;
- (f) no payment prohibited by the Ordinance has been made, or is intended to be made;
- (g) the donor has been interviewed, in the absence of the recipient, by an interviewer, and the interviewer has reported to the Board that the donor has understood all aspects of the proposed organ removal as detailed in item (c) above, and that the donor has given his consent as described in item (d) above; and
- (h) the recipient has been interviewed, in the absence of the donor, by an interviewer, and the interviewer has reported to the Board that the recipient has understood all aspects of the proposed organ transplant as mentioned in item (e) above.

Application Procedures

27. The application should be submitted to the Board Secretariat (the Secretariat) in the following manner –

- (a) during office hours
 - Mondays : 9:00 a.m. - 1:00 p.m. and 2:00 p.m. - 6:00 p.m.
 - Tuesdays to Fridays : 9:00 a.m. - 1:00 p.m. and 2:00 p.m. - 5:45 p.m.

The whole set of application and supporting documents should be sent to the Secretariat by post or in urgent cases, by fax or by hand. If the application documents are sent by fax, the applicant must then immediately confirm with the Secretariat that these have been received after transmission and arrange the original application documents as well as originals or photocopies of supporting documents, whichever applicable, to be delivered to the Secretariat afterwards, by post or otherwise. If the application documents are sent by post, it is advisable for the applicant to check with the Secretariat afterwards to see if the documents have been received.

(b) outside office hours and during public holidays

If an application will have to be submitted outside office hours or during public holidays, the applicant should inform the Secretariat well in advance of the forthcoming application so that it can be dealt with more timely. The whole set of application and supporting documents should be sent to the Secretariat by fax. The applicant must, following the transmission, confirm with the Secretariat that the latter has received the documents in full. The applicant should also arrange the original application documents as well as the originals or photocopies of supporting documents, whichever applicable, to be delivered to the Secretariat afterwards, by post or otherwise.

Please refer to paragraph 82 for the Secretariat's contact numbers and address.

27A. If the application involves a special donation arrangement, such as a “domino transplant” arrangement or a paired/pooled donation arrangement as defined by section 5DA of the Ordinance, the applicant should give an account of the arrangement in the application. When the application is related to a paired/pooled donation arrangement, the applicant should submit to the Board two sets of application documents for a paired donation arrangement and three or more sets of application documents for a pooled donation arrangement simultaneously, all of which should be cross-referenced. The applicant should make sure that under such paired/pooled donation arrangement, the donor-recipient pair/pairs in each application is/are formed through a fair and reasonable matching mechanism which meets the general medical ethics and moral standards. Hence, a brief account of the matching mechanism and the pairing algorithm, as well as supporting documents to substantiate the relationship between the donor and the beneficiary in each dyad (as defined by section 5DA(3) of the Ordinance) formed under the arrangement should also be provided to facilitate the Board's assessment and consideration according to sections 5C and 5DA of the Ordinance.

28. The application should be accompanied by as much supporting evidence as possible in order to avoid delay. Whilst the supporting evidence required may vary depending on the nature of individual case, it will be of assistance if there is provided a written chronology of the events leading to the proposed restricted organ removal and/or transplant and any other relevant information such as the information on the basis of which the applicant has established his belief of no commercial dealings and coercion, evidence that supports the existence of emotional ties, information on the psychological condition of the donor and/or recipient, etc. Emphasis should be given to the capability of the donor in understanding the explanation provided by the medical practitioner as required under section 5D(1)(b) of the Ordinance (please refer to paragraph 26(c) for reference). If there are indications that cast doubts on the mental capacity of the donor which may affect him in giving his consent to donate, the applicant and other medical practitioners responsible for the donor should make further enquiries to ascertain whether the requirement under section 5D(1)(b) of the Ordinance can be fulfilled.

28A. If the required information in the application documents cannot be provided or the requirements concerning the application procedures set out in these Guidelines cannot be met due to some justifiable reasons or constraints (e.g. the donor and recipient in a donor-recipient pair are unable to provide each other's name on their declarations because of the requirement to keep their identity

anonymous from each other under the matching mechanism for a paired/pooled donation arrangement), the applicant shall expound to the Board with grounds to apply for exemption.

29. The Board may from time to time turn to the applicant for clarification or to request for additional information. It would therefore be essential that the applicant must either make himself available or else arrange for a suitable representative (e.g. Transplant Coordinator) who is well acquainted with the case to answer any queries from the Board or provide further information.

30. The Board will deal with all applications expeditiously. Once the Board's decision is available, the applicant will be informed of the application result by phone in the first instance, and the written notification will follow by fax.

31. The medical practitioner who carries out the restricted organ removal or the restricted organ transplant under section 5C of the Ordinance must ensure that the Board has given its written approval to the application before performing the respective operations.

The Applicant

32. The applicant should be the medical practitioner who has clinical responsibility for the donor. He is advised to read the guidance notes at Appendix 1 before making the application.

33. The applicant is required to complete and sign the Application Form (i.e. form [APP] in Appendix 1) and ensure that the whole set of application documents contained therein are completed by the persons specified and submitted with relevant supporting documents to the Board for approval. As mentioned in paragraph 29, he must make himself available to answer queries from the Board or provide further information. If for any reason the applicant cannot be available, he must ensure that a suitable person, with full knowledge of the case, is available to act for him.

The Registered Medical Practitioner(s) Making the Explanation

34. The medical practitioner(s) who make(s) the explanation under paragraphs 26(c) and (e) shall not be the medical practitioner who is to carry out the restricted organ removal or the restricted organ transplant. The medical practitioner who makes the explanation to the donor may but need not be the same medical practitioner who makes the explanation to the recipient.

35. The medical practitioner(s) making the explanation to the donor and/or the recipient should report to the Board by completing form [DEC(4)] in Appendix 1 to the effect that he has done so and that the donor and/or the recipient have/has understood the procedure, the risk involved and their entitlement to withdraw consent at any time.

The Interviewer(s)

36. For the purposes of paragraphs 26(g) and (h) above, the interviewer(s) shall be the person(s) whom the Board considers to be suitably qualified to conduct the interview but shall not be the medical practitioner(s) who make(s) the explanation under paragraphs 26(c) and (e) above. The interviewer who interviews the donor may but need not be the same interviewer who interviews the recipient.

37. As a general principle, the interviewer(s) should not be within a party involved in the transplant proceedings or a close associate of any such party. The Board considers that an experienced clinical psychologist, psychiatrist, medical social worker, physician and surgeon who are not involved in the transplant proceedings are all suitable to act as the interviewer(s).

38. The interviewer(s) has/have to report to the Board by completing form [REP] in Appendix 1 on the donor's and the recipient's understanding of the matters contained in paragraphs 26(c) and (e). Besides, he should confirm that the donor has given his consent to the proposed organ removal without coercion or the offer of inducement and has not subsequently withdrawn his consent.

Validity of the Board's Approval

39. The approval of the Board will normally be valid for 30 days (inclusive of the date of the approval letter) or as otherwise specified by the Board in its approval letter. If the removal and/or transplant operations are re-scheduled for a date beyond the validity period, the applicant should apply in writing not less than 3 days before the lapse of approval with full justifications for postponing the operations to the Board for approval. If the application for postponement is submitted after the validity period, the applicant will be required to re-submit the application to the Board for approval in accordance with paragraphs 27 to 38 again. If the organ is subsequently not removed, the applicant or the person who made the decision not to remove the organ will be required to supply the relevant information in Form 1 to the Board within 30 days after the Board's approval or within such longer period as the Board, on application, may allow.

40. Even before the approval lapses, the applicant and the medical practitioners carrying out the restricted organ removal and/or transplant should satisfy themselves that there has been no material change of circumstances before operation and if there has been any, the applicant should report and reapply to the Board immediately.

If the recipient is incapable of understanding the explanation and receiving the interview

41. There might be cases where the recipient is incapable of understanding the explanation and receiving the interview required to be given to him under sections 5D(1)(d) and 5C(3)(b) of the Ordinance (please refer to paragraph 26(e) and (h) for reference), and the intended transplant is one which requires the prior written approval of the Board. In such situation, the Board may waive such requirements and the Board may give its approval only if it is satisfied of the relevant conditions stated in the Ordinance. In particular, the Board must be satisfied of the following –

- (a) the proposed operation(s) is/are referred to it for approval by a medical practitioner who has clinical responsibility for the donor concerned;
- (b) the donor concerned has reached the age of 18 years;
- (c) a medical practitioner has, in the absence of the recipient concerned, explained to the donor, and the donor has understood, the following aspects of the proposed organ removal –
 - (i) the procedure;
 - (ii) the risk involved; and
 - (iii) the donor's entitlement to withdraw consent to that removal at any time;
- (d) the donor has given his consent to the proposed organ removal without coercion or the offer of inducement and has not subsequently withdrawn his consent;
- (e) no payment prohibited by the Ordinance has been made, or is intended to be made;
- (f) a medical practitioner has issued a certificate certifying that –
 - (i) the recipient concerned is in fact incapable of understanding the explanation required under paragraph 26(e); and
 - (ii) the fact is attributable to one or more of the following reasons –
 - (A) his suffering any illness;
 - (B) his being a minor;
 - (C) his being a mentally incapacitated person within the meaning of the Mental Health Ordinance (Cap. 136); or
 - (D) his suffering an impaired state of consciousness;

- (g) a medical practitioner has issued a certificate certifying that it would not be in the best interests of the recipient to wait until he is capable of understanding the explanation required under paragraph 26(e);
- (h) the medical practitioner who is to carry out the restricted organ transplant has kept a medical report in writing stating the reason why the requirement in paragraph 26(e) cannot be complied with; and
- (i) the donor has been interviewed, in the absence of the recipient concerned, by an interviewer, and the interviewer has reported to the Board that the donor has understood all aspects of the proposed organ removal as detailed in item (c) above, and that the donor has given his consent as described in item (d) above.

42. Standard certificates [CERT (1)] & [CERT(2)] and medical report [MR] are at Appendix 2. Medical practitioners may amend the format of certificates and medical report as appropriate to suit the actual situations.

43. The medical practitioner who issues a certificate under paragraphs 41(f) or (g) shall not be the medical practitioner who is to carry out the restricted organ removal or the restricted organ transplant.

44. The medical practitioner who issues a certificate under paragraph 41(f) in respect of a recipient may but need not be the same medical practitioner who issues a certificate under paragraph 41(g) in respect of the same recipient.

45. In situations where the recipient is unable to receive the interview and understand the explanation as required, the applicant must ensure that the 2 certificates [CERT(1)] and [CERT(2)] and the medical report [MR] mentioned in paragraphs 41(f) to (h) are submitted to the Board for consideration together with the application forms [APP], [DEC(1)], [DEC(2)], [DEC(4)] and [REP] and other supporting documents.

B. Restricted Organ Removal and/or Restricted Organ Transplant between Genetically Related Persons or Spouses

46. A medical practitioner may carry out a restricted organ removal and/or a restricted organ transplant without the need to obtain the prior written approval from the Board if he is satisfied that –

- (a) the recipient of the organ concerned –
 - (i) is genetically related to the donor (please see paragraph 14 for definition); or
 - (ii) is the spouse of the donor and their marriage has subsisted for not less than 3 years; and
- (b) the fact of the genetic or marital relationship has been established by the prescribed means (please see paragraphs 14 to 17 for reference); and
- (c) either –
 - (i) all the requirements in paragraph 26(b) to (f) have been met; or
 - (ii) all the requirements in paragraph 41(b) to (h) have been met.

47. The medical practitioners removing and transplanting the organ should submit Form 1 and Form 2 to report on the information of the operations concerned. Where appropriate, the documentary proof based on which they established the age of the donor, the genetic or marital relationship between the donor and the recipient, the certificates and medical report as mentioned in paragraphs 41(f) to (h) (in case the recipient is incapable of understanding the explanation and receiving the interview) have to be submitted together with the Form 1 or Form 2 to the Board within 30 days after the removal and transplant took place, or within such longer period as the Board, on application, may allow.

48. If there is any difficulty in establishing the genetic or marital relationship, the medical practitioner is strongly advised to consider making an application to the Board for approval before carrying out the operations.

C. Transplant Involving Organs Removed for the Donor's Therapy

49. A medical practitioner may carry out a restricted organ transplant if he is satisfied that at the time the organ concerned was removed from its donor, it was removed for the therapy of the donor and not for transplant into any specific recipient. The prior approval of the Board is NOT required for this category of restricted organ transplant. (Note: "Domino Transplant" does not fall under this category as a specific recipient has been identified at the time of the organ removal. The medical practitioners concerned must ensure full compliance with sections 5C or 5A of the Ordinance as appropriate. Please see the procedures at Part A (paragraphs 25 to 45) or Part B (paragraphs 46 to 48) of the Guidelines above for details before carrying out a domino transplant).

50. A medical practitioner who carries out a restricted organ transplant involving an organ removed for the donor's therapy shall –

- (a) make a declaration in writing to the effect that –
 - (i) he had checked the related documents (i.e. a certificate issued by the medical practitioner who removed the organ concerned from its donor, certifying that the organ was removed for the therapy of the donor and not for transplant into any specific recipient; and a declaration made by that practitioner in writing to the effect that to the best of his knowledge and belief, no payment prohibited by the Ordinance had been made or was intended to be made) before he carried out that transplant;
 - (ii) he is satisfied that at the time the organ concerned was removed from its donor, it was removed for the therapy of the donor and not for transplant into any specific recipient; and
 - (iii) to the best of his knowledge and belief, no payment prohibited by the Ordinance has been made or is intended to be made;
- (b) submit that declaration to the Board within 30 days after the transplant, or within such longer period as the Board may on application allow; and
- (c) provide the Board with any further information that it may reasonably require.

51. Standard declaration form is at Appendix 3. The declaration can be submitted by post, by fax or in person. Please refer to paragraph 82 for the Secretariat's fax numbers and address.

52. A medical practitioner transplanting an organ removed for its donor's therapy is not required to submit the declaration as mentioned in paragraph 50 above if the organ concerned was removed before 1 September 2011. However, before carrying out the transplant, he should still be satisfied that at the time the organ concerned was removed from its donor, it was removed for the therapy of the donor and not for transplant into any specific recipient. In any case, he is still required to submit a Form 2 to report the transplant accordingly.

D. Transplant of Imported Organ

53. Under section 7(1) of the Ordinance, a medical practitioner shall not transplant an imported organ into a recipient in Hong Kong unless that organ, when imported into Hong Kong, is accompanied by a certificate containing all the required information and the medical practitioner concerned or another person who is acceptable to the Board has supplied the original of that certificate or a copy of it to the Board. The information in respect of the certificate for imported organs is as follows –

- (a) a statement that, in obtaining the organ, all applicable laws of the place outside Hong Kong where the organ was removed from its donor were complied with;
- (b) a statement that, at the time the donor of the organ was tested in the place outside Hong Kong where the organ was removed from its donor, he was not shown to be infected with any disease that was known, at the time of the testing, to be transmissible to the recipient of the organ through transplanting;
- (c) a statement that the organ was removed in a hospital in which the government of the place outside Hong Kong where the organ was removed from its donor has authorized organs to be removed for transplanting;
- (d) a statement that no person in the place outside Hong Kong where the organ was removed from its donor made or received a payment for supplying the organ;
- (e) type of organ and the quantity;
- (f) name, age and sex of the donor;
- (g) date of removal of the organ;
- (h) where the donor is deceased –
 - (i) time and date of death;
 - (ii) cause of death (if known);
- (i) name of airline or carrier by which the organ is to be sent; and
- (j) date on which the organ is to be sent.

Standard certificate on imported organ(s) for transplant purpose is at Appendix 4. The certificate should be submitted together with the submission form at Appendix 5 before the transplant takes place.

54. For the purpose of section 7(1) of the Ordinance (i.e. as paragraph 53 refers), the Board in general will only accept either of the following persons as “another person who is acceptable to the board”-

- (a) a medical practitioner who imported the organs into Hong Kong; and
- (b) a medical practitioner who transplanted some of the organs contained in the certificate in earlier transplants.

55. In case any of the information mentioned in paragraph 53 cannot be supplied, the medical practitioner who prepares to transplant that imported organ or another person who is acceptable to the Board should make an application by completing the relevant part of the form at Appendix 5 to the Board with full justifications to waive such requirements. Generally speaking, waiver would be given in case the privacy laws of the place outside Hong Kong where the organ was removed from its donor prohibit the particulars of the donor to be released. In such situations, a statement from the organisation supplying the organ(s) to the effect that donor’s information cannot be provided due to privacy restrictions should also be submitted to facilitate the Board’s consideration of granting such waiver.

56. The certificate for an imported organ must be signed by a person who is acceptable to the Board in the place outside Hong Kong where the organ was removed from its donor. Generally speaking, any person specified in the table below will be acceptable to the Board for this purpose if the certificate is accompanied by the supporting document specified in the table below against that person –

Acceptable Signatories	Supporting Documents
(a) The medical practitioner who removed the organ in the country of origin;	A copy of the medical practitioner's registration and annual practising certificate issued by the medical licensing authority in the organ's country of origin.
or	
(b) The medical director/president/executive director/medical consultant of the institute/hospital which provided the organ;	A copy of the office bearer's appointment letter or other proof of his position in the institute/hospital.
or	
(c) Designated Individual/ Licence Holder of Storage of Tissue for Human Application Licence under the Human Tissue Act of English Law	A copy of the proof stating his identity in the license

The “medical practitioner” as mentioned in paragraph 56 does not need to be a “medical practitioner” registered under the Medical Registration Ordinance (Cap. 161).

57. If for any reason the acceptable signatories mentioned in paragraph 56 are not available, the medical practitioner who prepares to transplant that imported organ or another person who is acceptable to the Board can make an application to the Board by completing the relevant part of the form at Appendix 5 for acceptance of other signatories in that particular case.

58. One certificate should be used for the organ(s) removed from each donor. Where the organs from more than one donor are supplied in one consignment from the same overseas medical practitioner or institute/hospital, it is sufficient for the consignment to be accompanied by one set of supporting documents only.

59. The medical practitioner who prepares to import an organ into Hong Kong for transplant purpose should –

- (a) apply to the Port Health Office of the Department of Health (telephone number 3904 9316) for permission to import human corpse or any part of a human corpse, as required under section 14 of the Prevention and Control of Disease Regulation (Cap. 599A). For enquiries outside office hours, please contact their Airport section on 2182 1305 or by fax to 2116 0698; and
- (b) ensure that the organ is accompanied by the certificate at Appendix 4 signed by a person in the country of origin who is acceptable to the Board with the required supporting documents.

60. The medical practitioner who is to transplant an organ or a person who is acceptable to the Board must complete the form at Appendix 5 and submit it together with the original or a copy of the certificate and the supporting documents of the signatory to the Board before the organ is transplanted.

61. Upon receipt of the completed form, the certificate and supporting documents, the Board may request for additional information if necessary and will consider any application for waiver. If the signatory, supporting documents and the information contained in the certificate are in order and the application for waiver is accepted by the Board, the Board will acknowledge receipt of the certificate in writing and inform the medical practitioner that the organ can be used for transplant. The medical practitioner who is to transplant the imported organ should ascertain that the written confirmation from the Board is received before proceeding with the transplant.

62. The medical practitioner who transplanted an imported organ into a recipient must ensure that the original or a certified true copy of the certificate is supplied to the Board within 7 working days after the transplant if only a copy of that certificate has been supplied to the Board. A certified true

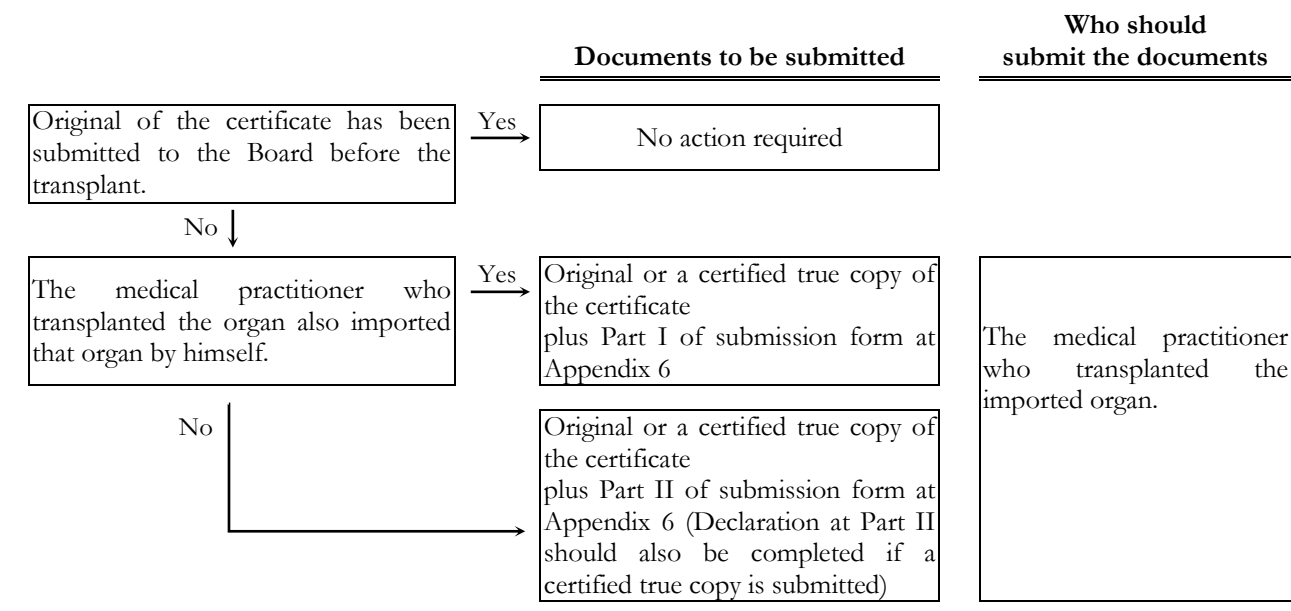
copy of a certificate accompanying an imported organ must be certified by the medical practitioner who imported the organ into Hong Kong to be a true copy of that certificate. The original or the certified true copy of the certificate must be submitted by post or in person. Fax copy is not acceptable. Please refer to paragraph 82 for the Secretariat's address and office hours.

63. If the medical practitioner who transplanted the organ did not import the organ by himself and only a certified true copy of the certificate is to be supplied to the Board within 7 working days after the transplant, he shall at the same time make and submit to the Board a declaration to the effect that to the best of his knowledge and belief, the certified true copy was certified by the medical practitioner who imported that organ (the declaration is incorporated in the submission form at Appendix 6).

64. For the purposes of paragraphs 62 and 63, the medical practitioner who transplanted the imported organ is required to complete and submit the submission form at Appendix 6 together with the original or a certified true copy of the certificate to the Board within 7 working days after the transplant. Application for extension of submission deadline is not provided for in the Ordinance.

FLOWCHART 1: SUBMISSION OF THE ORIGINAL/CERTIFIED TRUE COPY OF THE CERTIFICATE ACCOMPANYING IMPORTED ORGAN

(Please also follow Flowchart 3 to submit Form 2)



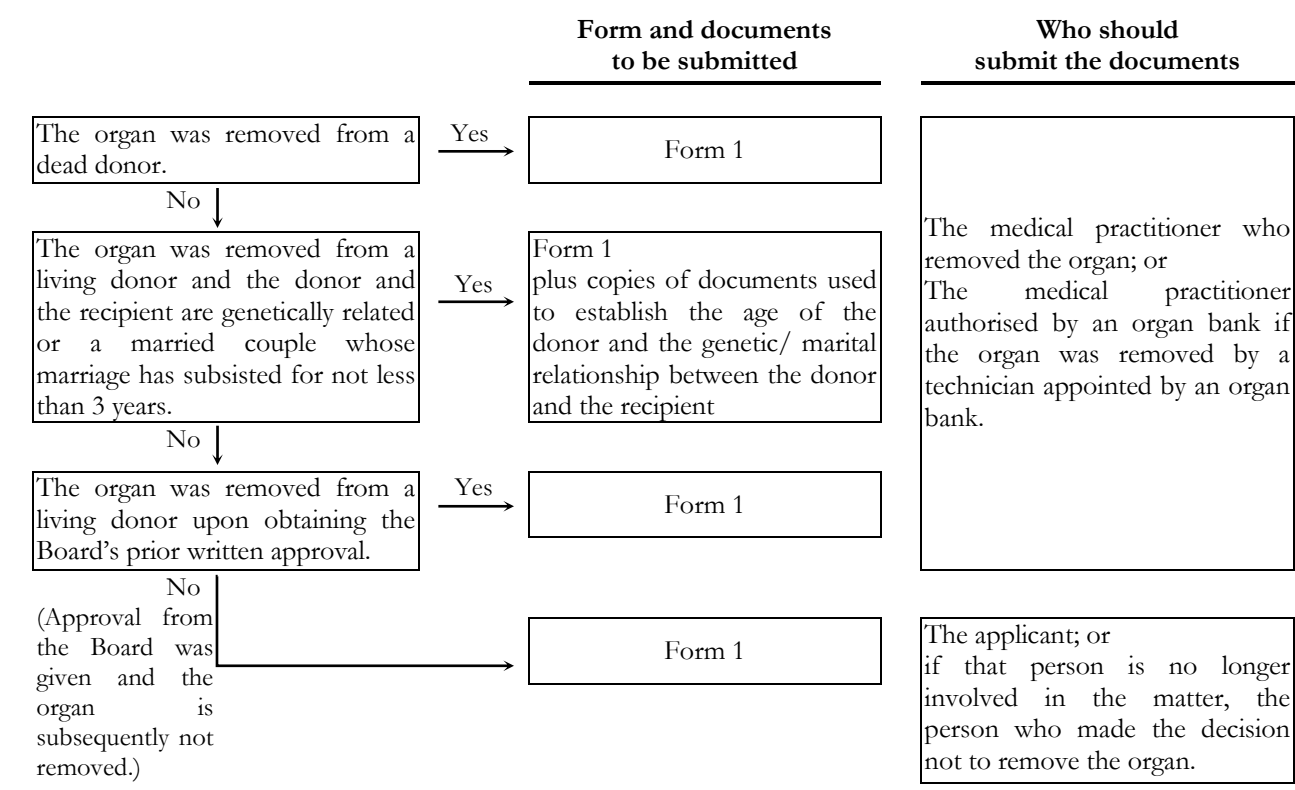
65. The medical practitioner should also report the transplant to the Board in a Form 2 within 30 days after the transplant. However, if after import into Hong Kong the organ is not used for transplant purpose and is disposed of subsequently, the person who makes the decision to dispose of the imported organ should submit a Form 3 to the Board within 30 days after the disposal, or within such longer period the Board, on application, may allow. Forms 2 and 3 should be submitted by post, by fax or in person. Please refer to paragraph 82 for the Secretariat's fax numbers, address and office hours.

E. Submission of Information on Removal, Transplant and Disposal of Organs

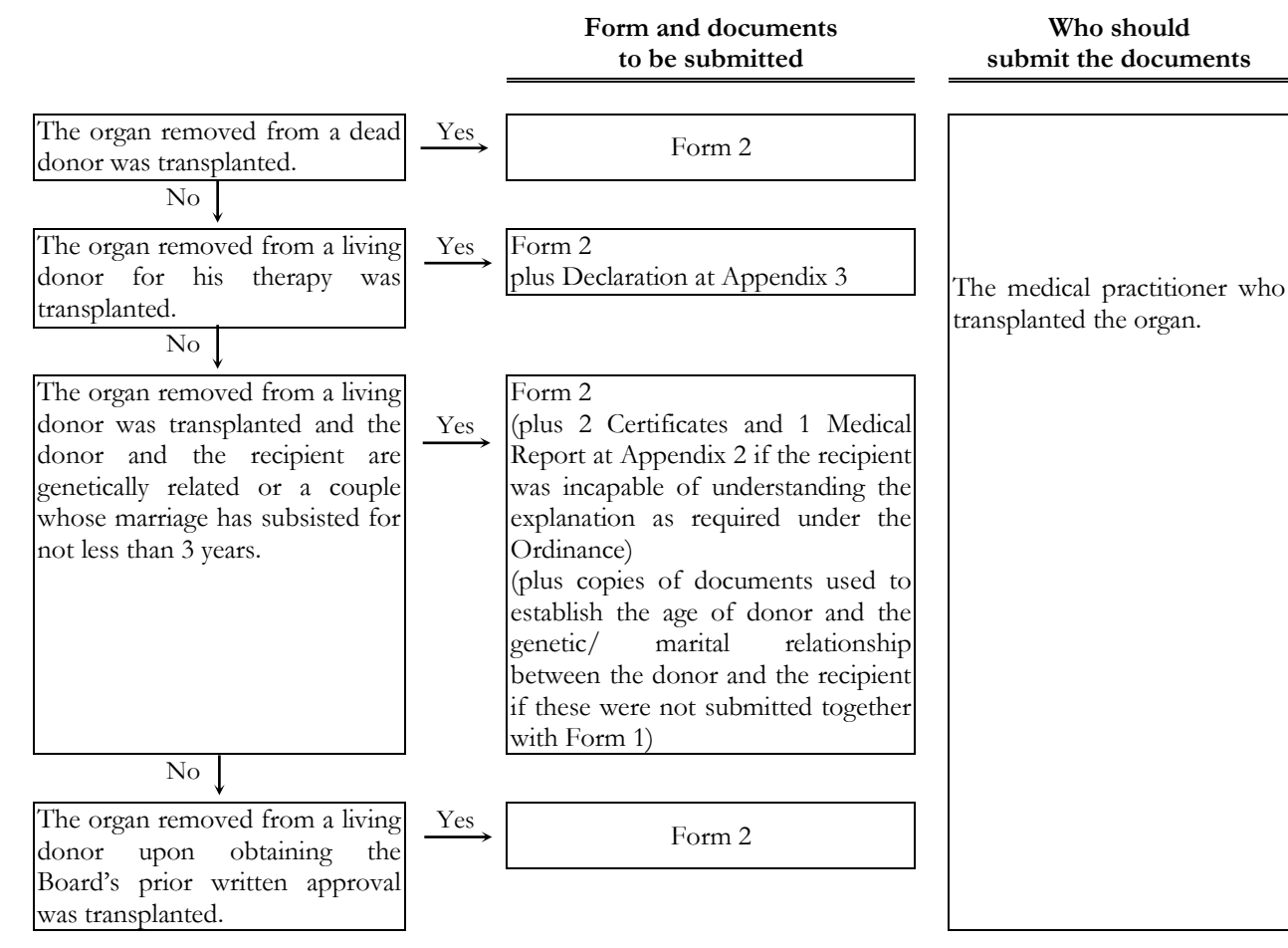
66. Under section 6(1) of the Ordinance and section 3 of the Regulation, persons who in Hong Kong remove, transplant and dispose organs removed from dead or living persons locally or abroad for the purpose of their being transplanted into other persons are required to supply specified information to the Board. In this connection, the persons listed below must submit the appropriate statutory form shown in the Schedule to the Regulation (copies at Appendix 7) with supplementary documents to the

Board within 30 days after the relevant event took place (or within 30 days after the approval if the Board gave its approval under section 5C of the Ordinance and the organ is subsequently not removed) or within such longer period as the Board, on application, may allow –

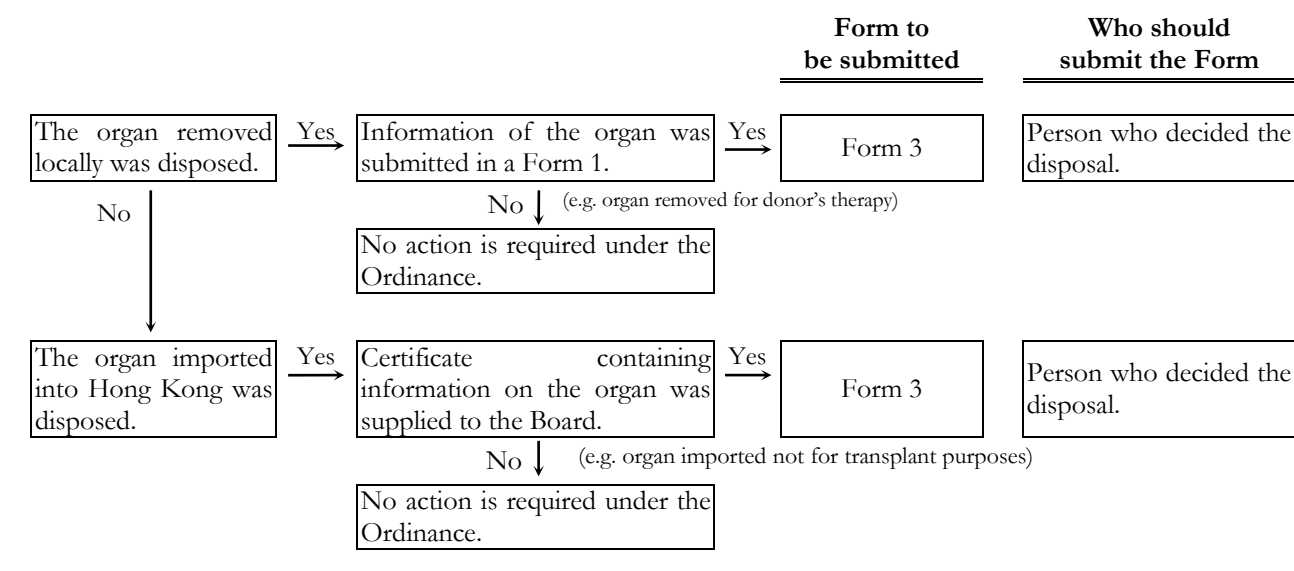
FLOWCHART 2: REMOVAL OF ORGAN FOR TRANSPLANT PURPOSE IN HONG KONG



FLOWCHART 3: TRANSPLANT OF ORGAN IN HONG KONG



FLOWCHART 4: DISPOSAL OF ORGAN IN HONG KONG



67. For the purpose of paragraph 66, where more than one medical practitioner is involved in removing or transplanting an organ, any of them may supply the relevant information but the medical practitioner who is in charge of the surgical operation is responsible for ensuring that the relevant information is supplied.

68. Where a technician appointed by an organ bank removes an organ from a dead donor in Hong Kong, a medical practitioner authorised by that organ bank shall supply the relevant information to the Board. The medical practitioner in charge of that organ bank, whether or not the bank is established under a hospital or an institution, is responsible for ensuring that the relevant information is supplied.

69. If a medical practitioner removed several organs from a donor, he needs to submit only one Form 1 to the Board giving full details of the types and number of organs removed. For example, if he removed both the heart and lung from a donor, he should include “heart” and “lung” in the Form 1 submitted.

70. If a medical practitioner transplanted several organs from one donor into one recipient in a single operation, he needs to submit only one Form 2 to the Board detailing the types and number of organs he used. For example, if he transplanted the heart as well as the lung from “donor X” into “recipient Y” in one operation, he should submit one Form 2 and include “heart” and “lung” in the form. Similarly, he should submit only one Form 3 if he disposed of both “heart” and “lung” from the same donor.

71. If the organ and its associated appendage tissues are removed and transplanted together as a single functional unit, medical practitioners need to mention only the name of the organ in Forms 1 and 2. For example, they can simply put down “liver” in Forms 1 and 2 for the removal and transplant of the liver and its associated appendage tissues; if part of sclera is removed and transplanted together with the cornea, it suffices to mention only “cornea” in Forms 1 and 2.

72. If the appendage tissues, at the time of removal, were not removed for transplant purpose, the medical practitioner is not required to include their information in Form 1. Otherwise, their information should be included in Form 1 as well. For example, if scleral rim was removed together with the cornea so as not to damage the cornea, the removing practitioner can put down “cornea” in Form 1. However, if it was intended that, at the time of removal, the scleral rim removed would be used in separate transplants, both “cornea” and “sclera” should be included in Form 1.

73. If the appendage tissues are transplanted separately with their organ, the medical practitioner transplanting the appendage tissues is required to supply information on such transplant in Form 2, regardless of whether a Form 1 containing information on such tissues has been submitted to the Board or in the case of imported organs, whether the details of appendage tissues are included in the certificate. For example, the medical practitioner transplanting part of scleral rim which was originally removed to protect the cornea will be required to report the transplant of the scleral rim in Form 2, even no Form 1 containing information on that scleral rim has been submitted to the Board.

74. When completing Form 1, if the cause of death of the donor (i.e. Part I(b) of the form) is not yet known within the 30 days’ period because a coroner’s inquest is required, please state “pending coroner’s inquest” for such cases and supply the cause of death to the Board as soon as it is available.

75. If there is difficulty in meeting the 30 days’ deadline for submission of information to the Board, the person responsible for submitting the form has to apply to the Board in writing with full justifications for approval to extend the submission deadline. The application should reach the Board one week before the 30 days’ deadline as far as possible. In such case, the Board will specify the new submission deadline in its approval letter. When he submits the form later on, he should indicate the date and file reference of the Board’s approval in the form as appropriate.

76. The forms should be sent to the Secretariat by fax, by post or in person. Please refer to paragraph 82 for the Secretariat’s fax numbers, address and office hours. The postmark date (for postal delivery) or the date of receipt by the Board (for facsimile and personal delivery) will be regarded

as the date of submission for determining whether the 30 days' deadline has been complied with. Please complete the forms by handwriting or by typing and avoid attaching gum labels. Also, please ensure that the forms are duly and clearly completed.

77. If the removal or transplant operation begins on day 1 and ends on day 2, the date of removal or transplant to be filled out in Form 1 and Form 2 should be day 2. The 30 days' period within which the relevant form is to be submitted starts to run from and is inclusive of day 3. By way of an example, if a removal operation begins on 1 January 2011 and ends on 2 January 2011, the date of removal to be filled out in Form 1 should be 2 January 2011. The 30 days' period for submission of the Form 1 starts to run from 3 January 2011, and so, the duly completed Form 1 should be submitted to the Board on or before 1 February 2011.

HANDLING OF PERSONAL DATA UNDER THE PERSONAL DATA (PRIVACY) ORDINANCE

78. The Personal Data (Privacy) Ordinance (Cap. 486) enables individuals to request access to and correction of personal data held by data users. Since medical practitioners or other relevant persons are required to obtain personal data from the donors or the recipients involved in human organ transplants and submit them to the Board under sections 5, 6 and 7 of the Ordinance, they should comply with the rules and principles stipulated in the Personal Data (Privacy) Ordinance on the collection, retention, use, disposal, access to and correction of the personal data. A personal information collection statement is at Appendix 8 for reference.

PENALTIES FOR OFFENCES UNDER THE ORDINANCE

79. Certain acts constitute criminal offences under the Ordinance. In particular, the Ordinance makes it an offence to –

- (a) carry out a restricted organ removal or a restricted organ transplant between living persons except for
 - (i) organ transplants between genetically related persons or spouses whose marriage has subsisted for not less than 3 years; or
 - (ii) transplants involving organs removed for donors' therapy; or
 - (iii) organ transplants with prior approval of the Board (section 5);
- (b)
 - (i) make or receive any payment for the supply of, or for an offer to supply; or
 - (ii) seek to find a person willing to supply for payment, or offer to supply for payment; or
 - (iii) initiate or negotiate any arrangement involving the making of a payment for supply of, or for an offer to supply, an organ which has been or is to be removed from a dead or living person, whether in Hong Kong or elsewhere, and is intended to be transplanted into another person, whether in Hong Kong or elsewhere (section 4(1));
- (c) take part in the management or control of a body of persons corporate or unincorporate whose activities consist of or include the initiation or negotiation of any arrangement referred to in paragraph 79(b)(iii) (section 4(2));
- (d) cause to be published or distributed, or knowingly publish or distribute an advertisement –
 - (i) inviting persons to supply or offering to supply for payment an organ which has been or is to be removed from a dead or living person, whether in Hong Kong or elsewhere, and is intended to be transplanted into another person, whether in Hong Kong or elsewhere; or
 - (ii) indicating that the advertiser is willing to initiate or negotiate an arrangement referred to in paragraph 79(b)(iii)(section 4(3)); and

- (e) (i) transplant into a person; or
- (ii) import, for the purpose of having it transplanted into a person in Hong Kong or exporting it to a country where it is intended that it be transplanted into a person; or
- (iii) remove from a dead or living person for transplant into another person, an organ if the person knew or ought, after reasonable inquiry, to have known that a payment was or was to be made for supplying that organ (section 4(5)-(7)).

A person guilty of any of the offences listed in paragraph 79 is liable upon a first conviction to a fine at level 5 and to imprisonment for 3 months and upon a subsequent conviction to a fine at level 6 and to imprisonment for 1 year.

80. The Ordinance also makes it an offence to –

- (a) knowingly or recklessly supply information that is false or misleading in a material respect, for the purposes of establishing genetic or marital relationship between a living donor and the recipient concerned (section 5A(6));
- (b) knowingly or recklessly make a declaration that is false or misleading in a material respect in respect of transplants involving organs removed for donors' therapy (section 5B(7));
- (c) knowingly or recklessly issue a certificate or keep a medical report that is false or misleading in a material respect in respect of a recipient who is incapable of understanding the explanation provided by a registered medical practitioner (section 5E(4));
- (d) transplant, without reasonable excuse, an imported human organ into a person in contravention of the relevant requirements (i.e. (i) the person who carries out the transplant is a registered medical practitioner; (ii) that organ, when imported into Hong Kong, is accompanied by a certificate that complies with all the statutory requirements; and (iii) that registered medical practitioner or another person who is acceptable to the Board has supplied the original of that certificate or a copy of it to the Board.) (section 7(1) & (10));
- (e) without reasonable excuse, fail to supply to the Board the original or a certified true copy of the certificate for an imported organ within 7 working days after the transplant, if only a copy of the certificate has been supplied to the Board before the transplant, or provide further information to the Board as required (section 7(6) & (10));
- (f) without reasonable excuse, fail to make and submit a declaration in writing to the effect that the certified true copy of the certificate for an imported organ was certified by the importing practitioner within 7 working days after the transplant; or knowingly or recklessly make such a declaration that is false or misleading in a material respect, if the transplanting practitioner of the imported organ is not its importing practitioner and a certified true copy of the certificate is supplied to the Board (section 7(8) & (10)); and
- (g) without reasonable excuse, fail to provide the prescribed information to the Board with respect to transplants that have been or are proposed to be carried out using organs removed from the dead or living persons; or knowingly or recklessly supply to the Board information which is false or misleading in a material respect (section 6(3)).

A person guilty of any of the offences listed in paragraph 80 is liable upon conviction to a fine at level 5 and to imprisonment for 3 months.

81. It is an offence under the Ordinance if a registered medical practitioner fails, without reasonable excuse, to–

- (a) (in a case where the recipient is incapable of understanding the explanation)
 - (i) ensure that he has received the relevant certificates before carrying out a restricted organ transplant;
 - (ii) submit to the Board such certificates and medical report within 30 days after the transplant; or

- (iii) provide any further information to the Board as required (section 5A(5) & (7)); and
- (b) (after carrying out a restricted organ transplant) make and submit within 30 days or within such longer period as the board may on application allow a declaration in respect of transplants involving organs removed for donors' therapy (section 5B(2) & (6)).

A person guilty of any of the offences listed in paragraph 81 is liable upon conviction to a fine at level 5.

ENQUIRIES

82. Any enquiries on the Guidelines should be addressed to the Secretariat.

(a) During office hours

Mondays : 9:00 a.m. - 1:00 p.m. and 2:00 p.m. - 6:00 p.m.
Tuesdays to Fridays : 9:00 a.m. - 1:00 p.m. and 2:00 p.m. - 5:45 p.m.
Telephone number : 2961 8955
Fax number : 2527 9849/2572 5864/2572 8739

(b) Outside office hours and during public holidays

Pager number : 7110 3382 A/C 1722
(for urgent enquiries, applications for restricted organ removals
and/or transplants or submissions of certificates on imported organs
only)

(c) Address

Secretary, Human Organ Transplant Board
17/F, Wu Chung House,
213 Queen's Road East,
Wanchai,
Hong Kong

83. Statutory forms, the guidelines and other forms may be downloaded from the website of Department of Health at http://www.dh.gov.hk/english/links/links_hot.html.

Guidance Notes on Making Applications to the Human Organ Transplant Board for the Carrying Out of Restricted Organ Removal and/or Restricted Organ Transplant

*These notes are to be read by the registered medical practitioners who have clinical responsibility for the intended donor and the intended recipient, the registered medical practitioners who explain the matters to the intended donor and the intended recipient and the interviewers. "Registered medical practitioners" referred to in these notes and in the application documents means **only** medical practitioners who are for the time being registered under Medical Registration Ordinance, Cap. 161 of the Laws of the Hong Kong Special Administrative Region.*

Who makes the application to the Board

1. In all cases, application must be made by the registered medical practitioner who has clinical responsibility for the intended donor (**the applicant**). The Board will normally expect different registered medical practitioners to be clinically responsible for the intended donor and the intended recipient. If, exceptionally, the same registered medical practitioner is responsible for both, the reasons should be explained in the application.

When the application should be made

2. The applicant may wish to make a preliminary inquiry to the Board when the transplant is first contemplated. Although the Board can offer no view at this early stage on the likelihood of the application being successful, this initial informal contact may be of particular value if the applicant has not previously submitted an application. However, nothing conveyed during such preliminary inquiry is binding on the Board. The application should be made well in advance of the proposed date of transplant.

3. There may be occasions when an urgent application will be submitted. The applicant is strongly encouraged to notify the Board when a potential application is identified and provide information about the circumstances and the possible date and time of transplant. For some cases, even where a potential donor is said to be genetically related to, or the spouse of, the recipient, if the relationship has not been established or it appears that there may be difficulties in establishing the relationship, it would be preferable to notify the Board that an application may have to be made.

4. Even though the Board endeavours to deal with applications as quickly as possible, there can be no guarantee by it to respond by any given date or time, as enquiries to seek additional information from the applicant may need to be made in certain circumstances. As such, in urgent cases the application should be accompanied by as much supporting evidence as possible. Whilst the supporting evidence required will vary according to the individual case, it would be of assistance if there is provided a written chronology of the events leading to the proposed organ transplant and any other relevant information such as the information on the basis of which the applicant has established his belief of no commercial dealing and coercion, evidence that supports the existence of emotional tie between the intended donor and the intended recipient, information on the psychological condition of the intended donor, etc. Delays will occur if the Board needs to revert to the applicant for further information.

What forms the application must contain

5. The application must contain the following forms duly completed by the persons specified –

- | | | |
|-------------|---|---|
| (a) APP | - | Application form to be completed by the applicant |
| (b) DEC(1) | - | Declaration form to be completed by the applicant |
| (c) DEC(2) | - | Declaration form to be completed by the intended donor |
| (d) DEC(3) | - | Declaration form to be completed by the intended recipient (not applicable if the intended recipient is incapable of receiving the interview and the explanation required to be given to him under sections 5C(3)(b) and 5D(1)(d) of the Human Organ Transplant Ordinance (the Ordinance) respectively) |
| (e) DEC(4) | - | Declaration form to be completed by the registered medical practitioner(s) who explained to the intended donor and the intended recipient as required under sections 5D(1)(b) and (d) of the Ordinance (separate forms should be used if different registered medical practitioners gave the explanation to the intended donor and the intended recipient respectively) |
| (f) REP | - | Report to be completed by the interviewer(s) who interviewed the intended donor and the intended recipient under sections 5C(2)(b) and 5C(3)(b) of the Ordinance (separate forms should be used if different interviewers interviewed the intended donor and the intended recipient respectively) |
| (g) CERT(1) | - | Certificate to be completed by the registered medical practitioner who is not to carry out the restricted organ removal/transplant (only applicable to certify that the intended recipient is incapable of understanding the explanation required under section 5D(1)(d) of the Ordinance) |
| (h) CERT(2) | - | Certificate to be completed by the registered medical practitioner who is not to carry out the restricted organ removal/transplant (only applicable to certify that it would not be in the best interests of the recipient to wait until he is capable of understanding the explanation required under section 5D(1)(d) of the Ordinance) |
| (i) MR | - | Medical report to be completed by the registered medical practitioner who is to carry out the restricted organ transplant (only applicable to state the reason(s) why the requirements in section 5D(1)(d) of the Ordinance cannot be complied with) |

The applicant and the registered medical practitioner clinically responsible for the intended recipient

6. The applicant and the registered medical practitioner clinically responsible for the intended recipient should explain to the intended

donor and the intended recipient that it is a legal requirement that approval from the Board should be sought before the transplant may take place, the procedure involved in making the application and that the information supplied to the Board will be treated in strict confidence.

7. The registered medical practitioners should be present and act as witnesses as far as possible when the intended donor and the intended recipient sign declaration forms DEC(2) and DEC(3) respectively (not applicable to the intended recipient if he is incapable of receiving the explanation required to be given to him under section 5D(1)(d) of the Ordinance).

8. If there are indications that cast doubts on the mental capacity of the intended donor which may affect him in making his consent to donate, the registered medical practitioner clinically responsible for the intended donor should make further enquiries so as to ascertain whether the requirement under section 5D(1)(b) of the Ordinance for the intended donor to understand the explanation can be fulfilled.

Registered medical practitioner(s) to explain matters under sections 5D(1)(b) and (d)

9. Registered medical practitioner(s) should explain matters required under sections 5D(1)(b) and (d) of the Ordinance to the intended donor and the intended recipient **separately**. The explanation should also include the chances of the transplant being successful, the rates of mortality and morbidity and the possible after-effects and long-term complications for both the intended donor and the intended recipient. He should report on the intended donor's and/or the intended recipient's understanding of the matters by completing DEC(4). He should also take note of the requirement in paragraph 8 above and report on any such indications and actions taken. The registered medical practitioner who makes the explanation shall not be the registered medical practitioner who is to carry out the restricted organ removal or the restricted organ transplant. The registered medical practitioner who makes the explanation to the donor may but need not be the same registered medical practitioner who makes the explanation to the recipient.

Report from the interviewer (a person considered by the Board to be suitably qualified to conduct an interview under sections 5C(2)(b) and (3)(b))

10. The applicant should arrange suitable interviewer(s) to interview the intended donor and the intended recipient **separately** and submit the reports made by the interviewer(s) together with his application to the Board for consideration. As required under sections 5C(2)(b) and (3)(b) of the Ordinance, the interviewer(s) should interview the intended donor and/or the intended recipient, and report to the Board on their understanding of matters contained in sections 5D(1)(b) and (d) of the Ordinance. To facilitate the interviewer(s) to perform this task, the applicant should provide sufficient information concerning the intended donor and the intended recipient to this person.

11. As a general principle, the interviewer(s) should **not** be a party involved in the removal or transplant proceedings or a close associate of the one who is. He could be an experienced clinical psychologist, psychiatrist, medical social worker, physician or surgeon who is not involved in the removal or transplant proceedings. The interviewer who interviews the donor may but need not be the same interviewer who interviews the recipient.

Recipients incapable of understanding

12. If the requirements under sections 5C(3)(b) and 5D(1)(d) of the Ordinance cannot be fulfilled, the applicant should follow the legal requirements in sections 5C(4)(b) and (c) of the Ordinance (Please refer to paragraphs 41 to 45 of the Administrative Guidelines).

Notification of the Board's decision

13. The applicant will be informed of the application result by phone in the first instance and then written notification by fax.

14. The Board is not responsible for monitoring the clinical appropriateness of any treatment. It is the responsibility of the registered medical practitioners concerned to judge the likelihood of success of a transplant between any potential living donor and recipient.

Validity of the Board's approval

15. The approval of the Board will normally be valid for **30 days** from the date of the approval letter or as otherwise specified by the Board in the approval letter. If the removal and/or transplant operation are/is not carried out within the approval period and are/is re-scheduled for a later date, the applicant has to submit an application with full justifications for postponing the operation(s) to the Board within 30-day validity period for approval. If the applicant is unable to submit the application for postponement within the validity period, he is required to submit the application afresh.

向人體器官移植委員會申請進行 受規限器官切除及／或受規限器官移植的指引

凡對預定的器官捐贈人及預定的器官受贈人有臨床診治責任的註冊醫生，向預定的器官捐贈人及預定的器官受贈人進行解釋的註冊醫生及面見負責人，均須閱讀此指引。在此指引及申請表內提及的“註冊醫生”，只指在向委員會遞交申請時，同時已根據《醫生註冊條例》(香港法例第 161 條)註冊的醫生。

誰向委員會提交申請

1. 所有申請均須由一名對預定的器官捐贈人負有臨床診治責任的註冊醫生(申請人)提交。一般而言，委員會預期對預定的器官捐贈人及受贈人負有臨床診治責任的醫生，會由不同的註冊醫生擔任。如因特殊情况須由一名註冊醫生同時對預定的器官捐贈人及受贈人負有臨床診治責任，申請人必須在申請表內述明原因。

何時提交申請

2. 申請人最初考慮進行移植手術時，可以初步就個案向委員會查詢。雖然委員會未能在此早期階段評估申請獲批的可能性，但這種查詢或有助於從未提出申請的申請人日後正式提出申請。然而，在查詢時所得的資訊對委員會並無約束力。申請人應在預定的移植手術進行前盡早提交申請。

3. 如申請人遇上緊急個案並預計須向委員會提交申請，他應盡早通知委員會並提供個案的背景資料、可能進行移植手術的日期和時間。在處理某些個案時，即使預定的器官捐贈人聲稱跟受贈人有血親關係或是其配偶，如申請人未能依法定要求確立其關係，又或在確立其關係上遇到困難，申請人應盡早通知委員會可能要提出的申請。

4. 委員會會力求從速處理每宗申請。由於委員會或需要申請人提供補充資料，所以委員會不能保證在指定的時間內回覆申請結果。為協助委員會考慮申請，申請人在提交緊急申請時，應同時盡量提供輔助證據。由於每宗申請所需要的輔助證據各有不同，申請人可提供達致進行預定移植決定的事件的時序列表及其他相關資料(如申請人如何信納捐贈並不涉及威迫引誘、預定的器官捐贈人及受贈人之間的感情聯繫、預定的器官捐贈人的心理狀態等等)。如委員會須向申請人要求候補資料，將會延長處理申請時間。

申請須包括的表格

5. 申請內須包括以下由指定人士填妥的表格 -

- | | | |
|-------------|---|--|
| (a) APP | - | 由申請人填寫的申請表 |
| (b) DEC(1) | - | 由申請人填寫的聲明書 |
| (c) DEC(2) | - | 由預定的器官捐贈人填寫的聲明書 |
| (d) DEC(3) | - | 由預定的器官受贈人填寫的聲明書(如預定的器官受贈人無能力接受《人體器官移植條例》(《條例》)第 5C(3)(b)及 5D(1)(d)條分別規定的面見及解釋，則不適用) |
| (e) DEC(4) | - | 由按《條例》第 5D(1)(b)及 (d)條規定向預定的器官捐贈人及受贈人解釋的註冊醫生填寫的聲明書(如由不同註冊醫生分別向預定的器官捐贈人及受贈人解釋，則須各自填寫一份聲明書) |
| (f) REP | - | 由按《條例》第 5C(2)(b)及 5C(3)(b)條規定面見預定的器官捐贈人及受贈人的面見負責人填寫的報告書(如由不同面見負責人分別面見預定的器官捐贈人及受贈人，則須各自填寫一份報告書) |
| (g) CERT(1) | - | 由一名不會進行該受規限器官切除或移植的註冊醫生填寫的證明書(只適用於證明預定的器官受贈人無能力明白《條例》第 5D(1)(d)條規定的解釋) |
| (h) CERT(2) | - | 由一名不會進行該受規限器官切除或移植的註冊醫生填寫的證明書(只適用於證明等候直至預定的器官受贈人有能力明白《條例》第 5D(1)(d)條規定的解釋並不符合其最佳利益) |
| (i) MR | - | 由一名將會進行該受規限器官移植的註冊醫生填寫的醫療報告(只適用於述明不能符合《條例》第 5D(1)(d)條規定的理由) |

申請人及對預定的器官受贈人負有臨床診治責任的註冊醫生

6. 申請人及對預定的器官受贈人負有臨床診治責任的註冊醫生，應向預定的器官捐贈人及受贈人解釋有關移植需獲委員會批准方可進行的法定要求及相關申請手續，並向他們述明遞交給委員會的資料將絕對保密。

7. 當預定的器官捐贈人及受贈人分別簽署聲明書 DEC(2)及 DEC(3)時，對他們負有臨床診治責任的註冊醫生應盡量在場並擔任見證人(如預定的器官受贈人無能力明白《條例》第 5D(1)(d)條規定的解釋，則此項不適用於該預定的器官受贈人)。

8. 如有跡象顯示預定的器官捐贈人的理解能力會影響他同意捐出器官的決定，則對他負有臨床診治責任的註冊醫生應作進一步查詢，以確定是否符合《條例》第 5D(1)(b)條要求預定的器官捐贈人明白解釋的規定。

按《條例》第 5D(1)(b)及(d)條規定解釋的註冊醫生

9. 註冊醫生應按《條例》第 5D(1)(b)及(d)條規定，分別向預定的器官捐贈人及受贈人解釋有關移植手術的成功率、預定的器官捐贈人及受贈人的病發率和死亡率，以及手術後可能產生的後遺症及長期併發症等事宜。註冊醫生應使用 DEC(4)報告預定的器官捐贈人及／或受贈人的理解情況，以及注意上文第 8 段提及的情況，適時報告有關的跡象及已採取的相應行動。作出解釋的註冊醫生不得是將會進行有關的受規限器官切除或受規限器官移植的註冊醫生。向捐贈人作出解釋的註冊醫生與向受贈人作出解釋的註冊醫生可以但無需是同一人。

面見負責人的報告(按《條例》第 5C(2)(b)及(3)(b)條規定由一名委員會認為合資格的人士進行面見)

10. 申請人應安排合適的面見負責人分開面見預定的器官捐贈人及受贈人，並把面見負責人完成的報告連同其申請書一併提交委員會考慮。按《條例》第 5C(2)(b) 及 3(b)條規定，面見負責人須面見預定的器官捐贈人及／或受贈人，並向委員會報告他們對《條例》第 5D(1)(b)及(d)條規定的事項的理解。申請人應在面見前提供有關預定的器官捐贈人及受贈人的資料予面見負責人，以協助其工作。

11. 一般而言，面見負責人**不應**參與有關的器官切除或移植手術，或跟參與的人士有密切關連。委員會認為合資格的面見負責人可以是一名資深的臨床心理學家、精神病學家、醫務社工、並無參與有關的器官切除或移植手術的註冊醫生或外科醫生。面見捐贈人的面見負責人與面見受贈人的面見負責人可以但無需是同一人。

預定的器官受贈人無理解能力

12. 如《條例》第 5C(3)(b)及 5D(1)(d)條規定的要求未能符合，申請人應依據《條例》第 5C(4)(b)及(c)條規定的法定要求(請參閱行政指引第 41 至 45 段)。

委員會批核結果通知

13. 委員會會先致電通知申請人其申請結果，然後傳真書面通知。

14. 負責的註冊醫生須全權評估進行器官移植手術的成功率，委員會不會監察註冊醫生建議的治療是否合適。

委員會批准的有效期

15. 除非在批准信內另行訂明，委員會批准的有效期一般是由發信當日起計，為期 **30 天**。如器官切除及／或移植手術沒有在有效期進行及須延至有效期後進行，申請人須於 30 天有效期內，以書面解釋延期原因並向委員會申請延期。如申請人未能在有效期內提出延期申請，他須按法例重新提交申請。

Application for the Carrying out of Restricted Organ Removal and/or Restricted Organ Transplant

申請進行受規限器官切除及／或受規限器官移植

APP

(under section 5C of the Human Organ Transplant Ordinance, Cap. 465)

(根據《人體器官移植條例》(第465章)第5C條)

Application Form 申請表

To be completed by the registered medical practitioner who has clinical responsibility for the intended donor and submitted to the Human Organ Transplant Board together with Declarations (DEC(1) to (4)), Report (REP) and other supporting documents **BEFORE** removal of the organ(s). Please also read the "Important Notes" at the end of this form.

由一名對預定的器官捐贈人負有臨床診治責任的註冊醫生填寫，並須連同聲明書(DEC(1)至(4))、報告書(表格 REP)及其他補充文件在切除器官之前一併遞交人體器官移植委員會。請參閱本表格末部的重要註釋。

Part A 甲部

1. Particulars of Applicant 申請人的個人資料

(registered medical practitioner who has clinical responsibility for the intended donor)

(對預定的器官捐贈人負有臨床診治責任的註冊醫生)

Name

姓名 : _____

*HK Identity Card No. 香港身分證號碼/Passport No.(please specify the place of issue) 護照號碼(請指明發出地點)/Other identity document No. (please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

Personal Identification No.

個人身分證明號碼 : _____

Telephone Number

電話號碼 : _____

Facsimile Number

傳真號碼 : _____

Address/Hospital Name

地址／醫院名稱 : _____

2. Description of Organ(s) to be removed and transplanted 將被切除及移植的器官的說明

3. Scheduled Date, Time and Place of the transplant 預定進行器官移植的日期、時間及地點

4. Intended Donor 預定的器官捐贈人

Name

姓名 : _____

*HK Identity Card No. 香港身分證號碼/Passport No.(please specify the place of issue) 護照號碼(請指明發出地點)/Other identity document No.(please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

Personal Identification No.

個人身分證明號碼 : _____

Address

地址 : _____

†Age

年齡 : _____

Sex

性別 : *M 男/F 女

Marital Status

婚姻狀況 : *Single 未婚/Married 已婚/Separated 分居/Divorced 離婚/Widowed 喪偶

Medical Condition

醫療狀況 : _____

(please give your views on whether the donor is medically suitable for the donation)

(請就器官捐贈人是否適合捐贈器官提供意見)

5. Intended Recipient 預定的器官受贈人

Name
姓名 : _____

*HK Identity Card No. 香港身分證號碼/HK Birth Certificate No. 香港出生證明書號碼/Passport No. (please specify the place of issue) 護照號碼(請指明發出地點)/Other Identity document No. (please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

Personal Identification No.
個人身分證明號碼 : _____

Address
地址 : _____

Age
年齡 : _____

Sex
性別 : *M 男/F 女

Marital Status
婚姻狀況 : *Single 未婚/Married 已婚/Separated 分居/Divorced 離婚/Widowed 喪偶

Medical Condition
醫療狀況 : _____

(please give your views on whether the recipient is suitable for the transplant operation and the reason for requiring the organ donation)
(請詳述你對器官受贈人是否適合進行該項移植手術的意見，並說明需要器官捐贈的原因)

6. Particulars of Registered Medical Practitioner who has clinical responsibility for the Intended Recipient (if he is also clinically responsible for the intended donor, please state so and give reasons)

對預定的器官受贈人負有臨床診治責任的註冊醫生的個人資料(如他同時對預定的器官捐贈人負有臨床診治責任，請註明及提供原因)

Name
姓名 : _____

*HK Identity Card No. 香港身分證號碼/Passport No. (please specify the place of issue) 護照號碼(請指明發出地點) /Other identity document No. (please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

Personal Identification No.
個人身分證明號碼 : _____

Telephone Number
電話號碼 : _____

Facsimile Number
傳真號碼 : _____

Address/Hospital Name
地址/醫院名稱 : _____

Reasons for the same registered medical practitioner to be clinically responsible for the donor
由同一位註冊醫生對預定的器官捐贈人負有臨床診治責任的原因 : _____

7. Particulars of Registered Medical Practitioner expected to remove organ (if different from the registered medical practitioner making application)

負責器官切除手術的註冊醫生的個人資料(如有別於申請的註冊醫生)

Name

姓名 : _____

*HK Identity Card No. 香港身分證號碼/Passport No.(please specify the place of issue) 護照號碼(請指明發出地點) /Other identity document No. (please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

Personal Identification No.

個人身分證明號碼 : _____

Telephone Number

電話號碼 : _____

Facsimile Number

傳真號碼 : _____

Address/Hospital Name

地址/醫院名稱 : _____

8. Particulars of Registered Medical Practitioner expected to implant organ (if he is also expected to remove organ, please state so and give reason)

負責器官植入手術的註冊醫生的個人資料(如他同時負責器官切除手術，請註明及提供原因)

Name

姓名 : _____

*HK Identity Card No. 香港身分證號碼/Passport No.(please specify the place of issue)護照號碼(請指明發出地點) /Other identity document No. (please specify the type of document and place of issue)其他身分證明文件號碼(請指明文件類別及發出地點)

Personal Identification No.

個人身分證明號碼 : _____

Telephone Number

電話號碼 : _____

Facsimile Number

傳真號碼 : _____

Address/Hospital Name

地址/醫院名稱 : _____

Reasons for the same

registered medical : _____

practitioner to remove the

organ _____

由同一位註冊醫生負責切除

手術的原因 _____

9. Particulars of Registered Medical Practitioner(s) explaining matters under section 5D(1)(b) and (d) (Part (a) and (b) should both be completed if different registered medical practitioners gave the explanation to the intended donor and the intended recipient respectively)

負責向預定的器官捐贈人及預定的器官受贈人說明第5D(1)(b)及(d)條有關事項的註冊醫生的個人資料(若由不同註冊醫生分別向預定的器官捐贈人及預定的器官受贈人解釋有關事項，(a)及(b)部必須同時填寫)

(a)

(b)

Name

姓名 : _____

*HK Identity Card No. 香港身分證號碼/Passport No.(please specify the place of issue)護照號碼(請指明發出地點) /Other identity document No. (please specify the type of documents and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

*HK Identity Card No. 香港身分證號碼/Passport No.(please specify the place of issue)護照號碼(請指明發出地點) /Other identity document No.(please specify the type of documents and place of issue)其他身分證明文件號碼(請指明文件類別及發出地點)

Personal Identification No.

個人身分證明號碼 : _____

Telephone Number

電話號碼 : _____

Facsimile Number

傳真號碼 : _____

Address/Hospital Name

地址/醫院名稱 : _____

10. Particulars of the Interviewer(s) (Part (a) and (b) should both be completed if the intended donor and the intended recipient were interviewed by different interviewers)

面見負責人的個人資料(若由不同面見負責人分別會見預定的器官捐贈人及預定的器官受贈人，(a)及(b)部必須同時填寫)

	(a)	(b)
Name 姓名		
Personal Identification No. 個人身分證明號碼	<small>*HK Identity Card No. 香港身分證號碼/Passport No. (please specify the place of issue) 護照號碼(請指明發出地點) /Other identity document No.(please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)</small>	<small>*HK Identity Card No. 香港身分證號碼/Passport No. (please specify the place of issue) 護照號碼(請指明發出地點)/Other identity document No.(please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)</small>
Telephone Number 電話號碼		
Facsimile Number 傳真號碼		
Address/Hospital Name 地址／醫院名稱		

Part B 乙部

Declarations, Certificates and Report 聲明書、證明書及報告書

*The Declarations (DEC(1) to(4)) and Report (REP)/ The Declarations (DEC(1), (2) & (4)), Certificates (CERT(1) &(2)) and Reports (REP & MR) have been completed according to the instructions and are submitted together with this application form.

*聲明書(DEC(1)至(4))及報告書(REP) /聲明書(DEC(1)、(2)及(4))、證明書(CERT(1)及(2))及報告書(REP 及 MR) 已按指引填妥，並連同此申請表一併遞交。

* * * * *

Signature of Applicant 申請人簽署	
Name of Applicant 申請人姓名	
Date 日期	

† Proof of age should be submitted 須遞交年齡證明

* Delete whichever is inapplicable 刪去不適用者

Important Notes 重要註釋：

- (a) The applicant is required to provide the background information leading to the proposed transplant in separate sheets, such as a chronology of events, and attach such information to this application form. The applicant may in addition submit any other relevant documentary evidence or information as deemed appropriate to substantiate the application e.g. to demonstrate the emotional tie or to support the belief of no commercial dealing.
申請人遞交本申請表時，須提供引致所建議的移植的背景資料，如有關事件的時序表。申請人亦可同時遞交他認為可輔助此項申請的其他有關證明文件或資料，藉以顯示其感情聯繫或確立無涉及商業交易等。
- (b) If more than one organ is to be removed from the intended donor and transplanted to a single intended recipient, one Application Form and one set of Declarations is required. If there are multiple intended recipients, one Application Form and one set of Declarations for each intended recipient is required irrespective of the number of organs he/she will receive from the intended donor.
若從預定的器官捐贈人身上切除多於一個器官，並移植於同一名預定的器官受贈人，只須遞交一份申請表及聲明書。若有多名預定的器官受贈人，則不論他／她將從預定的器官捐贈人身上接受多少個器官，須就每一名預定的器官受贈人遞交一份申請表及聲明書。

Declaration
聲明書

DEC(1)

Application for the Carrying out of Restricted Organ Removal and/or Restricted Organ Transplant
申請進行受規限器官切除及／或受規限器官移植

(To be completed by the applicant)
(由申請人填寫)

I declare that –
本人現謹聲明 –

- (a) I have clinical responsibility for the intended donor; and
本人對預定的器官捐贈人負有臨床診治責任；及
- (b) To the best of my knowledge, no payment prohibited by the Human Organ Transplant Ordinance (Cap. 465) has been or is intended to be made.
就本人所知，無人曾作出或擬作出《人體器官移植條例》（第 465 章）所禁止的付款。

Signature of
Applicant
申請人簽署

Signature of
Witness
見證人簽署

Name of Applicant
申請人姓名

Name of Witness
見證人姓名

*HK Identity Card No. 香港身分證號碼/Passport No.(please specify the place of issue) 護照號碼(請指明發出地點) /Other identity document No.(please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

*HK Identity Card No. 香港身分證號碼/Passport No.(please specify the place of issue) 護照號碼(請指明發出地點) /Other identity document No.(please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

Personal
Identification No.
個人身分證明號碼

Personal
Identification No.
個人身分證明號碼

Date
日期

Date
日期

* Delete whichever is inapplicable 刪去不適用者

Declaration
聲明書

DEC(2)

Application for the Carrying out of Restricted Organ Removal and/or Restricted Organ Transplant
申請進行受規限器官切除及／或受規限器官移植

(To be completed by the intended donor)
(由預定的器官捐贈人填寫)

I declare that –
本人現謹聲明 –

(a) I have reached the age of 18 years;
本人年齡已達 18 歲；

(b) A registered medical practitioner, _____ (name of registered medical practitioner) who will not be the one to remove the organ(s) from me or the one to transplant the organ(s) into the intended recipient, has explained to me and I have understood the procedure of the proposed organ removal, the risk involved and my entitlement to withdraw consent at any time;

_____ 醫生（註冊醫生姓名）已向本人解釋，而本人亦已明白有關擬定器官切除的程序、所涉及的風險及本人可隨時撤回同意的權利。該醫生不會從本人身上切除器官，或將該器官移植於預定的器官受贈人體內；

(c) I have given my consent to removal of my _____ (description of organ(s)) for transplant to _____ (name of intended recipient) without coercion or the offer of inducement and have not subsequently withdrawn my consent; and

本人並非在受威迫或引誘的情況下同意切除本人的 _____（器官的說明）予 _____（預定的器官受贈人姓名）作移植之用，本人其後亦無撤回同意；及

(d) To the best of my knowledge, no payment for the supply of the organ(s) as prohibited by the Human Organ Transplant Ordinance (Cap. 465) has been, or is intended to be, made.

就本人所知，無人曾作出或擬作出《人體器官移植條例》（第 465 章）所禁止為提供該器官而作出的付款。

Signature of Intended
Donor

預定的器官捐贈人簽署 _____

#Signature of
Witness

見證人簽署 _____

Name of Intended
Donor

預定的器官捐贈人姓名 _____

#Name of Witness

見證人姓名 _____

*HK Identity Card No.香港身分證號碼/Passport No.(please specify the place of issue)護照號碼(請指明發出地點) /Other identity document No.(please specify the type of document and place of issue)其他身分證明文件號碼(請指明文件類別及發出地點)

Personal

Identification No.

個人身分證明號碼 _____

Personal

Identification No.

個人身分證明號碼 _____

*HK Identity Card No.香港身分證號碼/Passport No.(please specify the place of issue)護照號碼(請指明發出地點) /Other identity document No.(please specify the type of document and place of issue)其他身分證明文件號碼(請指明文件類別及發出地點)

Date

日期 _____

Date

日期 _____

* Delete whichever is inapplicable 刪去不適用者

The applicant should act as the witness as far as possible 申請人應盡量擔任見證人

Declaration

聲明書

Application for the Carrying out of Restricted Organ Removal and/or Restricted Organ Transplant
申請進行受規限器官切除及／或受規限器官移植(To be completed by the intended recipient)
(由預定的器官受贈人填寫)I declare that –
本人現謹聲明 –

- (a) A registered medical practitioner, _____ (name of registered medical practitioner) who will not be the medical practitioner to transplant the _____ (description of organ(s)) into me or the one to remove the organ(s) from _____ (name of intended donor), has explained to me and I have understood the procedure of the proposed organ transplant, the risk involved and my entitlement to withdraw consent at any time; and
_____ 醫生 (註冊醫生姓名)已向本人解釋，而本人亦已明白有關擬定的器官移植的程序、所涉及的風險及本人可隨時撤回同意的權利。該醫生並不會把 _____ (器官的說明) 移植於本人體內，或從 _____ (預定的器官捐贈人姓名)身上切除該器官；及
- (b) To the best of my knowledge, no payment for the supply of the organ(s) as prohibited by the Human Organ Transplant Ordinance (Cap. 465) has been, or is intended to be, made.
就本人所知，無人曾作出或擬作出《人體器官移植條例》(第465章)所禁止為提供該器官而作出的付款。

Signature of Intended
Recipient
預定的器官受贈人簽署#Signature of
Witness
見證人簽署Name of Intended
Recipient
預定的器官受贈人姓名#Name of
Witness
見證人姓名Personal
Identification No.
個人身分證明號碼

*HK Identity Card No. 香港身分證號碼/Passport No.(please specify the place of issue) 護照號碼(請指明發出地點) /Other identity document No.(please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

Personal
Identification No.
個人身分證明號碼

*HK Identity Card No. 香港身分證號碼/Passport No. (please specify the place of issue) 護照號碼(請指明發出地點) /Other identity document No.(please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

Date
日期Date
日期

* Delete whichever is inapplicable 刪去不適用者

The registered medical practitioner who has clinical responsibility for the intended recipient should act as the witness as far as possible
對預定的器官受贈人負有臨床診治責任的註冊醫生應盡量擔任見證人

Note: This declaration needs not be completed if the intended recipient is incapable of understanding the explanation required to be given to him/her under section 5D(1)(d) of the Ordinance.

註：若預定的器官受贈人未能根據《條例》第5D(1)(d)條規定明白有關的解釋，則不用填寫此份聲明書。

Declaration

聲明書

Application for the Carrying out of Restricted Organ Removal and/or Restricted Organ Transplant

申請進行受規限器官切除及／或受規限器官移植

(To be completed by a registered medical practitioner, who is not the medical practitioner to remove the organ(s) from the intended donor or to transplant the organ(s) into the intended recipient)
(由並非將從預定的器官捐贈人身上切除器官或將器官移植於預定的器官受贈人體內的註冊醫生填寫)

I declare that –

本人現謹聲明 –

(a) I have explained to *the intended donor, _____ (name of intended donor), and *the intended recipient, _____ (name of intended recipient), and each of them has understood the procedure of the operation, the risk involved and his/her entitlement to withdraw consent at any time; and
本人已向*預定的器官捐贈人 _____ (預定的器官捐贈人姓名) 及*預定的器官受贈人 _____ (預定的器官受贈人姓名) 解釋，而各人亦已明白有關手術的程序、所涉及的風險及他／她可隨時撤回同意的權利；及

(b) I shall not be involved in the removal/transplant of the organ(s) which is/are covered by this application.

本人不會涉及此申請所提出的器官切除／移植的手術。

Signature of
Registered Medical
Practitioner
註冊醫生簽署

Signature of
Witness
見證人簽署

Name of Registered
Medical Practitioner
註冊醫生姓名

Name of Witness
見證人姓名

*HK Identity Card No. 香港身分證號碼/Passport No.(please specify the place of issue) 護照號碼(請指明發出地點) /Other identity document No.(please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

*HK Identity Card No. 香港身分證號碼/Passport No.(please specify the place of issue) 護照號碼(請指明發出地點) /Other identity document No.(please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

Personal
Identification No.
個人身分證明號碼

Personal
Identification No.
個人身分證明號碼

Date
日期

Date
日期

* Delete whichever is inapplicable 刪去不適用者

Note: (1) Please delete the part on the intended recipient, if he is incapable of understanding the explanation required to be given to him under section 5D(1)(d) of the Human Organ Transplant Ordinance.

若預定的器官受贈人未能根據《人體器官移植條例》第 5D(1)(d)條的規定明白有關的解釋，請刪去與預定的器官受贈人相關的部分。

(2) If the explanation was given to the intended donor and the intended recipient by different registered medical practitioners, separate declaration forms should be completed by each of them.

若由不同註冊醫生分別向預定的器官捐贈人及預定的器官受贈人作出解釋，則每位註冊醫生須各自填寫一份聲明書。

Application for the Carrying out of Restricted Organ Removal and/or Restricted Organ Transplant
申請進行受規限器官切除及/或受規限器官移植

(To be completed by an interviewer i.e. a clinical psychologist, psychiatrist, medical social worker, physician or surgeon who is not involved in the removal and transplant proceedings)

(由面見負責人，即臨床心理學家、精神病學家、醫務社會工作者、並無參與器官切除及移植程序的註冊醫生或外科註冊醫生填寫)

I am a _____ (post title). I declare I have separately interviewed *the intended donor, _____ (name of intended donor), and *the intended recipient, _____ (name of intended recipient). Each of them has received explanation from a registered medical practitioner and has understood the procedure of the operation, the risk involved and his/her entitlement to withdraw consent at any time. The intended donor has also understood that he/she has given his/her consent to removal of the organ(s) without coercion or the offer of inducement and has not subsequently withdrawn his/her consent.

本人是一名 _____ (職位名稱)。本人現謹聲明，本人已分別接見*預定的器官捐贈人 _____ (預定的器官捐贈人姓名) 及*預定的器官受贈人 _____ (預定的器官受贈人姓名)。各人亦已獲一名註冊醫生接見，並明白有關手術的程序、所涉及的風險及他／她可隨時撤回同意的權利。預定的器官捐贈人亦已明白他／她並非於威迫或引誘的情況下同意切除該器官，而其後他／她亦無撤回同意。

Signature of

Interviewer

面見負責人簽署

Signature of Witness

見證人簽署

Name of Interviewer

面見負責人姓名

Name of Witness

見證人姓名

*HK Identity Card No. 香港身分證號碼/Passport No.(please specify the place of issue) 護照號碼(請指明發出地點) /Other identity document No.(please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

*HK Identity Card No. 香港身分證號碼/Passport No.(please specify the place of issue) 護照號碼(請指明發出地點) /Other identity document No.(please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

Personal

Identification No.

個人身分證明號碼

Personal

Identification No.

個人身分證明號碼

Date

日期

Date

日期

* Delete whichever is inapplicable 刪去不適用者

Note: (1) Please delete the part on the intended recipient if he is incapable of receiving the interview.

註：若預定的器官受贈人未能接受面見，請刪去有關預定的器官受贈人的部分。

(2) If the intended donor and recipient were interviewed by different interviewers, separate report forms should be completed by each of the interviewers. 若由不同面見負責人分別會見預定的器官捐贈人及受贈人，則每位面見負責人須各自填寫一份報告書。

(3) The interviewer is required to provide in separate sheets to the Board, if any of the following was indicated during the interview(s) – 如在面見時發現下列情況，該名面見負責人須另外提交有關詳情予委員會 –

- (i) that there might be financial transaction, or other benefit to the intended donor or anyone connected with that person, or any sort of coercion or threat involved in the decision to donate the organ; 懷疑當中牽涉金錢交易，或有人向預定的器官捐贈人或與他有關的人士提供利益，又或他捐贈的決定是在威迫引誘的情況下所作出的；
- (ii) that the claimed relationship between them, or the intended donor's reason for donating an organ, did not appear to be genuine; 預定的器官捐贈人與受贈人聲稱的關係，或預定的器官捐贈人願意捐贈器官的理由，顯然並不真實；
- (iii) that there was any reason for concern about the intended donor's ability to understand what was involved in donating an organ; 懷疑預定的器官捐贈人是否有能力明白有關捐贈器官的資料；
- (iv) that there was additional evidence, which had not already been put forward in the application, which might help to satisfy the Board that this was a case where a transplant could legitimately be performed; 有其他證據足以令委員會信納此項移植申請可在合法的情況下進行，而申請表內未有提供；
- (v) that there were any difficulties in communication, e.g. language barrier, and if so, how these were overcome. 在會面時遇到溝通上的困難(如語言障礙)及解決方法。

CERT(1)

**Certificate Certifying that the Recipient
is Incapable of Understanding the Explanation
Required under section 5D(1)(d) of the Human Organ Transplant Ordinance**
受贈人無能力明白《人體器官移植條例》第 5D(1)(d)條規定的解釋的證明書

(To be completed by a registered medical practitioner who is **not** to carry out the restricted organ removal/transplant)
(由一名不會進行有關的受規限器官切除／移植的註冊醫生填寫)

Name of the intended recipient
預定的器官受贈人 : _____

*HK Identity Card No. 香港身分證號碼/HK Birth Certificate No. 香港出生證明書號碼/Passport No. (please specify the place of issue) 護照號碼(請指明發出地點)/Other identity document No. (please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

Personal Identification No.
個人身分證明號碼 : _____

Date of proposed transplant
預定進行移植的日期 : _____

Organ(s) to be transplanted
將被移植的器官 : _____

I am not the registered medical practitioner who is to carry out the restricted organ removal or the restricted organ transplant. I hereby certify that the intended recipient is in fact incapable of understanding the explanation required under section 5D(1)(d) of the Human Organ Transplant Ordinance, i.e. the procedure of the proposed organ transplant, the risk involved and his/her entitlement to withdraw consent to that transplant at any time. That fact is attributable to one or more of the following reasons (please put a “✓” in the appropriate box) –

本人不是進行有關的受規限器官切除或受規限器官移植的註冊醫生。本人現證明，預定的器官受贈人事實上無能力明白《人體器官移植條例》第 5D(1)(d)條規定的解釋(即擬定器官移植的程序、所涉及的風險及其有權隨時撤回對該項移植的同意)。此事實可歸因於以下其中一項或多於一項的理由(請在合適方格填上“✓”) –

- ☐ His/Her suffering any illness;
他／她患有任何疾病；
- ☐ His/Her being a minor;
他／她是未成年人；
- ☐ His/Her being a mentally incapacitated person within the meaning of the Mental Health Ordinance (Cap. 136);
他／她是《精神健康條例》(第 136 章)所指的精神上無行為能力的人；
- ☐ His/Her suffering an impaired state of consciousness.
他／她正處於神智不清的狀態。

<p>Signature of Registered Medical Practitioner 註冊醫生簽署 _____</p> <p>Name of Registered Medical Practitioner 註冊醫生姓名 _____</p> <p style="text-align: right;"><small>*HK Identity Card No. 香港身分證號碼/Passport No. (please specify the place of issue) 護照號碼(請指明發出地點) /Other identity document No. (please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)</small></p> <p>Personal Identification No. 個人身分證明號碼 _____</p> <p>Institute/Hospital 機構／醫院名稱 _____</p> <p>Date 日期 _____</p>	<p>Signature of Witness 見證人簽署 _____</p> <p>Name of Witness 見證人姓名 _____</p> <p style="text-align: right;"><small>*HK Identity Card No. 香港身分證號碼/Passport No. (please specify the place of issue) 護照號碼(請指明發出地點) /Other identity document No. (please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)</small></p> <p>Personal Identification No. 個人身分證明號碼 _____</p> <p>Date 日期 _____</p>
--	--

* Delete whichever is inapplicable 刪去不適用者

**Certificate Certifying that it would not be in the Best Interests of the Recipient to Wait
until He/She is Capable of Understanding the Explanation
Required under section 5D(1)(d) of the Human Organ Transplant Ordinance
等候至受贈人有能力明白《人體器官移植條例》第 5D(1)(d)條規定的解釋
並不符合受贈人的最佳利益的證明書**

(To be completed by a registered medical practitioner who is **not** to carry out the restricted organ removal/transplant)
(由一名不會進行有關的受規限器官切除／移植的註冊醫生填寫)

Name of the intended
recipient

預定的器官受贈人

:

*HK Identity Card No. 香港身分證號碼/HK Birth Certificate No. 香港出生證明書號碼/Passport No. (please specify the place of issue) 護照號碼(請指明發出地點)/Other identity document No. (please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

Personal Identification No.

個人身分證明號碼

:

Date of proposed transplant

預定進行移植的日期

:

Organ(s) to be transplanted

將被移植的器官

:

I am not the registered medical practitioner who is to carry out the restricted organ removal or the restricted organ transplant. I hereby certify that it would not be in the best interests of the intended recipient to wait until he/she is capable of understanding the explanation required under section 5D(1)(d) of the Human Organ Transplant Ordinance, i.e. the procedure of the proposed organ transplant, the risk involved and his/her entitlement to withdraw consent to that transplant at any time.

本人不是進行有關的受規限器官切除或受規限器官移植的註冊醫生。本人現證明，等候直至預定的器官受贈人有能力明白《人體器官移植條例》第 5D(1)(d)條規定的解釋(即擬定器官移植的程序、所涉及的風險及其有權隨時撤回對該項移植的同意)並不符合該受贈人的最佳利益。

Signature of

Registered Medical
Practitioner

註冊醫生簽署

Signature of
Witness

見證人簽署

Name of Registered
Medical Practitioner

註冊醫生姓名

Name of Witness

見證人姓名

*HK Identity Card No. 香港身分證號碼/Passport No. (please specify the place of issue) 護照號碼(請指明發出地點)/Other identity document No. (please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

*HK Identity Card No. 香港身分證號碼/Passport No. (please specify the place of issue) 護照號碼(請指明發出地點)/Other identity document No. (please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

Personal

Identification No.

個人身分證明號碼

Personal

Identification No.

個人身分證明號碼

Institute/Hospital

機構／醫院名稱

Date

日期

Date

日期

* Delete whichever is inapplicable 刪去不適用者

**Medical Report Stating the Reasons why the Requirements
in section 5D(1)(d) of the Human Organ Transplant Ordinance cannot be Complied with
述明不能符合《人體器官移植條例》第 5D(1)(d)條規定的醫療報告**

(To be completed by the registered medical practitioner who is to carry out the restricted organ transplant)
(由將會進行有關的受規限器官移植的註冊醫生填寫)

Name of the intended recipient

預定的器官受贈人 : _____

*HK Identity Card No. 香港身分證號碼/HK Birth Certificate No. 香港出生證明書號碼/Passport No.(please specify the place of issue) 護照號碼(請指明發出地點)/Other identity document No. (please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點) :

Personal Identification No.

個人身分證明號碼 : _____

Date of proposed transplant

預定進行移植的日期 : _____

Organ(s) to be transplanted

將被移植的器官 : _____

I am the registered medical practitioner who is to carry out the restricted organ transplant.

本人是將進行受規限器官移植的註冊醫生。

The intended recipient was first presented to me/ the hospital on _____ (date). It was considered on _____ (date) that transplant was required for the intended recipient. However, the intended recipient concerned was in fact incapable of understanding the explanation required to be given to him/her under section 5D(1)(d) of the Human Organ Transplant Ordinance, i.e. the procedure of the proposed organ transplant, the risk involved and his/her entitlement to withdraw consent to that transplant at any time. The reasons are as follows –

本人／醫院於 _____ (日期) 首次接見預定的器官受贈人，並於 _____ (日期) 決定該預定的器官受贈人需進行器官移植；但該預定的器官受贈人事實上無能力明白按《人體器官移植條例》第 5D(1)(d)條規定的解釋(即擬定器官移植的程序、所涉及的風險及其有權隨時撤回對該項移植的同意)，原因如下：

Signature of Registered
Medical Practitioner

註冊醫生簽署 _____

Signature of
Witness

見證人簽署 _____

Name of Registered
Medical Practitioner

註冊醫生姓名 _____

Name of Witness

見證人姓名 _____

*HK Identity Card No. 香港身分證號碼/Passport No. (please specify the place of issue) 護照號碼(請指明發出地點) /Other identity document No.(please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

Personal

Identification No.

個人身分證明號碼 _____

Personal

Identification No.

個人身分證明號碼 _____

*HK Identity Card No. 香港身分證號碼/Passport No. (please specify the place of issue) 護照號碼(請指明發出地點) /Other identity document No.(please specify the type of document and place of issue) 其他身分證明文件號碼(請指明文件類別及發出地點)

Institute/Hospital

機構／醫院名稱 _____

Date

日期 _____

Date

日期 _____

* Delete whichever is inapplicable 刪去不適用者

Declaration Concerning Transplants Involving Organs Removed for Donors' Therapy 移植因治療捐贈人而切除的器官的聲明書

(To be completed and submitted **within 30 days** after the transplant by the registered medical practitioner who transplants an organ which was removed for the therapy of the donor)
(由移植因治療捐贈人而切除的器官的註冊醫生填寫，並須於器官移植後的 **30 天內** 遞交)

I. Particulars of the Recipient 器官受贈人的個人詳情

Full name 全名：_____

*HK Identity Card No. 香港身分證號碼 / HK Birth Certificate No. 香港出生證明書號碼 / Passport No. (please specify the place of issue) 護照號碼 (請指明發出地點) / Other identity document No. (please specify the type of document and place of issue) 其他身分證明文件號碼 (請指明文件類別及發出地點)：_____

Age 年齡：_____

Sex 性別：*M 男 / F 女

II. Particulars of the Organ(s) 器官的詳細資料

Full name of the Donor 器官捐贈人的全名：_____

*HK Identity Card No. 香港身分證號碼 / HK Birth Certificate No. 香港出生證明書號碼 / Passport No. (please specify the place of issue) 護照號碼 (請指明發出地點) / Other identity document No. (please specify the type of document and place of issue) 其他身分證明文件號碼 (請指明文件類別及發出地點)：_____

Description of the organ(s) transplanted 移植的器官的說明：_____

Date of the transplant 移植的日期：_____ / _____ / _____
Day 日 Month 月 Year 年

Name of the hospital/clinic/institution where the transplant of the organ(s) took place 進行移植器官的醫院／診所／機構的名稱：_____
(Also state the address if the transplant of the organ(s) took place in a clinic/an institution 如於診所／機構進行器官移植，亦請述明其地址)

III. Declaration 聲明

I am the registered medical practitioner who transplanted the organ(s) into the recipient. The organ(s) was/were removed for the therapy of the donor and not for transplant into any specific recipient at the time of removal. I hereby declare that –
本人是把器官移植於器官受贈人的註冊醫生。該器官是為了治療捐贈人而並非為了移植於任何特定的受贈人體內而被切除的。本人現聲明 –

- (1) I have checked the following documents before carrying out the transplant 本人在進行這項移植前已查核以下文件 –
- (a) a certificate issued by the registered medical practitioner who removed the organ(s) from the donor, certifying that the organ(s) was/were removed for the therapy of the donor and not for transplant into any specific recipient; and
將有關器官自其捐贈人身上切除的註冊醫生發出一份證明書，證明該器官是為了治療該捐贈人而並非為了移植於任何特定的受贈人體內而被切除的；及
 - (b) a declaration made by that practitioner in writing to the effect that to the best of his knowledge and belief, no payment prohibited by the Human Organ Transplant Ordinance has been made or is intended to be made.
該醫生作出的一份書面聲明，表示盡他所知所信，無人曾作出或擬作出本《條例》禁止的付款。
- (2) I am satisfied that at the time of removal, the organ(s) was/were removed for the therapy of the donor and not for transplant into any specific recipient; and
本人信納有關器官於自其捐贈人身上切除時，是為了治療該捐贈人而並非為了移植於任何特定的受贈人體內而被切除的；及
- (3) to the best of my knowledge and belief, no payment prohibited by the Human Organ Transplant Ordinance has been made or is intended to be made.
盡本人所知所信，無人曾作出或擬作出本《條例》禁止的付款。

Dr.
醫生

(Full name in BLOCK letters, Surname first 請用正楷書寫全名，先寫姓氏)

*HK Identity Card No. 香港身分證號碼 / Passport No. (please specify the place of issue) 護照號碼 (請指明發出地點) / Other identity document No. (please specify the type of document and place of issue) 其他身分證明文件號碼 (請指明文件類別及發出地點)：_____

Telephone number 電話號碼：_____ Fax number 傳真號碼：_____

Hospital name/Name and address of Clinic or Institution 醫院名稱／診所或機構的名稱及地址：_____

Date 日期：_____ Signature 簽署：_____

* Delete whichever is inapplicable 刪去不適用者

☐ Please tick the box which is applicable and fill in the information as required 請在適用的空格內填上“✓”號及填寫所需的資料

Certificate for Import of Human Organs for Transplant
進口擬作移植用的人體器官的證明書

To
致：

 (the person who is to import the human organ(s) for transplant into a person in Hong Kong)
 (進口人體器官以在香港將該器官移植於人體內的人)

Description of the Organ(s)/Quantity

器官的說明／數量

Name of Airline or Carrier by which the organ(s) is/are sent

運送器官的航空公司／承運人的名稱

Date on which the organ(s) is/are sent (Hong Kong time)

運送器官的日期(香港時間)

(hereinafter referred to as "the organ(s)")
 (以下簡稱為“器官”)

This is to certify that –

本人在此證明 –

- (1) In obtaining the organ(s), all applicable laws of _____, the place outside Hong Kong where the organ(s) was/were removed from its/their donor, were complied with;
 該器官的取得已符合該器官自其捐贈人身上切除所在的香港以外的地方，即 _____ 的一切適用法律；
- (2) At the time the donor of the organ(s) was/were tested in the place outside Hong Kong where the organ(s) was/were removed from its/their donor, he was not shown to be infected with any disease that was known, at the time of the testing, to be transmissible to the recipient of the organ(s) through transplanting;
 當該器官的捐贈人在該器官自其捐贈人身上切除所在的香港以外的地方接受測試時，並無顯示他受任何在測試時已知是可透過器官移植而傳染該器官的受贈人的疾病所感染；
- (3) The organ(s) was/were removed in a hospital in which the government of the place outside Hong Kong where the organ(s) was/were removed from its/their donor has authorised organs to be removed for transplanting;
 切除該器官所在的醫院，是一所已獲該器官自其捐贈人身上切除所在的香港以外的地方的政府授權進行器官切除以作移植用途的醫院；
- (4) No person in the place outside Hong Kong where the organ(s) was/were removed from its/their donor made or received a payment for supplying the organ(s); and
 在該器官自其捐贈人身上切除所在的香港以外的地方，並無任何人曾為該器官的提供而作出或接受付款；及
- (5) Information on the donor is provided below 提供以下器官捐贈人的資料 -
 - (a) Name 姓名 _____
 - (b) Age 年齡 _____
 - (c) Sex 性別 _____
 - (d) Date of removal of organ(s) 切除器官日期 _____
 - (e) Where the donor is deceased 若器官捐贈人已去世 -
 - (i) Time and date of death 死亡時間及日期 _____
 - (ii) Cause of death (if known) 死亡原因(如知道的話) _____

[Chop of the institute/hospital providing the organ]
 [提供器官的機構／醫院的印章]

Signature 簽署：_____

Name 姓名：_____

Title 職銜：_____

Date 日期：_____

Note 註:

- (1) This certificate must be signed by -
此證明書必須由以下人士簽署 -
- (a) The medical practitioner who removed the organ(s) in the country of origin (A copy of the medical practitioner's registration and annual practicing certificate issued by the medical licensing authority in the organ's country of origin should be enclosed with this certificate);
在器官來源國切除該器官的醫生(須夾附由器官來源國負責醫生發牌的機構發給該醫生的註冊及執業證書的副本一份);
or 或
 - (b) The medical director/ president/ executive director/ medical consultant of the institute/hospital which provided the organ(s) (A copy of the concerned person's appointment letter or other proof of his position as medical director of the institute/hospital should be enclosed with this certificate).
提供該器官的機構／醫院的醫務總監／總裁／行政總監／醫療顧問(須夾附證明該人士職位的聘任信或其他證明的副本一份)。
or 或
 - (c) The designated individual/ licence holder of storage of tissue for Human Application Licence under the Human Tissue Act of English Law (A copy of the proof stating his identity in the licence should be enclosed with the certificate).
根據英國人體組織法所頒發的儲存人體組織作人體用途的執照的持牌人或指定人士 (須夾附證明該人士在牌照上的身分的證明文件副本一份)。
- (2) One certificate should be used for each donor but may include multiple organs obtained from the same donor.
每一名器官捐贈人不論捐贈多少個器官，只須附上一份證明書。

Submission of Certificate for Imported Organ for Transplant Purpose to the Human Organ Transplant Board

遞交進口擬作移植用的人體器官的證明書予人體器官移植委員會

(To be completed and submitted by the registered medical practitioner who is going to transplant an imported organ into a recipient **OR** a person who imports an organ into Hong Kong **BEFORE** transplanting the organ)
(由將進口器官移植於受贈人體內的註冊醫生或進口器官到香港的註冊醫生填寫並在移植該器官前遞交)

To : Human Organ Transplant Board (**the Board**)

致 : 人體器官移植委員會(**委員會**)

I am a registered medical practitioner who *is to transplant the imported organ(s) into a recipient in Hong Kong/ imports organ(s) into Hong Kong. In accordance with section 7(1)(c) of the Human Organ Transplant Ordinance (Cap. 465) (**the Ordinance**), I submit herewith *the original/ a copy of the certificate accompanying the imported organ(s), which is issued by _____ (name of the organization which supplies the organ(s)).

本人是一名*將會把進口的器官移植於受贈人體內的註冊醫生／進口器官到香港的註冊醫生。根據香港法例第 465 章《人體器官移植條例》(**條例**)第 7(1)(c)條，本人現提交該進口器官在輸入香港時附有的證明書的*正本／副本，該證明書是由 _____ (提供該器官的機構名稱) 所發出。

The certificate contains all the information required under section 7(2) of the Ordinance and section 4 of the Human Organ Transplant Regulation (Cap. 465A)(**the Regulation**), except that (please put a “✓” in the appropriate box)-

該證明書載有《條例》第 7(2)條及《人體器官移植規例》(第 465A 章)(**《規例》**)第 4 條規定的資料，除了(請在合適的方格填上 “✓”)-

- ☐ The certificate is not signed by a person who is acceptable to the Board as mentioned in paragraph 56 of the Administrative Guidelines;
證明書並非由一名在行政指引第 56 段內述明的可獲委員會接納的人士簽署；
- ☐ A statement that, in obtaining the organ, all applicable laws of the place outside Hong Kong where the organ was removed from its donor were complied with, is not available;
未能提供陳述，以述明在取得該器官時已符合器官切除所在的香港以外的地方的一切適用法律；
- ☐ A statement that, at the time the donor of the organ was tested in the place outside Hong Kong where the organ was removed from its donor, he was not shown to be infected with any disease that was known, at the time of the testing, to be transmissible to the recipient of the organ through transplant, is not available;
未能提供陳述，以述明當該器官的捐贈人在器官切除所在的香港以外的地方接受測試時，並無顯示他受任何在測試時已知是可透過器官移植而傳染該器官受贈人的疾病所感染；
- ☐ A statement that the organ was removed in a hospital in which the government of the place outside Hong Kong where the organ was removed from its donor has authorized organs to be removed for transplanting, is not available;
未能提供陳述，以述明切除該器官所在的醫院是一所已獲器官切除所在的香港以外的地方的政府授權進行器官切除以作移植用途的醫院；
- ☐ A statement that no person in the place outside Hong Kong where the organ was removed from its donor made or received a payment for supplying the organ, is not available;
未能提供陳述，以述明在該器官自其捐贈人身上切除所在的香港以外的地方，並無任何人曾為器官的提供而作出或接受付款；
- ☐ Type of organ and the quantity cannot be provided;
未能提供器官的種類及數量；
- ☐ Name, age and sex of the donor cannot be supplied (please see note);
未能提供器官捐贈人的姓名、年齡及性別(請參閱備註)；
- ☐ Date of removal of the organ cannot be provided;
未能提供切除器官的日期；
- ☐ The *time/date/cause of death of the donor cannot be provided (where the donor was deceased);
未能提供器官捐贈人的*死亡時間／日期／死因(如捐贈人已去世)；

☐ Name of airline or carrier by which the organ is to be sent is not available;
未能提供運送該器官的航空公司或承運人的名稱；

☐ Date on which the organ is to be sent is not available.
未能提供運送該器官的日期。

*As some of the required information under section 7(2) of the Ordinance cannot be provided, I am writing to seek the approval of the Board for waiving such requirement(s) under section 7(4) of the Ordinance. Justifications are as follows -

*由於未能按《條例》第 7(2)條規定提供其些所需資料，本人現根據《條例》第 7(4)條向委員會申請豁免該等規定，理由如下 -

*The transplant of the imported organ(s) will be conducted on _____ (date). / The imported organ will be stored up in _____ (place where the organ will be stored).

*進口器官將於 _____ (日期)移植於受贈人體內。／進口器官將貯存在 _____ (貯存器官的地方)。

Name of Registered Medical Practitioner 註冊醫生姓名

*HK Identity Card No. 香港身分證號碼/Passport No. (please specify the place of issue) 護照號碼（請指明發出地點）/Other identity document No. (please specify the type of document and place of issue) 其他身分證明文件號碼（請指明文件類別及發出地點）

Telephone number
電話號碼

Fax number
傳真號碼

Hospital name/Name and address of Clinic or Institution
醫院名稱/診所或機構的名稱及地址

Date
日期

Signature of Registered Medical Practitioner
註冊醫生簽署

* Delete whichever is inapplicable 刪去不適用者

Note 註:

If the personal information of the donor cannot be supplied, a statement from the organization supplying the organ(s) to the effect that the fact is due to privacy restrictions should be submitted.

如器官捐贈人的個人資料因私隱規限而未能提供，請提交一份由供應器官的機構所發出的陳述以述明原因。

Submission of the Original or Certified True Copy of the Certificate Accompanying Imported Organs after the Transplant of Imported Organs

在移植進口器官後遞交該進口器官附有的證明書的正本或核證真實副本

(to be completed by the registered medical practitioner who transplanted the imported organ(s) into a recipient in Hong Kong)
(由在香港把進口器官移植於受贈人體內的註冊醫生填寫)

Note for completion 填寫須知:

- (1) The duly completed form, together with the original or certified true copy of the Certificate accompanying the imported organ(s) (**the Certificate**), should be submitted to the Human Organ Transplant Board (**the Board**) **within 7 working days** after the transplant. A certified true copy must be certified by the registered medical practitioner who imported the organ to be a true copy of the Certificate.
本表格須連同該進口器官附有的證明書(證明書)的正本或核證真實副本，於器官移植後的 **7 個工作天內** 遞交予人體器官移植委員會(委員會)。核證真實副本必須是經輸入該器官的註冊醫生核證為證明書的真實副本的一份文本。
- (2) Fax copy or photocopy of the Certificate is not acceptable.
證明書的傳真版本或複印本，概不接受。
- (3) Submission of this form and the certified true copy of the Certificate is not required if the original of the Certificate has been supplied to the Board.
如證明書的正本已遞交予委員會，則註冊醫生無須再遞交此表格及證明書的核證真實副本。

Part I 第一部

(Please complete this part if the transplanting registered medical practitioner also imported the organ(s))
(如進行移植的註冊醫生同為輸入該器官的醫生，請填寫此部)

☐ I am the importing practitioner and I transplanted the imported organ(s) as referred to in the Certificate, namely, _____ [description of organ(s)] into a recipient in Hong Kong on _____ [date]. I confirm that a copy of the Certificate has first been supplied to the Board on _____ [date] before the transplant. In accordance with section 7(6) of the Human Organ Transplant Ordinance (Cap. 465), *the original/ a certified true copy of the Certificate is now supplied to the Board.

本人為器官的進口醫生，並已於 _____ [日期] 在香港將證明書內所述的進口的器官，即 _____ [器官的說明]，移植於受贈人體內。本人確認證明書的副本已於移植前，即 _____ [日期]，首次提供予委員會。根據香港法例第 465 章《人體器官移植條例》第 7(6)條規定，本人現提供該證明書的*正本／核證真實副本予委員會。

Name of Registered Medical Practitioner 註冊醫生姓名 *HK Identity Card No. 香港身分證號碼/Passport No. (please specify the place of issue) 護照號碼 (請指明發出地點) /Other identity document No. (please specify the type of document and place of issue) 其他身分證明文件號碼 (請指明文件類別及發出地點)

Telephone number 電話號碼

Fax number 傳真號碼

Hospital name/Name and address of Clinic or Institution

醫院名稱／診所或機構的名稱及地址

Date 日期

Signature of Registered Medical Practitioner 註冊醫生簽署

Part II 第二部

(Please complete this part if the transplanting registered medical practitioner did not import the organ(s))

(如進行移植的註冊醫生並非安排輸入該器官的醫生，請填寫此部)

☐ I am the registered medical practitioner who transplanted the imported organ(s) as referred to in the Certificate, namely _____ [description of organ(s)] into a recipient in Hong Kong on _____ [date], but I am not the registered medical practitioner who imported the organ (**importing practitioner**). I confirm that a copy of the Certificate has first been supplied to the Board on _____ [date] before the transplant. In accordance with section 7(6) of the Human Organ Transplant Ordinance (Cap. 465) (**the Ordinance**), *the original/ a certified true copy of the Certificate is now supplied together with this declaration to the Board.

本人是在香港把在證明書內所述的進口的器官，即 _____ [器官的說明]，於 _____ [日期] 移植於受贈人體內的註冊醫生，但本人並非輸入該器官的註冊醫生(進口醫生)。本人確認證明書的副本已於器官移植前，即 _____ [日期]，首次提供予委員會。根據香港法例第 465 章《人體器官移植條例》(條例)第 7(6)條規定，本人現連同本表格一併提供該證明書的*正本/核證真實副本予委員會。

[If a certified true copy of the Certificate is supplied, please also complete the following part] –
[若所提供的是證明書的核證真實副本，請同時填寫下部] —

☐ I hereby declare, in accordance with section 7(8) of the Ordinance, that to the best of my knowledge and belief, the certified true copy of the Certificate was certified by the importing practitioner namely _____ [name of importing practitioner] of that/those organ(s).

本人現謹遵《條例》第 7(8)條聲明，盡本人所知所信，證明書的核證真實副本是經該器官的進口醫生 _____ [進口醫生姓名] 核證的。

Name of Registered Medical Practitioner	註冊醫生姓名	*HK Identity Card No. 香港身分證號碼/Passport No. (please specify the place of issue) 護照號碼 (請指明發出地點) /Other identity document No. (please specify the type of document and place of issue)其他身分證明文件號碼 (請指明文件類別及發出地點)
---	--------	--

Telephone number 電話號碼

Fax number 傳真號碼

Hospital name/Name and address of Clinic or Institution

醫院名稱/診所或機構的名稱及地址

Date 日期

Signature of Registered Medical Practitioner 註冊醫生簽署

* Delete whichever is inapplicable 刪去不適用者

☐ Please tick the box which is applicable and fill in the information as required 請在適用的空格內填上“√”號及填寫所需的資料

Form 1
表格 1

HUMAN ORGAN TRANSPLANT ORDINANCE (CHAPTER 465)

《人體器官移植條例》(第 465 章)

HUMAN ORGAN TRANSPLANT REGULATION

《人體器官移植規例》

INFORMATION ON REMOVAL OF ORGAN(S) FOR TRANSPLANT INTO ANOTHER PERSON**關於為移植於另一人體內而切除器官的資料**

I. Particulars of the Donor 器官捐贈人的個人詳情	Serial Number 編號： (for internal use 供內部使用)
Full name 全名：_____ <div style="text-align: center; font-size: small;">(in BLOCK letters, Surname first 請用正楷，先寫姓氏)</div>	
*HK Identity Card No. ^(Note 5) 香港身分證號碼 / HK Birth Certificate No. 香港出生證明書號碼 / Passport No. ^(please specify the place of issue) 護照號碼 (請指明發出地點) / Other identity document No. ^(please specify the type of document and place of issue) ^(Note 6) 其他身分證明文件號碼 (請指明文件類別及發出地點) ^(註 6) : _____	
Age 年齡：_____	
Sex 性別： *M 男 / F 女	
(a) <input type="checkbox"/> The donor was LIVING at the time of the removal of the organ(s) - 在器官切除時，器官捐贈人是 在生 的 — <div style="margin-left: 20px;"> (i) <input type="checkbox"/> The donor and the recipient are genetically related. They are _____ ^(please state the genetic relationship) and a copy of proof is enclosed. I am satisfied that - *all the requirements in section 5D of the Human Organ Transplant Ordinance have been complied with. [OR] *all the requirements in section 5D of the Human Organ Transplant Ordinance have been complied with except that the requirement in section 5D(1)(d) has been waived in accordance with section 5E of that Ordinance. 器官捐贈人與器官受贈人有血親關係。他們 _____ ^(請述明該血親關係)，現附上一份證明。本人信納 - *《人體器官移植條例》第 5D 條的所有規定已獲遵從。[或] *除《人體器官移植條例》第 5D(1)(d) 條的規定已按照該《條例》第 5E 條獲免除外，該《條例》第 5D 條的所有規定已獲遵從。 <div style="text-align: center; font-size: small;">器</div> </div> (ii) <input type="checkbox"/> The donor and the recipient are a married couple. Their marriage has subsisted for not less than 3 years and a copy of proof is enclosed. I am satisfied that - *all the requirements in section 5D of the Human Organ Transplant Ordinance have been complied with. [OR] *all the requirements in section 5D of the Human Organ Transplant Ordinance have been complied with except that the requirement in section 5D(1)(d) has been waived in accordance with section 5E of that Ordinance. 器官捐贈人與器官受贈人是一對已婚夫婦。他們的婚姻已持續不少於 3 年，現附上一份證明。本人信納 - *《人體器官移植條例》第 5D 條的所有規定已獲遵從。[或] *除《人體器官移植條例》第 5D(1)(d) 條的規定已按照該《條例》第 5E 條獲免除外，該《條例》第 5D 條的所有規定已獲遵從。 <div style="text-align: center; font-size: small;">器</div>	

IV. ☐ **Organ(s) removed but not transplanted 器官已切除但沒有進行移植**

The organ(s) was/were removed but **no transplant** subsequently took place within 30 days after the removal because:

器官雖已切除，但**沒有**在切除後 30 天內**移植**，因為：

(please tick as appropriate 請於適當方格內加上 ‘✓’ 號)

(a) ☐ The organ(s), after removal, was/were considered to be unusable -

該/該等器官在切除後，被認為不能使用－

Description of unusable organ(s) 該/該等不能使用的器官的說明：

(Complete ONLY if more than one organ has been removed as stated in Part II 只在第 II 部述明多於一個器官已被切除時始須填寫)

Reason(s) why the organ(s) was/were unusable 該/該等器官不能使用的理由：

Manner of disposal of the organ(s) 處置該/該等器官的方式：

Date of disposal 處置日期： _____ / _____ / _____
Day 日 Month 月 Year 年

(b) ☐ # The organ(s) removed is/are being kept in 該/該等被切除的器官現存放於：

(i) ☐ The hospital/clinic/institution stated in Part II above 在本表格第 II 部述明的醫院/診所/機構

(ii) ☐ Other institution 其他機構 (please specify name and address 請指明名稱及地址)：

V. ☐ **Extension of Deadline 延長期限**

A request for extending the deadline for submission of the Form has been made and approval has been given by the Human Organ Transplant Board.

已提出延長呈交本表格的期限的請求，並獲人體器官移植委員會批准。

(Please state the File Reference and date of the approval for the extension 請述明批准延長期限的文件檔案編號及批准日期)：

VI. **Submitted under section 6 of the Human Organ Transplant Ordinance by -**
由以下人士根據《人體器官移植條例》第 6 條呈交 -

Dr.
醫生

(Full name in BLOCK letters, Surname first 請用正楷書寫全名，先寫姓氏)

*HK Identity Card No. (Note 5) 香港身分證號碼 (註 5) / Passport No. (please specify the place of issue)
護照號碼 (請指明發出地點) / Other identity document No. (please specify the type of document and
place of issue) (Note 6) 其他身分證明文件號碼 (請指明文件類別及發出地點) (註 6)：

Telephone No. 電話號碼： _____

Fax No. 傳真號碼： _____

Name of hospital/clinic/institution 醫院/診所/機構名稱： (Also state the address in the case of a clinic or institution) (如屬診所或機構，亦請述明其地址)

Date 日期： _____ Signature 簽署： _____

* Please delete whichever is inappropriate. 請將不適用者刪去。

☐ Please tick if applicable and fill in the information as required. 適用的話請加上 ‘✓’ 號，並填寫所需資料。

In future, when the stored organ(s) is/are used for transplant, Form 2 must be submitted by the person who transplants it/them into the recipient. If the organ(s) is/are subsequently found unsuitable for transplant, the person who makes the decision to dispose of the organ(s) must submit Form 3 to the Human Organ Transplant Board within 30 days after the disposal of the organ(s).

當貯存的器官日後用於移植時，將該/該等器官移植於器官受贈人體內的人須呈交表格 2。如該/該等器官後來被發現不適合移植，決定處置該/該等器官的人須於處置該/該等器官後 30 天內，向人體器官移植委員會呈交表格 3。

Notes 註：

1. This form must be completed for organ(s) removed in Hong Kong for transplant into another person -

- (a) by the medical practitioner who removed the organ(s);
- (b) if a technician appointed by an organ bank removed the organ(s) from a dead donor, by a medical practitioner authorized by the organ bank; or
- (c) if the Human Organ Transplant Board (referred to in these Notes as **the Board**) gave approval under section 5C of the Human Organ Transplant Ordinance (Cap.465) for the organ(s) to be removed and the organ(s) is/are subsequently not removed, by the person who referred the proposed operation to the Board for its approval or, if that person is no longer involved, by the person who made the decision not to remove the organ(s).

If more than one medical practitioner was involved in removing the organ(s), any one of them can complete this form. However, the medical practitioner who was in charge of the operation or the medical practitioner who is in charge of the organ bank is responsible for ensuring that this form is submitted.

凡有關器官是在香港切除以移植於另一人體內，本表格須由以下人士填寫－

- (a) 切除該/該等器官的醫生；
- (b) (如該/該等器官是由器官貯存庫委任的技術員從去世的器官捐贈人身上切除的) 獲器官貯存庫授權的醫生；或
- (c) (如人體器官移植委員會(下稱委員會)已根據《人體器官移植條例》(第 465 章)第 5C 條批准切除器官，但後來並沒有切除) 將建議的手術提交委員會以取得其批准的人，但如該人已不再牽涉其中，則由決定不切除該/該等器官的人填寫。

如該/該等器官的切除涉及多於一名醫生，則其中任何一名醫生均可填寫本表格。然而，當時負責有關手術的醫生或現時掌管該器官貯存庫的醫生有責任確保本表格獲呈交。

2. One form may only contain information relating to one donor.

一份表格只可載有關於一名器官捐贈人的資料。

3. (a) If an organ and its associated appendage tissues are removed together as a functional unit (for example, liver and its blood vessels and connective tissues) -

- (i) if the appendage tissues are, at the time of removal, intended to be used for transplant separately from the organ, information on both the organ and the appendage tissues is required for the purpose of this form;
- (ii) in any other case, it is sufficient for the purpose of this form to provide information on the organ, even without providing information on the appendage tissues.

(b) However, if appendage tissues associated with an organ are removed without the organ itself being removed, this form must be completed for the appendage tissues.

- (a) 如器官連同與其相連的附着組織作為一個功能單位 (例如肝臟及其血管和連着的組織) 而一併切除 -
 - (i) 如在切除時，該附着組織擬與該器官分開移植，則須在本表格填寫該器官以及該附着組織的資料；
 - (ii) 在任何其他情況下，即使在本表格中沒有提供該附着組織的資料而只提供該器官的資料，已屬足夠。
- (b) 然而，如與器官相連的附着組織被切除，而該器官並沒有切除，則須就該附着組織填寫本表格。

4. Unless the Board has given approval for extension of the submission deadline, this form must be submitted - (a) within 30 days after the removal; or (b) (if the Board gave approval for the organ(s) to be removed and the organ(s) is/are subsequently not removed) within 30 days after the date on which the Board gave the approval for the removal.

除非委員會已批准延長呈交表格的期限，否則本表格須於 - (a) 器官切除後 30 天內呈交；或 (b) (如委員會已批准切除該/該等器官，但後來並沒有切除) 委員會發出切除批准的日期後 30 天內呈交。

5. If the person concerned is the holder of a Hong Kong Identity Card, his or her Hong Kong Identity Card number must be provided in this form.

如涉及的人是香港身分證的持有人，則須在本表格提供其香港身分證號碼。

6. If the person concerned is not the holder of any of the identity documents listed in this form, please specify the identity document that has enabled the person to be granted permission to enter Hong Kong.

如涉及的人並非本表格所列的任何一種身分證明文件的持有人，請指明該人賴以獲准進入香港的身分證明文件。

(Rev. 9/2010)

HUMAN ORGAN TRANSPLANT ORDINANCE (CHAPTER 465)

《人體器官移植條例》(第 465 章)

HUMAN ORGAN TRANSPLANT REGULATION

《人體器官移植規例》

INFORMATION ON TRANSPLANT OF ORGAN(S)**關於器官移植的資料****I. Particulars of the Recipient 器官受贈人的個人詳情**

Full name 全名：_____

(in BLOCK letters, Surname first 請用正楷，先寫姓氏)

*HK Identity Card No. (Note 5) 香港身分證號碼^(註5) / HK Birth Certificate No. 香港出生證明書號碼 / Passport No. (please specify the place of issue) 護照號碼 (請指明發出地點) / Other identity document No. (please specify the type of document and place of issue) (Note 6) 其他身分證明文件號碼 (請指明文件類別及發出地點)^(註6)：

Age 年齡：_____

Sex 性別：*M 男 / F 女

Serial Number 編號：

(for internal use 供內部使用)

II. Particulars of the Organ(s) 器官的詳情☐ The organ(s) is/are removed in Hong Kong from a donor 器官是在香港從器官捐贈人身上切除的 —

Full name of the Donor 器官捐贈人的全名：_____

(in BLOCK letters, Surname first 請用正楷，先寫姓氏)

*HK Identity Card No. (Note 5) 香港身分證號碼^(註5) / HK Birth Certificate No. 香港出生證明書號碼 / Passport No. (please specify the place of issue) 護照號碼 (請指明發出地點) / Other identity document No. (please specify the type of document and place of issue) (Note 6) 其他身分證明文件號碼 (請指明文件類別及發出地點)^(註6)：☐ The organ(s) is/are imported 器官是進口的一

Before the transplant took place, *the original/a copy of the certificate accompanying the organ(s) was supplied to the Human Organ Transplant Board under section 7 of the Ordinance on 在進行移植前，已根據本《條例》第 7 條向人體器官移植委員會於以下日期提供隨該/該等器官附上的證明書的*正本/副本：

_____/_____/_____
Day 日 Month 月 Year 年

Description of the organ(s) transplanted 移植的器官的說明：_____

Date of the transplant 移植日期：_____/_____/_____
Day 日 Month 月 Year 年Name of the hospital/clinic/institution where the transplant took place 進行移植該/該等器官所在的醫院/診所/機構的名稱：
(Also state the address if the transplant took place in a clinic or institution 如在診所或機構進行該/該等器官移植，亦請述明其地址)**III. Further Particulars – required in the case of Organ(s) removed in Hong Kong only****進一步的詳情 – 器官在香港切除才需填寫**(a) ☐ The donor was **LIVING** at the time of the removal of the organ(s) —在器官切除時，器官捐贈人是**在生**的 —(i) ☐ The donor and the recipient are genetically related. They are _____ (please state the genetic relationship) and -*a copy of the proof has been enclosed with Form 1 submitted to the Human Organ Transplant Board on ____/____/_____
Day 日 Month 月 Year 年

in respect of the removal of the organ(s). [OR] *a copy of the proof is enclosed.

AND I am satisfied that – *all the requirements in section 5D of the Human Organ Transplant Ordinance have been complied with. [OR]

*all the requirements in section 5D of the Human Organ Transplant Ordinance have been complied with except that the requirement in section 5D(1)(d) has been waived in accordance with section 5E of that Ordinance (copies of the certificates and medical report referred to in section 5E(1)(a), (b) and (c) are enclosed).

器官捐贈人與器官受贈人有血親關係。他們是 _____ (請述明該血親關係) – *而一份證明已隨

於 ____/____/_____
日 月 年 就該/該等器官的切除呈交人體器官移植委員會的表格 1 附上。[或] *現附上一份證明。

而且本人信納 – *《人體器官移植條例》第 5D 條的所有規定已獲遵從。[或]

*除《人體器官移植條例》第 5D(1)(d)條的規定已按照該《條例》第 5E 條獲免除外，該《條例》第 5D 條的所有規定已獲遵從 (現附上第 5E(1)(a)、(b)及(c)條提述的證明書及醫療報告文本)。

(ii) ☐ The donor and the recipient are a married couple. Their marriage has subsisted for not less than 3 years and - *a copy of the proof has been enclosed withForm 1 submitted to the Human Organ Transplant Board on ____/____/_____
Day 日 Month 月 Year 年 in respect of the removal of the organ(s). [OR]

*a copy of the proof is enclosed.

AND I am satisfied that – *all the requirements in section 5D of the Human Organ Transplant Ordinance have been complied with. [OR]

*all the requirements in section 5D of the Human Organ Transplant Ordinance have been complied with except that the requirement in section 5D(1)(d) has been waived in accordance with section 5E of that Ordinance (copies of the certificates and medical report referred to in section 5E(1)(a), (b) and (c) are enclosed).

器官捐贈人及器官受贈人是一對已婚夫婦。他們的婚姻已持續不少於 3 年 – *而一份證明已隨於 ____/____/_____
日 月 年

就該/該等器官的切除呈交人體器官移植委員會的表格 1 附上。[或] *現附上一份證明。

而且本人信納 – *《人體器官移植條例》第 5D 條的所有規定已獲遵從。[或]

*除《人體器官移植條例》第 5D(1)(d)條的規定已按照該《條例》第 5E 條獲免除外，該《條例》第 5D 條的所有規定已獲遵從 (現附上第 5E(1)(a)、(b)及(c)條提述的證明書及醫療報告文本)。

- (iii) ☐ The donor and the recipient are neither genetically related nor a married couple whose marriage has subsisted for not less than 3 years. Approval has been given by the Human Organ Transplant Board for the removal and/or transplant through File Reference _____ dated _____
器官捐贈人及器官受贈人既非有血親關係，亦非一對婚姻已持續不少於 3 年的已婚夫婦。人體器官移植委員會已透過文件檔案編號 _____ (日期為 _____) 批准該項切除及／或移植。
- (iv) ☐ The organ(s) was／were removed for the therapy of the donor at the time of the removal.
該／該等器官於切除時，是為了治療器官捐贈人而被切除的。
- (b) ☐ The donor was **DEAD** at the time of the removal of the organ(s).
在器官切除時，器官捐贈人已去世。

IV. Extension of Deadline 延長期限

A request for extending the deadline for submission of the Form has been made and approval has been given by the Human Organ Transplant Board.
已提出延長呈交本表格的期限的請求，並獲人體器官移植委員會批准。

(Please state the File Reference and date of the approval for the extension 請述明批准延長期限的文件檔案編號及批准日期) :

V. Submitted under section 6 of the Human Organ Transplant Ordinance by -

由以下人士根據《人體器官移植條例》第6條呈交 —

Dr. _____
 醫生 _____
 (Full name in Block letters, Surname first 請用正楷書寫全名，先寫姓氏)

Telephone No. 電話號碼： Fax No. 傳真號碼：

Name of hospital/clinic/institution 醫院/診所/機構名稱: (Also state the address in the case of a clinic or institution) (如屬診所或機構, 亦請述明其地址):

Date 日期: _____ Signature 簽署: _____

* Please delete whichever is inapplicable. 請將不適用者刪去。

☐ Please tick if applicable and fill in the information as required. 適用的話請加上「✓」號，並填寫所需資料。

Notes 註:

1. This form must be completed by the medical practitioner who transplanted the organ(s) into the recipient in Hong Kong. If more than one medical practitioner was involved in transplanting the organ(s), any one of them can complete this form. However, the medical practitioner who was in charge of the operation is responsible for ensuring that this form is submitted.
本表格須由在香港將器官移植於器官受贈人體內的醫生填寫。如該／該等器官的移植涉及多於一名醫生，則其中任何一名醫生均可填寫本表格。然而，負責有關手術的醫生有責任確保本表格獲呈交。
2. One form may only contain information relating to organ(s) received by one recipient from one donor in one operation.
一份表格只可載有關於一名器官受贈人在一次手術中自一名器官捐贈人所得的器官的資料。
3. (a) If an organ and its associated appendage tissues are transplanted together as a functional unit (for example, liver and its blood vessels and connective tissues), it is sufficient for the purpose of this form to provide information on the organ, even without providing information on the appendage tissues.
(b) However, if appendage tissues associated with an organ of a donor are used for transplant into the recipient without the organ of the same donor being transplanted into the recipient as well, this form must be completed and submitted in respect of the appendage tissues, regardless of whether Form 1 is completed and submitted in respect of the appendage tissues.
(a) 如器官連同與其相連的附着組織作為一個功能單位（例如肝臟及其血管和連著的組織）而一併移植，即使在本表格中沒有提供該附着組織的資料而只提供該器官的資料，已屬足夠。
(b) 然而，如與器官捐贈人的器官相連的附着組織並非與同一捐贈人的該器官一供移植入器官受贈人體內，則不論是否已就該附着組織填寫及呈交表格 1，仍須就該附着組織填寫及呈交本表格。
4. Unless the Human Organ Transplant Board has given approval for extension of the submission deadline, this form must be submitted within 30 days after the transplant.
除非人體器官移植委員會已批准延長呈交表格的期限，否則本表格須於器官移植後 30 天內呈交。
5. If the person concerned is the holder of a Hong Kong Identity Card, his or her Hong Kong Identity Card number must be provided in this form.
如涉及的人是香港身分證的持有人，則須在本表格提供其香港身分證號碼。
6. If the person concerned is not the holder of any of the identity documents listed in this form, please specify the identity document that has enabled the person to be granted permission to enter Hong Kong.
如涉及的人並非本表格所列的任何一種身分證明文件的持有人，請指明該人賴以獲准進入香港的身分證明文件。

Form 3
表格 3

[s.3(1)]
[第 3(1)條]

HUMAN ORGAN TRANSPLANT ORDINANCE (CHAPTER 465)
《人體器官移植條例》(第 465 章)
HUMAN ORGAN TRANSPLANT REGULATION
《人體器官移植規例》

INFORMATION ON FINAL DISPOSAL OF ORGAN(S) REMOVED / IMPORTED
關於切除／進口的器官的最終處置的資料

I. Particulars of the Donor 器官捐贈人的詳情	Serial Number 編號: (for internal use 供內部使用)
For organ(s) removed in Hong Kong only 器官是在香港切除的才需填寫	
(i) Full name 全名: _____ (in BLOCK letters, Surname first 請用正楷, 先寫姓氏)	
(ii) *HK Identity Card No. (Note 5) 香港身分證號碼 ^(註 5) / HK Birth Certificate No. 香港出生證明書號碼 / Passport No. (please specify the place of issue) 護照號碼 (請指明發出地點) / Other identity document No. (please specify the type of document and place of issue) (Note 6) 其他身分證明文件號碼 (請指明文件類別及發出地點) ^(註 6) :	
For imported organ(s) only 器官是進口的才需填寫	
(i) Name of donor in full 器官捐贈人的全名: _____ (in BLOCK letters, Surname first 請用正楷, 先寫姓氏)	
(ii) Name of airline or carrier 航空公司或承運人的名稱: _____	
(iii) Date of shipment 付運日期: _____ / _____ / _____ Day 日 Month 月 Year 年	
II. Disposal of Organ(s) 器官的處置	
(i) Description of the organ(s) 器官的說明: _____	
(ii) Reason(s) why the organ(s) was / were considered unusable 認為該／該等器官不能使用的理由: _____	
(iii) Manner of disposal of the organ(s) 處置該／該等器官的方式: _____	
(iv) Date of disposal 處置日期: _____ / _____ / _____ Day 日 Month 月 Year 年	
III. Submitted under section 6 of the Human Organ Transplant Ordinance by - 由以下人士根據《人體器官移植條例》第 6 條呈交 -	
*Dr. / Mr. / Ms *醫生 / 先生 / 女士	*HK Identity Card No. (Note 5) 香港身分證號碼 ^(註 5) / Passport No. (please specify the place of issue) 護照號碼 (請指明發出地點) / Other identity document No. (please specify the type of document and place of issue) (Note 6) 其他身分證明文件號碼 (請指明文件類別及發出地點) ^(註 6) :
(Full name in BLOCK letters, Surname first 請用正楷書寫全名, 先寫姓氏)	
Telephone No. 電話號碼: _____	Fax No. 傳真號碼: _____
Name of hospital / clinic / institution 醫院 / 診所 / 機構名稱: (Also state the address in the case of a clinic or institution) (如屬診所或機構, 亦請述明其地址)	
Date 日期: _____	Signature 簽署: _____

* Please delete whichever is inappropriate. 請將不適用者刪去。

Notes 註:

- This form must be completed if organ(s) removed / imported for transplant into a person is / are disposed of. This form must be completed by the person who made the decision to dispose of the organ(s).
如處置被切除／進口以移植於某人體內的器官, 須填寫本表格。本表格須由決定處置該／該等器官的人填寫。
- One form may only contain information relating to one occasion of disposal of the organ(s) removed from one donor.
一份表格只可載有關於一次處置從一名器官捐贈人身上切除的器官的資料。
- (a) If an organ and its associated appendage tissues are removed together as a functional unit (for example, liver and its blood vessels and connective tissues), information on the disposal of the appendage tissues is required for the purpose of this form only if information on them was included in a Form 1 submitted to the Human Organ Transplant Board (referred to in these Notes as **the Board**).
(b) However, if appendage tissues associated with an organ are removed without the organ itself being removed, this form must be completed for the appendage tissues.
(a) 如器官連同與其相連的附着組織作為一個功能單位 (例如肝臟及其血管和連著的組織) 而一併切除, 則只有在已呈交人體器官移植委員會 (下稱**委員會**) 的表格 1 已載有關於該附着組織的資料的情況下, 本表格才須載有關於處置該附着組織的資料。
(b) 然而, 如與器官相連的附着組織被切除, 而該器官並沒有切除, 則須就該附着組織填寫本表格。
- Unless the Board has given approval for extension of the submission deadline, this form must be submitted within 30 days after the disposal.
除非委員會已批准延長呈交表格的期限, 否則本表格須於器官處置後 30 天內呈交。
- If the person concerned is the holder of a Hong Kong Identity Card, his or her Hong Kong Identity Card number must be provided in this form.
如涉及的人是香港身分證的持有人, 則須在本表格提供其香港身分證號碼。
- If the person concerned is not the holder of any of the identity documents listed in this form, please specify the identity document that has enabled the person to be granted permission to enter Hong Kong.
如涉及的人並非本表格所列的任何一種身分證明文件的持有人, 請指明該人賴以獲准進入香港的身分證明文件。

Personal Information Collection Statement 收集個人資料聲明

Purpose of Collection 收集目的

1. The provision of personal data is obligatory under the Human Organ Transplant Ordinance (Cap. 465). The personal data are provided by registered medical practitioners or other responsible persons to the Human Organ Transplant Board for the purpose of monitoring human organ transplants, that have been or which are proposed to be carried out, in accordance with the Human Organ Transplant Ordinance (Cap. 465).

根據《人體器官移植條例》(第 465 章)，個人資料的提供是強制性的。註冊醫生或其他負責人根據《人體器官移植條例》(第 465 章)向人體器官移植委員會所提供的個人資料，是用以監察已完成或將會進行的人體器官移植個案。

Classes of Transferees 承轉人的類別

2. The personal data provided are mainly for use by the Human Organ Transplant Board but they may also be disclosed to other Government bureaux/departments or relevant parties for the purpose mentioned in paragraph 1 above, if required. Apart from this, the data may only be disclosed to parties where the data subject has given consent to such disclosure or where such disclosure is allowed under the Personal Data (Privacy) Ordinance (Cap. 486).

凡向人體器官移植委員會提供的個人資料，主要是供該委員會之用，但若有需要時，亦可能就上文第 1 段所述的目的，向其他政府政策局／部門或有關人士披露。除此之外，該等資料只會在資料當事人的同意下，又或在《個人資料（私隱）條例》(第 486 章)所容許的情況下，才會向其他人士披露。

Data Access and Correction Rights 查閱資料及改正資料要求

3. An individual has a right of access and correction to his personal data under the Personal Data (Privacy) Ordinance (Cap. 486). This right of access includes the right to obtain a copy of the individual's personal data. A fee may be imposed for complying with a data access request.

根據《個人資料(私隱)條例》(第 486 章)的規定，個別人士有權查閱及修正其個人資料，包括有權取得其個人資料的副本。在應資料當事人要求而提供資料時，可能要徵收費用。

Enquiries 查詢

4. Enquiries concerning the personal data provided, including the making of access and corrections, should be addressed to –
有關個人資料的查詢(包括查閱及修正個人資料)，可聯絡：

The Secretary
Human Organ Transplant Board
17/F Wu Chung House
213 Queen's Road East
Wanchai, Hong Kong
Tel : 2961 8955
Fax : 2527 9849/ 2572 8739/ 2572 5864

香港灣仔皇后大道東 213 號
胡忠大廈 17 樓
人體器官移植委員會秘書
電話 : 2961 8955
傳真 : 2527 9849/ 2572 8739/ 2572 5864